



**USAID**  
FROM THE AMERICAN PEOPLE

---

## Nigeria: Nutrition Profile

---

Malnutrition in childhood and pregnancy has many adverse consequences for child survival and long-term well-being. It also has far-reaching consequences for human capital, economic productivity, and national development overall. These consequences of malnutrition should be a significant concern for policymakers in Nigeria, where 7 percent of children under five are acutely malnourished or wasted (have low weight-for-height) and 37 percent of children under five are stunted (have low height-for-age), according to the most recent Demographic and Health Survey (DHS) (NPC and ICF International 2019).

### Background

Nigeria is the most populous nation in Africa with almost 196 million people in 2018 (UNICEF 2019). With a high fertility rate of 5.4 children per woman, the population is growing at an annual rate of 2.6 percent, exacerbating population density. By 2050, Nigeria's population is expected to grow to a staggering 401 million, which will make it the third most populous country in the world, after India and China (PRB 2019). Nigeria has one of the highest urban population growth rates in the world at 4.7 percent (UNICEF 2019).

Currently, Nigeria ranks 159th out of 162 countries in progress toward meeting the Sustainable Development Goals (SDGs) (Sachs et al. 2019). According to the most recent Demographic and Health Survey in Nigeria (2018), the lifetime risk of maternal death related to pregnancy or childbearing is 1 in 30 women. The number of infants who die between 28 days and one year of age is 28 per 1,000 live births in Nigeria, and one child in every eight will not survive to their fifth birthday (NPC and ICF International 2019).

According to the World Bank (2019), Nigeria's economy is the largest in Africa and is well-positioned to play a leading role in the global economy. Nigeria's economy largely depends on its expansive oil and gas reserves. The sharp decline in oil prices beginning in 2014 posed major challenges to the country's finances. However, with a renewed focus on economic diversification and promoting growth in the private sector, the gross domestic product (GDP) grew by 1.9 percent in 2018, with the agriculture industry accounting for approximately 25 percent of the total GDP in 2018 (World Bank 2019; Central Bank of Nigeria 2013).

The national elections, held in 2015, marked the first time in Nigeria's history that it saw a peaceful transfer of power between two political parties. In 2019, the country held national elections for the sixth time since 1999. The current administration, led by President Muhammadu Buhari, in his second term, identifies fighting corruption, increasing security, tackling unemployment, diversifying the economy, enhancing climate resilience, and boosting the living standards of Nigerians as its main policy priorities (World Bank 2019). The country is also facing a major challenge and threat in the northeast from the militant Islamist group Boko Haram, which is destroying infrastructure and conducting assassinations and abductions. As of late 2019, conflict in northeastern Nigeria had displaced more than 1.8 million people within the country and forced nearly 240,000 people to flee into neighboring Cameroon, Chad, and Niger, straining food resources in the region. Violence has disrupted agricultural and income-generating activities, reducing household purchasing power and access to food. Humanitarian assistance to populations in areas of northeastern Nigeria is limited and a risk of famine persists in areas inaccessible to relief actors. The security situation in Nigeria has further deteriorated due to escalating violence between herders and farmers in the middle belt and northwest regions, as well as attacks by roving gangs of bandits in the northwest (USAID 2020).

## **Nutrition and Food Security Situation**

In Nigeria, 37 percent of children under five years are stunted. The prevalence of stunting increases with age, peaking at 47 percent among children 24–35 months. The national stunting prevalence has improved since 2008 (41 percent), and wasting has also improved from 14 percent in 2008 to 7 percent in 2018 among children under five years. Twenty-two percent of children are underweight. However, regional variation have very high stunting, wasting, and underweight rates in some states that have not improved (NPC and ICF International 2009; NPC and ICF International 2019).

