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## **Mother's Knowledge and Level of Family Support toward Exclusive Breast Feeding Practice**

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### **Abstract**

The low rate of exclusive breast feeding becomes a concern worldwide. This concern is related with the substantial benefit of breastfeeding. Many efforts have been done to increase the number of breastfeeding mothers through mother and infant friendly movement, rooming in program and government regulation on exclusive breastfeeding. In general this study aims to know the level of mother's knowledge and the level of social support especially husband, mother and mother in law, toward breastfeeding practice. Level of mother's knowledge about breastmilk and family support were identified in three categories which are less, average and good level Furthermore this study analyse the relation and knowledge and social support with breastfeeding practice. Through cluster random sampling, subjects were chosen from 7 public health services among 16 available in Blora district. There is 110 respondents interviewed based on questioners. Design used is Cross sectional and analysed using SPSS system. Because data on categorical variables, then the bivariate analysis use chi square in CI 95%. This research found that respondents are dominated by the mother in 20-35 years old and around 75% mothers breastfeed exclusively in the first 3 months of baby birth. There is a significant relation found between the level of mother's knowledge about breastfeeding as well as the level of partner support toward practice of exclusive breastfeeding ( $p=0.013$ ,  $p=0.017$ ).

**Keywords:** Exclusive breastfeeding; social support; breastfeeding practice.

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## 1. Introduction

Exclusive breastfeeding has been recommended worldwide. However this practice has not done well. There are so many facts that exclusive breastfeeding not only gives some benefit to babies but also toward the mothers. Babies who breastfeed exclusively will be protected from respiratory infection, diarrhoe, asthma and some allergist. The risk of sudden death infant syndrome was reported decrease among the breastfeed babies [1]. Evaluation done by UNICEF found that among 139 countries, only 20% of it practices exclusive breastfeeding of 50%. Only 15.3% breastfeed exclusively [2]. Many researches show that there are many barriers related with exclusive breast feeding practice. Some of them are lack of knowledge related with breastfeeding management, low level of social support toward breastfeeding mothers and return to work before 6 months of labor [3]. Increasing of knowledge through health education may build the confidence of mothers during breastfeed. Demitras [4] said that self-confidence of mother is one of increasing factor for supporting exclusive breastfeeding. Other support to be success in breastfeeding exclusively are social and family support [4]. Research in Canada found that 90.6% partner supporting mother during breast feed their baby but only 40.8% and 21.8% respectively mother and mother in law supporting woman in breastfeeding [5]. Some specific research related to partner in supporting mother during breast feeding already done in Indonesia. But this research different in the depth of measuring support scale. In measuring level of support this study content of 3 categories (less supporting, average supporting , good supporting). Compared with some previous research which is only 2 categories (not supporting and supporting). Furthermore research regarding mother and mother in law support toward breastfeeding practice has not done more. The limitation of this study is identifying the level of mother's knowledge about exclusive breastfeeding and the level'support of husband, mother and mother-in-law toward breastfeeding practice. So the goal of this research is to understand the level of mother's knowledge about exclusive breastfeeding and breastfeeding support from partner, mother and mother-in-law.

## 2. Method

This study used *cross sectional* method. This research done in 16 public health services in Blora. The goal of this study is to know the level of mother's knowledge regarding breastfeeding and social support in relation with breastfeeding practice. Cluster random sampling was used in this study. One hundred and ten samples were drawn from 7 Public Health Services in Blora. The key informants in this study was 3-12 month breastfeed mothers. This research was conducted on October 2015. Ethical clearance was gain from the ethic committee of Health Polytechnic of Semarang. Questionnaire which used to collect data was given to the respondents by enumerators. Twenty yes no questions about breastfeeding has 20 score. Furthermore it was categorized to be less (<50%), average (51-70%) and good (>70%). Therefore the social support level was divided in three categories which are less supporting (< 50%), average supporting (51-70%) and good supporting (>70%). Then data was tabulated and processed using SPSS 13 version and analyzed in chi square technique.

## 3. Results

Respondents characteristic was identified to describe possible factors influencing breastfeeding practice. It can be seen from table 1 that the mother in this study was dominantly in 20-35 years old.. The number of mother in

the four levels of education is dominated by senior high school level (47.3%) and junior high school (32.7%). Table 1 also shows that almost all respondents are housewives (82.7%) which are 91 mothers from 100 mothers.

**Table 1:** Characteristics respondents, level of breastfeeding knowledge, support level toward breastfeeding practice (husband, mother and mother-in-law)

Variable		Frekuensi (n)	Prosentase (%)
Age	< 20 tahun	7	6.4
	20-35 tahun	93	84.5
	>30 tahun	10	9.1
Education	Elementary	19	17.3
	Junior High School	36	32.7
	Senior High School	52	47.3
	University	3	2.7
Occupation	Farmer	8	7.3
	Private employee	8	7.3
	Bussiness	2	1.8
	Goverment employee	1	0.9
	Housewife	91	82.7
Level of Breastfeeding knowledge	Less	8	7.3
	Average	32	29.4
	Good	69	63.3
Husband's Support	Less	14	12.7
	Average	79	71.8
	Good	17	15.5
Mother's Support	Less	16	14.5
	Average	70	63.3
	Good	24	21.8
Mother in law's Support	Less	26	23.6
	Average	63	57.3
	Good	21	19.1

Regarding of the independent variables, this research found that more than 90% respondents are in an average and a good level of breastfeeding knowledge (29.4% and 63.3% respectively). The level of knowledge is drawn from 20 yes no question, content of how important breast milk for the baby, benefit of breastfeed for the mother, psychological effect of breastfeeding and economical advantage of breastfeeding. Good level knowledge is defined when > 70% questions were well answered by respondents. Mothers are in less level of breastfeeding knowledge when they only give well answer in < 50%. Whereas among 50-70% is an average breastfeeding

level. This category is also used to divide the level of husband, mother and mother in law support toward breastfeeding mother. This research reveals that 71.8% husbands give an average support and 15.5% gave a good support to breastfeed mothers. Furthermore there is quite similar level in both mother and mother-in-law regarding breast feeding support (63.3% and 57.3% are in average level). Good support is only 21.8% and 19.1% (mother and mother-in-law respectively). Whereas around 20% of them gave less support to mother during breastfeed period.

