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## KNOWLEDGE AND PRACTICE OF MOTHERS ON WEANING FOOD

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### Abstract:

The baby nutritional need is not fulfilled by just breastfeeding or formulae feeding. It needs to be accomplished with complementary solid foods after six months of exclusive breastfeeding. The present study focuses on the knowledge and practice of 100 mothers of reproductive age having a baby of 6-12 months of age in Aligarh city concerning weaning diet. It also focused on the relation between a mother's educational qualification and socio-economic condition to weaning knowledge and practice with descriptive and quantitative approaches. The multiple linear regression and percentage analysis were used to study randomly selected mothers. The result shows that mothers weaning practices were good compared to their knowledge regarding weaning diet. Such that highly educated mothers possess good knowledge, but their practice was average.

**Index term:** Weaning food, Knowledge, Practices

### Introduction

The mother nurtures her child like a small tree. Her weaning knowledge and practice decides the nutritional status of her infant and will affect their future development as well.<sup>12</sup> The nutrition received by an infant in this period decides the rate of morbidity, mortality and certain chronic disease.<sup>4</sup> First and foremost, health, safety, and nutrition for the young child are written on behalf of mothers everywhere.<sup>11</sup> The introduction of complementary foods not only ensures the availability of nutrients that are deficient in mother's milk but also introduces the child to normal family food gradually. But giving solid food before 6 months with increased feeding frequency results in displacing of breastmilk which is unhealthy for an infant.<sup>1</sup> WHO has recommended guidelines which suggest mother's good health is necessary to exclusive breastfeed infant for 4-6 months followed by complementary feeding along with breastfeeding with proper consistency of solid food, frequency of feeding should be noticed, the inclusion of a variety of food groups to enhance infant's nutritional requirement in terms of macro and micronutrients.<sup>2</sup> Liknaw Bewket Zeleke et al.<sup>13</sup> in 2017 found that 15.7 % started weaning before 6 months of age, 6.15 % started in the suggested age range (6-8 months), and the rest 13.4 % started lately after 9 months of age.

The mother's weaning knowledge and practice are significantly influenced by mother's educational qualification, socio-economic background and cultural beliefs, and according to a census report of India, it is founded that 70% of people who live in villages possess poor educational qualification and does not meet the minimum standard of living.<sup>3</sup> According to Josphine kabura Imera<sup>5</sup> in 2013, parent's education qualification is related to a high risk of children poor nutritional status. Similarly, Song-suk Kim<sup>7</sup> during 2005 found that highly educated people demand higher educational programmes and they believe that commercial foods are not good for infant's health in comparison to home-cooked. In 2020, Malgorzata Kostecka et al.<sup>8</sup> in their study, concluded that mothers' age and academic level, the number of youngsters within the family and maternal nutrition knowledge scores contributed to significant differences in breastfeeding duration. According to Sheeliya White N<sup>10</sup> study conducted in 2019, only 76% of the mothers had good knowledge about proper weaning time and said that 92% chooses rice and pulse as the local source but did not know the nutritional value of the food. Mothers usually are not aware of the nutritional requirement of their child as Swati Kambl<sup>6</sup> in 2014 in a study found that only 1.92 % of mother's responded correctly to question concerning the protein requirement of infants of 6-12 months of age. Basically, mother's gain information about weaning by their own experience and from family; this is supported by the study of Mustafa Alam Eldin<sup>9</sup> in 2021, as he said that 52.4 % of mothers said it was their personal experience, followed by 17.1 %, depending on the internet, 16.7% on family and friends, and remaining 13.8% in physician.

Infancy is the foundation for the whole life. Especially the first 5 years of life decide how a healthy life will be in late childhood. It has been seen from past many years there have been more cases of malnutrition during this period. The infant in this period completely depends on the mother or caretaker for receiving proper nutrition. The mother's educational level and her income group are the major factors, along with many others like the type of family, experience, community etc., that act as a barrier or support in advancing her knowledge and practice during the weaning period of their child. To reduce the increasing rate of malnutrition cases and mortality rate, and many child illnesses it is important to develop good understanding on the prevailing practices of weaning food. Present study focused on assessing the weaning knowledge and practice among mothers of children aged between 6 to 12 months with the objective to evaluate the level of knowledge and practice concerning weaning diet/ complementary food among mothers, and another perspective was to find out the effect of selected variables- mother's age, working status, level of education, socio-economic condition, number of children in the family, religion, family type, source of information on mothers knowledge and practice about weaning diet.

