

Trends and practices of weaning in infants across India: A comprehensive review

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ABSTRACT

Weaning is a critical phase in an infant's life, during which there is a transition from exclusive breastfeeding or formula feeding to consuming solid foods. Weaning is a critical step in determining a child's nutritional status, growth, and general health. India is a multiethnic and culturally diverse nation and has a variety of weaning practices that are affected by local customs, religious beliefs, and socioeconomic concerns. Malnutrition brought on by inadequate weaning methods used in infancy and early childhood may have an impact on cognitive, motor and social, development and productivity of the child, more importantly manifesting in later ages. Weaning customs in India have a long history of being ingrained in both family and cultural traditions. The variety of Indian cuisine is reflected in the meals that are offered to the infant during weaning. Homemade food commonly prepared like mashed fruits and vegetables, lentil soups, and rice porridge are the most popular. However, the inclination by parents toward professionally produced infant foods and formulas has increased because of urbanization and globalization; there have been observable changes in weaning practices over the past few decades because of changing lifestyles and easier access. These foods are frequently thought of as more convenient but may not be as nutrient-dense as homemade alternatives. Not following the medically recommended mandate of an exclusive diet of mother's breast milk to the infant, many parents often begin introducing complementary foods as early as four months. Still most concerningly also the timing of weaning commencement varies significantly across areas and communities. Overall, this review offers valuable insights into the current trends and practices of weaning in infants across India, underscoring the importance of culturally sensitive and informed strategies to ensure the well-being of the nation's youngest population.

Keywords: Breast feeding, breast milk feeding, formula, infant, malnutrition, weaning

Introduction

Weaning, the gradual introduction of complementary foods alongside breast milk or formula-made milk, plays a pivotal role in the nutritional transition of infants. It is an extremely significant dietary transition for the infant; the shift from a mother's milk-based diet to a more heterogenized food-based

diet, from exclusive breastfeeding to a diversified diet, the weaning, and the diet thereof plays a crucial role in shaping the growth, development, and health of the infants.

In the context of our country, the weaning practices need to be meticulously reviewed with special emphasis on our rural population awareness and, at the same time, overtly shifting global trends in our urban class. India is a country with an immense population spectrum ranging from the rural class to the sprawling metropolises of urban India. India, as a country, poses as a diverse and culturally rich nation, and its weaning practices exhibit a fascinating interplay of tradition, regional variations, religious practices, and contemporary influences.

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The first traces of the word “weaning” can be found in the languages of Anglo-Saxon origins; they used the term “Wenian,” which literally translates into “becoming used to or accustomed to something different.”^[1] Weaning actually means introducing foods into the diet of an infant apart from breast milk,^[2] for infants, irrespective of the availability of various supplements, breastmilk is the most ideal.^[3]

As per the universal recommendations, in the first 6 months after birth, the infant needs to be given only breast milk without any supplementations like solids, or semi liquids, or formulas.^[4] Subsequently, there needs to be a conscious and yet gradual shift in diet, keeping in mind that the entire dietary mapping for the infant both in the initial and the later 6 months, will be a major factor affecting the growth and development of the infant. The first six months of breastfeeding, the time till weaning, and the standard of complementary foods during weaning all substantially impact the child’s eating habits and overall health. However, parents from lower socioeconomic strata, or with limited awareness and education, and those who live in remote places with little access to healthcare do not have sufficient awareness of weaning practices and infant nutritional needs. Weaning is a critical phase in a child’s development, and understanding the diverse approaches to weaning by parents is essential for health professionals, policymakers, and caregivers alike; it is in the first 6 months that the infant gains immunity from breastfeeding. The infant’s physical and mental health can be impacted by improper diet, which increases the risk of developing irreversible cognitive damage. After 6 months, the child is given additional meals to help them meet their growing nutritional needs for growth and development. Additionally, the inadequate nutritional value of complementary foods puts children at risk for immune system deficiencies, neurological deficits, cardiovascular disorders, and stunted growth. Complete change in the infant’s diet that is either complete cessation of mother’s milk or complete transition into the weaning (supplements apart from breast milk) should always be carried out and accomplished gradually over a prolonged period of time, and preferably baby-led.^[5] Mothers must increase their knowledge due to the significance of complementary foods and the need for defined guidelines on their composition and quality. Recent studies have demonstrated the benefits of nutrient-rich complementary foods in the growth of a healthy gut microbiome and respiratory system. The time until weaning, the kind of complementary feeding, and the cessation of breastfeeding vary with different social, cultural, economic, and geographic trends worldwide.

