Early initiation: percentage of new borns put to breast within 1 hour of birth; exclusive breastfeeding: percentage of infants aged 0-5 months receiving only breast milk; introduction to solids: percentage of infants aged 6-8 months receiving solid or semi-solid food; minimum meal frequency: percentage of children aged 6-23 months receiving the recommended minimum number of solid/liquid feeds as per the age of child; minimum diet diversity: percentage of children aged 6-23 months receiving the minimum diversity of foods and minimum number of feeds; continued breastfeeding at 1 year: percentage of children aged 12-15 months who continue to receive breast milk; continued breastfeeding at 2 years: percentage of children aged 20-23 months who continue to receive breast milk.

**Key Messages**

- Findings from this MICS show low overall rates of early initiation of breastfeeding (42%). Women from the richest households and those who have a higher education are less likely to breastfeed (30% and 37% respectively) within one hour of birth than are women from the poorest households (42%) and those with no education (46%). More needs to be understood about why the richest and better educated women are not initiating breastfeeding within one hour of birth.

- Caesarean section greatly impacts early initiation of breastfeeding. Only 19% of women who delivered by caesarean section breastfeed within the first hour of birth, compared to 46% of women who had a normal delivery.

- In Nepal, most women (96%) continue breastfeeding beyond one year, and 88% continue breastfeeding beyond two years, indicating that many children in Nepal experience the benefits of receiving breast milk into their second year of life. However, only 69% of children aged 6-23 months receive the minimal recommended meal frequency. Even fewer children aged 6-23 months received the recommended minimum diet diversity (40%) and a minimum acceptable diet (30%).

- Nearly half of children in Nepal do not receive the recommended minimum diet diversity. However, children who live in rural and poor households and whose mothers/caretakers have low levels of education and children age 6-8 months are far less likely to receive the minimum recommended diet diversity.

- These data indicate that poor nutrition for children in Nepal is not only a result of lack of access to good food and economic constraints. Lack of knowledge regarding a healthy and diverse diet is evident even in urban, wealthy, and educated households. There is an urgent need to provide mothers, caretakers and health professionals with knowledge about appropriate feeding of young children, including the consumption of appropriate, adequate and safe complementary foods after six months, which leads to better health and growth outcomes for children.
IYCF: Equity

Early Initiation of Breastfeeding

Percent of newborns put to the breast within one hour of birth, by background characteristics

Minimum Diet Diversity

Percent of children aged 6-23 months that were fed food from at least 5 out of 8 food groups, by background characteristics

IYCF: What are the Youngest Infants Fed?

Liquids or foods consumed by infants 0-5 months old

Percent of infants aged 0-5 months receiving breastmilk only, breastmilk and plain water, breastmilk and non-milk liquids, breastmilk and other milk/formula, breastmilk and complementary foods and no breastmilk

Provincial Data

Percent of newborns put to the breast within one hour of birth, and percent of children aged 6-23 months that were fed food from at least 5 out of 8 food groups by geographic region

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