

Infant Weaning Knowledge and Practice among Mothers Attending Maternal and Child Healthcare Center in Tor-Sinai City

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ABSTRACT

Background: Weaning has been one of the most wrongly practiced processes in the developmental stages of the children. **Objective:** The aim of the work was improving knowledge and practice of mothers regarding weaning diet.

Subjects and methods: Across sectional study was performed on 323 mothers attended maternal and childcare center in Tour Sinai City. Structured questionnaire was used included sociodemographic data, knowledge and practice regarding infant weaning. **Results:** revealed that the mothers belonging to the age group 20-35 (84.8%), secondary education (39.6%), with current occupation (60.1%), and with enough income (79.9%) were classified as medium social class. Level of mothers' knowledge and practice was moderate (50-70%) and there was highly statistical significance association ($P<0.001^{**}$) between social class and level of mothers' knowledge and practice. Social class was the only significant factor affecting knowledge and practice where moderate knowledge was noticed in medium social class, moderate practice was associated with high social class. There was statistically significant positive correlation between total score of knowledge and total score of practice. **Conclusion:** Knowledge and practice among the participants were of moderate level and social class was the only factor affecting it.

Keywords: Weaning, Knowledge, Practice, Assessment.

INTRODUCTION

Weaning is a process by which foods other than breast milk is introduced gradually into baby's diet after the first six months of life to initially complement the breast milk and then to wean totally off breast milk ⁽¹⁾.

Correct infant weaning confers both short-term and long-term benefits to a child such as reduction in rate of infections and mortality among infants, improvement in mental and motor development ⁽²⁾.

Adequate nutrition during infancy and early childhood is essential for growth, health and development of children to their full potential ⁽³⁾.

Infants should be exclusively breastfed for the first six months followed by breastfeeding along with complementary foods for up to two years of age or beyond⁽⁴⁾. The first two years of life are critical stages for a child's growth and development. Any damage caused by nutritional deficiencies during this period could lead to impaired cognitive development, compromised educational achievement and low economic productivity ⁽²⁾.

The aim of the current study was improving the knowledge and practices level among mothers attending maternal and child health care center in tour Sinai city through assessment of both knowledge and practice.

SUBJECTS AND METHODS

This cross-sectional study included a total of 323 mothers, attending at Maternal and Child Health Care Center in Tour Sinai city. Written informed consent from all the participants were obtained. This study was conducted between March 2019 to September 2019.

Administrative and Ethical consideration: The study protocol was approved by the Ethical Committee at Faculty of Medicine, Zagazig University and

Institutional Review Board (IRB). An Official permission was obtained from the Family Medicine department at Faculty of Medicine, Zagazig University. The necessary official permissions to carry out the study were obtained from the manager of the health center the objective of this study was explained to them to ensure their cooperation.

- **Sample size:** Assuming that total number of female attending maternal and childhood center is 5000 female per year and prevalence of women had low practice concerning infant weaning was 66% ⁽¹⁾, so sample size will be 323 using open Epi, CI 95% .
- **Sampling technique:** systematic Random sample was taken "one every three" from average attendance 25 case per day, eight mothers were interviewed by face-to-face discussion to fill the questionnaire.
- **Inclusion criteria:** Mothers of the infant aged from 6-24 months.
- **Exclusion criteria:** Mothers of twins and of infants with syndromic diseases were excluded.
- **Sample size:** Assuming that total number of female attending maternal and childhood center is 5000 female per year and prevalence of women had low practice concerning infant weaning was 66% ⁽¹⁾, so sample size will be 323 using open Epi, CI 95% .
- **Sampling technique:** systematic Random sample was taken "one every three" from average attendance 25 case per day, eight mothers were interviewed by face-to-face discussion to fill the questionnaire.
- **Study tools:** A standardized questionnaire was used for assessment of socio -demographic status using the socioeconomic scale developed and validated by

Fahmy et al. ⁽⁵⁾, It included the following eight domains with total score 48: Education and occupation of mother and father , computer use, per capita income, family size, crowding index, and sewage and refuse disposal. Other demographic data were obtained, including age of the child, order of the child, sex of child and age of mother. Two designed questionnaires were used for assessment of mothers' knowledge and practice regarding weaning. Each one consisted of 10 questions for answering either true or false regarding the last updated weaning recommendations by The Scientific Advisory Committee on Nutrition (SACN), July 2018.

