



The Implications of Breastfeeding Self-Efficacy on Prelacteal Feeding in First Week of Birth

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Abstrak

Menyusui merupakan peristiwa spesial dan menggembirakan yang dirasakan oleh sebagian besar ibu dan bayinya. Menyusui secara eksklusif (pemberian ASI saja pada bayi sampai berumur enam bulan) adalah kegiatan yang sangat bermanfaat baik bagi ibu maupun bayi. Rendahnya pencapaian pemberian ASI eksklusif sering kali diawali dengan pemberian asupan prelakteal dalam hari-hari pertama kehidupan bayi karena rendahnya pemahaman ibu bayi tentang pentingnya kolostrum. Penelitian ini bertujuan untuk menghubungkan keterkaitan antara Breast feeding self efficacy dengan pemberian nutrisi prelakteal (Prelacteal feeding) dalam minggu pertama kelahiran. Jenis penelitian korelasional dengan pendekatan cross-sectional. Populasi dalam penelitian ini adalah ibu menyusui pada minggu pertama kelahiran bayi, jumlah sampel 50 orang dengan teknik purposive sampling. Pengumpulan data menggunakan kuesioner BSE-SF dan observasi. Analisa data dengan univariat dan bivariat dengan uji chi square untuk mengetahui hubungan antara dua variabel. Hasil Penelitian dengan p-value $0,000 \leq 0,05$ sehingga disimpulkan bahwa terdapat hubungan antara breast feeding self efficacy dengan pemberian asupan nutrisi prelacteal (prelacteal feeding) dalam minggu pertama kelahiran. Penelitian ini selanjutnya dapat dijadikan acuan untuk strategi bimbingan menyusui lebih lanjut.

Keywords: Breastfeeding Self- Efficacy, Prelacteal Feeding, Minggu Pertama Kelahiran

Abstract

Breastfeeding is a special and joyful event that most mothers and their babies experience. Exclusive breastfeeding (breastfeeding only for babies until they are six months old) is an activity that is very beneficial for both mother and baby. The low achievement of exclusive breastfeeding often begins with giving prelacteal intake in the first days of the baby's life because of the low understanding of the baby's mother about the importance of breastfeeding. This study links the relationship between breastfeeding self-efficacy and prelacteal feeding in the first week of birth. This type of research is correlational with a cross-sectional approach. The population in this study were breastfeeding mothers in the first week of the baby's birth; the number of samples was 50 people with purposive sampling technique. The data was collected using the BSE-SF questionnaire and observation—data analysis with univariate and bivariate chi-square tests to determine the relationship between the two variables. The study results with a p-value of 0.000 0.05, so it was concluded that there was a relationship between breastfeeding self-efficacy and the provision of prelacteal nutrition in the first week of birth. This research can then be used to reference further breastfeeding guidance strategies.

Keywords: Breastfeeding Self-Efficacy, Prelacteal Feeding, First Week Of Birth

1. INTRODUCTION

Breastfeeding is a special and joyful event that most mothers and their babies experience. Exclusive breastfeeding (breastfeeding only for babies until they are six months old) is an activity that is very beneficial for both mother and baby (D. N. A. Sari, Adi, Saputro, Fiana, & Hanafi, 2019; Widyastuti, Hakim, & Fitriahadi, 2020). As we know that in breast milk, there is colostrum. Colostrum (the first thick, yellowish breast milk in small amounts a few days after birth) (Parmila & Yulianingsih, 2017; Zamzara, 2015). Colostrum is a liquid with a thick, sticky consistency and clear to yellowish, full of nutrients such as protein, minerals, salt, vitamin A, nitrogen, and low amounts of fat and lactose. In addition, colostrum also contains white blood cells and antibodies with a higher content than mature

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breast milk (Fitri & Shofiya, 2020; Muqsith, 2015). The content of immunoglobulin A (IgA) in the colostrum helps coat the baby's intestines that are still vulnerable and prevent germs from entering the baby's body or lining the baby's intestines to avoid food allergies for at least six months of birth. Many dangerous diseases can be prevented or reduced by breastfeeding (Halim, Munasir, & Rohsiswatmo, 2014; Saraswati & Muwakhidah, 2018). Colostrum has also been shown to increase the IQ and Eq of children and increase the bond of affection between mother and baby (Ditaningtias & Ma'rifah, 2017; Sumiatun, 2013).

