



From Malnutrition to Wellbeing: The Role of Social Protection Policies in Shaping Nutrition and Health Outcomes in Nigeria

Aimee Osamudiamen Chris^{1*}, ^{1*3}General Studies Department, Nigerian Institute of Leather and Science

Hauwa'u E. Yusuf², Technology, Zaria, Nigeria. ORCID: <https://orcid.org/0000-0003-2107-9072>

Jimoh Edeki³ ²Department of Sociology, Kaduna State University, Nigeria.

Abstract

Malnourishment remains a persistent public health and development challenge, particularly in low- and middle-income countries such as Nigeria, where structural inequalities continue to shape health outcomes. Nigeria faces a triple burden of undernutrition, micronutrient deficiencies, and increasing diet-related non-communicable diseases. Recent studies increasingly recognizes that nutrition outcomes are not determined solely by food availability but by broader structural systems, particularly social protection policies such as cash transfers, school feeding programmes, maternal health subsidies, and food assistance schemes. This review synthesizes empirical and policy literature to critically examine the relationship between social protection and nutrition outcomes in Nigeria. This review paper examines the transition from malnutrition to holistic wellbeing through the lens of social protection, emphasizing its role in improving nutrition outcomes and reducing disease burden. Drawing on recent empirical and policy-based literature, the paper synthesizes evidence on nutrition-sensitive social protection interventions including cash transfers, school feeding programmes, maternal nutrition support, and community-based food systems. The review further interrogates how socioeconomic vulnerability, gender inequality, and food system instability influence wellness and illness trajectories. Three objectives guide this review, to examine the relationship between nutrition status and population wellness and illness patterns; to evaluate the effectiveness of social protection programmes in improving nutrition outcomes and identifies structural and policy gaps limiting nutrition-sensitive social protection in Nigeria. Findings suggest that while social protection programmes have demonstrated positive impacts on food security and dietary diversity, implementation challenges such as funding constraints, governance gaps, and inadequate targeting limit sustainability. The paper highlights the need for integrated nutrition-social protection frameworks grounded in social justice and community participation. The paper concludes that sustainable transition from malnutrition to wellbeing requires multisectoral, gender-transformative, and community-driven social protection systems embedded within broader food system reforms.

Keywords: *Malnutrition, Wellness, Social Protection, Nutrition Policy, Public Health Nutrition, Nigeria, Food Security*

Copyright © 2022 The Author(s): This work is licensed under a Creative Commons Attribution-Non Commercial 4.0 (CC BY-NC 4.0) International License.

Introduction

Malnutrition continues to undermine human capital development and population health outcomes in many

low- and middle-income countries. In Nigeria, malnutrition contributes significantly to child mortality, poor maternal health, reduced educational outcomes,

*Corresponding Author: Aimee Osamudiamen Chris

and long-term economic productivity loss. Global health frameworks developed by the World Health Organization emphasize that nutrition is both a biological and social outcome shaped by socioeconomic status, gender relations, education, and healthcare access (WHO, 2024). Diverse factors influences malnourishment in Nigeria's nutrition challenge reflects structural inequality, poverty, and regional development disparities. According to the UNICEF, child food poverty in West Africa is closely linked to household income instability and social vulnerability rather than national food supply alone (UNICEF, 2024). Other factors influences child food poverty which are addressed in this paper

Social protection has emerged globally as a critical tool for addressing these structural determinants. The expansion of welfare programmes supported by institutions such as the World Bank reflects a shift toward integrating poverty reduction and nutrition improvement strategies (World Bank, 2024). The review is guided by three key objectives, to examine the relationship between social protection interventions and nutrition outcomes in Nigeria, to evaluate the effectiveness of nutrition-sensitive social protection programmes in improving wellness and reducing illness and identified structural policy gaps and propose pathways toward sustainable nutrition-related wellbeing. Nutrition is a foundational determinant of population health, influencing physical development, cognitive performance, disease resistance, and overall wellbeing. Globally, the coexistence of undernutrition, micronutrient deficiencies, and rising diet-related non-communicable diseases reflects what scholars describe as the "triple burden of malnutrition" (Development Initiatives, 2023). In Nigeria, this burden is intensified by poverty, food insecurity, conflict displacement, climate variability, and health system inequalities (Global Nutrition Report, 2024). Recent global health discourse increasingly recognizes that clinical

