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Abstract

Exclusive breastfeeding plays a vital role in ensuring optimal nutrition for infants aged 0–6 months. Nevertheless, its coverage remains low in several areas, including West Aceh Regency. This study aimed to analyze the relationship between sociodemographic factors and exclusive breastfeeding practices among mothers of children aged 6–59 months in the Drien Rampak Public Health Center, Arongan Lambalek Subdistrict. Using an analytical survey with a cross-sectional design, a total of 267 respondents were selected through accidental sampling. Data were collected via questionnaires and analyzed using the chi-square test. The findings indicated significant associations between maternal knowledge (p=0.000), maternal education (p=0.000), maternal occupation (p=0.000), and economic status (p=0.017) with exclusive breastfeeding practices. Conversely, paternal education (p=0.080) and paternal occupation (p=0.290) did not show significant relationships. These results suggest that maternal knowledge, education, and occupation are key determinants in the success of exclusive breastfeeding, while paternal factors have a less direct influence. Strengthening maternal education and awareness, alongside supportive occupational conditions and adequate economic resources, may enhance exclusive breastfeeding rates in the region.

Keywords: Exclusive Breastfeeding, Socio-Demographics

INTRODUCTION

Exclusive breastfeeding (ASI) is the provision of breast milk without any additional food or drink to infants from birth to six months of age. Breast milk covers all the nutritional needs of infants during the early stages of growth and development and plays a vital role in strengthening the infant's immune system against infection and disease. Proper exclusive breastfeeding provides long-term benefits for a child's cognitive and emotional development (WHO, 2021). According to the WHO and UNICEF report published in the Global Breastfeeding Scorecard in 2023, the global rate of exclusive breastfeeding in the first six months of life has increased by 10% over the past decade and reached 48% in 2023, approaching the World Health Assembly target of 50% by 2025. This exclusive breastfeeding rate is 10% higher than a decade earlier, indicating that significant progress is possible and has occurred in various countries (Global Breastfeeding Scorecard, 2023).

Based on the 2023 Indonesian Health Survey (SKI), exclusive breastfeeding coverage in Indonesia reached 55.5% (95% CI: 54.4%–56.5%) from 23,594 weighted respondents. According to the 2022 Indonesian Health Profile, the national percentage was 61.5% and increased to 63.9% in 2023. In Aceh Province, exclusive breastfeeding coverage in 2023 was 49.9% (95% CI: 46.1%–53.7%) from 514 weighted respondents, below the national average. According to the 2022 Indonesian Health Profile, the coverage of exclusive breastfeeding practices in Aceh Province in 2022 was 49.4% and increased to 50.2% in 2023 (Ministry of Health of the Republic of Indonesia, 2023). Based on 2024 data, exclusive breastfeeding coverage for infants under six months of age in West Aceh Regency averaged 85.5%, with Bubon, West Woyla, East Woyla, and Panton Reu Districts achieving 100%. Meureubo and Pante Ceureumen Districts also recorded high rates of 95.8% and 94.2%, respectively (West Aceh District Health Office, 2023). Meanwhile, exclusive

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breastfeeding coverage at the Drien Rampak Community Health Center in Arongan Lambalek District was only 51.2%, the lowest in West Aceh, meaning half of infants in the region did not receive exclusive breastfeeding (Drien Rampak Community Health Center, 2024). Maternal knowledge and access to information play a crucial role in the practice of exclusive breastfeeding. Research by Fitriyanti et al. (2023) found that maternal knowledge levels were significantly associated with exclusive breastfeeding. Furthermore, maternal interactions with health workers, nutritional counseling, and prenatal education have been shown to increase awareness of the benefits of breastfeeding. This underscores the importance of strengthening health promotion through participatory and community-based approaches.

Fathers' and mothers' education is a crucial factor influencing the success of exclusive breastfeeding, as higher levels of education tend to improve mothers' knowledge, attitudes, and skills in understanding the importance of breastfeeding for infant growth and development. Likewise, fathers' education levels influence perceptions of the benefits and risks of breastfeeding, so more educated fathers tend to support mothers' decisions to exclusively breastfeed. (Kowal et al, 2022). Fathers' and mothers' employment status is an important factor influencing exclusive breastfeeding. A study by Syahri et al. (2024) found that working mothers tend to have a lower probability of maintaining exclusive breastfeeding than non-working mothers. However, this study aligns with a previous study by Winingsih & Yanuarti (2023) that found that husbands' employment did not significantly influence the success of exclusive breastfeeding practices, due to Seeing the importance of the practice of exclusive breastfeeding, the aim of this study was to determine the relationshipSocio-demographics include the relationship between maternal knowledge, father's and mother's education, father's and mother's occupation, and economic status with exclusive breastfeeding by mothers of toddlers aged 6-59 months in the working area of the Drien Rampak Health Center, Arongan Lambalek District.

