The Relationship Of Age, Education, Knowledge, And Occupation Of Mothers To The Implementation Of Exclusive Breastfeeding In The City Of Binjai In 2022

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ARTICLEINFO

ABSTRACT

According to the Indonesian Health Profile 2021, exclusive breastfeeding coverage in North Sumatra province is only 57.88% and in Binjai city only 15.74%, while the national target in Indonesia is 80%. This study aims to look at the factors associated with the implementation of exclusive breastfeeding in the city of Binjai. The design of this research is observational analytic with cross sectional approach. The population in this study were mothers who had babies aged >6-12 months in the work area of the Binjai City Health Office from May to June 2022. Sampling used proportional sampling with accidental techniques on 283 respondents. Collecting data using a questionnaire, and data analyzed using univariate test, bivariate in the form of chi-square test.

The research results obtained ada the relationship between the work of breastfeeding mothers with the implementation of exclusive breastfeeding $p = 0.001$, there is a relationship between mother's education and the implementation of exclusive breastfeeding $p = 0.022$, there is a relationship between knowledge and the implementation of exclusive breastfeeding $p = 0.028$, there is no relationship between the age of breastfeeding mothers and the implementation of exclusive breastfeeding in the city Binjai. The conclusion of this study is that there is a relationship between mother's work, mother's education and mother's knowledge of the implementation of exclusive breastfeeding, and there is no relationship between maternal age and the implementation of exclusive breastfeeding in the city of Binjai.

Keywords: Exclusive Breastfeeding Age Education Profession Knowledge

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INTRODUCTION

ASI is an abbreviation of breast milk (ASI) in the form of a thick liquid resulting from the secretions of the mother's breast glands, while exclusive breastfeeding is the provision of breast milk given to infants from
birth to the age of not less than 6 months without adding or replacing with any food or drink. Indonesian Ministry of Health, 2019).

According to WHO 2018, exclusive breastfeeding for 6 months has saved 1.5 million babies per year in developing countries, so the Indonesian Ministry of Health No. 36 of 2009 Article 128 paragraphs 1 and 2 states that every baby has the right to get exclusive breastfeeding for 6 months except for medical indications. Infants who were exclusively breastfed during the first year of life were found to have more positive levels of infant development, including memory performance, early language, and motor skills at 14 months and 18 months. Babies who are exclusively breastfed also reduce the occurrence of cognitive disorders in infants, as well as being the beginning of emotional development in infants and will form a close bond between mother and baby. (Krol & Grossmann, 2018)

Exclusive breastfeeding coverage in North Sumatra province in 2021 is ranked 3rd out of 34 provinces in Indonesia with the lowest exclusive breastfeeding coverage, and the city of Binjai is the city with the lowest exclusive breastfeeding coverage in North Sumatra at 15.74% even though the Indonesian government has released the program. Exclusive breastfeeding for 6 months which was ratified in 2016 namely the Healthy Living Community Movement (Germas) (BPS, 2020).

The implementation of exclusive breastfeeding is influenced by several factors, including the characteristics of the mother, and social support. The results of other studies, factors that influence the implementation of exclusive breastfeeding are maternal compliance in carrying out antenatal care (ANC) routinely during pregnancy, breastfeeding within the first hour after the baby is born (IMD), inpatient care after delivery, promotion of formula milk, providing counseling about breastfeeding through neonatal visits by health workers (Evareny et al., 2010)

RESEARCH METHOD

This research is an observational analytic study with a cross sectional approach. The population in this study were mothers who had babies aged >6-12 months in the work area of the Binjai City Health Office for the period May to June 2022. Sampling used proportional sampling with accidental techniques on 283 respondents. Collecting data using questionnaires and data analyzed using univariate test, bivariate in the form of chi-square test and multivariate in the form of logistic regression test.

