

The Relationship between Mother's Knowledge and Attitudes and Giving Early Complementary Breastfeeding at UPTD Boronadu Health Center South Nias Regency in 2022

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ABSTRACT

Giving complementary breastfeeding too early is one of the inhibiting factors for exclusive breastfeeding. The results of a preliminary survey conducted at the UPTD Health center Boronadu South Nias Regency where interviews were conducted with mothers and it was found that 8 mothers did not know that babies should only be given breast milk until they were 6 months old and they agreed that babies less than 6 months old were given additional food other than breast milk such as bananas, tea, formula milk and other foods. This study aims to determine the relationship between knowledge and attitudes of mothers regarding early complementary breastfeeding at the UPTD Health center Boronadu South Nias Regency in 2022. This study was an analytic observational study with a cross sectional design. The population is all mothers having babies more than 6 months at the UPTD Health center Boronadu South Nias Regency, namely 118. The number of samples based on the sample formula is 48 people. There is a significant relationship between the knowledge ($p=0.022$) and attitudes ($p=0.006$) of postpartum mothers and the provision of early complementary breastfeeding in the UPTD Work Area of the Boronadu Health Center in 2022. It is also hoped that health workers at the UPTD Boronadu Health Center will be able to further increase public knowledge regarding complementary breastfeeding and increasing its role in efforts to achieve exclusive breastfeeding through counseling, which can be carried out at village meetings, posyandu and counseling during pregnancy checks.

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1. INTRODUCTION

The World Health Organization has declared that breast milk is the right and suitable food for the growth and development of babies around the world. However, giving baby complementary food before reaching the age of 6 months and above will have a very detrimental effect on the baby. Exclusive breastfeeding for infants (< 6 months) makes a major contribution to reducing infant mortality. On the other hand, giving additional food too early will increase the risk of developing both infectious and non-infectious diseases for the baby (Jummiyati, 2017).

One of the effects of inappropriate complementary feeding is the occurrence of digestive disorders such as diarrhea, because the baby's digestive system will mature and work optimally when the baby is 4-6 months old. Five provinces in Indonesia that have a high incidence of diarrhea are

West Kalimantan (13.1%), NTB (13.4%), Bengkulu (13.8%), Papua (13.9%) and the highest is in North Sumatra 14, 2 %) (Profil Kesehatan Indonesia, 2019).

Giving complementary breastfeeding too early is one of the inhibiting factors for exclusive breastfeeding. The results of a previous study by Fitriana et al in Gowa in 2013 showed that mothers' knowledge about the proper time to give complementary breastfeeding was still lacking, namely only 23.4% in the good category. In fact, this is very important for a mother to know because it involves the baby's digestive system. A baby's digestive system matures at around 6 months of age. And in fact, the practice of giving early complementary foods before the age of six months is still widely practiced in developing countries like Indonesia. This will have an impact on the high incidence of infections, such as diarrhea, respiratory infections, allergies, and growth disorders.

Meanwhile, good and appropriate feeding practices are very important for the survival, growth, development, health and nutrition of infants and children. At present there has been a lot of promotion of exclusive breastfeeding which is the best start for a child's life. However, the provision of complementary breastfeeding is not optimal, this is indicated by the occurrence of growth disturbances at the age of 6 months. If infants and children aged 6–24 months do not get enough nutrition from complementary breastfeeding, this will result in growth disturbances and malnutrition. Therefore, to overcome the problem of malnutrition, it is necessary to improve the quantity and quality of complementary breastfeeding given to babies (Irianto, 2017).

According to the results of Riskesdas (2018), the number of malnourished and under-five children in Indonesia is still 19.6%, an increase compared to 2010 which was 17.9%. And in South Sulawesi, the number of under-fives with malnutrition is 25.9%. When compared with the target of the National Long Term Development Plan (RPJMN) for the Health Sector, which is as high as 15.5%. Meanwhile, the percentage of very short and stunted toddlers in Indonesia is still high at 37.3% and has not decreased compared to the previous year. The data also has not reached the target of the RPJMN to reduce the prevalence of short toddlers to as high as 32%. If the number of children under five is 23,708,844, it can be estimated that there are more than 4 million very short toddlers in Indonesia. This is one of the consequences of not having enough complementary breastfeeding given to babies both in terms of time, quality and quantity of complementary breastfeeding.

