REPORT OF A ONE-DAY ENGAGEMENT WITH WIDER CSO GROUPS ON THE PREVENTION AND TREATMENT OF SEVERE ACUTE MALNUTRITION (SAM) AS A CHILD RIGHT ORGANISED BY CISLAC AT MAKERA MOTEL, KATSINA STATE ON 27TH JUNE, 2019.

INTRODUCTION

Malnutrition constitutes a serious setback to socio-economic development of a nation, and sustainable growth in Northern Nigeria cannot be achieved without prioritised attention to scale-up and sustain investment for nutrition.

While underlying causes of malnutrition include: food insecurity, socio-economic deprivation, improper feeding, inappropriate caregiving resources, poor access to health services, safe and hygienic environment; the basic causes of malnutrition are: inadequate knowledge and financial resources, politics and governance, lack of political will as well as other socio-economic and environmental challenges.

Katsina state records 4.1% children with Severely Acute Malnutrition, 35% stunted, 14.9% wasting and 18.5% under-weight rates (Multiple indicator cluster survey, 2017).

In 2017, no fewer than 13,676 Severely Acute Malnourished children were saved from the State-Government-UNICEF intervention through Community Management of Severe Acute Malnutrition (CMAM) activities in the state.
The State Government has initiated Infant and Young Child Feeding as a proactive measure to sensitize communities against childhood malnutrition.

As part of its costed Annual Operational Plan, the State has a package where funding for nutrition is inclusive. With 19 out of 34 LGAs living without CMAM, more funds are required to cure yet-to-cover SAM children in the state.

The budget line for nutrition intervention has been transferred from Department of Budget and Economic Planning to the State Primary Health Care Development Agency (SPHCDA) for improved coordination and efficiency.
The state’s media outfits have in recent times formed a platform titled “Health Promoters Forum” to discuss issues bothering awareness and advocacy on health, nutrition inclusive. An estimated N250, 000 is released by the State Government through the Ministry of Local Government to each LGA (covered in CMAM) monthly for the management of SAM children in addition to the regular prioritized attention to MNCH Week.

The State House of Assembly relates with the CSOs to get citizens’ inputs to budgetary processes and oversight functions. UNICEF has established a community-based approach to prevent malnutrition in the CMAM LGAs. As part of sustainability plan, the State Government has Women Empowerment programmes to reduce poverty and increase access health care services.

Participants recognized the importance of adequate and efficient Primary Health Care in the effective delivery of Community-based Management of Severe Acute Malnutrition (CMAM) activities in the state, adding that actualizing the implementation of Primary Health Care provisions as enshrined in the Act is paramount to achieve adequate coverage and sustainable nutrition investment and activities in Nigeria.
The meeting noted that adequate financial commitment and attention by the policy and legislative realms are essential for efficient prevention and treatment of SAM in Katsina state, considering that the State Government has budgeted N270million to nutrition activities in Katsina state in the 2019 Appropriation.

Highlighting the role of the civil society and human rights activists towards the prevention and treatment of SAM, the meeting noted the need for the group to study the SAM situation more carefully and critically with a view to: understanding and documenting progress, gaps and challenges; liaise with appropriate authorities and discuss the real implications of our situation; identify where the problem actually is (Legislature, Executives, personnel, public); have evidence-based facts and figures; attend and participate in budget processes to amplify funding for SAM; engage legislators and executives on SAM prevention and treatment; engage and mobilize the public (town halls), visit facilities; publicize and disseminate information on nutrition related policies; conduct need assessment and outcome to inform budgetary allocations; improve supervision to ensure adherence to formulated policies; address poverty especially among women by providing economic empowerment to them.
DECLARATION OF ACTION AFTER ONE-DAY ENGAGEMENT WITH WIDER CSO GROUPS ON THE PREVENTION AND TREATMENT OF SEVERE ACUTE MALNUTRITION (SAM) AS A CHILD RIGHT HELD AT MAKERA MOTEL HELD, KATSINA STATE ON 27TH JUNE, 2019.

Preamble

Civil Society Legislative Advocacy Centre (CISLAC) organized a one-day engagement with wider CSO groups on the prevention and treatment of Severe Acute Malnutrition (SAM) as a child right. After exhaustive deliberation on the aim of the meeting which is to engage the CSOs on SAM issues and how they can ensure that SAM is recognised as a human right issue and hold government accountable on their commitments on funding and prioritization of Ready-to-Use Therapeutic Food (RUTF) and Community-based Management of Acute Malnutrition (CMAM), we the participants:

Recognized that Severe Acute Malnutrition constitutes a serious setback to socio-economic development of a nation; and sustainable growth in Katsina state cannot be achieved without prioritized attention to scale-up and sustain investment for nutrition through prevention and treatment of SAM;

Also recognized that adequate nutrition status constitutes component of the rights of a child as enshrines under section 13 (1) of Child Right Act 2013 which provides for every child to enjoy the best attainable state of physical, mental and spiritual health;

Noted that Section 11 of the National Health Act 2014 establishes Primary Health Care Provision Fund to be funded through Federal Government annual grant of not less than 1% of its Consolidated Revenue Fund with 50% of the Fund to be used for the provision of basic minimum package of health services to citizens;

Also noted that adequate financial commitment and attention by the policy and legislative realms are essential for efficient prevention and treatment of SAM in Katsina state;

Further noted that the State Government has budgeted N270million to nutrition activities in Katsina state in the 2019 Appropriation.