LITERATURE REVIEW

1. Exclusive Breastfeeding

Breast milk (ASI) is the best source of nutrition and is highly recommended for infants aged 0–6 months, also known as exclusive breastfeeding. Exclusive breastfeeding is the primary foundation for optimal growth and development, which will produce a quality generation. Therefore, exclusive breastfeeding plays a significant role in developing the quality of human resources (Sutriyawan & Nadhira, 2020). This is because breast milk contains complete nutrients, is easily absorbed by the body, and provides protective antibodies against infections and allergies. Breast milk also supports intelligence, emotional stability, and optimal neurological development in children. Therefore, exclusive breastfeeding is essential for infant health and intelligence (Sutanto, 2018).

Breast milk contains complete nutrition in the form of macronutrients such as water, protein, fat, carbohydrates, and carnitine that support the baby's metabolism, growth, and development (Wijaya, 2019), and protect babies from viral, bacterial, fungal, and parasitic infections (Cynthia et al, 2019). Therefore, if babies are not fully breastfed until the first six months of life, they are at risk of developing severe and fatal diarrhea. This risk is 30 times greater than for babies who are fully breastfed (Sunarto et al, 2022), and babies are more susceptible to chronic diseases, such as heart disease, hypertension, and diabetes, suffering from malnutrition and obesity (Juniar et al, 2023).

2. Factors Influencing Exclusive Breastfeeding

The practice of exclusive breastfeeding is a healthy behavior. According to Lawrence Green in Notoadmodjo (2015), this behavior is determined by three main factors: predisposing, enabling, and reinforcing factors, as explained below (Pakpahan et al., 2021):

- Predisposing factors are factors that facilitate a person's behavior. These factors are manifested in knowledge, attitudes, beliefs, convictions, culture, and sociodemographic factors.
- Enabling factors are factors that facilitate a behavior. Supporting factors include health facilities and infrastructure.

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• Reinforcing factors are factors that encourage or strengthen a behavior. These factors are manifested in the attitudes and behavior of health workers or other personnel who constitute the community's behavioral reference group.

3. Socio-Demographic Factors of Exclusive Breastfeeding

Sociodemographic factors influencing exclusive breastfeeding, as research conducted by Putri & Naim (2021) and several other studies, include knowledge, education, employment, and economic status. These factors can be further explained as follows:

Mother's Knowledge

The knowledge possessed by an individual is one of the determining factors in seeking health services. Mothers' knowledge about exclusive breastfeeding is the result of their understanding and responses after experiencing information about it. Mothers who have good insight into the meaning, benefits, and risks of not exclusively breastfeeding tend to be more motivated to provide exclusive breastfeeding (Paramitha, 2022).

• Father's Education

Highly educated fathers are more receptive to information. They are able to accept and absorb any information provided, which can then be applied to their childcare. Furthermore, fathers with higher education are more likely to be receptive to information, as evidenced by their willingness to participate in taking mothers and children to health care providers and facilities (Nilakesuma & Ariyani, 2018).

• Mother's Education

Higher maternal education makes it easier for mothers to access and understand health information, thereby increasing their awareness of the importance of exclusive breastfeeding for six months without supplemental feeding. Meanwhile, mothers with lower education tend to have limited access to complex information, which can influence their decision-making regarding breastfeeding (Rahman et al., 2020).

Father's occupation

The father's employment status influences the mother's time and opportunity to provide exclusive breastfeeding, where Fathers who have more time at home tend to support their wives in continuing to breastfeed and help reduce the household burden, so that mothers can focus on breastfeeding their babies (Siregar et al, 2021).

Mother's Job

Fathers' employment status influences mothers' time and opportunity to exclusively breastfeed. Mothers who work outside the home often face time constraints, limitations on breastfeeding at work, and work pressures that can reduce breastfeeding frequency. Conversely, mothers who do not work have greater flexibility in their time to breastfeed directly, thus tending to have higher rates of exclusive breastfeeding success (Putri & Naim, 2021).

Economic Status

The Health Belief Model theory states that economic status plays a significant role in shaping mothers' perceptions of health behaviors, with mothers from low-income families tending to have better access to health information and support. Lawrence Green's theory also includes economic status as a predisposing factor that supports or hinders health practices, including exclusive breastfeeding (Dewi & Pratiwi, 2021).

