ANALYSIS OF GIVING EARLY ASI, ASSEMBLY WITH NUTRITION STATUS IN BABY AGE 0 - 6 MONTHS IN POSYANDU VILLAGE SIWALANPANJI BUDURAN SIDOARJO

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**ABSTRACT**

There are still many parents who give MP-ASI early that may be resulting in excess nutritional risks in infants. The purpose of this study is to determine the relationship between early breastfeeding with nutritional status in infants aged 0-6 months in Posyandu Desa Siwalanpanji Buduran Sidoarjo. This research uses observational analytic design with a cross-sectional approach. The population was 35 mothers and infants aged 0-6 months. The sample was 32. The Sampling technique using probability sampling with simple random sampling. The independent variable is the provision of early breast milk and the dependent variable is the nutritional status. The instrument used is the questionnaire. The statistical test using Mann Whitney. The results of the study were almost entirely of respondents (84.4%) gave early-breastfeeding (MP-ASI) and most of them (59.3%) had more nutritional status. The result of Mann Whitney test with significance level $\alpha = 0.05$ got value $\rho = 0.017$ and $\alpha = 0.05$. Thus $\rho < \alpha$ then $H_0$ is rejected which means there is a relationship between the giving of early breastfeeding with the nutritional status of infants aged 0-6 months. Early breastfeeding may cause the baby has more nutritional status and be at risk of obesity. It is expected that health practitioners provide health education related to the correct procedure of giving MP-ASI, the benefits of breastfeeding, and the risk of more nutritional.

**Keywords**

- early breastfeeding
- food, nutritional status

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INTRODUCTION

Nutritional status is an expression of the state of balance in the form of certain variables or the manifestation of nutriture in the form of certain variables (Suparisa et al., 2001). Nutritional status is evidence of how far human attention is to the adequacy of nutrition for the body (Apriadji, 1986). In a family, if the child is left at home with a helper or another family, it can cause discomfort for the working mother because she always imagines the risks that can occur to her child at home, which can have a negative impact on the nutritional status of the figure.

Authorized capital formation of quality human beings starts from the baby in the womb accompanied by the provision of breast milk (ASI) from an early age, especially the provision of exclusive breastfeeding that is giving only breast milk to babies from birth until the baby is 6 months old. ASI besides the baby's needs is also a baby's right that must be fulfilled by his parents (Ministry of Health, 2010). In undergoing growth and development of course the child needs help from the surrounding environment. There are several factors that inhibit or support, these factors can come from outside or from within the child itself, one of the external factors that influence the growth and development of children is the nutrition that children get (Supartini, 2011). Giving food is also an important factor, but there is a fact that it is still found wrong feeding in infants and feeding the baby is considered wrong if the provision of complementary food is too late or slow (Sulistijani and Herlianty, 2010).

There is a phenomenon that in advanced times like now many mothers who are actively working but are still eager to compete to provide exclusive breastfeeding to their babies by pumping and storing for supplies when the mother is not with her baby, but there are still more mothers choose to give MP-ASI early for reasons more practical than if you have to pump milk. Mothers who give MP-ASI to babies under the age of 6 months can interfere with nutrition in infants, infants who are given supplementary food earlier will be very risky for more nutrition and even obesity in the future until the baby is mature so can affect the nutritional status of the baby (Gibney, MJ et al., 2009 in the book "Nutrition of Public Health" (Hartono and Widyastuti: Translators). We can see the low level of exclusive breastfeeding from the national target of 80% from the following data, namely the coverage of exclusive breastfeeding in the last 1 year and without a history of MP-ASI from 0 months old babies as much as 52.7%, age 1 month, 7%, age 2 months 46%, age 3 months 42.2%, age 4 months 41.9%, age 5 months 36.6%, age 6 months 30.2%. This means that the increasing age of the baby, the higher the number of history of MP-ASI given to infants, namely age 0 months 47.3%, age 1 month 51.3%, age 2 months 54%, age 3 months 57.8%, age 4 month 58.1%, age 5 months 63.4%, age 6 months 69.8% (Health Research and Development Agency, 2013).

According to the Ministry of Health of the Republic of Indonesia in 2011 infants aged 0-6 months who received early breast milk and MP-ASI were 81.54%, while for the nutritional status coverage of infants 0-6 months in 2011 was 4.2% including malnutrition; 7.2% included in malnutrition; 82.3% including good nutrition, and 6.2% including over nutrition. Based on the results of a study conducted at the Posyandu in Siwalanpanji Buduran Sidoarjo Village on September 1, 2016, by looking at the KMS book and finding 5 babies who experienced more nutrition then interviewed the 5 mothers of the 3 results. the baby is 6 months old. Breast milk supplementary food is recommended given when the baby is 6 months old. At the age of under 6 months, the baby's digestive system does not yet have an enzyme to digest the food. As a result, providing complementary food for breast milk can aggravate the work of the baby's...
The baby's intestine also can't work perfectly so it can cause diarrhea, colic and allergic reactions. Giving complementary food to breast milk too quickly causes the baby's need for breast milk to decrease. Even though breast milk is still needed for the growth and endurance of babies (dawud 2014).

