

Factors Influencing Weaning Diet Among Nursing Mothers Attending Infant Welfare Clinic at Comprehensive Health Centre Okeyinmi Ado Ekiti, Ekiti State

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Abstract:

This study examined the factors influencing weaning diet among nursing mothers attending infant welfare clinics in comprehensive health center Okeyinmi, Ado-Ekiti, Ekiti State. The study specifically examined the level of knowledge of nursing mothers on weaning diet; the attitude of nursing mothers on weaning diet; the age at which nursing mothers wean their babies; and the method used by nursing mothers to wean their infant. The study adopted descriptive survey research design. The target population comprised of nursing mothers currently attending infant welfare clinic at Okeyinmi health center, Ado Ekiti, Ekiti State. A simple random sampling method was used to recruit 130 respondents (nursing mothers) for the study. A self-developed questionnaire was used to obtain information from the respondents. The questionnaire consisted of six sections: sections A to F. The face and content validity of the instrument were ensured by experts in Tests and Measurement and Nursing Science. The reliability of the instrument was established using internal consistency method which yielded reliability co-efficient of 0.83 after subjecting it to

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Cronbach Alpha Analysis. Data Collection was manually sorted out and analyzed with the use of statistical package for social science (SPSS version 26) using descriptive statistical techniques. Findings of the research revealed that majority 75(57.7%) of the mothers wean their children by introducing the children to other food other than breast milk. Regarding the methods adopted in weaning diet 49(37.7%) said breast milk and family diet, 44(33.8%) said off breast milk completely while 7(5.4%) said family meal and cow milk. In conclusion, the study reveals that most of the mothers have average knowledge on weaning diet. It was recommended among others that more health education and information should be provided to mothers during immunization and infant welfare clinic to improve their knowledge on weaning diet and to start at 6 months.

Keywords: Factor, Weaning, Diet, Nursing Mothers, Infant Welfare,



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Introduction

The high figures of infant and under five morbidity and mortality particularly at age 0-24 month have been attributed to malnutrition in Nigeria. Currently under-five mortality rates are 157 deaths per 1,000 live births, while infant mortality rate was 88 to 1000 live births. The national demographic and health survey (NDHS, 2015) figures on child mortality rate and the figures of malnutrition from the Nigeria food consumption survey are indications that something urgent should be done to salvage the future of the Nigeria child and the overall future development of the Nigerian nation.

Malnutrition has a profound effect on a child's growth and development as it can lead to permanent stunting, impaired brain and motor development or excess weight gain, predisposing the child to obesity later in life (Shrimpton et al., 2016). Infant and young child feeding practices directly affect the nutritional status of children under two years, impacting on child survival (Black et al., 2018). Malnutrition during the first two years of life results in an irreversible impairment in attaining full potential of physical growth, brain development, and health status of children. Worldwide, more than one-third of all child deaths every year are attributed to malnutrition and it is estimated that 6% of under-five child mortality every year can be reduced through age appropriate infant and young child feeding (Arun, 2017). World Health Organization (WHO) recommend early initiation of breastfeeding, followed by exclusive breastfeeding for the first 6 months and introducing weaning diet timely and adequate in amount, frequency, consistency and variety to address the nutritional needs of the growing infant at 6 months of age with continuing breast feeding up to 2 years. This gradual replacement of milk with solid food as the main source of nutrition is known as weaning or complementary feeding. It is the provision of any nutrient containing foods or liquids other than breast milk.

Weaning is the process of gradually introducing an infant to adult foods while gradually withdrawing breast milk. The child is not abruptly taken off breast milk, the process of weaning should be started after the age of 6 months and natural weaning happens as the infant starts to accept increasing amounts and different variety of complementary feedings although still breastfeeding on request. The period from birth to 2 years of age is a critical window for the promotion of optimal growth, health and cognitive development (Pelto et al., 2013). Early years have been recognized as time for developing good dietary habits and important time for taking in nutrients for optimal growth and development (Engle, Bentley & Pelto, 2018). Poor breastfeeding patterns, low nutrient density and poor quality of weaning diets accounts for nutrient deficiency, illness and infections in children leading to malnutrition at an early age (Pelto et al., 2013).

