

# The Effect Of Education Using Leaflet Media About Exclusive Breastfeeding On Knowledge In Third Trimester Pregnant Women At Tri Karya Mulya Health Center, Mesuji District

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## Article Info

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## ABSTRACT

Pregnant women should prepare themselves to provide exclusive breastfeeding, due to the still relatively low breastfeeding achievement. Exclusive breastfeeding coverage in Mesuji District in 2022 was 67.17%, at Tri Karya Mulya Health Center with a target of 80% in 2022 was 45.57%. Efforts to increase breastfeeding achievement by providing education to pregnant women thus increasing knowledge. Educational media can use leaflets because they can be stored for a long time, targets can adjust and learn independently, users can view the contents during leisure time, wider target reach. The research objective was to determine the effect of education using leaflet media about exclusive breastfeeding on knowledge in pregnant women TM III at Tri Karya Mulya Health Center, Mesuji District in 2024. Quantitative research type with pre-experimental design with one group pretest-posttest. Population was all pregnant women TM III with a sample of 40 respondents taken by purposive sampling technique. The research was conducted at Tri Karya Mulya Health Center, Mesuji District in August 2024. Data collection used questionnaire sheets. Analysis was univariate and bivariate (Wilcoxon test). It was found that knowledge of pregnant women TM III before being given education using leaflet media was 60.6 and after was 89.3. There is an effect of education using leaflet media about exclusive breastfeeding on knowledge in pregnant women TM III ( $p$ -value = 0.000). Suggestions to health center staff and cadres to optimize the use of leaflet media in promoting exclusive breastfeeding to pregnant and breastfeeding mothers, pregnant women can seek information related to breastfeeding from health workers or the internet.

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## INTRODUCTION

Exclusive breastfeeding is breastfeeding given to babies from birth for six months, without adding and/or replacing with other foods or drinks (except medicines, vitamins, and minerals). Exclusive breastfeeding begins within one hour after birth until the baby is 6 months old (Wijaya, 2019). Children who are breastfed show better results on intelligence tests and have

a lower likelihood of obesity and diabetes (Anggraini, 2022). In addition, breastfeeding also provides health, nutrition and emotional benefits for children and mothers (Rosyida et al., 2020)

Babies who are not exclusively breastfed can have a much greater risk of death from diarrhea or pneumonia than breastfed babies. In addition, breastfeeding supports the baby's immune system and can protect them later in life from chronic conditions such as obesity and diabetes. However, despite all the potential benefits, less than 1 in 2 (48%) infants aged 0-5 months worldwide are exclusively breastfed. South Asia has the highest prevalence of exclusive breastfeeding with 60% of babies exclusively breastfed. In contrast, only 26% of infants aged 0-5 months in North America are exclusively breastfed (UNICEF, 2023).

Based on data from the 2023 Indonesian Health Profile, the coverage of exclusively breastfed infants in Indonesia in 2022 is 61.5%. This figure has exceeded the 2021 program target of 45%. Lampung Province was 69.2% (Ministry of Health RI, 2023). Coverage of infants receiving exclusive breastfeeding in Mesuji Regency in 2022 was 67.17% (Lampung Health Office, 2023). The coverage of exclusive breastfeeding at the Tri Karya Mulya Health Center with a target of 80% in 2022 only reached 45.57% of babies who were successfully exclusively breastfed.

Efforts to increase this coverage are by providing correct and appropriate information about the various benefits of exclusive breastfeeding for both mother and baby so as to increase public awareness about the importance of exclusive breastfeeding for babies (Saputri et al., 2019). Efforts to overcome the low coverage of exclusive breastfeeding in Indonesia are to empower the community through Mother Support Groups, socialize Government Regulation No. 33 of 2012 concerning exclusive breastfeeding and provide breastfeeding counselors (Mirawati et al., 2022)