Weaning practices in India have advanced significantly from being solely dependent on traditional customs to being influenced by advice supported by scientific research. Government initiatives, health organizations, and community stakeholders have all helped to increase public understanding of the significance of ideal weaning procedures. India is cultivating a healthier and more robust next generation by feeding infants nutritional foods during this critical moment, paving the way for a better future for the country.

The review attempts to put a spotlight on the indigenous practices and trends in our ever-growing population and dwells into the entire spectrum of practice across the landscape, aiming specifically at the weaning practices, awareness, and factuality across different states and communities in India. It explores the many facets of infant weaning practices used all over India. It seeks to gain an understanding of the elements that influence the weaning journey of Indian children by examining historical influences, cultural variety, regional variances, and modern trends. In addition, this study will look at how well government programs, health awareness campaigns, and official health advice have promoted ideal weaning practices.

Historical Overview

An examination of the development of weaning practices in India throughout the years reveals a rich tapestry of various feeding customs. Cultural values, local customs, and the accessibility of locally produced food all influenced these practices.

India’s weaning customs have a long history that dates to ancient and medieval times. Weaning typically begins when the mother finds the infant apt to be prepared to consume solid meals because nursing is the preferred method of baby feeding. Complementary foods were gradually introduced, frequently beginning with straightforward, easily absorbed foods prepared from grains and fruits. In many cultures, the idea of the “annaprashan” or “mukhe bhaat” (rice feeding) ceremony was crucial during the weaning process. This ritual marked the child’s transition to eating solid meals by introducing them to solid foods, specifically rice, in front of family and friends.

The traditional Indian medical system of Ayurveda also significantly influenced how weaning practices were carried out. The use of natural, easily digestible foods during weaning was emphasized in Ayurvedic writings that offered advice on the best foods for infants. Certain meals may help the baby’s development and health during this crucial period. Weaning practices have seen modifications and modulations over the period of time with the arrival of colonial administration and the age of urbanization trends ushering in. The advent of processed and packaged meals and Western dietary trends altered traditional feeding practices specifically in urban settings.

However most consciously following independence, the Indian Government established several health and nutrition programs after realizing the value of newborn nutrition. By offering mothers and other career support and instruction, these programs are intended to enhance weaning procedures. The emphasis moved to encouraging optimal nursing and timing the introduction of complementary foods.

Recommended Practices for Weaning

Timely Introduction of Complementary Foods: Complementary foods should be introduced at the appropriate time, often about

six months of age, while breastfeeding is still being provided. Health authorities advise exclusively breastfeeding for the first 6 months, followed by the progressive introduction of nutrient-rich solid foods [Table/Figure 1]. One such organization is the Indian Academy of Pediatrics (IAP).

Use of Locally Available Foods: Using locally obtained, nutrient-rich foods in an infant's diet during weaning is common among parents. By ensuring that the child consumes a variety of vital nutrients from locally accessible sources, this practice encourages sustainable and culturally appropriate eating habits.

Emphasis on Homemade Foods: Many families prefer homemade cuisine during the weaning process. Parents frequently create mashed or pureed foods at home by eliminating commercially prepared infant foods and snacks. With this strategy, it is possible to have more control over the components and provide the baby with more recent and healthy options.

Continued Breastfeeding: Breastfeeding is still advised during the weaning process, even though complementary foods are being introduced. Breastfeeding is recommended for mothers whenever they feel like it or at least until the child is 2 years old since it gives the child vital nutrients and immune support.

Awareness of Allergenic Foods: To lower the chance of allergies later in life, it is becoming more common knowledge to introduce potentially allergenic foods, such as peanuts and eggs, early during weaning. This practice follows global recommendations that urge early exposure to allergic foods.

Nutrition Education and Counseling: Parents can benefit significantly from nutrition education and counseling from healthcare experts, such as pediatricians and community health workers. They provide advice on age-appropriate supplementary foods and assist in resolving typical weaning-related worries.

