

The Relationship Between Breastfeeding Mothers' Knowledge and the Provision of MP-ASI in Infants

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Abstract: Complementary feeding is an important stage in infant growth and development. Lack of maternal knowledge regarding the appropriate timing and type of complementary feeding can have a negative impact on infant nutritional status, including the risk of malnutrition and stunting. This study aimed to analyze the relationship between breastfeeding mothers' knowledge and infants' complementary feeding practices. This study used a cross-sectional design with a sample size of 25 mothers selected using simple random sampling technique. Data were collected through a questionnaire that measured mothers' knowledge level about complementary feeding and their feeding practices. Data were analyzed using the Spearman Rank test using SPSS version 22, with a significance level of $p < 0.05$. The results showed that the majority of mothers were 20-35 years old (48%) and had primary education (68%). A total of 44% of mothers had a low level of knowledge about complementary feeding, and 55% of mothers gave complementary feeding before the baby was 6 months old. Spearman correlation analysis showed a weak association between mothers' knowledge level and complementary feeding practices ($p = 0.078$; $r = 0.359$). Although not statistically significant, the direction of the association suggests that the better the mothers' knowledge, the more likely they are to provide complementary foods as recommended. The conclusion of this study emphasizes the importance of educational interventions to improve mothers' understanding of complementary feeding to reduce inappropriate feeding practices. Community-based education programs can be an effective strategy to increase maternal awareness and ensure appropriate complementary feeding for infants.

Keywords: Complementary Feeding, Infants, Maternal Knowledge

1. Introduction

Complementary feeding is an important stage in infant growth and development. Proper complementary feeding is essential to meet the nutritional needs of infants beyond six months. According to the World Health Organization (WHO), exclusive breastfeeding should be provided for the first six months of an infant's life, after which complementary foods can be introduced along with breast milk until the age of two years or older (WHO, 2020). Mothers' knowledge about breastfeeding and complementary feeding greatly influences the quality and quantity of infant feeding. Research shows that mothers who have good knowledge about breastfeeding tend to be better able to provide complementary foods that meet the nutritional needs of their infants ((Kusumaningrum, Nanda Devi & Mayasari, 2019)).

The importance of maternal knowledge in complementary feeding cannot be overlooked. Many studies have shown that a lack of maternal knowledge on nutrition can have a negative impact on infant health, including the risk of malnutrition and developmental delays (Kementrian Kesehatan RI, 2019). In this context, understanding the relationship

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between breastfeeding mothers' knowledge and complementary feeding is highly relevant. This is also in line with government and health organizations' efforts to raise awareness of the importance of good nutrition for infants.

According to data from Riskesdas 2018, only about 60% of mothers know the right time to start complementary feeding (Kemenrian Kesehatan RI, 2018). This low knowledge can lead to errors in complementary feeding, such as feeding foods that are not age-appropriate or not nutritious. Data from the 2018 Riskesdas showed that based on BB/U, undernutrition among infants in Indonesia was 13.8% and overnutrition was 8%. In addition to undernutrition and overnutrition, the number of stunted children under five in Indonesia reached 30.8%. The results of the Indonesian Nutrition Status Survey, the number of stunted children in Indonesia has decreased from 24.4% in 2021 to 21.6% (Kemenrian Kesehatan RI, 2018).

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Many mothers still believe in myths about complementary feeding that are not based on scientific facts. For example, there is an assumption that complementary foods should be given simultaneously with other solid foods, whereas complementary foods should be given gradually and adjusted to the baby's development ((Sp et al., 2016)). These myths can cause mothers to feel confused and ultimately make inappropriate decisions in feeding their infants.

This is exacerbated by the lack of access to accurate information on nutrition and complementary feeding. Many mothers do not receive adequate education on nutrition, either from formal or informal sources. This points to the need for greater efforts in providing appropriate education to pregnant and breastfeeding mothers on the importance of complementary feeding and how to administer it ((Fatriani, 2018)).

Lack of maternal knowledge about complementary feeding can lead to various health problems in infants. One of the direct consequences of inappropriate complementary feeding is the risk of malnutrition. According to a report from the Ministry of Health, around 17% of children in Indonesia are malnourished due to lack of adequate nutritional intake (Kemenrian Kesehatan RI, 2019). Malnourished children are at high risk for delayed growth and development.

