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The Characteristics of Postpartum Mothers to the Success of Breastfeeding in the First 3 Months



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Abstract

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Exclusive breastfeeding plays a major role in reducing the infant mortality rate while the achievement of exclusive breastfeeding in Indonesia is still very low due to various factors. This research aimed to determine the effect of the characteristics of puerperal women to the success of exclusive breastfeeding in the first 3 months. The research design was an analytical survey of an explanatory research approach. The sample of the research was postpartum mothers who had babies aged 3 as many as 90 people who were willing to become respondents. The sample was observed by using a checklist of breastfeeding techniques and breastfeeding success. The data were analyzed using the Chi-Square test and the Mann Withney test. The results of the research showed that there was no significant correlation between age ($\rho = 0.075$), education ($\rho = 0.145$), occupation ($\rho = 0.136$), gravida ($\rho = 0.530$), maternal residence status ($\rho = 0.134$) and the success of breastfeeding ($\rho > 0.05$). So it could be concluded that there was no correlation between maternal characteristics to the breastfeeding success. It is needed to give intensive education to increase the mother's knowledge about exclusive breastfeeding.

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INTRODUCTION

World Health Organization/United Nations Children's Fund (WHO/UNICEF) reported in 2003, the death of baby and infants are related to the lack of food and child (offspring) in 2003). In Indonesia, in 2012, the number of Infant Mortality Rate (IMR) was 34 per 1000 Live Births (LB) and the number of Toddler Mortality Rate (TMR) was 34 per 1000 LB. IMR indicators in Makassar as 2015 was 1,79 per 1000 KH (45 death infants from 25.181 KH) and TMR (57 deaths under-five-year-old of 25.181 KH) (Depkes, 2007; Dinkes Kota Makassar, 2016).

Exclusive breastfeeding is a good source of nutritions for infants, it can increase the baby's intelligence and immune system, also known for increasing the bond of love and affection between the mother and the child to reduce the risk of child neglect (Roesli, 2008).

In Indonesia, it was reported in 2015 that exclusive breastfeeding coverage was only 55.7% of target of 80%. As the coverage of exclusive breastfeeding in South Sulawesi recorded only 38.5% in 2016, down from the 2015 coverage of 71,5%. This analysis proves that the decline in exclusive breastfeeding and does not reach the government's target, even though the benefits of exclusive breastfeeding are very good for the health of infants and mothers. One of the reasons for the decline in exclusive breastfeeding is the role of the lactation counselor (Depkes, 2016; Pusat Data dan Informasi RI, 2017).

The above description shows the low level of exclusive breastfeeding by the mother to the baby. This is caused by the many factors that influence the mother in giving exclusive breastfeeding. Therefore, in an effort to better find out how successful breastfeeding is by mothers in their babies, the researchers tried to discuss it with the title "Effects of Postpartum Mother Characteristics on Breastfeeding Success in the First 3 Months at the Puskesmas Jumpandang Baru in Makassar City.

METHODS

This research was conducted at Puskesmas Jumpandang Baru in the city of Makassar. The research method used an Analytical Survey with Explanatory Research approach or research that aimed to explain the effect of characteristics of nursing mothers on breastfeeding success.

The population was all post-partum mothers in the working area of the Puskesmas Jumpandang

Baru in Makassar City as many as 102 people. The sample was 90 pregnant women chosen purposively, fulfilling the inclusion criteria such as mothers who have a 3-month baby, delivery assisted by health workers and willing to sign an informed consent issued by the Ethics Committee of the Medical Faculty of Hasanuddin University and exclusion criteria such as infants or the mother is seriously ill after delivery.

The data was collected directly using a questionnaire. The data characteristics (age, education, occupation, number of pregnancies, residence status) were measured using a checklist (breastfeeding techniques and breastfeeding success).

The data were processed using SPSS V.16 for windows. To assess the correlation of the sample characteristics with the success of breastfeeding a "Chi-Square and Mann Withney" bivariate analysis was used. Data is presented in tabular and narrative form.

