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 MAKERA MOTEL, KATSINA STATE ON 20TH AUGUST, 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 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 women and youth groups on SAM issues and how they can ensure that 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. 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.

3. With 2.6 million Nigerian children under-5 affected by malnutrition, Katsina state records 58.0% stunting, 3.0% SAM, 31.4% underweight, as reported by Nutritional smart survey (2018).

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

5. 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.

6. While malnutrition impacts negatively on the socio-economic development of a nation, and sustainable growth in Katsina state cannot be achieved without
prioritised attention to adequate and sustainable investment for nutrition at all levels.

7. Existing abuse and misuse of Ready-To-Use Therapeutic Food (RUTF) at household levels are contributory factors hindering effort at treating Severe Acute Malnutrition in the state.

8. Social media platforms are enabling tools to advance awareness and sensitization on the prevention and treatment of SAM.

Recommendations:

1. Massive community awareness and sensitization on availability and use of Ready-To-Use Therapeutic Food (RUTF) to avert reported abuses in the state.

2. Enhanced advocacy and support by women and youth groups towards full implementation of the National Health Act, and reintroduction of Child Protection Bill in the State House of Assembly for transmission into legislation.

3. Continued capacity building for health workers, nurses across the health centres through training and retraining programmes with proactive and independent effort in monitoring and reporting stock out of RUTF to local authorities.

4. Adequate monitoring and supervision of CMAM related activities by committee members through data gathering and filling report cards at Primary Health Care facilities.

5. 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.

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

7. 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.

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