

# THE RELATIONSHIP OF MOTHER'S KNOWLEDGE WITH INCREASED WEIGHT OF BABIES AGED 3-6 MONTHS IN THE WORK AREA OF BANDAR MASILAM PUSKESMAS, SIMALUNGUN REGENCY, NORTH SUMATRA IN 2021

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## ABSTRACT

Infancy starts from the age of 0-12 months which is characterized by rapid growth and physical changes accompanied by changes in nutritional needs. The weight growth of infants aged 0-6 months has increased by 150 -210 grams / week. Lack of knowledge of the mother affects the rate of growth of the baby's weight which can result in the baby being malnourished during its growth period. Descriptive survey research method uses a descriptive correlational design. The population in this study were all mothers who had babies aged 3-6 months, the sampling technique was accidental sampling with a total of 50 respondents. The instrument used in the form of a questionnaire. Data analysis using the Chi-Square Test. Based on the results of the study, the majority of 50 respondents had sufficient knowledge as much as 31 (62%). The Chi Square test result is 0,013 it can be seen that the calculation of the significant coefficient test is obtained at the real initials  $\alpha = 0.05$  and the Chi Square test  $p = 0.013$  so that  $0.013 < 0.05$ . Based on the results of the study, it was concluded that there was a significant relationship between mother's knowledge and weight gain of babies aged 3-6 months in the Simpang Dolok Health Center Work Area, Limapuluh District, Batubara Regency. and pay attention to the baby's eating pattern and baby's sleep pattern.

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## 1. Introduction

The baby's growth is very fast, if a newborn baby weighs 3 kg then at the age of a month his weight can reach 3.7-4 kg. However, so that it is easier for us to control normal weight gain, we should have a posyandu book. Where there is a parabolic diagram of normal child weight gain according to age (Ministry of Health, 2010)

Generally in the first three months after birth weight gain is the greatest. Over time, such as at the age of 3-6 months, the growth slows down a bit, although it is still quite high. at the age of 6-9 months weight gain slows down. at the age of 9-12 months, the increase is not striking (Risksedes, 2012)

Improvement and improvement of efforts to survive, develop and improve the quality of life of children is an important effort for a stronger future for Indonesia. Efforts for survival, development and improvement of children play an important role since early life, namely the period in the womb, infants and toddlers. The survival of the child itself means that the child does not die in the early days of his life, that is, not until he reaches the age of one year or is under five years old (Anik, 2010: 1).

The main goal of national development is to improve the quality of human resources in a sustainable manner. Healthy Indonesia 2010

is a vision of health development. The vision of development in the field of nutrition is to create independent, nutritionally conscious families to achieve optimal community/family nutritional status (Ministry of Health, 2006).

In 2012, 103 million children under the age of five in developing countries were underweight or overweight. The prevalence of under-fives experiencing nutritional problems based on body weight per age (BB/U) in Indonesia in 2010 included 13.0% malnutrition cases and 4.9% malnutrition cases. The prevalence in West Sumatra shows cases of malnutrition 14.4% and malnutrition 2.8%.

The impact is very clear, namely the growth of children and toddlers will be disrupted, they cannot lead a normal life. In terms of development, the state will be hampered because the human resources needed will experience big problems.

The data on the prevalence of malnutrition by province in Indonesia in 2003 was the highest province of Gorontalo, which was 21.48%, while the highest prevalence of malnutrition was the province of NTT, which was 25.93% (Nency, 2005: 45).

Based on the results of Susenas, in North Sumatra the prevalence of malnutrition in 2007 was 17.32%, in 2003 it was 18.39% and in 2005 it was 18.20%. Meanwhile, the prevalence of malnutrition in 2000 was 9.16%, in 2003 it was 12.35% and in 2005 it was 10.50% (Rikesdes, 2012).

UNICEF reported that under-five children with malnutrition in Indonesia in 2005/2006 rose to 2.3 million compared to the previous year in 2004/2005 which amounted to 1.8 million (Aritonang, 2006: 67).

Meanwhile, according to the Ministry of Health in the Action Plan for Prevention and Management of Malnutrition 2005-2009, the prevalence of malnutrition and malnutrition in Indonesia is 27.5% (Depkes, 2005).

