

Nigeria's Universal Salt Iodisation Program Success Story: The Process and Lessons Learned



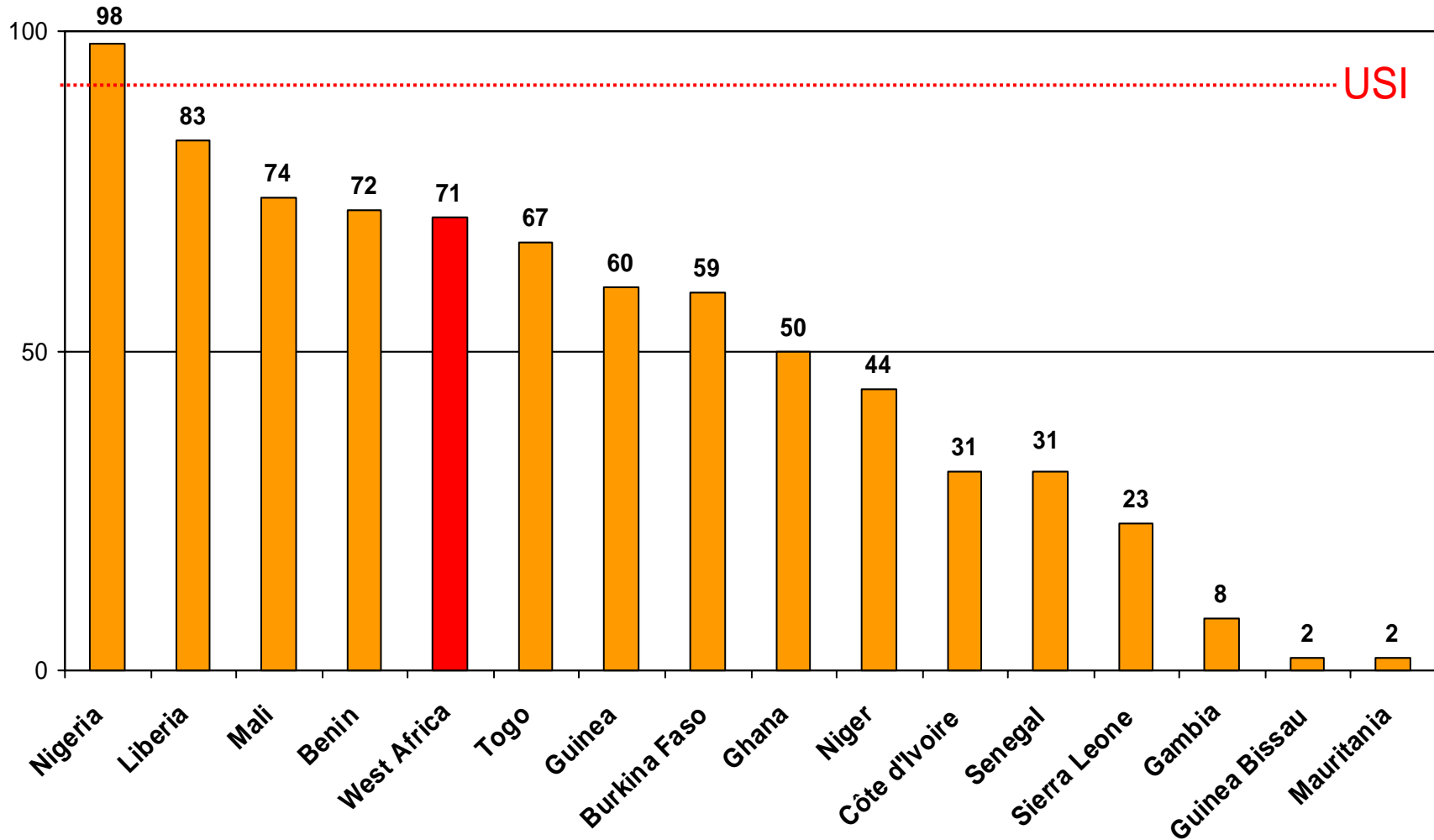
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Istanbul, Turkey
April 17, 2007