Exclusive breastfeeding can reduce the incidence of allergies, impaired breathing, diarrhea and obesity in children. If the baby is not exclusively breastfed, it has a bad impact on the baby. The impact has a 3.94 times greater risk of death due to diarrhea compared to babies who receive exclusive breastfeeding (Salamah, 2019). The impact of babies who are not exclusively breastfed is that babies will be at risk of experiencing health problems, such as digestive infections, upper respiratory tract infections, to ear infections. In addition to health problems caused by infections, babies will also be more susceptible to non-infectious diseases during their growth that can affect their nutritional status (Safitri, 2022)

The impact of babies not being exclusively breastfed is that it increases the risk of malnutrition by 17.3 times which will hamper the baby's growth and development, the baby's immune system is vulnerable to diseases such as bacteria that cause diarrhea (Retnawati, 2022). Babies who get complementary foods before the age of six months will have a 17 times greater risk of experiencing diarrhea and 3 times more likely to suffer from upper respiratory tract infections (ARI) compared to babies who only receive exclusive breastfeeding and get complementary foods on time (Listianingsih, 2024)

According to research by Sitohang et al. (2019) revealed that the factors that influence exclusive breastfeeding are mother's knowledge, husband's support, physical and mental

preparation, and the role of health workers in counseling about exclusive breastfeeding, therefore education or counseling about exclusive breastfeeding must be carried out. Good knowledge about exclusive breastfeeding is of course very important in supporting the success of exclusive breastfeeding.

This knowledge must have been equipped from the process of pregnancy and when before delivery so that the mother can prepare everything for the breastfeeding process. According to Aziz and Husaidah, (2021) newborns must be given breast milk as soon as possible because breast milk can maintain health and sustain the baby's life. According to (Notoatmodjo, 2014) knowledge is the result of knowing and occurs after people sensing a certain object.

A behavior if carried out through a process stage based on knowledge, awareness and a positive attitude, the behavior will last longer. Pregnant women when before the delivery process must be sure of their ability to provide exclusive breastfeeding. This belief is also supported after they know the various benefits of breastfeeding such as breastfeeding is good for mother and baby, saves expenses, is practically given directly to the baby and makes the baby healthy because it contains antibodies (Mirawati et al., 2022).

Health education with media can also generate interest in the targets of the health education (Notoatmodjo, 2014). The message in a media used in health education activities has the aim of influencing the target and also inviting them to implement what material has been given to the target (Mubarak, 2014).

Health education media are all forms of means to convey information from communicators through various media, there are electronic, print, and outdoor media (Notoatmodjo, 2014). Attractive direct media will make educational materials more conveyed, direct media as educational media are media that can be observed and seen, which can help the target when studying the educational material so that the target understands the material contained in it (Firmadani, 2020). Leaflet media is a print media that has advantages such as being able to be stored longer and easy to read. The advantages of leaflet media are that they can be stored for a long time, the target can adjust and learn independently, users can see the contents when relaxed, the target reach is wider, it can help other media, and the contents can be reprinted (Idris, 2020).

Based on data at the Brabasan Health Center, Mesuji Regency, exclusive breastfeeding in 2021 was 63.5%, and in 2022 it decreased to 62.3%, and in 2023 it was 68.7% (RM PKM Brabasan Data, 2024) . Based on data at the Tri Karya Mulya Health Center, Mesuji Regency, exclusive breastfeeding in 2021 was 58.7%, and in 2022 it decreased to 53.4%, and in 2023 it was 51.9% (RM PKM Tri Karya Mulya Data, 2024). From the data it can be seen that there is a decrease in exclusive breastfeeding. The researchers then conducted a survey in April 2024 on 10 mothers who have children aged 7-9 months, as many as 7 (70%) had given additional food since the baby was 6 months old, according to the mother, giving the food to meet the food needs of children who were deemed insufficient if only be given breast milk alone. Meanwhile, as many as 3 (30%) respondents were only given breast milk without any additional food. Health workers have tried to provide education by lecturing and using

flipchart media about exclusive breastfeeding for every Posyandu activity, but these efforts have not shown optimal results and there has been no evaluation related to mother's knowledge after being given the education. So based on the phenomenon above, the researcher is interested in conducting a study with the title "The effect of providing education using leaflet media about exclusive breastfeeding on knowledge of third trimester pregnant women at the Tri Karya Mulya Health Center, Mesuji Regency in 2024".

