

KNOWLEDGE, ATTITUDE AND PRACTICE OF MOTHER'S REGARDING WEANING IN RULAR COMMUNITY LAHORE.

Amina Sharif, Student of Post RN/BSN

Lahore School of Nursing,

The University of Lahore

Lahore, Pakistan

amna.umer@outlook.com

Mohammad Afzal

Dept. Lahore school of nursing

Name of organization. The University of Lahore

Lahore. Pakistan

Afzalaku@outlook.com

Lahore, Pakistan

Mohammad Hussain

Dept. Lahore School of nursing

Name of organization. The University of Lahore

Lahore. Pakistan

hussainsial@gmail.com

Iram Majeed, Lecturer

Lahore School of Nursing

The University of Lahore

Lahore, Pakistan

Iram.majeed@lsn.uol.edu.pk

Prof. Dr. Syed Amir Gilani

Dept. Allied Health Sciences

Name of organization, The University of Lahore

Lahore, Pakistan

@outlook

ABSTRACT

INTRODUCTION: The birth of a child is of great importance in a family. The child health depends upon the fulfillment of his nutritional needs that includes breast feeding and weaning. Weaning is the beginning of semisolid food in infant's diet who is consuming milk to meet his nutritional needs. . Breast milk is a good source of nutrition for the first six months of child's life, but then again weaning is also essential as the child is in the growing stage. Understanding the social beliefs, mothers need to be educated about the knowledge, attitude and practice of complementary feeding to prevent the hazards that are caused by lack of weaning education.

METHODS: Descriptive analytical design was used in this study. The study was conducted in the area of Hussain Abad Lahore. All mothers in the reproductive age group 18-49 year were the source population. Data was collected through the administration of self-administered close ended questionnaire. Regression analysis through SPSS was applied to find out the association between variables.

RESULTS: The Majority (85.7%) of the mother's of the community were educated and only 14.3% of mothers had no formal education. 81.9% of the husbands were educated whereas 18% had no formal education. The main source of this knowledge was friends and family with 27.8% and Health worker / Hospitals with 21.8% whereas, 16.5% of the mother's had knowledge of weaning from TV and media and only 7 mothers had the knowledge of weaning

CONCLUSIONS: Majority of the mothers had knowledge about weaning and were practicing correct weaning practices. Majority of the mothers started weaning at the recommended age of 4 to 6 months and the commonly used weaning diet was rice , rusk / biscuits or mashed fruits / veg. most of the mothers of Hussain Abad show a positive attitude towards prolong breastfeeding and hygiene.

KEYWORDS: Weaning knowledge.attitude and practices, community, Lahore,infants.

I. INTRODUCTION :

The health of the child depends upon the fulfillment of his nutritional necessities that includes breast feeding and weaning. Weaning is the introduction of semisolid diet for an infant who is consuming milk to meet his nutritional needs (Chapagain, 2013). The word weaning is originated from the Anglo-Saxon word "wenian" meaning "to become adapted to something different". It is a complex process that combines nutritional, biochemical and the mental adjustments. Weaning starts when an infant is gradually given semisolid foods. The very first introduction of foods other than breastmilk is the complementary feed that the infant needs to compensate for his nutritional needs (Kimani-Murage et al., 2011). WHO and UNICEF have recommend that an infant should be given adequate weaning for the first 2 years of life as an appropriate and safe means of protecting children from infection and become a source of providing them the essential nutrients that are needed for their growing bodies (Imdad, Yakoob, & Bhutta, 2011). Mother's knowledge about the nutritional requirements of the child places an important part in the way food is given to the child. Research shows that mothers education regarding the ideal child feeding practices which include absolute breastfeeding for six months and the proper transition to s (Michelle, eHealth Unit, & Robert, 2013). In Ethiopia, 57% deaths of children under five years of age are closely related due to lack of proper weaning knowledge in mothers (Central Statistical Authority Ethiopia and ORC Macro, 2012). Feeding practice has a lot of implication for the nutritional status of the child. Understanding the social beliefs, knowledge, attitude and practices about complementary feeding among mothers is an important step prior to designing an intervention strategy to prevent the hazards that are caused by lack of weaning education (Sethi, Padhy, & Raju, 2017). In Pakistan study was conducted regarding the practice and perception of mother in case of weaning, the research showed that perceptions and practices of weaning in mothers are both poor and insufficient in regards to time of start of weaning, age-proper amount, quality and recurrence of weaning. Measures must to be taken to enhance their discernments and practices on the grounds that inappropriate weaning decides healthful status of kid in future years of advancement (Salim, 2016)

