Factors Affecting Exclusive Breast Milk in Work Area of South Kluet Health Center in 2022

Kiki Asrifa Dinen¹, Razia Begum Suroyo², Sarma Lumban Raja³
¹,²,³Ilmu Kesehatan Masyarakat, Institut Kesehatan Helvetia, Medan, Indonesia

ABSTRACT
Breastfeeding is an important factor in the survival of the baby. Efforts to reduce infant mortality need special attention to infant health, from care at birth to proper feeding. Forknowing and analyzing the factors that influence exclusive breastfeeding in the Working Area of the South Kluet Health Center in 2022. This type of research uses quantitative research with research methods that are analytical surveys with a Cross Sectional approach. This research was conducted in the Working Area of the South Kluet Health Center in 2022. The population was 94 people with a total sampling technique of 94 respondents. Quantitative data analysis with univariate, bivariate and multivariate analysis. Results: Based on The chi-square test was obtained at the cultural level variable p = 0.015, knowledge p = 0.001, attitude p = 0.018, husband support p = 0.009, birth attendant support p = 0.000, which indicates there are influencing factors. Conclusion: There is a relationship between culture, knowledge, attitudes, husband's support and birth attendant support for exclusive breastfeeding in the working area of the South Kluet Health Center in 2022, and of all the factors that influence exclusive breastfeeding, cultural factors are the most dominant influencing exclusive breastfeeding, with the value of Exp(B) 5.923.

Keywords:
Knowledge
Attitude
Husband Support
Childbirth Assistance Support
Exclusive Breastfeeding

INTRODUCTION
One of the things that can determine the success of a country’s health development is the Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR). Indonesia is one of the countries in Asia with a fairly high infant mortality rate (IMR). Breastfeeding is an important factor in the survival of the baby. Efforts to reduce infant mortality need special attention to infant health, from care at birth to proper feeding. The most perfect and ideal food for newborns is breast milk. Several world health organizations such as the World Health Organization (WHO) and the United Nations Children's Fund provide recommendations for exclusive breastfeeding (Simbolon 2006).

In order to reduce child morbidity and mortality, the United Children's Fund (UNICEF) and the World Health Organization (WHO) recommend that children only be breastfed with breast milk for at least six months. Solid food should be given after the child is 6 months old, and breastfeeding continued until the child is two years old, this is done as a manifestation of the world’s concern for
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infant mortality and emphasizes the importance of exclusive breastfeeding for infants (Kementerian Kesehatan RI 2017).

The data shows a downward trend in the MMR indicator (per 100,000 live births) from 390 in 1991 to 230 in 2020 or down -1.80 percent per year. Although it has decreased, it has not yet reached the 2015 MDGs (Millennium Development Goals) target of 102 and the 2030 SDGs (Sustainable Development Goals) which is less than 70 per 100,000 live births. The IMR indicator shows a downward trend from 68 in 1991 to 24 in 2017 or down -3.39 percent per year. However, this has also not achieved the 2015 MDGs (Millennium Development Goals) target of 23 and the 2030 SDGs (Sustainable Development Goals) target of less than 70 per live birth. In the midst of the COVID-19 pandemic, maternal and infant mortality rates have skyrocketed. The maternal mortality rate increased by 300 cases from 2019 to around 4.

Breastfeeding is the best investment for survival and improving the health, social, economic development of individuals and nations. Although the rate of initiation of breastfeeding globally is relatively high, only 40% of all infants under the age of 6 months are exclusively breastfed and 45% are breastfed until the age of 24 months (Hanindita 2021).

Optimal breastfeeding practices, according to recommendations, can prevent more than 823,000 child deaths and 20,000 maternal deaths every year. Not breastfeeding is also associated with lower levels of intelligence and results in economic losses of about $302 billion annually. UNICEF (United Nations Children's Fund) Indonesia states that of the 5 million children born each year in Indonesia, more than half of them do not get optimal breastfeeding in the first years of life. This shows that mothers in Indonesia still rarely practice exclusive breastfeeding (IBI 2018).

