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## Extension Analysis to increase Knowledge and Family Support in Exclusive Breastfeeding in West Aceh Regency Community

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**Abstract:** Breast milk is the best nutritional intake intended for babies 0-6 months because it contains a variety of nutrients that are needed by the baby for optimal growth and intelligence. The purpose of this study is to look at differences in the Level of Knowledge and Family Support before and after counseling on Exclusive Breast Milk. The study used analytical observational methods with Mc-Nemar statistical tests on two paired groups. Based on the results of the mc-nemar statistical test family support obtained a value of p value  $0.001 < 0.05$  and knowledge level  $0.002 < 0.05$  which means there is a significant difference between family support before and after counseling and a significant difference between the level of knowledge before and after counseling regarding exclusive breast milk. It is necessary to intervene in the knowledge of family support and related agencies to continue to increase maternal knowledge and family support for Ekslusive breastfeeding.

**Keywords:** Exclusive Breast Milk, Knowledge Level, Family Support

### Introduction

Breastfeeding can also lower the risk of acute infectious diseases such as *diarrhea*, *pneumonia*, ear infections, *haemophilus influenza*, *meningitis*, and urinary tract infections. The occurrence of infants and toddlers suffering from recurrent infectious diseases will result in the occurrence of toddlers with poor nutrition and thin (Kemenkes, 2018). According to UNICEF in 2013, out of 136.7 million babies born worldwide and only 32.6% of them were breastfed exclusively in the first 6 months, While in industrialized countries, babies who are not exclusively breastfed are more likely to die than babies who are exclusively breastfed. While in developing countries only 39% of mothers give exclusive breast milk (Putri et al, 2017). Based on *World Health Organization (WHO)* data in 2016 on exclusive breast milk coverage in the world only 36% or below the target (50%). The results of a 2018 Taha et al study in Abu Dhabi found that the average rate of exclusively breastfeeding mothers was only 818 (44.3%) < 6 months of infants out of a total of 1822 babies studied (Taha, et.al., 2018).

he scope of exclusive breastfeeding in Indonesia in 2015 amounted to 55.7% and if referring to the target of 2015 which was 39%, then nationally exclusive breastfeeding coverage for infants of lesser Six months on the target. According to the province, the exclusive breast milk coverage range in infants aged 0-6 months between 26.3% (North Sulawesi) to 86.9% (West Nusa Tenggara). Of the 33 provinces that reported, 29 of them (88 percent) managed to achieve the 2015 plan target (Kemenkes RI, 2016). While in 2016 in Indonesia it is known that the percentage of

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babies getting exclusive breast milk until the age of 6 months by 29.5 percent and babies who get breast milk aged 0-5 months by 54.0 percent (Kemenkes RI, 2017).

Aceh Province health profile data in 2015, stated that the presentation of babies given exclusive breast milk increased from 2012 by 27%, in 2013 by 48%, in 2014 by 55% and slightly decreased in 2015 by 53% which figure has not reached the target of achieving breast milk. Exclusively in accordance with the target of the Ministry of Health has issued Government Regulation of the Republic of Indonesia Number 33 of 2012 on exclusive breastfeeding to infants in Indonesia by 80% (Aceh Health Office, 2016). Data from the West Aceh Health Office shows the number of babies who get exclusive breast milk in West Aceh in 2019 as many as 847 babies out of 1,449 infants (58%) but in 2020 there is a downward trend in achievement, from 2,764 babies who get exclusive breast milk as much as 1,065 (39%). Of the 13 sub-districts in West Aceh, the lowest exclusive breast milk achievement in 2020 was in Woyla District by 6%, Johan Pahlawan 23%, and East Woyla by 27%, and only one sub-district reached the national target of Meureubo District by 82%.% (West Aceh Health Office, 2020).

The non-existence of exclusive breastfeeding practices that occur can be influenced by many factors including the lack of knowledge and awareness of the mother that the importance of exclusive breastfeeding, socio-cultural, can also be influenced by maternal factors (mistaken perceptions, maternal health problems, working mothers, breast milk production) and family factors (mother's role). in-laws and husbands and other family environments), as well as health personnel factors, namely the role of health workers in advocating exclusive breastfeeding. (Mardhiyah, 2018). The trend of changes in the failure of exclusive breastfeeding that occurs today also varies greatly in West Aceh Regency. Based on the results of preliminary studies of researchers related to Exclusive Breast Milk coverage data. Urban areas that are basically considered more advanced in terms of access to information digitally, the availability of health services and health workers, urban families that are considered to have been much dominated by families with a more adequate level of upper secondary education to college are considered to have a good enough understanding when compared to remote and very remote rural areas actually have lower exclusive breastfeeding coverage.

Based on the results of preliminary studies and direct observations in the field, it was also found that there are several factors that cause the failure of exclusive breastfeeding, including due to internal family factors. Includes husband support that is not maximal, lack of support of other parents / families, family habits, health care support. Therefore, researchers are interested in conducting research with interventions in the form of counseling on exclusive breast milk to increase maternal knowledge and increase family support about the importance of providing exclusive breast milk to children in West Aceh Regency.

