THE RELATIONSHIP PERCEPTIONS OF BREASTFEEDING MOTHERS ABOUT PARENTS' SUPPORT FOR NUTRITION INTAKE IN BREASTFEEDING MOTHERS

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ABSTRACT

Lactation period is the best nutrition for all babies through direct breastfeeding. One factors can affect the production of breast milk is nutrition consumed by mother every day. The problem of fulfilling nutritional intake for breastfeeding mothers must be prepared properly by mother herself and family including parents who live in the same house with breastfeeding mothers. This study aims to obtain an overview of relationship between breastfeeding mothers' perceptions of parental support for breastfeeding mothers' nutrition intake. The research method used quantitative research and cross-sectional design in the working area of Cakung District Health Center. Sampling technique used purposive sampling with 54 respondents. Data collection used a questionnaire via google form or directly and analyzed using the Product Moment Correlation (Pearson) test. The results of statistical tests with α (0.05) obtained a relationship between the perceptions of breastfeeding mothers about parental support for breastfeeding mothers' nutrition intake with alpha significance value of 0.005 and a correlation coefficient value of 0.373 > rtable (0.265). The conclusion is a positive relationship between perceptions of breastfeeding mothers about parental support for the nutritional intake of breastfeeding with alpha significance value 0.005 and a correlation coefficient value 0.373 >r table (0.265).

Keywords: breastfeeding mother; nutrition; parental support

INTRODUCTION

The lactation period or breastfeeding is said to be the best nutrition for all babies through direct breastfeeding. According to (Renuka *et al.*, 2020) WHO recommends that babies in their first 6 months be exclusively breastfed. After the baby is 6 months old, the mother continues with the process of introducing textured solids, both semi-solid and solid, while continuing to breastfeed until the baby is a maximum of 2 years old.

Based on data (Riskesdas, 2020) the number of Infant Mortality Rates (IMR) in 2019 in Indonesia, showed the total number of under-five deaths of 29,322 people aged 0 to 59 months and the most common were neonates which reach 69% with a total of 20,244 deaths in Indonesia. This number increased in 2020 according to (Ministry of Health of Republic Indonesia, 2021) namely 72.0% with a total of 20,266 people. Based on the cause, in 2020 most neonatal deaths were due to diarrhea and low birth weight (LBW).

According to (Rahmawati and Saputri, 2018) breastfeeding can reduce IMR by up to 16% of newborns (BBL) from the first day of birth. This can also reduce the incidence of LBW by breastfeeding. Based on data in 2020 in DKI Jakarta Province, the percentage of babies who received exclusive breastfeeding reached 65.4%, while in 2019 it reached 70.22%. It can be concluded that the percentage of exclusive breastfeeding in DKI Jakarta has decreased (Riskesdas, 2020).

According to research (Sumarni and Ratnasari, 2021) one of factors can affect the expenditure of breast milk in nursing mothers is the lack of nutritional intake consumed by nursing mothers. The nutritional intake consumed by the mother must be sufficient to meet the needs of herself and her baby. The nutritional components in breast milk are produced by the mother's body. Therefore, breastfeeding mothers must replace good nutritional intake so that the content produced by breast milk remains optimal. Nutritional intake during breastfeeding becomes much more needed, which is approximately 500 kcal/day during pregnancy. The nutritional intake of breastfeeding mothers in response to nutritional needs can change due to the additional information they get from their surroundings (Ainun, 2019). Patterns of consumption of balanced nutrition that are rare and not diverse can identify factors that have nutritional problems that are wrong. This is supported based on research results (Sumarni and Ratnasari, 2021), there is a relationship between maternal nutritional intake and milk expenditure in postpartum mothers.

The factor that can affect a mother's nutrition during breastfeeding is the reduced of family and environmental support (Rafsanjani, 2018). The family support in this case, parents are the interpersonal relationship, such as social support, attitudes, and acceptance by family members as a form of providing support in helping family members (Rafsanjani, 2018). The support of parents who live with breastfeeding mothers have a strong influence because parents can play a role in educating mothers in providing nutritional intake by accompanying, advising, and informing them about nutritious food, so that they can motivate mothers to breastfeed their babies well (Heryanto, Herwandar and Rohidin, 2021). The support that can be given by parents to breastfeeding mothers includes informational support, instrumental support, assessment support, and emotional support (Anggraini, 2018). The problem of fulfilling nutritional intake for breastfeeding mothers must be well prepared by family members (Rafsanjani, 2018). If family support in helping to meet the nutritional needs of breastfeeding mothers can go well, the mother's nutritional intake will be fulfilled properly, and the mother will be sure that exclusive breastfeeding

for babies is the right thing to do (Widowati, Harnany and Amirudin, 2016 in (Saraha and Umanailo, 2020).

