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The Relationship Between Family Support, Information Sources, and the Role of Health Workers and Colostrum Feeding Behavior in Newborns at Basarang Community Health Center 2025

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Abstract *Introduction: Colostrum is a part of breast milk (ASI) that has the characteristics of a yellowish liquid that comes out on the first to third day after giving birth. Colostrum contains many immune substances 10-17 times more than mature milk, so it is very good to be given because it functions to form baby antibodies. Objective: To determine maternal knowledge, family support relationships, sources of information, the role of health workers, maternal behavior, and how to provide colostrum by giving colostrum to newborns at Basarang Health Center in 2025. Method: The research method used is descriptive with a Sectional Study approach. The sample in this study was postpartum mothers on days 1-4, with a total of 30 samples. This sample was taken using a purposive sampling method, and the measuring instrument used was a questionnaire. Results: This study found a relationship between colostrum provision and family support (p = 0.029), sources of information (p = 0.003), and behavior (p = 0.000). While there was no significance of maternal knowledge (p=0.0966), the role of health workers (p=0.836), and how to give colostrum (p=0.997) with colostrum. Conclusion: There is a relationship between family support, sources of information, and behavior with colostrum giving, and there is no relationship between maternal knowledge, the role of health workers, and how to give colostrum with colostrum giving.*

Keywords*: Family Support; Health Workers; Information Sources; Knowledge; Newborns.*

1. INTRODUCTION

The WHO states that the coverage of colostrum provision to newborns is still very low, with only around 40% of pregnant women worldwide providing colostrum to their babies. Therefore, the WHO recommends that all pregnant women provide colostrum to their babies.

According to a 2010 report by the World Health Organization (WHO), the global recommendation regarding breastfeeding should be initiated as soon as possible, within one hour of birth, and exclusive breastfeeding is recommended for six months. Data from the 2013 Indonesian Health Profile shows that the percentage of exclusive breastfeeding for infants aged 0-6 months in Indonesia was 61.5%.

Meanwhile, nationally, the coverage of infants receiving exclusive breastfeeding in 2020 was 66.1%. This figure has exceeded the 2018 Strategic Plan (Renstra) target of 47%. The highest percentage of exclusive breastfeeding coverage was in West Nusa Tenggara Province at 87.3%, and the lowest was in West Papua at 34.0%.

According to the 2018 Indonesian Demographic and Health Survey, the majority of children (95%) were breastfed, more than half (57%) were breastfed within one hour of birth, and 74% of children started breastfeeding within one day of birth. 60% of children experienced skin-to-skin contact with their mothers immediately after birth.

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According to the 2018 Basic Health Research (Riskesdas), the proportion of infants in Indonesia who initiated breastfeeding within the first hour was 37.9%. The percentage who initiated breastfeeding within the first hour was 34.5%, while the percentage who initiated breastfeeding more than one hour was 11.7%. The province with the highest proportion of Early Breastfeeding Initiation was West Nusa Tenggara (NTB) at 52.8%, compared to West Papua (21.7%) and South Sulawesi (30%).

Based on data obtained from the 2020 West Java Provincial Health Profile, the national percentage of newborns receiving early breastfeeding (IMD) in 2020 was 77.6%. The province with the highest percentage of newborns receiving IMD was DKI Jakarta (96.1%), while the province with the lowest percentage was Maluku (52.1%). The national IMD target for 2020 was 54%. Only two provinces failed to achieve this target.

This data shows that the coverage of colostrum breastfeeding in 2019 reached 68.78%. Data on colostrum provision in 2019 reached 60.29%, with a total of 835 individuals.

The results of Fatmawati Amir's (2020) research on the Relationship between Health Worker Support for Colostrum Provision to Newborns with statistical test results using chi-square obtained a value of P = 0.000, from $\alpha = 0.05$ this shows that Ho is rejected and Ha is accepted by showing that there is a relationship between health worker support for colostrum provision at the Pattingalloang Makassar Health Center in 2020.

