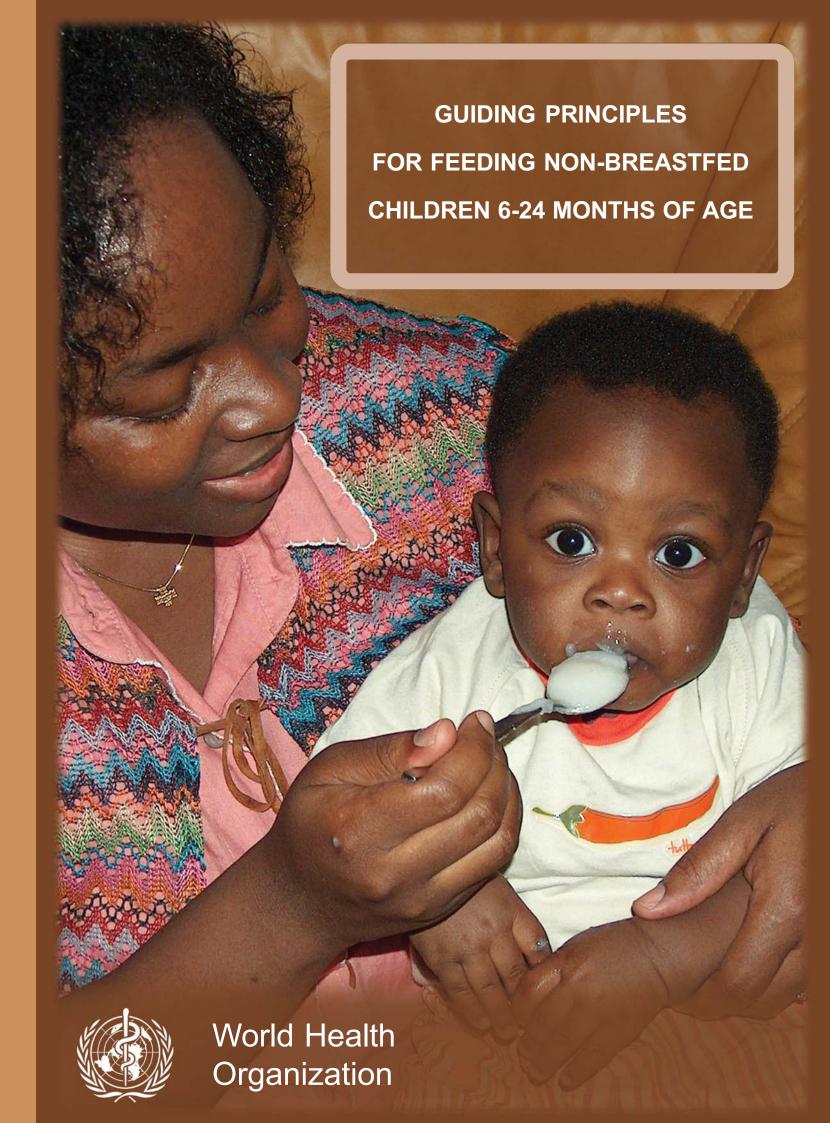
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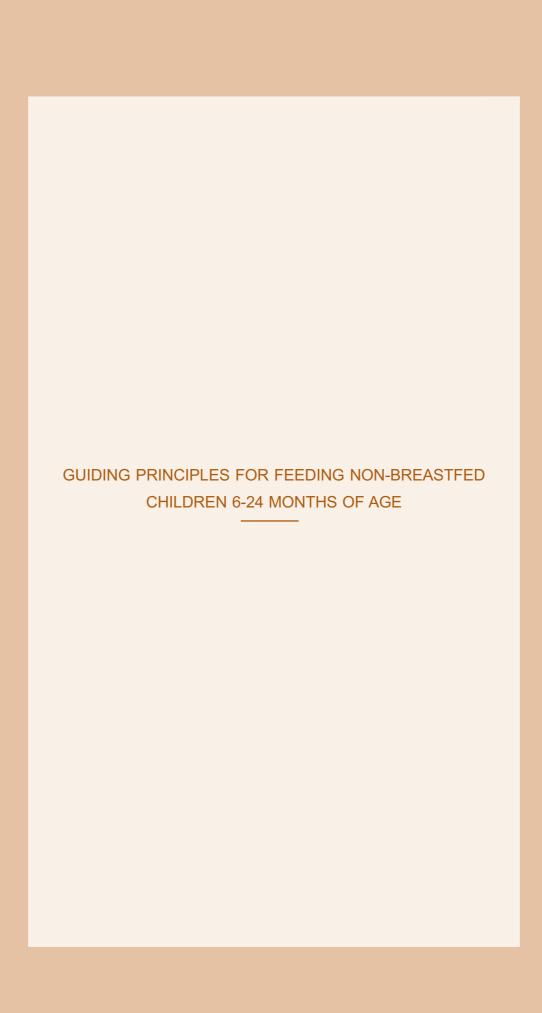




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INTRODUCTION

Adequate nutrition during infancy and early childhood is fundamental to the development of each child's full human potential. It is well recognized that the period from birth to two years of age is a "critical window" for the promotion of optimal growth, health and behavioural development. Longitudinal studies have consistently shown that this is the peak age for growth faltering, deficiencies of certain micronutrients, and common childhood illnesses such as diarrhoea. After a child reaches two years of age, it is very difficult to reverse stunting that has occurred earlier (Martorell et al., 1994). The immediate consequences of poor nutrition during these formative years include significant morbidity and mortality and delayed mental and motor development. In the long term, early nutritional deficits are linked to impairments in intellectual performance, work capacity, reproductive outcomes and overall health during adolescence and adulthood. Thus, the cycle of malnutrition continues, as the malnourished girl child faces greater odds of giving birth to a malnourished, low-birth-weight infant when she grows up. Poor infant feeding practices, coupled with high rates of infectious diseases, are the principal proximate causes of malnutrition during the first two years of life. For this reason, it is essential to ensure that caregivers are provided with appropriate guidance regarding optimal feeding of infants and young children.

Not all children will be able to enjoy the multiple benefits of breastfeeding.

According to current UN recommendations, infants should be exclusively breastfed for the first six months of life, and thereafter should receive appropriate complementary feeding

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