Kufa Journal for Nursing Sciences
Open Access Full Text Article

Publisher
University of Kufa, Faculty of Nursing

Received: 04 September, 2023
Accepted: 16 October, 2023
Published: 18 October, 2023
Vol. 13(2), 2023: 62 – 72

https://doi.org/10.36321/kjns.vi20232.13341

ORIGINAL RESEARCH

Knowledge and Practice regarding Complementary Feeding among Primiparous and Multiparous Mothers in Qaladiza City, Iraq

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ABSTRACT

Background: Adequate nutrition during infancy and early child hood and mother's knowledge and practice regarding complementary feeding are fundamentals for attaining child's growth and development and optimum health. Complementary feeding is an additional food or drink containing nutrients, given to infants or children aged 6-23 months to meet nutritional needs other than breast milk.

Objectives: This study aimed to assess knowledge and practice regarding complementary feeding among primiparous and multiparous mothers.

Methodology: Cross-sectional descriptive study was carried out among a convenience sample of 100 mothers having 6-23 months' age children in Qaladiza city in 2019. A questionnaire format was design to obtain necessary information with face to face technique. Validity and reliability of the data collection tool was attained (r.=0.71). Data were collected and analyzed with the help of SPSS version 26.

Results: Among all of the mothers, 57% of them were multiparous. The highest age group was 26-30 by 39%. Additionally, the highest percentage of mothers 36% were at the highest education level (graduated). There were no significant association between sociodemographic characteristics with mother's level of knowledge and practice. Regarding mother's knowledge toward complementary feeding 36.8% of multiparous and 55.8% of primiparous mothers were at high level. Regarding complementary feeding practice only 2.3% of primiparous and 15.8% of multiparous mothers were at high level. There were no statistical significant differences between them primiparous and multiparous mothers regarding complementary feeding knowledge and practice.

Conclusion: In this study, it was attained that there was an acceptable level of knowledge and low level of practice regarding complementary feeding among participated mothers. In addition to that, primiparous mother's level of knowledge was higher with a lower level of practice compared to multiparous mothers.

Recommendations: It is recommended for increase mother's knowledge and practice regarding complementary feeding and its impact on their child's health state.

Keywords: Complementary feeding, knowledge, practice, primiparous, multiparous, mothers.

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How to Cite: Mahmood, M., Sleman, A. K., Abdullah, G. R., & Wsw, K. A. (2023). Knowledge and practice regarding complementary feeding among primiparous and multiparous mothers in Qaladiza City, Iraq. *Kufa Journal for Nursing Sciences*, 13(2), 62-72. doi: 10.36321/kjns.vi20232.13341

INTRODUCTION

High quality nutrition is a fundamental for the child's growth and development especially during their first year of life (Savarino et al. 2021). WHO recommend exclusive breastfeed as invaluable source of good nutrition for the first six month of life in order for attaining optimum growth and development. Additionally, in order for the child to continue through receiving adequate and higher quality nutrition, in addition to breastmilk, complimentary feeding is recommended following six months until the age of two (Agriculture et al. 2020). Complementary feeding is defined by WHO as a process of providing other foods and liquids in addition to the breastmilk to an infant older than six months which is not meet nutritional needs alone with breastfeeding (Dewey 2001; WHO 2003). According to the world health organization (WHO), complementary feeding should have three principles; timely, adequate and appropriate. These denote that complementary feeding should start on a time schedule which is from six months onwards in addition to breast milk. Furthermore, the nutritional value of the complementary foods should be adequate in order to meet nutritional need of rapidly growing child. Moreover, the foods should be appropriate in term of diversity, texture and adequacy (WHO 2023).

In order for the child to get all the benefits, it is crucial for parents to have adequate information about their child's feeding process, exclusive breastfeeding, complementary feeding and continues breastfeeding in addition to complementary feeding. Additionally, preparing and practicing complementary foods is vital to attain its optimum health benefits (Junejo et al. 2019).

