Food And Nutrition Intelligence System



Recommended Feeding Practices for Infants and Young Children



Optimal feeding practices for infants and young children play a critical role in ensuring their growth, development, and overall health. outcomes for children aged 0–23 months.

Feeding Practices for Infants (0–6 Months)

Exclusive Breastfeeding

Exclusive breastfeeding is the practice of feeding infants only breast milk, without any additional food or drink, not even water, except for oral rehydration solution (ORS), vitamins, or medications. It is recommended for the first six months of life, beginning within the first hour after birth. This practice provides all the necessary nutrients

for optimal growth and development, promotes sensory and cognitive development, and protects against infectious diseases such as diarrhea and pneumonia (WHO & UNICEF, 2008).

Exclusive breastfeeding also benefits mothers by reducing the risk of ovarian and breast cancers and aiding child spacing (WHO, 2003). Despite its importance, global data indicate disparities in breastfeeding rates, highlighting the need for targeted interventions to promote and sustain exclusive breastfeeding (UNICEF, 2023).



Early Initiation of Breastfeeding

Early initiation of breastfeeding—putting the baby to the breast within one hour of birth—reduces neonatal mortality and supports the establishment of breastfeeding. This practice ensures that infants receive colostrum, which is rich in nutrients and antibodies (WHO, 2017). Monitoring the proportion of infants who experience early initiation is a crucial indicator for improving breastfeeding practices globally.

Feeding Practices for Young Children (6–23 Months)

Continued Breastfeeding

Continued breastfeeding for over six months remains a significant source of energy and nutrients for children. It provides about half of the child's energy needs between 6 and 12 months and one-third between 12 and 24 months (WHO & UNICEF, 2003). Continued breastfeeding at 12–15 months and 20–23 months is vital, especially in low-resource settings where alternative nutrient sources may be inadequate.



Complementary Feeding

Complementary feeding involves the gradual introduction of solid, semi-solid, or soft foods from six months of age while breastfeeding continues. These foods should be diverse, including at least five of the following food groups daily: breast milk, grains, legumes, dairy products, flesh foods, eggs, vitamin A-rich fruits and vegetables, and other fruits and vegetables (WHO, 2010).

Complementary Feeding

The frequency of meals should align with the child's age, with two to three meals daily for children aged 6–8 months and three to four meals for those aged 9–23 months, complemented by nutritious snacks (WHO, 2017). Safe preparation and responsive feeding practices are essential to ensure adequate nutrient intake and prevent malnutrition.

Minimum Acceptable Diet (MAD)

The minimum acceptable diet combines dietary diversity and meal frequency to evaluate complementary feeding practices. Breastfed children aged 6–23 months should receive a diverse diet and eat meals at the recommended frequency. Non-breastfed children require at least two milk feedings alongside a diverse diet and appropriate meal frequency. Meeting MAD standards is crucial to reducing stunting, micronutrient deficiencies, and child mortality (UNICEF, 2023).

Implications and Recommendations

Adherence to these feeding practices significantly impacts child survival and development. Exclusive breastfeeding reduces infant mortality, while timely complementary feeding prevents malnutrition and supports cognitive and physical growth. Continued breastfeeding ensures nutrient adequacy and protects against infectious diseases

Global data highlight gaps in these practices, necessitating multi-sectoral approaches to promote and sustain recommended feeding practices. Strategies should include:

- Strengthening maternal education on breastfeeding and complementary feeding.
- Enhancing health systems to provide breastfeeding support.
- Implementing policies to protect and promote breastfeeding, such as maternity leave and workplace accommodations.



Further reading

- Infant and young child feeding
- Child Food Poverty: Nutrition deprivation in early childhood
- Infant and Young Child Nutrition: UNICEF works with partners in Ghana to ensure that every child eats nutritious food
- Global strategy for infant and young child feeding

References

2 WHO, UNICEF. UNICEF. (2023). WHO. (2003). Global strategy Infant and young (2017). Global child feeding. **Nutrition** for infant and young child Monitoring Retrieved from feeding. https://data.uni Framework: cef.org/topic/nu operational Geneva: World trition/infantguidance for Health and-young-Organization. tracking child-feeding/ Retrieved from progress in http://www.who. meeting targets int/nutrition/pub for 2025. lications/infantf Geneva: World Health eeding/9241562 Organization. 218/en/



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