## METHODS

This type of research is quantitative with the research design that will be used in this study is a pre-experimental with one group pretest-posttest. The population in this study were all TM III pregnant women at the Tri Karya Mulya Health Center, Mesuji Regency in August 2024, totaling 40 respondents. The number of samples used were 40 people taken from 5 villages, namely Bujung Buring Village 7 people, Bujung Buring Lama Village 8 people, Tanjung Sari Village 8 people, Harapam Mukti Village 6 people, and Mukti Jaya Village 11 people. The research instrument used a questionnaire and the bivariate analysis used the Wilcoxon test.

## RESULTS AND DISCUSSION

### Univariate Analysis

**Table 1.** Average knowledge of TM III pregnant women before being given education using leaflet media about exclusive breastfeeding at the Tri Karya Mulya Health Center

Knowledge of TM III pregnant women	Mean	SD	Min	Max	N
Before	60,6	9,1	46,7	73,3	40

Based on table 1 above, it is known that the knowledge of TM III pregnant women before being given education using leaflet media is 60.6 with a standard deviation value of 9.1, a minimum value of 46.7 and a maximum value of 73.3.

**Table 2.** Average knowledge of TM III pregnant women after being given education using leaflet media about exclusive breastfeeding at the Tri Karya Mulya Health Center

Knowledge of TM pregnant women	Mean	SD	Min	Max	N
After	89,3	9,8	66,7	100,0	40

Based on table 2 above, it is known that the knowledge of TM III pregnant women after being given education using leaflet media is 89.3 with a standard deviation value of 9.8, a minimum value of 66.7 and a maximum value of 100.0.

### Bivariate Test

**Table 3.** The effect of providing education using leaflet media about exclusive breastfeeding on knowledge of TM III pregnant women at the Tri Karya Mulya Health Center

Variable	Education	Median	Negative rank	Positive rank	Ties	p-value
Knowledge of TM III pregnant women	Before	60,0	0	40	0	0.000
	After	93,3				

Based on table 3 above, the Wilcoxon test results obtained a p-value = 0.000 (p-value  $< \alpha = 0.05$ ), which means that there is an effect of providing education using leaflet media about exclusive breastfeeding on the knowledge of TM III pregnant women at the Tri Karya Mulya Health Center. From the results of the study in the intervention group, as many as 40 respondents experienced an increase after being given education using leaflet media and no respondents experienced a decrease after being given education using leaflet media.

## Discussion

### Average knowledge of TM III pregnant women before being given education

Based on the results of the study, it is known that the knowledge of TM III pregnant women before being given education using leaflet media is 60.6 with a standard deviation value of 9.1, a minimum value of 46.7 and a maximum value of 73.3. Knowledge is the result of knowing and this is after people sense certain objects. Sensing occurs through the five human senses, namely the senses of sight, hearing, smell, taste and touch. Most of human knowledge is obtained through the eyes and ears (Budiman & A., 2019). Knowledge of pregnant women about exclusive breastfeeding is very important to ensure that babies get the best nutrition after birth (Roesli, 2019). Better health knowledge will last longer than someone who does not have knowledge of certain things in assessing health problems (Notoadmotjo, 2014).

In line with research conducted by Idris (2020), it was found that mothers' knowledge about exclusive breastfeeding before being given leaflet media was 70% for fairly good knowledge. Research by Apriliyani et al (2022) in the intervention group before being given adequate education was 47.1%. Prautami's research (2023) revealed that the average value of knowledge before (pretest) counseling was carried out with a mean knowledge value of 2.73. According to research by Sitohang et al. (2019) revealed that the factors that influence exclusive breastfeeding are mother's knowledge, husband's support, physical and mental preparation, and the role of health workers in counseling about exclusive breastfeeding, therefore education or counseling about exclusive breastfeeding must be carried out. Good knowledge about exclusive breastfeeding is of course very important in supporting the success of exclusive breastfeeding.

