

FACTORS ANALYSIS THAT AFFECT MOTHERS GIVING EARLY BREAST MILK TO ABIES AGED 0-6 MONTHS

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ABSTRAK

Latar belakang;. Menurut who pada tahun 2017, hanya sekitar 40% bayi usia 0-6 bulan, sedangkan 60% bayi ternyata telah mendapat MP-ASI dini pada usia kurang dari 6 bulan.

Tujuan; Penelitian ini untuk mengetahui faktor-faktor yang mempengaruhi ibu memberikan ASI dini MP-ASI pada bayi usia 0-6 bulan di wilayah kerja Puskesmas Kelurahan Klambir Lima Kebun Kec Hamparan Perak Tahun 2021.

Metode; Penelitian ini menggunakan desain penelitian survei analitik dengan pendekatan Cross Sectional. Populasi dalam penelitian ini adalah 156 orang dan banyak sampel adalah 61 orang. Metode pengumpulan data menggunakan data primer, sekunder dan tersier. Analisis ini dilakukan sampai uji multivariat menggunakan uji regresi logistik.

Hasil; Menunjukkan bahwa ada pengaruh pengetahuan dengan pemberian MP-ASI sig-p = 0,037 atau p-value < sig (0,05). Dukungan keluarga dengan pemberian MP-ASI sig-p = 0,000 atau p-value < sig (0,05). Ada pengaruh kecukupan ASI dengan pemberian MP-ASI sig-p = 0,000 atau p-value < sig (0,05). Yang sangat berpengaruh terhadap pemberian ASI dini adalah dukungan keluarga, dimana nilai sig-p sebesar 0,007 dan EXP (B) dapat dilihat nilai OR pada variabel dukungan keluarga sebesar 11,963.

Kesimpulan; Dalam penelitian ini faktor yang sangat mempengaruhi ibu memberikan ASI dini pada bayi usia 0-6 bulan adalah dukungan keluarga, Diharapkan kepada Puskesmas Pembantu Klambir Lima Kebun untuk melakukan penyuluhan kepada ibu yang memiliki bayi 0-6 bulan tentang pemberian ASI yang benar. MP-ASI pada saat bidan/petugas kesehatan melakukan posyandu

Saran agar ibu yang memiliki bayi mendapatkan informasi yang benar dan tidak lagi memberikan ASI dini pada usia < 6 bulan.

Kata kunci: Pengetahuan, Dukungan Keluarga, Kecukupan ASI

ABSTRACT

Background;. According to who in 2017, only about 40% of babies aged 0-6 months, while 60% of infants turned out to have received early MP-breast milk at less than 6 months of age.

Purpose; This study is to find out the factors that affect mothers giving early MP-BREAST MILK to infants aged 0-6 months in the working area of the Klambir Village Health Center Five Kebun Kec Hamparan Perak in 2021.

Methods; This research uses analytical survey research design with a Cross-Sectional approach. The population in this study was 156 people and many samples were 61 people. Data collection methods use primary, secondary and tertiary data. The This analysis was carried out until the multivariate test used logistic regression tes.

Results; Research shows that there is an influence of knowledge by giving MP-ASI sig-p = 0.037 or p-value < sig α (0.05). Family support by giving MP-BREAST MILK sig-p = 0.000 or p-value < sig α (0.05). There is an effect of adequacy of breast milk by giving MP-ASI sig-p = 0.000 or p-value < sig α (0.05). What is very influential on early breastfeeding is family support, where the sig-p value of 0.007 and EXP (B) can be seen the OR value in the family support variable of 11,963.

Conclusion; In this study there are factors that greatly affect mothers giving early breast milk to babies aged 0-6 months is family support, It is expected to puskesmas Pembantu Klambir Lima Kebun to conduct counseling to mothers who have babies 0-6 months about giving the correct MP-BREAST MILK at the time of midwives / Health workers do posyandu

Suggestion so that mothers who have babies get the right information and no longer provide early breastfeeding at the age of < 6 months.

