

Exclusive Breastfeeding Promotion on Young Breastfeed Mother

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Abstract

Background: Infants receiving exclusive breastfeeding have a lower risk of excessive weight or obesity and a lower risk of long-term diseases. The success of breastfeeding is influenced by the mother's readiness, both physically and mentally. In DKI Jakarta, according to SSGI, the percentage of exclusive breastfeeding coverage is 45.9%. The highest coverage of exclusive breastfeeding in the DKI Jakarta Province is in South Jakarta at 79.16%, while the lowest is in East Jakarta at 47.25%.

Purpose: This research aims to analyze the need for exclusive breastfeeding education in among breastfeeding mother

Method: This research used a qualitative method with a phenomenological approach. The research design involves in-depth interviews to gather further information about the knowledge of mothers in providing exclusive breastfeeding, their attitudes, and family support for the breastfeeding process.

Results: Informants have knowledge about exclusive breastfeeding, but most informants do not know until how many months exclusive breastfeeding should be given. The informants' knowledge about the benefits of colostrum is very limited, indicating a need for deeper education on colostrum and exclusive breastfeeding knowledge.

Conclusion: The lack of knowledge among mothers about exclusive breastfeeding, and most breastfeeding mothers face common challenges during the breastfeeding process.

Keywords: breastfeed mother, exclusive breastfeeding, mother knowledge.

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Introduction

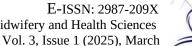
Breast milk 'Air Susu Ibu' (ASI) is the best first food for babies that is natural. ASI contains various nutrients that are needed when babies grow and develop. The nutrients in ASI are needed by babies to grow and develop optimally. The high risk of infant mortality can be caused by poor nutritional status that is not given exclusive ASI, which has an impact on the health and survival of babies. Low ASI intake causes the baby's nutritional needs to become unbalanced. The imbalance in fulfilling nutrition in babies will have a negative impact on the quality of human resources which can be seen from the inhibition of optimal baby growth.

Exclusive breastfeeding for 0-6 months has a lot of benefits for babies up to adulthood. Babies who receive exclusive breastfeeding have a lower risk of being overweight or obese, and a lower risk of developing long-term diseases.³ By giving exclusive breastfeeding to babies in the first hour after birth and skin-to-skin contact between mother and baby are important factors in the early stages of breastfeeding, which keeps the baby warm and the baby gets colostrum. Breastfeeding not only has long-term and short-term health benefits for babies and mothers, but also has economic and ecological benefits. Breastfeeding has been recognized as the best process for supplying ideal nutrition for optimal growth and development of babies.⁴

Breastfeeding has health benefits for both mother and baby in both the short and long term. Studies have shown that breastfeeding protects mothers from infectious diseases in infants, obesity in childhood and adulthood, and breast and ovarian cancers. Breastfeeding also supports mothers and children to be closer to each other and reduces the cost of medical care for society. Exclusive breastfeeding for six months is the best choice for infant feeding. The risk of childhood obesity is associated with early introduction before 4 months of age.⁵

The success of breastfeeding is influenced by the mother's readiness, both physically and mentally. Basically, the mother's readiness to give birth and breastfeed is greatly influenced by the mother's knowledge of the benefits of breast milk.⁶ This is in accordance with the Thought and Feeling Theory put forward by WHO that what causes a person to behave in a certain way is due to two main reasons, namely thoughts and

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feelings consisting of knowledge, perceptions, attitudes, beliefs, important people as references, resources and culture. WHO and UNICEF provide steps to start and achieve exclusive breastfeeding, namely breastfeeding the baby immediately after birth.8 Exclusive breastfeeding means breast milk without other food or drink, even just water. There are two breastfeeding methods, namely the unscheduled breastfeeding method (on-demand), following the baby's needs whenever he feels hungry (breastfeeding ondemand). Breastfeeding mothers can use a breast pump or the hand-expressing method to express breast milk.9

Knowledge can occur after someone senses a particular object. When a mother has little knowledge about the benefits of breast milk, especially related to the health of the baby, the mother is more susceptible to being influenced by information or pressure from various sources that encourage the use of formula milk.² Extensive knowledge indicates how easy or difficult it is for the mother to understand information about exclusive breastfeeding. The mother's knowledge and positive attitude play a key role in the process of exclusive breastfeeding practices.