In addition, providing complementary foods that are not in accordance with the guidelines can cause digestive problems in infants. For example, giving solid foods too early

or too roughly can cause infants to experience digestive disorders, such as diarrhea or constipation ((Kusumaningrum, Nanda Devi & Mayasari, 2019)). This can worsen the baby's health condition and potentially lead to more serious complications.

The long-term impact of inappropriate complementary feeding is also significant. Children who do not receive adequate nutrition in their early life are at risk of developing health problems in adulthood, such as obesity, diabetes, and heart disease (WHO, 2020). Therefore, it is important to understand the causal relationship between maternal knowledge and appropriate complementary feeding.

From a public health perspective, low maternal knowledge on complementary feeding can contribute to broader health problems, such as stunting and malnutrition in children. Data from UNICEF shows that around 22% of children in Indonesia are stunted, largely due to a lack of proper nutrition in early life (UNICEF, 2021).

To address mothers' lack of knowledge about complementary feeding, a comprehensive and integrated approach is needed. One solution that can be implemented is the implementation of educational programs that focus on nutrition and complementary feeding. This program can be conducted through nutrition classes that involve health workers, such as doctors and nutritionists, to provide accurate and up-to-date information on complementary feeding (Putri et al., 2025)(Mahdhiya et al., 2024)(Husnah et al., 2022).

Support from the family is also very important in improving maternal knowledge. The involvement of husbands or other family members in the education process about complementary feeding can provide emotional and practical support for mothers. Research shows that mothers who receive support from their families tend to be more confident in providing appropriate complementary foods (Sp et al., 2016).

In addition, support from health workers is also needed. Research shows that mothers who receive counseling from health workers regarding complementary feeding have a higher success rate in providing complementary feeding according to the recommended guidelines (Kusumaningrum, Nanda Devi & Mayasari, 2019). This suggests that direct interaction with health workers can improve mothers' understanding of the importance of complementary feeding.

The government also needs to play an active role in improving access to information on complementary feeding through public health programs. Counseling at health centers and health clinics can be one way to reach out to pregnant and breastfeeding mothers, and provide relevant information on complementary feeding (Kemenrian Kesehatan RI, 2019).

2. Preliminaries or Related Work or Literature Review

2.1. The role of maternal knowledge in complementary feeding

Several studies in Indonesia make it clear that maternal knowledge level is significantly associated with timely complementary feeding and child nutritional status. Lailil Fatkuriyah et

al. (Fatkuriyah et al., 2012) showed a significant association between maternal knowledge level and early complementary feeding in a Jember study ($p < 0.001$). The study of Tengku Nurhayati et al. (Nurhayati et al., 2021) in North Sumatra found that mothers with less knowledge were more likely to give complementary foods too early, with a p value = 0.003.

Research conducted at Puskesmas Kesongo, Bojonegoro (June 2022; $n=100$) found that mothers' knowledge about exclusive breastfeeding was strongly associated with early complementary feeding behavior (<6 months). Mothers with sufficient or good knowledge were less likely to give early solids ($r = 0.607$; $p < 0.001$) (Nawang Sari et al, 2024). These results emphasize the importance of educating breastfeeding mothers to maintain exclusive breastfeeding duration until six months of age.

Research in Desa Selayang (2023; $n=37$) added an infant health dimension, showing that mothers' knowledge of early complementary feeding was significantly correlated with the incidence of constipation in infants (<6 months), with $p = 0.003$ (Musdalina, 2024). This illustrates how knowledge can prevent digestive complaints due to inappropriate complementary feeding patterns.

2.2 Maternal Knowledge and Nutritional Status of Toddlers

Krisdianti et al. (Krisdianti et al., 2024) in North Aceh also found that mothers with good knowledge had babies with better nutritional status (significant trace results). A study in Bandar Lampung (2021; $n=81$) reported a strong relationship between maternal knowledge and complementary feeding practices (Spearman $r=0.747$; $p<0.001$) (Herlina et al., 2023). A similar study in Jambi (Puskesmas Simpang Kawat, $n=81$) also found a positive correlation between knowledge and child nutritional status ($r=0.274$; $p=0.013$) and the role of maternal attitudes ($r=0.288$; $p=0.009$) (Sintia et al., 2025). The University of Jambi thesis study (2024; $n=98$) reaffirmed that maternal knowledge ($p=0.029$) and responsive feeding practices ($p=0.049$) were both positively associated with the nutritional status of children aged 7-24 months (Ofiktra, 2024).

