

## ANALYSIS OF FACTORS INFLUENCING EXCLUSIVE BREASTFEEDING IN AMURANG COMMUNITY HEALTH CENTER

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### ABSTRAK : ANALISIS FAKTOR YANG MEMPENGARUHI PEMBERIAN ASI EKSKLUSIF DI PUSKESMAS AMURANG

Latar Belakang: ASI eksklusif selama enam bulan pertama kehidupan adalah salah satu intervensi paling efektif untuk meningkatkan kesehatan bayi dan mencegah berbagai penyakit. Namun, tingkat pemberian ASI eksklusif di banyak wilayah masih rendah. Di Puskesmas Amurang, angka pemberian ASI eksklusif juga belum mencapai target yang diharapkan. Oleh karena itu, penelitian ini bertujuan untuk menganalisis faktor-faktor yang mempengaruhi pemberian ASI eksklusif di Puskesmas Amurang.

Tujuan: Menganalisis faktor-faktor yang mempengaruhi pemberian ASI Eksklusif

Metode: Penelitian ini menggunakan desain cross-sectional dengan sampel 18 ibu yang memiliki bayi berusia 0-6 bulan yang terdaftar di Puskesmas Amurang. Data dikumpulkan melalui kuesioner yang mencakup faktor-faktor seperti pengetahuan ibu tentang ASI eksklusif, umur ibu, dan pendidikan ibu

Hasil: Hasil penelitian menunjukkan bahwa dari 18 responden. Faktor-faktor yang secara signifikan mempengaruhi pemberian ASI eksklusif meliputi pengetahuan ibu tentang manfaat ASI ( $p=0,005$ ), umur ibu ( $p=0,001$ ), dan pendidikan ibu ( $p=0,000$ ).

Kesimpulan: Faktor-faktor penting yang mempengaruhi pemberian ASI eksklusif di Puskesmas Amurang. Intervensi yang fokus pada peningkatan pengetahuan ibu dan memperkuat dukungan dari keluarga serta tenaga kesehatan dapat meningkatkan angka pemberian ASI eksklusif (Rahmawati et al., 2020).

Saran: ASI Eksklusif penting bagi bayi

Kata Kunci: ASI Eksklusif, Pengetahuan Ibu

### ABSTRACT

Background: Exclusive breastfeeding during the first six months of life is one of the most effective interventions to improve infant health and prevent various diseases. However, the level of exclusive breastfeeding in many areas is still low. At the Amurang Community Health Center, the rate of exclusive breastfeeding has also not reached the expected target. Therefore, this study aims to analyze the factors that influence exclusive breastfeeding at the Amurang Community Health Center.

Objective: Analyze the factors that influence exclusive breastfeeding

Method: This study used a cross-sectional design with a sample of 18 mothers with babies aged 0-6 months who were registered at the Amurang Community Health Center. Data was collected through a questionnaire that included factors such as mother's knowledge about exclusive breastfeeding, mother's age, and mother's education

Results: The results showed that out of 18 respondents. Factors that significantly influence exclusive breastfeeding include maternal knowledge about the benefits of breastfeeding ( $p=0.005$ ), maternal age ( $p=0.001$ ), and maternal education ( $p=0.000$ ).

Conclusion: Important factors influencing exclusive breastfeeding at the Amurang Community Health Center. Interventions that focus on increasing maternal knowledge and strengthening support from families and health workers can increase exclusive breastfeeding rates (Rahmawati et al., 2020).

Suggestion: Exclusive breastfeeding is important for babies

Keywords: Exclusive breastfeeding, Mother's Knowledge

### INTRODUCTION

Exclusive breastfeeding for the first six months of a baby's life is one of the most effective interventions to improve infant health and well-being (Pawenrusi, 2011). Exclusive breastfeeding can reduce the risk of infection, chronic disease, and improve optimal child growth and development (Rah, Mawati, 2013). The World Health Organization (WHO) recommends exclusive breastfeeding for the first six months and continuing breastfeeding with complementary foods until the age of two years or more (Asty, 2008).

However, the rate of exclusive breastfeeding in various regions, including Indonesia, is still low and has not reached the expected target. Based on data from the Ministry of Health of the Republic of Indonesia (2018), only 37.3% of babies in Indonesia receive exclusive breastfeeding for the first six months. At the Amurang Health Center, the rate of exclusive breastfeeding is also still below the national target, which indicates the need for more intensive attention and intervention (Zulkarnain, 2021).

The factors that influence exclusive breastfeeding are very diverse and complex. Mother's knowledge about the benefits of breastfeeding, support from family, especially husband, and support from health workers are some of the key factors that can influence the success of exclusive breastfeeding. Research by (Pertiwi, 2012) shows that "family support and education by health workers play a major role in the success of exclusive breastfeeding". Socioeconomic factors, such as the mother's education level and occupation, can also influence the mother's decision to provide exclusive breastfeeding (Kuntjoro, 2012).