interventions alone cannot address nutrition-related illnesses. International agencies such as the World Health Organization emphasize multisectoral strategies integrating agriculture, education, gender empowerment, and social protection. Similarly, the UNICEF and the World Bank highlight social protection as a critical instrument for reducing vulnerability to food insecurity and malnutrition, especially among women and children. In Nigeria, nutrition outcomes reflect deep social inequalities. The National Demographic and Health Survey continues to report high rates of stunting, anaemia among women of reproductive age, and food insecurity among rural households (NPC & ICF, 2022). These patterns demonstrate that nutrition is not only a biomedical issue but also a social justice and development concern. The study objectives are to examine the relationship between nutrition status and population wellness and illness patterns, to evaluate the effectiveness of social protection programmes in improving nutrition outcomes in Nigeria and identified structural and policy gaps limiting nutrition-sensitive social protection implementation.

Literature Review

Nexus between Nutrition, Wellness, and Illness

There is a bidirectional relationship between nutrition and health outcomes. According to Development Initiatives (2023), inadequate nutrition contributes to approximately 45% of child mortality globally, while poor dietary patterns increasingly drive non-communicable diseases. In the Nigerian context, Ojo et al. (2022) found strong correlations between household poverty levels and child stunting prevalence. Similarly, Adebayo and Balogun (2023) demonstrated that maternal nutritional status significantly predicts neonatal health outcomes, reinforcing intergenerational cycles of malnutrition.

Ajayi et al. (2024) further argue that nutrition must be understood within broader social determinants including

income inequality, education access, and gender norms. Their findings show that households headed by women with higher education levels demonstrate significantly improved dietary diversity scores. At the community level, studies by Musa and Idris (2025) indicate that cultural feeding practices and food taboos still influence maternal and child nutrition outcomes in Northern Nigeria, suggesting that biomedical nutrition education alone is insufficient without sociocultural engagement.

Social Protection as a Nutrition-Sensitive

Intervention

Social protection has emerged as a major policy tool for improving nutrition outcomes. Alderman et al. (2022) found that conditional cash transfers increase household food expenditure and dietary diversity across several African countries. In Nigeria, the National Social Investment Programme has demonstrated modest but measurable improvements in food access among vulnerable households (World Bank, 2023).

Adesina and Olaniyan (2021) argue that social protection in Africa must move beyond poverty reduction to incorporate human capability development, including nutrition security. Their study emphasizes that income transfers alone are insufficient without nutrition education and health service access. More recent evaluations by Okafor et al. (2024) show that school feeding programmes improve school attendance and short-term nutritional intake but may not significantly affect long-term nutritional status without household-level food security interventions. Similarly, Yusuf and Ahmed (2025) found that maternal cash transfer programmes improved antenatal clinic attendance and maternal dietary diversity but were limited by irregular payment systems and inadequate monitoring.

Structural Constraints Limiting Nutrition-Sensitive Social Protection

Despite policy commitments, implementation challenges remain significant. According to the Global Nutrition Report (2024), Nigeria's nutrition financing remains

below recommended global targets. Governance fragmentation across ministries also reduces programme efficiency. Eze et al. (2023) identify corruption, weak data systems, and poor beneficiary targeting as major barriers to effective social protection delivery. Climate change also increasingly threatens food production systems, particularly in Northern Nigeria (FAO, 2024). Gender inequality further compounds vulnerability. Studies by Lawal and Omotayo (2022) show that women often lack decision-making power over household food allocation despite being primary caregivers, limiting nutrition intervention effectiveness. Urbanization is also reshaping nutrition risks. Olufemi et al. (2025) highlight rising consumption of ultra-processed foods in urban Nigeria, contributing to growing obesity and diabetes prevalence. Across the literature, three consistent themes emerge nutrition outcomes are strongly linked to socioeconomic inequalities. Social protection programmes improve short-term food access but require integration with health and education services for long-term impact and structural governance, gender inequality, and climate vulnerability remain major barriers to sustainable nutrition improvement.

Methodology

This paper adopts a narrative systematic review approach synthesizing peer-reviewed journal articles, global nutrition reports, policy documents, and programme evaluations published. The review prioritizes maternal and child nutrition outcomes, poverty-nutrition linkages, and social protection programme effectiveness.

