Characteristics	Modalities
Youngest child's characteristics	
Sex	Female; male
Age	<12 months; 12-23 months; 24-35 months; \geq 36
	months
Born pre term	Yes (birth at 36 weeks or less); no (birth at 37
	weeks or more)
Have or had a medical condition	Yes (for example gastroesophageal reflux treated
affecting the diet	by medication, allergy to cow's milk protein,
	nasogastric intubation or digestive tract congenital
	defects); no
Eating food other than milk	Yes (CoF started); no (CoF had not started yet)
Parental demographic and socioecon	
Sex	Female; male
Age	<35 years old; \geq 35 years old
Education level	\leq A level (did not attend university); \geq A level
	(attended university).
Socio-professional category of the	High (Self-employed business owners, Executive,
interviewed parent	Intermediate); Low (Manual worker, Office
	employee); no occupation/retired.
Parity	Primiparous (1 child 0-3 years old); Multiparous
	(>1 child, the youngest child is 0-3 years old)
Mother tongue	French; other
Household characteristics	
Self-perception of financial situation	Good (I am comfortable, I am OK?); difficult (ok
	but I need to be careful, difficult to get the end of
	the month, I cannot make it without debts); no
.	answer
Living area	Rural (<20000 inhabitants); urban (>20000
	inhabitants)
Socio-professional category of the	High (Self-employed business owners, Executive,
household reference parent †	Intermediate); low (Manual worker, Office
	employee); no occupation/retired.

Supplement Material 1. Studied characteristics, questions and their modalities.

Perceptions of IYCF (including CoF) (the following statements were presented and answers were recorded on a 4-point Likert scale grouped in agree and disagree for the analysis)

(the definition of CoF was given to parents when they had to answer a question related to that)

1)	CoF for my youngest child is	Strongly agree; Tend to agree (=Agree); Tend to
	going or went well	disagree; Strongly disagree (=disagree)
2)	It is easy to find information on	Strongly agree; Tend to agree (=Agree); Tend to
	IYCF (including CoF)	disagree; Strongly disagree (=disagree)
3)	CoF is easier for my last child	Strongly agree; Tend to agree (=Agree); Tend to
	than for the first one(s) (only	disagree; Strongly disagree (=disagree)

multiparous)

4)	CoF for my last child is or it has	Strongly agree; Tend to agree (=Agree); Tend to
	been source of concern	disagree; Strongly disagree (=disagree)
5)	IYCF is important for the	Strongly agree; Tend to agree (=Agree); Tend to
	present and future health of my	disagree; Strongly disagree (=disagree)
	child and for his/her growth	
6)	IYCF is important for the	Strongly agree; Tend to agree (=Agree); Tend to
	establishment of good eating	disagree; Strongly disagree (=disagree)
	habits	

Perceptions of IYCF information (including CoF) (the following statements were presented and answers were recorded on a 4-point Likert scale grouped in agree and disagree for the analysis)

of the analysis)		
7) I feel well informed about IYCF	Strongly agree; Tend to agree (=Agree); Tend to disagree; Strongly disagree (=disagree)	
8) I am satisfied with the available	Strongly agree; Tend to agree (=Agree); Tend to	
information on IYCF (including CoF)	disagree; Strongly disagree (=disagree)	
9) The available information on	Strongly agree; Tend to agree (=Agree); Tend to	
IYCF (including CoF) answers to my questions	disagree; Strongly disagree (=disagree)	
10) The available information on	Strongly agree; Tend to agree (=Agree); Tend to	
IYCF (including CoF) is clear, easy to understand	disagree; Strongly disagree (=disagree)	
11) The available information on	Strongly agree; Tend to agree (=Agree); Tend to	
IYCF (including CoF) is easy to put into practice	disagree; Strongly disagree (=disagree)	
12) The available information on	Strongly agree; Tend to agree (=Agree); Tend to	
IYCF (including CoF) is contradictory	disagree; Strongly disagree (=disagree)	
13) The available information on	Strongly agree; Tend to agree (=Agree); Tend to	
IYCF (including CoF) is giving	disagree; Strongly disagree (=disagree)	
me the perception of not		
implementing correctly IYCF		
nformation sources used by parents (multiple choice answer; if parents choose the main		

Information sources used by parents (multiple choice answer: if parents choose the main source on the left column they had the possibility to select between the options on the right column) **and how strongly the sources influenced parents in making decisions in feeding their youngest child** (linear scale from 1 to 10: 1 means the source did not influence decisions at all and 10 means it influenced decisions very strongly).

decisions at an and to means it influenced decisions very strongry):	
Health care professionals	Pediatricians; General practitioners; Midwives;
	Pediatric nurses; Dieticians
Internet, social networks or applications	Website specialized in early childhood; Blogs or
for smartphones	forums for parents; Website specialized in health;
	Websites of baby food manufacturer/industries;
	Health authority website; Social networks;
	Applications for smartphones; Health insurance
	websites

Parents' network	Own parents; Friends; Own grandparents; Other family's members
Paper tools Early childhood professionals	Books; Printed media, newspapers, magazines Social service for mothers ("Personnel de PMI");
Early enhanced professionals	Licensed childminder
Media	Television, radio

Type of information sought by parents (multiple choice answer: if parents choose the main topic on the left column they had the possibility to select between the options on the right column)

columny	
Menus, recipes	Example of menus
	Example of recipes
Age and modalities of introduction of	Different food groups
	First food pieces
	First foods other than milk
Feeding strategies	How to present food in case of food refusal
	How to deal with little appetite of the child
	How to deal with big appetite of the child
Portions sizes	Portions sizes of food
	Adapt milk quantities when introducing other
	foods
How to feed a child to promote the development of healthy eating habits	

How to interpret the child hunger's and satiation's cues

IYCF, infant and young child feeding. CoF, complementary feeding. HCPs, health care professionals. † i.e., the parent with the highest income.