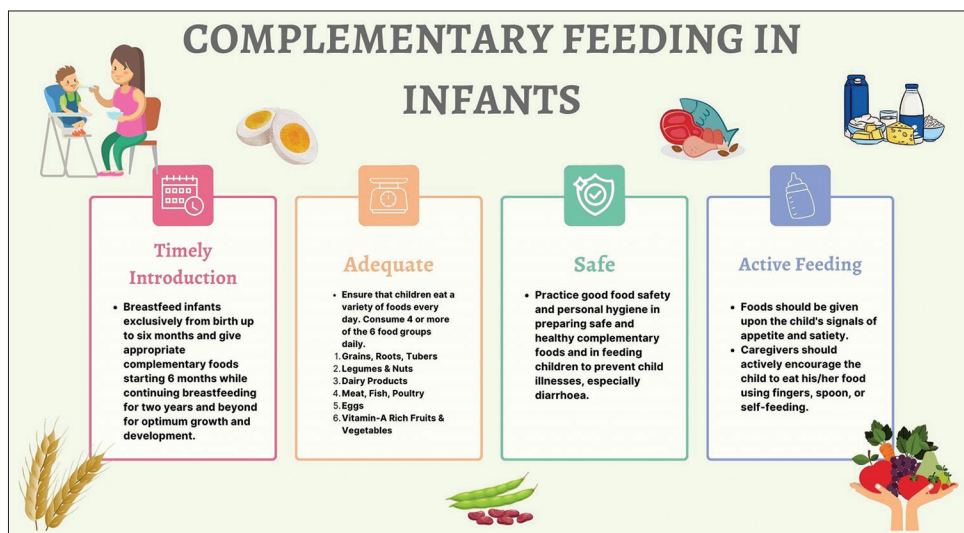
Use of Nutritional Supplements: In some circumstances, healthcare professionals might suggest dietary supplements, such as iron or vitamin D, to ensure newborns obtain enough nutrients throughout the weaning stage, mainly if there are concerns about the child's diet.

Regional Variations in Practicing of Weaning

India's diversified culinary habits and rich cultural variety are reflected in the nationwide regional variations in weaning practices. India's states and regions have distinctive methods for weaning newborns onto complementary foods. For example, rice-based porridge, or "kanji," is still a common choice in South India during weaning, although North Indian households frequently choose mashed lentils and fruits. Foods based on seafood may be consumed in coastal regions, whereas grains and vegetables that are readily available locally are prioritized in inland places. The age at which weaning is initiated also varies, with some communities following the advised age of six months while others start weaning as early as four to five months. Cultural norms and traditions are essential, and some societies hold ceremonies to commemorate the debut of solid foods.

Weaning practices can be impacted by region's access to healthy foods; these locations often struggle to provide a well-rounded diet. Socioeconomic considerations may affect customs since families from different socioeconomic strata may base decisions on their access to resources and cultural expectations. Weaning practices vary by area. Thus, providing culturally appropriate and specialized nutrition information and counseling is essential. Understanding these various practices can assist medical professionals and decision-makers in creating focused interventions to support ideal weaning practices and improve the nutritional well-being of infants across India.

Most of the communities give their infants the common staple food produced in their part of the world, which is usually in the



Table/Figure 1: A guide to successful complementary feeding in infants

form of porridge; the porridge is usually of soft consistency and creamy in texture, and most of the composition consists of starch. This particular form of porridge is based invariably upon the local availability of staple food like rice (most common globally, wheat maize, cassava yam, and potato).^[6-9]

Factors Influencing Weaning Practices

Infant weaning practices are impacted by various variables that differ between countries and societies. The introduction of complementary foods is significantly influenced by cultural beliefs and customs and how and when they are offered. Socioeconomic factors are also important because families with higher resources may have access to a broader range of commercial infant goods and wholesome foods. Weaning may be impacted by a region's access to nutrient-rich meals, mainly with a few diverse food options. Parent's health awareness and education are essential because informed decisions about infant nutrition can result in the best weaning procedures. Weaning decisions are also influenced by advice from healthcare providers, family and social networks, urbanization, and media and marketing exposure. Weaning practices are also heavily influenced by worries about food allergies and the child's readiness for development. Understanding these elements can help encourage good infant weaning practices in various societies.

Role of Government Initiatives

The government's participation in weaning practices is diverse and crucial for all infants nationwide to have the best nutrition and health. Governments are crucial in developing policies, implementing plans, and supporting parents during the weaning process. One of the government's primary responsibilities is disseminating recommendations and information on weaning techniques based on solid research. Collaboration between health authorities and nutritionists results in thorough recommendations for complementary feeding practices, introducing nutrient-dense foods, and the value of continuing breastfeeding during weaning.