Women's nutrition is also suboptimal in Nigeria where the double burden of malnutrition is clear: the prevalence of thinness (body mass index [BMI] <18.5) among non-pregnant women of reproductive age is 11 percent and the prevalence of overweight/obesity (BMI >25.0) among non-pregnant women of reproductive age is 28 percent, although this varies by socio-demographics (NPC and ICF International 2019). One driver of Nigeria's high population growth rate is that childbearing begins early in Nigeria. By age 19, 37 percent of adolescent girls began childbearing in 2018, which is similar to 2008 when 38 percent of adolescent girls began childbearing. This has serious consequences because, relative to older mothers, adolescent girls are more likely to be malnourished and have a low-birth-weight baby, and the baby is more likely to become malnourished and be at increased risk of illness and death compared to those born to older mothers (NPC and ICF International 2019).

More children in rural areas are stunted (45 percent) than those in urban areas (27 percent), and the pattern is similar for severe stunting (22 percent in rural areas and 10 percent in urban areas). A mother's level of education generally has an inverse relationship with stunting: stunting ranges from 14 percent among children whose mothers have more than a secondary education to 29 percent among those whose mothers have no education. A similar inverse relationship is observed between household wealth and stunting. Children in the poorest households are three times as likely to be stunted (55 percent) as children in the wealthiest households (17 percent) (NPC and ICF International 2019).

The prevalence of early initiation of breastfeeding increased from 33 percent in 2013 to 42 percent in 2018, while children who received a pre-lacteal feed decreased from 59 percent in 2013 to 49 percent in 2019. Twenty-nine percent of children under six months old are exclusively breastfed; though this number decreases by age (39 percent among children zero–one month, to 29 percent among those aged two–three months, and 18 percent among those aged four–five months). In addition, while the prevalence of breastfed children 6–23 months receiving a minimum acceptable diet increased from 4 percent in 2013 to 10 percent in 2018, this is still very low (NPC and ICF International 2019).

The factors associated with food insecurity and malnutrition in Nigeria are multifaceted and include inadequate year-round diets; poor infant and young child feeding practices; high rates of illness; lack of access to health care; water, sanitation, and hygiene; armed conflict, particularly in the north; irregular rainfall; high unemployment; and poverty (Nigeria Federal Ministry of Health, Family Health Department 2014). Although chronic and seasonal food insecurity occurs throughout the country, and is exacerbated by volatile and rising food prices, the impact of conflict and other shocks has resulted in acute levels of food insecurity in the northeast (FEWS NET 2020). An estimated 1.5 million people in the states of Borno, Yobe, and Adamawa received emergency food assistance or cash transfers in the first half of 2020 but, because humanitarian food assistance delivery to the northeast remains restricted, the number who need assistance is likely much greater (FEWS NET 2020). Diet-related non-communicable diseases are also on the rise in Nigeria due to globalization; urbanization; lifestyle transition; socio-cultural factors; obesogenic diets; and poor maternal, fetal, and infant nutrition (Nigeria Federal Ministry of Health, Family Health Department 2014).

Nigeria Nutrition Data (DHS 2013, and 2018; MIS 2015)		
Population 2018 (UNICEF 2019)	195.9 million	
Population under 5 years (0–59 months) 2018 (UNICEF 2019)	32.9 million	
	2013	2018
Prevalence of stunting among children under 5 years (0–59 months)	37%	37%
Prevalence of underweight among children under 5 years (0–59 months)	29%	22%
Prevalence of wasting among children under 5 years (0–59 months)	18%	7%
Prevalence of low birth weight (less than 2.5 kg) (of children whose birth weights are known)*	8%	7%
Prevalence of anemia among children 6–59 months	68% (MIS 2015)	68%
Prevalence of anemia among women of reproductive age (15–49 years)	NA	58%
Prevalence of thinness among women of reproductive age (15–49 years) (BMI less than 18.5 kg/m <sup>2</sup> )	11%	12%
Prevalence of thinness among adolescent girls (15–19 years) (BMI less than 18.5 kg/m <sup>2</sup> )	23%	25%
Prevalence of children 0–5 months exclusively breastfed	17%	29%
Prevalence of children 4–5 months exclusively breastfed	10%	18%
Prevalence of early initiation of breastfeeding (i.e., put to the breast within one hour of birth)	33%	42%
Prevalence of children who receive a pre-lacteal feed**	59%	49%
Prevalence of breastfed children 6–23 months receiving minimum acceptable diet***	11%	10%
Prevalence of overweight/obesity among children under 5 (0–59 months)	4%	2%
Prevalence of overweight/obesity among women of reproductive age (15–49 years)	25%	28%
Coverage of iron for pregnant women (for at least 90 days)	21%	31%
Coverage of vitamin A supplements for children (6–59 months, in the last 6 months)	41%	45%
Percentage of children 6–59 months living in households with iodized salt	NA	97%

