

**FACTORS THAT INFLUENCE GIVING BABY IN LACTATION  
MANAGEMENT WITH ManLak-CFA (MANAGEMENT OF LACTATION AND  
CHILDREN FIRST AID) MODUL COMBINE VIDEO EDUCATION**

**\*Rimawati, \*Heru Suwardianto**

\*Lecture Baptist Hospital Health Collage Jl. Mayjen Panjaitan 3B Kediri  
STIKES Baptist Hospital in Kediri  
JL. Mayjend Panjaitan No. 3B Kediri  
rimawati150210@gmail.com

**ABSTRACT**

Feeding the baby is to provide other foods in addition to breast milk when the time is right that is 6 months. The purpose of this study is to study the description of factors that influence infant feeding. The research design is descriptive. The population is all parents who have babies with incidental sampling technique with a total sample of 44 respondents. Variables are factors that affect feeding with Man-Lak Modul. Data collection using the Google Form questionnaire and Youtube Video. The results of this study found that the indicator of starting feeding as early as possible was 86.4% both on factors affecting feeding, the indicator of mother and child collaboration was 50% good and sufficient in influencing feeding. Indicators of the role of fathers and other family members found 84.1% sufficient in influencing feeding. Indicator Determining the feeding schedule did not experience difficulties in feeding found 84.1% sufficient in influencing feeding, and the Indicator of eating habits found 84.1% both in influencing feeding. This study concludes that most (88.6%) factors influence infant feeding

**Keywords:** Lactation Management, Feeding, Babies

**Introduction**

Babies are children with an age range of 0-12 months. The baby is the first month of critical life because the baby will experience adaptation to the environment, changes in blood circulation, and organs in the body begin to function, and at the age of 29 days to 12 months, the baby will experience rapid growth (Ruslianti, 2015). At the age of 7-9 months, breastfeeding is still given. But after 6 months, infants begin to be introduced to more dense foods in the form of pulverized / mushy foods like the filter team (Maryam, 2016). Feeding infants is giving other foods besides breast milk when the time is right,

6 months (Marmi, 2014). The purpose of feeding as meeting the nutritional needs for survival, growth, and development, and activities and others. Not only that, but the purpose of feeding is also as an educator for eating skills, fostering taste, discipline, and learning facilities as well as feeding as well as psychological factors for the satisfaction and close relationship between mother and child (Rusilanti, 2015). Based on the results of pre-research in the Outpatient Installation of Baptist Hospital in Kediri, it was found that the mother feeds the baby before 6 months, in feeding the baby the mother does not feed according to age, the mother also does not make a schedule for supplementary

feeding every day and mothers have difficulty in feeding the baby.

World Health Organization (2015) states that diarrhea is the number one cause of infant mortality in the world. The United Nations Agency for Child Affairs (UNICEF) estimates that every 30 seconds one child dies of diarrhea in Indonesia. Incidence of diarrhea in infants, one of which is caused by hygiene, including knowledge and attitudes of mothers in feeding, where babies have been fed other than breast milk (breast milk) before the age of 6 months. According to the World Health Organization, 2015 infants who receive breastfeeding foods before the age of 6 months will have a 17 times greater risk of having diarrhea and 3 times more likely to get ARI compared to infants who only get exclusive breastfeeding and get MP breast milk on time. Maharani research results, 2016 showed a significant relationship between early breastfeeding complementary feeding and the incidence of diarrhea in infants aged 0-12 months in North Dampal, Tolitoli, Central Sulawesi (Maharani, 2016).

