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THE RELATIONSHIP BETWEEN LACTATION COUNSELING AND INCREASING MOTHERS' KNOWLEDGE ABOUT EXCLUSIVE BREASTFEEDING

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Abstract

Background: Exclusive breastfeeding refers to giving only breast milk without additional fluids, including water, during the period of 0-6 months (Siahaan, 2021). The benefits of exclusive breastfeeding for newborns are very important as a preventive measure against infectious diseases, malnutrition, and death in infants and toddlers (Sabriana et al., 2022). One of the factors that impacts the behavior of exclusive breastfeeding is insight, which can trigger someone to give exclusive breastfeeding to their child. One of the methods applied is lactation preparation counseling for pregnant women to gain deeper insight into the emotional and physiological aspects of breastfeeding and to learn practical strategies and techniques in overcoming common challenges. Objective: To determine whether there is a relationship between lactation counseling and increasing maternal insight into exclusive breastfeeding, in order to provide better insight into the importance of support in breastfeeding and encourage optimal breastfeeding practices at the Hadijah Inpatient Pratama Clinic. Method: This research uses a quantitative research type with a pre-experimental research framework with a one group pre-test-post-test design method. The population includes all pregnant women in the third trimester, totaling 45 people. The sampling technique used Non Probability Sampling with Purposive Sampling type. Results: From the results of the Wilcoxon test, the P score was obtained with a value of 0.00 which means p <0.05 so that it was concluded that Ho was rejected Ha was approved which means there is an impact of lactation counseling on increasing maternal insight regarding exclusive breastfeeding.

Keywords: ***Lactation Counseling, Maternal Knowledge, Exclusive Breastfeeding***

INTRODUCTION

BACKGROUND

Breast milk (ASI) is the main source of nutrition for infants which is given exclusively for the first 6 months of life. Exclusive breastfeeding means giving only breast milk without any other fluids, including water, during the period 0-6 months (Siahaan, 2021). The benefits of exclusive breastfeeding for newborns are very important as a preventive measure against infectious diseases, malnutrition, and death in infants and toddlers (Sabriana et al., 2022). In addition, exclusive breastfeeding also brings benefits to mothers, such as reducing the risk of breast cancer, accelerating postpartum recovery, and strengthening the emotional bond between the child and the mother (Aminah et al., 2024).

Globally, around 44% of babies aged 0-6 months received exclusive breastfeeding between 2015 and 2020, this number has not reached the target of exclusive breastfeeding coverage in the world which should be 50%. Referring to the data from the Health Profile of the Republic of Indonesia, the coverage of exclusive breastfeeding in Indonesia showed a figure of 66.1% in 2020, but there was a decline to 56.9% in 2021. In 2022, this figure increased again to 67.96%. Despite the increase, the achievement of exclusive breastfeeding in Indonesia still does not meet the national target set by the Indonesian Ministry of Health, which is 80%.

In North Sumatra Province, based on the 2021 District/City Health Profile data, there were 87,529 babies out of a total of 198,734 babies under 6 months who received exclusive breastfeeding, with a percentage reaching 44.04%. Although this figure is higher than in 2020 which was 38.42%, the distribution of exclusive breastfeeding in 2021 was still below the target set in the North Sumatra Provincial Health Office's Strategic Plan, which was 50% (Ministry of Health of the Republic of Indonesia, 2022).

Based on interviews conducted with 5 mothers at the Hadijah Inpatient Pratama Clinic, it was found that 3 of them had difficulty in producing breast milk (breast milk supply was low), so they chose to provide formula milk, while 2 other mothers did not provide exclusive breastfeeding due to work factors. From these findings, researchers are interested in conducting a study to reveal whether there is a relationship between lactation counseling and increasing maternal insight regarding exclusive breastfeeding.

