

The Associated Factors with Breastfeeding Self-Efficacy Among Breastfeeding Women in Kalimantan Utara

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ARTICLE INFORMATION

Received: 20, August, 2023

Revised: 1, January, 2024

Accepted: 15, May, 2024

KEYWORD

Breastfeeding; Breastfeeding self-efficacy; Family support

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DOI

<https://doi.org/10.36456/embrio.v16i1.7984>

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ABSTRACT

Exclusive breastfeeding is important for the quality of children's health. Nevertheless, the proportion of exclusive breastfeeding at the Malinau City Health Center stands at a mere 45.6%, falling short of the 50% benchmark set by the World Health Organization (WHO). Nursing self-efficacy is a significant element that affects nursing behavior. This study aims to determine the factors related to breastfeeding self-efficacy. This study was cross-sectional, with a sample of 147 mothers obtained by purposive sampling. Breastfeeding Self Efficacy (BSE) is measured using the Breastfeeding Self Efficacy Short-Form. Data was analyzed using the Chi-Square test. The results showed that there was a significant relationship between breastfeeding problems (p value=0.001), family support (p value=0.001), and health worker support (p value=0.001) with breastfeeding self-efficacy. It is concluded that breastfeeding problems, family support, and health worker support were factors related to breastfeeding self-efficacy in breastfeeding mothers. Therefore, health workers and families are expected to support mothers when they have breastfeeding problems.

Introduction

The 2017 Indonesian Demographic and Health Survey (IDHS) found that 35.73% of infants aged 0 to 6 months were exclusively breastfed, according to the study by BKKBN (2017). The 2018 Riskesdas findings revealed that the rate of breastfeeding among infants aged 0 to 5 months in Indonesia was 37.3%, which falls short of the WHO benchmark of 50% (Kemenkes, 2018). This problem occurs not only at the national level but also at the district/city level. Malinau is one of the districts in the North Kalimantan Province that has low coverage of exclusive breastfeeding. Based on the health profile data of the Malinau district in 2019, only 40.2% of infants get exclusive breastfeeding.

Breastfeeding is related to the health and nutrition of infants, infants who do not get exclusive breastfeeding have a greater percentage of experiencing illness > 3 times in 6 months (Celent, 2017). Various factors have been shown to influence exclusive breastfeeding maternal education level, use of pacifier bottles, infants age category 4-5 months, baby age category six months, mother's knowledge, and mother's attitude (Bagaray, 2020; Ratu, 2020). An important and influential factor in exclusive breastfeeding is self-efficacy. Breastfeeding Self-Efficacy refers to the mother's viewpoint and beliefs

about breastfeeding her baby and estimates whether the mother chooses to breastfeed or not, how much effort is expended, whether the mother has a self-reinforcing mindset or not, and attempts to respond to adversity breastfeeding emotionally (Dennis, 2010). The study's results revealed that the higher the self-confidence of breastfeeding mothers, the more correct their breastfeeding behavior would be. However, if the mother has low self-efficacy towards her ability to breastfeed, her breastfeeding behavior will be even lower (Isyti'aroh, 2019). Mothers who have low breastfeeding self-efficacy are proven to tend to use other alternative ways to deal with breastfeeding problems, such as giving formula milk (Keemer, 2013).

Breastfeeding Self Efficacy (BSE) or breastfeeding self-efficacy certainly cannot be formed without any influence or support from outside or from within states that in choosing, carrying out, and maintaining behavior, individuals consider four sources of information, namely Performance Achievement, Vicarious Experience, Verbal Persuasion, and Physiological Responses (Dennis, 2010). Positive experience of breastfeeding: the mother will believe herself to be able to breastfeed well, but if the mother has a bad experience with breastfeeding, the chances of failure to perform exclusive breastfeeding will be greater. Mothers who have breastfeeding problems are more likely to have low breastfeeding self-efficacy compared to mothers who do not have breastfeeding problems (Titaley, 2021). In addition to experiences and problems with breastfeeding, social support is a factor that is significantly related to breastfeeding self-efficacy. The existence of verbal support from other significant others, such as family and health professionals, encourages mothers to continue breastfeeding their babies. Data on factors influencing self-efficacy, especially in North Kalimantan, is minimal, even though scientific evidence-based information is needed to plan and prepare health programs to increase exclusive breastfeeding coverage.

Method

This study is an observational design research conducted in the working region of the Malinau City Public Health Center using a cross-sectional approach. Based on the Health Profile 2020 of Malinau District, this particular public health facility in Malinau has the lowest rate of exclusive breastfeeding coverage compared to other public health centers. Specifically, it serves a total of 305 infants who are under six months old. The study population consisted of 404 mothers with infants aged 0-12 months attending the Malinau City Public Health Center. A sample of 147 breastfeeding mothers was selected using the Lemeshow formula to calculate the sample size and the non-probability sampling technique. The inclusion criteria consisted of selecting moms with infants between the ages of 0 and 12 months who had given birth to more than one child (multipara). The variables examined in this study were the breastfeeding experience, difficulties encountered during breastfeeding, the level of support from family members, and the level of assistance received from healthcare professionals.

