

Predisposition Factors in Exclusive Breastfeeding in Infants (Literature Review)

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Abstract

Background. Nutritional intake in the first thousand days of a child's life up to 2 years old is very important for growth and development. The low number of exclusive breastfeeding is still to be concern of the Indonesian government. Based on data from Magetan District Health Office in 2019, the coverage of exclusive breastfeeding in the Poncol Puskesmas was 48,4 %. The purpose of this systematic literature review is to systematically review some of the results of recent research on the drivers that influence the success of exclusive breastfeeding, namely the factors of knowledge, education, employment, and attitude. The type of research used is systematic literature review (SLR) using the Preferred Reporting Items for Systematic Review and Meta Analysis (PRISMA) approach. The database used are DOAJ and SINTA (Garuda), the last 5 years publication limits, analytical research, cross sectional research designs, full text articles, research areas are Indonesia. From the research results found 546 journals and after screening obtained 9 relevant journals. Regarding education, 3 out of 4 journals stated that there was a relationship between education and exclusive breastfeeding. On the employment factor, 4 out of 5 journals stated that there was a relationship between work and exclusive breastfeeding. In the knowledge factor, all of journals stated that there was a relationship between knowledge and exclusive breastfeeding. While in the attitude factor, 3 out of 4 journals stated that there was a relationship between attitude and exclusive breastfeeding. The majority of journal state that there is relationship between education, knowledge, employment, and attitude of mother's breastfeeding. It is hoped that the results of this review will be able to bring change to readers, especially health workers who have a very important role in providing education and promotion regarding exclusive breastfeeding.

Keywords: *Knowledge, Employment, Education, Attitude.*

Introduction

One of the priorities for health development in Indonesia is to improve and improve the health of mothers and babies. A healthy baby is supported by several factors, one of which is nutrition. Nutritional intake in the first thousand days of life of children up to 2 years of age is very important for growth and development.

Breastmilk (ASI) is a very good intake in the first thousand days of birth. According to Pitaloka, mothers often lack information about the benefits of exclusive breastfeeding and the impact of not being exclusively breastfed. The low rate of exclusive breastfeeding is still a concern of the Indonesian government¹.

The Indonesian government has a target of achieving exclusive breastfeeding of 80%². Based on data obtained from the results of the National Riskesdas in 2018, the achievement of exclusive breastfeeding in Indonesia is only around 37.3% of the expected target. The East Java government stated in 2016 that the target for exclusive breastfeeding was 80%². However, in fact, the results of Riskesdas reported that exclusive breastfeeding

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coverage in the East Java region only reached 40.05%^{2,3}. According to data from the Magetan District Health Office, the achievement of exclusive breastfeeding in 2019 was 69.4%, which has met the expected target of 50%. However, there are 3 working areas of the Community Health Center that still do not meet the expected target for achieving exclusive breastfeeding, one of which is the Poncol Community Health Center. Based on data obtained from the Poncol Community Health Center 2019, the number of babies (0-6 months) in a period of 1 year is 157. Of these, 76 babies (48.4%) get breastfeeding exclusively, while the rest a total of 81 babies (51.6%) were not exclusively breastfed⁴.

Breastfeeding behavior is a mother's action based on her knowledge and experience in breastfeeding. According to Green's theory in Notoatmodjo 2012, a person's behavior is driven by several factors, including predisposing factors, enabling factors, and reinforcing factors⁵. Based on Rizky's research in 2017, predisposing factors that cause the low achievement of exclusive breastfeeding are the lack of knowledge and experience of mothers, low education, and reasons for work that cannot be left behind⁶. A part from that, it is also supported by the fact that there are facilities and an exclusive breastfeeding campaign at the time of antenatal care. Lack of family support and the influence of the mass media on advertisements for infant formula milk also influenced mothers not to exclusively breastfeed⁷. The impact of babies who are not exclusively breastfed can suffer from vomiting and diarrhea, so that death due to vomiting increases 23.5 times and diarrhea is 17 times more frequent in infants who are given formula milk⁸. Haryono & Setianingsih say that babies who are not given ASI have lower endurance than babies who are breastfed⁹.