RESULTS AND DISCUSSION

RESULTS
Univariate Analysis

Table 1. frequency distribution of exclusive breastfeeding in the city of Binjai

<table>
<thead>
<tr>
<th>Variable</th>
<th>f</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>exclusive breastfeeding</td>
<td>104</td>
<td>36.7%</td>
</tr>
<tr>
<td>Not exclusive breastfeeding</td>
<td>179</td>
<td>63.3%</td>
</tr>
<tr>
<td>Total</td>
<td>283</td>
<td>100%</td>
</tr>
</tbody>
</table>

Based on table 1, the implementation of exclusive breastfeeding in the city of Binjai is dominated by infants who are not exclusively breastfed with a total of 179 infants (63.3%) and 104 infants (36.7%) who only receive exclusive breastfeeding.

Table 2. frequency distribution of the characteristics of breastfeeding mothers in the city of Binjai

<table>
<thead>
<tr>
<th>Variable</th>
<th>f</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20 Years - 35 Years</td>
<td>207</td>
<td>73.1%</td>
</tr>
<tr>
<td>&lt; 20 years and &gt;35 years</td>
<td>76</td>
<td>26.9%</td>
</tr>
<tr>
<td>Mother's Knowledge</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Good (10)</td>
<td>178</td>
<td>62.9%</td>
</tr>
<tr>
<td>Not good (&lt;8)</td>
<td>105</td>
<td>37.1%</td>
</tr>
<tr>
<td>Mother's Job</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Based on table 2, most of the mothers who became respondents were in their reproductive age, namely 25-35 years as much as 73.1%. Most of the respondents have jobs outside the home which is around 51.2%, at the education level is dominated by mothers with low education which is around 56.9%, and at the level of knowledge of mothers about exclusive breastfeeding is dominated by mothers with good knowledge about 62.9% mothers, for the history of IMD as many as 32.9% of infants who had IMD and 67.1% of infants who did not.

Bivariate Analysis

Table 3. The relationship between maternal age, mother's education, mother's knowledge, mother's occupation, history of ANC, history of IMD and social support with the implementation of exclusive breastfeeding in the city of Binjai

<table>
<thead>
<tr>
<th>Variable</th>
<th>Not breast milk exclusive</th>
<th>Yes breast milk exclusive</th>
<th>Total</th>
<th>p</th>
<th>OR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt; 20 and &gt;35 years old</td>
<td>47 (61.8%)</td>
<td>29 (38.2%)</td>
<td>76 (100%)</td>
<td>0.766</td>
<td>0.921</td>
</tr>
<tr>
<td>20-35 years old</td>
<td>132 (63.8%)</td>
<td>75 (36.2%)</td>
<td>207 (100%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>111 (68.9%)</td>
<td>50 (31.1%)</td>
<td>161 (100%)</td>
<td>0.022</td>
<td>1.763</td>
</tr>
<tr>
<td>Tall</td>
<td>68 (55.7%)</td>
<td>54 (44.3%)</td>
<td>122 (100%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Working</td>
<td>105 (72.4%)</td>
<td>40 (27.6%)</td>
<td>145 (100%)</td>
<td>0.001</td>
<td>2.270</td>
</tr>
<tr>
<td>Doesn't work</td>
<td>74 (53.6%)</td>
<td>64 (46.4%)</td>
<td>138 (100%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knowledge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>75 (71.4%)</td>
<td>30 (28.6%)</td>
<td>105 (100%)</td>
<td>0.028</td>
<td>1.779</td>
</tr>
<tr>
<td>Well</td>
<td>104 (58.4%)</td>
<td>74 (41.6%)</td>
<td>178 (100%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AMOUNT</td>
<td>179 (63.3%)</td>
<td>104 (36.7%)</td>
<td>283 (100%)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Based on table 3, babies who are not exclusively breastfed have a greater percentage of mothers aged 25-35 years compared to mothers aged <20 and >35 with statistical test results obtained p-value 0.766, which means that there is no relationship between maternal age and the implementation of exclusive breastfeeding in the city of Binjai with a value of OR = 0.921.

