

THE FEDERAL GOVERNMENT OF NIGERIA

**NATIONAL MULTI-SECTORAL PLAN OF ACTION FOR FOOD AND NUTRITION (NMPFAN)**

2021 - 2025

MinIstry of FINANCE, Budget and National Planning

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**THE FEDERAL GOVERNMENT OF NIGERIA**

**NATIONAL MULTI-SECTORAL PLAN OF ACTION FOR FOOD AND NUTRITION (NMPFAN)**

**2021 – 2025**

**To attain optimal nutritional status for all Nigerians with focus on the most vulnerable especially women and children as well as internally displaced persons**

**NOVEMBER, 2020**

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# ABBREVIATIONS AND ACRONYMS

CMAM Community-based Management of Acute Malnutrition

CPC Consumer Protection Council

CPI Consumer Price Index

CSOs Civil Society Organizations

CS-SUNN Civil Society Scaling-Up Nutrition in Nigeria

DRNCD Dietary Related Non-Communicable Diseases

ECCC Early- Child Care Centers

EIMS Education Information Management System

ERGP Economic Recovery and Growth Plan

F &N Food and Nutrition

FBDG Food Based Dietary Guidelines

FBOs Faith Based Organizations

FCT Federal Capital Territory

FEWS Food Security Early Warning System

FIIRO Federal Institute of Industrial Research, Oshodi

FMARD Federal Ministry of Agriculture and Rural Development

MFBNP Ministry of Finance, Budget and National Planning

FME Federal Ministry of Education'

FMEnv Federal Ministry of Environment

FMI Federal Ministry of Information

FMIC Federal Ministry of Information and Culture

FMITI Federal Ministry of Industry, Trade and Investment

FMoH Federal Ministry of Health

FMoLP Federal Ministry of Labour and Productivity

FMoWA Federal Ministry of Women Affairs

FMoWH Federal Ministry of Works and Housing

FMST Federal Ministry of Science and Technology

FMWR Federal Ministry of Water Resources

HDI Human Development Index

IDPs Internally Displaced Persons

IEC Information, Education and Communication

IITA International Institute of Tropical Agriculture

IYCF Infant and Young Child Feeding

LGAs Local Government Areas

LGCFN Local Government Committee on Food and Nutrition

LO-ORS Low Osmolarity Oral Rehydration Solution

M&E Monitoring and Evaluation

MAM Moderate Acute Malnutrition

MAN Manufacturers Association of Nigeria

MDAs Ministries Departments and Agencies

MDGs Millennium Development Goals

MEAL Evaluation, Accountability and Learning

MICS Multi Indicator Cluster Survey

MIYCF Maternal, Infant and Young Child Feeding

MNCHW Maternal Newborn and Child Health Week

MNDC Micronutrient Deficiency Control

MNP Micronutrient Powder

MOIA Ministry of Internal Affairs

MTEF-FSP Medium Term Expenditure Framework and Fiscal Strategy Paper

MWASD Ministry of Women Affairs and Social Development

MWH Ministry of Works and Housing

NABG Nigeria Agribusiness Group

NACCIMA Nigerian Association of Chambers of Commerce, Industry, Mines, and Agriculture

NAFDAC National Agency for Food and Drug Administration and Control

NASC National Agricultural Seeds Council

NFCNS National Food Consumption and Nutrition Survey

NBS National Bureau of Statistics

NCC Nigerian Communications Commission

NCFN National Committee on Food and Nutrition

NCN National Council on Nutrition

NDHS National Demographic and Health Survey

NEMA National Emergency Management Agency

NEPC Nigeria Export Promotion Council

NFNP National Food and Nutrition Policy

NFPs Nutrition Focal Persons

NGOs Non-governmental organizations

NHMIS National Health Management Information System (),

NHSPAN National Health Strategic Plan of Action for Nutrition

NIHORT National Horticultural Research Institute

NISPRI Nigerian Stored Products Research Institute

NMPFAN National Multi-sectoral Plan of Action for Nutrition

NNHS National Nutrition and Health Survey

NNN National Nutrition Network

NOA National Orientation Agency

NPHCDA National Primary Health Care Development Agency

NPopC National Population Commission

NPS Nigerian Prison Service/Nigerian Correctional Service

NSN Nutrition Society of Nigeria

NUC National Universities Commission

OICs Official-in-Charges

OPS Organised Private Sector

PHC Primary Health Care

PLWHA People Living With HIV/AIDS

RUTF Ready to Use Therapeutic Foods

SAM Severe Acute Malnutrition

SCFN State Committees on Food and Nutrition

SDG Sustainable Development Goals

SEMA State Emergency Management Agency

SMARD State Ministry of Agriculture and Rural Development

SME State Ministry of Education

SMEDA Small and Medium Enterprises Development Agency of Nigeria

SMEnv State Ministry of Environment

SMIC State Ministry of Information and Culture

SMOH State Ministry of Health

SMWASD State Ministry of Women affairs and Social Development

SON Standards Organisation of Nigeria

SPCHDA State Primary Health Care Development Agency

SPHCB State Primary Health Care Board

SUBEB State Universal Basic Education Board

SUN Scaling up Nutrition

TETFund Tertiary Education Trust Fund

UBEB Universal Basic Education Board

UBEC Universal Basic Education Commission

UN United Nations

UNICEF United Nations Children's Fund

VAD Vitamin A deficiency

VP Vice President

WASH Water, Sanitation and Hygiene

# FOREWORD

The Ministry of Finance, Budget and National Planning is the country’s coordinating institution for all developmental programs and plans including the issues of Food and Nutrition as well as houses the National Committee on Food and Nutrition. Malnutrition has been identified as a major constraint to development. The proportion of malnourished individuals and households that are food insecure has been on the increase in Nigeria. Children, adolescents, women and the elderly are the most affected.

The revised National Policy on Food and Nutrition and its approval by the Federal Executive Council (FEC) in 2016 was one of the landmark steps of this administration towards addressing the problem of malnutrition and food insecurity in Nigeria. Reduction of the malnutrition can be achieved through dynamic balance between policies, and planned actions to achieve policy objectives. This National Multi-Sectoral Plan of Action for Food and Nutrition (NMPFAN) sets out strategies and interventions for improving the nutritional status of all Nigerians with specific emphasis on the most vulnerable groups. The identified programmes articulated in the NMFPAN aligned with the revised National Policy on Food and Nutrition (NPFN). The NMPFAN was developed in line with the policy thrust of the present administration as enunciated in the Economic Recovery and Growth Plan (ERGP 2017 - 2020). It is also gratifying to note that the Successors, the Medium Term Development Plan MTNDP (2021 – 2025), MTNDP (2026 – 2030) and Nigeria Agenda (2050) is currently being developed with a very serious focus on nutrition issues. The NMPFAN is costed so as to make it very easy for government, partners and donors to invest in food and nutrition activities. The activities enumerated therein if implemented are expected to lay a solid foundation for improved productivity and development among the citizenry.

A very highly consultative process was adopted in the articulation of the NMPFAN. All stakeholders in food and nutrition sectors including representatives of government, Organised Private Sector, Civil Society, academia, local NGOs, Development Partners and international Donor Agencies participated in its development. The NMPFAN captured almost all the issues on food and nutrition in Nigeria and was endorsed by the National Committee on Food and Nutrition (NCFN) and the MFBNP.

A chapter of NMPFAN is dedicated to Monitoring, Evaluation, Accountability and Learning (MEAL) system. This will facilitate stakeholders and the public to track progress being made and to hold institutions accountable for those activities they committed to implementing.

For the NMPFAN to achieve stated objectives of reducing the scourge of malnutrition, there is need to build partnership among various stakeholders including the government ministries, departments and agencies, Organized Private Sector, Civil Society, Academia, Local NGOs, International Development Partners and Donors for whom this document will guide in their intervention efforts.

**Prince Clem Agba**

**Honourable Minister of State, Budget and National Planning**

# ACKNOWLEDGMENT

The development of the National Multi-Sectoral Plan of Action for Food and Nutrition 2021 – 2025 (NMPFAN) in Nigeria has benefited from the experience and immense contribution of members of the National Committee on Food Nutrition (NCFN), individuals, Organised Private Sector, academia, Development Partners and Donors.

Special thanks go to the representatives of the following Federal Ministries; Health (Food and Drugs Services Department and Nutrition Division); Women Affairs & Social Development; Industry, Trade & Investment; Finance; Education, Information & Culture; Science & Technology; Agriculture & Rural Development and Water Resources. Others are National Agency for Food and Drug Administration & Control (NAFDAC); National Bureau of Statistics; and National Primary Health Care Development Agency (NPHCDA); University of Ibadan University of Nigeria Nsukka, University of Calabar; Usman Danfodio University, Sokoto; Ahmadu Bello University; Zaria and Nutrition Society of Nigeria (NSN).

Let me also thank especially United Nations Children's Fund (UNICEF); Nutritional International (NI) and Global Alliance for Improved Nutrition in Nigeria (GAIN), Civil Society – Scale Up Nutrition (CS-SUNN) for their financial support which was critical to the success of the NMPFAN development processes and consultations. Also worthy of thanking is the committee of seven made up of Dr. B. Omotola, Mrs Beatrice Eluaka, Dr. Francis Aminu, Dr. Adeyinka Onabolu, Dr. Oluwaseun Ariyo Prof Kola Matthew Anigo and Mrs Chito Nelson.

My sincere thanks go to the Honourable Minister of Finance, Budget and National Planning Zainab Ahmed (Mrs), Honourable Minister of State, Budget and National Planning Prince Clem Agba for their support and guidance. Similarly, I wish to acknowledge the following; former Minister of Budget and National Planning Senator Udoma Udo Udoma, former Permanent Secretaries S. Odewale and Ernest A. Umakhihe, former Directors Kayode Obasa;, Mrs. Faliat Abdulraheem; and the Director, Social Development A. B. Sa’adu and the staff of Food and Nutrition Division, Department of Social Development, MFBNP for coordinating the entire process of the review of the NMPFAN.

**Mrs Olusola Idowu**

**Chairman National Committee Food and Nutrition**

**Permanent Secretary, MFBNP**

# MEMBERS OF THE NCFN

i.Minister - Federal Ministry of Health, Abuja

ii. Minister - Federal Ministry of Agriculture & Rural Development, Abuja

iii. Minister - Federal Ministry of Women Affairs, Abuja.

iv. Minister - Federal Ministry of Humanitarian Affairs, Disaster Management

and Social Development Abuja.

v. Minister - Federal-. Ministry of Industry, Trade and Investment Abuja

vi. Minister - Federal. Ministry of Finance, Abuja

vii. Minister - Federal Ministry of Education, Abuja

viii. Minister - Federal Fed. Min of Water Resources, Abuja

ix. Minister - Federal Ministry of Information and Culture, Abuja

x. Minister - Federal Ministry of Science & Technology, Abuja

xi. Statistician General - National Bureau of Statistics

xii. Director General - Standard Organization of Nigeria

xiii. Director General - NAFDAC, Abuja

xiv. Executive Director - NPHCDA, Abuja

xv. Head, Department of Human Nutrition and Dietetics, University of Ibadan

xvi. Head, Department of Biochemistry, Usmanu Danfodio University, Sokoto

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xviii. Head, Department of Food Science & Technology, University of Maiduguri

xix. Head, Department of Home Sciences and Nutrition, University of Nigeria,

Nsukka

xx. Head, Department of Biochemistry - Ahmadu Bello University, Zaria

xxi. President, - Nutrition Society of Nigeria

xxii. National Committee on Food and Nutrition (NCFN) Secretariat – Ministry of Budget & National Planning, Abuja

**Development Partners**

1. Action Against Hunger (AAH)
2. The Bill & Melinda Gates Foundation (BMGF)
3. The Civil Society Scaling-Up Nutrition in Nigeria (CS-SUNN)
4. The Department for International Development (DFID)
5. The European Union (EU)
6. Food and Agriculture Organization (FAO)
7. FHi 360
8. Nutrition International (NI)
9. Save the Children International (SCI)
10. United Nations International Children's Emergency Fund (UNICEF)
11. United States Agency for International Development (USAID)
12. World Bank

**Organized Private Sector**

i. Aliko Dangote Foundation

ii. Global Alliance for Improved Nutrition (GAIN)

iii. Scale Up Nutrition Business Network

# EXECUTIVE SUMMARY

Malnutrition has multifaceted causes and requires solutions that are multidisciplinary and multisectoral, cutting across various sectors. According to NDHS (2018) thirty-seven percent of children in Nigeria are stunted, and 19% are severely stunted and childhood mortality rates remain stagnated. Undernutrition in early childhood has serious consequences and contributes to high level of infant mortality. Nigeria has shown commitment to eradicating hunger and malnutrition among her citizens in order to lay a strong foundation for improved standard of living for citizens and socioeconomic development of the nation. The urgent need to scale up high impact and cost effective nutrition interventions to reduce the worsening nutrition situation in Nigeria as demonstrated by the Nigeria’s signing unto the Scaling up Nutrition (SUN) movement in 2011 which justifies the need for the reviewed policy on food and nutrition published in 2016 and the development of a multi-sectoral plan of action. The national food and nutrition policy provides the framework for addressing the problems of food and nutrition insecurity at all levels in Nigeria. This plan of action gives consideration to the increasing recognition of nutrition as a necessary condition for national development as espoused in the Millennium Development Goals and the post 2015 Sustainable Development Goals (SDG) and the Scaling Up Nutrition movement and activities.

In recognition of the multidisciplinary and multisectoral nature of nutrition, this National Multisectoral Strategic Plan of Action for Food and Nutrition (NMPFAN 2021 - 2025) was developed in line with the National Policy on Food and Nutrition with collaboration of government sectors, Development Partners, Academia, Civil Society Organizations and Organized Private Sector. The rationale for the development of the NMPFAN is to have a document that will serve as a tool to guide the implementation of interventions and programmes to address the problems of hunger and malnutrition across all sectors in Nigeria. The NMPFAN is an operational Plan designed to be implemented under six (6) result areas as contained in the national policy on food and nutrition. The plan seeks to address in a huge manner the entire scope of the malnutrition problem in the country through focus on infants, young children, and mothers, both women of reproductive age and adolescent girls who will become mothers in later years, treatment of severe childhood wasting through community-based management of acute malnutrition, addressing childhood stunting by focusing on improving women’s nutrition to reduce low birth size, improving household hygiene to reduce infections such as diarrhoea and promoting exclusive breastfeeding as well as appropriate complementary and child feeding practices.

The costing of the NMPFAN was done at the activity level taking into consideration all possible costs that will be required to implement an intervention or programme and this include the following:

* Cost matrix contain expected contributions to operationalize the plan by the government at all levels and other stakeholders (Development partners, Civil society and Organized private sector) involved in national response to the nutritional challenges in the country
* Plan targets to reduce the proportion of people who suffer malnutrition by 50%; increase exclusive breastfeeding rate to 65% and reduce stunting rate among under-five children to 18% by 2025
* Estimated total cost of implementing 18 nutrition specific and nutrition-sensitive interventions across the country is ₦294,745,586,859.76 for five years with an average annual investment at ₦58,949,117,372
* Most of the interventions are focused on prevention rather than cure through the two result areas that accounts for ₦261,584,511,580.45 (88.8%) of the total estimated cost (Enhancing caring capacity - ₦146,702,475,406.00 (49.8%) and strengthening the provision of quality health services - ₦114,882,036,174.45 (39%).
* Distribution of the estimated cost of the plan based on expected contribution by stakeholders indicate States/FCT/LGAs, ₦151,160,835,429.43 (51.3%), development partners, ₦86,435,546,489 (29.3%), federal government, ₦34,906,309,362 (11.8%) and organized private sector, ₦22,242,895,579 (7.5%)
* Federal Government component is ₦ 34,906,309,362 with an average annual investment cost estimated at ₦ 6,981,261,872. The total estimated cost required for each ministry/sector for the five year period are as follows: Federal Ministry of Health (₦14,588,327,635}; National Primary Health Care Development Agency (₦14,583,514,629); Federal Ministry of Agriculture & Rural Development (₦3,687,318,229); Ministry of Finance, Budget and National Planning (₦1,011,603,655.5); Federal Ministry of Women Affairs and Social Development (₦586,341,381); Federal Ministry of Information and Culture (₦464,330,231); Federal Ministry of Water Resources (₦342,291,047); National Emergency Management Agency (₦152,378,781); Federal Ministry of Science & Technology (₦121,563,283); National Agency for Food and Drug Administration and Control (₦121,056,923.72); Federal Ministry of Education (₦113,060,956); Federal Ministry of Industry, Trade and Investment (₦45,638,199); Federal Ministry of Works and Housing (₦1,375,000); Ministry of Internal Affairs (₦110,000); Standard Organization of Nigeria (₦2,200,000).

Financing the NMPFAN will require a concerted effort with MFBNP to advocate for support from government, donor partners, international and local non-governmental organizations (NGOs) and engagement of the private and business sectors for greater investment in nutrition programmes. M&E system will be established and domiciled in MFBNP with a robust food and nutrition information collection and management system to provide information on extent of progress being made towards achieving specified Strategic objectives and targets of the NMPFAN.

# INTRODUCTION

## National Context Policy Framework

Malnutrition is the impairment of health due to inadequate or imbalance of one or more nutrients. It has far-reaching consequences for human capital, economic productivity, and national development. Malnutrition has multifaceted causes and requires solutions that are multidisciplinary and multisectoral, cutting across various sectors including health, agriculture, science and technology, education, trade, economy, and industry. Although, many sectors usually develop their sector specific policies, however, the coordination of programmes and interventions emanating from the implementation of such policies has always been a challenge.

The national food and nutrition policy provides the framework for addressing the problems of food and nutrition insecurity at all levels in Nigeria. It serves as a guide for the identification, design and implementation of the intervention activities across the various sectors to ensure adequate nutrition and health of Nigerians. The recognition of the non-performance of the earlier policy and the first national plan of action developed in 2005 and other developments and concerns in the science, practice and programming of food and nutrition, led to review of both the policy and the plan of action. The process for the policy review started in 2013 and was concluded, printed and launched in 2016 while the review of the plan of action started in 2017 through a multi-stakeholder participation process.

This new plan of action give considerations to evidenced based nutrition specific and nutrition sensitive interventions and such emerging critical nutrition issues including nutrition in the first one thousand days of life, nutrition during emergencies and the emerging increase in the incidence and prevalence of diet-related non-communicable diseases. The plan of action also take into consideration the increasing recognition of nutrition as a necessary condition for national development as espoused in the Millennium Development Goals (MDGs) and the post 2015 Sustainable Development Goals (SDG) and the Scaling Up Nutrition movement and activities.

The urgent need to scale up high impact and cost effective nutrition interventions to reduce the worsening nutrition situation in Nigeria as demonstrated by the Nigeria’s signing unto the Scaling up Nutrition (SUN) movement in 2011 further justifies the need for the policy review and development of a multi-sectoral plan of action for food and nutrition. Since the launching of the economic recovery and growth plan (ERGP) of the Nigeria Government, the programme has recorded some modest achievements that have shown positive signals towards the attainment of the broader goal of the medium term economic and growth plan. According to the Nigerian Bureau of Statistics, NBS the economy of Nigeria grew in the fourth quarter of 2017 by 1.92%. In the previous quarter, i.e. third quarter of 2017, the Nigerian economy had grown by 1.4%, and this latest figure for the fourth quarter marks the third consecutive growth since emergence from recession in the second quarter of 2017. This growth is compared to a contraction of –1.73% recorded in Q4 2016 and a growth of 1.40% recorded in Q4 2017. Quarter on quarter, real GDP growth was 4.29%. The year 2017 recorded a real annual growth rate of 0.83% higher by 2.42% than –1.58% recorded in 2016 (Solomon and Fidelis, 2018). The economic recovery and growth plan (ERGP) of the Nigeria Government as well as the strong impetus and commitment to invest in nutrition provide a strong justification for the development of a comprehensive multisectoral plan of action that will form the foundation for human capital development that will drive the ERGP.

## Food and Nutrition Situation in Nigeria

Nigeria is the most populous nation in Africa with 2020 population estimated at 206,139,589 people at mid year according to UN data (NPC, 2020). With a high fertility rate of 5.38 children per woman, the population is growing at an annual rate of 2.6 percent, worsening overcrowded conditions. By 2050, Nigeria’s population is expected to grow to a staggering 440 million, which will make it the third most populous country in the world, after India and China (Population Reference Bureau, 2013). The country is blessed with abundant human and natural resources; however, it is listed among countries with low human development index (HDI) which for 2018 was 0.534, positioning it at 158 out of 189 countries and territories. Between 2005 and 2018, Nigeria's HDI value increased from 0.467 to 0.534, an increase of 14.4 percent.

It is particularly worrisome that the proportion of children that are either stunted, underweight or wasted currently are more than they were ten years ago giving the impression that the various interventions carried out seemed not to have resulted in improved nutritional status especially among the vulnerable and particularly the Under-five children.

According to NDHS (2018) thirty-seven percent of children in Nigeria are stunted, and 19% are severely stunted. Stunting generally increases with age, peaking at 47% among children age 24-35 months. A higher proportion of children in rural areas (46%) than urban areas (27%) are stunted. Similarly, children in the North West (60%) are more likely to be stunted than other children. Children of women with no education are more likely to be stunted than those whose mothers have been to school. Stunting is inversely related to wealth quintile; 58% of children in the lowest wealth quintile are stunted, as compared with 16% of children in the highest quintile.

Overall, 7% of children in Nigeria are wasted and 2% are severely wasted. Eight percent of children in rural areas are wasted, as compared with 5% in urban areas while 2% of children under age 5 are overweight (NDHS, 2018). The results also show that 23% of all children under age 5 are underweight and 8% are severely underweight. The proportion of children who are underweight is greater in rural areas (29%) than urban areas (16%). Children of women with no education are four times as likely to be underweight as children whose mothers have more than a secondary education. Underweight is inversely related to wealth; 41% of children in the lowest wealth quintile are underweight, as compared with 10% of children in the highest quintile.

Although, the various programmes and interventions carried out over the decade have been focused on proven high impact low cost interventions, the outcome has demonstrated the likelihood of a gap between programmes and projects implemented and the result we get. Hunger and malnutrition are still widespread in Nigeria and are more serious in scope and severity now than ever before. Poverty underlies malnutrition and 91% of Nigerians are reported to be living in poverty (i.e. live on less than $2 per day) while 69% are reported to be in extreme poverty (live on less than $1.25/day). The report also indicated regional variations with North West and North East having poverty rates of 77.7% and 76.3% respectively. It has been estimated that the percentage of Nigerian households that are food insecure had increased to over 70% as at 2003.

Poverty, inadequate investment in the social sector, inadequate dietary intake, and diseases has been identified as the major determinants of malnutrition in the country. In the recent past, the extent of malnutrition has increased as a result of economic hardships faced in the country, making it one of the important barriers to development. The situation was made worse by the Boko Haram insurgency in the Northern part of Nigeria leading to internal displacement of close to 2 million people who consequently become dependent on humanitarian assistance and living in IDP camps. Malnutrition occurs mainly in the form of undernutrition either of macro- and micronutrients or both, progressing to specific dietary deficiency diseases, and lifestyle and diet-related non-communicable disease. Eliminating the problem of malnutrition is complex since many issues that are involved need to be addressed.

The 2018 NDHS documents reported that childhood mortality rates have stagnated. After declining from 201 deaths per 1,000 live births during the 5 years immediately preceding the 2003 NDHS to 128 deaths per 1,000 live births in the 5 years prior to the 2013 NDHS, the overall under-5 mortality rate has increased slightly to 132 deaths per 1,000 live births in the most recent 5-year period. This is primarily due to the contribution of the child mortality (the probability of dying between the first and the fifth birthday). Infant mortality has decreased slightly, from 69 deaths per 1,000 live births in the 5 years prior to the 2013 NDHS to 67 deaths per 1,000 live births in the most recent 5-year period. Nigeria has much work to do to meet the SDG target of reducing the under-5 mortality rate.

It has been estimated that Nigeria loses in every single day about 23,000 children under five and 145 women of child bearing age which makes Nigeria ranks second to India in terms of countries contributing to the global burden of U-5 and maternal mortality rates in the World. Nigeria is also the country where nearly 20% of all global maternal deaths happen. Between 2005 and 2015, it is estimated that over 600 000 maternal deaths and no less than 900 000 maternal near-miss cases occurred in the country. In 2015, Nigeria’s estimated maternal mortality ratio was over 800 maternal deaths per 100 000 live births, with approximately 58 000 maternal deaths during that year. By comparison, the total number of maternal deaths in 2015 in the 46 most developed countries was 1700, resulting in a maternal mortality ratio of 12 maternal deaths per 100 000 live births. In fact, a Nigerian woman has a 1 in 22 lifetime risk of dying during pregnancy, childbirth or postpartum/post-abortion; whereas in the most developed countries, the lifetime risk is 1 in 4900. Malnutrition has been recognized as the underlying factor causing more than half of the death among under five children. In Nigeria, malnutrition manifests inform of protein-energy malnutrition, vitamin (A) and mineral (iron, iodine and zinc) deficiencies are widespread with women and children being worst affected. Available statistics has indicated that Nigeria has not made any significant progress in reduction of malnutrition among under-five children in the last one decade.

Dietary diversity has also been reported to be low with fruit and vegetable consumption being very low resulting in poor intake of micronutrient and consequently deficiencies of essential micronutrients. The National Food Consumption and Nutrition Survey (NFCNS, 2003) showed that national VAD prevalence among under five children stood at 23.2% (marginal) and 3.6% (clinical), meaning one out of every five children U5 are vitamin A deficient. It’s already demonstrated that if no effective action is taken to prevent and control vitamin A deficiency, over 80,000 Nigerian children will die annually as a result of vitamin A deficiency. Vitamin A deficiency (VAD) is known to contribute significantly to the burden of childhood diseases and premature death in children under-5 in developing countries. Vitamin A deficiency (VAD) alone contributes up to 25% to U5 mortality, and affects the overall survival, mental capacity and productivity of the child. The total prevalence of iron deficiency anaemia was 27.5% among of children under 5 while zinc and iodine deficiencies were 20% and 27.5% respectively among Under 5.

Inadequate food intake, poor child care practices and frequent infections are underlying causes of malnutrition among children. Poor infant and young child feeding practices are demonstrated by low rates of exclusive breastfeeding. Breastfeeding is not only an investment in improving children’s health and saving lives, but also an investment in human capital development that can benefit a country’s economy. Breastfeeding is one of the best investments in global health, it has been reported that every N1 invested in breastfeeding generates N35 in economic returns. The current exclusive breastfeeding rate in Nigeria is 23.7% meaning that about 3 million children each year do not get the health and immunological benefits of breastfeeding.

Undernutrition in early childhood has serious consequences and contributes to high levels of infant mortality. Underweight children tend to have more serious illnesses including diarrhoea and acute respiratory infections which can directly reduce the child’s physical and mental development. Apart from these direct consequences of malnutrition, it also has an indirect effect on a country’s economic development as it has been estimated that malnutrition reduces a nation’s economic growth by between 2 and 8%.

