
Booklet Media As An Effort To Promote Exclusive Breastfeeding Health In Preventing Stunting In The Work Area Of The Kampung Baru Community Health Center, Medan City

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Abstract

Stunting remains a public health problem in Indonesia, while exclusive breastfeeding coverage is not yet optimal. Booklet media can be used as an educational tool to increase knowledge about exclusive breastfeeding in preventing stunting. This study aims to analyze the role of booklet media as an effort to promote exclusive breastfeeding health in preventing stunting in the working area of the Kampung Baru Community Health Center, Medan City. The study used a quantitative approach with a survey and media development method (Research and Development). A total of 30 respondents consisting of pregnant and breastfeeding mothers participated in the study. The instrument was a pre-test and post-test questionnaire. Data were analyzed using the Shapiro-Wilk test and the Wilcoxon Signed Rank Test. A total of 25 respondents (83.3%) experienced an increase in knowledge, 4 respondents (13.3%) experienced no change, and 1 respondent (3.3%) experienced a decrease. The Wilcoxon test showed $Z = -4.392$ and $p < 0.001$. Booklet media is effective as a health promotion medium to increase knowledge about exclusive breastfeeding in preventing stunting.

Keywords: *Breastfeeding, Health Education, Health Promotion, Exclusive Breastfeeding, Stunting*

INTRODUCTION

Stunting is a public health problem that remains a major burden in Indonesia due to its broad impact on physical growth, cognitive development, and future human resource productivity. Based on the results of the 2024 Indonesian Nutritional Status Survey (SSGI) released by the Indonesian Ministry of Health, the national stunting prevalence reached 19.8% in 2024. Although this figure has decreased compared to the previous year, it is still far from the government's target of <14%, so that sustainable prevention efforts are still needed (Indonesian Ministry of Health, 2025). One important intervention in preventing stunting is exclusive breastfeeding (ASI) for the first six months of life because breast milk provides complete nutrition and supports optimal child growth. Meta-analysis studies show that exclusive breastfeeding has a protective effect against stunting, namely a lower risk of stunting in children who receive exclusive breastfeeding compared to children who do not receive exclusive breastfeeding (Pratama, 2024).

Despite its significant benefits in supporting growth and preventing stunting, exclusive breastfeeding practices in Indonesia remain suboptimal. According to WHO and UNICEF data (2025), exclusive breastfeeding coverage in Indonesia reached approximately 66.4%. This situation indicates a gap between the benefits of exclusive breastfeeding and its practice in the field. Therefore, strengthening effective health promotion is necessary to increase mothers' knowledge and awareness of the importance of exclusive breastfeeding as a means of preventing stunting. One-way health promotion media are also more susceptible to information being poorly absorbed by the public, so innovative, creative health promotion strategies are needed that are in line with developments in modern communication.

These issues demonstrate that improving mothers' knowledge and understanding is crucial to promoting exclusive breastfeeding. In the Kampung Baru Community Health Center (Puskesmas) area of Medan City, stunting still requires a more effective promotive and preventive approach. One contributing factor to the high risk of stunting is the low level of exclusive breastfeeding among infants

aged 0–6 months. This is due to mothers' limited knowledge, a lack of understanding of the benefits of exclusive breastfeeding, and a lack of accessible and engaging health education media. Therefore, health promotion efforts should be directed at increasing mothers' knowledge and awareness of the importance of exclusive breastfeeding as a preventive measure against stunting.

Booklets can be an alternative educational tool to address these needs due to their practical, visual, and re-readable characteristics. They present information concisely and systematically, combining text with illustrations to facilitate understanding of health messages. The application of educational media through booklets has also been shown to improve mothers' knowledge and attitudes regarding nutrition and stunting prevention programs (Apriliyanti et al., 2022). Furthermore, previous research has shown that education on exclusive breastfeeding using booklets can improve mothers' knowledge through a 37% increase in post-test scores (Lisnawati et al., 2023). Wulandari et al. (2023) demonstrated an average increase in mothers' knowledge from 50.73% to 76.38%, accompanied by increasingly positive attitudes toward exclusive breastfeeding. These findings demonstrate that booklets have potential as a health promotion medium that can convey information systematically, easily understood, and can be reused by the target audience.