Weaning diet is a type of diet that should be consumed and digested by the young child and that should be able to provide additional nutrition to meet all the growing child's needs. Inappropriate weaning diet remains among the contributory factors for the persistence of malnutrition in a widespread manner, only quarter of children aged 6 – 24 months meet the criteria of age appropriate dietary diversity and feeding frequency. Early weaning is necessary to provide the adequate feeding that baby will need later in life, because breast milk diminishes in quantity after six months. Weaning diet has good effects on the growing children as this contain body building nutrients such as eggs, vegetables, cereals, minced



meat, porridge, beans, palm oil, mashed yam among others to provide for the needs of the growing child.

In many countries, the period of weaning from 6 to 24 months is the time of peak incidence of growth faltering, micronutrient deficiencies and infectious diseases (Brown, 2018). Even after weaning diet have been introduced, breast feeding remains a critical source of nutrients for the young infant and child. It provides about half of an infant's energy needs up to the age of one year and end up to one third during second year of life. Breast milk continues to supply higher quality nutrients than weaning diets, and also protective factors. It is therefore, recommended that breastfeeding on demand is continued with adequate weaning diet up to 2 years or beyond (WHO, 2017). In Nigeria, weaning diets are usually semi-solids and they differ in homes but most homes use maize based cereal (Umar & Oche, 2013). Due to introduction of westernized food and other factors like the advertising tactics taken up by most food and beverage companies and the readily preparation of most of these foods, these factors may influence the feeding practices like reducing the age of initiation of weaning diet and early cessation of breastfeeding. The current exclusive breastfeeding rate is 17%, although about 97% of children born in Nigeria are breastfed in one way or the other (Umar & Oche, 2013). At the usual age of introduction of complementary foods (6-9 months), 56% of infants consume food made from grains e.g. maize, millet, rice while 25% consume meat, fish, poultry or eggs, and 24% took fruits and vegetables (WHO, 2018).

The World Health Organization (WHO) estimated that two out of five children are stunted in growth in low income country. From the age of 6 months, an infant's need for energy and nutrients start to exceed what is provided by breast milk and weaning diet becomes necessary to fit the energy and nutrient gap. If weaning diet are not introduced at this age or if they are given inappropriately, an infant's growth may falter. During infancy, it is necessary to enable transition from milk feeding to other foods which is important for nutritional status and development of the infant (World Health Organization, 2013). It is well established that mothers who are younger with a lower level of education or from an area of poverty are significantly more likely to introduce solid foods both before 4 and 6 months of age. Maternal smoking, obesity and formula feeding have also been linked to an earlier introduction of weaning diet (Clayton & Oyediji, 2013).

Factors affecting weaning diet vary according to the socio-economic stratification of the population, knowledge, customs, beliefs, age and weaning method by nursing mothers (Odebode, 2015). They not only vary from person to person but from region to region. In USA, the average age of weaning is between 2-3 years. The most common reason for the beginning of weaning was said to be "chilled" and that it was accomplished gradually (Katie, et al., 2012). Weaning process is recognized as one of the most crucial dietary events in an infant's life (Umar & Oche, 2013). If the process is begun too early this may cause development of allergic disease or obesity, while if there is a delay, this may induce failure to thrive or iron-deficiency anemia.

This study therefore aimed at assessing the factors influencing weaning diet among nursing mothers attending infant welfare clinics in comprehensive health center Okeyinmi, Ado-Ekiti, Ekiti State. The study specifically examined:

1. the level of knowledge of nursing mothers on weaning diet;



2. the attitude of nursing mothers on weaning diet;
3. the age at which nursing mothers wean their babies; and
4. the method used by nursing mothers to wean their infant.