- **Pilot study:** Before starting to collect the final data, a pilot study was conducted on 10 % of the sample size. It showed that the questionnaires were clear and relevant. As there were not any changes conducted on the questionnaires, this sample was included in the study.

Fieldwork:

- **Duration:** Three months (from 1 April 2019 to the end of July 2019).
- **Activities:**
 1. Building initial rapport with all elderly who were included in this study.
 2. Assessment of sociodemographic status for each participant. Time taken to fill this questionnaire was about 5 to 7 minutes.
 3. Assessment of level of knowledge. Time taken to fill this questionnaire was about 10-15 minutes.
 4. Assessment of level of practice. Time taken to fill this questionnaire was about 10-15 minutes.

Data management:

Scoring of social class: Social class was classified according to **Fahmy et al.** ⁽⁵⁾ into low, middle, and high level depending on the score calculated (48): Low (<19.2), Middle (19.2-33.6), High (>33.6).

Scoring of knowledge and practice: Total score of Knowledge and practice was classified according to **Folasade et al.** ⁽¹⁾ into low, medium, and high level as follow(<50%, 50-70%, >70%) respectively.

Data analysis: The collected data were coded, entered, presented, and analyzed by computer using a data base software program, Statistical Package for Social Science (SPSS) version 20 ⁽⁶⁾. Qualitative data were represented as frequencies and percent. Chi square (X²) test was used to detect relation between different qualitative variables for quantitative variables mean and standard deviation (SD) was computed. Pearson correlation (r) was used to find the association between total score of knowledge and total score of practice. The results were considered statistically significant and highly statistically significant when the significant probability (P value) was < 0.05* and <0.001** respectively.

RESULTS

This study is included 323 mothers, 84.8% were from 20-35 years while 15.2% of them were younger than 20

years. Among the studied group, 60.4% of them were secondary school educated while 39.6% of them were university educated. About 60.1% of the sample were worker mothers while 39.9% of them were housewife. About 79.9% of the participant were of enough income and 20.1% of them were of enough and more income. 39.6% of the studied group can use computer while the majority 60.4% never used it (**Table 1**).

Table (1): Socio demographic characteristics of the studied participants (n=323)

Variables		Value	
Infant age (months) Mean± SD		11.72±3.47	
		No	%
Infant sex	Female	113	35
	Male	210	65
Infant order	1st	133	41.20%
	2nd	144	44.60%
	3rd	38	11.80%
	4 th	8	2.50%
Mother age (years)	<20	49	15.2
	20-35	274	84.8
Father's education	Secondary education	128	39.6
	University	195	60.4
Mother's education	Secondary education	195	60.4
	University	128	39.6
Father's occupation	No	96	29.7
	Yes	227	70.3
Mother's occupation	No	129	39.9
	Yes	194	60.1
Computer use	Never	195	60.4
	Sometimes	128	39.6
Family income	Enough	258	79.9
	Enough & more	65	20.1
Family size	5	163	50.5
	< 5	160	49.5
Crowding index	≥2-<4	291	90.1
	<2	32	9.9
Sewage disposal	No	64	19.8
	Yes	259	80.2
Refuse disposal	No	96	29.7
	Yes	227	70.3

Most of the studied mothers had moderate socioeconomic status and high socioeconomic status (80.2%, 19.8%) respectively (**Figure 1**).

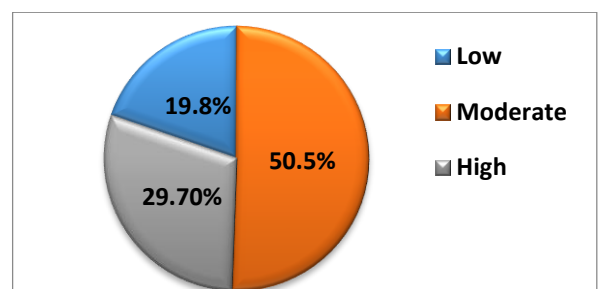


Figure (1): Pie diagram for social class among the studied participants (n=323).

Regarding their knowledge about weaning (60.4%) of mothers got information about infant weaning mostly from relatives and friends (30.7%). (80.2%) of participants had true knowledge about the weaning start time, in contrast to false answers regarding the meal content. True & false answers were almost equal as regards giving cow milk in the 1st month. Most of the participant had the knowledge about the value of proper timing of weaning is enhancing the child health, continue breast feeding after the 1st year, the harm of giving ice cream& snacks and cola at 4-6 months. (Table 2)

Table (2): Mothers’ knowledge regarding infant weaning (n=323).

