



Overview of Young Mothers' Readiness in Giving Exclusive Breastfeeding in the Ajibata District, Toba Regency, North Sumatra Province

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Abstract: Mothers have an important role in the development of children's growth and development from an early age. Child development will take place optimally with exclusive breastfeeding from the mother. However, field data shows that young mothers still do not have knowledge and understanding of the importance of exclusive breastfeeding for children. This study aims to determine the readiness of young mothers in exclusive breastfeeding in Ajibata District, Toba Regency, North Sumatra Province. This study used descriptive research with a cross sectional design conducted at the Ajibata Health Center. The research sample used quota sampling which amounted to 30 people with a questionnaire as a research instrument. The results showed that the picture of readiness to provide exclusive breastfeeding in Ajibata District was influenced by the education level of young mothers dominated by high school graduates totaling 23 people and young mothers who were ready to provide exclusive breastfeeding both physically and mentally totaling 23 people.

Keywords: Exclusive breastfeeding; Readiness; Young mothers'

Introduction

Exclusive breastfeeding is defined as giving exclusive breastfeeding as soon as possible after childbirth, without schedule, and without additional food or drink even water until the baby is six months old. It was also the most appropriate food for the baby. All nutrition which is needed by the baby for growth and development is complete in exclusive breastfeeding (Safitri & Puspitasari, 2018). The benefits which are received by the baby if getting exclusive breastfeeding are improving physical strength, improving mental and emotional intelligence, stable and mature intellectually, good social development, getting easy to be digested and absorbed, containing vitamin, fat protein,

carbohydrate, calorie, protection to fight the infection disease, and allergy protection. It is because it contains antibody, stimulate thinking and nerves, improving healthy, and optimal intelligence (Mufdlilah et al., 2017).

Nutritional content of exclusive breastfeeding is very high includes colostrum which rich of antibody and containing the protein which is needed by the body's immune system. Because of that, giving exclusive breastfeeding to the babies can reduce death risk. Colostrum is produced from the first day until the third day after childbirth and physically it is yellow. The fourth until tenth day, it contains immunoglobulin which is rich in fat and calorie. The color of it is white. It also contains absorbent enzymes. Breastfeeding mothers from young age give many positive impacts for the babies and mothers. In breastfeeding, the babies will

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warm so that it can reduce death risk which is caused by hypothermia. Breastfeeding activity which is done by the mothers can reduce morbidity and mortality. It is caused breastfeeding activity will stimulate contraction in uterus which can cause bleeding after childbirth (*postpartum*).

The babies which do not get exclusive breastfeeding will get diarrhea with the risk is 30 times higher rather than the baby which gets it. The other negative impact is death, malnutrition, diabetes, and obesity. Effort to prevent the death and malnutrition for the baby can be done by giving exclusive breastfeeding (Warastuti & Muslim, 2021). The studies that have been done in developing countries have been reduced. The diseases are lower respiratory tract infection, ear infection, diarrhea, otitis media, and urinary tract infection are reduced in the baby who gets exclusive breastfeeding. The benefits of the mothers which give exclusive breastfeeding to the babies can prevent postpartum bleeding, delay pregnancy, speed up the process of uterine contraction, comfortable and cheap, and reduce the risk of breast cancer breast (Akbar & Saleh, 2021).

Healthy and intelligence include the most important factors in building the quality of human resources. Productivity and increasing competitiveness can be a source for superior human resources which support by healthy and optimal intelligence. Great attention must be given in developing and coaching for them which are healthy and intelligence from an early age. They are important asset for the nation in the future. Giving exclusive breastfeeding for the babies is still the best way to improve the quality of human resource in early age. As we know that, it is the best food for the baby (Hakim, 2020).