It appears that among several factors that influence complementary feeding process is the parity of the mothers. Although few research papers were presented the issue, a study on initiating breastfeeding pointed out that primiparous mothers were more likely to start early breastfeeding but they finish it soon and started complementary feeding prematurely (Neves et al. 2020).

A hypothesis is that, multiparous mothers were more knowledgeable and have more experience on preparing and providing complementary feeding compared to primiparous mothers.

AIMS OF THE STUDY

The aim of the study is to determine information and practice regarding complementary feeding among primiparous and Multiparous mothers in Qaladiza City.

METHODOLOGY

A cross sectional, descriptive study was conducted among a convenient sample of 100 mothers of children age 6-23 months in Qaladiza city of Kurdistan Region of Iraq.

The data were collected through utilizing and adopted modified questionnaire with face to face interviewing technique from 1st to 28th December 2019. Individual consent was obtained from each participant.

Content validity of the early instruments was determined through investigating the clarity, relevancy and adequacy of the questionnaire by several experts from different Felids. The internal consistency and reliability coefficient of the data collection tool were attained through conducting a pilot study on a sample of 10 mothers and using Cronbach's alpha and the result was r=0.71.

The inclusion criteria for this study were mothers with a child of 6-23 months' age for the first time as primiparous or having two or three children in which one of them were at the age of 6-23 months as multiparous. Participants should be in physically and mentally healthy status.

Following the end of data collection and data entering to the statistical package of social science (SPSS) version 26, data analysis was performed with the help of descriptive and inferential statistics such

as chi-square, Frequency and percentage as descriptive statistics, Chi-Square to compare the differences between variables and check for significant were used as inferential statistics. Statistical significance was defined as P<0.05.

RESULTS

According to the sociodemographic table (1), it shows that among participants, 43% of them were primiparous, while multiparous mothers were about 57% of the participants. Among all of the participants, the highest level of mothers was at the age groups of 26-30 and 21-25 years' old by 39% and 29% respectively. Whereas, only 9% and 1% were at the age group of less than 20 and more than 41 years old. In relation to the mother's type of family, the majority 80% of them were nuclear family. In the table mother's level of education was also described. According to table the highest percentage of mother 36% were at the level of graduation. On the other hand, 9% of mothers were illiterate. In relation to the economic status, most of the mothers 66% responded as their family monthly income are sufficient. In addition to that 11% and 9% of the families were at insufficient and highly sufficient family monthly income respectively. In term of the mother's occupation, the majority of them 79% were housewife. While, only 5% of them had self-job and about 16% of them were employee.

Table (2) Illustrate mother's different responses for each of the knowledge items regarding complementary feeding. In general, the level of the mother's knowledge in each of the items is slightly high. In the items that ask about impact of introducing complementary feeding at appropriate time on adequate growth and development, the need of complementary feeding following six months and having high energy foods such as rice, potato and corn following six months, the majority of mother's 93%, 92% and 90% were at a high level of knowledge respectively. However, in the question that complementary feeding should be stopped when the child refused, nearly half of the mothers 45% were agree and have low level of knowledge.

Table 3 represent mother's level of practice regarding complementary feeding. From that, it could be seen that the level of the most items related to the mother's practice is somewhat high. Nevertheless, regarding adding salt to the children's food, 19% and 47% of the mothers always or sometime use salt respectively.

Figure 1 provide an overview of mother's level of knowledge and practice regarding complementary feeding. As it is presented all most all of the mothers 95% were at moderate 50% or high 45% level of knowledge. Whereas only 5% of the mothers were at low level of knowledge regarding complementary feeding. On the other hand, mothers about two-third 62% of the mothers were at moderate level and 28% of them were at low level of practice. Furthermore, mothers in high level of practice were only about 10%. Table 4 illustrate association between some of the participant's sociodemographic characteristics and their level of knowledge and practice toward complementary feeding. In relation to the type of family, just below half of the nuclear families 48.8% were at high level compared to the extended families with only 30%. Whereas, in relation to the complementary feeding practice only the minority of the mothers 10% in both nuclear and extended family were at a high level.