Babies can indeed eat anything just like adults. However, they can also refuse if the food served does not meet their tastes. Therefore, as a parent, it must be democratic to serve food that is a child's hobby. Good nutrition intake plays an important role in achieving optimal body growth, and this optimal body growth includes brain growth which greatly determines one's intelligence. (Rusilanti, 2015). At this time the baby's brain is ready to face various stimuli such as learning to walk and speak more smoothly. Factors for feeding infants include weight, diagnosis of disease and stage, parental lifestyle, mouth condition as a food recipient, eating habits, mother and child cooperation, starting feeding as early as possible, determining the schedule of administration, father's role, and other members, and age. (Irianto, 2014). The most visible factor in the community environment is the lack of mother's knowledge about nutrition that must be fulfilled by children during their growing

period. Mothers usually actually buy good food for their children without knowing whether the food contains enough nutrition or not, and do not balance it with healthy foods that contain lots of nutrients. (Rusilanti, 2015). The disadvantage of providing complementary feeding (early milk) is that the baby is more susceptible to various diseases, the baby is at risk of suffering from food allergies, the baby is obese/overweight, reduced milk production, and causes the baby to have diarrhea. While the disadvantages of delaying the administration of MPASI are energy needs not being met, babies are at risk of iron deficiency, the development of baby's oral motor function is inhibited, and the baby has the potential to reject various types of food and it is difficult to accept the taste of foods in the future (Monika, 2014).

Through health workers one way the community can find out various information and health issues, especially those relating to infant feeding. If done face-to-face, the community can directly interact and consult directly easily about the feeding problems they face. In addition to providing information about factors that affect infant feeding. Things that can be informed to the family include starting from understanding and a brief explanation about feeding, then what are the symptoms, what causes it to overcome and prevent it, and what foods and drinks are recommended for consumption, as well as providing health education to parents in feeding babies. Nurses can provide education to parents and families on how to teach feeding well.

## Methods

Based on the research objectives, the design used in this study was descriptive. The population in this study are all parents who have babies. The sampling technique used was *incidental sampling*, with a large subject of 44 respondents who met the inclusion criteria. The variables in this study are factors that affect infant feeding.

The research instrument used was a questionnaire (google form) consisting of 5 indicators with a total of 20 questions using scale *ordinal* and validity tests and

reliability tests were obtained for large Cronbach's Alpha results  $p = 0.662$ . Analysis of the data in this study uses *table* the frequency distribution.

## Research Results

Table 1. Specific data Factors Influencing Infant Feeding

Factors Affecting Feeding	Categories						Total	%
	Good		Fairly		Less			
	F	%	F	%	F	%		
Starting Feeding As Early As Possible	38	86.4 %	4	9.1%	2	4.5%	44	100
Mother and Child Cooperation	22	50%	22	50%	0	0	44	100
The role of fathers and other family members	37	84.1%	7	15.9%	0	0	44	100
Determining Feeding Schedule	5	11.4%	37	84.1%	2	4.5%	44	100
Eating habits	37	84.1%	7	15.9%	0	0	44	100

Based on the table Shows Factors That Influence Infant Feeding Indicators Starting Early Eating Perhaps most of the 38 respondents (86.4%) are good, the indicators of collaboration between mother and father show more than 50%, 22 respondents (50%) are good and more than 50%, 22 respondents (50%) are sufficient. The indicators of the role of fathers and other family members showed that 37 respondents (84.1%) were good. In the Determining Indicator of Feeding Schedule, it was found that most of the 37 respondents (84.1%) were sufficient, and in the indicator of eating habits, the majority of 37 respondents (84.1%) were found to be good.

## Discussion

Based on the results of the study found that most of the 60 respondents (88.3%) had no difficulty eating. Feeding the baby is a food transition from breast milk to family food. The introduction and feeding of infants should be done in stages both in form and amount, according to the digestive ability of the baby/child. (Proverawati, 2014). Feeding the baby is giving the baby other food besides breast milk after or when the right time is starting at 6 months (Marmi, 2014). At the age of 6 months, babies are introduced to

