



# Relationship Between the Support from Healthcare Workers and Mother's Motivation to Exclusively Breastfeed in Medan

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**Abstract.** Breast milk is an important nutrient for newborns, which provides short-term and long-term health benefits for infants and mothers. The support from health workers is very much needed in providing information and education on exclusive breastfeeding to mothers and the family members from pregnancy check-ups until the babies are 6 months old. This effort can increase the mother's motivation to give exclusive breastfeeding. To assess the relationship between the support of health workers and mother's motivation to breastfeed in Medan, Indonesia. This research used a descriptive cross-sectional research design with purposive sampling. The research subjects were 266 mothers of babies aged 6–11 months old. The inclusion criteria in this study were breastfeeding mothers with babies aged 6–11 months living in Medan, North Sumatra and were willing to be research respondents. The results showed that among 229 respondents (86.1%) received support from healthcare workers, 222 respondents (83.5%) were poorly motivated to exclusively breastfeed and 173 respondents (65%) did not give exclusive breastfeeding. There was a relationship between the support from healthcare workers and exclusive breastfeeding with  $p\text{-value} = 0.001 < \alpha = 0.05$  and there was a relationship between mother's motivation and exclusive breastfeeding with  $p\text{-value} = 0.005 < \alpha = 0.05$ . There was a relationship between the support from healthcare workers and mother's motivation to exclusively breastfeed in Medan.

**Keywords:** healthcare worker support · motivation · exclusive breastfeeding

## 1 Introduction

The Sustainable Development Goals (SDGs) are global policies with the objectives of eradicating poverty, ensuring healthy lives, promoting education, and fighting climate change. Exclusive breastfeeding is one of the approaches to Sustainable Development

Goal 2 aiming to achieve “zero hunger”, where all forms of malnutrition will disappear by 2030. Breastfeeding can save the lives of more than 820,000 children and 20,000 women annually, prevent obesity and type 2 diabetes, increase the IQ of all children by 3 points, and allow the country to save more than 300 billion US dollars spent on health care [1]. Globally, only 44 percent of infants are breastfed within the first hour after birth and 40 percent of all infants under 6 months are exclusively breastfed [2].

Various studies have found that exclusive breastfeeding provides benefits to infants. Exclusive breastfeeding reduces the chances of disease in childhood. The prevalence of infants with diarrhea, ARI, and fever was lower in infants who were exclusively breastfed than infants who were not exclusively breastfed in Pakistan [3]. Exclusively breastfed infants also have better communication and social interaction skills at the age of 6 months, as well as better cognition, communication, and social interaction at the age of 12 months compared to non-exclusive breastfed infants [4]. Comparing to non-exclusive breastfed infants, exclusive breastfeeding provides the following short-term and long-term benefits, such as healthier eating habits, further reduced length of hospital stay, more favorable weight gain, lower body mass index, lower adiposity, lower total cholesterol values, better cognitive and behavioral development, as well as better stability of metabolic rate in children with metabolic disorders [5].

Based on data from the Indonesian Health Profile, the coverage of exclusive breastfeeding has decreased for three consecutive years, such as by 68.74 percent in 2018, by 67.74 percent in 2019, and by 66.06 percent in 2020 [6–8]. In the last four years, there has been a decrease in the coverage rate of exclusive breastfeeding from 34.05 percent in 2018 to 27.1 percent in 2020. Mothers with access to health service facilities can optimally breastfeed their babies. Health service facilities require healthcare workers to provide information and educational service on exclusive breastfeeding to mothers and/or the family members starting from the prenatal check-up until the completion time of exclusive breastfeeding. Lactation education or breastfeeding before delivery is a key element of a prenatal nutrition program that aims to support breastfeeding among new mothers. Access to support from healthcare workers starting at prenatal is a key intervention to help new mothers in breastfeeding, including acquiring breastfeeding skills, such as breastfeeding position, caring for the breasts during pregnancy and breastfeeding, breast milk pumping and storing, etc., solving challenges that may occur during breastfeeding, such as blisters, swelling, and breast milk shortage, and increasing breastfeeding self-efficacy [9]. According to the Guidelines from the World Health Organization (WHO) (2011) and La Leche League International (2013), Breastfeeding Education Programs can be given in the prenatal or postnatal period, such as at 34 weeks of gestation, 36 weeks of pregnancy, one to four weeks postpartum, and eight to 24 weeks postpartum with different discussion content in each period [10].

## 2 Methods

### 2.1 Study Design

This was descriptive correlational research with a cross-sectional research design.

## 2.2 Population, Samples, and Sampling

The sample in this study were mothers of babies aged 6–11 months living in Medan, North Sumatra. The number of samples in this study was determined by using Isaac and Michael's table with 10% (0.1) error tolerance limit and the population of Medan, such as at 13,647 people, giving the number of samples in this study at 266 samples. The sampling technique applied in this study was purposive sampling technique. The inclusion criteria were breastfeeding mothers of babies aged 6–11 months living in Medan, North Sumatra and willing to be the research respondents.

## 2.3 Instruments

The health worker support questionnaire consists of 10 statements with 2 answer choices, namely yes and no". Good support if support value health workers  $>50\%$  of the total value support component health workers. Not good support if the value of energy support health  $\leq 50\%$  of value all support components health workers. A breastfeeding mother motivation questionnaire consisting of 26 statements with 4 answer choices, namely strongly agree, agree, disagree and strongly disagree. Good Motivation if the mother's motivation score is  $>50\%$  of the total score motivational component. Not good motivation if the value of motivation  $\leq 50\%$  of value all components of motivation. Exclusive breastfeeding if only breastfeeding without additional food and drink from birth until the baby is 6 months old. No Exclusive Breastfeeding is if breastfeeding with additional food and drink from birth until the baby is 6 months old.