METHODOLOGY

This research is an analytical survey using a cross-sectional design. In this study, researchers collected data to determine the independent and dependent variables in the population at the same time. The population in this study were mothers who have toddlers aged 6-59 months in the Working Area of the Drien Rampak Community Health Center, Arongan Lambalek District, West Aceh Regency, totaling 892 mothers of toddlers. The sampling technique used was accidental sampling, namely a sampling

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technique that occurs by chance at the time and place of the study according to the inclusion and exclusion criteria. The inclusion criteria in this study included mothers who have toddlers aged 6-59 months, residing in the working area of the Drien Rampak Community Health Center, willing to be respondents and complete the questionnaire completely. The exclusion criteria included mothers who were unable to communicate well during data collection and mothers or toddlers who were seriously ill when the study was conducted. The number of samples was determined using the Lemeshow formula as follows:

$$n = \frac{(Z_{1-n/2})^2 PqN}{d^2(N-1) + (Z_{1-n/2})^2 Pq}$$

Information:

n : Number of samplesN : Population sizeZ 1-n/2: Standard value = 1.96

P : Proportion of preliminary research =0.45

q : 1-P = 0.55

d : Alpha (0.05) or sampling error = 5%

Based on the calculations above, the sample size for this study was 267 mothers of toddlers aged 6-59 months. The sample was evenly distributed using proportional sampling across 27 villages within the Drien Rampak Arongan Lambalek Community Health Center's working area, with 9-10 individuals per village. The research instrument used was a structured questionnaire that included questions about maternal knowledge, socio-demographic data on father's and mother's education, occupation, father's and mother's economic status, and questions about exclusive breastfeeding practices. Data collection was conducted through interviews using a questionnaire. The collected data were processed in stages by editing, coding, data entry, and cleaning. Data analysis consisted of univariate analysis to describe the characteristics of respondents and the frequency distribution of each variable, and bivariate analysis using the Chi-Square test to determine the relationship between the independent and dependent variables with a significance level of p <0.05.

RESEARCH RESULT

1. Respondent Data Characteristics

Based on the results of data collection and processing that the researcher has carried out, the following characteristics of respondent data were obtained regarding age, father's education, mother's education, father's occupation, mother's occupation, and economic status:

Table 1.Respondent Data Characteristics

Characteristics	Frequency	Percentage
Age		
20-24 Years	61	22.8
25-29 Years	86	32.2
30-34 Years	68	25.5
35-40 Years	52	19.5
Father's Education		
Didn't finish elementary	37	13.9
school		
Elementary School	47	17.6
JUNIOR HIGH SCHOOL	52	19.5
SENIOR HIGH SCHOOL	95	35.6
College	36	13.5
Mother's Education		

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32	12.0
48	18.0
54	20.2
89	33.3
44	16.5
8	3.0
31	11.6
56	21.0
138	51.7
34	12.7
9	3.4
16	6.0
61	22.8
181	67.8
49	18.4
111	41.6
107	40.1
267	100.0
	48 54 89 44 8 31 56 138 34 9 16 61 181 49 111 107

Source: Primary Data (Processed, 2025)

Based on Table 1, it is known that the largest number of respondents according to age group are respondents aged 25–29 years at 32.2% and the fewest are respondents aged 35–40 years at 19.9%. Meanwhile, the highest father's education was high school at 35.6% and the lowest was college at 13.5%. Meanwhile, the highest mother's education was high school at 33.3% and the lowest was not graduated from elementary school at 12.0%. According to the data obtained, most fathers are known to work as farmers or fishermen at 51.7%, self-employed 21.0%, private sector 11.6%, unemployed 12.7%, and civil servants 3.0%. Meanwhile, most mothers are housewives at 67.8% self-employed 22.8%, private sector 6.0%, and civil servants 3.4%. Then, looking at the economic status, it shows that the majority of respondents have an income of more than IDR 2,500,000 per month, amounting to 40.1%, followed by respondents with a monthly income of IDR 500,000 – IDR 2,500,000, amounting to 41.6%, and an income of less than IDR 500,000 per month, amounting to 18.4%.

2. Univariate Analysis

Based on the results of data collection and processing that the researcher has carried out, univariate data was obtained regarding maternal knowledge, paternal education, maternal education, paternal occupation, maternal occupation, economic status and exclusive breastfeeding as follows:

Table 2. Univariate Data

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Variables	Frequency	Percentage						
Mother's Knowledge								
Not enough	202	75.7						
Enough	64	24.0						
Good	1	0.4						
Father's Education								

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Low Education	136	50.9	
higher education	131	49.1	
Mother's Education			
Low Education	134	50.2	
higher education	133	49.8	
Father's occupation			
Doesn't work	34	12.7	
Work	233	87.3	
Mother's Job			
Doesn't work	181	67.8	
Work	86	32.2	
Economic Status			
Low	49	18.4	
Currently	111	41.6	
Tall	107	40.1	
Exclusive Breastfeeding			
Not Exclusive Breastfeeding	152	56.9	
Exclusive Breastfeeding	115	43.1	
Total	267	100.0	

Source: Primary Data (Processed, 2025)

Based on Table 2, it is known that the majority of mothers have insufficient knowledge as much as 75.7%, followed by mothers with sufficient knowledge as much as 24.0% and mothers with good knowledge as much as 0.4%. Meanwhile, the level of father's education from the data obtained appears relatively balanced between the low education category as much as 50.9% and high education as much as 49.1%. Likewise, the mother's education is the low education category as much as 50.2% and high education as much as 49.8%. Then, looking at employment, it shows that the majority of respondents stated that their fathers worked as much as 87.3%, while those who did not work were 12.7%. The majority of mothers who stated that they did not work were 67.8% and mothers who worked were 32.2%. Looking at economic status, it shows that the most respondents were respondents with middle economic status as much as 41.6%, followed by high economic status as much as 40.1%), and low economic status as much as 18.4%.

