

Exclusive Breast Feeding Management: Qualitative Study on Working Mothers in Kalibawang District, Kulon Progo, Yogyakarta

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ABSTRACT

Background: Coverage of exclusive breastfeeding in Kalibawang, Kulon Progo, Yogyakarta was 68.8% in mothers (69.8%) in 2015, which mean did not reach intended target set by Health Ministry of 80%. One of the factors that can affect the failure of exclusive breast feeding is the flurry of mother and start working. This study was aimed to investigate the exclusive breast feeding lactation management of qualitative study on working mother.

Subjects and Method: This was a qualitative study, conducted in Yogyakarta, in July-September 2016. A total of 12 mothers with breast feeding and start working and 4 midwives who came from four Posyandu in Kalibawang. The data collected using the in-depth interviews, observation, document, and the data analyzed was using interactive analysis Miles and Huberman.

Results: The result showed that knowledge management of lactation nursing mothers on mother and started working pretty well. Lactation management socialization barriers still prevailing lack of consciousness of mothers against the practice of lactation management because of lack of support from family, while the barriers experienced by mothers and started working in the lactation management do was the lack of opportunity is flushed and the unavailability of facilities in the workplace, as well as the existence of the syndrome of exclusive breastfeeding for less.

Conclusion: The implementation of lactation management on mom and started the work influenced factor, there is cake and family support. Mothers tagline enhanced his motivation for coming to the meeting held by the Clinics in order to be knowledgeable about lactation management can better yet so that the scope of exclusive breast feeding can match target. belonging to the Ministry of health.

Keywords: lactation management, exclusive breastfeeding, working mothers

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BACKGROUND

Breast milk is baby's first, primary and best food since it is natural and contains various nutrient s which are needed in baby's growth and development process. Exclusive breastfeeding is giving baby only breast milk, without any other additional liquid food such as formula milk, orange, honey, tea, plain water, and without any other additional solid food such as banana, papaya, milk porridge, biscuit, rice porridge, steamed porridge. Exclusive breastfeed-

ing is the giving breast milk as early as possible after giving birth, it is given without any schedule, and no other food, even water, up to baby is six months old. Breast milk contains protective substance to improve body immune from diseases. Breast milk does not generates allergy to baby, it has psychological effect, breast milk perfecting baby's growth. Breast milk can reduce dental caries and reduce the incidence of malocclusion

Exclusive breastfeeding is so important that it is projected in the recommendation of World Health Organization which suggests every mother to exclusively breastfeed up to baby is six months old. However only 54.3% babies under six months who are exclusively breastfed.

In Indonesia the nationwide coverage of exclusive breastfeeding is fluctuating during the last four years, based on National Socioeconomic Survey data the coverage of exclusive breastfeeding in 2009 is 34.3%, in 2010 only 33.6% babies in Indonesia are breastfed. The figure increases in 2011 into 42% and based on Indonesia Demography and Health Survey in 2012 the coverage of exclusive breastfeeding is 27%. Meanwhile based on the report of provincial health office 2013, the coverage of exclusive breastfeeding on infants 1-6 months is 54.3%

Kulon Progo Regency is one of the regions in Yogyakarta Special Region with progressing coverage of exclusive breastfeeding from year to year that is 34.7% in 2010, 52.5% in 2011, 58% in 2012, 70.4% in 2013, and increases to 74.1% in 2014. However the coverage of exclusive breastfeeding is still lower compared to the target set by Health Ministry that is 80%.

Various obstacles may arise in exclusive breastfeeding effort. One of the factors that may affect the failure of exclusive breastfeeding is working mothers' activities. The study conducted by Kurniawan shows that 71.03% of working mothers do not exclusively breastfeed their babies. The participation level of female work force is increasing from year to year which is led by the motivation to add to family income.

The increasing participation of work force is not followed by the coverage level of exclusive breastfeeding. For working mothers exclusive breastfeeding is not an easy matter. The study result of Putri states that

most of mothers do not exclusively breastfeed because of their activities who work outside the house. Lactation management knowledge of working mothers is also insufficient since they still do not know how to give pumped breast milk and how to store breast milk properly during working outside the home. Therefore, mothers find it more practical to give formula milk to children while they are left by working mothers. Factors that generate the failure in exclusively breastfeeding on working mothers are the perception that breast milk is insufficient, insufficient lactation management knowledge during working, and no support from the leaders.

Therefore it needs an effort to promote success in breastfeeding for working mothers which starts from pregnancy period, after giving birth, and breastfeeding period. The effort is also called as lactation management implementation. Lactation management implementation needs collaboration from various parties, starts from mother, father, family up to health personnel. Based on the above explanation, the researchers were interested to know how the lactation management on working mothers in Kalibawang Sub-District, Kulon Progo Regency.

SUBJECTS AND METHOD

The study conducted was qualitative study which was carried out in Integrated Healthcare Posts (Posyandu) of Banjararum, Banjarasri, Banjararjo, and Banjaroya Village. Data collection was conducted with in depth interview, observation, and document analysis. The number of informants was 12 breastfeeding mothers who worked and came from four Integrated Healthcare Posts in Kalibawang Sub-district. There are four midwives who were selected as sample of the study, they came from the Integrated

Healthcare Posts that became the location of the study.

