

The Role of The Family in Increasing Exclusive Breastfeeding

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Abstract: According to the United National Children's Found (UNICEF) there are 123 countries which show that worldwide most babies have been breastfed in their lifetime, with 95% coverage of babies having received breast milk, but this figure varies quite a bit between low-, middle- and middle-income countries. high-income countries. According to data from the Performance Report of the Ministry of Health of the Republic of Indonesia in 2021, in Indonesia, 69.7 percent of infants aged less than 6 months were exclusively breastfed. While in East Kalimantan Province in 2021 as many as 66.8 percent of infants aged less than 6 months who received exclusive breastfeeding, this figure puts East Kalimantan Province still below the national figure (Performance Report of the Ministry of Health of the Republic of Indonesia, 2021). According to data from the Performance Report of the Ministry of Health of the Republic of Indonesia in 2021, in Indonesia, 69.7 percent of infants aged less than 6 months were exclusively breastfed. While in East Kalimantan Province in 2021 as many as 66.8 percent of infants aged less than 6 months who received exclusive breastfeeding, this figure puts East Kalimantan Province still below the national figure (Performance Report of the Ministry of Health of the Republic of Indonesia, 2021). This type of research uses a Literature review, which contains a description of the theory, findings and other research materials obtained from reference materials to be used as the basis for research activities (Siregar, 2019). Article search is sourced from Google Scholar. The articles used by the researchers are journals published in the last 5 years, namely 2017 to 2022, and 5 articles were obtained for review. The results of the analysis of the five articles showed that there was a relationship between family support and the success of exclusive breastfeeding. With the results that have been discussed regarding the relationship between the role of the family and the success of exclusive breastfeeding, it can be concluded that all studies state that there is a relationship between the role of the family and exclusive breastfeeding. But there are still many mothers who have not given exclusive breastfeeding, due to several factors such as age, education, and occupation. The role of the family is very much needed by the mother in caring for the baby, because it can affect the attitude and behavior of the mother when breastfeeding.

Keywords: Exclusive Breastfeeding, Family Role

Introduction

According to the United National Children's Found (UNICEF) there are 123 countries which show that worldwide most babies have been breastfed in their lifetime, with 95% coverage of babies having received breast milk, but this figure varies quite a bit between low-, middle- and middle-income countries. high income countries. In low- and middle-income countries only 4% of infants are not breastfed, then in high-income countries 21% of infants have never received breast milk. Some countries like Oman, Sweden and Uruguay almost all babies are breastfed but not in others because the rate is much lower. Another example occurs in the United States where 74% of infants have received breast milk and in Ireland only 55% of infants have been breastfed. As recommended by UNICEF and WHO, The gap is widest in West and Central Africa, where 63% of infants in the poorest families are still breastfed, compared to only 26% in the richest families. Then the gap between rich and poor is smallest in Eastern Europe and Central Asia, where the richest and poorest families have low breastfeeding rates of 23% and 31% respectively (UNICEF, 2018).

According to data from the Performance Report of the Ministry of Health of the Republic of Indonesia

in 2021, in Indonesia, 69.7 percent of infants aged less than 6 months were exclusively breastfed. While in East Kalimantan Province in 2021 as many as 66.8 percent of infants aged less than 6 months who received exclusive breastfeeding, this figure puts East Kalimantan Province still below the national figure (Performance Report of the Ministry of Health of the Republic of Indonesia, 2021).

According to Wendiranti *et al.* (2017), the risk factors for the failure of exclusive breastfeeding include breastfeeding mothers who are not supported by their husbands to do exclusive breastfeeding, greater risk of experiencing exclusive breastfeeding failure, and breastfeeding mothers who receive incorrect information from health workers at 8.06 times greater risk of experiencing exclusive breastfeeding failure. The success of breastfeeding mothers to continue breastfeeding their babies is largely determined by the support from their husbands, families, health workers, the community and the work environment. Exclusive breastfeeding for babies is not only the responsibility of the mother, husband support, families and communities as well as other related parties are urgently needed to increase the return of exclusive breastfeeding to infants. The head of the family, in this case the husband has a big responsibility to provide support.

Good family support and by doing IMD are significantly related to exclusive breastfeeding by mothers who are active at home. This shows how important family support and health workers are in breastfeeding. Therefore, this study aims to examine the relationship between family and health workers with the duration of breastfeeding in infants aged 12 months..