It is important for mothers to have knowledge related to breastfeeding. This is influenced by factors of education, work, and knowledge possessed by the mother. 10 Knowledge and attitudes can be used to estimate the mother's desire to provide nutrition to the baby, caused by breastfeeding behavior related to lack of knowledge, trust or understanding and the wrong attitude of a mother regarding breastfeeding can be a factor for the mother not to provide exclusive breastfeeding to her baby. 11 The higher the education of a mother, the broader the knowledge and insight. In relation to exclusive breastfeeding, if the mother has broad insight, then the knowledge of exclusive breastfeeding for babies will be better. From the results of a preliminary study that has been conducted by interviewing one of the nurses in the postpartum polyclinic, it can be concluded that low maternal education affects knowledge and attitudes in providing exclusive breastfeeding, and most mothers who have just breastfed do not know about it.

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Method

1. Research design

This study used a qualitative method by using a phenomenological approach. This research design conducted in-depth interviews to gather further information on mothers' knowledge and attitudes in providing exclusive breastfeeding and family support for the breastfeeding process. This can provide implicit information on knowledge, attitudes, family support, and educational needs required by mothers providing exclusive breastfeeding.

2. Setting and samples

The sampling technique in this study was purposive sampling. This study involved 37 young mothers breastfeeding at the Pasar Rebo Community Health Center who met the inclusion and exclusion criteria as follows: inclusion criteria 1) Mothers who are breastfeeding babies aged 0-6 months; 2) Mothers who have just given birth to their first child; 3) Mothers who have given birth to their first child who are currently undergoing check-ups and immunizations at the Pasar Rebo Community Health Center; 4) Young breastfeeding mothers aged 18-26 years; exclusion criteria 1) Mothers who have previous breastfeeding experience; 2) Mothers who are checking up at the Pasar Rebo Community Health Center but are not the first-born. The time for this research is from August 2023 to January 2024.

3. Measurement and data collection

Research instruments are methods or tools to collect data in research work. Questionnaire with checklist method functions as a measuring tool in this research. The research instrument to measure the influence of bibliotherapy on preschool children was conducted before and after treatment with the bibliotherapy method. The questionnaire used in this research is a questionnaire designed by the researcher himself. This validity test was conducted on 20 respondents of pre-school children in the Tanjung Barat area of Jakarta Selatan. Based on results the validity and reliability test in this research, all valid statements are proven by significance values greater than 0.468 and reliability value was 0.952. The researcher conducted a pre and post-test to find out the ability to prevent dental caries in preschool children by filling questionnaire about children's ability to brush their teeth as many as 11 items



statement. If the respondent answers "yes" and "true" gets a score of 1, if the respondent answers "no" and "false" gets a score of 0.

4. Data analysis;

Qualitative data analysis includes:

1) Data Reduction

Summarizing, selecting the main points, and focusing on the important things, looking for themes from appropriate patterns. Reduced data will provide a clear picture and make it easier for researchers to conduct further data collection.

2) Data Display

After the data is reduced, the next stage is to present the data or display the data. In qualitative research, data presentation can be done in the form of brief descriptions, charts, relationships between categories, flowcharts, and the like.

3) Drawing Conclusions

Drawing conclusions is the final action after displaying the data. The initial conclusions made are only temporary and will change if strong evidence is found in the next data collection stage. However, if the conclusions made in the early stages are supported by valid and consistent evidence during the data collection process, then the conclusions made become credible and trustworthy.

Results

Based on data analysis in this study, the following results are known:

Table 1 Characteristics of Participants

Informan Code	Age (y.o)	Educational Background	Occupation
If 1	25	Senior High School	Housewife
If 2	26	Bachelor	Housewife
If 3	24	Senior High School	Housewife
If 4	20	Senior High School	Housewife
If 5	23	Senior High School	Housewife
If 6	22	Senior High School	Housewife
If 7	21	Senior High School	Housewife
If 8	22	Senior High School	Employee
If 9	26	Senior High School	Employee
If 10	18	Senior High School	Housewife

Notes. y.o. = years old.



Based on Table 1, characteristic of respondents based on educational background shows that most of the respondents are senior high school, namely 9 respondents and most of the respondents' occupations are a housewife as many as 8 respondents.

There are four themes that describe the phenomenon of young mothers' knowledge in the process of providing exclusive breastfeeding to babies aged 0-6 months as shown in Figure 1.