## Nutrition Responses in Nigeria

Nigeria has shown commitment to eradicating hunger and malnutrition among her citizens in order to lay a strong foundation for improved standard of living for citizens and socioeconomic development of the nation. Although, the country has invested in some of the key sectors of the economy especially agriculture, health, education, social protection, water and sanitation, the impact of such investments are usually low due to the large population of the country.

The Government of Nigeria adopted in 2007 the Maternal Newborn Child Health Week as a strategy to reduce maternal newborn and child morbidity and mortality in line with MDG targets. MNCHW is a simple one-time delivery mechanism that consolidates services that immediately demonstrates impact in terms of significantly increasing coverage levels of all the core preventive and curative interventions that improve the health of mothers and children. MNCHW is carried out twice every year with the aim of increasing population coverage of needed low cost, high impact interventions and thereby contribute to reduction of morbidity and mortality in mothers, newborns and children less than 5 years of age in Nigeria. However, since over a decade of implementation of these low cost high impact interventions, there has not been any appreciable improvement in the nutritional status of women and children who are the targets.

The Accelerating Nutrition Results in Nigeria (ANRiN) is a 21 year Federal government response facilitated by the National Primary Health Care Development Agency (NPHCDA) at Primary Health Care level in a Phased Approach: 2019-2040 to reduce chronic malnutrition (stunting and micro nutrient deficiencies) and thus reduce maternal and child mortality rates and over time, increase school completion and performance, and improve labour force productivity. The Project objective is to increase utilization of quality, cost-effective nutrition services for pregnant and lactating women, adolescent girls and children under five years in Abia, Akwa Ibom, Gombe, Kaduna, Kano, Kogi, Kwara, Nasarawa, Niger, Oyo and Plateau States (Phase 1: 5 year duration: 2019-2023).

MFBNP serve as the national focal point for food and nutrition policy programme planning and coordination in the country and also the secretariat for both the National Committee on Food and Nutrition and National Council on Nutrition. The activities include monitoring of SCFN and tracking of nutrition budget allocation in relevant MDAs, Development and finalization of Appraisal Tool for tracking the effectiveness for Nutrition interventions being implemented by the line ministries, hosting of Stakeholder’s validation meeting on Initiative for Food and Nutrition Security in Africa Country Strategy for Action (ICSA), Nigeria Nutrition Week, Development of advocacy kits/tools for nutrition, organize capacity building for the food and nutrition division in MDAs based on clearly defined roles and responsibilities in line with the core mandates of the MBNP to ensure accountability, Advocacy visits to high level policy makers on increased commitment to nutrition funding. Review of nutrition and dietetics curriculum for Polytechnics and Monotechnics in Nigeria.

The Nutrition and Food Safety Division of Federal Ministry of Agriculture and Rural Development are involved in procurement and distribution of Enrich Micronutrient Powder to target beneficiaries; partnership for Aflatoxin Control in Africa (PACA) Roll out; Facilitated Group Discussion (FGD) for data collection to fill identified gaps with regard to food recipe; Sensitization and awareness creation for stakeholders on the use of Aflasafe for prevention and control of aflatoxin for food safety and improved nutrition; training of Farmers, Youths and Civil Servants on production, processing, utilization and nutritional benefits of consumption of Orange Fleshed Sweet Potato (OFSP). Promotion of nutrition information System, facilitation of planned national food and micronutrient consumption survey. Building resilience and social Protection Nets through Food and Good Agricultural Practices and procurement of nutrition enterprise based starter pack to vulnerable women and children. Diversification of household Food production and consumption especially targeting women and increase access to micronutrient rich foods; scaling the production of vegetables and fruits by smallholder farmers.

The activities carried out by National Primary Heath Care Development Agency include Development of reporting cards for mothers at PHC, Community Health Influencers, Promoters and Services (CHIPS) Programme; ANRiN quarterly supportive supervision meeting at PHC level to access performance and Scale up of patient smart card implementation during MNCHW.

Federal Ministry of Education, food and nutrition activities include adolescent nutritional care support and development, Quiz Competition for nutrition education and exhibition of different food groups, nutrients and their effects on growth and development of young children. Capacity building on nutrition sensitive education for SUBEB Desk officers, State Ministry of Education focal persons, Education secretaries and teachers in the North west. Completion of skills-based pupil’s text and teacher’s manual on Nutrition Education for Basic Schools. National Guidelines for Planning and Implementation of School Meal and Health Services under Review.

Federal ministry of women affairs is involved in nutritional support to IDP Camps and selected orphanages through procurement and distribution of food items, food supplements and deworming tablet to Children.

Federal ministry of information and culture contribution through newspaper and online publications on the important of good nutrition and organizing food fair shows through TV Talk Show and Jingles, Radio, Talk Show and Jingles.

Federal Ministry of Health, (Nutrition and Food & Drugs Services) are involved in the ANRiN project. Training of health workers on CMAM, IYCF and Rapid Pro, hosting of quarterly CMAM Task Force and Zero water campaign, Maternity entitlement survey dissemination meetings, quarterly micronutrients advisory committee meetings, National Fortification Alliance (NFA) meeting, Quarterly Micronutrient consultative meetings and National Micronutrient Conference. The ministry led celebration of World Breastfeeding Week and World Food Safety Day. Development of unified Food Safety Manual and training of food handlers, street food vendors, food processors, transporters, distributors and marketers. Review of breast milk Substitutes Code (BMS) code, CMAM and its protocols reviewed with inclusion of MAM Management. The revitalization of Breastfeeding Initiative (BFI) and training of State Nutrition Officers on the use of MNP for Home Fortification. Enactment of Food Safety and Quality Act by NASS

The Federal Ministry of Science and Technology activities are use of innovative technologies for the development and Promotion of Improved Planting Materials, food harvesting, processing and preservation to reduce post-harvest losses in foods and vegetables; Conduct Workshops for Staff and its Agencies on health benefits of good nutrition. Research into the use indigenous functional foods and under-utilized crops for improved health. Federal Institute of Industrial Research Oshodi (FIIRO) has deployed indigenous technologies for the development of food products useful in the management of nutrition related disorders which include Ready to Use Therapeutic Foods (RUTF) used in the management of Severe Acute Malnutrition in children; High Nutrient Density Biscuit for the management of malnutrition in children; signed Memoranda of Understanding (MOUs) with May and Baker Nigeria Plc, for the commercialization of RUTF production and NASCO Foods Nigeria Ltd, on High Nutrient Density Biscuit.

Federal Ministry of Water Resources indicates construction of sanitation facilities in IDP camps, Markets and Motor Parks, Institutions and Health Centers. National Task Group on Sanitation (NTGS) Consultations meeting, Baseline Survey on WASH Facilities; Refresher Training on Community Water Safety Planning (CWSP), Community-Led Total Sanitation (CLTS) approach to achieve Open Defecation Free (ODF) in communities. Training of CSO and Government officials for supportive process monitoring of WASHCOM in the federation

National Agency for Food & Drug Administration and Control is involved in national programme on mandatory fortification of food with vitamin A and other micronutrients as an intervention to fight micronutrient deficiencies through implementation of the fortification of flour (wheat/maize and its meals), semolina, sugar, vegetable oil and margarine. Implementation and Enforcement of the provisions of the International Code of Marketing of Breast milk Substitutes (BMS CODE) to promote, support and encourage exclusive breastfeeding for six months of life, and continue breastfeeding for two years and beyond. Advocacy for breast milk Substitutes (BMS) Code Implementation and finalization and adoption of the BMS Code Advocacy tools which includes advocacy brief for legislators and policy makers, mothers and families, religious and community leaders, health professionals and media. The Sensitization of Chief Medical Directors (CMDs) of health facilities on the BMS Code and the National Regulations for

Standards Organisation of Nigeria activity includes the accreditation ISO/IEC 17025, laboratory assessment in preparation for accreditation.

Activities carried out by universities represented in the NCFN include teaching and research and community services. Knowledge fair summit on food and nutrition for academics in Northern Nigeria; Provision of technical support on the National Food Consumption and Micronutrient Survey, Supportive supervision and monitoring of CMAM and MNCHW, Capacity development to address nutrition challenges, Teaching and Research, and awards of postgraduate degrees in Nutritional Biochemistry; Curriculum Development, Review of postgraduate curriculum, improve teaching and supportive supervision to students, Nutrition and Health Survey, Fruits and Vegetable Consumption Survey, Promoting optimal infants and young children feeding, Operational Research to improve nutrition services uptake and nutrition outcomes, Promoting the home utilization of biofortified foods, Improving treatment outcomes using dietary approaches, Using Mobile Application to mitigate hidden hunger among smallholder farmers, Periodic enlightenment and nutrition education talks at religious centres, community meetings and media houses, Consultancy services to various MDAs and development partners, capacity building of professional Nutritionists and Dietitians, facilitates mapping of nutrition specific and nutrition sensitive stakeholders and adolescent nutrition survey.

## Gaps in Intervention Coverage and Challenges

The coverage of the MNCHW package of interventions (Figure 1) has been very low and as such could not make any appreciable impact judging by the large population of the target beneficiaries. Apart from iodized salt consumption, vitamin A supplementation, deworming and focused antenatal care, none of the interventions recorded up to 50% coverage of the target population of beneficiaries. This inadequate coverage of target population leaves a big coverage gap in coverage of these key interventions.

**Figure 1: Nutrition Interventions’ Coverage**

# FOOD AND NUTRITION ACTION PLAN (2021-2025)

## Background Information

The Government of Nigeria is committed to the reduction of hunger and malnutrition in Nigeria and to this end, the National Policy on Food and Nutrition which was first developed in 2001 was reviewed and launched in November, 2016. In recognition of the multidisciplinary and multisectoral nature of nutrition, the government in collaboration with Development Partners commenced the process for the development of a multisectoral strategic plan of action using a multistakeholder participation approach. This National Multisectoral Strategic Plan of Action for Food and Nutrition (NMPFAN) was developed in line with the National Policy on Food and Nutrition in collaboration with Development Partners, the Academia and Civil Society Organizations and the Private Sector. This plan of action builds on some sectoral plan of action such the National Health Strategic Plan of Action for Nutrition (NHSPAN, 2009) and Agricultural Sector Food Security and Nutrition Strategy (AFSNS, 2016 – 2025). The plan of action also covers other sectoral activities such as Education, Water Sanitation and Hygiene, Women Development, Science and Technology as well as finance. The plan is to run for a period of five years (2021 -2025). It is expected that if the plan is implemented effectively by all the sectors, it will address the challenges posed by malnutrition and contribute to promoting optimal nutrition for all Nigerians and reduce malnutrition among the vulnerable thereby increasing productivity and economic development of Nigeria.

## Rationale

The rationale for the development of the National Multisectoral Strategic Plan of Action for Food and Nutrition (NMPFAN) is to have a document that will serve as a tool to guide the implementation of interventions and programmes to address the problems of hunger and malnutrition across all sectors in Nigeria. It evolves from the framework of the strategies outlined in the National Policy on Food and Nutrition and will serve as a working tool to all stakeholders including government at all levels, development partners and organized private sectors in their effort to fight malnutrition and hunger while also serving as a reference material on current and future interventions to bring about improvement in the nutritional status of Nigerians.

## Purpose of Nutrition Action Plan

This NMPFAN will be used by MDAs across sectors at Federal, State and LGA levels, and other stakeholders to respond to the challenges of nutrition in Nigeria especially to inform action plans that will direct all interventions, programme and activities to be implemented to reduce malnutrition and hunger among the vulnerable and generality of Nigerians leading to increased productivity and national development. If well-funded and implemented, NMPFAN is expected to contribute significantly towards the elimination of all forms of malnutrition as a public health problem in Nigeria as well contributes to the achievement of the Sustainable Development Goals target by 2030.

## Goal, Objectives, Priority Areas and Expected Outcomes

### **Goal**

The goal of the plan is to attain optimal nutritional status for all Nigerians through accelerating the scaling up of priority high impact nutrition specific and nutrition sensitive interventions as well as creating the enabling environment for improved nutrition focusing on the most vulnerable especially women and children as well as internally displaced persons.

### **Objectives**

To achieve the goal of attaining an optimal nutritional status by the year 2025, a number of objectives and targets are articulated as follows:

1. To improve food security at the national, community, and household levels.
2. To reduce undernutrition among infants and children, adolescents, and women of reproductive age.
3. To significantly reduce micronutrient deficiency disorders, especially among the vulnerable.
4. To ensure incorporation of nutrition education into formal and informal training.
5. To promote optimum nutrition for people in especially difficult circumstances, including PLWHA.
6. To prevent and control chronic nutrition-related non-communicable diseases.
7. To incorporate food and nutrition considerations into the federal, state, and local sectoral development plans.
8. To strengthen systems for providing early warning information on the food and nutrition situation.
9. To ensure universal access to nutrition-sensitive social protection.

### **Targets**

Targets for this plan have been guided by the NFNP. The specific targets to be achieved address each of the priority intervention areas for Nigeria:

1. To reduce the proportion of people who suffer hunger and malnutrition by 50% by 2025
2. To increase exclusive breastfeeding rate to 65% by 2025
3. To increase the percentage of children age six months and above who receive appropriate complementary feeding to 40% by 2025;
4. To reduce stunting rate among under-five children to 18% by 2025;
5. To reduce childhood wasting including Severe Acute Malnutrition (SAM) to 10% in 2025;
6. To achieve and sustain universal household access to iodized salt by 2025;
7. To increase coverage of Zinc supplementation in diarrhoea management to 50% of all children needing treatment by 2025;
8. To increase the proportion of children who receive deworming tablets to 50% by 2025;
9. To reduce in anaemia among pregnant women to 40% in 2025;
10. To reduce prevalence of diet-related non-communicable diseases by 25% in 2025;
11. To increase coverage of Vitamin A supplementation to 65% by 2025;
12. Increase by 50% households with relevant nutrition knowledge and practice that improve their nutritional status
13. Increase access to potable water from 49% in 2013 to 70% by 2025;
14. To increase the number of relevant MDAs at all levels with functional nutrition unit by 75%
15. To reduce the incidence of malnutrition among victims of emergencies by 50% in 2025;
16. To mainstream nutrition objectives into social protection and safety net programmes;
17. To achieve universal access of all school children in the pre- and basic school classes to school-based feeding programmes by 2025;
18. To arrest the emerging increase in obesity prevalence in adolescents and adults by 2025
19. Support distribution of Iron folate supplements to adolescent (boys and girls) in Schools and Communities (25% coverage)
20. Sustain and scale up distribution of micronutrient powder (MNP) for children 6 - 23 months (50% coverage)

### **Priority Areas**

NMPFAN consists of six result areas and eighteen strategic objectives with each of them having an expected outcome. These result areas and strategic objectives were derived from the policy and were aimed at achieving the policy objectives. The six result priority areas are the following

#### Food and Nutrition Security

The strategic plan of action will focus on achieving food and nutrition security through investment in agriculture to increase food production, availability, accessibility and affordability to all Nigerians. Measures will be taken to improve food harvesting, processing and preservation to reduce postharvest losses, improve food preparation and food quality as well as improve the management of food security crisis and nutrition in emergency situations. It will also include school based strategies to reduce malnutrition among school age children and improve their learning, health and nutrition status.

#### **Enhancing Caregiving Capacity**

Nutrition specific interventions are a major focus of this plan of action and programmes and activities will be implemented to ensure optimal nutrition in the first 1000 days of life. Actvities and programme that will address the needs of the socioeconomically disadvantaged are also included.

#### **Enhancing Provision of Quality Health Services**

Inadequate health care services are an underlying cause of malnutrition. The plan will enhance the provision of quality health services through preventing and managing nutrition related diseases to reduce morbidity and mortality associated with malnutrition. Specific interventions to prevent micronutrient deficiencies as well as protect the consumer through improved food quality and safety are also included.

#### **Improving Capacity to Address Food and Nutrition Insecurity Problems**

Strengthening the enabling environment and building capacity of programme implementers is a priority and activities will be implemented to improve capacity to address food and nutrition insecurity problems as well as provide a conducive macroeconomic environment for improved nutrition status. The needs of the vulnerable groups will be taken care of through implementation of nutrition sensitive social protection programmes.

#### **Raising Awareness and Understanding of the Problem of Malnutrition**

Some of the causes of malnutrition are socio-cultural and behavioural in nature and programmes and activities that will promote positive behaviour change and lifestyle through advocacy, communication and social mobilization as well as healthy lifestyles and dietary habits have been included in the plan.

#### **Resource Allocation for Food and Nutrition Security at all Levels**

Adequate funding and resources for implementation of food and nutrition activities to reduce malnutrition have always been a challenge not only in Nigeria but globally. This NMPFAN includes aggressive strategies for resource mobilization and investment for nutrition. Activities to ensure budget allocation, timely release and utilization as well as strengthening the coordination capacity of the both the institutions and personnel responsible for policy and programme coordination are also included.

## Implementation of NMPFAN

### **Target Groups**

In line with the Scaling Up Nutrition (SUN) strategy and the recognition of the "first 1000 days of the child" as the window of opportunity to have a better impact on the health and development of the child, an investment in preventing malnutrition that yields the greatest returns. The NMPFAN seeks to address in a huge manner the entire scope of the malnutrition problem in the country through focus on infants, young children, and mothers, both women of reproductive age and adolescent girls who will become mothers in later years. The plan focused on the treatment of severe childhood wasting through community-based management of acute malnutrition. This approach involved timely detection of severe acute malnutrition in communities and provided homes with nutrient-dense food for children who do not have medical complications.

Interventions addressing childhood stunting focus on improving women’s nutrition to reduce low birth size, improving household hygiene to reduce infections such as diarrhoea, and promoting exclusive breastfeeding as well as appropriate complementary and child feeding practices. The nutritional condition of the women who bear these children is equally important, as the health and nutritional well-being of the newborn is determined by the health and nutritional well-being of its mother. The Strategic Plan of Action primarily targets pregnant women, lactating mothers and children under 5, particularly those aged 0 to 23 months without necessarily excluding other categories of people affected by the scourge of malnutrition in Nigeria such as school age children, orphans and vulnerable children, adolescents and young adults.

### **Intervention Approach**

The Strategic Plan is designed to be implemented under six (6) result areas as contained in the national policy on food and nutrition. The interventions contained in the operational Plan are the activities selected to achieve the expected results of the Multisectoral Strategic Plan for Nutrition 2021-2025. This operational document shows the interventions and activities, unit costs of these activities and the budget required for their implementation over the five years period. These interventions have been identified through a multi-stakeholder participatory process which brings together representatives from MDAs of the Federal government of Nigeria, State governments, UN agency (UNICEF) and Development Partners, Universities; Non-Governmental Organizations as well as the organized private sector. These interventions were chosen because of their proven efficiency and cost effectiveness and within the specific nutrition context in Nigeria and the recommendations of the SUN movement.

The Strategic Plan propose the scaling up nutrition intervention across Nigeria but priority should be given to scaling up interventions (both specific and sensitive) in States where the incidence of stunting exceeds 40% and that of severe stunting 20%, in line with the recommendations of the costing study carried out by the World Bank. It is recommended that a full package of nutrition specific and nutrition sensitive interventions are implemented simultaneously in these priority States during the five years of the strategy to maximize impact.

The implementation of the plan of action will be led by the various MDAs of government across Nigeria supported by other stakeholders using existing government‘s delivery platform (Health Facilities, Schools) and community structures and systems.

### **Coordination**

The framework for institutional arrangement for the National Policy on Food and Nutrition vested the overall responsibility for the coordination of the policy and the plan of action on the Federal Ministry of Budget and National Planning, in order to ensure a result-oriented programme implementation and coordination. The National Council on Nutrition under the Chairmanship of the Vice President of the Federal Republic of Nigeria is the highest decision making body on Food and Nutrition in Nigeria. The Council is expected to operate through its technical arm, National Committee on Food and Nutrition which is made up of Representatives of relevant MDAs not below the rank of a Director, Representatives of relevant Professional bodies, Development Partners and Civil Society Organizations, Tertiary Institutions and Research Institutes. All food and nutrition activities will be coordinated at the State and LGA levels by the State Committee on Food and Nutrition and Local Government Committee on Food and Nutrition respectively. It is expected that the Ward Committee on Food and Nutrition will also be formed to coordinate the implementation of nutrition activities and programmes at the ward level. The Ministry of Economic Planning in all states of the federation will serve as the secretariat of the State Committees on Food and Nutrition (SCFN).

The Ministry of Finance, Budget and National Planning (MFBNP), is the institution tasked to coordinate the implementation of the policy by the Federal Government of Nigeria. The viewpoint and perspective therefore of the costing is institutional, implying that the costs calculated are linked to this institution.

# COSTING AND FINANCING OF NMPFAN

## Costing of NMPFAN

The costing of the NMPFAN was done at the activity level taking into consideration all possible costs that will be required to implement an intervention or programme. Thus the costing matrix contains the costing spread-sheet based on the six result areas, interventions and activities. Costing was done through a multi-sectoral participation process involving relevant programme implementers across MDAs at the Federal and State levels. A micro-costing approach was adopted which involved the estimation of unit cost of all aspects of service delivery and programme implementation. The costed scaling up plan presents the estimated costs for all six result areas and 18 interventions contained in the plan of action which was calculated by estimating unit costs for all aspects of service delivery (input costs, transportation and storage, staffing, training, supervision, monitoring and evaluation, relevant overheads, waste, etc.) for each intervention of the actual programs that are currently offered (current coverage) in Nigeria, taking into account the context in which these services are delivered.

## Basic Assumptions of Costing

Although, the National Policy on Food and Nutrition has an operational duration of over an 8-year period, it was agreed among stakeholders that the proposed costing of the NMPFAN should only be for a five-year period (2021 – 2025). This is in line with costing done in other countries and will not be far off from the three-year period over which MTEF-FSP will be implemented.

This costing activity required that some assumptions be made about the type and scale of the proposed programs and interventions. The assumptions about the scope and content of all the interventions were agreed during the four zonal consultative meetings as well as the final costing workshop both under the leadership and guidance of the MFBNP.

Additionally, where unit costs were not available or could not be properly estimated by participants during the costing workshop, previous cost estimation from the World Bank[[1]](#footnote-1), the cost estimation done by the Ministry of Health and Ministry of Agriculture and Rural Development as contained in their respective strategic plans of action as well as experience of nutrition programming from other countries in the region to make assumptions about certain costing variables.

This NMPFAN costing on the federal disaggregated indicative costing for five-year period (2021-2025) assumed an incremental 3% inflation rate through the five-year period, provided that implementation commences within the first and second quarters of 2021. This assumption is based on the expectation that growth in money supply falls within the range of 3 to 5% per annum. This is the first key determinant of price expectation within a narrow margin of error and that also, other macroeconomic indicators such as interest rate, wage rate are expected to be fairly stable, and agricultural output is expected to grow appreciably within the period.

However, the behavior of the exchange rate has been quite volatile during the last three years (2017-2019 and more so in 2020Q1,2,3) with a huge disparity between the official rate and market rate. Thus, such level of unpredictability would have implications for the import contents of the line items in this action plan that would affect the unit price. It is assumed that since the expenditure profile would be managed by the government, the impact of exchange rate fluctuations could be mitigated by the use of the official exchange rate for the import contents. Thus, it is considered that a 3% incremental inflation rate threshold is rational.

In addition, a lagged value of inflation rate for the last three years (2017-2019) has indicated a fairly steady average growth in the consumer price index (CPI) of about 2.15%, with a more rapid growth in food inflation of about 2.65% for the same period. Thus, it is expected that the monetary authority will maintain 3% growth in money supply especially in view of the stimulus policies that are being implemented in the short term to leverage small business growth. Even though the monetary authority may exceed 3%; it is expected that such excess would be for a very short period with minimal impact on inflation in the long term. Thus, on the average a 3% inflation rate is assumed to be a rational threshold for pricing within the period under consideration for the disaggregated federal government component while a moving average of 7.5% inflation rate was used on the non-disaggregated costing for the State/FCT/LGAs, development partners, and organized private sector over the same period.

## Total Cost

The summary of NMPFAN cost estimates for the period of five years (2021 to 2025) is presented in **Table 1**. This is to allow the government at all levels and other stakeholders (Development partners, Civil society and organized private sector) involved in national response to the nutritional challenges in the country to know the cost required and the expected contributions to operationalize the policy and plan of action during the 5-year period. The estimated total cost of implementing 18 nutrition specific and nutrition-sensitive interventions across the country "full coverage scenario" that would require investment by all stakeholders over the five-year period (2021-2025) is ₦294,745,586,859.76with an average annual investment cost estimated at ₦58,949,117,37258.Two result areas accounts for ₦261,584,511,580.45 (**88.8%)** of the total estimated cost over the five years which are enhancing caring capacity ₦146,702,475,406.00 **(49.8%)** and strengthening the provision of quality health services ₦114,882,036,174.45 **(39%)**. The result area to help ensures food and nutrition security at all levels account for ₦21,409,929,770.31 **7.3%** of the total estimated cost. This focuses on nutrition sensitive agriculture activities since other food security issues have been included in the agricultural sector food security and nutrition strategy (ASFNS) document with appropriate costing indicated.

Figure 2 shows the percentage distribution of the NMPFAN based on expected contribution by stakeholders. The States/FCT/LGAs are to contribute ₦151,160,835,429.43 **51.3%** of the cost followed by development partners ₦86,435,546,489 **(29.3%**), federal government ₦34,906,309,362 (**11.8%)** and organized private sector ₦22,242,895,579 **(7.5%).** The summary of NMPFAN Implementation Cost Matrix by Strategic Objectives is presented in **Table 2**. This shows the disaggregation of the estimated costs of each result area into various intervention cost with the respective contribution to be made by governments, development partners and organized private sector. The NMPFAN Implementation indicative activities Cost Matrix for each intervention are shown in Annex I. Nutrition investments estimate cost matrix by MDAs is shown in Annex IV.

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| Table 1. Summary NMPFAN Implementation Cost Matrix | | | | | | |
| Result Area | **Federal Government** | **States+FCT /LGAs Government** | **Development Partners** | **Organized Private Sector** | **Total Indicative Cost** | **% of Total** |
| Food And Nutrition Security | 3658774303 | 13474963813.43 | 1373020793.38 | 2903170860.50 | 21409929770.31 | **7.3** |
| Enhancing Caregiving Capacity | 10731687589 | 55272072468 | 75072281553 | 5626433796 | 146702475406.00 | **49.8** |
| Enhancing Provision of Quality Health Services | 18429001589 | 76404572965 | 7802894004 | 12245567617 | **114882036174.45** | **39.0** |
| Improving Capacity To Address Food And Nutrition Insecurity | 372824299 | 1125324319 | 120811875.5 | 202069126 | **1821029620** | **0.6** |
| Raising Awareness And Understanding of Problem of Malnutrition In Nigeria | 871465829.5 | 1697473751 | 1274551498 | 743660866.3 | **4587151945** | **1.6** |
| Resource Allocation For Food And Nutrition Security At All Levels | 842555752 | 3186428113 | 791986765.6 | 521993313.1 | **5342963944** | **1.8** |
| Estimated Cost | **34906309362** | **151160835429.43** | **86435546489** | **22242895579** | **294745586859.76** | **100.0** |

# Figure 2: Percentage Distribution of NMPFAN Implementation Indicative Cost

## Nigeria stands to gain enormous benefits by improving nutrition and reducing malnutrition, which can help boost its economic growth, productivity, and human capital development. Undernutrition/stunting under 2 years is an indicator of a comprehensive human capital development. Therefore, to reduce undernutrition and improve results of investment in nutrition, awareness on nutrition is necessary and it should be prioritized. A substantially greater impact could be achieved if preventive interventions could be scaled to full program coverage levels. Investing in nutrition is a most cost-beneficial approach with social-action package targeted at gender-sensitive education, training and service delivery that can cost-effectively achieve quality, impact, and sustainability.

