

## Factors Affecting Exclusive Breastfeeding in The Work Area

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### ABSTRACT

*The future quality of Human Resources (HR) can be improved by the provision of optimally nutritious breast milk (ASI), which boosts the child's immunity and cognitive abilities. Both mom and baby benefit greatly from a period of exclusive breastfeeding throughout the first six months. Women who breastfeed their infants exclusively are still in the minority (80%). There are a total of 673 infants registered at the Pekan Labuhan Health Centre, but only 57 of them are receiving exclusive breastfeeding, which is only a small fraction of the national goal. Predisposing factors, enabling factors, and reinforcing factors all contribute to whether or not a mother chooses to breastfeed exclusively. To determine what factors, affect exclusive breastfeeding in the 315-person catchment area of the Pekan Labuhan Health Centre, this study employs a cross-sectional, analytical survey approach. With the use of the Slovin formula, we were able to collect data from 76 individuals. Using a questionnaire to gather information. Multiple methods of data analysis, including univariate and multivariate were used. All significantly influenced her likelihood of breastfeeding exclusively. There was no difference made by education, upbringing, or social networks. With an  $Exp(B)$  value of 28,794, mother's employment status is the most significant influencer of whether or not a mother gives exclusive breastfeeding compared to mothers who do work. health workers' access to training, employment, positive attitudes, and social support. It is suggested that the District Government implement more frequent counselling and organize a support group for moms to help them maintain exclusive breastfeeding.*

**Keywords:** Exclusive Breastfeeding, Education, Occupation, Attitude, Support of Health Workers

### INTRODUCTION

The future quality of Human Resources (HR) can be improved by the provision of optimally nutritious breast milk (ASI), which boosts the child's immunity and cognitive abilities. For the first six months of a baby's life, only breast milk should be given (this is called exclusive breastfeeding) (Talbert et al., 2020; Hossain et al., 2018) and thereafter supplemental breastfeeding can be used to maintain breastfeeding for up to two more years (Merjaneh et al., 2020; Awaliyah et al., 2019). About 1.5 million infants a year are rescued thanks to exclusive breastfeeding in poor nations. Accordingly, the WHO advises against any other forms of infant nutrition until the baby is at least 6 months old. Infant and toddler health and survival are strongly correlated with breastfeeding practices. Changing maternal behaviour about breastfeeding is a key strategy employed (Villar-Compte et al., 2021; Jefferson et al., 2019) by all countries aiming to reduce their respective Neonatal Mortality Rates to below 12 per 1,000 live births. Third in the second aim of the Sustainable Development Goals (SDGs) through 2030, exclusively breastfeeding infants for the first six months of life to reduce preventable infant and under-five mortality.

Breast milk is the best food for babies because it contains the most suitable nutrients for infant growth (Koletzko et al., 2020; Spaniol et al., 2020) and development and it is hoped that all health workers can inform all mothers who are pregnant or have recently given birth to exclusively breastfeed. This is stipulated in the Decree of the Minister of Health Number 450/MENKES/SK/VI/2004. It's not universally covered. There are different policies in place for supporting breastfeeding mothers. UNICEF's annual statistics illustrates the change. The figure was 39% in 2012 and 40% in 2015. Furthermore, just 32.6% of the 136.7 million babies born

worldwide are exclusively breastfed, according to WHO and UNICEF. The success rate in China is only 28%, while in Tunisia it dropped from 45.6% to 6.2%. In contrast to these two countries, Indonesia's national coverage of exclusive breastfeeding has changed over the past few years: it was 34% in 2009, 33% in 2010, 42% in 2011, and 27% lower in 2012, all relative to the previous year. In addition, the North Sumatra Provincial Health Office reports that in 2013, exclusive breastfeeding coverage was at 41.3% when assessed at the provincial level.

