

Exclusive Breastfeeding Intention of Pregnant Mother in the region of Kebon Jeruk District, West Jakarta Public Health Center

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Abstract

Introduction: The low coverage of exclusive breastfeeding is directly influenced by the weak intention of mothers in providing exclusive breastfeeding since pregnancy.

Objective: The study aimed to determine the factors associated with the intention of exclusive breastfeeding of pregnant women. **Method:** A cross-sectional study was applied in this study. Exclusive breastfeeding intention was measured using the Infant Feeding Intentions (IFI) scale questionnaire. The bivariate analysis examined the relationship between knowledge and attitude towards exclusive breastfeeding and breastfeeding intention.

Results: Most respondents had a relatively high intention of exclusive breastfeeding (62%). More than half of the respondents knew early initiation of breastfeeding (EIBF) and exclusive breastfeeding (60%). Their attitudes toward EIBF and exclusive breastfeeding were also positive (54%). The factors influencing the intention of exclusive breastfeeding for pregnant women at the Kebon Jeruk Community Health Center include gravida, education, knowledge, and attitudes toward EIBF and exclusive breastfeeding. **Recommendation:** Measurement of the intention of exclusive breastfeeding should be carried out since the first trimester of pregnancy to detect the success of exclusive breastfeeding so that promotive and preventive efforts can be carried out from an early age.

Keywords: Breastfeeding mother, pregnant women, intention, exclusive breastfeeding.

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INTRODUCTION

In Indonesia, based on Indonesian Health Profile Data, the province coverage for exclusive breastfeeding declined from 54.3% to 52.3% in 2013-2014 and increased to 55.7% in 2015 (1). One of the profiles whose exclusive breastfeeding coverage exceeded national coverage was the Special Capital Region of Jakarta for 67.1%. However, generally, the coverage of exclusive breastfeeding in Indonesia is still lower than the national target (80%) (2).

The low coverage of exclusive breastfeeding was directly influenced by the common intention of mothers to exclusively breastfeed during the pregnancy (3, 4, 5). The intention is a component that encourages them to do an action (6). Intention to breastfeed exclusively since the pregnancy highly influences the success in exclusive breastfeeding. Mothers with exclusive breastfeeding intentions were three times faster in breastfeeding practice than those who decided to breastfeed their baby after birth (7). Attitudes subjective norms influence the intention and behavior control felt and controlled by covariate variables such as education, occupation, parity, mother's previous experience in breastfeeding, social support, and exclusive breastfeeding exposure from social media (8).

In Indonesia, studies regarding exclusive breastfeeding need to be more explored, mainly using hospital-based and public health center sampling techniques. There are research studies on mothers' anxiety during pregnancy and family support, and it explains the need to research prenatal breastfeeding intention (9 10). The previous study about intention did not explain this method clearly, so it cannot be repeated widely (11, 12).

OBJECTIVE

This study aimed to discover the dominant factors related to the exclusive breastfeeding intention of pregnant women.

METHOD

Design

This study was a quantitative analytical study to analyze the correlation between knowledge on Early Initiation of Breastfeeding (EIBF) and exclusive breastfeeding of pregnant women in Kebon Jeruk West Jakarta Public Health Center. This study used a cross-sectional design conducted from April 2019 to November 2019. This study took place in the work area of Kebon Jeruk Jakarta Barat Public Health Center.

Sample & Sampling Technique

The samples were pregnant women who came to the Public Health Center to check their pregnancy. The samples were selected using the accidental sampling method between June to July 2019. The inclusion criteria of samples selection include: 1) Pregnant women who check up their pregnancy in Public Health Center; 2) mother with healthy condition (not suffering secondary infection) based on doctor examination; 3) aged from 18 to 35 years and 4) agreed to take part in the study.

Ethical consideration

The study site has the highest number of pregnancies for district-level health care centers in the subdistricts of West Jakarta. Ethical approval was granted by the Ethics Committee of the Faculty of Medicine, University of Indonesia (No. 869/UN2.F1/ETHICS/2016).

The instrument for data collection

Exclusive breastfeeding intention was measured using the Infant Feeding Intention (IFI) scale questionnaire. Nommsen-Rivers first developed this IFI scale in the University of California prenatal clinic in Davis Health Service Centre. It had been adapted to different ethnicities and cultures (13, 14, 15, 16). The IFI questionnaire was used through these following steps: 1) Psychometric tests that include questionnaire use permit, forward

and back translation process, evidence-based on content validity by a panel of lactation expert, panelist readability test, validity and reliability test (16, 17, 18, 19); 2) the use of questionnaire in the study.

The IFI questionnaire consists of five questions/items, assessed five-point Likert scale. These items are mother's plan, namely to give formula milk only to their baby; to breastfeed their baby; to breastfeed without giving formula/other food when the baby is one month old; to breastfeed without giving formula/other food when the baby is three months old and to breastfeed without giving formula/other food when the baby is six months old (19).

Scoring for item 1 is assessed from "very much agree" =0, "somewhat agree" =1, "unsure" =2, "somewhat disagree" =3, and "very much disagree" =4. This assessment applies inversely to items 2,3,4, and 5. The total intention score was calculated using the addition formula of (mean score of items 1+2) + (total score of items 3,4 and 5). Thus, the total score ranges from 0 (strong intention for no breastfeeding at all) until 16 (the strong intention to give breastfeeding as the only source of food for babies in the first six months). 31 Furthermore, the intention is categorized based on the mean score that is: 1) Low intention if the intention score is less than the mean score (<mean), and 2) High intention if the intention score is more than or equal to mean score (≥mean). The mean score is due to the normal distribution of data (19).