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| --- | --- | --- | --- | --- | --- |
| **Table 2: Summary NMPFAN Implementation Cost Matrix By Strategic Objectives** | | | | |  |
| Result Area | **Indicative Costing** | **Indicative Costing (Federal)** | **Indicative Costing (States+FCT /LGAs)** | **Indicative Costing (Partners)** | **Indicative Costing (Organized Private Sector)** |
| RESULT AREA 1. FOOD AND NUTRITION SECURITY | 21409929770 | 3658774303 | 13,474,963,813 | 1,373,020,793 | 2,903,170,861 |
| Strategic Objective 1.1: Ensuring Food and Nutrition Security at the National, Community and Household | 12847935276 | 2308653765 | 7959214713 | 728593250.2 | 1851473548 |
| Strategy 1.2: Increasing Availability, Accessibility and Affordability to Food | 741,817,216 | 74,046,263 | 520,570,148 | 74,595,218 | 72,605,588 |
| Strategy 1.3: Improving Food Harvesting, Processing and Preservation | 1,353,008,742 | 290,479,279 | 482,472,094 | 109,193,394 | 470,863,975 |
| Strategy 1.4: Improving Food Preparation and Quality | 4,328,951,931 | 397,560,831 | 3,221,565,375 | 319,813,575 | 390012150 |
| Strategy 1.5: Improving Management of Food Security Crisis and Nutrition in Emergency | 878,867,596 | 319,602,888 | 485,764,048 | 73,500,660 | 0 |
| Strategy 1.6: School-Based Strategies | 1,259,364,010 | 268,446,277 | 805,377,436 | 67,324,697 | 118215600 |
| RESULT AREA 2: ENHANCING CARE GIVING CAPACITY | 146702475405.73 | 10731687589 | 55272072468.45 | 75072281552.55 | 5626433795.73 |
| Strategic Objective 2.1 Ensure Optimal Nutrition in the First 1,000 Days of life | 145643813859.00 | 10566567043 | 54520254468 | 74995058552 | 5561933796 |
| Strategic Objective 2.2: Caring for the Socioeconomically Disadvantaged and Nutritionally Vulnerable | 1,058,661,547 | 165,120,546 | 751,818,000.7 | 77,223,000.18 | 64,500,000 |
| RESULT AREA 3: ENHANCING PROVISION OF QUALITY HEALTH SERVICES | 114882036174.45 | 18429001589 | 76404572965 | 7802894004 | 12245567617 |
| Strategic Objective 3.1: Reduce Morbidity and Mortality Associated with Malnutrition | 68208071910 | 13475780555 | 46025333478 | 5323379253 | 3383578625 |
| Strategic Objective 3.2. Preventing and Managing Nutrition Related Diseases | 2123803690 | 420958564 | 1385087930 | 213090450.6 | 104666746 |
| Strategic Objective 3.3: Preventing Micronutrient Deficiency | 44037203842 | 4426507272 | 28659876895 | 2240710865 | 8710108810 |
| Strategic Objective 3.4: Protecting the Consumer through Improved Food Quality and Safety | 512956732.4 | 105755198 | 334274663.1 | 25713435.63 | 47213435.63 |
| RESULT AREA 4: IMPROVING CAPACITY TO ADDRESS FOOD AND NUTRITION INSECURITY | 1821029620 | 372824299 | 1125324319 | 120811875.5 | 202069126 |
| Strategic Objective 4.1: Assessing, Analysing and Monitoring Nutrition Situations | 1791305170 | 346752162 | 1125324319 | 117159563 | 202069126 |
| Strategic Objective 4.2: Providing a Conducive Macro Economic Environment | 19539974 | 16959974 | 0 | 2580000 | 0 |
| Strategic Objective 4.3: Social Protection Programmes for the Vulnerable Groups | 10184475.5 | 9112163 | 0 | 1072312.5 | 0 |
| RESULT AREA 5: RAISING AWARENESS AND UNDERSTANDING OF PROBLEM OF MALNUTRITION IN NIGERIA | 4587151945 | 871465829.5 | 1697473751 | 1274551498 | 743660866.3 |
| Strategic Objective 5.1: Promote Advocacy, Communication and Social Mobilization | 241205892 | 118924642 | 64500000 | 43792812.5 | 13988437.5 |
| Strategic Objective 5.2: Promoting Healthy Lifestyles and Dietary habits | 1,621,103,755 | 320,659,055 | 1,056,611,319 | 83,965,293.75 | 159,868,087.5 |
| Strategic Objective 5.3: Research In Nutrition | 2724842298 | 431882132.5 | 576362432.5 | 1146793391 | 569804341.3 |
| RESULT AREA 6: RESOURCE ALLOCATION FOR FOOD AND NUTRITION SECURITY AT ALL LEVELS | 5342963944 | 842555752 | 3186428113 | 791986765.6 | 521993313.1 |
| 6.1 Promote Adequate Budgetary Allocation and Tracking | 133061543 | 38999043 | 26875000 | 40312500 | 26875000 |
| 6.2 Strengthening the Coordination Capacity | 2691508249 | 498374949 | 1462146200 | 482980300 | 248006800 |
| 6.3 Strengthening Capacity to Mobilise Resources | 2,518,394,152 | 305,181,760 | 1,697,406,913 | 268,693,965.6 | 247,111,513.1 |

## 3.4 Cost of Federal Government Component

The breakdown of the Federal Government component of the 5-Year NMPFAN Implementation Cost Matrix is presented in **Table 3**. The estimated total cost of implementing 18 specific and nutrition-sensitive interventions at federal government level over the five-year period (2021-2025) is ₦34,906,309,362with an average annual investment cost estimated at ₦ 6,981,261,872. **Figure 3** shows the percentage distribution of Federal Government components of NMPFAN implementation Cost by Result Areas. The cost estimate also indicates that the programs on enhancing caring capacity and strengthening the provision of quality health services accounts for ₦10,731,687,589 (**52.8)** and ₦18,429,001,589 **(30.7%)** respectively. This is an indication that the main thrust of the NMPFAN is on prevention rather than cure. The agriculture sector covers result area 1 which is ensuring food and nutrition security at all levels which shows nutrition sensitive agriculture activities account for ₦3,658,774,303 (**10.5%)** of the total cost estimate for the federal government component. The cost for each intervention under the result areas for the federal government component of the NMPFAN is shown in **Table 4**. Annex II gave the detailed Federal Government 5-Year NMPFAN Implementation Activities Indicative Cost Matrix.

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# Figure 3: Percentage Distribution of Federal Government Component Implementation Cost Based on Result Area

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Table 3. Summary of Federal Government 5-Year NMPFAN Implementation Cost Matrix by Strategic Objectives** | | | | | | |
| RESULT AREA  /SPECIFIC OBJECTIVE | **2021** | **2022** | **2023** | **2024** | **2025** | **Total** |
| Result Area 1. Food And Nutrition Security | 627934260 | 792495719.5 | 752558458.8 | 812776394.4 | 673009470.2 | 3658774303 |
| Result Area 2: Enhancing Care Giving Capacity | 2022083466 | 2081543520 | 2145192276 | 2208309520 | 2274558805 | 10731687589 |
| Result Area 3: Enhancing Provision Of Quality Health Services | 3466062745 | 3594544627 | 3677145966 | 3790164095 | 3901084155 | **18429001589** |
| Result Area 4: Improving Capacity To Address Food And Nutrition Insecurity | 109714186.6 | 9020750 | 117941572.2 | 126103232.4 | 10044558.76 | **372824299** |
| Result Area 5: Raising Awareness And Understanding Of Problem Of Malnutrition In Nigeria | 164657950 | 188116438.5 | 189296457.7 | 175328809.6 | 154066173.9 | **871465829.5** |
| Result Area 6: Resource Allocation For Food And Nutrition Security At All Levels | 192841600 | 159803536.2 | 155585141.9 | 169265197.1 | 165060277.2 | **842555752** |
| Total | **6583294208** | **6825524591** | **7037719873** | **7281947249** | **7177823440** | **34906309362** |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Table 4. Summary of Federal Government Component of 5-Year NMPFAN Implementation Cost Matrix** | | | | | | | | |  | |  |
| RESULT AREA/SPECIFIC OBJECTIVE | **2021** | | **2022** | | **2023** | | **2024** | | **2025** | | **Total** |
| RESULT AREA 1. FOOD AND NUTRITION SECURITY  N3,658,774,303 | | | | | | | | | | | |
| Strategic Objective 1.1: Ensuring Food and Nutrition Security at the National, Community and Household | 385536895 | | 515355277 | | 468696653 | | 538695758 | | 400369181.9 | | 2308653765 |
| Strategy 1.2: Increasing Availability, Accessibility and Affordability to Food | 8616000 | | 19147480 | | 18129054.4 | | 18621426.03 | | 9517302.497 | | **74031263** |
| Strategy 1.3: Improving Food Harvesting, Processing and Preservation | 54,713,100 | | 56,354,493 | | 58,045,128 | | 59,786,482 | | 61,580,076 | | **290,479,279** |
| Strategy 1.4: Improving Food Preparation and Quality | 74882400 | | 77128872 | | 79442738.36 | | 81826020.21 | | 84280800.46 | | **397560831** |
| Strategy 1.5: Improving Management of Food Security Crisis and Nutrition in Emergency | 60198665 | | 62004624.95 | | 63864763.35 | | 65780707.02 | | 67754128.18 | | **319602888** |
| Strategy 1.6: School-Based Strategies | 43987200 | | 62504972.5 | | 64380121.68 | | 48066001.09 | | 49507981.13 | | **268446277** |
| Subtotal Result Area 1 | 627934260 | | 792495719.5 | | 752558458.8 | | 812776394.4 | | 673009470.2 | | 3658774303 |
| RESULT AREA 2: ENHANCING CARE GIVING CAPACITY  N10,731,687,588 | | | | | | | | | | | |
| Strategic Objective 2.1 Ensure Optimal Nutrition in the First 1,000 Days of life | 1990982257 | | 2049509274 | | 2112197003 | | 2174324389 | | 2239554120 | | 10566567043 |
| Strategic Objective 2.2: Caring for the Socioeconomically Disadvantaged and Nutritionally Vulnerable | 31101209.4 | | 32034245.68 | | 32995273.05 | | 33985131.24 | | 35004685.18 | | **165120546** |
| Subtotal Result Area 2 | 2022083466 | | 2081543520 | | 2145192276 | | 2208309520 | | 2274558805 | | 10731687588 |
| RESULT AREA 3: ENHANCING PROVISION OF QUALITY HEALTH SERVICES N18,429,001,589 | | | | | | | | | | | |
| Strategic Objective 3.1: Reduce Morbidity and Mortality Associated with Malnutrition | | 2533100920 | 2633593948 | | 2687366766 | 2770691519 | | 2851027402 | | **13475780555** | |
| Strategic Objective 3.2. Preventing and Managing Nutrition Related Diseases | | 79289470 | 81668154.1 | | 84118198.73 | 86641744.69 | | 89240997.03 | | **420958564** | |
| Strategic Objective 3.3: Preventing Micronutrient Deficiency | | 833752880 | 858765466 | | 884528429.9 | 911064283.2 | | 938396212.1 | | **4426507272** | |
| Strategic Objective 3.4: Protecting the Consumer through Improved Food Quality and Safety | | 19919475 | 20517059.25 | | 21132571.03 | 21766548.16 | | 22419544.6 | | **105755198** | |
| Subtotal Result Area 3 | | 3466062745 | 3594544627 | | 3677145966 | 3790164095 | | 3901084155 | | **18429001589** | |
| RESULT AREA 4: IMPROVING CAPACITY TO ADDRESS FOOD AND NUTRITION INSECURITY N372,824,299 | | | | | | | | | | | |
| Strategic Objective 4.1: Assessing, Analysing and Monitoring Nutrition Situations | | 109314186.6 | | 4120000 | 112717212.2 | 116098728.6 | | 4502035.24 | | **346752162** | |
| Strategic Objective 4.2: Providing a Conducive Macro Economic Environment | | 400000 | | 412000 | 5224360 | 5381090.8 | | 5542523.524 | | **16959974** | |
| Strategic Objective 4.3: Social Protection Programmes for the Vulnerable Groups | | 0 | | 4488750 | 0 | 4623413 | | 0 | | **9112163** | |
| Subtotal Result Area 4 | | 109714186.6 | | 9020750 | 117941572.2 | 126103232.4 | | 10044558.76 | | **372824299** | |
| RESULT AREA 5: RAISING AWARENESS AND UNDERSTANDING OF PROBLEM OF MALNUTRITION IN NIGERIA N871,465,829.5 | | | | | | | | | | | |
| Strategic Objective 5.1: Promote Advocacy, Communication and Social Mobilization | | 22400000 | | 23072000 | 23764160 | 24477084.8 | | 25211397.34 | | **118924642** | |
| Strategic Objective 5.2: Promoting Healthy Lifestyles and Dietary habits | | 58485800 | | 65240374 | 67197585.22 | 63909012.78 | | 65826283.16 | | **320659055** | |
| Strategic Objective 5.3: Research In Nutrition | | 83772150 | | 99804064.5 | 98334712.5 | 86942712 | | 63028493.36 | | **431882132.5** | |
| Subtotal Result Area 5 | | 164657950 | | 188116438.5 | 189296457.7 | 175328809.6 | | 154066173.9 | | **871465829.5** | |
| RESULT AREA 6: RESOURCE ALLOCATION FOR FOOD AND NUTRITION SECURITY AT ALL LEVELS N842,555,752 | | | | | | | | | | | |
| 6.1 Promote Adequate Budgetary Allocation and Tracking | | 4000000 | | 12870000 | 4243600 | 13383408 | | 4502035 | | **38999043** | |
| 6.2 Strengthening the Coordination Capacity | | 93871200 | | 96687336 | 99587956.08 | 102575595.3 | | 105652862.6 | | **498374949** | |
| 6.3 Strengthening Capacity to Mobilise Resources | | 94970400 | | 50246200.16 | 51753585.84 | 53306193.8 | | 54905379.56 | | **305181760** | |
| Subtotal Result Area 6 | | 192,841,600 | | 159,803,536.2 | 155,585,141.9 | 169,265,197.1 | | 165,060,277.2 | | **842,555,752** | |

## Prioritizing Interventions due to Resource Constraints

The challenge of malnutrition in Nigeria is daunting and the plan of action is geared towards achievement of result to bring about reduction in malnutrition in the country. In the event of budgetary constraints, policy makers may be compelled to decide on investing on the nation-wide implementation of some identified priority key interventions **(Table 5)** within the list of available packages of interventions.

Most of the interventions in the two result areas that account for over 80% of the total estimated cost are key child survival interventions that target children 0 – 24 months thus presenting opportunities for reducing stunting and other forms of malnutrition within the first 1000 days window of opportunity. Therefore, it is important and urgent for the government to consider allocating more funding to these interventions which are high impact interventions to reduce the scourge of malnutrition in Nigeria most especially in the Northern part of Nigeria where the prevalence of stunting and acute malnutrition is worse.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Table 5: Prioritized Nutrition Intervention** | | | | | |
| Intervention | **Indicative Costing** | **Indicative Costing (Federal)** | **Indicative Costing (States+FCT /LGAs)** | **Indicative Costing (Partners)** | **Indicative Costing (Organized Private Sector)** |
| IYCF | **6,190,567,262** | 988,651,360 | 4,289,251,721 | 375,504,839 | 537,159,342 |
| MNDC | **244,823,277,935** | 26,483,947,978 | 119,791,313,495 | 81,709,995,373 | 16,838,021,089 |
| CMAM | **1,177,028,299** | 233,092,299 | 766,948,000 | 117,992,000 | 58,996,000 |
| WASH | **1,874,353,797** | 342,291,047 | 1,221,496,929 | 173,581,648 | 136,984,173 |
| Biofortification | **2,336,236,338** | 423,896,800 | 1,053,317,250 | 214,577,794 | 644,444,494 |
| School Based | **2991211736** | 432103717 | 1935324900 | 149827518.8 | 473955600 |
| Coordination | **2,691,508,249** | 498,374,949 | 1,462,146,200 | 482,980,300 | 248,006,800 |
| Total | **262,084,183,615** | **29,402,358,150** | **130,519,798,495** | **83,224,459,472** | **18,937,567,499** |

IYCF: Baby friendly initiative, promotion of exclusive breastfeeding and nutrition/food demonstration, scale up C-IYCF, Social and Behaviour Change Communication and intra-household food distribution activities, dissemination of information on nutrition and key household practices through mass media. MNDC: Procurement and distribution of Iron-folic acid supplementation, Vitamin A Supplements and micronutrient powder (MNP). Support for local production of Premixes and Micro nutrient powder, assessment of Household consumption of iodized salt and monitoring of micronutrient supplementation programme. CMAM: Support for local production of RUTF, Scale up and strengthen of CMAM sites, Procurement and distribution of Zinc, L -ORS, de-worming tablet and RUTF for CMAM and routine services. WASH: Construction of sanitation and hygiene facilities in IDPs camps, public places and institutions. Support water supply interventions in emergency settings and rural areas. Training on hygiene promotion, Community Water Safety Plan and triggering on Community Led Total Sanitation (CLTS)

Biofortification: Scale-up the production and promotion of the consumption of Vitamin A, and micronutrient rich foods (orange flesh sweet potato, pro-vitamin A cassava, yellow maize, iron sorghum, and cowpea). Promotion of Aflasafe to minimize aflatoxin contamination along value chain. School Based: Build capacity of Agricultural Science teachers and strengthen the establishment of school farms and garden. Support production and diversification of fruits and vegetables. Coordination: Stakeholders consultation for nutrition related investment, Bi-annual meeting of the National Council on Nutrition, quarterly Nutrition Partners meetings, organize annual National Nutrition Networking Establishment of nutrition Portal and development of tools for collection of core nutrition data.

## Financing Framework

The cost estimates for the NMPFAN will be used by the MFBNP to advocate for financial support from government, donor agencies and partners, the private and business sectors, and international and local non-governmental organizations (NGOs). The cost is the sum of all budget estimates from the programmes and activities under each objective, representing a snapshot of the current nutrition priorities for Nigeria. Financing the NMPFAN will require a concerted effort from the Government at all levels, development partners, CSOs, and the organized private sector. However, the major investor in these nutrition priorities will be the federal government and State/FCT/LGAs governments of Nigeria. The magnitude of NMPFAN estimated cost, when compared to the current level of investment in nutrition related activities in Nigeria, makes it clear that identifying additional sources of funding is a priority.

### **Federal, States and Local Governments**

The federal government, State and Local governments will finance the bulk of the estimated cost of the NMPFAN through focused resource allocation within their budgets through mainstreaming nutrition in their various sector programmes to increase resource availability with accountability and transparency. This calls for making food and nutrition security a high priority in the national agenda and programmes, specifically in MDAs such as health, agriculture, women, humanitarian affairs, finance, education, science, trade and industries, and information. Given the large gap between current investments in nutrition and the scenario of scaling up presented in the plan, it seems essential to quickly identify additional sources of funding. For successful resource mobilisation, a strong advocacy strategy will be used to demonstrate to sectors and development partners the cost-effectiveness of improved investment in nutrition and the consequences of failing to do so.

### **Development Partners**

Available finances are not sufficient to meet the needs of a rapidly growing Nigerian population, hence development partners need to continue to play huge role in complementing government efforts at all levels through sustained funding commitment and support to the implementation of the NMPFAN towards the achievement of food and nutrition security in the country with this realistic, coordinated and well-concerted plans and programmes. Investment in nutrition has been the topmost priority of development partners in Nigeria through support for sector strategic reforms, investments in service delivery and advocacy.

The government budget allocation to nutrition related investment remains low while the bulk of nutrition funding comes mainly from the donor community. The government recognizes that the current domestic budgets will not be able to independently finance the NMPFAN at the level required to sustainably improve the nutrition situation. Hence, the government will continue to seek additional funding support from development partners. The contribution expected from development partners for the implementation of the five year NMPFAN is **N86,435,546,489** that is an average annual investment of **N17,287,109,298**.

The government will take advantage of existing and new initiatives which include current ongoing collaboration and support from partners, and SUN movement among others to identify potential sources for financing this plan. Opportunities for resource mobilisation will be through such forum as quarterly development partner meetings both at national and sub-national levels. Thus, at the national level, there will be advocacy for basket funding for nutrition programmes from the nutrition development partners to maximise nutrition investments to facilitate a more holistic approach to nutrition programming and implementation. There will be active coordination of support for nutrition programmes to avoid fragmented programmes in order to achieve maximum impact on the nutrition indicators. Adequate information sharing would be carried out regularly on the level of support provided and the activities in the NMPFAN being funded to have an accurate assessment of the impact on the nutrition indicators to avoid duplication of efforts.

### **Organised Private Sector**

Nutrition problems cannot be solve by government alone, hence the need for partnership among donors, governments, academia and the business community to leverage expertise, share ideas and build upon their strengths. The private sector is playing a central and ground-breaking role in efforts to enhance global nutrition in such areas as in global supply chain management, production, packaging, safety, quality assurance, marketing, and delivery, together with experience working with governments to bring supplement and fortification programs to scale in the fight against hidden hunger.

Public-private sector collaboration has been widely promoted as a key programmatic approach to scale up nutrition interventions. The private sector has emerged, in such areas as Initiative Against Malnutrition, the Scaling Up Nutrition (SUN) Business Network, and Food Security and Nutrition. Nutrition-sensitive interventions have also been integrated into private sector programs in economic development, agriculture, and social entrepreneurship and innovation.

There is now the global acknowledgment of the need for and benefits of engaging the private sector in improving nutrition which need to go beyond good intentions and operationalize alliances and partnerships that will lead to desired results. The contribution expected from the organized private sector for the implementation of this five year NMPFAN is N**22,242,895,579** with an average annual investment of **N4,448,579,116**.

The private sector is already incredibly influential in affecting children’s lives and wellbeing which call for adequate engagement for the implementation of nutrition programmes. Private sector had an important role to play in building partnerships and working to create a world without hunger in line with the UN's Sustainable Development Goals. The private sector has shown interest to support sustainable development and leverage existing contributions, and help bring proven interventions to scale. Government is to create appropriate incentives for the private sector to positively engage on public health nutrition goals and stakeholders will need to think creatively, engage with diverse partners, and adapt successful approaches. The successful implementation of programs is only assisted by the work and competencies found in the private sector due to their unique expertise that helps strengthen programming, and provides an important perspective on the effect of tackling undernutrition.

# MONITORING AND EVALUATION, ACCOUNTABILITY AND LEARNING (MEAL)

## Concept of MEAL

Monitoring and evaluation, accountability and learning are part of everyday programme management and are critical to the success of all projects. A MEAL system will allow the tracking of progress, make adjustments and discover any unplanned effects of programmes as well as evaluate the impact the project has made on the lives of the beneficiaries. In addition to this, a MEAL system also helps us to be accountable to our stakeholders through information sharing and developing a complaints or feedback mechanism which can help to guide programme implementation. This National Multisectoral Strategic Plan of Action for Food and Nutrition will institute a MEAL system for the purpose of providing accurate, reliable and timely information on the progress of implementation and reporting on how far the strategic objectives are being met, changes in the nutritional status of Nigerians especially women and children as well as being accountable to the stakeholders including the donor community. The NMPFAN MEAL system will have the following objectives

1. Collection of accurate, reliable and timely data to monitor the progress of implementation of the plan
2. Systematically measure results, incorporate and document experiential learning
3. Utilize effective feedback mechanisms to ensure greater accountability to program beneficiaries and key stakeholders
4. Facilitate decisions based on evidence and learning that will lead to improvement in programme delivery
5. Sharing lessons learned with the stakeholders, development community and policymakers

## Monitoring

NMPFAN implementation progress will be monitored through routine and on-going evaluation of activities in every sector. This will include monitoring using the sectoral routine data collection and reporting system existing in all relevant MDAs as well as community level food and nutrition information and data collection system. There are several nutrition-relevant information systems that collect nutrition-relevant routine data such as Food Security Early Warning System (FEWS), Commodity Price Index, National Health Management Information System (NHMIS), Growth Monitoring, Nutrition Surveillance, Education Information Management System (EIMS) etc. Other Community Level Food and Nutrition Information System including Growth Monitoring and Promotion, Nutrition Surveillance and Food Price Index. This will be complemented with a multisectoral annual review of operational achievements and progress, challenges of implementation, lessons learned and recommendations using such national platforms as NCFN meetings, National Nutrition Networking and Nutrition Week.

## Evaluation

Evaluation of NMPFAN will rely on annual joint review meetings to evaluate performance in addition to annual and periodic surveys such as the National Health and Nutrition Survey (NNHS) and others including Multi Indicator Cluster Survey (MICS) and National Demographic and Health Survey (NDHS).

### **Baseline data**

The annual National Health and Nutrition Survey (NNHS) 2013 and Multi Indicator Cluster Survey (MICS) 2016 have been used to set baseline data. NDHS 2023 and the proposed National Food Consumption and Nutrition Survey will provide further information and data to fill the data gap for baseline.

### **Mid-Term Evaluation**

For the purpose of mid-term evaluation, MICS 2023 and NNHS 2023 will be used to evaluate progress in the achievement of result. MFBNP and Development Partners will collaborate with the National Bureau of Statistics to ensure that critical indicators that are required to track the progress of implementation and result are included in the periodic health and nutrition survey.

### **End Term Evaluation**

National Demographic and Health Survey (2023) and NNHS (2025) will provide data that will serve the purpose of end of project evaluation.

MFBNP management will need to make budgetary provision for establishing collaboration and partnerships with the relevant State and Federal data producing bodies such as the National Bureau of Statistics (NBS), the National Population Commission (NPopC) especially to include in the data tool, some of the important data needed to measure progress of target achievement.

### **Accountability**

The implementation of NMPFAN will demonstrate accountability to beneficiaries and stakeholders through generation of regular updates and reports on the progress of implementation. MDAs will be required to adopt a reporting template with adjustments on peculiarities based on their mandate. Opportunity to present such updates will use the existing platforms such as the following:

#### **National Committee on Food and Nutrition**

MDAs will be required to present and submit quarterly updates on the progress of implementation and result at the quarterly meetings of the National Committee on Food and Nutrition to be called by the Ministry of Budget and National Planning. It is expected that a total of four updates will be generated in each year and will form the basis for an annual report.

