

## Article

### Analysis of the Factors Affecting the Low Exclusive Breastfeeding In Pandansari Village, Senduro District, Lumajang Regency

Dinia Kholida Kiptiyah<sup>1</sup>, Farianingsih<sup>2</sup>, Homsiatu Rohmatin<sup>3</sup>

<sup>1</sup>S-1 Kebidanan, STIKES Hafshawaty Zainul Hasan Probolinggo

<sup>2</sup> STIKES Hafshawaty Zainul Hasan Probolinggo

<sup>3</sup> STIKES Hafshawaty Zainul Hasan Probolinggo

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#### CORRESPONDENCE

Phone: 085258367160  
E-mail: diniakholidak@gmail.com

#### ABSTRACT

Exclusive breastfeeding is that babies are only given breast milk without other additional foods, it is recommended for up to 6 months and breastfed as early as possible. There are many reasons why mothers did not give exclusive breastfeeding to their babies, the main causes are lack of awareness of the importance of breastfeeding, lack of self-confidence of mothers, the low of mother's knowledge about the benefits of breastfeeding and lack of family support in breastfeeding. This study aims to analyze the factors of mother's knowledge, education, and husband's support that affect the low level of exclusive breastfeeding in Pandansari Village, Senduro District, Lumajang Regency in 2022. This study is an analytic observational study with a cross sectional approach. The sample in this study were 27 mothers who had babies aged 6-11 months who were taken by total sampling. The conclusion of this study is that there is a significant relationship between the mother's knowledge factor, the mother's education factor and the husband's support factor with the low level of exclusive breastfeeding in Pandansari Village, Senduro District, Lumajang Regency. It is hoped that the Puskesmas can improve health promotion programs, especially counseling about exclusive breastfeeding, so that the achievement of exclusive breastfeeding can increase.

## I. INTRODUCTION

Breast milk is the best practical, cheap and hygienic baby food because it is given directly from the mother's breast. Breast milk contains all the nutrients and

fluids a baby needs to meet their nutritional needs in the first 6 months of life. Exclusive breastfeeding is when the baby is only given breast milk without any other additional food for the first 6 months and is breastfed from

an early age. Exclusive breastfeeding until the baby is 6 months old can help protect the baby from illness and death. Although breast breastfeeding is very beneficial, around 85% of mothers worldwide do not provide optimal breastfeeding. Factors such as social, cultural, economic, and political factors can influence exclusive breastfeeding as recommended by WHO, so that it is still rarely done by mothers in various countries. (Widodo, 2019)

In Indonesia, the coverage of babies receiving exclusive breastfeeding has decreased in 2020 from 2019, namely from 67.74% in 2019 to 66.1% in 2020 (Ministry of Health, 2021). Likewise, coverage in East Java has also decreased from 68.2% in 2019 to 61% in 2020.

There are many reasons why mothers do not give exclusive breastfeeding to their babies. Some of the main factors include awareness of the importance of breastfeeding, lack of mother's self-confidence, lack of knowledge of mothers about the benefits of breastfeeding, and lack of family support in breastfeeding (Rilyani, Karhiwikarta, & Suharman, 2013). According to Rahmawati's research (2013), several factors that influence the pattern of exclusive breastfeeding are the mother's age. As many as 64.5% of mothers under 20 years of age do not give exclusive breastfeeding. Another variable that is also a factor is education, where 58.7% of mothers with low education do not give exclusive breastfeeding. Mother's knowledge also influences exclusive breastfeeding, according to Kristianto and Sulistyorini's research (2013). As many as 73.6% of mothers with less knowledge do not give exclusive breastfeeding. The results of Roesli's research (2015) show that family support is the external factor that most influences the success of exclusive breastfeeding, with a percentage of 72.8%.

According to the Senduro Health Center report in 2021, only 24 out of 62 babies in Pandansari Village receive exclusive breastfeeding, or only 38.7%, which is still under the coverage of the Health Center at 43.2%. This figure is still far from the target set in Government Regulation Number 33 of 2012 concerning exclusive breastfeeding, namely 85% of babies receive exclusive breastfeeding from birth to 6 months of age. (Senduro Health Center, 2021). In Pandansari Village, many mothers have given their babies additional food such as bananas or porridge before they are even 6 months old. They think it is normal because their parents have done it before.

Based on this information, considering that exclusive breastfeeding has great benefits for the growth of babies and must be used as an example for the community, the authors want to examine the factors that influence the low level of exclusive breastfeeding in Pandansari Village, Senduro District, Lumajang Regency in 2022. The purpose of this study is to analyze the effect of mother's knowledge, education, and husband's support on the low level of exclusive breastfeeding in Pandansari Village, Senduro District, Lumajang Regency in 2022.