The times are changing and the need for the upcoming society's attitudes is important as to establish to what extent the practices have changed and what new kind of knowledge is important for the mothers to have and how to cope up with the advance threat of diseases that their infant can be exposed to if they neglect the diet patterns of their child.

AIMS OF THE STUDY: The aim of this the study was to assess the knowledge, practice and attitude of mothers regarding weaning diet and decrease the morbidity mortality rate that is caused due to malnutrition in infants.

RESEARCH QUESTIONS:

Research Question 1- knowledge of community mothers regarding weaning diet.

Research Question 2- practices of community mothers regarding weaning diet.

Research Question 3- Attitude influencing the inappropriateness of weaning diet.

SIGNIFICANCE OF THE STUDY: The growth and development of child is important as it is associated with mental and social development

It is necessary for community mothers. The starting time of weaning is very important for wellbeing infants. The present study is significant in such a way that it formalizes the basis of attitude, practices and knowledge that a mother has against the weaning diet.

The present study would help establish basis for the education of mothers regarding the weaning diet which would eventually help decrease the infant's mortality and morbidity rate in the community.

The research is significant because it contributes in the knowledge development, and practical improvement. The research plays an important role in shaping the institution and for its development, and it is essential to have knowledge-driven growth for better learning.

II. LITERATURE REVIEW

Two third of deaths of infants are related to the inappropriate feeding knowledge and practices of mothers. Interventions that address complementary feeding shows that appropriate complementary feeding can save up to 7% of deaths in children under5. The pattern and style of feeding mothers are influenced by multiple factors including knowledge, attitudes and practices as well as sociocultural and physiological factors (Gartner, 2005). Mother's knowledge is considered to have a great impact on the child feeding practices as she has the capacity to take diet related conscious decisions for the child. (Harnagle & Chawla, 2013).

Scientific knowledge demonstrates that maternal knowledge on complementary feeding may positively influence practice or may lead to no change in feeding practices. Furthermore in Pakistan the feeding practice of infants among 320 mothers show that 91.6% weaned their babies at correct times that means within 6 months of life and 68.1% of them had knowledge of starting weaning food (Karim, 2013).

On the contrary, knowledge may not translate to practice. Infant and young child feeding practices in Nepal showed that, only 35% had knowledge about weaning, 62% mothers had knowledge about appropriate time for introduction of complementary feeding (Chapagain, 2013). Continued, frequent, on-demand weaning until 2 years of age and

beyond makes an important nutritional contribution for a child (Godfrey & Lawrence, 2010).

WHO recommends that weaned children 6-8 months are fed at least 2 times, and those 9-23 months old be fed 3 times per day. In other countries, child feeding frequencies are higher compared to Pakistan. Likewise the frequency of weaning in ruler Uttar Pradesh showed that only 13% of mothers started giving their infants complementary food at the correct age which reflects the gap in the Patrice of mother's knowledge on weaning (Kumudha et al, 2010). WHO recommends introduction of complementary foods at 6 months of age to fulfill the nutritional needs of infants (PAHO/WHO, 2003).

According to current recommendations complementary feeding should be introduced into the child's diet at the age of 6 months (Organization, 2008). Early introduction of complementary foods increases infant morbidity and mortality while late introduction of complementary foods is harmful to the health of the baby, because infant growth stops or slows down and the risk of malnutrition and micronutrient deficiency increases (Organization, 2009).