Variables	No	%
Got information		
No	128	39.6
Yes	195	60.4
Source of information		
Books	32	9.9
Friends & relatives	99	30.7
Women groups	32	9.9
Mass media	32	9.9
Knowledge about weaning start time		
False	64	19.8
True	259	80.2
Meal content at 4-6 moth age		
False	259	80.2
True	64	19.8
Amount of first meal		
False	131	40.6
True	192	59.4
Giving snacks, ice cream, cola at 6 months		
True	131	40.6
False	192	59.4
Giving cow milk at 1st month		
True	163	50.5
False	160	49.5
Early weaning before 3 months enhance child health		
True	32	9.9
False	291	90.1
Continue breast feeding after 1st year		
False	32	9.9
True	291	90.1
Giving meat, poultry at 4-6 months		
True	64	19.8
False	259	80.2

According to knowledge scoring about half of mothers (50.5%) had moderate knowledge level regarding infant weaning followed by high and low levels (29.7%) and (19.8%) respectively (Figure 2).

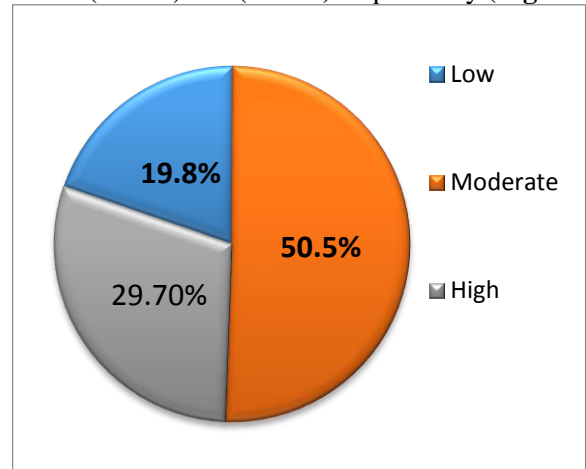


Figure (2): Pie diagram for level of mothers’ knowledge regarding infant weaning (n=323).

According to practice scoring the majority of mothers (70.3%) had moderate practice level regarding infant weaning followed by low and high levels with percent (19.8%) and (9.9%) respectively (Figure 3).

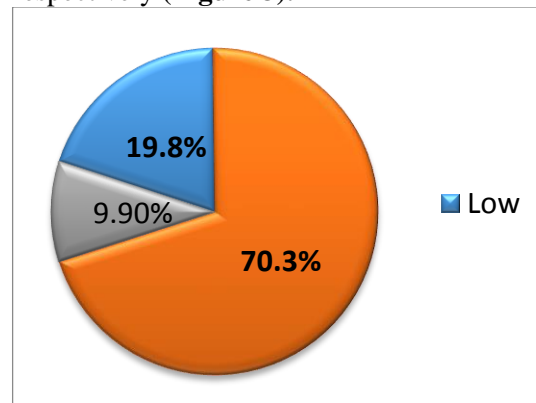


Figure (3): Pie diagram for level of mothers’ practice regarding infant weaning (n=323).

Table (4) shows that there was highly statistical association between moderate knowledge and age group 20-35 (53.3%), university father education (50.8%), secondary mother education (50.8%),mother occupation (50.5%), never computer use (50.8%), enough and more income (50.8%) , family size <5 (60%) and also there was highly significant association between moderate knowledge and medium social class(50.6%)(Table 5) &(Figure 4).

Table (4): Relation between demographic characteristics and level of mothers' knowledge regarding infant weaning (n=323)