In Indonesia, only 1 in 2 infants under 6 months of age are exclusively breastfed, and only slightly more than 5 percent of children are still breastfed at 23 months of age. This means that almost half of all Indonesian children do not receive the nutrition they need during the first two years of life. More than 40 percent of infants are introduced too early to complementary feeding, ie before they reach the age of 6 months, and the food provided often does not meet the nutritional needs of infants, so that Indonesia also ranks in the top 5 countries with the highest stunting rate in the world (WHO 2020).

The presence of protective factors and appropriate nutrients in breast milk guarantees good nutritional status of infants, and can reduce morbidity and mortality in children. Several epidemiological studies state that breast milk protects infants and children from infectious diseases, such as diarrhea, otitis media, and acute lower respiratory tract infections. Immune substances found in breast milk, among others, will protect babies from diarrheal diseases and reduce the possibility of babies getting ear infections, coughs, colds and allergic diseases. Breast milk is the nutritional foundation for optimal child survival, growth and development, and maternal health. Breast milk contains all the nutrients a baby needs for the first 6 months, including carbohydrates, proteins, fats, vitamins, minerals, and water. In general (Hanindita 2020a).

Various studies have shown that malnutrition, especially early in life in infants, can affect brain development, growth, body composition, muscle mass, and even death in infants. Many of the long-term negative effects caused by malnutrition in infants can even be felt later after the baby becomes an adult. For example, the decline in cognitive aspects, educational performance, work capacity, and per capita income as well as increasing the risk of various diseases such as stroke, hypertension and heart disease, this is of course the basis that exclusive breastfeeding for infants is very important (Hanindita 2020b).

Breast milk is indeed the best source of nutrition for babies which provides many benefits for the health, growth, and development of children. The success of a breastfeeding mother depends on many things. One of them is the level of knowledge of mothers, fathers, and families about breastfeeding and breastfeeding. Some things such as knowledge, attitude, husband's support, birth attendant and culture have a very strong influence on the behavior of mothers in breastfeeding (Hanindita 2020a).
According to the Director General of Nutrition and MCH, the success of breastfeeding mothers to continue breastfeeding their babies is largely determined by the support from their husbands, families, health workers, the community and the environment, so if you want to increase the rate of exclusive breastfeeding, this is the driving force that must be strengthened (Dokumentasi 2020).

World Health Organization Data (WHO) in 2016 still showed that the average rate of exclusive breastfeeding in the world was only around 38 percent. In Indonesia, although a large number of women (96%) breastfeed their children in their lifetime, only 42% of infants under 6 months of age are exclusively breastfed. Even as children approach their second birthday, only 55% are still breastfed. When compared to the target which reaches 50%, then this figure has not yet reached the target. Based on data collected by the International Baby Food Action Network (IBFAN) 2016, Indonesia was ranked in the bottom three of 51 countries in the world that participated in the assessment of the status of infant and child feeding policies and programs (IBI 2018).

Nationally, the coverage of infants receiving exclusive breastfeeding in 2019 was 67.74%. This figure has exceeded the 2019 Strategic Plan target of 50%, but there are still several points in Indonesia that are still far from the expected breastfeeding coverage target. The highest percentage of exclusive breastfeeding coverage in Indonesia is in West Nusa Tenggara Province (86.26%), while the lowest percentage is in West Papua Province (41.12%). There are four provinces that have not reached the 2019 Strategic Plan target, namely Gorontalo, Maluku, Papua, and West Papua (Kementerian Kesehatan RI 2019).

The province of Aceh also experienced an increase in the percentage of exclusive breastfeeding, which was 48.8% in 2013, the figure slowly rose to 55.24% in 2019. However, there are still several Aceh districts that have not reached the coverage of exclusive breastfeeding in accordance with the agreement. World health, one of which is South Aceh Regency which has only reached 40% of exclusive breastfeeding for infants (Profil Kesehatan Aceh Tahun 2019 n.d.).