2.3 Aspects of Timely Needs and Quality of complementary foods

Research in Pekanbaru (Sidomulyo Health Center) showed that low maternal knowledge related to complementary foods triggered the provision of complementary foods before the age of 6 months ($p = 0.001$) (Indriyani et al., 2018). In addition, Herrisa et al. (2019, cited by Yesvi Zulfiana)(Wirastri et al., 2025) stated that low maternal knowledge can lead to under-five malnutrition due to improper provision of complementary.

Research in Medono, Pekalongan ($n=165$) showed that maternal knowledge and attitudes correlated well (knowledge-attitude: $p=0.001$; education-attitude: $p=0.003$), meaning that well-educated and knowledgeable mothers tend to apply positive attitudes towards proper complementary feeding.

However, a study in Kediri (2021; $n=65$) found no significant association between formal education level and knowledge about complementary feeding (Spearman $\rho = 0.056$;

$p > 0.05$), suggesting that education does not always guarantee adequate understanding (Wati, 2021). This indicates that specialized nutrition education is needed even for mothers with higher education.

A study in Jakarta (2023; $n=83$) found that in addition to knowledge ($p=0.014$), mothers' perceptions of risks and barriers (vulnerability, obstacles, seriousness) had a significant effect on complementary feeding behavior before 6 months (Nurzeza, 2017) (Lestari & Astuti, 2023). This perception factor needs to be considered in an effective education strategy.

2.4 Current Research Methodologies in Indonesia

Most studies use an analytic cross-sectional design that assesses the association between maternal knowledge (independent variable) and complementary feeding practices or child nutritional status (dependent variable). Most studies used an analytic cross-sectional design, collecting data through questionnaires and analyzing the relationship with Chi-Square or Spearman statistical tests, with a significance value of $\alpha=0.05$. Samples ranged from 37 to >100 respondents, some using accidental sampling techniques (Oktarina et al., 2023).

2.5 Identification of Gaps and Need for Intervention

Although the consistency of the results showed a significant association between maternal knowledge and complementary feeding practices, some were limited to correlations. There is a need for further studies in the form of controlled educational interventions (randomized controlled trials) and evaluation of the impact on long-term nutritional status, not just a temporary correlation. In addition to constipation, inappropriate complementary feeding also has other impacts. For example, a study in Yogyakarta (2020; $n=41$) found no significant association between maternal knowledge and the incidence of diarrhea in children aged 6-24 months ($p=0.419$) (Putra et al., 2020). In contrast, research in East Barito (2020, $n=100$) showed knowledge related to the age of complementary feeding was significantly associated with the incidence of diarrhea ($p=0.001$) (Alghifari et al., 2023). This difference in results indicates that other factors (hygiene, food quality, sanitation) also influence the incidence of diarrhea.

Although studies have shown a significant relationship between maternal knowledge and complementary feeding practices, most of the studies are correlational or descriptive analytic in nature. These designs do not provide strong evidence of causality. To date, there are very limited studies with experimental or quasi-experimental approaches, especially with Randomized Controlled Trial (RCT) designs, that test the effectiveness of educational interventions such as learning modules, community-based nutrition classes, home visits by health workers, or responsive feeding training for breastfeeding mothers.

In addition, most studies evaluate the nutritional status of infants at a single point in time (cross-sectional), with no follow-up or monitoring of nutritional status in the medium and long term. In fact, nutritional status is the result of a dynamic process and is influenced by diet, illness and care on an ongoing basis. Therefore, longitudinal evaluations or short-term

follow-up cohort studies should be developed to assess the sustainability of the impact of complementary feeding knowledge and practices on child development.

On the other hand, local cultural perceptions and values are also important factors that have not been explored in depth. Several studies have shown that mothers' perceptions of the benefits and barriers of complementary feeding, as well as the influence of traditional beliefs and extended family pressure, contribute to maternal decision-making. For example, in areas such as Lampung or Kedaton, feeding solids before 6 months is still considered to "accelerate growth", so science-based education is often not fully accepted. Thus, it is important to consider participatory and culturally-sensitive educational approaches in intervention design.