Lactation or the breastfeeding process is part of the reproductive system that aims to provide nutrition to the baby (Jamila et al., 2024). Nutritional intake of pregnant women is very important, both to meet the mother's own nutritional needs and to support the development and growth of the fetus in the womb. Pregnant women need to consume various types of food in larger quantities to supply energy, protein, and micronutrients (such as minerals and vitamins), which are used in fetal growth, maintaining the mother's body, and as reserves for the breastfeeding period. Some crucial micronutrients during pregnancy are calcium, folic acid, iron, zinc, and iodine (Nasriyah et al., 2023).

The food consumed by the mother greatly affects the quality of breast milk, where the energy in breast milk comes from 6% protein, 48% fat, and 46% carbohydrates. In general, the diet of breastfeeding mothers is not much different from the daily diet of mothers, the important thing is to meet the principles of a balanced nutritional diet. During breastfeeding, mothers often feel tired because they have to provide breast milk, including at night. Therefore, breastfeeding mothers must consume enough food to maintain their stamina. The FAO/WHO expert commission recommends a calorie intake for breastfeeding mothers between 1,800 and 2,700 calories (S Fatimah et al., 2024).

Breastfeeding techniques affect a mother's ability to breastfeed her baby, including proper breastfeeding positioning, the correct way the baby's mouth is attached to the breast, to make it easier for the baby to suck the nipple, and the way the mother holds her baby while breastfeeding. With the right technique, this can reduce the risk of sore nipples. Finding a comfortable position while breastfeeding is crucial, because there are various ways to position the baby and mother during the breastfeeding process (Habibah, N. 2021).

One of the methods applied is lactation preparation counseling for pregnant women. This counseling offers an opportunity for pregnant women to gain deeper insight into the emotional and physiological aspects of breastfeeding, explore practical strategies and techniques in overcoming common challenges, and build the confidence and self-efficacy needed to maintain and start the breastfeeding process successfully (Putri et al., 2024).

Babies who are not exclusively breastfed are at risk of various negative impacts, such as increased risk of death, bacterial infections that are almost four times higher than babies who are exclusively breastfed, and are more susceptible to diarrhea and sudden infant death syndrome (SIDS). Not only that, these babies are also at greater risk of liver disease, malnutrition, and hunger, which can reduce the child's immunity. Although newborns naturally receive immunoglobulins (immune substances) from the mother through the placenta, the level of immunity will decrease after birth (Noberti Sama Lelo, 2021).

One of the factors that impacts the behavior of exclusive breastfeeding is insight, which can trigger someone to provide exclusive breastfeeding for their child. Family support, especially from the husband and other family members, also plays an important role in the success of providing exclusive breastfeeding. According to Rachmawati (2020), emotional and practical support from the family can increase the mother's confidence in breastfeeding, reduce stress levels, and encourage mothers to continue providing exclusive breastfeeding despite facing various challenges. This support includes assistance in caring for babies, providing moral encouragement, and helping with household chores, so that mothers can focus more on the breastfeeding process (Rachmawati, 2020).

Formulation of the problem

Based on the background above, the formulation of the problem in this research is whether there is a relationship between lactation counseling and increasing knowledge of pregnant women regarding exclusive breastfeeding.

Research purposesGeneral purpose

To determine whether there is a relationship between lactation counseling and increasing maternal insight regarding exclusive breastfeeding, in order to provide better insight into the importance of support in breastfeeding and encourage optimal breastfeeding practices at the Hadijah Inpatient Primary Clinic.

Special purpose

1. Revealing the level of mothers' insight regarding exclusive breastfeeding before being given lactation counseling at the Hadijah Inpatient Primary Clinic

2. Seeing the level of mothers' insight regarding exclusive breastfeeding after being given lactation counseling at the Hadijah Inpatient Primary Clinic
3. Revealing the impact of lactation counseling on increasing mothers' insight regarding exclusive breastfeeding

Benefits of research

1. **Educational Institutions**
   It can be used as teaching material and to add references for educational institutions regarding the Relationship between Lactation Counseling and the Level of Mothers' Knowledge in Exclusive Breastfeeding.
2. **Pregnant Women in the Third Trimester**
   It is hoped that this can be input for mothers who have babies to increase their insight into the benefits of the Relationship between Lactation Counseling and the Level of Mothers' Knowledge in Exclusive Breastfeeding.
3. **Research Place**
   It is expected to be an effort to improve services and new innovations regarding the Relationship between Lactation Counseling and the Level of Mother's Knowledge in Providing Exclusive Breastfeeding at the Hadijah Inpatient Primary Clinic.
4. **Further research**
   It is hoped that it can be an addition to knowledge and insight and become a reference material or guideline for further research on the Relationship between Lactation Counseling and the Level of Mothers' Knowledge about Exclusive Breastfeeding.

