

Reflections on the Community Empowerment in Giving Exclusive Breastfeeding

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Abstract

Background: Less than 40 percent of children under the age of six months were given exclusive breastfeeding (WHO, 2015). Therefore, this study will fundamentally analyze qualitatively the community empowerment model related to exclusive breastfeeding so that the target of achieving exclusive breastfeeding can be achieved progressively and effectively. **Method:** The type of research used was qualitative research. The descriptive explorative approach was chosen in accordance with the research objectives of exploring the perspectives, experiences, and expectations of breastfeeding mothers and related parties. The study was conducted in five community health center in Surabaya. Data collection was carried out through indepth interview with breastfeeding mothers. Total respondents was 50 people. The process of data analysis used the nine-step data interpretation method according to Colluizi. **Result:** there were 7 themes and 24 categories. The theme were: miss perception, benefits of breastmilk, support, obstacles, myth, cureent prohram, and expectation. **Discussion:** Good cooperation between family, government, and institutions where mothers work is needed to achieve exclusive breastfeeding. in addition, massive exclusive breastmilk education through social media and advertising is an urgent need.

Key words: Community, Empowerment, Exclusive Breastfeeding

Introduction

Breastfeeding is a mother's behavior that brings many benefits for both mother and baby. Breast milk contains protective substances that can prevent babies from various infectious diseases. Nurmiati and Besral's research results (2008) show that the duration of breastfeeding greatly affects the survival of infants in Indonesia. Infants who are breastfed with a duration of 6 months or more have a survival rate of 33.3 times greater than those who are breastfed for less than 4 months and infants who are breastfed for 4-6 months have a survival rate of 2.6 times better than those who are breastfed for less than 4 month ¹. In addition, Roesli (2007) states that breastfeeding at least up to 6 months reduces the possibility of mothers suffering from breast cancer, uterine cancer, ovarian cancer ². However, the behavior

of exclusive breastfeeding in Indonesia, including in East Java, has not met expectations.

One of the Sustainable Development Goals' targets by 2030 is to reduce neonatal mortality by at least 12 per 1,000 live births and deaths for children under 5 years of age at least 25 per 1,000 live births. This can be achieved by exclusive breastfeeding. Meanwhile, coverage of exclusive breastfeeding in Central Africa was 25%, Latin America and the Caribbean 32%, East Asia 30%, South Asia 47%, and developing countries 46%. Overall, less than 40 percent of children under the age of six months were given exclusive breastfeeding (WHO, 2015). The Ministry of Health Data and Information Center 2017 shows that exclusive breastfeeding in Indonesia is only 35%. In addition, the 2017 Indonesian Health Profile shows that babies who have been exclusively breastfed until the age of six months are 29.5%. Coverage of exclusive breastfeeding in East Java in 2017 was 41.17% (pusdatin, 2017).

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Meanwhile, the low coverage of breastfeeding is driven by the implementation of inadequate regulations even though the rules regarding exclusive breastfeeding have been clearly stated in Law Number 36 of 2009 concerning Health and Government Regulation Number 33 of 2012 concerning Exclusive Breastfeeding. Both of these rules stipulate the obligation to provide exclusive breastfeeding for six months supported by the procurement of lactation facilities in various places. In addition, there is a need for government efforts, cadres of the Maternal and Child Health (MCH), and breastmilk support groups in achieving the national exclusive breastmilk target. Efforts that can be pursued within the scope of community health are community empowerment. Therefore, this study will fundamentally analyze qualitatively the community empowerment model related to exclusive breastfeeding.

Method

The type of research used is qualitative research. The researcher makes a complex picture, examines the words of the detailed report from the viewpoint of the respondent, and conducts a study of the situation experienced (Creswell, 1998: 15). The descriptive explorative approach was chosen in accordance with the research objectives of exploring the perspectives, experiences, and expectations of breastfeeding mothers and related parties towards the community empowerment model.

The study was conducted in five community health center representing East, West, South, North and Central Surabaya. Data collection was carried out through indepth interview with breastfeeding mothers. Total respondents were 55 people.