3. Bivariate Analysis

Based on statistical analysis, bivariate data was obtained regarding the relationship between maternal knowledge, paternal education, maternal education, paternal occupation, economic status with exclusive breastfeeding in the Drien Rampak Community Health Center Working Area, Arongan Lambalek District as follows:

Table 3.The Relationship Between Mother's Knowledge and Exclusive Breastfeeding

By Mothers of Toddlers Aged 6-59 Months in the Community Health Center Work Area

Drien Rampak, Arongan Lambalek District

			reastfee	ick Di	Strict		
Mother's Knowledge	Not Exclusive Breastfeeding			usive feeding	A	mount	P.Value
	n	%	n	%	f	%	

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Not enough	131	64.9	71	35.1	202	100		
Enough	21	32.8	43	67.2	64	100	0,000	
Good	0	0.0	1	0.4	1	100		

Source: Primary Data (Processed, 2025)

Table 3 shows that mothers with less knowledge only provided exclusive breastfeeding at 35.1%. Meanwhile, mothers with good knowledge provided exclusive breastfeeding at 67.2%. The results of the Person Chi Square test analysis obtained a P.Value of 0.000 which is smaller than 0.05, which means there is a relationship between maternal knowledge and exclusive breastfeeding by mothers of toddlers aged 6-59 months in the Drien Rampak Community Health Center Working Area, Arongan Lambalek District, West Aceh Regency.

Table 4.The Relationship Between Father's Education and Exclusive Breastfeeding

By Mothers of Toddlers Aged 6-59 Months in the Community Health Center Work Area

Drien Rampak, Arongan Lambalek District

	Exclusive Breastfeeding				oren Dio		
Father's Education	Excl	Not Exclusive reastfeeding		Exclusive Breastfeeding		nount	P.Value
	n	%	n	%	f	%	
Low	85	62.5	51	37.5	136	100	0.000
Tall	67	51.1	64	48.9	131	100	0.080

Source: Primary Data (Processed, 2025)

Based on Table 4, it is known that mothers who stated that their fathers had a low level of education only provided exclusive breastfeeding at 29.1%. Meanwhile, mothers who stated that their fathers had a high level of education provided exclusive breastfeeding at 48.9%. However, although exclusive breastfeeding was more common among highly educated fathers than among low-educated fathers, The results of the Continuity Correction test analysis obtained a P.Value of 0.080, which is greater than 0.05, which means there is no relationship between father's education and exclusive breastfeeding by mothers of toddlers aged 6-59 months in the Drien Rampak Community Health Center Working Area, Arongan Lambalek District, West Aceh Regency.

Table 5.The Relationship Between Maternal Education and Exclusive Breastfeeding

By Mothers of Toddlers Aged 6-59 Months in the Community Health Center Work Area

Drien Rampak, Arongan Lambalek District

	Exc	lusive B	reastfee	_			
Mother's Education	Not Exclusive Breastfeeding		Exclusive Breastfeeding		Amount		P.Value
	n	%	n	%	f	%	
Low	95	70.9	39	29.1	134	100	0.000
Tall	57	42.9	76	57.1	133	100	0,000
Carres Duins aux Dat	D (D	ad 2025)					

Source: Primary Data (Processed, 2025)

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Table 5 shows that only 29.1% of mothers with low education exclusively breastfed their babies, while 57.1% of mothers with higher education exclusively breastfed their babies. The results of the Continuity Correction test obtained a P.Value of 0.000, which is smaller than 0.05, which means that there is a relationship between maternal education and exclusive breastfeeding by mothers of toddlers aged 6-59 months in the Working Area of the Drien Rampak Health Center, Arongan Lambalek District, West Aceh Regency.

Table 6.The Relationship Between Father's Occupation and Exclusive Breastfeeding By Mothers of Toddlers Aged 6-59 Months in the Community Health Center Work Area Drien Rampak, Arongan Lambalek District

	Exc	lusive B	reastfee				
Father's occupation	Not Exclusive Breastfeeding		Exclusive Breastfeeding		Amount		P.Value
	n	%	n	%	f	%	
Doesn't work	16	47.1	18	52.9	34	100	0.290
Work	136	58.4	97	41.6	233	100	0.290

Source: Primary Data (Processed, 2025)

Based on Table 6, it is known that mothers who stated that their fathers were employed were more likely to provide exclusive breastfeeding, at 52.9%. Meanwhile, mothers who stated that their fathers were unemployed were only 41.6%. However, despite the higher prevalence of exclusive breastfeeding among working fathers compared to non-working fathers, HThe results of the Continuity Correction test analysis obtained a P.Value of 0.290, which is greater than 0.05, which means there is no relationship between father's occupation and exclusive breastfeeding by mothers of toddlers aged 6-59 months in the Drien Rampak Community Health Center Working Area, Arongan Lambalek District, West Aceh Regency.

