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Efikasi Diri Ibu Primigravida yang Bekerja dalam Keberhasilan Memberikan ASI

Self-Efficacy of Primigravida Working Mothers in the Success of Breastfeeding

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ABSTRACT

Background: Self Efficacy of breastfeeding greatly affects the achievement of exclusive breastfeeding so that makes the success rate of exclusive breastfeeding in nursing mothers is high. For first-time mothers to give birth and breastfeed their babies (Primigravida) and are at work, identification of the level of self-efficacy of breastfeeding becomes an influential thing. Time constraints, work fatigue, and psychological factors are some of the factors that influence one's level of confidence in doing something. Objective: The purpose of this study is to analyze the Self Efficacy of Primigravida working mothers in the success of breastfeeding. Method: This study used a qualitative design with a phenomenological approach. Data collection was carried out by using in-depth interviews and interview guidance instruments. In-depth interviews were conducted with six informants, namely Primigravida mothers who were still actively working and had children aged 0-6 months. Results: The study showed that the Self Efficacy in the informants was classified as insufficient. This is proven by the fact that of the six informants, none succeeded in giving breast milk for up to six months, they only succeeded in giving breast milk for less than one month. Working mothers experience several problems such as work fatigue and stress that affect the of breast milk, and there is a perception that inadequate milk can affect the success of breastfeeding. Psychological factors of mothers who are less supportive to give exclusive breastfeeding are one of the factors that influence one's level of confidence in doing something. Conclusion: The failure of breastfeeding for up to six months is influenced by several factors namely inadequate Self Efficacy, working mothers who experience fatigue and stress, poor milk production, limited information obtained and fear of fussy babies.

Keywords: Self-efficacy, Primigravida, Working mothers, Breastfeeding.

ABSTRAK

Latar Belakang: Efikasi diri dalam menyusui memengaruhi keberhasilan dalam meningkatkan capaian ASI eksklusif pada ibu. Bagi ibu yang baru pertama kali melahirkan dan menyusui (Primigravida) serta bekerja, identifikasi tingkat efikasi diri sangatlah penting. Keterbatasan waktu, kelelahan kerja, dan faktor psikologis merupakan beberapa faktor yang memengaruhi tingkat kepercayaan diri seseorang dalam melakukan sesuatu. Tujuan: Penelitian ini bertujuan untuk menganalisis efikasi diri ibu primigravida yang bekerja dalam keberhasilan pemberian ASI. Metode: Penelitian ini menggunakan desain kualitatif dengan pendekatan fenomenologi. Pengumpulan data dilakukan dengan menggunakan wawancara mendalam dan instrumen pedoman wawancara. Wawancara mendalam dilakukan terhadap enam informan yaitu ibu primigravida yang masih aktif bekerja dan memiliki anak usia 0-6 bulan. Hasil: Hasil penelitian menunjukkan bahwa efikasi diri informan masih kurang. Hal ini dibuktikan dengan fakta bahwa tidak ada informan yang berhasil memberikan ASI sampai dengan enam bulan, mereka hanya berhasil memberikan Air Susu Ibu (ASI) kurang dari satu bulan. Ibu yang bekerja mengalami beberapa masalah, seperti kelelahan kerja dan stres yang memengaruhi produksi ASI dan adanya persepsi bahwa ASI yang tidak mencukupi dapat memengaruhi



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keberhasilan pemberian ASI. Faktor psikologis ibu yang kurang mendukung dalam memberikan ASI Eksklusif merupakan salah satu faktor yang memengaruhi tingkat kepercayaan diri seseorang dalam melakukan sesuatu. **Kesimpulan**: Kegagalan pemberian ASI selama enam bulan dipengaruhi oleh beberapa faktor yaitu tingkat efikasi diri yang kurang, kelelahan dan stress yang dialami ibu bekerja, produksi ASI yang kurang baik, keterbatasan informasi, dan ketakutan pada bayi rewel.

