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Submission ID

trn:oid::1:3493435109

Submission Date

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File Name

cek_AI_Elya.docx

File Size

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Exclusive Breastfeeding Can Cause Speech Delays In Toddlers In Coastal Areas

	Abstract <i>Speech delay in early childhood is a serious problem that affects communication and cognitive development. One of the factors that influence this is exclusive breastfeeding. The purpose of this study was to determine the relationship between exclusive breastfeeding and speech delay in toddlers in the coastal area of the Lansilowo Community Health Center. This was a quantitative, cross-sectional study. The sample consisted of 62 toddlers aged 24-59 months in the working area of the Lansilowo Health Center, Konawe Kepulauan Regency, in April 2025. Data were collected using questionnaires and analyzed using Fisher's exact test. The results showed that of the 2 children who were exclusively breastfed, 100% did not have speech delays. Furthermore, of the 60 children who were not exclusively breastfed, the majority had speech delays (93.3%). The Fisher's exact test yielded a p-value of 0.008. The conclusion of the study is that there is a relationship between exclusive breastfeeding and speech delay in toddlers.</i> Keyword: Exclusive, Breastfeeding, Speech, Delays, Toddlers
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INTRODUCTION

Speech delay in early childhood refers to a condition in which a child develops speech skills much more slowly than other children of the same gender and age (Amoadu et al., 2024, Jiang, 2020, Shilvia et al., 2025). Untreated speech delay occurs in 40%-60% of children, and these children have a higher risk of experiencing social, emotional, behavioral, and cognitive problems in adulthood (Amalia et al., 2024, Nashirah et al., 2024). One factor that plays an important role in speech development is breastfeeding (every mother is encouraged to meet her baby's nutritional needs by breastfeeding for 0-6 months and continuing until the age of two. One of the effects of not breastfeeding is that it can hinder speech development in toddlers (Askar, 2025, Nurlina, 2025, Handayani et al., 2025).

Based on data from the World Health Organization (WHO), the 2023 Exclusive Breastfeeding presentation through The Global Breastfeeding Scorecard data obtained from 194 countries shows that only 40% of babies are exclusively breastfed, including Indonesia, and only 23 countries have an exclusive breastfeeding rate above 60%, while the WHO itself has a target of at least 50% exclusive breastfeeding by 2025 (WHO, 2024). The exclusive breastfeeding coverage in Indonesia in 2023 is 44.8%. Indonesia's target for exclusive breastfeeding coverage is 80%, but the average coverage is still below the standard for exclusive breastfeeding (Indonesian Ministry of Health, 2023). Exclusive breastfeeding coverage in Southeast Sulawesi in 2023 was 54.7%, which is still far from the Minimum Service Standard (SPM) for exclusive breastfeeding, which is 80% (Indonesian Ministry of Health, 2024). Data obtained from the Konawe Kepulauan District Health Office shows that

exclusive breastfeeding coverage has declined over the past four years: in 2023, exclusive breastfeeding coverage decreased to 37.34%, and in 2024, it decreased further to 36.9% (Konawe Islands District Health Office, 2024). The Lansilowo Community Health Center is one of the working areas of the Konawe Islands District Health Office where exclusive breastfeeding coverage has declined, and exclusive breastfeeding coverage at the Lansilowo Community Health Center is still below the minimum service standard of 54%. Data obtained at the Lansilowo Community Health Center shows that exclusive breastfeeding coverage in 2022 was 44.12%, in 2023 it was 48.15%, and in 2024 it was 54.41%. Based on this data, the prevalence of exclusive breastfeeding is increasing but is still below the minimum service standard target. Additionally, based on interviews with 10 mothers who have toddlers in the health center's service area Lansilowo, 70% of toddlers aged 2-4 years old were found to have speech delays and 80% of them were not exclusively breastfed (Lansilowo Community Health Center, 2024).

Speech disorders in children are a complex issue for both children and parents. Many children with speech disorders experience mental stress, which can have a psychological impact on them, such as feelings of inferiority in social situations and being excluded by their peers. Speech delay is a fairly common problem in children aged 2-5 years. Speech and language delays vary between 1% and 32% in the normal population (Nashirah and Frety, 2024, Siahaan and Sinaga, 2025).

