

Article

The effects of exclusive breastfeeding booklets on mothers' knowledge in providing exclusive breastfeeding in Mataram City, Indonesia

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Abstract

Introduction: Exclusive breastfeeding is the simplest and healthiest infant feeding method that, directly or by extraction, uses only breast milk with the exception to drops or syrups containing vitamins, mineral supplements or medicines. This practice help prevents malnutrition among toddlers and provide essential dietary values for subsequent growth and development, especially in the first 6 months. However, Mataram has the lowest coverage of exclusive breastfeeding in West Nusa Tenggara province in 2018. This exposure increased by 70.30% from 2017-2018, but has not achieved the 80% national target. The low coverage was caused by mothers' inadequate knowledge. Therefore, the present research aims to demonstrate the effectiveness of booklets as a promotional medium for exclusive breastfeeding towards increasing the knowledge of breastfeeding mothers.

Design and Methods: The research method involved the conduction of pre- and post tests (before and after the booklet was distributed) on 50 respondents by voluntary sampling. This sampling refers to a probability technique that provides equal opportunities for each population element selected as a member of the sample, while the participants were chosen using consecutive sampling technique

Results: The results showed the average values of the pre- and post- tests at 72 and 77, respectively.

Conclusions: Therefore, it is concluded that the booklet is effective in increasing mothers' knowledge on exclusive breastfeeding.

million children are underweight and 155 million are stunted due to malnutrition.¹ The World Bank and Nutrition report in 2019 emphasized that the problem of undernutrition is one of the world's most serious challenges but has been least tackled.² The existence of a significant relationship between infant feeding practices makes the exclusive breastfeeding promotion program an early and appropriate way of overcoming undernutrition.³ This is in line with the Sustainable Development Goals (SDGs) or the 2030 Sustainable Development Goals which state that breastfeeding is one of the first steps for a human being to have a healthy and prosperous life.⁴ But unfortunately there are still many mothers who do not give exclusive breastfeeding practices to their babies.

In underdeveloped nations, such as Indonesia, dedicated programs to combat undernutrition are already in place, one of which is a program to promote exclusive breastfeeding. Exclusive Breastfeeding is given to toddlers from the age of 6 months, without adding and or replacing them with other foods or drinks (except tablets, nutrients, and minerals). Colostrum is an important substance in breast milk which is rich in antibodies because it contains high amounts of protein for immunity and germ killer so that special breastfeeding can reduce the danger of death in infants. In addition, breast milk contains absorbent materials in the form of enzymes that do not interfere with other enzymes in the intestine. Whereas in formula milk, the process of absorption of food will depend on the ability of the child's intestines to digest. In addition, breast milk also plays a major role in optimal physical and cognitive growth and development in infants.¹

Breastfeeding is a staple food for toddlers, rich in nutrients essential for growth and development. Exclusive breastfeeding for 0-6 months is a strategy intensified to prevent malnutrition. Several methods have been used in Indonesia to increase exclusive breastfeeding coverage.⁵ Several methods have been used in Indonesia to increase the coverage of exclusive breastfeeding. This method is usually in the form of health education. Education has been an essential component of action to promote health and

Introduction

Currently, undernutrition is the leading cause of death in underdeveloped nations, accounting for over half of all deaths among children mal the age of five. In developing countries, 52

Significance for public health

Breastfeeding coverage in Indonesia, particularly in Mataram, East Nusa Tenggara, has not achieved the set target. This situation poses a problem that needs crucial resolution. Furthermore, the effectiveness of promotional media, in terms of exclusive breastfeeding, has not generated optimal results. Therefore, a new breakthrough that provides sufficient knowledge and positive attitudes to the people of Mataram concerning exclusive breastfeeding appears very necessary. This approach possibly leads to significant changes in good behavior towards exclusive breastfeeding practices.

prevent disease throughout this century. In developing countries, health education directed towards these goals remains a fundamental tool in the promotion of health and prevention of disease.⁶ Health education can be done with a variety of media. Media in health education can be interpreted as a tool for health promotion to facilitate communication and dissemination of information. There are various forms of promotional media such as audio, video, or text.⁷