## Methodology

The study is based on a descriptive and quantitative research approach. A target group of 100 mothers nurturing a baby between the age of 6-12 months living in Aligarh, Uttar Pradesh, were randomly selected, and data collected were tabulated, analysed with multiple linear regression and percentage test; using SPSS Software using 16.0 version. The mothers were interviewed using a questionnaire tool. The infants of a particular age were selected as they were facing drastic change from exclusive breastfeeding to solid food.

## Result and discussion

In this study, more than half of the mothers belong to the 19-25 years of age group. Majority of respondents followed the Hindu religion. Half of the respondents had only 1 child. 70% of the respondents were undergraduate, 20 % post-graduated and remaining were graduated. Most of the mothers belongs to the lower-income group. 80 % of the mothers were homemakers.

A large group of infants belongs to 9-10 months of age group, 20 % to 6-8 months age and remaining to 11-12 months age group. Most of the mothers were unaware of the height and weight of their infant. Majority of the infants were male and 50% were firstborn.

**Table 1 Factors showing mother's knowledge concerning weaning diet**

Factors	Number of yes(n=100)	%
Know the term weaning diet or complementary food	30	30
Aware of the nutritional requirement (energy, protein, vitamin etc)	30	30
Believe about feeding water, honey and other solid food before 4 months enhance health	20	20
Giving weaning food before 6 months shows diarrhoea symptoms	30	30
Babies cannot have egg at all during weaning period	80	80
Education helped you in choosing weaning pattern	50	50
Continued breastfeeding along with complementary food up to 24 months	70	70
Believe nutritious food are expensive	40	40

Table 1 reflect the knowledge of the mother's concerning weaning. Only 30 % samples knew the meaning of the term weaning. In contrast to a study conducted by Swati Kambli in 2014, there were 30% of mother's had knowledge of the nutritional requirement of an infant. It was found that 20 % of mothers were not aware of circumstances and believed that giving water, honey, and other solids before 4 months is good for health. 30 % of mother's accepted that they observed the symptoms of diarrhoea due to early weaning. Maximum mothers believe that babies cannot have eggs during the weaning period as it upset their digestion. Half of mothers say that their education helped them in weaning their child. Josphine Kabura Imera in 2013 said that parents education qualification is related to a high risk of children poor nutritional status and Song-Suk Kim during 2005 states that 70 % of mothers agree upon breastfeeding baby up to 24 months along with complementary food. 40 % of mothers believe nutritious food are expensive.

There was variation in starting time of solid food, 60 % started at 6 months, 20 % before 6 months, 10 % after 7 months and 10 % mothers were not sure. In contrast to this Liknaw Bewket Zeleke et.al in their study founded that 6.15 % started weaning between 6-8 months, and the rest 13.4 % started lately after 9 months of age. In the study majority of mothers prefer weaning information suggested by their family and remaining from health advisor. In contrast to this in a study by Mustafa Alam Eldin 52.4 % mothers said it was their personal experience, followed by 17.1 % depending on internet, 16.7% on family and friends, and remaining consulted physician. Maximum number of mothers were aware of hygiene and always wash their hands before feeding. More over 20% of respondents prefer adding 1 spoon of oil/ghee to increase the energy density of infant food while 10 % add sugar, another 10% add dry fruits, and 60 % does not add any extra food.

