



## The Relationship between Family Support and Maternal Attitude with Early Initiation of Breastfeeding in Infants Aged <6 Months in the Working Area of Tanjung Seloka Community Health Center, Kotabaru Regency

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### ABSTRACT

One of the other things that causes high IMR is giving MP ASI too early. The high provision of Complementary Food for Early Breastfeeding is influenced by family support. The internal factor that influences early complementary feeding is the mother's attitude. Tanjung Seloka Health Center, Kotabaru Regency, is the health center with the third lowest coverage of exclusive breastfeeding, namely 83.7%.

The aim of this research is to determine the relationship between family support and mother's attitude with early complementary breastfeeding to infants aged <6 months in the work area of the Tanjung Seloka Health Center, Kotabaru District.

The results show that 18 respondents (85.7%) who gave MP-ASI early to infants aged <6 months did not receive adequate family support. Statistical analysis reveals a significant relationship between family support and early complementary feeding ( $p$ -value = 0,000 < 0,005). Furthermore, all 15 respondents (100%) who gave MP-ASI early complementary feeding ( $p$ -value = 0,000 < 0.005).

The conclusion: family support and maternal attitude significantly influence the early provision of complementary feeding to infants aged <6 months in the working area of the Tanjung Seloka Health Center, Kotabaru District. Strengthening family support and fostering positive maternal attitudes are essential to promoting exclusive breastfeeding practices.

### Introduction

The Infant Mortality Rate (IMR) refer to the number of children who pass away before their first birthday, calculated per 1000 live births (UNICEF, 2020). The IMR is used to reflect the level of health development of a country and the quality of life of its population, which is then incorporated into the formulation of the

Sustainable Development Goals (SDGs). Goal three aims to achieve the expected target of reducing the Neonatal Mortality Rate (NMR) to at least 12 per 1000 live births by 2030. According to World Bank data, the global infant mortality rate in 2019 reached 28.2 per 1000 live births (WHO, 2019).

Data from the 2017 Indonesian Demographic and Health Survey (IDHS) show that the

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Neonatal Mortality Rate (NMR) is 15 per 1,000 live births, while the Infant Mortality Rate (IMR) stands at 24 per 1,000 live births. The World Health Organization (WHO) reports that most neonatal deaths (75%) happen during the first week of life, with around 1 million infants dying within their first 24 hours. This is due to premature birth, complications related to the birthing process (such as asphyxia or respiratory failure), and congenital infections, which accounted for most neonatal deaths in 2017 (WHO, 2019).

One other reason for the high Infant Mortality Rate (IMR) is the early introduction of complementary foods alongside breastfeeding. Providing food to infants requires attention to proper timing, frequency, type of food, quantity, and preparation method. One incorrect practice in feeding infants is introducing food too early. Introducing solid foods too early can cause digestive issues in infants, including diarrhea, constipation, vomiting, and allergic reactions. When they grow up, this can also affect the intelligence level of children and may trigger the emergence of obesity, hypertension, and coronary heart disease (Nadesul, 2018). In Indonesia, most parents commonly introduce complementary feeding at 6 months; however, only a small percentage of mothers continue providing complementary foods to infants beyond this age. This aligns with the recommendations of the WHO, UNICEF, and the Republic of Indonesia Ministry of Health regulated in Decree No. 33/Men.Kes/SK/IV/2012. It is recommended

that infants be exclusively breastfed for the first 6 months to support optimal growth, development, and health. After 6 months, complementary foods should be introduced while continuing breastfeeding until the child reaches 2 years of age to fulfill their nutritional requirements. Regulation no. 51/2016 also stipulates that complementary foods cannot replace breast milk (Kemenkes, 2022).

