



## Review article

# Mothers' Perceptions of Breastfeeding Success In Coastal Areas: A Review

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## Abstract

**Background:** Exclusive breastfeeding during the first six months of an infant's life is strongly recommended by both the World Health Organization (WHO) and the Ministry of Health of the Republic of Indonesia. Breast milk not only provides optimal nutrition but also protects infants from a range of infectious diseases. However, in coastal areas, the practice of exclusive breastfeeding faces more complex challenges. Factors such as maternal knowledge, socio-cultural norms, access to healthcare services, and family support can significantly influence a mother's perception and ability to successfully practice exclusive breastfeeding.

**Objective:** This study aims to analyze the various factors that influence mothers' perceptions of the success of exclusive breastfeeding in coastal communities.

**Method:** This study utilized a literature review approach, drawing upon findings from both national and international journals published within the last six years. A total of 20 relevant journal articles were reviewed, consisting of 13 national and 7 international publications. Article searches were conducted using platforms such as Google Scholar, Mendeley.com, PubMed, and ScienceDirect, covering the publication years from 2018 to 2024.

**Results:** The literature review indicates that factors such as maternal knowledge, family support, cultural practices, and access to health services play a significant role in influencing the success of exclusive breastfeeding in coastal areas.

**Conclusion:** The success of exclusive breastfeeding in coastal areas is greatly influenced by both internal factors such as maternal awareness and external factors, including family and community support. Therefore, community-based interventions and supportive health policies are essential to enhance exclusive breastfeeding practices in these regions.

**Keywords:** Mother's Perception, Exclusive Breastfeeding, Coastal Areas

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## Background

World Health Organization WHO (2019), recommends that mothers around the world exclusively breastfeed their infants for the first 6 (six) months after birth to achieve optimal growth, development and health. This has been regulated through the Indonesian Ministry of Health No. 450/Menkes/SK/IV/2004 by setting a 6-month exclusive breastfeeding target of 80%. Exclusive breastfeeding at the age of 0-6 months is considered very strategic, because at that age the baby's condition is still very unstable and easily exposed to disease. The impact of low exclusive breastfeeding in infants 0-6 months is that it can aggravate diseases such as ISPA 35.09%, diarrhea 38.07%, and malnutrition 49.2% which can have several negative effects on infants such as slow body

growth, susceptibility to disease, decreased intelligence levels and mental disruption of children, serious malnutrition can cause child death (Prihatini, Achyar and Kusuma, 2023) .

There are two things that are important factors in the success of exclusive breastfeeding, namely internal support and external support. Internal factors include maternal *self-efficacy* and support from the husband or closest family. These internal factors can increase the mother's confidence in her ability to breastfeed so that it can trigger the hormone oxytocin. Oxytocin hormone will provide a sense of comfort, a feeling of being loved so that breast milk can be released smoothly. While external factors that are considered to support the success of breastfeeding are one of them is the support in the environment where the mother lives, including the environment where the mother works. Based on previous research, one of the causes of the high failure rate in exclusive breastfeeding is because mothers have started working after 3 months (Rosida *et al.* , 2020).

Maternal perceptions of exclusive breastfeeding are a key factor in the success of exclusive breastfeeding programs in Indonesia, especially in coastal areas which often face unique challenges. According to data from the Indonesian Ministry of Health (2021) , only about 37% of infants in Indonesia are exclusively breastfed for the first six months of life. In coastal areas, this figure tends to be lower due to various factors such as accessibility of health services and knowledge of the benefits of breastfeeding. This study aims to explore the perceptions of mothers in coastal areas regarding exclusive breastfeeding, as well as the factors that influence their decision to breastfeed their infants.

In this context, it is important to understand that mothers' perceptions are not only influenced by medical knowledge, but also by social, cultural and economic factors. For example, research by Febrianti, Agrina and Bayhakki (2024) , showed that in some coastal areas, traditions and social norms can influence mothers' breastfeeding decisions. There is a significant relationship between culture and exclusive breastfeeding. traditions and beliefs develop as something that will lead people's behavior to do things according to the traditions and beliefs that exist in their environment. Therefore, this study sought to identify the factors that influence mothers' perceptions of exclusive breastfeeding and how these factors interact within the local context.