complementary feeding (MPASI), but most children do not get MPASI properly both in terms of quality and quantity. If babies 6-24 months of age do not get enough nutrition from MPASI, it will result in growth disorders and malnutrition. Therefore, to overcome the problem of malnutrition, it is necessary to improve the quantity and quality of MPASI. This can be supported by the theory of Marmi 2014 that the Factors Affecting Infant Feeding that need to be considered so that food management for infants and children can be successful are as follows: Mother and child collaboration. It starts at birth and continues until the child can feed himself. Food should be fun for children and mothers. Mothers who are tense, anxious, irritable are a tendency to cause eating difficulties, but it is also influenced by the factor of starting feeding as early as possible. Feeding as early as possible has the aim of supporting normal metabolic processes for the close growth of mother and child, reducing the risk of hypoglycemia, hyperkalemia, hyperbilirubinemia, and azotemia, the role of fathers and other family members in feeding, the closest family and friends have a big role in determining the time MPASI and type of food given as a starting menu. Therefore, proper education in other family members and the environment is very important, not the case for mothers

and fathers. Eating habits (likes, dislikes, and *acceptability* of the type of food and tolerance of the child to the food provided) The role of parents is needed to form healthy eating behaviors. A mother in this case must know, want, and be able to implement balanced or healthy food in the family because the child will imitate the eating behavior of parents and people around the family. With the respondent providing appropriate complementary feeding, it greatly influences the growth and development of the baby because all of his digestive organs can process foods that are suitable for his age to minimize the incidence of diarrhea, allergies, and metabolism.

A baby who is choking will be unable to cry, cough, make any noise or breathe must be help and the near with baby is mother or family, so they must have knowledge and skill for that (Astuti & Suwardianto, 2016; Rimawati et al., 2018; Suwardianto et al., 2017c, 2017b, 2017a, 2018; Suwardianto, n.d.-b, n.d.-a, 2012, 2015; Suwardianto & Richard, 2017; Suwardianto & Rimawati, 2018; Suwardianto & Sari, 2020; Suwardianto & Selvia, 2015).

The results of the study found that the factors that influence feeding in infants aged 7-12 months in the Outpatient Installation of Baptist Hospital in Kediri are mostly good. It can be said that almost all respondents affect feeding to babies especially at the age of 7-12 months, where that age is the golden age in achieving optimal growth and development of children. Besides, good feeding can occur if feeding is based on good knowledge. The knowledge referred to here is the knowledge that is not only obtained in the school bench but the knowledge obtained from non-formal education, for example by reading magazines, watching TV programs, attending counseling at health centers and hospitals provided by midwives, nurses or others. This is evidenced by mothers who have a tertiary education level and do not work tend to have good knowledge in feeding their children, this is also because mothers have more time to process and

always prepare food for their children so that nutrient content is highly considered.

From the results of the study of demographic data, parents get the accuracy of breastfeeding complimentary food caused because respondents provide complimentary food after 6 months of age. With the respondent providing appropriate complementary feeding, it greatly influences the growth and development of the baby because all the digestive organs can process foods that are suitable for their age to minimize the incidence of diarrhea, allergies and the body's metabolism is not disturbed. very much influenced by the role of mother According to researchers, mothers who have jobs as housewives have the time to provide complementary feeding by feeding the baby compared to mothers who have activities outside the home. With mothers who remain at home, mothers will be calmer and can provide varied food and can serve as interesting food as possible, so that children can eat well. This is consistent with the results of the study, where most of the work of mothers of 24 respondents (54.5%) were housewives. From the results of the study that respondents who do not work because mothers want to focus on caring for their babies and can monitor their growth and development. In terms of work, work is generally a time-consuming activity. Working for mothers will influence family life. Most respondents not working have greater free time with children. According to researchers mothers who have jobs as housewives have time to always accompany the child at mealtimes compared to mothers who have activities outside the home. With mothers who remain at home, mothers will be calmer and can provide varied food and can serve food that is as attractive as possible, so that feeding can be carried out properly. Therefore the role of the mother is very important in achieving appropriate child development, as a wife and mother of her children the mother has a role to take care of the household so that the child's feeding needs are met and the child has good eating habits. According to Koentjaraningrat (1995) in Yatta 2011, the