Recommended expansion of CMAM programmes to yet to reach Local Government Areas in the state to ensure full coverage in the treatment and prevention of SAM;

Further recommended Increase focus on prevention of SAM, while galvanizing curative measures through the use of Ready-to-Use Therapeutic (RUTF), giving cognisance to the existence and functionality of various Nutrition Support Groups in the state;
Also recommended Massive awareness on the importance adequate nutrition status and utilization of Ready-to-Use Therapeutic at all levels to mitigate unfavourable SAM indices;

Committed to prioritize prevention and treatment of Severe Acute Malnutrition through active advocacy to relevant MDAs, Committees in the State House of Assembly, media executives, the State Traditional Council, and religious leaders;

Affirmed to sustained budget line for nutrition and ensure timely release of funds and transportation of procured RUTF to the facilities to avert stock-out in distribution across CMAM in the state;

Endorsed full implementation of Primary Health Care provisions as enshrined in the National Health Act to achieve adequate coverage and sustainable nutrition investment and activities in state;

Committed to build political will, influence state policy and raise community awareness on the prevention and treatment of SAM in Katsina state;

Will enhance advocacy and communication to policy and legislative realms to promote adequate policy environment to effect adequate nutrition status as a child right;

Committed to strengthen advocacy for the domestication of Child Right Act 2013 in the state to promote the rights of a child to adequate mental and physical health as well as prioritise prevention and treatment of SAM as a child right;

Will advocate for expansion of Community Management of Acute Malnutrition (CMAM) programmes to yet-to-reach LGAs through existing policies implementation, adequate budgetary allocation, timely release, cash backing, utilization of funds and oversight activities;

Will strengthen advocacy to the identified state and non-state actors to galvanise supports for fulfillment of policy commitments on prevention and treatment of SAM in Katsina state;

We hereby nominate one participant from each organization to commit to these actions on our behalves.

SYNDICATE GROUP WORK

During the meeting, a session was dedicated for an intensive group work for the participants to devise strategic stakeholders, challenges and means of engagement. The groups were divided into three (3) with the following questions:
1. Identification of nutrition influencers with strong political clout
2. Identification of traditional and religious leaders to engage in the state that can bring the desired change in nutrition landscape in the state
3. Identification of nutrition champions in relevant MDAs in the state.
4. Role of individual CSOs in bringing change in nutrition landscape in the state
5. Challenges militating against the smooth CSOs engagement in the state

GROUP PRESENTATIONS

GROUP ONE:

Question 3: Identification of relevant MDAs

1. Department of Budget & Planning
   - Director of Planning
   - S/A Budget
2. Ministry of Health
• Commissioner
• Permanent Secretary
• Nutrition officer
3. Ministry of Information
• Media houses Executives
• Correspondent chapel (Chairman)
• Commissioner
• Permanent Secretary
4. Primary Health Care Development Agency
• Executive Secretary
5. Ministry of Women Affairs
• Permanent Secretary
• Commissioner
• Director Social Welfare
6. State Health Management Board
• Chief Medical Officer
7. Ministry Of Agriculture
• Permanent Secretary
• Hon. Commissioner
8. Ministry Of Education
• Permanent Secretary
• Director Schools
9. Ministry Of Religious Affairs
• Commissioner
• Permanent Secretary
10. SUBEB
• EXECUTIVE Secretary
11. Katsina State Eco Empowerment Directorate
• S A
• Permanent Secretary
12. CSDACCOM
• Project Manager
13. Ministry of LG & Chieftaincy Affairs
• Permanent Secretary
• Director Chieftaincy
• Commissioner
14. Emirate Councils Reps
15. Government House
Q1: Identification of nutrition influencers with strong political clout

- Three wives of H.E. Governor of Katsina state
- Haj Rabia (Former Food & Nutrition officer, Katsina State Primary Health Care Dev. Agency)
- Dr. Musaawiya Aliyu (Former Chairman KSPHCDA)
• Dr. Shamsudeen Yahaya (Executive Secretary, KSPHCDA)
• Hon. Tasiu Maigari Zango (Speaker Katsina State House of Assembly)
• Haj. Ambaru Wali (Associate to the wife of first Lady)
• Haj. Halima Adamu (Pediatric Expert and former Commissioner of Health)

Q2: Identification of traditional and religious leaders to engage in the State.

• Emir of Katsina
• Emir of Daura
• Galadimanc Katsina
• Yandakan Katsina
• Kauran Katsina
• Durbin Katsina
• Chairman Jibwis
• Chairman Munazama
• Chairman IMN
• Chairman Ahlul-Quran
• Chairman CAN
• Chief Imam Daura
• Chief Imam Funtua
• Chief Imam Katsina
• Chairman Council of Ulama
• Malama Lami Sabiu Jibia
• Malama Barira Musa

GROUP THREE
Question 5: Challenges militating against the smooth CSOs engagement in the State.

- Financial Constraints
- Inaccessibility of data
- Other commitments of members and the organization
- Weak Coordination
- Government misconception on the CSOs.