This study focuses specifically on coastal areas, which are often overlooked in previous studies. Most studies on exclusive breastfeeding tend to focus on more general urban or rural areas. As such, this study contributes to a deeper understanding of the dynamics that occur in coastal communities, as well as providing justification for more targeted interventions to increase exclusive breastfeeding rates in these areas. Based on the description above, the purpose of writing this *literature review* is to determine the perception of mothers about the success of exclusive breastfeeding in the Coastal Region.

## Methods

The method used is literature review from national and international journals, which is a research method that provides a description or explanation of the literature related to a particular topic or field. The literature articles reviewed in this study were taken from *Google Scholar*, *Mendeley.com*, *PubMed* and *Sciencedirect*. The articles collected were selected based on inclusion criteria including: 1) Research articles that have titles and contents that match the keywords 2) Publication year 2018-2024 (Last 6 Years) 3) Quantitative and Qualitative Methods 4) Free of charge (free) 5) Journals in the form of published research results that are *full-text* and *free accessed* from the keywords used.

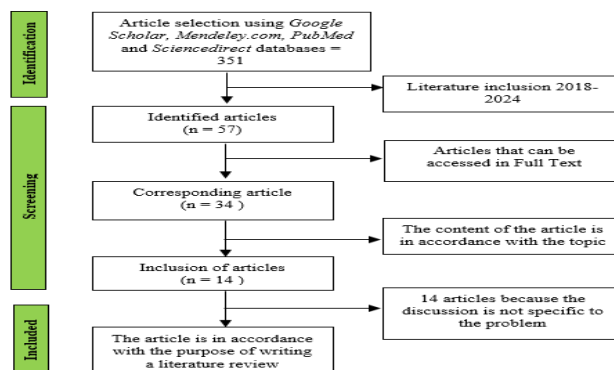


Figure 1. Schematic of Article Search

## Results

This *literature review* was synthesized using the narrative method by grouping similar extracted data according to the results measured to answer the objectives. Research journals that meet the inclusion criteria are then collected and a summary of the journal is made including the name of the researcher, the year the journal was published, the title of the study, the method and a summary of the results or findings. To further clarify the analysis, the abstract and full text of the journal were read and examined. The journal summary was then analyzed for content contained in the research objectives and results/findings. Analysis of journal content, then coding of the contents of the reviewed journals based on the outline or core of the research is carried out by parsing in a sentence then if it has been collected then looking for similarities and differences in each study and then discussed to draw conclusions.

Based on the review of various literatures, 20 suitable articles were found and have been compiled and can be seen in the following table:

**Table 1.** Extraction of Research Results

NO	AUTHOR (YEAR)	JUDGEMENT	DESIGN AND APPROACH	VARIABLES	FINDINGS
1	Febrianti, Agrina and Bayhakki (2024)	Faktor-Faktor yang Mempengaruhi Pemberian ASI Eksklusif di Wilayah Pesisir	Descriptive correlation, Cross- sectional	Independent variables: Level of knowledge, culture, attitude, and family support towards exclusive breastfeeding. Dependent variable: Exclusive breastfeeding.	Of the 63 respondents, mothers who did not exclusively breastfeed had: <ul style="list-style-type: none"> <li>• Low knowledge: 29 respondents (78.9%).</li> <li>• Culture is less supportive: 33 respondents (68.8%).</li> <li>• Negative attitude: 29 respondents (82.9%).</li> <li>• Low family support: 30 respondents (71.4%).</li> </ul>
2	Umiyah and Hamidiyah (2020)	Exclusive Breastfeeding With Stunting	<ul style="list-style-type: none"> <li>• Research design: Quantitative with design</li> <li>• Research location: Banyuputih Health Center, Situbondo Regency</li> <li>• Sample: 274 children under five, selected using proportional random technique.</li> </ul>	Independent variable: Exclusive breastfeeding Dependent variable: Incidence of stunting in children under five	<ul style="list-style-type: none"> <li>• Statistical test results showed a significant association between exclusive breastfeeding and the incidence of stunting (<math>p = 0.025</math>, <math>OR = 2.451</math>).</li> <li>• Toddlers who are not exclusively breastfed have a 2.451 times greater risk of stunting than those who are exclusively breastfed.</li> </ul>
3	Mayasari and Astuti (2022)	Pemberian ASI Eksklusif Berhubungan dengan Kejadian Stunting di Pesisir Kairatu Kabupaten Seram Bagian Barat	Design: Quantitative Approach: Cross- sectional	Independent variable: Exclusive breastfeeding Dependent variable: Incidence of stunting	Of the 58 toddlers studied: <ul style="list-style-type: none"> <li>• The results of the chi- square test showed <math>p = 0.000</math>, which means there is a significant relationship between exclusive breastfeeding and the incidence of stunting.</li> </ul>
4	Sirait, Agrina and Sari (2023)	Hubungan Dukungan Suami dan Motivasi Ibu dengan Pemberian ASI Eksklusif di	Design: Descriptive correlation Approach: Cross- sectional	Independent variables: Husband support and maternal motivation Dependent variable: Exclusive	<ul style="list-style-type: none"> <li>• The results of the chi- square test showed: There was a significant relationship between husband support and exclusive breastfeeding</li> </ul>

