Question & Answers sheet on

Exclusive Breastfeeding and Complementary Feeding of Infant and Young Children

To achieve the 10th five year plan goals for Infant and Young Child Feeding (IYCF) practice, we have to support each and every women in our country. Following Q & A on this topic would help each and every one to know accurately about exclusive breastfeeding and complementary feeding of infants and young children.

Q. What is exclusive breastfeeding and how long it should be practiced?
Ans. Exclusive breastfeeding means when a baby receives only breastmilk and no other food or drink, not even water, allowing drops, syrups (vitamins, minerals, medicines recommended by a health professional) and is fed frequently and unrestrictedly. WHO, UNICEF and all other experts on infant feeding recommend that exclusive breastfeeding should continue for first 6 months.

Q. Why we should not give water to babies being exclusively breastfed?
Ans. Infants exclusively breastfed for first six months grow well and need nothing else. If water is also given along with breastfeeding it leads to less desire for the baby to suckle and thereby decline in the production of breastmilk and that is also likely to be contaminated.

Q. When should breastfeeding be started?
Ans. Breastfeeding should be started immediately after the baby is born. The naked baby (after baby is mopped gently and made dry) should be held by the mother, close to her breasts for skin to skin contact. It stimulates smooth flow of milk and keeps the baby warm besides helping emotional bonding. After this start breastfeeding.

Q. Why breastfeeding should be started early?
Ans. Because
1. Baby is most active in first 30 to 60 minutes.
2. Sucking reflex is most active at that time.
3. Early start ensures success of exclusive breastfeeding. Colostrum, which is the first yellowish secretion from the breast, is full of substances which protect the baby from getting any infection and acts to prevent infection like a vaccine.
4. It prevents breast swelling and pain, reduces post delivery bleeding.

Q. How mother's milk can be increased?
Ans. Mother’s milk is available to the babies on ‘demand and supply principle’, and is produced depending upon how much a baby needs. It depends on how frequently and how much the baby suckles on the breast. When mothers feel that their babies are not getting enough milk and they want to increase their own milk supply, it is very helpful to offer breastfeeding more frequently. More suckling will produce more milk in a few days.

Q. After Caesarean- section delivery, can I breastfeed my baby successfully?
Ans. Yes. This operation does not affect your ability to successfully breastfeed your baby. You can start breastfeeding after 4 hrs. of operation or when you are out of the effect of anesthesia. You can tilt your body to one side in the lying-down position and start feeding, or you can put the baby on your abdomen and then feed the child. All mothers who have caesarean section deliveries are successful in breastfeeding their babies with assistance for the first few days.

Q. I don't have enough milk. What should I do?
Ans. Sign of getting adequate milk supply is the baby passing urine 6 times (or more) in 24 hours and baby gaining weight 500gms per month. The feeling of inadequate milk is usually apparent and not true as it comes from the mother believing that she is not producing enough breastmilk or if the baby asks for feeds more frequently or cries a lot. What you should
do is put your child more often at your breast. Increased suckling frequently will increase “prolactin” production and in turn increase your milk supply. Also, avoid tension which inhibits the milk flow.

Q. What is ‘continued breastfeeding’ and how long it should be given?
Ans. After six months of age, the child should be given complementary food along with continued frequent breastfeeding up to the age of two years and beyond.

Q. When should babies be given complementary food (additional food)?
Ans. After 6 months of age along with frequent breastfeeding. Family food should be started after 6 months and gradually increased to 4-5 times in a day.

Q. Why complementary food should not be given early or late?
Ans. If additional food is started early, it is dangerous, as the risk of baby getting diarrhoea (loose-motions) is nearly 3 to 13 times more because complementary food may not be as clean as breastmilk. Early start also makes the child to take less breastmilk. Thus, it becomes difficult to meet the nutritional needs of the child. Starting late is also dangerous because a child does not get extra food needed to fill the energy and nutrition gap, child may grow slow and the risk of malnutrition increases.

Q. What should be the type of complementary foods (additional foods)?
Ans. Foods given to the baby should not be thin and watery but should be like a gruel/kheer of higher nutritional value. Food prepared at home is the best and ideally suited to baby’s needs. Cereals with added oil, pulses, lentils, cereals with added milk and mashed vegetables for the vegetarian family and meat, eggs and fish for the non-vegetarian family make good combination of foods. It is important to give enough food i.e., infants of 6-9 months need 2 Katories of food a day and from 9-12 months they need 2 ½ Katories of food a day.

Q. How complementary food should be given?
Ans. Giving family food helps adapting to family practices. Babies should be allowed to make attempt to feed themselves near the end of the first year, but they will still need help and encouragement in eating through the 2nd year. Babies are allowed to eat themselves to help develop coordination and physical development and parents/caregivers should interact with them to tell new concepts and words while feeding, as this helps in the better mental development of the child.

Q. What if a mother works outside home?
Ans. Mothers working outside home can continue these optimum infant and young child feeding practices if fully supported by the family and community. Adequate maternity leave, facilities for breastfeeding breaks for feeding and expressing milk, and nearby childcare (creche) facilities are helpful. Mothers can combine work with breastfeeding by expressing breastmilk whenever child is not with her or breastfeeding frequently when baby is with her. When they join work after leave, they should continue to breastfeed, before leaving for work and when they are back at home and at night.

Breastfeeding is the right of mother and babies. Support it!

What is BPNI
BPNI is a registered, non-profit, independent national organization with international collaboration and works towards protecting, promoting, and supporting breastfeeding and appropriate complementary feeding of infants and young children since 1991. BPNI works to protect, promote and support breastfeeding in India with the broad goal of empowering all women to breastfeed their infants exclusively for first 6 months of life and to continue breastfeeding for two years or beyond along with adequate and appropriate complementary feeding through advocacy, training, education, information, research and social mobilization. BPNI also works in close liaison with International Baby Food Action Network (IBFAN) and World Alliance for Breastfeeding Action (WABA).

BPNI Policy on Funds
BPNI does not accept funds or sponsorship of any kind from the companies producing infant milk substitutes, feeding bottles, related equipments, or infant food (cereal foods).