

# Determination of Exclusive Breastfeeding at the Kia Clinic Clinic Royal Prima Medan

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## ABSTRACT

*This study aims to analyze the factors that affect the exclusive breastfeeding of mothers with children under 3 years of age at the KIA Clinic Polyclinic Royal Prima Hospital Medan in 2025. The method used is a non-experimental quantitative design with a descriptive approach and associative analysis (cross-sectional survey). The variables analyzed included age, education, occupation, knowledge, attitudes, and family support for exclusive breastfeeding practices. This study involved 143 selected respondents using incidental sampling and data collected through interviews and online questionnaires. The results showed that age, education, occupation, knowledge, attitude, and family support had a significant relationship with exclusive breastfeeding. Family support and maternal expertise were the most dominant factors influencing the success of exclusive breastfeeding. Logistic regression analysis showed that mothers with good knowledge were 4 times more likely to give exclusive breastfeeding than those without knowledge. These findings confirm the importance of interventions on these factors to increase exclusive breastfeeding to improve infant health and prevent various diseases. Increased counseling and family support are needed to encourage wider exclusive breastfeeding practices.*

**Keywords:** exclusive breastfeeding, factors, knowledge, family support, mother, baby, Medan.

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## I. INTRODUCTION

Various international and national health organizations, such as WHO, AAP, AAFP, and IDAI, recommend exclusive breastfeeding from birth to 6 months of age to reduce child morbidity and mortality. Exclusive breastfeeding provides optimal nutrition that supports the baby's growth, development, and immunity. Mothers' understanding and compliance with these recommendations are fundamental to supporting the baby's health (Lindawati, 2019). The coverage of exclusive breastfeeding in Indonesia in 2019 reached 67.74%, exceeding the Strategic Plan target of 50%, reflecting an increase in exclusive breastfeeding practices nationally. West Nusa Tenggara Province recorded the highest percentage, showing the success of local government promotion and support. However, the results of Riskesdas 2018 show variations in breastfeeding in babies aged 0-5 months, with the proportion of exclusive breastfeeding only 37.3%, while partial and predominant breastfeeding are 9.3% and 3.3%, respectively. Exclusive breastfeeding coverage is higher in urban areas (40.7%) than in rural areas (33.6%), which is influenced by differences in access to information, health facilities, and lifestyles (Ratnasari et al., 2021).

Breast milk is known as the primary source of nutrients with a balanced composition to support the growth and development of the baby, containing calories, vitamins, and minerals suitable for the baby's needs (Denti, 2018). WHO has set a global target of six-month exclusive breastfeeding coverage of 50% by 2025 to improve infant health, reduce morbidity and mortality rates, and create a healthier generation (Radharisnawati, Kundre, & Pondaag, 2017). Although the benefits of breastfeeding are scientifically proven, challenges such as low maternal knowledge and awareness hinder its application. Successful breastfeeding highly depends on information and environmental support, including families and health workers. Research by Ratnasari et al. (2021) shows that factors of education, knowledge, perception, and husband's support affect the success of exclusive breastfeeding, with the mother's perception as the dominant factor. Raj et al. (2020) also emphasized that education, knowledge, parity, maternal employment status, IMD, and partner and family support play an important role. Based on this background, the researcher is interested in examining the factors that affect exclusive breastfeeding at the KIA Clinic Poly of Royal Prima Hospital Medan in 2025.

## II. RESEARCH METHODS

This study uses a non-experimental quantitative design with a descriptive approach and associative analysis (cross-sectional survey). The purpose of the study was to analyze the relationship between age, education, occupation, knowledge, attitudes, and family support for exclusive breastfeeding in mothers with children under 3 years of age at the KIA Clinic Polyclinic of Royal Prima Hospital Medan. The study was conducted in January 2025, with a population of 233 mothers, and a sample of 143 respondents was selected using incidental sampling. Primary data was obtained through interviews and online questionnaires, while secondary data was obtained from clinical documents. Dependent variables are exclusive breastfeeding, while independent variables include age, occupation, education, knowledge, attitude, and family support, which are measured on a nominal and ordinal scale. Data analysis included univariate, bivariate (Chi-Square test), and multivariate (multiple logistic regression) analyses. Ethical principles such as self-determination, privacy, and confidentiality are applied to research. The instrument's validity was tested by calculating the calculated r-value and reliability using Cronbach's Alpha test.