Campaigns for health education and awareness are a crucial component of government initiatives. Governments communicate with the public through various media, including print, radio, television, and social media, to inform parents about the importance of weaning and raise public awareness. These programs target a varied population and address regional variances in weaning practices while being culturally and linguistically respectful.

To provide mothers and infants with high-quality healthcare services during the weaning period, governments also invest in the healthcare system's infrastructure. Healthcare specialists provide routine check-ups, growth monitoring, and dietary counseling to assist parents in making educated decisions about weaning. These programs ensure parents get individualized advice and take care of any issues they might have. The government has developed nutrition programs and subsidies to provide access

to nutrient-rich foods during weaning. These programs seek to lessen the financial strain on families, particularly those from economically disadvantaged backgrounds, and increase access to nutrient-rich meals for infants. The government encourages research and surveillance on weaning practices to understand better ideal feeding practices and their effects on children's health. Governments add to the corpus of knowledge that informs weaning-related policies and actions by funding research. To efficiently conduct weaning-related programs, the government works with non-governmental organizations (NGOs), foreign organizations, and other stakeholders. These collaborations use knowledge and assets to reach a larger audience and fully solve weaning issues. To guarantee that commercial baby foods fulfill the correct nutritional requirements and give parents and carers accurate information, governments may also control the marketing and labeling of these foods. This promotes customer safety and guarantees the availability of wholesome weaning options.

In conclusion, the government's involvement in weaning practices is essential for advancing scientifically supported feeding practices, supplying parents and carers with information and resources, and promoting baby health and well-being nationwide. Governments have a vital role in assisting families in providing optimal nutrition for their infants throughout the crucial weaning time through education, guidelines, healthcare services, research, and cooperative efforts.

Health Awareness Campaigns and Behavior Change Communication

Promoting healthy behaviors and enhancing public health outcomes requires health awareness efforts and behavior change communication. These programs aim to spread knowledge, educate the public, and inspire people and communities to adopt healthier lifestyles. Health awareness campaigns and behavior change communication are crucial for encouraging appropriate nutrition throughout this crucial stage of a child's life in the context of newborn weaning practices. Health awareness campaigns spread important messages regarding weaning and child nutrition through various media, including television, radio, print, social media, and community events. These initiatives frequently aim to reach a large audience and focus on parents and local community members. The messages are developed to be linguistically acceptable and culturally sensitive to appeal to the local populace. These campaigns incorporate behavior change communication tactics to encourage and support people in improving their behaviors. These tactics center on comprehending the obstacles and enablers to adopt desirable behaviors and then customizing communication to deal with these elements. For instance, behavior change communication may clarify widespread myths about weaning, offer helpful advice for introducing complementary foods, and stress the advantages of breastfeeding throughout weaning. The success of behavior change communication and health awareness initiatives depends on several variables. To guarantee that people receive

accurate and scientifically supported information, clear and consistent messaging is crucial. Participation of dependable community leaders, medical experts, and regional influencers can improve the messaging's credibility and boost campaign participation.

Additionally, participatory and interactive behavior change communication strategies might increase effectiveness and help foster a sense of ownership in adopting healthy behaviors among parents, the initiatives offering practical weaning practice demonstrations and addressing their unique concerns. Monitoring and evaluating behavior change communication and health awareness initiatives is essential to determine their impact and make the required adjustments. Weaning practices-related knowledge, attitudes, and behaviors can be monitored through regular feedback and data collecting. Campaign strategies can be improved to achieve optimal efficacy based on the results.

Guidelines from Health Authorities

To guarantee an infant's ideal nutrition and development during this essential stage, parents and healthcare professionals must rely heavily on guidelines from health authorities for weaning in India. The Indian Government has created evidence-based recommendations that align with global recommendations in collaboration with health organizations, including the World Health Organization (WHO), UNICEF, and the IAP. One of the main recommendations stresses the value of exclusively breastfeeding a baby for the first 6 months. Essential nutrients and immune support are provided by breast milk, promoting a child's healthy growth and development. After 6 months, complementary foods are progressively introduced, and breastfeeding is kept until the child is 2 years old or older.

