

The Relationship Between Social Support and Exclusive Breastfeeding on Housewives

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Abstract

Infant mortality rate (IMR) is one of the indicators used to determine the health status of the community, therefore many health programs are conducted to reduce IMR. One of the diseases that cause IMR is upper respiratory tract infection and diarrhea. Provision of breast milk is one thing that can prevent infants from various diseases due to infection because it has high nutritional value and content according to the needs of the baby. The study was conducted to identify patterns of breastfeeding and to analyze social support factors that influence breastfeeding patterns, ie support of husbands, family support, and support of health workers to housewives by using cross sectional design. The research was conducted in the working area of "Putat Jaya Community Health Center, Surabaya". Sampling technique using Systematic Random Sampling and Rules of Thumb with sample counted 60 responder. The result of research was prevalence of exclusive breastfeeding pattern equal to 18.3%. Multivariable analyzes showed that support of husbands, family support, and support of health workers has a significant relationship with exclusive breastfeeding ($p < 0.25$). Multivariable analysis using multiple logistic regression showed results: husband support ($p = 0.006$; OR = 28.500), family support ($p = 0.415$), and health officer support ($p = 0.690$). The research conclusion was multivariable analysis, husband support, family support, and support of health workers have a meaningful relationship with exclusive breastfeeding. Multivariable analyzes were only husbands' support who had a significant association with exclusive breastfeeding, whereas family support and support of health workers did not influence statistically.

Keywords: Exclusive breastfeeding, Husband support, Family support, Health workers support

I. INTRODUCTION

Infant mortality rate (IMR) is one of the common indicators used to determine the health status of the community, therefore many health programs that focus on reducing IMR. IMR is the number of babies who died between the birth phase and the baby less than one year per 1,000 live births. IMR can describe the socio-economic conditions of the local community because infants are the most vulnerable age group affected by environmental and socioeconomic changes (Dinkes Provinsi Jatim, 2012). Low prevalence and short duration of breastfeeding may increase the risk of morbidity and mortality infants in developing countries, particularly upper respiratory tract infection and diarrhea. Noncompliance in exclusive breastfeeding in infants can also cause nutritional disorders. Therefore, breastfeeding is one thing that can prevent infants from various diseases due to infection. Breast milk has a high nutrient content and content according to the needs of infants compared with human-made or milk derived from animals (Suhardjo, 2008).

The distribution of exclusive breastfeeding in infants 0-6 months was 58.9% in 2004, 59.7% in 2005, 64.1% in 2006, and in 2007 62.2% (BPS, 2012). Provincial With high coverage such as West Nusa Tenggara, East Nusa Tenggara and Bengkulu. East Java is a low coverage province of 49.7%. Based on East Java Health Department profile data obtained coverage of exclusive breastfeeding for 6 months at the provincial level increased by 64.08%.

The coverage is increasing compared to 2011 at 61.52%. The results are still far below the standard of exclusive breastfeeding coverage of 80% (Dinkes Provinsi Jatim, 2012). Profile of Surabaya Health Office (2015) states that coverage of exclusive breastfeeding Surabaya city amounted to 64.99%. Puskesmas with the lowest 3 coverage were Asemrowo health center (36.54%), Putat Jaya health center (37.76%) and Perak Timur Health Center (39.70%) (Dinkes Provinsi Jatim, 2015).

The coverage of exclusive breastfeeding at "Putat Jaya Community Health Center, Surabaya" is fluctuating. Coverage in February 2016 was 45% (68 people out of 151). In August 2016 it decreased to 60% (70 people out of 115 people). In February 2017 the yield rose to 61%. Most (78%) breastfeeding mothers are mothers of young age (Nutrition Clinic of Putat Jaya Community Health Center, 2016). Preliminary study conducted

at “Putat Jaya Community Health Center” in December 2016, from 15 mothers who came only 2 people who exclusively breastfeeding. Mothers who are not exclusively breastfed are mostly housewives. This study focuses on the factors that support social effect on exclusive breastfeeding in housewives. These factors include husband support, family support, and support of health workers.