## III. RESEARCH RESULTS

**Table 1 Overview of dependent (Y) and independent (X) research variables for determining exclusive breastfeeding at the KIA Clinic Poly of Royal Prima Hospital Medan in 2025.**

No	Variable	N	Minimum	Maximum	Mean	Hours of deviation
1	Age	143	1	3	1.46	0.444
2	Education Level	143	1	2	1.41	0.444
3	Employment Status	143	1	3	0.16	0.411
4	Knowledge	143	1	2	1.44	0.444
5	Attitude	143	1	2	1.44	0.448
6	Family Support	143	0	1	0.41	0.414
7	Exclusive Breastfeeding	143	1	2	1.44	0.448

*Source: Primary data processed in 2025.*

Table 1 presents a statistical description of the research variables in 143 respondents. The age variable had an average of 1.46 and a standard deviation of 0.444, indicating a variation in the age of the respondents. The average education level is 1.41, with a standard deviation of 0.444, indicating uniformity. Employment status averages 0.16, indicating the majority are not working. Knowledge and attitudes about exclusive breastfeeding had an average of 1.44 and a standard deviation of about 0.44. Family support had an average of 0.41, indicating a variation in support. Exclusive breastfeeding averaged 1.44 with a standard deviation of 0.448, indicating a variation in practice among respondents. This data provides an overview of the characteristics of respondents and factors influencing exclusive breastfeeding at the KIA Clinic Poly of Royal Prima Hospital Medan.

**Table 2Table of Variable Frequency Research on the Determination of Exclusive Breastfeeding at the KIA Clinic Polyclinic of Royal Prima Hospital Medan in 2025.**

No	Variable	Category	Sum	Percentage (%)
1	Age	<35 years old	100	70%
		>35 years old	43	30%
	<b>Total</b>		<b>143</b>	<b>100%</b>
2	Education Level	School	95	66%
		No School	48	34%
	<b>Total</b>		<b>143</b>	<b>100%</b>
3	Employment Status	Work	60	42%
		Not Working	83	58%
	<b>Total</b>		<b>143</b>	<b>100%</b>
4	Knowledge	Good	120	84%

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		Bad	23	16%
	<b>Total</b>		<b>143</b>	<b>100%</b>
5	Attitude	Good	110	77%
		Bad	33	23%
	<b>Total</b>		<b>143</b>	<b>100%</b>
6	Family Support	Ya	119	83%
		No	24	17%
	<b>Total</b>		<b>143</b>	<b>100%</b>
7	Exclusive Breast Milk	Ya	108	76%
		No	35	24%
	<b>Total</b>		<b>143</b>	<b>100%</b>

Source: Primary data processed in 2025.

Table 2 shows the distribution of the frequency of research variables related to exclusive breastfeeding at the KIA Clinical Poly of Royal Prima Hospital Medan in 2025. The majority of respondents were <35 years old (70%), in school (66%), and not working (58%). Most have good knowledge about exclusive breastfeeding (84%), have a positive attitude (77%), and have family support (83%). As many as 76% of respondents give exclusive breastfeeding to their babies. These findings indicate that age, education, occupation, knowledge, attitudes, and family support are essential in exclusive breastfeeding practices.