The dependent variable in this study is Breastfeeding Self Efficacy (BSE). Data was collected through a questionnaire. Measuring the level of Breastfeeding Self Efficacy (BSE) using the Breastfeeding Self Efficacy Short-Form contains 14 statement points using a scale Likert, namely

the range 1-5. Scale 1 is used if the client feels insecure the same once, while a scale of 5 is used if the client feels very confident (Dennis, 2010). The data obtained is processed by editing, coding, data entry, and cleaning stages. Bivariate analysis using the chi-square test with a p-value <0.05

Results

The results of the respondent's descriptive data showed that of the 147 respondents, the distribution of the age group of respondents is most prevalent in the age range of 20-35 years, with a total of 113 people (76.9%). The education level of most respondents is Senior High School/equivalent, namely 49.7%. The complete data can be described as follows.

Table 1. Frequency Distribution of Infant Mothers

Respondent Characteristic		Frequency	Percentage (%)
Maternal Age	<20	4	2.7
	20-35	113	76.9
	>35	30	20.4
Occupancy	Unemployment	122	83.0
	Employment	25	2.7
Education Level	Under educated	2	1.4
	Elementary/ equivalent	21	14.3
	Yunior High School/ equivalent	23	15.6
	Senior High School/equivalent	73	49.7
	Higher Education	28	19.0
ANC	≥ 4 times	122	83.0
	< 4 times	25	17.0
Following breastfeeding class	Yes	137	93.2
	No	10	6.8
Maternal Book Record	Have	145	98.6
	Did not have	2	1.4
Breastfeeding Self Efficacy	Higher	86	58.5
	Lower	61	41.5
Total		147	100

Table 2. Results of Bivariate Analysis of the Relationship Between Independent Variables with Breastfeeding Self-Efficacy

Variable		Breastfeeding Self Efficacy				Total		P-value
		High		Low		N	%	
		f	%	f	%			
Breastfeeding experience	Good	39	65.0	21	35.0	60	100.0	0,184
	Bad	47	54.0	40	46.0	87	100.0	
Breastfeeding problem	Have no problems	60	77.9	17	22.1	77	100.0	0,001
	Unrelated to any diseases	7	31.8	15	68.2	22	100.0	
	related to any diseases/breast anatomy problems	12	52.2	11	47.8	23	100.0	
Family support	Both	7	28.0	18	72.0	25	100.0	0,001
	High	58	75.3	19	24.7	77	100.0	
	Low	28	40.0	42	60.0	70	100.0	
Health workers Support	Supportive	60	75.0	20	25.0	80	100.0	0,001
	Not Supportive	26	38.8	41	61.2	67	100.0	
Total		86	58.5	61	41.5	147	100.0	

Table 1 shows that of the 147 respondents, the majority had high breastfeeding self-efficacy (58.5%) and a history of following breastfeeding class (93.2%). Table 2 shows respondents with a high BSE, the highest proportion is those who do not have breastfeeding problems (77.9%).

The results of this study also found that mothers who had breastfeeding problems that were not related to disease (31.8%), had breastfeeding problems related to anatomic conditions (52.2%), and who had both types of breastfeeding problems (28.0%), they also have low Breastfeeding Self Efficacy. The results of bivariate analysis for breastfeeding problems and Breastfeeding self-efficacy (BSE) value = 0.001, less than p-value <0.05, means there was a significant relationship between breastfeeding problems and Breastfeeding self-efficacy (BSE). The Chi-square test also showed a significant relationship between family and health worker support and Breastfeeding self-efficacy (BSE).

Discussion

The result showed that most had high Breastfeeding self-efficacy (58.5%). The study of Kabariyah (2023) explained that Breastfeeding Self-Efficacy (BSE) could explain self-efficacy regarding maternal choices, whether to choose to continue breastfeeding (choice of behavior), maternal effort for breastfeeding, mother's mindset that affects and shapes her emotional response to breastfeeding her infants. A study stated that successful performance could increase self-efficacy and could reduce the occurrence of failure (Titaley, 2021). Mothers who have successfully breastfed their babies fully will have increasing confidence and evaluation of their efficacy. Glassman et al. (2014) found that if mothers have higher self-confidence, opportunities for exclusive breastfeeding are also higher. Reasonable confidence will make someone willing and able to learn to do things in proper behavior.