Overview

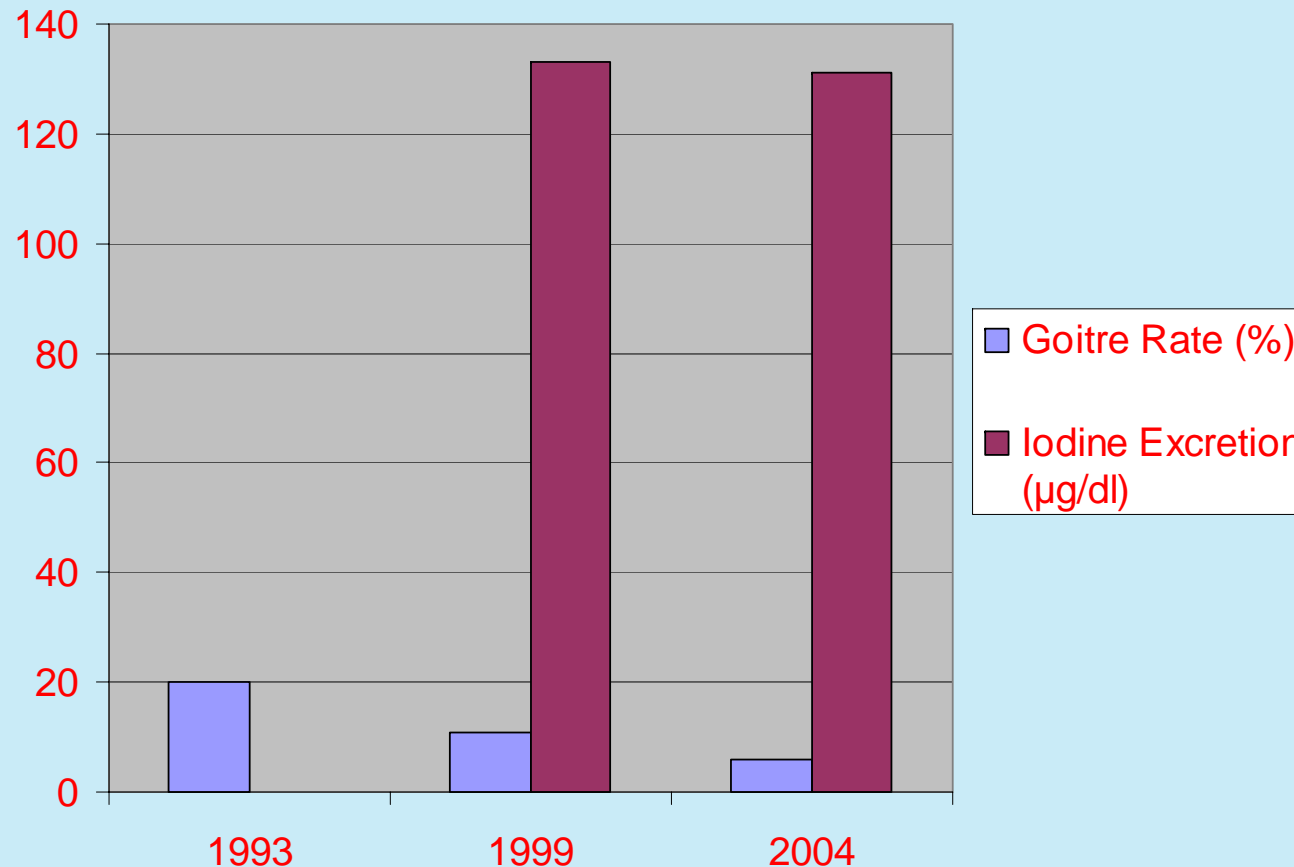
- USI was established by Law in 1993 and made mandatory.
- Nigeria was certified as USI compliant in 2005 by the Global Network for the Sustained Elimination of IDD, with the following indicators of success:
 - 98 % Households have access to adequately iodized salt
 - Goiter rate is currently 6%, down from 20% in 1993
 - Median Urinary Iodine excretion > 130 $\mu\text{g}/\text{dl}$ since 1999.
- Key success factors are:
 - Political commitment by government, which includes Social Marketing
 - Commitment by salt industry
 - Building effective multi-sectoral partnership

With access to iodized salt



**With Nigeria, USI in West Africa is 71%,
and 46% without Nigeria**

Goitre Prevalence and Iodine Excretion



**With Goitre Rate of 6% and Iodine Excretion of >130 µg/dl
IDD is no longer a Public Health problem in Nigeria.**

Success factor 1 – Political Commitment

- Salt Iodization Law was mandated in 1993 at 50 ppm at ports and factories, 30 ppm at retail and 15 ppm at household levels.
- The Law is enforced through inspection and testing by the Regulatory Agencies: Standard Organisation of Nigeria (SON) sets standards, and National Agency for Food & Drug Administration and Control (NAFDAC) enforces.
- Penalties for violators include destruction of non-iodized or insufficiently iodized salt, closure of factories and payment of fines backed up by NAFDAC Decree of 1993.
- Staff corruption is curtailed through the following
 - re-structuring of our regulatory processes
 - staff re-orientation and motivation
 - Reward is in form of recognition, commendation letter, oversea inspection or training, or promotion for any staff who identifies non-iodised salt producers or importers
 - Staff who reports any staff that compromises with defaulting producers or importers are similarly rewarded.
 - Staff involved in aiding or abetting defaulting companies are out-rightly dismissed.
- NAFDAC's national network of decentralized monitoring system with offices in all 36 States and laboratories in the Zones, offers effective regulation of salt marketing through strict inspection and enforcement of USL Law.

