

Mother's behavior in breastfeeding in Gowa Regency, South Sulawesi (study on mothers with insufficient breastmilk production)[☆]



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ABSTRACT

Objective: To in depth analysis of the behavior of breastfeeding mothers with insufficient breastmilk.

Methods: This research is a quasi-qualitative approach conducted in Bajeng and Pabbentengan Health Center Gowa Regency. Data obtained through observation and in-depth interviews with 6 mothers, 3 families, and 2 health workers.

Results: According to the mother, lack of breast milk is if the milk does not flow out. On the first day of delivery, the mother gives formula milk in an effort to fulfill the baby's food while waiting for milk to come out. Efforts have been made to meet the production of breast milk by consuming vegetables that are believed to be hereditary can accelerate milk production.

Conclusions: Breastfeeding at the study site was in the form of partial breastfeeding. For this reason, appropriate efforts are needed in increasing the production of breast milk for breastfeeding mothers in this region.

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Introduction

Breast milk contributes to a healthy diet, provides adequate nutrition and energy for babies, thereby preventing hunger and malnutrition.¹ Exclusive breastfeeding reduces 13% of child mortality. Approximately 50–60% of child deaths under 5 years of age are caused by malnutrition and less than optimal breastfeeding. However, the achievement of exclusive breastfeeding in Indonesia is still 42%.² In 2016 in Indonesia, breastfed babies aged 0–6 months amounted to 54.0%.³ Based on data from the Gowa Regency Health Office in 2016, the percentage of exclusive breastfeeding for infants 0–6 months in the Bajeng health center work area is only 17.3%. This is still less than the target to be achieved, which is 80%.⁴

The target of exclusive breastfeeding is still difficult to achieve due to the non-smooth delivery of breast milk. Breast milk production is strongly influenced by psychological factors because the mother's feelings can inhibit or increase the release of oxytocin.⁵ Various socio-cultural factors are one of the strongest driving factors for a person's behavior. These socio-cultural factors shape and encourage a mother to be willing to breastfeed.⁶

One of the problems with breastfeeding in the late postpartum period is the lack of breast milk syndrome. There needs to be an effort to express breast milk for postpartum mothers.⁷ This study aims to analyze in-depth the behavior of breastfeeding mothers in an effort to increase milk production in Gowa Regency, South Sulawesi.

Methods

This research method is a qualitative research with a quasi-qualitative conducted in the Bajeng and Pabbentengan Health Center from January to March 2020. Data were collected through in-depth interviews and continuous observation during the study. Informant as many as 6 breastfeeding mothers, 3 breastfeeding mother families, and 2 health workers. The data obtained are classified and reduced and then presented in the form of words or scientific narrative. Data analysis uses domain.

Result

People understand that exclusive breastfeeding is giving breast milk to the baby. There are mothers who have never heard of the term exclusive breastfeeding. However, there are also those who claim to have heard the term exclusive breastfeeding through classes for pregnant women and electronic media. However, Mother has not been able to explain about exclusive breastfeeding. This is as stated by the informants as follows:

Do not know. There is never any information (about exclusive breastfeeding) (Y, 31 yo)

Exclusive breastfeeding is milk, that's the first (Ro, 25 yo)

Ever heard of exclusive breastfeeding during pregnant women class. Exclusive breastfeeding, what is the first thing that comes out, I forget the noodles (Sr, 30 yo)

Get used to (hear information) from the internet or something. Exclusive breastfeeding is the breast that is given to the baby (Sh, 36 yo)

From the internet, there are also books (information about exclusive breastfeeding). Exclusive breastfeeding is the breast that a mother gives to her child (Mu, 22 yo)

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This study also found that breastfeeding mothers have never received information about Early Initiation of Breastfeeding (IEB) even though they routinely carry out antenatal care. Even the term Colostrum was only heard when the interview was conducted. As the following informant said:

Never heard what IEB was (Sr, 30 yo, Y, 31 yo)
At the time of examination was never heard (Mu, 22 yo)
This was the first time I heard of Colostrum (Sh, 36 yo)
Never heard what colostrum was. I think it was explained but I forgot (Sr, 30 yo)

Breast milk production that mothers understand is little milk if no milk is seen flowing out through the mother's nipples. As stated by the informants as follows:

My breast milk is only a little. Pity. because if I press it nothing comes out (Sr, 30 yo, Y, 31 yo)
Nothing came out of my breast milk during childbirth so wet but it didn't come out. later in 1 week just a lot (Sh, 36 yo)

The Mother shows a positive attitude about breast milk. The good attitude, among others, was that mothers answered that breast milk was beneficial and good for their babies. Because breast milk is considered the main food for babies. Breast milk is also considered better when compared to formula milk and other foods. Mothers can also open themselves to receive information about breastfeeding and breastfeeding.

I usually like to take classes for pregnant women. It's good that breast milk for babies (Sr, 30 yo)
Breast milk is good, I usually hear from those who already have children (SY, 35 yo)
I think it's good that breast milk has a lot of nutrition, it's just that I don't have breast milk, a little. Pity (Mu, 22 yo)
Good but a little bit I breastfeed, given formula milk because my milk is not coming out (Y, 31yo)

All informants at the location gave breast milk to the baby. Breastfeeding is done from the first time she gives birth. The obstacle that is felt when breastfeeding is the lack of milk production. However, efforts were made to overcome the shortage of breast milk production by consuming local vegetables.

