

**Relationship Between Breastfeeding Self Efficacy and Exclusive Breastfeeding at  
Posyandu Working Area of Pacarkeling Puskesmas Surabaya**

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**Abstract**

*Background: Breast milk is the main and best food for babies, it contains essential nutrients and antibodies that babies need for their growth and development. Exclusive breastfeeding is an indicator listed in the Strategic Plan of the Ministry of Health for the period 2020-2024, even in the Strategic Plan of the previous period (2015-2019) in the performance indicators (IKK) of the Directorate of Community Nutrition, because it is closely related to the government's priority program, namely the acceleration of stunting reduction which was achieved 11.6% of the target of 24.1%. The percentage of infants aged 0-6 months who received exclusive breastfeeding was 66.1% of the 40% target. (Ministry of Health, 2020). Even though this figure has met the national target, efforts to increase exclusive breastfeeding coverage must still be carried out as an effort to reduce stunting in Indonesia. Breastfeeding self-efficacy is a factor that can influence mothers to give exclusive breastfeeding to their babies. Methods and Samples: This research is a type of quantitative research, namely observational analytic using a case control approach. The number of samples is 69 respondents. The sampling technique used purposive sampling technique which was determined based on the right criteria. Results: The results of statistical tests get a p value of 0.038, p value <0.05, meaning H0 is rejected, H1 is accepted with an Odd Ratio value of 4.981. Conclusion: There is a relationship between self-efficacy of breastfeeding mothers and exclusive breastfeeding in the Posyandu Work Area of the Surabaya Boyfriend Health Center.*

**Keywords: Breastfeeding Self-Efficacy; Exclusive Breastfeeding; Posyandu;**

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## **Introduction**

Breast milk (*ASI*) is the main and best food given to babies, breast milk contains essential nutrients and antibodies that babies need for their growth and development (WHO, 2020). Breast milk has an important role that is needed by babies, so experts recommend that mothers breastfeed their babies exclusively for the first six months and continue until the baby is two years old. (States, 2012).

Globally the conditions of exclusive breastfeeding are currently not maximal, only 38% of babies aged 0-6 months receive exclusive breastfeeding. (WHO, 2014) . This is also shown by the low understanding of the importance of breast milk (*ASI*), supported by the increasingly sophisticated technology and the onslaught of the promotion of formula milk that idealizes the content of nutrients as a substitute for breast milk, making the public even less convinced of the greatness of breast milk and the lack of confidence of the mother to produce enough milk production for her baby so as to choose formula milk to meet the needs of their babies. (Netty et al., 2019)

Exclusive breastfeeding is an indicator listed in the Strategic Plan of the Ministry of Health for the 2020-2024 period, even in the Strategic Plan of the previous period (2015-2019) in the activity performance indicators (IKK) of the Directorate of Nutrition Society as one of the priority problems handlings stunting. Efforts have been made to support mothers who breastfeed babies aged < 6 months to receive exclusive breastfeeding. The policy on exclusive breastfeeding is contained in Law number 36 of 2019 concerning Health article 128 paragraph 1, Government Regulation number 33 of 2012 concerning Exclusive Breastfeeding, Minister of Health Regulation number 15 of 2013 concerning Procedures for Providing Special Facilities for Breastfeeding and/or Expressing Milk (Kemenkes, 2020).

The achievement indicator of the percentage of infants 0 - 6 months who receive exclusive breastfeeding in Indonesia has met the 2020 target, which is 40%. Based on the distribution of provinces, as many as 32 provinces have achieved the expected target and there are still 2 provinces that did not achieve the target, namely West Papua (34%) and Maluku (37.2%), while the province with the highest achievement was West Nusa Tenggara (87, 3%). The achievement rate for the province of East Java (79.5%), this figure is still quite far from the achievement of West Nusa Tenggara, where East Java is an area in Indonesia with affordability in terms of easy access to technology to obtain information about health, one of which is breastfeeding (Rahmawati et al., 2018). ven though the breastfeeding rate has met, socialization regarding the importance of exclusive breastfeeding is still needed. One of the factors that influence exclusive breastfeeding is the *self-efficacy* of breastfeeding mothers or *breastfeeding self-efficacy*.