The implementation of the exclusive breastfeeding promotion program has not given satisfactory results. One of the factors that mothers do not give exclusive breastfeeding is because knowledge about exclusive breastfeeding is low. Knowledge will directly affect the attitudes and behavior of a mother to give exclusive breastfeeding or not.⁸ According to WHO, breastfeeding is the most ideal feeding process for newborns up to 6 months for their development and growth, and for 2 years or more with the addition of complementary feeding.⁹ Research conducted by Girish et al in 2015 said that mothers did not have complete knowledge about exclusive breastfeeding, although in terms of their attitude they were quite good at doing it because they were assisted by health workers and their families.¹⁰

According to Seema in 2019, 35% of people globally still fail to do exclusive breastfeeding even though exclusive breastfeeding promotion programs have been carried out.¹¹ In Indonesia alone, the coverage of exclusive breastfeeding in 2018 was 37.3%.¹² However, Mataram showed the lowest exclusive breastfeeding coverage in West Nusa Tenggara in 2018. This occurrence increased from 2017 to attain 70.30% in 2018, but did not meet the 80% national target.¹³ In addition, the poor coverage was mainly due to insufficient knowledge of mothers, which is also related to individual educational levels, and beliefs in existing myths.^{14,15} Therefore, promotional efforts in enhancing the awareness of breastfeeding mothers include literacy, lectures or discussions. This research method incorporated literacy with the use of booklets as promotional media to convey information on exclusive breastfeeding proper procedures, the nutrition, benefits and related myths. Therefore, the booklet, as a literacy media, is expected to provide effective improvement on exclusive breastfeeding among nursing mothers.

Design and Methods

The present research involved the conduction of pre- and post-tests (before and after booklet distribution) on 50 respondents by voluntary sampling. These analyses used a questionnaire with a total of 25 questions based on the literature. Respondents' answers were assessed manually with a maximum of 100 points. In addition, the probability sampling was used to provide equal opportunities for each population element as a selected member of the sample, while the participants were chosen by consecutive sampling technique. Mothers with toddlers between 0-2 that are willing to be respondents, as well as demonstrate the ability to read and write served as the inclusion criteria. The research sample size comprised of 50 third trimester pregnant women that do not exclusively breastfeed. Furthermore, the respondents were provided with a consent form to confirm their willingness from the antenatal period at the health center, to post-birth stage, with the need for home visits to ascertain subsequent performances. This study also involved 1 research assistant (midwife) and 8 cadres for home visits under the supervision of Ampenan and Sandubaya Health Centers in Mataram city. Respondents also completed a pre-test knowledge questionnaire during antenatal at both clinics, before obtaining the booklet. Subsequently, the nursing mothers were

assigned 8 cadres after birth to observe the breastfeeding skills and also complete the post-test knowledge questionnaire at their homes. The data collection process commenced from 22-23rd June 2021, with the pre-test conducted on the first day. This was followed by the distribution of booklets, and within 24 hours, the post-test was arranged. The data capture and analysis were performed using Wilcoxon signed rank test with IBM Computer Software, SPSS 22. More importantly, the present research is known to comply with the research code of ethics under the auspices of the Research Ethics Committee of the Bhakti Wiyata Kediri Institute of Health Sciences with ethics number 421/PP2M-KEI/II/2021.

Results and Discussions

Pre-test Results

Table 1 shows that before booklet distribution, 16 (39%) breastfeeding mothers that did not provide exclusive breastfeeding had good knowledge, 19 (46.3%) had sufficient knowledge, and 6 (14.6%) had less knowledge.

Post-test Results

Table 2 indicates that after booklet distribution, 33 (70.2%) breastfeeding mothers that did not give exclusive breastfeeding had good knowledge, 19 (25.5%) had sufficient knowledge, and 6 (4.3%) had less knowledge.

Data analysis

The Wilcoxon signed rank test is required to test the resulting data and also determine if the values increased between the pre- and post-tests. Table 3 outlines the analysis results, while the average of the pre- and post-tests were estimated at 72 and 77, respectively. Also, the Asymp value. Sig (2-tailed) occurred at 0.000, indicating <0.05. Furthermore, the booklet appeared very effective in enhancing the awareness on exclusive breastfeeding.

Table 1. Pretest results.

Category	Frequency	Percentage (%)
Good (76-100)	16	39
Sufficient (56-75)	19	46.3
Less (≤ 55)	6	14.6
Total	50	100

Table 2. Posttest results.

Category	Frequency	Percentage (%)
Good (76-100)	33	70.2
Sufficient (56-75)	12	25.5
Less (≤ 55)	2	4.3
Total	50	100

Table 3. Wilcoxon signed-rank test.