Based on the results of a preliminary survey conducted at the South Kluet Health Center, South Aceh Regency, it was found that, in 2020 there were 169 babies, but only 70 babies received exclusive breastfeeding (41%). In September 2021, a survey was conducted on 25 mothers who had babies aged > 6 - 11 months, and only 9 babies received exclusive breastfeeding. After distributing the questionnaires and conducting in-depth interviews with the 25 mothers, it was found that there were 9 mothers who had good knowledge, 5 mothers with sufficient knowledge and 11 mothers with less knowledge. Meanwhile, there are 18 mothers who practice negative culture and 7 mothers practice positive culture. And in the aspect of husband's support, there are 9 husbands who support exclusive breastfeeding and 16 husbands who do not support exclusive breastfeeding (Dokumentasi 2020).

After being examined more deeply through several questions, it was found that the reason these mothers did not give exclusive breastfeeding was due to several reasons, such as feeling that their breast milk was not enough, giving complementary foods (MPASI) too early, not doing IMD (Early Breastfeeding Initiation), the lack of knowledge of mothers and husbands about exclusive breastfeeding and its benefits, as well as the influence of culture or traditions that are still practiced by the surrounding community such as the culture of abstinence from food which requires mothers not to consume nutritious food, because it is not allowed to eat fish, vegetables and fruit and can only consume one glass of water a day for reasons of its own that are formed in the traditions of the people. The ceunecap tradition (giving salt, sugar and tamarind in infants less than 4 months old) which is carried out in the traditional descending activity (a traditional procession of taking the baby out of the house for the first time), the tradition of giving a pinch of sugar to every baby who visits his family's house for the first time, causing the baby to fail in exclusive breastfeeding. This is still widely practiced even though there are people who understand that this activity can harm babies and start to abandon this habit.
Given the importance of exclusive breastfeeding for infants, the researchers are interested in conducting research on "Factors Influencing Exclusive Breastfeeding in the Work Area of the South Kluet Health Center in 2021".

RESEARCH METHOD

The research conducted is a quantitative research with analytical survey research methods with a Cross Sectional approach, where the independent variables and dependent variables are examined at the same time when the research is conducted.

This research was conducted in the Working Area of the South Kluet Health Center in 2022. The research time was carried out for 6 months, from September to March 2022 starting at the initial survey stage, proposal preparation, data collection, data analysis, and preparation of the final thesis report.

The population in this study were all mothers who had babies aged over 6 -11 months in the Work Area of the South Kluet Health Center with a total of 94 people. The sampling technique in this study was Total Sampling, namely the entire population was used as the research sample, as many as 94 people (Awwaabiin 2021). The data analysis used in this research is univariate, bivariate, and multivariate analysis. Aims to explain or describe the characteristics of each research variable. The form of univariate analysis depends on the type of data. After knowing the characteristics of each variable in this study, the analysis was carried out at the bivariate level. To determine the relationship between the independent variable (Independent Variable) with the dependent variable (Dependent Variable). To find out the existence of a significant relationship between the independent variable and the dependent variable, chi-square analysis was used, at the limit of the significance of the statistical calculation Ha was accepted and Ho was rejected: if P value 0.05, it means that both variables have a statistically significant relationship, and Ha is rejected and Ho is accepted: if P value > 0, 05 means that there is no relationship between the independent variable and the dependent variable. This analysis is used to see the relationship between the factors of several independent variables which are measured together on the dependent variable. In this study, all variables are categorical. Based on this, the appropriate multivariate analysis to analyze the data is to use logistic regression test (Muhammad 2016).

RESULT AND DISCUSSION

Table 1. Frequency distribution of respondents regarding exclusive breastfeeding in the working area of Kluet Selatan Health Center

| Characteristics               | f   | %   |
|-------------------------------|-----|-----|
| **Exclusive Breastfeeding**   |     |     |
| Conducted                     | 36  | 38.3|
| Are not done                  | 58  | 61.7|
| **Culture**                   |     |     |
| Positive                      | 36  | 38.3|
| Negative                      | 58  | 61.7|
| **Knowledge**                 |     |     |
| Well                          | 37  | 39.4|
| Not good                      | 57  | 60.6|
| **Attitude**                  |     |     |
| Positive                      | 32  | 34.0|
| Negative                      | 62  | 66.0|
| **Husband Support**           |     |     |
| Support                       | 37  | 39.4|
| Does not support              | 57  | 60.6|