This research was conducted to explore the relationship between family support and maternal attitudes in the introduction of Complementary Feeding (CF) to infants under 6 months of age. Exclusive breastfeeding until the baby reaches 6 months requires strong support from the family, particularly from the husband and other family members. However, many families, including parents and husbands, tend to introduce food or drinks before the baby reaches the recommended age. The early introduction of CF is often influenced by the views of close family members, such as the mother, mother-in-law, or siblings, as well as cultural practices within the community. This phenomenon highlights the challenges in maintaining exclusive breastfeeding, and this behavior has become a social norm that has developed over time (Mariastuti, 2020). This study aims to identify the factors influencing the early introduction of CF, focusing on family support and maternal attitudes as key factors affecting infant feeding practices. The novelty of this research lies in its emphasis on the influence of family within a

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socio-cultural context that may not have been fully identified in previous studies..

The internal influence affecting the early introduction of Complementary Feeding (CF) is the mother's attitude. Attitude reflects behavioral tendencies towards an object and can be influenced by knowledge and experience. Many mothers believe that babies will be too hungry and sleep soundly if given food, even though this belief is not relevant. Despite the immature digestive system of babies, many still hold this belief. Babies may appear full after being given formula milk or CF, but in reality, these foods are difficult to digest. Breast milk is much easier to digest, and since the baby's stomach is small, exclusively breastfed babies will nurse more frequently than those given formula milk or CF at 6-12 months of age (Mariastuti, 2020).

According to data obtained from the Health Office of Kotabaru Regency, in 2021, the percentage of Exclusive Breastfeeding (EBF) was 56.98%, with a total of 2,583 infants aged 0-12 months. This figure is still far below the minimum service standards set by the Ministry of Health for regencies/cities, which stipulate that the coverage of exclusive breastfeeding for infants should be 80% (Kemenkes, 2022).

The Tanjung Seloka Community Health Center (Puskesmas) in Kotabaru Regency has the third lowest coverage of exclusive breastfeeding, at 57.5%, after Pudi Community Health Center with 50.15% and Dirgahayu Community Health Center with 47.79%. According to data from the Integrated Health

Center Information System (PIS-PK) of The Tanjung Seloka Community Health Center is located in one of the areas of Kotabaru Regency, 83.7% of mothers provide drinks or food other than breast milk before their children reach 6 months of age. From this data, it can be concluded that the prevalence of early complementary feeding in Tanjung Seloka Community Health Center is very high, at 83.7%. The number of infants aged 0-12 months in the working area of Tanjung Seloka Community Health Center, Kotabaru Regency in 2022, is 76 individuals. The selection of Tanjung Seloka Community Health Center as the research object is because this area is the researcher's working area, where the researcher intends to take tangible actions to achieve 100% coverage of exclusive breastfeeding and also to serve as an example for other community health centers in addressing issues related to exclusive breastfeeding and early complementary feeding in infants.

The Tanjung Seloka Community Health Center in Kotabaru District has implemented various efforts to encourage parents to introduce complementary feeding for infants over 6 months old and to ensure that all mothers practice exclusive breastfeeding. These efforts include providing counseling, early education during pregnancy, and engaging with families to actively participate in maintaining infant health and fully support the exclusive breastfeeding program. Based on the explanation above, the researcher is interested in exploring the "Relationship

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between Family Support and Maternal Attitudes toward the Early Introduction of Complementary Feeding in Infants Aged <6 Months in the Working Area of the Tanjung Seloka Community Health Center, Kotabaru District.

This study aims to examine the characteristics of mothers, including age, education, occupation, and number of children; investigate the practice of exclusive breastfeeding for infants under 6 months; assess family support for exclusive breastfeeding in infants under 6 months; explore maternal attitudes towards exclusive breastfeeding for infants in this age group; and analyze the relationships between family support and maternal attitudes with the practice of exclusive breastfeeding in the working area of Tanjung Seloka Community Health Center, Kotabaru Regency.

### METHODE

This study use an analytical survey method with a cross-sectional design. The sample includes 30 mothers of infants aged 6-12 months, selected during the period from November 2022 to January 2023. Statistical analysis will be performed using the Spearman's rank correlation test to assess the relationship between family support and maternal attitudes regarding the early introduction of complementary feeding for infants under 6 months, within the working area of the Tanjung Seloka Community Health Center, Kotabaru District.