	Pretest	Posttest
Mean	72	77
Asymp. Sig (2-tailed)	0,000	

Discussion

Based on the test results, the average maternal knowledge on exclusive breastfeeding occurred prior to the pre-test process (72). This suggests a reasonably good experience despite no practical application, although is not always followed by positive behavioral changes. The outcome matched several research theories in Mataram, where a high awareness level does not guarantee absolute exclusive breastfeeding.^{16,17} Similar research stated that 20% of the 74 mothers with good knowledge, do not engage in exclusive breastfeeding due to several factors, including inadequate family support or physiological disorders.^{18,19}

The post-test results showed an increase in the average mothers' knowledge (77) after reading the booklet. Based on the material, one of the reasons mothers do not employ exclusive breastfeeding is due to the non-smooth release of the breast milk. This discovery was supported by the statistical analysis results of the pre and post-test data using the Wilcoxon signed-rank test with the IBM SPSS 22 computer software. In addition, the Asymp results Sig (2-tailed) of 0.000 and the significance value below 0.05 ($0.000 < 0.05$) was also applied. Therefore, the use of the booklet was known to influence the increase in exclusive breastfeeding.

This conclusion matched the research by Septa Katmawanti,²⁰ where breastfeeding booklets tend to improve maternal knowledge at Posyandu Sisir, Kota Batu. Another study by Lestari (2021) reported that the use of the material as educational support for pregnant women significantly impacted on the maternal knowledge about self-efficacy in breastfeeding at several public health centers in Semarang, Indonesia. Similar reports were also confirmed at Sungai Ulin Health Center, Banjarbaru and Integrated Healthcare Center in Sisir Batu City.²⁰ Furthermore, the combination of booklet media with an interactive lecture method impacted the increase in exclusive breastfeeding awareness.²² According to the research by Mulye in India, a booklet containing adequate feeding techniques appears very effective in fostering the breastfeeding experience.²³ However, in identifying the factors affecting the implementation of exclusive breastfeeding in Ethiopia, mothers that do not receive counseling after giving birth are less probable to perform exclusive breastfeeding. This statement further confirmed the knowledge or education factor as very influential.²⁴

Knowledge is the result of humans' feeling or understanding of an object with the five senses, mostly by hearing and sight.²⁵ Several factors influence knowledge levels, including education, occupation, age and environment. The research on the use of MCH books in Integrated Healthcare Center, Bekasi regency, showed a high curiosity in majority of the mothers with low education, and therefore were known to adopt regular reading.²⁶ Conversely, Sugiarti (2020) stated that higher education breeds easier comprehension and improve the knowledge on MCH books,²⁷ while Lindawati (2019) reported that the proportion of exclusive breastfeeding appears more frequent in mothers with higher education, including high school (SMA) or college graduates. Furthermore, adequate education helps process information on the benefits of exclusive breastfeeding from various sources, leading to an increased awareness.²⁸

In principle, occupation provides experience and also influences knowledge. Working mothers exhibit broader knowledge, compared to the stay-at-home counterparts, due to a wide range of relationships and opportunities in acquiring extensive information.²⁹ Research in Pekanbaru, Riau, found that the majority of working mothers with the convenience to breastfeed were approximately 67.6%. The stay-at-home category also showed a high rate of implementing exclusive breastfeeding (54.8%). This practice is therefore possible for both working and non-working

mothers.³⁰ Furthermore, different results were reported by Sihombing (2018), where a significant relationship ($p\text{-value} = 0.005 < 0.05$) occurred between a mother's occupation and exclusive breastfeeding around Hinai Kiri Health Center's business area. In addition, the research stated that the time-off for working mothers also influences exclusive breastfeeding. In most cases, formula milk serves as an alternative, due to poor breastfeeding awareness.³¹

Poor coverage of exclusive breastfeeding triggers a high rate of vulnerable adolescent mothers with inadequate physical, mental and information readiness regarding birth and breastfeeding.³² Age is also known to influence maternal knowledge, motivation and activities, as the period between 20-35 years is commonly attributed to a healthy reproduction stage. This is because the reproductive organs are physically ready, and the psychological condition has an impact on the readiness to accept pregnancy. Subsequently, it is generally believed that older mothers show more breastfeeding experience, compared to the younger counterparts.³³ This result is also in line with a previous research where majority of mothers between the age range of 20-35 years have exclusively breastfed.³⁴ However, according to Hanifah (2015), mothers that do not offer exclusive breastfeeding in Cikeruh village were mostly between 20-35 years (80.6%), due to poor motivation.³³

