



Case Report

MIDWIFERY CARE FOR A 4 -MONTH-OLD BABY IN JEUMPET VILLAGE, SUB-DISTRICT DARUL IMARAH, THE DISTRICT OF ACEH BESAR IN 2026

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Abstract

Background: Infancy is a crucial golden period in determining the quality of a child's growth and development. Optimal healthcare services during infancy are essential to support growth and development and prevent health problems that could impact quality of life in the future. This midwifery management aims to describe the implementation of midwifery care for 4-month-old Baby A in Jeumpet Village, Darul Imarah District, Aceh Besar Regency.

Method: A descriptive case study was used, including history-taking, physical examination, growth and development assessment, and evaluation of the baby's basic needs.

Result: The assessment results indicated that Baby A was in good general condition, was exclusively breastfed, had age-appropriate growth, and demonstrated developmental milestones for a 4-month-old. The baby was able to lift his head and chest in the prone position, reach for objects, and respond socially to his environment. In addition, the baby had received basic healthcare and immunizations according to the recommended schedule.

Conclusion: The midwifery care provided focused on monitoring growth and development, supporting exclusive breastfeeding, providing health education to the family, and stimulating development appropriate to the baby's age. Comprehensive and continuous midwifery care plays an important role in maintaining infant health and supporting optimal growth and development.

Keywords: Midwifery care, baby, growth and development, exclusive breastfeeding, vaccination.

Introduction

The infancy period, 0–12 months of age, is a critical period that significantly shapes a child's future growth and development. During this period, infants are vulnerable to various health problems and therefore require optimal attention and monitoring. Infant health conditions will impact the child's quality of life and future health status ¹.

The World Health Organization (WHO) reports that in 2022, there will be approximately 2.4 million infant deaths worldwide, or approximately 6,700 deaths per day. Most of these deaths occur in the first 24 hours of life due to asphyxia, premature birth, infection, malnutrition, and congenital abnormalities ².

The Infant Mortality Rate (IMR) is an important indicator for assessing public health. IMR is defined as the number of infant deaths before reaching one year of age per 1,000 live births in the same year. IMR in Aceh Province fluctuated during the 2020–2024 period. In 2020 and 2021, the IMR was recorded at 9 per 1,000 live births. This figure increased to 11 per 1,000 live births in 2022, then decreased to 10 per 1,000 live births in 2023 and again to 8 per 1,000 live births in 2024. IMR in Aceh Besar Regency showed a downward trend, from 6 per 1,000 live births in 2024 to 5.4 per 1,000 live births in 2025 ³.

One of the government's efforts to reduce IMR is the provision of regular and continuous infant health services. Infant health services are provided at least four times, namely once at the age of 29 days–2 months, once at the age of 3–5 months, once at the age of 6–8 months, and once at the age of 9–11 months. In addition, growth monitoring is conducted at least 8 times per year, while development monitoring is conducted 4 times per year. These health services include providing complete basic immunizations, growth monitoring, implementing Early Detection and Intervention for Growth and Development (SDIDTK), providing exclusive breastfeeding, vitamin A supplementation, counseling on providing exclusive breastfeeding and complementary foods, and handling sick babies through the Integrated Management of Childhood Illness (IMCI)⁴

Infant health services aim to reduce infant mortality, improve children's quality of life, and prevent nutritional problems such as stunting and wasting. Furthermore, infant health services aim to ensure optimal basic health care through promotive, preventive, early detection, and appropriate, continuous disease management ⁴.

IMR control is a national health development priority through various intervention programs, such as the

Maternal and Child Health (MCH) Program, Complete Basic Immunization, essential neonatal care, and improve the quality of health services in health facilities. These efforts are reinforced by the National Strategy for Reducing Maternal and Infant Mortality Rates 2019–2030, which aligns with the SDGs target of reducing IMR to below 12 per 1,000 live births by 2030 ¹.

In 2021, infant health service coverage in the regency of Aceh Besar reached 62.3%, with 6,361 infants receiving standardized care. Meanwhile, in sub-district Darul Imarah, infant health services focused on increasing basic immunization coverage. Data shows that the Universal Child Immunization (UCI) coverage in villages in 2023 was 46.9%. This figure decreased compared to 59.3% in 2022. To address this situation, the Aceh Health Office developed the Immunization Strengthening Counseling (KOPI) initiative to increase parental knowledge and participation in the immunization program ³.

Jeumpet Village is a village in the sub-district of Darul Imarah. Infant health services in this village are provided by midwives under the coordination of the Darul Imarah Community Health Center. These services are implemented through various activities, including integrated health posts (Posyandu),

immunizations, monitoring infant growth and development, and health education for mothers and families ³.