Efforts to increase the use of breast milk have become a worldwide goal. Every year on August 1-7 is the world breastfeeding week². Exclusive breastfeeding program in Indonesia is a top priority where the government participates in exclusive breastfeeding by stipulating PP

RI No. 33 of 2012. Provision of breastfeeding facilities in the workplace has also become a concern of the government in order to increase motivation to provide exclusive breastfeeding². In addition, to support the realization of the exclusive breastfeeding program, the Magetan Regency Government is also promoting MAYANGSARII cadres who are expected to provide information to mothers about the provision and benefits of breastfeeding^{2,4,10}.

Materials and Methods

The type of research used in this research is systematic literature review (SLR) or in Indonesian it is called a systematic literature review. According to Kitchenham and Charters 2007 systematic literature review is a literature review method that identifies, assesses, and interprets all findings on a research topic to answer predetermined research questions¹¹. SLR is a term used to refer to a particular research or research methodology and development carried out to collect and evaluate research related to a particular topic focus¹².

In this literature review, the research design used is the PRISMA (Preferred Reporting Items for Systematic Review and Meta Analysis) approach. The databases used are Sinta (Garuda) and DOAJ (Directory of Open Access Journals) with publication limits for the last 5 years. from 2015-2020, full text articles, research areas are in Indonesia. The keywords used in the search were the factors of exclusive breastfeeding mothers' education, knowledge of exclusive breastfeeding mothers, occupation of exclusive breastfeeding mothers, and attitudes of exclusively breastfed mothers.

Results

The search results according to the keywords obtained as many as 536 articles and after being selected according to the inclusion criteria, 9 articles were obtained. The following is a discussion of each of the factors that will be reviewed, namely the factors of education, work, knowledge, and attitudes.

Table 1. Results Research articles on predisposing factors affecting exclusive breastfeeding

No	Author and Year	Method (Design, Samples, Variables, Instruments, Analysis)	Result
1	Utami, T. Rizky, dkk (2015) ⁶	D : Cross sectional, S : A total of 56 respondents. VI : Work, Attitude, VD : Exclusive Breastfeeding, I : Questionnaire, A : Chi Square test	There is no effect of mother's work on exclusive breastfeeding behavior (p value = 0.374). There is an effect of mother's attitude on exclusive breastfeeding behavior (p value = 0.022) ⁶ .
2	Iqmy A. Ledy. (2017) ¹³	D: Cross sectional, S: A total of 42 mothers with babies aged 6-12 months. VI: Knowledge, education, occupation, VD: Exclusive breastfeeding, I: -, A: Chi Square test	There is an effect of mother's knowledge on exclusive breastfeeding (p value = 0,000). There is an effect of maternal education on exclusive breastfeeding (p value = 0,000). There is an effect of mother's work on exclusive breastfeeding (p value = 0.31) ¹³ .
3	Yulita, Defi. (2018) ¹⁴	D: Cross sectional, S: A total of 38 mothers with babies aged 6-12 months. VI: Knowledge and employment status, VD: Exclusive breastfeeding, I: Questionnaire, A: Chi Square test	There is an effect of the level of knowledge on exclusive breastfeeding (p value = 0,000). There is an effect of work on exclusive breastfeeding (p value = 0.036). ¹⁴
4	Mariza, Ana (2015) ¹⁵	D: Cross sectiona, S: A total of 39 mothers with babies aged 6-12 months. VI: Education and work, VD: Exclusive breastfeeding, I: -, A: Chi Square test, logistic regression test.	There is an effect of maternal education on exclusive breastfeeding (p value = 0.000). Mothers who are highly educated have 24.70 times the opportunity to provide exclusive breastfeeding compared to mothers with low education (OR = 24,700). There is an effect of work on exclusive breastfeeding (p value = 0.003). Mothers who work have a 11.05 times chance of not giving exclusive breastfeeding compared to mothers who do not work (OR = 11.050). ¹⁵
5	Oktavianisya, Nelyta (2017). ¹⁶	D: Cross sectional, S: A total of 40 mothers with babies aged > 6-12 months. VI: Occupation and Attitude, VD: Exclusive Breastfeeding, I: Questionnaire, A: Chi Square Test	There is an effect of mother's work on exclusive breastfeeding (p value = 0,000). There is an effect of attitude towards exclusive breastfeeding (p value = 0.012). ¹⁶
6.	Pitaloka, A. Diah, dkk. (2018) ¹ .	D: Cross sectional, S: A total of 31 mothers with babies aged 6-12 months. VI: Education, VD: Exclusive Breastfeeding, I: Questionnaire, A: Fisher's Exact Test	There is no effect of maternal education on exclusive breastfeeding (p value = 0.252) ¹ .
7	Haurissa B.G, dkk. (2019). ¹⁷	D: Cross sectiona, S: A total of 79 mothers with babies aged 6-12 months. VI: Knowledge, Attitude VD: Exclusive Breastfeeding, I: Questionnaire, A: Rank Spearman Correlation Test.	There is an effect of maternal knowledge on exclusive breastfeeding (p value = 0.01). There is no influence of mother's attitude towards exclusive breastfeeding (p value = 0.134). ¹⁷
8	Chaitom, D, dkk. (2019) ¹⁸ .	D: Cross sectional, S: A total of 67 mothers with babies aged 6-12 months. VI: Attitude, VD: Exclusive Breastfeeding, I: Questionnaire, A: Chi-square test	There is an influence of attitude on exclusive breastfeeding (p value = 0.028). ¹⁸
9	Refi Lindawati (2019). ¹⁹	D: Cross sectional, S: A total of 42 mothers with babies aged 6-12 months. Vi: Knowledge, Education, VD: Exclusive breastfeeding, I: Questionnaire, A: Chi-square test	There is an effect of knowledge on exclusive breastfeeding (p value = 0.028). There is an effect of education on exclusive breastfeeding (p value = 0.028). ¹⁹