Around 37.3 million people in Indonesia live below the poverty line, half of the total households consume less food than their daily needs, five million children under five are malnourished, and more than 100 million people are at risk of various malnutrition problems. Good nutrition is balanced nutrition, meaning that the intake of nutrients must be in accordance with the body's needs. The nutritional needs of each person are different based on their respective metabolic and genetic elements. Good nutrition will help prevent acute and chronic diseases. The balance between intake and nutritional needs greatly affects growth, development, intelligence, health, children's activities and other things (Supariasa, 2001: 65).

Child survival is indicated by the infant mortality rate (IMR) under-five mortality rate (AKA-BA/AKBAL). The infant and under-five mortality rate in Indonesia is the highest in any other ASEAN country. This needs to be understood and followed up by midwives and other health workers, given that Indonesia has a heavy burden because of its vast area and large and heterogeneous population. As members of professional organizations in the health sector, midwives must also play an active role in efforts to reduce infant and under-five mortality. This is in line with the Millennium Development Goals (MDGs) number 4 (four), which is to reduce the child mortality rate by two-thirds by 2015 (Anik, 2010:2).

Based on an initial survey conducted on March 6, 2014 in the Simpang Dolok Health Center Work Area, Limapuluh District, Batubara Regency, 2015 data was obtained that out of 10 mothers only 3 mothers knew about increasing the weight of babies aged 3-6 months.

Based on the description above, the researcher is interested in raising a problem as a scientific paper with the title "The Relationship of Mother's Knowledge with Increased Weight of Babies Age 3 - 6 Months in the Work Area of Simpang Dolok Health Center, Limapuluh District, Batubara Regency in 2015. Meanwhile, 7 other people did not know about the increase in baby weight.

## **2. Research Methods**

### **2.1 Research Type and Design**

#### **2.1.1 Types of research**

The type of data used in this study is primary data, namely by using a closed questionnaire for the independent variable (growth of infants aged 3-6 months). The type of this research is quantitative research (Arikunto, 2010: 22).

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## 2.1.2 Research design

This study uses a descriptive correlational research design, namely: to describe the relationship between mother's knowledge and weight gain of babies aged 3-6 months in the Simpang Dolok Health Center Work Area, Limapuluh District, Batubara Regency in 2015.

## 2.1.3 Research Scheme

The scheme of this research is with two variables, namely one independent variable (independent) or X and one dependent variable (dependent) Y. The independent variable in this study is the mother's knowledge, while the dependent variable is the increase in the weight of infants aged 3-6 months who are given birth control. monitor from kms. The relationship of the two variables is as shown in the image below:



Figure 2. Research research design scheme

## 2.2 Population and Research Sample

### 2.2.1 Population

The population is the entire object of research or the object to be studied (Notoatmodjo, 2010: 34). The population in this study were all mothers who had babies 3-6 months, totaling 75 people.

### 2.2.2 Sample

The sample is partly taken from the entire object to be studied and is considered to represent all the population in the Simpang Dolok Health Center Work Area, Limapuluh District, Batubara Regency in 2015.

The sampling technique in this study used accidental sampling, namely respondents who happened to be present or available somewhere in accordance with the research context (Notoatmodjo, 2010). The sample in this study amounted to 50 mothers who have babies aged 3-6 months in the Simpang Dolok Health Center Work Area, Limapuluh District, Batubara Regency in 2015.

## 2.3 Data Collection Techniques and Research Instruments

### 2.3.1 Data collection technique

Data collection is a process of approaching the subject and the process of collecting the characteristics of the subject required in a study (Nursalam, 2011).

#### 2.3.1.1 Primary data

Primary data is a source of data obtained directly from the original source or the first party. Primary data is specifically collected by researchers to answer research or research questions. Primary data can be in the form of opinions of research subjects (people) both individually and in groups, the results of observations of a objects (physical), events, or activities, and test results. The main benefit of primary data is that the elements of lies are closed to the source of the phenomenon. Therefore, primary data reflects the truth that is seen. However, obtaining primary data will require relatively more funds and take a relatively longer time.

#### 2.3.1.2 Secondary data

Secondary data is a source of data obtained by researchers indirectly through intermediary media. Secondary data is generally in the form of evidence, notes, or historical reports that have been compiled in archives, both published and unpublished. The benefits of secondary data are further minimizing costs and time, classifying problems, creating benchmarks for evaluating primary data, and filling information gaps. If information already exists, money and time sacrifices can be avoided

by using secondary data. Another benefit of secondary data is that a researcher is able to obtain information other than the main information.

