Fill the Nutrient Gap (FNG) Nigeria
Executive Summary

Nigeria experiences a multiple nutrition burden with high rates of child and maternal undernutrition existing alongside overweight and obesity. In 2018, around 37 percent of children under 5 were stunted, 28 percent of women of reproductive age were overweight or obese, and 58 percent of them were anaemic. High rates of malnutrition are a concern as nutrition is a crucial pillar in the development of a healthy and productive nation. Healthy and nutritious diets are one of the main pathways for improved nutrition but being able to afford and access adequate nutritious foods is a challenge for many households in Nigeria.

Using a systems approach, the FNG identifies bottlenecks across the food system that result in inadequate dietary intake and ultimately malnutrition; the FNG’s emphasis is on availability, cost, and affordability of nutritious foods. The FNG analysis is designed to contribute to policy and programming across different sectors including health, agriculture, social protection and education. In Nigeria, the FNG supports the National Multi-Sectoral Plan of Action for Food and Nutrition (2021-2025) and Nigeria’s commitments for food systems transformations.

Process

The Nigeria FNG analysis took place from June 2021 to July 2022. A wide range of stakeholders provided inputs throughout the analysis including government ministries, civil society, United Nations agencies and
bilateral donors, the private sector, and academia. Inception workshops were held in Abuja and Maiduguri in November 2021 to validate baseline results and to develop a modelling plan. This was followed by a workshop in May 2022 where stakeholders validated results and used them to formulate recommendations.

**Methodology**

The FNG analysis identifies nutrient gaps and barriers to adequate nutrient intake within the food system. There are two components: a Cost of the Diet (CotD) analysis and a secondary literature review. The CotD analysis is a linear optimization tool to estimate the lowest cost of a nutritious diet and its affordability. The Nigeria CotD analysis used food price data which were collected from June to August 2021 in 185 urban and rural markets across all 36 states and Federal Capital Territory (FCT), and it used expenditure data which came from the Nigeria Living Standards Survey (NLSS) 2018-19.

Stakeholders use the FNG findings to identify and prioritize interventions that could be implemented by different sectors to improve accessibility and affordability of nutritious diets.

**Main findings**

1. Malnutrition in all its forms is a key concern in Nigeria. Nutrition outcomes vary widely across geographic and socioeconomic groups and these inequities have worsened over the years.

2. The average diet in Nigeria is not diverse and is heavily based on starchy staples. 62 percent of an average household’s caloric intake comes from staples with the proportion being higher in northern states. Households in higher consumption quintiles are more likely to consume a diverse diet that includes animal source foods, fruit and vegetables.

3. The cost of meeting nutrient needs is more than twice the cost of meeting energy needs. The cost of a nutritious diet for a five person household in Nigeria was found to be 1,687 Nigerian Naira (NGN) per day on average, ranging from NGN 1,035 to 3,219 depending on location.

4. One in three households was not able to afford the lowest cost nutritious diet. The non-affordability rate varies greatly across states, ranging from 9 percent to 76 percent. The cumulative affordability gap was estimated to be NGN 3.3 trillion - this is the amount that would be needed for all households to be able to afford nutritious diets.

5. Infrastructure development has not kept up with demographic development, a situation that has negative implications for access to nutritious diets. Households in rural and urban areas predominantly rely on markets for their food, making them vulnerable to market shocks.

In conflict-affected areas, access to, and functionality of, markets is further restricted due to worsening security.

6. Adolescent girls and pregnant and breastfeeding women have high nutritional needs, translating into high cost and putting them at higher risk of malnutrition. This risk can be reduced by targeted interventions that improve nutrient intake, such as micronutrient supplements or specialised nutritious foods.

7. Poor infant and young child feeding practices and lack of diverse diets lead to malnutrition which can have lifelong consequences. Suboptimal breastfeeding leads to higher nutritious diet costs for children as more nutrient-dense complementary foods are needed to meet nutrient needs.

8. Large-scale food fortification can provide additional micronutrients for vulnerable households and individuals who cannot access diverse, nutrient-dense foods. Biofortification leverages the agriculture sector to improve intake of essential micronutrients for households with limited access to centrally processed foods.