The government has made various efforts to increase the coverage of exclusive breastfeeding and prevent premature prelacta intake. The things that have been done include prohibiting the promotion of formula milk by midwives, doctors, and health facilities (Jatmika, Shaluhiyah, & Suryoputro, 2014). Enforcement of early breastfeeding initiation as soon as possible in newborns and giving leave to mothers after giving birth and providing a place for breastfeeding in the workplace. Put up posters related to exclusive breastfeeding, and prohibit the use of milk bottles in every health facility. Promotion of exclusive breastfeeding both through print and electronic media, providing good breastfeeding education to mothers and families in late pregnancy (Amalia & Shaluhiyah, 2013; A. Safitri & Puspitasari, 2018). However, the provision of colostrum and exclusive breastfeeding is still relatively low. Based on the results of observations made to breastfeeding mothers who gave birth at PMB in Singaraja, it was found that 30 postpartum mothers who gave birth normally who had been counseled about exclusive breastfeeding during pregnancy check-ups in Trimester 3 showed that 15 people managed to give breast milk alone without prelactal intake until The breast milk is smooth, ten people have given formula milk when the baby is one day old. He can't bear to let the baby cry because he is hungry. Five people gave formula milk on the fourth day because the nipples were blistered and the milk was not smooth. From the results of in-depth interviews conducted with ten postpartum mothers who were treated at the maternity clinic and the hospital, it was found that the baby was given formula milk sometime after birth when the baby was crying and the milk had not come out.

Until now, the success rate of the exclusive breastfeeding program has not reached the government's target of 80% (Astutik & Purwandari, 2021; Zamzara, 2015). The low achievement of exclusive breastfeeding often begins with the provision of prelactal intake. Prelactal intake is feeding neonates before breast milk comes out in the form of powdered milk, cow's milk, or sugar water, honey prelactal food is food or drink given to babies one to three days after birth other than breast milk. Giving prelactal in the first days of a baby's life is due to the low understanding of the baby's mother about the importance of colostrum, the lack of strong belief in breastfeeding and this is also reinforced by the incessant promotion of formula milk which idealizes the nutritional content of breast milk substitutes which makes people less confident about the power of breast milk as a substitute for breast milk as baby main food (Endariadi, Ningtyias, & Rohmawati, 2020). Ideally, breastfeeding should be done as early as possible, namely immediately after birth through early breastfeeding initiation (Fitri & Shofiya, 2020) (IMD) and continued exclusive breastfeeding. However, this effort was hampered by the practice of giving prelactal feeding to newborns. WHO and UNICEF, in 2003, reported that 60 percent of under-five deaths were directly or indirectly caused by malnutrition, and two-thirds of these deaths were related to inappropriate feeding practices for infants and children. In addition, the intake of prelactals such as honey, tea water, starch water, and bananas is very dangerous for the baby's health (Hervilia & Munifa, 2016; Widyastuti, Moh. Hakimi, & Fitriahadi, 2020). In 2009 in 4 districts in West Java Province, it was found that the implementation of exclusive breastfeeding had failed since the first three days of birth, namely more than 80 percent of respondents who were not exclusively breastfed for four months had given prelactal food/drinks in the first three days to their babies. Formula feeding as prelactal is often done in PMB, Maternity Clinic and Hospital

with the main reasons because breast milk has not come out, the baby still has difficulty suckling, anatomical abnormalities of the breast and the mother's condition is weak (Sariy, Simanjuntak, & Suryani, 2018).

Giving prelactals early, especially while the patient is still under the supervision of health workers, will hurt self-efficacy (self-confidence) in breastfeeding. The more a nursing mother is not confident in her ability to breastfeed and produce breast milk, the more the baby gets nutritional intake other than breast milk, the more late the start of milk production. The negative impact is the mother's belief that giving formula milk for a while until breastfeeding is smooth is the most effective medicine to stop a baby's crying. Whereas the lower the mother's confidence in the ability to breastfeed, the less milk production will be. In the end, many postpartum and breastfeeding mothers who can produce abundant breast milk eventually cannot breastfeed because the baby is used to the pacifier and does not want to suckle through the mother's breast anymore (Henshaw, Fried, Siskind, Newhouse, & Cooper, 2015; Komalasari, Solehati, & Widiyanti, 2016). Prelactal administration also impacts slowing down the lactation process because the lactation process is highly dependent on the baby's suckling, the frequency of breastfeeding, and the mother's confidence. If the baby is used to getting formula milk, it will reduce the ability to suck milk from the mother's breast. The less a mother breastfeeds, the hormonally the levels of prolactin and oxytocin (lactation hormones) will decrease automatically, which causes breast milk production to subside over time and worsen the mother's belief about breastfeeding only until the baby is six months old. Excessive anxiety about the baby's condition if breastfeeding has not been smooth and other possibilities because of the mother's self-efficacy in breastfeeding.