 Table 7. The Relationship Between Mother's Occupation and Exclusive Breastfeeding

By Mothers of Toddlers Aged 6-59 Months in the Community Health Center Work Area

Drien Rampak, Arongan Lambalek District									
Mother's Job	Exc	lusive B	reastfee						
	Not Exclusive Breastfeeding		Exclusive Breastfeeding		Amount		P.Value		
	n	%	n	%	f	%			
Doesn't work	86	47.5	95	52.5	181	100	0.000		
Work	66	76.7	20	23.3	86	100	0,000		

Source: Primary Data (Processed, 2025)

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Table 7 shows that non-working mothers are more likely to exclusively breastfeed, at 52.5%. Meanwhile, working mothers only exclusively breastfeed at 23.3%. The results of the Continuity Correction test analysis obtained a P.Value of 0.000, which is smaller than 0.05, which means that there is a relationship between maternal employment and exclusive breastfeeding by mothers of toddlers aged 6-59 months in the Drien Rampak Community Health Center Working Area, Arongan Lambalek District, West Aceh Regency.

Table 8.The Relationship Between Economic Status and Exclusive Breastfeeding By Mothers of Toddlers Aged 6-59 Months in the Community Health Center Work Area

Drien Rampak, Arongan Lambalek District

	Dittil	Kampak,	Aionge	iii Laiiioc	HCK DIS	uiici	
Economic Status	Exc	clusive B	Breastfee				
	Not Exclusive Breastfeeding		Exclusive Breastfeeding		Amount		P.Value
	n	%	n	%	f	%	_
Low	29	59.2	20	40.8	49	100	
Currently	73	65.8	38	34.2	111	100	0.017
Tall	50	46.7	57	53.3	107	100	

Source: Primary Data (Processed, 2025)

Table 8 shows that 40.8% of mothers with low economic status exclusively breastfed their babies. Meanwhile, 34.2% of mothers with middle economic status exclusively breastfed their babies. Meanwhile, 53.3% of mothers with high economic status exclusively breastfed their babies. The results of the Person Chi Square test obtained a P.Value of 0.017 which is smaller than 0.05, which means there is a relationship between economic status and exclusive breastfeeding by mothers of toddlers aged 6-59 months in the Working Area of the Drien Rampak Health Center, Arongan Lambalek District, West Aceh Regency.

DISCUSSION

1. The Relationship Between Mother's Knowledge and Exclusive Breastfeeding by Mothers of Toddlers Aged 6-59 Months in the Working Area of Drien Rampak Community Health Center, Arongan Lambalek District

The results of the study indicate a relationship between maternal knowledge and exclusive breastfeeding in the Drien Rampak Community Health Center, Arongan Lambalek District, where the majority of mothers with sufficient knowledge are more likely to exclusively breastfeed than those with less knowledge. Researchers assume that mothers with sufficient knowledge are more likely to receive adequate information from health workers, through outreach activities, and through health media. Therefore, mothers with sufficient knowledge tend to be more motivated to implement breastfeeding practices recommended by health workers. This research aligns with the study by Puspitasari et al. (2021),

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which found that maternal knowledge was associated with exclusive breastfeeding at the Ngemplak II Community Health Center in Sleman Regency. Research by Hartati & Arofah (2022) found that mothers with sufficient knowledge were 3.5 times more likely to exclusively breastfeed than mothers with less knowledge. Maternal knowledge plays a crucial role in exclusive breastfeeding. This is explained by various theories from Lawrence Green, who argues that knowledge is a predisposing factor that determines health behavior. This theory states that the higher the knowledge, the more likely mothers are to implement health practices (Pakpahan et al., 2021).

2. The Relationship Between Father's Education and Exclusive Breastfeeding by Mothers of Toddlers Aged 6-59 Months in the Working Area of Drien Rampak Community Health Center, Arongan Lambalek District

The results of the study showed no relationship between father's education and exclusive breastfeeding in the working area of Drien Rampak Community Health Center, Arongan Lambalek District, although the proportion of exclusive breastfeeding by mothers was more dominated by fathers with higher education compared to fathers with lower education. Researchers assume that father's education has less influence on decision-making in the practice of exclusive breastfeeding because exclusive breastfeeding is generally more influenced by internal factors of the mother, such as knowledge, awareness, experience and support from health workers and the immediate environment. Thus, the higher the father's education does not necessarily mean that he understands the importance of exclusive breastfeeding for the health and development of toddlers.

