

EXCLUSIVE BREASTFEEDING: Indonesian Mothers Awareness in Providing Exclusive Breastfeed

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ABSTRACT

The awareness of a mother in giving milk to her child is the main capital. Because then, he will try as much as possible, in order to produce milk. On the other hand, giving milk is an effort of a mother's love for her child, with the hope that her child can live healthy and grow perfectly. Therefore, awareness of giving exclusive breast milk is important. This research was conducted to look at the various factors that influence a mother's awareness of giving exclusive breastfeeding to her baby. The subjects of this study were mothers who were breastfeeding their babies, aged between 1 month to 12 months, in Kampar district, Indonesia. The research method was carried out using descriptive quantitative and test tests Chi-square. The research sample was carried out in a simple random manner with a total of 50 respondents. The results showed that the sensitivity of a mother in giving exclusive breast milk to her baby was greatly influenced by several fundamental factors, especially knowledge. This is a motivation in itself, how can a mother who has a baby try to do various things so that she can provide breast milk naturally. So that there is hope, his child will grow into a healthy child.

Keywords: Breastfeeding, Awareness, Affection, Mothers, Internal Factors

INTRODUCTION

Naturally, a baby gets mother's milk since he is born, and for 6 months he is only given milk, while at 7 months to 2 years he is given complementary food (Susiyanti, 2019). However, sometimes there are several conditions, where a mother cannot give her milk, due to medical or non-medical reasons (Pamuji & Rumah, 2020). With the Health Law No. 36 of 2009, it is clear that a child who has just been born in normal conditions, meaning that he does not require special handling measures, has the right to receive breast milk exclusively (Ardani, 2018). While the criteria for "medical indications" are explained that what is meant by "medical indications" in this provision are the health conditions of the mother which makes it impossible to give breast milk based on medical indications determined by medical personnel. In the Health Law it is explained that exclusive breastfeeding is giving only breast milk for 6 months, and can continue up to 2

(two) years by providing complementary food to breast milk as additional food according to the baby's needs (Sinaga & Siregar , 2020).

World Health Organization recommends that all babies should receive exclusive breastfeeding from birth as early as possible (one hour after the baby is born) until at least the baby is 4 months old and if possible until the baby is 6 months old (Safitri & Citra, 2020). According to World Health Organization, at least 50% of the number of babies under 6 months of age are exclusively breastfed, whereas currently the global percentage of exclusive breastfeeding is 37%. Breastfeeding that is not optimal has an impact on 45% of deaths from neonatal infections, 30% of deaths from diarrhea, and 18% due to respiratory infections in toddlers (Rolita Efriani, et al., 2020).

Breastfeeding is a natural process, but mothers often do not succeed in breastfeeding properly, therefore mothers need help so that the breastfeeding process can be successful (Berutu, 2021). There are many reasons given by mothers, among others, mothers feel that their milk is insufficient or does not come out in the first days of the baby's birth. Actually this is not because mothers do not produce enough milk for their babies, besides that information about good and correct breastfeeding methods has not reached most mothers (SJMJ, et al., 2020).

The main indicator of public health status is the infant mortality rate. Factors related to infant mortality are the nutritional status of the mother at the time of delivery and the nutritional status of the baby itself, which is also indirectly the cause of infant death (Ramli, 2020).

The results of the 2022 Indonesian Demographic Health Survey explain that cases of infant mortality are more influenced by parental malnutrition. Of course, this must be followed up with efforts to accelerate (accelerate) the reduction of maternal and newborn mortality (Astuti, et al., 2020). Based on the results of the 2018 Basic Health Research data, it shows that only 15.3% of babies get exclusive breastfeeding in Indonesia, while the national target for coverage of exclusive breastfeeding is 80% (Adawiyah, et al., 2021).

In Riau Province, the coverage for babies who were exclusively breastfed in 2018 was 45.9%, decreased compared to 2017 (52%), while the target for achieving the 2018 Strategic Plan was 60%. The percentage of babies who were given exclusive milk in 2017 in Kampar Regency was 52%, and in 2018 it was 26% while those who did not get

exclusive milk were 74% of the total babies. This percentage is still far from the IS target (International Standard) which will be achieved in 2019 of 100%.

