

**MOTHER'S KNOWLEDGE RELATIONSHIP WITH GIVING
EXCLUSIVE ASI IN THE WORKING AREA OF UPT
PUSKESMAS MERAL KARIMUN DISTRICT
RIAU ISLANDS PROVINCE**

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Abstract

Background : Based on the Riau Islands Province Health Profile in 2016, exclusive breastfeeding shows an increase but is still far below the national target (80%) and still low compared to the national achievement (54%). The trend of exclusive breastfeeding coverage in Riau Islands Province from 2014 was 31.74%, 2015 was 41.70% and 2016 was 41.91%. The research objective was to determine the relationship between maternal knowledge and exclusive breastfeeding.

Method : Research method This research is a research in the form of an analytic survey with a cross sectional study design. The method used is quota sampling and obtained 79 respondents as a sample. Data collection using a questionnaire.

Result : The analysis of the relationship between knowledge of respondents and exclusive breastfeeding showed that of the 11 respondents who had low knowledge about exclusive breastfeeding, 11 respondents (13.9%) did not provide exclusive breastfeeding and there were no respondents who provided exclusive breastfeeding (0%), whereas Of the 68 respondents who have high knowledge, 37 respondents (46.8%) do not provide exclusive breastfeeding and 31 respondents (39.2%) provide exclusive breastfeeding. Based on the results of the chi square statistical test, it was obtained $p = 0.004$, which means that the p value was less than 0.05 ($0.004 < 0.05$).

Congclusions : The conclusion is that there is a relationship between respondents' knowledge and exclusive breastfeeding.

Keywords: Knowledge, Exclusive Breastfeeding

INTRODUCTION

The World Health Organization (WHO) and the United Nations Children's Fund (UNICEF) start from the age of the mother to breastfeed her baby during the first hour after giving birth and continue until the first 6 (six) months of the baby's life. Introduction of food with adequate and safe nutrition which is given when the baby enters the age of 6 months by continuing to breastfeed for up to 2 (two) years. According to WHO data, breast milk coverage worldwide is only around 36% (WHO, 2016).

Regulations regarding the provision of exclusive breast milk (ASI) are regulated in the Law of the Republic of Indonesia Number 36 of 2009 concerning Health as stated in Article 128 paragraph (1) which states that every baby has the right to exclusive breast milk since 6 (six).

month, above medical indications. It is reinforced in article (2) which states that while giving breastmilk, the family, government, local government and the community must fully support the mother of the baby by providing special time and facilities (Law No.

Exclusive breastfeeding based on Government Regulation (PP) Number 33 of 2012 is breast milk given to babies for 6 months without adding and / or replacing with other foods or drinks (except drugs, vitamins and minerals). According to Riskesdas 2013, the process of starting breastfeeding mostly occurred at 1-6 hours after birth (35.2%) and less than 1 hour (early initiation of breastfeeding) at 34.5%. While the process of starting breastfeeding, birth occurred 7-23 hours after birth of 3.7% (Indonesia Health

Profile, 2015). Berdasarkan Profil Riau Islands Province Health in 2016, exclusive breastfeeding showed an increase but was still far below the national target (80%) and still low compared to the national achievement (54%). The trend of exclusive breastfeeding coverage in Riau Islands Province from 2014 was 31.74%, 2015 was 41.70% and 2016 was 41.91%.

One of the efforts to reduce IMR is by giving exclusive breast milk (ASI). Breast milk is the first natural food for babies that provides all the vitamins, minerals and nutrients the baby needs for growth in the first six months and no other food or fluids are required. Breast milk meets half or more of the nutritional needs of children in the first to second year of life (WHO, 2002). Besides the complete nutritional content in breast milk, there are immune substances such as IgA, IgM, IgG, IgE, lactoferrin, lysosomes, immunoglobulin and other substances that protect infants from various infectious diseases (Moehji, 2008). More than 136 million babies are born each year, and about 92 million of them do not receive exclusive breastfeeding for up to 6 months (Gupta, 2013).

