



EMERGENCY NUTRITION RESPONSE

Overview

WFP's emergency response in Northeast Nigeria emphasises a preventative nutrition approach that delivers both nutrition specific and nutrition sensitive interventions to prevent and manage malnutrition amongst the most vulnerable populations. With an emphasis on children under five years and women of reproductive age (15 to 49 years), and highlighting the critical 1,000 Days 'window of opportunity', WFP's integrated and multisectoral actions aim to stabilise and improve the nutrition situation, including investments in dietary diversity, and linkages with healthcare, education and improved water, sanitation and hygiene practices.

In 2017, WFP provided emergency nutrition assistance to a monthly average of 158,000 young children and 90,000 pregnant and lactating women in 25 LGAs in Borno, Yobe and Adamawa states. WFP will increase the number of nutrition beneficiaries to 212,000 and 149,000, respectively, in 2018.

In mid-2018, WFP will support limited facility-based moderate acute malnutrition (MAM) treatment through facility and mobile team-based targeted supplementary feeding programmes (TSFP), in collaboration with UNICEF, and as part of the community-based management of acute malnutrition (CMAM) approach. During lean seasons, the prevention and treatment activities will be scaled up in response to the expected seasonal increase in needs.

How we work

WFP's prevention activities, delivered through Blanket Supplementary Feeding Programme (BSFP) modalities, focus on children 6 to 23 months and pregnant and lactating women in areas where high rates of acute and chronic malnutrition are identified through nutrition assessments and surveillance, as well as high levels of food insecurity. Specialised nutritious foods—fortified blended flours or ready-to-use supplementary foods—are provided to the children and women as a monthly supplement to their diets regardless of their nutritional status.

The preventative nutrition activities also include children 24 to 59 months with MAM particularly during the lean season when the risks of malnutrition and nutritional vulnerability are higher. The MAM children receive the same specialised nutritious foods.

WFP's preventative nutrition approach seeks to improve nutrient intake, strengthen dietary diversity, and emphasise optimal nutrition practices—especially among young children, women of reproductive age, adolescent girls and other nutritionally at-risk groups (such as persons living with HIV/AIDS). It includes nutrition education, and strong social and behaviour change communication. These interventions are linked to the broader multisectoral approach towards addressing malnutrition.

Partnerships

WFP works closely with the Federal and State Emergency Management Agencies (FEMA and SEMA), and the Federal Ministry of Health (FMOH) and its state level Primary Health Care Departments. Nutrition Sector members, including UN agencies such as UNICEF and WHO, are key WFP collaborators and implementers. As the situation improves, WFP's life-saving assistance will transition from emergency to recovery interventions, whilst strengthening the capacity of the Government to take over the nutrition response.



Aishat Abubakar

23-year-old Aishat Abubakar brings her one year old son, Mohammed, to the WFP Blanket Supplementary Feeding Programme site in a large Maiduguri school compound where she and other caregivers of children 6 to 23 months receive the specialised nutritious food 'SuperCereal Plus', popularly known as *Magani Tamuwa*, or 'malnutrition medicine' in Hausa (local language).

The SuperCereal Plus is cooked by mothers into a micronutrient-enriched and fortified porridge - one of the specialised nutritious foods that WFP provides to prevent acute (wasting) and chronic (stunting) malnutrition, including micronutrient deficiencies, in young children.

"You would cry to see Mohammed five months ago," Aishat says of her now thriving child. "I could not produce enough milk to breastfeed him, but since WFP enrolled him for this *Tamuwa*,

he is now looking healthy."

In Maiduguri, and elsewhere in the three states of Borno, Adamawa and Yobe where WFP has intervened with emergency nutrition assistance, the rates of acute malnutrition in children have dropped from 30 percent a few months ago to around 10 percent today, says WFP Nutritionist Martin Ahimbisibwe.

"That's because of the nutrition and food assistance WFP has provided together with multi-sectoral support from other humanitarian actors," he adds.

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SUSTAINABLE DEVELOPMENT



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