

ERRATA

Central Statistical Office (CSO) [Zimbabwe] and Macro International Inc. 2007. *Zimbabwe Demographic and Health Survey 2005-06*. Calverton, Maryland: CSO and Macro International Inc.

Pages 154 to 156 – Delete section 11.2.2.

Replace with the following updated text, Figure 11.1, and Table 11.5.

INFANT AND YOUNG CHILD FEEDING (IYCF) PRACTICES

Appropriate Infant and Young Child Feeding (IYCF) practices include breastfeeding through the age of two years, the introduction of solid and semi-solid foods at age 6 months, and a gradual increase in the amount of food given and the frequency of feeding as the child gets older. The average, healthy **breastfed child** should receive solid and semi-solid foods 2-3 times per day at age 6-8 months, and 3-4 times per day at age 9-23 months, with an additional snack 1-2 times per day. The minimum frequencies for feeding children in developing countries are based on the energy output of complementary foods. The energy needs of children are based on age-specific total daily energy requirements, plus 2 SD (to cover almost all children), minus the average energy intake from breast milk. Infants with low breast milk intake need to be fed more frequently than those with high breast milk intake. However, care should be taken that feeding frequencies do not exceed recommended input from complementary foods because excessive feeding can result in displacement of breast milk (PAHO/WHO, 2003).

Although the World Health Organization recommends that infants be breastfed up to the age of two years, some infants are not breastfed at all, or stopped breastfeeding before their second birthday. Guidelines have been developed for these children, who may not have been breastfed because their mother was HIV positive, or because their mother had died, or for other reasons (WHO, 2005). It is recommended that the **non-breastfed child** be given solid and semi-solid foods 4-5 times per day at age 6-23 months, with an additional snack 1-2 times per day.

Appropriate nutrition includes feeding children a variety of foods to ensure that nutrient requirements are met. Studies have shown that plant-based complementary foods by themselves are not sufficient to meet the needs of some children for certain micronutrients (WHO/UNICEF, 1998). Therefore, it is advised that children eat meat, poultry, fish, or eggs daily, or as often as possible. Vegetarian diets may not meet children's nutrient requirements unless supplements or fortified foods are also provided. Vitamin A-rich fruits and vegetables should be consumed daily, and the diets of children should include an adequate amount of fat. Fat is important in the diets of infants and young children because it provides essential fatty acids, facilitates absorption of fat-soluble vitamins (such as vitamin A), and enhances dietary energy density and palatability. Tea and coffee are not recommended for children because they contain compounds that inhibit iron absorption. Sugary drinks and excessive juice consumption should be avoided because other than energy they contribute little to the diet and decrease the child's appetite for more nutritious foods (PAHO/WHO, 2003).

In summary,

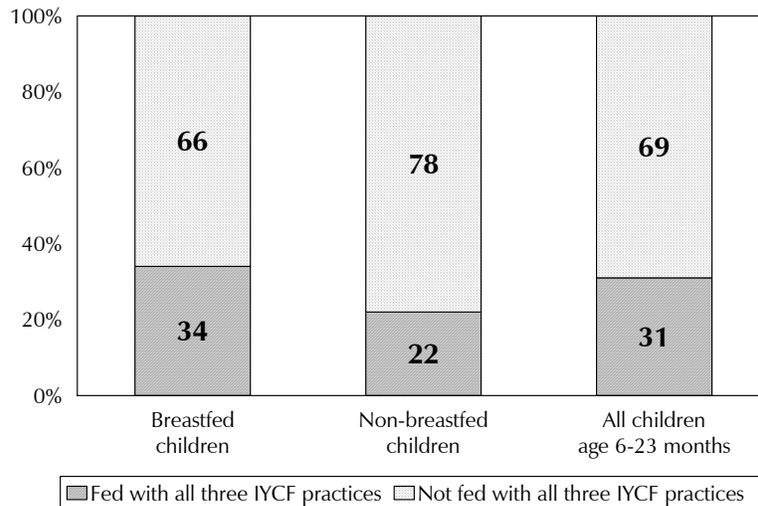
- Breastfed children age 6-23 months should receive animal-source foods and vitamin A-rich fruits and vegetables daily (PAHO/WHO, 2003). Because first foods almost always include a grain- or tuber-based staple, it is unlikely that young children who eat less than three food groups will receive both an animal-source food and a vitamin A-rich fruit or vegetable. Therefore, three food

groups are considered the minimum number appropriate for breastfed children (Arimond and Ruel, 2004).

