



The Knowledge Level of Medical Personnel in Turkey about Complementary Nutrition

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(Received 03 May 2015; accepted 21 May 2015)

Dear Editor in Chief

WHO and UNICEF currently recommends breast-feeding only, for the first six months and then breast-feeding until the second age ongoing with additional adequate food consumption (1). All babies should receive breast milk sufficiently and every effort should be made, including the process of relactation, for babies who have not been breast-fed adequately or have been weaned early for various reasons (2). Food given in addition to breast milk is called complementary food (3).

Children grow and develop in a way different from adults do. Menus presented to the child in this period must be adequately adapted to meet the daily needs of the child. Timely transition to complementary food provides development of biting and chewing skills, accustoms to food that has different tastes and structures. Nutrition plays a role in the development of all systems of the child such as the immune system, central nervous system and endocrine system (3). In order to sup-

ply the nutritional needs of babies who are nurtured with breast milk, complementary food must be given starting from the 6th month and breast-feeding must continue until the age of 2 (3). Consultancy to be given about complementary food by the medical personnel is of great importance. By this reason, medical personnel must have sufficient knowledge about complementary nutrition.

In our study, we aimed to present the efficacy of the training given by the Ministry of Health in our country through the evaluation of answers given by 18053 medical personnel for both the preliminary and the final tests after one day's training about complementary food consultancy. In this study conducted in our country, the rate for breastfeeding only for 4-6 months throughout Turkey is 62.5% (64.9% in urban, 57.4% in rural) (4). Republic of Turkey Government-UNICEF 2001-2005 Main Application Plan consists of aims such as to increase the rate of children who are fed only by breastfeeding during the first 6 months to 80%, to provide proper

complementary food for 100% of babies after the 6th month, to decrease the rate of children who have started to take complementary food during the first 3 months below 10%, to provide breastfeeding for 90% of children who take proper complementary food after the 6th month until the age of two and to provide training for 100% of personnel who are directly concerned with this issue in order to promote the application of support and continuation of breastfeeding (5). Together with the increasing knowledge level of medical personnel on breast milk and complementary nutrition, the society's knowledge level would increase and a behavior-oriented change would be observed. We think that it is only possible to increase these rates by evaluating and supporting the efficacy of the training provided for the medical personnel.

Acknowledgements

The authors declare that there is no conflict of interests.

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