From the time of the pregnancy exam all the way through the end of the exclusive breastfeeding period, health workers and providers of health service facilities are obligated to provide information and education on exclusive breastfeeding to mothers and/or family members of the infant in question (Elfeshaww et al., 2022; Taha et al., 2022). Administrative punishments include warnings (verbal or written) and the potential removal of a health care facility's license if policies are not followed. With the goal of enhancing maternal behaviour in regards to Maternal and Child Health (MCH) at a variety of health facilities, health education or promotion activities on exclusive breastfeeding have become a promotional program for health workers. There could be a number of causes behind the subpar performance. The theory of Laurence W. Green (2009) states that there are three primary influences on health behaviour: 1) Predisposing factors, which include one's knowledge, beliefs, values, attitudes, and abilities; 2) Enabling factors, which include one's access to information sources, breastfeeding facilities, and the competence of health workers; and 3) Social and environmental factors.

The importance of reinforcing elements, such as husband support, friend support, family support, the role of cadres and the role of community leaders Medan's prominence as North Sumatra Province's capital has been on the rise between 2010 and 2014, however the city has fallen short of the nation's 40% growth goal. Mandailing Natal, Karo, Deli Serdang, North Tapanuli, South Nias, West Pakpak, Samosir, Batubara, Padang Lawas, North Labuhan Batu, Sibolga, Padang Sidempuan, and Gunung Sitoli all reached the 40% mark. Furthermore, North Nias Regency and Tanjung Balai City are two examples of locations with achievement levels below 10%. Pekan Labuhan and Nelayan Indah are the two communities that make up the Pekan Labuhan Health Centre. There are 33,788 persons in the service area of Pekan Labuhan Health Center. The vast majority of people there are Muslims and have only completed secondary school. Most of the locals are self-employed, and many work in the fishing industry. The inaugural survey was conducted at the Pekan Labuhan Health Centre, and it found that out of a total of 673 infants, only 57 (8.4%) were exclusively breastfed in 2017. This is far lower than the government's goal of 20%. It can be affected by internal elements like the mother's labour as well as external ones like the community in which she lives.

As a result of their busy schedules, most moms cannot devote their full attention to breastfeeding their infants (Randles 2021; Tomori 2022; Folbre 2022). Mothers' lack of understanding and positive outlook may also be a barrier to exclusive breastfeeding (Dukuzumuremyi et al., 2020). Mothers who have a positive outlook on the benefits of breastfeeding are more likely to give their infants only breast milk until they reach a certain age (Clapton-Caputo et al., 2021). In the meantime, mothers who aren't on board with the concept of exclusive breastfeeding are likely to try to alter their role in lactation by switching to bottle feeding. They might do this for a variety of reasons, including the belief that breast milk is insufficient, concerns about their children becoming overweight, the necessity of working, or social pressure.

Breast milk replacements such as formula milk, oatmeal, bananas, and other solid meals are sometimes given to infants before they are 6 months old, which is problematic from a sociocultural standpoint because it discourages mothers from breastfeeding exclusively. This is consistent with what Purnami said, that prelacteal feeding begins at an early age while waiting for breast milk to come out, and that this practice has been passed down the generations. Women who have recently given birth are more likely to rely on traditions passed down from their parents than on advice from medical professionals. Breastfeeding is a lazy job for mothers (Nurhidayati & Kurniati 2020) since they are self-conscious about their nudeness being on display in public and

there is no designated space for mothers to breastfeed their children in this public facility. Instead of expressing their milk and keeping it in the fridge to offer to their infant whenever they need it, mothers would rather feed their babies from a bottle (Bender 2021; Jan et al., 2018; Safayi et al., 2021). Similarly, since a breast milk pump and bottle would have been cumbersome to bring along, mom chose not to bring either (Abekah-Nkrumah et al., 2020). Another factor is that moms often lack experience and instruction in breast-feeding techniques (Berhanu 2021). Cadres and health workers simply provided mothers with knowledge in the form of pamphlets, posters, and counselling without providing mothers with any opportunities for practice or reevaluation of their abilities.