- Breastfed infants age 6-8 months should receive complementary foods 2-3 times per day, with 1-2 snacks; breastfed children age 9-23 months should be receive meals 3-4 times per day, with 1-2 snacks (PAHO/WHO, 2003). Table 11.5 shows the percentage of breastfed children who were fed at least the minimum number of times per day for their age (i.e., twice for infants age 6-8 months and three times for children age 9-23 months).
- Non-breastfed children age 6-23 months should receive milk or milk products to ensure that their calcium needs are met. In addition, they need animal-source foods and vitamin A-rich fruits and vegetables. Four food groups are considered the minimum number appropriate for non-breastfed young children.
- Non-breastfed children age 12-23 months should be fed meals 4-5 times per day, with 1-2 snacks (WHO, 2005). Table 11.5 shows the percentage of non-breastfed children age 6-23 who were fed at least the minimum number of times per day (i.e., four times).

According to the results presented in Table 11.5, 95 percent of youngest Zimbabwean children age 6-23 months living with the mother received breast milk or breast milk substitutes during the 24-hour period before the survey, 52 percent had an adequately diverse diet—i.e., they had been fed foods from the appropriate number of food groups, depending on their age and breastfeeding status—and 50 percent had been fed the minimum number of times appropriate for their age. Feeding practices for less than one-third (31 percent) of Zimbabwean children age 6-23 months meet the minimum standards with respect to all three of the IYCF feeding practices (Figure 11.1).

Figure 11.1 Infant and Young Child Feeding (IYCF) Practices, Zimbabwe 2005-2006



Breastfed children are more likely than non-breastfed children to be fed the minimum number of times per day but less likely to receive the minimum number of food groups for their age. Children age 12-17 months (39 percent) are more likely to meet the minimum feeding standards than older or younger children (27 percent). Children in urban areas (45 percent) are also more likely to be fed according to the recommended IYCF guidelines, compared with the children in rural areas (26 percent). There are marked

differences in children's feeding practices by region; children in Mashonaland East, Midlands, Harare, and Bulawayo are almost three times as likely to be fed according to the three IYCF practices as children in Matabeleland South (16 percent) and Matabeleland North (17 percent). However, these results should be interpreted with caution because of the small number of children reported on in the different regions. As expected, children of mothers with secondary or higher education and children in households in the middle or higher wealth quintiles are more likely to be fed according to the recommended feeding practices than other children.

Arimond, M., and M.T. Ruel. 2004. Dietary Diversity is Associated with Child Nutritional Status: Evidence from 11 Demographic and Health Surveys. *Journal of Nutrition* 134: 2579.

Pan-American Health Organization and World Health Organization (PAHO/WHO). 2003. *Guiding Principles for Complementary Feeding of the Breastfed Child*. Washington, D.C. and Geneva, Switzerland: PAHO/WHO.

World Health Organization (WHO). 2005. *Guiding Principles for Feeding Nonbreastfed Children 6 to 24 Months of Age*. Geneva, Switzerland: WHO.

World Health Organization and United Nations Children's Fund (WHO/UNICEF). 1998. *Complementary Feeding of Young Children in Developing Countries: A Review of Current Scientific Knowledge*. Geneva: World Health Organization, WHO/NUT98.1.

Table 11.5 Infant and young child feeding (IYCF) practices

Percentage of youngest children age 6-23 months living with the mother who are fed according to three IYCF feeding practices based on the number of food groups received and the number of times the child was fed during the past 24 hours (the day and night preceding the survey), by breastfeeding status and background characteristics, Zimbabwe 2005-2006