Discussion

The evidence synthesized in this review, when examined alongside broader global scholarship, confirms that malnutrition in Nigeria is primarily driven by structural and systemic inequalities rather than isolated biological or dietary factors. Contemporary nutrition discourse has

increasingly shifted from food availability paradigms toward structural social justice frameworks that recognize poverty, inequality, and institutional governance as core drivers of population nutrition outcomes.

Global health frameworks developed by the World Health Organization emphasize that nutrition outcomes are produced through complex interactions between socioeconomic status, education, gender relations, sanitation, and access to healthcare (WHO, 2024). This perspective is reinforced by the social gradient theory of health advanced by Michael Marmot, who argues that health inequalities, including nutrition disparities, are socially patterned across income, education, and occupational hierarchies (Marmot, 2022). Applying Marmot's framework to Nigeria reveals that malnutrition disproportionately affects populations living in rural poverty, conflict zones, and informal economic sectors.

Similarly, reports from the UNICEF demonstrate that child food poverty in West Africa is strongly associated with household income instability and limited access to diverse diets rather than aggregate national food shortages (UNICEF, 2024). This aligns with the work of Lawrence Haddad, who argues that nutrition policy must move beyond calorie sufficiency toward diet quality, food systems equity, and nutrition-sensitive governance (Haddad, 2021). Haddad's findings suggest that welfare transfers without food system reforms may improve food access but not necessarily nutritional adequacy.

The literature also strongly supports the argument that social protection improves nutrition primarily through poverty reduction pathways. However, poverty reduction alone does not guarantee nutrition improvement. Research by Amartya Sen provides critical theoretical grounding for this distinction. Sen's Capability Approach suggests that income support expands individual opportunity sets but does not automatically translate into improved wellbeing unless

individuals have knowledge, agency, and social empowerment to convert resources into health outcomes (Sen, 1999/updated applications in 2020s development literature). In Nigeria, this is particularly relevant where food purchasing decisions are shaped by cultural norms, gender power relations, and local food environments.

Empirical evidence further supports this theoretical position. Studies reviewed by the World Bank show that social protection programmes produce the strongest nutrition outcomes when combined with behavioural change communication, maternal education, and primary healthcare strengthening (World Bank, 2024). This finding is consistent with integrated development models promoted by global nutrition research institutions, which emphasize multisectoral policy alignment across agriculture, health, education, and social welfare sectors.

Another important dimension emerging from the literature is the role of gender inequality in shaping nutrition outcomes. Feminist development scholars consistently show that women's control over income significantly improves child nutrition and household diet diversity. However, patriarchal decision-making systems in many Nigerian households limit women's financial autonomy. This creates what development scholars describe as "intra-household resource allocation inequality," where social protection benefits may not translate into improved child or maternal nutrition if women lack spending control. This supports feminist political economy arguments that nutrition vulnerability is embedded within gendered power relations rather than purely economic deprivation.

Regional disparities also reinforce structural inequality theory. Northern Nigeria continues to experience higher rates of stunting and wasting due to conflict, displacement, and chronic poverty. Social protection coverage gaps in these regions highlight governance and security constraints that limit programme reach. Structural inequality theory suggests that vulnerable

populations often remain excluded from institutional services due to political marginalization, administrative weakness, and geographic isolation. Evidence from development literature supports this pattern across fragile and conflict-affected settings globally.

The sustainability of social protection financing remains another critical issue highlighted by recent scholarship. Many Nigerian social protection programmes rely heavily on donor financing. While external funding has expanded programme coverage, development economists warn that donor dependence creates vulnerability to global economic shocks. When external funding declines, social protection coverage often contracts rapidly, reversing nutrition gains. Development finance literature increasingly emphasizes the need for domestic revenue mobilization and social protection institutionalization within national budgets.

The study also reveals the importance of local food environments in mediating the effectiveness of social protection. Even when households receive income transfers, nutrition outcomes remain constrained if local markets lack affordable nutrient-dense foods. Nigerian food systems in many low-income communities are dominated by low-cost, energy-dense processed foods. This suggests that social protection must be integrated with food system reforms, including support for local agriculture, market regulation, and supply chain strengthening.