## II. METHODS

This research is an analytic observational study with a cross sectional approach. The research was conducted in Pandansari Village, Senduro District, Lumajang Regency from August to September. The sample in this study were 27 mothers who had babies aged 6-11 months who were taken using total sampling. In this study, the independent variables were the mother's knowledge, education level, and husband's support, while the dependent variable was exclusive breastfeeding. The mother's knowledge variable includes the respondent's ability to answer correctly about the meaning and benefits of exclusive breastfeeding, lactation management, and the factors that influence

breastfeeding. The education level variable includes the last educational status completed by the mother. Meanwhile, the husband's support variable includes the mother's perception of husband's support in exclusive breastfeeding. The variables of exclusive breastfeeding include the mother's behavior in giving only breast milk to babies from birth to 6 months of age without giving other food or drinks, except medicine, vitamin and mineral drops. Data collection was carried out using a questionnaire that had been tested for validity in the Senduro Health Center work area to 20 respondents, with 16 questions each on the husband's support variable and 15 questions on the mother's knowledge variable about breastfeeding. The results of the reliability test showed that the value of Cronbach's Alpha ( $\alpha$ ) in the husband's support variable was  $0.955 > 0.6$  and the mother's knowledge about breastfeeding was  $0.960 > 0.6$ . To determine the relationship between the factors that influence the low exclusive breastfeeding, a chi square statistical test was carried out.

### III. RESULT

This research was conducted in Pandansari Village, Senduro District, Lumajang Regency. Pandansari Village is located in the middle of Senduro District, besides that it is also a Support Village for the Agropolitan Program. The distance from Pandansari Village to the Senduro District office is  $\pm 2.5$  Km, while to the Regency capital is  $\pm 25$  Km, accessibility for transportation by road can be two-wheeled or four-wheeled vehicles. In 2021 Pandansari village had a population of 4,757 people, with details of 2,243 men and 2,514 women.

**Table 1. Frequency Distribution of Age, Occupation, Mother's Knowledge, Education Level and Husband's Support**

| Variable           | Amount       | Percentage (%) |       |
|--------------------|--------------|----------------|-------|
| Age                | <20 yo       | 4              | 14,81 |
|                    | 20-25 yo     | 22             | 81,49 |
|                    | 26-30 yo     | 1              | 3,70  |
|                    | >30 yo       | 0              | 0     |
| Occupation         | Housewife    | 21             | 77,78 |
|                    | Trader       | 4              | 14,81 |
|                    | Employee     | 2              | 7,41  |
| Mother's knowledge | Good         | 7              | 25.9  |
|                    | Enough       | 7              | 25.9  |
|                    | Less         | 13             | 48.1  |
| Education level    | High         | 2              | 7.4   |
|                    | Intermediate | 12             | 44.4  |
|                    | Primary      | 13             | 48.1  |
| Husband's Support  | Support      | 11             | 40.7  |
|                    | Less Support | 16             | 59.3  |

Most of the respondents aged 20-25 years were 81.49%, and the rest were aged less than 20 years by 14.81% and aged 26-30 years by 3.7%. Most of the respondents' jobs were as housewives 77.78%, followed by jobs as traders 14.81%, and as employees 7.41%.

The mother's knowledge variable about exclusive breastfeeding shows that 25.9% of respondents have a good level of knowledge, 25.9% of respondents have a sufficient level of knowledge and 48.1% of people have a low level of knowledge. The education level variable shows that there are 7.4% of respondents with a high education level, 44.4% of respondents with an intermediate education level, and 48.1% of respondents with a primary education level. As for the husband's support variable, respondents who received husband's support to provide exclusive breastfeeding were 40.7%, and respondents who did not receive husbandly support to provide exclusive breastfeeding were 59.3%.

**Table 2. Relationship between Mother's Knowledge Factor, Education Level, and Husband's Support with Exclusive Breastfeeding**

