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The Relationship of Knowledge, Practices, and Culture on Low Coverage of Exclusive Breastfeeding

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Authors' contributions

This work was carried out in collaboration among all authors. All authors read and approved the final manuscript.

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ABSTRACT

Aims: The aims of this study was to analyze the influence of knowledge Practices and, Culture on the low coverage of exclusive breastfeeding.

Introduction: Exclusive breastfeeding is breastfeeding as early as possible after delivery, given without schedule, and not given other food even if only water until the baby is six months old. Development Agency of the Indonesian Ministry of Health said Exclusive Breastfeeding in Aceh Province is 41.0%, the coverage of breastfeeding in Aceh Province is very low and has not reached the target set by the Indonesian Ministry of Health, which is 80%. West Aceh's exclusive breastfeeding coverage 44%, exclusive breastfeeding coverage is still far from the target. The Meutulang region for two consecutive years still has the same achievement rate of 13.4%.

Study Design: Cross-Sectional Survey approach.

Location and Duration of Study: Conducted in December 2022 (15 November-20 Desember) in Meutulang District, West Aceh, Aceh, Indonesia.

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Methods: The population of all mothers who have babies aged 6-12 months. Sampling by the total sampling method, where all polluters were sampled as many as 44 respondents were. Furthermore, the data were analyzed using univariate and bivariate and then tested with a Simple Linear Regression Model.

Results: proved that there is an influence of knowledge, action, and culture on the low coverage of exclusive breastfeeding as evidenced by the correlation value (R) of 0.601 and the value of the coefficient of determination (R²) of 0.464, which means that the influence of the independent variable on the dependent variable is 46.4% where the correlation between the independent and dependent variables is in a strong category with value (Pvalue <0.05).

Conclusion: There was an influence of knowledge with value (Pvalue 0.011<0.05), value action (Pvalue 0.028<0.05), and value culture (Pvalue 0.000<0.05) on the low coverage of exclusive breastfeeding.

Suggestions: There needs to be more intense socialization and enlightenment by relevant officers in terms of mothers' understanding of exclusive breastfeeding so that mothers consider exclusive breastfeeding more important and can analyze the culture around them to give breast milk to their babies at least until the age of 6 months.

Keywords: Exclusive breastfeeding; knowledge; action; culture.

1. INTRODUCTION

Exclusive maternal milk is a specially created fluid that comes out directly from a mother's breast to a baby. Breast milk is also the perfect, practically cheap, and clean baby food that can be drunk directly from the mother's breast [1]. The content of breast milk consists of nutrients and fluids needed by infants for their nutritional needs for the first six months and can be continued until the age of 2 years [2]. Exclusive breastfeeding is breastfeeding as early as possible after delivery, given without schedule, and not given other food even if only water until the baby is six months old [3]. There are 3 types of breast milk, namely colostrum that comes out from the first day to days 3-5, transitional breast milk on days 3-5 to days 8-11, and mature breast milk from days 8-11 onwards. One of the effects exclusive breastfeeding on increasing the quality of emotional relationships and making infant immunity more optimal [4]. The effect of exclusive breastfeeding on babies after birth, especially to avoid diseases, both infectious and non-infectious, and affect the baby's growth and development [5].

According to (World Health Organization) exclusive breastfeeding at the world level still has not reached the target of up to 50%. In Indonesia, exclusive breastfeeding is still at 66.06%, this figure is not by the target set by the Indonesian Ministry of Health, which is 80% so the achievement of exclusive breastfeeding coverage at the national level itself is still low and has not met the target set. The achievement of exclusive breastfeeding coverage that is far from the target

is a sign that exclusive breastfeeding by mothers to their babies is still very low and needs to be increased (Ministry of Health of the Republic of Indonesia, 2021).