Research Questions

1. What is the level of knowledge of nursing mothers on weaning diet at comprehensive health center Okeyinmi Ado Ekiti, Ekiti state?
2. What is the attitude of nursing mothers towards weaning diets at comprehensive health center Okeyinmi Ado-Ekiti, Ekiti state?
3. What is the age at which nursing mothers wean their babies at comprehensive health center Okeyinmi Ado-Ekiti, Ekiti state?
4. What are the available methods used by nursing mothers in weaning their infants at comprehensive health center Okeyinmi Ado-Ekiti, Ekiti state?

Methodology

The study employed a survey form of descriptive design to assess the factors influencing weaning diet among Nursing Mothers attending infant welfare clinic, Okeyinmi comprehensive health Centre, Ado Ekiti, Ekiti State. The target population comprised of nursing mothers currently attending infant welfare clinic at Okeyinmi health center, Ado Ekiti, Ekiti State. Okeyinmi health centre is located in Okeyinmi Street along Okesa road beside First bank. There are 35 staff working presently in the settings and more than 100 nursing mothers attend the clinic every clinic day. The health Centre has different units and departments which include: pharmacy unit, laboratory, medical record, outpatient department, infant welfare clinic unit and maternity ward. The categories of the health workers at the health center include: Nurses, community health extension workers (CHEW), laboratory technicians and medical record. Okeyinmi health Centre offers the following services to people in the area which includes: immunization, treatment of minor illness, infant welfare clinic, antenatal care, post-natal care, delivery of babies, assessment of infant growth and development and health education, their clinic days are Wednesdays and Friday.

A simple random sampling method was used to recruit 130 respondents (nursing mothers) for the study. The first 65 nursing mothers that picked "TRUE" during balloting were given the questionnaires to fill in the first visit of the researchers; same method was used to select 65 nursing mothers in the second visit. A self-developed questionnaire was used to obtain information from the respondents. The questionnaire consisted of six sections: sections A to F with 29 items were used for collecting information from the Nursing Mothers.

Section A: Entails the socio- demographic data of respondents indicating personal information about the subjects (nursing mothers) and of which takes care of Age, marital status, occupation, religion, numbers of children and educational qualification.

Section B: Level of knowledge of nursing mothers towards weaning diet was assessed using six items with multiple choice questions and four options in which only one option gives the correct answer. The score ranges between 1-6, whereas any respondents with 1-2 have a low knowledge, 3-4 has a moderate knowledge and 5-6 have a high knowledge.

Section C: Attitude of Nursing Mothers towards weaning diet was assessed using four items with multiple choice questions.



Section D: Age at which Nursing Mothers wean their infants was assessed using three items with multiple choice questions and four options in which only one option gives the correct answer.

Section E: Methods adopted by Nursing Mothers in weaning their infants was assessed using five items with multiple choice questions.

Section F: Socio-economic factors influencing weaning diet was assessed using Likert scale of strongly Agreed SA, Agreed A, Undecided U, strongly disagree SD, Disagree D; where SA=5, A=4, U=3, SD=2, D=1.

The face and content validity of the instrument were ensured by experts in Tests and Measurement and Nursing Science. The reliability of the instrument was established using internal consistency method which yielded reliability co-efficient of 0.83 after subjecting it to Cronbach Alpha Analysis. The copies of the questionnaire were distributed to the Nursing Mothers attending infant welfare clinic Okeyinmi after their verbal consent had been obtained. The items of the questionnaire were self-explanatory to the respondents while interpretations were made to those who could not read or understand English language. The copies of the questionnaire were collected back immediately to avoid loss of data collection instrument. Data Collection was manually sorted out and analyzed with the use of statistical package for social science (SPSS version 26) using descriptive statistical techniques.