As per the international WHO guidelines, an infant should ideally have meals four to five times a day long with certain additional food items, which can also be added apart from one to two nutritional snacks. The number of snacks and the frequency also depend on the nutritional value of the snacks.^[10]

At roughly 6 months, when the infant's nutritional requirements start to outpace what breast milk alone can give, the recommendations emphasize the timely introduction of complementary foods. The initial foods advised are simple to digest and high in nutrients like pureed fruits, vegetables, grains, and pulses. To lower the chance of allergies, allergenic foods like peanuts and eggs are suggested to be introduced early during weaning, at around 6 months.

The guidelines advise parents to prioritize hygiene and food safety during weaning and suggest specific foods. The rules stress the importance of washing produce thoroughly, keeping utensils clean, and ensuring proper food preparation and storage. The recommendations also acknowledge the value of varied foods during weaning to give a variety of nutrients. It is encouraged to include readily available, nutrient-rich foods from the local area

because regional and cultural differences in food preferences are recognized.

By following these evidence-based recommendations, parents may confidently manage the weaning process and offer their infants the best possible start for nutrition and overall health. Healthcare professionals are essential in spreading and enforcing these recommendations, offering guidance and assistance to parents, and ensuring the young people of India experience healthy growth and development. The WHO guidelines state that the recommended feeding for infants up to 6 months should be purely breast milk-fed diet, and subsequently, the American Academy of Pediatrics (AAP) also recommends starting up gradual weaning post 6 months of age.^[10]

Challenges and Barriers to Optimal Weaning

Infant weaning presents several difficulties and obstacles for parents and healthcare organizations. The lack of awareness and understanding about the best weaning procedures is one of the main problems. The ideal age to introduce complementary foods and the kinds of nutrient-rich foods that should be a part of the infant's diet may not be known by many parents. This ignorance may result in the early introduction of solid foods, making poor food choices, or leaving out necessary nutrients from the diet.

Traditional ways of thinking and cultural norms can sometimes be obstacles to effective weaning. The introduction of solid foods may be accompanied by certain practices or rituals that vary by community and may not follow evidence-based weaning recommendations. It takes culturally aware and specialized health education and communication tactics to get beyond these cultural hurdles.

Weaning practices can also be influenced by socioeconomic circumstances. Families with low finances could find it difficult to wean their infants onto a varied and nutrient-rich diet. The quality of the child's diet during this time can be influenced by the price of nutrient-dense foods and the cost of commercial baby goods.

Another big obstacle is having access to healthy foods, particularly in remote or underdeveloped places. A monotonous and less nutrient-dense diet during weaning may result from a lack of access to a variety of foods. To overcome this obstacle, food insecurity must be addressed, and the availability of cheap, nutrient-rich foods must be improved.

Parents may also be perplexed by contradicting information from many sources, including the media, family members, and online forums, making it challenging to decide on weaning. The need for clear and consistent communication from reliable health authorities cannot be overstated.

To overcome these obstacles and problems, cooperation is crucial. To promote health education, offer targeted assistance to

vulnerable groups, and address geographical inequities in access to nutrient-dense foods, governments, healthcare professionals, community organizations, and NGOs can collaborate. Additionally, spending money on weaning practice research and monitoring can help inspire evidence-based treatments and policies that encourage the best weaning practices and assist parents in giving their infants the greatest nutrition available.

Cultural Perspectives and Traditions

Weaning practices vary significantly among communities and geographical areas due to cultural perceptions and customs. The transition from breastfeeding or formula feeding to weaning is an important developmental milestone for infants, and cultural beliefs and conventions can affect how and when complementary foods are introduced.

Weaning is a significant event and a rite of passage in many cultures. The introduction of solid foods may be marked by certain rituals or ceremonies that represent the child's development and move toward independence. These profoundly significant cultural customs are frequently carried out with extended family participation, fostering a sense of support and community around the child's weaning process.

Cultural customs and dietary choices can have an impact on the kinds of meals that are introduced during weaning. Traditional recipes handed down through the centuries are valued around this time in several societies. These dishes frequently emphasize locally grown and nutrient-dense ingredients, reflecting the local cuisine's history.

Cultural perceptions of nursing may influence weaning. There may be a desire for continuing breastfeeding alongside supplemental eating, even after age two, among cultures that place great value on and prioritize breastfeeding. On the other side, cultural practices that link early weaning with breastfeeding may be the result.