This study aims to analyze the factors that influence exclusive breastfeeding at the Amurang Health Center. By understanding these factors, it is hoped that more effective interventions can be formulated to increase the rate of exclusive breastfeeding (Budiasih, 2008). This study examines the factors of maternal knowledge, family support, health worker support, and socioeconomic factors to obtain a more comprehensive picture of the obstacles and supporters in providing exclusive breastfeeding (Damayanti, 2010).

The results of this study are expected to provide a basis for formulating more effective policies and programs at the Amurang Health Center, and can contribute to improving the quality of maternal and child health in the area.

## RESEARCH METHODS

This study used a cross-sectional design with a sample of 18 mothers who had babies aged 0-6 months registered at the Amurang Health Center. Data were collected through a questionnaire that included factors such as maternal knowledge about exclusive breastfeeding, maternal age, and maternal education (Noatmadjo, 2012)

## RESEARCH RESULT

### Univariat

**Table 1**  
**Respondent Characteristics**

Information	Frequency	Percent
Mother's age		
20-30	16	88.9
31-40	2	11.1
Mother's Education		
SMP	1	5.6
SMA	17	94.4
Mother's Job		
IRT	10	55.6
Employee	8	44.4
Mother's Knowledge		
Not enough	15	83.3
Enough	3	16.7
Breastfeeding		
ASI Eksklusif	18	100.0

Based on table 1 above, most of the 16 respondents (88.9%) were aged 20-30 years, the mother's education of most of the 17 respondents (94.4%) was high school, the mother's occupation of most of the 10 respondents (55.6%) was as a housewife, the mother's knowledge of most of the 15 respondents (83.3%) was lacking, and all 18 respondents (100%) gave exclusive breastfeeding to their babies.

### Bivariat

Based on table 2 above, most of the 16 respondents who provided exclusive breastfeeding were aged 20-30 years and a small portion of 2 respondents who provided exclusive breastfeeding were aged 31-40 years. Chi Square test 0.001 means p-value <0.25 is included in the logistic regression test.

**Table 2**

**Mother's Age \* Breastfeeding Crosstabulation and Chi Square Test**

Information		Exclusive Breastfeeding	Chi Square	Total
Mother's age	20-30	16	0.001	16
	31-40	2		2

**Table 3**  
**Maternal Education \* Breastfeeding Crosstabulation and Chi Square Test**

Information		Exclusive Breastfeeding	Chi Square	Total
Mother's Education	SMP	1	0.000	1
	SMA	17		17

Based on table 3 above, most of the 17 respondents who provided exclusive breastfeeding had a high school education and a small portion of 1 respondent who provided exclusive breastfeeding had a junior high school education. Chi Square test 0.000 means p-value <0.25 is included in the logistic regression test.

Based on table 4 above, most of the 10 respondents who provide exclusive breastfeeding work as housewives and a small number of 8 respondents who provide exclusive breastfeeding work as employees. Chi Square test 0.637 means p-value > 0.25 does not enter the logistic regression test.

**Table 4**  
**Mother's Occupation \* Breastfeeding Crosstabulation and Chi Square Test**

Information		Exclusive Breastfeeding	Chi Square	Total
Mother's Job	IRT	10	0.637	10
	Employee	8		8

**Table 5**  
**Mother's Knowledge \* Breastfeeding Crosstabulation and Chi Square Test**

Information		Exclusive Breastfeeding	Chi Square	Total
Mother's Knowledge	Not Enough	15	0.005	15
	Enough	3		3

Based on table 5 above, most of the 15 respondents who provide exclusive breastfeeding have insufficient knowledge and a small portion of 3 respondents who provide exclusive breastfeeding have sufficient knowledge. Chi Square test 0.005 means p-value <0.25 is included in the logistic regression test.

obtained p-value 0.000. Factors that influence the provision of Exclusive Breastfeeding, the results of the analysis of a sample of 18 people, obtained a P value of  $0.000 \leq 0.05$  which means  $H_0$  is rejected and  $H_a$  is accepted, maternal knowledge, maternal age, and education.

## DISCUSSION

### Analyzing Factors Affecting Exclusive Breastfeeding

Based on table 5 above, the multinomial regression test of the suitability of the 3 variables of maternal knowledge, maternal age, and maternal education to the provision of exclusive breastfeeding obtained a p-value of 0.000. Factors that affect the provision of exclusive breastfeeding, the results of the analysis of a sample of 18 people obtained a P value of  $0.000 \leq 0.05$ , which means that  $H_0$  is

**Tabel 6**  
**Multinomial Regression Goodness-of-Fit**

Keterangan	Chi-Square	df	Sig.
Pearson	.000	0	.
Deviance	.000	0	.