This study found that there was a correlation between having a breastfeeding problem and BSE (value = 0.001). These results are in line with the research, which stated that one of the factors associated with the level of breastfeeding self-efficacy is the problem of breastfeeding (Titaley, 2021). Challenges encountered during breastfeeding might diminish breastfeeding self-efficacy (BSE), as moms who lack determination and resilience in overcoming these obstacles are more likely to discontinue breastfeeding prematurely and transition to formula milk (Komalasari, 2016).

One of the solutions for mothers who experience breastfeeding problems is to carry out counseling with health workers to overcome breastfeeding problems. Breastfeeding counseling has been proven to help mothers choose and decide on alternative solutions to the problems they are experiencing, Mothers who get lactation counseling have better breastfeeding abilities by 3.85 times when compared with mothers who did not receive counseling (Ambarwati, 2014).

Other variables related to BSE are family support and support from health workers (value = 0.001). The support of health workers plays a vital role in the mother's self-confidence in breastfeeding because health workers are people whom mothers trust, are considered capable of providing appropriate and accurate information regarding breastfeeding, and can provide solutions to problems encountered. This study's results align with another study that states a relationship exists between health worker

support and breastfeeding self-efficacy (Nankumbi, 2019). In addition to the family, health worker support can be shown through counseling; through counseling, mothers could have a better understanding and skill in breastfeeding correctly. The better the support given by health workers, the more the success of breastfeeding will increase (Kusumawati, 2021; Kurniawati, 2020).

The support of a close family is also important. The existence of family support could increase the self-efficacy of mothers in giving exclusive breastfeeding to their infants. Without the support of the family, especially the husband, the mother will feel that she is struggling alone in breastfeeding. As a result, mothers are prone to feeling hopeless and feel that they are no longer able to breastfeed their infant, especially when mothers have to face various problems that arise during the breastfeeding process (Annisa, 2015). The findings of this study are consistent with those of another study, which found a relationship between breastfeeding mothers' self-efficacy during exclusive breastfeeding and their support network (Vitasari, 2018). The results of previous studies stated that assisting health workers in the breastfeeding process only takes place in the short term in the first month, but the support regularly continuity from family, thus family support is an important factor for a mother's continuity in breastfeeding (Gutierrez-de-Teran-Moreno, 2022)

Conclusions

It was concluded that there was a significant relationship between breastfeeding problems (p-value = 0.001), family support (value = 0.001), and health worker support (p-value = 0.001) with Breastfeeding self-efficacy (BSE) in breastfeeding mothers. Based on this, it is recommended that families and health workers continue to provide support, motivation, and information if mothers face breastfeeding problems.

References

- Annisa, L., & Swastiningsih, N. (2015). Dukungan sosial dan dampak yang dirasakan oleh ibu menyusui dari suami. *Empathy, Jurnal Fakultas Psikologi* 3(1), 16-22. <http://dx.doi.org/10.12928/empathy.v3i1.3013>
- Badan Kependudukan dan Keluarga Berencana, Badan Pusat Statistik, & Kementerian Kesehatan RI. (2017). *Survey Demografi dan Kesehatan Indonesia 2017*
- Bagaray, E. F., Langi, F. L. F. G., & Posangi, J. (2020). Determinan Pemberian ASI Eksklusif 24 Jam Terakhir Pada Bayi Umur 0 Sampai 6 Bulan Di Indonesia. *KESMAS: Jurnal Kesehatan Masyarakat Universitas Sam Ratulangi*, 9(4), 48–62. <https://ejournal.unsrat.ac.id/index.php/kesmas/article/viewFile/29484/28603>
- Celent, N., Astuti, T., & W.U, J. N. (2017). Hubungan Pemberian ASI Eksklusif Dengan Frekuensi Sakit Pada Bayi Usia 6-12 Bulan Di Wilayah Kerja Puskesmas Girisubo dan Di Puskesmas Girisubo Gunung Kidul. *Jurnal Keperawatan GSH*, 6(2), 33–39. doi: <https://doi.org/10.35890/jkdh.v9i2.150>
- Dennis, C.-L. (2010). Breastfeeding Self-Efficacy. *Mothering Transitions Research*. <http://www.cindyleedennis.ca/research/1-breastfeeding/breastfeeding-self-efficacy/>
- Glassman, M. E., McKearney, K., Saslaw, M., & Sirota, D. R. (2014). Impact of Breastfeeding Self-Efficacy and Sociocultural Factors on Early Breastfeeding in an Urban, Predominantly Dominican Community. *Breastfeeding Medicine*, 9(6), 301–307. <http://doi.org/10.1089/bfm.2014.001>