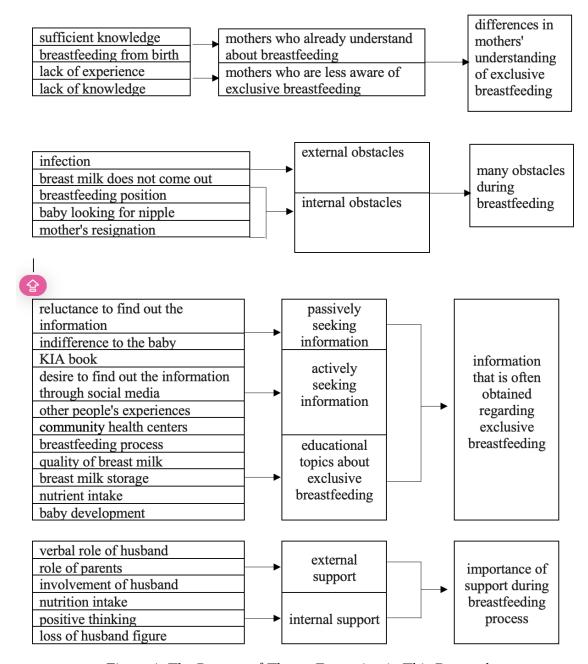


Figure 1. The Process of Theme Formation in This Research

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1. There are differences in mothers' understanding of exclusive breastfeeding

Lack of maternal knowledge about exclusive breastfeeding can be caused by maternal

education and family support. Mothers who have extensive knowledge will implement

exclusive breastfeeding for their babies from birth to 6 months of age. Possible causes

of lack of maternal knowledge about exclusive breastfeeding are formed from 1 sub-

theme, namely Differences in Mothers' Understanding of Exclusive Breastfeeding.

There are 2 informants who have sufficient knowledge about exclusive breastfeeding, as

stated by:

"First breastfeeding at 6 months" (If 5)

"Direct breastfeeding for 2 years, without mixing it with other formulas"

(If 9)

Meanwhile, other complaints said they did not really understand exclusive

breastfeeding. As stated by:

"No, because it's the first time. Hmm so I don't really understand" (If 4)

"Mmm, I was told that breastfeed baby until the age of 2 years" (If 1)

2. There are many obstacles during breastfeeding

Obstacles that often occur during the breastfeeding process come from incorrect

breastfeeding placement, which can cause swelling, abrasions in the nipple area and can

cause fever when the mother is breastfeeding. In addition, obstacles that occur in

breastfeeding mothers are that the baby does not want to breastfeed directly so that a

breast pump must be used.

As stated by:

"Breast milk is dry, at the beginning after giving birth. Oh yes, it is sore, because breast

milk is dry, the baby often sucks on the nipple, so that makes the nipple sore" (If 2).

"If now the child has difficulty breastfeeding directly, so it becomes a bottle. So, it is

pumped, so it is difficult for him to breastfeed directly, he doesn't want to" (If 9).

In addition, there are 2 informants who said that breastfeeding can cause sore and

swollen nipples, which can cause fever, dizziness and chills. as stated by:

"Fever, dizziness, chills" (If 4)

"Mmm sore nipples, hmm swollen, that's all" (If 7)

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3. The information that is often obtained regarding exclusive breastfeeding

There are several informants who seek information through social media or books about exclusive breastfeeding or the correct way to breastfeed, but there is one informant who has never sought information about exclusive breastfeeding. Seeking information is not only from social media, but can be done by attending several counseling sessions about exclusive breastfeeding held at health centers or around the environment. In addition, informants at the Pasar Rebo Community Health Center need education that is currently needed by breastfeeding mothers, namely the correct way to breastfeed, if the correct way to breastfeed is the possibility of sore and swollen nipples is very small. Then the food intake for mothers so that breast milk remains smooth and abundant, food intake for breastfeeding mothers is very important to pay attention to because the food consumed by the mother affects the health and nutrition received by the baby through breast milk (ASI) and how to store expressed breast milk.