According to researchers, one of the things that can influence mothers' behavior in giving exclusive breastfeeding is knowledge about breast milk itself. Many pregnant women still do not understand about exclusive breastfeeding due to several interrelated factors such as the lack of health education because not all pregnant women get adequate counseling from health workers about the importance of exclusive breastfeeding in some areas, especially in remote areas, have limited access to health information. In addition, many myths circulate, such as the first milk (colostrum) is not good for babies or thin breast milk is not nutritious enough and the practice of giving babies additional foods such as honey or sugar water is often considered more beneficial. This can be seen from the research questionnaire, where only 20 (50%) respondents answered correctly the definition of exclusive breastfeeding, and giving breast milk alone for 0-6 months this happens because sometimes family members such as grandmothers or relatives give inappropriate advice, such as giving

formula milk from an early age. Promotion of formula milk that promises optimal growth often makes mothers doubt the ability of breast milk. Many mothers worry that their milk production does not meet the baby's needs. Mothers often don't know how to breastfeed properly, so they feel difficulty or pain when breastfeeding. Mothers' knowledge about the importance of exclusive breastfeeding is often related to the level of education and health awareness. So that there is a need to increase education involving health workers, midwives, and posyandu cadres in socializing the importance of exclusive breastfeeding.

#### **Average knowledge of TM III pregnant women after being given education**

Based on the results of the study, it is known that the knowledge of TM III pregnant women after being given education using leaflet media is 89.3 with a standard deviation value of 9.8, a minimum value of 66.7 and a maximum value of 100.0. Health education with media can also generate interest in the targets of the health education (Notoatmodjo, 2014). The message in a media used in health education activities has the aim of influencing the target and also inviting them to implement what material has been given to the target (Mubarak, 2014).

Health education media are all forms of means to convey information from communicators through various media, there are electronic, print, and outdoor media (Notoatmodjo, 2014). Attractive direct media will make educational materials more conveyed, direct media as educational media are media that can be observed and seen, which can help the target when studying the educational material so that the target understands the material contained in it (Firmadani, 2020). Leaflet media is a print media that has advantages such as being able to be stored longer and easy to read. The advantages of leaflet media are that they can be stored for a long time, the target can adjust and learn independently, users can see the contents when relaxed, the target reach is wider, it can help other media, and the contents can be reprinted (Idris, 2020).

In line with research (Apriliyani et al., 2022) in the intervention group, after being given good education, knowledge increased to 58.8%. Research (Idris, 2020) that there was an increase in mothers' knowledge about Exclusive Breastfeeding after being given leaflet media by 93.3%. Prautami's research (2023) revealed that the average value of knowledge after (posttest) counseling was carried out with a mean knowledge value of 6.33. According to research by Sitohang et al. (2019) revealed that the factors that influence exclusive breastfeeding are mother's knowledge, husband's support, physical and mental preparation, and the role of health workers in counseling about exclusive breastfeeding, therefore education or counseling about exclusive breastfeeding must be carried out. Good knowledge about exclusive breastfeeding is of course very important in supporting the success of exclusive breastfeeding.

According to the researchers' opinion, after education, there was an overall increase in respondents, but the increase varied, this could be due to various individual and environmental factors. Mothers with higher education levels tend to understand the information provided more quickly because they are used to learning patterns and critical thinking. On the other hand, mothers with lower education may need more time to process

and understand information. Mothers who have given birth and breastfed before may understand the concept of exclusive breastfeeding faster because they already have experience. If the mother has previously received information about exclusive breastfeeding, additional education will be more easily accepted and understood, besides that, mothers who have high interest and motivation to provide exclusive breastfeeding to their babies tend to actively absorb information on the contrary, if the mother is less interested or feels that she does not need it, the increase in her knowledge tends to be lower.