RESEARCH METHODS

Types and Design of Research

This study uses a quantitative research type with a pre-experimental research framework with a one-group pre-test-post-test design approach. This design aims to compare the level of mothers' understanding of exclusive breastfeeding before and after being given lactation counseling. The one-group pre-test-post-test design scheme is shown as follows:

Pre	Intervention	Post
X1	XO	X2

Note:
X1: Level of mother's understanding regarding exclusive breastfeeding before receiving lactation counseling.
X0 : Intervention (Lactation counseling)
X2: Level of mother's understanding regarding exclusive breastfeeding after receiving lactation counseling.

Place and Time of Research Place of Research

This research was conducted at the Hadijah Inpatient Primary Clinic.

Research Time

The research period was October 2024 – December 2024.

Population and Sample Research Population

Population is a group that becomes a generalization area, consisting of objects or subjects that have specific qualities and characteristics determined by researchers to be studied and concluded (Sugiyono, 2019). In this research, the population studied was all pregnant women in the third trimester, totaling 45 people.

Sample

A sample is a part of a population that is selected to represent the number and
characteristics of the population being studied (Sugiyono, 2019). In this research, the sample consisted of 40 pregnant women in their third trimester as respondents. The sampling technique used was Non Probability Sampling with a purposive sampling approach, in which data collection was carried out based on considerations that had been determined by the researcher, taking into account the characteristics and characteristics of the population that had been previously identified.

Data Collection Method Primary Data

Primary data is data that is directly obtained by researchers from primary sources, either from a group or

individual through interviews, observations, and tests on pregnant women in their third trimester.

Secondary Data

Secondary data are documents used by researchers to obtain data through questionnaires aimed at pregnant women in the third trimester regarding the provision of exclusive breastfeeding. The approach applied to data collection in this research is primary data, with observation techniques as a method of data collection. Observation is an approach to collecting data by observing ongoing activities (Hardani, 2020). In this research, data collection was carried out in the pre-test stage, namely before lactation counseling was carried out. Researchers observed respondents using a questionnaire sheet. The purpose of this observation is to collect information regarding the level of knowledge of mothers regarding exclusive breastfeeding.

After the data collection stage in the pre-test, the researcher then provided lactation counseling as a form of intervention in this study. After lactation counseling was given, the researcher will conduct a second observation (post-test) to see if there is a change in the depth of the mother's insight into exclusive breastfeeding after being given lactation counseling. Furthermore, the researcher will compare the level of mother's insight into exclusive breastfeeding before and after lactation counseling was given.

Operational Definition of Research Variables and Measurement Scales

No	Variables	Definition	Measuring instrument	Scale	Results	Category measuring
1	Independent: Counseling Lactation	Counseling lactation is services provided by manpower health to help mothers in overcoming the problem that faced by mother.	Sheet Observation	nominal	Yes No	1 0
2	Dependents: Level knowledge Mother	Knowledge is a property or ability somebody in understand, know, master certain information or concepts.	Sheet Observation	Ordinal	Good Enough Not enough	(80-100) (70-80) (≤ 60)

Data Processing and Data Analysis Techniques Data processing and data analysis techniques

1. Editing
   In this phase, the researcher will fill in the data on each instrument used and re-edit the data obtained from the observation sheet.
2. Coding
   In this phase, the researcher will code each group of variables from the data and measuring instruments used to facilitate the data analysis process.
3. Assessment or Scoring
   In scoring, the researcher gives the highest and lowest values for each question. After the data is filled in correctly, the researcher will then process the observation sheet data from 40 respondents.
4. Tabulating or tabulation
   Tabulation or tabulating is the process of checking data after being coded. This process is applied to make it easier for researchers to analyze data that is relevant to the research objectives.

