

# The Relationship Between Mother's Knowledge And Exclusive Breast Feeding In The Work Area Of Bingai Public Health Center, Wampu District Langkat Regency

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ARTICLE INFO	ABSTRACT
<b>Keywords:</b> Mother's Knowledge Exclusive Breast feeding	Mother's Milk (ASI) is the first, main and best food at the beginning of a baby's natural life. According to the Global Strategy on Infant and Young Child Feeding, proper feeding is breastfeeding the baby as soon as possible after birth, exclusive breastfeeding until the age of 6 months, providing proper and adequate complementary food for breastfeeding from the age of 6 months, and continuing breastfeeding until the age of 2. years or more. Exclusive breastfeeding until the baby is 6 months old is very beneficial because it can protect the baby from various diseases that cause infant death. In addition to benefiting the baby, exclusive breastfeeding also benefits the mother, namely reducing postpartum bleeding, reducing blood loss during menstruation, accelerating weight gain, reducing the risk of breast cancer and uterine cancer (Widodo, 2011). According to Lawrence Green (1980) in Notoadmodjo (2015) there are various factors that influence exclusive breastfeeding including mother's knowledge about exclusive breastfeeding, education, psychology, infant abnormalities, breast abnormalities, availability of resources/facilities, affordability of facilities, attitudes and behavior of health workers.
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# 1. INTRODUCTION

Mother's Milk (ASI) is the first, main and best food at the beginning of a baby's natural life. Breast milk is like gold that is given free by God because breast milk is a living fluid that can adjust its substance content to meet the nutritional needs of infants (Firmansyah et al., 2019).

According to the Global Strategy on Infant and Young Child Feeding, proper feeding is breastfeeding the baby as soon as possible after birth, exclusive breastfeeding until the age of 6 months, providing proper and adequate complementary food for breastfeeding from the age of 6 months, and continuing breastfeeding until the age of 2. years or more. Exclusive breastfeeding until the baby is 6 months old is very beneficial because it can protect the baby from various diseases that cause infant death. In addition to benefiting the baby, exclusive breastfeeding also benefits the mother, namely reducing postpartum bleeding, reducing blood loss during menstruation, accelerating the achievement of pre-pregnancy weight, reducing the risk of breast cancer and uterine cancer (Widodo, 2011).

According to WHO data (2018), the coverage of exclusive breastfeeding worldwide was only around 36% during the 2007-2014 period. The achievement of exclusive breastfeeding in Indonesia in 2016 was 54%, but again decreased in 2017 to only 35% (Indonesian Ministry of Health, 2020). North Sumatra the coverage of babies who get exclusive breastfeeding in 2018 was 28.6%, increasing in 2019 by 66.21% and in 2020 to 65.10%, although every year there has been an increase in coverage but this figure is still below the target of 80 %. Langkat Regency in North Sumatra Province, with quite apprehensive conditions to observe the low coverage of exclusive breastfeeding, only around 30% (North Sumatra Provincial Health Office, 2020).

Preliminary studies in the work area of the Bingai Assistant Public Health Center, Wampu District, Langkat Regency found that the coverage of exclusive breastfeeding in 2021 was 205 people (59%), while in 2019 it decreased to 129 people (46.24%) (Gurilla Health Center data 2021). The data



shows that the coverage of exclusive breastfeeding is still low in the Work Area of the Bingai subhealth center, Wampu District, Langkat Regency in 2021

According to Lawrence Green (1980) in Notoadmodjo (2015) there are various factors that influence exclusive breastfeeding including mother's knowledge about exclusive breastfeeding, education, psychology, infant abnormalities, breast abnormalities, availability of resources/facilities, affordability of facilities, attitudes and behavior of health workers.

Among a number of factors that influence the low level of exclusive breastfeeding, one of which plays an important role, namely the mother's knowledge about exclusive breastfeeding. This is because the mother's lack of knowledge about exclusive breastfeeding causes the failure of exclusive breastfeeding.

