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## Feasibility Study on Audio-Visual Socialization in Increasing Mother's Knowledge about Exclusive Breastfeeding

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**Abstract:** Audiovisual socialization is very influential in increasing the knowledge of mothers about exclusive breastfeeding. The problem in this study was 15 babies who failed to get exclusive breastfeeding. The purpose of this study was to assess whether audio-visual socialization was appropriate in increasing maternal knowledge about the importance of exclusive breastfeeding for mothers who have babies in Samatiga District, West Aceh Regency. This research is a quasi-experimental pretest-posttest design with a control group, data analysis using a paired t-test with a sample size of 15 mothers. The results of the t-test before the socialization obtained a mean value of 1.26 and after the socialization, the mean value was 1.86 with a t value of -4.583 with a P-value of  $0.000 < \alpha 0.05$ . After being reviewed, this audio-visual socialization is feasible in increasing the knowledge of mothers about exclusive breastfeeding. Suggestions from related parties to routinely socialize exclusive breastfeeding to mothers through Audio Visual.

**Keywords:** Feasibility, Audio Visual, Exclusive Breastfeeding, Infant, Breastfeeding Mother

### Introduction

Mother's Milk is the single and best food that meets all baby's growth and development needs until the age of 6 months. As Mother's Milk first comes out yellow which contains important substances that cannot be obtained from other sources including formula milk, newborn babies and mothers provide important stimulation to each other within the first hour. (Cascone, D, et, al, 2019). The provision of breast milk is very important for optimal growth and development both physically and mentally and the intelligence of infants needs to get the attention of mothers, families, communities, and health workers so that the breastfeeding process can be carried out properly. The proper and correct way of giving food to babies is to breastfeed exclusively from birth until the age of 6 months and continue breastfeeding the child until the age of 2 years.

Breast milk has various benefits for babies because the nutritional content in breast milk is very suitable for the baby's needs. The composition of breast milk varies according to the stage of lactation, time, maternal nutrition, and gestation of the fetus at birth (Kay, M. C. et al, 2018). Exclusive breastfeeding is not giving babies other foods and drinks, including plain water, apart from breastfeeding. (Except for drugs and vitamin or mineral drops, expressed breast milk is also allowed. To achieve optimal growth and development, WHO / UNICEF recommends four things that must be done, namely: first, give the baby immediately within 30 minutes after the baby is born, second, give only breast milk or give exclusively from birth to 6 months of age, third provide food companion breastmilk (MP-ASI) from the age of 6 months to 24 months, and the fourth continue breastfeeding until the child is 24 months old or more (Ministry of Health of the Republic of Indonesia, 2015

Based on the WHO report, currently, exclusive breastfeeding has not reached the expected target. The trend of exclusive breastfeeding globally from 2008-2014 was only 38%, increasing to 39% in 2015 and 40% in 2016. Globally, 40% who were exclusively breastfed aged 0-6 months decreased to 36% in the years 2017 (WHO, 2017). The coverage of exclusive breastfeeding in the world is 40%. Only 23 countries have reached at least 60%. The highest rates of exclusive breastfeeding coverage were found in several countries such as Rwanda 86%, Burundi 82%, Sri Lanka 82%, and Vanuatu 72%. In countries with medium and above income, the rate of exclusive breastfeeding is 23% to 28% per year (WHO, 2018). Worldwide only 45% of children are breastfed within the first hour of life, and only 45% of children who are breastfed for 2 years and two in five children under 6 months are exclusively breastfed (WHO, 2019).

Indonesia The coverage of exclusive breastfeeding is still low at 54%. The lowest was Gorontalo 32%, the highest was East Nusa Tenggara 79% (Indonesia Health Profile, 2016). In 2017 it fell to 29.5% . The lowest coverage was in the provinces of North Sumatra 12.4%, Gorontalo 12.5%, West Sumatra 37.6%, and Aceh 50% (Indonesia Health Profile, 2017). However, in 2018 it increased slightly to 68.74%. And this shows that they have not yet reached the National target planned by the government, namely 80%. According to the province, the lowest percentage was in Gorontalo Province 30.71% and the highest was East Nusa Tenggara 52.67% (Indonesia Health Profile, 2018). Aceh Province has 50% coverage of exclusive breastfeeding, the lowest coverage is in Sabang and West Aceh at 0-11%, the highest is Gayo Lues 84% (Aceh Health Profile, 2016). In 2017, it was 55%, the lowest exclusive breastfeeding coverage was in Sabang 30%, and the highest was West Aceh 40% (Aceh Health Profile, 2017). However, in 2018 the lowest coverage of exclusive breastfeeding was found in Sabang City, 16%, and West Aceh, namely 40% (Aceh Health Profile, 2018).