Although booklets have been used in health education, their specific use for promoting exclusive breastfeeding as a stunting prevention measure remains suboptimal, particularly when designed to address local needs and directly linked to stunting issues. At the primary health care level, such as community health centers (Puskesmas), booklets are not always tailored to socioeconomic conditions, maternal education levels, and the prevailing health issues in the area. The use of booklets, specifically for promoting exclusive breastfeeding as a stunting prevention measure in the Kampung Baru Community Health Center in Medan City, has also not been extensively evaluated. However, increasing maternal knowledge about the importance of exclusive breastfeeding can contribute to improved breastfeeding behavior and ultimately reduce the risk of stunting. This situation highlights the need for health promotion media that are not only informative but also relevant to the local context and easily understood by breastfeeding mothers and their families, who play a role in exclusive breastfeeding decision-making.

This study aims to examine the role of booklets as a health promotion tool for exclusive breastfeeding in preventing stunting in the Kampung Baru Community Health Center, Medan City. The urgency of this study lies in the need to strengthen health promotion to increase mothers' knowledge and awareness of the importance of exclusive breastfeeding as a stunting prevention effort, especially since the national stunting prevalence is still above the government's target and exclusive breastfeeding coverage is not yet optimal. The novelty of this study lies in the development and utilization of booklets specifically designed as a health promotion tool for exclusive breastfeeding with a focus on stunting prevention in the Kampung Baru Community Health Center, Medan City. The booklets are designed based on the characteristics of the local community, using simple language, contextual illustrations, and emphasizing the direct link between exclusive breastfeeding and stunting prevention. This study also integrates exclusive breastfeeding health promotion messages with stunting issues in educational print media and positions the booklets as a communication support tool between health workers and breastfeeding mothers in service activities at the community health center. Thus, this study is expected to provide an overview of the use of locally based print media in improving mothers' knowledge and attitudes regarding exclusive breastfeeding and become the basis for developing more targeted and sustainable health promotion strategies in efforts to prevent stunting at the primary health care level.

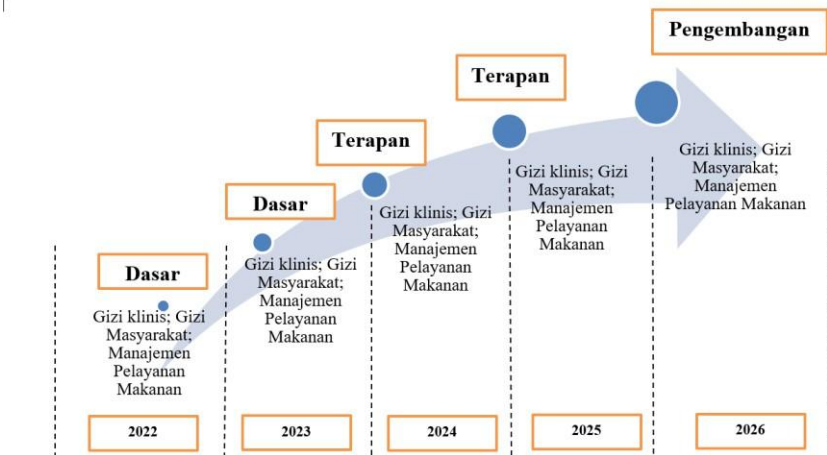
Research Road Map

This research is in line with research conducted by Lisnawati et al. (2023), which found that exclusive breastfeeding education using booklets was effective in increasing knowledge among breastfeeding mothers, with a 37% increase in post-test scores. This is also supported by research conducted by Wulandari et al. (2023), which showed an increase in average maternal knowledge from 50.73% to 76.38%, accompanied by increasingly positive attitudes toward exclusive breastfeeding.