Regarding to the mother's occupation the majority of the mothers 79% were housewife and among them nearly half of them 44.3% were at a high level of knowledge. At the same time a smaller percent 5.1% of them were at low level of knowledge. Whereas, regarding complementary feeding practice only a minority 10.1% of the housewife mothers were at high level of practice. whereas, about one-third of the housewife mothers were at low level of practice regarding complementary feeding.

Regarding to association between mother's level of education and their level of knowledge and practice, almost all of the mother were belong to moderate 50% or high 45% level of knowledge. Interestingly, the percentage of mothers in high level of knowledge were elevated from 22.2% to 36.4%, 42.1%, 48.0% and 52.8% in parallel with the increasing education levels from illiterate to able to read and write, primary school, secondary school and graduated respectively. On the other hand, the highest percentage of mothers 36% were at graduated level of education. From that only 8.3% of them were at high level of practice. While, 30.6% of them were at low level of complementary feeding practice

In term of the family monthly income and its association with the mother's level of knowledge and practice, about two-third of the mothers 66% were at sufficient level of family monthly income. From that point, nearly half of them 42.4% were at the high level of complementary feeding knowledge. While, only a minority of them 4.5% were at low level of knowledge. In contrast, among all of the mothers pointed out sufficient family monthly income only 10.6% of them were at high level of practice. Whereas, about a quarter of the mothers 22.7% of them were at low level of practice regarding complementary feeding.

From that it is appeared that there were no statistical significant association between type of family, occupation, level of education and family monthly income with mother's level of knowledge regarding complementary feeding with p. value of 0.305, 0.574, 0.673 and 0.607 respectively. Similarly, there were no statistical significant association between type of family, occupation, level of education and family monthly income with mother's level of practice regarding complementary feeding with p. value of 0.728, 0.573, 0.788 and 0.153 correspondingly.

Regarding to differences in the level of knowledge between primiparous and multiparous mothers, as it is seen in the table 5, more than half of the mothers 55.8% in the primiparous group were at the high level of knowledge. While, in the multiparous group more than half of the mothers 56.1% were at the moderate level of knowledge. Moreover, compare to the multiparous group which was 7%, only 2.3% of the primiparous mothers were at lowest level of knowledge.

Additionally, the mean and standard deviation of the primiparous mothers level of knowledge were 15.09 and ± 2.51 respectively. Whereas, mean of the multiparous mothers was 14.403 with ± 2.68 standard deviation. In addition to that, the differences between primiparous and multiparous mothers in relation to the level of knowledge was not significant at p. value= 0.195.

In relation to the differences in level of practice between primiparous and multiparous mothers, table 6 illustrate that, most of the mothers 72.1% in the primiparous mothers were at the moderate level of practice. While, in the multiparous group more than half of the mothers 54.4% were at the moderate level of information. Although, only 2.3% of the primiparous mothers were at the high level of practice, multiparous mothers at high level of practice were about 15.8%.

On the other hand, the mean and standard deviation of practice regarding complementary feeding among primiparous mothers were 5.00 and ± 1.06 SD. While, mean of practice and standard deviation among multiparous mothers was 14.403 with ± 2.68 SD. Although, there was a difference in the level of practice concerning to complementary feeding between primiparous and multiparous mothers, the difference was not statistically significant at p. value= 0.7.

DISCUSSION:

Among participants, more than half of them were multiparous and the remainder were primiparous, in which one third of them were at the age groups of 26-30. The majority of them were nuclear family in which just above one third of them

were at the level of graduation and more than half of them were agree with their level of economic status.