In developing countries, the negligence of mothers practice regarding the introduction of weaning foods is of public health importance. The age at introduction of weaning foods varies and is influenced by the tradition of the different ethnic populations in the country, urbanization and the socioeconomic status of households. In urban areas, the tendency is early weaning, but in some rural areas weaning is delayed up to one year or more. (Wanyoike, 2012).

In Pakistan it is reflected that the knowledge about the correct age of starting weaning was known by (54%) respondents but it was practiced by only (43%). regarding determinants of infant and young child feeding practices, it was reported that among infants under 6 months of age, 42.5% were exclusively breastfed and among those aged 6 – 9 months, 62.3% received weaning. (Hasnain, Majrooh & Anjum, 2013).

The attitude towards what type of food is to be considered in the weaning diet is lacked by most mothers. The consumption of foods from at least 4 food groups means that the child has a high likelihood of consuming at least one animal-source food and at least one fruit or vegetable that day, in addition to a staple food. (Aruldas, Khan, & Hazra, 2010).

THEORITICAL FRAMEWORK: The theoretical frame work shows that mother's socio demographic factors like her age, occupation, educational level and maternal knowledge like source of information, infant age for first food entry, best way to give weaning diet and choice of food effects the practice of weaning which shows the attitude of mothers toward weaning practice. Conceptual framework on mother's knowledge and practices on weaning diet and

nutritional status of the infants was adapted and modified from: Vida, A. (2008).

III. METHODOLOGY

SETTING: The study was conducted in the area of Hussain Abad Lahore.

RESEARCH DESIGN: Descriptive analytical design was used in this study. It gives an overview of what is knowledge, attitude and practices of community mothers regarding weaning diet of children 6-23 months.

PAPULATION: All mothers in the reproductive age group 18-49 year were the source population.

SAMPLING: The sampling was done using the convenient sampling technique.

RESEARCH INSTRUMENT: The data collection instruments used was questions adopted by (Ababa, 2014) which were interviewed by data collectors, which consisted of different parts like socio-demographic variables, mother's knowledge, attitude and practices towards weaning diet. Likert type approach was used to identify mother's attitude. The data was collected through house to house visit. Mothers were educated about the purpose and procedure of the study and data was collected from only willing participants.

METHODS USED TO ANALYZE DATA: The data analyzed using the evaluation software SPSS version 24 and regression analysis test is used for association.

STUDY TIMELINE: The study was conducted from September 2017 to January 2018.

ETHICAL CONSIDERATION: Before the fieldwork ethical clearance was obtained from community mothers. Response of mothers was anonymous and data collectors informed to the mothers that they had full right to discontinue or refuse to participation in the study. A letter of agreement was also attached with the questioner to obtain the permission of each mother. Beside this the data collectors was trained on their responsibilities for describing the purpose of the study, giving orientation, telling importance of honest and sincere reply, on responding to the questions.

IV. RESULTS

The results section contains the outcomes of this study.

PROFILE OF RESPONDENTS: A total of 133 mothers were interviewed and the response rate was 100%. The age

of mothers ranges from 20 to 40 years. Whereas 45.9s% mothers between the range of 30 to 34 years. The results indicated that 29.3% of children's age lie between 14 to 18 months whereas 27.1% of children are approx of 2 years of age. The Majority (85.7%) of the mother's of the community were educated and only 14.3% of mothers had no formal education. 81.9% of the husbands were educated whereas 18% had no formal education were females aging between 18 to 45 years of age residing in rural area of "Hussain Abad.

