Influence of Knowledge and Attitude of Trimester Pregnant Women with Breast Milk Feeding at the Health Center

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Abstract. Exclusive breastfeeding is the provision of breast milk to infants only for 6 months, namely from 0-6 months, without the addition of other liquids such as formula, orange, honey, tea, and water, and without additional solid foods such as bananas, milk porridge, biscuits, rice porridge, and team rice. The purpose of this study was to determine the relationship between knowledge and attitudes of third trimester pregnant women with exclusive breastfeeding at the Puskesmas. This research is a type of surveyanalytic research, with a cross sectional study approach. The population in this study was 130 people with a sample size of 33 people who were taken using the Slovin formula with purposive sampling technique. Data analysis techniques used are univariate analysis and bivariate analysis. Through research, the results of univariate analysis were obtained, namely good knowledge (63.63%), unfavorable attitudes (57.57%), and those who provide exclusive breastfeeding (54.54%) and bivariate analysis, namely knowledge with the Chi-Square statistical test obtained X2count 0.1 and X2table 3.841 so that X2count < X2table then H0 is accepted and Ha is rejected, the mother's attitude obtained X2count 0.05 and X2table 3.841 so X2count < X2table then H0 is accepted and Ha is rejected. Based on the research, it can be concluded that there is no relationship between knowledge and attitude of third trimester pregnant women. For health centers, to routinely conduct counseling about exclusive breastfeeding, and explain the benefits of exclusive breastfeeding both for mothers and for babies.

Keywords: Influence, Knowledge and Attitude, Trimester Pregnant, Health Center.

1. Introduction

Knowledge is the result of knowing that occurs after people have sensed certain objects. The sensing of objects occurs through the five human senses and it is expected that adequate knowledge will change the attitudes and behavior of mothers to want to provide exclusive breastfeeding to their babies. Another factor is midwife support and husband or family support, the role of midwives during early breastfeeding is multiple, including midwives must ensure that the baby gets enough milk while the husband's role is to provide motivation and accompany. Makassar City has an exclusive breastfeeding target of 65% with an achievement for 2015 of 66.21% and in 2016 the achievement was 58%,
while the achievement at the Mamajang Health Center in 2015 was around 45%, and 34% in 2016 (Makassar City Health Office).

Health development is an integrated part of human resource development, namely realizing an advanced and independent nation, physically and mentally prosperous. Complete human development must include spiritual and personality aspects. For this reason, health development is aimed at realizing healthy, intelligent, productive and highly competitive humans. Quality human resources (HR) are an important element in the success of national development. Children as the nation's successor human resources and the hope of the future, family, community and state need to be given guidance and direction as early as possible even from the womb. This guidance begins with paying more attention to pregnant women, so that they get adequate nutrition and are safe in carrying out the process of pregnancy and childbirth. After the baby is born, it is necessary to provide food that can ensure optimal physical and spiritual growth. The World Alliance for Breastfeeding Action (WABA) is an international network of organizations and individuals who believe that exclusive breastfeeding is the right of every child by promoting, protecting and supporting these rights, based on innocence and working with UNICEF.

2. Research Method

This research is an analytical survey research, namely research that seeks to find the relationship between variables with a Cross Sectional Study approach, namely research that makes observations or measurements of variables at a certain time. In this system, the variables are measured at the same time. The independent variables in this study are knowledge and attitude while the dependent variable is exclusive breastfeeding.

Population and Sample.

The population in this study were all pregnant women who checked their pregnancy aged 7 to 9 months at the Mamajang Health Center in Makassar city as many as 130 people. The sample in this study were some pregnant women who checked their pregnancy came to the Mamajang Health Center in Makassar city as many as 33 people, the sampling technique in this study used Purposive Sampling, namely the sample was taken according to the specified criteria.

Data Collection.

The data collection technique is a direct interview with respondents, in this case mothers who are at the Mamajang Health Center in Makassar City using a list of questions or questionnaires on the Relationship between Knowledge of Pregnant Women Trimester III with Exclusive Breastfeeding. The tool for measuring data consists of a questionnaire given to the mother. The questionnaire includes the identity of the researcher, consent, respondent, instructions for filling and respondent identity, and statements about maternal knowledge, attitudes, and exclusive breastfeeding. In this study, the variable measurement scale used Guttman scale measurement to measure the
knowledge variable and Likert scale to measure the variable maternal attitude towards exclusive breastfeeding.

Data Analysis

The data analysis technique used was univariate and bivariate analysis.