The mother claimed that her husband was not as encouraging of her decision to breastfeed exclusively because he felt that it was her responsibility to care for their child (Joseph & Earland, 2019; Srisopa & Lucas, 2021; Mchome et al., 2020). He also allegedly failed to provide the mother with the necessary encouragement to breastfeed exclusively and did not provide a healthy diet so that she could pump milk. Although mothers had the support of family, friends, and cadres, it was concluded that the mother's own drive was insufficient to ensure she breastfed her child exclusively. From what has been described, it is clear that a variety of circumstances affect whether or not moms choose to engage in exclusive breastfeeding (Schindler-Ruwisch et al., 2019; Nyoni et al., 2019). For this reason, in an effort to expand the Pekan Labuhan Health Center's exclusive breastfeeding coverage, it is important to study the factors influencing exclusive breastfeeding in the workplace. This study will yield data on exclusive breastfeeding and policy recommendations for the exclusive breastfeeding program.

## METHODS

This research employed an Analytical Survey with a Cross Sectional design. The independent variable and the dependent variable are both measured at the same time in this study design. The Medan neighbourhoods of Pekan Labuhan and Fishermen's Village served as the study's "Work Area" for the Pekan Labuhan Health Centre. There were 315 participants in the study and 76 were randomly selected as the sample. The data was analysed using logistic regression statistical tests for both univariate and multivariate analysis.

## RESULTS

### Univariate analysis

Characteristics of respondents in this study can be seen through age, gender and length of sale.

Table 1.

Frequency distribution based on education, occupation, knowledge, attitude, culture, family support, support for health workers, exclusive breastfeeding.

<b>Education</b>	<b>frequency</b>	<b>percentage (%)</b>
Low	49	64.5
High	27	35.5
<b>Work</b>		
Not working	41	53.9
Working	35	46.1
<b>Knowledge</b>		
Less	42	55.3
Enough	34	44.7
<b>Attitude</b>		
Negative	45	59.2
Positive	31	40.8
<b>Culture</b>		
Influence	39	51.3
Not affect	37	48.7

<b>Family Support</b>		
Support	27	35.5
Not Support	49	64.5
<b>Health Support</b>		
Not Support	26	34.2
Support	50	65.8
<b>Exclusive Breastfeeding</b>		
Not given exclusive breastfeeding	41	53,9
Exclusive breastfeeding	35	46,1
<b>Total</b>	<b>76</b>	<b>100,0</b>

Table 1 shows that out of the total number of respondents, 53.9% are not now employed, whereas 46.1% are. %). There were 45 respondents (59.2%) who had a pessimistic outlook, compared to 31 respondents (40.8%). There are 39 people who place great value on culture (51.3%), whereas 37 people (48.7%) say that culture has no bearing on them. 27 responses (35.5%), whereas 49 respondents (64.5% of the total) did not agree. Twenty-six individuals (34.2%) in the health workers group did not support, while fifty individuals (65.7%) did. Thirty-five people (46.1%) were exclusively breastfed (representing 53.9%).

### Multivariate Analysis

Table 2.  
Multivariate Analysis of Research Variables

<b>Variable</b>	<b>p value</b>	<b>Exp(B)</b>
Education	0,002	0.37
Work	0,002	28.794
Attitude	0,002	0.59
Health Support	0,007	0.084

Table 2 explains how the education variable influences exclusive breastfeeding in the Work Area of the Pekan Labuhan Medan Health Centre; this impact has a significance level of sig. The work variable influences exclusive breastfeeding in the Work Area of the Pekan Labuhan Medan Health Centre with a sig value of  $0.002 < 0.05$  and an Exp (B) value of .037.  $0.001 < 0.05$ , with an Exp (B) of 28,714. There is a significant relationship between the attitude variable and exclusive breastfeeding in the Office Area of the Pekan Labuhan Medan Health Centre. Exp (B) =.059, hence the value is  $0.002 < 0.05$ . In the Work Area of the Pekan Labuhan Medan Health Centre, the exclusive breastfeeding rate is correlated with the Health Worker Support variable at a significance level of. Exp (B) =.084 at a significance level of  $0.002 < 0.05$ . With a regression coefficient (B) of 3.360 and an Exponent (B) of 28.794, the employment status of the mother is the most important factor in determining whether or not the infant would receive any formula at all.