Self-efficacy is a belief that encourages individuals to do and achieve something. Self-efficacy has a major role in the regulatory process through individual motivation and predetermined work achievements. People with strong self-efficacy can use their best efforts to overcome obstacles, while people with weak self-efficacy tend to reduce their efforts or run away from existing obstacles (M. G. Safitri & Citra, 2019; Sinaga & Bustami, 2020). Self-efficacy is a multi-purpose instrument because this concept is related to ability and can foster confidence that individuals can do various things in various conditions. Cindy Lee Dennis adapted Self-efficacy in 1999 into the theory of breastfeeding self-efficacy (BSE). BSE is a mother's self-confidence in her ability to breastfeed her baby. The impact of self-efficacy that has been formed is in the form of individual responses including behavioral choices, effort and persistence, mindset and emotional reactions (M. G. Safitri & Citra, 2019; Sinaga & Bustami, 2020). The individual's response will determine the behavior taken by a person starting from breastfeeding initiation, active breastfeeding to maintaining consistent breastfeeding. So breastfeeding self-efficacy is the belief of breastfeeding mothers in dealing with various situations and determining the right action in completing breastfeeding tasks or problems so that the mother can overcome obstacles and achieve the goal of giving exclusive breastfeeding to her baby.

The findings of previous studies indicate that the most influential factor on the breastfeeding process and the success of exclusive breastfeeding in the future are Breastfeeding Self Efficacy (BSE) (Pramanik, Sumbara, & Sholihatul, 2020; D. N. A. Sari et al., 2019). Breastfeeding self-efficacy in exclusive breastfeeding mothers is related to perceived social support (M. G. Safitri & Citra, 2019). BSE affects breastfeeding outcomes by providing motivation and confidence to persevere through common challenges such as early difficulties with breastfeeding, concerns over milk production, and mothers returning to work (Henshaw et al., 2015). This study aimed to find the relationship between breastfeeding self-efficacy and the provision of prelacteal feeding in the week of birth in Buleleng I in 2021.

2. METHOD

The type of research in this study is a correlational study with a cross-sectional design, namely the type of research that emphasizes the time of measurement/observation of the independent and dependent variable data only once, and there is no follow-up (Nursalam, 2016). This study took data on the relationship between breastfeeding self-efficacy and the provision of prolactal intake in the first week of birth. The independent variable in this study was breastfeeding self-efficacy, and the dependent variable was the provision of prolactal intake in the first week. This study was located in Buleleng at PMB (Praktek Mandiri Midwife) in the working area of the Buleleng I Health Center. The number of samples was determined by purposive sampling by selecting 50 out of 100 nursing mothers who were treated at PMB in the working area of the Buleleng I Public Health Center at the time of the study. Data collection was carried out by distributing standard BSE-SF questionnaires and observing the provision of prolactal intake with the help of PMB where the patient visited. After the data is collected, it is continued by conducting data analysis. Data were analyzed using univariate and bivariate with chi-square test to determine the relationship between the two variables.

3. RESULT AND DISCUSSION

Result

Identification of breastfeeding self-efficacy regarding intake of prolactal feeding in the first week of birth at PMB in the working area of the Buleleng I Public Health Center in 2021.

Table 1. Distribution of Respondents based on BSE/self-confidence in exclusive breastfeeding

No	BSE category	N	Percentage %
1	Low	26	52
2	High	24	48
Total respondent		50	100

Based on Table 1, out of 50 respondents, it was found that more than 52% had low BSE results / breastfeeding confidence in the first week of the baby's birth.

Identification of the behavior of giving prolactal feeding in the first week of birth in the PMB working area of the Buleleng I Public Health Center in 2021.