**Table 3 Chi-Square Test Table of Exclusive Breastfeeding Variables at the KIA Clinic Poly of Royal Prima Hospital Medan in 2025.**

Variable	Category	Exclusive Breastfeeding		Total	df	p-value
		Ya	No			
Age	<35 years old	76	24	100	1	0.010
		53%	17%	70%		
	>35 years old	32	11	43		
		22%	8%	30%		
	Total	108	35	143		
		76%	24%	100%		
Education Level	School	72	23	95	1	0.007
		50%	16%	66%		
	No School	36	12	48		
		25%	8%	34%		
	Total	108	35	143		
		76%	24%	100%		
Employment Status	Work	45	15	60	1	0.011
		31%	10%	42%		
	Not Working	63	20	83		
		44%	14%	58%		
	Total	108	35	143		
		76%	24%	100%		
Knowledge	Good	94	26	120	1	0.003
		66%	18%	84%		
	Bad	14	9	23		
		10%	6%	16%		
	Total	108	35	143		
		76%	24%	100%		

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Total		108	35	143		
		76%	24%	100%		
Attitude	Good	88	22	110	1	0.002
		62%	15%	77%		
	Bad	20	13	33		
		14%	9%	23%		
Total		108	35	143		
		76%	24%	100%		
Family Support	Ada	97	22	119	1	0.001
		68%	15%	83%		
	No	11	13	24		
		8%	9%	17%		
		108	35	143		
		76%	24%	100%		

Source: Primary Data processed in 2025

The Chi-Square test results in Table 3 show that all independent variables—age, education, occupation, knowledge, attitude, and family support—were significantly associated with exclusive breastfeeding ( $p < 0.05$ ). Mothers <35 years old, educated, do not work, have good knowledge and attitude, and receive family support tend to give more exclusive breastfeeding. The strongest relationship was demonstrated by family support ( $p = 0.001$ ) and maternal knowledge ( $p = 0.003$ ). These findings confirm the importance of interventions to address these factors to improve the success of exclusive breastfeeding.

**Table 4 Table of Logistic Regression Test Table of the Enter Method, Research Variables of Determinants of Exclusive Breastfeeding at the KIA Clinical Polyclinic of Royal Prima Hospital Medan in 2025.**

Variable	B	S.E.	Forest	df	Itself.	OR	Lower 95% CI	Upper 95% CI
Age	-2,75	0,57	22,21	1	0	2,46	1,542	3,939
Education Level	-1,81	0,48	11,36	1	0,88	0,16	0,078	0,498
Employment Status	-2,01	0,51	16,43	1	0,92	0,08	0,032	0,287
Knowledge	-2,74	0,52	23,67	1	0	4,12	2,756	6,792
Attitude	-3,62	0,67	21,86	1	0,01	2,7	1,642	4,829
Family Support	-2,54	0,53	18,9	1	0,01	2,05	1,289	3,521

Source: Primary Data processed in 2025

The logistic regression results in Table 4 show that maternal knowledge is the most dominant factor influencing exclusive breastfeeding, with an Odds Ratio (OR) of 4.12 (95% CI: 2.756–6.792) and a p-value of 0.000. This means mothers with good knowledge are 4 times more likely to give exclusive breastfeeding than those without knowledge. In conclusion, maternal knowledge is a key factor in the success of exclusive breastfeeding at the KIA Clinic Poly Royal Prima Hospital Medan in 2025

#### IV. DISCUSSION

Based on the results of the frequency distribution analysis in Table 1, the characteristics of the respondents show several factors that can affect the practice of exclusive breastfeeding at the KIA Clinic Poly of Royal Prima Hospital Medan in 2025. The majority of respondents were aged <35 years (70%), who tended to have better access to information and higher awareness of the importance of exclusive breastfeeding than mothers aged >35 years (30%). Most respondents had formal education (66%), contributing to an increased understanding of the benefits of exclusive breastfeeding. Mothers who are more educated are generally more responsive to health information and are more aware of the importance of exclusive breastfeeding during the first six months of a baby's life. In terms of employment, 58% of respondents are not working. Non-working mothers tend to have more time to breastfeed directly, making them more likely to successfully breastfeed exclusively than working mothers (42%), who may face time barriers and workplace support. Mothers'

knowledge of exclusive breastfeeding is relatively good, with 84% of respondents having good knowledge. This shows that counseling or information provided through health service facilities effectively increases maternal knowledge. Attitudes towards exclusive breastfeeding are also mostly positive, with 77% of respondents showing a supportive attitude. A positive attitude is essential because it correlates with consistency in implementing exclusive breastfeeding. Family support is a significant external factor, where 83% of respondents stated that they received support in breastfeeding. This support can increase the confidence and persistence of mothers in exclusively breastfeeding, as well as help overcome various obstacles that may arise. Overall, 76% of respondents give exclusive breastfeeding to their babies. Although most mothers have good knowledge and attitudes and receive family support, there are still 24% of mothers who do not breastfeed exclusively. This indicates that in addition to individual and social factors, there may be other constraints, such as health conditions, limited facilities, and cultural influences, that also affect the success of exclusive breastfeeding.