The knowledge possessed by mothers is generally limited to the "know" level, so they are not that deep and do not have the skills to practice it. Therefore, mothers must get inspiration so they can practice it. (Roesli, 2018). Knowledge is one of the factors that can motivate a mother to provide exclusive breastfeeding to her baby. Knowledge is a very important domain for the formation of one's actions. From experience and research it is proven that behavior based on knowledge will last longer than behavior that is not based on knowledge (Roesli, 2018). The motivation for breastfeeding is defined as the attitude of creating situations that stimulate the enthusiasm of mothers to breastfeed their babies, so that qualified and highly competitive human beings can be created. It is possible for these two factors to have a considerable influence on the motivation for exclusive breastfeeding. If the mother's education level is low, the mother's knowledge about breastfeeding will also be low so that exclusive breastfeeding for 6 months will not be achieved. Moreover, it is coupled with the public's ignorance about the correct duration of exclusive breastfeeding in accordance with what is recommended by the government (Roesli, 2018).

# 2. METHOD

This type of research uses correlational descriptive. According to Sugiyono (2017), correlational research is a type of research with problem characteristics in the form of a correlational relationship between two or more variables. In this study, the authors used a cross-sectional design, which is a type of research that emphasizes the time of measurement/observation of independent and dependent variable data at one time, namely only being observed once (Notoatmodjo, 2012).

This study aims to determine whether there is a relationship between mother's knowledge and exclusive breastfeeding in the working area of the Bingai Sub-Health Center, Wampu District, Langkat Regency in 2022.

No	Variabel	<b>Operational Defenition</b>	tion Measuring		Measuring Result	Scale
			Tool			
1	Knwoledge	Mother's ability to know	Questionnai	a.	8	Ordinal
		and understand about	re Right		Answer with value 76-	
		exclusive breastfeeding	Mark 1		100% (15-20)	
		obtained from various	wrong Mark	b.	Not Good if the Score	
		sources.	0		right answer <76% (0-	
					14)	
2	Giving of	Breastfeeding only for 6	Questionnai	a.	Yes if giving Breast N	Nominal
	Breast Milk	months without giving	re		Milk during 6 Months	
		additional food except		b.	Not if Giving	
		medicine and vitamins.			additional other beside	
					ASI	

# Table 1. Operational Defenition

# 3. RESULT AND DISCUSSION

# **Research Result**

The results of research regarding the relationship between mother's knowledge and exclusive breastfeeding in the working area of the Bingai Assistant Public Health Center were obtained as follows:



# Univariate analysis

The sample in this study were mothers who had children aged 7-12 months in the working area of the Bingai Assistant Public Health Center, totaling 45 people, with characteristics including age, education and employment which can be seen in the following table:

No	Ages	F	%
1	< 20 Years old	7	11,67
2	20-35 Years old	33	73,33
3	>35 Years Old	9	15
	Total	60	100
	Education		
1	Elementary School	4	6,67
2	Junior High School	4	6,67
3	Senior High School	25	66,67
4	Academic/University	11	20
	Total	45	100

Table 2 Frequency Distribution of Respondents Based on Mother's Age and Education

Based on table 2, it can be explained that of the 45 mothers aged 20-35 years there were at most 33 people (73.3%). Based on education, most of them had high school education, namely 25 people (66.67%).

Table 3 Frequency Distribution of Knowledge Levels of Mothers about Exclusive Breastfeeding	3
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No	Level of Knowledge mother about Breast Feeding	F	%
1	Good	9	25
2	Enough	13	36,67
3	Less	18	38.33
	Total	45	100

Based on table 3, it can be seen that most of the respondents had a good level of knowledge about exclusive breastfeeding, namely 18 people (38.3%) and at least 9 people (25%) had less knowledge.