Programs to increase breastfeeding use are a priority due to their broad impact on the nutritional status and health of infants. Efforts to improve the quality of human life must begin early, from conception through toddlerhood. Therefore, Child health is highly dependent on the health of the mother, especially during pregnancy, childbirth, and breastfeeding.

Several opinions hinder postpartum mothers from immediately providing colostrum, including fear of the baby being cold, the mother being too tired after giving birth to breastfeed her baby immediately, the colostrum not coming out or the amount being insufficient, and colostrum being unhealthy or even dangerous for the baby. These issues will not occur if a postpartum mother has good knowledge and receives support from her family.

Information sources can prevent mothers from providing colostrum to their newborns, but many factors are accompanied by perception, attitude, socio-cultural factors, social support, and the inability of health workers to motivate and provide additional knowledge to breastfeeding mothers.

Family support and the role of health workers significantly influence exclusive breastfeeding. Social support from others, for example, can influence the continuity of breastfeeding, allowing the mother to feel physically and psychologically comfortable. These other

people include spouses (husbands), parents, siblings, children, relatives, friends, coworkers, medical staff, and community members. Breastfeeding mothers need support and assistance, both when starting and continuing breastfeeding for up to two years, including support from their families, especially their husbands, and healthcare professionals.

Based on the above description, the author is interested in researching the relationship between family support, information sources, and the role of healthcare professionals with colostrum-providing behavior in the independent practice of midwife Mrs. M in 2025.

The researcher found that a preliminary study conducted in January 2025 showed an increase in the failure to provide colostrum to newborns in the Basarang Community Health Center, Kapuas District. Between October and December, 10 out of 19 postpartum mothers failed to provide colostrum to their newborns. Data shows an increase in the incidence of not giving colostrum to newborns. Previous data obtained from July to September 2022 indicated that 7 out of 13 postpartum mothers in the Basarang Community Health Center, Kapuas District, did not give colostrum to their newborns. For example, the impact of not giving colostrum to babies at the Basarang Community Health Center was that 3 out of 10 babies were susceptible to illness (fever, flu, cough) at the age of one month.

If this situation is left untreated, the baby will become susceptible to allergies or infections, be susceptible to jaundice, and have a weakened immune system (e.g., flu, fever, cough). For mothers, their knowledge will be limited due to a lack of information about colostrum administration, and their family support will be further reduced due to a lack of information about colostrum administration for newborns.

Based on the above description, research on the relationship between family support, sources of information, and the role of health workers in colostrum administration requires attention, given its importance and numerous benefits. This research is expected to further educate and inform about the importance of colostrum administration.

2. RESEARCH METHOD

The research method used is descriptive with a cross-sectional study approach, which is to determine the relationship between maternal knowledge, family support, and the role of health workers in providing Colostrum Breast Milk to Newborns. The population is all the data that is of concern to researchers within a predetermined scope and time. The population in this study was 30 postpartum mothers in June 2025 at the Basarang Health Center 2025. The sample in this study was postpartum mothers on days 1-4 who met the inclusion and exclusion criteria at the Basarang Health Center in 2025.

3. RESULTS AND DISCUSSION

Univariate Analysis

Respondent Knowledge

Table 1. Frequency Distribution of Respondent Knowledge at Basarang Community Health Center in 2025.

Knowledge	f	%
Good	10	32,3
Sufficient	11	35,5
Insufficient	10	32,3
Quantity	30	100

Source: Primary Data.

Based on the frequency distribution of respondents' knowledge at the Basarang Community Health Center in 2025, 11 respondents had sufficient knowledge (35.5%), and 10 had good knowledge (32.3%).

Colostrum Administration

Table 2. Frequency Distribution of Colostrum Administration Treatment at the Basarang Community Health Center in 2025.

Colostrum	f	%
Given	18	60,0
Not Given	12	40,0
Quantity	30	100

Source: Primary Data.

