Challenges in Implementing and Practicing Ideal Infant & Young Child Feeding Practices: Indian Perspective

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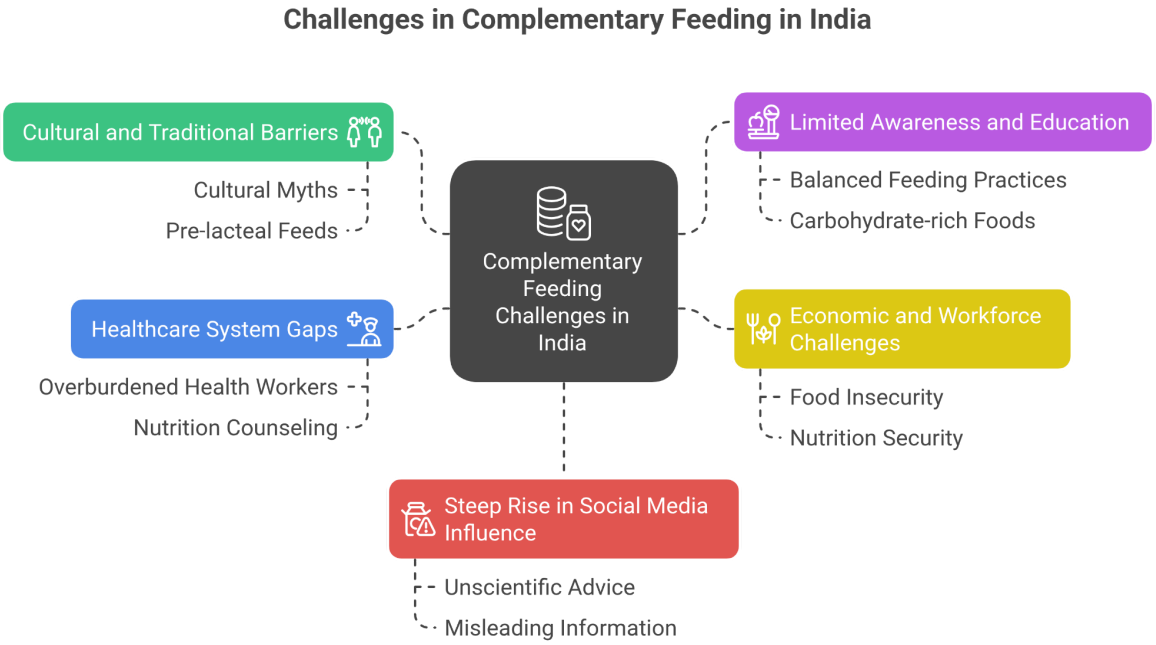
Introduction

Optimal Infant and Young Child Feeding (IYCF) practices are essential for child survival, growth, and cognitive development. While guidelines emphasize exclusive breastfeeding (EBF) for the first six months and timely introduction of complementary feeding, not credible sources of information, cultural, religious beliefs, unawareness and economic barriers limit adherence to these guidelines in India. Pediatricians play a critical role in addressing these challenges, bridging knowledge or awareness gaps, and supporting caregivers with practical, evidence-based guidance. However, due to paucity of time or over patient load, the Paediatricians' guidance to IYCF practices takes either a back seat or is assumed to be followed due to presence of elder people in the family.

Key Challenges



1. **Cultural and Traditional Barriers**
    - Cultural myths around complementary feeding—for example, the belief that "cold" foods such as yogurt or bananas should be avoided during winter or at

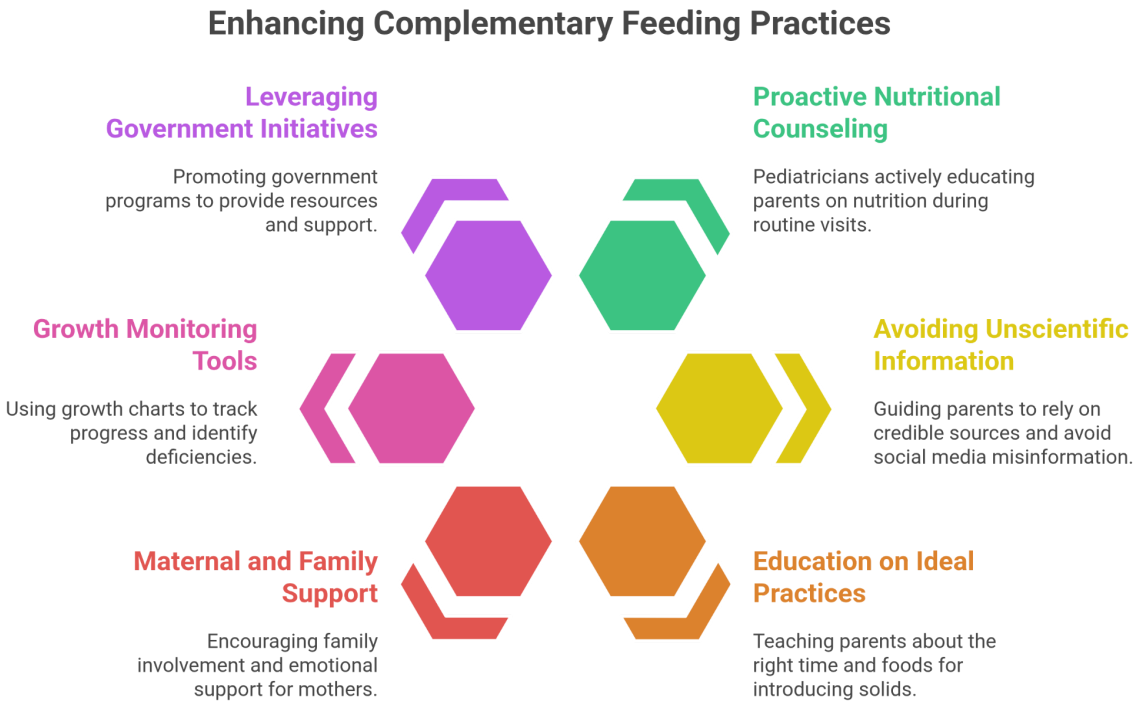
night, or that animal-source foods like eggs and meat should only be introduced much later—can delay the timely inclusion of nutrient-rich foods in an infant's diet. Additionally, prelacteal feeding practices remain common, with 21 % of Indian infants offered inappropriate feeds/ pre-lacteal feeds rather than exclusive breastfeeding.