#### **National Council on Nutrition**

The Secretariat of the National Committee on Food and Nutrition will compile reports on a biannual basis to present and submit to the biannual meeting of the National Council on Nutrition to be chaired by the Vice President of the Federation of Nigeria. These reports will present information on the level of implementation of interventions and achievement of result across the relevant sectors. The accountability report will also include reports on budget allocation, release and utilization. The concern, feedback and complaints of the stakeholders will be used to adjust implementation and influence decisions on programme policies, priorities and actions.

## Learning

NMPFAN will include learning by incorporating lessons learnt, recommendation and observations from accountability mechanism and joint review meetings into programme design. From a detailed trend analysis, observations are made followed by recommendations to re-design, fine-tune programmes and timelines of interventions aimed at different target groups

## Monitoring and Evaluation System

The M&E system will be established and domiciled in MFBNP with a robust food and nutrition information collection and management system. The M and E system will have a portal that will be horizontally linked with the M and E unit of the relevant MDAs at the national level as well as vertical link with M and E at the State and LGA levels. It will provide information on how and to what extent progress is being made towards achieving specified Strategic objectives and targets of the NMPFAN.

Data tools and instruments as well as guidelines for data collection and reporting will be developed for both quantitative and qualitative data by MFBNP M and E units in collaboration with other stakeholders especially the Donor community and other levels of government. Capacity building at inception and regular on- going training on data tool use, guidelines for data collection and analysis as well as reporting will be carried out for the M and E team and personnel at the national and state levels. Through regular collection of data on activity indicators, output and outcome and M and E report, the progress of implementation of NMPFAN will be monitored and evaluated while scorecards will be developed with lessons learnt. The NMPFAN Implementation M & E Logical Framework is presented in Annex III.

