



Relationship of Mother's Knowledge and Family Support with Early Initiation of Breastfeeding Implementation in Post Partum Mothers

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Abstract

In the first hour following delivery, the infant should be breastfed immediately, which is known as Early Initiation of Breastfeeding (IMD). Breastfeeding within the first hour of life may help to minimize infant deaths from pneumonia, diarrhea, and hypothermia, among other causes. At the Watampone Health Center, the goal of this research was to discover if there was a link between maternal knowledge and family support and the implementation of early beginning of breastfeeding for postpartum moms. Research methods employed in this study include quantitative research using a cross-sectional design and a questionnaire. The sampling strategy used was purposive sampling, and a total of 45 postpartum moms were included in the study. The investigation was carried out at the Watampone Health Center. Using a paired t test, the researchers discovered that there was no relationship between maternal knowledge and the implementation of early initiation of breastfeeding in postpartum mothers (P value = 0.527), but that there was a relationship between family support and the implementation of early initiation of breastfeeding in postpartum mothers (P = 0.047). The let-down reaction is controlled by the emotional state or sentiments of the mother, and the smoothness of the let-down reflex is determined by the smoothness of the family. Improve services by giving counseling, particularly to parents and spouses, in order to provide guidance, as well as inspiration to women about the necessity of starting breastfeeding as soon as possible.

Introduction

It is recommended by the World Health Organization (WHO) that mothers begin nursing their children as soon as possible and continue to breastfeed exclusively for a maximum of six months in order to promote optimum growth, development, and health for their children (Habicht, 2004). The findings of a meta-analysis including 63 poor countries found that IMD may reduce illness and mortality in neonates (Oddy, 2013).

In Indonesia, the percentage of children aged 0-23 months who engage in IMD is 58.2 percent; of this proportion, only 15.9 percent engage in IMD for less than one hour (Kemenkes, 2018). Neonatal mortality due by pneumonia, diarrhea, and hypothermia may be prevented if babies are breastfed during the first hour of life (Ekubay et al., 2018).

The use of only breast milk is very significant in the improvement and maintenance of the health of the newborn. IMD is one of the characteristics that encourages exclusive breastfeeding to be practiced (Ariyani & Handayani, 2015).

Knowledge may help form a certain belief, and then a person can act in accordance with that view. The understanding of IMD among mothers is associated with the implementation of IMD

in Kenya (Boor et al., 2018). Having awareness of IMD increases a mother's likelihood of performing IMD by 6.1 times (Seid, 2014). It also serves as an excellent support system, particularly when coping with family health issues. Support and assistance may be provided to moms throughout the nursing process by their partners and relatives. Mothers are provided assistance in recognizing when their child is ready to nurse and in providing assistance to the child if necessary (Adiesti & Diana, 2016).

Methods

This study used a quantitative approach using a cross-sectional design. This investigation was done between November and December 2019 at the Watampone Health Center, Bone Regency. This research included all postpartum women who worked at the Bone Regency's Watampone Health Center. The research sampled all postpartum moms who were enrolled at the Watampone Health Center at the time of the study, resulting in a total sample size of 45. Purposive sampling was used with inclusion criteria that included postpartum women who were willing to reply, mothers who gave delivery naturally without indications or complications, and infants delivered with normal weight and without hypoxia. Utilizing a questionnaire to collect data on respondent characteristics, family support, mother's understanding and implementation of IMD. Validity and reliability of the questionnaire have been shown. The SPSS software was used to examine the study data. The Chi Square statistical test with a 95 percent confidence level ($= 0.05$) was used.

Results and Discussion

Table 1. Characteristics of Respondents in Post Partum Mothers

Variable	n %	
Age		
< 20 years	2	4.4
20-35 years	36	80
> 20 years	7	15.6
Education		
Basis	19	42.2
Intermediate	14	31.1
Tall	12	26.7
Work		
Work	8	17.8
Not Working	37	82.2

Source: Primary data

Table 1 shows that most of the respondents aged 20-35 years are 36 respondents (80%), basic education level (SD/SMP) are 19 respondents (42.2%) and 37 respondents are unemployed (82.2%).