The steps for data collection in this study are as follows: (a) Data collection began after the study received a research permit from the educational institution of the Haji North Sumatra Health Sciences College. Then the researcher came to the Simpang Dolok Health Center Work Area, Limapuluh District, Batubara Regency to give a research permit and ask for permission to conduct research. (b) The researcher visited the patient's residence. The researcher conveys the purpose and intent of his research, and asks his willingness to be a respondent. (c) If they are willing, the researcher asks the respondent to sign a letter of consent to become a respondent (informed consent). (d) The data was collected by observing the mother's knowledge about the increase in the baby's weight and the nutritional status of the baby. For measuring the baby's weight, the researcher asked the KMS book for mothers who have babies aged 3-6 months in the Simpang Dolok Health Center Work Area, Limapuluh District, Batubara Regency in 2015.

### 2.3.2 Research Instruments

The instrument used in this study was a questionnaire with a total of 15 questions. The questionnaire used aims to determine the mother's knowledge about increasing the weight of babies aged 3-6 months in the Simpang Dolok Health Center Work Area, Limapuluh District, Batubara Regency in 2015.

The instrument lattice is measured through a questionnaire as shown in table 5 below:

TABLE 1  
QUESTIONNAIRE OF MOM'S KNOWLEDGE QUESTIONNAIRE ABOUT INCREASING INFANT WEIGHT

| NO | Subject   | Ability |                    |    |          |    | Amount |
|----|---|---------|--------------------|----|----------|----|--------|
|    |   | C1      | C2                 | C3 | C4       | C5 |        |
| 1. | a. Monitoring<br>b. Application<br>c. Understanding |         | 1,2,3,6,7,<br>8,   |    | 4,5,9,10 |    | 10     |
| 2. | Nutrition about increasing<br>baby weight           |         | 11,12,13,14,<br>15 |    |          |    | 5      |
|    | Amount  |         | 15                 |    |          |    | 15     |

Information:

C1 : Memory (Knowledge)

C2 : Understanding

C3 : Mention

C4 : Application

C5 : Analysis

#### 2.3.2.1 Trial of Research Instruments

Prior to the actual research, instrument trials were conducted with the aim of obtaining a truly valid and reliable measuring instrument. To measure the ability of the instrument using data requirements, namely validity and reliability (Hidayat, 2007: 56). This trial was carried out in the Simpang Dolok Health Center Work Area, Limapuluh District, Batubara Regency in 2015

#### 2.3.2.2 Instrument Validity

The validity test of the questionnaire is the validity of a questionnaire whose results have parallels between the results of the questionnaire and the criteria. To find out the validity of the questionnaire items, it was tested using the Product Moment Correlation formula (Arikunto 2006: 56).

$$r_{xy} = \frac{N \sum xy - (\sum x)(\sum y)}{\sqrt{\{N \sum x^2 - (\sum x)^2\} \{N \sum y^2 - (\sum y)^2\}}} \quad (1)$$

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- X = Score of instrument items  
 Y = Total score of instrument items  
 rxy = Correlation between variable X and variable Y  
 N = Number of respondents  
 $\Sigma x$  = Total scores of instrument items  
 $\Sigma y$  = Total score of instrument items  
 $\Sigma xy$  = The number of multiplication scores of X and Y  
 $\Sigma y^2$  = The sum of the squares of the total score of the instrument items  
 $\Sigma x^2$  = Number of squares of instrument item scores

The criteria for the validity of the research instrument are if  $r_{count} > r_{table}$  then the instrument item is declared valid, . If  $r_{count} < r_{table}$ , the instrument item is declared invalid. If the item is declared invalid, it will be corrected or removed.