Based on the description of the phenomenon above, the researcher wanted to know the relationship between breastfeeding mothers' perceptions of parental support for the nutritional intake of breastfeeding mothers in the working area of Cakung District Health Center, East Jakarta City. According to Statistics in 2019 the highest population in DKI Jakarta Province was East Jakarta City, Cakung District with a population reached 537,756 people and the percentage of exclusive breastfeeding in East Jakarta reached 74.32% in 2020. It is hoped that the nutritional intake of breastfeeding mothers that will be fulfilled with good parental support in Cakung Subdistrict area can help increase the success of exclusive breastfeeding in DKI Jakarta and reduce the Infant Mortality Rate (IMR). The purpose of this study was to obtain an overview of the relationship between breastfeeding mothers' perceptions of parental support for the nutritional intake of breastfeeding mothers in the Working Area of the Community Health Center, Cakung District, East Jakarta City in 2022.

METHOD

This study used a quantitative method with a descriptive analytic design and a cross-sectional approach in which the independent variable data was collected, namely the perception of breastfeeding mothers about parental support and the dependent variable, namely nutritional intake of breastfeeding mothers, was carried out at one time simultaneously. This research was conducted in the working area of the Cakung District Health Center, East Jakarta City in May 2022.

The population in this study were all breastfeeding mothers who lived in the working area of the Cakung District Health Center, East Jakarta City, totaling \pm 600 breastfeeding mothers registered at the KIA Polyclinic at the Cakung District Health Center. Sampling technique used was purposive sampling, which means that sampling was carried out in an adjusted way based on the inclusion criteria needed by the researcher with a total of 54 breastfeeding mother respondents. The inclusion criteria in this study included breastfeeding mothers who live with their parents and exclusively breastfeed their babies aged 0 to 6 months, are cooperative and able to communicate well, are willing to be respondents, and live in the Cakung District area.

The research instruments used included a questionnaire on demographic data containing name, age, education level, employment status, and mother's income for 1 month, then the Family Support Questionnaire (FSQ) and the Food Frequency Questionnaire (FFQ). The FFQ questionnaire has been developed by Food and Nutrition Technical Assistance (FANTA) and has been modified and used in several studies. FFQ questionnaire which consists of closed questions containing 32 lists of types of food consumed by breastfeeding mothers. The FFQ questionnaire provides information about eating patterns and habits of consuming the types of food consumed by individuals in a certain period of time. Assessment of the frequency score in food consumption, namely, if food consumption ≥ 1 time/day is given a score of 25, 3-6 times/week is given a score of 15, 1-2 times/week is given a score of 10, 2 times/month is given a score of 5, and if never given a score of 0. Calculating the total food consumption score is done by adding up all individual food consumption scores. In this study, both perceptions of breastfeeding mothers regarding parental support and nutritional intake of breastfeeding mothers were both measured using a numerical measurement scale. 1-2 times/week is given a score of 10, 2 times/month is given a score of 5, and if never is given a score of 0. Calculating the total food consumption score is done by adding up all individual food consumption scores. The results of the validity test of 32 items of food and beverage types have a value of (0.412) to (0.577) which is greater than r table (0.355), so it can be said that the FFQ questionnaire is valid. The results of reliability test have a Cronbach Alpha value of 0.928, so it can be said that the FFQ questionnaire is reliable with 0.928 > r table.

Breastfeeding mothers' perceptions of parental support were measured using the FSQ questionnaire. The FSQ questionnaire uses the Guttman scale which consists of two answer choices, namely "yes" or "no" for each statement item. The FSQ consists of 20 statement items with favorable and non-favorable answer categories. Answers from favorable statements are given a score of 1 if they choose the answer "yes" and are given a score of 0 if they choose the answer "no". Answers from unfavorable statements are given a score of 1 if they choose the answer "no" and are given a score of 0 if they choose the answer "yes". The results of the FSQ questionnaire validity test were carried out by researchers, there were 9 invalid statement items, namely at numbers 5, 8, 9, 12, 13, 14, 15, 19, and 20 with a value of r count < r table (0.355). Therefore, sentence modifications were made to 9 statement items. In addition, sentence modifications are also intended so that the sentences of each invalid statement can be easily understood by respondents. The

researcher also deleted 1 statement item number 9 which was invalid with the lowest Pearson correlation value (-0.223) so that the questionnaire could be reliable. Based on these several things, the total FSQ statement items used in this study amounted to 19 statement items.