A similar study by Nilakesuma & Ariyani (2018) also found no correlation between education and exclusive breastfeeding practices among mothers in the Air Tawar Padang Community Health Center. This study stated that higher education does not necessarily contribute to exclusive breastfeeding. Conversely, lower education does not necessarily contribute to a negative impact on exclusive breastfeeding. However, according to the Health Belief Model theory, as proposed by Kowal et al (2022) Father's education influences perceptions of the benefits and impacts of not breastfeeding, so fathers with higher education are more likely to support the mother's decision to exclusively breastfeed.

3. The Relationship Between Mother's Education and Exclusive Breastfeeding by Mothers of Toddlers Aged 6-59 Months in the Working Area of Drien Rampak Community Health Center, Arongan Lambalek District

The results of the study indicate a relationship between maternal education and exclusive breastfeeding in the Drien Rampak Community Health Center, Arongan Lambalek District, where the majority of highly educated mothers tend to be more likely to exclusively breastfeed than mothers with lower education. Researchers assume that highly educated mothers have a significant impact on their mindset, ability to understand health information, and level of confidence in making decisions about exclusive breastfeeding practices. Furthermore, mothers with higher levels of education generally have access to broader health information and are able to understand messages conveyed by health workers. In line with this research, a study conducted by Wahyuni et al. (2023) emphasized that maternal education is an important predictor of exclusive breastfeeding practices in various rural areas. Meanwhile, research by Rahayu and Prasetyo (2020) found that mothers with at least a high school education were 2.8 times more likely to exclusively breastfeed than mothers who did not complete at least a high school education. According to Lawrence Green's theory, education is a predisposing factor that shapes maternal health behavior through mothers' knowledge and awareness of maternal and child health. In this case, the higher the mother's education level, the greater the likelihood of success in exclusive breastfeeding practices (Notoadmodjo, 2015).

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4. The Relationship Between Father's Occupation and Exclusive Breastfeeding by Mothers of Toddlers Aged 6-59 Months in the Working Area of Drien Rampak Community Health Center, Arongan Lambalek District

The results of the study showed that there was no relationship between father's occupation and exclusive breastfeeding in the working area of Drien Rampak Health Center, Arongan Lambalek District, although the proportion of exclusive breastfeeding by mothers was more dominated by working fathers compared to unworking fathers. In relation to the results of the study, the researcher assumed that father's occupation did not have a direct relationship with exclusive breastfeeding by mothers, because the type of work and the level of busyness of fathers were often related to longer working hours which caused fathers to pay less attention to mothers in the practice of exclusive breastfeeding, so that the decision to provide exclusive breastfeeding was more determined by the knowledge, education and work factors of the mother.

The results of this study align with a previous study by Winingsih & Yanuarti (2023), which found that employment did not significantly influence the success of exclusive breastfeeding practices. Meanwhile, research by Destriatania et al. (2023) emphasized that mothers' well-informed attitudes were far more important than whether or not fathers were employed. However, according to Lawrence Green's theory, as statedRosyada & Putri (2021) statedThe occupation of family members, both mother and husband, can be a supporting factor (enabling factors), because it can determine the family's economic capacity, access to health services, and the availability of facilities to support exclusive breastfeeding (Pakpahan et al, 2021).

5. The Relationship Between Mother's Occupation and Exclusive Breastfeeding by Mothers of Toddlers Aged 6-59 Months in the Working Area of Drien Rampak Community Health Center, Arongan Lambalek District

The results of the study indicate a relationship between maternal employment and exclusive breastfeeding in the working area of Drien Rampak Community Health Center, Arongan Lambalek District, although the proportion of exclusive breastfeeding by mothers is more dominated by mothers who do not work compared to mothers who do work. Based on these results, researchers assume that maternal employment factors have an indirect relationship in the practice of exclusive breastfeeding, because working mothers can breastfeed at work despite the lack of time to breastfeed. However, mothers who do not work tend to be easier to breastfeed their babies, because mothers who do not work have unlimited time which can hinder the practice of exclusive breastfeeding.

These results align with several studies by Winingsih & Yanuarti (2023) which state that working mothers tend to have lower rates of exclusive breastfeeding success than non-working mothers, with the main reasons being limited time and a lack of breastfeeding support facilities in the workplace. Research by Marlina & Fitriyani (2022) found that a mother's employment status is a factor influencing the success of exclusive breastfeeding, where housewives have a greater opportunity to provide optimal breastfeeding. According to the Health Belief Model theory, working mothers often face practical obstacles such as limited breastfeeding time, so that perceptions of these obstacles influence the decision to exclusively breastfeed.(Rahayu & Hidayat, 2023).