The results of a preliminary survey conducted at the UPTD Health center Boronadu South Nias Regency where interviews were conducted with mothers and it was found that 8 mothers did not know that babies should only be given breast milk until they were 6 months old and they agreed that babies less than 6 months old were given additional food other than breast milk such as bananas, tea, formula milk and other foods. In connection with the lack of understanding of the mothers interviewed, it has an impact on decreasing the scope of exclusive breastfeeding at the UPTD Health center Boronadu South Nias Regency, so it is necessary to conduct research entitled "The Relationship between Mother's Knowledge and Attitudes and Early MP ASI Giving at UPTD Health center Boronadu Nias Regency South in 2022.

2. METHOD

This research uses a quantitative approach with this type of observational research with a cross sectional design. In this study, the population used was all mothers having babies more than 6 months at UPTD Health center Boronadu South Nias Regency, namely 118. The sample in this study were mothers who had babies more than 6 months who were willing and available at the time of data collection. The number of samples based on the sample formula is 48 people. Sampling was done by simple random sampling or by random. Primary data were obtained through direct interviews using a questionnaire given to respondents which contained a list of questions and answers that had been prepared and observations. Secondary data was obtained from UPTD data from the Boronadu Health Center in South Nias Regency in 2022. Data analysis was carried out using a statistical test using chi-square, to see a relationship between the independent variables and the dependent variable with a degree of significance $\alpha = 0.05$. If the p value < 0.05 then H_0 is rejected and if the p value > 0.05 then H_0 fails to be rejected.

3. RESULTS AND DISCUSSION

Univariate analysis

Baby Age

Table 1. Distribution of the Age Frequency of Infants in the Working Area of the UPTD of the Boronadu Health Center in 2022

No	Baby age	f	%
	4-6 months	13	27.1
	7-9 months	14	29.2
	10-12 months	21	43.8
	Total	48	100%

Based on the table above, it can be seen that there were more babies aged 10-12 months, namely 21 people (43.8%) compared to babies aged 7-9 months, namely 14 people (29.2%) and babies aged 4-6 months, namely as many as 13 people (27.1%)

Characteristics of Mother

Table 2. Frequency Distribution of Mother Characteristics in the Work Area of UPTD Boronadu Health Center in 2022

No	Characteristics of Mother	f	%
1	Age		
	<20 years	5	10.4
	20-35 years	29	60.4
	>35 years	14	29.2
2	Education		
	Elementary	4	8.3
	Junior	11	22.9
	Senior	30	62.5
	Bachelor	3	6.3
3	Parity		
	<=2	28	58.3
	>2	20	41.7
	Total	48	100%

From the table above it can be seen that there are more mothers aged 20-35 years, namely 29 people (60.4%) compared to mothers aged <20 years, namely as many as 5 people (10.4%) and mothers aged > 35 years, namely as many as 14 people (29.2%). Judging from the level of education, there were more mothers with high school education, namely 30 people (62.5%) compared to mothers with elementary school education (8.3%), junior high school education (22.9%) and university education (6.3%). Based on parity, it can be seen that there are more mothers who have parity <= 2 people, namely 28 people (58.3%) compared to mothers who have parity > 2 people, namely 20 people (41.7%).

Mother Knowledge

Table 3. Distribution of Knowledge Frequency of Mothers in the Work Area of UPTD Boronadu Health Center in 2022

No	Knowledge	f	%
1	Less	27	56.3

2	Good	21	43.7
Total		48	100.0

Based on the table above, it can be seen that the majority of mothers have less knowledge, namely as many as 27 people (56.3%) compared to mothers with good knowledge, namely as many as 21 people (43.7%).

Mother's attitude

Table 4. Frequency Distribution of Mother's Attitudes in the 2022 Boronadu Health Center UPTD Work Area

No	Attitude	f	%
1	Negative	18	37.5
2	Positive	30	62.5
Total		48	100.0

Based on the table above, it can be seen that the majority of mothers have a positive attitude, namely as many as 30 people (62.5%) compared to mothers who have a negative attitude, namely as many as 18 people (37.5%).