Data from the Research and Development Agency of the Indonesian Ministry of Health Exclusive Breastfeeding in Aceh Province is 41.0%, The data shows that the coverage of breastfeeding in Aceh Province is still very low and has not reached the target set by the Indonesian Ministry of Health, which is 80%. (Aceh Health Profile, 2021). West Aceh's exclusive breastfeeding coverage recorded 44% exclusive breastfeeding coverage is still far from the target (West Aceh District Health Profile, 2021). The Meutulang region for two consecutive years still has the same achievement rate of 13.4% (Meutulang Health Center Data, 2021).

Research [6] said that maternal knowledge about breastfeeding is very influential on the level of exclusive breastfeeding coverage expected by the government. Apart from knowledge (Haghighi, et al, 2016), attitudes also have a relationship with exclusive breastfeeding for infants. Hereditary cultures from ancestors [7] can influence mothers to breastfeed their babies, cultural beliefs and practices contribute to what is considered normal feeding practices, mothers view formula feeding as a normal way to feed babies.

From the results of a direct survey of the field that researchers did, where mothers do not know about the effects of exclusive breastfeeding, so mothers are not serious about giving milk to their babies. On the other hand, mothers also say the culture around them gives all the food to the baby so that the baby is healthy. Analysis of Knowledge, Practices, and Culture on the Low Coverage of Exclusive Breastfeeding.

1.1 Problem Statement

Is there a relationship between knowledge, practices and culture with the low coverage of exclusive breastfeeding in Meutulang District, West Aceh Regency?

1.2 Purpose

The purpose of this study is to examine the extent of the relationship between knowledge, practice ,and culture with the low coverage of exclusive breastfeeding in Meutulang District, West Aceh Regency.

1.3 Hypothesis

There is a relationship between knowledge, practice, and culture and low coverage of exclusive breastfeeding.

- a. Knowledge: Lack of knowledge about the benefits and importance of exclusive breastfeeding can be one of the contributing factors to low coverage of exclusive breastfeeding. If mothers do not have adequate knowledge about the benefits of exclusive breastfeeding for the health and development of the baby, they may not realize the importance of exclusive breastfeeding
- b. Practices: Practices that do not support exclusive breastfeeding can also contribute to low coverage. Factors such as early initiation of breastfeeding that is not carried out, giving formula milk or supplementary food to the baby too early, or lack of support for proper breastfeeding practices can hinder the mother from exclusively breastfeeding.
- c. Culture: Cultural aspects such as norms and beliefs can also influence the low coverage of exclusive breastfeeding. For example, in certain cultures, there may be a belief that breast milk is insufficient or nutritionally inadequate for infants. Social norms that support the use of formula milk or provide additional food early can also influence the mother's decision to exclusively breastfeed.

Thus, the hypothesis is that low knowledge about exclusive breastfeeding, unsupportive practices, and unsupportive cultural factors may contribute to low coverage of exclusive breastfeeding.

2. METHODS

This type of research is an analytical survey with a Cross-Sectional Survey approach, which aims to analyze the influence of behavior and culture on the low coverage of exclusive breastfeeding. This research was conducted in December 2022 (15 November- 20 desember) in the Panton Reu sub-district, West Aceh. The study population was all mothers who had babies aged 6-12 months. Sampling by total sampling method The total of Popollution was sampled as a sample of 44 respondents. Furthermore, the data were analyzed using univariate and bivariate and then tested with a Simple Linear Regression Model. This research was conducted in Meutulang District, West Aceh Regency.

2.1 Design and Research Timing

The current studytype of research is an analytical survey with a Cross-Sectional Survey approach, was conducted in the Meutulang sub-district, West Aceh Regency

2.2 Research Study

Meutulang District is one of the sub-districts in West Aceh Regency with low exclusive breastfeeding coverage based on 2022 health office data. West Aceh Regency consists of 13 sub-districts, where Meutulang paint is the lowest sub-district of exclusive breastfeeding coverage compared to other sub-districts in West Aceh Regency.

2.3 Study Participants

All types of basic health services are available in Meutulang sub-district, in Meutulang sub-district there is a Government Public Health Center Unit that meets all basic service needs for the community in its work area,

2.4 Sample Size

The sample size in study Sampling with the total sampling method, namely the entirety of the population was used as a sample of 44 respondents.