Table 2. Distribution of respondents based on prolactal intake in the first week of birth

No	Prolactal feeding	N	Percentage %
1	Not given	24	48
2	given	26	52
Total respondents		50	100

Source: Primary data 2021

Based on Table 2, it can be seen that from 50 respondents, it appears that more than 52% of respondents have given prolactal intake in the first week of birth, namely formula milk. In line with the results of previous studies, 43.9% of mothers gave early prolactal food to their babies. Negative behavior such as lack of confidence when the baby cries

because he does not have the motivation and strong desire to give breast milk. After the baby is born, they can give liquids such as honey, formula or solid foods (mashed or chewed bananas and rice first). 94% of respondents gave colostrum, but 34% gave water, formula milk, sugar water, or other prelacteal foods. (D. N. A. Sari et al., 2019).

Implications of Breastfeeding Self Efficacy (BF SE) by providing prelacteal intake (prelacteal feeding) in the first week of birth at PMB in the working area of the Buleleng I Health Center in 2021.

Table 3. Cross-tabulation of the implications of BSE/self-confidence in breastfeeding on prelacteal feeding in the first week of birth

No	Kategori BFSE /keyakinan diri dalam menyusui	Asupan <i>prelakteal feeding</i>		N	Persen
		Diberikan	Tidak diberikan		
1	Rendah	20	6	26	52
2	Tinggi	6	18	24	48
Total respondents		26	24	50	100

Sumber: Data Primer 2021

Based on Table 3, it can be seen that from 50 respondents the results of 26 respondents with low breastfeeding self-efficacy, as many as 20 respondents (77%) had given prelacteal feeding in the first week, and six respondents (23%) did not give prelacteal feeding in the first week. Of the 24 respondents with high breastfeeding self-efficacy, six (25%) had given prelacteal feeding in the first week, and 18 (75%) had not given prelacteal feeding in the first week of birth. Based on the results of statistical tests with chi-squares, it was found that the significant result was 0.000, which was much smaller than the set significance, which was 0.05, so that H0 was rejected, which means that there is a relationship between breastfeeding self-efficacy and prelacteal feeding in the first week of birth.

Discussion

Breastfeeding Self-efficacy (BSE) is a mother's self-confidence in her ability to breastfeed or breastfeed her baby. BSE is an important variable in the duration of breastfeeding because it predicts whether the mother chooses to breastfeed or not, how much effort the mother puts into breastfeeding her baby, how the mother thinks about breastfeeding her baby, increases or gives up, and how the mother emotionally responds to difficulties breastfeeding her baby (Pramanik et al., 2020; D. N. A. Sari et al., 2019). Self-efficacy in breastfeeding can predict whether the mother chooses to breastfeed or not, how much effort the mother makes to breastfeed her baby, how the mother's mindset to breastfeed her baby increases or gives up, and how the mother responds emotionally to breastfeeding her baby. Breastfeeding self-efficacy is still low, and breastfeeding is not effective yet often occurs in mothers who have never had breastfeeding experience before (Hackman, Schaefer, Beiler, Rose, & Paul, 2015; Y. R. Sari, Yuviska, & Sunarsih, 2020). Mothers with breastfeeding experiences for the first time are often very sensitive to everything related to the condition of their babies, so they are easily provoked by various negative assumptions, such as, the baby will not be full enough if only breast milk is given, especially at the beginning of the postpartum period, the mother only produces small amounts of colostrum or even small amounts of colostrum.

The low level of a mother's self-efficacy in breastfeeding can affect the mother's commitment to the successful provision of exclusive breastfeeding (Astutik & Purwandari,

2021; Halim et al., 2014). Mothers with low levels of self-efficacy tend to focus on negative aspects of breastfeeding, such as focusing on the pain and anxiety that mothers feel while breastfeeding. The lack of effort and endurance of mothers in facing difficulties when breastfeeding is what will make mothers stop breastfeeding early and switch to using formula milk (Suciati & Wulandari, 2020; Vonitania, Amelin, & Yulizawati, 2017). Mothers who have a low level of self-efficacy are mostly found in mothers who fail to give exclusive breastfeeding (Kurniawan, 2013; Sariy et al., 2018). In line with the results of previous studies, which showed that from 30 respondents with a BSE less than 30 minutes, this is in line with the theory which reveals that mother's self-confidence can affect the duration of breastfeeding in infants so that 24 mothers are seen in the poor category and 6 (20, 0%) respondents who breastfeed for 15-30 minutes, it is possible that there are other supporting factors such as support from their husbands, support from parents/in-laws so that even though the mother does not have the confidence to breastfeed properly, the mother is still breastfeeding for a good duration (Sinaga & Bustami, 2020). Most breastfeeding mothers have a low level of self-efficacy (75.4%). Almost all breastfeeding mothers do not give exclusive breastfeeding to their babies (78.5%). There is a relationship between breastfeeding mothers' self-efficacy and exclusive breastfeeding at Tamansari Health Center. (Pramanik et al., 2020). The low level of self-efficacy (53.2%) illustrates that breastfeeding mothers have low confidence in their understanding of breastfeeding and mothers' low confidence in carrying out breastfeeding tasks as well as carrying out other tasks, and the mother's effort and endurance are not optimal in facing difficulties while breastfeeding (Komalasari et al., 2016). The mother's low confidence in this dimension is also related to the mother's low understanding of the correct breastfeeding technique. Lack of understanding and knowledge of mothers about breastfeeding techniques will decrease the mother's confidence and confidence in breastfeeding.