Table 2: Factors showing practice of mothers

Reason for feeding before 6months	Number of respondents (n=100)	%
General pattern	50	50
Does not have enough milk to feed	30	30
Illness	20	20
Work	00	00
<b>Preference during 6-9 months</b>		
Formulae food only	00	00
Breast milk only	00	00
Breast milk with solid food	90	90
Solid food only	10	10
<b>Frequency of feeding at start of weaning</b>		
Random	20	20
When baby cry	20	20
After every 2-3 hours	50	50
2 time	10	10
<b>Frequency of feeding during 10-12 months of weaning</b>		
Random	60	60
When baby cry	20	20
After every 2-3 hours	10	10
2 time	10	10
<b>Type of food group</b>		
Three food group	10	10
Four food group	10	10
Five food group	30	30
Not aware	50	50
<b>Consistency of weaning food at starting</b>		
Thick	10	10
Thin	60	60
Semi-solid	30	30
Solid	00	00
<b>Consistency of weaning food during 10-12 months</b>		
Thick	30	30
Thin	00	00
Semi-solid	70	70
Solid	00	00
<b>First weaning food</b>		
Rice/pulse water	50	50
Soup	00	00
Khichri	30	30
Not remember	20	20
<b>Preference for cooking weaning diet</b>		
Ready-made food	10	10
Separately homemade food	30	30
Same food made for the family	40	40
Not specific	20	20
<b>Utensil preferred for weaning</b>		
Bottle	00	00
Cup and spoon	100	100
Other	00	00
Not specific	00	00

Table 2 shows the practice level of mothers during the weaning period. Half of the respondents started weaning before 6 months due to lack of breastmilk and illness. Majority chosen breast milk with solid food for feeding. Half of the mother's feed the baby after every 2-3 hours at start of weaning, but during 10-12 months more than of mothers feed randomly. 30 % of mothers prefer five food group. At the starting of weaning most of the mothers feed thin food, but during 10-12 months mostly chosen semi-solid consistency of solid food. Rice/pulse water was the first weaning food chosen by 50 % mothers.

There were 30 % of mothers following the schedule of feeding suggested by the doctor, and 60 % of mothers sterilize the bottle every time before feeding liquid food.

**Table 3: Correlation between criterion variables and predictor variables**

Factors (criterion variable)	Educational qualification	Socio-economic condition
Know the term weaning diet or complementary food	-.67	-.342
Time chosen for feeding solid food	-.373	-.420
Source of information about weaning	-.207	0.40
Aware of the nutritional requirement (energy, protein, vitamin etc)	-.677	-.604
Believe about feeding water, honey and other solid food before 4 months enhance health	-.310	.241
Giving weaning food before 6 months shows diarrhoea symptoms	-.135	-.079
Babies cannot have egg at all during weaning period	-.310	-.241
Wash hands with soap before feeding/cooking	-.406	-.447
Education helped you in choosing weaning pattern	-.372	-.120
Continued breastfeeding along with complementary food up to 24 months	-.135	.079
Believe nutritious food are expensive	-.152	.393
To increase the energy density of infant food	-.152	-.089

Table 3 shows the correlation between several factors of knowledge concerning weaning against predictor variables (educational qualification and socio-economic condition). In most factors, the correlation value lies towards the -1. As the correlation value is negative, the increase of one value will decrease the other one and depicts the weak strength of their relation.

The following factors such as source of information, believe about feeding water honey before 6 months, noticing diarrhoea symptoms, breastfeeding up to 24 months, and nutritious food are expensive are only showing the positive correlation between weaning knowledge and socio-economic condition. Whereas the educational qualification of the mother did not have a positive correlation when checking individual independent variables against dependent variables.

**Table 4: Effect of predictor variable on criterion variables of knowledge**

Criterion variable	R	R square	F	P value
Know the term weaning diet or complementary food	.774	.599	72.395	.000
Time chosen for feeding solid food	.423	.179	10.580	.000
Source of information about weaning	.422	.178	10.508	.000
Aware of the nutritional requirement (energy, protein, vitamin etc)	.682	.465	42.171	.000
Believe about feeding water, honey and other solid food before 4 months enhance health	.311	.097	5.195	.007
Giving weaning food before 6 months shows diarrhoea symptoms	.147	.022	1.067	.348
Babies cannot have egg at all during weaning period	.311	.097	5.195	.007
Wash hands with soap before feeding/cooking	.452	.204	12.443	.000
Education helped you in choosing weaning pattern	.494	.244	15.639	.000
Continued breastfeeding along with complementary food up to 24 months	.359	.129	7.193	.001
Believe nutritious food are expensive	.508	.258	16.863	.000
To increase the energy density of infant food	.165	.027	1.361	.261