Concerning mother's level of knowledge and practice regarding complementary feeding, almost all of the mother were at moderate or high level of knowledge and just a minority of them were at low level of knowledge. It is an indication of high level of overall knowledge among participated mothers regarding complementary. This finding is supported by a study done in Nigeria among 355 mothers as two third of the mothers knew the correct definition of complementary feeding and had an overall high knowledge regarding complementary feeding. Whereas, an overall mothers practice regarding complementary feeding was low and only less than half of them were located at a high level zone (Olatona et al. 2017).

A community based cross sectional study was conducted in Ethiopia, among 410 mothers who had children aged 6-23 months. Data was collected through face to face interview techniques and results indicated that about two-third of the mothers had high level of knowledge regarding complementary feeding. While, only about half of the mothers were at a high level of practice regarding complementary feeding preparation and providing (Rumicha and Gemede 2021).

Concerning comparison between primiparous and multiparous mothers level of knowledge and practice regarding complementary feeding. Findings of this study were opposite to the expectation that multiparous mothers are more knowledgeable and have more practice experience regarding complementary feeding. In general, primiparous mothers had higher level of knowledge regarding complementary feeding as more than half of them were at high level of knowledge compared to the multiparous mother as just above one third of them were at high level of knowledge. However, concerning complementary feeding practice, even about two-third of primiparous mother were in a moderate level of practice compared to the just above half of the multiparous mothers, multiparous mothers in high level of practice were about six-times more as primiparous mothers. Even though, their differences were statistically not significant.

In a cross sectional study conducted in Karachi, Pakistan among 377 primigravida and multigravida females in the aim of compare their knowledge regarding complementary feeding practice, results indicated that compared to primigravida females, multigravida females had more statistically significant knowledge regarding complementary feeding practice (Junejo et al. 2019). Likewise, in a longitudinal study conducted in Brazil among 161 women to identify the influence of parity on breastfeeding and complementary feeding, findings indicate that even parity had influence on timing and initiation of breastfeeding, had no effect on introduction of complementary feeding (Neves et al. 2020). Similarly, in a community based cross-sectional study conducted among 325 Ethiopian mothers' results informed that mothers giving birth for the first time was a factor negatively associated with appropriate complementary feeding practice (Fanta and Cherie 2020).

In relation to mothers' level of education and its effect on their level of knowledge and practice regarding complementary feeding, in this study it is found that although, the percentage of mothers in high level of knowledge were ascended from the lower to higher level of education, the figure in mothers practice were totally opposite. In spite of, the association between level of education and mother's knowledge and practice were not significant. Same results were attained among Nigerian mothers as most of the mothers with low level of knowledge regarding complementary feeding were among higher educated mothers (Olatona et al. 2017). Contrary, in two Ethiopian studies to assess complementary feeding knowledge and practice, it was declared that education level of mothers had significant effect on mothers' knowledge and practice regarding complementary feeding. Moreover, in one of them it is

stated that "having no formal education were negatively associated with appropriate complementary feeding practice" (Fanta and Cherie 2020; Rumicha and Gemede 2021).

Concerning the effect of mother's wealthy index on their level of knowledge and practice regarding complementary feeding, in the present research study even there were somewhat effects, there was no significant association between them. In a cross-sectional multicenter study conducted in Brazil among 1567 children, results indicated that inappropriate complementary feeding were directly associated with unpaid maternal occupation and / or family monthly income less or equal to minimum wage (Dallazen et al. 2018). A community based cross-sectional study in which the data were taken from the 2015–16 National Family Health Survey in India was conducted among 69,464 mothers. Results illustrate that in the north and eastern India wealthy household index were significantly associated with complementary feeding practice (Dhami et al. 2019).

CONCLUSIONS

Following data analysis, it was exposed that the overall mother's knowledge was higher than practice. In relation to the level of knowledge and practice between primiparous and multiparous mothers, primiparous mother's knowledge was obviously higher than multiparous mothers. Contrary, multiparous mothers had more experience complementary feeding practice than primiparous mothers.