Important factors that influence mothers in breastfeeding are psychological. A mother's high self-confidence in breastfeeding in the post-partum period can reduce the mother's perception of a lack of breast milk and cause stop breastfeeding early (D. N. A. Sari et al., 2019; Widyastuti, Moh. Hakimi, et al., 2020). The more mothers believe that they can breastfeed, the higher the success rate of breastfeeding mothers. Based on the results of this study, mothers who have high self-efficacy in breastfeeding their babies have a high interest and involvement and are better with their environment, can survive to continue breastfeeding their babies even though colostrum only comes out a little in the first 1-2 days after birth and fussy babies and pressure from families to provide prelacteal intake in the form of formula milk or other nutritional intakes (Rahayu, 2018; Zamzara, 2015). Mothers are not easily discouraged and give up on overcoming difficulties, and they will show more effort to give only breast milk to the baby. Boosting self-confidence is important for successful breastfeeding. In this case, nurses as educators, the support of health workers can play a role in supporting mothers' success to breastfeed their babies by building self-confidence and providing support to mothers. Nurse support can influence respondents to have high intentions to strongly believe that they can give exclusive breastfeeding to their babies. Mothers who have adequate information about exclusive breastfeeding are more likely to give exclusive breastfeeding to their children than those who do not have information (Jatmika et al., 2014; A. Safitri & Puspitasari, 2018). This research implies that in the future, it is hoped that all mothers have good self-confidence to be able to give exclusive breastfeeding to their babies, seek more information about how to give good breast milk so that children have good growth and development.

4. CONCLUSION

Based on the results of data analysis that has been carried out in this study, it can be concluded that there is a significant relationship between breastfeeding self-efficacy and the provision of prelacteal intake in the first week of birth, which means that there is a significant relationship between breastfeeding self-efficacy and the provision of prelacteal feeding in the first week of birth in Buleleng I Public Health Center in 2021.