Table no. 4 shows the result of multiple linear regression against weaning knowledge based on the mother's educational qualification and socio-economic condition. 12 factors as criterion variables (dependent variables) tested against 2 predictor variables (independent variables). The  $R^2$  shows the coefficient of determination and the percentage of variation in the dependent variable. 59.9% of the variation in found the first factor. Similarly, in the second 17.9%, 17.8% in third, 46.5% in fourth and so on. The overall regression model is significantly useful in explaining weaning knowledge as in 8 factors out of 12,  $p < 0.05$  given along with their F values in the table. Factor number 5, 6, 7, 12 having  $p > 0.05$ .

Table 5: Changes in criterion variables of knowledge due to predictor variables

S.no	Factors (criterion variables)	Model	B	t	Sig.
1	Know the term weaning diet or complementary food	(Constant) socio-economic condition educational qualification	2.048 -.692 .363	27.835 -10.798 5.838	.000 .000 .000
2	Time chosen for feeding solid food	(Constant) socio-economic condition educational qualification	2.897 -.089 -.349	15.186 -.536 -2.166	.000 .593 .033
3	Source of information about weaning	(Constant) socio-economic condition educational qualification	3.068 -.274 .233	44.507 -4.564 3.997	.000 .000 .000
4	Aware of the nutritional requirement (energy, protein, vitamin etc)	(Constant) socio-economic condition educational qualification	2.329 -.315 -.082	27.411 -4.259 -1.145	.000 .000 .255
5	Believe about feeding water, honey and other solid food before 4 months enhance health	(Constant) socio-economic condition educational qualification	1.582 .171 -.021	16.419 2.041 -2.252	.000 .044 .801
6	Giving weaning food before 6 months shows diarrhoea symptoms	(Constant) socio-economic condition educational qualification	1.781 -.123 .055	15.498 -1.232 .564	.000 .221 .574
7	Babies cannot have egg at all during weaning period	(Constant) socio-economic condition educational qualification	1.418 -.171 .021	14.713 -2.041 .252	.000 .044 .801
8	Wash hands with soap before feeding/cooking	(Constant) socio-economic condition educational qualification	1.767 -.068 -.192	17.053 -.759 -2.190	.000 .450 .031
9	Education helped you in choosing weaning pattern	(Constant) socio-economic condition educational qualification	1.630 -.521 .342	14.791 -5.424 3.677	.000 .000 .000
10	Continued breastfeeding along with complementary food up to 24 months	(Constant) socio-economic condition educational qualification	1.212 -.349 .322	11.184 -3.701 3.514	.000 .000 .001
11	Believe nutritious food are expensive	(Constant) socio-economic condition educational qualification	1.164 .342 -.041	10.885 3.677 -4.555	.000 .000 .650
12	To increase the energy density of infant food	(Constant) socio-economic condition educational qualification	3.342 -.370 .164	10.953 -1.392 .637	.000 .167 .525

Note: B- Unstandardized Coefficients

Table 5 shows that in only 6 factors, i.e., in 1,3,4,9,10,11 socio-economic condition is a significant predictor. Whereas in factors 1, 3,9, 10, only educational qualification is a significant variable. The unstandardized coefficient (B) represents the amount of change that predictor variable will bring to the criterion variable. As Socio-economic condition has significant effect on factor 1<sup>st</sup>,  $t = -10.798$ ,  $p < 0.05$ . with one unit increase in socio-economic condition, the factor 1<sup>st</sup> decreases by -.692. While educational qualification also has a significant effect on factor 1<sup>st</sup>,  $t = 5.838$ ,  $p < 0.05$ . with one unit increase in education qualification, the factor 1<sup>st</sup> increases by .363. On the other hand, the socio-economic condition has no significant effect on factor 2<sup>nd</sup>,  $t = -.536$ ,  $p > 0.05$ . With one unit increase in socio-economic condition, the factor 2<sup>nd</sup> decreases by -0.89. Similarly, the amount of change is depicted for every variable. Out of 12 criterion variables, if we check against the socio-economic condition, in those dependent variables (1,3,4,9,10,11), it acts as significant predictor variable and in only 11<sup>th</sup> point it shows positive effect. Otherwise, in the remaining factors it decreases with increasing socio-economic variable. Over all in out of 12, only 2 shows the positive relation, on increasing socio-economic condition dependent variable (mother's weaning knowledge) also increases. In comparison to this, if checking educational qualification against criterion variables (1, 3,9 10), shows the significant effect and in all the factors with one unit increase in educational qualification, mother's weaning knowledge also increases. For this out of 12, 7 shows positive relation.