The highest coverage of exclusive breastfeeding in West Aceh in 2017 was found in several puskesmas work areas, namely, the work areas of Pante Ceureumen, Kajang, and Darien Rampak puskesmas, namely 100% and the lowest exclusive breastfeeding coverage was in the work area of puskesmas such as Pasi Mali 42%, Saratoga 56 %, and Sauk Ribee 58% (West Aceh Health Office, 2017). The coverage of exclusive breastfeeding for infants aged 0-6 months in West Aceh in 2018 was 63%. The lowest coverage of exclusive breastfeeding is found in several sub-districts, namely, soak ribeye 36%, Saratoga 52%, Bubon 22%, would 24%, and away XVI 32% (West Aceh Health Office, 2018). The lowest coverage of exclusive breastfeeding was found in several sub-districts, namely Samatiga 15%, Laying 40%, Darien Ramphak 28%, Woyla Barat 30%, Meutulang 33% (Report from the West Aceh Health Office, 2019).

Based on data obtained from the Saratoga Health Center, the coverage of exclusive breastfeeding in the Saratoga District for the last three years has fluctuated, namely in 2016 amounted to 57%. in 2017 at 56%. in 2018 amounted to 52%. Based on data obtained from the Saratoga Health Center in 2019, there were 110 babies with exclusive breastfeeding coverage of 15%. In the working area of Puskesmas Saratoga, there are 33 villages and there are several villages whose exclusive breastfeeding coverage is still very low, namely Cot Seulamat village 60%, Reusak village 40%, Sauk Seuke 40%, Sauk Pante Breuh 60%, and Sauk Seumaseh 66% (Puskesmas Samatiga report, 2019). In up to 15 sub-districts there were 15 children aged 0-12 months who failed to get exclusive breastfeeding coverage, based on direct observation of the cause of failure of exclusive breastfeeding to infants due to the

mother's lack of understanding about exclusive breastfeeding and its benefits and things that can cancel exclusive breastfeeding. Based on the above problems, it is necessary to research the Feasibility Study of Audio Visual Socialization in increasing the knowledge of mothers about exclusive breastfeeding.

## Methods

This type of quantitative research with a quasi-experimental study design (quasi-experiment) One Group Pretest-Posttest Design. One Group Pretest-Posttest. This design is a form of Quasi-experimental design, then given a pre-test and given treatment or given manipulation of independent variables and then given a post-test (Colman, 2014).

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Information

This research was conducted in Samatiga District, West Aceh Regency in February 2020, the second socialization was conducted in March 2020 and the third socialization was carried out in April 2020.

The population of mothers who have children aged 0- 12 months who fail to provide exclusive breastfeeding is 15 people, the sample uses a total sampling technique, namely 15 respondents. Before being finalized univariate, first tested the validity and reliability of the feasibility.

## Results

**Table 1.** Distribution of Respondents' Knowledge Levels Before Socialization Using Audio Visual

Knowledge Level	N	%
High	4	26,7
Low	11	73,3
Total	15	100

**Table 2.** Distribution of Respondents' Knowledge after Socialization Using Audio Visual

Knowledge Level	N	%
High	14	93,4
Low	1	6,6
Total	15	100

**Table 2.** The results of the data normality test for the pre-test knowledge variable and the post-test knowledge variable

Research variable	P-Value	A
Knowledge	0,088	0,05

The Effectiveness of Socialization Using Audio Visual in Increasing Mother's Knowledge About Exclusive Breastfeeding

**Table 3.** Socialization using audio visuals about exclusive breastfeeding

Knowledge Level	Pretest		Posttest	
	n	%	n	%
Low	11	73,3	1	6,6
Hight	4	26,7	14	93,4
Total	15	100	15	100

**Table 4.** The Difference in Average Knowledge Level of Respondents Before and After Socialization Using Audio-Visual About Exclusive Breastfeeding

Variable	Average	T	P
Knowledge pretest	1,26	-4, 583	0,000
posttest	1,86		

## Discussion

Feasibility Study for Socialization Using Audio Visual in increasing knowledge of mothers about exclusive breastfeeding. The results showed that the level of knowledge of mothers before the socialization was lower than the level of knowledge of mothers after socialization, out of 15 there were 4 respondents (26.7%) who had a high level of knowledge and there were 11 respondents (73.3%) who have a low level of knowledge. After the socialization, those who had a high level of knowledge increased to 14 respondents (93.4%) and those who had a low level of knowledge became 1 respondent (6.6%).