Data Analysis Univariate Analysis

This analysis is intended to describe the characteristics of each variable in the research. In general, this

univariate analysis only displays the frequency distribution and percentage of each variable studied. This univariate analysis is used to determine the frequency distribution of the level of maternal knowledge about exclusive breastfeeding.

Bivariate Analysis

Bivariate analysis is a method of analyzing the relationship between two variables. The Wilcoxon signed test is used to reveal the relationship between independent and dependent variables by comparing two groups of paired data by comparing the level of maternal knowledge before and after being given lactation counseling. Testing the proposed hypothesis produces findings that are strong enough to support the rejection or acceptance of the hypothesis through the use of statistical tests. To determine the significance of the calculation results, a threshold of 0.05 is used; so that, if the p score
> 0.05, the results are considered insignificant, whereas if the p score < 0.05, the results are considered statistically significant.

RESULTS AND DISCUSSION

Research Results Univariate Results

Table 1. Frequency Distribution of Respondent Characteristics of Third Trimester Mothers According to Mother's Age and Last Education at Hadijah Pratama Clinic

No.	Respondent Characteristics	Frequency (f)	Percentage (%)
1	**Mother's Age**		
	20-25 Years	7	17.5
	26-30 Years	20	50.0
	31-40 Years	13	32.5
	Total	40	100.0
2	**Education**		
	SD	1	2.5
	JUNIOR HIGH SCHOOL	4	10.0
	SENIOR HIGH SCHOOL	27	67.5
	D3	2	5.0
	S1	6	15.0
	Total	40	100.0

From table 1, the results obtained were that the average number of mothers aged 20-25 years was 7 people (17.5%), mothers aged 26-30 years, 20 people
(50.0%), mothers aged 31-40 years old were 13 people (32.5%). Mothers with elementary school education numbered 1 person (2.5%), mothers with junior high school education numbered 4 people (10.0%), mothers with high school education numbered 27 people (67.5%), mothers with D3 education numbered 2 people (5.0%), mothers with S1 education numbered 6 people (15.0%).

Table 2. Distribution of Frequency of Increase in Mothers' Insight in the Third Trimester regardingExclusive Breastfeeding Before Being Given Lactation Counseling at the Pratama Hadijah Clinic

No	Respondent Characteristics	Frequency (f)	Percentage (%)
	Knowledge		
	Good	11	27.5

Enough	11	27.5
Not enough	18	45.0
Total	40	100.0

From the measurement results in Table 2, it was found that before the implementation of lactation counseling, the dominant level of knowledge of mothers was classified as Poor, totaling 18 people (45.0%), Sufficient, totaling 11 people (27.5%), and the minority group was classified as Good knowledge, totaling 11 people (27.5%).

Table 3. Distribution of Frequency of Increase in Mothers' Insight in the Third Trimester regardingExclusive Breastfeeding After Lactation Counseling at the Hadijah Inpatient Clinic

No	Respondent Characteristics	Frequency (f)	Percentage (%)
	Knowledge		
	Good	32	80.0
	Enough	8	20.0
	Total	40	100.0

From the measurement results in Table 3, it shows that after receiving lactation counseling, there was a change in the level of knowledge of mothers with the category of Sufficient amounting to 8 people (20.0%) and the category of Good amounting to 32 people (80.0%).

