

THE RELATIONSHIP BETWEEN MOTHER'S KNOWLEDGE AND ATTITUDE WITH EXCLUSIVE BREASTFEEDING IN GAMPONG CEURIH, ULEE KARENG SUB-DISTRICT, BANDA ACEHNelva Riza¹¹Lecturer in Bachelor of Midwifery, Bina Bangsa University Getsempena (nelvariza1@gmail.com)*Submitted: 02/01/2023**Accepted: 02/12/2023**Published: 10/12/2023***ABSTRACT**

Exclusive breastfeeding is breastfeeding from birth until the baby is 6 months old. The achievement of exclusive breastfeeding in Aceh in 2019 is 55%. The main cause is the low knowledge of mothers in exclusive breastfeeding. Early and exclusive breastfeeding will help prevent various childhood diseases, especially gastric disorders, respiratory tract and asthma in children. This study was to determine the relationship between the knowledge and attitudes of mothers with exclusive breastfeeding. This type of research is analytic cross-sectional. Samples were taken using a total sampling technique of 47 mothers who had babies aged 6-12 months in Gampong Ceurih, Ulee Kareng District, Banda Aceh. The analysis was carried out using the chi-square test to determine the relationship between variables. The results of this study indicate that there are 46.8% of a baby did not get exclusive breastfeeding and 53.2% of babies got exclusive breastfeeding. There is a relationship between the mother's knowledge ($p = 0.015$) and the mother's attitude ($p = 0.023$) with exclusive breastfeeding. This study concludes that there is a relationship between the knowledge and attitudes of mothers with exclusive breastfeeding. Researchers suggest that it is necessary to provide health education about exclusive breastfeeding to the whole community, especially mothers who have babies about the benefits of exclusive breastfeeding so that people or mothers who have not given exclusive breastfeeding to their babies can increase their knowledge and will provide exclusive breastfeeding to their babies

Keywords: Knowledge, Attitude, Exclusive Breastfeeding**PRELIMINARY**

Exclusive breastfeeding (ASI) in the world is still low. Based on data from the United Nations Children's Fund (UNICEF) in 2012, only 39% of babies under the age of 6 months were exclusively breastfed worldwide, this number also did not increase in 2015, namely 40% success of exclusive breastfeeding worldwide. China, which is one of the countries with the largest population in the world, only has a success rate of exclusive breastfeeding of 28%. Meanwhile, countries that occupy the 3rd position with the lowest rates of exclusive breastfeeding in the world according to UNICEF data include Somalia and South Africa (WHO, 2015).

Research from the World Health Organization (WHO), states that out of 129 countries around the world, only 22 countries have met the current target. The rate of exclusive breastfeeding is still low, namely only 41%. WHO recommends exclusive breastfeeding for the first 6 months of life, followed by continuous exclusive breastfeeding with complementary foods until 2 years of age. WHO also recommends skin-to-skin contact, and early infant care without interference, which can significantly increase neonatal survival and reduce morbidity (UNICEF, 2021).

Breastfeeding in Indonesia is currently quite concerning, the coverage of exclusive breastfeeding in Indonesia is still low due to low public awareness of encouraging increased breastfeeding. The phenomenon of young mothers not breastfeeding their children does not only occur in developed countries but in developing countries including Indonesia. The promotion of formula milk greatly influences the thinking of mothers who lack knowledge about breastfeeding (Nurkhayati A, 2021).

Global Nutrition Goals 2025 has set a target of exclusive breastfeeding or 50%. But the fact is that around the world there are only 38% of babies aged 0-6 months get exclusive breastfeeding. A recent study found that 11.6% of deaths in children under the age of 5 years were caused by non-exclusive breastfeeding. 54.3% of all babies aged 0-6 months nationally were given exclusive

breastfeeding, 1,348,532 babies were absolute, or 1,134,952 babies aged 0-6 months were not exclusively breastfed (Ministry of Health RI, 2018).

Exclusive breastfeeding for 6 months and continued until 24 months of age. Starting from the age of 6 months, babies get complementary food that is nutritious according to their growth and development. Exclusive breastfeeding is not giving the baby other foods and drinks, including water, apart from breastfeeding (except medicines, vitamin/mineral drops, and expressed breast milk). The achievement of exclusive breastfeeding in Aceh in 2019 was 55%, a decrease from the previous year of 61% (Aceh Health Profile 2019).

The baby's health can be maintained properly by fulfilling the necessary nutritional needs. Babies need adequate nutrition for good growth, especially in brain growth. Infants 0-6 months are at a growth stage that is very susceptible to disease, babies at this stage have digestive organs that are still weak, therefore breast milk is the most appropriate source of nutrition, breast milk (ASI) is the best natural nutrition for babies because contains the energy and substance requirements needed during the first 6 months of a baby's life (Astutik, 2014).