Results

Table 1: Socio-demographic Data of Respondents

Variables	Frequency	Percentage (%)
Age		
21-25 years	20	15.4
26-30 years	28	21.5
31-35 years	47	36.2
36 and above	35	26.9
Total	130	100
Marital status		
Single	14	10.8
Married	87	66.9
Divorced	20	15.4
Widow	9	6.9
Total	130	100
Occupation		
Civil servant	35	26.9
Trader	41	31.5
Self-employed	37	28.5
Unemployed	17	13.1
Total	130	100
Religion		
Christianity	81	62.3
Islam	31	23.8
Traditional	16	12.3



Others	2	1.5
Total	130	100
Number of children		
1-2	27	20.8
3-4	82	63.1
5-6	8	6.2
Above 6	13	10.0
Total	130	100
Educational qualification		
Primary	7	5.4
Secondary	54	41.5
Tertiary	57	43.8
Others	12	9.2
Total	130	100

Table 1 shows the demographic data of the respondents as 20(15.4%) of the respondents were between the ages of 21-25 years, 28(21.5%) of the respondents were between the ages of 26-30 years, 47(36.2%) of the respondents were between the ages of 31-35 years while 35(26.9%) of the respondents were 36 years and above. Majority of the respondents, 87(66.9%) were married, 20(15.4%) of the respondents were divorced, 14(10.8%) of the respondents were single while 9(6.9%) of the respondents were widowed. Also, 41(31.5%) of the respondents were traders, 37(28.5%) of the respondents were self-employed, 35(26.9%) of the respondents were civil servants while 13.1% of the respondents were unemployed. Majority of the respondents, 81(62.3%) of the respondents were Christians, 31(23.8%) of the respondents practiced Islam, 16(12.3%) of the respondents were Traditional worshippers and 2(1.5%) of the respondents practiced Others. Furthermore, 82(63.1%) of the respondents have 3-4 children, 27(20.8%) of the respondents have 1-2 children, 13(10.0%) of the respondents have above 6 children while 8(6.2%) of the respondents have 5-6 children. 57(43.8%) of the respondents had up to tertiary educational background, 54(41.5%) of the respondents had up to primary educational background, 12(9.2%) of the respondents had other educational background while 7(5.4%) of the respondents had primary educational background.

Research Question 1: What is the level of knowledge of nursing mothers on weaning diet at comprehensive health center Okeyinmi Ado Ekiti, Ekiti state?

Table 2: Assessment of Knowledge of Mothers on Weaning Diet



Variables	Frequency	Percentage (%)
What do you understand by weaning diet?		
Gradual development of baby	9	6.9
Exclusive breastfeeding of baby	7	5.4
Introduction of baby to other foods other than breastmilk	39	30.0
Timely introduction of safe and nutritional foods in addition to breast feeding.	75	57.7
Total	130	100
Where did you get information about weaning diet?		
Radio	17	13.1
Television	25	19.2
Friends	46	35.4
Hospital	42	32.3
Total	130	100
What is the adequate spoonful for a weaning child?		
1-2 spoons	41	31.5
3-4 spoons	28	21.5
5-6 spoons	9	6.9
On demand	52	40.0
Total	130	100
What are the essential nutrients in the diet of your baby(ies)?		
Energy, protein, mineral and vitamin content	85	65.4
Protein and carbohydrate	21	16.2
Fat& oil only	16	12.3
Not necessary	6	6.2
Total	130	100
How do you feed your child?		
Cup& spoon	59	45.4
Bottle feeding	40	30.8
Both	25	19.2
Force feeding	6	4.6
Total	130	100
What is the possible effect of poor weaning diet?		
Malnutrition	72	55.4
Poor intellect	25	19.2
Poor growth	19	14.6
Poor skin color	14	10.8
Total	130	100