3. Results And Discussions

This analytic survey study of the relationship between knowledge and attitudes of third trimester pregnant women with exclusive breastfeeding at the Mamajang Makassar Health Center was conducted in June 2016. Sampling with purposive sampling obtained 33 samples based on inclusion and exclusion criteria. In univariate analysis obtained pregnant women who give exclusive breastfeeding as much as 54.54% as many as 18 people, and who do not give exclusive breastfeeding as much as 45.45% or 15 people. For knowledge, pregnant women who have good knowledge about exclusive breastfeeding were 63.63% or 21 people, and those who have poor knowledge about exclusive breastfeeding were 36.36% or 12 people. For attitudes, pregnant women who have a good attitude about exclusive breastfeeding are 42.42% or 14 people, and those who have a bad attitude about exclusive breastfeeding are 57.57% or 19 people. In bivariate analysis for the relationship between knowledge of third trimester pregnant women with exclusive breastfeeding at the Mamajang Makassar Health Center in 2016 from 21 respondents with high knowledge, 11 (33.33%) respondents provided exclusive breastfeeding and 10 (30.30%) respondents who did not provide exclusive breastfeeding. Meanwhile, of the 12 respondents with low knowledge, 7 (21.21%) respondents provided exclusive breastfeeding and 5 (15.15%) respondents did not provide exclusive breastfeeding.

Based on the results of statistical tests with Chi-Square using the Statistical Package for Social Science (SPSS), the $x^2$ count value is 0.1 and $x^2$ table is 3.841 so that $x^2$ count > $x^2$ table then H0 is accepted and Haditolak which means there is no significant relationship between the knowledge of third trimester pregnant women with exclusive breastfeeding at the Makassar mamajang health center in 2016. The relationship between the attitude of third trimester pregnant women with exclusive breastfeeding at the Mamajang Makassar Health Center in 2016 that of the 14 respondents who had a good attitude, 8 (24.24%) respondents provided exclusive breastfeeding and 6 (18.18%) respondents who did not provide exclusive breastfeeding. Meanwhile, of the 19 respondents who had a bad attitude, 10 (30.30%) respondents provided exclusive breastfeeding and 9 (27.27%) respondents who did not provide exclusive breastfeeding. Based on the results of statistical tests with Chi-Square using the Statistical Package for Social Science (SPSS), the $x^2$ count value is 0.06 and $x^2$ table 3.841 so that $x^2$ count > $x^2$ table then H0 is accepted and Haditolak which means there is no relationship between maternal attitudes and exclusive breastfeeding at the Mamajang Makassar Health Center. Based on the results of interviews and questionnaires, the results of research on respondents' knowledge of exclusive breastfeeding are well informed due to the education
of middle to upper class respondents so that it can affect respondents' knowledge. This can be seen by the number of questions answered correctly on the questionnaire by respondents about exclusive breastfeeding. Respondents who have poor knowledge about exclusive breastfeeding are due to respondents with middle to lower education. This can be seen by the fact that there are still questions that are answered incorrectly by respondents about exclusive breastfeeding. This result is in line with the theory of knowledge according to Notoatmodjo (2010), which states that knowledge is the result of human sensing, or the result of someone knowing objects through their senses (eyes, nose, ears, and so on).

According to the researcher's assumption, this is due to the influence of health workers in inviting respondents to continue to provide exclusive breastfeeding. This can be seen from the statements that can be answered correctly or incorrectly by respondents who provide exclusive breastfeeding, this proves that there is no significant relationship between the knowledge of third trimester pregnant women and exclusive breastfeeding at the Mamajang Makassar Health Center. The results of this study are in line with research conducted by Iin Dwi Yuliarti (2008) which states that there is no significant relationship (p>0.05) between respondents' knowledge and exclusive breastfeeding behavior.

Based on the results of the questionnaire, it was found that the respondents' attitudes about exclusive breastfeeding were good because the respondents' education level was middle to upper class so that it could affect the respondents' knowledge, besides that mothers felt safer to give exclusive breastfeeding to their babies because they were not worried about the preservatives found in formula milk. Breast milk given to babies can be given instantly anytime and anywhere according to the baby's needs without spending money. Whereas respondents who had a poor attitude about exclusive breastfeeding was due to the lack of understanding of respondents about exclusive breastfeeding so that their knowledge about exclusive breastfeeding was still low, besides that mothers also rarely attended counseling held by health workers about exclusive breastfeeding and the large amount of formula milk circulating in the market so as to make respondents not willing to give exclusive breastfeeding to their babies.

The results of this study found that not only respondents with good attitudes provided exclusive breastfeeding but some respondents who were less good also provided exclusive breastfeeding. According to the researcher's assumption, this is due to the influence of health workers in inviting respondents to continue to provide exclusive breastfeeding. This can be seen from the statements that can be answered by respondents who provide exclusive breastfeeding, this proves that there is no relationship between the knowledge of third trimester pregnant women with exclusive breastfeeding at the Mamajang Makassar Health Center.

4. Conclusion

The results of hypothesis testing in this study resulted in the conclusion that there was no relationship between the knowledge and attitudes of third trimester pregnant
women with exclusive breastfeeding at the Mamajang Makassar Health Center. From the results obtained, it is necessary to improve the mother's knowledge about exclusive breastfeeding by providing counseling about exclusive breastfeeding, and explaining the benefits of exclusive breastfeeding both for the mother and for the baby. Further research is also needed on exclusive breastfeeding and the factors that influence exclusive breastfeeding actions.

Acknowledgements

The author is very grateful to all those who have contributed to this research. Especially among higher education institutions in the implementation of the Tridarma of Higher Education. Hopefully we can collaborate in development in the health sector for the benefit of the community.

References