Keywords: Knowledge, Family Support, Adequacy of Breast Milk

INTRODUCTION

According to UNICEF Global Breastfeeding Scorecard, which evaluates data from 194 countries, only 40% of babies under 6 months are exclusively breastfed. In addition, only 23 countries offer breast milk above 60%, making it one of the countries with low ASI scope due to lack of breastfeeding knowledge and management..(Al-Agha n.d.)

According to the World Health Organization (WHO), in 2017, only 38% of the world's population was breastfed. WHO is targeting to increase the proportion of breastfeeding in the first 6 months of labor at least 50% in 2025. According to (WHO, 2017), ASI is given to newborns until the age of 6 months without additional food, but with the exception of vitamins, the only drug Recommended by health professionals for medical reasons is breastfeeding. In 2017, only about 40 % of babies aged 0-6 months, only breastfeeding found worldwide for several months, but for an additional 60 %, early breastfeeding was found less than 6 months. This shows that breastfeeding alone is still low, but the practice of providing early breastfeeding food is still high in various countries. (Rotua, Novayelinda, and Utomo 2018) (Fikawati and Syafiq 2010)

According to the Ministry of Health of the Republic of Indonesia (2017), 54.0% of babies still get complete milk at the age of 05 months and 29.5% get full milk until the age of 6 months (Rotua, Novayelinda, and Utomo 2018)

In Indonesia, the provision of breastfeeding food less than 6 months is still high (Irianti and Sari 2019). Early or non-ASI companions are still high, considering that the scope of breastfeeding in Indonesia in 2018 is still far from the target of 54.3%, based on basic health research data (RISKESDAS).(Nababan and Widyaningsih 2018)

Based on data 277,925 newborns from the 2019 North Sumatra Health Profile, only reported. 186,460 babies receive IMD. There are three districts/cities with the lowest IMD numbers: Medan (22.19%), Tanjung Balai (23.29%) and Langkat (40.84%). (Sinaga and Siregar 2021).

The results obtained from 186,460 babies under 6 months, health profile data in North Sumatra in 2019, 75,820 (40.66%) babies are given breast milk and the remaining 110,640 premature babies, reportedly received breast milk. The performance is still far from the North Sumatra Health Service Strategic Plan in 2019 of 53%.(Sinaga and Siregar 2021)

Factors that play a role in the high mordibactivity in infants aged 0-6 months, one of which is the low scope of exclusive breastfeeding

and high administration of early MP-ASI (Nurhidayat 2021), because without exclusive breastfeeding babies are more susceptible to various diseases such as diarrhea, constipation and digestive tract infections that can increase numbers Morbidity.(Muslimah, Laili, and Saidah 2020), (Lestiarini and Sulistyorini 2020)

Adding complementary foods before a 6 - month -old child is not recommended because it can increase the risk of contamination and disease, especially diarrhea (Sari and Sari 2022). When a child is six months old, breast milk needs to be equipped with fluids and other solid foods when the baby grows and develops to ensure proper nutrition. Liquid and dense food commonly referred to as MPASI and given until the age of 2 years. (Rustam et al. 2022). The relationship between complementary feeding behavior and nutritional status with p value = 0.015 ($p \leq 0.005$) from the results of previous studies. (Kusumaningrum, Hastuti, and Mayasari n.d.)