In addition, informants who actively seek information about exclusive breastfeeding as stated by:

"I don't think so, but yesterday I also searched on TikTok for the correct way to breastfeed, but I couldn't do it either" (If 9)

"Hmmm, yesterday I got it from what my sister said" (If 1)

Other informants said that the information needed during the breastfeeding process is about exclusive breastfeeding, the process of keeping breast milk flowing smoothly, and baby development during breastfeeding. As stated by:

"The right way to breastfeed, adjust the position" (If 2)

"Hmm, if the breast milk comes out in a flood, it's better to store it or throw it away" (If 7)

4. The importance of support during breastfeeding process

Family and husband support in the breastfeeding process is very necessary, because family and husband support can determine a major impact on the success or failure of breastfeeding, husband support can provide positive impacts such as increasing self-confidence and providing high motivation so that mothers can provide exclusive breastfeeding. One possible factor in not providing exclusive breastfeeding is the lack of support from family or husband.

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Internal factors and external factors as stated by:

"Helps stay up late at night, wakes up to give milk to baby" (If 8)

"Yah, yah, support, so that we are what is called enthusiasm to give breast milk to the child" (If 3)

In addition, there are 3 other informants who get internal factors, as stated by:

"Got it. Hmm.. Be enthusiastic. Keep up the enthusiasm, give support. The point is, don't think negatively like that" (If 1).

"No, because I'm also divorced from my husband" (If 10)

"Really support. Nutritious food, attention, and what else. Anything that makes my mood up and also the nutrition is also maintained, vegetables are also looked for like that" (If 5)

Discussion

Basically, the problems obtained regarding mothers' knowledge about exclusive breastfeeding and obstacles during the breastfeeding process, it is known that some mothers need to be given health education about exclusive breastfeeding and the breastfeeding process in order to improve mothers' knowledge in providing breast milk and can solve problems that often occur during the breastfeeding process. The researcher assumes from the results of the research that has been conducted that the failure of mothers in providing exclusive breastfeeding is influenced by the lack of knowledge of mothers about exclusive breastfeeding. Mothers who have extensive knowledge about exclusive breastfeeding will implement exclusive breastfeeding for their babies from birth to six months without being given water or other formula milk. This can happen due to age factors and the mother's experience of breastfeeding from other people regarding exclusive breastfeeding.

An effective way to increase knowledge is to attend counseling or seminars, search for information on social media, and through other media such as booklets, pamphlets, and brochures. Education is one of the processes of providing information to someone so that they understand and increase their knowledge. Effective education needs to be accompanied by the use of media. Media is a useful communication tool to facilitate the provision of information.

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Breast milk is the main source of nutrition for babies during the first six months of life, without being given additional food or replacing it with other drinks, such as formula milk.³ Exclusive breastfeeding is given for 6 months provides health benefits for babies into adulthood. The success of providing exclusive breastfeeding is closely related to several factors that have been explained. Research analysis shows that mothers want to provide exclusive breastfeeding to their babies, but due to several things it becomes non-exclusive because breast milk does not come out when they first give birth, the breasts are sore and swollen so that it can cause the mother to feel unwell, and breast milk production is low.

The effect of exclusive breastfeeding education on the knowledge and attitudes of breastfeeding mothers using booklet media.¹² The results of this study showed that providing this education was effective in improving the ability of breastfeeding mothers in terms of knowledge and attitudes of mothers in breastfeeding with 26 participants and an average pretest result of 50.73% and the results after being given education were 76.38%.¹²

From the results of the research conducted by the researcher, it can be concluded that the role of health workers in the Pasar Rebo Community Health Center Work Area has provided knowledge to breastfeeding mothers who are visiting or giving birth at the Pasar Rebo Community Health Center. As stated by the head of administration, the health center has provided health education about World Breastfeeding Week in collaboration with the local integrated health post, usually carried out simultaneously in each health center and sub-district. The education discusses exclusive breastfeeding. Based on the results of the research that has been conducted, only a few mothers apply health knowledge about exclusive breastfeeding to their babies.

Limitation

During conducting this research, the researcher realizes that there are limitations of the researcher such as: need to conduct qualitative research on multiparous mothers and their closest families.

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Conclusion

The results of the exploration of young mothers' experiences in providing exclusive breastfeeding are differences in mothers' understanding of exclusive breastfeeding, many obstacles during breastfeeding, and information that is often obtained regarding exclusive breastfeeding. Further researchers can conduct research on the experience of understanding multiparous mothers and their families, internal and external obstacles, the need for information, and various kinds of support needed during the breastfeeding process.

Ethical Considerations

This research had an approval from the health research ethics committee.

Acknowledgment

Thanks to all people and institutions who helped in the research.

Conflict of Interest

There is no conflict of interest among authors.

Author Contribution

We encourage authors to provide statements outlining their individual contributions or roles to the manuscript.

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