## RESULTS AND DISCUSSION

### 1. Age Distribution of Mothers

No.	Age	f	%
1	Risk (<20/>35 years old)	11	36,7
2	Not risk (20-35 years old)	19	63,3
Total		30	100

### 2. Characteristics of Mothers Based on Education

No.	Education	f	%
1	Low (not school, elementary, junior high school)	8	26,7
2	High (high school, diploma, undergraduate)	22	73,3
Total		30	100

### 3. Characteristics of Mothers Based on Occupation

No.	Occupation	f	%
1	Not working	12	40,0
2	Working	18	60,0
Total		30	100

### 4. Characteristics of Mothers Based on Parity

No.	Paritas	f	%
1	Risk	19	63,3
2	Not risk	11	36,7
Total		30	100

### 5. Early Introduction of Complementary Feeding (CF) to Infants Aged <6 Months

No.	Early initiation of complementary feeding in infants aged <6 months	f	%
1	Yes	18	60,0
2	Not	12	40,0
Total		30	100

### 6. Family Support

No.	Family support	f	%
1	Not supportive	21	70,0
2	Supportive	9	30,0

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### 7. Maternal Attitudes Toward Early Introduction of Complementary Feeding (CF) in Infants Under 6 Months

No.	Mothers attitude	f	%
1	Negatif	15	50
2	Positif	15	50
Total		30	100

### 8. The Relationship Between Family Support and Early Introduction of Complementary Feeding (CF) in Infants Under 6 Months Old

No.	Family Support	Early initiation of complementary feeding in infants aged <6 months				Total	
		Yes		No		f	%
		f	%	f	%		
1	Not supportive	1	85,7	3	14,3	2	100
2	Supportive	9	0,0	9	100	9	100
Total		1	60,0	1	40,0	3	100
		8		2	0	0	

*Spearman's Rank Correlation Coefficient = 0,000 <math><math>\alpha</math></math> (0,05)*

### 9. The Relationship Between Maternal Attitude and Early Introduction of Complementary Feeding (CF) in Infants Under 6 Months Old

No.	Attitude	Early initiation of complementary feeding in infants aged <6 months				Total	
		Yes		No		f	%
		f	%	f	%		
1	Negatif	15	100,0	0	0,0	16	100
2	Positif	3	20,0	12	80,0	14	100
Total		18	60,0	12	40,0	30	100

*Spearman's Rank Correlation Coefficient = 0,000 <math><math>\alpha</math></math> (0,05)*

From the research findings, it is concluded that out of 30 respondents, 18 individuals (60%) of mothers provided early complementary feeding (CF) to infants under 6 months old, while 12 individuals (40%) of mothers did not introduce CF to infants under 6 months old. This aligns

research findings indicating that the majority of people in Indonesia provide complementary feeding to infants under 6 months old, while only a few mothers provide complementary feeding to infants over 6 months old (Afriyani R, Haliya S, 2017) (Afriyani et al., 2016). WHO, UNICEF, and the Indonesian Ministry of Health recommend exclusive breastfeeding for 6 months in accordance with Minister of Health Regulation No. 33/Men.Kes/SK/IV/2012 (Kemenkes, 2020).

According to the researcher, most people believe that introducing complementary feeding (CF) should begin as early as possible because by the age of 4-6 months, infants become active and start showing interest in food. Therefore, mothers prefer to introduce CF before their babies reach 6 months of age. Additionally, early introduction of CF has become a cultural norm for many communities due to fears of their child being underweight, concerns about their child going hungry, and the belief that early introduction of CF will result in their child being more calm and sleeping better.