Yes, I still breastfeed my baby. A little breast milk but I eat vegetables (Y, 31 yo)
There are no obstacles during breastfeeding. At that time, there was a little. I have already eaten a lot of new banana heart vegetables (Ro, 25 yo)
I Still breastfeeding. I just don't feel like it but I eat lots of vegetables and fruit. If I don't eat vegetables it lessens my energy. Never had a massage (Sh, 36 yo)

In addition, as an effort to wait for the milk to come out, the mother gives the baby formula milk and or plain water. This is done because they are worried that the baby will lack nutrition due to a lack of breast milk.

in the past, at that time then I was given a formula first. 1 day at that time because there was no breast milk (Mu, 22 yo)
Still breastfeeding because she doesn't want to use a pacifier. It's lazy to breastfeed. 1 month 2 months I still want a pacifier but now I don't want it. Maybe the pacifier is hard. If it's still soft (Sh, 36 yo)

Yes, still breastfeeding. so eat vegetables. Milna is given 5 months Yes, aqua water (Y, 31 yo)

Yes, I used to give him water. Yes, I've never eaten. Almost 5 months because not too much breast milk (Ro, 25 yo)

Discussion

Three themes are identified in this study that motivates mothers in breastfeeding efforts and efforts to increase milk production and fulfillment of nutrition for their babies. First, An understanding of breastfeeding at this location can have implications for breastfeeding. A mother must have good knowledge of breastfeeding. Losing knowledge about breastfeeding means a major loss of confidence in a mother to be able to provide the best care for her baby and the baby is deprived of vital food sources and optimal care methods.⁸ This is also in line with research conducted in Buton and Bengkulu which found that there is a relationship between knowledge and exclusive breastfeeding.^{9,10}

In connection with exclusive breastfeeding for six months, the IEB process is one of the determining factors for its success. Breast milk production will be stimulated from an early age so that there is no more excuse for "lack of milk", or "breast milk does not come out."¹¹ However, the activity that triggers breast milk production has never been known by the informants at the location. The mother also has never received information related to colostrum. The production of breast milk in the first days of labor, known as colostrum, is relatively small, only about 1 tsp or 5 ml and a maximum of about 2.8 tsp or 13.72 ml.

Insufficient breast milk means that the milk received by the baby is really not enough, because milk production is decreasing or milk production is actually sufficient but the baby is not getting the milk he needs.¹² This is characterized by several criteria among others the mother's breast feels tense, a lot of breast milk can come out of the nipple by itself, the color of urine is clear yellow if enough milk after breastfeeding then the baby is asleep or calm for 2–3 h, or by a characteristic of baby defecation.^{13,14} The non-smooth release of breast milk on the first day after delivery can be caused by a lack of stimulation of the hormone oxytocin.¹⁵ Mothers often feel worried about the production of their milk on the first day of birth. Stress or discomfort will cause obstacles from the let down reflex, which will reduce milk production.¹²

The second themes identified were attitudes. Mother show a positive attitude, but several informants admitted that even though they thought breast milk was good for babies, they were not able to fully provide breast milk to their babies because they felt that milk production was not enough. Attitudes are influenced by personal experience, culture, other people who are considered important, mass media, educational or religious institutions or institutions, and emotional factors in individuals.¹⁶ The mother's attitude in the research location is at the level of acceptance and responsiveness and self-worth, not reached yet the characterization. In the first days after childbirth, the family thought that breastmilk is not enough, so they recommend giving breastmilk substitutes temporarily.

Another of them identified is the behavior of mothers in increasing breast milk production. An effort to fulfill nutrition by giving local vegetables like *jantung pisang* or green vegetables. It is believed that since ancient times can increase breast milk. According to reasearch, there are several foods and drinks that are believed to increase milk production, including *katuk* leaves, *banggun*-wake leaves, oatmeal, and an American herb, namely Fenugreek. *Toban-gun* leaves significantly increase milk production by triggering the release of the hormone prolactin.¹⁷ Research conducted by Zakaria found that Moringa leaf extract increases the quantity of breast milk.¹⁸ In fact, there is no special food or drink that can produce breast milk miraculously, although many people believe that certain foods/drinks will increase milk production.¹⁹

Breastfeeding at the study site was in the form of partial breastfeeding. This research is in line with research conducted in Semarang which found that the tendency of mothers not to exclusively breastfeed their babies is getting bigger, the socio-cultural

environment, education, low knowledge, and lack of support from husbands.²⁰ This can be seen from the large number of breastfeeding mothers who provide additional food or formula milk earlier as a substitute for breast milk. Various reasons put forward by mothers so that the use of breastfeeding exclusively for their babies is low, including the influence of advertising/promotion of breastfeeding substitutes, working mothers, the socio-cultural environment, education, low knowledge, and lack of support from husbands.

Conclusion

Mother's knowledge about breast milk is that breast milk is the provision of breast milk to babies. The mother doesn't know about IMD and Colostrum yet. The mother thinks there is not enough milk because there is no visible milk flowing out. Mothers are open to receiving information related to breast milk and breastfeeding. Behavior Consuming vegetables is an effort made by breastfeeding mothers to increase their milk production. The mother provides formula milk as an effort to meet the nutritional needs of the baby due to insufficient milk production. Breastfeeding at the study site was in the form of partial breastfeeding. For this reason, proper efforts are needed to increase milk production for breastfeeding mothers in this region in order to achieve breastfeeding success.

Ethical clearance

The ethical clearance of this research was based on the letter from the Ethical committee of Universitas Muslim Indonesia and Ibnu Sina Hospital, Makassar Indonesia No. 084/A.1/KEPK-UMI/VIII/2020.

Conflicts of interest

The authors declare no conflict of interest.

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