Many cultures prioritize consulting family members and elders when making decisions about childcare. Parents frequently respect and act on their knowledge of weaning procedures. However, if more ancient customs collide with the most recent evidence-based weaning recommendations, this could contradict knowledge and practices.

Food preferences during weaning may also be influenced by cultural norms about introducing foods and their symbolic meaning. For instance, certain foods may be seen as auspicious in some cultures and historically offered to infants during the weaning ritual.

Weaning practices are made richer and deeper by cultural viewpoints and traditions. However, it is vital to balance cultural tradition and evidence-based health advice. In addition to giving accurate and current information on the best weaning techniques,

healthcare practitioners play a crucial role in recognizing and respecting cultural views. Parents can be empowered to make educated decisions via culturally sensitive health education and counseling, ensuring that cultural traditions align with the best nutrition for the child's healthy growth and development. Incorporating cultural perspectives into evidence-based weaning recommendations can result in a harmonious strategy honoring various traditions while putting infants' well-being first throughout this critical developmental stage.

Comparison with International Weaning Practices

Weaning habits vary considerably between nations and cultures, reflecting the various cultural traditions, dietary practices, and worldviews. Some obvious distinctions and parallels exist between Indian weaning practices and international methods.

The timing of weaning commencement is one of the most significant variances. According to recommendations by the WHO and other health authorities, supplemental food should begin at 6 months in India. This pattern aligns with global standards that stress the value of 6 months of exclusive breastfeeding.

Complementary meals may be introduced earlier in some nations, with customs varying from 4 to 6 months or earlier in some cultures. A child's perceived readiness for solid foods or cultural beliefs may impact the reasons for early weaning.

Based on local dietary customs and cultural preferences, complementary food provided during weaning can vary between nations. For instance, some nations might strongly emphasize porridge made from rice, while others might introduce dishes made from animals or various kinds of fruits and vegetables. These variations emphasize the importance of culturally appropriate weaning techniques, including readily available, nutrient-rich meals from the local area.

Another area of diversity is the practice of continuing to nurse when weaning. The duration of breastfeeding may vary across nations depending on cultural customs and attitudes regarding breastfeeding after infancy, even though international recommendations urge continuous breastfeeding until the age of two or beyond.

Additionally, there are regional differences in how allergenic foods are handled during weaning. To lower the likelihood of allergies, some nations promote the early introduction of allergenic foods, but others may take a more careful approach and wait until the infant is older before doing so. Despite these variations, weaning practices throughout the world share some commonalities. International recommendations emphasize the significance of introducing complementary meals gradually, maintaining responsive feeding practices, and offering infants a varied and nutrient-rich diet at this time.

In conclusion, compared to foreign methods, weaning practices in India show parallels and variations. The primary objective, to ensure newborns obtain the nourishment they need to grow and develop healthily, may vary depending on the timing and types of meals provided. Promoting evidence-based weaning recommendations while acknowledging and respecting various cultural viewpoints helps ensure good nutrition and the general well-being of newborns worldwide. Weaning has its own risks and demerits; the infants can fall sick if the diets are not up to the expected nutritional levels or prepared under hygienic conditions. Another important aspect of weaning is the education status of mothers, which can directly impact the practices of weaning.^[11]

Role of Healthcare Professionals in Promoting Optimal Weaning

Healthcare professionals promote the best weaning practices for newborns. They are invaluable tools for parents during this crucial time in a child's development since they are dependable sources of knowledge and advice. First, medical professionals offer evidence-based information regarding weaning, such as the right age to begin supplemental feeding, the foods to introduce, and the significance of continuing breastfeeding. They address any worries or misunderstandings parents could have, ensuring they are well-informed about choosing the proper nutrition for their child.

Additionally, healthcare specialists provide individualized counseling to each child's and family's needs. When making weaning suggestions, they consider the child's growth and developmental milestones, current health issues, and cultural beliefs. This individualized strategy encourages parents to follow weaning recommendations by fostering a sense of trust and teamwork between healthcare experts and parents.

During the weaning process, medical personnel also monitor the child's growth and development to spot any signs of malnutrition or eating difficulties. They can handle any problems immediately and change the weaning plan, if necessary, thanks to routine check-ups.

Additionally, medical personnel are well-equipped to handle difficulties that could develop during weaning. For instance, they can advise on handling food allergies, introducing potentially allergic foods carefully, and dealing with typical feeding issues like finicky eating.