Apriliyani et al. (2022: 8) explains that booklets can be effective in promoting a health program due to their attractive design, combining images with concise, concise explanations and easy-to-understand language. This makes it easier for breastfeeding mothers and their families to understand the material and implement it in their daily lives. As stated in the road map framework above, it is known that this research focuses on the field of community nutrition with the aim of improving the nutritional status and health of the community through a data-based approach starting from anthropometric data, food intake, as well as relevant clinical and biochemical physical indicators, as a basis for preparing interventions and nutrition education media that will be used.

Within the research roadmap, this research is now in the development phase, utilizing previous research findings as a basis for designing and implementing community nutrition education and interventions. Targeted outcomes include scientific publications, teaching materials and learning modules, nutrition education media, and applicable community nutrition intervention models with potential for downstreaming. The Technology Readiness Level (TKT) improvement in this research is currently in the limited community trial phase.

Picture1. Research Roadmap



The image above represents the research roadmap for the Nutrition Study Program at Medan State University over a four-year period, from 2022 to 2026, developed in stages and sustainably using a Research and Development (RnD) model. This roadmap is divided into three research focus areas: clinical nutrition, community nutrition, and food service management. Over the years, the research phases have progressed, starting with the basic phase of collecting initial data and strengthening scientific studies, then moving on to the applied phase through product development and testing and intervention models, ultimately reaching the phase of developing and strengthening innovations that benefit the community, institutions, and relevant stakeholders.

Table 1.Nutrition Study Program Research Roadmap

Component	2022	2023	2024	2025	2026
Market (Users of Research Results)	1 Society 2 Universities 3 Government Agencies	1 Society 2 Universities 3 Government Agencies	1 Society 2 Universities 3 Government/Private Agencies	1 Society 2 Universities 3 Government/Private Agencies	1 Society 2 Universities 3 Industries 4 Government/Private Agencies
Clinical Nutrition	1 Baseline data: anthropometry, biochemistry, clinical, dietary 2 Nutritional assessment analysis 3 Clinical trials of food products	1 Baseline data: anthropometry, biochemistry, clinical, dietary 2 Nutritional assessment analysis 3 Clinical trials of food products 4 Teaching materials for clinical trial products	1 Baseline data: anthropometry, biochemistry, clinical, dietary 2 Nutritional assessment analysis 3 Clinical trials of food products 4 Teaching materials for clinical trial products 5 Analysis of nutritional therapy in outpatients	1 Baseline data: anthropometry, biochemistry, clinical, dietary 2 Nutritional assessment analysis 3 Clinical trials of food products 4 Teaching materials for clinical trial products 5 Analysis of nutritional therapy in outpatients	1 Baseline data: anthropometry, biochemistry, clinical, dietary 2 Nutritional assessment analysis 3 Clinical trials of food products 4 Teaching materials for clinical trial products 5 Analysis of nutritional therapy in outpatients 6 Nutrition education trials for outpatients/inpatients

