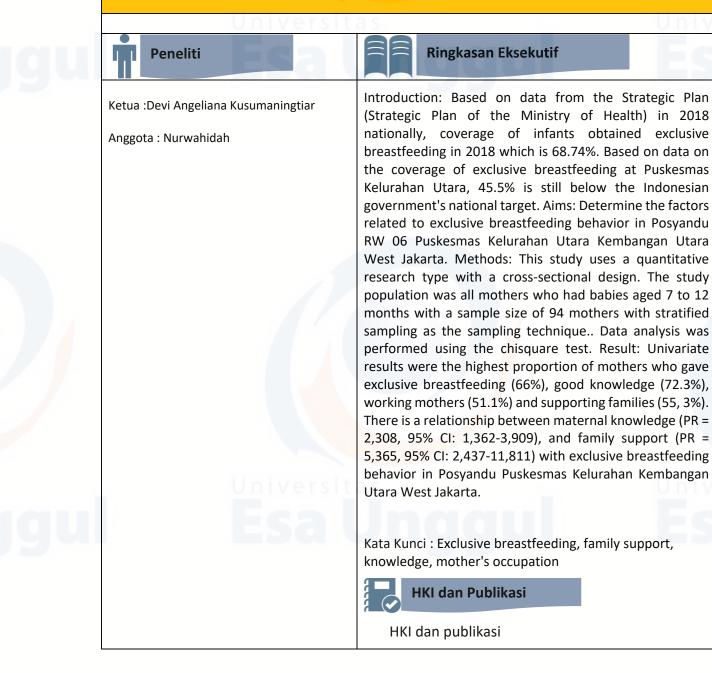


#### JUDUL : BEHAVIOR OF EXCLUSIVE BREASTFEEDING AND ASSOCIATED FACTOR AMONG MOTHERS IN THE FORMAL SECTOR, INDONESIA





# LPPM UNIVERSITAS ESA UNGGUL

(Profil Ringkasan LITABMAS)

#### Latar Belakang

Exclusive breastfeeding is a natural first food for babies. Exclusive breastfeeding contains all the nutrition a baby needs for the first thousand days of life. Breastfeeding has many benefits not only for the health of the baby but also for the mother. By breastfeeding, it means providing the best nutrition for the healthy growth and development of a baby. In order to reduce infant morbidity and mortality, UNICEF and WHO recommend that babies only be breastfed (ASI) for at least six months, and breastfeeding is continued until the baby is two years old. In order for mothers to maintain exclusive breastfeeding for six months, WHO recommends initiating breastfeeding within the first hour of life, babies only receive breast milk without additional food or drink, including water, breastfeed as requested or as often as the baby wants, and do not use bottles or pacifiers (WHO, 2005).

The United National Children's Foundation (UNICEF) states that as many as 44% of the world's newborns get breast milk within the first hour of birth, but fewer babies under the age of six months are breast milked exclusively. Exclusive breastfeeding coverage in Central Africa is 25%, Latin America and the Caribbean as much as 32%, East Asia as much as 30%, South Asia as much as 47%, and developing countries as much as 46%. Overall, less than 40% of children under the age of six months are fed breast milk exclusively. The WHO target in 2025 is to increase exclusive breastfeeding for the first six months at least 50% (WHO, 2015). The Kembangan District Health Center is located in Kembangan Utara Village, precisely on Jl. Kembangan Raya Rt. 005/002 Kembangan Utara Village, Kembangan District, West Jakarta Administrative City. Kembangan SubDistrict Health Center leads six village health centers. Puskesmas Kelurahan Kembangan Utara is a health center with the lowest exclusive breast milk coverage of 45.5%, still far from the national target of 80%. Puskesmas Kelurahan Kembangan Utara Has nine RW. Where RW 6 has four posyandus and has the largest baby population compared to other RWs. One of the

#### Hasil dan Manfaat

According to the results of research for exclusive breastfeeding behavior in Posyandu RW 06 Puskesmas Kelurahan Kembangan Utara West Jakarta Year 2019 categories are giving exclusive breastfeeding, if the mother breastfeeds the baby from birth until the baby is six months old and does not provide exclusive breastfeeding and if the mother provides food other than breast milk <6 months.

Based on the results of Table 1, it can be known that, from 94 respondents, the study obtained the highest proportion of mothers who gave exclusive breast milk as many as 62 babies (66%), while the lowest proportion were in mothers who did not give breast milk exclusively, as many as 32 babies (34%). This study is in line with research conducted by Khoiriah et al. (2018) which found that the proportion of mothers who gave exclusive breastfeeding was more than those who did not provide exclusive breastfeeding, namely 59 mothers (62.8%). Based on the results of Table 1 it can be known that, from 94 respondents in the study, the highest proportion was found in mothers who had good knowledge as many as 68 mothers (72.3%), while the lowest proportion was mothers who had bad knowledge as many as 26 mothers (27.7%). Based on the results of Table 1 it can be known that, from 94 respondents in the study, the highest proportion was found in mothers who did not work, as many as 48 mothers (51.1%), while the lowest proportion was mothers who worked as many as 46 mothers (48.9%).