## **Method**

This study is an analytical descriptive study with a *Pre-Post Test* extension that is a data analyst technique to see before and after counseling using a questionnaire sheet to be filled out by participants before and after being given counseling. The sample used was mothers who had toddlers, mothers who were willing to follow counseling to completion as many as 50 randomly selected people with an age range of 20-50 years. The research location was conducted in Kaway XVI District of West Aceh Regency with a research time span of 3 months from the start of the

licensing, preparation, extension, processing and data analysis. The data was analyzed with Univariate and Bivariate analyses. In Univariate analysis data is processed and analyzed to see a frequency distribution picture of the characteristics and variables of respondents. While bivariate data analysis is processed using *the Mc-Nemar* statistical test, which is a statistical test for variables paired with abnormal data distribution (Dahlan, S.2001) to see differences in the category of group paired knowledge levels before and after counseling for 2 hours.

## Result

**Table 1.** Results of Descriptive Analysis of Respondent Characteristics

| Characteristics of Respondents | n=50 | Percentage (%) |
|--------------------------------|------|----------------|
| <b>Age</b>                     |      |                |
| 1. 20-34 years                 | 38   | 76 %           |
| 2. 35-50 years                 | 12   | 24 %           |
| <b>Income</b>                  |      |                |
| 1. < 500 thousand / month      | 4    | 8 %            |
| 2. 1- 2 million/month          | 15   | 30 %           |
| 3. 2.5 – 4 million /month      | 23   | 46 %           |
| 4. > 4 Million /month          | 8    | 16 %           |
| <b>Work</b>                    |      |                |
| 1. IRT                         | 23   | 46 %           |
| 2. PNS                         | 8    | 16 %           |
| 3. Lecturer                    | 2    | 4%             |
| 4. Teacher                     | 4    | 8 %            |
| 5. Private                     | 10   | 20 %           |
| 6. Honoree                     | 2    | 4 %            |
| 7. Entrepreneurship            | 1    | 2 %            |
| <b>Exclusive Breast Milk</b>   |      |                |
| 1. Exclusive                   | 34   | 68 %           |
| 2. Not Exclusive               | 16   | 32%            |

Source: Primary Data

Based on Table 1, descriptive analysis of respondents' characteristics found that respondents aged from 20-34 years as many as 38 people (76%) and ages 35-50 years as many as 12 people (24%). Respondents with monthly income <500 thousand as many as 4 people (8%), 1-2 million as many as 15 people (30%), 2.5-4 million as many as 23 people (46%) and > 4 million as many as 8 people (16%). The most respondents were housewives, 23 people (46%) and the fewest were 1 entrepreneurship mother (2%).

**Table 2.** Results of Descriptive Analysis of Research Variables

| No. | Variable                | Pre Test (%) | Post Test (%) |
|-----|-------------------------|--------------|---------------|
| 1.  | <b>Family Support</b>   |              |               |
|     | 1. Support              | 23 (46%)     | 39 (78%)      |
|     | 2. No supportg          | 27 (54%)     | 11 (22%)      |
| 2.  | <b>Public Knowledge</b> |              |               |

|         |          |           |
|---------|----------|-----------|
| 1. Less | 24 (48%) | 16 (32 %) |
| 2. Good | 25 (52%) | 24 (68%)  |

Primary: Data Source 2021

Descriptive analysis based on Table 2 found that in the family support variable before being given more counseling on the category "**Not Supporting**" (27 people or 54%) than in the category "**Support**" (23 people or 46%). While after counseling for 2 hours, increased more in the category "**Support**" (39 people or 78%) while in the category "**not supportive**" to (11 people or 22%). On the level of knowledge variables before being given counseling for the category "**good**" (25 people or 52%) and the category "**Less Good**" (24 people or 48%) but after being given counseling the categories of **knowledge "good"** (24 people or 68%) and knowledge "**Less Good**" (16 or 32%).

**Table 3.** Results of Knowledge Level Analysis and Family Support before and after Counseling

| No. | Variable        | P Value | Information                        |
|-----|-----------------|---------|------------------------------------|
| 1   | Knowledge Level | 0,002   | There is a significant difference. |
| 2   | Family Support  | 0,0001  | There are significant differences. |

Source ;Data Primer.

Based on Table 3 The results of the analysis of knowledge level variables before and after counseling are obtained the value of P Value 0.002 or < 0.05.

## Discussion

The researcher's assumption of the results of descriptive analysis in Table 2 there is a meaningful difference between the level of knowledge before and after counseling. The increase in maternal knowledge is due to the increasing knowledge of mothers where information that mothers can get through various sources such as mass media, electronic media, and so on. Other research results also found that there is a relationship between knowledge and exclusive breastfeeding (Sari, 2020). Other research results also found there was a relationship of failure of exclusive breastfeeding with low education, respondents who did not do IMD, respondents who knew badly, respondents who were not supported by their husbands. where all variables have a significant value below the value p value = 0.005 (Salamah, 2019). The results of Khofiyah's 2019 study found the value of knowledge of mothers OR = 9.42 (CI: 1.89-46.9) so that it can be interpreted that mothers who know about exclusive breast milk have a 9.42 times chance to succeed in providing exclusive breast milk compared to Mother does not know about Exclusive Breast Milk (Kofiyah, 2019).