Table 1. Demographic Data:

| | | Frequency | Percent |
|---------------------|---------------------|-----------|---------|
| Mother's Age | 20-24 | 21 | 15.8 |
| | 25-29 | 30 | 22.6 |
| | 30-34 | 61 | 45.9 |
| | 35-40 | 21 | 15.8 |
| No. of Children | 1-2 | 64 | 48.1 |
| | 3-4 | 49 | 36.8 |
| | 5-6 | 19 | 14.3 |
| | 7-8 | 1 | .8 |
| Mother's Education | Primary | 29 | 21.8 |
| | Secondary | 49 | 36.8 |
| | College/University | 36 | 27.1 |
| | No Formal Education | 19 | 14.3 |
| Husband's Education | Primary | 26 | 19.5 |
| | Secondary | 40 | 30.1 |
| | College/University | 43 | 32.3 |
| | No Formal Education | 24 | 18.0 |

According to table 2 shows that knowledge of weaning 71.4% of the mothers had weaning education. Only 38 (28.6%) mothers had no knowledge of weaning their children. The main source of this knowledge was friends and family with 27.8% and Health worker / Hospitals with 21.8% whereas, 16.5% of the mother's had knowledge of weaning from TV and media and only 7 mothers had the knowledge of weaning in school as they range between 20 to 24 years of age.

Table 2. Weaning Knowledge and Source of Information

| | | Frequency | Percent |
|-----------------------------|-----|-----------|---------|
| Education Regarding Weaning | No | 38 | 28.6 |
| | Yes | 95 | 71.4 |

| | | | |
|-----------------------|--------------------------|----|------|
| Source of Information | School | 7 | 5.3 |
| | Friends & Family | 37 | 27.8 |
| | Hospital / Health Worker | 29 | 21.8 |
| | T.V / Media | 22 | 16.5 |

According to table 3 shows that attitude of mothers towards weaning was assessed using a 5 point Likert scale, with on strongly agree to 5 strongly disagree. When the mothers were asked as should weaning be introduced before the child is of 4 months along with breastfeed as its not efficient enough 46.6% of the mother's agree whereas 39.9% of the mothers disagree and 13.5% of the mothers are not sure to introduce weaning before the age of 4 months. 85.9% of the mothers disagree with the fact that child should not be breastfed along with weaning as weaning alone is enough for the child whereas 10.5% of the mothers agree and 13.5% of the mothers are not sure whether to wean alone or to wean along with breastfeeding.

When the mothers were asked about the fashion statement of bottle feeding the child especially when visiting or on outing 36.1% of the mothers agree to it whereas 48.8% of the mothers disagree it as a fashion statement.51.1% of the mothers disagreed that children should not be breastfed only twice a day. This shows a positive attitude that children should be breastfed on demand day and night. A majority of mothers disagree that prolong breast feeding does not makes the breast look ugly which shows a positive attitude of the community of prolong breastfeeding the infants for the appropriate period of time.

Table 3. Attitude of Mothers toward Weaning

| | Strongly Agree | Agree | Not Sure | Disagree | Strongly Disagree |
|--|----------------|-------|----------|----------|-------------------|
| Should weaning be introduced before 4 months | 9.8 | 36.8 | 13.5 | 37.6 | 2.3 |
| Breast feeding is not necessary as weaning is enough | 0.0 | 10.5 | 13.5 | 51.1 | 24.8 |
| It is fashionable to give | 5.3 | 30.8 | 15.0 | 35.3 | 13.5 |

| | | | | | |
|--|-----|------|------|------|------|
| bottle milk when you go out | | | | | |
| Infant should be breastfed only twice because he will not be interested in weaning | 4.5 | 26.3 | 18 | 37.6 | 13.5 |
| Prolong Breast feeding makes breasts ugly | 7.5 | 9 | 27.1 | 33.8 | 22.6 |