However, the differences between them were not statistically significant. In addition to that, there were no any significant association between mother's sociodemographic characteristics and their level of knowledge and practice. To sum up, mother's knowledge and practice regarding complementary feeding is not as high as attaining optimum child's nourishment status.

RECOMMENDATIONS

Depend on the finding of the study, it is recommended for the mothers to enrich their background information and knowledge regarding preparing and providing healthy food to their children. It is recommended for the ministry of health to work toward enhance mother's knowledge and practice regarding complementary feeding and its impact on the children's health.

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TABLES & Figures :

Table (1): Participant's sociodemographic characteristics

Variables	Categories	Frequency	Percentage
Parity	Primiparous	43	43%
	Multiparous	57	57%
Age of mothers	Less than 20	9	9.0%
	21-25	29	29.0%
	26-30	39	39.0%
	31-35	18	18.0%
	36-40	4	4%
	More than 41	1	1.0%
Type of family	Nuclear	80	80%
	Extended	20	20%
Mother education	Illiterate	9	9.0%
	Able to read and write	11	11.0%
	Primary school level	19	19.0%
	Secondary school level	25	25.0%
	Undergraduate certificate	36	36.0%
Family monthly income	insufficient	11	11.0%
	Barely sufficient	14	14.0%
	Sufficient	66	66.0%
	Highly sufficient	9	9.0%
Mother occupation	House wife	79	79.0%
	Employed	16	16.0%
	free job	5	5.0%

Table (2): Participant's response and mean of knowledge regarding complementary feeding

No.	Mother's Knowledge regarding complementary feeding	Disagree	I don't know	Agree
1.	Complementary feeding is the process of introducing solid and semi-solid foods to the child's diet with continued breastfeeding.	6	48	46
		6%	48%	46%
2.	Complementary feeding Should introduced to the child at the age of 6 months.	18	0	82
		18%	0.0%	82%
3.	Following 6 months of age, breast milk alone is sufficient no need for complementary feeding.	7	1	92
		7%	1%	92%
4.	Early introduction of complementary feeding leads to better growth and development.	35	7	58
		35%	7%	58%
5.	Early introduction of Complementary feeding leads to allergic reaction and increase risk of chocking.	27	11	62
		27%	11%	62%
6.	Introducing complementary feeding at appropriate time promoting adequate growth and development.	5	2	93
		5%	2%	93%
7.	Introducing complementary feeding at appropriate time reducing future chronic disease.	14	32	54
		14%	32%	54%
8.	Delaying in introducing complementary feeding leads to malnutrition.	22	4	74
		22%	4%	74%
9.	We should stop complementary feeding if the child refused.	51	4	45
		51%	4%	45%
10.	Complementary feeding composed of homemade foods.	20	2	78
		20%	2%	78%
11.	Complementary feeding composed of market foods.	6	7	87
		6%	7%	87%
12.	At 6 months the baby should has 2 meals per day with continue breastfeeding on demand.	26	3	71
		26%	3%	71%
13.	At 7-8 months the baby should has 3 meals per day with stooping breastfeeding.	22	2	76
		22%	2%	76%
14.	At 9-11 months the baby should has 3 meals and 1 snack per day with continue breastfeeding.	13	5	82
		13%	5%	82%
15.	At 12-24 months the baby should has 3 meals and 2 snacks per day with continue breastfeeding.	11	7	82
		11%	7%	82%
16.	Following 6 months, the baby should has foods with high energy such a rice, potato and corn.	10	0	90
		10%	0.0%	90%
17.	Foods that are rich of vitamin A+C and minerals such as banana, strawberry, watermelon, orange, Carrot, pumpkin, peaches and broccoli should not be given to a child following 6 months.	15	6	79
		15%	6%	79%
18.	Animal products such as Fish, meat, poultry, liver, egg and milk should be given to a child older than 6 months.	27	0	73
		27%	0.0%	73%
19.	Following 6 months of age a child should has cereals such as corn, pumpkin seeds, sunflower seeds, peanut, lentils, chickpea.	42	0	58
		42%	0.0%	58%
20.	Beverages such as coca cola, coffee and tea should be given to a child following 6 months of age.	12	2	86
		12%	2%	86%