Giving Complementary Breastfeeding Early

Table 5. Distribution of the Frequency of Providing Complementary Breastfeeding in the Working Areas of the Boronadu Health Center UPTD in 2022

No	Giving Complementary Breastfeeding Early	f	%
1	Yes	25	52.1
2	No	23	47.9
		48	100.0

Based on the table above, it can be seen that more mothers gave early complementary breastfeeding to their babies before they were 6 months old, namely 25 people (52.1%) compared to those who did not provide early complementary breastfeeding, namely 23 people (47.9%).

Bivariate Analysis

Table 6. The Relationship between Knowledge and the Provision of Early Complementary Breastfeeding in the Working Area of UPTD at the Boronadu Health Center in 2022

Knowledge	Giving Complementary Breastfeeding Early				Total	P-value	
	Yes		No				
	n	%	n	%			
Less	18	66.7	9	33.3	27	100.0	0,022
Good	7	33.3	14	66.7	21	100.0	

Based on the results of a bivariate analysis of the relationship between knowledge and the provision of early complementary breastfeeding in the Working Area of the UPTD Health center Boronadu in 2022, it can be seen that the proportion of respondents who provided complementary breastfeeding early was more to mothers with less knowledge, namely as many as 18 people (66.7%) compared to mothers with good knowledge, namely as many as 9 people (33.3%). The results of the chi square statistical test showed that the value of $p = 0.022 < 0.05$, so it can be concluded that there is

a significant relationship between the knowledge of postpartum mothers and the provision of early Complementary Breastfeeding in the Working Area of UPTD Health center Boronadu in 2022.

Table 7. The Relationship between Attitudes and Early Complementary Breastfeeding in the Working Area of the Boronadu Health Center UPTD in 2022

Attitude	Giving Complementary Breastfeeding Early						P-value
	Yes		No		Total		
	n	%	n	%	n	%	
Negative	14	77.8	4	22.2	18	100.0	0.006
Positive	11	36.7	19	63.3	30	100.0	

Based on the results of a bivariate analysis of the relationship between the attitude of postpartum mothers and the provision of early Complementary Breastfeeding in the Boronadu Health Center UPTD Work Area in 2022, it can be seen that the proportion of respondents who provided complementary breastfeeding early was more to mothers who had a negative attitude, namely 14 people (77.8 %) compared to mothers who have a positive attitude as many as 11 people (36.7%). The results of the chi square statistical test showed that the value of $p = 0.006 < 0.05$, so it can be concluded that there is a significant relationship between the attitude of postpartum mothers and the provision of early Complementary Breastfeeding in the Working Area of the UPTD Health center Boronadu in 2022.

Discussion

Knowledge is the result of human sensing, or the result of knowing someone about an object through the senses they have (eyes, nose, ears, and so on). By itself, at the time of sensing to produce knowledge is strongly influenced by the intensity of attention and perception of the object. Most of a person's knowledge is obtained through the sense of hearing, namely the ears and the sense of sight, namely the eyes. An individual's knowledge of something can change and develop according to abilities, needs, experience and the level of mobility of information about something in their environment (Notoatmodjo, 2017).

Knowledge or cognitive is a very important factor in shaping one's actions (over behavior). A person's knowledge of objects has different intensities or levels (Destyana RM, et al, 2018). Knowledge is influenced by several things, namely education, work, age, experience, culture and information. This also applies to the provision of Complementary Breastfeeding. A postpartum mother must have sufficient knowledge to understand the benefits of complementary breastfeeding and when to give complementary breastfeeding to the baby so that the complementary breastfeeding given will be good nutrition for the baby and not interfere with the baby's digestive tract. As a support, a mother must also have general knowledge about the growth and development of her baby (Irianti, B dan Sari, Ep, 2018).

This study is in line with the results of Khasanah et al, (2016) who stated that knowledge of complementary breastfeeding was the dominant factor in giving early complementary breastfeeding to infants less than six months old in Sedayu District. Mothers who have less knowledge of complementary breastfeeding have a 29.8 times risk of giving early complementary breastfeeding to babies less than six months old. Setyaningsih (2018) said that mothers with low complementary breastfeeding knowledge had a risk of 11.6 times giving early complementary breastfeeding to babies less than six months old in Boyolali in 2018.