Bivariate Results (Wilcoxon Signed Rank Test)

Table 4. Impact of Providing Lactation Counseling on Increasing Mothers' Insights Regarding Exclusive Breastfeeding Before (pretest) and After (posttest) Receiving Lactation Counseling at the Hadijah Primary Clinic

Variabel	*Mean Rank*	*Sum of Rank*	*N*	*Z*	*P Value*
Negative Ranks	0.00	0.00	0		0.00
Positive Ranks	14.00	378.00	27	-4.686	

Based on Table 4, there is a significant change in the level of knowledge of mothers before and after being given lactation counseling on exclusive breastfeeding, depicting 21 participants experiencing an increase in knowledge with a Mean Rank score of 14.00 and there is a similarity value or ties in this study amounting to 13 respondents from before to after counseling. The results of the analysis using the Wilcoxon test showed a p score of 0.00, which means p <0.05. Therefore, the alternative hypothesis (Ha) is approved and the null hypothesis (Ho) is rejected, so it can be concluded that lactation counseling has a significant impact on increasing maternal insight regarding exclusive breastfeeding.

DISCUSSION

Level of Mother's Knowledge Before Undergoing Lactation Counseling

Based on the results of research conducted at the Hadijah Inpatient Clinic before lactation counseling was carried out, there were 40 mothers at the Hadijah Inpatient Clinic who had a good level of knowledge, 11 people (27.5%), sufficient knowledge, 11 people (27.5%), most of whom were at the poor level of knowledge, namely 18 people (45.0%). Insight assessment is carried out through questionnaires or interviews containing questions regarding the material to be evaluated from the research subjects or respondents (Arikunto, 2020).

Counseling is a form of collaboration between a midwife as a counselor and a client to identify and understand the problems encountered by the client. In order for the counseling process to run effectively, openness is needed between the midwife and the client in order to find solutions to existing problems. Lactation counseling begins with an ANC visit in the third trimester, where the midwife provides an explanation to the mother regarding the stages, benefits, understanding, procedures, and various myths related to Early Initiation of Breastfeeding (IMD) and exclusive breastfeeding. Through this counseling, it is hoped that pregnant women can understand how important exclusive breastfeeding is and commit to providing it for six months (N. Nurfatimah et al., 2019).

Failure to breastfeed can be caused by internal factors, such as the mother's level of knowledge, education, and age, as well as external factors, such as the promotion of formula milk and proper breastfeeding techniques. If postpartum mothers do not apply the correct breastfeeding technique, various obstacles can arise in the breastfeeding process. These obstacles include sore nipples and breast swelling, which can reduce the mother's ability to provide optimal breast milk. As a result, the baby is also unable to breastfeed properly, so that breast milk production is not smooth and the baby does not get enough breast milk. Lactation counseling is a series of efforts made to support the success of mothers in breastfeeding their babies. This process takes place in three phases, namely during pregnancy (antenatal), during childbirth until the mother is discharged from the hospital (perinatal), and during breastfeeding until the child reaches the age of two years (postnatal) (S. Emilda et al., 2024).

In lactation counseling, health workers routinely provide education about exclusive breastfeeding to each pregnant woman who goes for pregnancy check-ups at the health center. In addition, they also always explain the importance of Early Initiation of Breastfeeding (IMD). The explanations provided include the benefits of exclusive breastfeeding, its nutritional content, and the advantages of breast milk, such as affordable costs, ease of administration, its role as an anti-infection factor, and its ability to strengthen emotional bonds between mother and child (N. Nurfatimah et al., 2019).

Level of Mother's Knowledge After Lactation Counseling

From the results of research that has been conducted at the Hadijah Inpatient Pratama Clinic, after providing intervention there was a change in the level of knowledge of mothers before and after lactation counseling was carried out, namely an increase in the level of knowledge of mothers where there were 32 people (80.0%) mothers with a good level of insight, and mothers with a sufficient level of insight totaling 8 people (20.0%). The results of the research that has been carried out obtained that from the Wilcoxon test, a p value score of 0.00 <0.05 was obtained, which means that there is a significant relationship between the insight of pregnant women in the third trimester regarding exclusive breastfeeding.