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Table 1. above shows that of the 94 respondents, respondents who did not breastfeed exclusively were 58 people (61.7%), and respondents who gave exclusive breastfeeding were 36 people (38.3%). Of the 94 respondents, respondents who practice culture that is negative for health are 58 people (61.7%), and respondents who practice cultural practices that are positive for health are 36 people (38.3%). Of the 94 respondents, respondents who have poor knowledge are 57 people (60.6%), and respondents who have good knowledge are 37 people (39.4%). Of the 94 respondents, respondents who have a negative attitude towards exclusive breastfeeding are 62 people (66.0%), and respondents who have a positive attitude are 32 people (34.0%). Of the 94 respondents, respondents who did not get husband's support for exclusive breastfeeding were 57 people (60.6%), and respondents who received husband's support were 37 people (39.4%). Of the 94 respondents, 55 respondents (58.5%), who did not receive birth attendant support for exclusive breastfeeding, and 39 (41.5%).

Table 2. The Influence of Culture on Exclusive Breastfeeding in the Work Area of the South Kluet Health Center

| Variable | Exclusive Breastfeeding | Amount | P Value |
|----------|------------------------|--------|---------|
|          | Are not done | Are not done | f | % | f | % | f | % |
| Culture  | Negative | 45 | 47.9 | 13 | 13.8 | 58 | 61.7 | 0.000 |
|          | Positive | 13 | 13.8 | 23 | 24.5 | 36 | 38.3 | 0.000 |
| Knowledge| Not good | 46 | 48.9 | 11 | 11.7 | 57 | 60.6 | 0.000 |
|          | Well | 12 | 12.8 | 25 | 26.6 | 37 | 39.4 | 0.000 |
| Attitude | Negative | 46 | 48.9 | 16 | 17.0 | 62 | 66.0 | 0.001 |
|          | Positive | 12 | 12.8 | 20 | 21.3 | 32 | 34.0 | 0.000 |

| Variable | Exclusive Breastfeeding | Amount | P Value |
|----------|------------------------|--------|---------|
|          | Are not done | Are not done | f | % | f | % | f | % |
| Husband Support | Does not support | 44 | 46.8 | 13 | 13.8 | 57 | 60.6 | 0.000 |
|          | Support | 14 | 14.9 | 23 | 24.5 | 37 | 39.4 | 0.000 |
| Helper Support | Does not support | 47 | 50.0 | 8 | 8.5 | 55 | 58.5 | 0.000 |
|          | Support | 11 | 11.7 | 28 | 29.8 | 39 | 41.5 | 0.000 |
| Total    | | 58 | 61.7 | 36 | 38.3 | 94 | 100 | |

Table 2. The above shows that of the 36 respondents who practice a culture that is positive for health, 23 (24.5%)% of mothers practice exclusive breastfeeding, from 58 respondents who practice a culture that is negative for health, 45 (47.9%%) are found. Mother does not exclusively breastfeed. From the results of statistical tests, Chi - Square obtained a significance value of p = 0.000 (<0.05), it can be concluded that there is a cultural influence on exclusive breastfeeding for infants.

From 57 respondents who had poor knowledge, 46 (48.9%) respondents did not exclusively breastfeed and from 37 respondents who had good knowledge, 25 (26.6%) respondents did exclusive breastfeeding. From the results of statistical tests, Chi - Square obtained a significance value of p = 0.000 (<0.05), it can be concluded that there is an influence between knowledge on exclusive breastfeeding for infants.
From 62 respondents who had a negative attitude, 46 (48.9%) respondents did not exclusively breastfeed and from 32 respondents who had a positive attitude, 20 (21.3%) respondents did exclusive breastfeeding. From the results of statistical tests, Chi-Square obtained a significance value of $p = 0.001 (<0.05)$, it can be concluded that there is an influence between attitudes towards exclusive breastfeeding for infants.

Of 57 respondents who did not receive husband's support, 44 (46.8%) respondents did not exclusively breastfeed and from 37 respondents who received husband's support, 23 (24.5%) respondents did exclusive breastfeeding. From the results of statistical tests, Chi-Square obtained a significance value of $p = 0.000 (<0.05)$, it can be concluded that there is an influence between husband's support for exclusive breastfeeding for infants.