Self-motivation occurs internally, but is possibly influenced by several factors across different individuals. In principle, people with a high sense of motivation tend to realize their desires. This theory was proven in an earlier research where the effect of self-motivation on dietary compliance was examined among diabetes mellitus patients. Respondents with good self-motivation tend to be more obedient to the expected diet, due to the confidence in performing certain tasks or actions.³⁵ In the practice of exclusive breastfeeding, research in Bali city showed a significant relationship between the motivation of nursing mothers and the success of exclusive breastfeeding in the commercial area of Ubud I Public Health Engineering Implementation Unit, Gianyar regency, with a strong relationship. This means that higher motivation enhances the success in exclusive breastfeeding.³⁶ Meanwhile, Nandini's analysis results (2018) showed that motivation, perception and knowledge of mothers about breastfeeding did not show any significant relationship. This is possibly caused by several factors, including the husband, family, and health workers support, employment status, as well as others with either direct or indirect effects.³⁷

Apart from education, occupation, age and motivation, knowledge is also influenced by other factors, including the facilities or availability of information resources. Hipri (2020) results on the provision of MP-ASI (Complimentary Food of breastfeeding) showed that out of the 85 respondents that received information, 43 correctly provided MP-ASI (50.6%). Meanwhile, out of the 31 respondents that did not receive any information, 29 did not offer precise MP-ASI (93.5%).³⁸ Mothers exposed to information sources are known to obtain 9.64 times the opportunity to offer exclusive breastfeeding, compared to the counterparts without any media experience.³⁹ Furthermore, exposure to sources from general communication media, interpersonal awareness, health facilities related services during pregnancy, childbirth and postpartum are possible influencing factors of exclusive breastfeeding. Subsequently, the analysis on breastfeeding workers at PT. Globalindo Intimates Klaten revealed that the existence of a polyclinic facility and a lactation room with a doctor and nurse help generated information for knowledge expansion.⁴⁰ In addition to the availability of information sources, breastfeeding hoaxes need to also be restrained. Several related myths appear more widespread in Indonesia's remote communities, including the

deception that colostrum is not suitable for babies, as special tea or other liquids are needed before feeding.^{41,42} These rumors also occur in Mataram, East Nusa Tenggara.

Educational efforts remain an important measure in promoting exclusive breastfeeding, although the increase in knowledge is not always directly proportional to individual behavioral changes. In this research, health education appears very crucial,^{43,44} but in order to achieve effective education and reach the right target, appropriate methods and media are required. Various techniques have already been employed to improve exclusive breastfeeding practice, ranging from the use of social media, multi-level promotional systems and counseling.⁴⁵⁻⁴⁸ In addition, print, electronic and outdoor channels occur among the frequently applied health education media.⁴⁹

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In the present research, media is used as a promotional medium or an information source, mainly in the form of an exclusive breastfeeding booklet. This material also serves as a communication medium that is promotional or recommended to the public and contains interesting summaries and pictures intended for easier comprehension.⁵⁰ The advantages of the booklet include the relatively low production cost and sufficient printed durability, compared to audio and audio-visual media. In addition, the literature comes in an A5 size of 16 pages, with a short language and background that contrasts with the writing for easier understanding. For example, a black text on a white background result in a neat and attractive layout. This neatness translates to the frame on all pages, with clearer boundaries. In contrast, the image selection is expected to match the color theme that is attractive, contrast, and facilitates the easier understanding of the contents. In general, the research booklet has fulfilled the criteria for a suitable literature material.⁵¹ This exclusive breastfeeding booklet serves as one of the best media in health promotion efforts towards increasing the awareness of exclusive breastfeeding among mothers that do not practice exclusive breastfeeding at Integrated Healthcare Center in the commercial area of Mataram city. Furthermore, multiple research by Li Tang *et al.*, Yasya *et al.*, Masruroh *et al.*, and Souza *et al.* found that conveying knowledge through audio-visual is more successful than traditional media such as booklets.⁵²⁻⁵⁵

Conclusions

The provision of booklets as suitable promotional media for exclusive breastfeeding are very significant to nursing mothers. Information in these materials are also effective in enhancing knowledge. Therefore, the coverage of exclusive breastfeeding in Mataram has the capacity to gradually meet the national target and subsequently reduce the high occurrence of malnutrition among infants. Other than traditional media, such as booklets, further research on the impact of other media is needed.