In fact, the mother often feeds her baby a few days or week after birth with milk complementary formula milk (MPASI). (Aninam 2019) (Sudaryanto 2014). Team or banana rice that is purer, breast milk and replaced with honey, sugar and formula milk. Giving breast milk at the right time is important. Either too fast or too slow can cause side effects such as diarrhea, difficulty defecation, obesity, intestinal cramps and allergies.(SAVITRI 2018) (Keb 2014)

A study by Gustien Siyan, "Interconnection between 0 and 6 months at the Kony Health Center in Jamby City in 2018 ". Of the 37 people who answered the survey, 20 said they experienced poor family support. Fourteen respondents (70.0%) gave early MPASI and six respondents (30 , 0%) does not provide early MPASI. Of the 17 respondents with good family support, 3 respondents (17.6%) provide early MPASI and 14 respondents (82.4%) do not provide early MPASI. Based on the results of the Chi-Square test analysis obtained P-value value of 0.001. This shows that there is a significant relationship between family support and early breastfeeding..(Siahaan 2018) (Oktalina, Muniroh, and Adiningsih 2015)

Research in Village 2 Dayo, a related factor for early supplementation in the working area of the Tandan II Health Center in Rokan Hulu Regency ". The results of the study were 16 (66.7%) mothers who lack knowledge about early MPASI. Statistical test results show P-value? 0.048. This shows the relationship between early breastfeeding food and knowledge. The results of this study are in line with Smaldiono who discovered the relationship between knowledge and the provision of early breastfeeding

food. The study states that a group of mothers who are less knowledgeable about ASI's companion food provides complementary foods to their babies in the first two months of life. Mothers who know about MP ASI will be given MP ASI at the age of 35 months, while mothers who get good information about MP ASI will be given after the baby is more than 6 months old. (Artikasari et al. 2021) (Heryanto 2017)

The results of the initial survey from UPT. Hamparan Perak Health Center found that the number of babies in the work area of the Hamparan Perak Health Center from February-August 2021 was 1104 babies aged 0-6 months from 13 villages, namely: Hamparan Perak Village, Sei Baharu, Desa Lama, Alu Purau, Selemak, Klambir, Klambir Lima Kampung, Klambir Lima Kebun, Klumpang Kampung, Klumpang Kebun, Palu Purau, Payabakung, and Sialang Muda. (Tahun 2015)

The number of babies who get exclusive breastfeeding is very low in the working area of the Hamparan Perak Health Center, from 1104 babies only 337 exclusive breastfeeding or only 30.5% achieved have been given early MP-ASI, the target of the 60% Hamparan Perak Health Centre. (Tahun 2015)

Supporting Klambir Lima Kebun Health Center data of Kec. Hamparan Perak obtained the number of babies aged 0-6 months as many as 230 babies, researchers directly survey and low exclusive breastfeeding coverage of only 30% or as many as 71 babies. At the time of the survey the researcher conducted an interview with 10 mothers who had babies under 6 months in the working area of the Klambir Lima Village supporting Health Center Kec. Hamparan Perak, it turns out that most mothers give formula milk and provide additional food such as bread porridge, crispy bananas and rice porridge when the baby is 2-5 months old. This inappropriate behavior is because the mother does not understand how to provide complementary foods (MP-ASI) to infants according to the age of the baby, the family supports the mother to provide early MP-ASI such as formula milk, starch water, and bread porridge. Non-smooth breast milk is a factor of mothers to provide complementary foods. Mothers assume that babies who are always hungry babies and mothers assume that for the baby to grow as large.

Based on the background above, researchers in the working area of the Klambir Lima Kecamatan Hamparan perak Health Center want to do research on the analysis of factors causing breastfeeding mothers Early in infants aged 0-6 months.

RESEARCH METHODS

This research uses an analytical survey research design that is research that tries to explore how and why the phenomenon occurs, using a cross-sectional approach that is by measuring or observing all relevant variables (dependent) with independent variables carried out in the same time

This study was conducted at the Klambir Lima kec. Hamparan Perak supporting Public Health Center in June-October 2021. The population of this study totaled 159 mothers who had babies aged 0-6 months. Sampling by probabilistic sampling using simple random samples. The survey was filled directly by respondents. Analyzing data using the Chisquere test, the test data is displayed in the form of a frequency distribution table.