The control variables were age, education, occupation, parity, previous breastfeeding experience, commercial exposure of formula, breastfeeding exposure on mass and social media, and social support measured by a structured questionnaire.

RESULTS

Characteristic of respondents

The characteristics of respondents in this study comprised age, pregnancy trimester, gravida, parity, and education. Based on the characteristic distribution in Table 1, most of the respondents were 20-34 years old by 86.2% and at the third trimester of pregnancy by 61.7%. Most pregnant women who became the

respondent were classified in primigravida by 73.4%. Meanwhile, more than half of pregnant women (61.7%) have undergone a high level of education for education level.

Table 1. Respondent Characteristics

Variable	n	%
Age		
<20 years old	4	8
20-34 years old	37	74
>35 years old	9	18
Trimester		
Trimester 1	7	14.9
Trimester 2	12	23.4
Trimester 3	31	61.7
Gravida		
Primigravida	37	73.4
Multigravida	13	26.6
Education level		
High Education	31	61.7
Basic Education	19	38.3
Breastfeeding Intention		
Low Intention	19	38.3
High intention	31	61.7
Knowledge of EIBF and exclusive breastfeeding		
Poor	20	40
Good	30	60
Attitude toward EIBF and exclusive breastfeeding		
Positive	22	44
Negative	28	54

Factors influencing exclusive breastfeeding intention of pregnant women

Table 2 explained that mothers with high intention to breastfeed their children since pregnancy were 62% (average score for the intention in this study was 11.0 ± 2.5 SD). From the percentage of mothers with high breastfeeding intention (62.2%), 6.7% of them planned to breastfeed their baby exclusively until the baby was aged-month-old. About 19.5% of mothers planned to breastfeed until the baby was two months old solely. At the same time, 73.8% of them were designed for breastfeeding their baby (until the age of 6 months). Exclusive breastfeeding was defined as a mother's will to breastfeed their baby until the baby is 6 months old (13, 14). In this study, 61.7% of mothers have high exclusive

breastfeeding intention.

Table 2. Factors influencing exclusive breastfeeding intention of pregnant women

Variable	Low Intention		High Intention	
	n	%	n	%
Age				
<20 years old	1	2	4	8
20-34 years old	15	30	22	44
>35 years old	3	6	6	12
Trimester				
Trimester 1	6	12	1	2
Trimester 2	7	14	5	10
Trimester 3	6	12	25	50
Gravida				
Primigravida	27	54	10	20
Multigravida	2	4	11	22
Education Level				
Low	15	30	4	8
High	4	8	27	54
Knowledge				
Poor	15	30	5	10
Good	4	8	26	52
Attitude				
Poor	12	24	10	20
Good	6	12	32	64

DISCUSSION

Mothers who had previous experience with breastfeeding in this research tended to have better intention on exclusive breastfeeding than those with no experience. It is indicated that multigravida mothers tended to have a higher intention to breastfeed. Mothers who were having second or more pregnancies have had, both or good, the experience of breastfeeding, so that in the upcoming pregnancy, they prepared it better. Similar to the study of Mortazavi et al. (16), mothers who did not have previous experience of breastfeeding stated that they are less confident in exclusively breastfeeding than mothers who have previous breastfeeding experience. However, this research did not find the association between maternal age with the intention to exclusive breastfeeding, while some studies showed that older maternal age correlated positively with breastfeeding intention (20, 21). The mother's education level was found to be significantly related to

mothers' exclusive breastfeeding intention. Mothers with a high level of education also tended to have a high intention to give exclusive breastfeeding. The high level of education gave more information to mothers, and mothers may understand it well, which may help mothers prepare for the breastfeeding process since pregnancy (9, 22). This finding is also relevant to another result of the research. It shows that mothers in the last trimester tended to have higher breastfeeding intention to give exclusive breastfeeding than those still in the earlier trimester, even though it is not statistically significant. Mothers in the last trimester of pregnancy may have more frequent pregnancy classes during the ANC. That pregnancy education can strengthen exclusive breastfeeding intention (10, 23, 24). Mothers with good knowledge and attitude toward exclusive breastfeeding were proven to have a higher intention to give exclusive breastfeeding than those with poor knowledge and attitude toward exclusive breastfeeding. The result in this study is significant ($P=0.000$). However, it is still lower than a previous study in North Barito, Central Borneo, Indonesia, showing that 70% of mothers had high intention to give exclusive breastfeeding. They have attended pregnancy classes and generally have good knowledge of breastfeeding (11).

CONCLUSION

Most of the respondents had quite a high intention to do exclusive breastfeeding. More than half of the respondents have good knowledge and attitudes toward EIBF and exclusive breastfeeding. Factors that influenced exclusive breastfeeding intention of pregnant women in Kebon Jeruk Public Health Center involved gravida, education level, knowledge, and attitudes on EIBF and exclusive breastfeeding.

The exclusive breastfeeding intention is best measured since the first trimester of pregnancy as early detection of the success of exclusive breastfeeding, so promotive and preventive efforts can be done from the very beginning. Proper education related to exclusive breastfeeding performed by health

workers can be integrated with antenatal care services in hospitals (such as seminars, pregnancy classes, and lactation management training) and social media. It is also necessary to have a policy that will support working moms regarding exclusive breastfeeding. Further, it is needed to conduct a longitudinal study to prove that intention is an exclusive breastfeeding indicator by measuring intention from pregnancy until 6 months of exclusive breastfeeding.

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