UNICEF data from 2015–2021 showed that prevalence of exclusive breastfeeding from the whole world by the mothers was 48% (UNICEF, 2023). Central Bureau of statistics (BPS) collected the babies data on age ≤ 6 months old which got exclusive breastfeeding in 2022 in Indonesia was 72.04%, especially in north Sumatra region was 57.17%. Although North Sumatra has exceeded the international average, it was still the lowest prevalence number in giving exclusive breastfeeding in Sumatra Island (BPS, 2023).

Mothers who do not have attitude, knowledge, and understanding about the advantages of exclusive breastfeeding are the huge reason for her to use formula milk. Non – stop big promotion of milk product and easy to give food and drink from the early age is the reason of bad breastfeeding in few communities (Wenas et al., 2012). Low breastfeeding from the mothers can cause some factors which are categorized to characteristic factor, internal factor, and external factor. Characteristic factor includes of age, job, and education. Internal factor is from mothers who include lack of knowledge and

attitude. Meanwhile external factor is lack of family supporting, society, health officer, and government, intensive milk promotion, socio- cultural factor, lack of health service for mother and child (Hanifah et al., 2017). Because of that, it is needed the overview about giving exclusive exclusive breastfeeding by the young mother in Ajibata district, Toba Regency, North Sumatra Province.

Method

The research used descriptive which described the phenomenon which had been found. The design which was used was *cross sectional*. This research was done in Ajibata district, Toba Regency, North Sumatra Province. The population was pregnant mothers sample in < 25 and pregnancy with the first child. The sample which was used was quote sampling. It was 30 people. The variable is the readiness of young mothers in giving exclusive breastfeeding mentally and psychologically. The instrument which was used in this research was questionnaire which was given to the sample. Univariate analysis was used as the readiness of pregnant mother in giving exclusive breastfeeding with descriptive analysis data.

Result and Discussion

The respondents in this research were 30 people. Table 1 showed that the majority of the respondents was 18–25 years old which was in Ajibata health center. Based on the table, it was known that 86.7% of the respondents who was in 18–25 years old. Mothers who were under 18 years old were 4 people. Mothers who had job were 10 people (33.3%), meanwhile 20 people (66.7%) did not have job. The domination of education level in senior high school level was 23 people (76.7%). The respondents who were in Junior high school D3, and D4/S1 were same. They were 2 people (6.7%) and in D1 was 1 person (3.3%).

Table 1. Respondents’ Characteristics

Characteristic	Frequency	Percentage
Age		
< 18 years old	4	13.3
18 - 25 years old	26	86.7
Amount	30	100
Job		
Work	10	33.3
Do not work	20	66.7
Amount	30	100
Education		
Junior High School	2	6.7
Senior High School	23	76.7
D1	1	3.3
D3	2	6.7

Characteristic	Frequency	Percentage
D4/S1	2	6.7
Amount	30	100

Distribution the readiness of the respondents in exclusive breastfeeding.

Table 2. Overview Distribution of Mothers' Psychological Readiness in Giving Exclusive Breastfeeding in Ajibata Health Center

Psychological readiness	Frequency (f)	Percentage (%)
Ready	19	63.3
Not ready	11	36.7
Amount	30	100

Mothers' readiness in giving exclusive breastfeeding to the babies as psychology was showed in table 2. Mothers who were ready in giving exclusive breastfeeding were 19 people (63.3%). The respondents who were not ready were 11 people (36.7%).

Table 3. Overview Distribution of Mothers' Physical Readiness in Giving Exclusive Breastfeeding in Ajibata Health Center

Physical readiness	Frequency (f)	Percentage (%)
Ready	25	83.3
Not ready	5	16.7
Amount	30	100

Mothers who were not ready in giving exclusive breastfeeding with any reason in table 4 were 7 people with percentage 23.3%. For the ready mothers were 23 people with percentage (76.7%).