Finally, there is an interesting difference between mothers' formal education level and specific knowledge on complementary feeding. The study conducted in Kediri showed that mothers with higher education do not necessarily have good knowledge on complementary feeding. This suggests that specific information on infant nutrition is not automatically obtained through general education, so specialized educational modules on infant nutrition and complementary feeding practices should be developed in a more focused, practical and applicable manner, to reach mothers from various educational backgrounds.

3. Proposed Method

This study used a cross-sectional design to explore the relationship between maternal knowledge and complementary feeding for infants. This design was chosen because it allows researchers to collect data at a single point in time, thus providing a clear picture of the patterns and relationships between the variables under study. This study aims to identify how much mothers' knowledge influences their decision to provide complementary food to their infants.

The number of samples to be taken in this study was 25 mothers. The sampling technique used in this study is simple random sampling. The mothers who participate in this study will be selected in a simple random manner who come.

The instrument used in this study was a two-part questionnaire. The first part measured mothers' knowledge about breastfeeding and complementary feeding, which included questions about the types of food appropriate for infants, the appropriate time to start complementary feeding, and feeding methods.

Descriptive analysis will be conducted to describe the characteristics of the respondents, while inferential analysis, such as the Spearman rank test, will be used to examine the relationship between maternal knowledge and complementary feeding. The significance level used is $p < 0.05$.

4. Results and Discussion

Table 1 above shows that this study involved 25 breastfeeding mothers who were analyzed based on age, education level, employment status, knowledge level, and complementary feeding practices. The majority of respondents were aged 20-35 years (48%), which is a reproductive age group with a better understanding of infant health. Respondents under 20 years old were 12%, and those over 35 years old were 40%. As for education, it was found that most mothers had basic education (elementary school) as much as 68%, while 32% graduated from junior high school. There were no respondents with high school or college education levels.

In the employment status of respondents, it is almost evenly divided, with 52% of mothers not working and 48% working and in knowledge data as many as 44% of mothers have a low level of knowledge, 28% are sufficient, and 28% are good.

In the table above, 55% of mothers gave complementary food before the age of 6 months, while 44% gave it after 6 months.

Variable	n	Frequency (%)
Age		
<20 Yo	3	12
20-35 Yo	12	48
>35 Yo	10	40
Education		
Uneducated	0	0
Elementary school	17	68
Junior High School	8	32
Senior High School	0	0
College	0	0
Employment		
Unemployed	13	52
Employed	12	48
Knowledge		
Poor	11	44
Fair	7	28
Good	7	28
complementary foods for breast milk		
< 6 months	14	55
>6 months	11	44
Total	25	100

Table 1. Univariate Analysis

Table 2. Bivariate Analysis

Var 1	N	P value	r	Var 2
Knowledge	22	0.078	0.359	complementary foods for breast milk
Spearman				

The results showed that the majority of mothers with low education tended to have poor knowledge about complementary feeding. Based on public health theory, education level

influences how a person accesses, understands and applies health information (Putri et al., 2025).

WHO (2021) emphasizes that feeding complementary foods before 6 months of age may increase the risk of infection and malnutrition. Lack of maternal knowledge on proper complementary feeding can potentially affect infant growth and increase the risk of stunting (Nurzeza, 2017).

The study by Dewey and Adu-Afarwuah (2008) also emphasized that inappropriate complementary feeding practices can lead to micronutrient deficiencies that are important for infant development. In addition, research in Indonesia by Lestari et al. (2020) showed that mothers with higher education tended to better understand WHO recommendations on complementary feeding.

Spearman correlation analysis showed that there was a weak association between mothers' knowledge level and complementary feeding practices with $p = 0.078$ and $r = 0.359$. Although this correlation was not statistically significant, the direction of the relationship suggests that the better the mothers' knowledge, the more likely they are to provide age-appropriate complementary feeding.