From 55 respondents who did not receive birth attendant support, 47 (50.0%) respondents did not exclusively breastfeed and from 39 respondents who received birth attendant support, 28 (29.8%) respondents gave exclusive breastfeeding. From the results of statistical tests, Chi-Square obtained a significance value of $p = 0.000 (<0.05)$, it can be concluded that there is an influence between birth attendant support on exclusive breastfeeding for infants.

### Table 3. Analysis of Factors Affecting Exclusive Breastfeeding for Babies in the Work Area of the South Kluet Health Center

| Subvariable         | $P$ Value |
|---------------------|------------|
| Culture             | 0.000      |
| Knowledge           | 0.000      |
| Attitude            | 0.001      |
| Husband's support   | 0.000      |
| Birth attendant support | 0.000    |

The results of the analysis show that the $P$ value of the variable is culture (0.000) knowledge (0.000) attitude (0.001) husband's support (0.000) and birth attendant support (0.000). This means that all variables are included in the multivariate test because the $P$ value is 0.25. The next step is to include all the variables that have been selected as candidates in the logistic regression.

### Table 4. Analysis of Factors Affecting Exclusive Breastfeeding in the Work Area of the South Kluet Health Center

| Research variable          | $df$ | $P$ Value | $Exp(B)$ |
|----------------------------|------|-----------|----------|
| Culture                    | 1    | 0.015     | 5.923    |
| Knowledge                  | 1    | 0.001     | 0.080    |
| Attitude                   | 1    | 0.018     | 0.152    |
| Husband's support          | 1    | 0.009     | 0.135    |
| Birth attendant support    | 1    | 0.000     | 0.058    |
| Constant                   | 1    | 0.001     | 44.498   |

The results of the research analysis showed that all variables had an influence on exclusive breastfeeding, because they had a $P$ value <0.05. However, from all the variables, it can be seen that culture is the most influential (dominant) on exclusive breastfeeding for infants in the Kluet Selatan Health Center Work Area. This can be seen from the cultural factor which has a $P$ value of 0.015 with an $Exp(B)$ value or an Odd Ratio of 5.923.

**Discussion**

**The Influence of Culture on Exclusive Breastfeeding in the Work Area of the South Kluet Health Center**

Based on the results of the study showed that of the 36 respondents who practice a culture that is positive for health, 23 (24.5%) mothers who practice exclusive breastfeeding, from 58 respondents who practice a culture that is negative for health, 45 (47.9%) mothers do not exclusively breastfeed. From the results of statistical tests, Chi-Square obtained a significance value
of $p = 0.000 (<0.05)$, it can be concluded that there is a cultural influence on exclusive breastfeeding for infants.

Culture is defined as "things related to the mind or reason". In other words, culture includes everything that is obtained or learned by humans as members of society. Culture consists of everything that is learned from normative behavior patterns. That is, includes all the ways or patterns of thinking, feeling, and acting in society (Utami and Dkk 2019).

Cultural backgrounds influence individual beliefs, values, and habits, including the health care system and the way in which personal health is administered. Indonesia, which stretches from Sabang to Marauke, has thousands of tribes with different customs. Some of these customs are still considered "primitive" and do not care about health aspects (Ludin 2009).

But now the strong culture in the South Aceh community has begun to slowly erode with the existence of people who are starting to leave the culture for various reasons, such as lack of economic factors, high education and increasing insight about self and family health. Indeed, not all cultures have a negative impact on health, but cultures that affect health values for the worse are still commonly found in the South Aceh community.

Researchers also found that among mothers who had started not doing negative cultural practices but still did not exclusively breastfeed their babies, after conducting in-depth interviews it was found that this was caused by the factor of mothers working or having activities outside the home that required leaving their babies, so that breastfeeding is replaced with formula milk.