Characteristic Factor

Age had dominant influence and significance in exclusive breastfeeding by mother and baby (Novita et al., 2022). If someone was more mature, so the way how she thought and worked better (Zulkarnain, 2021). The optimal age for woman in getting pregnant, giving birth, and breastfeeding between 20 - 35 years old was called as healthy reproductive age (Collaborative Group, 2002; Simkin et al., 2016). This thing was caused psychology and reproductive organs have been ready to accept the presence of the baby. This age was appropriate in exclusive breastfeeding with minimum obstacle as physical and mental. The success rate of exclusive breastfeeding by mothers with younger age within a period 6 months is higher than older mother. The mothers who were not productive age (< 20 and > 35 years old) were bigger in giving exclusive breastfeeding rather than the productive one. Productive mother would have probability 3,125 times than unproductive mother (Purnamasari, 2022).

Education had significance relationship in giving exclusive breastfeeding (Fahira, 2021; Khofiyah, 2019; Marifah, 2019). Someone who has high education will have good mindset. She would act rationally to the information that they received, thought, and considered it more to the risk that she got in receiving it. So that, she would be easy to assimilate the information especially about exclusive breastfeeding (Zulkarnain, 2021). They who graduated from high education will be easy to understand and the information that they got rather than they who have lower education. It was also as basic for them to increase their vision, motivation, and the way how they thought in receiving some information, attitude, and behaviour in daily life (Yulianti, 2014). Education had significant impact for them. They also knew as psychologically the advantages of giving exclusive breastfeeding (Zulkarnain, 2021). Education factor impacted to the succesful of the program with probability as much as 41.241 times. It meant the mothers who had high education were better than they who had low education (Rakhmawati & Utami, 2020).

Nutritional status also became significant factor in giving exclusive breastfeeding except the education factor. It also related the nutritional status of mothers before they had pregnant, during pregnant, and during breastfeeding. Every time mothers breastfed, their body fat would be mobilized to produce breastfeeding and the fat would be loss and they would be thin. Mothers who had thin body would give a little nutrition of exclusive breastfeeding rather than the normal one. Mothers' status in breastfeeding, it also implied for the status in pre - pregnancy and during pregnancy (Virgiatusiawati & Dewi, 2019).

Working was the most important thing that needed to be done in supporting ourselves and family. Many women worked when they were in productive age. Because of that, they got difficult to take care for the babies and it caused problems. Women did not inly work in office, but they went to the ricefield when they live in village (Fahira, 2021). It related significantly between working and giving exclusive breastfeeding (Putri, 2022). For working, it had time. It was around 8 hours, and it made mothers got difficulties in doing it. The problem could be solved if the company gave a policy about it (Arifiati, 2017).

Giving exclusive breastfeeding to the babies caused dilemma for working mother. It was caused the holiday was too short rather than giving exclusive breastfeeding. Because of that, they gave formula milk to replace it (Bahriyah et al., 2017). The common reason was they needed to go back for working, so that they would leave their babies at home. Some of them reported that the exclusive breastfeeding production was too low and the baby still cried. Because of that, they gave different food or drink for their babies. Working mothers also had

responsibility for giving exclusive breastfeeding and it could be done by learning even they should leave their babies. They could express exclusive breastfeeding when they had leisure time and kept it in the freezer. Not working mothers could have chance as much 5.67 times bigger than working mothers (Khofiyah, 2019). Meanwhile according to Septiasari (2017), working mother had good knowledge and probability of failure as much 10 times higher in giving exclusive breastfeeding.

Internal Factor

Knowledge was informational stimulation that needed to be paid attention and remembered later. That knowledge was from formal and informal education, conversation, reading, listening to the radio, television, and life experience (Khofiyah, 2019). Mothers' knowledge about how important exclusive breastfeeding for both parties both mothers and babies significantly related (Arifiati, 2017; Zulkarnain, 2021). Pregnancy status, birth experience, and attitude in giving exclusive breastfeeding were influenced significantly. The status which was wanted and birth experience related to the ability in feeling pain, sense of security, feeling, belief, and obstacle which they encountered in doing it (Lailatussu'da et al., 2017).