RESULT

Lactation Management Socialization

The socialization activity related to lactation management was conducted regularly once in two or three months by Community Health Center (Puskesmas) located in Integrated Healthcare Post or Village Hall. Lactation management socialization was included in pregnancy class to be more effective. Material on socialization activity was related to lactation management as it is included in MCH (Maternal and Child Health) book, it covers among others are pregnancy, giving birth, childbed, and breastfeeding which contains the material on exclusive breastfeeding, lactation management, also immunization.

The Implementation of Lactation Management on Working Mothers

The analysis result on the implementation of lactation management on working mothers was affected by some factors such as maternal motivation, maternal education, maternal attitude, and maternal knowledge. Those factors greatly affected the success of lactation management implementation on working mothers.

Motivation which consisted of maternal commitment to keep giving exclusive breastfeeding to their babies while they were working was already good and would keep breastfeeding up to the babies were at least 2 years old. Family especially the husbands greatly supported in lactation management implementation by giving mothers the opportunity to take a rest when they were exhausted after work and helping preparing pumped and stored breast milk. Health personnel in their surroundings actually already supported, however they were less accurate in giving socialization.

The obstacles found in doing lactation management when mothers should work were insufficient opportunity to pump breast milk in working places since they could not leave their duty, facilities which were less accommodating in working places, and the feeling that their breast milk was not sufficient since they were exhausted. The steps made to anticipate so that the obstacles did not recur were providing accommodating places or lactating room in working places and finishing the duty rapidly/ not postponing duty.

Maternal attitude in breastfeeding baby was conducted as often as possible or according to baby's desire. Breast milk was given both while mothers were working (given pumped breast milk) and while mother was resting (while lying down). Breast milk was still given to babies when mothers were exhausted after work, however there were 2 informants who gave their babies additional milk/formula milk.

Maternal knowledge related to lactation management was obtained from family, internet, midwives, mass media, and coaching from Community Health Center. The expectation to be able to keep breastfeeding while working was given the opportunity to pump the breast milk and accommodated with a room to pump breast milk so that breast milk production would remain in a great amount and fluent.

Obstacles in Socialization of Lactation Management

There was no obstacle found during the implementation of lactation management socialization. However the obstacles occurred during the practice especially from the environment such as less support from family. The obstacle was overcome by doing continuous guiding and counseling, explanation and telling the society to participate in giving exclusive breastfeeding. Steps made to reduce/anticipate so that the obs-

tacles did not recur were collaborating with local society to participate in helping, monitoring, and encouraging exclusive breastfeeding, therefore it is expected that companies that produce formula milk for 0-6 months are closed/ eliminate.

DISCUSSION

Socialization of Lactation Management

Health personnel play an important role in promoting and giving health education to breastfeeding mothers about exclusive breastfeeding. Information provision (socialization) and counseling conducted since pregnancy phase might increase maternal awareness to breastfeed, and continued with post partum meeting with health personnel who support exclusive breastfeeding might significantly increase the accomplishment of breastfeeding mothers compared to health personnel who do not support exclusive breastfeeding.

The role of health personnel is very important and greatly influential since health personnel are parties who have gone through series of special education, it is expected that health personnel have the reliable competence and proficiency to implement the authority in doing health effort that prioritize patients' safety. Health personnel are given the authority to determine medical indication in giving breast milk, which is applied to maters and babies (Government Regulation on Breastfeeding article 7). Health personnel are required to hold on the terms of recommendation stipulated by WHO, professional standard, service standard, and standard operational procedures (Government Regulation on Breastfeeding article 8).

Health personnel are obliged to give information and education to mothers and their family. Information and education provision can be in a form of explanation,

counseling or mentoring. It is isn accordance with the result study which showed that conducted socialization covers various materials related to the importance of exclusive breastfeeding for babies.

The role of explanation/ guiding and counseling about lactation which is conducted by midwives to pregnant women and breastfeeding mothers may increase accomplishment in exclusive breastfeeding. The existence of support for breastfeeding mothers in a form of guidance, consultation, and motivation provision from midwives may help the accomplishment of breastfeeding mothers. Mothers' accomplishment to exclusively breastfeed is either one influenced by support and advice from professional health personnel because the information given is appropriate. One indicator of midwives capability as breastfeeding counselor can be evaluated from their capability to carry out their duties and roles well. A counselor needs good communication skill also good and proper attitude pattern, so that clients will not get offended by sensitive issues such as babies' need for nutrition.

The awareness to promote and socialize exclusive breastfeeding should be supported by midwives' sufficient comprehension on lactation science especially in protecting and helping breastfeeding mothers since supports from midwives possess quite good influence during breastfeeding phase.