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|  | Annex I: NMPFAN Implementation Cost Matrix | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| S/N | **Activities** | | | **Indicators** | | **Lead Agency** | **Time Frame** | | | **Indicative Costing** | | | | | **Indicative Costing (Federal)** | | | | | | **Indicative Costing (States+FCT /LGAs)** | | | | | **Indicative Costing (Partners)** | | | | | **Indicative Costing (Organized Private Sector)** | | | | **Other Agencies/Organizations** | | | |
|  | **RESULT AREA 1. FOOD AND NUTRITION SECURITY N 21,409,929,770** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **Strategic Objective 1.1: Ensuring Food and Nutrition Security at the National, Community and Household** | | | | | | | | | | | **12,847,935,280** | | | | **2,308,653,769** | | | | | **7,959,214,713** | | | | | **728,593,250** | | | | | **1,851,473,548** | | | |  | | | |
| 1 | Empower Farmers cooperatives/clusters for commercial production of food crops by Government and Private sector | | 1. # of policy actions and initiatives developed to protect farmers and investors in farming from importation of food crops | | | FMARD | 2021-2025 | | | | | 4,651,627,151 | | | | 921,183,005 | | | | | 3030985868 | | | | | 233152759.6 | | | | | 466305518.1 | | | | NABG, MoC&I, Nigeria Custom Services, Organized Private Sector, BoA, BoI, AfDP | | | |
| 2. # of clustered or cooperative farmers groups formed | | |
| 3. # of cooperative farmers groups empowered | | |
| 4. # of commercial farms established | | |
| 2 | Facilitate the reactivation of prison farms in each geopolitical zone | | 1. # of prison farms established per geopolitical zone | | | FMI | 2021-2025 | | | | | 260,037,701 | | | | 233,022,951 | | | | | 0 | | | | | 13,507,375 | | | | | 13,507,375 | | | | FMARD, NBS, FMWR, office of VP, NPS | | | |
| 2. # of established farms that are functional | | |
| 3 | Scale-up the production and promote the consumption of Vitamin A, and micronutrient rich foods (orange flesh sweet potato, pro-vitamin A cassava, yellow maize, iron sorghum, and cowpea) | | 1. # of farmers that are cultivating improved varieties of Micronutrient rich foods 2. # of cottage industries utilizing improved varieties of micronutrient in final food products/processing | | | Organized Private Sector | 2021-2025 | | | | | 390,954,720 | | | | 38,663,782 | | | | | 78,286,875 | | | | | 19,571,719 | | | | | 254,432,344 | | | | FMITI Private Sector, Development Partners, FMWR | | | |
| 3. # of IEC Materials on Micronutrient rich foods produced and distributed | | |
| 4. # of households consuming Micronutrient rich foods | | |
| 5. # of Jingles produced and aired. | | |
| 4 | Review and disseminate existing legislation on fortification to cover staples food and promote hammer mill and household level fortification of cereal, root crops and legumes not presently covered, e.g industrially processed rice, Noodles and Palm oil | | 1. Existing legislations reviewed | | | SON | 2021-2025 | | | | | 2,791,250 | | | | 2,200,000 | | | | | 147,813 | | | | | 147,813 | | | | | 295,625 | | | | FMARD, NBS, FMITI, Organized Private Sector, FME, Nigeria Prisons Service, FMoH, Academia | | | |
| 2. Reviewed legislations disseminated | | |
| 3. # of staple crops covered by legislative extension | | |
| 5 | Support the production and diversification of fruits and vegetables around the homesteads, schools, orchards and farms. | | 1. # of home gardens/orchards established | | | FMARD | 2021-2025 | | | | | 1,527,807,558 | | | | 151,093,758 | | | | | 917,809,200 | | | | | 76,484,100 | | | | | 382,420,500 | | | | FMoE, FMoL, FMoWA, Ministry of Urban Planning | | | |
| 2. # of school farms/orchards established | | |
| 3. Proportion of established home and school gardening that are functional | | |
| 6 | Conduct Capacity building for food and nutrition teachers and food vendors on the need to provide nutritionally adequate meals using locally available foods through linkages of food vendors and school system | | 1. Training tools available | | | FME | 2021-2025 | | | | | 388,992,917 | | | | 56,273,698 | | | | | 313,147,500 | | | | | 19,571,719 | | | | | 0 | | | | FMoH, FMEnv, UBEB, SUBEB, TETFund, and others | | | |
| 2. # of trainings organized | | |
| 3. # of Teachers and food vendors trained | | |
| 7 | Provide starter packs for fruits and vegetable farming (in seven agro-ecological zones) for 1000 smallholder farmers by zone (including women for Household gardening) | | 1. # of starter packs distributed | | | FMARD | 2021-2025 | | | | | 247,299,826 | | | | 27,193,576 | | | | | 171,193,750 | | | | | 12,228,125 | | | | | 36,684,375 | | | | NIHORT, IITA, Related Research Institutes | | | |
| 2 # of farmers that received starter packs | | |
| 8 | Provide small ruminant starter packs (5 sheep/goats, concentrates, minerals and vitamins, vaccines and drugs) to vulnerable women farmers | | 1.# of starters pack distributed, | | | FMARD | 2021-2025 | | | | | 1,199,236,489 | | | | 118,599,458 | | | | | 840,495,469 | | | | | 60,035,391 | | | | | 180,106,172 | | | | FMWASD, FMHSDA, NEMA, SEMA, SMARD, SMEDA, | | | |
| 2. # of vulnerable women farmers supported, | | |
| 3. # of sheep/goats distributed | | |
| 4., # of concentrates distributed, | | |
| 5.# of minerals/vitamins, | | |
| 6.# of vaccines distributed, | | |
| 7. # of vet. Drugs distributed | | |
| 9 | Provide smoking kilns to clusters of small-scale fish processors /farmers including women fish farmers | | 1. # of farmers clusters provided with kiln | | | FMARD | 2021-2025 | | | | | 728,822,820 | | | | 69,200,670 | | | | | 476,393,775 | | | | | 36,645,675 | | | | | 146,582,700 | | | | FMT&I, BoI, Organized Private Sector | | | |
| 2. # of women supplied with Kilns | | |
| 10 | Provide improved planting materials (staple crops including Plantain, Banana and Pineapples) to farmers across the country to promote food security | | 1. # of improved planting materials distributed to farmers | | | FMARD | 2021-2025 | | | | | 512,953,027 | | | | 268,398,052 | | | | | 176,623,038 | | | | | 13,586,388 | | | | | 54,345,550 | | | | FMT&I , FMST, Organized Private Sector | | | |
| 2. # of farmers producing the improved crops | | |
| 3. tonnes of improved crops produced | | |
| 11 | Support water supply interventions in emergency settings and rural areas | | 1. # of functional water supply systems, | | | FMWR | 2021-2025 | | | | | 218,954,151 | | | | 21,360,658 | | | | | 142706411.3 | | | | | 10977416.25 | | | | | 43,909,665 | | | | FMoEnv, NEMA, Development Partners | | | |
| 12 | Construction of sanitation and hygiene facilities in IDPs camps, public places and institutions | | 1. # of sanitation and hygiene facilities constructed, | | | FMWR | 2021-2025 | | | | | 66,895,347 | | | | 6,351,616 | | | | | 43,726,028 | | | | | 3,363,541 | | | | | 13,454,163 | | | | FMoEnv, NEMA, OPS, Development Partners | | | |
| 2. # of functional water supply systems, | | |
| 3. # of functional toilet systems in both in emergency settings and rural areas | | |
| 13 | Advocate to relevant Banks to promote increased access to Micro-Credit facilities for farmers especially Women farmers to expand farm operations (interest rates and collaterals) | | 1. # of advocacy visits conducted | | | MFBNP | 2021-2025 | | | | | 31,375,150 | | | | 2,979,025 | | | | | 25,241,000 | | | | | 3,155,125 | | | | | 0 | | | | CBN, FMARD, BOI, BOA, FMWASD, BOI, BoA, and commercial banks. | | | |
| 2. # of banks to which advocacy visits were made | | |
| 3. # of women accessing micro credit | | |
| 4. # of banks granting micro credit facilities | | |
| 14 | Promote the formation of women farmers into sustainable cooperative groups for the provision of grants and revolving loans | | 1. # of women farmers’ cooperative groups established | | | FMARD/FMITI | 2021-2025 | | | | | 144,587,596 | | | | 13,728,383 | | | | | 101,779,388 | | | | | 14,539,913 | | | | | 14,539,913 | | | | BOI, BoA, FMWASD, and commercial banks. | | | |
| 2. # of cooperative groups that received grants | | |
| 3. # of cooperative groups that received revolving loan | | |
| 15 | Promote safe, quality and hygienic food along the food supply chain | | 1.# of food handlers sensitized on food hygiene | | | FMOH | 2021-2025 | | | | | 73,729,680 | | | | 14,080,080 | | | | | 55921500 | | | | | 3728100 | | | | | 0 | | | | FME, FMoEnv. NPHCDA | | | |
| 16 | Register and license food handlers / food operators engaged in quality and safe food processing and storage | | 1.# of food handlers licensed | | | NAFDAC | 2021-2025 | | | | | 369,462,275 | | | | 36,538,269 | | | | | 258,940,894 | | | | | 18,495,778 | | | | | 55,487,334 | | | | SMoH, SME. SMEnv | | | |
| 2.# of eateries and food regulated premises licensed | | |
| 17 | Promote awareness on improved food quality and safety through electronic and print media | | 1. # of media houses airing Food safety and hygiene messages | | | FMIC | 2021-2025 | | | | | 350,900,985 | | | | 34,702,635 | | | | | 245,932,050 | | | | | 35,133,150 | | | | | 35,133,150 | | | | FMOH, NOA | | | |
| 2. # of jingles aired | | |
| 3. # of jingles & messages produced | | |
| 4.# of states airing jingles and messages | | |
| 18 | Strengthen coordination platform for early warning mechanisms to cope with food emergencies at community level | | 1. # of coordinating meeting | | | FMARD | 2021-2025 | | | | | 108,850,557 | | | | 108,850,557 | | | | | 0 | | | | | 0 | | | | | 0 | | | | FMFBNP, FMOH, FMOE, FME, NEMA, FMOI, Development Partners | | | |
| 2. # of participating partners | | |
| 19 | Support effective implementation of Conditional Cash Transfer Programmes(CCT), food rations or food supplements in emergency situation | | 1. Proportion of affected population enrolled in CCT | | | NEMA | 2021-2025 | | | | | 1,540,801,266 | | | | 152,378,781 | | | | | 1,079,884,155 | | | | | 154,269,165 | | | | | 154,269,165 | | | | FMOH, FME, PARTNERS | | | |
| 2. proportion of affected population benefiting from food ration or supplements | | |
| 20 | Scale-up the activites on enforcement of Food Fortification and salt iodization programs | | 1. # of new food vehicle identified  2. # of Laboratory consumables procured  3. # of industry staff trained | | | NAFDAC | 2021-2025 | | | | | 31854814.86 | | | | 31854814.86 | | | | | 0 | | | | | 0 | | | | | 0 | | | | FME, FMOH, FMFBNP, SMOH, SPHCDA, Development partners | | | |
|  | **Strategy 1.2: Increasing Availability, Accessibility and Affordability to Food** | | | | | | | | | | | **741,817,216** | | | | **74,046,263** | | | | | **520,570,148** | | | | | **74,595,218** | | | | | **72,605,588** | | | |  | | | |
| 21 | Advocate for increase in import levies and excise duties on commodities that can be locally produced | | | 1. No of advocacy meeting held 2. % increase in import levies and excise duties. 3. % reduction in food import | | MOIA | | | 2021-2025 | | | 464,750 | | | | 110000 | | | | | 118250 | | | | | 118250 | | | | | 118,250 | | | | MoI, Nigeria Custom Service, FMARD | | | |
| 22 | Advocate for rehabilitation of the existing rural road network and construction of new ones for easy transportation of farm produce | | | 1. # of advocacy meeting with relevant stakeholders held | | FMoWHP | | | 2021-2025 | | | 1,818,438 | | | | 1,375,000 | | | | | 147,813 | | | | | 147,813 | | | | | 147,813 | | | | FMARD, MWH, | | | |
| 2. # of rural roads rehabilitated 3. # of new rural roads constructed | |
| 23 | Advocate for the establishment of uniform Receipt system for warehouses in government food storage centres | | | 1. # of advocacy conducted. 2. # of warehouse receipt systems established | | FMARD | | | 2021-2025 | | | 587,125 | | | | 55,000 | | | | | 413875 | | | | | 59125 | | | | | 59,125 | | | | FMITI | | | |
| 24 | Promote regulation for the establishment of commodity trading centres | | | 1. # of commodity market established | | FMIT&I | | | 2021-2025 | | | 587,125 | | | | 55,000 | | | | | 413875 | | | | | 59125 | | | | | 59,125 | | | | FMARD, FMoI, NEPC, MAN, NACCIMA | | | |
| 25 | Advocate for scale up of offtake mechanism for food crops t to increase availability of food products | | | 1. # of advocacy conducted 2. # of farmers accessing offtake mechanisms established | | FMARD | | | 2021-2025 | | | 587,125 | | | | 55,000 | | | | | 413875 | | | | | 59125 | | | | | 59,125 | | | | FMST, NASC, ANFA, BOA, CBN | | | |
| 26 | Promote access to agricultural inputs (including improved seeds, information on agricultural practices, and irrigation) to scale up production of fruits and vegetable. | | | 1. # of agricultural inputs accessed. 2. # of small holder farmers reached. 3. % increase in fruit and vegetable production | | FMARD | | | 2021-2025 | | | 453,953,052 | | | | 44,894,052 | | | | | 318,157,000 | | | | | 45451000 | | | | | 45,451,000 | | | | FMARD, FMB&NP | | | |
| 27 | Advocate for subsidized agricultural inputs at the point of manufacturing and import. | | | 1. # of advocacies carried out. # of Agricultural inputs subsidized. | | FMARD | | | 2021-2025 | | | 1,814,750 | | | | 170,000 | | | | | 1,279,250 | | | | | 182,750 | | | | | 182,750 | | | | ANFA, BOA, CBN, FMoF | | | |
| 28 | Train farmers on appropriate use of fertilizers, herbicides and pesticides | | | 1. # of trainings conducted. # of farmers trained. | | FMARD | | | 2021-2025 | | | 282,004,851 | | | | 27,332,211 | | | | | 199,626,210 | | | | | 28,518,030 | | | | | 26,528,400 | | | | FMST, | | | |
| 2. % of trained farmers using fertilizers, herbicides and pesticides appropriately | |
|  | **Strategy 1.3: Improving Food Harvesting, Processing and Preservation** | | | | | | | | | | | **1,353,008,742** | | | | **290,479,279** | | | | | **482,472,094** | | | | | **109,193,394** | | | | | **470,863,975** | | | |  | | | |
| 29 | Conduct regular Stakeholders meeting on reduction of postharvest losses | | | 1. # of meetings conducted; 2. # of stakeholders reached | | FMARD | | | 2021-2025 | | | 121,911,363 | | | | 12,051,738 | | | | | 85,446,375 | | | | | 12,206,625 | | | | | 12,206,625 | | | | FMST, FIIROITA, NISPRI | | | |
| % reduction in post-harvest food loss | |
| 30 | Promote and provide hermetic storage bags to local farmers for food preservation | | | 1. # of promotion activities carried out;  2. # of hermetic storage bags procured and distributed;  3 # of farmers using hermetic storage bags | | FMARD | | | 2021-2025 | | | 528,718,949 | | | | 52,288,086 | | | | | 79,405,144 | | | | | 26,468,381 | | | | | 370,557,338 | | | | FMST, FIIRO, IITA, CFN | | | |
| 4. % reduction in postharvest food losses (selected foods) | |
| 31 | Sensitization of Farmers on proper use of environmentally friendly agricultural technologies | | | 1. # of farmers sensitized;  2. % of sensitized farmers adopting recommended practices | | FMARD | | | 2021-2025 | | | 528,070,272 | | | | 104,576,172 | | | | | 317620575 | | | | | 52936762.5 | | | | | 52,936,763 | | | | FMST, Organised Private Sector, Professional Associations, FMoI | | | |
| 32 | Promotion and dissemination of research findings on food processing and preservation technology for use in households | | | 1. # of dissemination programmes on food processing and preservation 2. # of demonstrations carried out 3. # of LGAs reached | | FMST | | | 2021-2025 | | | 174,308,158 | | | | 121,563,283 | | | | | 0 | | | | | 17581625 | | | | | 35,163,250 | | | | FMoH; FMARD; Universities; Research Institutes (NISPRI; FIIRO) | | | |
|  | **Strategy 1.4: Improving Food Preparation and Quality** | | | | | | | | | | | **4,328,951,931** | | | | **397,560,831** | | | | | **3,221,565,375** | | | | | **319,813,575** | | | | | **390,012,150** | | | |  | | | |
| 33 | Promote the use of Aflasafe and activities to minimize aflatoxin contamination along the value chain, including GAP and modern drying and storage | | | 1. # of farmers groups sensitized on availability of aflasafe | | FMARD | | | 2021-2025 | | | 1,945,281,618 | | | | 385,233,018 | | | | | 975,030,375 | | | | | 195,006,075 | | | | | 390,012,150 | | | | FMST, Organised Private Sector, Professional Associations, FmoI | | | |
| 2. # of identified locations to purchase aflasafe | |
| 3. % farmers sensitized using aflasafe | |
| 4. % of sensitized farmers groups adopting GAP | |
| 34 | Strengthen LGAs for regular and sustained monitoring and inspection on the preparation of food in Restaurants, Eateries and Food vending | | | 1. # of LGAs carrying out regular monitoring and inspection | | SMoH | | | 2021-2025 | | | 2,383,670,313 | | | | 12,327,813 | | | | | 2,246,535,000 | | | | | 124,807,500 | | | | | 0 | | | | NAFDAC, PARTNERS, Professional Associations, SMoEv. LGA WES DEPT | | | |
| 2. # of restaurants and eateries monitored and inspected | |
|  | **Strategy 1.5: Improving Management of Food Security Crisis and Nutrition in Emergency** | | | | | | | | | | | **878,867,596** | | | | **319,602,888** | | | | | **485,764,048** | | | | | **73,500,660** | | | | | 0 | | | |  | | | |
| 35 | Strengthen Nutrition surveillance for early warning mechanisms to cope with emergency | | | 1. Availability of Surveillance system inplace in the Ministries of Agric and Health | | FMARD, FMOH | | | 2021-2025 | | | 294,565,018 | | | | 87,608,705 | | | | | 192,173,719 | | | | | 14,782,594 | | | | | 0 | | | | Organized Private Sector,NBS, SBS | | | |
| 2. # of states with Nutrition surveillance reports | |
| 3. # of early warning mechanisms disseminated to MDAs/Communities | |
| 36 | Training Emergency Managers on mainstreaming Nutrition in Feeding Programmes targeted at the vulnerable groups in Emergency Situations | | | # of emergency managers trained on mainstreaming Nutrition in Feeding programmes | | FMoH | | | 2021-2025 | | | 584,302,579 | | | | 231,994,183 | | | | | 293,590,329 | | | | | 58,718,066 | | | | | 0 | | | | NEMA, FMARD, Development Partners, FMFBNP | | | |
| # of training conducted | |
|  | |
|  | **Strategy 1.6: School-based Strategies** | | | | | | | | | | | **1,259,364,010** | | | | **268,446,277** | | | | | **805,377,436** | | | | | **67,324,697** | | | | | **118,215,600** | | | |  | | | |
| 37 | Review minimum standards, print and distribute SOPs (Nutrition and Health) for early- child care centers (ECCC) | | | 1. # of review meetings held 2. # of SOPs/Guidelines printed and distributed 3. # of states implementing the reviewed Minimum Standards | | FME, FMOH | | | 2021-2025 | | | 80,105,191 | | | | 34,912,258 | | | | | 36976036.48 | | | | | 8216896.9 | | | | | 0 | | | | FMoH, FMARD, UNICEF, UBEC, SUBEB, FMWASD | | | |
| 38 | Build the capacity of Agricultural Science teachers to strengthen the establishment of school farms and garden | | | 1. # of teachers trained 2. # of schools with functional farms and gardens | | FMARD | | | 2021-2025 | | | 1,179,258,819 | | | | 233,534,019 | | | | | 768401400 | | | | | 59107800 | | | | | 118,215,600 | | | | FME, MFBNP, SUBEB, UBEC | | | |
|  | **RESULT AREA 2: ENHANCING CARE GIVING CAPACITY N146,702,475,406.00** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **Strategic Objective 2.1 Ensure Optimal Nutrition in the First 1,000 Days of life** | | | | | | | | | | | | | **145,643,813,859** | | | | | **10,566,567,043** | | | **54,520,254,468** | | | | **74,995,058,552** | | | **5,561,933,796** | | | | |  | | | | |
| 39 | Advocate for legislation of the prolongation of maternity leave and enactment of paternity leave | | | 1. # of states with Legislation on 6 months Maternity leave 2. # of states with Legislation on Paternity leave | | FMWASD | | | 2021-2025 | | | | | 12,409,756 | | | | | 2,369,878 | | | 7529907.375 | | | | 1254985.1 | | | 1,254,985 | | | | | MB&NP, National House of Assembly, FMoH, Ministry of Labour and Productivity. | | | | |
| 40 | Provide Orientation for health staff to improve ANC attendance | | | 1. # of health workers trained | | NPHCDA | | | 2021-2025 | | | | | 3,620,817,449 | | | | | 358,083,655 | | | 2,900,207,816 | | | | 181,262,989 | | | 181,262,989 | | | | | FMOH, MB&NP, Development Partners | | | | |
| 2. # of pregnant women attending ANC | |
| 41 | Procure and distribute Iron-folic acid supplementation to pregnant women during MNCH Weeks | | | 1. # of states that procure and distribute Iron foliate to facilities. 2. # of pregnant women that receive 90+ tablets per pregnancy | | NPHCDA | | | 2021-2025 | | | | | 48,363,228,735 | | | | | 4,782,920,423 | | | 33895795354 | | | | 4,842,256,479 | | | 4842256479 | | | | | MB&NP, MWASD, FMoH | | | | |
| 42 | Procure and distribute Vitamin A Supplements during MNCHW and other supplementary activities for under 5 children | | | 1. # of states that procure and distribute Vitamin A supplement to facilities. 2. # of children that receive 90+ tablets per pregnancy 3. # of state that report a stock out of Vitamin A supplements | | NPHCDA | | | 2021-2025 | | | | | 86,870,776,470 | | | | | 4,292,944,196 | | | 13038605096 | | | | 69,539,227,178 | | | 0 | | | | | FMOH, MFBNP, Ministry of Information & Culture, CSOs, Development Partners | | | | |
| 43 | Implementation of baby friendly initiative in all health facilities and delivery maternities | | | 1. # of health facilities that have policies in place. 2. # of health facilities that provide IEC materials 3. # of mothers affirming received counseling during ANC | | NPHCDA | | | 2021-2025 | | | | | 768,077,975 | | | | | 75,959,690 | | | 538314221.1 | | | | 76902032.05 | | | 76,902,032 | | | | | FMOH, MFBNP, Ministry of Information & Culture, CSOs, Development Partners | | | | |
| 44 | 13. Establishment of crèches in workplaces to promote Exclusive Breastfeeding. | | | # of Creches established | | FMWASD | | | 2021-2025 | | | | | 2,297,056,626 | | | | | 340,963,057 | | | 1,380,771,931 | | | | 115,064,328 | | | 460,257,310 | | | | | FMoH, SMOH, SMWASD | | | | |
| # of workplaces with Creches | |
| 45 | Promote the establishment of Nutrition/food demonstration corner (optimal MIYCF practices) in the health facilities | | | 1. # of Nutrition/Food demonstration Corners established 2. # of health facilities with functional nutrition corners | | NPHCDA | | | 2021-2025 | | | | | 951,921,261 | | | | | 141,298,207 | | | 762939344.4 | | | | 47683709.43 | | | 0 | | | | | FMOH, MB&NP, Development Partners | | | | |
| 46 | Scale up implementation of C-IYCF for optimal infant and young child feeding | | | 1. # of C-IYCF groups/centres established. | | NPHCDA/FMoH | | | 2021-2025 | | | | | 1,636,586,361 | | | | | 324,100,684 | | | 1230455322 | | | | 82030355 | | | 0 | | | | | MB&NP, FMoH, CSOs, Development Partners | | | | |
| 47 | Conduct Social and Behaviour Change Communication activities on IYCF, and intra-household food distribution targeted at adolescents, pregnant women, and caregivers at all levels. | | | 1. # of dialogues conducted. 2. # of key messages developed and distributed targeted at adolescents, pregnant women, and caregivers. 3. # of Channels, Platforms and Frequency 4 # of reach | | FMIC/FMoH | | | 2021-2025 | | | | | 536,925,039 | | | | | 106,329,722 | | | 376770902 | | | | 53824414.7 | | | 0 | | | | | FMWASD, MB&NP, NPHCDA, MDAs, NOA | | | | |
| 48 | Promote awareness on Girl Child Education, end Child Marriage and adolescent nutrition and health related practices | | | 1. # of jingles and messages produced 2. # of communities reached with the messages | | FMWASD | | | 2021-2025 | | | | | 554,159,371 | | | | | 109,742,716 | | | 388864573.5 | | | | 55552081.63 | | | 0 | | | | | FMOI,FME, Development Partners | | | | |
| 49 | Scale – up activities in enforcing the provisions of International Code of Marketing of Breastmilk Substitutes (BMS) | | | 1. # of health workers trained  2. # of Traditional leaders trained  3. # of NAFDAC staff trained | | NAFDAC | | | 2021-2025 | | | | | 31854814.86 | | | | | 31854814.86 | | | 0 | | | | 0 | | | 0 | | | | | FMOH, NPHCDA,  FMI, NAO, Development partners | | | | |
|  | **Strategic Objective 2.2: Caring for the Socioeconomically Disadvantaged and Nutritionally Vulnerable** | | | | | | | | | | | | | **1,058,661,547** | | | | | **165,120,546** | | | **751,818,001** | | | | **77,223,000** | | | **64,500,000** | | | | |  | | | | |
| 50 | Engage traditional, religious and opinion leaders to support community level action on nutritional care of vulnerable groups and encourage utilization of PHC services | | | 1. # of dialogues conducted | | FMWASD | | | 2021-2025 | | | | | 897,806,731 | | | | | 133,265,730 | | | 719,568,001 | | | | 44,973,000 | | | 0 | | | | | FMoH, FMIYDC, CSOs and development partners | | | | |
| 2. # religious, traditional and opinion leaders reached 3. # of communities reached | |
| 4. # of pregnant and lactating mothers receiving nutritional care | |
| 51 | Support local production of RUTF through advocacy to potential industries in Nigeria | | | 1. # of relevant potential producers advocated to | | FMITI | | | 2021-2025 | | | | | 53,618,272 | | | | | 10,618,272 | | | 10,750,000 | | | | 10,750,000 | | | 21,500,000 | | | | | FMOH, FMIC, BOI, MFBNP | | | | |
| 2. # of potential producers committed to local production of RUTF | |
| 3. Report of the investment summit held to promote local production of RUTF | |
| 52 | Support local production of Premixes through advocacy to potential industries in Nigeria | | | 1. # of relevant potential producers advocated to | | FMITI | | | 2021-2025 | | | | | 53,618,272 | | | | | 10,618,272 | | | 10,750,000 | | | | 10,750,000 | | | 21,500,000 | | | | | FMOH, FMIC, BOI, MFBNP | | | | |
| 2. # of potential producers committed to local production of premixes | |
| 3. Report of the investment summit held to support local production of Premixes | |
| 53 | Support local production of Micro nutrient powder through advocacy to potential industries in Nigeria | | | 1. # of relevant potential producers advocated to | | FMITI | | | 2021-2025 | | | | | 53,618,272 | | | | | 10,618,272 | | | 10,750,000 | | | | 10,750,000 | | | 21,500,000 | | | | | FMOH, FMIC, BOI, MFBNP | | | | |
| 2. # of potential producers committed to local production of premixes | |
| 3. Report of the investment summit held to support local production of Premixes | |
|  | **RESULT AREA 3: ENHANCING PROVISION OF QUALITY HEALTH SERVICES 114,882,036,174.5** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **Strategic Objective 3.1: Reduce Morbidity and Mortality Associated with Malnutrition** | | | | | | | | | | | | **68,208,071,910** | | | | | **13,475,780,555** | | | | | | **46,025,333,478** | | | | **5,323,379,253** | | | | **3383578625** | | | |  | | |
| 54 | Promote regular monitoring of growth and development of Children under 5 at health facilities and communities. | | | 1. # of health facilities visited 2. # of Health facilities with required growth monitoring equipment. | | NPHCDA | | | 2021-2025 | | | | 614,804,166 | | | | | 91,258,311 | | | | | | 492,749,040 | | | | 30,796,815 | | | | 0 | | | | FMoH, SCOs, Partners, SMOH, SPCHDA | | |
| 3. # of health facilities with records of children monitored 4. # of children under 5 monitored | |
| 55 | Disseminate information on nutrition and key household practices through mass media | | | 1. # of handbills, billboards developed and disseminated 2. # of jingles on electronics media, 3. # of newspaper publication | | FMIC | | | 2021-2025 | | | | 27,903,750 | | | | | 5,328,750 | | | | | | 16931250 | | | | 2821875 | | | | 2,821,875 | | | | FMoH; FMWASD; NSN; CSOs, FBOs, CBOs, NGOs, SMoH, NOA, SMIC | | |
| 56 | Conduct annual assessment of Household consumption of iodized salt using Primary School children | | | 1. # of studies conducted annually | | FME | | | 2021-2025 | | | | 115,937,500 | | | | | 21,875,000 | | | | | | 82,304,688 | | | | 11,757,813 | | | | 0 | | | | FMoH, MFBNP, SCOs, NAFDAC, Partners | | |
| 2. # of LGAs sampled in each State | |
| 57 | Support distribution of Iron folate supplements to adolescent (boys and girls) in Schools and Communities (25% coverage) | | | 1. # of Iron folate supplements procured and distributed  2. # of adolescents reached | | FMoH | | | 2021-2025 | | | | 29,597,500,407 | | | | | 5,861,328,407 | | | | | | 20,769,150,500 | | | | 1,483,510,750 | | | | 1,483,510,750 | | | | FMoE; SUBEB | | |
| 3. # of schools and communities reached with iron folate supplements | |
| 58 | Sustain and scale up distribution of micronutrient powder (MNP) for children 6 - 23 months (50% coverage) | | | # of children 6 - 23 months that receive MNP; 2. # of states distributing MNP 3. # of LGAs distributing MNP | | FMoH | | | 2021-2025 | | | | 36,674,897,788 | | | | | 7,262,897,788 | | | | | | 23897250000 | | | | 3676500000 | | | | 1,838,250,000 | | | | NPHCDA, MB & NP, Development Partners | | |
| 59 | Scale up and strengthen CMAM sites | | | 1. # of functional CMAM sites established 2. # of CVs trained 3. # of SAM cases referred from communities to CMAM sites 4. # of SAM cases treated 5. # of trained CVs retrained | | NPHCDA | | | 2021-2025 | | | | 1,177,028,299 | | | | | 233,092,299 | | | | | | 766948000 | | | | 117992000 | | | | 58,996,000 | | | | FMoH, Development Partners | | |
|  | **Strategic Objective 3.2. Preventing and Managing Nutrition Related Diseases** | | | | | | | | | | | | **2,123,803,690** | | | | | **420,958,564** | | | | | | **1,385,087,930** | | | | **213,090,451** | | | | **104666746** | | | |  | | |
| 60 | Health Promotion activities to provide education and increasing services for prevention and management of DRNCD | | | 1. # of nutrition and lifestyle education materials developed, produced and distributed; 2. # of health facilities with activities to reduce DRNCD, 3. # of media houses airing nutrition and lifestyle education programmes, | | FMOH | | | 2021-2025 | | | | 535,299,391 | | | | | 106,379,791 | | | | | | 350023440 | | | | 53849760 | | | | 25,046,400 | | | | FMWASD, FMI, NAFDAC, | | |
| 61 | Training on hygiene promotion, Community Water Safety Plan and triggering on Community Led Total Sanitation (CLTS) | | | 1. # of States with functional WASH committees 2. # of Communities triggered on CLTS  3. # of Communities trained on water safety plan | | FMWR/FMoH | | | 2021-2025 | | | | 1,588,504,299 | | | | | 314,578,773 | | | | | | 1035064490 | | | | 159240690.6 | | | | 79,620,346 | | | | FMoH, NPHCDA, FMEVN FMWR; FMWASD, CSOs , Development Partners | | |
|  | **Strategic Objective 3.3: Preventing Micronutrient Deficiency** | | | | | | | | | | | | **44,037,203,842** | | | | | **4,426,507,272** | | | | | | **28,659,876,895** | | | | **2,240,710,865** | | | | **8710108810** | | | |  | | |
| 62 | Monitor and evaluate micronutrient supplementation programme performance at all level | | | 1. # of supportive supervision of micronutrient supplementation programme conducted 2. # of children reached with vitamin A , MNP 3. # of pregnant women reached 4. # of Adolescents reached | | FMoH/SMoH | | | 2021-2025 | | | | 720,329,308 | | | | | 142,650,108 | | | | | | 469364350 | | | | 72209900 | | | | 36,104,950 | | | | MFBNP, NPHCDA, Development Partners SPHCDA/SPHCB | | |
| 63 | Procure and distribute Zinc, L -ORS, de-worming tablet and RUTF for CMAM and routine services (50% Coverage) | | | 1. quantity of commodities procured 2. # of health facilities distributing listed commodities | | N/SPHCDA | | | 2021-2025 | | | | 43,316,874,534 | | | | | 4,283,857,164 | | | | | | 28,190,512,545 | | | | 2,168,500,965 | | | | 8,674,003,860 | | | | FMOH; Development Partners, SPHCDA, SMoH | | |
|  | 3. # of SAM children 6- 59 months reached 4. # of SAM children 6- 59 months with diarrhea treated 5.# of children dewormed | |
|  | **Strategic Objective 3.4: Protecting the Consumer through Improved Food Quality and Safety** | | | | | | | | | | | | **512,956,732** | | | | | **105,755,198** | | | | | | **334,274,663** | | | | **25,713,436** | | | | **47,213,436** | | | |  | | |
| 64 | Conduct awareness campaign on healthy living, good dietary habits and food quality and safety | | | # of platforms used in reaching the populace | | FMIC/FMoH/SMoH | | | 2021-2025 | | | | 428,946,173 | | | | | 84,946,173 | | | | | | 279,500,000 | | | | 21,500,000 | | | | 43,000,000 | | | | FMoH, CPC, FMARD, FMI, NAFDAC, Development Partners. | | |
| # of LGAs carrying out awareness campaign on healthy living, good dietary habits and food quality and safety | |
|
| 65 | Promotion of safe practices on Pesticide utilization for food stuff preservation | | | 1. # of trained wholesale food sellers | | NAFDAC/FMARD/SMARD | | | 2021-2025 | | | | 84,010,559 | | | | | 20,809,025 | | | | | | 54,774,663 | | | | 4,213,436 | | | | 4,213,436 | | | | FMoH; NAFDAC; FMI,FMST, CPC | | |
| 2. # of farmers and extension officers trained | |
|  | **RESULT AREA 4: IMPROVING CAPACITY TO ADDRESS FOOD AND NUTRITION INSECURITY 1,821,029,619.5** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **Strategic Objective 4.1: Assessing, Analysing and Monitoring Nutrition Situations** | | | | | | | | | | 1,791,305,170 | | | | | 346,752,162 | | | | | 1,125,324,319 | | | | | 117,159,563 | | | | | 202,069,126 | | | |  | | |
| 66 | Building the capacity of farmers on cultivation of underutilized crop varieties | 1. # of trainings conducted 2. # of farmers trained 3. # of seedlings provided to farmers 4. # of HHs cultivating functional foods and underutilized crops  5. # of messages produced and aired | | | FMARD | | | 2021-2025 | | | 1,684,068,627 | | | | | 325,515,619 | | | | | 1103824319 | | | | | 84909563 | | | | | 169,819,126 | | | | FMST, ; Research Institutes; Universities, FMIC | | |
| 67 | Promote linkages of members to existing capacity building opportunities | # of nutritionists that benefitted from the capacity building programmes | | | NSN | | | 2021-2025 | | | 107,236,543 | | | | | 21,236,543 | | | | | 21500000 | | | | | 32250000 | | | | | 32,250,000 | | | | Institutions, State NSN Chapter, MFBNP | | |
|  | **4.2: Providing a Conducive Macro Economic Environment** | | | | | | | | | | **19,539,974** | | | | | **16,959,974** | | | | | **0** | | | | | **2,580,000** | | | | |  | | | |  | | |
| 68 | Advocate for the creation of nutrition department and incorporate nutrition objectives into MDAs’ development policies, plans and programmes. | 1. # of MDAs with Nutrition department established | | | NCN / MFBNP | | | 2021-2025 | | | 2,123,654 | | | | | 2,123,654 | | | | | 0 | | | | | 0 | | | | | 0 | | | | MFBNP, MDAs; Civil Service Commission | | |
| 2. # of MDAs that have developed and incorporated nutrition objectives into their Policies, Plans and Programmes | | |