## DISCUSSION

### The Effect of Education on Exclusive Breastfeeding

Based on the data, we know that out of 76 respondents, 27 had greater education by breastfeeding their babies (that's 74.1%), 7 did not breastfeed (24.9%), and 49 had lower education by not breastfeeding. A total of 34 respondents (69.4%) are nursing, with an additional 15 (30.6%) also having breastfed at some point. In the Work Area of the Pekan Labuhan Health Centre in Medan, a link between Education and Exclusive Breastfeeding was found ( $P = 0.000$   $p = 0.05$ ; chi square test). People with more education are more likely to want to learn about exclusive breastfeeding and are better able to absorb and apply new knowledge, both of which contribute to the former group's high level of desire and access to information. When comparing someone with a high degree of education to someone with a low level of education, the higher level of education

is always going to yield better information.

The study found that breastfeeding duration increased after the mothers received breastfeeding instruction. Inversely, the higher a mother's degree of education, the less likely she is to breastfeed her child. A second cause is that mothers with advanced degrees are less likely to stay home with their young children and breastfeed. This is consistent with findings from multivariate testing, which found that higher levels of education were associated with greater rates of exclusive breastfeeding in the Pekan Labuhan Medan Health Centre's Work Area. It has been found that moms with higher levels of education are more likely to engage in exclusive breastfeeding (Exp (B) =.037) than those with lower levels of education. Researchers hypothesized that moms with greater education would seek out information about exclusive breastfeeding because they would be more likely to ask health care providers about the practice and would be able to comprehend any new material presented to them. A person's degree of knowledge improves in direct proportion to his or her educational attainment.

### **The Effect of Work on Exclusive Breastfeeding**

Prasetyono says that working mothers are required to breastfeed exclusively. At now, it is estimated that 70% of moms in the labour force. The prevalence of this problem indicates that many moms are unable to breastfeed their infants entirely. While it is true that expressed breast milk is not a suitable substitute for nursing, this is not a problem if the mother must work. The term "working mother" refers to a mother who works outside the home to provide financial support for her family. Mothers who choose to enter the workforce often do so in order to achieve a sense of self-actualization by using the skills she has acquired and connecting with others who share her interests. The study found that working had an effect on whether or not a mother breastfed her child. Duration of employment has an effect on exclusive breastfeeding since it reduces the number of times infants are breastfed each day.

This is because working moms have less opportunities to nurse their young children. Though mothers should not use the necessity of working as an excuse for not breastfeeding entirely. Supporting this is data from multivariate analyses, which found that mothers who worked in the Pekan Labuhan Health Centre's Work Area were more likely to have their infants breastfed exclusively. Having an Exp (B) value of 28.714 at a significance level of  $0.001 < 0.05$  indicates that stay-at-home mothers are more likely to breastfeed than working mothers. Due to the fact that the demands of employment require more resources than those of other pursuits, such as maintaining a healthy economy and covering rising living expenses.

### **The Effect of Knowledge on Exclusive Breastfeeding**

The study found that "education has an influence on exclusive breastfeeding." There are six tiers of knowledge that make up the cognitive domain: awareness, comprehension, practical application, critical analysis, and reflective evaluation. The study found that most mothers were aware of exclusive breastfeeding but did not practice it themselves. This suggests that most mothers' understanding of exclusive breastfeeding stopped at the level of understanding (the ability to explain, cite examples, draw conclusions, and predict), rather than at the level of application (the ability to use the material learned in actual situations or under actual conditions). Both internal and external influences might have an impact on a person's level of knowledge. Influences from the outside, including the news and entertainment presented in the media. Everyday life is a rich source of information that may be gleaned from data and observations of the world through the medium of communication.