### 2.3.2.3 Reliability Test

According to Arikunto (2010), the reliability test of the questionnaire is a steady determination that has a high level of confidence and if the results vary, the changes that occur can be said to be meaningful to test the reliability of the items using the Cronbach's alpha formula:

Cronbach's alpha formula:

$$r_{11} = \left( \frac{k}{k-1} \right) \left( 1 - \frac{\sum \sigma_i^2}{\sigma_t^2} \right)$$

Information :  $r_{11}$  = Instrument reliability

$k$  = Number of statement items

$\sum \sigma_i^2$  = Number of item variances

$\sigma_t^2$  = total variance

To calculate the variance used the formula:

$$\sigma_i^2 = \frac{\sum X^2 - \left( \frac{\sum X}{n} \right)^2}{n}$$

Under the condition:

$r = 0.00-0.25$  weak reliability

$r = 0.26-0.50$  moderate reliability

$r = 0.51-0.75$  strong reliability

$r = 0.76-1.00$  very strong / perfect reliability

Each instrument indicator of each variable is said to be reliable where the measurement results can be trusted, if (alpha) is greater than the  $r$ -critical value at a significant level of 5%.

The criteria for the reliability test of the research instrument are if  $r_{count} > r_{table}$  then the item of the instrument is reliable, and if  $r_{count} < r_{table}$  then the item is not reliable. If the item is declared unreliable then the item is replaced or removed.

From the knowledge questionnaire, Cronbach's alpha value was 0.752, so the valid knowledge questionnaire was declared reliable. The reliability of the mother's knowledge questionnaire about weight gain in infants is very high.

## 2.4 Data Analysis Techniques

The data analysis used is univariate analysis, bivariate analysis and multivariate analysis using the help of a computer program that is adapted to the following steps:

### 2.4.1 Univariate analysis

Univariate analysis was carried out to describe each variable, namely the knowledge of mothers with increased baby weight aged 3-6 months in the Simpang Dolok Health Center Work Area, Limapuluh District, Batubara Regency 2015. The data obtained from the results of data collection are presented in the form of distribution and frequency tables.

### 2.4.2 Bivariate Analysis

This analysis was used to test the close relationship between knowledge and weight gain of infants aged 3-6 months in the Simpang Dolok Public Health Center, Limapuluh District, Batubara Regency. processed on a computer, entered into the program systematically.

The analysis used in this study to see the relationship between the independent variable and the dependent variable is by using the Chi-square statistical test. The analysis technique used is chi-square analysis using a 95% confidence level with 5%, so that the p (p-value) <0.05, the statistical calculation results are significant (significant) or indicate there is a relationship between the dependent and independent variables. and if the p-value > 0.05 then the results of statistical calculations are not meaningful or there is no relationship between the dependent and independent variables (Budiman, 2013: 22).

## 3. Result And Discussion

### 3.1 Results

#### 1.2.1 Univariate Analysis

##### 1.2.1.1 Demographic Data

Based on the results of this study in the work area of the Simpang Dolok Health Center, Limapuluh District, Batubara Regency in 2015, it is known that the demographic data of mothers by knowing the characteristics of age, education, and occupation and the sources of information obtained from 50 respondents in the Simpang Dolok Health Center Work Area, Limapuluh District, Batubara Regency in 2015 are as follows, which the researcher presents in the form of the table below:

TABLE 1  
FREQUENCY DISTRIBUTION OF RESPONDENT DEMOGRAPHIC DATA IN THE WORK AREA OF SIMPANG DOLOK PUSKESMAS, LIMAPULUH DISTRICT, BATUBARA REGENCY IN 2015

| No | Demographic Data       | Frequency | Percentage (%) |
|----|------------------------|-----------|----------------|
| 1  | Age                    |           |                |
|    | 21 – 35 years old      | 35        | 70             |
|    | > 36 years old         | 15        | 30             |
|    | Amount                 | 50        | 100            |
| 2  | Education              |           |                |
|    | SENIOR HIGH SCHOOL     | 23        | 46             |
|    | SD                     | 27        | 54             |
|    | Amount                 | 50        | 100            |
| 3  | Work                   |           |                |
|    | IRT                    | 34        | 68             |
|    | Teacher                | 16        | 32             |
|    | Amount                 | 50        | 100            |
| 4  | Sources of Information |           |                |
|    | Media                  | 27        | 54             |
|    | Health workers         | 23        | 46             |
|    | Amount                 | 50        | 100            |

From the table above, it can be seen that the majority of respondents aged 21-35 years were 35 people (70%). Sources of information obtained by respondents through the media as many as 27 people (54 %),

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TABLE 2  
RESPONDENT FREQUENCY DISTRIBUTION BASED ON KNOWLEDGE  
IN THE WORKING AREA OF THE SIMPANG DOLOK HEALTH CENTER, LIMAPULUH DISTRICT, BATUBARATA REGENCY,  
2015

| No | Respondent Knowledge | Frequency | Percentage(%) |
|----|----------------------|-----------|---------------|
| 1  | Well                 | 12        | 23.5%         |
| 2  | Enough               | 13        | 25.5%         |
| 3  | Not enough           | 25        | 49%           |
|    | Amount               | 50        | 100%          |

From the table above, it can be seen that the majority of respondents have insufficient knowledge of 25 people (49%), and the minority of respondents who have sufficient knowledge are 13 people (25.5%).

