The quality of complementary feeding of older infants and young children, ages 6-23 months, remains a significant public health and nutrition challenge across low- and middle-income countries. According to a 2021 UNICEF report, over 2 in 3 children in these contexts are being “Fed to Fail”—not having access to the right nutritious foods, in the right quantities and the right frequencies. Improving the micronutrient quality of complementary feeding during this age period is important to ensure proper growth and development—without which their future health and productivity may be compromised.

In this context, the Micronutrient Forum organized an expert consultation on 8–9 June 2023, to reflect on existing knowledge and the gaps in knowledge on specific food groups and home fortification products used in complementary feeding of children aged 6–23 months. The 31 participants from academia, research institutes, implementing organizations, and the United Nations, discussed priorities and key activities to align and catalyze food-based actions to improve the micronutrient quality of the diets of older infants and young children.

The main objectives of this consultation were to:

- Identify gaps in the existing evidence base on food-based complementary feeding practices.
- Examine pivotal barriers and enablers influencing policy adoption and program execution.
- Outline research, policy, and program implementation priorities for supporting complementary feeding interventions.

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The consultation focused on animal- and plant-source food groups, given the evidence on their role in improving nutritional intakes and outcomes of children 6–23 months old, and on home fortification of locally prepared foods with micronutrient powders or small quantity lipid-based nutrient supplements.

Experts agreed that significant challenges persist in meeting targets for the intake of specific nutrients through local diets. The most common micronutrient gaps found in early childhood diets include iron, vitamin A, zinc, folate, vitamin B12, and calcium. These gaps could be filled by increasing intakes of micronutrient-dense (i.e., unfortified) food sources such as organ meats, ruminant meat, dairy, eggs, small fish, shellfish (bivalves and crustaceans), ground-nuts, orange and red fruits, dark green leafy vegetables.

Meeting iron remains particularly challenging, even when fish or meat consumption are increased. The evidence shows that home fortification is the most effective way to ensure adequate iron intakes for children under two years of age.²

Participants agreed on a key set of recommendations on research, implementation and programming, and advocacy and policy. Details of the evidence that was presented, the barriers that were discussed, and the recommended actions and priorities can be found in the Forum’s full meeting report.³

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**Expert Consultation on the Micronutrient Quality of Complementary Feeding in Early Childhood**

**JOINT STATEMENT OF RECOMMENDATIONS**

1. We encourage governments to include specific guidance for complementary feeding of older infants and young children 6–23 months in national food-based dietary guidelines.

2. We encourage stakeholders in the food system and the social protection system to take infant and young child feeding requirements into consideration as part of their systems’ policies, strategies, and programs.

3. We recommend the development of implementation guidance for programming in plain language, with concrete examples to accompany the updated WHO complementary feeding guidelines (to be published by end 2023). Countries should be encouraged to update their young child feeding policies accordingly.

4. We recommend that the various child feeding recommendations included in different WHO guidelines be aligned with complementary feeding guidelines.

5. We recommend that complementary feeding guidelines specify that dietary components that contribute to nutrient deficiencies and obesity (such as high-sugar beverages and nutrient-poor, high-fat snacks) should be avoided.

6. We encourage the integration of micronutrient-rich, affordable, and acceptable diets and practices in complementary feeding, including traditional and indigenous foods.

7. We recommend that cost, convenience, time, and availability of foods be considered when making recommendations for a healthy complementary food diet. These are highly relevant factors to low-income urban and rural families when making decisions on child feeding (and household diet).

8. We encourage governments to include complementary feeding interventions in annual budgets, costed development plans, resource mobilization strategies, expenditure tracking, and accountability systems across national budgets for food, health, and social protection systems.

9. We recommend holding additional expert convenings to review the following topics:
   - Unhealthy foods and beverages (low in micronutrient density, high in sugar or unhealthy fat)
   - Commercially produced fortified complementary foods
   - Demand creation and social behavior change communication
   - Complementary feeding in humanitarian contexts

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³ Meeting report can be found on https://micronutrientforum.org/emerging-initiatives/child-diets