Factors that determine infant breastfeeding behavior according to the theory of infant breastfeeding behavior modified from IFRI-UNSSCN (2000), Cadwell and Maffei (2011) and Roesli (2013), that the behavior of exclusive breastfeeding is determined by several factors of mother's choice, opportunity factors, information factors and physical support during pregnancy, childbirth and external factors. Research conducted by Lin-Lin Su (2011) entitled Antenatal Education and Postnatal Support Strategies For Improving Rates Of Exclusive Breast Feeding states that mothers who receive education during pregnancy and childbirth tend to apply exclusive breastfeeding for 6 months after giving birth.

Research conducted by Yanuarini et al (2014) entitled the relationship between knowledge and attitudes of pregnant women in exclusive breastfeeding in the working area of the Pranggang Public Health Center, Kediri Regency in 2014, concluded that there was a relationship between knowledge and attitudes of mothers in exclusive breastfeeding in the work area of the Pranggang Public Health Center.

Research conducted by Hartatik (2010) with the title of the relationship between knowledge and attitudes of mothers with exclusive breastfeeding in Gunungpati Village, Gunungpati District, Semarang City in 2009 concluded that there was a significant relationship between knowledge and attitudes of mothers with exclusive breastfeeding in Gunungpati Village, Gunungpati City District, Semarang in 2009.

The research objective was to determine the relationship between maternal knowledge and exclusive breastfeeding.

RESEARCH METHODS

Research design is something that is very important in research that allows maximizing control of several factors that can affect an outcome. This study used an analytical survey research method with a cross sectional approach. This type of research is quantitative analytic. The population in this study were all mothers who have babies aged 7-12 months who are in Meral District, the working area of the UPT Puskesmas Meral, Karimun Regency, which may be 377 mothers. Samples were taken using accidental sampling technique. The locations in this study were carried out in 21 Posyandu in the working area of the Meral Puskesmas, Karimun Regency, Riau Islands Province. The research instrument used in this study was a questionnaire. Data analysis using computer aids through the SPSS program (Statistics Program for Social Science).

RESEARCH RESULT

Respondents' knowledge about exclusive breastfeeding

It is known that out of 79 respondents, 11 respondents (13.9%) have low knowledge about exclusive breastfeeding and 68 respondents (86.1%) have high knowledge about exclusive breastfeeding.

Exclusive breastfeeding

It is known that out of 79 respondents, 48 respondents (60.8%) did not provide exclusive breastfeeding for their babies and 31 respondents (39.2%) gave exclusive breastfeeding to their babies.

Respondents' Knowledge of Exclusive Breastfeeding

It is known that out of 11 respondents who have low knowledge about exclusive breastfeeding, 11 respondents (13.9%) do not provide exclusive breastfeeding and there are no respondents who provide exclusive breastfeeding (0%), while from 68 respondents who have high knowledge, 37 respondents (46.8%) did not provide exclusive breastfeeding and 31 respondents (39.2%) gave exclusive breastfeeding. Based on the results of the chi square statistical test, it was obtained p value = 0.004, which means that the p value is less than 0., 05 (0.004 <0.05). Thus Ho is rejected, this indicates that there is a relationship between respondents' knowledge and exclusive breastfeeding

DISCUSSION

Respondents' knowledge about exclusive breastfeeding

Based on the results of research conducted from 79 respondents, it is known that 68 respondents (86.1%) have high knowledge about exclusive breastfeeding. Knowledge is the basis for an individual to make decisions and determine action on the problems at hand, including health problems. A person's knowledge is usually obtained from experiences that come from various sources such as mass media, electronic media, manuals, relatives (parents, siblings), teachers, health workers, poster media and so on. Knowledge can help certain beliefs so that someone behaves according to these beliefs. A person with many and varied sources of information will make that person have extensive knowledge (Nandra, 2015).