Variables	Low (n=64)		Moderate (n=163)		High (n=96)		X ²	P value
	No	%	No	%	No	%		
Mother age (years)								
<20(n=49)	32	65.3	17	34.7	0.0	00	80.35	<0.001**
20-35(n=274)	32	11.7	146	53.3	96	35		
Father's education								
Secondary (n=128)	64	50	64	50	0.0	00	160.5	<0.001**
University(n=195)	0.0	00	99	50.8	96	49.2		
Mother's education								
Secondary (n=195)	64	32.8	99	50.8	32	16.4	71.35	<0.001**
University(n=128)	0.0	00	64	50	64	50		
Father's occupation								
No(n=96)	64	66.7	32	33.3	0.0	00	199.9	<0.001**
Yes(n=227)	0.0	00	131	57.7	96	42.3		
Mother's occupation								
No(n=129)	0.0	00	65	50.4	64	49.6	71.15	<0.001**
Yes(n=194)	64	33	98	50.5	32	16.5		
Computer use								
Never(n=195)	64	32.8	99	50.8	32	16.4	71.35	<0.001**
Sometimes(n=128)	0.0	00	64	50	64	50		
Family income								
Enough (n=258)	64	24.8	130	50.4	64	24.8	26.55	<0.001**
Enough & more(n=65)	0.0	00	33	50.8	32	49.2		
Family size								
5(n=163)	64	39.3	67	41.1	32	19.6	79.81	<0.001**
< 5(n=160)	0.0	00	96	60	64	40		
Crowding index								
≥2-<4(n=291)	64	22	163	56	64	22	83.99	<0.001**
<2(n=32)	0.0	00	0.0	00	32	100		
Sewage disposal								
No(n=64)	64	100	0.0	00	0.0	00	323	<0.001**
Yes(n=259)	0.0	00	163	63	96	37		
Refuse disposal								
No(n=96)	64	66.7	32	33.3	0.0	00	199.8	<0.001**
Yes(n=227)	0.0	00	131	57.7	96	42.3		

*P-value <0.001 is significant, P-value <0.001 is significant, **: Highly significant

Table (5): Relation between social class and level of mothers’ knowledge regarding infant weaning (n=323).

Variables	Low (n=64)		Moderate (n=163)		High (n=96)		X ²	P value
	No	%	No	%	No	%		
Social class								
Medium(n=259)	64	24.7	131	50.6	64	24.7	26.86	<0.001**
High (n=64)	0.0	00	32	50	32	50		

*P-value <0.001 is significant

N.B.

– P-value <0.001 is significant

– **: Highly significant

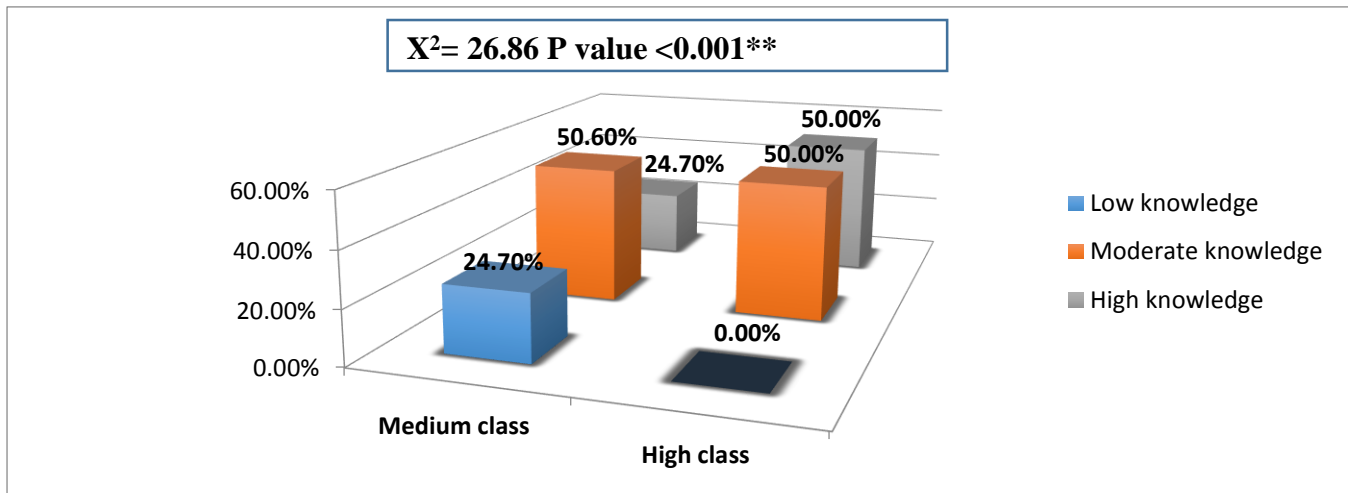


Figure (4): Bar chart for relation between social class and level of mothers’ knowledge regarding infant weaning (n=323).