NA: Not Available

\*Birth weight was reported for only 18 percent and 16 percent of children born in the five years preceding the 2008 and 2013 NDHS surveys, respectively; information on birth weight was obtained for only 24% of births in the 2018 survey.

\*\*Among last-born children born in the five years preceding the 2008 survey and among children born in the two years preceding the 2013 survey; and among last-born children who were born in the two years preceding the 2018 survey.

\*\*\* The percentages from 2008, 2013, and 2018 are not comparable as the definition changed from consuming different numbers of food groups, which can vary by breastfed versus non-breastfed children.

## Global and Regional Commitment to Nutrition and Agriculture

Nigeria has made the following global and regional commitments to nutrition and agriculture:

<b>Year of Commitment</b>	<b>Name</b>	<b>Description</b>
2019	National Multisectoral Plan of Action for Food and Nutrition 2019–2023	This builds on the 2016 National Food and Nutrition Policy (NFNP) (see below) and sectoral plans of action including the Health Sector National Strategic Plan of Action for Nutrition (NSPAN 2009) and Nigeria Agricultural Sector Plan for Food Security and Nutrition (2016–2025).
2016	National Food and Nutrition Policy (NFNP)	The NFNP provides the framework for addressing the problems of food and nutrition insecurity in Nigeria, from the individual, household, community, and up to the national level. Key targets include reductions in stunting, wasting, maternal anemia, and adult and adolescent obesity, while increasing exclusive breastfeeding rates.
2016	National Social Behavior Change Communication (SBCC) Strategy for Infant and Young Child Feeding (IYCF) in Nigeria (2016–2020)	The strategy prioritizes early initiation and exclusive breastfeeding and diverse, nutritious, age-appropriate complementary feeding.
2012	Ending Preventable Child and Maternal Deaths: A Promise Renewed	Nigeria pledged to reduce under-5 mortality to 20 or fewer deaths per 1,000 live births by 2035 by reducing the leading preventable causes of child mortality, including undernutrition (A Promise Renewed 2017).
2011	Scaling Up Nutrition (SUN) Movement	SUN is a global movement that unites national leaders, civil society, bilateral and multilateral organizations, donors, businesses, and researchers in a collective effort to improve nutrition. In 2012, Nigeria held its first Nutrition Summit to create a “Roadmap to Scaling up Nutrition in Nigeria.” In July 2017, the SUN Business Network (SBN) in Nigeria celebrated its first anniversary where they presented their 3–5 year Strategic Business Plan in partnership with Accenture Development (SUN 2017).
2009	Comprehensive Africa Agriculture Development Programme (CAADP) Compact	CAADP is an African-led program bringing together governments and diverse stakeholders to reduce hunger and poverty and promote economic growth in African countries through agricultural development (New Partnership for Africa’s Development 2009).

## **National Nutrition Policies/Legislation, Strategies, and Initiatives**

Nigeria's commitment to improving nutrition is outlined in the following documents, which align with the government's Vision 20:2020 and the National Strategic Health Development Plan (2009–2015):

- National Strategic Action Plan for Nutrition (2014–2019)
- National Policy on Food and Nutrition (2015–2019)
- National Policy on Maternal Infant and Young Child Feeding in Nigeria (2010)
- Agricultural Sector Food Security and Nutrition Strategy (2016–2025)
- Nigeria-National Multisectoral Plan of Action for Food and Nutrition in Nigeria (2019–2023)
- Nigeria Food and Nutrition Response Plan to COVID-19 (April 2020)
- National Policy on the Health and Development of Adolescent and Young People in Nigeria (2020–2024)