The preliminary survey conducted by researchers in Gampong Ceurih, Ulee Kareng District, Banda Aceh City, based on interviews conducted with 10 mothers who visited the Posyandu in Gampong Ceurih, found that more than half of the mothers interviewed did not know the benefits of exclusive breastfeeding, they trusted their previous experience with providing additional food for their children to remain in good health. Based on these problems, the study aimed to determine the relationship between the knowledge and attitudes of mothers with exclusive breastfeeding in Ceurih Village, Ulee Kareng District, Banda Aceh.

RESEARCH METHODS

The research method used is an analytical survey. The measurement design is carried out in a cross-sectional manner, namely a research design by measuring or observing at the same time (one time). The research was conducted in Gampong Ceurih, Ulee Kareng District, Banda Aceh. The research was conducted in July - August 2022.

The population in this study were all mothers who had babies aged 6-12 months in Gampong Ceurih, Ulee Kareng District, Banda Aceh, totaling 47 people. This research sample uses.

Sampling technique with the total sampling method. The variables in this study consist of dependent and independent variables. The dependent variable is exclusive breastfeeding. The independent variables are Knowledge and Attitude.

Methods of data collection in the study using primary data were obtained through a list of questions in a questionnaire that had been prepared previously based on the research objectives and then given to respondents, namely mothers who had babies aged 6-12 months living in Gampong Ceurih and then conducted interviews. Secondary data was obtained from reports and official documents through the Ulee Kareng Health Center, the head of Gampong Ceurih, and records at the research location.

Data analysis in this study used univariate analysis using descriptive statistical tests which aimed to get an overview of the distribution of frequencies and percentages of each variable studied, namely knowledge, attitudes, and exclusive breastfeeding. The data is presented in the form of a frequency distribution table.

Bivariate analysis was conducted to determine the relationship between each independent variable (knowledge and attitude) and the dependent variable (exclusive breastfeeding). The statistical test used chi-square at the 95% confidence level, namely $\alpha = 0.05$. With the provision that if the p-value < 0.05 then there is a significant relationship between the two variables.

RESULTS

Table 1. Characteristics of Respondents

No	Characteristics	F	%
1	Age		
	1. < 20 years	6	12,8
	2. 20 – 35 years	31	66.0
	3. > 35 years	10	21,3

	Total	47	100
2	last education		
	1. SD	4	8,5
	2. Junior High School	5	10,6
	3. Senior High School	32	68,1
	4. PT	6	12,8
	Total	47	100
3	Profession		
	1. IRT	32	68,1
	2. Self-employed	10	21,3
	3. Civil servants	5	10,6
	Total	47	100
4	Parity		
	1. Primiparous	11	23,4
	2. Scundipara	23	48,9
	3. Multipara	13	27,7
	Total	47	100

Based on age group, it was found that the majority of respondents aged 20-35 years were 31 respondents (66%), those aged > 35 years were 10 respondents (21.3%), and a minority aged < 20 years were 6 respondents (12.8%).

Based on the education group, it was found that the majority of respondents were educated 32 respondents (68.1%) from high school, 6 respondents (12.8%) had a university education, 5 respondents (10.6%) had junior high school education and 4 respondents (8.5%) had elementary school education.

By class Parity found that the majority of parity scundipara respondents were 23 respondents (48.9%), multipara parity was 13 respondents (27.7%), and the minority primipara were 11 respondents (23.4%).

Table 2. Exclusive breastfeeding based on knowledge and attitude

Variable	n	(%)
Exclusive breastfeeding		
Yes	25	53,2
No	22	46,8
Knowledge		
Not good	12	25.5
Well	35	74.5
Attitude		
Not good	14	29,8
Well	33	70,2
Total	47	100

Exclusive breastfeeding in Ceurih Village, Ulee Kareng District, Banda Aceh the majority of respondents who gave exclusive breastfeeding as many as 25 respondents (53.2%), and the minority of respondents who did not give exclusive breastfeeding as many as 22 respondents (46.8%).

Based on research results on knowledge of breastfeeding mothers in Gampong Ceurih, Ulee Kareng District, Banda Aceh, in 2022 that the majority of respondents who have good knowledge are 35 respondents (74.5%), and a minority of respondents who have poor knowledge are 12 respondents (25.5%).

Based on the results of Attitude Research Breastfeeding mothers in Gampong Ceurih, Ulee Kareng District, Banda Aceh in 2022, the majority of respondents had a good attitude 33 respondents (70.2%), and a minority of respondents had a bad attitude 14 respondents (29.8%).

Table 3. The relationship between knowledge and attitudes with exclusive breastfeeding

Variable	Exclusive breastfeeding				Total		P-Values	OR (CI : 95%)
	Yes		No		n	%		
	n	%	n	%				
Knowledge								6,667
Not good	10	83,3	2	16,7	12	100	0.015	(1,269-35,035)
Well	15	42,9	20	57,1	35	100		
Attitude								4,976
Not good	11	78,6	3	21,4	14	100	0.023	(1,166-21,242)
Well	14	42,4	19	57,6	33	100		

Based on table 3 shows that the variables of knowledge and attitude are significantly related to exclusive breastfeeding.