Kata Kunci: Efikasi diri, Primigravida, Ibu Pekerja, Menyusui

INTRODUCTION

One of the targets to be achieved in SDGs (Sustainable Development Goals) goals is to stop all forms of malnutrition in order to create qualified Human Resources (HR) that must be started early, especially with the provision of breast milk (Kementerian Kesehatan RI, 2015). World Health Organization (WHO) stated that exclusive breastfeeding is providing only breast milk without any food and other drinks, excluding drugs and vitamins, to the baby from birth until the age of 6 months and continued until the baby is 2 years old (Zehner, 2016). Breast milk can be given directly by breastfeeding to the mother or by pumping the milk (Kementerian Kesehatan RI, 2015).

Breastfeeding or known as ASI in Indonesia (abbreviation of Air Susu Ibu) is very beneficial for the baby and also the mother. Breast milk contains antibodies that protect babies from bacterial, viral, fungal, and parasitic infections, increase the intelligence of babies, avoid allergies that usually arise due to consumption of formula milk, babies feel the mother's love directly during the breastfeeding process, and when growing up, will reduce risk for developing hypertension, cholesterol, overweight, obesity and type 2 diabetes (Qudriani and Latifah, 2018). Besides being beneficial for infants, breast milk is also very beneficial for mothers including natural contraception, reducing the risk of developing breast cancer and helping mothers to establish an inner bond with the child (Rahayu, 2018).

Based on data from the Central Statistics Agency (BPS) in 2018, the number of infants in Indonesia aged 0-6 months who received exclusive breastfeeding only amounted to 49.51% (BPS, 2018). This indicates that only half (49.51%) of infants under 6 months had

exclusive breastfeeding. The median duration of exclusive breastfeeding is three months (BKKBN, 2017). The percentage of exclusive breastfeeding decreases with age, from 67% at 0-1 months to 55% at 2-3 months and 38% at 4-5 months (Kemenkes RI, 2017).

percentage of exclusive breastfeeding in infants aged 0-6 months in East Java Province in 2015 was 68.8%, decreased in 2016 to 50.51%, and in 2017 number increased to Furthermore, the percentage of exclusive breastfeeding in Surabaya was 64.99% in 2015, 65.1% in 2016 and increased again in 2017 to 71.53% (Dinas Kesehatan, 2018). Despite the increase, percentage of exclusive breastfeeding in Surabaya is still below the target set at 80%. The number of exclusive breastfeeding in Pacar Keling Health Centre is low compared to the other 63 public health centers Surabaya which only reaches the number 57,71% (Dinas Kesehatan, 2018).

Exclusive breastfeeding has not been fully implemented due to parity and working mothers. For Primigravida mothers who breastfeed their babies, in addition to knowledge about breastfeeding, identification of the level of Self-efficacy becomes an important thing in significantly influencing the process of breastfeeding (Kurnianingtyas, 2017). Moreover, the factors for the failure in breastfeeding are parity and working mothers. Time constraints and work fatigue might affect the production of breast milk to be low and the perception of breast milk inadequacy arises. This phenomenon can occur due to psychological factors that providing unsupportive in exclusive breastfeeding. Psychological factor is one of the factors that influence a person's confidence in doing something level of (Ayton et al., 2016).



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Self-efficacy or self-confidence describes a person's confidence in his ability to take action in order to achieve the expected results (Rahayu, 2018). Self-efficacy holds an important role in providing exclusive breastfeeding (Devriany, Wardani and Yuniar, 2018). Self-efficacy in breastfeeding influences the process of exclusive breastfeeding, therefore related to the success rate of exclusive breastfeeding higher in nursing mothers (Fitriani, Wahyuningsih and Haryani, 2016).

Previous research that showed a factor that was proven to influence exclusive breastfeeding was the high Self Efficacy possessed by nursing mothers (Santosa *et al.*, 2019). The study was supported by other studies that stated those postpartum mothers who had high self-efficacy gave breast milk longer than mothers with low efficacy (Rahayu, 2018). The purpose of this research is to Analyze the Self Efficacy of Primigravida working mothers in the success of breastfeeding.