5. REFERENCES

- Amalia, A., & Shaluhiyah, Z. (2013). Langkah Peningkatan Pemberian ASI Eksklusif di Kabupaten Semarang. *Jurnal Promosi Kesehatan Indonesia*, 8(2), 90–99.
- Astutik, R. Y., & Purwandari, E. S. (2021). Pendampingan Ibu Menyusui dalam Pemberian Asi Eksklusif pada Masa Pandemi Covid-19 di Kabupaten Kediri. *E-DIMAS: Jurnal Pengabdian Kepada Masyarakat*, 12(4), 647–651. <https://doi.org/10.26877/e-dimas.v12i4.6535>.
- Ditaningtias, S., & Ma'rifah, U. (2017). Hubungan Antara Lama Menyusu Dan Status Imunisasi Dengan Kejadian Sakit Dalam Satu Tahun Terakhir Pada Anak Usia 0-59 Bulan. *Forikes, Jurnal Penelitian Kesehatan Suara*, 8(3), 116–120. <https://doi.org/10.33846/%25x>.
- Endariadi, D. S., Ningtyias, F. W., & Rohmawati, N. (2020). Determinan Kejadian Balita Bawah Garis Merah (Bgm) Di Wilayah Kerja Puskesmas Mumbulsari Kabupaten Jember. *MTPHJournal*, 4(2), 146–158. <https://doi.org/10.33086/mtphj.v4i2.839>.
- Fitri, D., & Shofiya, D. (2020). Hubungan ASI Eksklusif dan Frekuensi Sakit Pada Bayi di Surabaya Barat. *AMERTA NUTR*, 4(1), 30–35. <https://doi.org/10.20473/amnt.v4i1.2020.30-35>.
- Hackman, N. M., Schaefer, E. W., Beiler, J. S., Rose, C. M., & Paul, I. M. (2015). Breastfeeding outcome comparison by parity. *Breastfeed Med*, 10(3), 156–162. <https://doi.org/10.1089/bfm.2014.0119>.
- Halim, A., Munasir, Z., & Rohsiswatmo, R. (2014). Manfaat Pemberian ASI Eksklusif dalam Pencegahan Kejadian Dermatitis Atopi pada Anak. *Sari Pediatri*, 15(6), 245–252. <https://doi.org/10.14238/sp15.6.2014.345-52>.
- Henshaw, E. J., Fried, R., Siskind, E., Newhouse, L., & Cooper, M. (2015). Breastfeeding Self-Efficacy, Mood, and Breastfeeding Outcomes among Primiparous Women. *J Hum Lact*, 31(3), 511–518. <https://doi.org/10.1177/0890334415579654>.
- Hervilia, D., & Munifa, D. (2016). Pandangan Sosial Budaya terhadap ASI Eksklusif di Wilayah Panarung Palangkaraya (Social and Cultural Aspect toward Exclusive Breastfeeding in Panarung Palangkaraya). *IJHN: Indonesian Journal of Human Nutrition*, 3(1). <https://doi.org/10.21776/ub.ijhn.2016.003.Suplemen.7>.
- Jatmika, S. E. D., Shaluhiyah, Z., & Suryoputro, A. (2014). Dukungan Tenaga Kesehatan Untuk Meningkatkan Niat Ibu Hamil Dalam Memberikan ASI Eksklusif di Wilayah Kerja Puskesmas Gondokusuman, Kota Yogyakarta. *Jurnal Promosi Kesehatan Indonesia*, 9(2), 196–205. <https://doi.org/10.14710/jpki.9.2.196-205>.
- Komalasari, M., Solehati, T., & Widiarti, E. (2016). Gambaran Tingkat Self-Efficacy Ibu Post Sectio Caesarea saat menyusui di RSKIA Kota Bandung. *Jurnal Pendidikan Keperawatan Indonesia*, 2(2). <https://doi.org/10.17509/jpki.v2i2.4744>.
- Kurniawan, B. (2013). Determinan Keberhasilan Pemberian Air Susu Ibu Eksklusif. *Jurnal Kedokteran Brawijaya*, 27(4). <https://doi.org/10.21776/ub.jkb.2013.027.04.11>.
- Muqsith, D. P. Y. D. Al. (2015). Hubungan Riwayat Pemberian Kolostrum Dengan Perkembangan Bayi Di Puskesmas Banda Sakti Kota Lhokseumawe. *Lentera: Jurnal*