TABLE 3  
RESPONDENT FREQUENCY DISTRIBUTION BASED ON WEIGHT GAINS  
BABIES IN THE WORK AREA OF THE SIMPANG DOLOK PUSKESMAS, LIMAPULUH DISTRICT, BATUBARA REGENCY IN 2015

| No | Baby Weight Increase | Frequency | Percentage (%) |
|----|----------------------|-----------|----------------|
| 1  | Increase             | 13        | 25.5%          |
| 2  | Not Increase         | 37        | 72.5%          |
|    | Amount               | 50        | 100%           |

From the table above, it can be seen that the majority of the increase in the baby's weight increased by 13 people (25.5%), and the minority did not increase by 37 people (72.5%).

## 1.2.2 Bivariate Analysis

TABLE 4  
CROSS-TABULATION OF RESPONDENT'S KNOWLEDGE WITH INCREASE OF BABY'S WEIGHT  
IN THE WORK AREA OF THE SIMPANG DOLOK PUSKESMAS, LIMAPULUH DISTRICT, BATUBARA REGENCY IN 2015

| No | Category Knowledge Respondent | Baby Weight Increase |    |              |    | Total | Value |       |
|----|-------------------------------|----------------------|----|--------------|----|-------|-------|-------|
|    |                               | Increase             |    | Not Increase |    |       |       |       |
|    |                               | F                    | %  | F            | %  | F     | %     |       |
| 1  | Well                          | 6                    | 12 | 6            | 12 | 12    | 24    | 0.013 |
| 2  | Enough                        | 4                    | 8  | 9            | 18 | 13    | 26    |       |
| 3  | Not enough                    | 3                    | 6  | 22           | 44 | 25    | 50    |       |
|    | Total                         | 13                   | 26 | 37           | 74 | 50    | 100   |       |

From the table above, it can be seen that the knowledge of respondents with an increase in the weight of babies aged 3-6 months in the Simpang Dolok Health Center Work Area, Limapuluh District, Batubara Regency. ), did not increase 22 people (44%). The good minority were 12 people (24%) with 6 people (12%) increasing baby weight and 6 (12%).

Based on the results of the Chi-square statistical test analysis with P Value = 0.013 with p value = < 0.05 so that P Value (0.013) < P (0.05), the research hypothesis was determined that Ho was rejected and Ha was accepted, meaning there was a relationship between maternal knowledge and weight gain. the body of babies aged 3-6 months in the Simpang Dolok Health Center Work Area, Limapuluh District, Batubara Regency in 2015.

## 1.2.3 Hypothesis Tester

Hypothesis testing was carried out using a simple correlation analysis technique to determine the knowledge of mothers with increasing infant weight in the Simpang Dolok Health Center Work Area, Limapuluh District, Batubara Regency. 3-6 months.

From the analysis of statistical data with the chi square test, it can be seen that from the results of the calculation of P value (0.013) < a (0.05), thus the hypothesis in this study is Ha is accepted which means there is a relationship between mother's knowledge and weight gain of babies aged 3 -6 months in the Simpang Dolok Health Center Work Area, Limapuluh District, Batubara Regency in 2015.

## **3.2 Discussion**

### **3.2.1 Characteristics of Respondents**

Based on the results of the study, it can be seen that from 50 respondents, 35 respondents (75%). This is in accordance with Hurlock's opinion, that age (21-35) years is a period in which a person maximally achieves satisfactory performance. This is in accordance with the theory of weight growth of babies aged 3 to 6 months, normal baby weight gain is as much as 450 grams every 4 weeks or about 125 grams per week. Age has a role in gaining knowledge, because one's memory power is influenced by age, the older a person is, the function of his body organs also decreases, including memory. Meanwhile, according to Notoadmodjo (2004), age plays an important role in understanding a science,