## **Method**

Type of research is quantitative analytic observational with aapproach *case control*. The population in this study were all mothers who had babies aged 6 -12 months at the posyandu in the work area of the Surabaya Boyfriend Health Center. Samples for each group, namely the control group were mothers who gave exclusive breastfeeding and the case group

were mothers who did not give exclusive breastfeeding. The sampling technique in this study was *purposive sampling* with the eligibility criteria and the comparison of the case and control groups taken was 1:1, that is, each group required a minimum of 30 respondents. The independent variable in this study is *breastfeeding self-efficacy* and the dependent variable in this study is exclusive breastfeeding and non-exclusive breastfeeding.

**Table 1 Operational Definition of Research Variables**

Variabel	Definisi	Parameter	Alat Ukur	Skala Data	Skor
<i>Breastfeeding Self Efficacy</i>	<i>Self efficacy</i> merupakan keyakinan individu terhadap kemampuannya dalam memberikan ASI Eksklusif 6 bulan.	<i>Magnitude, Generally, Strength</i>	Lembar kuisisioner	Ordinal	Skala Likert : 1-5 (Sangat tidak yakin, tidak yakin, biasa, yakin dan sangat yakin). Kategori penilaian skor minimal 12 dan skor maksimal 60. Interval data adalah 49-60 :Tinggi 37-48 : sedang 25-36 : rendah 12-24 : sangat rendah
Pemberian ASI Eksklusif	Pemberian ASI Eksklusif adalah perilaku ibu menyusui kepada bayi sejak kelahiran hingga usia enam bulan tanpa makanan/minuman tambahan	1 : ASI Eksklusif saja tanpa makanan atau cairan lain kecuali obat, vitamin dan mineral 2. Non ASI eksklusif dengan makanan atau cairan lain kecuali obat, vitamin dan mineral	Lembar kuesioner	Nominal	1 = Eksklusif 2 = Non Eksklusif

The way variables were measured in the study was to use questionnaires. The study was conducted from July to November 2021. Data processing is done *by editing, coding, entry*, and tabulating data. Data that has been collected and processed is then analyzed using the help of SPSS computer programs.

## Results and Discussion

**Table 2 Frequency Distribution characteristics of responden research**

Maternal Characteristics Data	Category	Control Group (Exclusive Breastfeeding Mother)		Case Group (Exclusive Non-Breastfed Mother)	
		F	%	f	%
Age	<20 years	1	3,13	2	5,41
	20 - 35 years	27	84,38	27	72,97
	>35 years	4	12,50	8	21,62
	Total	32	100,00	37	100,00
Work	Work	10	31,25	16	43,24
	Not Working	22	68,75	21	56,76
	Total	32	100	37	100
Education	SD	0	0,00	1	2,70
	JUNIOR	1	3,13	6	16,22
	SMA	22	68,75	24	64,86
	Diploma	1	3,13	2	5,41
	S1	6	18,75	4	10,81
	S2/S3	2	6,25	0	0,00
	Total	32	100	37	100
Baby's Age	6 - 7 months	23	71,88	24	64,86
	8 - 9 months	9	28,13	13	35,14
	Total	32	100	37	100
Birth Order	First	12	37,50	21	56,76
	Second	14	43,75	13	35,14
	Third	4	12,50	1	2,70
	Fourth	2	6,25	2	5,41
	Total	32	100	37	100
Types of Labor	SC	17	53,13	25	67,57
	Spontaneous	15	46,88	12	32,43
	Total	32	100	37	100,00
Gender of the Baby	Woman	14	43,75	22	59,46
	Man- man	18	56,25	15	40,54
	Total	32	100	37	59,46

The sample number in this study was 69 people consisting of 32 control groups, namely mothers who exclusively breastfed and 37 case groups, namely mothers who did not breastfeed exclusively. Characteristics by age of most respondents aged u20 - 35 years, the

distribution picture explains that the majority of respondents are at the optimal age to get pregnant and maternity until the postpartum and breastfeeding period (Septiani et al., 2017). The characteristic of the work of the majority of mothers is that of mothers who are not working. research states that there is a relationship between employment status and exclusive giving, and the tendency also occurs due to a lack of information about lactation management for working mothers, so they will provide formula in lieu of exclusive breast milk (Ramli, 2020; Simanungkalit, 2018).