Based on field observations, the researcher found that there were significant differences between before and after the audiovisual socialization was carried out. It can be concluded that this socialization is appropriate for use in increasing the knowledge of mothers about exclusive breastfeeding, this activity should be routinely carried out for mothers who have babies so that the coverage of exclusive breastfeeding in the future will be better. The role of health workers must also be further enhanced to provide advice to pregnant women to only provide breast milk to their babies and information on how to make the breastfeeding process run smoothly and more importantly, health workers also do not give manufactured milk to mothers whose births are assisted by them. So far, health workers have only informed and advised that mothers have to give breast milk for 6 months to the baby but have not clearly told what exactly is exclusive breastfeeding and how exclusive breastfeeding can work.

Knowledge (knowledge) is the result of knowing and this occurs after sensing a certain object. Sensing occurs through the five senses, namely the senses of sight, hearing, smell, taste, and touch. Most of the knowledge is acquired through the eyes and ears. Knowledge of cognitive is a dominant factor that is very important in the formation of a person's actions because the results of the research show that behavior based on knowledge will be more lasting than behavior that is not based on knowledge (Notoatmodjo, 2012).

After the socialization of exclusive breastfeeding, it turns out that the knowledge of mothers about exclusive breastfeeding has improved. This could be due to the information in the socialization about exclusive breastfeeding that the respondents received. Information will influence someone's knowledge. Even though the person has low education, if they get good

information, such as from socialization, TV, radio, or newspapers, it will increase one's knowledge (Notoatmadjo, 2012).

According to (Senghore, T, et al., 2018) Despite the consistent evidence showing the importance of exclusive breastfeeding for six months, this practice remains less successful and requires better access to information on exclusive breastfeeding that targets disadvantaged mothers in a manner socioeconomic and older.

Breast milk is considered the most complete source of nutrition for babies (Ihudiebube-Splendor, C. N, et.al, 2019) because breast milk contains essential carbohydrates, fats, proteins, and immunological factors that babies need for resistance to infection and growth and development in the year first formative life. Knowledge of exclusive breastfeeding among mothers is very important when promoting optimal breastfeeding practices. Rural women have less than optimal knowledge about exclusive breastfeeding, less attention to the importance of exclusive breastfeeding justifies less optimal maternal practices. Therefore, it is recommended to develop interventions that emphasize practical education aimed at addressing the factors that influence exclusive breastfeeding in infants (Senosy, S. A., et.al, 2020).

In line with research conducted by Idris and Enggar in 2017 from the results of the Wilcoxon test, it was found that the value of P-value  $0.002 < \alpha 0.05$ , it can be concluded that there is an effect of exclusive breastfeeding with audio-visual education on increasing maternal knowledge. Henry Ekawati in her research in 2017, results showed that the value of P-value was  $0.002 < \alpha 0.05$ , meaning that there was a difference in the knowledge of mothers about exclusive breastfeeding before counseling and after counseling using audiovisual. And in Riska Vyronica's research in 2011, from the results of the Wilcoxon test, it was found that the value of P-value  $0.000 < \alpha 0.05$  means that there is a difference in the level of maternal knowledge about exclusive breastfeeding before and after being given health education. Based on the results of the paired sample t-test that there is the effectiveness of socialization using audiovisual in increasing mother's knowledge about exclusive breastfeeding. Therefore, to increase the coverage of exclusive breastfeeding it is necessary to make more intensive health promotion efforts for mothers

Pep Research Wawan and Dewi (2010) that the environment is all the conditions that exist around humans and their effects that can affect the development and behavior of people or groups. Poor knowledge of respondents' exclusive breastfeeding before counseling can be caused by environmental conditions and cultural issues that assume that exclusive breastfeeding is considered incapable of providing nutrition to babies so that the information received by respondents is wrong and affects their level of knowledge.

The results of this study indicate that pregnant women in the Banyuroto Village, Sawangan Magelang District lack sufficient and correct information about exclusive breastfeeding.

According to Ircham and Eko (2013), health socialization here is a health education activity, which is carried out by spreading messages, instilling confidence, so that people are not only aware, know and understand but also want and can make recommendations that are related to health. socialization is inseparable from how the target can understand, understand, be interested in, and follow what we convey properly and correctly and on his own awareness try to apply these new ideas in his life.

## **Conclusion**

After being studied, there were significant changes between before and after the socialization using audiovisual was carried out, namely 26.7% before and 73.3% after. So this socialization is worth doing in increasing the knowledge of mothers about exclusive

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