Knowledge of Exclusive Breastfeeding in the Work Area of the South Kluet Health Center

Based on the results of the study showed that of the 57 respondents who had poor knowledge, 46 (48.9%) respondents did not exclusively breastfeed and from 37 respondents who had good knowledge, 25 (26.6%) respondents did breastfeeding. exclusively. From the results of statistical tests, Chi-Square obtained a significance value of $p = 0.000 (<0.05)$, it can be concluded that there is an influence between knowledge on exclusive breastfeeding for infants.

The results of this study are in line with Ratna Zahara's research (2020) entitled, Relationship Level of Knowledge, Attitude and Support of Husbands to Breastfeeding Mothers with Exclusive Breastfeeding in Percutsei Tuan District, Deli Serdang Regency 2020. From the statistical test results, a $p$-value of 0.005 is obtained. This means that the $p$ value < 0.05 and the hypothesis $H_{a1}$ is accepted. This shows that there is a relationship between knowledge of breastfeeding mothers and exclusive breastfeeding in Cinta Rakyat Village and Tanjung Rejo Village, PercutSei Tuan District, Deli Serdang Regency.

Knowledge is the result of knowing where people are sensing certain objects. Sensing occurs through the five human senses, namely the senses of sight, hearing, smell, taste and touch. Most of human knowledge is obtained through the eyes and ears. Knowledge or cognitive is a very important domain for the formation of one's actions (over behavior) and the formation of one's perspective (Skinner 2013).

The level of knowledge will shape a person's way of thinking and ability to understand the factors associated with disease and how to maintain their health. People who have knowledge about health have a lower risk of getting disease or other health problems compared to ordinary people with minimal knowledge about health. The less knowledge about health, the greater the activities carried out that can harm health which of course will have an impact on the health of individuals and groups (Utami and Dkk 2019).

Based on the theory and research results above, according to the research findings, knowledge is the basis of the formation of a person's behavior, this makes knowledge one of the main domains in the success and failure of exclusive breastfeeding. Knowledge can shape a person's behavior which will certainly have an impact on whatever actions and decisions he takes in his life, it's not like exclusive breastfeeding, mothers who have good knowledge about how important exclusive breastfeeding is for babies and the impact if they fail to give exclusive breastfeeding to babies. the
baby of course chooses to seek optimization in exclusive breastfeeding, but if the mother does not have knowledge about it, it is certain that the failure of exclusive breastfeeding is not considered by the mother.

**The Effect of Attitude on Exclusive Breastfeeding in the Work Area of the South Kluet Health Center**

Based on the results of the study, it was found that of the 62 respondents who had a negative attitude, 46 (48.9%) of the respondents did not exclusively breastfeed and of the 32 respondents who had a positive attitude, it was found that 20 (21.3%) of the respondents gave exclusive breastfeeding. From the results of statistical tests, Chi - Square obtained a significance value of $p = 0.001 (<0.05)$, it can be concluded that there is an influence between attitudes towards exclusive breastfeeding for infants.

This research is in line with the research of Syahri, Nova Liya (2018), entitled The Relationship of Mothers' Attitudes During Pregnancy with Postpartum Breastfeeding in Independent Practice Midwives in Helvetia Village, Labuhan Deli District. The results of statistical tests showed $p$ value = 0.049, which means that there is a significant relationship between the attitude of the mother during pregnancy and breastfeeding after delivery.

Understanding attitudes are defined as styles, feelings and tendencies of evaluative reactions to the object at hand (Simon-Morton et al., 1995). A person's attitude will be reflected in behavioral tendencies towards an object with the assumption that beliefs and feelings influence behavior a lot. The tendency to behave that is consistently in line with these beliefs and feelings shapes a person's attitude (Skinner 2013).

Attitude is a form of evaluation or feeling reaction. A person's attitude towards an object is a feeling of support (favorable) or feeling unfavorable (unfavorable) on the object. The emergence of attitudes is based on an evaluation process within the individual that provides conclusions about the stimulus in the form of good or bad values, positive or negative, pleasant or unpleasant (Azwar 2013).

Attitude is a reaction or response that is still closed from a person to a stimulus or object. Attitudes clearly show the connotation of a suitability of reactions to certain stimuli which in everyday life are emotional reactions to social stimuli. Attitude is a readiness or willingness to act and is not the implementation of a particular motive (Notoatmodjo 2012).