II. METHODS

The type of this research was analytic observational research using cross sectional approach. Population in this research were all post partum mothers who do not work and have babies age 7 to 12 months in period of January until February 2017 which is domiciled in work area of “Putat Jaya Community Health Center, Surabaya” was 115 people. Determination of the sample size using the formula Systematic Random Sampling and Rules of Thumb so that obtained a sample size of 60 respondents. Data were collected by using questionnaires, then analyzed descriptively using frequency and percentage (Nugroho, 2014) and analytically using multiple logistic regression test.

III. RESULTS

Table 1. Distribution Husband Support, Family Support, Health Workers Support, and Breastfeeding Pattern

Variable	Low	Middle	High	Total
Husband Support	20 (33.3%)	30 (50.0%)	10 (16.7%)	60 (100.0%)
Family Support	17 (28.8%)	33 (55%)	10 (16.7%)	60 (100.0%)
Health Workers Support	21 (35.0%)	29 (48.3%)	10 (16.7%)	60 (100.0%)
Breastfeeding Pattern	49 (81.7%)	0 (0.0%)	11 (18.3%)	60 (100.0%)

Table 2. Relationships of Husband Support, Family Support, Health Workers Support with Breastfeeding Pattern

Variables		Breastfeeding Pattern		Total	P
		Partial	Exclusive		
Husband Support	Low	19 (95.0%)	1 (5.0%)	20 (100.0%)	0.002
	Middle	26 (86.7%)	4 (13.3%)	30 (100.0%)	
	High	4 (40.0%)	6 (60.0%)	10 (100.0%)	
Family Support	Low	16 (94.1%)	1 (5.9%)	17 (100.0%)	0.003
	Middle	29 (87.9%)	4 (12.1%)	33 (100.0%)	
	High	4 (40.0%)	6 (60.0%)	10 (100.0%)	
Health Workers Support	Low	20 (95.2%)	1 (4.8%)	21 (100.0%)	0.001
	Middle	25 (86.2%)	4 (13.8)	29 (100.0%)	
	High	4 (40.0%)	6 (60.0%)	10 (100.0%)	

The results of multivariable analyzes with dependent variables with a variety of freely used variables showed that the logistic regression logistic variables ($p < 0.25$) were the support of husbands, family support, and health workers support. So all the dependent variables (husband support, family support, and health workers support) have a meaningful relationship with exclusive breastfeeding.

Table 3. Summary of Multiple Logistic Regression Test Results

Independent Variable	Coefficient	p	OR
Husband Support			
High	3.350	0.006*	28.500
Middle			
Low (<i>reference group</i>)			
Family Support	-	0.415	-
Health Workers Support	-	0.690	-

Table 3 shows that family support variables and support of health personnel do not affect exclusive breastfeeding patterns because of the significance values of 0.415 and 0.690 ($p > \alpha$). Husband support variable has influence with breastfeeding pattern with p value 0.006 ($p < \alpha$). Multiple logistic regression analysis also yielded Odd Ratio (OR) values on each significant variable. The significance is that women with high husbands support levels will breastfeed with an exclusive 28.500 times greater pattern when compared to mothers with low support levels.

IV. DISCUSSION

A. Relationship of Husband Support with Exclusive Breastfeeding

Respondents in the Working Area of “Putat Jaya Community Health Center, Surabaya” were post partum mothers who were not working (Housewives) and have babies aged 7 to 12 months in the period of January to February 2017. The results of research indicate that most respondents have sufficient husband support level. The tendency of respondents with exclusive breastfeeding pattern is directly proportional to the level of support of the husband. Found some husbands who do not give support to his wife.

The results of Chi Square test showed that there is a positive relationship between husband support with exclusive breastfeeding. This research is in line with research conducted by Astuti (2010) in Serpong Community Health Center which stated that there is a positive relationship between husband's role or support with exclusive breastfeeding. Research of Kurniawan (2014) at RS Muhammadiyah Lamongan states there is a positive relationship between husband support with exclusive breastfeeding. Syahrani, et al. (2011) research in the working area of Puskesmas Jumpandang Baru-Tallo-Makassar stated that family support is the most dominant factor for exclusive breastfeeding.