Component	2022	2023	2024	2025	2026
				6 Nutrition education trials for outpatients/inpatients	
Community Nutrition	1 Data from the results of the needs analysis 2 Anthropometric and dietary baseline data 3 Clinical and biochemical physical baseline data 4 Development of teaching materials and learning media	1 Data from the results of the needs analysis 2 Anthropometric and dietary baseline data 3 Clinical and biochemical physical baseline data 4 Development of teaching materials and learning media	1 Data from the results of the needs analysis 2 Anthropometric and dietary baseline data 3 Clinical and biochemical physical baseline data 4 Development of intervention models 5 Development of teaching materials and learning media	1 Data from the results of the needs analysis 2 Anthropometric and dietary baseline data 3 Clinical and biochemical physical baseline data 4 Development of intervention models 5 Nutrition education media 6 Development of teaching materials and learning media	1 Data from the results of the needs analysis 2 Anthropometric and dietary baseline data 3 Clinical and biochemical physical baseline data 4 Development of intervention models 5 Nutrition education media 6 Development of teaching materials and learning media 7 Community nutrition interventions using teaching media/educational methods
Food Service Management	1. Balanced nutritional menu 2 Local processed food products 3 Development of teaching materials	1. Balanced nutritional menu 2 Local processed food products 3 Development of teaching materials	1 Local processed food products 2 Testing of processed food products 3 Development of local teaching materials and products 4 Evaluation of industrial/institutional food service management	1 Local processed food products 2 Testing of processed food products 3 Development of local teaching materials and products 4 Evaluation of industrial/institutional food service management	1 Local processed food products 2 Testing of processed food products 3 Development of local teaching materials and products 4 Evaluation of industrial/institutional food service management 5 Tests of processed product development on healthy targets
Research methodology	1 R&D 2 Quantitative 3 Surveys	1 R&D 2 Quantitative 3 Surveys	1 R&D 2 Quantitative 3 Surveys	1 R&D2 Quantitative3 Survey	1 R&D2 Quantitative3 Survey
Research Theme/Topic	1 Clinical Nutrition 2 Community Nutrition 3 Food Service Management	1 Clinical Nutrition 2 Community Nutrition 3 Food Service Management	1 Clinical Nutrition 2 Community Nutrition 3 Food Service Management	1 Clinical Nutrition 2 Community Nutrition 3 Food Service Management	1 Clinical Nutrition 2 Community Nutrition 3 Food Service Management

RESEARCH METHODS

This study employed a quantitative approach with survey methods and media development (Research and Development or R&D) aimed at health promotion interventions using booklets. The study focused on education about exclusive breastfeeding as a stunting prevention measure in the Kampung Baru Community Health Center (Puskesmas) working area of Medan City. The health promotion implementation framework used the PRECEDE–PROCEED model to identify health problems and design health promotion activities tailored to the target group's needs. The use of the PRECEDE–PROCEED model in health promotion is also included in research studies by Afiani et al. (2021) and Wardiah et al. (2026).

The research instrument used was a questionnaire to measure respondents' knowledge level regarding exclusive breastfeeding in stunting prevention. Measurements were conducted through a pre-test before education was provided and a post-test after respondents received education using a booklet. The booklet contained material on the definition of exclusive breastfeeding, its benefits, the correct method for providing exclusive breastfeeding, and its role in stunting prevention. The data obtained from the measurement results were then analyzed to determine changes in respondents' knowledge levels before and after education.

Data analysis was conducted in stages, first by conducting a normality test using the Shapiro–Wilk test. This test is used to determine the distribution of the data and determine the appropriate type

of analysis. Because the number of respondents in this study was 30 people and one of the data was not normally distributed, an analysis of differences in knowledge levels before and after the intervention was conducted using the Wilcoxon Signed Rank Test. This analysis was used to determine changes in respondents' knowledge levels after being provided with education using the booklet.

The study was conducted in the Kampung Baru Community Health Center (Puskesmas) in Medan City with 30 respondents, consisting of pregnant and breastfeeding mothers. Respondents participated in the entire research series, which included completing a characteristics questionnaire, conducting a pre-test, providing education using a booklet on exclusive breastfeeding in stunting prevention, and completing a post-test. Based on the respondent characteristics data, some respondents were pregnant and breastfeeding mothers, while others also included respondents who were neither pregnant nor breastfeeding. This study did not include the total target population or specific sampling techniques, so these sections are not included outside the research material.

The research procedure was carried out through several stages. The first stage was preparation, which included identifying stunting problems and mothers' low understanding of exclusive breastfeeding in the Kampung Baru Community Health Center (Puskesmas) working area in Medan City, conducting a literature review on stunting, exclusive breastfeeding, health promotion, and booklet media, as well as developing a proposal and initial concept for the booklet media. The second stage was activity planning, which included determining research targets, developing educational materials on exclusive breastfeeding, scheduling activities, and developing a budget plan. The educational materials in the booklet were prepared based on the needs of the target population and adapted to the context of the Puskesmas' working area.