The analysis results obtained p = 0.558 (p> 0.05) which means there is no relationship between maternal education and exclusive breastfeeding. This is in line with research conducted by (H Assriyah et al., 2020) there is no significant relationship between maternal education and exclusive breastfeeding. The low level of maternal education can affect the basic ability to think and make decisions, especially regarding exclusive breastfeeding. However, factors that impact exclusive breastfeeding are not only limited to the level of education, but also the insight that mothers have regarding the importance of exclusive breastfeeding. This insight can be obtained through various sources, such as health education, brochures, and information provided by health workers when visiting the integrated health post.

Exclusive breastfeeding plays an important role in increasing the baby's immunity against various diseases, such as diarrhea, pneumonia, and upper respiratory tract infections (URTIs). In addition, mothers need to immediately take their babies to the Posyandu or Puskesmas if the baby is sick, and to monitor nutritional status, vitamins, immunizations, and ensure that the baby gets exclusive breastfeeding. Health workers, especially midwives, play a role in reducing the failure rate of exclusive breastfeeding in breastfeeding mothers and changing the mindset of the community, especially mothers and families, so that they realize the importance of exclusive breastfeeding and do not allow babies to grow without optimal intake. In addition, health workers can play a role in providing health education about exclusive breastfeeding, from feeding techniques to its benefits for mothers and babies. They can also provide information to improve mothers' understanding of the implementation of lactation counseling in supporting exclusive breastfeeding. With adequate insight, mothers will be more aware of the importance of exclusive breastfeeding for the growth and health of their babies (M. Frisilia et al., 2022).

The Influence of Lactation Counseling on Increasing Mothers' Knowledge

Based on the research results, it can be concluded that out of 40 respondents at the Hadijah Inpatient Pratama Clinic, there were 8 respondents with sufficient knowledge (20.0%), while there were 32 respondents with good knowledge (80.0%). From the results of the analysis of the difference test using the Wilcoxon test, there was a significant change ($p < 0.05$), namely the score before and after the Asymp.sig.(2-tailed) intervention was 0.00, so Ha was approved and Ho was rejected. These results prove that lactation counseling has an impact on increasing maternal insight regarding exclusive breastfeeding. Mothers who receive complete breastfeeding counseling are 5.8 times more likely to provide exclusive breastfeeding than mothers who do not receive counseling. Breastfeeding counseling includes various efforts carried out by health workers (counselors) to encourage mothers to achieve success in breastfeeding their babies. In general, the purpose of counseling is to encourage clients to change health-related habits, so that they can improve their well-being and health quality.

The mother's education level does not always determine the success of exclusive breastfeeding for her baby, but it can be one of the factors that hinder the process. Education plays a role in influencing the learning stage, where the higher a person's education level, the faster he or she understands and absorbs information (R. Sakinah et al., 2024).

Several factors that influence exclusive breastfeeding include maternal characteristics, such as age, education, and insight; infant characteristics, such as health conditions and birth weight; environmental factors, including place of residence, family support, beliefs, and socio-economic conditions; and aspects of health services, such as location of delivery, lactation counseling, pregnancy check-ups, medical personnel assisting with delivery, and policies implemented. All of these factors play a role in shaping the expected behavior in exclusive breastfeeding (Saputra, Aria Dwi 2020).

With the existence of intensive lactation counseling, it can encourage pregnant women to increase their knowledge, skills and abilities to overcome obstacles in breastfeeding. The purpose of the research is to reveal the relationship between lactation counseling in breastfeeding and the success of mothers in providing exclusive breast milk (ASI) at the Hadijah Inpatient Pratama Clinic (EASE AS et.,al 2023).

From the results of this research, the results obtained prove that before the implementation of lactation counseling, all mothers who had a low level of knowledge were 18 people, a sufficient level of insight was 11 people, and a good level of insight was 11 people. After the implementation of lactation counseling, changes in results were obtained since before the implementation of lactation counseling, namely 8 mothers with a sufficient level of insight, and 32 mothers with a good level of insight.