- Gutierrez-de-Teran-Moreno, G., Ruiz-Litago, F., Ariz, U., Fernandez-Atutxa, A., Mulas-Martín, M. J., Benito-Fernandez, E., & Sanz, B. (2022). Successful breastfeeding among women with the intention To breastfeed: From physiology to socio-cultural factors. *Early Human Development*, 164, 1–9. <https://doi.org/10.1016/j.earlhumdev.2021.105518>
- Isyti'aroh, I., Rofiqoh, S., & Aktifah, N. (2019). Prediktor Kegagalan Menyusui Eksklusif: Studi Di Puskesmas Buaran Kabupaten Pekalongan Jawa Tengah Indonesia. *Jurnal Keperawatan Indonesia*, 22(1), 65–73. doi: <https://doi.org/10.7454/jki.v22i1.775>
- Kabariyah, K., & Anggorowati, A. (2023). Breastfeeding Self-Efficacy di Wilayah Kerja Puskesmas Batang 1. *Holistic Nursing and Health Science*, 6(1), 12-18. <https://doi.org/10.14710/hnhs.6.1.2023.12-18>
- Keemer, F. (2013). Breastfeeding self-efficacy of women using second-line strategies for healthy term infants in the first week postpartum: an Australian observational study. *Int Breastfeed J*, 8, 18. <https://doi.org/10.1186/1746-4358-8-18>
- Kemendes RI. (2018). *Hasil Utama Riset Kesehatan Dasar Tahun 2018*. Kementerian Kesehatan Republik Indonesia. https://kesmas.kemkes.go.id/assets/upload/dir_519d41d8cd98f00/files/Hasil-risikesdas-2018_1274.pdf
- Kurniawati, N., & Kurniasari, E. (2020). Pengaruh Konseling Cara Menyusui Terhadap Pelaksanaan Cara Menyusui Pada Ibu Yang Mempunyai Bayi Usia 0-2 Minggu Di Puskesmas Ngombol. *Jurnal Komunikasi Kesehatan*, 11(1). <https://doi.org/10.56772/jkk.v11i1.158>
- Kusumawati, S. (2021). Hubungan Sikap dan Dukungan Tenaga Kesehatan dengan Keberhasilan Pemberian ASI Eksklusif Di Wilayah Puskesmas Berangas Kab.Barito Kuala. *Jurnal Keperawatan Suaka Insan (JKSI)*, 6(2), 116-120. doi: <https://doi.org/10.51143/jksi.v6i2.295>
- Komalasari, M., Solehati, T., & Widiyanti, E. (2016). Gambaran tingkat Self-Efficacy Ibu Post Seksio Sesarea saat Menyusui di RSKIA Kota Bandung. *Jurnal Pendidikan Keperawatan Indonesia*, 2(2), 95–103. <https://doi.org/10.17509/jpki.v2i2.4744>
- Nankumbi, J., Mukama, A. A., & Ngabirano, T. D. (2019). Predictors of breastfeeding self-efficacy among women attending an urban postnatal clinic, Uganda. *Nursing Open*, 6, 765–771. <https://doi.org/10.1002/nop2.257>
- Rahayu, S., Hadisaputro, S., Hidayat, S.T., Anggorowati. (2022). Characteristics and Related Factors to Breast Milk Production of Postpartum: Preliminary Study at Public Health Center of Semarang City. *EMBRIO*, 14(1), 118–125. <https://doi.org/10.36456/embrio.v14i1.5292>
- Ratu, R. E., Engkeng, S., & Adam, H. (2020). Determinan Perilaku Pemberian Air Susu Ibu Eksklusif Di Wilayah Kerja Puskesmas Kecamatan Amurang Timur Kabupaten Minahasa Selatan. *KESMAS: Jurnal Kesehatan Masyarakat Universitas Sam Ratulangi*, 9(1), 70–76. <https://ejournal.unsrat.ac.id/index.php/kesmas/article/view/28649>
- Ambarwati, R., Muis, S. F., & Susanti, P. (2014). Pengaruh konseling laktasi intensif terhadap pemberian air susu ibu (ASI) eksklusif sampai 3 bulan. *Jurnal Gizi Indonesia (The Indonesian Journal of Nutrition)*, 2(1). <https://doi.org/10.14710/jgi.2.1>
- Titaley, C. R., Dibley, M. J., Ariawan, I., Mu'asyaroh, A., Alam, A., Damayanti, R., Do, T. T., Ferguson, E., Htet, K., Li, M., Sutrisna, A., & Fahmida, U. (2021). Determinants of low breastfeeding self-efficacy amongst mothers of children aged less than six months: results from the BADUTA study in East Java, Indonesia. *International Breastfeeding Journal*, 16(1), 12. <https://doi.org/10.1186/s13006-021-00357-5>
- Vitasari, D., Sabrian, F., & Ernawaty, J. (2018). Hubungan Dukungan Keluarga Terhadap Efikasi Diri Ibu Menyusui Dalam Memberikan ASI Eksklusif. *Jurnal Online Mahasiswa (JOM) Bidang Ilmu Keperawatan*, 5(2), 201–210. <https://jom.unri.ac.id/index.php/JOMPSIK/article/view/21067>