Speech delay is one of the most common causes of developmental disorders in children. This disorder seems to be increasing rapidly. Even normal children without speech disorders need stimulation of their speech and language abilities from birth, and this stimulation can even be done while they are still in the womb (Ayu et al., 2023, Muchtar and Ariani, 2025). Breast milk plays an important role in child development because it contains all the nutrients a baby needs, from hormones, antibodies, and immune factors to antioxidants. Children who are not breastfed experience slightly delayed development compared to those who are. Newborns obtain breast milk through the rooting reflex (smelling reflex), sucking reflex, and swallowing reflex. These breastfeeding reflexes greatly influence the development of a child's speech abilities (Hardinsyah and Supariasa, 2020, Muchtar et al., 2025).

Research conducted by Supu in 2017 found that there were differences in speech development in 2-4-year-old infants who were breastfed and those who were not at the Nur Hidayah Surakarta Early Childhood Education Center, namely that the speech development of

infants who were breastfed was better than that of infants who were not breastfed. Given the significant benefits of breast milk for toddler development, especially in terms of speech development, and the limited research on speech development in toddlers, this prompted the researcher to conduct research on “The Relationship between Exclusive Breastfeeding and Speech Delay in Toddlers in the Coastal Area of the Lansilowo Community Health Center. This study aims to determine whether there is a relationship between exclusive breastfeeding and speech delay in toddlers in the coastal area of the Lansilowo Community Health Center

METHODS

This type of research uses quantitative research, which examines the relationship between dependent and independent variables. The research design is a cross-sectional study. This study was conducted in the working area of the Lansilowo Community Health Center, Konawe Islands Regency, from June 23 to August 7, 2025. The population in this study consisted of all toddlers aged 24-59 months in the working area of the Lansilowo Community Health Center in Konawe Kepulauan Regency in May 2025, totaling 205 individuals. The sample in this study consisted of some infants aged 24-59 months in the working area of the Lansilowo Community Health Center, Konawe Kepulauan Regency, in April 2025, totaling 62 people. The respondents were mothers who had toddlers. The sampling technique used was proportionate stratified random sampling, which is a technique used when the population has members/elements that are not homogeneous and are stratified proportionally (Sugiyono, 2021). The sample was determined based on proportionate stratified random sampling, whereby each class had a sample representative that was taken at random.

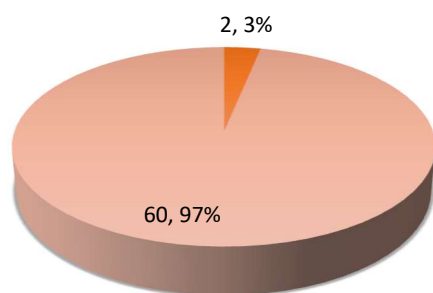
The tools used were writing instruments for filling out questionnaires, photographs for checking speech delays, and cameras for documenting the research. The research instrument used in this study was a questionnaire as a tool for collecting data. The questionnaire used was the same one used in previous studies, namely Naari's (2023) study on exclusive breastfeeding and Wahyuni's (2021) study on speech development (speech delay). Data analysis of the relationship between dependent and independent variables used the Chi-Square test using IBM SPSS version 24. However, if the Expected Count value was below 5 (<5), the Fisher Exact test was used.

RESULTS

Table 1 Table 4.1 Distribution of Sample Characteristics at the Lansilowo Community Health Center, Konawe Islands Regency (n=62)

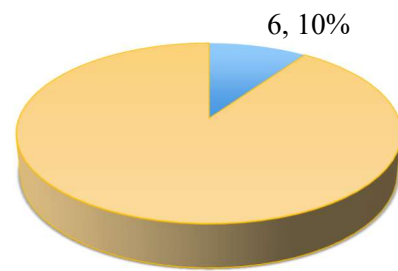
Sample Characteristics	n	%
Maternal Age (Years)		
20-29	31	50,0
30-39	25	40,3
40-49	6	9,7
Mean (min-max)	32 (22-45)	
Toddler Age (Months)		
24-35	27	43,6
36-47	18	29,0
48-59	17	27,4
Mean (min-max)	39 (25-56)	
Gender		
Male	34	54,8
Famale	28	45,2

Table 1 shows that of the 62 samples, based on age characteristics, the majority of mothers 31 people (50.0%) were aged between 20-29 years. Furthermore, the majority of toddlers were aged 24-35 months, 27 people (43.6%), and the majority of toddlers were male, 34 people (54.8%).