Knowledge can be quickly and significantly increased through exposure to both formal and non-formal educational materials. While studies using multivariate testing have found no correlation between mother's level of education and her likelihood of breastfeeding her baby exclusively, the results of this study suggest that mothers with more education are more likely to breastfeed their babies exclusively than those with less education. Due to the fact that well-informed moms are more likely to breastfeed exclusively, the outcomes of informal maternal education (such as counselling, brochures and information for health staff) play a crucial role in encouraging mothers to do so.

### **The Effect of Attitude on Exclusive Breastfeeding**

The researcher found that one's outlook on exclusive breastfeeding was significant. A person's disposition determines how they'll act. A person's attitude is not an action in and of itself, but rather a state of being that can be influenced by both positive and negative reinforcement. As can be seen from the data above, there is a clear propensity for respondents to breastfeed their new-borns exclusively.

### **The Influence of Culture on Exclusive Breastfeeding**

Women who have strong cultural or religious beliefs are more likely to know and trust information about exclusive breastfeeding, the study's authors hypothesized, while women who are less likely to trust information generally are more likely to put their faith in the opinions of those closest to them without verifying the accuracy of the claims being made. Even well-intentioned mothers may not follow their own advice when it comes to exclusive breastfeeding, since cultural norms and expectations may prevent them from doing so. Babies between the ages of 0 and 6 months old can successfully achieve exclusive breastfeeding if they engage in regular practices that promote this method of feeding.

### **The Effect of Family Support on Exclusive Breastfeeding**

Researchers found that having a supportive spouse made a difference in whether or not mothers breastfed their babies exclusively. According to Abidjulu's findings, husbands' encouragement is a factor in whether or not women in the Tuminting Health Centre, Tuminting District, choose to practice exclusive breastfeeding. The researcher found that having a supportive partner was associated with longer durations of exclusive breastfeeding. The husband is the single most important factor in whether or not a mother is able to nurse her child. Milk-excretion reflex is greatly controlled by the mother's emotional state or feelings, and the husband's role will also determine the ease of this reaction. Other family members, such as mothers or in-laws, also play a significant effect in whether or not exclusive breastfeeding is successful. As a matter of custom and tradition, non-milk foods like bananas can be introduced to infants as early as the month mark.

The researcher found that the level of encouragement from the husband's mother or wife had a bearing on whether or not the baby breastfed exclusively. The ways in which in-laws responded to requests for health information during breastfeeding, guidance, and participation in resolving issues that arose during exclusive breastfeeding, and other forms of assistance, including the provision of nourishing food for breastfeeding mothers, the meeting of breastfeeding mothers' needs, the development of resources for mothers, and the promotion of exclusive breastfeeding. Mothers' exclusive breastfeeding practices can be influenced by parental attitudes and practices, including advice on how to breastfeed, the availability of breastfeeding equipment, and the use of positive reinforcement. There are, however, families that let the mother decide, based on the baby's health, whether she will breastfeed exclusively or supplement with formula so that the child develops more rapidly. The less knowledge, assistance, and healthy food that parents provide to nursing moms, the less likely the mother is to be committed to exclusive breastfeeding. A mother's conviction that she is doing the right thing by breastfeeding her infant exclusively will be bolstered by positive reinforcement.

### **The Effect of Health Worker Support on Exclusive Breastfeeding**

The researcher found that encouragement from healthcare providers led to more exclusive breastfeeding. As a form of response, health workers can provide mothers with information about exclusive breastfeeding, guidance in resolving issues that may arise during this time, high-quality services, home visits to check in on how things are going, assistance with anything they may need while breastfeeding, and a boost in confidence to continue this practice. The outcomes of the multivariate test support this. In the Work Area of the Pekan Labuhan Medan Health Centre, women who receive support from health workers have an impact 0.084 times greater than mothers who do not receive counselling or instruction from health workers, with a sig. 0.002 0.05 and an Exp (B) value of.084.

## CONCLUSION

While health professionals' knowledge, attitudes, and support all have a role in determining whether or not a mother chooses to exclusively breastfeed. To ensure the success of exclusive breastfeeding, it is suggested that the Medan Labuhan District Government establish a peer group or a group of moms who love babies to provide support and guidance between counselling sessions.

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