|                    |              | Exclusive Breastfeeding |      |                             |      | Total |       | P-value | OR   |
|--------------------|--------------|-------------------------|------|-----------------------------|------|-------|-------|---------|------|
|                    |              | Exclusive breastfeeding |      | Not Exclusive Breastfeeding |      | n     | %     |         |      |
|                    |              | n                       | %    | n                           | %    |       |       | n       | %    |
| Mother's knowledge | Good         | 6                       | 22,2 | 1                           | 3,7  | 7     | 25,9  | 0,002   | 8,5  |
|                    | Enough       | 3                       | 11,1 | 4                           | 14,8 | 7     | 25,9  |         |      |
|                    | Less         | 1                       | 3,7  | 12                          | 44,4 | 13    | 48,2  |         |      |
| Education level    | High         | 1                       | 3,7  | 1                           | 3,7  | 2     | 7,4   | 0,009   | 7,2  |
|                    | Intermediate | 8                       | 29,6 | 4                           | 14,8 | 12    | 44,4  |         |      |
|                    | Primary      | 1                       | 3,7  | 12                          | 44,4 | 13    | 48,2  |         |      |
| Husband's Support  | Support      | 7                       | 25,9 | 3                           | 11,1 | 10    | 37,0  | 0,006   | 10,9 |
|                    | Less Support | 3                       | 11,1 | 14                          | 51,9 | 17    | 63,0  |         |      |
| Total              |              | 10                      | 37,0 | 17                          | 63,0 | 27    | 100,0 |         |      |

From the data listed in the table above, it can be seen that 44.4% of mothers who had little knowledge about exclusive breastfeeding did not provide exclusive breastfeeding for their children, while only 3.7% did. As many as 25.9% of mothers who had sufficient knowledge, 14.8% did not give exclusive breastfeeding and only 11.1% gave exclusive breastfeeding. Meanwhile, of the 25.9% of mothers who had good knowledge, 22.2% gave exclusive breastfeeding to their babies, and only 3.7% did not. Through the Chi-Square test, the results show that there is a statistically significant relationship between mothers' knowledge about exclusive breastfeeding and exclusive breastfeeding, with a p-value of 0.002, which is smaller than 0.05. In addition, the OR value of 8.5 indicates that mothers who have good knowledge about exclusive breastfeeding have an 8.5 times higher tendency to provide exclusive breastfeeding compared to mothers who have less knowledge.

The research findings show that only 3.7% of mothers who have basic education level (SD, SMP) give exclusive breastfeeding, while 44.4% do not. As many as 14.8% of mothers with secondary education level (SMA) did not

give exclusive breastfeeding, while 29.6% gave exclusive breastfeeding. Only 3.7% of mothers with higher education (university) gave exclusive breastfeeding, and 3.7% did not. From the results of the Chi-Square test for the relationship between the variable level of education and exclusive breastfeeding, a p-value of 0.009 was obtained, which is smaller than 0.05. This shows that statistically there is a significant relationship between the education level of the mother and exclusive breastfeeding. From the analysis conducted, it was found that the OR value was 7.2, which indicated that mothers with higher education had a tendency to exclusively breastfeed their babies 7.2 times higher than mothers with lower education.

From the crosstab table above, it can be seen that 51.9% of mothers whose husbands do not support exclusive breastfeeding do not give exclusive breastfeeding to their babies. Only 11.1% of them give exclusive breastfeeding. Meanwhile, of the 37% of mothers whose husbands support exclusive breastfeeding, 11.1% do not provide exclusive breastfeeding and the other 25.9% provide exclusive breastfeeding for their babies. The Chi-Square test for

the relationship between husband's support and exclusive breastfeeding resulted in a p-value of 0.006 which is less than 0.05. This shows that there is a statistically significant relationship between husband's support and exclusive breastfeeding. The OR results show a value of 10.9, which means that mothers whose husbands support exclusive breastfeeding have a tendency to give exclusive breastfeeding to their babies as much as 10.9 times higher than mothers whose husbands do not support it.

#### IV. DISCUSSION

From the results of statistical analysis, it can be concluded that there is a significant relationship between mother's knowledge and exclusive breastfeeding. With an OR value of 8.5, mothers who do not understand breastfeeding have a 8.5 times higher risk of not giving exclusive breastfeeding to their babies, compared to mothers who have adequate knowledge. This finding is in line with the results of previous studies. Yunita (2017) found a significant relationship between mother's knowledge and exclusive breastfeeding in Umbulharjo District, Yogyakarta City. Lindawati (2019) also found that mothers who have adequate knowledge are more likely to give exclusive breastfeeding to their babies. Kristianto and Sulistyorini (2013) found that mother's knowledge had a significant effect on exclusive breastfeeding, where 73.6% of mothers who did not understand about breastfeeding did not exclusively breastfeed. This shows that the level of one's knowledge influences one's practice, as expressed by Green in his theory that one's knowledge is a predisposing factor to action.