The data analysis used in this study was univariate and bivariate analysis using the Product Moment Correlation (Pearson) test. This research complied with health research ethics in carrying out research by obtaining ethical approval from the ethics commission of the Poltekkes Kemenkes Jakarta III with No.LB.02.02/KEPK/012/2022.

RESULTS AND DISCUSSION

Univariate Analysis

The characteristics of the respondents below are the demographic characteristics of breastfeeding mothers based on age, education level, occupation, and monthly income earned by the mothers.

Table 1. Frequency Distribution of Respondents' Characteristics of Breastfeeding Mothers

| Karakteristik | F | % |
|----------------------|----|------|
| Usia | | |
| Usia < 20 | 2 | 3,7 |
| Usia 20 – 35 | 41 | 75,9 |
| Usia 36 – 40 | 11 | 20,4 |
| Tingkat Pendidikan | | |
| Dasar | 1 | 1,9 |
| Menengah | 35 | 64,8 |
| Tinggi | 18 | 33,3 |
| Pekerjaan | | |
| Tidak Bekerja | 33 | 61,1 |
| Bekerja | 21 | 38,9 |
| Pendapatan per Bulan | | |
| < Rp. 4.640.000 | 35 | 64,8 |
| \geq Rp. 4.640.000 | 19 | 35,2 |
| Total | 54 | 100 |

Source: Primary Data 2022

The result of the analysis of the age characteristic of the respondents obtained an illustration that the majority of breastfeeding mothers were 20-35 years old, namely 41 respondents or 75.9%. Age 20-35 years is included in the reproductive age for mothers breastfeeding babies 0-6 months babies.

The result of the analysis of the characteristic of the education level of the respondents got the picture that, the majority of breastfeeding mothers had a secondary level of education, namely, SMP-SMA/MA/SMK, amounting to 35 respondents or 64.8%.

The result of the analysis of the characteristic of the employment status of the respondents showed that the majority of breastfeeding mothers were not working or as housewives, namely 33 respondents or 61.1%.

The result of the analysis regarding the income earned by mothers within 1 month was that most mothers income earned were below the minimum wage <Rp. 4,640,000, namely 35 respondents or 64.8%.

Discussion Respondents' Characteristics of Breastfeeding Mothers

The age of breastfeeding mothers < 20 years or > 35 years is one of the factors that can influence the poor nutritional status of mothers (Rahmanindar and Rizgoh, 2019). The results of this study are in accordance with research that has been conducted by (Puspitaningsih, 2017) in Mojokerto Regency, the results showed that the highest number of breastfeeding mothers was aged 20-35 years, with a total of 14 respondents or 77.8%. The results of this study are also in accordance with research that has been conducted by (Rafsanjani, 2018), the results showed that the most ages of breastfeeding mothers were included in the reproductive group, namely, ages 20-35 years, as many as 28 respondents or 82.4%. The mother's attitude in fulfilling nutritional intake is influenced by an urge or what is commonly referred to as motivation. Apart from the existence of motivation, knowledge is also involved in the process of one's thinking in everyday behavior. Breastfeeding mothers with a high risk age <20 years who are still in the late teens category have an unstable psyche, and lack sufficient experience and knowledge regarding maternal and child health. Age > 35 years is also included in the high risk age as a result of decreased physiological function of the reproductive organs due to increasing age (Rahmanindar and Rizqoh, 2019).

Breastfeeding mothers with optimal levels of education and knowledge will make themselves better at consuming essential nutrients during the process of exclusive breastfeeding. The results of this study are in accordance with previous research by (Tanjung, 2021), the result was that most breastfeeding mothers had a secondary education level of 123 respondents or 46.4%. The results of this study also get an overview of the level of education that is the same as the research that has been conducted by (Rahmadani

et al., 2020), namely, the majority of the education level of breastfeeding mothers is SMA/SMK with a total of 28 respondents or 45.2%. The results of this study are also in line with previous research by (Puspitaningsih, 2017), the result was that the majority of breastfeeding mothers had secondary education with a total of 6 respondents or 33.3%. Based on the level of education, a person can easily get information that will affect the pattern of thinking in acting and making the right decisions. The level of education will change a person's transmission, attitudes, knowledge, and behavior in a positive direction (Zakiyah, 2020). According to (Tanjung, 2021) the majority of breastfeeding mothers with low education levels have the principle of consuming any food, in this case the most important thing is to make themselves happy, so they pay less attention to the type of balanced nutrition that should be consumed. Meanwhile, breastfeeding mothers with higher levels of education tend to be able to choose various types of foods that contain balanced nutrition. This is because of the information that the mother has obtained during her formal education. The higher a person's level of education, from basic education to higher education, will make that person obtain the right information and decision-making attitude towards the lifestyle he lives.