References

- Suffian SH, Rumianti F, Sumbayak E. Pengaruh Air Susu Ibu Eksklusif terhadap Perkembangan Kognitif dan Perilaku Anak Usia 6-24 Bulan di Puskesmas Kecamatan Grogol Petamburan pada Tahun 2016. [The Effect of Exclusive Mother's Milk on the Cognitive Development and Behavior of Children Aged 6-24 Months at the Grogol Petamburan District Health Center in 2016.] J Kedokt Med Univ Kristen Krida Wacana 2016;23:15-21.
- The World Bank. The World Bank and nutrition. worldbank.org. 2019. Accessed 2022 Feb 16. Available from: <https://www.worldbank.org/en/topic/nutrition/overview#1>
- UNICEF (United Nations Children's Fund). Global Nutrition Report 2020: Action on equity to end malnutrition. unicef.org. 2020. Accessed 2021 Jan 14. Available from: <https://data.unicef.org/resources/global-nutrition-report-2020/>
- United Nations. Sustainable Development Goals | United Nations Development Programme. 2017. Accessed 2021 Nov 28. Available from: <https://www.undp.org/sustainable-development-goals>
- Safitri A, Puspitasari DA. Upaya Peningkatan Pemberian ASI Eksklusif Dan Kebijakannya Di Indonesia. Penelit Gizi dan Makanan. [Efforts to Increase Exclusive Breastfeeding and Its Policy in Indonesia. Nutrition and Food Researcher.] J Nutr Food Res 2019;41:13-20.