At the mother's education level, the percentage of babies who were not given exclusive breastfeeding was greater in the percentage of mothers who had low education compared to mothers who had higher education. The statistical test results obtained a p-value of 0.022, which means that there is a relationship between mother's education and the implementation of exclusive breastfeeding in Indonesia. the city of Binjai with an OR value of 1.793.

In working mothers, the percentage of infants who were not given exclusive breastfeeding was greater in working mothers compared to mothers who did not work. The statistical test results obtained a p-value of 0.001 which means that there is a significant relationship between work and the implementation of exclusive breastfeeding in the city of Binjai with a value of OR= 2,270.

At the mother's level of knowledge, it was found that the percentage of infants who did not get exclusive breastfeeding was greater in mothers who had low knowledge than mothers who had good knowledge. The
statistical test results obtained a p-value of 0.028, which means that there is a significant relationship between mother's knowledge and the implementation of exclusive breastfeeding, in the city of Binjai with a value of OR = 1.779.

Discussion

a. The relationship between maternal age and the implementation of exclusive breastfeeding in the city of Binjai

According to the results of research that has been carried out, it is found that most of the breastfeeding mothers are in the age category of 20-35 years, namely 73.1%. According to the BKKBN, the age of 20-35 years is a safe age for maternity and breastfeeding mothers, compared to mothers with the age of less than 20 years or more than 35 years due to immature age or decreased age so that it will pose a risk during pregnancy (BKKBN, 2010). 2017.

From the results of the study, mothers who did not give exclusive breastfeeding to their babies had a greater percentage of mothers aged 20-35 years compared to mothers who had aged <20 and >35 years, namely (63.8%: 61.8%). The results of the chi square test obtained a p-value of 0.766, which means that there is no relationship between maternal age and the implementation of exclusive breastfeeding in the city of Binjai with an OR = 0.921. The results of this study are in line with the research conducted (Hana Rosiana Ulfah & Farid Setyo Nugroho, 2020) obtained p-value 0.413 that there is no relationship between maternal age with the implementation of exclusive breastfeeding. This research is also in line with research (Untari, 2017).

However, in a study conducted by (Afriyani et al., 2018) it was found that there was a relationship between maternal age and the implementation of exclusive breastfeeding. In this study, mothers aged 20-30 years tend to give exclusive breastfeeding compared to those aged <20 and >30.

Based on the results of the research that has been done, it is found that most of the respondents' mothers are in the age category of 20-35 years, namely 73.1%. In this study, although the majority of mothers breastfeed at the age of 20-35 years, it is not certain that someone gives exclusive breastfeeding to their babies even though it is known that the age of 20-35 years is a safe age for maternity and breastfeeding mothers, and has good psychological maturity, which they should can exclusively breastfeed their babies.

Other factors that cause low exclusive breastfeeding include the mother's employment status, mother's education, and lack of social support, and maternal age >35 may have experience with the implementation of exclusive breastfeeding in the past. In line with research results (Hana Rosiana Ulfah & Farid Setyo Nugroho, 2020) where mothers aged >35 years are likely to have many children so that mothers will learn from experience that children who are exclusively breastfed are healthier than those who are not exclusively breastfed.

According to Maritalia 2017, in the implementation of exclusive breastfeeding, mothers of sufficient age have a good level of maturity in their mindset, but when the breastfeeding process at the age of breastfeeding mothers is influenced by other factors, such as, mothers with age > 35 years may have prior experience in the process of breastfeeding, breastfeeding, however, the reproductive age is still the best age in the process of pregnancy and childbirth.

The relationship between maternal education and the implementation of exclusive breastfeeding in the city of Binjai

From the results of the study, it was found that the percentage of infants who were not exclusively breastfed had a higher percentage based on the results of the study, it was found that the percentage of infants who were not given exclusive breastfeeding was greater in mothers who had low education compared to mothers who had higher education, namely (68.9%: 55.7%). The results of the statistical test obtained a p-value of 0.022, which means that there is a relationship between maternal education and the implementation of exclusive breastfeeding in the city of Binjai with an OR = 1.793.