The findings of the Royaningsih study in 2018 found 41.9% lack of family support for breastfeeding and found that there is a relationship between family support and exclusive breastfeeding (Royaningsih, 2018). The results of other studies also found that there is a relationship between the role of the family, namely the role of the husband and exclusive breastfeeding behavior with a value of  $p < 0.001$  with a picture of husband support for exclusive breastfeeding mothers as much as 64.4% (Mardhiyah, 2018). The results of research conducted by Siti in 2019 in Biak City obtained that good family support with the number of respondents

65 people (65.0%) and there is a significant relationship between family support and exclusive breastfeeding (value  $p = 0.006$ ) (Rambu,2019). The results of qualitative research conducted by Page in 2019 on the group of fishermen's mothers also showed that almost the entire family gave a good role in supporting exclusive breastfeeding, especially parents both in terms of advising, motivation and moral support in general. Direct (Page,2019).

While in the family support variable obtained a significant value of 0.001 which means there is a significant difference between family support before and after counseling about the importance of exclusive breast milk. Other research results also found there was a relationship in the failure of exclusive breastfeeding of respondents who were not supported by husbands where all variables had a significant value below the value of  $p$  value = 0.005 (Salamah, 2019). Family support and motivation is also one of the causes of the failure of exclusive breastfeeding. Andriani's 2017 study found that there is a link between family support and exclusive breastfeeding. Breastfeeding mothers get the results of good family support with exclusive breastfeeding. Based on the Contingency Coefficient Test showed there was a significant relationship of  $\rho=0.000$   $\alpha=0.005$  between family support and exclusive breastfeeding (Andriani, 2017).

## Conclusion

Based on the results of the discussion it can be concluded that family knowledge and support can increase if there is an intervention given both to mothers who have toddlers or to family members. Family members play an important role to motivate and support morally because they are the closest people in the mother's environment to still exclusively breastfeed their children.

## References

- Anggraini. W, Pratiwi. B.A . , Sagittarius.N.2019. Analysis Of Factors Causing Exclusive Breastfeeding Failure Of Working Mothers In Bengkulu City. *Scientific Journal of AVICENNA*. Vol. 14, No. 3,
- Dinkes Aceh Barat, 2019. Data on the Achievement of Exclusive Breastfeeding of West Aceh. Dinkes Aceh, 2019. Aceh Health Profile.
- Dinkes Aceh Barat, 2020. West Aceh Exclusive Breastfeeding Achievement Data Ministry of Health (Kemenkes RI). Nutritional status monitoring pocketbook (PSG) in 2017. Jakarta: Kemenkes RI; 2018
- Kemenkes RI, 2018 . Exposure to The Main Results of Basic Health Research.
- Kemenkes RI, 2019. Indonesian Health Profile Book 2018. ISBN 978-602-656-4464.
- Khofiyah.N. 2019. Analysis of Factors Affecting Exclusive Breastfeeding at Umbulharjo I Yogyakarta Health Center. *Journal of Midwifery*, 8 (2), 274-85. Available at [http://jurnal.unimus.ac.id/index.php/jur\\_bid/](http://jurnal.unimus.ac.id/index.php/jur_bid/) DOI : 10.26714 / jk.8.2.2019.74-85
- M.T.Page and Evawaty.2019.Exclusive breastfeeding of fishermen'smothers in the coastal totoli district of Majene. *Journal Of Health, Education and Literacy*,(1) e- issn : 2621-9301
- Mardhiyah, A., et al.2018. Analysis of The Role of Family on Exclusive Breastfeeding Behavior in Infants Aged 6-24 Months in the Work Area of Puskesmas Way Halim Bandar LampungCity. *Journal majority*. Volume 7. Number 3 .

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- Rambu,S.H., 2019. Family Support Relationship Towards Exclusive Breastfeeding In Infants In Biak Kota Health Center. *Journal of Health Lightening. Journal. id/JIKP 123, 08 (2), 2019,123-130 DOI : <https://doi.org/10.12345/jikp.v8i02.128>.*
- Royaningsih,N.,et al.2018. Family Support Relationship With Exclusive Breastfeeding of Infants In Jambean Kidul Village Margorejo Subdistrict. JKM. *Journal of Public Health STIKES Main Scholar Kudus P-ISSN 2338-6347 E-ISSN 2580-992X Vol. 6, No. 1*
- Sari.R, Yuviska.I.A., & Sunarsih .2020. Factors That Affect Exclusive Breastfeeding In Infants Ages 0-6 Months. *Journal ofMidwifery Vol 6, No 2: 161-170.S*
- Taha, Z. Et.al. 2018. Patterns of breastfeeding practices among infants and young children in Abu Dhabi, United Arab Emirates. *International Breastfeeding Journal* (<https://doi.org/10.1186/s13006-018-0192-7>)