higher a person's level of education, the easier it is to receive information. Conversely, less education will hinder the development of one's attitude towards newly introduced values. Most respondents were educated as tertiary institutions as many as 20 respondents (45.5%). Respondents get the right information from existing sources such as midwives, nurses, doctors, and even from television, radio and internet media that will influence the behavior of complementary feeding so that respondents can respond positively and obtain wider knowledge and conduct complementary feeding ASI with the right age. For respondents who have babies aged 7 to 12 months who are cared for by the family (grandmother or grandfather) or are cared for by household assistants in the sufficient and fewer categories because they do not pay attention to feeding the baby. Regular weight monitoring can affect or show good feeding in infants aged 7- 12 months. A good weight or enough according to the age of the baby can indicate good feeding.

The results of the study on indicators starting feeding as early as possible found most 38 respondents (86.4%) had no difficulty in feeding as early as possible. This is strongly influenced by the role of mothers who start feeding according to the age of the baby so that attention to problems that occur in children is evidenced from the analysis of respondents' answers where most respondents answered "often" in questions 1, 2, 3, and 4. At the age of 6 months, babies begin to be introduced to complementary feeding (MPASI). If babies 6-24 months of age do not get enough nutrition from MPASI, it will result in growth disorders and malnutrition. Therefore, to overcome the problem of malnutrition, it is necessary to improve the quantity and quality of MPASI (Irianto, 2014). Besides, 4 respondents (9.1%) are sufficient and 2 respondents (4.5%) are less in initiating early feeding maybe because mothers who have infants aged 7-12 months are afraid of the disease in giving MPASI and mothers lack information about proper feeding

according to age. This has a significant loss effect in delaying the provision of MPASI, namely: The baby's energy needs are not met; if the baby's energy needs are not met, the baby will stop growing or not grow optimally, even if left unchecked, the baby can suffer from growth failure, the baby is at risk of iron deficiency, the need for macronutrients and other micronutrients is not fulfilled, resulting in the baby at risk of suffering from malnutrition and micronutrient divisions, The development of the baby's oral motor function can be hampered, Babies have the potential to reject various types of food and difficult to accept the taste of new foods in the future (Monika, 2014). Therefore it is necessary to increase the knowledge and skills of officers in providing counseling for giving MPASI and monitoring growth to mothers.

Based on the results of research on indicators of cooperation between mother and child most of the 44 respondents each 22 respondents (50%) good and sufficient categories. Successful infant feeding requires collaboration between mother and baby, starting with the experience of early feeding and continuing as long as the child is still in a period of dependency. Immediately fostering enjoyable and satisfying feeding practices greatly helps the emotional health of infants and children. Mealtime must be able to please the mother and baby. Because the mother's feelings are easily transferred to her baby and largely determine her emotional state during the feeding, tension, anxiety, irritability, irritability or emotionally unstable mothers are more likely to experience relationship difficulties during feeding, but they often become more pleasant and confident with appropriate coaching and support from family, friends or doctors who are empathetic and experienced. Mother and child cooperation that is sufficient and good should be fun. It is proven by the mother providing attractive complementary foods so that the child feels happy and the mother always provides various complementary foods. The thing that mothers can do to collaborate with babies in feeding is the

provision of MPASI with the Baby Led Weaning method. Baby Led Weaning deals with providing food pieces where babies can hold it with their hands and babies can choose food instead of using Dodds spoon, 2013 in Sulistyarini, et al. 2015. The benefits of BWL are allowing babies to explore food for themselves, training children independent, effective, makes it easy for mothers who do not have helpers at home, makes it easy when traveling, and teaches children to explore new foods. By providing complementary foods with the Baby Led Weaning (BLW) method, it will improve the diet of both infants and enhance the mother's collaboration with the baby. In feeding the baby, the mother can teach the child to be more independent before the age of 12 months and to train the child's fine motor skills, one of which is eye-hand coordination, in addition to this method the baby can explore the taste and texture of his food, without needing to be helped to enter food to his mouth.