6. Nutbeam D. Health literacy as a public health goal: A challenge for contemporary health education and communication strategies into the 21st century. *Health Promot Int* 2000;15:259–67.
7. Listyarini AD, Fatmawati Y. Edukasi Gizi Ibu Hamil Dengan Media Booklet Tentang Perilaku Pencegahan Balita Stunting Di Wilayah Puskesmas Undaan Kabupaten Kudus. [Nutrition Education for Pregnant Women Using Media Booklets About Stunting Toddler Prevention Behavior in the Undaan Community Health Center, Kudus Regency.] *J Ilmu Keperawatan dan Kebidanan* 2020;11:100.
8. Rosuzeita F, Che Rabiaah M, Rohani I, et al. The effectiveness of breastfeeding intervention on breastfeeding exclusivity and duration among primiparous mothers in hospital Universiti Sains Malaysia. *Malaysian J Med Sci* 2018;25:53–66.
9. World Health Organization. Health Topics Breastfeeding. 2019. Available from: <http://www.who.int/topics/breastfeeding/en/>
10. College E. Primipara Mother's Breastfeeding Knowledge, Attitude and Practice of. *Int J Adv Nurs Sci Pract* 2015;2:41–8.
11. Mahrshahi S, Tait H, Haider R, et al. Characteristics and experiences of peer counsellors in urban Dhaka: A structured interview study. *Int Breastfeed J* 2019;14:1–9.
12. Kementerian Kesehatan Republik Indonesia. Hasil Utama Riset Kesehatan Dasar 2018. [Key Results of Basic Health Research 2018.] Jakarta: Kementerian Kesehatan Republik Indonesia; 2018.
13. Kementerian Kesehatan Indonesia. Profil Kesehatan Indonesia 2018. [Indonesia Health Profile 2018.] Jakarta: Kementerian Kesehatan Republik Indonesia; 2018.
14. Lani Ingga Budiarsih, Rahmani Ramli FA. Hubungan Tingkat Pengetahuan Ibu Dengan Keberhasilan Pemberian ASI Eksklusif di Wilayah Kerja Puskesmas Pejeruk. [The Relationship between Mother's Knowledge Level and the Success of Exclusive Breastfeeding in the Work Area of the Pejeruk Health Center.] *Chmk Nurs Sci J* 2019;3:68–72.
15. Aditia DS. Faktor-Faktor Yang Mempengaruhi Ibu Tidak Memberikan Asi Eksklusif Kepada Bayinya. [Factors Influencing Mothers Not Giving Exclusive Breastfeeding to Their Babies.] *Jurnal Kesehatan Ilmiah Indonesia* 2020;5:1–8.
16. Yanti NKW, Novyriana E. Karakteristik, Pengetahuan Dan Sikap Ibu Menyusui Terhadap Pemberian Asi Eksklusif Di Kelurahan Pagutan Kota Mataram. [Characteristics, Knowledge and Attitudes of Breastfeeding Mothers towards Exclusive Breastfeeding in the Pagutan Village, Mataram City.] *Heal Care Media* 2018;3:29–37.
17. Suryatini. Faktor – faktor yang Penyebab Rendahnya Pemberian ASI eksklusif di Kelurahan Pejeruk Kecamatan Ampenan Kota Mataram. [Factors that cause low exclusive breastfeeding in Pejeruk Village, Ampenan District, Mataram City.] Mataram: Mataram Ministry of Health Health Polytechnic; 2010.
18. Bernard A, Musa F, Peter D. Knowledge, Practices and Factors Affecting Exclusive Breastfeeding among Lactating Mothers with Babies aged 6 months to 1 year attending Magomeni Reproductive and Child Health Clinic, Kinondoni, Dar es Salaam: Descriptive Cross Sectional Study. 2021.
19. Katmawanti S, Firdausi R, Aflah Samah D. The Effectiveness of Emo-Demo in Increasing the Knowledge and Attitudes in Mother Who Do Not Provide Exclusive Breastfeeding in the Working Area of Cisadae Public Health Center in Malang. KLS 2021 Mar 25. Accessed 2021 May 2. Available from: <https://knepublishing.com/index.php/KnE-Life/article/view/8871>