Husband support is one form of social support from the environment around mothers who have a big role to the success of breastfeeding because the husband is the person closest to the mother. The most influential social support comes from the nearest mother, the nearest person is the husband. The husband's support of the wife is done by assisting the wife in the care of the baby for example when the mother breastfeeds her baby, the husband does not sleep all night. The husband follows the mother and baby, lifts the baby out of bed for feeding, changes the baby's diaper if necessary, helps the mother during feeding hours, and returns the baby to her bed when the baby has fallen asleep again. Breastfeeding father means the father always gives support to every mother to breastfeed baby. The existence of the support of the father will make the mother's heart happy so that the mother's mind calm and not stress. Husband support causes mother's psychological condition to be healthy because the creation of a comfortable atmosphere. Wives need the attention of their husbands in a process of milk production that is reflex oxytocin, because a positive mother's mind can stimulate muscle contraction around the mammary gland to drain milk into the lactiferous sinus and then inhaled by the baby.

B. Relationship of Family Support with Exclusive Breast Feeding

The result of research mentioned that most respondents have Sufficient level of family support with. The propensity of respondents with exclusive breastfeeding patterns is directly proportional to the level of family support. A small number of respondents were found who did not have family support.

The results of Chi Square test showed that there is a positive relationship between family support with exclusive breastfeeding. This research is in line with research conducted by Handayani, Halimu, and Husna in Balepanjang Village, Baturetno District. This qualitative study brings together family support factors that are less likely to affect exclusive breastfeeding (Handayani, et al., 2015). Hargono & Kurniawati (2014) research in the working area of Puskesmas Mulyorejo Surabaya stated that there is a positive relationship between family support and exclusive breastfeeding.

According to Friedman (2010), family support is attitude, action and acceptance of family to post partum mother. Family members find that supportive people are always ready to provide help and assistance if needed. Social interaction is the relationship between individual and other individuals can influence the individual, so there is mutual relationship. The families in this study were family members who lived in one house with respondents. Most of the respondents live in one house with the family. Only a small family is small. Respondents who did not live with the family claimed to have the support of the family during the phone contact or when the family visited the respondent's home. The family has support functions for postpartum mothers, such as informational support in the form of suggestions, suggestions and information to solve problems in breastfeeding. Support in the form of assessment provides motivation, praise and attention for breastfeeding mothers.

C. Relationship of Health Care Support with Exclusive Breastfeeding

The result of research mentioned that most respondents have enough family support levels. The tendency of respondents with exclusive breastfeeding pattern is directly proportional to the level of support of health personnel. Smaller respondents found no support from health workers.

The results Chi Square test showed a positive relationship between the support of health workers with exclusive breastfeeding. This research is in line with research conducted by Maineny, et al (2012) in Palu Utara Sub-district of Palu City Central Sulawesi Province. This study states that there is a positive relationship between the support of health workers with exclusive breastfeeding. Garudiwati & Mufdillah (2014) research in PKU Muhammadiyah Yogyakarta Hospital with qualitative study design states one of the factors that play an important role in the behavior of breast milk is the support of health workers. Kurniawan (2014) stating that there is a positive relationship between health care support and exclusive breastfeeding.

Support officers in this study there is support provided by health workers ranging from mothers detected pregnant until the mother did the delivery process. The health worker should always advise on the first-time provision of breastfeeding. The health worker is a key component that plays an important role in the promotion and promotion of breastfeeding, the health worker has a big share in efforts to increase breastfeeding as well as factors in society. The role of health workers during antenatal care visits between mothers and husbands can shape the mother's thinking and mother's desire to exclusively breastfeed. Health promotion conducted by health workers, prospective mothers will be promised by something very good for the baby is exclusive breastfeeding. So in the pregnancy phase, there is plenty of time for moms to think and make choices about exclusive breastfeeding.

V. CONCLUSION

Based on the result of the research, it could be concluded that 1) respondents were mostly breastfed with partial patterns and the respondents had sufficient support from their husbands, family support, and support of health workers, 2) results show a positive relationship that husband support.

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