		Wilayah Pesisir Pekanbaru		breastfeeding	(p-value = 0.000 < 0.05). There was a significant relationship between maternal motivation and exclusive breastfeeding (p-value = 0.042 < 0.05).
5	Diana, Ahmad and Syamsul (2023)	Korelasi Pemberian ASI Eksklusif dengan Kejadian Stunting pada Balita Usia 0-59 Bulan di Wilayah Kerja UPT Puskesmas Kecamatan Labuhan Badas Unit 1 Kabupaten Sumbawa	Design: Mixed methods Approach: Combination of quantitative and qualitative	Independent variable: Exclusive breastfeeding Dependent variable: Incidence of stunting	Out of 49 respondents: <ul style="list-style-type: none"> <li>• Chi-Square test results showed a significant association between exclusive breastfeeding and the incidence of stunting (p-value = 0.009 &lt; 0.05).</li> </ul>
6	Muhammad and Evawaty (2019)	Pemberian ASI Eksklusif Ibu Nelayan di Pesisir Totoli Kabupaten Majene	Design: Descriptive study Approach: Qualitative	Predisposing factors: Maternal knowledge, attitudes, values, and beliefs about exclusive breastfeeding Reinforcing factor: Access to health information and facilities Enabling factors: Family support and motivation	<ul style="list-style-type: none"> <li>• Fisherwomen in coastal Totoli generally have good knowledge about exclusive breastfeeding.</li> <li>• The mother's attitude towards exclusive breastfeeding was positive, citing the strong emotional bond with the baby.</li> <li>• Cultural beliefs such as eating moringa leaves or young papaya to increase milk production still exist.</li> <li>• Family support plays an important role in a mother's decision to exclusively breastfeed.</li> </ul>
7	Alexander, Melyani and Lindawati (2018)	Hubungan Antara Karakteristik dan Pengetahuan dengan Pemberian ASI Secara Eksklusif pada Ibu yang Mempunyai Bayi Usia 0-6 Bulan di Puskesmas Kampung Dalam Tahun 2018	<ul style="list-style-type: none"> <li>• Research design: Correlational analytic with approach.</li> <li>• Sampling technique: Purposive</li> <li>• Sample size: 36 mothers with infants aged 0-6 months</li> </ul>	Independent variables: Maternal characteristics (age, parity, education, occupation, economic status, socio-cultural) and knowledge about exclusive breastfeeding. Dependent variable: Exclusive breastfeeding	<ul style="list-style-type: none"> <li>• There is a significant relationship between education (p=0.013), employment (p=0.048), socio-culture (p=0.008), and knowledge (p=0.030) with exclusive breastfeeding.</li> <li>• Mothers with higher education, irregular employment, and socio-cultural support were more likely to exclusively breastfeed.</li> </ul>
8	Hariyadi <i>et al.</i> , (2023)	Hubungan Ketersediaan Bahan Pangan, Praktik Pemberian Makanan, Hygiene Sanitasi	Design: Case-control study Approach: Data collection by interview and statistical analysis	Independent variables: Food availability, feeding practices, environmental sanitation hygiene,	<ul style="list-style-type: none"> <li>• There was no significant association between breastfeeding practices and the incidence of stunting in both upland and coastal areas.</li> </ul>