Work is defined as a form of activity carried out with various objectives to meet lifelong needs. The results of this study are in accordance with previous research by (Doloksaribu, 2018), the result was that the majority of breastfeeding mothers with nonworking status or as housewives amounted to 48 respondents or 71.6%. The results of this study are also in line with research conducted by (Rahmanindar and Rizqoh, 2019) get the result that, the majority of breastfeeding mothers with status are not working or as housewives as many as 38 respondents or 84.4%. The status of a mother not working or as an IRT who has a lot of free time at home can spend time with her children and family and is able to pay attention to nutrition, health, lifestyle both for herself and her family without any restrictions (Puspitaningsih, 2017). The results of this study are different from research that has been conducted by (Rafsanjani, 2018) who get the picture that, mothers with working status get a larger number than mothers who do not work, namely as many as 22 respondents or 64.7%. Mothers who don't work or as IRT generally have time at home to take care of family members. If the mother has a lot of time, this can be used to find additional information if the mother is not busy taking care of the house and family. However, if a mother with working status will have the opportunity to exchange new knowledge and information from her co-workers.

This is in line with the results of research conducted by (Puspitaningsih, 2017), most of the description of economic status with income minimum per capita is as many as 14 respondents or 77.8%. The income earned by the mother and family can affect the purchasing power of the family, especially food every day (Tanjung, 2021). Low economic conditions make it difficult for breastfeeding mothers to buy their daily needs. There are many needs that must be prioritized for the family, not even just related to nutrition that must be met by mothers while breastfeeding. The pattern of consuming food with balanced nutrition will not be fulfilled if the mother and family do not have sufficient income to provide good quality types of food.

Table 2. Acquired Scores of Breastfeeding Mothers Perception Variable About Parental Support

| Perceptions of Breastfeeding Mothers About Family Support | | | |
|---|-------|--|--|
| Minimum Score | 7 | | |
| Maximum Score | 17 | | |
| Average | 12.72 | | |

Source: Primary Data 2022

The results of the analysis related to obtaining a score of parental support for breastfeeding mothers get a minimum score of 7, a maximum score of 17, and an average total score of parental support is 12.72. Based on the results of this study, the higher the perception score of breastfeeding mothers about parental support, the parents are said to support breastfeeding mothers in fulfilling nutritional intake, whereas the lower the perception score of breastfeeding mothers about parental support, the parents are said not to support breastfeeding mothers in fulfilling nutritional intake. The support provided by parents to breastfeeding mothers in this study included informational support, emotional support, instrumental support, and assessment support.

Discussion Perceptions of Breastfeeding Mothers About Family Support

The results of research that has been conducted by (Heryanto, Herwandar and Rohidin, 2021) in Sagarahiang and Karangsari Villages, Darma District, there were 18 respondents or 58.1% of parents who supported either. Research that has been conducted by (Silitonga, 2020) get the picture that, the majority of families provide support to breastfeeding mothers with a total of 17 respondents or 56.7%. The support given by parents to breastfeeding mothers is to advise them to consume balanced nutritious food, consume vegetables as an effort to increase the knowledge of breastfeeding mothers in achieving optimal exclusive breastfeeding. Support or motivation can come from the mother herself or from her immediate environment, such as her husband, parents, and others. Parents try to provide new education for breastfeeding mothers based on hereditary traits. Parents help meet nutritional intake so that mothers can increase comfort and enthusiasm in the breastfeeding process.

Table 3. Acquired Scores of Nutritional Intake Variables for Breastfeeding Mothers

| Nutrition Intake of Breastfeeding Mothers | | |
|---|--|--|
| 50 | | |
| 550 | | |
| 184,1 | | |
| | | |

Source: Primary Data 2022

The results of the analysis of nutritional intake scores for breastfeeding mothers obtained a minimum score of 50, a maximum score of 550, and an average total score of parental support was 184.1. This means that the higher the nutritional intake score of breastfeeding mothers, the nutritional intake of breastfeeding mothers is sufficient, whereas the lower the nutritional intake score of breastfeeding mothers, the nutritional intake of mothers is not sufficient.