Table (3): Participant's response and mean of practice regarding complementary feeding

No.	Mother's practice regarding complementary feeding	Never	Sometime	Always
1.	Do you prepare complementary feeding separately for your child?	2	53	45
		2%	53%	45%
2.	Do you add salt to your child's food?	34	47	19
		34%	47%	19%
3.	Do you use bottle to feed your child?	9	23	68
		9%	23%	68%
4.	Do you use Bowel & spoon to feed your child?	5	12	83
		5%	12%	83%
5.	Do you wash your hands before feeding your child?	0	21	79
		0.0%	21%	79%
6.	Do you wash and sterilize feeding utensils after use?	0	2	98
		0.0%	2%	98%
7.	Do you Increase quantity and frequency of complementary feeding with increasing age of the baby?	0	13	87
		0.0%	13%	87%
8.	Do you Increase quantity and frequency of complementary feeding during illness?	27	46	27
		27%	46%	27%

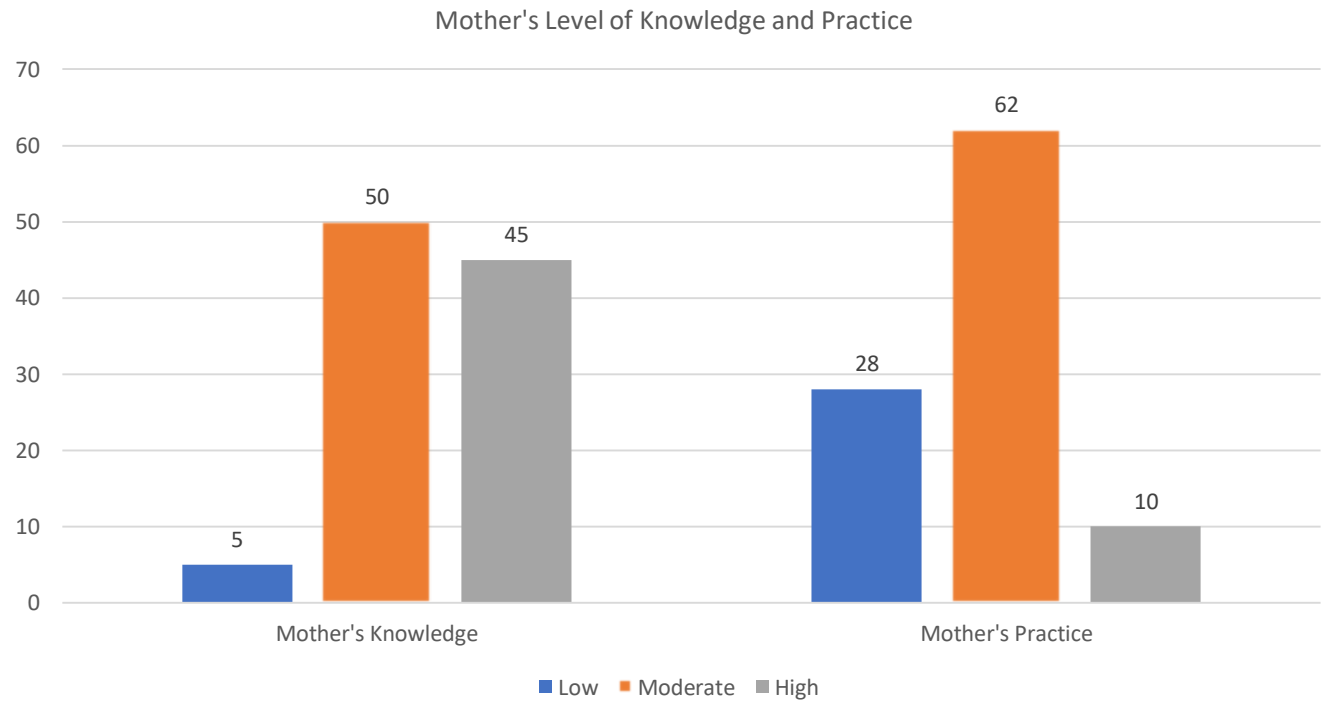

Figure (1): Mother's level of knowledge and practice regarding complementary feeding