- Influence from well-meaning elders can reinforce outdated feeding norms—for instance, routinely giving only whatever a child accepts most easily, restricting the menu to a narrow set of familiar flavours, or treating milk as a "complete" food and allowing it to crowd out balanced solid meals—practices that can limit dietary diversity and overall nutrient intake.

2. **Limited Awareness and Education**
   - Complementary feeding practices are frequently inadequate, relying heavily on carbohydrate-dominant foods, instead of diverse diets rich in protein (pulses, eggs), vitamins, and minerals (green leafy vegetables) resulting in an increased risk of multi- micronutrient deficiency.
3. **Economic and Workforce Challenges**
   - Approximately **40%** of children under five years of age in India suffer from food insecurity, with many experiencing severe child food poverty, defined as consuming fewer than the recommended atleast 5 out of the eight major food groups daily. This highlights a critical need for improved dietary diversity and nutrition security for young children (UNICEF).
4. **Healthcare System Gaps**
   - Frontline health workers, such as ASHAs and Anganwadi staff, often face heavy workloads, resulting in inconsistent/ suboptimal IYCF counselling.
   - In India, pediatricians are overwhelmed with illness-related visits, leaving little room for essential nutrition counseling. This gap limits opportunities to address proper infant and young child feeding practices, hindering efforts to promote healthy dietary habits.
5. **Steep rise in the social media influence:**
   - Social media influence has seen a steep rise in the current digitalized world, giving rise to the unfortunate situations of many unscientific advice from not a credible source. This results in inappropriate IYCF practice followed by mothers.

Recommendations to Enhance Complementary Feeding Practices

1. **Proactive Nutritional Counseling by Pediatricians**
   Pediatricians should take a proactive role in providing nutritional counselling during routine visits. Pediatricians should leverage every in-clinic visit (e.g. vaccination or illness related visits) to educate the parents regarding IYCF practices to support children reach their growth potential. The nutritional counselling should not limit to the parents only, but should also extend to other family members involved in the child care.



2. **Guiding to avoid unscientific information on social media**

   Pediatricians must recognize that they bear the responsibility for guiding parents on correct complementary feeding practices. Pediatricians must guide parents to seek information from their pediatricians to ensure the correct and credible information regarding IYCF practices during this 'window of opportunity' phase. If there is active awareness imparted by pediatricians, it can prevent parents from seeking non-scientific sources of information through social media. The implications of the unsolicited advice received through social media should be circumvented through early interventions in the form of supplementation (in severe cases of deficiencies) or fortified baby foods (in moderate or milk cases of deficiencies) should be implemented to ensure age-appropriate nutrition support to infants and children. .

3. **Education on Ideal Complementary Feeding Practices**

   Pediatricians should educate parents on the ideal practices for complementary feeding, including the appropriate timing for introducing solid foods, the types of foods to offer, and the importance of a balanced diet that includes a variety of food groups, including fruits, vegetables, proteins, and animal-source foods.

4. **Maternal and Family Support**

   Adequate maternal and family support is critical for successful complementary feeding. Healthcare providers should encourage families to work together in supporting the mother's efforts in introducing new foods, ensuring proper feeding techniques, and offering emotional and practical help to make the transition smoother for both the child and the mother.

5. **Growth Monitoring Tools**
   Growth monitoring should be integrated into routine pediatric visits to track a child's progress and identify any early signs of nutritional deficiencies. Tools such as growth charts and assessment of dietary intake can help pediatricians identify potential issues with complementary feeding practices and guide interventions where necessary.

6. **Leveraging Government Initiatives**
   Pediatricians should actively promote and leverage government initiatives aimed at improving child nutrition, such as the Integrated Child Development Services (ICDS) program and the Poshan Abhiyaan. These initiatives provide resources, education, and support to families, and healthcare professionals can enhance their impact by aligning with these programs to reinforce nutrition messages and practices in the community.

Summary

India's challenges in implementing ideal IYCF practices stem from a combination of cultural, economic, and generational beliefs . Pediatricians have a pivotal role in bridging these gaps by addressing breastfeeding challenges, educating caregivers about complementary feeding milestones, and monitoring child growth using tools like WHO and IAP growth charts. Incorporating locally relevant foods, fortified foods like baby cereals , and providing tailored guidance for special feeding circumstances can support better health outcomes. Advocating for systemic reforms, community engagement, and alignment with national initiatives like *POSHAN Abhiyaan* and *Anaemia Mukt Bharat* ensures pediatricians remain at the forefront of improving child nutrition outcomes by advocating the ideal complementary feeding practices.

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