RESULT

Most pregnant women between the ages of 20-35 years old (not at risk) succeeded in breastfeeding by 71.4% and 28.6% did not succeed in breastfeeding while in pregnant women aged > 20 years and d"35 years (at risk) succeeded in breastfeeding by 50% and 50% also failed to breastfeed. Pregnant women with high education managed to breastfeed by 71.4% and 28.6% did not succeed in breastfeeding, while pregnant women with low education amounted to 55.6% succeeded in breastfeeding and 44.4% did not succeed in breastfeeding. 54.8% of working mothers who breastfeed their babies while 45.2% did not succeed in breastfeeding their babies, and 72.9% of mothers who did not work, successfully breastfed their babies while 21.7% failed to breastfeed their babies. There were 64.3% of mothers who became pregnant for the first time successfully breastfeeding their babies and 35.7% did not succeed in breastfeeding their babies. But in multigravida mothers as much as 75% managed to breastfeed and 25% did not succeed in breastfeeding. Mothers who lived independently only with their husbands as much as 70.7% managed to breastfeed and 29.3% failed to breastfeed their babies, while mothers who lived with in-laws as many as 46.7% managed to breastfeed and 53.3% did not succeed in breastfeeding their babies.

Table 1 Frequency Distribution

Mother Category	Exclusive Breastfeeding (%)	Not doing Breastfeeding (%)
Age 20-35 (not at risk)	71.4	28.6
Age 20-35 (at risk)	50	50
High Educated	71.4	28.6
Non Educated	55.6	44.4
Working	54.8	45.2
Not Working	72.9	21.7
First Pregnancy	64.3	35.7
Multigravida	75	25
Living with in-laws	70.7	29.3
Not living with in-laws	46.7	53.3

Source: Primary Data

From the results of the analysis with mann whitney statistical tests on age characteristics ($\rho = 0.075$), education ($\rho = 0.145$) and chi square statistical tests on job characteristics ($\rho = 0.136$), gravida ($\rho = 0.530$) and residence status ($\rho = 0.134$) obtained value $\rho > \alpha 0.05$ in each group, then H_0 is accepted, the characteristics of puerperal women have no effect on increasing breastfeeding success in the first 3 months. It can be concluded that there is no significant effect between the characteristics of puerperal women on breastfeeding success.

DISCUSSION

This research found that all characteristics did not have a significant correlation between age, education, occupation, gravida and residence status on breastfeeding success, which means that there was no significant effect between postpartum maternal characteristics on breastfeeding success.

Age is a variable that is used as an absolute measure of physiological indicators in other words the use of health service facilities will be related to age, where the older has sound physiological characteristics with their own responsibilities (Notoatmodjo, 2003).

Mothers aged 20-35 years are mothers who are not at risk and mothers with age < 20 years and ≥ 35 years are mothers with risk. This research illustrates that both mothers with young and old age do not affect the success of breastfeeding, this is due to the willingness and knowledge possessed by the mother to give milk to her baby. This is not in line with research in Palembang which states that there is a meaningful relationship between age and exclusive breastfeeding (Wadud, 2013).

From the results of the research Kusmiyati et al (2014) about the relationship of knowledge, education and work of mothers with complementary feeding (MP - ASI) to infants in the shoulder community health center malalayang sub-district of Manado. Hail research shows that there is no significant relationship between education and employment of mothers in giving MP-ASI to infants.

Education is an activity or learning process that occurs anywhere, anytime, and by anyone. Someone can be said to learn what if there is a change from not knowing to knowing, from not doing to being able to do something. Based on this understanding it can be interpreted that education is not only obtained at school as formal education but can be obtained anytime and anywhere. This is evidenced from the results of this research, which shows that the number in the group with low education compared to the level of tertiary education is almost not much different. Education can affect a person's level of knowledge, the higher the level of one's education the easier it is to receive information, so the better the knowledge, but someone who has low education is not necessarily low knowledge. Knowledge is not only obtained from formal education but can also be obtained through non-formal education, such as personal experience, the media, the environment and health education, so that someone with higher education can be exposed to the disease and vice versa (Notoatmodjo, 2010).

An action that is based on knowledge will be more lasting than an action that is not based on knowledge, and the person who adopts the act in self will experience a process of consciousness

where the person realizes in the sense of knowing the object (stimulus), namely things about breast milk (ASI), feel attracted to the stimulus, weigh the goodness and lack of knowledge about the importance of breast milk to the baby and herself, a trial in which the subject begins to do something according to the things he knows to breastfeed his baby, adoption where the subject has been behave in accordance with the knowledge that has been obtained (Notoatmodjo, 2007; Febrianty, 2011; Bohari, 2011).