METHODS

This study was a qualitative research and used phenomenological approach to explain the in-depth picture of the self-efficacy of Primigravida working mothers in breastfeeding their babies. The six participants who were

willing to take part in this study were Primigravida working mothers who had babies aged 0-6 months and were still breastfeeding them. The data was collected by in-depth interviews using interview guidance. Triangulation was carried out for parents of informants and also health workers at Pacar Keling Health Centre Surabaya. The data analysis of this study is conducted by making interview transcripts and rereading, determining the meaning, arranging the meaning, combining the results of the themes, formulating a description, followed by validating the description. The research ethics permit was granted by the Faculty of Dentistry, Airlangga University on September 26th, 2019.

RESULTS AND DISCUSSION

Participants in this study were six Primigravida working mothers who were breastfeeding and had completed their maternity leave. The characteristics of the participants are presented in Table 1. From Table 1, it can be seen that the age range of participants is 19-29 years; all informants work as private employees; the educational background of four participants is high school, one Diploma and one Bachelor; the age of the informants' children are 3.5 - 6 months.

Table 1. Characteristics of the Informants based on age, occupation, education and age of the child.

Informant	Age	Occupation	Education	Age of the Child
Α	23	Employees	High school	4 months
В	25	Employees	High school	3.5 months
С	27	Employees	Bachelor	5 months
D	19	Employees	High school	3.7 months
Ε	29	Employees	DIII	6 months
F	22	Employees	High school	4.3 months

Knowledge on exclusive breastfeeding

From the findings of research, it can be seen that mothers who do not give exclusive breastfeeding have limited knowledge about exclusive breastfeeding. Moreover, the average informant claimed have heard about exclusive breastfeeding. However, all mothers who claim to have heard about exclusive breastfeeding can only explain about exclusive breastfeeding with their own language and perspective. Although they cannot explain it in full, they know that exclusive breastfeeding only gives breast milk until the baby is six months old.

"Giving the baby breast milk up to 6 months" (informant A)

"Only giving breasts milk for 6 months and no other meals." (informant B)

"6 months long of just breast milk." (informant F)

The lack of knowledge of the mothers can also be seen from how all the breastfeeding mothers who give formula before the baby is six months



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old. The results showed that most informants had given formula starting at the age of the baby less than one month. This action is caused by the fear that the breast milk is not enough and babies become fussy because they are still hungry.

Knowledge is an important factor in the process of exclusive breastfeeding, this is consistent with the study conducted which stated that there was a significant relationship between the level of knowledge of mothers with exclusive breastfeeding in the working area of Kokap 1 Health Centre in Progo, Yogyakarta (Listyaningrum and Vidayanti, 2016). Research conducted in the working area of the Darussalam Meddan Petisah Health Centre showed p = 0.005 or <0.05, this means that there is a relationship between knowledge and the success of exclusive breastfeeding (Juliani and Arma, 2018).

The lack of informant knowledge in this study turned out to be very reasonable, when the writer asked whether they have ever participated in counseling, almost all informants said that they had never attended counseling on exclusive breastfeeding. Several informants claimed to have been counseled individually but only once during the pregnancy check-up. However, during the private counseling, the informants were only reminded that the baby should be breastfed, because according to the midwife it is good for the baby. This is by following Snehandu B. Karr's Behavior theory states that behavior will be influenced by the presence or absence of health information or health facilities (accessibility information) (Martha et al., 2016).

Modeling (Imitating)

Bandura mentioned that there are several factors that can affect a person's level of confidence; one of them is modeling (imitating) (Tuthill *et al.*, 2016). The majority of informants get the basic knowledge about breastfeeding from their mothers or their friends who have already had children. The following is the statement conveyed by the informant:

"My mother-in-law is my role model in breastfeeding. She has 5 children and none of them were given baby formula." (informant A) My co-worker gave full breast milk, no formula, and her baby is fat and healthy." (informant C)

"My mom's relative can fully breastfeed her kids." (informant D)

The desire to imitate is the desire of the mother to provide exclusive breastfeeding obtained from looking at the environment that can affect her intention. The person closest to the mother is the strongest source of encouragement to the mother in giving exclusive breastfeeding (Kurnianingtyas, 2017). In a previous study, the majority of respondents supported the desire to imitate, that the success of others made give want to exclusive breastfeeding (Yusrina and Devy, 2018). The experiences of others can be good lessons and can be an individual reference for making decisions about actions (Isyti'aroh and Rofigoh, 2017).