Based on the theory and research results above, according to the findings of the researcher, the mother's attitude is a driving factor in doing or not doing exclusive breastfeeding. The attitude of mothers who are pro (supportive) or agree in realizing the importance of exclusive breastfeeding will encourage mothers to seek exclusive breastfeeding, and vice versa, if the mother has a contra or disagree attitude about the importance of exclusive breastfeeding, it will make the mother do not want or intend to do exclusive breastfeeding so that it will make the failure of exclusive breastfeeding to her baby.

**The Effect of Husband's Support on Exclusive Breastfeeding in the Work Area of the South Kluet Health Center**

Based on the results of the study showed that from 55 respondents who did not get husband's support, 47 (50.5%) respondents did not exclusively breastfeed and from 39 respondents who received husband's support, 28 (29.8%) respondents gave exclusive breastfeeding. From the results of statistical tests, Chi - Square obtained a significance value of $p = 0.000 (<0.05)$, it can be concluded that there is an influence between husband's support for exclusive breastfeeding for infants.

The results of this study are in line with research conducted by Zulfia Samiun (2019) with the title Relationship of husband's support to breast milk production in breastfeeding mothers at the Tamalanrea Health Center Makassar. The results of the study found that the distribution of the percentage of breast milk production was 46.4% with the husband's support of 90.9%. The results
of the bivariate test found that the value of $p = 0.014$ was greater than the value of $= 0.05$, this proves that husband's support is closely related to the mother's milk production.

Based on the theory and the results of the research above, according to the findings of the researcher, the husband has a big role in encouraging mothers to exclusively breastfeed, the relationship between husband and wife makes the wife much influenced in making decisions based on her husband’s encouragement or request. Husbands who have knowledge about the importance of exclusive breastfeeding will help and support mothers to carry out and seek exclusive breastfeeding, and vice versa, husbands who do not support exclusive breastfeeding and do not know or do not want to know about the importance of exclusive breastfeeding will make breastfeeding failure rates Exclusive breastfeeding is increasing, so good cooperation between mothers and fathers is needed in optimizing exclusive breastfeeding for babies.

The Effect of Childbirth Support on Exclusive Breastfeeding in the Work Area of the South Kluet Health Center

Based on the results of the study, it was found that of the 55 respondents who did not receive birth attendant support, 47 (50.0%) respondents did not exclusively breastfeed and from 39 respondents who received birth attendant support, 28 (29.8%) respondents gave breastfeeding exclusively. From the results of statistical tests, Chi-Square obtained a significance value of $p = 0.000 (<0.05)$, it can be concluded that there is an influence between birth attendant support on exclusive breastfeeding for infants.

The results of this study are in line with research conducted by Ngongo, Dignaviana (2020) with the title Relationship between health worker support and exclusive breastfeeding at the Dau Malang Health Center. The results of the study using the Fisher exact test ($P <0.05$) with the $p$-value: 0.008, so that it can prove that the support of health workers affects exclusive breastfeeding for infants.

Birth attendants have an important role in the success of IMD, officers should understand good and correct lactation management from an early age and be able to make sure that IMD (Early Breastfeeding Initiation) can be carried out properly. The birth attendant is an important component that is included in the reinforcing factor in the behavior of mothers giving breast milk to their babies. The success of IMD is the main pillar that gives a greater possibility of the success of exclusive breastfeeding for 6 months, because that is when the baby is introduced to breast milk for the first time. The success of IMD lies between the intention and cooperation of both parties, namely the mother and birth attendants. Birth attendants must also provide motivation to give exclusive breastfeeding, and provide health education regarding breast care so that milk production remains smooth during breastfeeding since the antenatal period (IBI 2018).