The majority of education respondents, namely high school graduates, education is an important point in human life. The level of education and knowledge is a contributing factor to exclusive breastfeeding in infants, because the higher a person's level of education the easier it is to receive information so that the more knowledge he has (Sihombing, 2018). Characteristics of infant age in these respondents are most babies aged 6 - 7 months. Researchers took respondents who had babies at six months of age and above to evaluate the success of exclusive breast milk. Birth order or birth order majorities respondents are currently breastfeeding the second child most other breast feeding first children. Both primipara and multipara there is no guarantee for mothers to know or not about exclusive breast milk (Untari, 2017). Multipara mothers may have previous breastfeeding experience exclusively name multipara mothers are not the deciding mothers can successfully breastfeed exclusively for breastfeeding today because the conditions of breastfeeding mothers who used to be different from the current conditions (Herdian & Ulfa, 2019). The characteristics of the sex of the baby are mostly female. The sex of the baby is not an influence whether the mother will give exclusive breast milk or not (Savita & Amelia, 2020).

**Table 3 Relationship Between *Self Efficacy* of Breastfeeding Mothers and Exclusive**

<i>Breastfeeding Self Efficacy</i>	Breastfeeding Status				OR	<i>p value</i>
	Non-breast milk Exclusive		BREAST MILK Exclusive			
	N	%	n	%		
Very low	7	21,88	1	2,70	4,981	0,038
Low	17	53,13	1	2,70		
Keep	8	25,00	9	24,32		
Tall	0	0,00	26	70,27		
Total	32	100,00	37	100,00		

**Breastfeeding in *Posyandu* Work Area of *Puskesmas Pacarkeling* Surabaya**

In table 3 above shows *that the self-efficacy* owned by breastfeeding mothers in a non-Exclusive breast milk or case group in *posyandu* work area *Puskesmas Pacarkeling* Surabaya mostly has low *self-efficacy* amounting to 17 respondents (53.13%), while *self-efficacy* of mothers who breastfeed exclusively or control group in *posyandu* work area *Puskesmas Pacarkeling* mostly have high *self-efficacy* amounting to 26 (70.27.3%).

Statistical test results with *Chi Square* obtained a value of  $p$  or  $p$  value = 0.038 ( $\alpha < 0.05$ ) with significant results. The prevalence of the possibility of the emergence of variables due to the result of the *Odd Ratio* value = 4,981 which means mothers who have low *self-efficacy* will be at five times risk of not exclusively breastfeeding compared to mothers who have high *self-efficacy*.

The results of this study are in line with several previous studies that stated that one of the important factors of mothers to give exclusive breast milk to their babies is the mother's self-confidence to breastfeed and or *breastfeed self-efficacy* (Entwistle et al., 2010). *Breastfeeding Self Efficacy Scale* (BSE) is about a mother's confidence in her ability to breastfeed her baby in the future. Low *self-efficacy* can result in low commitment in breastfeeding, low maternal endurance in overcoming obstacles that arise during breastfeeding and focusing on negative aspects of breastfeeding that directly impact babies who cannot benefit from exclusive breastfeeding. Self-efficacy of mothers who feel they do not have the adequacy of breast milk production to meet the needs of the baby becomes the main factor of the mother not giving exclusive breast milk or stopping breastfeeding prematurely, thus becoming one of the determinants of the success of exclusive breastfeeding (Otsuka et al., 2014). This is in line with research conducted by mothers who have high *self-efficacy* breastfeeding tend to use alternative techniques by providing formula to breastfeed their babies when facing problems during breastfeeding (Keemer, 2011).

## Conclusion

Based on the description that can be concluded, namely recursion of control groups or breastfeeding mothers who provide exclusive breast milk has good *self-efficacy* in *Posyandu* Work Area *Puskesmas Pacarkeling* Surabaya and Frequency of case groups or breastfeeding mothers who do not provide exclusive breast milk have low *self-efficacy* in *Posyandu* Work Area *Puskesmas Pacarkeling* Surabaya. The higher the *self-efficacy* of nursing mothers, the higher the desire of the mother to breastfeed her baby. So, there is a relationship between *self-efficacy* of breastfeeding mothers and exclusive breastfeeding.

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