		Lingkungan dan ASI Eksklusif terhadap Stunting	using chi-square test.	and exclusive breastfeeding. Dependent variable: Incidence of stunting in children aged 24-59 months.	<ul style="list-style-type: none"> <li>There was no significant association between feeding practices and the incidence of stunting in both upland and coastal areas.</li> </ul>
9	Nainggolan (2024)	Pengaruh Pemberian Cookies Buah Pepaya terhadap Kelancaran Produksi ASI Ibu Menyusui pada Masyarakat Pesisir di Wilayah Puskesmas Andam Dewi Kabupaten Tapanuli Tengah Tahun 2023	Design: Quasi-experiment Approach: Two-group post-test design	Independent variable: Administration of papaya fruit cookies Dependent variable: Fluency of breast milk production Other variables: Breastfeeding frequency, diet, rest pattern, early initiation of breastfeeding (IMD).	<ul style="list-style-type: none"> <li>Giving papaya fruit cookies affects the smoothness of breast milk production with a p-value of 0.005.</li> <li>Another variable that was significantly associated with breast milk production was breastfeeding frequency (p-value 0.003).</li> <li>Other influential factors were diet (p-value 0.023), rest patterns (p-value 0.022), and IMD (p-value 0.009).</li> </ul>
10	Asmarani <i>et al.</i> , (2019)	Hubungan Riwayat ASI Eksklusif dan Pola Konsumsi dengan Kejadian Gizi Buruk pada Balita di Daerah Pesisir Kota Kendari	Design: Observational with design Approach: Data collection using a 24-hour food recall questionnaire	Independent variables: Exclusive breastfeeding history, carbohydrate, fat, and protein consumption patterns. Dependent variable: Incidence of malnutrition in children under five	<ul style="list-style-type: none"> <li>Exclusive breastfeeding history was not associated with the incidence of malnutrition (p-value = 0.059, OR = 1.000).</li> <li>Consumption patterns of carbohydrate, fat and protein deficiency are associated with the incidence of malnutrition</li> </ul>
11	Sri <i>et al.</i> ., (2020)	Faktor-Faktor yang Mempengaruhi Rendahnya Pemberian ASI Eksklusif di Wilayah Pesisir, Kecamatan Kajang, Kabupaten Bulukumba	Descriptive analytic with <i>cross-sectional</i> design, conducted in the coastal area, Kajang District, Bulukumba Regency in April-June 2015.	Independent variables (risk factors): Socio-cultural, economic, environmental. Dependent variable (effect): Low exclusive breastfeeding.	<ul style="list-style-type: none"> <li>Most mothers (80%) understood the importance of exclusive breastfeeding.</li> <li>Socio-cultural, economic and environmental factors have a significant influence, with 72.5%-80% of mothers in the good category.</li> </ul>
12	Asmaul and Teungku (2022)	Hubungan ASI Eksklusif dengan Stunting pada Anak Balita di Desa Arongan Kecamatan Kuala Pesisir Kabupaten Nagan Raya	Design: Descriptive analytic with approach Approach: Use of secondary data from Posyandu and Puskesmas (data from 2018-2020), data analysis using Chi-square and Odds Ratio (OR) tests.	Independent variable: Exclusive breastfeeding Dependent variable: Incidence of stunting in children under five	<ul style="list-style-type: none"> <li>Chi-square test results showed p-value = 0.000 (&lt;0.05), indicating an association between exclusive breastfeeding and stunting.</li> <li>The Odds Ratio (OR) test results = 47.23, meaning that toddlers who are not exclusively breastfed have a 47.23 times greater chance of experiencing stunting than toddlers who are</li> </ul>