Table 2 above represents the assessment of the level of knowledge of mothers on weaning diet. Most of mothers, 75 (57.7%) understood weaning diet as timely introduction of safe and nutritional foods in addition to breast feeding, 39 (30.0%) of the respondents understood weaning diet as the introduction of baby to other foods other than breast milk, 9 (6.9%) of them showed that they understood weaning diet as the gradual development of a baby and 7(5.4%) understood weaning diet as exclusive breast feeding of a baby. A greater percentage of the respondents, 46(35.4%) got information from friends, 42 (32.3%) of them got information from the hospital, 25(19.2%) got information from the television while, 13.1% got information from the radio. Most of the mothers who respondents, 52(40.0%) said the adequate spoonful food for a weaning child is on demand, 41(31.5%) of them said that 1-2 spoons are the adequate spoonful for a weaning child, 28(21.5%) responded that 3-4 spoons are the adequate spoonful for a weaning child and 9(6.9%) said 5-6 spoons are the adequate spoonful for a weaning child. Majority of the respondents, 85(65.4%) said that the essential nutrients in the diet of babies are Energy, protein, mineral and vitamin content, 21(16.2%) showed that protein and carbohydrate are the essential nutrients in the diet of their babies, 16 (12.3%) responded that fat and oil are the essential nutrients in the diet of their babies while 6 (6.2%) said it was not necessary. 59 (45.4%) of the respondents revealed that they feed their child with cup and spoon, 40(30.8%) of them showed that they feed their child with bottles, 25(19.2%) said they use both to feed their children and 6(4.6%) of the respondents showed that they feed their children forcefully. Most of the respondents, 72(55.4%) revealed that malnutrition is the possible effect of poor weaning diet, 25(19.2%) said poor intellect is the possible effect of poor weaning diet, 19(14.6%) of them said poor growth is the possible effect of poor weaning diet and 14(10.8%) said poor skin color is the possible effect of poor weaning diet.

Table 3: Summary of the level of knowledge of mothers on weaning diet

Level of knowledge	Category of score	Frequency	Percentage (%)
Low	1 – 2	25	19.2
Average	3 – 4	67	51.7
High	5 – 6	38	29.1
Total		130	100

Table 3 revealed the level of knowledge of nursing mothers on weaning diet at comprehensive centre Okeyinmi. Most 67 (51.7%) of the nursing mothers had average knowledge on weaning diet while 38(29.1%) had a high knowledge. Hence, this study showed an average knowledge of mothers on weaning diet.

Research Question 2: What is the attitude of nursing mothers towards weaning diets at comprehensive health center Okeyinmi Ado-Ekiti, Ekiti state?

Table 4: Assessment of Attitude of Nursing Mothers towards Weaning Diet

S/N	Variables	Frequency	Percentage (%)
	What circumstances do you usually wash your hands?		
	Before and after food preparation	73	56.2
	Before and after feeding	19	14.6
	Both	32	24.6
	I don't know	6	4.6
	Total	130	100
	Where do you store food for your child?		
	Baby bowl	28	21.5
	Food flask	59	45.4
	Pot	20	15.4
	Fridge	23	17.7
	Total	130	100

Table 4 depicts that a greater percentage of the respondents, 73(56.2%) showed that they wash their hands before and after food preparation, 19(14.6%) of them also said they wash their hands before and after feeding, 32(24.6%) of the respondents revealed that they make use of both while 4(4.6%) also said they don't know the circumstances they usually wash their hands. Most of the respondents, 59(45.4%) of the responded that they stored food for their babies in food flask, 28(21.5%) of them said they stored their baby's food in baby bowl, 23(17.7%) of them showed that they stored their baby's food in the fridge and 20(15.4%) of them also showed that they stored their children's food in pot.

Research Question 3: What is the age at which nursing mothers wean their babies at comprehensive health center Okeyinmi Ado-Ekiti, Ekiti state?