- Ilmiah Sains Dan Teknologi*, 15(13), 12–15.
- Nursalam, N. (2016). *Metodologi Penelitian Ilmu Keperawatan Pendekatan Praktis (4th editio)*. Jakarta: Salemba Medika.
- Parmila, N., & Yulianingsih, T. (2017). Manfaat Stimulus Otot-Otot Payudara (Breast Massage) Dan Pengeluaran Oksitosin (Pijat Oksitosin) Terhadap Volume Kolostrum Pada Ibu Postpartum. *Jurnal Kebidanan*, 6(2), 108–111. <https://doi.org/10.26714/jk.6.2.2017.108-111>.
- Pramanik, Y. R., Sumbara, & Sholihatul, R. (2020). Hubungan Self-Efficacy Ibu Menyusui Dengan PEmberian Asi Eksklusif. *Jurnal Ilmiah Kesehatan Iqra*, 8(1), 39–44. <https://doi.org/10.1234/jiki.v8i1.169>.
- Rahayu, D. (2018). Hubungan Breastfeeding Self Efficacy Dengan Keberhasilan Pemberian ASI Eksklusif. *Jurnal Ilmu Kesehatan*, 7(1), 247–252. <https://doi.org/10.32831/jik.v7i1.191>.
- Safitri, A., & Puspitasari, D. A. (2018). Upaya Peningkatan Pemberian Asi Eksklusif Dan Kebijakannya Di Indonesia. *The Journal of Nutrition Food Research*, 41(1). <https://doi.org/10.22435/pgm.v41i1.1856>.
- Safitri, M. G., & Citra, A. F. (2019). Perceived Social Support Dan Breastfeeding Self Efficacy Pada Ibu Menyusui Asi Eksklusif. *Jurnal Psikologi*, 12(2). <https://doi.org/10.35760/psi.2019.v12i2.2436>.
- Saraswati, A., & Muwakhidah. (2018). Perkembangan Motorik Antara Balita Usia 7 –24 Bulan ASI Eksklusif Dan Non Asi Eksklusif Di Puskesmas Mantingan Kabupaten Ngawi. *Jurnal Kesehatan*, 11(1). <https://doi.org/10.23917/jk.v11i1.7001>.
- Sari, D. N. A., Adi, G., Saputro, Fiana, M., & Hanafi, N. (2019). Faktor Yang Mempengaruhi Breasfeeding Self Efficacy (BSE) Dalam Pemberian ASI Eksklusif Pada Ibu Hamil Trimester 3. *IJNP (Indonesian Journal of Nursing Practices)*, 3(1), 22–27. <https://doi.org/10.18196/ijnp.3188>.
- Sari, Y. R., Yuviska, I. A., & Sunarsih. (2020). Faktor-Faktor yang Mempengaruhi Pemberian Asi Eksklusif pada Bayi Usia 0-6 Bulan., 6(2). Retrieved from <http://ejournalmalahayati.ac.id/index.php/kebidanan/article/view/1726>.
- Sariy, R. B., Simanjuntak, B. Y., & Suryani, D. (2018). Pemberian MP-ASI dini dengan status gizi (PB/U) usia 4-7 bulan di Kecamatan Ratu Samban Kota Bengkulu. *Jurnal Action: Aceh Nutrition Journal*, 3(2). <https://doi.org/10.30867/action.v3i2.95>.
- Sinaga, D. A. br, & Bustami, A. (2020). Hubungan Breastfeeding Self Efficacy Terhadap Lamanya Menyusui Pada Ibu Nifas Wilayah Kerja Puskesmas Sumur Batu Kota Bandar Lampung. *Malahayati Nursing Journal*, 2(1). <https://doi.org/10.33024/manuju.v2i1.1603>.
- Suciati, S., & Wulandari, S. (2020). Faktor-Faktor Yang Mempengaruhi Pemberian Asi Eksklusif: Literature Review. *Jurnal Ilmiah Ilmu Kebidanan*, 10(2), 1–6. Retrieved from <https://journal.unita.ac.id/index.php/bidan/article/view/406>.
- Sumiatun. (2013). Analisis Mutu Pembelajaran Praktikum Kebidanan sebagai Upaya Peningkatan Pencapaian Kompetensi Program Studi Diploma III Kebidanan STIKES Maharani Malang. *Jurnal Kebijakan Dan Pengembangan Pendidikan*, 1(1), 78–93.
- Vonitania, Y., Amelin, F., & Yulizawati. (2017). Faktor-Faktor yang Berhubungan dengan Perilaku Pemberian Asi Eksklusif Pada Ibu yang Memiliki Bayi Usia 6-12 Bulan di Wilayah Kerja Puskesmas Andalas. *Journal Of Mindwifery*, 2(2), 82–92. <https://doi.org/10.25077/jom.2.2.82-92.2017>.
- Widyastuti, D. E., Hakim, M., & Fitriahadi, E. (2020). tуди Kualitatif: Persepsi Ibu yang Tinggal dengan Nenek Mengenai ASI. *Jurnal Kebidanan Dan Keperawatan 'Aisyiyah*, 16(1), 96–110. <https://doi.org/10.31101/jkk.1283>.
- Widyastuti, D. E., Moh.hakimi, & Fitriahadi, E. (2020). Pandangan Sosial Budaya terhadap

- ASI eksklusif di wilayah Panarung Palangkaraya,. *Jurnal Kebidanan Dan Keperawatan 'Aisyiyah*, 16(1), 96–110. <https://doi.org/10.31101/jkk.1283>.
- Zamzara, R. F. (2015). Pengaruh Pijat Oksitosin Terhadap Waktu Pengeluaran Kolostrum Ibu Post Partum Sectio Caesaria. *Jurnal Ilmiah Kesehatan (Journal of Health Science)*, 8(2). <https://doi.org/10.33086/jhs.v8i2.210>.