RESEARCH RESULTS

Characteristics of Respondents; Frequency Distribution of Respondents Characteristics by Mother's Age Based on Table 4.1. Most aged 20-29 years as many as 37 people (60.7%), based on education most of the high schools/vocational high schools (55.7%), based on the work most mothers do not work as many as 48 people (78.7%), based on the age of the baby, most of the 3 months old as many as 18 people (29.5%).

Table 1.
Characteristics of respondents

Characteristics	F	%
Age		
<20 years	2	3,3
20-29 years	37	60,7
30-40 years	20	32,8
>40 years	2	3,3
Education		
SD	0	0
SMP	18	29,5
SMA/SMK	34	55,7
PT	9	14,8
Work	13	21,3
Work		
Not working	48	78,7
Age of baby		
1 month	1	1,6
1,5 month	2	3,3
2 month	11	18,0
2,5 month	3	4,9
3 month	18	29,5
3,5 month	4	6,6
4 month	7	11,5
4,5 month	2	3,3

5 month	8	13,1
6 month	5	8,2

Univariate Analysis

Based on 2 can be, It is known that of the 61 respondents obtained the results of most of the knowledge of less than 28 people (45.9%), while a small part of the knowledge was both 14 people (23.0%). The support variable shows that most of the families support it to provide 40 early MP-ASA (65.6%), whereas, a small number of families do not support Giving MP-ASA as many as 21 people (34.4%). The variable is sufficient, the milk shows that most mothers with enough breast milk (55.7%), while a small portion of mothers with not enough milk is 27 people

Table 2.
Distribute frequency of respondents based on knowledge

Variable	f	%
Knowledge		
Good	14	23,0
Enough	19	31,1
Not enough	28	45,9
Support Family		
Not support	21	34,4
Support	40	65,6
Breast milk sufficiency		
Breast milk enough	34	55,7
Breast milk not enough	27	44,3

Bivariate Analysis

Table 3.
Relationship of mother's knowledge and giving early MP-ASI in infants aged 0-6 month

Variabel	Giving early MP-ASI		Not Giving MP-ASI		Giving MP-ASI		Value
	f	%	f	%	f	%	
Knowledge							
Not enough	3	4,9	25	41,0	28	45,9	0.037
Enough	7	11,5	12	19,7	19	31,1	
Good	6	9,8	8	13,1	14	23,0	
Supports Family							
Family does not Support	12	19,7	9	14,8	21	34,4	0.000
Family support	4	6,6	36	59,0	40	65,6	
Breast milk sufficiency							
Breast milk enough	15	24,6	19	31,1	34	55,7	0.000
Breast milk not enough	1	1,6	26	42,6	2	44,3	

Based on Table 2, 28 of 61 respondents (45.9%) the lowest knowledge, and 3 respondents (4.9%) did not get companion food, 25 (41.0%) were breastfeeding. namely 14 (23.0%), 6 (9.8%) did not get MPASI, and 8 received MPASI namely (13.1%). The chi-square test results showed a p-value of 0.037. This means the value of p-value < α 0.05.

Based on Table 4.6 it is known that of 61 respondents most families supported 40 respondents (65.6%) with no MP-ASI as many as 4 respondents (6.6%) and 36 respondents (59.0%) did not support, but 21 Respondents (34.4%) and 12 respondents (19.7%) did not receive MPASI and 9 respondents received MPASI (14.8%). The P value is obtained based on the results of the statistical test using the Chi-Square test, 0,000 means the P value < 0.05, H0 was rejected, HA was accepted, showing a significant effect between family and MP-ASI support. Babies aged 0-6 months in the working area of the Klambir Lima Kebun Health Center years 2021.

Table 4.7 shows that most of the categories of breastfeeding are sufficient for 61 respondents. 34 respondents (55.7%) did not get MP-ASI, 15 respondents (24.6%) and early MPASI received 19 respondents (31.1%), But only 27 respondents (44.3%) of breast milk with not given MP-ASI were 1 respondent (1%) and given MP-ASI 26 respondents (42.6%).