Triggering the level of knowledge stated by Notoatmodjo (2017), that knowledge consists of various levels, namely knowing, understanding, application, analysis, synthesis, and evaluation. Referring to the level of knowledge mentioned above, it can be explained that mothers who are in the UPTD Working Area of the Boronadu Health Center have a high level of knowledge about the practice of giving complementary breastfeeding at a knowing level, but are unable to understand, cannot apply and evaluate the goodness and benefits of exclusive breastfeeding alone. until the baby

is six months old so that the rate of exclusive breastfeeding is low and the rate of giving early complementary breastfeeding is high. Adequate knowledge about complementary feeding practices should influence and motivate mothers to exclusively breastfeed their babies until they are six months old. In this study, information was obtained that described knowledge about good complementary breastfeeding giving practices that could not be applied properly due to strong environmental factors, both coming from the family, such as from husbands, mothers or in-laws as well as the habits of the surrounding community, resulting in the rate of early complementary feeding being very high.

Results Attitude is a reaction or response that is still closed from someone from a stimulus or object, the manifestation of that attitude cannot be seen, but can only be interpreted in advance from closed behavior. Attitude actually shows the connotation of the suitability of reactions to certain stimuli which in everyday life are emotional reactions to social stimuli. A person's attitude towards an object is a feeling of support or partiality or a feeling of not supporting or not taking sides with a particular object. Individual ambivalence towards objects, events, people, or certain ideas. Attitudes are feelings, beliefs, and behavioral tendencies that are relatively settled (Alvisi, et al, 2015).

The results of this study are in line with the opinion of Berisha, et al (2017) that attitude is a person's reaction or response to a stimulus or object. Good knowledge will support a good attitude. Thus, health service agencies need to conduct counseling about the importance of providing complementary foods for ASI (complementary breastfeeding) so that good knowledge can also support good attitudes.

Attitude is one of the factors that can encourage certain actions to be taken by someone. According to Wawan and Dewi (2017) emphasized that attitude is a predisposition to do or not do something or behavior, so attitude is not only a condition from within a person that concerns the pure psychology of the individual (purely physical inner state), but attitude is more defined as individual conscious processes. That is, the process that occurs objectively and uniquely in each individual. The uniqueness in question is the existence of individual differences that come from the values and norms that a person wants to maintain. If a mother has a good or positive attitude towards giving complementary breastfeeding then the action that will be given to her baby in giving complementary breastfeeding will also be good or positive in this case, giving complementary breastfeeding on time, namely in the age range of babies 6 months and over while still paying attention to the physical and psychological readiness of the baby as well as the quality or types of complementary breastfeeding that need to be considered when giving complementary breastfeeding so that the nutritional needs of infants and toddlers are properly met. In addition, exclusive breastfeeding must be maintained until weaning is carried out until the baby is 2 years old.

4. CONCLUSION

From the study it was concluded that: There are more mothers who provide early complementary breastfeeding to babies before the age of 6 months, namely 25 people (52.1) compared to those who do not provide Early complementary breastfeeding, namely 23 people (47.9%). Most of the mothers had less knowledge, namely 27 people (56.3%) compared to mothers who had good knowledge, namely 21 people (43.7%). Most of the mothers had a positive attitude, namely as many as 30 people (62.5%) compared to mothers who had a negative attitude, namely as many as 18 people (37.5%). There is a significant relationship between the knowledge of postpartum mothers and the Provision of Early complementary breastfeeding in the Work Area of the UPTD Health Center Boronadu in 2022. There is a significant relationship between the attitudes of postpartum mothers and the Provision of Early complementary breastfeeding in the Work Area of the UPTD Health Center Boronadu in 2022. It is expected that health workers at the UPTD of the Boronadu Health Center To work with the local government to work together in tackling the problem of people's habits that tend to give food or drink to children after birth. It is also hoped that health workers at the Boronadu Health Center UPTD will be able to further increase public knowledge about complementary breastfeeding and increase their role in efforts to achieve exclusive breastfeeding through counseling, which can be carried out at village meetings, posyandu and counseling during pregnancy checks.

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