The majority of informants said the experiences of others affected their views on breastfeeding, and only one informant said that they had no effect.

"It's not that influential to me. I think breastfeeding is personal and not all mothers are the same." (informant A)

The results of the study showed that most of the mothers said imitating experience of someone the who succeeded exclusive in giving breastfeeding influence on their decision to breastfeed, but in fact none of the informants breastfeed their babies for up to six months. The result of modeling (imitating) as unrelated to the practice of exclusive breastfeeding is supported by the behavioral theory proposed by Bandura (1997), namely Social Learning Theory (Bandura, 1997). This theory explains that human behavior is a continuous mutual interaction between cognitive, environmental, and behavioral factors.

The behavior of working mothers in giving exclusive breastfeeding is not only influenced by cognitive factors, but also environmental factors. Environmental factors are not just support provided by coworkers, rather includes examples provided by coworkers (modeling). This theory suggests that a person adopts



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behavior by observing, then considering and deciding to imitate so that it becomes his own behavior (Morin and Bellack, 2015).

Social Persuasion (Information)

Social persuasion happens when someone tells an individual that they can complete a task successfully. The general forms verbal of persuasion are encouragement, coaching, and providing performance feedback (Komalasari, Solehati and Widianti, 2017). Verbal persuasion or information also influences Self-efficacy. Information can increase knowledge and knowledge will shape attitudes and behavior (Isyti'aroh and Rofiqoh, 2017). The results of the study stated that verbal encouragement of breastfeeding mothers can be obtained from parents, health workers, friends, relatives, and neighbors.

"Cadres always encourage me to conciseness always give ASI, as well as my mother-in-law, coincidentally the mrs. Hida cadre house is right in front of my house, so it's more frequent and easier to ask questions about breastfeeding." (informant A)

"I suppose it's my sister who frequently reminded me to breast feed, my friends also said that exclusive breastfeeding is better for the baby." (informant B)

"Sometimes my mom or other relatives, but it's still hard because I have a job" (informant E)

Support and encouragement from others are accompanying factors that can strengthen one's behavior (Listiani, Irasanti and Nurhayati, 2019). The form of support provided to mothers includes information related to breastfeeding and also the correct way to breastfeed.

Information support is the support that breastfeeding mothers receive from others in the form of advice, guidance, and information that can be used to overcome the problem in exclusively breastfeeding their babies. Postpartum mothers express the importance of information in preparing to give breast and to maintain exclusive breastfeeding, especially for voung mothers with first experience of having a baby. Some informants said that he had obtained information about exclusive breastfeeding and breast milk since pregnancy (Aryotochter, 2016).

Support from others can be a motivation especially if the support comes from the closest people such as the family. Other studies have found that family support can make a person decide to give exclusive breastfeeding to mothers after a C-section (Isyti'aroh and Rofiqoh, 2017). However, this research is not in accordance with the results of this study. The results of this study found that the support of those closest to the family was not influential enough to make the mother decide to give breast milk exclusively.

There are many factors on why mothers unable to give breast milk for up to six months, namely low breast milk production, inadequate milk and fussy babies. They argue that breastfeeding alone is not enough to make the baby full and the baby needs other source of nutrition so that they do not get sick easily. However, most mothers respond they did not breastfeed exclusively because of work reasons and a small quantity of milk.