The third stage is the preparation of a booklet media, paying attention to the content, use of easy-to-understand language, and attractive visual displays. The material presented includes the definition of exclusive breastfeeding, the benefits of exclusive breastfeeding, the correct method of providing exclusive breastfeeding, and the role of exclusive breastfeeding in preventing stunting. The fourth stage is the implementation of exclusive breastfeeding health promotion to the target using booklets in the work area of the Kampung Baru Community Health Center in Medan City, involving pregnant women and mothers with babies aged 0–6 months.

The fifth stage is an evaluation of the activity by measuring respondents' knowledge levels using pre-test and post-test questionnaires. The collected data was first analyzed using the Shapiro–Wilk test to determine data distribution, followed by a Wilcoxon Signed Rank Test to determine differences in respondents' knowledge levels before and after being provided with education using the booklet media. The final stage is the preparation of a research report summarizing all activity results as a form of accountability and research output.

Team Competence

The research team's competencies were deemed aligned with the community nutrition focus being developed. The team leader and three members studied Nutrition Education and possess competencies in community nutrition analysis, nutrition education and intervention development, and research methodology. Meanwhile, one team member, specializing in Indonesian, was involved in developing teaching materials and strengthening communication aspects to ensure nutrition messages are easily understood by the community. This interdisciplinary combination aims to improve the quality of education and the dissemination of research findings to the public.

In addition to their scientific competencies, all members of the research team also have experience in publishing scientific articles in accredited national journals and reputable scientific journals. This publication experience can illustrate the team's competence in analyzing data and concluding research results systematically and in accordance with scientific principles. Therefore, the research team In addition, all members and the team leader who come from the nutrition study program have been declared to have graduated from the nutrition education course and thus have a track record in providing health education in the community. The researchers are considered to have adequate

capacity to produce quality research outputs and support the dissemination of research results in the field of nutrition in the wider community.

RESULTS AND DISCUSSION

Research Implementation Results

This research was conducted in the Kampung Baru Community Health Center (Puskesmas) in Medan City, with 30 respondents, consisting of pregnant and breastfeeding women. All respondents participated in a series of research activities, including completing a questionnaire on respondent characteristics, conducting a pre-test, providing education using a booklet on exclusive breastfeeding in stunting prevention, and completing a post-test. The data obtained were then checked for completeness and tabulated as the basis for the research analysis process.

Table 2. Respondent Characteristics

Variables	Category	n	(%)
Present condiition	1=Pregnant	4	13.3
	2=Breastfeeding	12	40
	3=Not Pregnant/Breastfeeding	14	46.7
Gestational age	1=Trimester 1	1	3.3
	2=Trimester 2	1	3.3
	3=Trimester 3	2	6.7
	4=Not Pregnant	26	86.7
Baby's age	1=0-6 months	2	6.7
	2=7-12 months	6	20.0
	3=12-24 months	2	6.7
	4=>24 months	2	6.7
	5=Not Breastfeeding	18	60
Have you ever received information about exclusive breastfeeding?	1=Yes	30	100
	2=No	0	0
Exclusive breastfeeding information sources	1=Health Worker	9	30
	2=Social Media	8	26.7
	3=Community Cadres	11	36.7
	4=Parents	2	6.7
Husband's job	1=Not working	1	3.3
	2=PNS	0	0
	3=Private Employee	2	6.7
	4=Self-employed	11	36.7
	5=Labor	9	30
	6=Other	7	23.3
Respondent's occupation	1=Not working	21	70
	2=PNS	0	0
	3=Private Employee	2	6.7
	4=Self-employed	7	23.3
	5=Labor	0	0
	6=Other	0	0
Husband's education	1=SD	2	6.7
	2=Junior High School	5	16.7
	3=High School	20	66.7
	4=Diploma/Bachelor's Degree	3	10
Respondent education	1=SD	0	0
	2=Junior High School	5	16.7
	3=High School	22	73.3
	4=Diploma/Bachelor's Degree	3	10
Income	1=<Rp500,000	1	3.3
	2=Rp500,000-1,000,000	1	3.3
	3=Rp1,000,000-2,000,000	18	60
	4 = Rp3,000,000-5,000,000	10	33.3
	5=>Rp5,000,000	0	0

