

COMPLEMENTARY FEEDING PRACTICES AMONG INFANTS AGED 6-12
MONTHS IN SELECTED HEALTH CLINICS IN SELANGOR

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ABSTRACT

Complementary feeding practices should start at the age of six months along with breastfeeding in order to promote a proper growth and development of infants. This cross-sectional study was aimed to investigate the complementary feeding practices among infants aged 6 to 12 months in selected health clinics in urban and rural area of Selangor. A total of 109 infants participated in this study. The anthropometry values taken were weight, length, body mass index (BMI), mid upper arm circumference (MUAC) and head circumference. The diet intake was obtained by using 2 days (1 weekday and 1 weekend) of 24-hour diet record and the results were later compared with Malaysian Recommended Nutrient Intake (RNI) and the recommendation of complementary feeding by World Health Organization (WHO). Out of 109 participants, 94.5% (n=103) have started complementary feeding while another 5.5% (n=6) were still exclusively breastfed without starting complementary feeding. Out of 103 infants who have started complementary feeding, 27.2% (n=28) of them still breastfed, 36.9% (n=38) are bottle fed while another 35.9% (n=37) infants were both breastfed and bottle fed. This study found that the prevalence of wasting among the subjects were 6.4% (n=7), moderate underweight was 7.3% (n=8) and stunted was 4.6% (n=4). Besides that, the percentage of infants who meet the recommendation of total calorie intake by RNI was 13.8% (n=15), inadequate intake was 20.2% (n=22) and excessive intake was 66.1% (n=72). Maternal age, employment status, workplace and household income were found to be significantly associated with the infants' complementary feeding practices ($p<0.05$). There was also a significant association found between current feeding practices with infants' weight and BMI ($p<0.05$). As a conclusion, most of the mothers introduced complementary feeding at the recommended time but exceeded the energy recommendation.

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CHAPTER 1

INTRODUCTION

1.1 RESEARCH BACKGROUND

Currently, malnutrition among children has consistently become a main public health problem throughout the developing countries, especially in southern Asia and sub-Saharan Africa (Ogunba, 2010). It is estimated that the world prevalence of stunting were 165 million (26%), underweight were 101 million (16%), wasting were 52 million (8%) and overweight were 43 million (7%) among children below the age of five in 2011 (United Nations Children Education Fund (UNICEF), World Health Organization (WHO) and The World Bank, 2012). In Malaysia, the Malaysian Ministry of Health has reported that there were 14% of children aged below than five years were categorized as moderate to severe malnourish in the year 2000 (Cheah, Wan Muda, Mohd Hussin & Thon, 2012). Cheah et al. (2012) also noted that moderate malnutrition is still high among rural communities even though severe form of malnutrition is rare. In addition, Cheah et al. (2012) emphasized that, among 295 children below five years of age in a rural district in Kelantan, Malaysia, 40% were wasted, 63.4% of them were underweight and the rest 69% were stunted.

There are several factors that may cause infant malnutrition such as birth order, duration of breastfeeding, mother's perception on child's appetite, frequency of illness, feeding practice, duration of complementary feeding, caretaker, financial problem, status