Based on the theory and research results above, according to the findings of the researcher, birth attendant support has a very strong factor in influencing exclusive breastfeeding. The support of birth attendants is not only in the form of sympathy and moral support of health workers for breastfeeding mothers, but the support of birth attendants is a determinant of the success or failure of exclusive breastfeeding by mothers. This is because health workers have a full role in providing information to mothers about the benefits of exclusive breastfeeding and the disadvantages if exclusive breastfeeding is not fulfilled, which will shape the actions and attitudes of mothers towards exclusive breastfeeding itself. Health workers are also the main pillar in the success of early breastfeeding initiation (IMD), where this IMD will affect breastfeeding for the next 6 months. Health workers who ensure that IMD is carried out properly, as well as maximize health education or convey information about the importance of exclusive breastfeeding for mothers and the way mothers care for their breasts and carry out proper breastfeeding will improve the quality of breast milk production in mothers, which will have an impact on optimal exclusive breastfeeding also.
CONCLUSION

Based on the research results that have been obtained, researchers can draw the following conclusions: 1) There is a cultural influence on exclusive breastfeeding, with a P value of 0.015 (< 0.05). 2) There is an effect of knowledge on exclusive breastfeeding, with a P value of 0.001 (<0.001). 3) There is an effect of attitude towards exclusive breastfeeding, with a P value of 0.015 (< 0.018). 4) There is an effect of husband’s support on exclusive breastfeeding, with a P value of 0.009 (<0.05). 5) There is an effect of birth attendant support on exclusive breastfeeding, with a P value of 0.000 (< 0.05). 6) The variable that most dominantly affects exclusive breastfeeding is cultural factors with the final result p Value Sig 0.015 with an Exp (B) value or an Odd Ratio of 5.923.

References

Awwaabiin, Salmaa. 2021. “Teknik Pengambilan Sampel.”
Azwar, Saifuddin. 2013. Sikap Manusia Teori Dan Pengukurannya. XVIII. Yogyakarta: Pustaka Pelajar.
Dokumentasi. 2020. “Dokumentasi Gizi Dan Data Ibu Bersalin, Bayi Di Puskesmas Kluit Selatan.”
Hanindita, Meta. 2020a. Mommyclopedia Panduan Lengkap Merawat Bayi 0-1 Tahun. Jakarta: Gramedia Pustaka Utama.
— — —. 2020b. Tanya Jawab Tentang Nutrisi Di 1000 Hari Pertama Kehidupan Anak. Jakarta: Gramedia Pustaka Utama.
— — —. 2021. MOMMYCLOPEDIA 456 Fakta Tentang ASI Dan Menyusui. Jakarta: Gramedia Pustaka Utama.
IBL. 2018. “Pekan ASI Se-Dunia (World Breastfeeding Week).”
Kementerian Kesehatan RI. 2017. Situasi Dan Analisis ASI Ekslusif. Jakarta.
— — —. 2019. Profil Kesehatan Indonesia 2019. Jakarta.
Ludin, Hasan Basri. 2009. “Pengaruh Sosial Budaya Masyarakat Terhadap Tindakan Pemberian ASI Eksklusif Di Wilayah Kerja Puskesmas Kecamatan Rumbai Pesisir Kota Pekan Baru.”
Muhammad, Iman. 2016. Panduan Penyusunan Karya Tulis Ilmiah Bidang Kesehatan Menggunakan Metode Penelitian Ilmiah. Medan: Citapustaka Medis Perintis.
Notoatmodjo, Soekidjo. 2012. Metodelogi Penelitian Kesehatan. Jakarta: Rineka Cipta.
Profil Kesehatan Aceh Tahun 2019.
Simbolon, Demsa. 2006. “Kelangsungan Hidup Bayi Di Perkotaan Dan Pedesaan Indonesia.” Kesmas: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal) 1(1): 3–10.
Skinner, B.F. 2013. Ilmu Pengetahuan Dan Perilaku Manusia. Yogyakarta: Pustaka Pelajar.
Utami, Tri Niswati, and Dkk. 2019. Sosioantropologi Kesehatan Integrasi Budaya Dan Kesehatan. Jakarta Timur: Prenadamedia Group.
WHO. 2020. “Pekan Menyusui Dunia: UNICEF Dan WHO Menyerukan Pemerintah Dan Pemangku Kepentingan Agar Mendukung Semua Ibu Menyusui Di Indonesia Selama COVID-19.”