Mothers of age group 20-35 years were 14.2 times more likely to have adequate knowledge (OR =14.2 , P<0.001).

University educated fathers their wives are 19.9 times more likely to have adequate knowledge (OR=19.9, P<0.001),

Secondary educated mothers are 6.1 times more likely to have adequate knowledge (OR=6.1 P<0.001), worker fathers ,their wives are 11.8 times more likely to have adequate knowledge (OR=11.8, P<0.001), worker mothers are 6.5 times more likely to have adequate knowledge (OR=6.5, P<0.001) , Mothers who never use computer are 6.5 times more likely to have adequate knowledge (OR=6.5, P<0.001) and families with enough and more income their mothers are 21.1 times more likely to have adequate knowledge (OR=21.1, P<0.001) (Table 6).

Table (6): Relation between demographic characteristics and level of mothers' practice regarding infant weaning (n=323).

Variables	Low (n=64)		Moderate(n=227)		High (n=32)		X ²	P value
	No	%	No	%	No	%		
Mother age (years)								
<20(n=49)	32	65.3	17	34.7	0.0	00	76.46	<0.001**
20-35(n=274)	32	11.7	210	76.6	32	11.7		
Father's education								
Secondary (n=128)	64	50	64	50	0.0	00	130,9	<0.001**
University(n=195)	0.0	00	163	83,6	32	16.4		
Mother's education								
Secondary (n=195)	64	32.8	131	67.2	0.0	00	91,43	<0.001**
University(n=128)	0.0	00	96	75	32	25		
Father's occupation								
No(n=96)	64	66.7	32	33.3	0.0	00	191,4	<0.001**
Yes(n=227)	0.0	00	195	85.9	32	14.1		
Mother's occupation								
No(n=129)	0.0	00	97	75.2	32	24.8	91.42	<0.001**
Yes(n=194)	64	33	130	67	0.0	00		
Computer use								
Never(n=195)	64	32.8	99	50.8	32	16.4	89.67	<0.001**
Sometimes(n=128)	0.0	00	128	100	0.0	00		
Family income								
Enough (n=258)	64	24.8	162	62.8	32	12.4	34.42	<0.001**
Enough & more(n=65)	0.0	00	65	100	0.0	00		
Family size								
5(n=163)	64	39.3	99	60.7	0.0	00	99.69	<0.001**
< 5(n=160)	0.0	00	128	80	32	20		
Crowding index								
≥2-<4(n=291)	64	22	195	67	32	11	15.02	<0.001**
<2(n=32)	0.0	00	32	100	0.0	00		
Sewage disposal								
No(n=64)	64	100	0.0	00	0.0	00	323	<0.001**
Yes(n=259)	0.0	00	227	87.6	32	12.4		
Refuse disposal								
No(n=96)	64	66.7	32	33.3	0.0	00	191.4	<0.001**
Yes(n=227)	0.0	00	195	85.9	32	14.1		

*P-value <0.001 is significant.

P-value <0.001 is significant, **: Highly significant

Table (7) shows that there was highly statistical significance association between moderate practice and age group 20-35 years (76.6%),university father education (83.6%), university mother education (75%), father occupation (85.9%), not working mothers (75.2%), sometimes computer use(100%), enough and more income (100%),family size<5(80%) and also there was highly significant association between moderate practice and high social class(100%). (Table 8) & (Figure 5) .

Table (7): Relation between social class and level of mothers' practice regarding infant weaning (n=323).

Variables	Low (n=64)		Moderate (n=227)		High (n=32)		X ²	P value
	No	%	No	%	No	%		
Social class								
Medium(n=259)	64	24.7	163	63	32	24.7	33.75	<0.001**
High (n=64)	0.0	00	64	100	0.0	00		

P-value <0.001 is significant.

P-value <0.001 is significant, **: Highly significant

Table (8): Correlation between total score of mothers’ knowledge and total score of mothers’ practice regarding infant weaning (n=323).

	Mothers’ practice	
	r	P value
Mothers’ knowledge	+0.829	<0.001**

P-value <0.001 is significant

R + is positive correlation

N.B.