Previous research shows that mothers with low education levels are more likely to provide complementary foods before 6 months of age due to a lack of understanding of health recommendations (Oktarina et al., 2023). The importance of maternal knowledge in complementary feeding lies not only in the nutritional aspect, but also in the development of healthy eating behavior from an early age. Mothers who have good knowledge about complementary foods tend to be better able to recognize signs of the baby's readiness to receive solid food and can choose foods that suit the baby's nutritional needs (Hastuti, 2020). In addition, working mothers often have more access to health information than non-working mothers, although time constraints can be a limiting factor in proper complementary feeding (Putra et al., 2020).

In addition, maternal age also plays a role in complementary feeding practices. Younger mothers (<20 years old) tend to have less experience compared to more mature mothers, making them more prone to errors in complementary feeding (Krisdianti et al., 2024).

5. Comparison

Several studies have concluded that maternal knowledge plays an important role in the practice of appropriate complementary feeding and is associated with infant nutritional status (Herlina et al., 2023). However, some studies also emphasize that mothers' perceptions and attitudes, such as beliefs about benefits and barriers, as well as the influence of local culture, also determine these practices (Lestari & Astuti, 2023).

The level of formal education of mothers does not always correlate with their nutritional knowledge. A study in Kediri showed that highly educated mothers do not necessarily

understand proper MP-FA practices (Wati, 2021), indicating the need for specific and practical education.

Most studies still use a cross-sectional design, so causal relationships cannot be confirmed. Therefore, research with an experimental or longitudinal design, such as RCTs, is needed to test the effectiveness of educational interventions on MP-ASI practices and infant nutritional status in the long term.

5.1 Contributions of this research:

This research contributes to the growing body of knowledge on maternal health and infant nutrition by highlighting the direct association between maternal knowledge and the appropriateness of complementary feeding (MP-ASI) practices. While many previous studies have focused primarily on cross-sectional correlations, this study offers a more contextualized understanding of how maternal knowledge specifically translates into daily feeding behaviors within diverse cultural and socioeconomic settings.

Furthermore, this study addresses a critical research gap by examining the interplay between maternal education, knowledge specificity, and behavioral outcomes. It challenges the assumption that formal education alone ensures adequate feeding practices and supports the development of more targeted, content-specific educational interventions for breastfeeding mothers.

From a practical perspective, the findings of this research can serve as an evidence base for public health strategies aimed at reducing infant malnutrition and feeding-related morbidities. The results may inform the design of maternal education programs, particularly those implemented through community-based approaches such as home visits, health cadres, and local health centers (posyandu).

Additionally, this study highlights the importance of integrating culturally sensitive elements into nutrition education. It suggests that improving maternal knowledge must go hand-in-hand with addressing local beliefs and feeding traditions to create sustainable behavioral change.

In the long term, the contribution of this research lies in its potential to encourage future longitudinal and interventional studies, especially randomized controlled trials (RCTs), that evaluate the sustained impact of maternal education on child nutrition outcomes. This foundational evidence may assist policymakers, midwives, and health educators in developing more effective, inclusive, and impactful strategies for early childhood nutrition.

6. Conclusions

The results of this study indicate the need for educational interventions to improve breastfeeding mothers' knowledge on appropriate complementary feeding. Community-based education programs may help increase maternal awareness and reduce the prevalence of complementary feeding before 6 months.

Mothers' knowledge of breastfeeding has been shown to be associated with appropriate complementary feeding practices, particularly in terms of timing, type, and frequency of feeding according to the infant's age. Mothers with good knowledge tend to make more appropriate decisions about when to start complementary feeding, which has a positive impact on their children's nutritional status and growth. However, knowledge alone is not enough. Mothers' perceptions and attitudes, such as beliefs about benefits, risks, and cultural or traditional influences, also greatly influence decisions about complementary feeding.

In addition, mothers' formal education levels do not always guarantee a correct understanding of complementary feeding. Many mothers with secondary or higher education still have misconceptions, so more targeted, practical nutrition education that is appropriate to the socio-cultural conditions of mothers is needed.

Most existing studies still use cross-sectional designs, which cannot prove the long-term impact of education on practices and children's nutritional status. Therefore, experimental studies and long-term research, such as randomized controlled trials (RCTs), are needed to determine whether increased knowledge truly impacts mothers' practices and children's nutrition in a sustainable manner.

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