According to the researchers, each individual has different learning abilities, including the ability to absorb information, level of concentration, and ability to remember. Mothers who get support from their partners or families are more motivated to understand information besides that communities or friends who support exclusive breastfeeding can influence mothers to be more serious about learning. In this study, researchers did not screen related to the condition of the mother, because mothers who were anxious, tired, or stressed may find it difficult to focus on education and this can affect the absorption of information. besides that, if the mother has certain cultural beliefs that are contrary to the concept of exclusive breastfeeding, acceptance of information may be slower. Myths or misinformation that are already embedded can hinder the increase in knowledge. Mothers who are more open to change and new learning tend to be easier to understand and accept information. This difference in knowledge increase is the result of the interaction of various internal factors (such as education, experience, and motivation) and external factors (such as environment, educational methods, and culture). Education that is more personalized and tailored to the needs of mothers can help increase its effectiveness.

### **The effect of providing education using leaflet media about exclusive breastfeeding on knowledge of TM III pregnant women**

Based on the results of the Wilcoxon test, the  $p$ -value = 0.000 ( $p$ -value  $\leq 0.05$ ), which means that there is an effect of providing education using leaflet media about exclusive breastfeeding on the knowledge of TM III pregnant women at the Tri Karya Mulya Health Center.

Breast milk is a very ideal source of nutrition with a balanced composition and according to the growth needs of the baby, because breast milk is the most perfect baby food both in quality and quantity. Breast milk as a single food will be sufficient to meet the growth and development needs of normal babies up to the age of 4-6 months (Roesli, 2019). A behavior if carried out through a process stage based on knowledge, awareness and a positive attitude, the behavior will last longer. Pregnant women when before the delivery process must be sure of their ability to provide exclusive breastfeeding. This belief is also supported after they know the various benefits of breastfeeding such as breastfeeding is good for mother and baby, saves expenses, is practically given directly to the baby and makes the baby healthy because it contains antibodies (Mirawati et al., 2022).

Leaflet media is a print media that has advantages such as being able to be stored longer and easy to read. The advantages of leaflet media are that they can be stored for a long time, the target can adjust and learn independently, users can see the contents when

relaxed, the target reach is wider, it can help other media, and the contents can be reprinted (Idris, 2020).

In line with Prautami's research (2023), the results of the Wilcoxon statistical test obtained a p-value of 0.000 (p-value 0.05), it can be concluded that there is a significant effect between the knowledge of third trimester pregnant women before and after counseling about exclusive breastfeeding. Research (Idris, 2020) the results of the study found that there was an effect of leaflet media on mothers' knowledge about exclusive breastfeeding in the Tinggimoncong work area, Gowa Regency with a p value of 0.000. Research (Apriliyani et al., 2022) paired samples t test results showed p value 0.000 (<0.05) which means education with e-booklet media has an effect on increasing knowledge.

According to researchers, the increase in mother's knowledge after being given education about exclusive breastfeeding using leaflet media is due to the fact that education using leaflets is delivered in easy-to-understand language, using concise and clear main points, using everyday language that is appropriate to the reading ability of respondents, and The contents of the leaflet are usually adapted to the cultural or local context of the community, making it more relevant. Leaflets are print media that are easy to carry and can be read at any time, so mothers can repeat the information independently, visual information is easier to remember than just listening to verbal explanations Media such as leaflets provoke curiosity and interest in mothers to learn more, Mothers can reread leaflets at any time if there is information that is missed or forgotten and repetition of reading strengthens understanding and memory, Leaflets are given along with explanations from researchers as education providers so as to strengthen the mother's understanding of the contents of the leaflet so that this combination of methods is more effective than using only one method. alone (verbal or leaflet only). With the leaflet, mothers not only receive education orally but also have a reference that can be studied further. This makes mothers' knowledge increase more significantly.

## CONCLUSION

Based on the research results, the following conclusions can be drawn: It is known that the knowledge of TM III pregnant women before being given education using leaflet media is 60.6. It is known that the knowledge of TM III pregnant women after being given education using leaflet media is 89.3. There is an effect of providing education using leaflet media about exclusive breastfeeding on the knowledge of TM III pregnant women at the Tri Karya Mulya Health Center, Mesuji Regency in 2024 (p-value = 0.000).

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