Providing information to nursing mothers properly and the right time can help mothers receive the information provided as well. Mother's decision to breastfeed is exclusively influenced by information provided by health workers (Rahmatnezhad et al., 2018). More efforts are needed to increase knowledge and change the behavior of breastfeeding mothers to provide optimal breastfeeding. Therefore, health workers need increase their role providing information about exclusive breastfeeding (Di et al., 2016).

Physiological Emotion State

Physiological response, the existence of fatigue, anxiety, and stress can affect self-efficacy in nursing mothers, if the mother feels extremely tired, anxious, and distressed, then it will affect milk production (Jara-palacios *et al.*, 2015). Based on interviews, it was found that informants were generally in a healthy condition, most of whom said they experienced work fatigue and stress.



"Alhamdulillah, I am healthy but often feel tired after working all day" (informant A)

"Yes, I get tired from workING. I work from 7 AM to 6 PM and often feel irritated when the baby is fussy at night. Thankfully I have my mom and husband to help me" (informant C)

The results of the interview found that most mothers feel anxious, guilty, and sorry because they cannot give milk exclusively to their babies. Some mothers have made various efforts to be able to give milk to babies such as how to consume vitamins to increase milk production, eating vegetables, and also pumping milk. However, various methods that were done were not successful and made the mother decide to give only formula. They argue that breastfeeding alone is not enough to make the baby full and the baby needs other food / drinks so that it does not get sick easily, even though most mothers respond because of work reasons and small quantity of milk.

The results of previous studies remark that the smoothness of breast milk is strongly influenced by psychiatric factors because maternal feelings can inhibit oxytocin release (Bahriyah, Putri and Jaelani, 2017). Other research states that if a mother experiences stress, a depressed mind, is not calm, anxious, sad, and tense, it will affect the smoothness of breast milk. If the mother's mood feels comfortable and happy it will affect the smoothness of breast milk, but conversely if the mother feels anxious and distressed, will hinder the smooth flow of breast milk (Qiftiyah, 2018). The level of anxiety in the process of breastfeeding Primiparous and Multiparous mothers is different. Primigravida mothers experience higher anxiety than multigravida mothers because Primigravida mothers still need to adapt to their circumstances after the delivery process (Fitriani, Wahyuningsih Haryani, 2016).

The Success of Breastfeeding

Self-efficacy is described as a person's belief in their ability to perform a particular action in order to achieve the expected or desired results (Widuri et al., 2018). From the results of the study, it can be concluded that the mother's

confidence to breastfeed is lacking, therefore all informants (6 people) did not succeed in breastfeeding for up to six months (exclusive breastfeeding). Some informants only give breast milk less than a month. The reason breastfeeding is not successful is due to the lack of milk production so that it is not sufficient for babies and will make their babies fussy and the mothers have to work and leave their babies, therefore giving milk formula is sufficient. Previous study found that breastfeeding mothers who have high self-confidence has the higher chance for exclusive breastfeeding, breastfeeding mothers who have low selfconfidence have low chances of exclusive breastfeeding. Moreover, good confidence will make someone wants and able to learn to do things the right way (Boateng et al., 2019).

CONCLUSION

Self-Efficacy owned by Primigravida mothers who work based on modelling (imitating) in the success of giving ASI argues that imitating the experience of success is not enough to affect them because the conditions of each mother differ from one another. Social persuasion (information) in the success of giving ASI which is obtained by the mother comes from the family, health workers and also other people (relatives, friends and neighbors). Breastfeeding mothers get enough support from the family in giving ASI. Counselling conducted by the health center about exclusive breastfeeding is still not well received by nursing mothers. The lack of information is caused by several things, one of which is the lack of interest of residents in attending counselling program and also in involvement. Work is a reason for mothers to not be able to attend counselling and get involved with existing programs. The obstacles that are felt by breastfeeding include the lack of milk mothers production so that it is not enough to meet the needs of babies and will make their babies fussy and they have to work and leave their babies, so giving formula milk is the right way. Improving Self Efficacy for working mothers, who are in breastfeeding struggles and extra effort, positive family and social support and previous experience about breastfeeding



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increase the commitment, motivation, and self-efficacy of women to breastfeed.

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