**Table 2:** Cross tab of breastfeeding knowledge level

Knowledge	Type of breast feed		Total
	Not exclusive	Exclusive (3 months)	
Less	5	3	8
Average	4	28	32
Good	18	51	69
Total	27	82	109

$X^2 = 8.761$   $P = 0.013$

It can be seen from the table 2 that the more mother in a good level of breastfeeding knowledge the higher number in percentage of exclusive breastfeeding (51 mother breastfeed exclusively from 69 mothers in good level of breastfeeding knowledge). Furthermore there is a significant relation between level of breastfeeding knowledge with exclusive breastfeeding practice ( $p=0.013$ ).

Good support of husband also contributes to the number of exclusive breastfeeding mother. This research shows that 73.9% mothers in husband good support level were practicing an exclusive breastfeeding, therefore 87.5% mothers who receive average level of support from husband practicing exclusive breastfeeding as well. When less support given by the husband, it is only 37.5% mother practicing exclusive breastfeeding. Table 3 shows that there is a significant relation between husband support with exclusive breastfeeding practice ( $p=0.017$ ). On the other hand this research found that support of mother and mother-in-law do not have significant relation with an exclusive breastfeeding practice ( $p=0.588$ ,  $p=0,167$ )

**Tabel 3:** Cross tab of husband support related with exclusive breastfeeding practice

Support	Type of breast feed		Total
	Not exclusive	Exclusive (3 months)	
Less	5	3	8
Average	4	28	32
Good	18	51	69
Total	27	82	109

$X^2 = 8.101$   $P = 0.017$

## **4. Discussion**

### ***4.1. Characteristic of respondent***

Age of respondents was divided in three categories based on reproductive health according WHO. The best age for reproductive health is 20-35 years because in this age mother in both physically and psychologically health. In relation with breastfeeding practice healthy condition will support breastfeeding activities. It is proven by Pechlivani and his colleagues that all who found the significant relationship between age of breastfeed mother with how success breastfeeding. It happens because in the age range of young adult the body is functioning well and working optimally. This condition reduces difficulties of breastfeeding [6].

Education level of respondents were identified in this research because one of variable in this research is knowledge, which usually has strong relationship with education. The author in [7] stated that the higher the education the bigger of motivation in looking for some information and using it. Therefore in relation with health education, an educated person is easier to receive knowledge rather than uneducated person. Eighty percent of respondents are in junior and senior high school levels. This percentage is relative linear with the percentage of exclusive breastfeed mothers (75.5%).

### ***4.2. Relation of mother knowledge with exclusive breastfeeding practice***

This research identified the level knowledge of mother regarding breast milk and exclusive breastfeeding. From 20 questions around the functions, benefits, advantages of breastfeeding toward mother and baby, 63.3% mothers are in good level of breastfeeding knowledge. They answer 50%-70% questions well. This ability in understanding breastfeeding has a relation with the number of exclusive breastfeeding mothers ( $p=0.013$  at  $\alpha=0.05$ ). This finding is proven by author in [8] who noted that one of many factors influencing exclusive breastfeeding practice is the mother's knowledge about breastmilk and exclusive breast feeding. A significant changes of attitude toward practice breastfeeding is also found in a group mothers who receive health education about the benefit of breast milk [9]. Author in [7] said that when somebody has attitudes toward object, they tend to behave according the object.

### ***4.3. Relation of social support with breastfeeding practice***

Table 3 shows that 12.7% husbands give less support to mother during breastfeed. It means 87.7% provide support in average and good levels. This research result in a significant relation between husband support with the type of breastfeeding which is exclusive (3 moths) and not exclusive ( $p$  value = 0.017 at CI 95%). Author in [10] said that husband and family can participate actively in supporting mother during breast feed the baby through preserve emotional and practical supports [10]. Related with involving husband and family in supporting mother during breastfeed period, they need to get knowledge about the benefit of breastmilk, lactation management and many difficulties in breastfeeding as well [11]. Because attitude which can gets from knowledge will influence behavior [7]. Support needed by mother from the partner during breastfeed period is physical and physiological support. The most important support as a key success in breast feeding exclusively is caring husband [11]

Support given by mother and mother in law do not have significant relation in this research ( $p=0.558$  and  $p=0.176$  at  $\alpha=0.05$ ). It may be because some of mothers do not stay with their mothers or mother-in-law.

## **5. Conclusion**

There is a relation in mother's knowledge of breastfeeding with exclusive breastfeeding practice in this research because chi square analysis found  $p < 0.05$  (0.013). Husband support as other independent variable is also has significant relation with 3 months exclusive breastfeeding practice ( $p=0.017$ ). Family support especially from mother and mother-in-law do not influence mother in practicing breastfeeding to the baby ( $p=0.588$  and  $p=0.176$ ). So it is recommended to increase the mother's knowledge about breastmilk and breastfeeding management through health education or branding breast milk as replaceable milk for the baby. Other recommendation from result of this research is increasing of understanding partner in supporting both psychological and practical.

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