6. The Relationship Between Economic Status and Exclusive Breastfeeding by Mothers of Toddlers Aged 6-59 Months in the Working Area of Drien Rampak Community Health Center, Arongan Lambalek District

The results of the study showed a relationship between economic status and exclusive breastfeeding in the working area of Drien Rampak Community Health Center, Arongan Lambalek District, where the majority of mothers with high economic status have a greater tendency to provide exclusive breastfeeding

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compared to mothers with medium or low economic status. In relation to the results of the study, the researcher assumes that economic status is directly related to the practice of mothers in providing exclusive breastfeeding, because it is related to the mother's attitude to spend more time with her baby than looking for work, because it is supported by a sufficient household income. This research aligns with a study conducted by Yanti et al. (2025) which found a significant relationship between economic status and mothers' interest in exclusive breastfeeding in the Kuala Bhee Community Health Center (Puskesmas) work area. A study conducted by Mirawati & Asthiningsih (2021) also showed a relationship between socioeconomic status and exclusive breastfeeding at the Integrated Health Service Post (Posyandu) in the Harapan Baru Samarinda Community Health Center work area. In accordance with Lawrence Green's theory, economic status is a predisposing factor that can support health practices. According to Dewi & Pratiwi (2021), mothers with high economic status will have the perception to breastfeed consistently because the household has sufficient income to meet the needs of their children.

CONCLUSION AND SUGGESTIONS

Based on the research results that have been presented, it can be concluded that the factors of maternal knowledge, maternal education, maternal occupation and economic status are related to the provision of exclusive breastfeeding by mothers of toddlers 6-59 in the Working Area of Drien Rampak Health Center, Arongan Lambalek District, West Aceh Regency. Meanwhile, the factors of father's education and father's occupation are not related to the provision of exclusive breastfeeding by mothers of toddlers 6-59 in the Working Area of Drien Rampak Health Center, Arongan Lambalek District, West Aceh Regency. This study is recommended for Drien Rampak Health Center to improve counseling and education programs for mothers of toddlers, especially through integrated health posts (posyandu) and home visits, with materials that emphasize the importance of exclusive breastfeeding.

THANK-YOU NOTE

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REFERENCES

- Cynthia, R., Anam, R. M., & Siregar, A. Y. M. (2019). ASI Eksklusif dan Kesehatan Bayi: Manfaat Jangka Panjang. *Jurnal Kesehatan Anak Indonesia*, 8(1), 12–19.
- Destriatania, R., Widyawati, N. H., & Achadi, E. L. (2023). Sikap Ayah dan Jumlah Anak serta Praktik Air Susu Ibu Eksklusif. *Jurnal Ilmu Kesehatan Masyarakat*, 9(2), 120–128
- Dewi, M. N., & Pratiwi, I. G. A. M. (2021). Hubungan Status Gizi dan Produksi ASI pada Ibu Menyusui di Kota Denpasar. *Jurnal Kesehatan Ibu dan Anak*, 5(1), 45–52.
- Dinkes Aceh Barat. (2023). *Profil Kesehatan Kabupaten Aceh Barat 2023*. Meulaboh, Dinas Kesehattan Kabupaten Aceh Barat.
- Fitriyanti, F., Kusumajaya, H., & Fitri, N. (2023). Faktor-faktor Yang Berhubungan Dengan Rendahnya ASI Eksklusif. *Jurnal Penelitian Perawat Profesional*, *5*(2), 667–676.