Table 5: Assessment of the Age at which Nursing Mothers Wean their Infants

S/N	Variables	Frequency	Percentage (%)
	At what age should weaning diet be introduced?		
	4-6 months	12	9.2
	6 months	69	53.1
	After 6 months	35	26.9
	6-12 months	14	10.8
	Total	130	100
	At what age did you introduce your child to family diet?		
	0	0	0
	3 months	50	38.5
	4-6 months	61	46.9
	6-12 months	19	14.6
	12-2 years	130	100
	Total		



How many baby(ies) have you introduced weaning diet?		
1-2	33	25.4
3-4	60	46.2
5-6	30	23.1
6 and above	7	5.4
Total	130	100

Table 5 above depicts that 12(9.2%) of the nursing mothers wean their infants at 4-6 months, 69(53.1%) of them wean their infants at 6 months, 35(26.9%) of them wean their infants after 6 months and 14(10.8%) wean their infants at 6-12 months. None of the nursing mothers introduced their children to family diet at 3 months, 50(38.5%) of them introduced family diet to their children at 4-6 months, 61(46.9%) introduced family diet to their children at 6-12 months while 19(14.6%) of the nursing mothers introduced family diet to their children at 12-2 years of age. Most of the respondents, 60(46.2%) of the nursing mothers have introduced weaning diet to 3-4 babies, 33(25.4%) have introduced weaning diet to 1-2 babies, 30(23.1%) have introduced weaning diet to 5-6 babies and 7(5.4%) have introduced weaning diet to 6 babies and above.

Research Question 4: What are the available methods used by nursing mothers in weaning their infants at comprehensive health center Okeyinmi Ado-Ekiti, Ekiti state?

Table 6: Assessment of methods adopted by Nursing Mothers in Weaning their Infants

S/N	Variables	Frequency	Percentage (%)
	What method did you adopt in weaning practice?		
	Off breast completely	44	33.8
	Breast milk and family diet	49	37.7
	Family diet and cow milk	30	23.1
	Others, specify	7	5.4
	Total	130	100
	For proper care of babies, what type of weaning diet do you take as the best?		
	Commercially made food	39	30.0
	Homemade balanced diet	69	53.2
	Fruits and vegetables	22	16.9
	Total	130	100
	Why did you choose the type of weaning diet you adopted for your child?		
	It is easily available	44	33.8
	It is cheap	19	14.6
	It contains all available nutrient	41	31.5
		26	20.0



	All of the above Total	130	100
	How long does it take your child to accept this food?		
	2 weeks	24	18.5
	3 weeks	61	46.9
	1 month	33	25.4
	6 months	12	9.2
	Total	130	100
	What type of weaning diet do you introduce to your baby?		
	Pap	4	3.1
	Pap and crayfish	69	53.1
	Pap and soya milk	25	19.2
	Pap and infant formula	32	24.6
	Total	130	100

Table 6 above shows that most of the nursing mothers, 49(37.7%) adopted breast milk and family diet method in weaning their infants, 44(33.8%) adopted off breast completely method in weaning their infants, 30(23.1%) also adopted family diet and cow milk method in weaning their infants, while 7(5.4%) adopted other methods in weaning their infants. Majority of the nursing mothers, 69(53.2%) took homemade balanced diet as the best type of weaning diet for the proper care of their babies, 39(30.0%) took commercially made foods as the best type of weaning diet for the proper care of their babies and 22(16.9%) of them took fruits and vegetables as the best type of weaning diet for the proper care of their babies. Also, 44(33.8%) of the nursing mothers said they chose the type of weaning diet for child because it is easily available, 19(14.6%) also said they chose the type of weaning diet adopted for their child because it is cheap, 41(31.5%) of them chose the type of weaning diet adopted for their child because it contains all available nutrients while 26(20.0%) chose the type of weaning diet adopted for their child because it contains all of the above. Most of the respondents, 61(46.9%) revealed that it takes 3 weeks for their child to accept the food, 33(25.4%) showed that it takes 1 month for their child to accept the food, 24(18.5%) said that it takes 2 weeks for their child to accept the food, while 12(9.2%) of them agreed that it takes 6 months for their child to accept the food. Majority of the nursing mothers, 69(53.1%) showed that they introduce pap and crayfish to their baby(ies) as the type of weaning diet, 32(24.6%) of them introduced papa and infant formula to their baby(ies) as the type of weaning diet, 25(19.2%) revealed that they introduced papa and soya milk to their baby(ies) as the type of weaning diet and few of them, 4(3.1%) showed that they introduced Pap as the type of weaning diet for their baby(ies).