The process of data analysis used the nine-step data interpretation method according to Colluizi³: 1) Describe the phenomenon under study, 2) Collect a description of the phenomenon through the opinions of participants, 3) Read the entire description of phenomena that have been submitted by participants, 4) Reread the interview transcript and quote meaningful statements, 5) Describe the meaning contained in the statements significant statement, 6) Organizing a collection of meanings that are formulated into groups of themes, 7) writes a complete description, 8) meets the informant to validate the description of the analysis results, 9) Combines

validation data into the description of the results of the analysis.

Results

The results of this study revealed several important things related to models and community empowerment in exclusive breastfeeding. In general, the practice of exclusive breastfeeding experiences many obstacles due to misunderstanding in the community, external factors of mothers that influence decision making to breastfeed, husband's support that is not optimal, exclusive breastfeeding education in the wider community, which is still not massive, and the obstacles encountered by working mothers when they have to leave their children at home. This research got 7 themes and 24 categories.

Some participants perceive that exclusive breastfeeding is milk directly from the mother without understanding the duration of administration. There was a category for reference for giving. In addition, there were four categories presented by participants regarding the benefits of breastmilk that they understand, namely: immunity, intelligence, economics, and emotional attachment. The support felt by the mother came from her husband, parents, and colleagues. Furthermore, the obstacles felt by mother were: role conflict, breast condition, difference perception, and work condition. The current programs were health education and smart mothers class. participants have expectations regarding to succesful breastfeeding, such as: TV commercials, lectures by religious leaders, support for personal devices, include an educational curriculum, and husband's attention in breastfeeding.

Discussion

Inaccurate knowledge regarding the limits of exclusive breastfeeding was found in some of the participants of this study. They understood that exclusive breastfeeding was breast milk given to infants without understanding its duration. So, as long as the mother gives breastmilk even though it is not for six months, it is considered exclusive breastfeeding. This is in line with Wulan's research (2019) that the mother's knowledge is related to her breastfeeding behavior. The mother's opinion about breastfeeding will correlate with the fulfillment of the baby's nutritional needs and nutritional status. Mothers with low knowledge about breast milk

cannot meet the nutritional needs of a balanced baby, one of which is the need for exclusive breastfeeding⁴.

In the other hand, some mothers believe that breastfeeding can increase baby immunity, intelligence, and activity. Furthermore, mothers believe that through the process of breastfeeding, emotional closeness will be built between mother and baby. Another advantage that participants feel is economic issues. They revealed that breastfeeding babies was very helpful for the family's economy because the parents did not need to give formula milk. The results of this study related to children's intelligence were strengthened by research by Kathleen et al, who found that at the age of 5 years, children who were exclusively breastfed had the highest verbal intelligence score while children who were not exclusively breastfed had the lowest score⁵. This was confirmed by Deoni et al's study that exclusive breastfeeding for at least 3 months was associated with increased diffuse myelination in all parts of the brain at 2 years of age, including the brain regions associated with various cognitive and behavioral skills. In addition, there was an increase in overall cognitive abilities and levels of cognitive development, including verbal and non-verbal functioning in children who were breastfed compared to children who received only formula milk⁶.

Some mothers also conveyed the economic benefits their families get by giving breastmilk. They feel more economical because they do not have to spend on milk for their children. This is in line with the results of research by Amistu Kuma (2015) which found that increasing the proportion of children who were breastfed would have saved an estimated \$3.6 billion annually in terms of both direct and indirect costs⁷. Globally, costly diversion occurs due to not breastfeeding. According to the research by Dylan Walters et al (2016) who exploring the cost of not breastfeeding in Southeast Asia, an additional contributor to economic losses is a decrease in cognitive abilities. Estimates arrive at a significant 0.5% loss of gross national income in Thailand⁸.

Participants feel the impact of breastfeeding related to emotional closeness with children. Mothers feel that their children are calmer and more comfortable during the breastfeeding process. This is in accordance with the results of the study by Henrik Norlhot (2020) which shows that the effect of breastfeeding makes

the bond between mother and child more qualified and social emotional development was better⁹. The results of Benjamin G. Gibset al (2018) 's research on infant attachment behavior points found that find that breastfed children are rated as having slightly higher scores on two measures ("warm and cuddly," "cooperative") and lower scores on one measure ("demanding / angry")¹⁰. Babies need a sense of security and comfort to develop their social skills in the future so that good emotional closeness through the process of breastfeeding will help children fulfill their social competences.

