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The Relationship Between Breastfeeding Self-Efficacy and The Success of Exclusive Breastfeeding

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Abstract

Breast milk is the most effective way to ensure the health and safety of children. The achievement of exclusive breastfeeding in Indonesia is still relatively low. In 2018 it was only 65.16%. In the end, the obstacles experienced by the mother affect the mother's self-confidence and self-confidence in breastfeeding or it is called breastfeeding self-efficacy. This study aims to determine the relationship between breastfeeding self-efficacy and the success of exclusive breastfeeding. The research design is analytic with a cross sectional study approach. The study population was mothers who have children aged 6-24 months totaling 36 people in the working area of the Muara Dua Health Center, Lhokseumawe City. The sampling technique was purposive sampling. The BSES-SF (Breastfeeding Self Efficacy Scale – Short Form) questionnaire was used in data collection. Breastfeeding self-efficacy is mostly low (52.8%), exclusive breastfeeding is mostly unsuccessful (38.9%), and there is a relationship between Breastfeeding self-efficacy and the success of exclusive breastfeeding (p value = 0.001 <0.05). There is a significant relationship between Breastfeeding Self Efficacy and the Success of Exclusive Breastfeeding.

Keywords: Breastfeeding; Self Efficacy; Exclusive Breastfeeding

Introduction

Mother's Milk (ASI) is the most effective way to ensure the health and safety of children. WHO recommends exclusive breastfeeding, that is, babies are given only breast milk without other liquids or food, except for supplements of vitamins, minerals or medicines for medical purposes until the baby is 6 months old and partial breastfeeding until the child is two years old to optimize child health (WHO, 2020). According to the American

Academy of Pediatrics, breastfeeding has many nutritional and non-nutritional benefits for both the health of the child and the health of the mother (AAP, 2021).

Even though post partum mothers should provide breast milk until the baby is 6 months old, the percentage of mothers who breastfeed their babies continues to decrease as the baby gets older. The results from the Turkey Demographic and Health Survey (TDHS) show that although 58% of infants in the study were exclusively

breastfed in the first and second months of life, the percentage decreased to only 10% in the fourth and following fifth months (Hacettepe University Institute, 2013 in et al, 2020). The Center for Diseases Control (CDC) also reported the same thing, even though more than 79.2% of women in the United States initiated breastfeeding in the early weeks, in fact less than 19% of these women continued exclusive breastfeeding until the sixth month. (CDC, 2020).

Even in Indonesia, the achievement of exclusive breastfeeding in Indonesia is still relatively low. In 2018 Indonesia's exclusive breastfeeding achievement was 65.16% (RI Ministry of Health, 2018). Whereas in 2019 the achievement of exclusive breastfeeding in Indonesia was 67.74% (Ministry of Health RI, 2019). If seen from the percentage of exclusive breastfeeding outcomes in 2018 to 2019, Indonesia has not yet reached the target according to WHO recommendations for a minimum increase in exclusive breastfeeding outcomes of 1.2% per year (WHO, 2020).

In Aceh, the achievement of exclusive breastfeeding in 2018 was 60.8%, which actually decreased to 55.2% in 2019. Meanwhile, for the City of Lhokseumawe, the achievement of exclusive breastfeeding in 2019 experienced a drastic decrease compared to 2018, namely from 57% to 40%. . Exclusive breastfeeding coverage in Lhokseumawe City has fluctuated from 2013 to 2017. The coverage achievement in 2016 has reached the target that has been set (target 44%). In 2017 the achievement of the Exclusive Breastfeeding program fell again from the previous year (35.2%). Meanwhile, exclusive breastfeeding in Muara Dua District only reached 47.1% (Aceh Health Office, 2019).

This phenomenon indicates that every mother has a risk of experiencing failure in exclusive breastfeeding even though the mother has initiated breastfeeding early in life. Where this risk cannot be detected from the start, so it does not get any intervention. The impact is that in the

future mothers fail to provide exclusive breastfeeding so that the percentage of mothers who breastfeed exclusively decreases as the baby gets older (Kronborg, et al, 2015).

Many obstacles can affect women in starting, carrying out the breastfeeding process, and maintaining exclusive breastfeeding practices. These obstacles include demographic, social, economic factors, mother's age, education level, marital status, and social support. Other factors are lack of milk production, pain or blisters on the nipple, babies who have difficulty breastfeeding and babies who are not satisfied with mother's milk. In the end, the constraints experienced by the mother affect the confidence and self-confidence of the mother in giving breast milk or what is called breastfeeding self-efficacy (Loke and Chan, 2013).