| 69 | Mid and Endline Review of implementation of the National Multisectorial Plan of Action for Nutrition | 1. # of review meetings held 2. # of stakeholders available  3. # report of the review meeting | | | MFBNP | | | 2021-2025 | | | 17,416,320 | | | | | 14,836,320 | | | | | 0 | | | | | 2580000 | | | | | 0 | | | | MDAs; Research Institutes; Universities | | |
|  | **Strategic Objective 4.3: Social Protection Programmes for the Vulnerable Groups** | | | | | | | | | | **10,184,476** | | | | | **9,112,163** | | | | | **0** | | | | | **1072312.5** | | | | | **0** | | | |  | | |
| 70 | Conduct stakeholders (consultation) meetings for nutrition related investment and sectoral policies including social protection policies | 1. #. of stakeholders and validation meetings conducted 2. # of MDAs with investment in nutrition | | | MFBNP | | | | 2021-2025 | | 10,184,476 | | | | | 9,112,163 | | | | | 0 | | | | | 1,072,313 | | | | | 0 | | | | MDAs | | |
|  | **RESULT AREA 5: RAISING AWARENESS AND UNDERSTANDING OF PROBLEM OF MALNUTRITION IN NIGERIA 4,587,151,944.5** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **Strategic Objective 5.1: Promote Advocacy, Communication and Social Mobilization** | | | | | | | | | | | | **241,205,892.00** | | | | | **118,924,642.0** | | | | | **64,500,000.00** | | | | **43,792,812.50** | | | | | **13,988,437.50** | | | | |  |
| 71 | 2day Annual review meeting of SCFN with NCFN | 1. # of N/SCFN that participated in review meeting. | | | MFBNP | | | | 2021-2025 | | | | 95,801,556.00 | | | | | 76,451,556.00 | | | | | 0 | | | | 19,350,000.00 | | | | | 0.00 | | | | | MDAs, SCFN |
| 2. report of review meetings organized | | |
| 72 | Develop advocacy strategy | Advocacy document developed and approved | | | MFBNP | | | | 2021-2025 | | | | 7,914,687.50 | | | | | 0 | | | | | 0 | | | | 7,914,688 | | | | | 0 | | | | | MDAs; CSOs |
| 73 | Conduct sustained advocacy to policy makers, traditional and religious leaders in Abuja, for improved nutrition funding | 1. # of policy makers reached at each level with knowledge of nutrition issues | | | MFBNP | | | | 2021-2025 | | | | 27,014,668.00 | | | | | 21,236,543.00 | | | | | 0 | | | | 5,778,125.00 | | | | | 0.00 | | | | | FMoH; CSOs |
| 2.   # of traditional and religious leaders reached at each level with knowledge of nutrition issues | | |
| 3.  # of reports produced | | |
| 74 | Collaboration with network providers like MTN, Airtel, GLO, 9mobile etc. to disseminate nutrition information to the general public | 1.        # of network providers disseminating nutrition information to their subscribers | | | FMIC | | | | 2021-2025 | | | | 3,238,437.50 | | | | | 0 | | | | | 0 | | | | 0 | | | | | 3,238,437.5 | | | | | FMoH; FMARD; NCC; CSOs |
| 2.        # of nutrition messages developed | | |
| 3. % of the public reached with nutrition messages | | |
| 75 | Conduct Annual Nutrition Week on topical issues in nutrition | Report of the Nutrition Week organized | | | MFBNP | | | | 2021-2025 | | | | 107,236,543.0 | | | | | 21,236,543.0 | | | | | 64500000 | | | | 10,750,000.00 | | | | | 10,750,000.00 | | | | | FMoH, MDAs, NCFN, Development Partners, SCFN, Universities |
|
|  | **Strategic Objective 5.2: Promoting Healthy Lifestyles and Dietary habits** | | | | | | | | | | | | **1,621,103,755** | | | | | **320,659,055** | | | | | **1,056,611,318.8** | | | | **83,965,293.8** | | | | | **159,868,087.5** | | | | |  |
|
| 76 | Promote dietary diversification through the consumption of locally produced staples | # of under-utilized crops integrated into the food system. # of massages and jingles produce and aired | | | FMARD | | | | 2021-2025 | | | | 1,567,953,755 | | | | | 310,509,055 | | | | | 1021673819 | | | | 78,590,294 | | | | | 157,180,588 | | | | | FMoH, NPHCDA |
| 77 | Review, publish and disseminate the Food Based Dietary Guidelines (FBDG) for healthy living | 1. Report of the review meeting 2. # of copies of the Food Based Dietary Guidelines for healthy living published 3. # of the Food Based Dietary Guidelines for healthy living disseminated 4.       # of participants at zonal dissemination meetings      5. # of zonal dissemination meetings held | | | FMoH | | | | 2021-2025 | | | | 53,150,000.00 | | | | | 10,150,000 | | | | | 34937500 | | | | 5,375,000 | | | | | 2,687,500 | | | | | FMARD; MFBNP; FMIC |
|  | **Strategic Objective 5.3: Research In Nutrition** | | | | | | | | | | | | **2,724,842,297.5** | | | | | **431,882,132.5** | | | | | **576,362,432.5** | | | | **1,146,793,391.25** | | | | | **569,804,341.3** | | | | |  |
|
| 78 | Review, update, publish and disseminate existing food composition table for Nigeria | 1. Report of the review meeting 2. # of copies of the food composition table published 3. # of the food composition table disseminated 4.       # of participants at dissemination meetings | | | ARCN/NUC/Research Institutes | | | | 2021-2025 | | | | 534,500,000.00 | | | | | 50,750,000 | | | | | 107500000 | | | | 322,500,000 | | | | | 53,750,000 | | | | | FMARD, MFBNP, NCFN, Universities, IITA, Research Institutes |
| 79 | Conduct the National Food Consumption and Nutrition Survey | Report of the National Food Consumption and Nutrition survey produced and published | | | FMARD | | | | 2021-2025 | | | | 593,768,567.50 | | | | | 56,377,465 | | | | | 119420245 | | | | 358,260,735 | | | | | 59,710,123 | | | | | FMoH, FMoE, NBS, Universities, Research Institutes, IITA, MFBNP |
| 80 | Provide small grants to conduct food and nutrition research on standardization of food recipes and portion sizes of locally available diets | 1. # of locally available diets standardizes | | | FMARD | | | | 2021-2025 | | | | 1,501,311,605.0 | | | | | 297,311,605 | | | | | 301,000,000 | | | | 451,500,000 | | | | | 451,500,000 | | | | | FMoE, FMST, IITA, Universities, Research Institutes. ARCN, NUC |
| 2. # of research findings published in a user friendly platforms | | |
| 3. # of research findings successfully disseminated to key stakeholders | | |
| 81 | Conduct assessment at all levels on determinants of low financial investments in Food & Nutrition programs compared to other life-saving interventions in partnership with private sector | 1. Detailed report of the assessment of public, private and bi & multi-lateral partners investments in nutrition published and disseminated | | | MFBNP | | | | 2021-2025 | | | | 95,262,125.00 | | | | | 27,443,062.50 | | | | | 48442187.5 | | | | 14,532,656 | | | | | 4,844,218.75 | | | | | MDAs, CS-SUNN, NSN |
|
|  | **RESULT AREA 6: RESOURCE ALLOCATION FOR FOOD AND NUTRITION SECURITY AT ALL LEVELS 5,342,963,943.9** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **6.1 Promote Adequate Budgetary Allocation and Tracking** | | | | | | | | | | | | **133,061,543** | | | | **38,999,043** | | | **26,875,000** | | | | | **40,312,500** | | | | | **26,875,000** | | |  | | | | |
| 82 | Advocate for the implementation of policy and costed national multisectorial plan of action for food and nutrition | | | 1. # of advocacy visits conducted to the identified four key stakeholders (Federal, State, Development Partners and Organized Private Sectors) | | MFBNP/NCFN | | | 2021-2025 | | | | 107,236,543 | | | | 21,236,543 | | | 26875000 | | | | | **32,250,000** | | | | | **26,875,000** | | | MDAs, CS-SUNN, NSN, Other Partners | | | | |
| 83 | Conduct regular budget tracking to evaluate budget performance of F &N in all sectors. | | | 1. # of MDAs tracking budget 2 # of Development partners tracking budget 3.# of MDAs at Federal, States & LGAs with Score card of lessons learnt applied at all levels | | MFBNP | | | 2021-2025 | | | | 25,825,000 | | | | 17,762,500 | | | 0 | | | | | 8,062,500 | | | | | 0 | | | MDAs, CS- SUNN, NSN | | | | |
|  | **6.2 Strengthening the coordination capacity** | | | | | | | | | | | | **2,691,508,249** | | | | **498,374,949** | | | **1,462,146,200** | | | | | **482,980,300** | | | | | **248,006,800** | | |  | | | | |
| 84 | Conduct bi-annual meeting of the National Council on Nutrition | | | # of meetings held and reports produced | | MFBNP | | | 2021-2025 | | | | 10,717,068 | | | | 2,654,568 | | | 2687500 | | | | | 2,687,500 | | | | | 2,687,500 | | | Office of the Vice President, MDAs, Development Partners, SUN Nigeria | | | | |
| 85 | Organize quarterly Nutrition Partners meetings at all levels | | | # of meetings held and reports produced | | MFBNP | | | 2021-2025 | | | | 64,302,407 | | | | 15,927,407 | | | 16125000 | | | | | 16,125,000 | | | | | 16,125,000 | | | MDAs, Development Partners | | | | |
| 86 | Conduct quarterly meetings of National/States/LGAs Committee on Food and Nutrition at all levels | | | # of meetings held and reports produced | | MFBNP | | | 2021-2025 | | | | 401,150,461 | | | | 79,441,661 | | | 281495200 | | | | | 20,106,800 | | | | | 20,106,800 | | | MDAs, Development Partners | | | | |
| 87 | Organize annual National Nutrition Networking NNN meeting of all nutrition stakeholders | | | # of meetings held and reports produced | | MFBNP | | | 2021-2025 | | | | 387,147,086 | | | | 57,466,086 | | | 232716000 | | | | | 77,572,000 | | | | | 19,393,000 | | | FMoH, FMARD, FMoE, FWASD, Private Sector | | | | |
| 88 | Build the capacity of Nutrition desk officers in MDAs/LGAs and leaders of Professional Associations in Nutrition through training &retraining on Nutrition Programming, resource mobilization and allocation | | | 1. Report of the capacity building conducted 2. # of nutrition desk officers trained by MDA/State and LGAs 3. # of training conducted by state and LGAs 4. programs areas covered in the training | | MFBNP | | | 2021-2025 | | | | 1,699,270,264 | | | | 336,514,264 | | | 851722500 | | | | | 340,689,000 | | | | | 170,344,500 | | | MDAs, UNICEF and Development Partners | | | | |
| 89 | Strengthening the SUN Networks at states | | | # of states with functional SUN Networks | | SUN Movement (FMoH) | | | 2021-2025 | | | | 128,920,963 | | | | 6,370,963 | | | 77400000 | | | | | 25,800,000 | | | | | 19,350,000 | | | NSN, MFBNP, Development partners, institutions | | | | |
|  | **6.3 Strengthening capacity to mobilise resources** | | | | | | | | | | | | **2,518,394,152** | | | | **305,181,760** | | | **1,697,406,913** | | | | | **268,693,966** | | | | | **247,111,513** | | |  | | | | |
| 90 | Conduct regular and periodic monitoring on food and nutrition activities in collaboration with partners and the private sector at all levels | | | *#* of monitoring reports at all levels | | NCFN/SCFN/LGFN | | | 2021-2025 | | | | 793,752,158 | | | | 78,498,758 | | | 556308200 | | | | | 79,472,600 | | | | | 79,472,600 | | | MDAs, Universities, Research Institutes, NSN, Development partners and Private Sector | | | | |
| 91 | Establish a nutrition Portal and develop tools for the collection of core Nutrition data in partnership with key stakeholders | | | 1. Nutrition dashboard for Nigeria and states developed and Hosted | | NBS/MFBNP | | | 2021-2025 | | | | 104,197,091 | | | | 66,427,799 | | | 5395613.125 | | | | | 26,978,066 | | | | | 5,395,613 | | | FMoH, FMARD, FMOE, UNICEF, Universities and Research Institutes | | | | |
| 92 | Build the capacity of Nutrition implementers (OICs, NFPs, M & E, agric extension officers and other nutrition officers/ workers at all levels on the use and management of level appropriate nutrition dashboard | | | 1. Report of the training 2.# of nutrition implementers trained | | NBS/MFBNP | | | 2021-2025 | | | | 1,620,444,903 | | | | 160,255,203 | | | 1135703100 | | | | | 162,243,300 | | | | | 162,243,300 | | | FMoH, FMARD, FMIC, FMoE, Universities, Development Partners | | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Annex II: Federal Government 5-Year NMPFAN Implementation Activity** **Indicative Cost Matrix** | | | | | | | |
| S/N | **Activities** | **2021** | **2022** | **2023** | **2024** | **2025** | **Total** |
|  | **RESULT AREA 1. FOOD AND NUTRITION SECURITY** | | | | | | |
|  | **Strategic Objective 1.1: Ensuring Food and Nutrition Security at the National, Community and Household** | | | | | | |
|
| 1 | Empower Farmers cooperatives/clusters for commercial production of food crops by Government and Private sector | 173,509,030 | 178,714,301 | 184075729.9 | 189598001.8 | 195285941.9 | **921,183,005** |
|
| 2 | Facilitate the reactivation of prison farms in each geopolitical zone | 0 | 75,390,000 | 77651700 | 79981251 | 0 | **233,022,951** |
| 3 | Scale-up the production and promote the consumption of Vitamin A, and micronutrient rich foods (orange flesh sweet potato, pro-vitamin A cassava, yellow maize, iron sorghum, and cowpea) | 7,282,500 | 7500975 | 7726004.25 | 7957784.378 | 8196517.909 | **38,663,782** |
| 4 | Review and disseminate existing legislation on fortification to cover staples food and promote hammer mill and household level fortification of cereal, root crops and legumes not presently covered, e.g industrially processed rice, Noodles and Palm oil | 0 | 2,200,000 | 0 | 0 | 0 | **2,200,000** |
|
| 5 | Support the production and diversification of fruits and vegetables around the homesteads, schools, orchards and farms. | 28,459,200 | 29,312,976 | 30,192,365 | 31,098,136 | 32,031,080 | **151,093,758** |
| 6 | Conduct Capacity building for food and nutrition teachers and food vendors on the need to provide nutritionally adequate meals using locally available foods through linkages of food vendors and school system | 18,206,250 | 18752437.5 | 0 | 19315010.63 | 0 | **56,273,698** |
| 7 | Provide starter packs for fruits and vegetable farming (in seven agro-ecological zones) for 1000 smallholder farmers by zone (including women for Household gardening) | 6,500,000 | 6695000 | 6895850 | 7102725.5 | 0 | **27,193,576** |
| 8 | Provide small ruminant starter packs (5 sheep/goats, concentrates, minerals and vitamins, vaccines and drugs) to vulnerable women farmers | 22,338,750 | 23,008,913 | 23699179.88 | 24,410,155 | 25,142,460 | **118,599,458** |
| 9 | Provide smoking kilns to clusters of small-scale fish processors /farmers including women fish farmers | 0 | 34,089,000 |  | 35,111,670 | 0 | **69,200,670** |
| 10 | Provide improved planting materials (staple crops including Plantain, Banana and Pineapples) to farmers across the country to promote food security | 50,554,000 | 52070620 | 53632738.6 | 55241720.76 | 56898972.38 | **268,398,052** |
| 11 | Support water supply interventions in emergency settings and rural areas | 0 | 5,105,775 | 5,258,948 | 5416716.698 | 5579218.198 | **21,360,658** |
| 12 | Construction of sanitation and hygiene facilities in IDPs camps, public places and institutions | 3,128,875 | 3222741.25 | 0 | 0 | 0 | **6,351,616** |
| 13 | Advocate to relevant Banks to promote increased access to Micro-Credit facilities for farmers especially Women farmers to expand farm operations (interest rates and collaterals) | 0 | 1,467,500 | 0 | 1511525 | 0 | **2,979,025** |
| 14 | Promote the formation of women farmers into sustainable cooperative groups for the provision of grants and revolving loans | 0 | 0 | 6,762,750 | 6965632.5 | 0 | **13,728,383** |
| 15 | Promote safe, quality and hygienic food along the food supply chain | 6,936,000 | 7144080 | 0 | 0 | 0 | **14,080,080** |
| 16 | Register and license food handlers / food operators engaged in quality and safe food processing and storage | 6,882,150 | 7088614.5 | 7301272.935 | 7520311.123 | 7745920.457 | **36,538,269** |
| 17 | Promote awareness on improved food quality and safety through electronic and print media | 6,536,400 | 6732492 | 6934466.76 | 7142500.763 | 7356775.786 | **34,702,635** |
| 18 | Strengthen coordination platform for early warning mechanisms to cope with food emergencies at community level | 20,502,500 | 21117575 | 21751102.25 | 22403635.32 | 23075744.38 | **108,850,557** |
| 19 | Support effective implementation of Conditional Cash Transfer Programmes (CCT), food rations or food supplements in emergency situation | 28,701,240 | 29562277.2 | 30449145.52 | 31362619.88 | 32303498.48 | **152,378,781** |
| 20 | Scale-up the activites on enforcement of Food Fortification and salt iodization programs | 6000000 | 6180000 | 6365400 | 6556362 | 6753052.86 | **31854814.86** |
|  | **Subtotal Objective 1.1** | 385536895 | 515355277 | 468696653 | 538695758 | 400369181.9 | 2308653769 |
|  |  |  |  |  |  |  |  |
|  | **Strategy 1.2: Increasing Availability, Accessibility and Affordability to Food** | | | | | | |
| 21 | Advocate for increase in import levies and excise duties on commodities that can be locally produced | 110,000 |  | 0 | 0 | 0 | **110,000** |
| 22 | Advocate for rehabilitation of the existing rural road network and construction of new ones for easy transportation of farm produce | 0 | 1,375,000 | 0 | 0 | 0 | **1,375,000** |
| 23 | Advocate for the establishment of uniform Receipt system for warehouses in government food storage centres | 0 | 50,000 | 0 | 0 | 0 | **50,000** |
| 24 | Promote regulation for the establishment of commodity trading centres | 50,000 | 0 | 0 | 0 | 0 | **50,000** |
| 25 | Advocate for scale up of off take mechanism for food crops t to increase availability of food products | 0 | 0 | 50,000 | 0 | 0 | **50,000** |
| 26 | Promote access to agricultural inputs (including improved seeds, information on agricultural practices, and irrigation) to scale up production of fruits and vegetable. | 8,456,000 | 8709680 | 8970970.4 | 9240099.512 | 9517302.497 | **44,894,052** |
| 27 | Advocate for subsidized agricultural inputs at the point of manufacturing and import. | 0 | 170,000 | 0 | 0 | 0 | **170,000** |
| 28 | Train farmers on appropriate use of fertilizers, herbicides and pesticides | 0 | 8,842,800 | 9108084 | 9381326.52 | 0 | **27,332,211** |
|  | **SubtotalObjective 1.2** | **8,616,000** | **19,147,480** | **18,129,054** | **18,621,426** | **9,517,302** | **74,031,263** |
|  | **Strategy 1.3: Improving Food Harvesting, Processing and Preservation** | | | | | | |
| 29 | Conduct regular Stakeholders meeting on reduction of postharvest losses | 2,270,000 | 2338100 | 2408243 | 2480490.29 | 2554904.999 | **12,051,738** |
| 30 | Promote and provide hermetic storage bags to local farmers for food preservation | 9,848,700 | 10144161 | 10448485.83 | 10761940.4 | 11084798.62 | **52,288,086** |
| 31 | Sensitization of Farmers on proper use of environmentally friendly agricultural technologies | 19,697,400 | 20,288,322 | 20,896,972 | 21,523,881 | 22,169,597 | **104,576,172** |
| 32 | Promotion and dissemination of research findings on food processing and preservation technology for use in households | 22,897,000 | 23583910 | 24291427.3 | 25020170.12 | 25770775.22 | **121,563,283** |
|  | **Subtotal Objective 1.3** | **54,713,100** | **56,354,493** | **58,045,128** | **59,786,482** | **61,580,076** | **290,479,279** |
|  |  |  |  |  |  |  |  |
|  | **Strategy 1.4: Improving Food Preparation and Quality** | | | | | | |
| 33 | Promote the use of Aflasafe and activities to minimize aflatoxin contamination along the value chain, including GAP and modern drying and storage | 72,560,400 | 74737212 | 76979328.36 | 79288708.21 | 81667369.46 | **385,233,018** |
| 34 | Strengthen LGAs for regular and sustained monitoring and inspection on the preparation of food in Restaurants, Eateries and Food vending | 2,322,000 | 2,391,660 | 2,463,410 | 2,537,312 | 2,613,431 | **12,327,813** |
|  | **Subtotal Objective 1.4** | **74,882,400** | **77,128,872** | **79,442,738** | **81,826,020** | **84,280,800** | **397,560,831** |
|  | **Strategy 1.5: Improving Management of Food Security Crisis and Nutrition in Emergency** | | | | | | |
|
| 35 | Strengthen Nutrition surveillance for early warning mechanisms to cope with emergency | 16,501,500 | 16,996,545 | 17,506,441 | 18,031,635 | 18,572,584 | **87,608,705** |
| 36 | Training Emergency Managers on mainstreaming Nutrition in Feeding Programmes targeted at the vulnerable groups in Emergency Situations | *43,697,165* | 45008079.95 | 46358322.35 | 47749072.02 | 49181544.18 | **231,994,183** |
|  | **Subtotal Objective 1.5** | **60,198,665** | **62,004,625** | **63,864,763** | **65,780,707** | **67,754,128** | **319,602,888** |
|  | **Strategy 1.6: School-Based Strategies** | | | | | | |
| 37 | Review minimum standards, print and distribute SOPs (Nutrition and Health) for early- child care centers (ECCC) | 0 | 17,198,156.50 | 17714101.2 | 0 | 0 | **34,912,258** |
| 38 | Build the capacity of Agricultural Science teachers to strengthen the establishment of school farms and garden | 43,987,200 | 45306816 | 46666020.48 | 48066001.09 | 49507981.13 | **233,534,019** |
|  | **Subtotal Objective 1.6** | **43987200** | **62504972.5** | **64380121.68** | **48066001.09** | **49507981.13** | **268446277** |
|  |  |  |  |  |  |  |  |
|  | **RESULT AREA 2: ENHANCING CARE GIVING CAPACITY** | | | | | | |
|
|  | **Strategic Objective 2.1 Ensure Optimal Nutrition in the First 1,000 Days of life** | | | | | | |
| 39 | Advocate for legislation of the prolongation of maternity leave and enactment of paternity leave | 1,167,427.50 | 0 | 1202450.325 | 0 | 0 | **2,369,878** |
| 40 | Provide Orientation for health staff to improve ANC attendance | 67446693.4 | 69470094.2 | 71554197.03 | 73700822.94 | 75911847.63 | **358,083,655** |
| 41 | Procure and distribute Iron-folic acid supplementation to pregnant women during MNCH Weeks | 900,884,926.40 | 927911474.2 | 955748818.4 | 984421283 | 1013953921 | **4,782,920,423** |
| 42 | Procure and distribute Vitamin A Supplements during MNCHW for under 5 children | 808,595,664 | 832,853,534 | 857,839,140 | 883,574,314 | 910,081,544 | **4,292,944,196** |
| 43 | Implementation of baby friendly initiative in all health facilities and delivery maternities | 14307354.8 | 14,736,575 | 15,178,673 | 15,634,033 | 16,103,054 | **75,959,690** |
| 44 | 13. Establishment of crèches in workplaces to promote Exclusive Breastfeeding. | 64,221,950.40 | 66148608.9 | 68133067.18 | 70177059.2 | 72,282,371 | **340,963,057** |
| 45 | Promote the establishment of Nutrition/food demonstration corner (optimal MIYCF practices) in the health facilities | 26,614,163.20 | 27412588.1 | 28234965.74 | 29082014.71 | 29954475.15 | **141,298,207** |
| 46 | Scale up implementation of C-IYCF for optimal infant and young child feeding | 61,045,845.40 | 62877220.76 | 64763537.38 | 66706443.51 | 68707636.81 | **324,100,684** |
| 47 | Conduct Social and Behaviour Change Communication activities on IYCF, and intra-household food distribution targeted at adolescents, pregnant women, and caregivers at all levels. | 20,027,689.20 | 20,628,519.88 | 21,247,375.47 | 21,884,796.74 | 22,541,340.64 | **106,329,722** |
| 48 | Promote awareness on Girl Child Education, end Child Marriage and adolescent nutrition and health related practices | 20,670,542.20 | 21290658.47 | 21929378.22 | 22587259.57 | 23264877.35 | **109,742,716** |
| 49 | Scale – up activities in enforcing the provisions of International Code of Marketing of Breastmilk Substitutes (BMS) | 6000000 | 6180000 | 6365400 | 6556362 | 6753052.86 | 31854814.86 |
|  | **Subtotal Objective 2.1** | **1,984,982,256.50** | **2,043,329,273.51** | **2,105,831,602.75** | **2,167,768,026.67** | **2,232,801,067.55** | **10,534,712,227.65** |
|  | **Strategic Objective 2.2: Caring for the Socioeconomically Disadvantaged and Nutritionally Vulnerable** | | | | | | |
| 50 | Engage traditional, religious and opinion leaders to support community level action on nutritional care of vulnerable groups and encourage utilization of PHC services | 25,101,209.40 | 25854245.68 | 26629873.05 | 27428769.24 | 28251632.32 | **133,265,730** |
| 51 | Support local production of RUTF through advocacy to potential industries in Nigeria | 2,000,000 | 2060000 | 2121800 | 2185454 | 2251017.62 | **10,618,272** |
| 52 | Support local production of Premixes through advocacy to potential industries in Nigeria | 2,000,000 | 2060000 | 2121800 | 2185454 | 2251017.62 | **10,618,272** |
| 53 | Support local production of Micro nutrient powder through advocacy to potential industries in Nigeria | 2,000,000 | 2060000 | 2121800 | 2185454 | 2251017.62 | **10,618,272** |
|  | **Subtotal Objective 2.2** | **31,101,209.40** | **32,034,245.68** | **32,995,273.05** | **33,985,131.24** | **35,004,685.18** | **165,120,546.00** |
|  |  |  |  |  |  |  |  |
|  | **RESULT AREA 3: ENHANCING PROVISION OF QUALITY HEALTH SERVICES** | | | | | | |
|  | **Strategic Objective 3.1: Reduce Morbidity and Mortality Associated with Malnutrition** | | | | | | |
|
| 54 | Promote regular monitoring of growth and development of Children under 5 at health facilities and communities. | 17,188,920 | 17704587.6 | 18235725.23 | 18782796.98 | 19346280.89 | **91,258,311** |
| 55 | Disseminate information on nutrition and key household practices through mass media | 0 | 2,625,000 | 0 | 2703750 | 0 | **5,328,750** |
| 56 | Conduct annual assessment of Household consumption of iodized salt using Primary School children | 0 | 21,875,000 | 0 | 0 | 0 | 21,875,000 |
|
| 57 | Support distribution of Iron folate supplements to adolescent (boys and girls) in Schools and Communities (25% coverage) | 1,104,008,000 | 1137128240 | 1171242087 | 1206379350 | 1242570730 | **5,861,328,407** |
| 58 | Sustain and scale up distribution of micronutrient powder (MNP) for children 6 - 23 months (50% coverage) | 1,368,000,000 | 1409040000 | 1451311200 | 1494850536 | 1539696052 | **7,262,897,788** |
| 59 | Scale up and strengthen CMAM sites | 43,904,000 | 45221120 | 46577753.6 | 47975086.21 | 49414338.79 | **233,092,299** |
|  | **Subtotal Objective 3.1** | **2,533,100,920** | **2,633,593,948** | **2,687,366,766** | **2,770,691,519** | **2,851,027,402** | **13,475,780,555** |
|  | **Strategic Objective 3.2. Preventing and Managing Nutrition Related Diseases** | | | | | | |
| 60 | Health Promotion activities to provide education and increasing services for prevention and management of DRNCD | 20,037,120 | 20638233.6 | 21257380.61 | 21895102.03 | 22551955.09 | **106,379,791** |
| 61 | Training on hygiene, WASH, water safety plan on community led total sanitation | 59,252,350 | 61029920.5 | 62860818.12 | 64746642.66 | 66689041.94 | **314,578,773** |
|  | **Subtotal Objective 3.2** | **79,289,470** | **81,668,154** | **84,118,199** | **86,641,745** | **89,240,997** | **420,958,564** |
|  | **Strategic Objective 3.3: Preventing Micronutrient Deficiency** | | | | | | |
| 62 | Monitor and evaluate micronutrient supplementation programme performance at all level | 26,868,800 | 27674864 | 28505109.92 | 29360263.22 | 30241071.11 | **142,650,108** |
| 63 | Procure and distribute Zinc, L -ORS, de-worming tablet and RUTF for CMAM and routine services (50% Coverage) | 806,884,080 | 831,090,602 | 856,023,320 | 881,704,020 | 908,155,141 | **4,283,857,164** |
|
|  | **Subtotal Objective 3.3** | **833,752,880** | **858,765,466** | **884,528,430** | **911,064,283** | **938,396,212** | **4,426,507,272** |
|  | **Strategic Objective 3.4: Protecting the Consumer through Improved Food Quality and Safety** | | | | | | |
|
| 64 | Conduct awareness campaign on healthy living, good dietary habits and food quality and safety | 16,000,000 | 16480000 | 16974400 | 17483632 | 18008140.96 | **84,946,173** |
| 65 | Promotion of safe practices on Pesticide utilization for food stuff preservation | 3,919,475 | 4037059.25 | 4158171.028 | 4282916.158 | 4411403.643 | **20,809,025** |
|  | **Subtotal Strategy 3.4** | **19,919,475** | **20,517,059** | **21,132,571** | **21,766,548** | **22,419,545** | **105,755,198** |
|
|  |  |  |  |  |  |  |  |
|  | **RESULT AREA 4: IMPROVING CAPACITY TO ADDRESS FOOD AND NUTRITION INSECURITY** | | | | | | |
|
|  | **Strategic Objective 4.1: Assessing, Analysing and Monitoring Nutrition Situations** | | | | | | |
| 66 | Building the capacity of farmers on cultivation of underutilised crop varieties | 105,314,186.60 | 0 | 108473612.2 | 111727820.6 | 0 | **325,515,619** |
| 67 | Promote linkages of members to existing capacity building opportunities | 4,000,000 | 4120000 | 4243600 | 4370908 | 4502035.24 | **21,236,543** |
|  | **Subtotal Objective 4.1** | **109,314,186.60** | **4,120,000.00** | **112,717,212.20** | **116,098,728.60** | **4,502,035.24** | **346,752,162.00** |
|  | **Strategic Objective 4.2: Providing a Conducive Macro Economic Environment** | | | | | | |
| 68 | Advocate for the creation of nutrition department and incorporate nutrition objectives into MDAs’ development policies, plans and programmes. | 400,000 | 412000 | 424360 | 437090.8 | 450203.524 | **2,123,654** |
| 69 | Mid and Endline Review of implementation of the National Multi-sectoral Plan of Action for Nutrition | 0 | 0 | 4,800,000 | 4944000 | 5092320 | **14,836,320** |
|  | **Subtotal Objective 4.2** | **400,000** | **412,000** | **5,224,360** | **5,381,091** | **5,542,524** | **16,959,974** |
|  | **Strategic Objective 4.3: Social Protection Programmes for the Vulnerable Groups** | | | | | | |
| 70 | Conduct stakeholders (consultation) meetings for nutrition related investment and sectoral policies including social protection policies | 0 | 4,488,750 | 0 | 4,623,413 | 0 | **9,112,163** |
|  | **Subtotal Objective 4.3** | **0** | **4488750** | **0** | **4623413** | **0** | **9112163** |
|  | **RESULT AREA 5: RAISING AWARENESS AND UNDERSTANDING OF PROBLEM OF MALNUTRITION IN NIGERIA** | | | | | | |
|  | | | | | | |
|  | **Strategic Objective 5.1: Promote Advocacy, Communication and Social Mobilization** | | | | | | |
| 71 | 2day Annual review meeting of SCFN with NCFN | 14,400,000 | 14832000 | 15276960 | 15735268.8 | 16207326.86 | **76,451,556** |
| 72 | Conduct sustained advocacy to policy makers, traditional and religious leaders in Abuja, for improved nutrition funding | 4,000,000 | 4120000 | 4243600 | 4370908 | 4502035.24 | **21,236,543** |
| 73 | Conduct Annual Nutrition Week on topical issues in nutrition | 4,000,000 | 4120000 | 4243600 | 4370908 | 4502035.24 | **21,236,543** |
|  | **Subtotal Objective 5.1** | **22,400,000** | **23,072,000** | **23,764,160** | **24,477,085** | **25,211,397** | **118,924,642** |
|  | **Strategic Objective 5.2: Promoting Healthy Lifestyles and Dietary habits** | | | | | | |
| 74 | Promote dietary diversification through the consumption of locally produced staples | 58,485,800 | 60240374 | 62047585.22 | 63909012.78 | 65826283.16 | **310,509,055** |
| 75 | Review, publish and disseminate the Food Based Dietary Guidelines (FBDG) for healthy living | 0 | 5,000,000 | 5150000 | 0 | 0 | **10,150,000** |
|  | **Subtotal Objective 5.2** | **58,485,800** | **65,240,374** | **67,197,585** | **63,909,013** | **65,826,283** | **320,659,055** |
|
|  | **Strategic Objective 5.3: Research In Nutrition** | | | | | | |
|
| 76 | Review, update, publish and disseminate existing food composition table for Nigeria | 0 | 0 | 25,000,000 | 25,750,000 | 0 | 50,750,000 |
| 77 | Conduct the National Food Consumption and Nutrition Survey | 27,772,150 | 28605314.5 | 0 |  | 0 | **56,377,465** |
| 78 | Provide small grants to conduct food and nutrition research on standardization of food recipes and portion sizes of locally available diets | 56,000,000 | 57680000 | 59,410,400 | 61192712 | 63028493.36 | **297,311,605** |
| 79 | Conduct assessment at all levels on determinants of low financial investments in Food & Nutrition programs compared to other life-saving interventions in partnership with private sector | 0 | 13,518,750 | 13924312.5 |  | 0 | **27443062.5** |
|  | **Subtotal Objective 5.3** | **83772150** | **99804064.5** | **98334712.5** | **86942712** | **63028493.36** | **431882132.5** |
|  | **RESULT AREA 6:RESOURCE ALLOCATION FOR FOOD AND NUTRITION SECURITY AT ALL LEVELS** | | | | | | |
|  | **6.1 Promote Adequate Budgetary Allocation and Tracking** | | | | | | |
|
| 80 | Advocacte for the implementation of policy and costed National Multi-sectoral Plan of Action for Food and Nutrition | 4,000,000 | 4,120,000 | 4,243,600 | 4,370,908 | 4,502,035 | **21,236,543** |
|
| 81 | Conduct regular budget tracking to evaluate budget performance of F &N in all sectors. | 0 | 8,750,000 | 0 | 9012500 | 0 | **17,762,500** |
|  | **Subtotal Objective 6.1** | **4,000,000** | **12,870,000** | **4,243,600** | **13,383,408** | **4,502,035** | **38,999,043** |
|  | **6.2 Strengthening the Coordination Capacity** | | | | | | |
| 82 | Conduct bi-annual meeting of the National Council on Nutrition | 500,000 | 515,000 | 530,450 | 546,364 | 562754.405 | **2,654,568** |
|
| 83 | Organize quarterly Nutrition Partners meetings at all levels | 3,000,000 | 3090000 | 3182700 | 3278181 | 3376526.43 | **15,927,407** |
| 84 | Conduct quarterly meetings of National/States/LGAs Committee on Food and Nutrition at all levels | 14,963,200 | 15412096 | 15874458.88 | 16350692.65 | 16841213.43 | **79,441,661** |
| 85 | Organize annual National Nutrition Networking NNN meeting of all nutrition stakeholders | 10,824,000 | 11148720 | 11483181.6 | 11827677.05 | 12182507.36 | **57,466,086** |
| 86 | Build the capacity of Nutrition desk officers in MDAs/LGAs and leaders of Professional Associations in Nutrition through training & retraining on Nutrition Programming, resource mobilization and allocation | 63,384,000 | 65285520 | 67244085.6 | 69261408.17 | 71339250.41 | **336,514,264** |
| 87 | Strengthening the SUN Networks at states | 1,200,000 | 1236000 | 1273080 | 1311272.4 | 1350610.572 | **6,370,963** |
|  | **Subtotal Objective 6.2** | **93,871,200** | **96,687,336** | **99,587,956** | **102,575,595** | **105,652,863** | **498,374,949** |
|  | **6.3 Strengthening Capacity to Mobilise Resources** | | | | | | |
|
| 88 | Conduct regular and periodic monitoring on food and nutrition activities in collaboration with partners and the private sector at all levels | 14,785,600 | 15229168 | 15686043.04 | 16156624.33 | 16641323.06 | **78,498,758** |
| 89 | Establish a nutrition Portal and develop tools for the collection of core Nutrition data in partnership with key stakeholders | 50,000,000 | 3,926,688.16 | 4,044,488.80 | 4,165,823.47 | 4,290,798.17 | **66,427,799** |
| 90 | Build the capacity of Nutrition implementers (OICs, NFPs, M & E, agric extension officers and other nutrition officers/ workers at all levels on the use and management of level appropriate nutrition dashboard | 30,184,800 | 31,090,344 | 32,023,054 | 32,983,746 | 33973258.33 | **160,255,203** |
|  | **Subtotal Objective 6.3** | **94,970,400** | **50,246,200** | **51,753,586** | **53,306,194** | **54,905,380** | **305,181,760** |