9. Continued high levels of inflation and economic slowdown due to COVID-19 have pushed nutritious diets further out of reach of Nigerians. Social assistance programmes can improve access to nutritious diets for the most vulnerable if designed to adequately close the affordability gap, including through linking programmes with interventions targeted to the most nutritionally vulnerable.

10. Many people in the Northeast continue to need humanitarian assistance. Household assistance can cover a household’s nutritious diet cost if adequate in size (cash-based transfers) and nutrient composition (in-kind transfers).

11. Home grown school feeding programmes encourage the inclusion of nutritious and fortified foods in school meals, which can contribute towards the nutrient intake of school-going children. A nutritious school meal reduces the risk of nutritional deficiencies and the economic burden on the household of providing nutritious foods.

12. Agriculture policy in Nigeria prioritizes staple production. A lack of production diversification leads to underdeveloped value chains of nutritious foods. Food supply is also affected by high rates of post-harvest loss arising from inadequate farm practices, poor access to markets by producers, and weak infrastructure.

13. Multisectoral interventions have the potential to make nutritious diets more accessible and affordable and to improve micronutrient intake, leading to better nutrition outcomes. Existing momentum on the multisectoral approach to nutrition and food systems transformation should be leveraged.
Stakeholder recommendations

Cross-cutting recommendations

• Ensure development and use of systems to tag nutrition and food system for appropriate allocation, monitoring, release and utilization of funds.
• Ensure evidence-based decisions for programme planning and implementation, and strengthen monitoring and information systems throughout the programme cycle.
• Build subnational institutional capacity for multisectoral planning, coordination and implementation. Where needed, provide technical support to domesticate federal level policies into state level plans.

Social assistance

• Use FNG findings to sensitize decision-makers at national and subnational levels on investing in nutrition-sensitive social assistance.
• Make the National Cash Transfer Programme more nutrition-sensitive by regularly reviewing transfer size, considering food availability, prices and the affordability gap, and exploring the feasibility of providing nutrition-specific interventions. Update the National Social Register to capture nutritionally vulnerable individuals for more inclusive targeting.

School feeding

• Use FNG evidence to advocate for increasing the coverage of the National Home Grown School Feeding Programme (NHGSFP) to include nurseries and grades 4 to 6.
• Advocate for including nutrient-dense foods, including fortified foods, to make school meals more nutritious and to create institutional demand for these foods.
• Use schools as a platform to provide complementary nutrition interventions and behaviour change campaigns.
• Improve availability and use of programme manuals and strengthen evidence-based monitoring throughout the programme cycle.

Emergency assistance

• Improve nutritional adequacy by including fortified and nutrient-dense foods in in-kind assistance, using nutritious diet cost to inform the cash-based transfers, and providing specialized nutritious foods to nutritionally vulnerable groups.

• Use FNG findings to inform the size and list of foods included in the fresh food voucher programme.
• Provide an integrated package of nutrition-specific and -sensitive interventions, including behaviour change communication to households receiving emergency assistance.
• Design a “Food for Asset” programme targeted towards small-scale farmers to support the development of community infrastructure.

Agrifood systems

• Promote production of nutritious foods and scale up capacity building of smallholder farmers to cultivate nutritious crops, including biofortified crops.
• Raise awareness among producer households to encourage consumption of nutritious foods rather than selling everything they produce.
• To reduce post-harvest loss, improve storage facilities at farm level, invest in infrastructure at market level and set up post-harvest management training centres.
• Strengthen linkages between farmers and markets to ensure farmers are not selling their produce at lower than market prices.

Health system

• Strengthen capacity on nutrition among health staff involved in the design, planning and implementation of nutrition activities.
• Ensure integration, prioritization and monitoring of nutrition interventions among other interventions delivered by the health system.
• Pilot the provision of the multiple micronutrient tablet (MMT) to pregnant and lactating women (PLW), followed by advocacy to ensure scale-up.

Fortification

• Strengthen public sector capacity to monitor and enforce fortification standards at different levels (production, retail). Provide incentives such as tax breaks or subsidies to the private sector to encourage fortification and to follow standards.
• Link national programmes such as school feeding and social assistance to become additional distribution points of fortified foods and create institutional demand.
• Build private sector capacity to produce specialized nutritious foods and fortified complementary cereals, providing incentives to encourage investment and production.
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