The number of babies aged 1-6 months based on 10 Puskesmas with the largest number of babies in Kampar Regency in 2018 was at the Tapung I Health Center as many as 555 people and only 8% were exclusively breastfeeding. While the number of babies aged 6-12 months based on 9 villages with the largest number of babies in the Working Area of the Tapung Nursing Health Center is 124 people and only 9% are exclusively breastfeeding.

THEORY

Education

The level of education is a factor that makes a mother aware of the health of her baby, one of which is by giving mother's milk, for at least 6 months (Husaidah, et al., 2020). Parents with a high level of education have broad insights, so they have a further point of view, especially regarding children's health (Sihombing, 2018). Thus, there will be serious efforts to provide the best intake for newborns.

Breastfeeding Knowledge

Knowledge about breastfeeding is one of the basic knowledge for parents, especially those who have babies. It is undeniable that knowledge of breastfeeding is a factor that encourages a mother to be able to produce natural milk for her baby (Hapitria & Padmawati, 2017), so that her baby gets the best and healthiest intake (Septiani, et al., 2017). Furthermore, breast milk is the main food for babies aged one day to 6 months. Whereas babies aged over 6 months to 2 years, they will receive companion intake, as a complement to nutrition, because their bodies are getting bigger, so they need a more diverse intake.

Work

A mother's work can be one of the factors that strengthens awareness of breastfeeding babies with natural mother's milk (Bahriyah, et al., 2017), even though this possibility is small or not significant. However, generally working parents have a higher level of intelligence or knowledge, because someone with a certain profession has more extensive knowledge about many things, one of which is about breastfeeding children with natural breast milk (Sutama, et al., 2020). In several theories explained, someone who works has

more general knowledge, because in work there is an exchange of information, so people will know more general things, one of which is about breastfeeding and child health.

Child Health Information

It is important for parents to always be in touch with the hospital or doctor, so that they get information about how to maintain the health of their children (Syamiyah & Helda, 2018). For example, coming to the nearest puskesmas/clinic/hospital to check the pregnancy and health of the baby, then she will get the latest health information for the baby and herself. Thus, a sense or self-awareness will be born to be able to maintain the health of the child and himself (Windari, et al., 2017), so that he can provide natural milk.

Age

The age factor is often associated with experience. Generally, someone with more age has had or gained experience about an event, so the way they deal with it will be better than someone with a younger age. Likewise in terms of breastfeeding, mothers will be better able to understand and maintain the health of their children, by trying to provide natural milk at the age of 1 day to 6 months.

METHOD

Fundamentally, this research has a survey design with a quantitative approach. Where the research phenomenon is explained through data in the form of numbers obtained through the distribution of questionnaires. This research was conducted in Kampar district, Indonesia. The research respondents were mothers who were breastfeeding their babies, aged 1 month to 12 months. The number of respondents used as a database is 50 people, with a simple random sampling technique.

The collected data were analyzed descriptively and tested Chi-square. This is done to be able to reveal actually, whether there is a connection between certain factors, especially the mothers' internal self towards awareness of breastfeeding naturally. The research instrument is made based on technical operationalization, so that it can produce good research data.

RESULTS

Descriptive Analysis

The results of the univariate test show that the majority of respondents are highly educated as much as 65%, have less knowledge about breastfeeding babies with exclusive breast milk as much as 52%, most are non-formal workers, the majority of respondents are 30 years old, those who receive information and those who do not receive information are the same each 50%, and most of the respondents did not breastfeed exclusively.

This finding explains that awareness of exclusive breastfeeding in the area is very low. Parents tend not to strive for their children under five to be given exclusive milk. This condition is strengthened by an understanding of the child's condition which is fine, even though he is not given exclusive breast milk. In other words, there are no direct health consequences or risks to the child, from not drinking exclusive breast milk, so mothers or parents do not consider the importance of exclusive breastfeeding.

Statistic Test

Based on statistical tests, there is a significant relationship between the respondent's education and exclusive breastfeeding, this is evidenced by a probability value of less than 0.05 ($0.001 < 0.05$). The magnitude of the estimated education of respondents by giving exclusive milk is 2.00. With this it can be concluded that mothers who have low education have twice the chance not to breastfeed exclusively compared to mothers who have higher education.

There is a significant relationship between respondents' knowledge and exclusive breastfeeding, this is evidenced by a probability value of less than 0.05 ($0.000 < 0.05$). The magnitude of the estimated risk of respondents' knowledge by giving exclusive milk is 1.90. With this it can be concluded that mothers who have less knowledge have almost twice the chance not to breastfeed exclusively compared to mothers who have good knowledge.