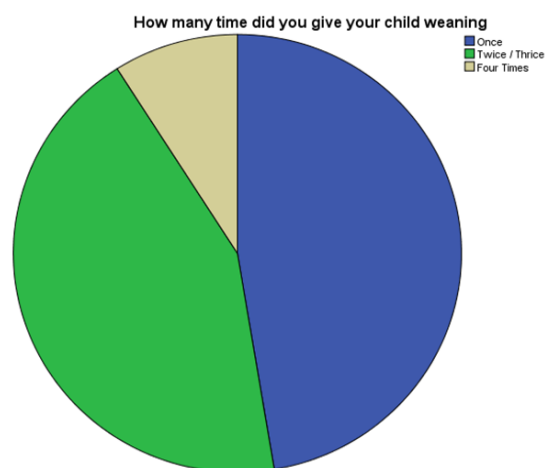
Most of the mother says they give weaning because they think it is correct time for weaning because baby cries after breast feeding and their breast milk becomes insufficient for completion of baby's requirement. 10% mother says they start weaning on clinician advice.

54.9% of the mother buy their infant's first supplement from the market whereas 45.1% of the mothers give what is locally available to their infant. More than 47% of the mothers agree on giving the weaning once as 43% of the mothers have the practice of weaning the child twice or thrice and only 9% of the mothers think that weaning should be given more than three times a day to a healthy baby.

Weaning practices

Figure 1

How many times weaning is given?



Relationship between demographic variables and Knowledge of Weaning.

Cross tabulation of demographic variables such as mother's age, No. of children, type of family, mother's education and household income between knowledge of mothers regarding the time at which to start weaning. The respondents are grouped in two i.e. one who gave the answer that weaning should be commenced 4 to 6 and other who gave early or late. Results show no significant relation between mother's age, No. of children and family structure ($X^2=4.944$, $p>0.05$; $X^2=3.925$, $p>0.05$; $X^2=6.164$, $p>0.05$) and knowledge of the time to wean the infant whereas mother's education and household income should a significant relationship between the knowledge of weaning ($X^2=17.969$, $p<0.05$; $X^2=28.339$, $p<0.05$).

V. DISCUSSION

The finding of this study that 29.3% of children's age lie between 14 to 18 months whereas 27.1% of children are approx of 2 years of age.

The study almost similar to other studies conducted by Zbenay in Addis Ababa, Ethiopia June (2014).

It was observed that majority of the respondents (53.4%) knew that weaning should be initiated by the age of 4-6 months but 52.7% initiated by this age. 40.6% mothers preferred cow's milk for weaning.

Majority of the mothers had knowledge about weaning diet and were practicing correct weaning practices. Majority of the mothers started weaning at the recommended age of 4 months to 6 months.

The study conducted in Jinnah Hospital Lahore (2012) by Seema Hasnain which showed about 79.6% mothers exclusively breastfed their babies and 84% continued breastfeeding along with complementary feeding. The correct knowledge of initiation of complementary feeding was found in 54% of mothers but it was practiced by only 43%. The Majority (85.7%) of the mother's of the according to another study shows that mothers exclusively breastfed their infants and 84% had continued breast feeding along with complementary feeding. 54.9% of the mother buy their infant's first supplement from the market whereas 45.1% of the mothers give what is locally available to their infants.

Results are also supported by study conducted in Karad Taluka India January, (2016) that the attitude towards weaning is an important process of introducing new food to the child at a proper age. If it is done in a proper way by using proper food and practices, then it becomes a helpful for the child.

LIMITATIONS: The study was cross-sectional the actual practice of mothers was not observed .the effect of early and late introduction of weaning diets. The nutritional composition of food was not assessed.

VI CONCLUSION

Based on the findings of the study the following conclusions have been made Most of mothers were aged 30 to 34 years and having 1 to 2 children aged between 14 to 18 months. The mothers had formal education and their household income was more than 11000 per month.

Majority of the mothers had knowledge about weaning and were practicing correct weaning practices. Majority of the mothers started weaning at the recommended age of 4 to 6 months and the commonly used weaning diet was rice, rusk / biscuits or mashed fruits / veg.

Mothers show a positive attitude towards prolong breastfeeding and hygiene.

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