As outlined in the National Multisectoral Plan of Action for Food and Nutrition, Nigeria used the National Nutrition and Health Survey (NNHS), NNHS (2018), and Multiple Indicator Cluster Surveys (MICS) (2016) as baseline and targets to reduce hunger and malnutrition by 50 percent, childhood wasting to 10 percent, child stunting to 18 percent, anemia among pregnant women to 40 percent, and prevalence of diet-related non-communicable diseases to 25 percent; while increasing exclusive breastfeeding, intake of appropriate complementary feeding, coverages of vitamin A supplementation, zinc, deworming, and access to potable water to 65 percent, 40 percent, 90 percent, 50 percent, 50 percent and 80 percent, respectively, by 2025. Comprehensive legislation is in place for implementing the International Code of Marketing of Breast Milk Substitutes. The addition of vitamin A to wheat flour, maize meal, vegetable oil, and sugar—as well as the addition of iron, zinc, folic acid, B vitamins, niacin, thiamine, and riboflavin to wheat—are mandated by law. Nigeria received Universal Salt Iodization certification in 2005 (Kuku-Shittu et al. 2016).

In April 2016, Nigeria launched its “Zero Hunger Initiative” to achieve the goal of eliminating undernutrition by 2025—ahead of the 2030 deadline of the United Nations (UN) SDGs. The former President of Nigeria, Chief Olusegun Obasanjo, is convening the initiative.

A multi-sectoral National Committee on Food and Nutrition (NCFN) is chaired and facilitated by the National Planning Commission. The NCFN is replicated at the sub-national level as the State Committee on Food and Nutrition. The Nutrition Division, located in the Department of Family Health in the Federal Ministry of Health, serves as the government body responsible for scaling up nutrition and convening government ministries and departments, including the Ministries of Health, Education, Agriculture, Women Affairs, Finance, Information, Science and Technology, and Water Resources, and the Planning Commission. All relevant ministries are also engaged through the Nutrition Partners Forum, which meets four times a year with external partners, including national and international nongovernmental organizations, UN agencies, donors, the private sector, and media, to discuss strategy development and decisions relating to funding and nutrition emergencies (Nigeria Federal Ministry of Health, Family Health Department 2014).

## USAID Programs: Accelerating Progress in Nutrition

As of June 2020, the following USAID activities are actively contributing to multi-sectoral in Nigeria. The U.S. Government selected Nigeria as one of 12 Feed the Future target countries for focused investment under the U.S. Government Global Food Security Strategy.

Selected Projects and Programs Incorporating Nutrition in Nigeria		
Name	Dates	Description
Agribusiness Investment	2018–2023	The Feed the Future Agribusiness Investment activity aims to strengthen the enabling environment for agribusiness finance and investment by improving the enabling environment for agricultural sector growth; broadening access to finance by mitigating the credit risks of agribusinesses; promoting and facilitating investment opportunities for agribusinesses to expand and scale up operations; and sustainably enhancing the performance of agribusiness micro-, small-, and medium-size enterprises.
Agricultural Extension and Advisory Services Activity	2020–2025	The Feed the Future Nigeria Agricultural Extension and Advisory Services Activity will partner with subject matter experts (SMEs) to test, replicate, and scale models of smallholder-oriented service delivery that will rapidly, effectively, and sustainably provide access to agro-inputs and services and disseminate extension messaging to 2 million smallholder farmers. This approach is underpinned by (1) a focus on building on-farm efficiencies, ensuring that farmers' limited resources are invested in the products, services, and technologies that yield the most value, and (2) integrating adaptive management and peer learning in business development assistance for SMEs to ensure the replication, scale-up, and sustainability of successful service provision models. Farm productivity, household incomes, and nutrition will increase significantly.
Agriculture Policy Project	2015–2021	The Feed the Future Nigeria Agricultural Policy Activity aims to promote inclusive agricultural, productivity growth, improved nutritional outcomes, and enhanced livelihood resilience in Nigeria through an improved policy enabling environment. The project will achieve its goal through three principal activities: (1) conduct evidence-based policy analysis, (2) strengthen the capacity (through training) of government stakeholders at federal and state levels, and (3) promote policy dialogue among stakeholders in the agricultural sector. Through these three components, the Agricultural Policy Activity aims to improve policy processes driven by empirical evidence and based on active stakeholder dialogue. By supporting an enabling environment that helps Nigerian farmers become more self-reliant, the Agricultural Policy Activity will contribute to putting Nigeria on a firm path to self-reliance.
Breakthrough Action (BA)	2017–2022	The project goal is to increase the practice of priority health behaviors in the areas of malaria; maternal, newborn, and child health, including nutrition (MNCH+N); family planning (FP)/reproductive health (RH); and tuberculosis (TB), in close collaboration with the relevant USAID implementing partners (IPs), particularly focused on community health and nutrition services.
Breakthrough Research	2018–2022	Focused on catalyzing social and behavior change (SBC) by conducting state-of-the-art research and evaluation and promoting evidence-based solutions to improve health.