Mothers who knew how important exclusive breastfeeding had chance 9.42 times to be successful in giving exclusive breastfeeding rather than the mothers who did not know (Khofiyah, 2019). When they had knowledge, they had significant impact. The respondent who had low ability 4.469 times got failure rather than the high ability of the respondents in doing it. Mothers who had enough information about exclusive breastfeeding were more aware about it for themselves and the babies. So that, mothers who knew it would give exclusive breastfeeding for their babies. Low coverage of it was caused by many promotions of formula milk, strong, and regularly so that it would encouraged them to used it as substitute for breastfeeding (Novita et al., 2022).

Mothers were hoped to find more information to add their knowledge and good way in giving exclusive breastfeeding. It also increased the relationship among individuals which could share information together, experience, and support each-others in doing it to the babies (Sari et al., 2020). Mothers' attitude could influence the successful of exclusive breastfeeding program (Fedriani, 2022; Phua et al., 2020; Tseng et al., 2020). The attitude consisted of their own experiences, supporting from important people in their life and their knowledge. Except that, the attitude in breastfeeding depended on the level of mothers' knowledge, psychology, supporting from family, and available facilities for them in deciding the successful of program

(Gizaw et al., 2022; Kehinde et al., 2023; Prasetyo et al., 2020).

External Factor

Development of humans behaviour would influence one of factors which was environment. Humans would depend and affected by the environment and they could not be separated from it. Environment was each component which was around us. It was also one of factors that had positive impact in giving exclusive breastfeeding. It was understood as the condition around someone and had influenced the development individual' attitude or group (Satino & Setyorini, 2014).

Supporting mothers from husband and family as regularly, it impacted significantly in giving exclusive breastfeeding (Arifiati, 2017; Novita et al., 2022; Umami & Margawati, 2018). The important factors in doing it for young mothers were from husband and family which had 72,7 % occasion in doing it (Lailatussu'da et al., 2017). Sulistyowati (2016) stated that psychological supporting from husband and family which understood that exclusive breastfeeding was good enough for mothers so that they would love these babies more.

Lack of supporting from husband would make mothers got lazy in giving exclusive breastfeeding for the babies. The supporting could increase positive impact which could increasing prolactin reflex and ventral reflex (Khofiyah, 2019). Arifiati (2017) stated that fathers were important part in success or failure in giving exclusive breastfeeding. If father supporting in doing it, it would increase 90%. If they did not support it, it would decrease 25% (Royaningsih & Wahyuningsih, 2018).

Health workers also had important role in protecting, increasing, and supporting in giving exclusive breastfeeding as social contributors (Arifiati, 2017; Basrowi et al., 2015; McInnes & Chambers, 2008). By observing and complete the chance in giving exclusive breastfeeding in the office was to make easy in doing it even the mothers worked so that it would be enough (Alianmoghaddam et al., 2018; Pounds et al., 2017; Umami & Margawati, 2018). Education program was needed to make exclusive breastfeeding successful in multidisciplinary collaborating. Regulation in health service sector and social media to promote giving exclusive breastfeeding and supporting practice for all the mothers whether they worked or not (Suciati, 2020).

Conclusion

Exclusive breastfeeding was influenced by some factors such as; characteristic factor, internal factor, and external factor. Overview of young mother's readiness in giving exclusive breastfeeding in the Ajibata district,

toba regency, North Sumatra province were; young mothers characteristic were at age < 18 years old as many as 4 people (13.3%), and at age 18 – 25 years old as many as 26 people (86.7%). Mothers who had job were 10 people (33.3%), meanwhile mothers who did not have job were 20 people (66.7%). There were 23 people (76.7%) of young mother who dominated in Senior High School Level of educational; and in 30 respondents, there were 23 (76.7%) mothers who was ready to give exclusive breastfeeding as physically and mentally.

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In writing this article, the authors do not have any conflict of interest.

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