The support that mothers feel during the breastfeeding process comes from their husbands, parents, and colleagues. This was inline with Research by Kris Yuet Wan Lok et al (2017) showed that the husband's preference for breastfeeding (aOR = 1.67; 95% CI 1.20, 2.31) were associated with significantly higher odds of intention to exclusively breastfeed¹¹. It was also confirm by research by Shinta Krsitanti et al (2017) positive feedback and social support will likely encourage respondents to provide exclusive breastfeeding¹². In addition, 73% of mothers planned to breastfeed if family and friends recommended breastfeeding¹³.

Mother's occupation factor often made it difficult for some participants to continue providing exclusive breastfeeding. Almost all working mothers leave their children with their parents, either biological mothers or in-laws when they return to work. Meanwhile, the mother's parents suggested giving additional formula milk for reasons of nutritional adequacy. On the other hand, the facility of workplace to support breastfeeding was insufficient. Study from Ray Wagi Basrowi et al (2018) revealed that the breastfeeding decreased significantly when mother return to work and the reason because the mother felt the production of their breastmilk decreased during the distance with their babies. In addition, there was a lack of facility in workplace to support breastfeeding¹⁴. This study also in line with Sylvia et al (2020) that found the working mother felt guilty and worry when they return to work because they think that the breastmilk would be not sufficient for their baby¹⁵. Meanwhile, maternal anxiety can have an impact on reducing breast milk production.

Another obstacle that mothers feel is differences of opinion with their parents or in-laws. Parents or parents-in-law believe that if a baby cries it means that he is thirsty and when the baby's mother tries to give breastmilk and the baby continues to cry, the grand mother will suggest giving additional formula milk because they feel that the breastmilk cannot fulfill the baby's needs. This was also found in the study of Christiana Nsiah-Asamoah et al (2020). The misconceptions revealed included beliefs that breastmilk is watery in nature and does not satisfy infants. In addition, there is also the provision of corn flour mixed with water or fine porridge for consumption by babies in the early days of life¹⁶. The similar perception felt by research's participant that show the perception that foods and other liquids were more nutritious than breast milk¹⁷. Breast condition also became an obstacles among the mothers. The primipara had difficulties to support their babies latched on easily during direct breastfeeding. The mothers showed that it was because of the shape and size of their nipples. So, it made the nipples sore and the breasts swollen because of the engorgement. This condition similar to the research by Jennifer S. C, et al (2019) that revealed the issues about obstacels in breastfeeding process related to breast condition were latch on process, pain, and insufficient breastmilk¹⁸.

Some partisipants had expectation about lecturer from religious leaders about breastfeeding. They believe that it could be increase the positive perception of community and improve breastfeeding support. It was inline with the research by Rekawati et al (2017) showed information that the attitude and behaviour of public figure who support exclusive breastfeeding make easier transactional communication and affect the surrounding community because they are the role of society¹⁹. Indonesian society which is predominantly Muslim has a tendency to follow recommendations from religious leaders. Another hope of the participants is the massive advertisement for exclusive breastfeeding in the media. The results of research by Tuan.T Nyuyen , MD et al (2017) who studied the Television Campaign with Exclusive Breastfeeding showed excellent results related to exposure to breastfeeding campaigns through television media with exclusive breastfeeding²⁰. In addition, the other research show that mother who saw breastfeeding ads on television and heard about breastfeeding on the radio had a positive perception

about breastfeed their children for longterm health with the percentage 94% dan 100% respectively compare to the others¹³.

Some participants complained that they felt pressured by the myths that were believed by their families regarding breastfeeding. They were annoyed by the illogical rules imposed by their parents or extended family. The prohibition to take a nap leaves mothers feeling exhausted from lack of rest after staying up all night to look after the baby. In addition, the prohibition of consuming certain types of food makes them less appetizing for food. This condition same as the research by Istiyaroh (2018) that showed the breastfeeding mothers who followed the myth related to the failure of breastfeeding²¹.

Conclusion

Breastfeeding mothers need support from various parties in the community. The support expected by the mother comes from her husband and parents or in-laws. In addition, support from religious leaders is something that needs to be improved. Working conditions are a challenge in itself to continue providing exclusive breastfeeding for children. In addition, myths that are less favorable for breastfeeding mothers need special attention. Therefore, education related to breastfeeding needs to be given massively through electronic media and social media.

Conflict of Interest: None

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