- Global Breastfeeding Scorecard. (2023). Rates Of Breastfeeding Increase Around The World Through Improved Protection And Support. World Health Organization (WHO), Geneva, Switzerland & United Nations Children's Fund (UNICEF) New York, USA.
- Hartati, R., & Arofah, L. (2022). Hubungan Pengetahuan Ibu Tentang ASI Eksklusif Dengan Praktik Pemberian ASI Eksklusif di Wilayah Kerja Puskesmas Kuta Malaka. *Jurnal Kesehatan Aceh*, 7(2), 45–53.
- Juniar, F., Akhyar, K., & Kusuma, I.R. (2023). Faktor Faktor yang Mempengaruhi Ketidakberhasilan ASI Eksklusif pada Ibu Menyusui. *Jurnal Riset Kesehatan Masyarakat*, 3(4), 185 191.
- Kemenkes RI. (2023). *Profil Kesehatan Indonesia* 2023. Jakarta: Kementerian Kesehatan Republik Indonesia.
- Kowal, R. R., Wakkary, A. M. F., Karamoy, I. O., & Damita, Y. (2022). Peran Strategis Pendidikan Keluarga Dalam Membentuk Karakter Anak: Suatu Tinjauan Teoritis Dan Praktis. *Inculco Journal of Christian Education*.
- Marlina, L., & Fitriyani, Y. (2022). Faktor Determinan Keberhasilan ASI Eksklusif: Peran Ayah dan Pekerjaan Ibu. *Berkala Kesehatan*, 8(1), 77–86.
- Mirawati, & Asthiningsih, N.W.W. (2021). Hubungan Antara Status Sosial Ekonomi dan Dukungan Keluarga dengan Pemberian ASI Eksklusif pada Bayi Usia 6-12 Bulan di Posyandu Wilayah Kerja Puskesmas Harapan Baru Samarinda. *Borneo Student Research*, 2(2), 887 894.
- Nilakesuma, N.F & Ariyani, F. (2018). Keberhasilan ASI Eksklusif di Wilayah Kerja Puskesmas Air Tawar Padang Ditinjau Dari Karakteristik dan Peran Ayah. *Menara Ilmu, 12*(80), 97 106.
- Notoatmodjo, S. (2015). Ilmu Perilaku Kesehatan. Jakarta: Rineka Cipta.
- Pakpahan, M., Siregar, D., Susilawaty, A., & Tasnim. (2021). *Promosi Kesehatan dan Perilaku Kesehatan*. Yayasan Kita Menulis.
- Paramitha, D. (2022). Hubungan Pengetahuan Ibu dengan Pemberian ASI Eksklusif. *Jurnal Ilmu Kesehatan*, 11(2), 123 130.
- Puskesmas Drien Rampak, 2024). *Data Balita di Puskesmas Drien Rampak*. Kecamatan Arongan Lambalek, Kabupaten Aceh Barat.
- Puspitasari, D. A., Sari, N. M., & Widyaningsih, E. (2021). Hubungan Pengetahuan Ibu Dengan Pemberian ASI Eksklusif di Puskesmas Ngemplak II Sleman. *Jurnal Ilmu Keperawatan dan Kebidanan*, *12*(1), 27–34.
- Putri, A.A.D., & Naim, S. (2021). Determinan Pemberian ASI Eksklusif: Analisis Data Sekunder Survei Demografi dan Kesehatan 2017. *Amerta Nutr*, 284 291.
- Rahayu, R.M & Hidayat, A. (2023). Ketersediaan Ruang Laktasi terhadap Pemberian ASI Eksklusif pada Ibu Bekerja. *Scoping Review. Jurnal Ilmu Kemasyarakatan*, 12(1), 20 27.
- Rahayu, S., & Prasetyo, D. (2020). Hubungan Antara Tingkat Pendidikan Ibu dengan Pemberian ASI Eksklusif di Wilayah Puskesmas Wonokromo Surabaya. *Jurnal Promkes*, 8(1), 12 19.
- Rahmah, N., Siregar, R., & Yusuf, Y. (2023). Pengaruh Pendidikan dan Sosial Ekonomi terhadap Pemberian ASI Eksklusif. *Jurnal Ilmu Kesehatan Prima*, 17(1), 35–42.
- Rosyada, A., & Putri, D. A. (2018). Peran Ayah ASI Terhadap Keberhasilan ASI Eksklusif di Wilayah Kerja Puskesmas 23 Ilir Kota Palembang. Jurnal Berkala Kesehatan, 4 (2), 70 74.
- Siregar, A. Y. M., Pitriyan, P., & Walters, D. (2021). The role of fathers in supporting exclusive breastfeeding in Indonesia: Evidence from demographic and health survey. BMC Public Health, 21(1), 1–10.
- SKI. (2023). Survey Kesehatan Indonesia Tahun 2023. Jakarta: Kemenkes RI.
- Sunarto. (2022). Support Tipe Keluarga Terhadap Kegagalan Cakupan ASI Eksklusif. *Jurnal Penelitian Kesehatan Suara Forikes*, *13*(2), 467 475.
- Sutanto, D. (2018). Manajemen Laktasi dalam Praktik Kebidanan. Jakarta: EGC.
- Syahri, I. M., Laksono, A. D., et al. (2024). Exclusive Breastfeeding Among Indonesian Working Mothers: Does Early Initiation Matter? *BMC Public Health*, 24, 1225Wahyuni et al (2023)



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- Wahyuni, S., Hamidah, S., & Latifah, E. (2023). Peran Pendidikan Ibu dalam Praktik Pemberian ASI Eksklusif di Wilayah Pedesaan. *Jurnal Gizi dan Kesehatan Indonesia*, 15(2), 74–80.
- Wijaya, D. (2019). Kandungan Bioaktif ASI dan Peranannya dalam Sistem Kekebalan Bayi. *Jurnal Kesehatan Masyarakat Nusantara*, 12(3), 25–31.
- Winingsih, N. I., & Yanuarti, S. (2023). Hubungan Dukungan Suami dan Status Pekerjaan Ibu dengan Pemberian ASI Eksklusif di Wilayah Kerja Puskesmas Sukamulya. *Jurnal Ilmu Keperawatan* (*JIK*), 9(2), 101–108.
- World Health Organization. (2021). *Breastfeeding*. Retrieved from https://www.who.int/news-room/fact-sheets/detail/breastfeeding.
- Yanti, A., Batubara, K., & Harahap, N. (2025). Hubungan Status Ekonomi Dengan Minat Ibu Dalam Pemberian ASI Eksklusif Pada Bayi 0-6 Bulan di Wilayah Kerja UPTD Puskesmas Kuala BHEE Kabupaten Aceh Barat. *Best Journal*, 8 (1), 113 119