Based on the results of research on the indicator of the role of fathers and other family members obtained the majority of 37 respondents (84.1%) the role of fathers and family members is very influential in feeding to infants because in themselves there is a feeling of pride and happiness has made great achievements. The readiness of infants to receive MPASI also depends on the maturity of the digestive system and other infant development. The closest family and friends have a big role in determining the time of giving MPASI and the type of food provided as the initial menu. Therefore the role of nurses is very important in providing appropriate education to other family members and the environment is very important, not the case for mothers and fathers. (Monika, 2014). The indicators of the role of fathers and other family members are well evidenced by families helping in providing complementary foods for babies and families helping to prepare complementary foods given to babies. Whereas in 7 respondents (15.9%) it was sufficient to prove that sometimes the family was

involved in determining the type of food that was given to the baby and assisted in preparing complementary foods for the baby.

Based on the results of the study on indicators determining the feeding schedule, 37 respondents were received. 84.1%) is sufficient for determining the feeding schedule. This is because the mother always pays attention to the feeding schedule to the baby by making a special schedule in making food for the baby one of which is in the morning the baby is given mushy porridge food during the day when the baby is given a snack such as biscuits and at night the baby is usually also given mushy porridge coupled with snacks and some are giving milk. Feeding babies should be diverse, using foods that have been introduced since the six-month-old baby has received the baby, and developed again with food ingredients following family food. The role of parents is needed to form healthy eating behaviors. A mother in this case must know, want, and be able to implement balanced or healthy food in the family because the child will imitate the eating behavior of parents and those around them in the family (Ruslianti, 2015). The indicator determines adequate feeding schedule proven by the mother consulting with health workers related to complementary feeding according to the age of the baby, while for 5 respondents (11.4%) get good results proven by the mother giving snacks between hours hunt for complementary feeding such as boiled memories, biscuits, while for 2 respondents (4.5%) who lacked a determination of feeding schedule, it was proven by the mother having no variation in both the presentation and type of complementary foods. Therefore the role of nurses is very important in providing education in good and regular feeding needs to be introduced early on, among others by the introduction of meal hours and food variations.

Based on the results of research on indicators of eating habits get 37 respondents (84.1%) both in determining eating habits in infants. This is because the mother gives food that is loved by the baby

so the baby wants to eat. With the customary benefits of satisfying the needs of babies who are truly hungry as they say there are various kinds, physiological needs are met immediately; the baby does not learn to associate long crying and discomfort with feeding; and babies don't seem to have developed poor eating practices such as swallowing food in a hurry or eat a little too often. The baby immediately forms a certain schedule that allows the family to resume normal functioning. If that does not happen, special feeding or a full day's schedule can be continued or postponed sufficiently to avoid conflict with the needs of family activities. Some mothers will not understand the purpose of "baby's self-regulation; some mothers will misinterpret the doctor's instructions and other mothers may not be able to adjust to the baby's life rules. Parents who are orderly, overly anxious, and forcibly might do better with a chart more specific baby activities, besides the role of the family is also very important in efforts to eat habits in children by familiarizing children with new foods so that children begin to recognize foods that they do not know (Nelson, 1999). do not want to eat and the mother does not provide complimentary foods that can cause allergies in infants while for the adequate category there are 7 respondents (15.9%) proven by infants spending complementary foods provided by mothers. One of the family's support can also be shown by changing the menu variants so that children know all types of food.

### Conclusion

Factors that influence infant feeding are found mostly on indicators of starting feeding as early as possible, the role of fathers and other family members, and eating habits. The indicators determining the feeding schedule are mostly sufficient. This research is expected to help the development of professionalism of nurses in child care and can be used as input for nurses, the need to provide

knowledge to respondents (parents who have babies about determining appropriate feeding schedules according to the age of the child and the role of nurses is very important in providing education to parents where researchers can encourage parents to cooperate between mother and child, to avoid tension between mother and child

### Acknowledgments

We thank the Indonesian Ministry of Science, Research, Technology, and Higher Education (RISTEKDIKTI RI) for the 2019 Research Grant and the 2020 implementation. We are grateful to all parties and all the research respondents.

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