Based on the characteristics of the respondents, the majority of respondents were mothers who were neither pregnant nor breastfeeding (46.7%), with the highest level of education dominated by high school graduates (73.3%), and the majority were unemployed (70%). All respondents (100%) also stated that they had received information about exclusive breastfeeding, with the most common sources of information coming from community cadres (36.7%) and health workers (30%). This condition indicates that respondents had been exposed to information about exclusive breastfeeding before the study was conducted, although their level of knowledge was still different, so further education through booklets was needed.

Table 3. Pre-test and Post-test Scores

No	Respondent's Initials	Pre-test Score (X1)	Post-test Score (X2)	Difference (X2-X1)
1.	DS	14	14	0
2.	J	15	16	+1
3.	DYS	18	22	+4
4.	SI	22	22	0
5.	ELL	18	20	+2
6.	DSA	16	23	+7
7.	SY	20	24	+4
8.	S	19	24	+5
9.	A	21	24	+3
10.	R	16	23	+7
11.	DF	18	22	+4
12.	M	15	16	+1
13.	SJ	20	19	-1
14.	N	16	16	0
15.	AU	20	21	+1
16.	ZH	22	25	+3
17.	D	22	24	+2
18.	W	21	25	+4
19.	DDA	15	23	+8
20.	WMR	22	25	+3
21.	EHB	12	14	+2
22.	RI	13	18	+5
23.	D	16	21	+5
24.	LY	15	20	+5
25.	RN	14	15	+1
26.	H	10	12	+2
27.	EP	16	23	+7
28.	DS	17	17	0
29.	H	5	11	+6
30.	M	14	21	+7

Based on the pre-test and post-test results, it was apparent that most respondents experienced an increase in their knowledge scores after receiving education using the booklet. Of the 30 respondents, 25 experienced an increase in their scores, 4 respondents experienced a stable score, and only 1 respondent experienced a decrease in their score. Descriptively, these results indicate a trend toward increased knowledge after the intervention of health promotion using the booklet.

**Data Normality Test
(Shapiro Wilk Test)**

Based on the score difference data above, a normality assumption test was conducted to determine the appropriate type of statistical test (parametric or non-parametric). Given the relatively small sample size in this study (N = 30), the normality test was analyzed using the Shapiro-Wilk method. The following table shows the results of the normality test using the Shapiro-Wilk test:

Table 4. Normality Test Results

Variables	Statistics	df	Sig.(p-value)	Information
Pre-test	0.931	30	0.052	Normally distributed (p>0.05)
Post-test	0.912	30	0.017	Non-normally distributed (p<0.05)

The results of the normality test above show that the pre-test data has a significance value of $p = 0.052$ ($p > 0.05$), which indicates that the initial data is normally distributed. Meanwhile, the post-test data obtained a significance value of $p = 0.017$ ($p < 0.05$), which means that the data is not normally distributed. Because one of the variables does not meet the normality assumption, the paired difference test was continued using a non-parametric statistical approach, namely the Wilcoxon Signed Ranks Test.

Statistical Test
(Wilcoxon Signed Ranks Test)

The Wilcoxon signed-ranks test was used to analyze changes in respondents' knowledge levels before and after receiving an educational intervention using a booklet. The following table shows the results of the statistical test using the Wilcoxon signed-ranks test:

Table 5. Results of the Wilcoxon Signed Ranks Test

Variables	Mean ± SD	N	Negative ranks	Positive ranks	Ties	Z Value	Sig.(2-tailed)
Pre-test	16.73 ± 3.92	30	1	25	4	-4,392	<0.001
Post-test	20.00 ± 4.13	30					

Based on the results of the analysis of the difference in pre-test and post-test scores using the Wilcoxon Signed Rank Test, it was found that 25 respondents (83.3%) experienced an increase in knowledge scores (positive ranks) after the intervention.⁵

- 1 respondent (3.3%) experienced a decrease in score (negative ranks).
- 4 respondents (13.3%) showed no change in score (ties).