The chi-square test was carried out producing a p-value value of 0,000. It means has a significant effect on the adequacy of breast milk in infants aged 0-6 months and early breastfeeding

Multivariate Analysis

From Table 4 it can be seen that what is very influential on the provision of early MP-ASI is family support, where the value of sig 0.007 and Exp (B)

can be seen the value of OR on the support variable The family is 11,963 which means. Family support affects complementary foods.

Tabel 4.
Logistics regression test

Variable	B	S.E	Wald	Df	Sig	Exp (B)
Knowledge	-1.273	.545	5.450	1	0.020	.280
Family supporting	2.482	.923	7.223	1	0.007	11.963
Breast milk sufficiency	-2.209	1.151	3.680	1	0.055	.110
Costant	3.490	2.663	1.718	1	0.190	32.785

DISCUSSION

The effect of knowledge on the provision of early MP-ASI.

Based on Table 4.4 known from 61 respondents, most of the knowledge was less than 28 respondents (45.9%) with those not given as many as 3 respondents (4.9%) and as many as 25 (41.0%) respondents received MPASI, but up to 6 (9.8%) did not receive MPASI and 8 (13.1%) received MPASI. Chi-square results have a significant value of SIG-P = 0.037 or P-Value < sig α (0.05). This proves that the provision of early breastfeeding food is influenced by the mother's knowledge factor

In line with the results of Kumalasari et al's research entitled "Factors Related to Early Supplemental Nutrition (MPASI). Based on the results of the statistical test there is a significant relationship between the level of knowledge and early breastfeeding and the complementary food (ρ value = 0.024).(Heryanto 2017)

Knowledge is all that people know about certain objects, treasure in the form of spiritual wealth obtained through rationality and experience. What is known or cognitive work. Knowledge is the result of knowing, paying attention, understanding, and becoming wise. The knowledge gained is information captured by the five human senses. The information is then developed through language and the ability to think.(Anwar 2015)

Researchers believe that knowledge is one of the factors related to early MPASI, because the mother is not yet optimal for her own breastfeeding until the age of 6 months due to lack of knowledge and knowledge of mothers and information about the importance of breastfeeding. So that the mother gives an early MP-ASI to her baby and does not understand the dangers that can be caused in providing early food on infants 0-6 months. This research is in line with the research entitled Factors Related to Nutrition in Early Breastfeeding in Negeri

Agung Village, UPTD Puskesmas Buay Sandang Aji, South OKU Regency. The results showed that there was a significant relationship between early complementary feeding and breastfeeding adequacy value = 0.000.(Rey 2017)

The influence of family support on the provision of early MP-ASI

Based on Table 4.5 known from 61 respondents most of the families supported as many as 40 respondents (65.6%) with no MP-ASI as many as 4 respondents (6.6%) and 36 respondents (59.0%) did not support, but 21 respondents (34.4%) and 12 respondents (19.7%) did not receive MPASI and 9 respondents received MPASI (14.8%). The Chi-Square results show that the significant value of the probability of family support is SiG- P 0,000 or P-Value < sig α (0.05). This provides evidence that the provision of MP-ASI for early breastfeeding is influenced by family support. This study is in line with the results of the study entitled The Effect of Family Support on the Provision of Milk Mother ASI (MPASI) to infants < 6 months. Based on the results of the analysis, 24 (92.3%) of 40 respondents received MP ASI and family support, and 2 (7.7%) received MP ASI, a respondent who did not have family support. The results of P 0.002, meaning that there is an influence of family support on the provision of ASI (MPASI) food in infants under 6 months (Ekasari 2018)

The interpersonal relationship that protects people from the negative effects of stress is a form of family support, because this support is a form of interpersonal interaction that includes attitudes, actions and acceptance.(Hanurawan 2010)

Social support can provide assistance and support whenever they need it (Heryanto 2017). According to the Assumption of Researchers Family Support is one that influences the mother to give her baby MP-ASI Early, because sometimes parents like grandmothers/grandfathers provide wrong support

so that mothers who have Babies follow what parents say is like giving a baby frown when the baby is not 6 months old. Support given by the family to mothers such as emotional support, empathy, and material support.