According to Notoatmodjo (2012), a person's knowledge is influenced by internal factors and external factors. Internal factors are education, interests, experience and age, while external factors are economy, information and culture / environment. Therefore it can be concluded that the high level of respondents' knowledge is not only influenced by the education level of the respondents, the majority of which are junior high school (59.5%), but is influenced by internal factors and other external factors, including age and experience. As a person is more mature, it will automatically increase the experience gained by that person so that knowledge will also increase.

This study is in line with research conducted by Lestari (2013) with the title of the relationship between the level of knowledge about exclusive breastfeeding and parity of breastfeeding mothers with exclusive breastfeeding at the Sewon II Bantul Health Center in 2013, where the results obtained from the 60 respondents studied, the majority of whom had a high level of knowledge. (61.6%) about exclusive breastfeeding. According to the assumptions of the researchers, this is due to the similarity in the characteristics of the respondents, namely the majority of respondents aged 26-35 years (64.6%) and more experience in exclusive breastfeeding. From this description, it can be concluded that the respondents' knowledge about exclusive breastfeeding is high. This is due to the mother's age and experience in exclusive breastfeeding.

Relationship between Mother's Knowledge and Exclusive Breastfeeding

The analysis of the relationship between knowledge of respondents and exclusive breastfeeding showed that of the 11 respondents who had low knowledge about exclusive breastfeeding, 11 respondents (13.9%) did not provide exclusive breastfeeding and there were no respondents who provided exclusive breastfeeding (0%), whereas Of the 68 respondents who have high knowledge, 37 respondents (46.8%) do not provide exclusive breastfeeding and 31 respondents (39.2%) provide exclusive breastfeeding.

Based on the results of the chi square statistical test, it was obtained p = 0.004, which means that the p value was less than 0.05 (0.004 <0.05). Thus Ho is rejected, this indicates that there is a relationship between respondents' knowledge and exclusive breastfeeding.

The level of knowledge of respondents about exclusive breastfeeding is well influenced by several factors including experience and information from health workers and health cadres. Ease of information related to knowledge about exclusive breastfeeding is obtained from various sources. The information about exclusive breastfeeding obtained by mothers when participating in posyandu activities helps them to know and understand about exclusive breastfeeding that is good and correct.

This study is in line with Mariane's (2011) study with the title of the relationship

between knowledge and attitude and exclusive breastfeeding at the Shoulder Health Center in Manado City. Based on the results of research on 38 respondents at the Shoulder Health Center and after processing data with the Spearman's rho test, significant results were obtained, namely $P = 0.000 < 0.05$ so that there was a relationship between knowledge and exclusive breastfeeding. The similarity of the results of this study is the characteristics of mothers who are mostly housewives (97.5%), so that mothers have plenty of time to take their children to participate in activities at the posyandu. By participating in activities at the posyandu, mothers will more often get information about health, especially about exclusive breastfeeding.

The majority of mothers in this study were aged 26-35 years (64.6%), where in terms of age, maturity level and a person's strength will be more mature in thinking. This will make it easier for mothers to receive information because they are more mature in thinking. Their frequent interactions with health cadres will increase their chances of obtaining health information.

Based on this, the researchers concluded that knowledge greatly influences the behavior of mothers in giving exclusive breastfeeding to their babies properly and correctly, this happens because they know that exclusive breastfeeding can provide benefits for babies and themselves, the incessant promotion of formula milk and the perception of changes. body shape if exclusive breastfeeding in infants can cause a low rate of exclusive breastfeeding. But overall knowledge has a relationship to exclusive breastfeeding behavior

CONCLUSION

There is a relationship between maternal knowledge and exclusive breastfeeding with a value of $p = 0.004$

SUGGESTION

For respondents

It is hoped that the public will be more concerned and willing and able to seek information about family health, especially the health of mothers and babies and to be able to provide exclusive breastfeeding for their babies.

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