Breastfeeding self-efficacy is a mother's self-confidence in terms of breastfeeding that can predict a mother's decision to breastfeed, efforts made to breastfeed, constructive or destructive mindsets, and how to respond to various problems and difficulties during breastfeeding. Breastfeeding self-efficacy affects individual responses such as emotional reactions, mindsets, and effort and persistence in exclusive breastfeeding. Low self-efficacy in breastfeeding can lead to negative motivation and perceptions (Amini et al, 2019).

Research conducted by (Vincent, 2015) shows that breastfeeding self-efficacy affects initiation of breastfeeding, achievement of exclusive breastfeeding and duration of breastfeeding. Where the higher the breastfeeding self-efficacy of a mother, the higher the success rate of exclusive breastfeeding in postpartum mothers. Other studies have proven that breastfeeding self-efficacy in the postpartum period can be a predictor of achieving exclusive breastfeeding for the next 6 months. If nurses measure the mother's level of breastfeeding self-efficacy in the postpartum period, potential problems in

breastfeeding can be identified earlier (Henshaw et al., 2015) This research needs to be done considering the problems and difficulties in breastfeeding in postpartum mothers if not resolved can affect the mother's self-efficacy in breastfeeding. By knowing The relationship between breastfeeding self-efficacy and the effectiveness of the breastfeeding process, nurses can identify postpartum mothers who are at risk for experiencing breastfeeding problems in the future so that interventions can be given to prevent failure of breastfeeding.

Method

This study used an analytic descriptive design with a cross sectional approach. The independent variable in this study is breastfeeding self-efficacy and the dependent variable is the success of exclusive breastfeeding. The population in this study were breastfeeding mothers who had children aged 6-24 months in the working area of the Muara Dua Public Health Center, Lhokseumawe City. The sampling technique in this study was a total sampling of 36 people.

Data collection was carried out by distributing questionnaires door to door. The research instrument used to measure breastfeeding self-efficacy variable is the BSES-SF (Breastfeeding Self Efficacy Scale – Short Form) questionnaire from Dennis (2003) which has been translated into Indonesian by Handayani, et al, (2013). This scale was measured using a Likert scale. With the answer choices very unsure (STY) was given a score of 1, unsure (TY) was given a score of 2, less sure (KY) was given a score of 3, sure (Y) was given a score of 4, and very sure (SY) was given a score of 5. There were 12 favorable statements with a total score of 12-60. As for the dependent variable, namely the success of exclusive breastfeeding, it was measured using a questionnaire containing 4 statements based on indicators of the success of exclusive breastfeeding, namely the increase in baby

weight, body length, and head circumference; smoothness of the excretory system; effective suckling baby; and maternal satisfaction (Rosita, 2014).

Data analysis in this study used the chi square test in stages with the help of the SPSS version 17 computerized program. Decision making whether or not there was a relationship between the variable breastfeeding self-efficacy and the success variable of exclusive breastfeeding with a confidence level of 95% ($\alpha = 0.05$)

Results And Discussion

The research was conducted in the working area of the Muara Dua Health Center, Lhokseumawe City, and the following results were obtained:

Table 1. Frequency distribution of Research Respondent Characteristics

Characteristics	Frequency (n=36)	%
Mother's age		
< 35 tahun	12	33,3
35 tahun	24	66,7
Education		
Primary school	10	27,8
Junior high school	3	8,3
Senor high school	16	44,4
Diploma III	1	2,8
Bachelor	6	16,7
Occupation		
Housewife	15	41,7
Trader	2	5,6
Farmer	7	19,4
Civil Servant	3	8,3
Private sector employee	9	25
Number of children		
1 person	1	2,8
2 persons	12	33,3
3 people	11	30,6
4 people	12	33,3
Age of last child		
13-18 months	13	36,1
19-24 months	7	19,4
6-12 months	16	44,4

Source: Primary Data 2022

Table 1 above shows that the results of the distribution of the characteristics of the respondents stated that the majority of respondents aged 35 years were 24 people

(66.7%), the last education was high school as many as 16 people (44.4%), the work of housewives was 15 people (41.7%), the last child aged 6-12 months was 16 people (44.4%).