**Table 6: Relationship between criterion variables and predictor variables**

Factors (criterion variable)	Educational qualification	Socio-economic condition
Reason for feeding before 6months	.079	-.200
Prefer schedule of feeding suggested by a doctor	-.677	-.342
Preference during 6-9 months	.207	.441
Frequency of feeding at start of weaning	.067	-.065
Frequency of feeding during 10-12 months of weaning	.185	-.036
Type of food group	-.633	-.590
Consistency of weaning food at starting	-.207	.040
Consistency of weaning food during 10-12 months	-.135	-.079
First weaning food	-.596	-.848
Preference for cooking weaning diet	-.345	-.308
Utensil preferred for weaning	-	-
Sterilize the bottle every time before feeding liquid food	-.506	-.393

Table 6 shows the correlation test, and the result shows that the reason of feeding at 6 months or before it is positively correlated; if education is increased, the mother will know more about the weaning diet. Similarly, the preference of food during 6-9 months, frequency of feeding at starting frequency of feeding during 10-12 months are all positively correlated to educational qualification. Some practice factors of weaning are also positively related to the socio-economic condition, such as preference for food during 6-9 months, consistency of weaning at starting. Whereas the type of utensil used for weaning does not predict the result as all said they are using cup and spoon.

**Table 7: Effect of predictor variable on criterion variables of practice**

Criterion variable	R	R square	F	P value
Reason for feeding before 6months	.472	.223	13.919	.000
Prefer schedule of feeding suggested by a doctor	.774	.559	72.395	.000
Preference during 6-9 months	.519	.269	17.884	.000
Frequency of feeding at start of weaning	.222	.049	2.507	.087
Frequency of feeding during 10-12 months of weaning	.378	.143	8.081	.001
Type of food group	.645	.416	34.501	.000
Consistency of weaning food at starting	.422	.178	10.508	.000
Consistency of weaning food during 10-12 months	.147	.022	1.067	.348
First weaning food	.866	.751	145.97	.000
Preference for cooking weaning diet	.347	.121	6.650	.002
Utensil preferred for weaning	-	-	-	-
Sterilize the bottle every time before feeding liquid food	.508	.258	16.863	.000

Table 7 shows that 12 factors criterion variables (dependent variables) of practice when tested, 22.3% of the variation in the first dependent variable—similarly, the second 55.9%, 26.9% in third and so on. The highest  $R^2$  value is in the 9<sup>th</sup> factor. The overall model is significantly useful in explaining weaning practice as in 9 factors out of 12,  $p < 0.05$  given along with their F values in the table. Factor numbers 4,8 have  $p > 0.05$ , and factor 11 does not give the values as all samples prefer the same utensil for feeding.