# Annex III: NMPFAN Implementation M & E Logical Framework

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Vision Statement: A Country where the people are equitably food and nutrition-secure with high quality of life and socioeconomic development contributing to human capital development objectives of Nigeria | | | | | |
| Goal: Attain an optimal nutritional status with focus on the most vulnerable especially women and children as well as internally displaced persons from 2021 through 2025 and beyond | | | | | |
| RESULTAREA 1: FOODANDNUTRITIONSECURITY | | | | | |
| Objective : To improve food Security at the National, Community and HouseHold Levels. | | | | | |
| Target: Reduce the proportion of people who suffer hunger and malnutrition by 50% by 2025. | | | | | |
| Activities | | **Expected Output** | | **Lead Agency** | **Other Agencies/Organizations** |
| Strategic Objective 1.1: Ensuring Food and Nutrition Security at the National, Community and Household | | | | | |
| Medium Term: Targets Reduce Food insecurity by 25% in 2023 | | | | | |
| Expected Intermediate outcomes: Increased food production leading to a reduced hunger and malnutrition | | | | | |
| Empower Farmers cooperatives/clusters for commercial production of food crops by Government and Private sector | | Policy actions and initiatives developed to protect farmers and investors in farming from importation of food crops | | FMARD | NABG, MoC&I, Nigeria Custom Services, Organized Private Sector, BoA, BoI, AfDP |
| Clustered of cooperative farmers groups formed | |
| Cooperative farmers groups empowered | |
| Commercial farms established | |
| Facilitate the reactivation of prison farms in each geopolitical zone | | Prison farms established per geopolitical zone | | FMI | FMARD, NBS, FMWR, office of VP, NPS |
| Farms established that are functional | |
| Scale-up the production and promote the consumption of Vitamin A, and micronutrient rich foods (orange flesh sweet potato, pro-vitamin A cassava, yellow maize, iron sorghum, and cowpea) | | Farmers cultivating improved varieties of micronutrient rich foods Cottage industries utilizing improved varieties of micronutrient in final food products/processing | | Organized Private Sector | FMITI Private Sector, Development Partners, FMWR |
| IEC Materials on Micronutrient rich foods produced and distributed | |
| Households consuming Micronutrient rich foods | |
| Jingles produced and aired. | |
| Review and disseminate existing legislation on fortification to cover staples food and promote hammer mill and household level fortification of cereal, root crops and legumes not presently covered, e.g industrially  processed rice, Noodles and Palm oil | | Existing legislations reviewed | | SON | FMARD, NBS, FMITI, Organized Private Sector, FME, Nigeria Prisons Service, FMoH, Academia |
| Reviewed legislations disseminated | |
| Staple crops covered by legislative extension | |
| Support the production and diversification of fruits and vegetables around the homesteads, schools, orchards and farms. | | Home gardens/orchards established | | FMARD | FMoE, FMoL, FMoWA, Ministry of Urban Planning |
| School farms/orchards established | |
| 3. Proportion of established home and school gardening that are functional | |
| Conduct Capacity building for food and nutrition teachers and food vendors on the need to provide nutritionally adequate meals using locally available foods through linkages of food vendors and school system | | Training tools available | | FME | FMoH, FMEnv, UBEB, SUBEB, TETFund, and others |
| Trainings organized | |
| Teachers and food vendors trained | |
| Provide starter packs for fruits and vegetable farming (in seven agro-ecological zones) for 1000 smallholder farmers by zone (including women for Household gardening) | | Starter packs of fruits and vegetables distributed | | FMARD | NIHORT, IITA, Related Research Institutes |
| Farmers received starter packs of fruit and vegetables | |
| Provide small ruminant starter packs (5 sheep/goats, concentrates, minerals and vitamins, vaccines and drugs) to vulnerable women farmers | | Starters pack of small ruminant  (sheep/goats) distributed, | | FMARD | FMWASD, FMHSDA, NEMA, SEMA, SMARD, SMEDA, |
| Vulnerable women farmers supported | |
| Concentrates, minerals/vitamins, vaccines, vet. drugs distributed, | |
| Provide smoking kilns to clusters of small-scale fish processors /farmers including women fish farmers | | Farmers clusters provided with kiln | | FMARD | FMT&I, BoI, Organized Private Sector |
| Women supplied with Kilns | |
| Provide improved planting materials (staple crops including Plantain, Banana and Pineapples) to farmers across the country to promote food security | | Improved planting materials distributed to farmers | | FMARD | FMT, Organized Private Sector |
| Farmers producing the improved crops | |
| Improved crops produced | |
| Support water supply interventions in emergency settings and rural areas | | Functional water supply systems, | | FMWR | FMoEnv, NEMA, Development Partners |
| Construction of sanitation and hygiene facilities in IDPs camps, public places and institutions | | Sanitation and hygiene facilities constructed | | FMWR | FMoEnv, NEMA, OPS, Development Partners |
| Functional water supply systems | |
| Functional toilet systems provided in both in emergency settings and rural areas | |
| Advocate to relevant Banks to promote increased access to Micro-Credit facilities for farmers especially Women farmers to expand farm operations (interest rates and collaterals) | | Advocacy visits conducted to banks | | MFBNP | CBN, FMARD, BOI, BOA, FMWASD, BOI, BoA, and commercial banks. |
| Women accessing micro credit | |
| Banks granting micro credit facilities to women | |
| Promote the formation of women farmers into sustainable cooperative groups for the provision of grants and revolving loans | | Women farmers’ cooperative groups established | | FMARD/FMITI | BOI, BoA, FMWASD, and commercial banks. |
| Cooperative groups that received grants | |
| Cooperative groups that received revolving loan | |
| Promote safe, quality and hygienic food along the food supply chain | | Food handlers sensitized on food hygiene | | FMOH | FME, FMoEnv. NPHCDA |
| Register and license food handlers / food operators engaged in quality and safe food processing and storage | | Food handlers licensed | | NAFDAC | SMoH, SME. SMEnv |
| Eateries and food regulated premises licensed | |
| Promote awareness on improved food quality and safety through electronic and print media | | Media houses airing Food safety and hygiene messages | | FMIC | FMOH, NOA |
| Jingles aired | |
| Jingles & messages produced | |
| States airing jingles and messages | |
| Strengthen coordination platform for early warning mechanisms to cope with food emergencies at community level | | Coordinating meeting held | | FMARD | MFBNP, FMOH, FMOE, FME, NEMA, FMOI, Development Partners |
| Partners participating in coordination platform | |
| Support effective implementation of Conditional Cash Transfer Programmes (CCT), food rations or food supplements in emergency situation | | Affected population enrolled in CCT | | NEMA | FMOH, FME, PARTNERS |
| Affected population benefiting from food ration or supplements | |
| Scale-up the activites on enforcement of Food Fortification and salt iodization programs | | New food vehicle identified  Laboratory consumables procured  Industry staff trained | | NAFDAC | FME, FMOH, FMFBNP, SMOH, SPHCDA, Development partners |
| Strategy 1.2: Increasing Availability, Accessibility and Affordability to Food | | | | | |
| Medium Term: Availability, Accessibility and Affordability to Food increased by 25% in2023 | | | | | |
| Expected Intermediate outcomes: Improved better standard of living | | | | | |
| Advocate for increase in import levies and excise duties on commodities that can be locally produced | | Advocacy meeting held Increase in import levies and excise duties. % reduction in food import | | MOIA | MoI, Nigeria Custom Service, MOIA, FMARD |
| Advocate for rehabilitation of the existing rural road network and construction of new ones for easy transportation of farm produce | | Advocacy meeting with relevant stakeholders held | | FMoWHP | FMARD, MWH, |
| Rural roads rehabilitated New rural roads constructed | |  |  |
| Advocate for the establishment of uniform Receipt system for warehouses in government food storage centres | | Advocacy conducted. Warehouse receipt systems established | | FMARD | FMITI |
| Promote regulation for the establishment of commodity trading centres | | Commodity market established | | FMIT&I | FMARD, FMoI, NEPC, MAN, NACCIMA |
| Advocate for scale up of offtake mechanism for food crops t to increase availability of food products | | Advocacy conducted Farmers accessing offtake mechanisms established | | FMARD | FMST, NASC, ANFA, BOA, CBN |
| Promote access to agricultural inputs (including improved seeds, information on agricultural practices, and irrigation) to scale up production of fruits and vegetable. | | Agricultural inputs accessed. Small holder farmers reached. Increase in fruit and vegetable production | | FMARD | FMARD, FMB&NP |
| Advocate for subsidized agricultural inputs at the point of manufacturing and import. | | Advocacies carried out Agricultural inputs subsidized. | | FMARD | ANFA, BOA, CBN, FMoF |
| Train farmers on appropriate use of fertilizers, herbicides and pesticides | | Trainings conducted Farmers trained | | FMARD | FMST, |
| Trained farmers using fertilizers, herbicides and pesticides appropriately | |  |  |
| Strategy 1.3: Improving Food Harvesting, Processing and Preservation | | | | | |
| Medium Term: Food Harvesting, Processing and Preservation improved by 30% in 2023 | | | | | |
| Expected Intermediate outcomes: Increased productivity of farm produce | | | | | |
| Conducted regular Stakeholders meeting on reduction of postharvest losses | | Meetings conducted Stakeholders reached | | FMARD | FMST, FIIROITA, NISPRI |
| Reduction in post-harvest food loss | |
| Promote and provide hermetic storage bags to local farmers for food preservation | | Promotion activities carried out Hermetic storage bags procured and distributed Farmers using hermetic storage bags | | FMARD | FMST, FIIRO, IITA, CFN |
| Reduction in postharvest food losses (selected foods) | |
| Sensitization of Farmers on proper use of environmentally friendly agricultural technologies | | Farmers sensitized  Sensitized farmers adopting recommended practices | | FMARD | FMST, Organised Private Sector, Professional Associations, FMoI |
| Promotion and dissemination of research findings on food processing and preservation technology for use in households | | Dissemination programmes on food processing and preservation Demonstrations carried out  LGAs reached | | FMST | FMoH; FMARD; Universities; Research Institutes (NISPRI; FIIRO) |
| Strategy 1.4: Improving Food Preparation and Quality | | | | | |
| Medium Term: Food Preparation and Quality improved by 30% in2023 | | | | | |
| Expected Intermediate outcomes: Improved healthy living | | | | | |
| Promote the use of Aflasafe and activities to minimize aflatoxin contamination along the value chain, including GAP and modern drying and storage | | Farmers groups sensitized on availability of aflasafe | | FMARD | FMST, Organised Private Sector, Professional Associations, FMoI |
| Identified locations to purchase aflasafe | |
| Farmers sensitized using aflasafe | |
| Sensitized farmers groups adopting GAP | |
| Strengthen LGAs for regular and sustained monitoring and inspection on the preparation of food in Restaurants, Eateries and Food vending | | LGAs carrying out regular monitoring and inspection | | SMOH | NAFDAC, OTHER PARTNERS, Professional Associations, SMoEv. LGA WES DEPT |
| Restaurants and eateries monitored and inspected | |
| Strategy 1.5: Improving Management of Food Security Crisis and Nutrition in Emergency | | | | | |
| Medium Term: Management of Food-Security Crises and Nutrition-in-Emergency improved by 50% in2023 | | | | | |
| Expected Intermediate outcomes: Reduced food security crisis malnutrition during emergency | | | | | |
| Strengthen Nutrition surveillance for early warning mechanisms to cope with emergency | | Availability of Surveillance system in place in the Ministries of Agric and Health | | FMARD, FMOH | Organized Private Sector, NBS, SBS |
| States with Nutrition surveillance reports | |  |
| Early warning mechanisms disseminated to MDAs/Communities | |  |
| Training Emergency Managers on mainstreaming Nutrition in Feeding Programmes targeted at the vulnerable groups in Emergency Situations |  | Emergency managers trained on mainstreaming Nutrition in Feeding programmes |  | FMoH | NEMA, FMARD, Development Partners, MFBNP |
|  |  | Training conducted |  |
| Strategy 1.6: School-based Strategies | | | | | |
| Medium Term: Improved children healthy food-related practices that extend to their families | | | | | |
| Expected Intermediate outcomes: Promotion of healthy school food environment | | | | | |
| Review minimum standards, print and distribute SOPs (Nutrition and Health) for early- child care centers (ECCC) |  | Review meetings held SOPs/Guidelines printed and distributed States implementing the reviewed Minimum Standards |  | FME, FMOH | FMoH, FMARD, UNICEF, UBEC, SUBEB, FMWASD |
| Build the capacity of Agricultural Science teachers to strengthen the establishment of school farms and garden |  | Teachers trained Schools with functional farms and gardens |  | FMARD | FME, MFBNP, SUBEB, UBEC |

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| RESULT AREA 2: ENHANCING CARE GIVING CAPACITY | | | | | | | | | | | |
| Objective: To reduce undernutrition among infants and children, adolescents and women of reproductive age | | | | | | | | | | | |
| Target: Increase by 50% households with relevant nutrition knowledge and practice that improve their nutritional status | | | | | | | | | | | |
| Activities | | | | | | **Expected Output** | | | | **Lead Agency** | **Other Agencies/Organizations** |
| Strategic Objective 2.1 Ensure Optimal Nutrition in the First 1,000 Days of life | | | | | | | | | | | |
| Medium Term: Increase Optimal Nutrition in the first1,000 Days of life by 40%by 2023 | | | | | | | | | | | |
| Expected Intermediate outcomes: Child survival, growth and development improved | | | | | | | | | | | |
| Advocate for legislation of the prolongation of maternity leave and enactment of paternity leave | | | | | States with Legislation on 6 months Maternity leave States with Legislation on Paternity leave | | | | | FMWASD | MFBNP, National House of Assembly, FMoH, Ministry of Labour and Productivity. |
| Provide Orientation for health staff to improve ANC attendance | | | | | Health workers trained | | | | | NPHCDA | FMOH, MB&NP, Development Partners |
| Pregnant women attending ANC | | | | |
| Procure and distribute Iron-folic acid supplementation to pregnant women during MNCH Weeks | | | | | States that procure and distribute Iron foliate to facilities. Pregnant women that receive 90+ tablets per pregnancy | | | | | NPHCDA | MB&NP, MWASD, FMoH |
| Procure and distribute Vitamin A Supplements during MNCHW for under 5 children | | | | | States that procure and distribute Vitamin A supplement to facilities. Children that receive 90+ tablets per pregnancy State that report a stock out of Vitamin A supplements | | | | | NPHCDA | FMOH, MFBNP, Ministry of Information & Culture, CSOs, Development Partners |
| Implementation of baby friendly initiative in all health facilities and delivery maternities | | | | | Health facilities that have policies in place Health facilities that provide IEC materials Mothers affirming received counseling during ANC | | | | | NPHCDA | FMOH, MFBNP, Ministry of Information & Culture, CSOs, Development Partners |
| Establishment of crèches in workplaces to promote Exclusive Breastfeeding. | | | | | Creches established | | | | | FMWASD | FMoH; FMWASD, SMOH, SMWASD |
| Workplaces with Creches | | | | |
| Promote the establishment of Nutrition/food demonstration corner (optimal MIYCF practices) in the health facilities | | | | | Nutrition/Food demonstration Corners established Health facilities with functional nutrition corners | | | | | NPHCDA | FMOH, MB&NP, Development Partners |
| Scale up implementation of C-IYCF for optimal infant and young child feeding | | | | | C-IYCF groups/centres established | | | | | NPHCDA/FMoH | MB&NP, FMoH, CSOs, Development Partners |
| Conduct Social and Behaviour Change Communication activities on IYCF, and intra-household food distribution targeted at adolescents, pregnant women, and caregivers at all levels. | | | | | Dialogues conducted. Key messages developed and distributed targeted at adolescents, pregnant women, and caregivers. Channels, Platforms and Frequency 4 # of reach | | | | | FMIC/FMoH | FMWASD, MB&NP, NPHCDA, MDAs, NOA |
| Promote awareness on Girl Child Education, end Child Marriage and adolescent nutrition and health related practices | | | | | Jingles and messages produced Communities reached with the messages | | | | | FMWASD | FMOI, FME, Development Partners |
| Scale – up activities in enforcing the provisions of International Code of Marketing of Breastmilk Substitutes (BMS) | | | | | Health workers trained  Traditional leaders trained  NAFDAC staff trained | | | | | NAFDAC | FMOH, NPHCDA,  FMI, NAO,  Development partners |
| Strategic Objective 2.2: Caring for the Socioeconomically Disadvantaged and Nutritionally Vulnerable | | | | | | | | | | | |
| Medium Term: Mainstream Nutrition objectives into social protection and safety nets programmes of relevant MDAs by 2023 | | | | | | | | | | | |
| Expected Intermediate outcomes: Improved Poverty Alleviation Schemes | | | | | | | | | | | |
| Engage traditional, religious and opinion leaders to support community level action on nutritional care of vulnerable groups and encourage utilization of PHC services | | | | | Dialogues conducted | | | | | FMWASD | FMoH, FMIYDC, CSOs and development partners |
| Religious, traditional and opinion leaders reached Communities reached | | | | |
| Pregnant and lactating mothers receiving nutritional care | | | | |
| Support local production of RUTF through advocacy to potential industries in Nigeria | | | | | Relevant potential producers advocated to | | | | | FMITI | FMOH, FMIC, BOI, MFBNP |
| Potential producers committed to local production of RUTF | | | | |
| Investment summit held to promote local production of RUTF | | | | |
| Support local production of Premixes through advocacy to potential industries in Nigeria | | | | | Relevant potential producers advocated to | | | | | FMITI | FMOH, FMIC, BOI, MFBNP |
| Potential producers committed to local production of premixes | | | | |
| Investment summit held to support local production of Premixes | | | | |
| Support local production of Micro nutrient powder through advocacy to potential industries in Nigeria | | | | | Relevant potential producers advocated to | | | | | FMITI | FMOH, FMIC, BOI, MFBNP |
| Potential producers committed to local production of premixes | | | | |
| Investment summit held to support local production of Premixes | | | | |
| RESULT AREA 3: ENHANCING PROVISION OF QUALITY HEALTH SERVICES | | | | | | | | | | | |
| Objective: Reduce Morbidity and Mortality Associated with Malnutrition. | | | | | | | | | | | |
| Target: Reduce the proportion of people who suffer hunger and Malnutrition by 50% by 2025. | | | | | | | | | | | |
| Activities | | | | | **Expected Output** | | | | | **Lead Agency** | **Other Agencies/Organizations** |
| Strategic Objective 3.1: Reduce Morbidity and Mortality Associated with Malnutrition | | | | | | | | | | | |
| Medium Term: 20% reduction of morbidity and mortality rate by 2020 | | | | | | | | | | | |
| Expected Intermediate outcomes: Morbidityand Mortality Reduced | | | | | | | | | | | |
| Promote regular monitoring of growth and development of Children under 5 at health facilities and communities. | | | | | Health facilities visited Health facilities with required growth monitoring equipment. | | | | | NPHCDA | FMoH, SCOs, Partners, SMOH, SPCHDA |
| Health facilities with records of children monitored Children under 5 monitored | | | | |
| Disseminate information on nutrition and key household practices through mass media | | | | | Handbills, billboards developed and disseminated, Jingles on electronics media, Newspaper publication, | | | | | FMIC | FMoH; FMWASD; NSN; CSOs, FBOs, CBOs, NGOs, SMoH, NOA, SMIC |
| Conduct annual assessment of Household consumption of iodized salt using Primary School children | | | | | Studies conducted annually | | | | | FME | FMoH, MFBNP, SCOs, NAFDAC, Partners |
| LGAs sampled in each State | | | | |
| Support distribution of Iron folate supplements to adolescent (boys and girls) in Schools and Communities (25% coverage) | | | | | Iron folate supplements procured and distributed adolescents reached | | | | | FMoH | FMoE; SUBEB |
| Schools and communities reached with iron folate supplements | | | | |
| Sustain and scale up distribution of micronutrient powder (MNP) for children 6 - 23 months (50% coverage) | | | | | Children 6 - 23 months that receive MNP States distributing MNP LGAs distributing MNP | | | | | FMoH | NPHCDA, MB & NP, Development Partners |
| Scale up and strengthen CMAM sites | | | | | Functional CMAM sites established CVs trained SAM cases referred from communities to CMAM sites SAM cases treated 5. # of trained CVs retrained | | | | | NPHCDA | FMoH, Development Partners |
| Strategic Objective 3.2. Preventing and Managing Nutrition Related Diseases | | | | | | | | | | | |
| Medium Term: Arrest the emerging increase in obesity prevalence in adolescents and adults | | | | | | | | | | | |
| Expected Intermediate outcomes: Increased awareness and nutrition activities especially DRNCD and WASH | | | | | | | | | | | |
| Health Promotion activities to provide education and increasing services for prevention and management of DRNCD | | | | | Nutrition and lifestyle education materials developed, produced and distributed; 2. # of health facilities with activities to reduce DRNCD, 3. # of media houses airing nutrition and lifestyle education programmes, | | | | | FMOH | FMWASD, FMI, NAFDAC, |
| Training on hygiene, WASH, water safety plan on community led total sanitation | | | | | States with functional WASH committees Communities reached Communities trained on water safety plan | | | | | FMWR/FMoH | FMoH, NPHCDA, FMEVN FMWR; FMWASD, CSOs , Development Partners |
| Strategic Objective 3.3: Preventing Micronutrient Deficiency | | | | | | | | | | | |
| Medium Term: Increase coverage of Zinc supplementation in diarrhoea management to 40% of all children needing treatment by 2023 | | | | | | | | | | | |
| Expected Intermediate outcomes: Management of childhood infection | | | | | | | | | | | |
| Monitor and evaluate micronutrient supplementation programme performance at all level | |  | | | Supportive supervision of micronutrient supplementation programme conducted Children reached with vitamin A , MNP Pregnant women reached Adolescents reached | | | | FMoH/SMoH | | MFBNP, NPHCDA, Development Partners SPHCDA/SPHCB |
| Procure and distribute Zinc, L -ORS, de-worming tablet and RUTF for CMAM and routine services (50% Coverage) | |  | | | Quantity of commodities procured Health facilities distributing listed commodities  SAM children 6- 59 months reached and treated  SAM children 6- 59 months with diarrhea treated  Children dewormed | | | | N/SPHCDA | | FMOH; Development Partners, SPHCDA, SMoH |
|  |  | | | |  | | | |
| Strategic Objective 3.4: Protecting the Consumer through Improved Food Quality and Safety | | | | | | | | | | | |
| Medium Term: Nutrition and consumer education on food quality and safety at the community level | | | | | | | | | | | |
| Expected Intermediate outcomes: Consumer educated on Nutrition and improved foodquality | | | | | | | | | | | |
| Conduct awareness campaign on healthy living, good dietary habits and food quality and safety | | | | | Platforms used in reaching the populace | | | | | FMIC/FMoH/SMoH | FMoH, CPC, FMARD, FMI, NAFDAC, Development Partners. |
| LGAs carrying out awareness campaign on healthy living, good dietary habits and food quality and safety | | | | |
|
| Promotion of safe practices on Pesticide utilization for food stuff preservation | | | | | Trained wholesale food sellers | | | | | NAFDAC/FMARD/SMARD | FMoH; NAFDAC; FMI, CPC |
| Farmers and extension officers trained | | | | |
| RESULT AREA 4: IMPROVING CAPACITY TO ADDRESS FOOD AND NUTRITION INSECURITY | | | | | | | | | | | |
| Objective: To improve food Security at the National, Community and HouseHold Levels | | | | | | | | | | | |
| Target: Reduce the proportion of people who suffer hunger and Malnutrition by 50% by 2025. | | | | | | | | | | | |
| Activities | | | | | **Expected Output** | | | | | **Lead Agency** | **Other Agencies/Organizations** |
| Strategic Objective 4.1: Assessing, Analysing and Monitoring Nutrition Situations | | | | | | | | | | | |
| Medium Term: Reduce the proportion of people who suffer hunger and Malnutrition by 17 % by 2020. | | | | | | | | | | | |
| Expected Intermediate outcomes: Increased knowledge and use of functional traditional food diets and underutilized foods | | | | | | | | | | | |
| Building the capacity of farmers on cultivation of underutilized crop varieties | | | | | Trainings conducted Farmers trained  Seedlings provided to farmers  HHs cultivating functional foods and underutilized crops  Messages produced and aired | | | | | FMARD | FMST, ; Research Institutes; Universities, FMIC |
| Promote linkages of members to existing capacity building opportunities | | | | | Nutritionists benefited from the capacity building programmes | | | | | NSN | Institutions, State NSN Chapter, MFBNP |
| 4.2: Providing a Conducive Macro Economic Environment | | | | | | | | | | | |
| Medium Term: Increase the number of Nutrition Desk Officers in relevant MDAs at all levels with functional nutrition unit by 75%in 2020 | | | | | | | | | | | |
| Expected Intermediate outcomes: .Improved investmentin nutrition | | | | | | | | | | | |
| Advocate for the creation of nutrition department and incorporate nutrition objectives into MDAs’ development policies, plans and programmes. | | | | | MDAs with Nutrition department established | | | | | NCN / MFBNP | MFBNP, MDAs; Civil Service Commission |
| MDAs that have developed and incorporated nutrition objectives into their Policies, Plans and Programmes | | | | |
| Mid and Endline Review of implementation of the National Multisectorial Plan of Action for Nutrition | | | | | Review meetings held Stakeholders available Report of the review meeting | | | | | MFBNP | MDAs; Research Institutes; Universities |
| Strategic Objective 4.3: Social Protection Programmes for the Vulnerable Groups | | | | | | | | | | | |
| Medium Term: Mainstream nutrition objectives into social protection and safety net programme so fall MDAs linked to nutrition by 2022 | | | | | | | | | | | |
| Expected Intermediate outcomes: Improved nutritional status of vulnerable groups | | | | | | | | | | | |
| Conduct stakeholders (consultation) meetings for nutrition related investment and sectoral policies including social protection policies | | | | | Stakeholders and validation meetings conducted MDAs with investment in nutrition | | | | | MFBNP | MDAs |
| RESULT AREA 5: RAISING AWARENESS AND UNDERSTANDING OF PROBLEM OF MALNUTRITION IN NIGERIA | | | | | | | | | | | |
| Objective: To increase the knowledge of nutrition among the populace and nutrition education into formal and informal training. | | | | | | | | | | | |
| Target: To increase households with relevant nutrition knowledge and practice by 50% that improves their nutritional status by 2025. | | | | | | | | | | | |
| Strategic Objective 5.1: Promote Advocacy, Communication and Social Mobilization | | | | | | | | | | | |
| Medium Term: To increase households with relevant nutrition knowledge and practice by 30% that improves their nutritional status by 2023 | | | | | | | | | | | |
| Expected Intermediate outcomes: Improved nutritional status and habits of the population due to correct knowledge and practice on nutrition | | | | | | | | | | | |
| 2day Annual review meeting of SCFN with NCFN | | | | | N/SCFN that participated in review meeting. | | | | | MFBNP | MDAs, SCFN |
| Report of review meetings organized | | | | |
| Develop advocacy strategy | | | | | Advocacy document developed and approved | | | | | MFBNP | MDAs; CSOs |
| Conduct sustained advocacy to policy makers, traditional and religious leaders in Abuja, for improved nutrition funding | | | | | Policy makers reached at each level with knowledge of nutrition issues | | | | | MFBNP | FMoH, CSOs |
| Traditional and religious leaders reached at each level with knowledge of nutrition issues | | | | |
| Reports produced | | | | |
| Collaboration with network providers like MTN, Airtel, GLO, 9mobile etc. to disseminate nutrition information to the general public | | | | | Network providers disseminating nutrition information to their subscribers | | | | | FMIC | FMoH; FMARD; NCC; CSOs |
| Nutrition messages developed | | | | |
| Public reached with nutrition messages | | | | |
| Conduct Annual Nutrition Week on topical issues in nutrition | | | | | Nutrition Week organized | | | | | MFBNP | FMoH, MDAs, NCFN, Development Partners, SCFN, Universities |
| Strategic Objective 5.2: Promoting Healthy Lifestyles and Dietary habits | | | | | | | | | | | |
|
| Medium Term: Promote awareness on good dietary habits and healthy lifestyles | | | | | | | | | | | |
| Expected Intermediate outcomes: Increase in population of people practicing healthy lifestyles and dietary eating habits | | | | | | | | | | | |
| Promote dietary diversification through the consumption of locally produced staples | | | | | Under-utilized crops integrated into the food system. Messages and jingles produced and aired | | | | | FMARD | FMoH, NPHCDA |
| Review, publish and disseminate the Food Based Dietary Guidelines (FBDG) for healthy living | | | | | Review meeting held Food Based Dietary Guidelines for healthy living published Food Based Dietary Guidelines for healthy living disseminated Zonal dissemination meetings held | | | | | FMoH | FMARD, MFBNP, FMIC |
| Strategic Objective 5.3: Research In Nutrition | | | | | | | | | | | |
|
| Medium Term: Development of Nutritious diets from locally available staple foods for improved utilization and nutrition | | | | | | | | | | | |
| Expected Intermediate outcomes: Increased number of Nutrition researches conducted and dissemination of research findings | | | | | | | | | | | |
| Review, update, publish and disseminate existing food composition table for Nigeria | | | | | Review meeting held Food composition table published Food composition table disseminated Participants at dissemination meetings | | | | |  | ARCN/NUC/Research Institutes |
| Conduct the National Food Consumption and Nutrition Survey | | | | | National Food Consumption and Nutrition survey produced and published | | | | |  | FMARD |
| Provide small grants to conduct food and nutrition research on standardization of food recipes and portion sizes of locally available diets | | | | | Locally available diets standardized | | | | |  | FMARD |
| Research findings published in a user friendly platforms | | | | |
| Research findings successfully disseminated to key stakeholders | | | | |
| Conduct assessment at all levels on determinants of low financial investments in Food & Nutrition programs compared to other life-saving interventions in partnership with private sector | | | | | Assessment of public, private and bi & multi-lateral partners investments in nutrition published and disseminated | | | | |  | MFBNP |
|
| RESULT AREA 6: RESOURCE ALLOCATION FOR FOOD AND NUTRITION SECURITY AT ALL LEVELS | | | | | | | | | | | |
| Targets: To increase the number of relevant MDAs at all levels with functional nutrition unit by 75% | | | | | | | | | | | |
| Objective: To incorporate food and nutrition considerations into the Federal, State and Local Government sectoral development plan | | | | | | | | | | | |
| 6.1 Promote Adequate Budgetary Allocation and Tracking | | | | | | | | | | | |
| Medium Term: Increase the resource allocation to nutrition activity by 60% in 2023 | | | | | | | | | | | |
| Expected Intermediate outcomes: Increased investment and funding of nutrition programmes and activities | | | | | | | | | | | |
| Advocate for the implementation of policy and costed national multisectorial plan of action for food and nutrition | | | | | Advocacy visits conducted to the identified four key stakeholders (Federal, State, Development Partners and Organized Private Sectors) | | | | | MFBNP/NCFN | MDAs, CS-SUNN, NSN, Other Partners |
| Conduct regular budget tracking to evaluate budget performance of F &N in all sectors | | | | | MDAs tracking budget Development partners tracking budget MDAs at Federal, States & LGAs with Score card of lessons learnt applied at all levels | | | | | MFBNP | MDAs, CS- SUNN, NSN |
| 6.2 Strengthening the coordination capacity | | | | | | | | | | | |
| Medium Term: Increase commitment to nutrition programming | | | | | | | | | | | |
| Expected Intermediate outcomes: Coordination of nutrition programme improved and relevant MDAs at all levels with functional nutrition unit | | | | | | | | | | | |
| Conduct bi-annual meeting of the National Council on Nutrition | | | Meetings held and reports produced | | | |  | MFBNP, Office of the Vice President, MDAs,  Development Partners, SUN Nigeria | | | |
| Organize quarterly Nutrition Partners meetings at all levels | | | Meetings held and reports produced | | | |  | MFBNPMDAs, Development Partners | | | |
| Conduct quarterly meetings of National/States/LGAs Committee on Food and Nutrition at all levels | | | Meetings held and reports produced | | | |  | MFBNPMDAs, Development Partners | | | |
| Organize annual National Nutrition Networking NNN meeting of all nutrition stakeholders | | | Meetings held and reports produced | | | |  | MFBNP, FMoH, FMARD, FMoE, FWASD, Private  Sector | | | |
| Build the capacity of Nutrition desk officers in MDAs/LGAs and leaders of Professional Associations in Nutrition through training & retraining on Nutrition Programming, resource mobilization and allocation | | | Capacity building conducted 2. # of nutrition desk officers trained by MDA/State and LGAs 3. # of training conducted by state and LGAs 4. programs areas covered in the training | | | |  | MFBNP, MDAs, UNICEF and Development Partners | | | |
| Strengthening the SUN Networks at states | | | States with functional SUN Networks | | | |  | SUN Movement (FMoH)NSN, MFBNP, Development partners, institutions | | | |
| 6.3 Strengthening capacity to mobilise resources | | | | | | | | | | | |
| Medium Term: Capacity of relevant officers on use of data tools built | | | | | | | | | | | |
| Expected Intermediate outcomes: Budget line for food and nutrition activities created in relevant MDAs | | | | | | | | | | | |
| Conduct regular and periodic monitoring on food and nutrition activities in collaboration with partners and the private sector at all levels | | | | Monitoring reports at all levels | | |  | NCFN/SCFN/LGFNMDAs, Universities, Research Institutes, NSN, Development partners and private sector | | | |
| Establish a nutrition Portal and develop tools for the collection of core Nutrition data in partnership with key stakeholders | | | | Nutrition dashboard for Nigeria and states developed and Hosted | | |  | NBS/MFBNP, FMoH, FMARD, FMOE, UNICEF,  Universities and Research Institutes | | | |
| Build the capacity of Nutrition implementers (OICs, NFPs, M & E, agric extension officers and other nutrition officers/ workers at all levels on the use and management of level appropriate nutrition dashboard | | | | Report of the training nutrition implementers trained | | |  | NBS/MFBNP, FMoH, FMARD, FMIC, FMoE, Universities, Development Partners | | | |