- NAFDAC's high profile image and reputation for protecting the rights of the consumers drive industry commitment and strengthen the confidence of consumers and other stakeholders.
- Awareness of IDD is created and sustained by
 - SOCIAL MARKETING
 - NAFDAC has spearheaded generic multi-channel communication campaigns to promote USI on billboards, newspapers, TVs, radios, public notices, posters and publications in English and vernacular;
 - **focusing consumers on the threats of IDD, not just in goiter formation but on the more frightening dimension of brain damage or mental retardation of our children.**
 - **targeting manufacturers, govt. policy-makers, religious & community leaders and other stakeholders.**
 - **IDD and USI awareness is now integrated into the activities of NAFDAC's Consumer Safety Clubs in Nigerian high SCHOOLS,**
 - NAFDAC-championed HIGH-PROFILE ADVOCACY, by the Wife of the President, Ministers of Health, Industry and Commerce, Traditional rulers, etc.

Success factor 2 – Industry Commitment

- The Iodization of 98% of Salt consumed in Nigeria is concentrated in the hands of few but large domestic salt companies, with 640,000 MT capacity per year and this makes inspection and monitoring easier. The remaining 2% consists of salt smuggled or produced by cottage industries.
- Through advocacy and severe sanctions, including closure of factories and fines, the salt manufacturers now have an umbrella association for effective self-regulation, to ensure distribution of adequately iodised salt.
 - The advocacy has also sensitized the Salt manufacturers into seeing this iodization program as part of their social responsibility
- NAFDAC also encouraged salt industries to have efficient in-house QA & QC system, which are duly certified by NAFDAC.
- SON continuously updates the standards, e.g. revision of use of KIO_3 instead of iodide, analytical methods, etc.
- NAFDAC has given salt industries till the end of 2007 to mandatorily pack salt in small retail sizes (1Kg or less) to enhance retention of iodine.
- All USI activities are with minimal domestic financing and donor investment
 - Incremental cost of KIO_3 is absorbed by the market place
 - There is effective industry-driven distribution channels and
 - Industry-driven brand marketing, using distinctive IDD logo, designed and launched by the Nigerian Govt. as an official emblem for iodized salt. 7

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Success factor 3 – Partnership Principle

Partners formed a multi-sectoral body called IDD-USI Taskforce with defined roles and responsibilities for members.

- **The Taskforce:** Synthesizes data from factory, distributor, retail and household surveys and meets quarterly to review progress.
- **National Planning Commission (NPC):** is the inter-sectoral Planning Organ of Govt.
- **Federal Ministry of Health:** Formulates policies and assesses the impact of the program
- **SON:** Sets and updates Standards
- **NAFDAC:** Enforces compliance *via* monitoring at factory, distributor, wholesale and retail levels, creates awareness, develops strategies to address the 2% shortfall in iodisation and sanctions defaulters.
- **Federal Ministry of Education** Monitors compliance at household level using Primary schools as proxy.
- **Salt Industries** (5 producers, with 8 factories): Manufacture to standards, implement brand marketing, product distribution and Self-regulation
- **The Media & Consumer Protection Associations** Create awareness and advocate Consumer interest
- **NGOs & Research Institutions:** Provide technical support for research and analysis of samples.
- **Donor Agencies** (UNICEF, Kiwanis International, USAID): Provide technical & Financial support for, training, monitoring, information sharing and behavioural change communication.

Other factors contributing to program success

- Actions on the 2% non-iodized salt smuggled or produced by cottage industries include:
 - Regular Assessment of volume of local production, distribution, marketing and consumption.
 - Follow-up media visit and meeting of traditional rulers and other opinion leaders in cottage salt producing communities.
 - Social marketing of iodized Salt in local salt producing communities.
- Inspection and certification of manufacturers' GMP and QC facilities and enforcement of adherence.
- Institutionalized monitoring of salt iodine levels, quarterly at factory level, annually at distributors, wholesale, retail and household levels.
- Annual Goiter Prevalence and Urinary Iodine Excretion surveys.
- Reference standard laboratories, one upgraded, two still in progress.

Summary of Lessons

- **Critical Partnership**: We developed and sustained critical partnership with public sector and salt manufacturers to elicit commitments, consensus building, transparency, and quality control, and this builds partners' interest and confidence.
- **Advocacy**: Increased knowledge and awareness of IDD as a public health concern and the necessity of salt iodization as an effective remedy
- **Expansion to school curriculum**: Integration of iodine nutrition into an ongoing school curriculum review.
- **Micronutrient Day activity**: introduced in all primary schools to include salt testing for iodine
- **Institutionalized Monitoring**: Routine and periodic monitoring of industries using regulatory agencies to enforce compliance to standards. Defaulters are identified and severely punished.
- **Identification of weak spots**: The 2% non-iodised salt due to smuggling and local production are fast disappearing. The good news is that Nigeria is now USI compliant.

THANK YOU FOR LISTENING



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