Results and Discussion

This type of research uses a Literature review, which contains a description of the theory, findings and other research materials obtained from reference materials to be used as the basis for research activities (Siregar, 2019). Article search is sourced from Google Scholar. The articles used by the researchers are journals published in the last 5 years, namely 2017 to 2022, and 5 articles were obtained for review.

The keywords used in the article search are the role of the family and the increase in exclusive breastfeeding. The inclusion criteria of the dependent variable of the research conducted were exclusive breastfeeding and the independent variable of the article was the role of the family. The research method uses a Cross Sectional approach, with the aim of observing the relationship between risk factors and the consequences that occur in the form of certain diseases or health conditions. The articles reviewed have been published for at least the last 5 years and the articles are published in journals that have ISSN (International Standard Serial Number or International Standard Magazine Number). The exclusion criteria used in this article do not discuss family support in the success of exclusive breastfeeding. The article search was conducted using Google Scholar and found as many as 2,800 with the keywords family role and exclusive breastfeeding. Furthermore, it is studied and studied more focused based on the role of the family in the success of exclusive breastfeeding. The article selection scheme is described by the article selection flow in the scheme:

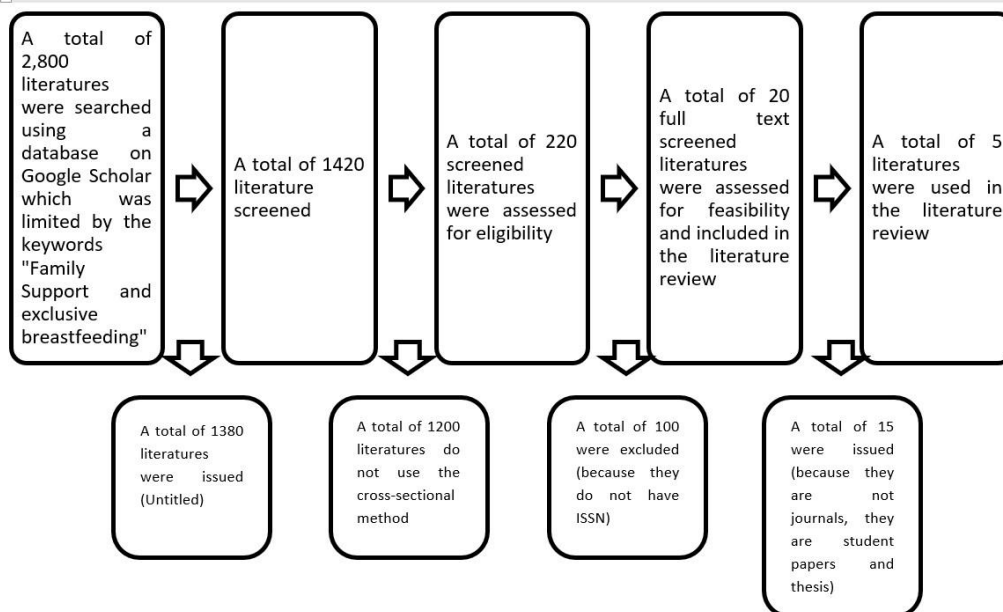


Figure 1. Literature Review Scheme

Table 1: Results of the Literature Review on the Characteristics of Respondents

Writer's name	Characteristics of Respondents		
	Age	Education	Work
Original, Jumadewi, Asri, Zulvira, Elvi. (2020)	25-29 years (40.4%), age 30-34 years (40.4%), age 40-44 years (3.5%)	High school equivalent (52.6%), and D3/S1/S2 as much as 43.9%	The majority of mothers' occupations are civil servants (45.6%)
Rambu, SH (2019)	21-30 Years (51%), 31- 40 Years (27%), 40 - 45 Years (22%)	Elementary (4%), Junior High School (26%), Senior High School (58%), Diploma (4%), S1 (8%)	Not Listed
Muthoharoh & Ningsih (2019)	>27 years old : (55.8% (55.8%) <27 years old : 19 (44.2%)	SD : 9 (20.9%) Junior High School : 6 (14%) SMA : 24 (55.8%) PT : 4 (9.3%)	Working : 26 (60.5%) Not Working : 17 (39.5%)
Hamidah (2018)	<20 yrs : 12 (31.6%) 20-35 yrs : 25 (65.8%) >35 yrs : 1 (2.6%)	Elementary school : 8 (21.1%) Junior high school : 5 (13.2%) High school : 24 (63.1%) PT : 1 (2.6%)	Working : 31 (81.6%) Not Working : 1 (2.6%)
Ramadani (2017)	Not listed	Elementary school : 7 (8.2%) Junior high school : 22 (10.6%) High school : 96 (46.2%) PT : 73 (35.1%)	IRT : 146 (70.2%) Traders : 9 (4.3%) Private Employees : 8 (3.8%) Civil servants : 36 (17.3%) Others : 9 (4.3%)