Research shows that mothers who receive encouragement from their husbands are twice as likely to provide exclusive breastfeeding than mothers who do not receive such encouragement. Several factors that interfere with exclusive breastfeeding include the lack of insight of mothers and family members regarding the importance of breast milk and proper breastfeeding techniques, lack of support from health workers and lactation counseling services, working conditions of mothers, aggressive promotion of formula milk, and socio-cultural factors (Aria Dwi Saputra et al., 2021).

In this study, the majority of mothers were aged between 20-35 years with an average education level equivalent to high school. This proves that the majority of mothers are of productive age. Baskoro stated that age plays a role in influencing a person's mindset and comprehension. As age increases, a person's thinking ability and understanding also develop, so the insight and experience gained regarding exclusive breastfeeding tend to increase. There is a relationship between age and the level of knowledge of mothers (YV Editia et al., 2021).

Research conducted by (AD Retnoningrum et al. 2024) supports this finding, where age affects the readiness and ability of mothers to undergo breastfeeding. The age range of 20-35 years is considered a productive age and the most optimal for reproduction, so that breastfeeding ability is also at an optimal level. Meanwhile, ages over 35 years are categorized as those at high risk for pregnancy and childbirth, which can cause a decrease in breastfeeding ability along with the aging process of the organ system. Meanwhile, mothers who are under 20 years old are still experiencing reproductive organ development that is not fully mature, so psychologically they are also considered not ready to take on the role of a mother. This can have an impact on the process of providing exclusive breastfeeding. These factors have a significant influence on the success of providing exclusive breastfeeding for babies. If one of these factors is not applied properly and correctly to breastfeeding mothers, it can contribute to the low rate of exclusive breastfeeding (A. Rahmawati et al., 2020).

Mothers with adequate knowledge are more likely to provide exclusive breastfeeding. Mothers' understanding of the benefits of breastfeeding will increase if they receive adequate information and encouragement during pregnancy and childbirth. In addition, the intensity of counseling is also a factor that plays a role in increasing maternal knowledge. The more often mothers interact with counselors, the more information they

receive, which ultimately contributes to increasing mothers' understanding of exclusive breastfeeding (EASE AS et al., 2023).

Breastfeeding counseling is an effort carried out by counselors or health workers to support mothers to understand their condition, identify the problems they face, and together find the most appropriate solution without pressure. Counseling that is provided appropriately can increase the mother's motivation to breastfeed. Therefore, each mother who has just given birth, especially primigravida mothers who are experiencing their first delivery, needs to receive counseling to be better prepared to breastfeed. There are differences in the level of insight of mothers regarding breastfeeding before and after receiving counseling, so it can be concluded that counseling plays a role in increasing the mother's understanding of breastfeeding her baby. It is hoped that breastfeeding mothers will be more proactive in seeking information about the benefits of exclusive breastfeeding, so that they can increase their motivation to provide optimal breast milk. In addition, health workers, especially midwives, are expected to strengthen the role of the community in supporting exclusive breastfeeding through ongoing counseling or counseling (S. Suhaibaton et al., 2023)

CONCLUSION AND SUGGESTIONS

Conclusion

From the results of the research conducted, it can be concluded that there is a difference in the level of knowledge of mothers in the third trimester before and after lactation counseling, where the mothers' knowledge increased and entered the category of good knowledge status.

Suggestion

Based on the results of this research, the researcher wrote the following suggestions:

1. **Educational Institutions.**
   It can be used as learning material and to add references to the world of education regarding the relationship between lactation counseling and the level of maternal insight for providing exclusive breastfeeding.
2. **Pregnant Women in the Third Trimester.**
   It is hoped that it can be a source of information for mothers who have babies to increase understanding of the benefits of lactation counseling in increasing mothers' insight into providing exclusive breastfeeding.
3. **Research Place .**
   It is hoped that this can be a step in improving the quality of service and creating new innovations related to the relationship between lactation counseling and the level of maternal insight regarding exclusive breastfeeding at the Hadijah Inpatient Primary Clinic.
4. **Further Research.**
   It is hoped that it can broaden knowledge and insight and become a reference or guideline for further research on the relationship between lactation counseling and the level of maternal insight regarding exclusive breastfeeding.

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