**Annex IV: Nutrition Investments Estimate Cost Matrix by MDAs**

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| --- | --- | --- | --- | --- | --- |
| Lead Agency | Activities | Time Frame | Indicative Costing (N) | Other Agencies/Organizations | Strategic Objective |
| FMARD | Empower Farmers cooperatives/clusters for commercial production of food crops by Government and Private sector | 2021 -2025 | 921183005 | NABG, MoC&I, Nigeria Custom Services, Organized Private Sector, BoA, BoI, AfDP | 1 |
| FMARD | Support the production and diversification of fruits and vegetables around the homesteads, schools, orchards and farms | 2021 -2025 | 151093758 | FMoE, FMoL, FMoWA, Ministry of Urban Planning | 1 |
| FMARD | Provide starter packs for fruits and vegetable farming (in seven agro-ecological zones) for 1000 smallholder farmers by zone (including women for Household gardening) | 2021 -2025 | 27193576 | NIHORT, IITA, Related Research Institutes | 1 |
| FMARD | Provide small ruminant starter packs (5 sheep/goats, concentrates, minerals and vitamins, vaccines and drugs) to vulnerable women farmers | 2021 -2025 | 118599458 | FMWASD, FMHSDA, NEMA, SEMA, SMARD, SMEDA, | 1 |
| FMARD | Provide smoking kilns to clusters of small-scale fish processors /farmers including women fish farmers | 2021 -2025 | 69200670 | FMT&I, BoI, Organized Private Sector | 1 |
| FMARD | Provide improved planting materials (staple crops including Plantain, Banana and Pineapples) to farmers across the country to promote food security | 2021 -2025 | 268398052 | FMT&I , FMST, Organized Private Sector | 1 |
| FMARD/  FMITI | Promote the formation of women farmers into sustainable cooperative groups for the provision of grants and revolving loans | 2021 -2025 | 13728383 | BOI, BoA, FMWASD, and commercial banks. | 1 |
| FMARD | Strengthen coordination platform for early warning mechanisms to cope with food emergencies at community level | 2021 -2025 | 108850557 | FMBNP, FMOH, FMOE, FME, NEMA, FMOI, Development Partners | 1 |
| FMARD | Advocate for the establishment of uniform Receipt system for warehouses in government food storage centres | 2021 -2025 | 55000 | FMITI | 1 |
| FMARD | Advocate for scale up of offtake mechanism for food crops t to increase availability of food products | 2021 -2025 | 55000 | FMST, NASC, ANFA, BOA, CBN | 1 |
| FMARD | Promote access to agricultural inputs (including improved seeds, information on agricultural practices, and irrigation) to scale up production of fruits and vegetable. | 2021 -2025 | 44894052 | FMARD, FMB&NP | 1 |
| FMARD | Advocate for subsidized agricultural inputs at the point of manufacturing and import. | 2021 -2025 | 170000 | ANFA, BOA, CBN, FMoF | 1 |
| FMARD | Train farmers on appropriate use of fertilizers, herbicides and pesticides | 2021 -2025 | 27332211 | FMST | 1 |
| FMARD | Conduct regular Stakeholders meeting on reduction of postharvest losses | 2021 -2025 | 12051738 | FMST, FIIROITA, NISPRI | 1 |
| FMARD | Promote and provide hermetic storage bags to local farmers for food preservation | 2021 -2025 | 52288086 | FMST, FIIRO, IITA, CFN | 1 |
| FMARD | Sensitization of Farmers on proper use of environmentally friendly agricultural technologies | 2021 -2025 | 104576172 | FMST, Organised Private Sector, Professional Associations, FMoI | 1 |
| FMARD | Promote the use of Aflasafe and activities to minimize aflatoxin contamination along the value chain, including GAP and modern drying and storage | 2021 -2025 | 385233018 | FMST, Organised Private Sector, Professional Associations, FmoI | 1 |
| FMARD/FMOH | Strengthen Nutrition surveillance for early warning mechanisms to cope with emergency | 2021 -2025 | 87608705 | Organized Private Sector,NBS, SBS | 1 |
| FMARD | Build the capacity of Agricultural Science teachers to strengthen the establishment of school farms and garden | 2021 -2025 | 233534019 | FME, MBNP, SUBEB, UBEC | 1 |
| NAFDAC/  FMARD | Promotion of safe practices on Pesticide utilization for food stuff preservation | 2021 -2025 | 20809025 | FMoH; NAFDAC; FMI,FMST, CPC | 3 |
| FMARD | Building the capacity of farmers on cultivation of underutilized crop varieties | 2021 -2025 | 325515619 | FMST, ; Research Institutes; Universities, FMIC | 4 |
| FMARD | Promote dietary diversification through the consumption of locally produced staples | 2021 -2025 | 310509055 | FMoH, NPHCDA | 5 |
| ARCN/NUC/Research Institutes | Review, update, publish and disseminate existing food composition table for Nigeria | 2021 -2025 | 50750000 | FMARD, MFBNP, NCFN, Universities, IITA, Research Institutes | 5 |
| FMARD | Conduct the National Food Consumption and Nutrition Survey | 2021 -2025 | 56377465 | FMoH, FMoE, NBS, Universities, Research Institutes, IITA, MFBNP | 5 |
| FMARD | Provide small grants to conduct food and nutrition research on standardization of food recipes and portion sizes of locally available diets | 2021 -2025 | 297311605 | FMoE, FMST, IITA, Universities, Research Institutes. ARCN, NUC | 5 |
| Sub-Total | | | **3687318229** |  |  |

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| Lead Agency | Activities | Time Frame | Indicative Costing (N) | Other Agencies/Organizations | Strategic Objective |
| FMOH | Promote safe, quality and hygienic food along the food supply chain | 2021 -2025 | 14080080 | FME, FMoEnv. NPHCDA | 1 |
| FMARD/  FMOH | Strengthen Nutrition surveillance for early warning mechanisms to cope with emergency | 2021 -2025 | 87608705 | Organized Private Sector,NBS, SBS | 1 |
| FMOH | Training Emergency Managers on mainstreaming Nutrition in Feeding Programmes targeted at the vulnerable groups in Emergency Situations | 2021 -2025 | 231994183 | NEMA, FMARD, Development Partners, FMBNP | 1 |
| FME, FMOH | Review minimum standards, print and distribute SOPs (Nutrition and Health) for early- child care centers (ECCC) | 2021 -2025 | 34912258 | FMoH, FMARD, UNICEF, UBEC, SUBEB, FMWASD | 1 |
| NPHCDA/FMoH | Scale up implementation of C-IYCF for optimal infant and young child feeding | 2021 -2025 | 324100684 | MB&NP, FMoH, CSOs, Development Partners | 2 |
| FMIC/FMoH | Conduct Social and Behaviour Change Communication activities on IYCF, and intra-household food distribution targeted at adolescents, pregnant women, and caregivers at all levels. | 2021 -2025 | 106329722 | FMWASD, MB&NP, NPHCDA, MDAs, NOA | 2 |
| FMOH | Support distribution of Iron folate supplements to adolescent (boys and girls) in Schools and Communities (25% coverage) | 2021 -2025 | 5861328407 | FMoE; SUBEB | 3 |
| FMOH | Sustain and scale up distribution of micronutrient powder (MNP) for children 6 - 23 months (50% coverage) | 2021 -2025 | 7262897788 | NPHCDA, MB & NP, Development Partners | 3 |
| FMOH | Health Promotion activities to provide education and increasing services for prevention and management of DRNCD | 2021 -2025 | 106379791 | FMWASD, FMI, NAFDAC, | 3 |
| FMWR/FMoH | Training on hygiene promotion, Community Water Safety Plan and triggering on Community Led Total Sanitation (CLTS) | 2021 -2025 | 314578773 | FMoH, NPHCDA, FMEVN FMWR; FMWASD, CSOs , Development Partners | 3 |
| FMoH | Monitor and evaluate micronutrient supplementation programme performance at all level | 2021 -2025 | 142650108 | MBNP, NPHCDA, Development Partners SPHCDA/SPHCB | 3 |
| FMIC/FMoH | Conduct awareness campaign on healthy living, good dietary habits and food quality and safety | 2021 -2025 | 84946173 | FMoH, CPC, FMARD, FMI, NAFDAC, Development Partners. | 3 |
| FMOH | Review, publish and disseminate the Food Based Dietary Guidelines (FBDG) for healthy living | 2021 -2025 | 10150000 | FMARD; MBNP; FMIC | 5 |
| SUN Movement (FMoH) | Strengthening the SUN Networks at states | 2021 -2025 | 6370963 | NSN, MBNP, Development partners, institutions | 6 |
| Sub-Total | | | **14588327635** |  |  |

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| --- | --- | --- | --- | --- | --- |
| Lead Agency | Activities | Time Frame | Indicative Costing (N) | Other Agencies/Organizations | Strategic Objective |
| FMIC | Facilitate the reactivation of prison farms in each geopolitical zone | 2021 -2025 | 233,022,951 | FMARD, NBS, FMWR, office of VP, NPS | 1 |
| FMIC | Promote awareness on improved food quality and safety through electronic and print media | 2021 -2025 | 34,702,635 | FMOH, NOA | 1 |
| FMIC/FMoH | Conduct Social and Behaviour Change Communication activities on IYCF, and intra-household food distribution targeted at adolescents, pregnant women, and caregivers at all levels. | 2021 -2025 | 106,329,722 | FMWASD, MB&NP, NPHCDA, MDAs, NOA | 2 |
| FMIC | Disseminate information on nutrition and key household practices through mass media | 2021 -2025 | 5,328,750 | FMoH; FMWASD; NSN; CSOs, FBOs, CBOs, NGOs, SMoH, NOA, SMIC | 3 |
| FMIC/FMoH | Conduct awareness campaign on healthy living, good dietary habits and food quality and safety | 2021 -2025 | 84,946,173 | FMoH, CPC, FMARD, FMI, NAFDAC, Development Partners. | 3 |
| Sub-Total | | | **464,330,231** |  |  |

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| --- | --- | --- | --- | --- | --- |
| Lead Agency | Activities | Time Frame | Indicative Costing (N) | Other Agencies/Organizations | Strategic Objective |
| SON | Review and disseminate existing legislation on fortification to cover staples food and promote hammer mill and household level fortification of cereal, root crops and legumes not presently covered, e.g industrially processed rice, Noodles and Palm oil | 2021 -2025 | 2,200,000 | FMARD, NBS, FMITI, Organized Private Sector, FME, Nigeria Prisons Service, FMoH, Academia | 1 |
| Sub-Total | | | **2,200,000** |  |  |

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| Lead Agency | Activities | Time Frame | Indicative Costing (N) | Other Agencies/Organizations | Strategic Objective |
| FME | Conduct Capacity building for food and nutrition teachers and food vendors on the need to provide nutritionally adequate meals using locally available foods through linkages of food vendors and school system | 2021 -2025 | 56,273,698 | FMoH, FMEnv, UBEB, SUBEB, TETFund, and others | 1 |
| FME, FMOH | Review minimum standards, print and distribute SOPs (Nutrition and Health) for early- child care centers (ECCC) | 2021 -2025 | 34,912,258 | FMoH, FMARD, UNICEF, UBEC, SUBEB, FMWASD | 1 |
| FME | Conduct annual assessment of Household consumption of iodized salt using Primary School children | 2021 -2025 | 21,875,000 | FMoH, MBNP, SCOs, NAFDAC, Partners | 3 |
| Sub-Total | | | **113,060,956** |  |  |

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| Lead Agency | Activities | Time Frame | Indicative Costing (N) | Other Agencies/Organizations | Strategic Objective |
| FMWR | Support water supply interventions in emergency settings and rural areas | 2021 -2025 | 21,360,658 | FMoEnv, NEMA, Development Partners | 1 |
| FMWR | Construction of sanitation and hygiene facilities in IDPs camps, public places and institutions | 2021 -2025 | 6,351,616 | FMoEnv, NEMA, OPS, Development Partners | 1 |
| FMWR/  FMoH | Training on hygiene promotion, Community Water Safety Plan and triggering on Community Led Total Sanitation (CLTS) | 2021 -2025 | 314,578,773 | FMoH, NPHCDA, FMEVN FMWR; FMWASD, CSOs , Development Partners | 3 |
| Sub-Total | | | **342,291,047** |  |  |

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| Lead Agency | Activities | Time Frame | Indicative Costing (N) | Other Agencies/Organizations | Strategic Objective |
| MFBNP | Advocate to relevant Banks to promote increased access to Micro-Credit facilities for farmers especially Women farmers to expand farm operations (interest rates and collaterals) | 2021 -2025 | 2,979,025 | CBN, FMARD, BOI, BOA, FMWASD, BOI, BoA, and commercial banks. | 1 |
| NCN / MFBNP | Advocate for the creation of nutrition department and incorporate nutrition objectives into MDAs’ development policies, plans and programmes. | 2021 -2025 | 2,123,654 | MBNP, MDAs; Civil Service Commission | 4 |
| MFBNP | Mid and Endline Review of implementation of the National Multisectorial Plan of Action for Nutrition | 2021 -2025 | 14,836,320 | MDAs; Research Institutes; Universities | 4 |
|  |  |  |  |
| MFBNP | Conduct stakeholders (consultation) meetings for nutrition related investment and sectoral policies including social protection policies | 2021 -2025 | 9,112,163 | MDAs | 4 |
| MFBNP | 2day Annual review meeting of SCFN with NCFN | 2021 -2025 | 76,451,556.00 | MDAs, SCFN | 5 |
| MFBNP | Conduct sustained advocacy to policy makers, traditional and religious leaders in Abuja, for improved nutrition funding | 2021 -2025 | 21,236,543.00 | FMoH; CSOs | 5 |
| MFBNP | Conduct Annual Nutrition Week on topical issues in nutrition | 2021 -2025 | 21,236,543.00 | FMoH, MDAs, NCFN, Development Partners, SCFN, Universities | 5 |
| MFBNP | Conduct assessment at all levels on determinants of low financial investments in Food & Nutrition programs compared to other life-saving interventions in partnership with private sector | 2021 -2025 | 27,443,062.50 | MDAs, CS-SUNN, NSN | 5 |
| MFBNP/  NCFN | Advocate for the implementation of policy and costed national multisectorial plan of action for food and nutrition | 2021 -2025 | 21,236,543 | MDAs, CS-SUNN, NSN, Other Partners | 6 |
| MFBNP | Conduct regular budget tracking to evaluate budget performance of F &N in all sectors. | 2021 -2025 | 17,762,500 | MDAs, CS- SUNN, NSN | 6 |
| MFBNP | Conduct bi-annual meeting of the National Council on Nutrition | 2021 -2025 | 2,654,568 | Office of the Vice President, MDAs, Development Partners, SUN Nigeria | 6 |
| MFBNP | Organize quarterly Nutrition Partners meetings at all levels | 2021 -2025 | 15,927,407 | MDAs, Development Partners | 6 |
| MFBNP | Conduct quarterly meetings of National/States/LGAs Committee on Food and Nutrition at all levels | 2021 -2025 | 79,441,661 | MDAs, Development Partners | 6 |
| MFBNP | Organize annual National Nutrition Networking NNN meeting of all nutrition stakeholders | 2021 -2025 | 57,466,086 | FMoH, FMARD, FMoE, FWASD, Private Sector | 6 |
| MFBNP | Build the capacity of Nutrition desk officers in MDAs/LGAs and leaders of Professional Associations in Nutrition through training &retraining on Nutrition Programming, resource mobilization and allocation | 2021-2025 | 336,514,264 | MDAs, UNICEF and Development Partners | 6 |
| NCFN/SCFN/LGFN | Conduct regular and periodic monitoring on food and nutrition activities in collaboration with partners and the private sector at all levels | 2021 -2025 | 78,498,758 | MDAs, Universities, Research Institutes, NSN, Development partners and Private Sector | 6 |
| NBS/MBNP | Establish a nutrition Portal and develop tools for the collection of core Nutrition data in partnership with key stakeholders | 2021 -2025 | 66,427,799 | FMoH, FMARD, FMOE, UNICEF, Universities and Research Institutes | 6 |
| NBS/MBNP | Build the capacity of Nutrition implementers (OICs, NFPs, M & E, agric extension officers and other nutrition officers/ workers at all levels on the use and management of level appropriate nutrition dashboard | 2021 -2025 | 160,255,203 | FMoH, FMARD, FMIC, FMoE, Universities, Development Partners | 6 |
| Sub-Total | | | **1,011,603,656** |  |  |

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| Lead Agency | Activities | Time Frame | Indicative Costing (N) | Other Agencies/Organizations | Strategic Objective |
| FMARD/  FMITI | Promote the formation of women farmers into sustainable cooperative groups for the provision of grants and revolving loans | 2021 -2025 | 13,728,383 | BOI, BoA, FMWASD, and commercial banks. | 1 |
| FMITI | Promote regulation for the establishment of commodity trading centres | 2021 -2025 | 55,000 | FMARD, FMoI, NEPC, MAN, NACCIMA | 1 |
| FMITI | Support local production of RUTF through advocacy to potential industries in Nigeria | 2021 -2025 | 10,618,272 | FMOH, FMIC, BOI, MBNP | 2 |
| FMITI | Support local production of Premixes through advocacy to potential industries in Nigeria | 2021 -2025 | 10,618,272 | FMOH, FMIC, BOI, MBNP | 2 |
| FMITI | Support local production of Micro nutrient powder through advocacy to potential industries in Nigeria | 2021 -2025 | 10,618,272 | FMOH, FMIC, BOI, MBNP | 2 |
| Sub-Total | | | **45,638,199** |  |  |

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| Lead Agency | Activities | Time Frame | Indicative Costing (N) | Other Agencies/Organizations | Strategic Objective |
| NAFDAC | Register and license food handlers / food operators engaged in quality and safe food processing and storage | 2021 -2025 | 36,538,269 | SMoH, SME. SMEnv | 1 |
| NAFDAC | Scale-up the activites on enforcement of Food Fortification and salt iodization programs | 2021 -2025 | 31854814.86 | FME, FMOH, FMBNP, SMOH, SPHCDA, Development partners | 2 |
| NAFDAC | Scale – up activities in enforcing the provisions of International Code of Marketing of Breastmilk Substitutes (BMS) | 2021 -2025 | 31854814.86 | FMOH, NPHCDA,  FMI, NAO, Development partners | 2 |
| NAFDAC/FMARD | Promotion of safe practices on Pesticide utilization for food stuff preservation | 2021 -2025 | 20,809,025 | FMoH; NAFDAC; FMI,FMST, CPC | 3 |
| Sub-Total | | | **121,056,924** |  |  |

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| Lead Agency | Activities | Time Frame | Indicative Costing (N) | Other Agencies/Organizations | Strategic Objective |
| NEMA | Support effective implementation of Conditional Cash Transfer Programmes(CCT), food rations or food supplements in emergency situation | 2021 -2025 | 152,378,781 | FMOH, FME, PARTNERS FMOH, FME, PARTNERS OH, FME, PARTNERS | 1 |
| Sub-Total | | | **152,378,781** |  |  |

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| Lead Agency | Activities | Time Frame | Indicative Costing (N) | Other Agencies/Organizations | Strategic Objective |
| MOIA | Advocate for increase in import levies and excise duties on commodities that can be locally produced | 2021 -2025 | 110000 | MoI, Nigeria Custom Service, MOIA, FMARD | 1 |
| Sub-Total | | | **110000** |  |  |

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| Lead Agency | Activities | Time Frame | Indicative Costing | Other Agencies/Organizations | Strategic Objective |
| FMoWH | Advocate for rehabilitation of the existing rural road network and construction of new ones for easy transportation of farm produce | 2021 -2025 | 1,375,000 | FMARD, MWH, | 1 |
| Sub-Total | | | **1,375,000** |  |  |

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| Lead Agency | Activities | Time Frame | Indicative Costing (N) | Other Agencies/Organizations | Strategic Objective |
| FMST | Promotion and dissemination of research findings on food processing and preservation technology for use in households | 2021 -2025 | 121,563,283 | FMoH; FMARD; Universities; Research Institutes (NISPRI; FIIRO) | 1 |
| Sub-Total | | | **121,563,283** |  |  |

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| Lead Agency | Activities | Time Frame | Indicative Costing (N) | Other Agencies/Organizations | Strategic Objective |
| FMWASD | Advocate for legislation of the prolongation of maternity leave and enactment of paternity leave | 2021 -2025 | 2,369,878 | MB&NP, National House of Assembly, FMoH, Ministry of Labour and Productivity. | 2 |
| FMWASD | 13. Establishment of crèches in workplaces to promote Exclusive Breastfeeding. | 2021 -2025 | 340,963,057 | FMoH, FMOH, SMOH, SMWASD | 2 |
| FMWASD | Promote awareness on Girl Child Education, end Child Marriage and adolescent nutrition and health related practices | 2021 -2025 | 109,742,716 | FMOI,FME, Development Partners | 2 |
| FMWASD | Engage traditional, religious and opinion leaders to support community level action on nutritional care of vulnerable groups and encourage utilization of PHC services | 2021 -2025 | 133,265,730 | FMoH, FMIYDC, CSOs and development partners | 2 |
| Sub-Total | | | **586,341,381** |  |  |

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| --- | --- | --- | --- | --- | --- |
| Lead Agency | Activities | Time Frame | Indicative Costing (N) | Other Agencies/Organizations | Strategic Objective |
| NPHCDA | Provide Orientation for health staff to improve ANC attendance | 2021 -2025 | 358,083,655 | FMOH, MB&NP, Development Partners | 2 |
| NPHCDA | Procure and distribute Iron-folic acid supplementation to pregnant women during MNCH Weeks | 2021 -2025 | 4,782,920,423 | MB&NP, MWASD, FMoH | 2 |
| NPHCDA | Procure and distribute Vitamin A Supplements during MNCHW and other supplementary activities for under 5 children | 2021 -2025 | 4,292,944,196 | FMOH, MBNP, Ministry of Information & Culture, CSOs, Development Partners | 2 |
| NPHCDA | Implementation of baby friendly initiative in all health facilities and delivery maternities | 2021 -2025 | 75,959,690 | FMOH, MBNP, Ministry of Information & Culture, CSOs, Development Partners | 2 |
| NPHCDA | Promote the establishment of Nutrition/food demonstration corner (optimal MIYCF practices) in the health facilities | 2021 -2025 | 141,298,207 | FMOH, MB&NP, Development Partners | 2 |
| NPHCDA/FMoH | Scale up implementation of C-IYCF for optimal infant and young child feeding | 2021 -2025 | 324,100,684 | MB&NP, FMoH, CSOs, Development Partners | 2 |
| NPHCDA | Promote regular monitoring of growth and development of Children under 5 at health facilities and communities. | 2021 -2025 | 91,258,311 | FMoH, SCOs, Partners, SMOH, SPCHDA | 3 |
| NPHCDA | Scale up and strengthen CMAM sites | 2021 -2025 | 233,092,299 | FMoH, Development Partners | 3 |
| NPHCDA | Procure and distribute Zinc, L -ORS, de-worming tablet and RUTF for CMAM and routine services (50% Coverage) | 2021 -2025 | 4,283,857,164 | FMOH; Development Partners, SPHCDA, SMoH |  |
| Sub-Total | | | **14,583,514,629** |  |  |

# Annex V: Reviewed Documents

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