2.5 Sampling Procedure

Overall sampling is that all samples were interviewed using the questionnaire provided, where all samples meet the sample criteria that have been set before infants aged 6-12 months.

2.6 Data Collection

questionnaire This paper-based is selfadministered and semi-structured consisting of four parts: Knowledge of exclusive breastfeeding, practices on exclusive breastfeeding, Culture on exclusive breastfeeding, and Exclusive breastfeeding. The questions in questionnaire were prepared to take into account the recommended criteria as per previous studies The auestions are constructed understandable order. Study questionnaires were piloted on 20 infants aged 6-12 months to ensure internal validity. The validity and reliability of the instrument were ascertained before the study was conducted.

2.7 Study Variables

Mother's practices knowledge about exclusive breastfeeding, exclusive breastfeeding is breastfeeding alone without any additional food or drink for 6 months. This question is followed by knowledge Exclusive breastfeeding can increase immunity naturally, followed by knowledge Providing breast milk can increase the relationship of affection between mother and child, and continued again with Knowledge Providing foods and drinks other than breast milk will make babies fatter and healthier, MP-ASI is given when the baby is 7 months old.

Mother's practices following food restrictions during breastfeeding, mother's practices of giving formula milk if the baby is still crying after breastfeeding, mother's practices is still breastfeeding even though your baby does not want it, mother's practices of giving complimentary milk before the baby is 6 months, mother's practices is giving drinks other than breast milk when the mother is working.

Culture In the mother's place, there are certain foods/drinks given to babies as a welcome for newborns with certain meanings. Culture Parents and mothers advise abstaining from food during breastfeeding, culture about your family's habit of giving breast milk if at home, When the mother is working, the baby is given formula milk, and your parents' culture suggests immediately giving foods other than breast milk such as bananas /

crushed rice so that the baby is healthier and does not cry often, the culture where the mother in giving breast milk alone is enough to meet the baby's needs for 6 months. Do mothers exclusively breastfeed babies for 6 months?

2.8 Statistical Analysis

The data normality test is used to show that there is a sample from a normally distributed population. In this study using the Kolmogorov-Smirnov test, with the following normality criteria: If the value of sig. > ks, then the sample comes from a normally distributed population. If the value of sig. < ks, the sample does not come from a normally distributed population. Univariate analysis is carried out to obtain an overview of the frequency distribution or magnitude of proportions based on the variables studied (Notoatmodjo, 2012). Univariate data analysis can be performed using the SPSS program. The statistical analysis test in this study is a simple linear regression analysis technique. Simple regression is used for only independent variable and one dependent variable. The significance test steps of linear regression analysis are simple: Coefficient of (R²). Determination The Coefficient Determination (R2) is a measure that expresses how well the regression lines of a sample match or match the data. T-test, T-test is used for partial hypothesis decision-making whether independent variable has an effect on the dependent variable, with the following criteria: If the value of sig. < α, then Ho is rejected and Ha is accepted, If the value of sig. $> \alpha$, then Ho is accepted Ha is rejected.

3. RESULTS

3.1 Knowledge of Exclusive Breastfeeding

Of the 44 questionnaires filled out by interviewing respondents, several questionnaires, where questionnaires were 100% answered by answers from respondents. Based on the results of the answers from the questionnaire showed that of the 44 respondents who had low knowledge as many as 27 respondents (61.4%), and respondents who had good knowledge as many as 13 respondents (38.6%).

3.2 Measures against Exclusive Breastfeeding

According to the results of the study, the answers of respondents in the questionnaire were based

on the results of researcher interviews from those who had bad actions as many as 26 respondents (59.1%), and respondents who had good actions as many as 18 respondents (40.9%).

3.3 Culture towards Exclusive Breastfeeding

Based on the results of the questionnaire analysis, according to respondents' answers, it was found that respondents who had a culture did not support as many as 33 respondents (75.0%) out of 44 respondents who had a culture supported as many as 11 respondents (25.0%).