20. Katmawanti S, Eko Wardani H, Fauzi R, et al. Effectiveness of Booklet on Exclusive Breastfeeding in Improving the Knowledge and Attitudes of Mother Who Do Not Exclusively Breastfeed in the Work Area of Posyandu Sisir Batu City, East Java, Indonesia. KLS 2021 Mar 25. Accessed 2021 May 2]; Available from: <https://knepublishing.com/index.php/KnE-Life/article/view/8894>
21. Lestari KP, Kinasih D, Jauhar M. The Use of Booklet Media in Improving Breastfeeding Self- Efficacy among Pregnant Women in a Primary Health Care Services. 2021;(August).
22. Arifin S, Salsabela N, Suhartono E, et al. The Effect of Booklet Media with Interactive Lecture Method on Mother's Knowledge and Intention in Giving Exclusive Breastfeeding in The Sungai Ulin Public Health Center Working Area. *Int J Res Publications* 2019. Available from: <http://eprints.ulm.ac.id/6162/>
23. Nag A, Chaturvedi A, Kumari R. Effectiveness of an information booklet on knowledge regarding breastfeeding among mothers of under two-years children. *Int J Contemp Pediatr* 2021;8:1387.
24. Hunegnaw MT, Gezie LD, Teferra AS. Exclusive breastfeeding and associated factors among mothers in Gozamin district , northwest Ethiopia : a community based cross-sectional study. *Int Breastfeed J* 2017;1–8.
25. Notoadmojo S. Metode Penelitian Kesehatan. Jakarta: Rineka Cipta; 2007.
26. Karminingsih, Latifah, Saputri FA. Gambaran Pengetahuan Ibu Tentang Pemanfaatan Buku Kesehatan Ibu Dan. [Description of Mother's Knowledge About Utilization of Maternal Health Books and.] *J Kesmas Prima Indones* 2021;3:1–6.
27. Sugiarti S, Kurniawati HF. Pengetahuan Dan Sikap Pemanfaatan Buku Kesehatan Ibu Dan Anak (Kia) Pada Ibu Hamil Mengenai Tanda Bahaya Kehamilan. [Knowledge and Attitudes on the Use of Maternal and Child Health (KIA) Books in Pregnant Women Regarding the Danger Signs of Pregnancy.] *Proceeding of The URECOL 2020*;39:214–20.
28. Lindawati R. Hubungan Pengetahuan, Pendidikan dan Dukungan Keluarga dengan Pemberian ASI Eksklusif. [Relationship between Knowledge, Education and Family Support with Exclusive Breastfeeding.] *Faletahan Heal J* 2019;6:30–6.
29. Ramli R. Hubungan Pengetahuan dan Status Pekerjaan Ibu dengan Pemberian ASI Eksklusif di Kelurahan Sidotopo. [Correlation of Mothers' Knowledge and Employment Status with Exclusive Breastfeeding in Sidotopo.] *J Promosi Kesehat* 2020;8:36–46.
30. Bahriyah F, Putri M, Jaelani AK, Indragiri AK. Hubungan pekerjaan ibu terhadap pemberian asi eksklusif pada bayi. [The relationship between mother's work and exclusive breastfeeding in infants.] *J Edurance* 2017;2:113–8.
31. Sihombing S. Hubungan Pekerjaan dan Pendidikan Ibu dengan Pemberian Asi Eksklusif di Wilayah Kerja Puskesmas Hinai Kiri Tahun 2017. [Relationship of Mother's Work and Education with Exclusive Breastfeeding in the Work Area of Hinai Kiri Health Center in 2017.] *Jurnal Bidan* 2018 Jan;IV(1).
32. Fau SY, Nasution Z, Hadi AJ. Faktor Predisposisi Ibu Usia Remaja Terhadap Pemberian ASI Eksklusif pada Bayi di Kecamatan Luahagundre Maniamolo Kabupaten Nias Selatan. [Predisposing Factors for Adolescent Mothers to Exclusive Breastfeeding for Babies in Luahagundre Maniamolo District, South Nias Regency] *Media Publikasi Promosi Kesehatan*

