

Non-recommended milk being provided to young children

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More than one-third of infant caregivers reported serving at least one non-recommended milk type to their infant in the past month—most providing them daily—and the majority of toddler caregivers did not

follow expert recommendations to provide only cow's milk to their children, according to a new study in the *Journal of Nutrition Education and Behavior*.

To assess the prevalence of serving non-recommended [milk](#) beverages (i.e., toddler milk and plant milk) in place of and in addition to recommended milk-based products (including commercially prepared infant formula and cow's milk) for infants (aged 6–11 months), infants in transition (12 months), and toddlers (aged 13–36 months), researchers surveyed US primary caregivers of infants, infants in transition, and toddlers.

"We explored the provision of recommended and non-recommended [milk products](#) to infants and toddlers, so we looked at infant formulas, toddler milks, cow milks, and non-dairy milks. We also wanted to find any sociodemographic factors that might be associated with the types of milks offered by caregivers of diverse backgrounds," said Maria J. Romo-Palafox, Ph.D., RD, Department of Nutrition and Dietetics, Doisy College of Health Sciences, Saint Louis University, St Louis, MO, U.S..

Approximately two-thirds of caregivers reported serving the types of milk that experts recommend for their infant or toddler, including breastfeeding and/or serving commercially prepared infant formula with no other milk type to infants and serving cow's milk to toddlers. However, more than one-third of infant caregivers surveyed reported serving at least one non-recommended milk type to their infant in the past month, including toddler milk and/or cow's milk, and most reported providing them daily. Furthermore, the majority of toddler caregivers did not follow expert recommendations to provide only cow's milk to their children and tended to provide non-recommended milk-types—infant formula most often, followed by [toddler](#) milk and plant milk—in addition to recommended milk types.

Researchers found that factors such as the child's age, household income, the racial and ethnic background of the [caregiver](#), and the product's marketing claims were associated with which milk type the children received, suggesting that more research is needed to understand how diverse populations interpret product claims and how marketing may perpetuate health disparities.

"It's important to note that infant formulas are not inherently bad. We are glad this product exists for moms who cannot breastfeed. But the public should have all the information so they can make an informed decision about what is best for their baby," Dr. Romo-Palafox explained. The results of this study indicate an opportunity for public health education campaigns, [community outreach](#), and additional guidance from [healthcare providers](#), especially regarding potential nutrient deficiencies, dehydration, and undernutrition when providing cow's milk or plant milk to [infants](#) and replacing breastmilk (or commercially prepared [infant formula](#)).

More information: Caregiver's Provision of Non-Recommended Commercially Prepared Milk-Based Drinks to Infants and Toddlers, *Journal of Nutrition Education and Behavior* (2021).
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