Apart from age, which can affect mother's knowledge, educational background can also affect mother's level of knowledge. From the results of the study, the highest education level of mothers was found to be high school graduates as many as 23 people (46%). Education can affect a person's learning process. The higher a person's education, the easier it is to receive the information. The more information that comes in, the more knowledge that can be obtained, including health information. It aims to see that the higher the education of the respondent, the easier and more broad-minded it is to know about how to increase the baby's weight. Through education a person can get information quickly,

A person's education will influence in responding to something that comes from outside. Someone with higher education will respond more rationally to incoming information and will think about the extent of the benefits they might get from health education. In the opinion of Notoadmodjo (2010) which states that education has an important role in determining human quality. The level of human education is associated with the ability to absorb and receive information in the field of health and family.

Education is important because it is the basis of understanding people in terms of receiving information. Information can be more easily accepted and adopted by someone who has higher education than low education. This is in accordance with the opinion of Hurlock (2004), that education plays an important role in determining the quality of human beings, and will be considered more integrated when tasting education.

Occupation is also a factor that influences mother's knowledge about how to increase baby's weight at the age of 3-6 months. The results of the study also found that, all mothers who were sampled in the study worked as housewives as many as 35 people (75%) In the opinion of Notoadmodjo (2008) work is an activity or activity that is carried out daily. where those who have jobs will be faster and easier to get information.

### **3.2.2 Respondent Knowledge**

Knowledge is an impression in the human mind as a result of the use of the five senses. Knowledge is very different from belief (beliefs), superstition (superstition).

Knowledge is everything that is known based on the experience gained by every human being, Mubarak (2011). The factors that influence knowledge are education is the guidance given by someone to others in order to understand something, work is an environment that can make a person gain experience and knowledge, either directly or indirectly. With increasing age, a person will experience changes in physical and psychological (mental) aspects. In the psychological or mental aspect, a person's level of thinking becomes more mature and mature. Interest makes someone to try and pursue something, so that someone gains deeper knowledge.

Based on 15 statements regarding mother's knowledge about increasing baby's weight, it was found that mothers who had good knowledge were 4 people (8.0%) and knowledgeable respondents who had sufficient knowledge were 31 people (62%) and mothers who had less knowledge were 15 people (30%).

### **3.2.3 Mother's Knowledge Relationship with Baby's Weight Gain**

Based on the calculation of statistical tests on 50 respondents, it can be described the results obtained with a chi square value of  $(0.013) < \alpha (0.05)$ , which means that there is a relationship between mother's knowledge and weight gain of babies aged 3-6 months in the Simpang Health Center Work Area. Dolok Limapuluh District, Coal Regency 2015

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### 3.3 Research Limitations

In this study, researchers have made every effort to obtain actual data and optimally control conditions related to the research process and results, but various obstacles often arise so that various weaknesses and limitations when carrying out this research include, in carrying out this research. using the actual situation, so it is necessary to explain to the respondent that the research is carried out for the development of knowledge but all secrets about the respondent are kept confidential.

In addition, the questionnaire used in this research is a closed questionnaire, so that respondents can only answer true or false and yes or no and respondents' answers have not been able to measure knowledge in depth. For this reason, this research needs to be followed up through research with a scale wider area and with more varied methods to provide confidence in the results obtained, so that the results are more useful and can be applied.

### 4. Conclusion

Based on the results of the data analysis described in chapter IV, it can be concluded as follows: (1) The majority of respondents' knowledge about increasing the weight of babies aged 3-6 months is sufficient. (2) The increase in the weight of infants aged 3-6 months in the work area of the Simpang Dolok Puskesmas, Limapuluh Subdistrict, Coal Regency in 2015 the majority did not increase (3) The results of the analysis obtained a P value = 0.013 which means that there is a significant relationship between mother's knowledge and weight gain babies aged 3-6 months. Suggestions in this research are. Based on the description contained in the conclusions of the research results above, it is recommended to several parties, namely: (1) For mothers who have babies. It is expected to monitor the development of the baby through regular weighing every month, The development of the baby's weight must be balanced by consuming balanced nutrition (2) For health workers. In order to always provide health education and counseling about the pattern of increasing infant weight for mothers who have babies aged 3-6 months. (3) The next researcher. Hopefully this researcher can be a reference for research and reference and can develop the results of this study on increasing the weight of babies aged 3-6 months.

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