PROJECT ABSTRACT

The Nigerian Agency for Food and Drug Administration and Control (NAFDAC) is leading implementation and scale-up of a national sodium reduction program with other national, state, and international agencies using the WHO’s “Best Buy” SHAKE package (Surveillance of salt intake, Harness industry, Adopt standards for labelling and marketing, Knowledge to empower consumers, and Environments to promote healthy eating). SHAKE provides evidence-based recommendations for population-wide sodium reduction interventions for hypertension prevention and control. Our research will support and embed in this program’s implementation and scale-up for late-stage implementation research for hypertension prevention and control by evaluating the extent to which the program is implemented using a type III hybrid, mixed methods study design through repeated: 1) stakeholder interviews, 2) populations surveys, and 3) retail surveys. We will use implementation research methods during adaptation, planning, and initial implementation for baseline (Years 1-2, UG3 phase) and of follow-up (Years 3-4 and Years 5-6, UH3 phase) assessments. A much-needed dietary sources of sodium study will also be performed at baseline and Years 5-6 follow-up to target/track sodium reduction efforts according to local context and culture. The retail surveys over the study period will capture novel data on packaged, unpackaged, and informal restaurant/hawker food through the international FoodSwitch program, which combines a consumer facing tool with crowdsourcing to better define Nigeria’s food supply. We will use the Exploration, Preparation, Implementation and Sustainment (EPIS) framework throughout both phases. The formative research period will include Exploration and Preparation, when we will perform quantitative and qualitative measures of key process indicators, relevant contextual factors informed by CFIR, and relevant Proctor implementation outcomes, acceptability, feasibility and appropriateness. As implementation is started, we will use the Reach, Effectiveness, Adoption, Implementation and Maintenance (RE-AIM) framework, including implementation outcomes (feasibility, fidelity, adoption, acceptability, and cost) and contextual factors associated with the Implementation and Sustainment phases. We will disseminate our finding via mass media advocacy campaigns and will extend our existing implementation research training program to stakeholders for knowledge translation through evidence-informed policymaking to optimize sustainability. We will host multisectoral stakeholder meetings to facilitate cross-sectoral collaboration, dissemination, and multi-level policy coherence among sectors include food, health, trade, and law, among others. The proposal builds on the team’s existing NHLBI-funded large-scale hypertension control program with team members from University of Abuja, Northwestern University, and The George Institute for Global Health, the latter which is performing a parallel, GACD-funded assessment in China with similar methods.