Discussion

The Effect of Breastfeeding Mother's Education Level on Exclusive Breastfeeding

The relationship between education and exclusive breastfeeding. After reviewing several studies, there were different results, namely 3 out of 4 journals stated that there was a relationship between education and exclusive breastfeeding. The three journals are research by Ana Mariza 2015, Ledy Octaviani Iqmy 2017, and Refi Lindawati 2019^{13,15,19}. Meanwhile, the journal from Diah Ayu Pitaloka, Rumaidhil Abrory, Ayu Deni Pramita 2018 states that there is no relationship between education and exclusive breastfeeding. Of the five journals, the majority of breastfeeding mothers do not exclusively breastfeed their babies^{1,20}. The research sample taken was mostly mothers who had low or basic education. The education level classification of the research respondents is different. In one of the classifying journals of the level of education based on RI Law no. 20 of 2003 concerning the National Education System, divided into 3 levels, namely primary education, secondary education, and higher education. While the other four journals, the classification of education is divided into 2 levels, namely low / basic education and higher education^{2,20,21}. Overall, the five journals are easy to understand, starting from the abstract, introduction, research methods, data collection, discussion, and delivery of research results. However, in the journal Ana Mariza 2015 and Ledy Octaviani Iqmy 2017, the research instrument is not clearly explained. Whereas in the journal Ledy Octaviani Iqmy 2017, the title used is too long so it is not persuasive. According to Barker and Schutz (1972), the length of the research title is a maximum of 20 words, made short, and eliminating unnecessary words^{11,13}.

According to Nursalam in Refi Lindawati, 2019, the higher level of education will facilitate the process of finding and receiving information so that the knowledge they have is also more and more. One's education improves cognitive abilities (knowledge), affective (attitude determination), psychomotor (ability to

perceive)¹⁹. According to Notoadmodjo in Yulita Defi 2018, someone with a higher education is usually more receptive to new things and is more open about their health. In addition, mothers who have higher education usually have great curiosity and try to find information or experience. This is able to increase knowledge for the mother so that it is hoped that the mother will be able to overcome the problem and can improve the health of themselves and their families. Through this learning process, a person has the awareness to make changes in an effort to improve health. Education also affects the response to something that comes from outside because it is able to think more rationally. Mothers with low education ability to think rationally are not as good as mothers with higher education. The ability to understand something new is a little difficult or there is even a misunderstanding of capturing the information. The low level of maternal education results in a lack of knowledge of mothers in dealing with problems, especially in exclusive breastfeeding¹⁴. However, if mothers with low education are given a good understanding by health workers so that there is no misunderstanding in receiving information, it is hoped that the mother will be able to provide breastfeeding exclusively¹⁹.