					exclusively breastfed.
13	Maywita and Amran (2022)	Hubungan Tingkat Pengetahuan, ASI Eksklusif dengan Kejadian Stunting pada Balita Usia 12-59 Bulan di Wilayah Kerja Puskesmas Tarusan Kabupaten Pesisir Selatan	<ul style="list-style-type: none"> <li>Analytic study with design</li> <li>Conducted at the Tarusan Health Center Work Area, Pesisir Selatan Regency in 2021</li> <li>Using proportional random technique</li> <li>The sample consisted of 130 cases and 130 controls (total 260 respondents).</li> </ul>	Independent variables: Maternal knowledge level, exclusive breastfeeding Dependent variable: Incidence of stunting in children under 12-59 months of age.	<ul style="list-style-type: none"> <li>There is a significant association between exclusive breastfeeding and the incidence of stunting (<math>p = 0.026</math>, <math>OR = 1.9</math>).</li> <li>There is a significant relationship between the level of maternal knowledge and the incidence of stunting (<math>p = 0.047</math>, <math>OR = 4.6</math>).</li> <li>Children who are not exclusively breastfed have a 1.9 times greater risk of stunting</li> </ul>
14	Swanida <i>et al.</i> , (2020)	History of Exclusive Breastfeeding and Complementary Feeding as a Risk Factor of Stunting in Children Age 36-59 Months in Coastal Areas	Design: Descriptive analytic Approach: Cross-sectiona Data collection: Interview questionnaires, secondary data from Maternal and Child Health (MCH) books, and anthropometric measurements to assess stunting status.	Independent variables: History of exclusive breastfeeding, complementary feeding, birth weight, maternal education level, maternal age at pregnancy, maternal nutritional status before pregnancy. Dependent variable: Incidence of stunting in children aged 36-59 months.	<ul style="list-style-type: none"> <li>Statistical tests showed a significant association between exclusive breastfeeding and the incidence of stunting (<math>p</math>-value = 0.000).</li> <li>There was a significant association between inappropriate complementary feeding and stunting (<math>p</math>-value = 0.016).</li> </ul>
15	Crane <i>et al.</i> , (2022)	Cessation of exclusive breastfeeding and seasonality, but not small intestinal bacterial overgrowth, are associated with environmental enteric dysfunction: A birth cohort study among infants in rural Kenya	A prospective cohort study involving 100 infants recruited within 14 days of birth and followed until ten months of age.	Dependent variable: indications of environmental enteric dysfunction (EED) measured through urinary and fecal biomarkers, and lactulose:mannitol (LM) ratio. Independent variables: exclusive breastfeeding status, introduction of complementary foods, season (rainy season and dry season), and other health factors.	<ul style="list-style-type: none"> <li>33% of participants were stunted at nine months of age.</li> <li>LM, myeloperoxidase, and neopterin ratios increased after cessation of continuous exclusive breastfeeding.</li> <li>Microbiota diversification occurs with age, but is not strongly associated with the introduction of complementary foods or linear growth disorders.</li> </ul>
16	Simanjuntak <i>et al.</i> , (2024)	Food Intake of Breastfeeding Mothers versus Protein Content of Breastmilk in the Coastal Area of Bengkulu,	<ul style="list-style-type: none"> <li>Analytic observational study with cross-sectional research design.</li> <li>The sample</li> </ul>	Independent variable: Energy and protein intake of breastfeeding mothers. Dependent variable: Protein content of	<ul style="list-style-type: none"> <li>10% of mothers had breastmilk protein content above 0.9 g/100mL.</li> <li>There was an association between maternal age, energy and protein</li> </ul>