Based on the frequency distribution of colostrum provision to newborns at the Basarang Community Health Center in 2025, 18 respondents provided colostrum (60.0%) and 12 did not (40.0%).

Univariate Chi-Square Analysis Results

Bivariate analysis was conducted on two variables suspected of being related or correlated using chi-square or cross-tabulation. The bivariate analysis in this study aimed to determine the relationship between colostrum provision and family support, information sources, the role of health workers, colostrum provision behavior, and methods of providing colostrum to newborns. The following are the results of the data analysis:

Relationship between Knowledge and Colostrum Provision Behavior

Table 3. Relationship between Knowledge and Colostrum Provision Behavior at the Basarang Community Health Center in 2025.

Knowledge	**Colostrum Feeding Behavior**				Total		OR-Value	p-value
	Given		**Not Given**					
	F	**%**	**F**	**%**	**F**	**%**		
Good	4	13,3	6	20,0	10	33,3	1,843	0,966
Enough	5	16,7	6	20,0	11	36,7		
Insufficient	4	13,3	5	16,7	9	30,0		
Quantity	13	43,3	17	56,7	30	100		

Source: Primary Data 2025.

Based on Table 3, out of 30 respondents, 11 (36.7%) had sufficient knowledge about colostrum administration, 6 (20.0%) did not provide colostrum, and 9 (30.0%) had insufficient knowledge about colostrum administration; 5 (13.3%) did not provide colostrum.

The results of the Chi-Square statistical test showed a P-value of 0.966 > α = 0.05. Therefore, there is no relationship between maternal knowledge and colostrum administration behavior at the Basarang Community Health Center.

Relationship between Family Support and Colostrum Administration Behavior

Table 4. Relationship between Family Support and Colostrum Administration Behavior at the Basarang Community Health Center in 2025.

Family Support	**Colostrum Feeding Behavior**				Total		OR-Value	p-value
	Given		**Not Given**					
	F	**%**	**F**	**%**	**F**	**%**		
Good	8	26,7	8	26,7	16	53,3	8,458	0,009
Not Good	9	30,0	5	16,6	14	46,6		
Quantity	17	56,7	13	43,3	30	100		

Source: Primary Data 2025.

Based on Table 4. of the 30 respondents, 16 (53.4%) received good family support regarding colostrum provision, while 8 (26.7%) did not provide colostrum. 14 (46.6%) received poor family support regarding colostrum provision, with 5 (16.6%) not providing colostrum.

The results of the Chi-Square statistical test yielded a P-value of 0.009 <α value of 0.05. Therefore, there is a relationship between family support and colostrum provision behavior at the Basarang Community Health Center.

Relationship of Information Sources with Colostrum Provision Behavior

Table 5. Relationship of Information Sources with Colostrum Provision Behavior at the Basarang Community Health Center in 2025.

Information Sources	Colostrum Feeding Behavior				Total		OR-Value	p-value
	Given		Not Given					
	F	%	F	%	F	%		
Good	12	40,0	12	40,0	24	80	11,294	0,001
Not Good	5	16,7	1	3,3	6	20		
Quantity	13	56,7	17	43,3	30	100		

Source: Primary Data 2025.

Based on Table 5, from 30 respondents, it can be seen that 24 respondents (80%) received good information sources about colostrum administration, with 12 (40%) providing colostrum, and 6 (20%) received poor information sources, with 5 (16.7%) providing colostrum.

The results of the Chi-Square statistical test yielded a P-value of 0.001 <α value of 0.05. Therefore, there is a relationship between information sources and colostrum administration behavior at the Basarang Community Health Center.

Relationship between the Role of Health Workers and Colostrum Administration Behavior

Table 6. Relationship between the Role of Health Workers and Colostrum Administration Behavior at the Basarang Community Health Center in 2025.

The Role Of Health Workers	Colostrum Feeding Behavior				Total		OR-Value	p-value
	Given		Not Given					
	F	%	F	%	F	%		
Good	9	30	6	20	15	50	6,136	0,713
Not Good	8	26,7	7	23,3	15	50		
Quantity	17	43,3	13	56,7	30	100		

Source: Primary Data 2025.