– *P-value <0.001 is significant, **: Highly significant*

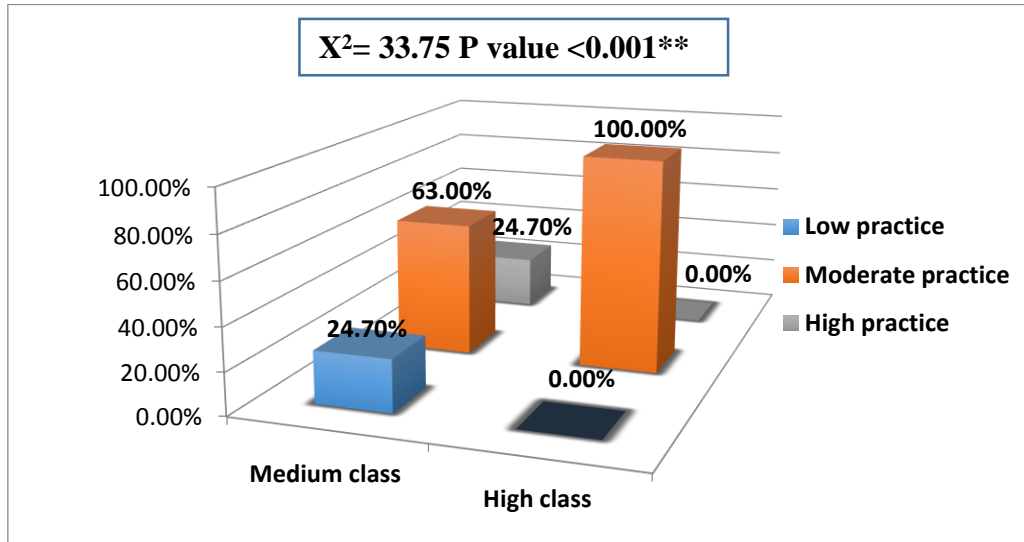


Figure (5): Bar chart for relation between social class and level of mothers’ practice regarding infant weaning (n=323).

Mothers of age group 20-35 are 14.2 times more likely to have adequate practice (OR=14.2,P<0.001).University educated fathers their wives are 10.7 times more likely to have adequate practice (OR=10.7 ,P<0.001).University educated mothers are 6.1 times more likely to have adequate practice (OR=6.1,P<0.001).Worker fathers their wives are 6.9 times more likely to have adequate practice (OR=6.9 ,P<0.001). Mothers sometimes use computer are 6.5 times more likely to have adequate knowledge (OR=6.5, P<0.001). Families with enough and more income their mothers are 21.1 times more likely to have adequate practice (OR=21.1, P<0.001).(Table 9).

Table (9): Logistic regression of demographic determinants for level of mothers’ knowledge regarding infant weaning (n=323).

Demographic	Odds ratio (OR)	95% Confidence interval (CI)	P value
Mother age (years) 20-35	14.2	(7.1→28.5)	<0.001**
Father's education-University	19.9	(9.1→32.8)	<0.001**
Mother's education-Secondary	6.1	(4.4→12.7)	<0.001**
Father's occupation Yes	11.8	(5.2→15.8)	<0.001**
Mother's occupation Yes	6.5	(4.5→13.5)	<0.001**
Computer use Never	6.5	(4.5→13.5)	<0.001**
Family income-Enough & more	21.1	(12.9→45.2)	<0.001**
Family size < 5	10.8	(4.9→14.7)	<0.001**
Crowding index ≥2-<4	8.8	(3.5→13.9)	<0.009*
Social class- Medium	20.7	(10.8→40.1)	<0.001**

DISCUSSION

Assessment of level of knowledge and practice of mothers regarding infant weaning is very important for improvement the weaning practices.

This study was conducted on 323 mothers, 274 of them aged 20-35 years old (84.8%), while 49 were below 20 years old (15.2%). The mean age of children in the present study was 11.72 \pm 3.47 months and most of them were of 2nd order.

Regarding mother education, the study showed that most of them were secondary schools educated (60.4%), (60.1%) of them were worker mothers and (50.8%) of them never use computer, (79.9%) of mothers had enough income.

