Background

- Improving diet quality among young children 6-23 months is a policy priority in many low-income countries.
- Multiple factors influence complementary feeding practices including household food access, caregiver-level factors and cultural practices.
- Biological and epidemiological evidence suggests that maternal dietary patterns may influence child diet.
- Data on food groups consumed by young children are often available in large-scale national surveys (i.e. Demographic and Health Surveys, DHS), but historically these surveys have not collected maternal diet data.
- The 2018 Nigeria DHS measured food group intake in both young children (age 6-23 months) and women (15-49 years).

Objective

To describe the relationship between child and maternal diet diversity in Nigeria and highlight implications for design of infant and young child feeding (IYCF) programs.

Methodology

- **Dataset:** Nigeria DHS 2018, n=8975 mother-child pairs
- **Outcomes:** Consumption of individual food groups in the previous 24 hours, minimum dietary diversity for children 6-23 months (MDD-C, at least 5 of 8 groups) and for their mothers age 15-49 years (MDD-W, 5 of 10 groups) (WHO-UNICEF 2021 indicator definitions).
- **Analysis:** Compare rates of concordance and discordance between mother-child for individual food groups and MDD using McNemar’s tests. Hierarchical probit regression used to identify drivers of MDD-C.
- **Stratifiers and Covariates:** Child age, sex, maternal age, parity, women’s decision-making, # household members, sex of household head, urban/rural, region, religion, wealth.

Results

- **Table 1:** Hierarchical probit regression of determinants of MDD-C

Conclusions

- Maternal and child diet diversity are suboptimal in Nigeria, and maternal diet is a primary driver of child diet.
- Legumes and nuts and fruits/vegetables are consumed by women but not consistently fed to children; IYCF programs should focus on promoting these food groups that are available in households.
- The forthcoming DHS-8 core questionnaire includes MDD-W; with these data similar analyses can be carried out across LMIC to inform program design.

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