Tabel 2. Distribusi Frekuensi Breastfeeding Self Efficacy

Breastfeeding Self Efficacy	Frequency (n=36)	Percentage (%)
Low	19	52,8
High	17	47,2
Total	36	100

Based on table 2 above, it can be seen that most of the Breastfeeding Self Efficacy in the working area of the Muara Dua Community Health Center, Lhokseumawe City, are mostly in the low category, as many as 19 people (52.8%).

Table 3. Frequency Distribution of Exclusive Breastfeeding Success

The Success of Exclusive Breastfeeding	Frequency (n=36)	Percentage (%)
Not successful	22	38,9
Success	14	61,1
Total	36	100

The above table shows that the success of exclusive breastfeeding in the working area of the Muara Dua Health Center, Lhokseumawe City, was mostly in the unsuccessful category, as many as 22 people (38.9%).

Tabel 4. Relationship between Breastfeeding Self Efficacy and the Success of Exclusive Breastfeeding in the Working area of the Muara Dua Public Health Center, Lhokseumawe City

Dua Pulo Health Center, Enrekangmawe City							
Breastfeeding Self Efficacy	The Success of Exclusive Breastfeeding				Total		<i>p value</i>
	Success		Not successful				
	F	%	F	%	F	%	0,001
	Low	2	5,6	17	47,2	19	
High	12	33,3	5	13,9	17	47,2	
Total	14	38,9	22	61,1	36	100	

The result can be seen that the results of statistical analysis using the Chi Square test obtained a value of $p = 0.001 < 0.05$, so H_a is accepted, which means that there is a relationship between Breastfeeding Self Efficacy and the Success of Exclusive Breastfeeding in the working area of the Muara Dua Public Health Center, Lhokseumawe City.

The results of the identification of Breastfeeding Self Efficacy in breastfeeding mothers in the working area of the Muara Dua Community Health Center, Lhokseumawe City, showed that the majority were in the low category, namely 19 people (52.8%).

Low Breastfeeding Self Efficacy shows that mothers still lack confidence about their ability to breastfeed. Self-efficacy in breastfeeding can affect commitment to breastfeeding, the mother's endurance in overcoming obstacles that arise while breastfeeding and the mother's focus on the positive or negative aspects of breastfeeding.

According to the researchers' assumptions, pain after normal delivery or section caesarea, makes it difficult for mothers to move and care for their babies, especially when breastfeeding. In addition, the mother's concern about breast swelling and sore nipples after breastfeeding can also cause the mother's self-efficacy to breastfeed to be low. It is these two negative interpretations that can cause inhibition of the let down reflex so that the flow of milk will decrease so that breastfeeding will not be successful.

Mothers with low levels of self-efficacy tend to focus on the negative aspects of breastfeeding, such as focusing on the pain and anxiety that mothers feel while breastfeeding. This lack of effort and mother's endurance in dealing with difficulties during breastfeeding is what will make mothers stop breastfeeding earlier and switch to using formula milk (Komalasari, et al, 2016). This is supported by Kurniawan's research (2013) which states that mothers who have a low level of

self-efficacy are found mostly in mothers who fail to provide exclusive breastfeeding.

The results of identifying the success of exclusive breastfeeding for breastfeeding mothers in the working area of the Muara Dua Public Health Center, Lhokseumawe City, were mostly in the unsuccessful category, namely 22 people (38.9%). According to the researchers' assumptions, this was due to the age factor of the respondents, most of whom were aged 35 years as many as 24 people (66.7%), who were in the unhealthy reproductive age category. Mothers aged <35 years tend to be more active in seeking information about exclusive breastfeeding. The mother's age greatly determines maternal health and is related to the conditions of pregnancy, childbirth and postpartum as well as how to care for and breastfeed her baby.

According to Komalasari, et al (2016), mothers who are <35 years old are referred to as "adulthood" and are also called the healthy reproductive period, during which it is hoped that people will be able to solve problems they face emotionally calmly, especially caring for their babies. including exclusive breastfeeding. Mothers of healthy reproductive age will understand better the benefits of exclusive breastfeeding so that mothers are moved to give exclusive breastfeeding to their babies.