The Implementation of Lactation Management on Working Mothers

The result of the study showed that implementation of lactation management on working mothers in Kalibawang sub-district and Kulon Progo regency was quite good. It means that the role of midwives in Kalibawang sub-district in socialization program of lactation management was quite successful which was indicated by the

strong commitment of working mothers to exclusively breastfeed for 6 months and continued up to 2 years. Breastfeeding is not something easy especially for working mothers. Some obstacles in breastfeeding were found in the initial phase of baby birth. Instead the accomplishment of breastfeeding in the future depends on the early breastfeeding phase. Other than maternal and baby's factors, there were a lot of other factors to accomplish breastfeeding such as family, occupational, and environmental support.

To support the success of lactation management, Government of Indonesia support WHO and UNICEF policy that recommend early initiation of breastfeeding as the effort to save the initial life of birth, since early initiation of breastfeeding can save 22% of dying infants before one month old. Breastfeeding in the first one hour of life which is initiated by skin contact between mother and infant is declared as global indicator.

Health Ministry of the Republic of Indonesia through regulation no. 450/Menkes/SKN/2004 invites Indonesia to carry out only breast milk provision for 6 months and can be continued up to the children reach 2 years old of age. Based on the Stipulation Letter of Health Minister that invites and supports exclusive breastfeeding, Kulon Progo has implemented a Regional Regulation No. 2/2015 about exclusive breastfeeding. the regulation is based on the terms of article 5 of Indonesia Governmental regulation No. 33/2012 about Exclusive Breastfeeding. The purpose of the establishment of the regulation is to ensure the fulfillment of infants' rights to obtain breast milk exclusively since they were born up to 6 months by observing every growth and development, giving protection to mothers in exclusively breastfeeding their infants, improving the role

and support of family, society, and government toward exclusive breastfeeding, also improving maternal and child health quality.

The regulation that regulates about the rights of breastfeeding mothers while working is in accordance with Law No. 13/2003 article 83 about Employment that is female employees/ labors whose children are still breastfed should be given the appropriate opportunity to breastfeed their children if it must be conducted during working time. The purpose of the regulation is giving the employees/labors the opportunity to breastfeed if it has to be conducted during working time or time period provided by the company for female employees/labor, or at least giving the opportunity to pump breast milk for female employees who still breastfeed their infants by considering the availability of space/ room which is possible to be used for doing lactation management in accordance with financial condition and capability.

Obstacles of Lactation Management Socialization

The effort to improve the coverage of exclusive breastfeeding is by doing good lactation management. The effort should be supported by husband, family, environment, and health personnel such as midwives. Midwives as one of health personnel who played quite important role in giving support actually have their own obstacles. Basically midwives will optimally conduct socialization of lactation management if there is a collaboration and mutual support among various parties such as client (breastfeeding mothers), midwives as the service providers, family, and community healthcare centers or integrated healthcare posts as the supporter in facilitating the activity.

However, in its practice the socialization of lactation management conducted by

midwives or other health personnel experiences obstacles which is inaccurate target of socialization because those who attend are not the babies' mothers themselves instead their mother or mother in law, so what is conveyed is not delivered. The failure of lactation management on working mother can be overcome by providing facilities that support breastfeeding mothers in their working places and public places, increasing the number of lactation/ breastfeeding motivators and counselors also breastfeeding support groups and developing regulation and monitoring that support breastfeeding accomplishment. In order to make the program successful therefore it needs a collective and integrated commitment of all sectors start from government, society, family, and health personnel (midwives) as the spearhead of healthcare service providers for society, lactation motivators and counselors also breastfeeding support groups. The effort should be adjusted with the role and responsibility of each stakeholder.

Midwives as health personnel should improve more on promotion and socialization of exclusive breastfeeding on breastfeeding mothers especially working mothers, and do not suggest the administration of formula milk as breast milk substitute. It may start from the pregnancy phase (antenatal care). The activity of lactation management socialization may also be conducted by using media in order to improve its coverage. Socialization media on lactation management may be in a form of posters which are posted on the outside wall of community health centers. The posted poster contains information about the correct implementation of lactation management, and also can be in a form of booklet and leaflet which are provided to be taken home by breastfeeding mothers.

Based on the result of the study along with the discussion, the researcher concluded as follow:

1. The implementation of lactation management socialization has been well conducted by midwives of Kalibawang community health center. Participants who joint the socialization activity are pregnant women, breastfeeding mothers, husbands, parents and also cadres.
2. Lactation management on working mothers are pumping breast milk, storing in the refrigerator, and then giving the pumped breast milk by warming it up at first. Obstacles experienced during conducting lactation management on working mother are the lack of opportunity to pump in working place because of duty which cannot be left behind and the occurrence of insufficient breast milk syndrome.
3. The obstacles occur during exclusive breastfeeding practice come from environment both internal and external. The obstacle factor from the internal comes from the breastfeeding mothers themselves such as the existence of insufficient breast milk syndrome, some mothers considered that fussy baby is caused by insufficient breast milk, so it is helped by formula milk. Where as the obstacle factor from the external is the lack support from the family.
4. To overcome the obstacles is by doing explanation and guidance counseling continually, collaborating with cadres, community leaders to participate in monitoring the problems face by breastfeeding mothers, also conveying it to the entire society for participating to encourage exclusive breastfeeding.

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