■ Exclusive breastfeeding
■ Not Exclusive Breastfeeding

Picture. 1 Distribution of Exclusive breastfeeding



■ Not late (Normal) ■ Late (Abnormal)

Picture 2. Distribution of Speech Delay

Picture 1 and 2 shows that of the 62 samples, in terms of exclusive breastfeeding, most were not exclusively breastfed, namely 60 people (96.8%), while the rest were exclusively breastfed, namely 2 people (3.2%). Then, based on speech delay, the majority had speech delay (abnormal), namely 56 people (90.3%), and the rest did not have speech delay (normal), namely 6 people (9.7%).

Table 2. Relationship between Exclusive Breastfeeding and Speech Delay in Toddlers in the coastal area of Lansilowo Community Health Center (n=62)

Exclusive Breastfeeding	Speech Delay				Total		Fisher's Exact Test
	Not late		Late				
	(Normal)		(Abnormal)		n	%	
	n	%	n	%	n	%	
Exclusive breastfeeding	2	100	0	100	2	100	<i>p value</i> =0,008
Non Exclusive breastfeeding	4	6,7	56	93,3	60	100	
Total	56	90,3	6	9,7	62	100	

Table 2 shows that out of 62 samples, there were 2 people who were exclusively breastfed and 60 people who were not exclusively breastfed. Of the 2 individuals who were exclusively breastfed, 100% did not have delayed speech (normal). Of the 60 individuals who were not exclusively breastfed, the majority had delayed speech (abnormal), totaling 56 individuals (93.3%), while the rest did not have delayed speech (normal), totaling 4 individuals (6.7%).

The results of statistical analysis using Fisher's Exact test at a 95% confidence level yielded a p-value of $0.008 < \alpha (0.05)$, thus accepting the alternative hypothesis, which means that there is a relationship between exclusive breastfeeding and speech delay in toddlers in the coastal area of the Lansilowo Community Health Center

DISCUSSION

The results showed that out of 62 samples, in terms of exclusive breastfeeding, most toddlers did not receive exclusive breastfeeding, namely 96.8%, while only 3.2% received exclusive breastfeeding. This indicates that the coverage of exclusive breastfeeding among respondents is still very low. The low rate of exclusive breastfeeding can be attributed to various factors, including mothers' lack of knowledge about the importance of exclusive breastfeeding, cultural influences or family habits that introduce complementary foods too early, and the strong influence of formula milk promotion. In addition, some mothers may have to return to work, making it difficult to maintain exclusive breastfeeding.

This study is in line with Wahyuni's (2021) research, which found that most toddlers aged 2-4 years were not exclusively breastfed (53.2%). This condition is in line with previous studies stating that factors such as education, knowledge, family support, and the mother's employment greatly influence the success of exclusive breastfeeding. In fact, according to theory, exclusive breastfeeding until the age of 6 months provides great benefits for child growth and development, increases immunity, and reduces the risk of infectious diseases

(Soetjiningsih, 2021). This research is reinforced by the theory that exclusive breastfeeding plays an important role in supporting the development of the child's central nervous system and brain. Not providing exclusive breastfeeding can result in suboptimal brain nutrition, which can impact cognitive development and language skills. In addition, toddlers who are not given exclusive breastfeeding are at greater risk of recurrent infections, malnutrition, and limited stimulation during the breastfeeding process, all of which can contribute to speech delays (Afifah et al., 2022).

The results showed that out of 62 samples, most toddlers experienced speech delay, namely 90.3%, while only 9.7% did not. This finding indicates that the prevalence of speech delay in toddlers in the study area is quite high. This condition can be influenced by various factors, such as lack of stimulation from parents, low verbal interaction within the family, excessive use of gadgets by children, and environmental factors that are not conducive to language development. In addition, exclusive breastfeeding also plays an important role, as breast milk contains optimal nutrients for brain development, which can affect children's speech and language abilities.

This study is in line with the research by Ramdana et al. (2024) that speech delay occurs when children are unable to use words fluently and in accordance with their age. Several factors that can cause speech delay in children include environmental, genetic, and biological factors. Environmental factors such as lack of interaction with adults, lack of verbal stimulation, and lack of attention from parents can contribute to speech delay in early childhood. A family history of speech disorders can also increase the risk of speech delay in children due to genetic factors. In addition, hearing, motor, and brain development disorders are biological factors that can cause speech delay in children.

This study is in line with child development theory, which states that speech delays can occur if children do not receive sufficient stimulation, have suboptimal nutrition, or have certain medical risk factors. Children who are not exclusively breastfed are more prone to developmental delays, including in language development. Thus, the results of this study emphasize the importance of promotional and preventive efforts, such as educating parents about early speech development stimulation, limiting the use of gadgets, and increasing exclusive breastfeeding coverage to support optimal toddler growth and development.

