Research Summary

# Inadequate Feeding of Infant and Young Children in India

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A national survey of 9,241 Indian children aged 6–18 months found that household wealth barely predicted whether infants were fed appropriately — but nutritional advice from health workers did. Even among the richest households, only 40% of children received adequate food by WHO standards. Mothers who received nutrition counselling from anganwadi workers or during antenatal visits were significantly more likely to introduce solid food on time, feed children often enough, and offer a diverse diet.

## What the study asks

If poverty alone doesn't explain inadequate infant feeding in India, what does? The study asks how much access to nutritional information — versus household wealth — shapes whether mothers follow WHO- and government-recommended infant and young child feeding (IYCF) practices.

## Data and methods

The study analyzes India's National Family Health Survey (2005–06, NFHS-3), a nationally representative survey of 124,385 women aged 15–49 across all 28 states. The feeding analysis focuses on 9,241 children aged 6–18 months, using mothers' 24-hour dietary recall. Six multivariate logistic regression models tested WHO IYCF indicators — timely introduction of solid food, minimum meal frequency, and minimum dietary diversity — against nutritional information, wealth quintile, maternal education, and other covariates.

## Key findings

- **Wealth barely mattered for the youngest infants:** for children aged 6–8 months, household wealth and maternal education were not significant predictors of adequate feeding.
- **Information mattered a lot:** mothers advised on nutrition during antenatal visits were significantly more likely to introduce complementary food (OR 1.48), feed at least twice daily (OR 1.29), and offer 3+ food groups (OR 1.55). Discussing nutrition in other health-worker meetings raised the odds of starting complementary food nearly fourfold (OR 3.76).
- **Media counted too:** frequency of listening to the radio and reading newspapers was positively associated with better feeding practices in both age groups.
- **Wealth emerged later:** for children aged 9–18 months, wealth and education became significant for dietary diversity (richest vs. poorest quintile, adjusted OR 2.71 for 4+ food groups) — but nutritional information remained significant even after adjusting for both.

***Headline stat:*** *Only 40% of children in the richest households in the survey received adequate feeding per WHO guidelines — showing that income growth alone does not resolve inadequate infant feeding in India.*

## Why it matters

Poverty is an important but incomplete explanation for child malnutrition in India. For the youngest infants, timely introduction of complementary food depended far more on whether a mother had received nutritional advice than on household income. That is, in principle, an easier problem to fix than poverty itself: nutrition

counselling through anganwadi workers, antenatal visits, and mass media can reach mothers directly, independent of income growth.

## Publication details & suggested citation

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