Based on table 6 above, the multinomial regression test of the suitability of the 3 variables of maternal knowledge, maternal age, and maternal education to the provision of Exclusive Breastfeeding

rejected and  $H_a$  is accepted, maternal knowledge, maternal age, and education.

This study aims to analyze the factors that influence the provision of exclusive breastfeeding at the Amurang Health Center, focusing on the variables of maternal knowledge, maternal age, and maternal education. Based on table 5, the multinomial regression test shows that these three variables have a significant relationship with the provision of exclusive breastfeeding. The results of the statistical test show a p-value of 0.000, which is smaller than 0.05. This means that  $H_0$  is rejected and  $H_a$  is accepted, indicating that maternal knowledge, maternal age, and maternal education significantly affect the provision of exclusive breastfeeding.

### **Mother's Knowledge**

Mother's knowledge about the importance of exclusive breastfeeding greatly influences the success of exclusive breastfeeding. Mothers who have good knowledge about the benefits of breastfeeding tend to be more committed to providing exclusive breastfeeding to their babies. Research by (Dalimunthe, 2011) shows that "mothers with good knowledge about exclusive breastfeeding are more likely to provide exclusive breastfeeding compared to mothers with less knowledge". This shows that effective education programs can increase maternal knowledge and, ultimately, increase the rate of exclusive breastfeeding (Yogyakarta City Health Office, 2016).

### **Mother's Age**

Mother's age is also a factor that influences exclusive breastfeeding. More mature mothers tend to have more experience and maturity in caring for children, including in terms of breastfeeding (DIY Health Office, 2015). Studies show that older mothers are more likely to provide exclusive breastfeeding than younger mothers (Indonesian Ministry of Health, 2018). This could be because older mothers usually have more information and better social support. Maternal Education

Maternal education is another important factor influencing exclusive breastfeeding. Mothers with higher levels of education tend to have better access to health information and are better able to understand the importance of exclusive breastfeeding. According to UNICEF (2013), "higher-educated mothers are more likely to exclusively breastfeed because they are better informed and better understand the health benefits of breastfeeding". Higher maternal education is also correlated with a better ability to seek and use health

services that support exclusive breastfeeding (Indrawati, 2012).

### **Analysis Results**

The results of the analysis of a sample of 18 mothers at the Amurang Health Center showed that the p-value of  $0.000 \leq 0.05$ , confirmed that maternal knowledge, maternal age, and maternal education statistically significantly influenced exclusive breastfeeding. This means that efforts to increase exclusive breastfeeding must consider increasing maternal knowledge through education, providing special support for young mothers, and ensuring adequate access to information for mothers with various levels of education.

Based on these results, it is recommended that programs at the Amurang Health Center focus on increasing maternal knowledge about exclusive breastfeeding through counseling and education, special support for young mothers, and increasing access to information for mothers with low education. Thus, it is hoped that the rate of exclusive breastfeeding can increase, providing a positive impact on the health and welfare of children in the area (Khofiyah, 2018).

### **CONCLUSION**

This study aims to analyze the factors that influence exclusive breastfeeding at the Amurang Health Center, focusing on the variables of maternal knowledge, maternal age, and maternal education. Based on the results of the multinomial regression test, these three variables have a significant relationship with exclusive breastfeeding. The results of the statistical test show a p-value of 0.000, which is smaller than 0.05, so  $H_0$  is rejected and  $H_a$  is accepted. This indicates that maternal knowledge, maternal age, and maternal education significantly influence exclusive breastfeeding.

Maternal knowledge about the importance of exclusive breastfeeding greatly influences the success of exclusive breastfeeding. Mothers with good knowledge about the benefits of breastfeeding tend to be more committed to providing exclusive breastfeeding to their babies.

### **SUGGESTIONS**

#### **Improve Education and Counseling:**

Structured Education Program: Conduct a structured education program that focuses on the benefits and techniques of exclusive breastfeeding. Educational materials must be adjusted to the various levels of knowledge of mothers to ensure that all mothers receive relevant and easy-to-understand information.

Routine Counseling: Conduct routine counseling at integrated health posts and groups of pregnant and breastfeeding mothers. This counseling can involve health workers, integrated health post cadres, and mothers who have successfully provided exclusive breastfeeding to share their experiences.

#### **Special Support for Young Mothers:**

Support Groups: Form support groups for young mothers where they can share experiences and get guidance from more experienced mothers.

Personal Counseling: Provide more intensive personal counseling services for young mothers to help them overcome challenges in providing exclusive breastfeeding.

Training and Mentoring: Train young mothers on the importance of exclusive breastfeeding and provide special mentoring to ensure they get the support they need.

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