According to researchers work is the daily livelihood of someone to make money to meet their daily needs. Work has a major role in someone taking breastfeeding actions for their baby. The maternal employment status variable is a protective factor, meaning that mothers who do not work will be more supportive in exclusive breastfeeding than working mothers. This is because mothers who do not do work outside the home (IRT) will have more time and opportunity to breastfeed their babies compared to mothers who work outside the home. In addition there are still many mothers who think wrong about exclusive breastfeeding, mothers also feel worried that breastfeeding will change the shape of the breast to be ugly, and fear the body will become fat. For this reason, mothers provide complementary foods for breast milk, because mothers feel that their milk is insufficient for the nutritional needs of their babies so mothers choose formula milk because it is more practical (Roesli, 2008).

Mothers who have had their first pregnancy and those who have a second pregnancy and so on do not affect the success of breastfeeding. This is due to lack of mother's knowledge and motivation. Counseling given during pregnancy cannot increase knowledge, and changes in attitudes and practices of exclusive breastfeeding. Mothers learn more from the experiences of previous children, the experiences of parents and the community as a reference in the practice of breastfeeding for children conceived at the time of the research (Fikawati et al., 2009). World Health Organization quoted by Notoatmodjo (2003) states that a person obtains knowledge from his own experience or one's experience. In addition to the lack of family support, health workers cause the mother to decide to give formula milk, fruit and milk porridge (Hector et al., 2005). Factors that influence the implementation of Early Breastfeeding Initiation

(IMD) and exclusive breastfeeding, especially the factors of attitude, motivation, and knowledge, both attitude, motivation, and knowledge of mothers, and health workers (Alice et al., 2013).

The lives of mothers who live with in-laws or are independently influenced by socio-cultural factors and traditions in the community affect the behavior of mothers in the practice of exclusive breastfeeding for their babies, this is in accordance with Susilawaty's (2005) research, which states there is a close relationship between cultural values and breastfeeding exclusive. The absence of assistance after giving birth by health workers is also a factor in the failure of exclusive breastfeeding, based on observations of new health workers knowing mothers do not exclusively breastfeed when immunizing their babies. American Dietetic Association (2009), states that ongoing support is very important to ensure the success of breastfeeding. (Noer, 2009; Nurafifah, 2007).

Researchers assumed from this research characteristics that greatly affected the attitude of mothers in achieving breastfeeding success was the mother's knowledge of breast, breast milk, IMD to breastfeeding techniques and breastfeeding positions that are good and right. To achieve all of this, education is needed by health workers, namely midwives who act as lactation counselors.

The lack of education in the health care process was one of the causes of the failure of breastfeeding mothers to succeed for 6 months. Good education must be given intensively and continuously from pregnant women to childbirth even during childbirth. The effects of continuing education and counseling could help mothers gain interests, opportunities, emotions and attitudes that influence choice and decision making. Attention and motivation was channeled in education or counseling in the form of home visits or class meetings for mothers to support exclusive breastfeeding and was a good opportunity to share information and individual counseling that makes mothers comfortable and can solve their problems during their childbirth.

The use of appropriate media for the delivery of information also needs to be considered so that the absorption of knowledge can be effective. The communication media that must be used by the counselor is able to provide information that is easily accepted and easily remembered by the mother, thereby encouraging the desire of the mother to know and ultimately to get a better understanding

(Depkes, 2002). According to Notoatmodjo (2003), health education media are based on the principle that the knowledge that exists in every human being is received or captured through the five senses, the more senses are used to receive something, the more and more clear the knowledge gained. Media communication is a very important means to deliver health messages that are able to provide health information in accordance with the level of acceptance (Kholid, 2014). The results of this research also showed that the level of education did not affect the success of breastfeeding, both mothers with low and high education.

From the results of Ambarwati et al's (2013) research on the effect of intensive lactation counseling on exclusive breastfeeding for up to 3 months. The results showed that intensive lactation counseling during prenatal had an effect on increasing knowledge, changing attitudes and increasing the number of mothers giving exclusive breastfeeding until the age of 3 months.

The same research conducted by Imdad et al (2011) on the Effect of Breastfeeding Promotion Interventions on Breastfeeding Rates, With Special Focus On Developing Countries found that the intervention of promoting breastfeeding significantly increased the exclusive breastfeeding especially education in early pregnancy.

This was consistent with research in Ghana which states that the practice of exclusive breastfeeding is higher for mothers who receive lactation counseling compared to mothers who do not get counseling (Aidam et al., 2005).

CONCLUSION

Based on the research that had been done, the researchers concluded that there was no effect of the characteristics of the puerperal mother to the breastfeeding success.

SUGGESTION

It is hoped that health care, especially midwives and lactation counselors, will seek continuous and directed and systematic education for mothers from pregnancy to the puerperium in order to achieve exclusive breastfeeding success and can reduce the infant mortality rate (IMR).

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