Bureau for Humanitarian Assistance (BHA) Humanitarian Area Response Team (HART)	Ongoing rolling assistance for NE and NW Nigeria, based on need	USAID’s BHA partners with nongovernmental organizations and UN agencies to provide emergency food and nutrition assistance to conflict-affected populations in northeastern Nigeria. BHA-HART is providing targeted cash transfers and food vouchers to displaced persons and host community members in Adamawa, Borno, Gombe, and Yobe states. This cash-based assistance is increasing household access to food while supporting local markets and contributing to dietary diversity. BHA-HART targets the most vulnerable populations, including pregnant and lactating women, female-headed households, and households with children under five. BHA-HART supports emergency nutrition programs, which include the inpatient and outpatient treatment of severe wasting, and lactation support, counseling, and SBC interventions to protect optimal infant and young child nutrition. BHA-HART supports the emergency nutrition supply pipeline via the United Nations Children’s Fund (UNICEF) and World Food Programme (WFP) and also supports the Nutrition in Emergencies Working Group coordinate activities to avoid duplication. Emergency nutrition assessments and program data analysis are supported via BHA-HART partners. Where markets are not functioning, BHA-HART supports the WFP to distribute food procured in Nigerian and regional markets. BHA-HART also supports complementary nutrition programming that helps families use locally available foods to meet nutritional requirements. Activities include radio messaging, small group meetings, and cooking demonstrations. BHA partners also provide management of acute malnutrition (MAM) treatment services using local weaning food recipes calibrated for the needs of MAM children, and supports capacity building in emergency response within the Government of Nigeria through its contribution to WFP (USAID 2017). BHA also supports severe acute malnutrition treatment services through UNICEF in the NW Nigerian states of Sokoto, Zamfara, and Katsina.
Effective Water Sanitation and Hygiene Services (E-WASH)	2018–2022	This activity aims to improve urban water service delivery by strengthening the governance, financial, and technical viability of six State Water Boards (SWBs) and their enabling environment.
Evidence and Action Toward Safe and Nutritious Foods (EatSafe)	2020–2024	EatSafe consolidates and generates knowledge and evidence about consumer values and perceptions related to food safety and quantifies food safety risks in informal markets.
Global Health Supply Chain - Procurement & Supply Management (PSM)	2016–2023	PSM provides health commodity procurement services and systems strengthening technical assistance with quantification, warehousing, and distribution of commodities to address all elements of a comprehensive supply chain.
Integrated Agriculture	2019–2021	Integrated Agriculture activity supports vulnerable populations to engage in basic farming activities that will improve food security, increase agricultural incomes, and improve resilience among smallholder farmers and their families in Adamawa (Hong, Song, Gombi, Fufure, Yola South, Demsa, and Guyuk local government areas [LGAs]) and Borno (Biu, Hawul, Kwaya-Kusa, Shani and Bayo LGAs) states. The activity works with a coalition of partners to facilitate improved agro-inputs and extension advisory services to serve vulnerable populations; strengthens the