Based on the results of Table 1, it can be known that, from 94 respondents in the study, the highest proportion of mothers who received family support was 52 mothers (55.3%), while the lowest proportion was 42 (44.7%) mothers who did not get family support. Table 2 shows the results of the bivariate analysis on the chi-Square test that there is a relationship between knowledge and exclusive breastfeeding behavior (P-value 0.006) and the results of the analysis found that the prevalence ratio (PR) value was 2.308 with 95% CI: 1.362-3.909, which means



impacts that occurred in infants aged 6-12 months was 21 people with malnutrition, 75 obesity and 12 stunting (Puskesmas Kecamatan Kembangan, 2018).

Metode

This research uses quantitative research design with cross-sectional research design, namely research in which variables including risk factors and variables including effects are observed at the same time by using interviews with questionnaire measuring instruments. The dependent variable in this study is the behavior of exclusive breastfeeding, while the independent variables are knowledge, work and family support. In this study, a sample of 94 mothers who had babies aged 7 to 12 months based on four posyandus were 26 samples of Posyandu Cambodia 1, 15 samples of Cambodia 2, 43 samples of Cambodia 3 and 10 samples of Cambodia 4. The sampling technique used in this research is stratified sampling, which is a sampling technique stratifying the population first, which identifies the general characteristics of members of the population which then determines the strata or layers of the population units. The inclusion criteria in this study were mothers who came to posyandu at RW 06 (Cambodia 1, Cambodia 2, Cambodia 3 and Cambodia 4) who had babies aged 7 to 12 months and were willing to be respondents. The

mothers who have bad knowledge have a 2,308 times risk of not giving exclusive breastfeeding compared to mothers who have good knowledge. There was no relationship between maternal employment and exclusive breastfeeding behavior (P value 0.945) and the analysis found that the =PR)= was 1/0.921 with 95% CI: 0.524-1.619 meaning that working mothers were more at risk 1/0.921 times, because they do not provide exclusive breast milk compared to working mothers. There is a relationship between family support and exclusive breastfeeding behavior (P-value 0.000) and the results of the analysis found that the PR was 5.365 with 95% CI: 2.437-11.811, meaning that mothers who do not get family support are at risk of 5.365 times not giving breast milk exclusively compared to mothers who get family support.



exclusion criteria in this study were mothers who were not willing to be interviewed and mothers who did not have babies. This research has passed the ethical review from the Research Ethics Commission of Esa Unggul University with Number: 0092-20.093 / DPKE-KEP / FINAL-EA / UEU / II / 2020.	<b>Iggul</b> Univ
Skema LITABMAS Penelitian Mandiri	Ucapan terimakasih Terimakasih kepada seluruh pihak yang telah membantu, terutama puskesmas kembangan

#### DAFTAR PUSTAKA

Cai, X., Wardlaw, T., & Brown, D. W. (2012). Global trends in exclusive breastfeeding. International Breastfeeding Journal, 7, 2–6. <u>https://doi.org/10.1186/1746-4358-7-12</u>

- DKI Jakarta Provincial Health Office. (2017). Provincial Health Profile. Jakarta: DKI Jakarta Provincial Health Office.
- Egata, G., & Amanuel, T. (2015). Exclusive breastfeeding and associated factors among infants under six months of age in the pastoral community of Dolo Ado district, Ethiopian Somali regional state, south east Ethiopia.

Eide, K. T., Fadnes, L. T., Engebretsen, I. M. S., Onarheim, K. H., Wamani, H., Tumwine, J. K., & Norheim, O. F. (2016). Impact of a peer-counseling intervention on breastfeeding practices in different socioeconomic strata: results from the equity analysis of the PROMISE-EBF trial in Uganda. Global Health Action, 9(1). https://doi.org/10.3402/gha.v9.30578

Fikawati, S., Syafiq, A., & Karima, K. (2018). Mother and baby nutrition Depok: Rajawali. Friedman, M. M. (2010). Family Nursing Textbook. Jakarta: EGC. Gibney M. J., Margetts, B.M., Kearney, J.M.,& Arab L. (2015). Public Health Nutrition. EGC.

Hartono, S. (2009). 101 Benefits of breast milk. Bandung: Booklet Nakita. Indonesian Ministry of Health. (2010). Indonesian Health Profile. 130–133. I

ndonesian Ministry of Health. (2014). Exclusive Breastfeeding Situation and Analysis. Jakarta: Ministry of Health RI. Indonesian Ministry of Health. (2018). Indonesian Health Profile. Jakarta: Ministry of Health RI.

Kembangan District Health Center. (2018). The profile of the Kembangan District Health Center.
Khoiriah, A. & L. (2018). Factors that influence exclusive breastfeeding for infants under 6 months of age. Nursing, 2. https://doi.org/10.1186/1746-4358-6- 2 Lestari, R.R. (2018). Factors Associated with Exclusive Breastfeeding for Mothers. Journal of Early Childhood Education



Malhotra, N. (2013). Inadequate feeding of infant and young children in India: Cai, X., Wardlaw, T., & Brown, D. W. (2012). Global trends in exclusive breastfeeding. International Breastfeeding Journal, 7, 2–6. https://doi.org/10.1186/1746-4358-7-12

DKI Jakarta Provincial Health Office. (2017). Provincial Health Profile. Jakarta: DKI Jakarta Provincial Health Office.

# Iniversitas Esa Unggul

Universitas