The results of this study are in line with research conducted by (Siombing, 2018) from the statistical test results obtained p-value is 0.003 which means there is a significant relationship between the mother's education level with the implementation of exclusive breastfeeding. The results of the analysis also obtained a value of OR = 1.763, which means that mothers with low education have the opportunity not to do exclusive breastfeeding by 1.763 times compared to mothers with higher education.

In line with the research conducted (Judge, 2020) the results of p-value 0.001 there is a significant relationship between mother's education on the implementation of exclusive breastfeeding, the same is the case with research conducted by (Deslima et al., 2019) that the p-value of 0.023, which means that there is a
significant relationship with the PR value of 1.306, which means that the prevalence of mothers with low education is 1.306 times less likely to give exclusive breastfeeding compared to mothers with higher education.

According to research (Transport, 2020) it was found that there was no relationship between the mother's education level and the implementation of exclusive breastfeeding with a p value of 0.406, but the results of the study showed that mothers with low education were more likely to not do exclusive breastfeeding (28.7%) than mothers who had higher education, namely only (28.7%) 18.1% who did not do exclusive breastfeeding. The results of the research conducted in the city of Binjai were only 43.1% of mothers with higher education, while 56.9% of mothers with low education had higher education. Binjai City is dominated by breastfeeding mothers with low education. Education is a forum as a process of behavior change because with education a person can receive information and knowledge that will give a change in attitude, so that mothers who have higher education will tend to give exclusive breastfeeding to their babies, on the contrary if mothers have low education, babies tend not to be exclusively breastfed.

The test results also obtained an OR value = 1.793 which means that mothers with low education have a 1.793 times greater chance of not giving exclusive breastfeeding than mothers with higher education in the city of Binjai, meaning that the lower a person's education will hinder the development of attitudes and knowledge of values. being taught. Mothers who have higher education in general will accept new things and can accept changes slowly, especially regarding exclusive breastfeeding, sometimes even being driven by themselves to seek better information in matters relating to their lives. According to Notoatmodjo, 2017 education is the process of changing one's attitudes and behavior in maturation through teaching and training.

The relationship between mother's knowledge and the implementation of exclusive breastfeeding in the city of Binjai

According to the results of research that has been carried out in the city of Binjai regarding mother's knowledge of the implementation of exclusive breastfeeding, the results using the chi square test are p-value 0.028 which means there is a relationship between mother's knowledge and the implementation of exclusive breastfeeding in the city of Binjai, with an OR = 1.779. This is in line with the results of research conducted by (Fahriani et al., 2016) that from cross-sectional results in the group of mothers who have high knowledge will have a 5.4 times greater proportion in exclusive breastfeeding for 6 months.

In line with the research conducted (Princess, 2016) there is a p value of 0.000 (p <0.05) which means that there is a significant relationship between mother's knowledge and the implementation of exclusive breastfeeding. In 2016 research conducted in Kenya explained that all mothers have extensive knowledge about exclusive breastfeeding. Around 98% of mothers know that breast milk is the baby's first food, as many as 79% of mothers know that they only give breast milk without any additional food, and only about 19.1% know the benefits of colostrum (Mucheru et al., 2016).

Based on the results of the study, 71.4% of infants were not exclusively breastfed to mothers who had low knowledge, while only 58.4% of infants were not exclusively breastfed to mothers who had good knowledge. The results of statistical tests obtained OR = 1.799 which indicates the prevalence of mothers who have low knowledge has a 1.779 times greater chance of not giving exclusive breastfeeding than mothers who have higher education.