Strengthened by the results of statistical tests through the Wilcoxon test which produced a Z value = -4.392 with a p value <0.001 (Asymp. Sig. 2-tailed). Because the p value <0.05, the null hypothesis (H0) is rejected and the alternative hypothesis (Ha) is accepted. Based on the results of the Wilcoxon Signed Rank Test, a p value <0.001 was obtained, so it can be concluded that there is a significant difference between the mothers' knowledge scores before and after being given education using booklet media.

Discussion

Based on the analysis, this study shows that providing education using booklets has an impact on increasing mothers' knowledge about exclusive breastfeeding as a stunting prevention effort. These results were proven through the Wilcoxon Signed Rank Test, which showed a significant difference between knowledge scores before and after the intervention. This increase in knowledge indicates that booklets are an effective health promotion medium for conveying information about exclusive breastfeeding. Booklets allow respondents to obtain information systematically, easily understood, and can be reread after the educational activity is completed, thereby helping to strengthen respondents' understanding of the material provided.

The results of this study indicate that booklets are effective as a health promotion tool to increase mothers' knowledge about exclusive breastfeeding and stunting prevention. This is evident in the increased knowledge scores of 25 out of 30 respondents (83.3%) after receiving education. This increase indicates that the information conveyed through the booklets was well received and understood by the majority of respondents. The booklets, which combine written information with engaging illustrations, also enabled respondents to revisit the material after the educational activity, thereby strengthening their understanding of the importance of exclusive breastfeeding.

The findings of this study align with those of Lisnawati et al. (2023), who stated that education using booklets can improve mothers' knowledge regarding exclusive breastfeeding. Similar results were also reported by Wulandari et al. (2023), who showed an increase in mothers' knowledge and attitudes about breastfeeding after receiving education using booklets. These similar results reinforce the point that booklets are an effective health promotion medium because they convey information systematically, are easy to understand, and can be reused by the target audience as self-study materials.

Although most respondents experienced an increase in their knowledge scores, one respondent experienced a decrease in their score, and four respondents experienced no change in their scores after the intervention. This condition can be influenced by various factors, such as the respondent's level of concentration during the education session, previous experience with exclusive breastfeeding, their ability to understand the material, and the environmental conditions during the questionnaire filling process. Therefore, health promotion using booklets should be combined with two-way communication methods, such as discussions or question-and-answer sessions, so that the information provided can be more optimally understood by all targets.

CONCLUSION

This study shows that education using booklets plays a role in increasing mothers' knowledge about exclusive breastfeeding as an effort to prevent stunting in the working area of the Kampung Baru Community Health Center in Medan City. Of the 30 respondents, 25 respondents (83.3%) experienced an increase in knowledge scores, 4 respondents (13.3%) experienced no change, and 1 respondent (3.3%) experienced a decrease in scores. The results of the Wilcoxon Signed Rank Test showed a Z value = -4.392 with a p value <0.001, so there was a significant difference between knowledge scores before and after being given education using booklets. The limitations of this study lie in the relatively small number of respondents, namely 30 people, and the characteristics of respondents who were not all pregnant or breastfeeding mothers. In addition, the study focused on changes in knowledge so it cannot describe changes in attitudes and behavior regarding exclusive breastfeeding directly.

Practically, the research results indicate that booklets can be utilized as a health promotion tool at the primary healthcare level because they deliver information on exclusive breastfeeding systematically and can be reused by the target audience. The use of booklets can be combined with two-way communication through discussions and questions and answers to ensure optimal understanding of the information provided. For future research, it is recommended to involve a larger number of respondents, establish more specific targets, and develop measurements that encompass not only knowledge but also attitudes and behaviors regarding exclusive breastfeeding. Further research can also conduct longer-term evaluations to assess the sustainability of changes following the booklet intervention.

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