		<p>institutions that form the market system and the networks that serve smallholder farmers disenfranchised by conflict; and facilitates the engagement of youth and women in commercial agribusiness activities. The activity targets 40,000 participants with key interventions that will promote food security and agriculture-led economic recovery, increase agricultural incomes, and improve resilience for smallholder farmers and their families in the targeted northeast states. The activity aims to improve nutrition and develop youth and women economic and entrepreneurial activities. This is being accomplished through the following interventions:</p> <ul style="list-style-type: none"> <li>• Facilitate improved agro-input and extension advisory services to serve vulnerable populations.</li> <li>• Strengthen the institutions that form the market system and the networks that serve smallholder farmers disenfranchised by conflict.</li> <li>• Facilitate the engagement of youth and women in economic and entrepreneurial activities.</li> </ul>
Integrated Child Health and Social Services Award (ICHSSA)	2019–2024	<p>ICHSSA reduces the impact of HIV on orphans and vulnerable children (OVC), ensuring that OVC are cared for and protected by their households, communities, and local and state governments. The activity will help build and safeguard household capacity to access basic services for OVC, community capacity to secure the rights of OVC, and local and state government capacity to deliver services and to prevent and mitigate rights violations for OVC.</p>
Integrated Health Program (IHP)	2018–2025	<p>IHP covers seven intervention areas: health systems strengthening, maternal health, newborn health, child health (routine immunization, treatment of pneumonia and diarrhea), reproductive health/family planning, nutrition, and malaria, particularly focused on health facility service delivery.</p>
Partnership for Inclusive Agricultural Transformation in Africa (PIATA)	2017–2020	<p>This activity comprises two main intervention areas; Seed System Development, and Policy and Country Support. USAID expects to see improved seed input systems and greater policy coordination among Government of Nigeria (GON) entities to allow for complete implementation of the GON’s Agricultural Investment Plan, the Green Alternative.</p>
Promoting the Quality of Medicines Plus (PQM+)	2020–2024	<p>PQM+ improves medical product quality through cross-sectoral and systems strengthening approaches and the application of international quality assurance standards across the pharmaceutical system.</p>
Rural Resilience	2019–2024	<p>The Rural Resilience activity aims to enable individuals and communities to engage in strong and sustainable market systems. By embedding conflict sensitivity into resilient market system recovery and development, this activity leverages market development to promote stability, improve nutritional status, and make sustainable progress out of poverty.</p>
Small Town WASH	2019–2025	<p>This activity aims to facilitate the recovery of select crisis-affected communities. This activity will (1) strengthen state water, sanitation, and hygiene (WASH) Institutions; and (2) to reduce illnesses and child mortality and sustain health outcomes, increase access to WASH services.</p>
Water for Agriculture	2019–2022	<p>This is a water management activity for cultivation, livestock and livestock herder groups, infrastructure, governance, and farmer cooperatives.</p>



West Africa Trade & Investment Hub Activity	2019–2024	The Trade Hub activity focuses on private sector competitiveness, helping to increase the agricultural productivity and profitability of smallholder farmers in Nigeria, and promoting West Africa’s regional and international trade. The Trade Hub will contribute to both USAID/Nigeria’s Feed the Future objectives related to increasing the agricultural competitiveness of smallholder farmers in Nigeria, as well as USAID/West Africa’s objective to increase broad-based growth and resilience.
Youth-Powered Ecosystem to Advance Urban Adolescent Health and Well-Being (YPE4AH)	2020–2025	The YPE4AH activity improves the health and well-being of unmarried, out-of-school, urban poor adolescents ages 15–19.

## References

Central Bank of Nigeria. 2013. *Annual Report 2012: Statement of account for the year ended December*. Abuja, Nigeria: Central Bank of Nigeria.

Famine Early Warning Systems Network (FEWS NET). 2017. *Nigeria Food Security Outlook, June 2017 to January 2018: Populations in the Northeast Remain Highly Dependent on Humanitarian Assistance*. Washington, DC: FEWS NET. Available at: <http://www.fews.net/sites/default/files/documents/reports/NIGERIA%20Food%20Security%20Outlook-June%202017%20to%20January%202018.pdf>

Famine Early Warning Systems Network (FEWS NET). 2020. *COVID-19 pandemic and conflict impacts livelihoods increasing food assistance needs*. Washington, DC: FEWS NET. Available at: <https://fews.net/west-africa/nigeria/key-message-update/may-2020>

Kuku-Shittu, O., O. Onabanjo, O. Fadare, and M. Oyeyemi. 2016. “Child Malnutrition in Nigeria: Evidence from Kwara State.” volume 33, *NSSP Working Papers*. Washington, DC: International Food Policy Research Institute.