Discussion Nutrition Intake of Breastfeeding Mothers

The results of research that has been conducted by (Kusparlina, 2020) got the picture that, the majority of breastfeeding mothers fulfilled their nutritional intake with a total of 22 respondents or 78.5%. The results of research that has been conducted by (Sari, Talahatu and

Sri, 2019) in the working area of the Alak Health Center, it was illustrated that the majority of nutritional intake of breastfeeding mothers was in the good category with a total of 36 respondents or 59%. The principle of fulfilling the nutrition of breastfeeding mothers is focused on being able to produce breast milk of sufficient quality and quantity to meet nutritional intake for the baby. Good milk production is related to the intake of nutrients consumed by nursing mothers. Therefore, the intake of nutritional needs needs to contain calories, protein, fat, vitamins and minerals in sufficient quantities. Examples include carbohydrates, proteins, fruits, vegetables, and minerals (Solehati *et al.*, 2020). According to (Saleha, 2009 in (Silitonga, 2020)) if the mother's nutritional intake is not fulfilled properly, it will have an impact on the composition of the milk produced by the mother.

Bivariate Analysis

Table 4. The Relationship between Perceptions of Breastfeeding Mothers Regarding Parental Support for Nutrition Intake of Breastfeeding Mothers

| | | Dukungan Orang Tua | Asupan Nutrisi Ibu Menyusui |
|-----------------------------------|------------------------|-----------------------|--------------------------------|
| Dukungan Orang Tua | Pearson Correlation | 0,373 | 0,373 |
| | P Value | 0,005 | 0,005 |
| Asupan Nutrisi Ibu Menyusui | Pearson Correlation | 0,373 | 0,373 |
| | P Value | 0,005 | 0,005 |

Bivariate analysis with the product moment (Pearson) correlation test obtained a p value of 0.005 (p <0.05) with a correlation coefficient of 0.373 > r table (0.265). So, the hypothesis decision that can be taken is that at alpha 5% there is a unidirectional relationship (+) between breastfeeding mothers' perceptions of parental support for the nutritional intake of breastfeeding mothers in the working area of the Cakung District Health Center, East Jakarta City. This can be interpreted as increasing the mother's perception of the support provided by parents, the better the nutritional intake consumed by the mother during breastfeeding.

Discussion of Relationship between Perceptions of Breastfeeding Mothers Regarding Parental Support for Nutrition Intake of Breastfeeding Mothers

The results of this study are in line with research conducted by (Silitonga, 2020) in Magelang Regency, the results showed that there was a relationship between family support and nutrition fulfillment for postpartum mothers who breastfed with a p value of 0.004 < 0.005. The results of this study are also in line with research conducted by (Heryanto, Herwandar and Rohidin, 2021) who obtained the result that there was a relationship between the role of parents and the nutritional intake of postpartum mothers with a p value of 0.001 < 0.005. Informational support provided by parents regarding explanations regarding balanced nutritional intake. Parents act as sources and disseminators of information received directly from the family members themselves, the media, relatives, and others. Emotional support provided by parents to breastfeeding mothers includes listening to complaints about breastfeeding, providing a comfortable atmosphere, supporting balanced nutritional intake for mothers, and convincing mothers to be able to breastfeed for 6 months. Instrumental support or support that is given directly that parents can give to breastfeeding mothers, among others, helps prepare balanced nutritional needs during breastfeeding, assisting in managing and caring for the baby, as well as assisting the mother when breastfeeding if assistance is needed. Assessment support (Appraisal) provided by parents to breastfeeding mothers includes informing exclusive breastfeeding in the first 6 months, guiding how to fulfill a balanced nutritional intake during breastfeeding, and asking about problems that may be encountered while breastfeeding. Based on this, if breastfeeding mothers get positive support or motivation from parents and family, it will make the mother's confidence strong to fulfil good nutritional intake not only for herself, but for her baby, telling exclusive breastfeeding in the first 6 months, guiding how to fulfill a balanced nutritional intake during breastfeeding, and asking about problems that might be encountered while breastfeeding. Based on this, if breastfeeding mothers get positive support or motivation from parents and family, it will make the mother's confidence strong to fulfill good nutritional intake not only for herself, but for her baby, telling exclusive breastfeeding in the first 6 months, guiding how to fulfill a balanced nutritional intake during breastfeeding, and asking about problems that might be encountered while breastfeeding. Based on this, if breastfeeding mothers get positive support or motivation from parents and family, it will make the mother's confidence strong to fulfill good nutritional intake not only for herself, but for her baby.

CONCLUSION

The research found from bivariate analysis showed that there was a significant relationship between breastfeeding mothers' perceptions of parental support for breastfeeding mothers' nutritional intake. Several suggestions were put forward based on the results of this study, including the development of research by adding several variables such as the characteristics of the parity of breastfeeding mothers and cultural factors that can influence the support given by parents to breastfeeding mothers.

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