Table 2: Results of Literature Studies on Populations, Samples, Sampling Techniques, Statistical Tests

Writer's name	Population	Samples taken	Sampling Technique	Statistic test
Original, Jumadewi, Asri. Zulvira, Elvi. (2020)	57 people	57 people	Total Sampling	Chi Square
Rambu, SH (2019)	164 people	100 people	Purposive Sampling	Chi Square
Muthoharoh & Ningsih (2019)	mothers who have babies aged 7-12 months	43	Total Sampling	Chi Square
Hamidah (2018)	mothers who have babies aged 0-6 month	38	Accidental sampling	Chi square
Ramadani (2017)	mother who have babies aged >6-12 months	208	<i>multistage random sampling</i>	Chi square

Table 3: Bivariate Relationship Analysis

Writer's name	Independent Variable	Exclusive breastfeeding		P-Value
		exclusive breastfeeding	No exclusive breastfeeding	
Original, Jumadewi, Asri. Zulvira, Elvi. (2020)	play a role	91.7%	8.3%	0.000
	No role	17.8%	82.2%	
Rambu, SH (2019)	play a role	46	19	0.006
	No role	15	20	
Muthoharoh & Ningsih (2019)	play a role	22 (75.9%)	7 (24.1%)	0.011
	No role	5 (35.7%)	9 (64.3%)	
Hamidah (2018)	play a role	11 (64.7%)	6 (35.3%)	0.000
	No role	1 (4.8%)	20 (95.2%)	
Ramadani (2017)	play a role	42 (28.6%)	105 (71.4%)	0.003
	No role	5 (8,2)	56 (91.8%)	

From the five articles analyzed, it can be seen that the age characteristics of the respondents are <20 years old and a maximum of >35 years old. The more a person's age increases, the higher the maturity and strength of a person so that a person's way of thinking and working is more optimal. This will make the experience and maturity of the soul (Fauziah, 2019). Based on the results of Kurniawan's research (2013), it was found that maternal age had a significant relationship with the mother's success in giving exclusive breastfeeding. The increasing age of the mother was found to increase the failure in exclusive breastfeeding.

The average respondent has a senior high school education from the five research articles studied, there is only one article that does not include the respondent's education, namely Umar, et al (2019).

According to the job characteristics of the respondents from the five articles, there are four articles which indicate that the majority of jobs are not working. Work is not something that can prevent mothers from exclusively breastfeeding, even at work mothers can exclusively breastfeed. For example, breast milk can be given indirectly, which can be done by squeezing or pumping breast milk, then storing it for later giving to the baby (Hamidah, 2018). One of the factors in exclusive breastfeeding is the lack of facilities that support lactation in the workplace. Work is generally important and tends to be time-consuming and requires activity.

According to Hamidah (2016), in general, families in Indonesia adhere to the paternalistic type, where there is an assumption that elders must be obeyed. Family can be a very influential factor in determining individual health beliefs and values. In this case, the influence of the family, especially parents who give advice to give complementary foods to breast milk for babies, then mothers will comply with these recommendations by giving complementary foods to breast milk early on in their babies according to their beliefs that have been passed down from generation to generation. As a result, breast milk production will decrease, babies become accustomed to giving complementary foods that have less nutritional value than breast milk, thus inhibiting the growth and development of babies.

The results of the analysis of the five articles used a population of mothers who already had babies. Each baby has a different age. In the articles of Umar et al (2019), Oktalina et al (2015) and Ramadani (2017) involving respondents with babies aged 6-12 months. In the article Oktalina et al (2015) used a slightly different population, namely mothers who are members of the ASI Support Group (KP-ASI). KP-ASI is a forum for exchanging experiences, discussing and providing mutual support related to maternal and child health, especially regarding pregnancy, breastfeeding and nutrition, guided/facilitated by motivators. This is considered less effective, because not all mothers who have babies aged 6-12 months are included in KP-ASI members. The article Muthoharoh & Ningsih (2019) involved respondents with babies aged 7-12 months. The population is appropriate because it assesses mothers who have babies from the age of 6 months, meaning that it can be assessed whether mothers breastfeed exclusively or not. Meanwhile, in Hamidah's (2018) article, it involved respondents with babies aged 0-6 months. The population used in this article wanted to see if infants were given complementary foods before 6 months of age.