No	Giving of Exclusive Breast	Ν	%
	Feeding		
1	Yes	20	44,6
2	Not	25	55,4
	Total	45	100

Table 4 Frequency Distribution of Exclusive Breastfeeding in the Work Area of Bingai Assistants,

Based on table 4. It is known that out of 45 respondents, the majority of mothers did not give exclusive breast milk to their children, totaling 20 people (55.4%), while mothers who gave exclusive breast milk to their children amounted to 25 people (44.6%). So that the respondents in this study still did not provide exclusive breast milk to their children, this was because mothers had provided additional food and drinks to their children even though they were not yet 6 months old.



# **Bivariate Analysis**

	Giving Exclusive Breast									
	Feeding									
No	No Knowledge Yes Not						%	p value		
	_	n	%	n	%	n	%	-		
1	Good	19	20,7	9	9,8	28	30,4			
2	Not good	22	23,9	42	45,7	64	69,6	*0,006		
	Total	41	44,6	51	53,4	45	100			

Table 5 Distribution of Knowledge Frequency of Mothers with Exclusive Breastfeeding Giving Exclusive Breast

From table 5 it can be seen that of the 28 people who had correct knowledge about exclusive breastfeeding, the highest proportion of respondents who gave exclusive breastfeeding was 19 people (20.7%), but there were those who did not give exclusive breastfeeding, there were 9 people (9.8%). As for the 64 people whose knowledge about exclusive breastfeeding was wrong, the highest proportion of respondents who did not give exclusive breastfeeding was 42 people (45.7%), but there were those who gave exclusive breastfeeding totaling 22 people (23.9%). Statistical test results obtained p value: 0.006 < $\alpha$ : 0.05 so that Ho was rejected and Ha was accepted, namely there was a relationship between mother's knowledge and exclusive breastfeeding in the working area of the Gurilla Health Center, Siantara Sitalasari District, Siantar City.

# Distribution of Knowledge Frequency of Mothers with Exclusive Breastfeeding

Based on the results of the study it was found that out of 45 respondents, the majority of mothers had poor knowledge about exclusive breastfeeding, amounting to 9 people (38.6%), while good knowledge of mothers about exclusive breastfeeding was 18 people (25%). So that the respondents in this study had poor knowledge about exclusive breast milk. The mother's knowledge on average is not good about exclusive breastfeeding, where the last education of the mother is that the average high school graduate is 25 people (44.6%).

According to Notoatmodjo (2015) education means the guidance given by a person to the development of others towards certain ideals that determine humans to act and fill life to achieve safety and happiness. Education is needed to obtain information such as things that support health. Education can affect a person, including one's behavior towards lifestyle, especially in motivating attitudes to participate in development in general, the higher a person's education, the easier it is to receive information. Education is needed to obtain information such as things that support health so that it can improve the quality of life and superior health status. The education of mothers who have children aged 7-12 months in the working area of the Gurilla Health Center is considered sufficient because the population has high school education. This shows that the lower the education, the lower a person's basic ability to think for decision making, especially in giving exclusive breast milk in the working area of the Bingai Health Center.

# 4. CONCLUSION

The mother's knowledge about exclusive breastfeeding was 22 people (69.6%), while the mother's knowledge about exclusive breastfeeding was 11 people (30.4%). So that the respondents in this study had poor knowledge about exclusive breast milk. Mothers who do not give exclusive breast milk to their children are 51 people (55.4%), while mothers who give exclusive breast milk to their children are 41 people (44.6%). So that the respondents in this study still did not provide exclusive breast milk to their children, this was because mothers had provided additional food and drinks to their children even though they were not yet 6 months old. There is a relationship between mother's knowledge and exclusive breastfeeding in the working area of the Gurilla Health Center, with a p value :  $0.006 < \alpha : 0.05$  so that Ho is rejected and Ha is accepted.

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The Relationship Between Mother's Knowledge And Exclusive Breast Feeding In The Work Area Of Bingai Public Health Center, Wampu District Langkat Regency. Martaulina Sinaga, et.al 109



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