There is no significant relationship between the respondent's occupation and exclusive breastfeeding, this is evidenced by a probability value greater than 0.05 ($0.558 > 0.05$) and a correlation value of 1.51. There is also no significant relationship between the age of the respondent and exclusive breastfeeding. This is evidenced by the probability value greater than 0.05 ($0.263 > 0.05$). The magnitude of the estimated age of the respondent by giving exclusive milk is 1.87.

Based on statistical tests, there is a significant relationship between information from health workers and exclusive breastfeeding. This is evidenced by the probability value is less than 0.05 ($0.02 < 0.05$). While the magnitude of the estimated information from health workers by giving exclusive milk is 2.33. With this, it can be concluded that mothers who do not receive information from health workers have twice the chance not to breastfeed exclusively compared to mothers who receive information from health workers.

Discussion

Education and Awareness Relations Provide Exclusive Breastfeeding

Test results who squares Information was obtained that there was a significant relationship between the respondent's education factor and exclusive breastfeeding. This could be because education is based on knowledge and awareness through the learning process, so that this behavior is expected to last a long time and be permanent because it is based on awareness. Education is thought to have something to do with breastfeeding mothers in providing exclusive breastfeeding, this is also associated with the level of knowledge of the mother that someone with a higher education will have broader knowledge than a low education level.

Knowledge and Awareness Relations Provide Exclusive Breastfeeding

Test results who squares shows that there is a significant relationship between the knowledge factor of respondents with exclusive breastfeeding. It can be concluded that the knowledge factor is related to exclusive breastfeeding, the lower the knowledge, the lower the awareness to give exclusive breastfeeding to their babies.

Health knowledge will affect behavior as a medium-term outcome (intermediate impact) from health education. Knowledge or cognitive is a very important domain for the formation of one's actions. Furthermore, health behavior will affect the increase in public health indicators as output (outcome) health education.

In the Ten Steps to Successful Breastfeeding, health workers have a role to provide information to pregnant women about the benefits of breastfeeding and its implementation, so that pregnant women have knowledge about exclusive breastfeeding. To provide information, officers need to be given training in terms of knowledge and skills to implement policies to increase breastfeeding.

Employment and Awareness Relations Provide Exclusive Breastfeeding

The results of the correlation test showed that there was no significant relationship between the respondent's occupational factors and exclusive breastfeeding. From the results above it is known, although the majority of respondents are non-formal workers, it is not certain that someone can breastfeed their babies exclusively even though they have more free time compared to formal workers and are not bound to work time, where they should be able to breastfeed their babies exclusively. .

According to Roesli, work is not a reason to stop exclusive breastfeeding for 6 months (Sutama, et al., 2020). With proper knowledge about breastfeeding, equipment for expressing breast milk and a supportive work environment, a working mother can continue to exclusively breastfeed.

Age and Awareness Relations Provide Exclusive Breastfeeding

Based on descriptive analysis, respondents who are around 30 years of age are more likely to not breastfeed exclusively. Based on Testcorrelation shows there is no significant relationship between the respondent's age and exclusive breastfeeding.

From the results above it is known, although the majority of respondents are aged 30 years, it is not yet certain that someone can breastfeed their baby exclusively even though it is known that at that age their reproductive organs are usually mature and psychologically good, where they should be able to breastfeed their baby exclusively.

Information and Awareness Relations Provide Exclusive Breastfeeding

Based on the results of the study, respondents who did not receive information were more likely not to breastfeed exclusively. Based on Testwho squareshowed that there was a significant relationship between information from health workers and exclusive breastfeeding. Breastfeeding in fact, especially when it's exclusively a natural way of feeding. However, they often get wrong information about the benefits of exclusive breastfeeding, about how to breastfeed properly, and what to do if difficulties arise in breastfeeding their babies (Windari, et al., 2017).

CONCLUSION

The results showed that many factors influenced the awareness of mothers in giving exclusive breast milk to their babies. This research was conducted in the regions, which explained that demography is a very dominant factor in children's health awareness,

especially in breastfeeding. The exclusive breastfeeding movement needs to become a national concern by spreading the word about the benefits of exclusive breastfeeding and the risks to the baby, if not given. The results showed that health information was a factor that had a strong correlation with mothers' awareness in giving exclusive breastfeeding.

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