		Indonesia	consisted of 50 breastfeeding mothers selected from 313 mothers breastfeeding infants aged 0-6 months at the Padang Serai Health Center	breast milk. Control variables: Maternal age, number of children, and micronutrient intake.	intake with breast milk protein content (p-value <0.05). • There was no significant association between the intake of fat, micronutrients (vitamins A, B1, B2, B6, and C) and the protein content of breast milk.
17	Hamdan <i>et al.</i> , (2018)	<i>Sterols in Human Milk During Lactation: Bioaccessibility and Estimated Intakes.</i>	<ul style="list-style-type: none"> <li>• Observational study with a quantitative approach.</li> <li>• Breast milk samples were taken from volunteers in two different geographical regions in Spain (coastal and central regions).</li> <li>• The main method used is gas chromatography with flame ionization detection (GC-FID).</li> </ul>	Main variable: Sterol content in breast milk. Secondary variables: Sterol bioaccessibility and estimated sterol intake by infants. Control variables: Geography, lactation stage (colostrum, transition, and mature breast milk up to 6 months), and fat content of breast milk.	<ul style="list-style-type: none"> <li>• The total sterol content of breast milk decreased significantly during lactation (from 24 mg/100 mL to 11 mg/100 mL).</li> <li>• Breast milk from coastal areas contains more sterols than breast milk from central areas.</li> <li>• Sterol bioaccessibility increases with the fat content of breast milk.</li> </ul>
18	Jahanpour <i>et al.</i> , (2023)	Trends of Exclusive Breastfeeding Practices and Its Determinants in Tanzania from 1999 to 2016	<ul style="list-style-type: none"> <li>• Cross-sectional study with secondary data analysis from the 1999, 2004/5, 2010, and 2015/16 Tanzania demographic and health surveys (DHS).</li> <li>• Using generalized linear mixed models to analyze exclusive breastfeeding trends and their determinants.</li> </ul>	Dependent variable: Exclusive breastfeeding practice in the last 24 hours (Yes/No). Independent variable: <ul style="list-style-type: none"> <li>• Infant characteristics gender, age.</li> <li>• Mother's characteristics</li> <li>• Environmental factors</li> </ul>	<ul style="list-style-type: none"> <li>• The proportion of exclusive breastfeeding increased from 31.8% in 1999 to 59% in 2015/16.</li> <li>• Mothers from rural areas and lower economic groups were more likely to exclusively breastfeed than mothers from urban areas and higher economic groups.</li> <li>• The proportion of exclusive breastfeeding decreases with infant age.</li> </ul>
19	Kumala Sari Rambe and Rina Marlina Hutasuht (2023)	<i>The Relationship Between Exclusive Breastfeeding to the Emotional Development of Children in Lubuk Barumun District, Padang Lawas Regency.</i>	<ul style="list-style-type: none"> <li>• Analytic observational study with a cross-sectional approach.</li> <li>• Using the Chi-Square statistical test to see the relationship between exclusive breastfeeding and</li> </ul>	Independent variable: Exclusive breastfeeding. Dependent variable: Children's emotional development. Control variables: Maternal age, education level, occupation, and parity.	<ul style="list-style-type: none"> <li>• There was a significant association between exclusive breastfeeding and children's emotional development (p-value = 0.017).</li> <li>• Other factors that influence children's emotional development are maternal age, education, occupation,</li> </ul>

			children's emotional development.		and parity.
20	Crane et al., (2022)	<i>Cessation of Exclusive Breastfeeding and Seasonality, but Not Small Intestinal Bacterial Overgrowth, Are Associated with Environmental Enteric Dysfunction: A Birth Cohort Study Amongst Infants in Rural Kenya.</i>	<ul style="list-style-type: none"> <li>• A prospective cohort study conducted in rural Kenya.</li> <li>• 100 infants were followed for nine months to observe the development of Environmental Enteric Dysfunction (EED).</li> <li>• EED biomarker measurements were conducted through urine and stool samples.</li> </ul>	Dependent variable: EED indicators (Lactulose-Mannitol (LM) ratio, myeloperoxidase and neopterin levels in feces). Independent variables: Exclusive breastfeeding status, seasonality, infant growth, and exposure to antibiotics and acute infections. Control variables: Household factors, sanitation, and the presence of small intestinal bacterial overgrowth (SIBO).	<ul style="list-style-type: none"> <li>• 33% of infants are stunted at nine months of age.</li> <li>• A decrease in exclusive breastfeeding is associated with an increase in EED biomarkers, especially during the rainy season.</li> <li>• Gut microbiota diversity increases with age, but is not associated with the introduction of complementary foods or growth disorders.</li> </ul>

## Discussion

From the review of journals that have been conducted related to mothers' perceptions of exclusive breastfeeding success in coastal areas, 20 articles were obtained that meet the predetermined criteria. Several studies have shown that breastfeeding mothers in coastal areas have diverse perceptions of exclusive breastfeeding success. Factors most commonly associated with exclusive breastfeeding success include:

### *Knowledge about exclusive breastfeeding*

A study by Febrianti, Agrina and Bayhakki (2024) , found that 78.9% of mothers in coastal areas who did not provide exclusive breastfeeding had a low level of knowledge about the benefits of exclusive breastfeeding. Health education factors from medical personnel and health cadres are very influential on mothers' perceptions of the success of exclusive breastfeeding.