- Indonesia (MPPKI) 2019;2:165–73.
33. Hanifah SA, Astuti S, Susanti AI. Gambaran Karakteristik Ibu Menyusui Tidak Memberikan Asi Eksklusif Di Desa Cikeruh Kecamatan Jatinangor Kabupaten Sumedang Tahun 2015. [Description of the Characteristics of Breastfeeding Mothers Not Giving Exclusive Breastfeeding in Cikeruh Village, Jatinangor District, Sumedang Regency in 2015.] *Jurnal Sistem Kesehatan* 2017;3:13960.
 34. Rahma S, Wenny D, Agustina A, et al. Hubungan Pengetahuan dan Karakteristik Ibu Baduta dengan Pemberian Asi Eksklusif di Wilayah Kelurahan Meruya Utara Tahun 2020. [The Relationship between Knowledge and Characteristics of Baduta Mothers and Exclusive Breastfeeding in the North Meruya Village Area in 2020.] *Jurnal Ilmiah Kesehatan Masyarakat Media Komunikasi Komunitas Kesehatan Masyarakat* 2021;13:133–40.
 35. Risti KN, Isnaeni FN. Hubungan Motivasi Diri Dan Pengetahuan Gizi Terhadap Kepatuhan Diet Dm Pada Pasien Diabetes Mellitus Tipe II Rawat Jalan Di RSUD Karanganyar. [The Correlation of Self-Motivation and Nutritional Knowledge To Diet Compliance DM in Type II Diabetes Mellitus Patients Outpatient at Karanganyar Hospital.] *J Kesehat* 2017;10:94–103.
 36. Ririn M, Wulandari S, Suartha IN, et al. The Correlation Between Motivation of Breastfeeding Mothers and Exclusive Breastfeeding Successful. *J Cent Res Publ Midwifery Nurs* 2020;4:33–9.
 37. Nandini N. Hubungan Motivasi, Persepsi, Dan Pengetahuan Ibu Pada Masa Kehamilan Dan Pemberian Air Susu Ibu. [Relationship of Motivation, Perception, and Mother's Knowledge During Pregnancy and Breastfeeding.] *Med Technol Public Heal J* 2018;2(1).
 38. Hipri, Indah QN, Dhewi S. Informasi Dan Dukungan Keluarga Ibu Dengan Ketepatan Pemberian Mp-Asi Pada Bayi Di Wilayah Kerja. [Information and support from the mother's family with the accuracy of giving MP-ASI to babies in the work area.] Kalimantan: Univ Islam Kalimantan. 2020.
 39. Astuti I. Determinan Pemberian ASI Eksklusif Pada Ibu Menyusui. [Determinants of Exclusive Breastfeeding in Breastfeeding Mothers.] *Heal Qual* 2013;4:1–76.
 40. Listyaningrum TU, Vidayanti V. Tingkat Pengetahuan dan Motivasi Ibu Berhubungan dengan Pemberian ASI Eksklusif pada Ibu Bekerja. [Level of Mother's Knowledge and Motivation Related to Exclusive Breastfeeding to Working Mothers.] *Jurnal Ners dan Kebidanan Indonesia* 2016;4:55–62.
 41. Maulida S, Kartika I. Hubungan Antara Mitos Dengan Ketidakberhasilan Pemberian Asi Eksklusif Di BPM Kecamatan Batujajar Kabupaten Bandung Barat. [The Relationship Between Myth and the Unsuccess of Exclusive Breastfeeding at BPM, Batujajar District, West Bandung Regency.] *Jurnal Sehat Masada* 2018 J;12:36–9.
 42. Rosida L, Sari DF. Faktor Mitos Dan Budaya Terhadap Keberhasilan Asi Eksklusif Pada Suku Jawa. [Myth and Cultural Factors on the Success of Exclusive Breastfeeding in the Javanese.] *J Ilm Keperawatan Stikes Hang Tuah Surabaya* 2020;15:151–61.
 43. Jayanti Kd, Khalim RFN. Peningkatan Pengetahuan Ibu Melalui Penyuluhan Tentang Pentingnya Asi Eksklusif di Desa Kedak Kabupaten Kediri. [Increasing Mother's Knowledge Through Counseling About the Importance of Exclusive Breastfeeding in Kedak Village, Kediri Regency.] *Prosiding (SENIAS) Seminar Pengabdian Masyarakat* 2017;0:38.
 44. Laila NN, Shofwati I. Hubungan Status Gizi Dengan Status Menarche Pada Remaja (Usia 10-15 Tahun) Di Indonesia Tahun 2010. [The Relationship between Nutrition Status and Menarche Status in Adolescents (10-15 Years Old) in Indonesia, 2010.] *J Kesehat Reproduksi* 2013;4(1).
 45. Wilson JC. Using Social Media for Breastfeeding Support. *Nurs Womens Health* 2020;24:332-343.
 46. Alianmoghaddam N, Phibbs S, Benn C. "I did a lot of Googling": A qualitative study of exclusive breastfeeding support through social media. *Woman and Birth* 2019;32:147-156.
 47. Susiloretzni KA, Krisnamurni S, Yosef S, et al. The Effectiveness of Multilevel Promotion of Exclusive Breastfeeding in Rural Indonesia. *Sci Lifestyle Chang* 2013;28:44–56.
 48. Nababan S, Yikwa E, Widjanarko B. Health Promotion Media To Behavior Change On Exclusive Breastfeeding Mothers. *J Promkes Indones J Heal Promot ad Heal Educ* 2019;7:233–9.
 49. Notoadmojo S. Promosi Kesehatan: Teori dan Aplikasi. [Health Promotion: Theory and Applications.] Jakarta: Rineka Cipta; 2010.
 50. Gustaning G. Pengembangan Media Booklet Menggambar Macam-Macam Celana Pada Kompetensi Dasar Menggambar Celana Siswa Smkn 1 Jenar. [Development of Booklet Media Drawing Various Pants on the Basic Competencies of Drawing Pants for Students of SMKN 1 Jenar.] Universitas Negeri Yogyakarta. Yogyakarta: Universitas Negeri Yogyakarta; 2014.
 51. Landreansyah. Pengembangan Booklet Sebagai Media Kehidupan Di Muka Bumi Kelas X Di SMA Negeri 12 Semarang Tahun 2015. [Booklet Development as a Media for Life on Earth Class X at SMA Negeri 12 Semarang in 2015.] Semarang; Universitas Negeri Semarang; 2015.
 52. Tang L, Lee AH, Binns CW, et al. WeChat-based intervention to support breastfeeding for Chinese mothers: protocol of a randomised controlled trial. *BMC Med Infor Decision Making* 2020;20:300.
 53. Yasya W, Hardinsyah H, Muljono P, et al. Online Social Support Communication of Breastfeeding Mothers on Facebook Group. *Prosiding 1st Borobudur International Symposium on Humanities, Economics and Social Sciences (BIS-HESS 2019)*. 2020. Accessed May 2. Available from: https://www.researchgate.net/publication/341360236_Online_Social_Support_Communication_of_Breastfeeding_Mothers_on_Facebook_Group
 54. Mukhoirotin, Masruroh S. Health Education: Audio Visual Media for Improving Mother's Knowledge, Attitude, and Psychomotor of Breastfeeding Techniques. *Jurnal Kebidanan Midwiferia* 2022;8:9–21.
 55. Souza TO de, Morais TE do V, Martins C da C, et al. Effect of an educational intervention on the breastfeeding technique on the prevalence of exclusive breastfeeding. *Revista Brasileira de Saude Materno Infantil*. 2020;20:297–304.