Background characteristic	Among breastfed children 6-23 months, percentage fed:				Among nonbreastfed children 6-23 months, percentage fed:				Among all children 6-23 months, percentage fed:					
	3+ food groups ¹	Minimum times or more ²	Both 3+ food groups and minimum times or more	Number of children (weighted)	Milk or milk products ³	4+ food groups	4+ times or more	With 3 IYCF practices ⁴	Number of children (weighted)	Breast milk, milk or milk products ³	3+ or 4+ food groups ⁵	Minimum times or more ⁶	With all 3 IYCF practices	Number of children (weighted)
Age														
6-8	31.0	72.0	26.8	276	*	*	*	*	2	99.7	31.0	71.4	26.6	279
9-11	48.6	39.4	27.6	221	*	*	*	*	9	98.2	47.4	38.2	26.5	230
12-17	59.9	54.0	39.9	475	84.1	58.1	39.5	35.8	72	97.9	59.6	52.1	39.4	547
18-23	66.5	51.8	38.2	169	79.0	51.9	29.1	19.4	259	87.3	57.6	38.1	26.8	428
Sex														
Male	50.8	55.6	33.5	592	78.5	50.4	34.9	24.5	173	95.1	50.7	51.0	31.5	765
Female	52.6	54.7	34.7	549	80.1	54.0	26.1	19.9	169	95.3	52.9	48.0	31.2	718
Residence														
Urban	72.0	60.4	50.4	287	82.5	71.7	39.6	32.8	136	94.4	71.9	53.7	44.7	424
Rural	44.9	53.4	28.6	855	77.1	39.2	24.5	15.2	205	95.6	43.8	47.9	26.0	1,060
Province														
Manicaland	39.0	56.1	26.2	152	(82.7)	(38.9)	(21.4)	(14.1)	48	95.8	39.0	47.7	23.3	200
Mashonaland Central	49.0	44.9	23.5	137	(88.4)	(64.6)	(7.6)	(7.6)	28	98.0	51.7	38.5	20.8	165
Mashonaland East	62.0	71.4	51.7	88	(87.9)	(42.0)	(41.8)	(22.3)	25	97.3	57.5	64.8	45.1	113
Mashonaland West	56.9	42.2	32.3	91	(52.0)	(35.8)	(5.3)	(3.3)	32	87.4	51.4	32.6	24.7	124
Matabeleland North	29.8	64.2	21.2	68	(54.9)	(19.5)	(13.7)	(4.2)	21	89.3	27.4	52.2	17.1	89
Matabeleland South	38.9	55.2	19.9	52	(45.3)	(30.2)	(19.1)	(6.2)	18	85.7	36.6	45.7	16.3	70
Midlands	58.7	63.5	46.0	180	(89.0)	(52.4)	(43.5)	(34.7)	41	98.0	57.5	59.8	43.9	221
Masvingo	42.6	50.4	26.0	204	(94.4)	(45.7)	(36.0)	(24.5)	46	99.0	43.2	47.7	25.7	250
Harare	70.4	51.2	44.8	117	92.9	81.8	49.8	46.6	57	97.7	74.1	50.7	45.4	174
Bulawayo	78.5	62.0	54.6	54	(58.2)	(84.4)	(43.6)	(26.1)	24	87.2	80.3	56.4	45.9	78
Mother's education														
No education	(22.9)	(15.8)	(3.3)	44	*	*	*	*	11	(94.7)	(18.2)	(12.5)	(2.6)	56
Primary	45.5	51.1	29.3	432	73.1	32.3	26.7	19.0	101	94.9	43.0	46.5	27.3	533
Secondary	56.9	60.0	38.6	646	82.8	63.1	35.2	25.5	214	95.7	58.4	53.8	35.4	860
More than secondary	*	*	*	20	*	*	*	*	15	(89.3)	(75.5)	(48.2)	(40.0)	36
Wealth quintile														
Lowest	38.6	47.3	22.5	310	74.6	29.3	26.7	16.7	66	95.5	37.0	43.7	21.5	376
Second	45.1	47.8	24.8	237	77.3	42.0	21.8	11.9	76	94.5	44.4	41.5	21.7	313
Middle	49.6	64.8	36.0	221	(79.1)	(48.8)	(28.8)	(20.1)	31	97.5	49.5	60.4	34.1	252
Fourth	64.6	59.7	46.0	241	78.1	53.9	27.7	18.0	87	94.2	61.8	51.1	38.6	328
Highest	73.9	62.7	53.1	132	86.2	79.5	45.5	41.6	81	94.7	76.1	56.1	48.7	214
Total	51.7	55.2	34.1	1,142	79.3	52.2	30.5	22.2	342	95.2	51.8	49.5	31.4	1,483

Note: Figures in parentheses are based on 25-49 unweighted cases. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.

¹ Food groups: a. infant formula, milk other than breast milk, cheese or yogurt or other milk products; b. foods made from grains, roots, and tubers, including porridge, fortified baby food from grains; c. vitamin A-rich fruits and vegetables (and red palm oil); d. other fruits and vegetables; e. eggs; f. meat, poultry, fish, and shellfish (and organ meats); g. legumes and nuts; h. foods made with oil, fat, butter.

² At least twice a day for breastfed infants age 6-8 months and at least three times a day for breastfed children age 9-23 months

³ Includes commercial infant formula, fresh, tinned and powdered animal milk, and cheese, yogurt and other milk products

⁴ Non-breastfed children age 6-23 months are considered to be fed with three IYCF feeding practices if they receive other milk or milk products and are fed at least the minimum number of times per day and receive at least the minimum number of food groups.

⁵ 3+ food groups for breastfed children and 4+ food groups for non-breastfed children

⁶ Fed solid or semi-solid food at least twice a day for infants 6-8 months, 3+ times for other breastfed children, and 4+ times for non-breastfed children