In addition to their clinical responsibilities, healthcare professionals often function as more significant advocates for the best weaning procedures. To spread the word about the value of weaning and newborn nutrition, they can participate in health education campaigns, hold workshops, and work with neighborhood organizations.

Overall, there are many ways that healthcare experts can encourage the best weaning techniques. Their knowledge,

direction, and encouragement enable parents to offer newborns the most significant nutrition possible during this crucial stage, promoting healthy growth and development and setting the groundwork for lifelong wellness.

Discussion

By synthesizing existing literature, we seek to provide insights into the cultural nuances, socioeconomic factors, and health implications that shape the weaning journey for infants in this dynamic and evolving nation. Understanding the diverse approaches to weaning in India is not only crucial for promoting optimal child health but also for informing policies that align with the diverse needs of the population. As a country with a rich tapestry of traditions and customs, India exhibits a multitude of weaning practices that vary significantly from region to region. Against the backdrop of the World Health Organization's guidelines on optimal infant feeding practices, the review navigates through the challenges and opportunities that exist in aligning traditional weaning practices with contemporary nutritional recommendations. The review seeks to address the evolving landscape of weaning practices in India, considering the impact of urbanization, globalization, and changing lifestyles on parental choices and infant nutrition.

Weaning practices in India are deeply rooted in diverse cultural traditions, resulting in a mosaic of approaches. The review highlights the significance of rituals and beliefs associated with the introduction of complementary foods. From region to region, variations in early feeding customs underscore the need for culturally sensitive guidance to optimize infant nutrition.

The historical context reveals a dynamic evolution in weaning practices. Traditional methods have often coexisted with influences from globalization and urbanization, leading to a blend of old and new feeding practices. Understanding this historical trajectory aids in contextualizing current weaning behaviors and identifying potential areas for intervention. The review emphasizes the role of indigenous foods in weaning practices. It explores the nutritional value of locally available foods and their cultural importance. Integrating traditional knowledge with contemporary nutritional science is crucial for promoting a balanced and culturally relevant weaning diet. Socioeconomic factors significantly impact weaning practices, with disparities in access to resources and healthcare playing a pivotal role. The challenges faced by caregivers, including economic constraints, limited awareness, and the influence of marketing practices, need to be addressed. Addressing these challenges is imperative for promoting equitable and optimal weaning practices across diverse socioeconomic strata.

The alignment or divergence between culturally rooted weaning practices in India and global recommendations on infant nutrition is the most important need of the day. Identifying areas of convergence and discordance allows for the development of targeted interventions that respect cultural diversity while

ensuring adherence to evidence-based guidelines. The insights gained from this review hold implications for health interventions and policy formulation. Tailoring strategies to the cultural context, promoting community engagement, and integrating traditional knowledge into health programs are crucial steps toward fostering optimal weaning practices in India.

Conclusion

In conclusion, weaning is a critical developmental stage for infants, and its successful implementation necessitates a comprehensive strategy that considers societal attitudes, governmental programs, and the involvement of healthcare professionals. Weaning customs are given depth and meaning by cultural beliefs and traditions, representing each community's history. Government involvement is essential for arming parents with information and tools for successful weaning through health awareness campaigns, regulations, and nutrition programs. Healthcare professionals are helpful mentors who offer parents evidence-based information and individualized counseling to support them as they wean their children. Healthcare providers can assist families in making well-informed decisions that put the child's nutrition and well-being first by balancing cultural practices and evidence-based recommendations. Cooperation between governments, medical professionals, and community stakeholders is essential to provide a welcoming atmosphere for families throughout the weaning stage. We may create health education efforts that are culturally responsive and address regional differences and obstacles in weaning practices by combining our resources and knowledge. The future growth and health of the kid are significantly impacted by the implementation of weaning practices. It establishes the groundwork for growth, development, and cognitive growth. Every child is given the best possible start in life with the help of a harmonious strategy that incorporates cultural viewpoints and standards based on scientific research.

As we proceed, let us appreciate the rich cultural tradition of weaning while utilizing scientific understanding to encourage newborn nutrition that is at its best. Together, we can raise a generation of happy, healthy, and successful people who will improve our communities and societies. We invest in a future

where everyone is healthier, happier, and more affluent by taking care of our newest generation during this crucial stage of life.

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