The Influence of Type of Breastfeeding Mother's Occupation on Exclusive Breastfeeding

According to journals that have been analyzed by researchers, 3 out of 5 journals state that there is a relationship between maternal work and exclusive breastfeeding. The three journals are research by Ana Mariza 2015, Defi Yulita 2018, and Nelyta Oktavianisya & Sri Sumarni 2017. Meanwhile, 2 journals from Rizky Tri Utami, et al. (2015) and Ledy Octaviani Iqmy 2017, state that there is no relationship between maternal work and exclusive breastfeeding. In the journal Ledy Octaviani Iqmy 2017, states that in processing data using the chi square statistical test, the results obtained p value = 0.31 with the interpretation that there is no relationship between maternal occupation and exclusive breastfeeding. The result of p value => 0.05, then H₀ is accepted with the interpretation that there is no relationship between maternal occupation and exclusive

breastfeeding. In the five journals, the majority of mothers who do not provide exclusive breastfeeding are mothers who work^{13,14,15}. According to Nursalam in Ana Mariza (2015), work is a necessity that must be done, especially to support the life of her family. The dual role of caring for children and working outside the home often makes it difficult for mothers to manage time due to the large number of working hours and also the distance between work and home is far. By working, mothers cannot have full contact with their babies. As a result, mothers tend to give formula milk and it is given by bottle. This causes the frequency of breastfeeding to decrease and milk production to decrease. This situation will cause the mother to stop breastfeeding. Working mothers who provide exclusive breastfeeding must have high commitment and seriousness. Because it takes a lot of time and is a big challenge for breastfeeding mothers^{14,15}.

According to the authors, working mothers should be able to exclusively breastfeed their babies. Work is not an absolute factor that causes mothers to not be able to provide exclusive breastfeeding. If the mother has good knowledge about the importance of exclusive breastfeeding, how to express and store breast milk, and exclusive breastfeeding, it can increase exclusive breastfeeding. In addition, support from the closest people and the work environment can influence mothers to continue to provide exclusive breastfeeding. As stated in Law no. 36 of 2009 concerning Health, that during breastfeeding, the family, government, and society must fully support the mother by providing special time and facilities held in the workplace and public advice^{13,15}.

The Effect of Breastfeeding Mother's Knowledge Level on Exclusive Breastfeeding

The results of the journal search found 4 journals about knowledge and the entire journal stated that there was a relationship between maternal knowledge and exclusive breastfeeding. The five journals include Defi Yulita (2018), Rizky Tri Utami, et al. (2015), Ledy Octaviani Iqmy (2017), Refi Lindawati (2019), and Theafilial Golda Beatriks Harisa, Iyam Manueke, Kusmiyati (2019).

According to Reber (2010), knowledge is a collection of information that a person has that is generated from any process, whether born from innate or achieved through experience. Knowledge is a determining factor in how humans think, feel and act (Oemarjoedi in Defi, 2018). Knowledge can be obtained through seeing, hearing, experiencing real events, or through formal and informal education. Mothers who have low knowledge will have limited knowledge. Knowledge is one of the predisposing factors that influence a person's behavior. Mothers who do not receive information about exclusive breastfeeding during pregnancy will influence the mother's behavior in giving exclusive breastfeeding to her baby later (Suhartono in Refi Lindawati, 2019). Correct knowledge about exclusive breastfeeding will encourage a further response from the mother, namely in the form of exclusive breastfeeding^{13,14,19,22,23}.

Currently there are still many mothers who do not know about the benefits of providing exclusive breastfeeding for babies and for mothers, besides that mothers are still influenced by the hereditary tradition of the family that the mother's milk will not be sufficient to be given to the baby so that the baby must be given additional food (milk, formula, honey, team porridge, etc.) before the baby is 6 months old. Therefore, the role of health workers is very important in providing understanding and promoting exclusive breastfeeding, not only to mothers but also to families and the wider community. Even though the mother has good knowledge about exclusive breastfeeding, if it is not supported by health facilities and health workers, then the mother will find it difficult to realize this behavior (Yulita Defi, 2018). According to Refi Lindawati (2019), there are also mothers who have good knowledge but do not apply exclusive breastfeeding behavior. This can be influenced by several factors, for example because mothers are lazy, mothers are busy, there is no support from health workers and their families, the absence of supporting facilities, the influence of the promotion of formula milk from the mass media. In addition, if the information provided is inaccurate, the information received will also be wrong or cause misunderstanding^{14,19}.

