COMMUNIQUE ISSUED AT THE END OF A ONE-DAY ENGAGEMENT WITH WOMEN AND YOUTH GROUPS ON THE PREVENTION AND TREATMENT OF SEVERE ACUTE MALNUTRITION AS A CHILD RIGHT ORGANISED BY CIVIL SOCIETY LEGISLATIVE ADVOCACY CENTRE (CISLA) IN COLLABORATION WITH INTERNATIONAL SOCIETY OF MEDIA IN PUBLIC HEALTH (ISMPH) HELD AT DUTSE ROYAL HOTEL, JIGAWA STATE ON 4TH SEPTEMBER, 2019

Preamble

Civil Society Legislative Advocacy Centre (CISLAC) in collaboration with International Society of Media in Public Health (ISMPH) organized a one-day engagement with women and youth groups on the prevention and treatment of Severe Acute Malnutrition (SAM) as a child right. The meeting aimed at engaging women and youth groups on SAM issues and how they can ensure SAM is recognised as a human right issue and hold government accountable on its commitments on funding and prioritization of prevention and treatment of SAM through sustained support for Community-based Management of Acute Malnutrition (CMAM) activities in the state. After brainstorming exhaustively on various thematic issues, the following observations and recommendations were made:

Observations:

1. As adequate food production and optimal nutrition are fundamental to secure lives and healthy living, malnutrition impedes individual's cognitive and physical growth and effective performance in education, socio-economic and political spheres.

2. Poor personal hygiene, inadequate individual knowledge and understanding on the minimum nutrition requirements for food preparation and consumption exacerbate malnutrition burden in Jigawa state.

3. Continued migration from rural to urban areas, lack of efficient use of the state naturally endowed resources and existing poverty level are contributory factors to Severe Acute Malnutrition in the state.

4. Inadequate access to hard-to-reach areas by the existing outreach sensitization services in the state delays adequate coverage for the treatment and prevention of SAM in the state.

5. The role of women and youth groups as agents of change is paramount in social mobilization and community sensitization on the prevention and treatment of SAM.

6. Malnutrition presents in over-nutrition, under-nutrition, mineral and vitamin deficiency.

7. Severe Acute Malnutrition is driven by poor access to health care, rising poverty level, failure in governance, inappropriate and selective breastfeeding, institution weakness, gender problems, diseases, food insecurity, and inappropriate feeding habit.

8. While malnutrition impacts negatively on the socio-economic development of a nation, sustainable growth in Jigawa state cannot be achieved without prioritised attention to adequate and sustainable investment for nutrition at all levels.
9. Social media platforms are enabling tools to advance awareness and sensitization on the prevention and treatment of SAM.

10. Inadequate knowledge and awareness among women and youth groups on nutrition related activities, especially at grassroots levels.

Recommendations:

1. Introduction of Infant and Young Child Feeding (IYCF) into all levels of educational curriculum in the state to cascade knowledge on minimum nutritional requirements for daily food consumption.

2. Creating a women forum for regular advocacy visit to the Ministries of Education, Agriculture and Women Affairs for increased sensitization campaign at grassroots levels through enhanced support for outreach services, especially in hard-to-reach areas in the state.

3. Massive education and awareness for women on appropriate food preparation and consumption, especially at grassroots level through practical food demonstration across CMAM facilities.

4. Increased curiosity by women and youth groups in advocating for the prioritization of Community Management of Acute Malnutrition (CMAM) programmes in the state through existing policy implementation, adequate budgetary allocation, timely release, cash backing and utilization.

5. Increased technically know-how support to local farmers and industries for the production of RUTF at local level for affordable and sustainable intervention on SAM.

6. Targeted advocacy visit to Budget and Planning Ministry by women and youth groups to ensure full mainstreaming and inclusion of adequate nutrition provision in the ongoing budget process in the state.

7. Enhanced advocacy and support by women and youth groups towards full implementation of the National Health Act in the state to activate Basic Health Care provision funds as enshrined under the Act to support sustainable CMAM activities.

8. Leveraging recently introduced Local Government Autonomy system across the country for provision of conditional cash transfer system to women at community levels to encourage self-sufficiency towards adequate maternal and childhood nutrition status.

9. Initiating dialogue with traditional institutions through evidence-based advocacy to complement existing community-based efforts as well as information sharing among women groups on the prevention and treatment of SAM.
10. Mainstreaming dedicated discussions on nutrition in existing health programmes in the media to intensify level of public awareness on the treatment and prevention of SAM.

11. Encouraging exclusive breastfeeding to boost child immune system, support cognitive and physical development, and mitigate childhood malnutrition and mortality at all levels.

12. Leveraging social media platforms with appropriate messaging development as veritable tools in raising public and policy consciousness on the prevention and treatment of SAM.

13. Involvement of TBA in the community women mobilization and participation in the prevention and treatment of SAM.

14. Targeted advocacy visit by the women and youth groups on the release of existing fund provision to eradicate to the appropriate channel in the state.

15. Creating holistic socio-economic empowerment programmes for women to promote self-sufficiency.

16. Full implementation of Jigawa State Nutrition Policy and Social Protection Policy for efficient intervention on SAM.

Signed:

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