From a theoretical standpoint, the evidence strongly supports the Social Determinants of Health framework. Nutrition outcomes in Nigeria reflect structural living conditions rather than individual dietary choices. The Capability Approach further explains why financial transfers alone are insufficient for achieving nutrition wellbeing without knowledge, empowerment, and social agency. Structural inequality theory provides explanatory power for persistent regional and gender disparities in nutrition outcomes.

Importantly, emerging global scholarship is increasingly

framing nutrition access as a social justice and human rights issue. Nutrition justice perspectives argue that access to safe, nutritious food should be treated as a fundamental social right rather than a welfare entitlement. This shift has major policy implications for Nigeria, suggesting that social protection should not only reduce poverty but also restructure inequitable food systems and social power hierarchies that produce malnutrition.

From a policy perspective, the literature suggests that Nigeria must transition from fragmented welfare-based interventions toward integrated human development models. Evidence shows that community-driven nutrition programmes produce stronger long-term behavioural change outcomes than top-down policy models. Participatory programme design improves cultural acceptance, accountability, and sustainability.

Finally, this discussion highlights that achieving sustainable nutrition wellbeing in Nigeria requires structural transformation across multiple sectors simultaneously. Addressing malnutrition requires tackling poverty, gender inequality, food system inequality, and governance inefficiencies together. Social protection remains a powerful policy instrument, but its transformative potential depends on integration within broader social justice, economic development, and institutional reform frameworks. The paper also revealed from multiple scholars converge on a central conclusion: social protection can significantly improve nutrition outcomes, but only when embedded within broader structural transformation strategies. Sustainable transition from malnutrition to wellbeing requires long-term institutional commitment, gender-responsive policy design, resilient domestic financing, and community-led implementation frameworks grounded in social equity principles.

Conclusion

The paper concludes social protection epitomizes a critical pathway for transitioning Nigeria from malnutrition vulnerability to sustainable wellbeing. However, nutrition outcomes require integrated structural reforms addressing poverty, gender inequality, food systems, and healthcare access. Sustainable wellbeing requires multisectoral social protection systems grounded in social justice and community participation.

References

1. Adebayo, T., & Balogun, M. (2023). Maternal nutrition and neonatal outcomes in West Africa. *Maternal and Child Nutrition Journal*, 19(2), 145–159.
2. Adesina, J., & Olaniyan, O. (2021). Social policy and human development in Africa. *African Development Review*, 33(1), 23–35.
3. Ajayi, O., Bello, S., & Mohammed, A. (2024). Education and household nutrition outcomes in Nigeria. *Public Health Nutrition*, 27(1), 88–101.
4. Alderman, H., Gentilini, U., & Yemtsov, R. (2022). The state of social safety nets. World Bank Publications. Development Initiatives. (2023). *Global Nutrition Report 2023*.
5. Eze, P., Okoye, U., & Nwankwo, C. (2023). Governance challenges in social protection delivery in Nigeria. *Social Policy and Administration*, 57(3), 455–470.
6. FAO. (2024). Climate change and food systems in West Africa.
7. Federal Ministry of Health Nigeria. (2023). National nutrition strategy implementation report.
8. Global Nutrition Report. (2024). Country nutrition profiles.
9. Musa, A., & Idris, H. (2025). Cultural determinants of maternal nutrition practices in Northern Nigeria. *African Journal of Reproductive Health*, 29(1), 55–70.
10. NPC & ICF. (2022). Nigeria Demographic and Health Survey.
11. Ojo, T., Adekunle, B., & Lawal, K. (2022). Poverty and child nutrition outcomes in Nigeria. *BMC Public Health*, 22(1), 1103.
12. Okafor, C., Obi, E., & Nwoye, L. (2024). Evaluating school feeding and nutrition outcomes in Nigeria. *International Journal of Educational Development*, 98, 102721.
13. Olufemi, R., Adamu, H., & Bello, T. (2025). Urban dietary transitions and non-communicable diseases in Nigeria. *Nutrition and Health*, 31(2), 210–225.
14. UNICEF. (2024). Child food poverty global report.
15. World Bank. (2024). Social protection and poverty reduction in Sub-Saharan Africa.
16. World Health Organization. (2024). Global nutrition policy framework.
17. Yusuf, M., & Ahmed, S. (2025). Cash transfers and maternal nutrition outcomes in Northern Nigeria. *Health Policy and Planning*, 40(1), 66–78.