The effect of the adequacy of breast milk on the administration of early MP-ASI

Based on Table 4. it is known according to 61 respondents in part of the relative breast milk of 34 respondents (55.7%) not given MP-ASI of 15 respondents (24.6%) and given early MP-ASI amounted to 19 respondents (31.1%), whereas Some of the relative breastfeeding is 27 respondents (44.3%) with not given MP-ASI as many as 1 respondent (1%) and given MP-ASI 26 respondents (42.6%)

According to the researcher's assumption, the adequacy of breast milk is a mother who has a lot of milk coming out through the nipple (Hidayati 2018), For self-fed babies, urinating six times a day indicates that they are drinking adequate amounts of milk (Priyono 2010) (Yulianti 2010), so that it will be easier for the baby to get intake only from breast milk without any addition (APRILIYANTI 2019). Breast milk that comes out a lot indicates a mother has balanced nutrition in her body (Roesli 2000), it is said that breast milk is sufficient if the mother produces \pm 500 ml of breast milk per day, and if the mother gives her baby breast milk, the baby is not fussy or even after being breastfed the baby will fall asleep

CONCLUSION

After analysis and discussion, it can be concluded as follows:

Univariate results show that most of the knowledge is lacking as many as 28 people (45.9%), while a small portion of good knowledge is 14 people (23.0%). The support variable shows that most of the families support giving early MP-ASI as many as 40 people (65.6%), while a small number of families do not support giving early MP-ASI as many as 21 people (34.4%). The variable of sufficient breast milk shows that the majority of mothers with sufficient breast milk are 34 people (55.7%), while a small proportion of mothers with insufficient breast milk are 27 people (44.3%).

Bivariate Test Analysis Based on Table 2, 28 of 61 respondents (45.9%) had the lowest knowledge, and 3 respondents (4.9%) did not receive complementary foods, 25 (41.0%) were breastfeeding, but only some a small number of skilled respondents, namely 14 (23.0%), S 6 (9.8%) did not receive MPASI, and 8 received MPASI (13.1%). The results of the chi-square test showed a

p-value of 0.037. This means that the p-value $<$ 0.05. Based on table 4.6, most of the families supported as many as 40 respondents (65.6%) with those who were not given complementary feeding as many as 4 respondents (6.6%) and 36 respondents (59.0%) did not support, but 21 respondents (34.4%) and 12 respondents (19.7%) did not receive MPASI and 9 respondents received MPASI (14.8%). The p value was obtained based on the results of statistical tests using the chi-square test, 0.000 means p value $<$ 0.05, H₀ is rejected, H_a is accepted, indicating a significant effect between family support and complementary feeding. Babies 0-6 months old. The category of breastfeeding is sufficient for 61 respondents. 34 respondents (55.7%) did not receive MP-ASI, 15 respondents (24.6%) and early MPASI received 19 respondents (31.1%), but only a little breast milk, namely 27 respondents (44.3%) were not given MP-ASI as many as 1 respondent (1%) and those who were given MP-ASI were 26 respondents (42.6%). The chi-square test was performed to produce a p-value of 0.000. This means that there is a significant effect on the adequacy of breastfeeding in infants aged 0-6 months and early breastfeeding.

Multivariate Analysis From table 4, it can be seen that the most influential on early complementary feeding is family support, where the value of sig 0.007 and EXP (B) can be seen the OR value of the family support variable, which is 11,963, which means. Family Support Affects Breast Milk Complementary Foods.

SUGGESTIONS

It is hoped that the Klambir Lima Kebun supporting Health Center to conduct counseling to mothers who have babies 0-6 months about the correct MP-ASI giving when the midwife/health worker conducts a posyandu, so that mothers who have babies get the right information and no longer Give MP-ASI Early at the age of the child $<$ 6 months.

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