3.4 Exclusive Breastfeeding

According to data from questionnaires from the results of answers that researchers get from respondents. Where respondents who did not exclusively breastfeed were 39 respondents (88.6%) out of 44 respondents who exclusively breastfed as many as 5 respondents (11.4%).

Table 1. Distribution frequency of knowledge, practices, culture to the low coverage of exclusive breastfeeding

Category	(n)	(%)
Knowledge		
Good	17	38,6
Not good	27	61.4
Practices		
Exist	18	40.9
None	26	59.1
Culture		
support	11	25.0
does not suppor	33	75.0
Exclusive		
breastfeeding		
yes	5	11.4
not	39	88,6

3.5 Factors Affecting Low Coverage of Exclusive Breastfeeding

Simple linear regression proves that the independent variable (knowledge, action) and (culture) correlation value (R) is 0.601 and the value of the coefficient of determination (R2) is 0.464, which means that the influence of the independent variable on the dependent variable is 46.4% where the correlation between the independent variable and dependents are in a strong category. The test results showed that there was an influence of knowledge with value (P-value 0.011<0.05), value action (P-value 0.028 < 0.05), and value culture (P-value 0.000<0.05) on the low coverage of exclusive breastfeeding.

Table. 2 Results of simple linear regression analysis

Variable	R	R²	В	P value
Knowledge			0.625	0.011
Action	0.681	0.464	0.071	0.028
Culture			0.188	0.000

4. DISCUSSION

The importance of breastfeeding inclusion in infants at least up to 6 months, preferably up to the age of 2 years, affects the growth and development, antibody, and also the greed of future generations. One of the effects of exclusive breastfeeding on babies is increasing the quality of emotional relationships and making infant immunity more optimal. This study is to analyze the behavior and culture of the low coverage of exclusive breastfeeding in the Meutulang sub-district, West Aceh district.

4.1 Effect of Knowledge on the Low Coverage of Exclusive Breastfeeding

Based on the results of statistical tests that have been carried out that there is a significant influence of knowledge-independent variables on variables bound to exclusive breastfeeding. Knowledge is the result of knowing from a situation we see in which a person is in cognitive contact with reality in something that has a relationship with another. Another research said the relationship is the conscious subject, and on the other is the part of reality known to be directly or indirectly related. While candor is a matter of degree, it would be easier to think of knowledge of things as a form of direct knowledge as opposed to knowledge of indirect things.

Similar research also says that knowledge has a strong influence on exclusive breastfeeding by mothers to their babies, where a sense of knowledge makes people confident in what they will do (Norhidayu, 2017). Furthermore, research [8] also says that everyone does something that is definitely under their respective understandings, if someone does not understand it, they usually do not do it, then knowledge is closely related to a person's desire to do something.

The opinion of researchers in the field is that mothers who have good knowledge about breast milk will give exclusive breastfeeding to their babies and vice versa mothers who do not have good knowledge about breast milk will not give exclusive breastfeeding to their babies. This good knowledge of the mother plays an important role in influencing the behavior of the mother to breastfeed exclusively to her baby for 0-6 months. The mother's knowledge about exclusive breastfeeding will be the basis for the mother to know and understand the correct behavior in exclusively breastfeeding so that it will manifest good behavior under the knowledge she has.

4.2 Effects of Practices on Low Coverage of Exclusive Breastfeeding

According to the results of statistical analysis, there are significant results between independent variables and dependent variables, where there is an effect on the low coverage of exclusive breastfeeding in breastfeeding mothers. Where the action is a person's tendency to act (practice), the attitude has not manifested in action because, for the realization of action, some other factor is needed, namely the existence of facilities and infrastructure facilities needed.