Based on Table 6, out of 30 respondents, 15 (50.0%) received positive feedback from health workers regarding colostrum provision, with 9 respondents (30%) providing colostrum. 15 (50%) received poor feedback from health workers regarding colostrum provision, with 7 respondents (23.3%) not providing colostrum.

The results of the Chi-Square statistical test yielded a P-value of 0.713 <α value of 0.05. Therefore, there is no relationship between the role of health workers and colostrum provision behavior at the Basarang Community Health Center.

Discussion

Relationship between Mothers' Knowledge and Colostrum Administration

Based on Table 3, out of 30 respondents, 11 (36.7%) had sufficient knowledge about colostrum administration, while 6 (20.0%) did not administer colostrum. Nine (30.0%) had insufficient knowledge, while 5 (13.3%) did not administer colostrum.

The results of the Chi-Square statistical test yielded a P value of 0.966, > α value of 0.005. Therefore, there is no relationship between mothers' knowledge and colostrum administration at the Basarang Community Health Center.

According to Riyanto Budiman (2013), knowledge is something known related to the learning process. This learning process is influenced by various internal factors, such as motivation, and external factors such as available information resources, as well as socio-cultural conditions.

This aligns with research conducted by Ikrawanty Ayu Wulandari and Basuki Rahmat MS entitled "The Relationship Between Maternal Knowledge, Family Support, and the Role of Health Workers in Providing Colostrum to Newborns at Labuang Baji Regional Hospital in Makassar." The chi-square test yielded a p-value of 0.336 (α = ≤ 0.005), indicating no relationship between maternal knowledge and colostrum provision.

According to the researchers, colostrum provision is driven by knowledge of its benefits, as knowledge influences behavior. Mothers with good knowledge of colostrum are more likely to provide it to their babies. Conversely, mothers with less knowledge are more likely not to provide colostrum to their babies. The results of the study showed that there was no relationship between knowledge and giving colostrum; one of the reasons could be due to the minimal sample size, or because knowledge was sufficient or even good regarding giving colostrum, but because there were other factors, such as poor family support, the mother could not give colostrum to her baby.

Relationship between Family Support and Colostrum-Providing Behavior

Based on Table 4, out of 30 respondents, 16 (53.4%) received good support from their families regarding colostrum provision, while 8 (26.7%) did not provide colostrum. 14 (46.6%) received poor support from their families regarding colostrum provision, with 5 (16.6%) not providing colostrum.

The results of the Chi-Square statistical test yielded a P value of 0.009 <α value of 0.05. Therefore, there is a relationship between family support and colostrum-providing behavior at the Basarang Community Health Center.

Family support, according to Fridman (2014), is the attitude and actions of family acceptance toward family members, in the form of informational support, appraisal support,

instrumental support, and emotional support. Therefore, family support is a form of interpersonal relationship encompassing attitudes, actions, and acceptance toward family members, so that family members feel cared for.

This aligns with research conducted by Septi Tri Wahyuni and Isri Nasrifah, entitled "The Relationship Between Knowledge Level and Family Support and Colostrum Provision to Newborns at the Perdamaina PMB, Candi Village, Bandungan District, Semarang Regency." The chi-square statistical test results showed a p-value of 0.016 ($\alpha = \leq 0.05$), indicating a relationship between family support and colostrum provision.

According to the researchers, family support is assistance provided to other family members in the form of goods, services, information, and advice that can make the recipient feel loved, appreciated, and at ease. Family support for family members can be both moral and material. Family support will increase the recipient's self-confidence. Lack of family support can lead to mothers feeling unable to do what they should or provide for their babies due to a lack of support or praise from their families.

Relationship between Information Sources and Colostrum Administration Behavior

Based on Table 5, out of 30 respondents, 24 (80%) received good information sources about colostrum administration, with 12 (40%) providing colostrum. Six (20%) received poor information sources, with 5 (16.7%) providing colostrum.