The most of present sample were of medium social class followed by low social class and high social class (80.2% & 19.8%) respectively according to **Fahmy et al.** ⁽⁵⁾. The study in hand revealed that about (60.4%) of mothers got information about weaning ,mostly from friends and relatives (30.7%) (**Table 2**). That may reflect the power of peer effect in health practice in addition to lack of organized educational programs about healthy weaning Most of mothers had true knowledge about the proper time of starting weaning, the amount of 1st meal ,early weaning & giving snacks and poultry (**Table 2**), thus may be explained by most of them were educated & working mothers . As regard the total knowledge, about half of mothers (50.5%) had moderate knowledge level followed by high then low knowledge regarding infant weaning (**Figure 2**). These results were close to **Folasade et al.** ⁽¹⁾ who found that among 100 mother attending infant welfare clinic, majority of them (50.5%) had moderate knowledge level. And also was In accordance with **Guled et al.** ⁽⁷⁾ who found that (85%) of mothers/caregivers knew the correct time for exclusive breast feeding that is for the first 6 month of life also the majority (96%) of the participant knew the duration of breast feeding (to 24 moth).

There was high statistical significance association with all demographic characters and level of knowledge ($p < 0.001$) where moderate knowledge level was higher with age group (20-35), university educated father, enough family income and small family size (table 4) this can be explained by most of younger age groups are interested in social media & internet where they can had knowledge from and the most of mothers fellow their husbands advice so their educational level had clear impact on mothers educational level .These results was in agreement with **Dhanasekaran** ⁽⁸⁾ who found that there was significant association between knowledge score and educational level ($p = 0.015$).

The higher family income, father education, social class and aged group (20-35) were the most important predictors of knowledge and practice level. This was in agreement with **Tatone-Tokuda et al.** ⁽⁹⁾ who reported that the early introduction of complementary foods was

more likely when mothers were younger, less educated, of lower socioeconomic class, and when they felt they had little influence on their child's development. Higher parental confidence in caring for the infant was also associated with the early introduction of complementary foods ($p \leq .05$).

This study revealed that (80.2%) of mothers were exclusively breast fed their infant for 6 month and had true practice regarding infant first meal ,(50.5%) of mothers started CF at that age to allow infant know other nutrient element unlike breast milk. And (70.3%) of mothers did not stop breast-feeding after initiation of CF, and most of them fellow their husbands advices. The majority had false practice regarding number and content of each meal given to the child the day before the interview (**Table 3**). These findings can be explained by other determinants affecting practice e.g cultural believes, food availability and infant needs.

These finding was in close to **Bewket Zeleke et al.** ⁽¹⁰⁾ who reported that (61.5%) of their sample started in the recommended age (not before 6 month). Also results were in agreement with **Memon et al.** ⁽¹¹⁾ who reported that majority of their participants had moderate practice level.

There was highly statistical significance association between social class and level of mother's practice where high social class was more associated with moderate practice level (100% & $p < 0.001$) (**table 7 & figure 5**). moderate level of practice was higher among age group (20-35), university educated mothers , non-worker mothers and enough and more income, and this is because of it is easy for mothers of this age to understand and properly implement their child's weaning recommendations and Working mothers may introduce some foods for the child during their working periods.

These finding was in agreement with **Kotb et al.** ⁽¹²⁾ and **Folasade et al.** ⁽¹⁾ who reported a statistically significant relationship between occupation and weaning practices among mothers ($P = 0.000$) ; finding showed statistically significant relationship between educational level and weaning practices among mothers ($P = 0.000$).

there was statistically significant positive correlation between total score of mothers' knowledge and total score of mothers' practice regarding infant weaning ($r = +0.829$ $p < 0.001^{**}$) (**table 8, figure 6**). These finding was in agreement with **Folasade et al.** ⁽¹⁾ who reported that 9 shows that there is significant relationship between participants knowledge level and infant weaning practice ($p = 0.001$). That was explained by that the knowledge increase awareness & can change attitude that subsequently direct the practice towards the healthy way.

LIMITATIONS

This study was limited by involving only one city in

south Sinai and one health care unit, excluding mothers from other units and other cities in the government. Other limitations include the difficulty for some mothers to recall information to answer some questions.

CONCLUSION

It could be concluded that about half of the mothers had moderate knowledge and more than half had moderate practice level. The most prominent demographic determinant for level of mothers' knowledge and practice was family income where mothers with enough and more income were 21 time have adequate knowledge and practice. Increasing awareness may help in improvement knowledge and practice regarding weaning.

RECOMMENDATION

It is recommended to apply repeated programs for educating the mothers about prober infant feeding under supervision of family doctor in health care unit.

Conflict of interest:

The authors report no conflicts of interest. The authors alone are responsible for the content and writing of the paper.

Financial disclosure:

None declared

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