There is a relationship between knowledge and exclusive breastfeeding in mothers who have babies aged 0-6 months at the Kampung Dalam Health Center 2018. there needs to be an effort to increase knowledge in the community by health workers, especially about exclusive so that exclusive breastfeeding increases, and the national target of 80% exclusive breastfeeding can be achieved. Mothers with good knowledge pay attention to the baby's nutritional intake, have a lot of knowledge such as the benefits of exclusive breastfeeding, and how to breastfeed well compared to mothers with low knowledge (Alexander, Melyani and Lindawati, 2018).

Research Muhammad and Evawaty (2019) , The results of in-depth interviews with fisherwomen about their knowledge of exclusive breastfeeding & IMD obtained two categories, namely knowing and not knowing what exclusive breastfeeding & IMD is, but it can be concluded that the knowledge of fisherwomen about exclusive breastfeeding is good.

### *Social and Family Support*

Research Mayasari and Astuti (2022) , showed that family support, especially husbands and parents, contributed greatly to the success of exclusive breastfeeding. Mothers who have good social support tend to be more confident in providing exclusive breastfeeding than those who lack support.

While the results of research Sirait, Agrina and Sari (2023) , the form of support obtained by mothers in general such as husbands helping mothers do homework, husbands accompanying mothers to breastfeed at night, husbands providing pillows so that the mother's position is comfortable, and husbands are quick to respond when the mother needs help. According to the researchers, the more often the husband provides support



to the mother, the mother's desire to provide exclusive breastfeeding will increase and the mother will be more motivated to provide exclusive breastfeeding.

#### *Cultural Factors and Myths*

A study by Sirait, Agrina and Sari (2023) , in the coastal area of Pekanbaru revealed that 60.8% of breastfeeding mothers did not provide exclusive breastfeeding because they were influenced by cultural beliefs that babies need to be given water since birth. Myths developed in coastal communities often hinder exclusive breastfeeding, such as the assumption that breast milk alone is not enough to meet the nutritional needs of babies.

Research by Muhammad and Evawaty (2019) , related to beliefs in exclusive breastfeeding, namely beliefs that support exclusive breastfeeding and beliefs that do not support breastfeeding. The beliefs such as mothers should not show their backs after giving birth so that the milk is not lost, eating moringa leaves / young papaya according to their beliefs can increase the amount of breast milk available.

#### *Access to Health Services*

Research Diana, Ahmad and Syamsul (2023) , shows that mothers in coastal areas with limited access to health facilities are more likely to fail to provide exclusive breastfeeding. Less available health workers and limited information about exclusive breastfeeding are the main obstacles.

Research Muhammad and Evawaty (2019) , from the results of observations made, it appears that access to health services is very easy for mothers to carry out health services in this case related to exclusive breastfeeding. The location of the Puskesmas and Posyandu, which can be said to be in the neighborhood of the population, certainly greatly influences the behavior of mothers in using health services, namely those related to exclusive breastfeeding services.

## **Conclusion**

Based on the results of the literature review, it can be concluded that the success of exclusive breastfeeding in coastal areas is influenced by several main factors, namely: (1) Maternal knowledge level: Adequate education can increase the success of exclusive breastfeeding. (2) Family support: The role of the husband and family is very important in encouraging mothers to continue exclusive breastfeeding. (3) Cultural factors: Beliefs and myths developed in the community can hinder the success of exclusive breastfeeding. (4) Access to health services: The availability of health facilities and personnel affects the sustainability of exclusive breastfeeding. Therefore, a more intensive educational approach is needed as well as an increased role of health workers and government policies to support the success of exclusive breastfeeding in coastal areas.

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## **Conflict of interest**

The authors declare no conflict of interest.

## **Author contributions**

All authors actively contributed to the completion of this article, starting from data collection, analysis, data interpretation, and manuscript writing.

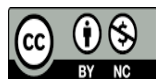
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