Table (4): Association between mother's sociodemographic characteristics with their level of knowledge and practice regarding complementary feeding

Variables		Mother's level of knowledge			Mother's level of practice		
		Low	Moderate	High	Low	Moderate	High
Type of family	Nuclear	4	37	39	21	51	8
		5.0%	46.3%	48.8%	26.3%	63.7%	10.0%
	Extended family	1	13	6	7	11	2
		5.0%	65.0%	30.0%	35.0%	55.0%	10.0%
		P-Value = 0.305			P-value = 0.728		
Occupation	House wife	4	40	35	24	47	8
		5.1%	50.6%	44.3%	30.4%	59.5%	10.1%
	Employee	1	9	6	2	12	2
		6.3%	56.3%	37.5%	12.5%	75.0%	12.5%
	Self-job	0	1	4	2	3	0
		0.0%	20.0%	80.0%	40.0%	60.0%	0.0%
		P-Value = 0.574			P-value = 0.573		
Level of education	illiterate	1	6	2	1	8	0
		11.1%	66.7%	22.2%	11.1%	88.9%	0.0%
	Able to read and write	1	6	4	2	7	2
		9.1%	54.5%	36.4%	18.2%	63.6%	18.2%
	Primary school	0	11	8	6	11	2
		0.0%	57.9%	42.1%	31.6%	57.9%	10.5%
	Secondary school	2	11	12	8	14	3
		8.0%	44.0%	48.0%	32.0%	56.0%	12.0%
	Graduated	1	16	19	11	22	3
		2.8%	44.4%	52.8%	30.6%	61.1%	8.3%
		P-Value = 0.673			P-Value = 0.788		
Family monthly income	Insufficient	1	5	5	2	7	2
		9.1%	45.5%	45.5%	18.2%	63.6%	18.2%
	Barely sufficient	0	8	6	5	8	1
		0.0%	57.1%	42.9%	35.7%	57.1%	7.1%
	Sufficient	3	35	28	15	44	7
		4.5%	53.0%	42.4%	22.7%	66.7%	10.6%
	Highly sufficient	1	2	6	6	3	0
		11.1%	22.2%	66.7%	66.7%	33.3%	0.0%
		P-Value = 0.607			P-Value = 0.153		

Table (5): Primiparous and multiparous mothers level of knowledge regarding complementary feeding

Levels	Mother's level of knowledge regarding complementary feeding				P-Value
	Primiparous		Multiparous		
	Frequency	Percent	Frequency	Percent	
Low	1	2.3%	4	7.0%	0.195
Moderate	18	41.9%	32	56.1%	
High	24	55.8%	21	36.8%	
Total	**43**	**100.0%**	**57**	**100.0%**	
	Mean ± SD =15.09 ± 2.51		**Mean ± SD = 14.403 ± 2.68**		

Table (6): Level of practice and differences between primiparous and multiparous mothers regarding complementary feeding

Levels	Mother's level of practice regarding complementary feeding				P-Value
	Primiparous		Multiparous		
	Frequency	Percent	Frequency	Percent	
Low	11	25.6%	17	29.8%	0.701
Moderate	31	72.1%	31	54.4%	
High	1	2.3%	9	15.8%	
Total	**43**	**100.0%**	**57**	**100.0%**	
	Mean ± SD =5.00 ± 1.06		**Mean ± SD = 5.105 ± 1.53**		