This contradicts the guidelines provided by the Ministry of Health, which recommend exclusive breastfeeding for the first six months to ensure optimal growth, development, and health for infants (Kemenkes RI, 2019). Then, mothers should start providing complementary foods alongside breastfeeding until the child reaches two years of age to ensure the baby's nutritional needs are met (WHO, 2023). The government also regulates complementary

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feeding in regulation number 51/2016, which emphasizes that complementary foods are not a substitute for breast milk.

The research findings show that out of 30 respondents, 21 mothers (70%) did not receive support from their families, while 9 mothers (30%) received support from their families. The high prevalence of early complementary feeding is influenced by family support. Family support is crucial for a mother to breastfeed her baby until the age of 6 months. However, many families, such as parents and husbands, tend to provide food or drinks prematurely. The inappropriate provision of complementary foods (at an early age) is largely influenced by the closest relatives, such as mothers, mothers-in-law, or siblings, or due to cultural habits in their surrounding communities (Mariastuti, 2020).

The survey results indicate that the family does not support the mother in breastfeeding according to her wishes, resulting in the mother breastfeeding according to the family's desires. The family does not provide additional food or milk for the mother while breastfeeding, resulting in insufficient breast milk production to meet the baby's needs. Additionally, the family does not provide information about the benefits of breastfeeding, leading to inadequate knowledge about complementary feeding for the mother.

From a socio-cultural and family support perspective, it is a common practice in society to introduce complementary foods such as formula milk, water, and rice porridge to infants under 6 months of age. The early introduction of

complementary feeding has been linked to high infant mortality rates in Indonesia primarily due to gastrointestinal and respiratory infections (Aprillia et al., 2020). According to research conducted by the Center for Research and Development of Nutrition and Food, it is known that infants who are partially breastfed are more susceptible to diarrhea, coughs, colds, and fevers compared to infants who receive exclusive breastfeeding (Hossain & Mhrshahi, 2022).

The research findings indicate that out of 30 respondents, 50% of them showed both positive and negative attitudes towards breastfeeding mothers. From the researcher's perspective, it is evident that a key internal factor influencing the early introduction of complementary feeding is the mother's own attitude towards breastfeeding and the introduction of additional foods to her infant. This attitude is shaped by a combination of personal beliefs, cultural knowledge, and family influences. Specifically, local cultural norms and traditional practices, such as the belief in giving honey and sugar to infants when visiting neighbors, can significantly affect a mother's decision to introduce foods before the recommended age (Oktarina et al., 2023). The research also highlighted non-supportive behaviors, such as discarding colostrum, with the belief that it is stale and potentially harmful, or giving prelacteal food or drinks before breast milk is available. Other behaviors identified include improper breastfeeding techniques and a lack of confidence in the adequacy of breast milk alone to meet an infant's nutritional needs. These behaviors, as observed in the study, reflect the complex interaction between cultural beliefs and

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feeding practices (Maryunani, 2017). By understanding these underlying factors, the research aims to provide insights into how cultural perceptions and maternal attitudes influence early feeding practices, paving the way for better-targeted interventions.

The data from the questionnaire indicates that mothers feel that the breast milk provided is insufficient for their baby, leading them to introduce complementary feeding at an early age. Additionally, mothers prefer to follow their husband's advice to provide mashed foods like bananas or avocados to the baby before the age of 6 months. Mothers also tend to follow their husband's advice to feed liquid porridge through a bottle nipple to ensure the baby feels full and doesn't become fussy. Mothers also feel that the baby appears calm after consuming porridge before the age of 6 months, so they continue to do so.

Attitude is a behavioral tendency towards a specific object and can be shaped by knowledge and experience. Many mothers believe that their baby will be hungry and sleep better if given solid food, despite the lack of relevance. Many perceive this as true when, in fact, the immature digestive system has to work harder to process solid food. Babies may appear fuller when given formula milk or complementary foods because these are harder for them to digest. Breast milk, on the other hand, is easier to digest, and a baby's stomach capacity is very small, so babies exclusively breastfed will nurse more frequently than those given formula milk or complementary foods from 6 to 12 months of age (Mariastuti, 2020).

s to reduce the practice of early introduction of complementary feeding can be made by improving the knowledge and attitudes of mothers and families. Activities to enhance knowledge can be carried out through providing education or health promotion sessions to help mothers and families better understand the dangers, impacts, and risks of early introduction of complementary feeding to infants (Syahrudin et al., 2024).