Table2. Mother's knowledge of the implementation of IMD

IMD Knowledge	Do IMD		Do not IMD		Total		P Value
	N	%	n	%	n	%	
Less	14	31,1	2	4,4	16	35,6	0,527
Good	27	60,0	2	4,4	29	64,4	
Sum	41	91,1	4	8,9	45	100	

Source: Primary Data

In accordance with Table 2, respondents who have less expertise and conduct IMD may account for as many as 14 participants (31.1 percent). It is possible to have as many as 27

responses (60.0 percent) who have strong knowledge and do IMD, and as few as 2 respondents (20.0 percent) who do not (4.4 percent).

According to the Chi-Square test, the probability of being correct is 0.527%. This results in a significance level greater than 0.05. Thus, there is no association between a mother's awareness of IMD and her ability to execute it.

Table 3. Family support for IMD implementation

Family Support	Do IMD		Do not IMD		Total		P Value
	n	%	n	%	n	%	
Support	30	66,7	1	2,2	31	68,9	0,047
Not supportive	11	24,4	3	6,7	14	31,1	
Sum	41	91,1	4	8,9	45	100	

Source: Primary Data

The respondents who got family assistance and participated in IMD numbered as many as 30 respondents (66.7 percent), whereas respondents who did not participate in IMD numbered as little as 1 respondent (Table 3). (2.2 percent). Meanwhile, the number of respondents who did not get family assistance and participated in IMD reached as high as 11 respondents (24.4 percent), while the number of respondents who did not participate in IMD reached as high as 3 respondents (14 percent) (6.7 percent). The chi square test resulted in a p value of 0.047 when performed. In this case, the p value was less than 0.05. This implies that there is a link between family support for IMD implementation and the execution of the program.

Knowledge is defined as all that is known as a result of the experiences that every human being has had. As a result, the more information someone has, the more likely it is that they will cultivate a good attitude. Education, age, experience, environment, parity, and information sources are some of the elements that influence a person's level of knowledge (Mubarak, W.I., 2011).

This indicates that there is no association between mother's knowledge and the application of IMD at the Watampone Health Center based on the findings of the chi square test analysis (P = 0.527). This is due to the fact that the majority of respondents had an elementary or junior high level of education (42.2 percent). The greater the degree of education someone has, the simpler it is for them to acquire information, and as a result, the amount of knowledge they have increases. For those who do not have a high degree of educational attainment, it will be difficult for them to establish a positive attitude toward obtaining knowledge and new values (Mubarak, 2011).

Its findings are consistent with Carlina's research, with the exception of the results of the "Fisher's Exact Test" statistical test, which obtained a p-value of 0.341, indicating that there is no relationship between mother's knowledge and the implementation of IMD in three health centers in West Jakarta (Carlina & Pambudi, 2018). In contrast to Notoatmodjo's hypothesis, which states that conduct based on knowledge will be more durable than behavior based on ignorance, the findings of this research indicate that the opposite is true (Latuharhary et al., 2014; Rosyid & Sumarmi, 2017).

It is social help that the family believes may be acquired or offered for the family that is referred to as "social support." Social support may or may not be used, but family members have the impression that helpful individuals are always there to lend a hand and give aid when required.

The findings revealed that P = 0.047. As a result, P is less than 0.05. This implies that there is a link between family support for IMD implementation and the execution of the program. When the findings of this study are compared to those of Adiesti & Diana's research, Madiun

Regency, they show that there is a significant association between family support and the implementation of early commencement of breastfeeding in postpartum moms ($p = 0.02$) (Adiesti & Diana, 2016).

Women who are pregnant or who are nursing want both educational and emotional support from their family in order to begin breastfeeding as soon as possible. One of the aspects that determine whether or not a woman will be successful in nursing is her family's support, which increases her self-confidence. Another factor that influences the smoothness of the let-down reaction is the mother's emotional state or emotions, which are greatly impacted by her emotional state or feelings. Support may take several forms, including delivering information, expressing emotion, and offering assistance (Imd et al., 2021)

Conclusion

It can be concluded, based on the study that has been conducted, that there is no association between maternal knowledge and the implementation of early commencement of breastfeeding in postpartum women at Watampone Health Center. The adoption of early commencement of breastfeeding for postpartum women at the Watampone Health Center is also associated with maternal knowledge, as shown in the previous study. It is hoped that every health worker, family, and other related parties will increase the provision of information about the importance of early initiation of breastfeeding, resulting in an increase in knowledge about early initiation of breastfeeding and its implementation that continues to improve.

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