The level of risk of nutritional status problems in children can be prevented by doing a number of things including modifying the correct pattern of MP-ASI giving and doing for babies aged over 6 months, a healthy diet for the baby to be healthy. Babies who are still breastfeeding, try breastfeeding especially exclusive breastfeeding because breast milk contains prebiotics (good bacteria) that can prevent the occurrence of overnutrition (Kemenkes RI, 2012). The health team must strive for this to be done by promoting exclusive breastfeeding to be improved, counseling is also needed for mothers regarding supplementary feeding. Additional food that is appropriate for the age of the baby and requires an effort to gradually introduce additional food. Based on the description in the background, the researchers were interested in conducting research on the relationship of early MP-ASI administration with nutritional status at the age of 0-6 months.

MATERIALS AND METHODS

This study used an observational analytic design aimed at analyzing, explaining the relationship between early MP-ASI administration and overnutrition in infants aged 0 - 6 months at Posyandu in Siwalanpaj Buduran Sidoarjo Village in October 2016 of 35 people. The samples of this study used were some mothers and infants aged 0 - 6 months at the Posyandu, Siwalanpaj Buduran Village, Sidoarjo, which was 32 respondents. The method of sampling in this study with probability sampling with a simple random sampling technique that is a simple random sampling. In this study, researchers used a questionnaire and Table of Categories and Nutritional Status Thresholds as research instruments. The results of filling out the collected questionnaire sheets will be tested using the Mann Whitney analysis test using SPSS for windows computer software with a significance level (a = 0.05). If r <a, then there is a relationship between early MP-ASI and the incidence of nutritional status in infants aged 0-6 months at the Posyandu, Siwalanpaji Buduran Village, Sidoarjo.

RESULTS

1. Mother's age

   Characteristics by age of respondents according to (MOH, 2009) include 17-25 years (late adolescents), 26-35 years (early adulthood), and 36-45 (late adulthood) obtained data:

<table>
<thead>
<tr>
<th>No.</th>
<th>Mother's age</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>18-25</td>
<td>7</td>
<td>21.9</td>
</tr>
<tr>
<td>2.</td>
<td>26-35</td>
<td>19</td>
<td>59.4</td>
</tr>
<tr>
<td>3.</td>
<td>36-45</td>
<td>6</td>
<td>18.7</td>
</tr>
</tbody>
</table>

   Amount of 32 100

   Table 1 shows that of the 32 respondents most (100%) of mothers were 26-35 years old (early adulthood).

2. Job status
Table 2 shows that 32 of the majority of respondents (56.2%) work status is working.

2. Special Data

a. Characteristics of Respondents Based on Frequency of Giving MP-ASI

Characteristics of respondents based on the frequency of MP-ASI administration as follows:

<table>
<thead>
<tr>
<th>No.</th>
<th>Frequency of Giving</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>1 time /day</td>
<td>1</td>
<td>3.7</td>
</tr>
<tr>
<td>2.</td>
<td>2 time/ day</td>
<td>12</td>
<td>44.4</td>
</tr>
<tr>
<td>3.</td>
<td>3 time/day</td>
<td>13</td>
<td>48.2</td>
</tr>
<tr>
<td>4.</td>
<td>4 time/ day</td>
<td>1</td>
<td>3.7</td>
</tr>
<tr>
<td></td>
<td>Amount of</td>
<td>27</td>
<td>100</td>
</tr>
</tbody>
</table>

Table 3 shows that of the 27 respondents, almost half (48.2%) gave MP-ASI with a frequency of 3 times/day.

b. Characteristics of Respondents by Age of Infants

<table>
<thead>
<tr>
<th>No.</th>
<th>Age of infants</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>3 month</td>
<td>2</td>
<td>6.3</td>
</tr>
<tr>
<td>2.</td>
<td>4 month</td>
<td>6</td>
<td>18.7</td>
</tr>
<tr>
<td>3.</td>
<td>5 month</td>
<td>6</td>
<td>18.7</td>
</tr>
<tr>
<td>4.</td>
<td>6 month</td>
<td>18</td>
<td>56.3</td>
</tr>
</tbody>
</table>

Table 4 shows that of the 32 respondents most of them (56.3%) the age of the baby is now 6 months.