Maternal and Child Survival Program. 2017. “Nigeria.” Available at: <http://www.mcsprogram.org/where-we-work/nigeria/>

National Population Commission (NPC) [Nigeria] and ICF International. 2014. *Nigeria Demographic and Health Survey 2013*. Abuja, Nigeria, and Rockville, MD: NPC and ICF International.

National Population Commission (NPC) [Nigeria] and ICF International. 2019. *Nigeria Demographic and Health Survey 2018*. Abuja, Nigeria, and Rockville, MD: NPC and ICF.

National Malaria Elimination Programme (NMEP), National Population Commission (NPopC), National Bureau of Statistics (NBS), and ICF International. 2016. *Nigeria Malaria Indicator Survey 2015*. Abuja, Nigeria, and Rockville, MD: NMEP, NPopC, and ICF International.

National Population Commission (NPC) [Nigeria] and ICF Macro. 2009. *Nigeria Demographic and Health Survey 2008*. Abuja, Nigeria: National Population Commission and ICF Macro.

National Population Commission (NPC) [Nigeria], National Malaria Control Programme (NMCP) [Nigeria], and ICF International. 2012. *Nigeria Malaria Indicator Survey 2010*. Abuja, Nigeria: NPC, NMCP, and ICF International.

New Partnership for Africa’s Development. 2009. “Signed Comprehensive Africa Agriculture Development Programme (CAADP) Compact.” Available at: <http://www.nepad.org/sites/default/files/Nigeria-Signed-Compact.pdf>

Nigeria Federal Ministry of Health, Family Health Department. 2014. *Health Sector Component of National Food and Nutrition Policy: National Strategic Plan of Action for Nutrition*. Abuja, Nigeria: Nigeria Federal Ministry of Health.

Population Reference Bureau (PRB). 2013. *2013 World Population Data Sheet*. Washington, DC: PRB. Available at: [http://www.prb.org/pdf13/2013-population-data-sheet\\_eng.pdf](http://www.prb.org/pdf13/2013-population-data-sheet_eng.pdf)

Population Reference Bureau (PRB). 2019. *2019 World Population Data Sheet*. Washington, DC: PRB. Available at: [www.prb.org/international/geography/nigeria](http://www.prb.org/international/geography/nigeria)

Sachs, J., G. Schmidt-Traub, C. Kroll, G. Lafortune, and G. Fuller. 2019. *Sustainable Development Report 2019*. New York: Bertelsmann Stiftung and Sustainable Development Solutions Network (SDSN).

Save the Children UK. 2012. *Social protection and child malnutrition: Nigeria*. London: Save the Children UK. Available at: <http://www.savethechildren.org.uk/sites/default/files/docs/social-protection-Nigeria-briefing-BT.pdf>

Scaling Up Nutrition (SUN). 2017. "Nigeria." Available at: <http://scalingupnutrition.org/sun-countries/nigeria/>

United Nation Children's Fund (UNICEF). 2017. *Committing to Child Survival: A Promise Renewed*. "Nigeria." New York: UNICEF. Available at: <http://www.apromiserenewed.org/countries/nigeria/>

United Nation Children's Fund (UNICEF). 2019. *The State of the World's Children 2019*. New York: UNICEF. Available at: <https://www.unicef.org/sowc/>

U.S. Agency for International Development (USAID). 2020. *Food Assistance Fact Sheet: Nigeria*. Washington, DC: USAID. Available at: <https://www.usaid.gov/nigeria/food-assistance>

World Bank. 2019. *Nigeria Country Overview*. Washington, DC: World Bank. Available at: <http://www.worldbank.org/en/country/nigeria/overview>