Table 8: Changes in criterion variables of practice due to predictor variables

S.no	Factors (criterion variables)	Model	B	t	Sig.
1	Reason for feeding before 6months	(Constant)	2.068	11.853	.000
		socio-economic condition	-.767	-5.201	.000
		educational qualification	.726	4.778	.000
2	Prefer schedule of feeding suggested by doctor	(Constant)	2.048	27.835	.000
		socio-economic condition	.3630	5.838	.000
		educational qualification	-.692	-10.798	.000
3	Preference during 6-9 months	(Constant)	2.795	42.992	.000
		socio-economic condition	.301	5.486	.000
		educational qualification	-.178	-3.146	.002
4	Frequency of feeding at start of weaning	(Constant)	2.644	11.601	.000
		socio-economic condition	-.411	-2.134	.035
		educational qualification	.425	2.140	.035
5	Frequency of feeding during 10-12 months of weaning	(Constant)	1.795	7.608	.000
		socio-economic condition	-.699	-3.505	.001
		educational qualification	.822	4.002	.000
6	Type of food group	(Constant)	4.514	23.774	.000
		socio-economic condition	-.253	-1.579	.118
		educational qualification	-.555	-3.356	.001
7	Consistency of weaning food at starting	(Constant)	2.137	15.498	.000
		socio-economic condition	.466	3.997	.000
		educational qualification	-.548	-4.564	.000
8	Consistency of weaning food during 10-12 months	(Constant)	2.562	11.147	.000
		socio-economic condition	.110	.564	.574
		educational qualification	-.247	-1.232	.221
9	First weaning food	(Constant)	4.630	29.284	.000
		socio-economic condition	-1.658	-12.404	.000
		educational qualification	.479	3.482	.001
10	Preference for cooking weaning diet	(Constant)	3.329	15.559	.000
		socio-economic condition	-.082	-.455	.650
		educational qualification	-.315	-1.691	.094
11	Utensil preferred for weaning	(Constant)	.000	.000	.000
		socio-economic condition	.000	.000	.000
		educational qualification	.000	.000	.000
12	Sterilize the bottle every time before feeding liquid food	(Constant)	1.836	17.160	.000
		socio-economic condition	.041	.455	.650
		educational qualification	-.342	-3.677	.000

Table 8 shows that in 6 factors i.e., 1,2,3,5,7,9 socio-economic condition is a significant predictor. Whereas in 8 factors i.e., 1,2,3,5,6,7,9,11 educational qualification is a significant variable. Socio-economic condition has significant effect on factor 1<sup>st</sup>,  $t = -5.201$ ,  $p < 0.05$ . with one unit increase in socio-economic condition, the factor 1<sup>st</sup> decreases by  $-.767$ . While educational qualification also has a significant effect on factor 1<sup>st</sup>,  $t = 4.778$ ,  $p < 0.05$ . with one unit increase in education qualification, the factor 1<sup>st</sup> increases by  $.726$ . On the other hand, socio- economic condition has no significant effect on factor 4<sup>th</sup>,  $t = -2.134$ ,  $p > 0.05$ , with one unit increase in socio-economic condition, the factor 2<sup>nd</sup> decreases by  $-.411$ .

In out of 12 criterion variables, if we check against the socio-economic condition, in those dependent variables (1,2,3,5,7,9) it act as significant predictor variable and in factor number 2,3,7 it shows positive effect. Otherwise, in the other 3 it decreases with increasing socio-economic variables. Overall, out of 12, only 5 shows the positive relation, on increasing socio-economic condition dependent variable (mother's weaning practice) also increases. While on checking educational qualification against criterion variables (1,2, 3, 5,6,7,9 11), whose p-value is less than 0.005. In factors 1, 5, 9, with one unit increase in educational qualification, mother's weaning practice also increases and in factors 2,3,6,7,11 it decreases with increase in one unit. In this case, out of 12, only 4 shows positive relation.

## Conclusion

The present study focused on mothers' knowledge and practice concerning weaning diet and the relationship of educational qualification and socio-economic condition of mothers on their knowledge and practice of weaning diet. From the above result and discussion, it can be concluded that the knowledge and practice were good, but mothers should be well informed about weaning. It was found that the elders of the family guided most mothers, so it is necessary to educate mothers of the present generation so that they guide their daughters and daughters-in-law in the correct way and can help in reducing the malnutrition rate in the developing countries.

In this study, the mother's knowledge and practice were 66.6%. It was found that only 50% of mothers believe that education is helping them in feeding and upbringing their child.

Socio-economic condition and educational qualification of the mother did not affect the weaning knowledge and practice. Weaning knowledge was good in highly educated mothers but the practice was not. They possess the theoretical knowledge but did not practice it. On the other hand, the socio-economic condition did not have a significant effect on the weaning knowledge and practice.

## Suggestion:

This study can further be studied with children up to 2 years of age.

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