DISCUSSION

The results of the analysis using the chi-square test obtained $p = 0.015$ ($p < 0.05$) so it can be concluded that there is a relationship between mother's knowledge and exclusive breastfeeding in Gampong Ceurih, Ulee Kareng District, Banda Aceh. The results showed that the proportion of exclusive breastfeeding was greater for mothers who had good knowledge than for mothers who had poor knowledge. Respondents who did not give exclusive breastfeeding gave other foods such as honey, formula milk, porridge, bananas, and water when the baby was less than 6 months old. Respondents stated that breast milk was not enough for babies, so additional food had to be given. This additional food is believed to help meet the baby's food and drink needs.

This is in accordance with the theory put forward by notoatmodjo (2003) which states that knowledge is a very important domain in the formation of one's actions or behavior. A person's knowledge of health is one of the predisposing factors that influence a person's behavior, so if during pregnancy they do not receive information about or counseling about exclusive breastfeeding, it will affect the mother's behavior in breastfeeding her baby (Suhartono, 2012).

The results of this study are in line with the results of research conducted by Resytesya Mulianda (2010) which said that there is a relationship between knowledge of breastfeeding mothers and exclusive breastfeeding. This means that breastfeeding mothers who have good knowledge about exclusive breastfeeding will also provide exclusive breastfeeding.

The results of this study were also supported by the results of Aulita's research (2011) which obtained the results that there was a relationship between a mother's knowledge and exclusive breastfeeding to infants, where the better the mother's understanding of the benefits of exclusive breastfeeding, the mother will be more motivated to provide exclusive breastfeeding to the baby. Low knowledge about the benefits and purpose of exclusive breastfeeding can be the cause of the failure of exclusive breastfeeding in infants. Lack of mother's knowledge can be caused during pregnancy checks (Ante Natal Care), mothers do not receive intensive counseling about exclusive breastfeeding, the contents and benefits of breast milk, breastfeeding techniques, and the disadvantages of not giving exclusive breastfeeding (Purwanti, 2008).

The results of the analysis using the chi-square test obtained $p = 0.023$ ($p < 0.05$) so it can be concluded that there is a relationship between maternal attitudes and exclusive breastfeeding in Gampong Ceurih, Ulee Kareng District, Banda Aceh. The results showed that the proportion of exclusive breastfeeding was greater for mothers who had a good attitude than for mothers who had a bad attitude.

Respondents who did not give exclusive breastfeeding stated that there was a fear that the milk produced would not be enough to be given to the baby, giving only breast milk was not able to overcome hunger in the baby and the mother also stated that she did not give the first breast milk to her baby because she trusted the first breast milk. out is stale milk.

This study proves that the mother's attitude is one of the factors that can influence exclusive breastfeeding. Mothers who have a positive attitude towards exclusive breastfeeding are 1.9 times more likely to give exclusive breastfeeding to their babies compared to mothers who have a negative attitude. This result is in line with previous research in Manado City which stated that there was a relationship between maternal attitudes and exclusive breastfeeding of infants (Nurleli et al., 2018; Sjawie et al., 2019). attitudes towards exclusive breastfeeding. In other words, the better the attitude, the greater the chance of exclusive breastfeeding.

Most of the respondents who had a negative attitude did not give exclusive breastfeeding to their babies, namely 62.4%. Based on the results of the questionnaire answers, the majority of mothers answered that they agreed that their babies were given additional food at the age of fewer than 6 months. An attitude that lacks foundational trust regarding the meaning of exclusive breastfeeding makes mothers not only give breast milk for the first 6 months. Generally, the reasons for mothers not giving only breast milk are fear of not producing enough milk, or the quality of breast milk is not good enough, delays in starting breast milk, and the belief that the baby needs additional fluids (Assriyah et al., 2020)

A person will do an action if he views the action positively. Beliefs can shape a person's attitude toward doing an act or not. This belief can come from one's experience with the behavior in question in the past, but it can also be influenced by information about that behavior. Attitudes have several characteristics, including attitudes that are not inborn but are learned or formed based on experience (Marwiyah & Khaerawati, 2020).

CONCLUSION

The results of this study indicate that the 47 respondents who were studied, who gave exclusive breastfeeding were 53.2% and who did not give exclusive breastfeeding were 46.8%. There is a relationship between knowledge and attitudes of mothers with exclusive breastfeeding in Gampong Ceurih, Ulee Kareng District, Banda Aceh.

Suggestions to further increase the promotion of exclusive breastfeeding and not to introduce or encourage breastfeeding mothers to give formula milk as a substitute for exclusive breastfeeding, to socialize more exclusive breastfeeding to working and non-working mothers, to increase knowledge about exclusive breastfeeding by attending counseling and seeking information through print media or electronics.

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