The research found that out of 30 respondents, 18 individuals (85.7%) did not receive family support in providing exclusive breastfeeding to infants under 6 months old. There is a significant relationship between family support and exclusive breastfeeding for infants under 6 months in the working area of the Tanjung Seloka Community Health Center in Kotabaru District (p value = 0.000 < 0.05).

According to Apriani's study (2020), family support and feeding habits have a significant impact on the provision of complementary feeding, accounting for 92.3%. The researchers assume that the family's role in providing complementary feeding to 6-month-old infants is crucial, especially in Indonesia, which has a collective culture where families play a role in caring for children, particularly in terms of providing complementary feeding.

The provision of high-quality and adequate quantity complementary feeding (MP-ASI) is crucial for the rapid physical growth and cognitive development of children during this period. However, cleanliness in its provision is also vital. If sanitation and hygiene in providing complementary feeding are low, it can lead to

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microbial contamination, increasing the risk of infection in infants (Mufida et al., 2015). Although breastfeeding still provides sufficient nutrition during the first 4-6 months, after 6 months, breast milk production decreases, necessitating additional food to meet the baby's nutritional needs. Some mothers may not provide complementary feeding because they believe that breast milk is sufficient for their child, but support from family is essential. Additionally, some mothers may refrain from providing complementary feeding because they have received education from midwives that infants under 6 months do not need additional food and breast milk alone is sufficient.

The community perceives that providing complementary feeding is solely the responsibility of the mother and her baby; therefore, family support for complementary feeding is needed, especially in terms of motivation, perception, emotions, and attitude (Proverawati dan Andhini, 2017).

Family support in decision-making, whether from the husband, parents, or in-laws, is crucial. Family support entails all forms of verbal assistance from close relatives such as the husband, parents, and in-laws in providing complementary feeding. The family's role in discouraging early introduction of complementary feeding is essential, especially in Indonesian society, which is collectivistic, where the family plays a role in child care, especially for infants. In paternalistic families, women are responsible for childcare. Therefore, women need to be empowered and provided with guidance or counseling on the proper and correct way to

provide complementary feeding, not only to women but also to family members and relatives.

The early introduction of complementary feeding is often influenced by advice from parents, particularly grandmothers (whether the mother-in-law or the mother of the breastfeeding mother). Typically, the reason is that the baby continues to cry even after being breastfed, leading to the administration of formula milk, water, sweet tea, and so forth.

The research findings revealed that, out of 30 respondents, 15 individuals (50%) exhibited a negative attitude by introducing complementary feeding to infants under 6 months of age. The study also identified a significant relationship between maternal attitudes and the early introduction of complementary feeding for infants under 6 months in the working area of the Tanjung Seloka Community Health Center, Kotabaru Regency ( $p\text{-value} = 0.000 < 0.05$ ).

An individual's attitude refers to their favorable or unfavorable feelings of support towards a specific object, and attitude represents a potential tendency to react in a certain way when faced with stimuli that require a response. In this study, attitude refers to the respondents' attitudes towards providing appropriate complementary feeding to infants.

The researcher assumes that to enhance breastfeeding success, mothers must have a positive attitude towards providing appropriate complementary feeding because attitude is crucial in shaping one's actions. Attitude represents an individual's initial response or reaction to a stimulus or object.

## CONCLUSION

There is a significant relationship between family support and the early initiation of complementary feeding in infants under 6 months of age in the working area of the Tanjung Seloka Community Health Center, Kotabaru Regency. Additionally, a relationship was found between maternal attitudes and the early initiation of complementary feeding for infants under 6 months in the same area.

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