The sampling technique used from the five articles used Accident Sampling, Total Sampling, Purposive Sampling and Multistage Random Sampling techniques. In the articles of Umar et al (2019) and Hamidah (2018) using the Accident Sampling technique. This technique is a sampling technique based on chance, that is, anyone who coincidentally meets a researcher can be used as a sample, if it is deemed that the person who happened to be met is suitable as a data source. In the article Muthoharoh & Ningsih (2019) uses the Total Sampling technique, which is a sample that represents the total population, usually used when the population is relatively small. The assessment that the informant has knowledge is carried out subjectively based on the observations of the researcher (Sinaga, 2019).

The predetermined sample of each article has a different number. Of the five articles, there are three that have a sample size of <100, namely the first in the article Muthoharoh & Ningsih (2019), in this article it is not explained the reason for using only 43, but explains how to take the sample using the total sampling technique. In Hamidah's article (2016), it is explained that the researcher emphasizes when the measurement/observation of the independent and dependent variable data is measured at the same time, it is found that 38 samples were taken using the accidental sampling technique.

The results of the analysis of the five articles showed that there was a relationship between family support and the success of exclusive breastfeeding. This is in accordance with research conducted by Nurlinawati (2010) regarding family support for exclusive breastfeeding for infants in Jambi City, with the results that the description of family support in general partially shows an unfavorable level. The results showed that good family support was found in instrumental support and appreciation support. Instrumental support in this research is in the form of material or financial in exclusive breastfeeding. This can be seen from the available facilities and infrastructure for exclusive breastfeeding. Support for awards in this study showed mostly good. Appreciation support in this study is in the form of praise, encouragement.

The articles of Muthoharoh & Ningsih (2019) and articles of Ramadani (2017) show that respondents tend to get family support. In the article by Muthoharoh & Ningsih (2019), 35.7% of respondents who gave exclusive breastfeeding and 64.3% of those who did not give exclusive breastfeeding. In the article

Oktalina et al (2015) respondents who gave exclusive breastfeeding were 48.6% and those who did not give exclusive breastfeeding were 51.4%. In Ramadani's article (2017) respondents who gave exclusive breastfeeding were 8.2% and those who did not give exclusive breastfeeding were 91.8%.

Then the articles of Umar et al (2019) and Hamidah's (2016) articles show that respondents tend not to get family support. In the article of Umar et al (2019), 56% of respondents who gave exclusive breastfeeding and 43.7% of those who did not give exclusive breastfeeding. In Hamidah's article (2018), respondents who gave exclusive breastfeeding were 4.8% and those who did not give exclusive breastfeeding were 95.2%.

The results of the analysis of the five articles show that family support is very influential in the success of exclusive breastfeeding. Family support is needed by mothers in caring for babies. The support needed by the mother can be from her husband, parents, in-laws, siblings or other family members, if the family does not support it, it can affect the mother's attitude and behavior. If the family provides support to the mother, the mother will be motivated to take an action because of the belief that confidence, enthusiasm and intention will arise in the mother so that the mother will have a great desire to get something desired as expected, and vice versa. In an action, mothers who have a desire will be more successful than mothers who do not have a desire (Hamidah 2016). Families that provide support or support is a reflection of good family functions. Family support also cannot be separated from the function of family health care, where this function plays an important role because of how the family can maintain and maintain the health of family members so that they do not get sick and the family becomes the main supporting factor. Family support can be provided in several forms, informational support, appreciation support, instrumental support, and emotional support (Friedman, 2010). where this function plays an important role because of how the family can maintain and maintain the health of family members so they don't get sick and the family becomes the main supporting factor. Family support can be provided in several forms, informational support, appreciation support, instrumental support, and emotional support (Friedman, 2010). where this function plays an important role because of how the family can maintain and maintain the health of family members so they don't get sick and the family becomes the main supporting factor. Family support can be provided in several forms, informational support, appreciation support, instrumental support, and emotional support (Friedman, 2010).

Conclusion

With the results that have been discussed regarding the relationship between the role of the family and the success of exclusive breastfeeding, it can be concluded that all studies state that there is a relationship between the role of the family and exclusive breastfeeding. But there are still many mothers who have not given exclusive breastfeeding, due to several factors such as age, education, and occupation. The role of the family is very much needed by the mother in caring for the baby, because it can affect the attitude and behavior of the mother when breastfeeding. Therefore, families are expected to play an active role in being able to provide support to mothers in exclusive breastfeeding.

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