Awareness and Practice Regarding Weaning Among Mothers of Under two Years Children at Tertiary level Hospital

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Abstract

Introduction: Weaning describes how a baby moves or shifts from having breast milk to consuming semi-solid or solid foods with a gradual reduction in breast milk and baby formula intake. The study aims to assess the level of awareness, practice, and association between awareness and practice regarding weaning among mothers of under two years of children.

Methods: This descriptive cross-sectional study was conducted in Shree Birendra Hospital, Chhauni, Kathmandu. Mothers having under two years children visiting the Paediatric OPD of Shree Birendra Hospital, Chhauni, were included. Descriptive analysis of data was performed.

Results: The total number of samples was 96, and the response rate was 100%. Majority (55.2%) of the respondents were between 26 to 30 years of age, and two third (66.7%) had two children. The majority (65.6%) of the respondents have an average level of awareness regarding weaning. Most (55.2%) of respondents had good practice on weaning. However, there was a non-significant association between awareness and practice regarding weaning among mothers under two years of children with selected demographic variables.

Conclusions: The mothers of under two years child had an average level of awareness and practice regarding weaning, with a notable association between their awareness levels and actual weaning practices.

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INTRODUCTION

The term 'weaning' describes the process in infants when baby moves or shifts from having breast milk to consuming semi-solid or solid foods and a gradual reduction in the intake of breast milk and /or baby formula.¹ Approximately 10 million annual deaths of under-five-year-old children occur globally. Over one-third of under-five mortality is caused by malnutrition associated with inadequate complementary feeding.

Initiating safe and nutritionally adequate complementary foods at six is crucial to achieving optimal growth, development and health.²⁻⁴ Most of the studies showed an increased incidence of nutritional problems due to non-weaning at times and inappropriate feeding due to a lack of awareness and practice regarding weaning among mothers of under two years children.⁵⁻⁸

There has not been much research in this field in our

institute. Hence this study was conceptualised to assess the level of awareness, level of practice, and association between awareness and practice regarding weaning among mothers of under two years children.

METHODS

This is a descriptive cross-sectional study done in Shree Birendra Hospital, Chhauni, Kathmandu, Nepal. This is the tertiary-level hospital catering for Nepalese Army personnel and their dependents. The study was conducted from October 2022 to December 2022. Ethical clearance was taken from the Institutional Review Committee. The sampling technique adopted for the study was non-probability purposive sampling. The inclusion criteria were mothers with six months to two years of children visiting Paediatric OPD who are willing to participate. The data was collected by using a Semi-structured

interview schedule. A score of one was given for each correct answer, and a score of zero was given for wrong answer. The awareness level was categorized into three: Good \geq 75% score, Average 50%-75% score, and Below Average awareness \leq 50% score.9 Practice was assessed using close-ended questions with three alternatives as always, occasionally, and rarely that scored 3, 2 and 1, respectively. Respondents scoring mean and above mean was categorized as having good practice, and those scores less than the mean was categorized as having poor practice. The collected data was analyzed using the descriptive i.e., frequency, percentage, mean and standard deviation, and inferential statistics i.e chi-square test. SPSS software was used for the analysis of the data.

RESULTS

The total number of samples was 96, and the response rate was 100%.

Table 1: Socio-demographic Information of the Respondents (N = 96)

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Variables	Frequency		Percentage
Age of mother			
21 - 25	29		30.2
26 - 30	53		55.2
31 - 35	13		13.6
36 - 40		1	1
Number of children			
1	28		29.2
2	64		66.7
3		4	4.2
Education			
Illiterate	1		1
Primary level	14		14.7
Lower secondary level	12		12.6
Secondary level	22		23.2
Higher secondary level	35		36.8
Graduate and above level	12		12.6
Types of family			
Nuclear family	67		69.8
Joint family	22		22.9
Extended family	7		7.3
Occupation			
House maker	76		79.2
Service	10		10.4
Agriculture	6		6.3

Business	4	4.2
Place of residence		
Urban	91	94.8
Rural	5	5.2

The majority (55.2%) of the respondents were between 26 and 30 years old, and the mean age was 27.54 years (Table 1). Most of the respondents (66.7%) had two children. Most (36.8%) of respondents had completed higher secondary level education. Most respondents (69.8%) were from nuclear families, and most (79.2%) were homemakers. Almost all (94.8%) of the respondents lived in urban areas.