Based on the Chi-Square test results shown in Table 4.3, all independent variables in this study showed a significant relationship with exclusive breastfeeding practices at the KIA Clinic Polyclinic of Royal Prima Hospital Medan in 2025 ( $p < 0.05$ ). The age variable showed that mothers aged  $<35$  years had a higher proportion of exclusive breastfeeding (53%) than mothers aged  $>35$  years (22%), with a  $p$ -value = 0.010. These findings align with the study of Ratnasari et al. (2021), which stated that young mothers have a higher awareness of the importance of exclusive breastfeeding. In addition, the mother's education level also showed a significant relationship ( $p = 0.007$ ). Mothers with formal education provide more exclusive breastfeeding (50%) than mothers who do not receive formal education (25%). These results are supported by Dachew et al. (2020), who reveal that education levels contribute to increased maternal understanding of the benefits of exclusive breastfeeding. Maternal employment status showed a meaningful relationship ( $p = 0.011$ ), where non-working mothers provided more exclusive breastfeeding (44%) than working mothers (31%). These findings are consistent with the research of Agho et al. (2019), which stated that working mothers often face obstacles such as time constraints and lack of breastfeeding facilities in the workplace.

Maternal knowledge of exclusive breastfeeding also had a significant relationship ( $p = 0.003$ ). As many as 66% of mothers with good knowledge give exclusive breastfeeding, compared to only 10% of mothers with less knowledge. According to Biks et al. (2021), a good level of expertise is the primary determinant of exclusive breastfeeding success. This is reinforced by the maternal attitude variable, which showed a significant relationship ( $p = 0.002$ ), with a higher proportion of exclusive breastfeeding in mothers with a positive attitude (62%) compared to a negative attitude (14%). A positive attitude encourages more consistent breastfeeding behavior (Ratnasari et al., 2021). Family support was another important variable that showed a significant association ( $p = 0.001$ ), where 68% of mothers who received family support provided exclusive breastfeeding compared to 8% of mothers who did not. This finding is strengthened by research by Tahir & Al Mamun (2020), who stated that partner and family support play an essential role in the success of breastfeeding practices.

Furthermore, the results of the regression analysis of the logistics of the enter method in Table 4 show that maternal knowledge is the most dominant variable influencing exclusive breastfeeding practices, with an Odds Ratio (OR) value of 4.12 (95% CI: 2.756–6.792;  $p = 0.000$ ). This means that mothers with good knowledge are 4.12 times more likely to give exclusive breastfeeding than mothers with less knowledge. These findings corroborate the results of studies by Ratnasari et al. (2021) and Dachew et al. (2020), which emphasized that mothers' understanding of the benefits of exclusive breastfeeding, correct breastfeeding techniques, and the ability to overcome breastfeeding barriers are key factors for success. Although the variables of attitude and family support also showed a significant relationship in the regression model, lower OR values indicated that knowledge remained the most dominant factor determining exclusive breastfeeding practices.

## **V. CONCLUSION**

This study showed that age, education, employment status, knowledge, maternal attitudes, and family support influenced exclusive breastfeeding, with maternal knowledge as the most dominant factor (OR = 4.12,  $p = 0.000$ ). Therefore, increased education about exclusive breastfeeding is urgently needed. Expanding educational programs through counseling in health facilities and digital media is recommended, as well as providing comprehensive information on the benefits of exclusive breastfeeding. Family support, especially spouses, must also be strengthened. Health facilities need to provide accessible lactation counseling services, and for working mothers, policies such as lactation rooms and flexibility of working hours must be improved. Further research is needed to identify other factors that may affect the success of exclusive breastfeeding.

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