The knowledge factor has an important role in providing influence as an initial impetus for someone to behave. Behaviors that are based on knowledge will be more durable than behavior that are not based on knowledge. Mothers who have high knowledge about the benefits of exclusive breastfeeding will give breastfeeding exclusively to their babies after giving birth compared to mothers who have low knowledge. This is because mothers who have high knowledge about exclusive breastfeeding generally know the various benefits of exclusive breastfeeding (Ledy, 2018). From the journals above, the results presented are very clear about the importance of providing good knowledge or information to mothers from the time of pregnancy. Health workers have an important role in providing counseling and promotion to increase maternal knowledge about exclusive breastfeeding^{22,24}.

The Effect of Breastfeeding Mother's Attitude on Exclusive Breastfeeding

According to the results of the search for journals that have been conducted, 3 out of 4 journals have found that there is a relationship between mother's attitude and exclusive breastfeeding. The journal is the result of another research by Rizky Tri Utami, et al. (2015), Nelyta Oktavianisya & Sri Sumarni (2017), and Chintya D.C, Adisti A.R, Ardiansa A.T.C (2019). Whereas 1 journal that has different research results is research from Theafilia Golda Beatriks Harisa, Iyam Manueke, Kusmiyati (2019). According to Secord and Backman (in Nelyta, 2017), attitude is a certain order in terms of feelings (affection), thoughts (cognitive), and predisposition of one's actions (konasi) to an aspect of the surrounding environment. Attitudes that become an evaluative statement towards an object will further determine individual actions towards something. Attitudes can be divided into: (1). A positive attitude, namely an attitude that shows or shows, accepts, agrees to the prevailing norms where the individual is located, and (2). Negative attitude, which shows rejection or disagreement with the prevailing norms in which the individual is located^{16,18,22,24}. A person will do an action if he has a positive view of the action and believes

that other people want him to do it. This belief affects a person's attitude and behavior to do an action. This belief can come from the experience concerned or be influenced by information obtained about this behavior²⁵.

The realization of this positive attitude in order to become real action requires a factor of support from certain parties, such as health workers, family or closest people. The surrounding environment plays an important role in influencing this. The best decisions are influenced by the immediate environment. In addition, self-desire is not strong enough as a determining factor for breastfeeding if it is not conditioned by other driving factors, enabling factors, and reinforcing factors. In the four journals, the majority of mothers have a positive attitude towards exclusive breastfeeding and give exclusive breastfeeding to their babies. In the research of Theafilia Golda Beatriks Harisa, Iyam Manueke, Kusmiyati (2019), the discussion section states that the results of the Spearman Rank Correlation Test regarding the relationship between attitudes and exclusive breastfeeding behavior obtained a value of $p = 0.134 > \alpha$ (0.05), this shows no The relationship between maternal attitudes and exclusive breastfeeding behavior, however, the data obtained shows that more mothers have positive attitudes towards exclusive breastfeeding, so there is a conclusion, the researchers concluded that there is a relationship between maternal attitudes and exclusive breastfeeding¹⁷.

Conclusion

Conclusions from the results of a review of journal articles on predisposing factors for exclusive breastfeeding, currently there are still many mothers who do not know about the benefits of providing exclusive breastfeeding for babies and for mothers, besides that mothers are still influenced by the hereditary tradition of the family that the mother's breast milk will not be sufficient. to be given to babies so that babies must be given additional other foods (formula milk, honey, team porridge, etc.) before the baby is 6 months old. Therefore, the role of health workers is very important in providing understanding and promoting exclusive

breastfeeding, not only to mothers but also to families and the wider community. Even though mothers have good knowledge about exclusive breastfeeding, if it is not supported by health facilities and health workers, then mothers will find it difficult to realize exclusive breastfeeding behavior.

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