c. Characteristics of Respondents Based on Nutritional Status

<table>
<thead>
<tr>
<th>No.</th>
<th>Nutritional status</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Malnutrition</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2.</td>
<td>Poor nutrition</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>3.</td>
<td>Good Nutrition</td>
<td>16</td>
<td>50</td>
</tr>
<tr>
<td>4.</td>
<td>More Nutrition</td>
<td>16</td>
<td>50</td>
</tr>
<tr>
<td></td>
<td>Amount</td>
<td>32</td>
<td>100</td>
</tr>
</tbody>
</table>

Table 5 shows that of the 32 respondents half (50%) are good nutrition and over nutrition.

d. Cross Tabulation of the Relationship of Giving MP-ASI Early with Nutritional Status

<table>
<thead>
<tr>
<th>Early Nutritional Status</th>
<th>Malnutrition</th>
<th>Poor Nutrition</th>
<th>Good Nutrition</th>
<th>More nutrition</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>2</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>0</td>
<td>7</td>
<td>3</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

Table 6 Obtained 32 respondents who were not given Early MP ASI as many as 5 respondents who were all (100%) good nutrition while those given early MP-ASI almost half (40.7%) were of good nutritional status and most (59.3%) had more nutritional status.

The results of statistical tests using the Mann Whitney test with a significance level of $\alpha = 0.05$ obtained the value of $p = 0.017$ and $\alpha = 0.05$. Means $p < \alpha$, then $H_0$, which means that there is a relationship between supplementary feeding of early ASI and nutritional status in infants aged 0-6 months at the posyandu in Siwalanpanji Buduran Village Sidoarjo.

DISCUSSION

Based on the results of data analysis with the Mann Whitney test using the SPSS for Windows program it is known that the value
of $\alpha = 0.05$ and the results of $\rho = 0.017$ where $\rho < \alpha$ so that $H_0$ is rejected which means there is a relationship between supplementary feeding of early breastfeeding with nutritional status in infants aged 0-6 months at the posyandu in Siwalanpanji Buduran Village Sidoarjo.

In table 6, there were 32 respondents who were not given Early MP ASI as many as 5 respondents who were all (100%) good nutrition while 27 respondents were given early MP-ASI 11 respondents, almost half (40.7%) had good nutritional status and 16 respondents were partly large (59.3%) with more nutritional status. Giving MP-ASI that is not in accordance with the age and needs of the baby can have an impact on the health and nutritional status of the baby.

There are several factors that cause the good nutritional status of infants even though early MP-ASI has been given, namely quality, quantity, hygiene, and schedule or timing of MP-ASI administration. If these factors are well fulfilled, the baby's nutritional status is good (Saputra et al., 2010). This is what makes people continue to give MP-ASI early to their babies, because not all of them result in overnutrition, for that as health workers must look for ways that people are not wrong Hendrawati, (S., Mardhiyah, A., Mediani, H. S., A. 2018).

Nutrition is more about the body condition of someone who is overweight, which occurs because of the excess amount of energy stored in the form of fat. Some say that nutrition is more synonymous with obesity. Obesity can have a very dangerous impact with the emergence of degenerative diseases, such as diabetes mellitus, coronary heart disease, hypertension, kidney disorders and many more. (Suyono, 2009).

Nutrition plays an important role in the human life cycle. Malnutrition in infants will cause growth and development disorders which if not addressed early can continue into adulthood (Ningtyas, 2015). When an early baby is introduced MP-ASI has a diet that is not in accordance with his body, the baby will get used to eating a lot of excesses. This is supported by the opinion of Lakhsita (2011) that obesity can be due to an imbalance in the intake and output of energy, giving rise to excess energy, which is then stored in the form of fat tissue. Primary obesity occurs 90% if obesity caused by overeating and lack of activity patterns will further increase the risk of obesity and obesity.

**CONCLUSIONS**

Based on the analysis of research data that has been done, it can be concluded as follows:

1. Babies 0-6 months at the Posyandu in Siwalanpanji Buduran Siodarjo Village are almost entirely given early MP-ASI
2. Babies 0-6 months in Posyandu Siwalanpanji Buduran Siodarjo village are mostly over nutrition.
3. There is a relationship between supplementary feeding of early ASI with nutritional status in infants aged 0-6 months at the posyandu in Siwalanpanji Buduran Village Sidoarjo.

**Suggestion**

Based on the results of the research that has been done, the suggestions that can be given by the researcher are as follows:

1. For further researchers (Constantino & Marrus, 2017) Research needs to be carried out in a wider scope by taking larger samples and the latest book references so that research can be generalized and more accurate.
2. For respondents It is expected that mothers will continue to increase knowledge about providing ASI
(MP-ASI) complementary foods that are good and true also about the benefits of ASI by participating in counseling, as well as changing the notion that obese babies are healthy babies.

3. For Posyandu cadres
It is expected that posyandu cadres will not get bored to encourage mothers to weigh their babies’ weight and provide counseling regarding the procedures for giving good and correct MP-ASI, the benefits of breast milk, and the danger of overnutrition.

REFERENCES


