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**Chapter 8: Infant and Young Child Feeding Pages 81 – 84**

## CHAPTER 8. INFANT AND YOUNG CHILD FEEDING

This chapter summarizes indicators related to infant and young child feeding among children 6-59 months of age and provides some information on the initiation of breastfeeding, the duration of feeding (although not exclusivity) and the age of onset of complementary feeding.

### 8.1 Breastfeeding

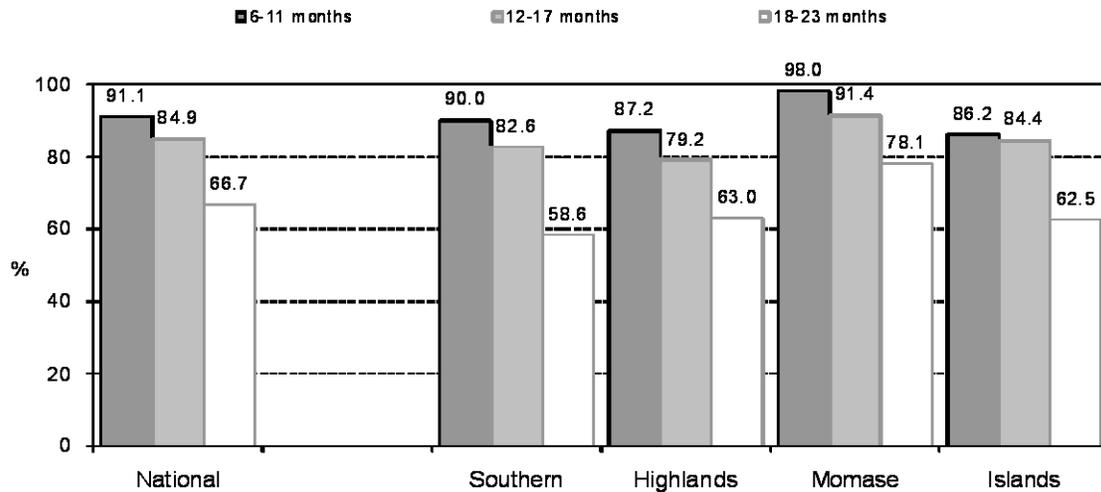
Table 8.1 presents the prevalence of mothers of children 6-59 months of age who initiated breastfeeding within the first 24 hours after birth. Most women in all areas of the country and in both urban and rural areas initiated breastfeeding within 24 hours.

**Table 8.1 Prevalence of breastfeeding within 24 hours of birth, PNG National Nutrition Survey 2005**

Demographic Characteristics	Percent of children breastfed within 24 hours of birth		
	N	%	95% CI
<b>National</b>	<b>931</b>	<b>83.6</b>	<b>79.7, 86.8</b>
<b>Region</b>			
Southern	223	77.6	69.5, 92.6
Highlands	208	80.3	72.3, 86.4
Mamose	254	85.8	76.9, 91.7
Islands	246	94.7	91.1, 96.9
<b>Residence</b>			
Urban	179	80.0	68.2, 88.2
Rural	752	84.4	80.3, 87.8

Weighted analysis to account for complex survey design

In addition to early introduction of breastfeeding most children are also breastfed during the first 12 months of life. Figure 8.1 presents the number of children currently breastfeeding at the time of the survey by age and by region. Nationally 91.1% of children were breastfed between 6-11 months of age and 84.9% were breastfed between 12-17 months of age. The proportion of children breastfed between 18-23 months of age had dropped to 66.7%, although many women continued to breastfeed for a long time after their child reached 23 months of age.

**Figure 8.1 Prevalence of children currently breastfed by age and by region, PNG National Nutrition Survey 2005**

## 8.2 Introduction of complementary foods

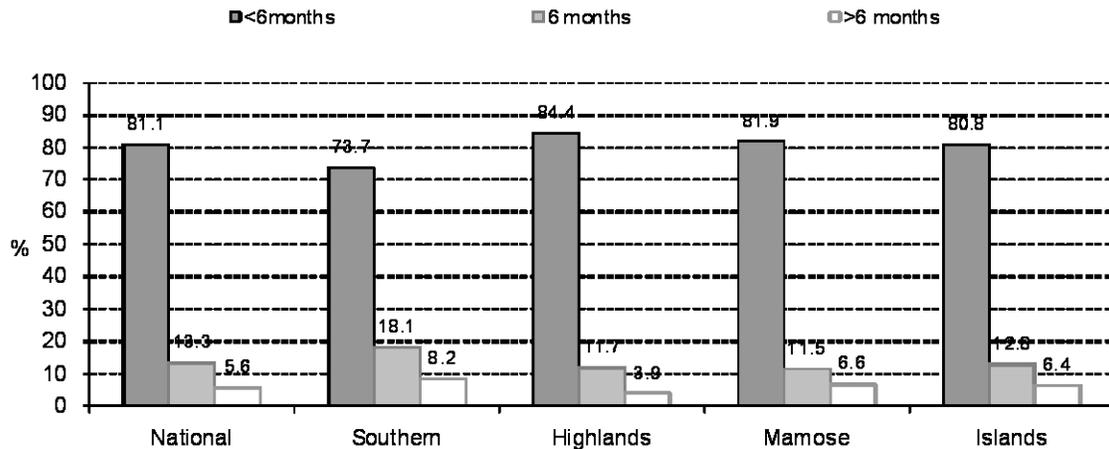
UNICEF and WHO recommend that complementary foods are introduced to the child at 6 months of age when breast milk alone is not sufficient to meet their growing needs. Nationally only 13.3% of children were given complementary foods at 6 months of age (Table 8.2). Complementary foods were considered to be any types of food other than breast milk or formula. More than 80% of children were introduced to complementary foods before the WHO recommended age of 6 months of age (Figure 8.2).

**Table 8.2 Prevalence of timely introduction of complementary foods at 6 months of age, PNG National Nutrition Survey 2005**

Demographic Characteristics	Prevalence of timely introduction to complementary foods		
	N	%	95% CI
<b>National</b>	<b>841</b>	<b>13.3</b>	<b>10.2, 16.5</b>
<b>Region</b>			
Southern	182	18.1	12.3, 25.9
Highlands	180	11.7	7.3, 18.1
Mamose	244	11.5	6.4, 19.7
Islands	235	12.8	8.6, 18.5
<b>Residence</b>			
Urban	157	10.6	6.1, 17.7
Rural	684	13.6	10.3, 17.9

Weighted analysis for prevalence to account for complex survey design

**Figure 8.2 Age at first introduction to complementary foods, PNG National Nutrition Survey 2005**



### 8.3 Discussion: Infant feeding

Breastfeeding provides newborns with protection against infection and chronic diseases, makes vital micronutrients available to newborns, and reduces the risk of death due to diarrhea, acute respiratory infections and other diseases (WHO 2001). These results demonstrated that the initiation and continuation of breastfeeding up until at least one year of age is very common in all parts of Papua New Guinea. Most children are breastfed during the first 24 hours after birth and there is not much regional variation. This survey does not provide information about exclusive breastfeeding or duration, but it does show that breastfeeding is initiated soon after birth for most infants.

In PNG complementary foods are introduced to the child at a very young age. This is concerning as the early introduction of complementary foods (before 6 months of age) provides few benefits and can be harmful. Early introduction may lead to the mother giving the child less breast milk and the weaning foods may not provide the infant with the same high quality nutrients that breast milk provides.