In the opinion of researchers in the field, it was found that the mother's actions in breastfeeding were influenced by other factors, namely the trust possessed by the mother so that the mother can act according to what she believes, the mother's personal experience, and encouragement from the closest person to the mother. The failure of exclusive breastfeeding where mothers in the field act according to what they believe and see as giving complementary foods before 6 months is not a big thing because they have also given to their previous children, as well as seeing their relatives who do not show any problems to their babies and the participation of their parents in giving advice and direction to mothers,

According to previous research [6] there is an influence between the mother's actions and exclusive breastfeeding of her baby. Other studies also say that mothers' actions are closely related to exclusive breastfeeding by mothers to their babies (Amoo, T. B., et al, 2022) [9]. Research in line with maternal actions has a dominant influence on exclusive breastfeeding [10].

4.3 Effect Cultural Influence on Low Coverage of Exclusive Breastfeeding

The results of statistical tests are significant so that it can be seen that there is a partial influence of the independent variable (culture on the dependent variable, namely (inclusion of breastfeeding) f. This shows that hereditary cultural factors around where they live to play an important role in exclusive breastfeeding carried out by mothers to their babies.

According to previous research, exclusive breastfeeding is inseparable from the cultural order, which means that every breastfeeding from the mother to the other will be related to the socio-culture that develops in the community around the baby's mother [11]. Everyone is always exposed to the environment in which they live so it will affect them both directly and indirectly. In this case, culture is also a habit or belief that we often see and what we know [7]. Once a belief has been established, it will be difficult to change, so it will become a basis of reference for the next generation in a particular society.

According to researchers in the field, people still cling to their hereditary culture circulating in the community, especially in terms of exclusive breastfeeding. In this case, the culture of breastfeeding is still inherent and believed by the local community, including breastfeeding mothers are not allowed to eat all types of food by nursing mothers, Only allowed to eat certain foods that are appropriate according to the recommendations of their ancient ancestors, this is very different from what is recommended by health workers.

The process of adhering to the culture or beliefs possessed by the mother is often found or obtained from parents, the experiences of others, and even the environment around the mother. So that the strength of one's beliefs depends on the beliefs passed down by one's ancestors and the experiences shared by one's one. Mothers with an unsupportive culture will thwart the process of exclusive breastfeeding where mothers will trust long-established habits in society rather than new methods that suit the needs and health suitability of caring for their children. According to Andyna, et al. [12-18] Acehnese culture in question is Limiting drinking water intake; so that the mother's body quickly shrinks/singset and causes the baby to catch a cold, Should not consume meat and fish; may cause breast milk to smell fishy, Should not eat any kind of egg; endanger the mother's breed. And cause ulcers in babies, Abstinence from eating fruits; the water content in the fruit is considered to inhibit the dry process of the breed, should not sleep often, especially naps; may cause basoe (swollen body; watery), Reduce the portion of rice meal half from the portion before giving birth; so that the body quickly returns to singset, Should not get out of bed; for smooth breastfeeding [19-26].

5. CONCLUSION

There was an influence of knowledge with value (P-value 0.011<0.05), value action (P-value 0.028<0.05), and value culture (P-value 0.000<0.05) on the low coverage of exclusive breastfeeding.

The analysis showed that low knowledge about of exclusive breastfeeding. benefits unsupportive practices, and unsupportive cultural factors were contributing factors to low coverage of exclusive breastfeeding. To increase the coverage of exclusive breastfeeding, efforts need to be made that involve educating and increasing maternal knowledge about the benefits of exclusive breastfeeding, support of appropriate breastfeeding practices, and changes in norms that support cultures exclusive breastfeeding. This can include outreach campaigns, social support, policies that support breastfeeding in the workplace, and a holistic approach to promoting exclusive breastfeeding as the best option for infant health and development.

6. SUGGESTION

There needs to be more intense socialization and enlightenment by relevant officers in terms of mothers' understanding of exclusive breastfeeding so that mothers consider exclusive breastfeeding more important and must be given to their babies, in practice mothers can explore the culture around them to consciously give exclusive breastfeeding to babies at least 6 months.

CONSENT

As per international standard or university standard, respondents' written consent has been collected and preserved by the author(s).

ETHICAL APPROVAL

As per international standard or university standard written ethical approval has been collected and preserved by the author(s).

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COMPETING INTERESTS

Authors have declared that no competing interests exist.

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