Table 2: Socio-demographic information of the respondent's child (N = 96)

Variable	Frequency	Percentage
Age of baby in months		
6 - 12	44	45.8
13 - 18	24	25
19 - 24	28	29.2
Gender of baby		
Male	66	68.8
Female	30	31.3

The highest proportion (45.8%) of the children belonged to the six to 12 months age group, and the majority (68.8%) of the children were male (Table 2).

Table 3: Level of awareness regarding weaning among mothers of under two years children (N = 96)

Level of awareness	Frequency	Percentage
Good (> 75%)	33	34.4
Average (50% - 75%)	63	65.6

Among 96 respondents, 65.6% had average awareness regarding weaning, whereas only 34.4% had good awareness regarding weaning (Table 3).

Table 4: Level of practice regarding weaning among mothers of under two years children. (N = 96)

Level of practice	Frequency	Percentage
Good practice (Above mean)	53	55.2
Poor practice (Below mean)	43	44.8

The majority (55.2%) of the respondents had a good level of practice; however, nearly half (44.8%) of respondents had a poor level of practice on weaning (Table 4).

Table 5: Association between level of awareness and level of practice

Variables	Level of practice		Chi-square	p-value
vanables	Poor	Good	test	p-value
Level of awareness				
Average	32 (50.8%)	31 (49.2%)	2.670	0.102
Good	11 (33.3%)	22 (66.7%)		

Note: P value < 0.05 is significant

The chi-square test revealed a statically non-significant association between level of awareness and level of practice at p < 0.05 level of significance (Table 5).

DISCUSSION

This study found that 34.4% of the respondents had a good level of awareness regarding weaning. This contradicts the study that showed only 19% and 20% of the respondents had a good level of awareness regarding weaning, respectively.^{9,10} This discrepancy may be due to differences in education level, the respondents' cultural beliefs and setting. The respondents were aware that weaning is essential to meet the nutritional needs of infants for growth and development. Nearly one-third (30.2%) of the respondents answered that weaning was because only breast milk was insufficient for the baby. This finding is similar to the study conducted by Koirala et al, in which the majority (61%) of the respondents answered that weaning is essential to meet the nutritional needs of infants for growth and development, and one-third (33.3%) of the respondents said that reason for weaning is because of only breast milk is insufficient for baby.11

In this study, the highest proportion (45.8%) of the respondents were aware that 6 - 7 months is the ideal time for weaning, which is similar to the study conducted in Ambala district, Haryana, where the highest proportion (44.6%) of respondents were aware of timely introduction of complementary feeding at six months. The respondents had a good level of practice regarding weaning. This is similar to the study conducted by Uzma et al, where more than half of the participants had good practice.

In this study, most (64.5%) of the respondents used home-based preparation food for weaning their children, and more than one-fourth (28%) of the respondents provided commercial-based weaning food to their children. A similar finding was reported in the study conducted by Ambika et al, India, in which the majority (69.1%) of the respondents used home-based preparation food for weaning, and

more than one-fourth (28.9%) of the respondents used marketed-based weaning food to their child.¹⁴

This study revealed a statistically significant association between the level of practice and the education status of the mother (p = 0.01). A similar finding was reported in the study by Chapagain, where the mother's educational level was significantly associated with appropriate feeding practices (p = 0.008).¹⁵

The study revealed a non-significant relationship between awareness and practice. This is because most of the participants (69.8%) belonged to a nuclear family. Most of them (79.2%) belong to the house worker occupation, due to which they might be unable to access information regarding weaning practices from other sources, such as; media, the internet, friends, and health centers. This study is contradictory to the study conducted in Pakistan that showed a significant association between the knowledge and practices of weaning; this may be due to different settings and sample size.16 Our study does have limitations in regards to being the single centre study with small sample size and hence, our findings may not be appropriate to be generalized. Further larger, multi centric studies are warranted to be conducted upon this field for future reference.

CONCLUSIONS

Mothers with children under the age of two exhibited an average level of knowledge regarding the process of weaning, and there was no notable association between their awareness levels and their actual weaning practices.

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CONFLICT OF INTERESTS None

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