The results of the Chi-Square statistical test yielded a P-value of 0.001 <α value of 0.05. Therefore, there is a relationship between information sources and colostrum administration behavior at the Basarang Community Health Center.

Information sources play a crucial role in shaping attitudes and decisions about action. Increasing interest among women of childbearing age (WUS) encourages them to seek information in various forms. This information can be freely obtained from peers, books, films, videos, and even easily accessible websites on the internet (Taufia, 2017).

This aligns with research conducted by Sunirah entitled "The Relationship between Knowledge and Information and Colostrum Administration to Newborns" in 2021. The chi-square statistical test yielded a p-value of 0.002 ($\alpha = \leq 0.05$), indicating a relationship between information and colostrum administration to newborns.

According to researchers, information is a notification from someone to be studied further and implemented. If the information is good or has a positive impact on someone, it will significantly impact their life. This is why information on colostrum administration to newborns still has a balanced value because the information mothers receive is not yet very accurate.

Relationship between the Role of Health Workers and Colostrum Provision

Based on Table 6, out of 30 respondents, 15 (50.0%) received positive feedback from health workers regarding colostrum provision, with 9 (30%) providing colostrum. 15 (50%) received poor feedback from health workers regarding colostrum provision, with 7 (23.3%) not providing colostrum.

The results of the Chi-Square statistical test yielded a P-value of 0.713 <α value of 0.05. Therefore, there is no relationship between the role of health workers and colostrum provision behavior at the Basarang Community Health Center.

Roles are expected individual behaviors according to their position. A role is a pattern of behavior, beliefs, values, and attitudes that are expected to reflect the behavior that individuals in that role should exhibit in common situations (Sarwono, 2014).

This is inconsistent with research conducted by Sunirah, entitled "The Relationship between Knowledge and Information and Colostrum Administration to Newborns" in 2021. The chi-square test yielded a p-value of 0.001 ($\alpha = \leq 0.05$), indicating a relationship between the role of health workers and colostrum administration to newborns.

According to researchers, health workers who effectively carry out their roles can increase the success of colostrum administration to newborns, particularly midwives who assist with deliveries. After assisting with delivery, health workers can explain the importance of immediately administering colostrum to the mother.

The study's findings, which indicate no relationship between the role of health workers and colostrum administration, are partly due to the limitations of the study, including the small sample size. Furthermore, health workers are already significantly involved in providing counseling and health education to mothers, even during antenatal care, regarding colostrum administration to newborns. However, due to external factors such as poor family support, mothers are unable to provide colostrum to their babies.

4. CONCLUSION

Based on the results of data analysis and discussion regarding the relationship between family support, information sources, and the role of health workers in colostrum provision behavior, the following conclusions can be drawn:

1. Frequency distribution of respondents' knowledge at the Basarang Community Health Center in 2025: 11 respondents had sufficient knowledge (35.5%), and 10 had good knowledge (32.3%).

2. Frequency distribution of colostrum provision to newborns at the Basarang Community Health Center in 2025: 18 respondents provided colostrum (60.0%), and 12 respondents did not provide colostrum (40.0%).
3. The relationship between knowledge and colostrum provision behavior, with a P value of 0.966 <0.05 and an OR of 1.843, indicates no relationship between knowledge and colostrum provision to newborns.
4. The relationship between family support and colostrum-giving behavior (P = 0.009 < 0.05 and an OR of 8.458) indicates a relationship between family support and colostrum provision to newborns.
5. The relationship between information sources and colostrum-giving behavior (P = 0.001 < 0.05 and an OR of 11.294) indicates a relationship between information sources and colostrum provision to newborns.
6. The relationship between the role of health workers and colostrum-giving behavior (P = 0.713 < 0.05 and an OR of 6.136) indicates no relationship between the role of health workers and colostrum provision to newborns.

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