Although various infant health care programs have been implemented, several barriers remain that affect their success. These barriers include mothers' limited knowledge of infant care, suboptimal exclusive breastfeeding practices, and a lack of public awareness about routinely utilizing health services. These conditions can increase the risk of health problems and illness in infants if not managed appropriately ³. The objective of this study is to provide midwifery care to 4-month-old babies in Jempet Village, sub-district Darul Imarah, the District of Aceh Besar in 2026

Case

A 4-month-old baby A received comprehensive midwifery care. Midwifery care was provided to assess the baby's health, growth, development, nutritional status, and basic needs. Based on the mother's history, the baby had been exclusively breastfed since birth, with no additional food or drink. The mother stated that the baby was breastfeeding well, without difficulty, and had normal urination and bowel movements. The baby also had no history of serious illnesses and had not experienced diarrhea, respiratory infections, or other health complaints during the assessment period ⁶.

A physical examination revealed a good general condition, *compos mentis* consciousness, clean skin, a normal reddish complexion, and no signs of dehydration, edema, or congenital abnormalities. Anthropometric examination showed the baby's growth was appropriate for his age. The baby appeared active, responsive to sounds and environmental stimuli, and made good eye contact with the mother and the examiner. These conditions indicated that the baby's basic nutritional and health needs were being met ⁵.

In terms of developmental milestones, the baby demonstrated abilities consistent with a 4-month-old. The baby was able to lift his head and chest in a prone position, roll from prone to supine, and reach for nearby objects. The baby also began to shift his attention to moving objects and displayed social responses such as smiling when interacted with by parents, midwives, and researchers. These abilities indicate that the baby's gross motor, fine motor, and social development were progressing in line with the 4–6-month-old stage ⁵.

Data from the Maternal and Child Health Handbook (MCH) indicates that the baby had received basic immunizations according to the recommended schedule. The parents also actively took the baby to the integrated health post (Posyandu) for

routine health services, including growth monitoring, immunizations, and health education. During the assessment process, no health problems requiring referral were identified. Therefore, the care provided focused on health maintenance, growth monitoring, exclusive breastfeeding, and age-appropriate developmental stimulation ¹.

Discussion

The assessment results indicate that Baby A's health is in the good category, with age-appropriate growth and development. Infancy is a critical period that shapes a child's future health, marked by rapid physical growth and neurological development. Between 0 and 12 months, babies experience significant increases in weight, length, and head circumference, as well as significant development in motor, cognitive, language, and social-emotional skills. Therefore, routine growth and development monitoring is a crucial component of infant health care [5].

In this case, Baby A's motor development aligns with the theory that babies aged 4–6 months can lift their chests while lying prone, roll from prone to supine and vice versa, and begin reaching for nearby objects. This development demonstrates normal maturation of the nervous and muscular systems. The ability to reach for objects

also indicates good hand-eye coordination, which can support fine motor development in later stages.

The successful growth and development of Baby A is likely influenced by meeting adequate nutritional needs through exclusive breastfeeding. Breast milk is the best food for babies aged 0–6 months because it contains all the nutrients necessary for growth, brain development, and a strong immune system. In addition to containing adequate amounts of protein, fat, carbohydrates, vitamins, and minerals, breast milk also contains antibodies that can protect babies from various infectious diseases, such as diarrhea and respiratory infections. Therefore, exclusive breastfeeding contributes significantly to the baby's good health.

A baby's good health status can also be linked to family compliance in utilizing health services. The baby regularly attends integrated health service posts (Posyandu) and receives scheduled immunizations. Immunization is a public health intervention proven effective in preventing infectious diseases that can cause illness and even death in infants and children. By 4 months of age, babies should have received Hepatitis B, BCG, Polio, DPT-HB-Hib, and IPV immunizations according to the national immunization program. Adherence to the immunization schedule can boost a baby's immunity

and reduce the risk of vaccine-preventable diseases ⁷.

In addition to nutrition and immunization, family-based developmental stimulation also plays a crucial role in supporting a baby's growth and development. At 3–6 months of age, babies need stimulation through eye contact, talking, smiling, hugging, playing, showing moving objects, and encouraging them to reach for objects around them. Consistent stimulation can enhance a baby's motor, language, social, and emotional development ⁵.

Conclusion

Midwifery care for 4-month-old Baby A indicates that the baby's health, growth, and development are normal for their age. The baby is exclusively breastfed, receives appropriate basic health care, and demonstrates motor development appropriate for a 4–6-month-old. Regular growth and development monitoring, exclusive breastfeeding, complete immunizations, and age-appropriate stimulation are necessary to support optimal growth and development.

Ethics approval

The mother and witnesses (grandmother) sign informed consent before care is provided.

Conflict of interests

The research team stated that there was no conflict of interest in this research.

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