Discussion

Most of mothers, 75(57.7%) understood weaning diet as timely introduction of safe and nutritional foods in addition to breast feeding, 39(30.0%) of the respondents understood weaning diet as the introduction of baby to other foods other than breast milk, 9(6.9%) of



them showed that they understood weaning diet as the gradual development of a baby and 7(5.4%) understood weaning diet as exclusive breast feeding of a baby. Therefore, from the findings, it shows that there is an average knowledge 67(51.5%) of weaning diet by nursing mothers and this is in line with the study carried out by Wanyioke (2012), where very few mothers (10%) were considered to have a high knowledge about weaning diet.

A greater percentage of the respondents, 73(56.2%) showed that they washed their hands before and after food preparation, 19(14.6%) of them also said they wash their hands before and after feeding, 32(24.6%) of the respondents revealed that they make use of both while 6(4.6%) also said they don't wash their hands. This disagrees with the study carried out by Choudhari (2012) which stated that 26% wash their hands before and after food preparation, 34% wash their hands before and after feeding, 40% used both method and 10% only washed their hands when necessary. On food storage, most of the respondents, 59(45.4%) of the responded that they stored food for their babies in food flask, 28(21.5%) of them said they stored their baby's food in baby bowl, 23(17.7%) of them showed that they stored their baby's food in the fridge and 20(15.4%) of them also showed that they stored their children's food in pot. This is in line with the study carried out by Frazier, et al (2015) which stated in their study that 58% of the respondent said that they usually store their infant foods in the food flask.

The research findings also deduced that 12(9.2%) of the nursing mothers wean their infants at 4-6 months, 69(53.1%) of them wean their infants at 6 months, 35(26.9%) of them wean their infants after 6 months and 14(10.8%) wean their infants at 6-12 months. This finding contradicts the study carried out by Mushaphi and Kumudha (2018) which stated that 13% of the infants were introduced to weaning diet at 6 months, 18.9% at 4 months, 43.2% at 4-6 months, while 15.2% at 12 months and above.

Regarding the method adopted by nursing mothers, 49(37.7%) adopted breast milk and family diet method in weaning their infants, 44(33.8%) adopted off breast completely method in weaning their infants, 30(23.1%) and 7(5.4%) adopted other methods in weaning their infants. This is in line with the study carried out by Sofoa (2019) which stated that 98% of mothers put baby to breast and also use family diet as weaning diet while the remaining 2% of mothers use family diet and baby formula.

Conclusion

This research examined the factors influencing weaning diet among nursing mothers attending infant welfare clinic at comprehensive health centre, Okeyinmi and it reveal that mothers had average knowledge on weaning diet. However, findings also revealed that some mothers introduced weaning diet to their babies at 4 months; there is need for more enlighten about appropriate months for starting weaning diet. Some mothers are still in the habit of using commercially made food only for weaning their babies. In view of this, some mothers still need more knowledge on various type of appropriate diet for weaning and how to prepare it. Therefore, the health sector and government still have lots to do, such as more frequent intensive education of nursing mothers on weaning diet, appropriate age to introduce and the right food to use for Weaning Diet.



Recommendations

From the findings in the study, the researchers therefore make the following suggestions and recommendations;

1. Federal and state ministry of health should train more health workers for thorough dissemination of information to mothers on weaning diet.
2. More health education and information should be provided to mothers during immunization and infant welfare clinic to improve their knowledge on weaning diet and to start at 6 months.
3. There should be demonstration on how to prepare babies diet at infant welfare and immunization clinics and mothers should be encourage attending this program regularly.
4. Working class mothers should be encouraged to create time for preparing homemade balanced diet for their babies.
5. Home visitation should be done in order to know the compliance of nursing mother towards the health education given to them at the clinic.

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