Mothers who have a good understanding of the importance of exclusive breastfeeding for babies will increasingly realize how important exclusive breastfeeding is. This will

increase the motivation of mothers to provide exclusive breastfeeding to their babies. Mothers will seek various information about exclusive breastfeeding for their babies so that the success of exclusive breastfeeding can be achieved. Based on this research, it was found that mothers who did not understand about exclusive breastfeeding did not know how important exclusive breastfeeding was for the baby's health. Most of them give formula milk and additional food such as bananas and porridge when the baby is 3-5 months old. This action is clearly contrary to the principle of exclusive breastfeeding, namely giving only breast milk without additional food until the baby is 6 months old. (Roesli, 2015).

Based on statistical analysis, it appears that there is a significant correlation between the education level of the mother and exclusive breastfeeding. With an OR value of 7.2, mothers with basic education have a 7.2 times higher risk of not exclusive breastfeeding compared to mothers with higher education. This finding is also supported by previous research, such as that conducted by Dewi (2012), which showed that the higher the level of education, the greater the knowledge and possibility of exclusive breastfeeding. Another study by Fauziyah et al. (2020) also showed that there is a significant relationship between education and exclusive breastfeeding in infants. In his research, Purnamasari showed that a mother's education was related to the success of exclusive breastfeeding. Mothers with low education (not attending primary school) have a success rate of exclusive breastfeeding of 38.7%, while mothers with junior high school education have a success rate of exclusive breastfeeding of 61.3% (Purnamasari, 2015). Low education can make it difficult for respondents to receive input and information on how to provide exclusive breastfeeding. Education also provides

certain values for humans, especially in opening minds and accepting new things and thinking scientifically. Therefore, people who have higher education tend to more easily accept and digest new ideas or ideas. It can be concluded that the higher the education, the better the mother's behavior in exclusive breastfeeding. (Purnamasari, 2015).

The higher the level of education a mother has, the greater the knowledge she has about exclusive breastfeeding. Mothers with higher education tend to look for information about exclusive breastfeeding better than mothers with low education. Mothers with low education tend to breastfeed based on the culture and habits passed down by their parents. Participants in this study revealed that they did not give exclusive breastfeeding because they were influenced by the views of their parents who stated that exclusive breastfeeding was not given in the past but their children remained healthy. They just follow what their parents suggest without seeking the latest information, so mothers with less education are more likely to formula feed their babies before 6 months of age.

The findings of this study indicated that spousal support had a significant correlation with exclusive breastfeeding, with an OR of 10.9. This means that mothers who do not receive support from their husbands have a 10.9 times higher risk of not giving exclusive breastfeeding compared to mothers who receive support from their husbands. Previous research by Yamaeka (2017) and Yunita (2017) also showed a significant relationship between the husband's role and husband's support with exclusive breastfeeding. According to Roesli, support from husbands is very meaningful for breastfeeding mothers, because husbands can provide emotional support and practical assistance in caring for babies, such as burping, holding, calming, changing diapers, bathing, taking for walks, giving expressed breast

milk, and massaging the baby. (Roesli, 2015)

In general, husbands think that breastfeeding is the mother's sole responsibility, so they don't seem to care when their wives breastfeed their babies. In fact, the husband has a very important role in the success of exclusive breastfeeding. Husbands can help maintain the physical and emotional health of their wives, such as providing nutritious food, helping to lighten household chores, paying more attention to their wives, and so on. That way, the production of breast milk produced by the wife can be abundant and the wife is enthusiastic about giving exclusive breastfeeding to the baby.

Researchers found several limitations in this study, one of which was that information about the history of breastfeeding was only obtained through a questionnaire given to mothers, so the information obtained was not very in-depth. In addition, there are other factors such as habits and family factors that can influence exclusive breastfeeding, but these factors are not included in the research variables. Therefore, this study has not been able to fully describe the factors that influence exclusive breastfeeding. The limited time for the study was also a factor causing the researchers to be unable to further explore the reasons why respondents did not provide exclusive breastfeeding to their children.

By understanding the elements that influence exclusive breastfeeding, health workers can determine the tactics to be taken to increase the rate of exclusive breastfeeding in the area. Therefore, the health of infants and young children will improve and the infant mortality rate will decrease.

## V. CONCLUSION

According to the results of the research conducted, it can be concluded that there is a correlation between factors

of mother's knowledge, level of education, and husband's support with the low rate of exclusive breastfeeding in Pandansari Village, Senduro District, Lumajang Regency in 2022. In order to achieve an increase in the rate of exclusive breastfeeding, it is hoped that the Puskesmas can improve health promotion programs, especially in counseling through classes for pregnant women about exclusive breastfeeding from preparation to the importance of family support. In addition, it is also necessary to involve husbands in classes for pregnant women, so that the level of exclusive breastfeeding can be increased.

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