Language ability is an indicator of a child's overall development. Because language ability is sensitive to delays or impairments in other systems, it involves cognitive, motor, psychological, emotional, and environmental abilities. Lack of stimulation can cause speech

and language disorders, and these disorders can be permanent. Language ability is a combination of all systems of child development. Language ability involves motor, psychological, emotional, and behavioral skills (Soofi dkk., 2024).

The results of this study show that out of 62 samples, there were 2 toddlers who were exclusively breastfed, and all of them (100%) had normal speech development. This shows that exclusive breastfeeding has the potential to have a positive effect on children's speech development. Exclusive breastfeeding contains important nutrients such as DHA, AA, taurine, and choline, which play a major role in brain development and nerve cell formation, thereby supporting toddlers' speech and language abilities. Furthermore, of the 60 toddlers who did not receive exclusive breastfeeding, the majority experienced speech delays (abnormal) at 93.3%, and only 6.7% had normal speech development. This shows that not providing exclusive breastfeeding is closely related to a high risk of speech delays in toddlers.

The results of statistical analysis using Fisher's Exact test at a 95% confidence level obtained a $p\text{-value} = 0.008 < \alpha (0.05)$, so the alternative hypothesis was accepted. This shows that there is a significant relationship between exclusive breastfeeding and speech delay in toddlers in the coastal area of the Lansilowo Community Health Center. This finding reinforces that exclusive breastfeeding is not only beneficial in meeting nutritional needs and increasing immunity, but also plays an important role in children's brain development and language skills. This study is in line with a previous study by Wahyuni (2021), which obtained a $p\text{-value}$ of 0.001, indicating a relationship between exclusive breastfeeding and speech development in toddlers aged 2-4 years in the working area of the Poasia Health Center in Kendari City. This study is also consistent with the research by Ayu et al. (2023), which found a significant relationship between exclusive breastfeeding and speech delay. Children who are not exclusively breastfed tend to be at greater risk of developmental delays, including in speech. Thus, these results emphasize the importance of increasing exclusive breastfeeding coverage in the community, particularly through education for mothers and families, as well as support from health facilities so that toddlers' physical and psychological development can be achieved optimally.

The results of this study are reinforced by the theory proposed by Afifah et al. (2022) that breast milk contains essential nutrients such as DHA, AA, taurine, and choline, which contribute to the development of brain nerve cells, which in turn affect speech ability. In addition, the breastfeeding process also increases emotional closeness and verbal interaction between mother and child, which can stimulate early language development (Afifah et al.,

2022). Language development disorders in children can be caused by various factors, namely genetic factors, hearing disorders, low intelligence, lack of interaction between children and their environment, delayed maturation, and family factors. In addition to speech disorders, it can also be caused by physical abnormalities such as cleft lip and cerebral palsy. Stuttering can also occur due to low intelligence, lack of interaction between the child and their environment, delayed maturation, and family factors. Furthermore, this disorder is also one of the language development disorders that can be caused by pressure from parents for their children to speak clearly (Soetjiningsih, 2021).

CONCLUSIONS

The conclusion of this study is that there is a relationship between exclusive breastfeeding and speech delay in toddlers in the coastal area of the Lansilowo Community Health Center with a p-value of 0.004. Specifically, the conclusions of this study are Exclusive breastfeeding among toddlers in the coastal area of the Lansilowo Community Health Center is largely not exclusive, at 96.8%. Speech delay among toddlers in the coastal area of the Lansilowo Community Health Center is 10.3%.

Recommendations for the Lansilowo Community Health Center, The community health center needs to strengthen its outreach program for pregnant and breastfeeding mothers on the importance of exclusive breastfeeding for child growth and development, including its role in preventing speech delay. Education can be provided through classes for pregnant women, integrated health service posts (posyandu), and home visits. For mothers of toddlers, It is necessary to interact frequently, engage in conversation, tell stories, sing songs, and read books to stimulate children's language development from an early age and for future researchers Medical records, or infant growth and development records should be used to minimize memory bias in determining exclusive breastfeeding status and analyzing other factors that may influence speech delay, such as history of prematurity, nutritional status, exposure to gadgets, stimulation at home, mother's education and employment level, and history of hearing impairment, which should also be included as variables.

We would like to express our deepest gratitude to the Karya Kesehatan College of Health Sciences and the Directorate General of Research and Development of the Ministry of Higher Education, Science and Technology for facilitating and supporting the completion of this article.