## 2.4 Data Analysis

Data were collected using a questionnaire and analyzed by Chi-Square test using the statistical package for the social sciences (SPSS) program version 22 with a determined significance level of  $\alpha = 0.05$ .

# 3 Result

## 3.1 The Support from Healthcare Workers in Medan

Table 1 Shows that 229 respondents (86.1%) received good support from healthcare workers.

## 3.2 Mother's Motivation to Exclusively Breastfeed in Medan

Table 2 shows that 222 respondents (83.5%) had poor motivation to exclusively breastfeed.

## 3.3 The Breastfeeding in Medan

Table 3 shows that 173 respondents (65%) were non-exclusively breastfeed.

**Table 1.** Distribution of respondent based on the support of health workers in Medan

The support of health workers	Frequency (n)	Percentage
Good	229	86.1
Not Good	37	13.9
Total	266	100.0

**Table 2.** Distribution of respondent based on motivation to exclusively breastfeed in Medan

Mother's Motivation	Frequency (n)	Percentage
Good	44	16.5
Not Good	222	83.5
Total	266	100.0

**Table 3.** Distribution of respondent based on the breastfeeding in Medan

Breastfeeding	Frequency (n)	Percentage
Exclusive	93	35.0
Non-Exclusive	173	65.0
Total	266	100.0

### 3.4 Relationship Between the Support from Healthcare Workers to Exclusively Breastfeed in Medan

Among 229 respondents receiving good support from healthcare workers, 140 respondents did not give exclusive breastfeeding (61.6%) and 89 respondents (38.9%) gave exclusive breastfeeding. Meanwhile, out of 37 respondents with poor support from healthcare workers, 33 respondents did not give exclusive breastfeeding (89.2%) and 4 respondents gave exclusive breastfeeding (10.8%). Chi-Square statistical test obtained  $p\text{-value} = 0.001 < \alpha = 0.05$ , meaning that there was a relationship between the support from healthcare workers and exclusive breastfeeding in Medan (Table 4).

### 3.5 Relationship Between Mother's Motivation to Exclusively Breastfeed in Medan

Table 5 shows that out of 44 respondents who were well-motivated, 24 respondents exclusively breastfed (54.5%) and 20 respondents (45.5%) did not give exclusive breastfeeding. Meanwhile, from 222 respondents who had poor motivation, 153 respondents

**Table 4.** Relationship Between The Support From Healthcare Workers to Exclusively Breast-feed in Medan (N = 266)

The Support of Health Worker	<u>Breastfeeding</u>						P-Value
	<u>Exclusive</u>		<u>Non-exclusive</u>			Total	
	n	%	n	%	n	%	
Good	89	38.9	140	61.1	229	100	
Not Good	4	10.8	33	89.2	37	100	0.001
Total	93	35.0	173	65.0	266	100	

**Table 5.** Relationship Between Mother's Motivation to Exclusively Breastfeed in Medan (N = 266)

Mother's Motivation	<u>Breastfeeding</u>				Total		P-Value
	<u>Exclusive</u>		<u>Non-exclusive</u>				
	n	%	n	%	n	%	
Good	24	54.5	20	45.5	44	100	
Not Good	69	31.1	153	68.9	222	100	0.005
Total	93	35.0	173	65.0	266	100	

did not give exclusive breastfeeding (68.9%) and 69 respondents were exclusively breast-fed (31.1%). Chi-Square statistical test obtained  $p\text{-value} = 0.005 < \alpha = 0.05$ , meaning that there was a relationship between a mother's motivation and exclusive breastfeeding.

## 4 Discussion

The results of this study report that there was a relationship between the support from healthcare workers and mother's motivation to exclusively breastfeeding in Medan. The results of research show that there was a relationship between support of health workers and culture of exclusive breastfeeding with exclusive breastfeeding status in in Sungai Ulin community health center [11]. Breastfeeding success in mothers who were given

health education that combined information, guidance, and support provided to participants from the prenatal period to the postnatal period was higher than mothers who were not given health education after one and eight weeks postpartum [12].

The results of the study of 194 mothers who attended prenatal breastfeeding classes using video demonstrations and group teaching by lactation consultants and new mothers support groups with face-to-face prenatal teaching and weekly meetings experienced a significant increase in breastfeeding at 6 months when compared to control group. Prenatal breastfeeding education can affect the length of time breastfeeding [13]. Mother's participation in the exclusive breastfeeding program will determine the success of the breastfeeding education program.

The support from healthcare workers influences the success of breastfeeding. One of the types of support that can be provided is health education for the mothers that combines information and guidance about breastfeeding provided from the prenatal, antenatal to postnatal periods. Health workers are responsible for providing information and education on exclusive breastfeeding, such as the benefits and advantages of breastfeeding, maternal nutrition, preparation and maintenance for breastfeeding, and negative consequences of partial bottle feeding through counseling and assistance.

Breastfeeding education during the antenatal period can improve mother's motivation to breastfeed. Mother's motivation to breastfeed is an important factor determining the success of breastfeeding and prolonging breastfeeding duration. Information and education on exclusive breastfeeding given by health workers need to cover the advantages and disadvantages of breastfeeding, nutrition for pregnant women, preparing for and maintaining breastfeeding, the impact of partial bottle feeding on breastfeeding. Exclusive breastfeeding information and education provided to mothers and/or family members can be done through counseling and mentoring.

## 5 Conclusion

There was a relationship between the support from healthcare workers and mother's motivation to exclusively breastfeed in Medan.

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