



BRENDA BANURA > BREAST-FEEDING

What next after exclusive breastfeeding for mothers?

Commemoration of the breastfeeding week every other year is important because it re-emphasises the importance of breast-feeding.

Breast milk has a perfect balance of all the nutrients the baby needs to grow well, especially in the first six months. This is why health professionals, recommend that breast-feeding begins within the first hour of a baby's life and continues as often and as much as the child wants until they are two years or more.

The introduction of other foods and drinks at six months often times comes with a risk of failure to provide children with supplementary foods of high nutrient value. This causes malnutrition as reported in the preliminary results of the 2016 Uganda Demographic Health Survey (2016).

Adding vitamin mineral powders to meals is a quick solution to this problem of food with low nutrient value. Vitamin mineral powders are packed in sachets and a one gram sachet provides a day's worth of 15 essential vitamins and nutrients. They are mixed into the food of young children 6-23 months old. The powders are proven to reduce iron deficiency and anaemia.

For children like Rahimu Kyuka from Namutumba District, who was exclusively breastfed, adding vitamin powders to their meals has made them healthier. His mother says, "Of all children, Kyuka has the best ap-

petite and he seems to grow so fast. He is a sharp young man. None of his siblings ever ate food mixed with vitamin mineral powders."

Caretakers of children like Whitney Wailagala of Namutumba District, who was sub-optimally breastfed during his first six months of life, are thankful for the powders.

Wailagala's grandmother Zewelensi Namwase says, "He was thin, his eyes were yellow, he couldn't sit on his own, walk or even hold his head up. It looked like his neck was too weak to hold his head; his appetite was very poor. He did not play with anything or anyone.

But within three months of giving him food mixed with vitamin mineral powders, I could see a difference. My grandson's appetite improved greatly, my problems shifted from pleading with him to eat to making sure there was enough food for him to eat, especially during the drought."

In the absence of vitamin mineral powders, Wailagala's grandmother would probably be telling a different story.

But how many Wailagalas, whose story do not include sachets of vitamin mineral powder, are out there? When it comes to nutrition among children below five years, the 2016 UDHS preliminary results indicate that more than 29 per cent are stunted and anaemia affects half of children in this age bracket.

“ Taking good care of babies. The introduction of other foods and drinks at six months often times comes with a risk of failure to provide children with supplementary foods of high nutrient value. This causes malnutrition as reported in the preliminary results of the 2016 Uganda Demographic Health Survey (2016). ”

The Cost of Hunger Summary Report states that malnutrition is the underlying cause of as many as 45 per cent of child deaths in Uganda. This is because children who are malnourished are at greater risk of infections (such as diarrhoea and pneumonia) and even death.

Insufficient nutrition during periods of rapid growth, which happens below the age of five years, can have serious effects on the health and other outcomes of a child. This is why it is important to pay attention to what makes up children's meals during the weaning period.

To tackle the issue, the Ministry of Health with support from development partners such as The United Nations Children Fund, World Food Programme and the USAID-

Abako has not produced another son or daughter with his racing genes.

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funded Strengthening Partnerships, Results and Innovations in Nutrition Globally (SPRING) project, have been distributing vitamin mineral powders in areas that are characterised by high incidences of micronutrient deficiencies in the country.

But is that enough to help all the Wailagalas out there? The cost of using powders per child for 18 months is high at \$38 (about Shs136,800).

It is a cost that the government might not currently afford. The powders can be commercialised, but the challenge with this is that those who need them the most might not be able to get them.

That is why the government needs to reach out to development partners, some of whom are already distributing these powders in different parts of the country. A lead from the government will ensure that areas that are characterised by nutrition deficiencies such as Acholi, West Nile, and Busoga according to the 2016 UDHS preliminary results, benefit the most.

In areas where access to foods with high nutrient level is a challenge, use of vitamin mineral powders should be promoted by the government so as to reduce malnutrition deficiencies that tend to occur after exclusive breast-feeding.

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