Basically, mothers who have good knowledge will affect the implementation of exclusive breastfeeding, this is because mothers understand the time, benefits and goals of breastfeeding for 6 months. If the mother is busy, she will continue to give breast milk through pumping, and this happens if the mother knows how to pump and the benefits of pumping. Knowledge is obtained from various ways such as counseling, counseling during ANC (antenatal care) or even when meeting with fellow mothers who are breastfeeding. Mothers who have good knowledge will tend to carry out exclusive breastfeeding for their babies, compared to mothers with less knowledge (Aswita amir, Nursalim, 2018).

The relationship between mother's work and the implementation of exclusive breastfeeding in the city of Binjai

According to research conducted in the city of Binjai regarding the mother's work on the implementation of exclusive breastfeeding based on the chi square test, it was found that there was a significant relationship between mother's work and the implementation of exclusive breastfeeding with a p-value of 0.001 with an OR value of 2.270. This research is in line with research conducted by (Sihombing, 2018) namely the p-value of
0.005 which indicates a significant relationship between the mother's work and the implementation of exclusive breastfeeding.

The cause of the low implementation of exclusive breastfeeding in the city of Binjai is because it is dominated by working mothers. As many as 72.4% of infants who do not get exclusive breastfeeding in mothers who have work, while in mothers who do not work only 53.6% of infants who do not get exclusive breastfeeding in the city of Binjai. This happens because work is related to time as well as exclusive breastfeeding is also related to duration and time. The results of the analysis also obtained a value of OR = 2.270, which means that if working mothers most likely do not have the time to exclusively breastfeed 2.270 times compared to mothers who do not work. In line with the research conducted (Timporok, 2018). Based on the results of the chi-square analysis of the relationship between employment status and exclusive breastfeeding, a significant p-value of 0.000 was obtained, which means that there is a significant negative correlation where the busier the mother works, the less opportunity the mother has to breastfeed her baby.

This is also supported by research conducted by (Bahriyah et al., 2017) with the results of the chi-square test, the p value of 0.018 with the OR value of (0.396) means that mothers who do not work have a 0.396 times greater chance of carrying out exclusive breastfeeding compared to working mothers. According to the researcher's assumption, exclusive breastfeeding is related to time and the mother's work is related to time, so work has an influence on the implementation of exclusive breastfeeding. This is because mothers who have jobs outside the home feel that they do not have enough time to breastfeed, even though they may know the benefits of exclusive breastfeeding, itself, as well as the lack of time off given that is not proportional to the duration of exclusive breastfeeding, as well as the lack of a busui room for mothers in the breastfeeding process, and the mother's lack of understanding of expressed breast milk which can help the process of implementing exclusive breastfeeding so that mothers prefer to give formula milk.

The government has made policies on guaranteeing mothers who breastfeed while working, such as providing a busui room, but many institutions ignore this, this is in line with research conducted by (Safitri & Puspitasari, 2018) said that the regulations that have been made by the central government so far have not been evaluated because their implementation is carried out in their respective regions, it is possible that their implementation has not gone well, so that the implementation of exclusive breastfeeding for working mothers is not going well.

The implementation of exclusive breastfeeding has good benefits for supporting the quality of the baby's early life so that on June 30, 2022 the government has approved the latest draft law on MCH, which provides 6 months of leave for postpartum mothers and 40 days of leave for fathers. The purpose of this bill is expected to be able to help fulfill the health of mothers and babies, one of which is to do exclusive breastfeeding.

CONCLUSION

From the results of this study, it can be concluded that there is a relationship between mother's education and the implementation of exclusive breastfeeding, there is a relationship between mother's work and the implementation of exclusive breastfeeding, there is a relationship between mother's knowledge and the implementation of exclusive breastfeeding, and there is no relationship between maternal age and the implementation of exclusive breastfeeding.

References

Ilvira Ulpa Ismail, The Relationship Of Age, Education, Knowledge, And Occupation Of Mothers To The Implementation Of Exclusive Breastfeeding In The City Of Binjai In 2022