This is supported by the results of Kurniawan's research (2013) that there is a significant relationship between maternal age and exclusive breastfeeding. Sohimah & Lestari's research (2017) also shows that there is a relationship between maternal age and exclusive breastfeeding.

The results of statistical analysis using the Chi Square test found that the value of $p = 0.001 < = 0.05$, which means that there is a significant relationship between Breastfeeding Self Efficacy and the success of exclusive breastfeeding in the working area of the Muara Dua Public Health Center, Lhokseumawe City.

According to the researchers, the low level of mother's self-efficacy in breastfeeding can affect the mother's

commitment to successful delivery of exclusive breastfeeding, so that mothers who have high confidence and self-confidence will be successful in exclusive breastfeeding.

This is in line with the results of a study conducted by Kurniawan (2013) that high maternal self-efficacy for exclusive breastfeeding was found in the majority of mothers who were successful at exclusive breastfeeding. This research is supported by research conducted by Fahriani, Rohsiswatmo & Hendarto (2016) which says that the factor that is proven to influence exclusive breastfeeding is the mother's psychological factor, namely self-efficacy.

Mother's confidence in success in giving exclusive breastfeeding will help mothers determine certain actions that can be used or not and how much effort will be expended to achieve goals, build self-motivation, and whether these actions can be continued if there are obstacles or difficulties, and react positively in dealing with these difficulties (Albery & Munafo, 2011).

Based on the theory of self-efficacy, breastfeeding mothers will assess four main sources of information as a basis for determining their ability to breastfeed their babies, namely performance achievement (such as previous breastfeeding experiences), other people's experiences (such as seeing other breastfeeding mothers, peer counseling), verbal persuasion. (such as encouragement from influential people, such as friends, family, and lactation consultants), and physiological responses (such as pain, fatigue, anxiety, or stress) (Bandura, 1978).

Self-efficacy is based on four sources of information, so that breastfeeding mothers will determine whether mothers will continue and continue to breastfeed their babies fully and exclusively for 6 months or start giving their babies additional food or drinks or carry out weaning of their babies. The more complete the information obtained by the mother, the higher the self-

efficacy that the mother will have. Mother's self-efficacy in breastfeeding is related to the mother's specific belief in her ability to breastfeed her baby, that is, the mother can control the demands of the environment or situation as well as the mother's physical and psychological condition during the postpartum period and breastfeeding which ultimately leads to the formation of exclusive breastfeeding (Zakiah, Rasyad and Sujatno, 2012).

Conclusions

Based on the results of the study, it can be concluded that the majority of breastfeeding mothers in the working area of the Muara Dua Health Center in Lhokseumawe City have low category breastfeeding self-efficacy, success in exclusive breastfeeding in the unsuccessful category, and there is a relationship between breastfeeding self-efficacy and the success of exclusive breastfeeding. For future researchers, they can examine other factors related to breastfeeding self-efficacy using quantitative or qualitative methods, so that the factors that most influence breastfeeding self-efficacy in breastfeeding mothers can be identified so that they can increase the mother's self-efficacy and have an impact on the success of exclusive breastfeeding.

References

- AAP (2021) Benefits of Breastfeeding, American Academy of Pediatrics. Available at: <https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/Breastfeeding/Pages/Benefits-of-Breastfeeding.aspx> (Accessed: 3 February 2022).
- Albery, I. P. and Munafo, M. (2011) Psikologi Kesehatan Panduan Lengkap dan Komprehensif Bagi Studi Psikologi Kesehatan. Yogyakarta: Palmall.
- Amini, P. et al. (2019) 'The Breastfeeding Self-Efficacy Scale-Short Form (BSES-SF): A validation study in Iranian mothers', BMC Research Notes. BioMed Central, 12(1), pp. 1–6. doi: 10.1186/s13104-019-4656-7.
- Bandura, A. (1978) 'Self-efficacy: Toward a unifying theory of behavioral change', Advances in Behaviour Research and Therapy, 1(4), pp. 139–161. doi: [https://doi.org/10.1016/0146-6402\(78\)90002-4](https://doi.org/10.1016/0146-6402(78)90002-4).
- CDC (2020) Breastfeeding, Center for Disease Control and Prevention. Available at: <https://www.cdc.gov/breastfeeding/data/index.htm> (Accessed: 20 January 2022).
- Dennis, C. L. (2003) 'The Breastfeeding Self Efficacy Scale: Psychometric Assessment of the Short Form', Journal of Obstetric, Gynecologic & Neonatal Nursing, 32(6), pp. 734–744. doi: 10.1177/0884217503258459.
- Dinas Kesehatan Aceh (2019) Profil Kesehatan Aceh 2019. Banda Aceh.
- Fahriani, R., Rohsiswatmo, R. and Hendarto, A. (2016) 'Faktor yang Memengaruhi Pemberian ASI Eksklusif pada Bayi Cukup Bulan yang Dilakukan Inisiasi Menyusu Dini (IMD)', Sari Pediatri, 15(6), p. 394. doi: 10.14238/sp15.6.2014.394-402.
- Handayani, L. et al. (2013) 'Translation and Validation of Breastfeeding Self-Efficacy Scale-Short Form (BSES-SF) into Indonesian: a Pilot Study', Jurnal Kesehatan Masyarakat (Journal of Public Health), 7(1), pp. 21–26. doi: 10.12928/kesmas.v7i1.1023.
- Henshaw, E. J. et al. (2015) 'Breastfeeding Self-Efficacy, Mood, and Breastfeeding Outcomes among Primiparous Women', Journal of Human Lactation. SAGE Publications Inc STM, 31(3), pp. 511–518. doi: 10.1177/0890334415579654.
- Kemenkes RI (2018) Data dan Informasi Profil Kesehatan Indonesia 2018. Jakarta.
- Kemenkes RI (2019) Data dan Informasi:

- Profil Kesehatan Indonesia 2019, Kementerian Kesehatan RI.
- Komalasari, M., Solehati, T. and Widiati, E. (2016) 'Gambaran tingkat self efficacy ibu dalam menyusui pada ibu post seksio sesarea di ruang nifas RSKIA Kota Bandung', *Jurnal Pendidikan Keperawatan Indonesia*, 2(2), pp. 95–103.
- Kronborg, H., Foverskov, E. and Væth, M. (2015) 'Breastfeeding and introduction of complementary food in Danish infants', *Scandinavian Journal of Public Health*. SAGE Publications Ltd STM, 43(2), pp. 138–145. doi: 10.1177/1403494814567171.
- Kurniawan, B. (2013) 'Determinan Keberhasilan Pemberian Air Susu Ibu Eksklusif', *Jurnal Kedokteran Brawijaya*, 27(4), pp. 236–240. doi: 10.21776/ub.jkb.2013.027.04.11.
- Loke, A. Y. and Chan, L. S. (2013) 'Maternal Breastfeeding Self Efficacy and the Breastfeeding Behaviors of Newborns in the Practice of Exclusive Breastfeeding', *Journal of Obstetric, Gynecologic & Neonatal Nursing*, 42(6), pp. 672–684. doi: <https://doi.org/10.1111/1552-6909.12250>.
- Pramanik, Y. R., Sumbara and Sholihatul, R. (2020) 'Hubungan Self-Efficacy Ibu Menyusui Dengan Pemberian Asi Eksklusif', *Jurnal Ilmiah Kesehatan Iqra*, 8(1), pp. 39–44.
- Rosita, S. (2014) *ASI untuk Kecerdasan Bayi*. Yogyakarta: Ayyana.
- Sohimah and Lestari, Y. A. (2017) 'Analisis Faktor Yang Mempengaruhi Pemberian Air Susu Ibu (ASI) Eksklusif di Wilayah Kerja Puskesmas Cilacap Tengah I Kabupaten Cilacap Tahun 2017', *Bidan Prada: Jurnal Ilmiah Kebidanan*, 8(2), pp. 125–137. Available at: <http://ojs.akbidylpp.ac.id/index.php/Prada/article/download/313/225>.
- Vincent, A. (2015) 'The effect of breastfeeding self-efficacy on Breastfeeding Initiation, Exclusivity, and Duration', *Walden University Scholar Works*, pp. 1–66.
- WHO (2020) *Breastfeeding*, World Health Organization. Available at: https://www.who.int/health-topics/breastfeeding#tab=tab_2 (Accessed: 20 February 2022).
- Zakiah, Rasyad, A. S. and Sujatno, H. R. M. (2012) 'Efikasi Diri Dan Lama Pemberian Air Susu Ibu Saja Selama 2 Bulan Postpartum', *Gaster*, 9(2), pp. 7–16.