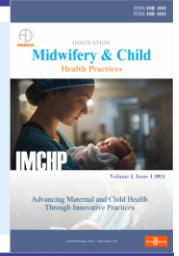


Contents List Available at [Inovasi Data Analisis](https://analysisdata.co.id)

Innovations Midwifery & Child Health Practices

Journal Homepage; <https://analysisdata.co.id>

The Role of Midwifery in Supporting the Success of Exclusive Breastfeeding

Bestari Anaya¹ , Yuniati Efriani² 

Midwifery S1 Study Program, Universitas Pahlawan Tuanku Tambusai, Riau, Indonesia



ARTICLE INFO

Article history:

Received 23 May 2024
Received in revised form 17 June 2024
Accepted 02 Juli 2024

Correspondence:

Bestari Anaya 

Keywords:

Exclusive breastfeeding, Midwives
Breast care, Initiation of breastfeeding
(IMD), Cluster random sampling,
Maternal health

ABSTRACT

Objective: This study seeks to investigate the factors that impact the acceptance of exclusive breastfeeding in the Pekanbaru Riau Sub-district, with a particular emphasis on the influence of midwives in promoting this behavior.

Method: In 2024, a cross-sectional study was carried out at the Pekanbaru I Health Center, comprising a total of 234 women who had children between the ages of 6 and 12 months. A survey, which was separated into sections focusing on the duties of midwives and the exclusive breastfeeding practices of women, was employed.

Results: The investigation uncovered different levels of midwives' participation in advocating for exclusive breastfeeding. A small proportion of midwives actively promoted exclusive breastfeeding, offered breast care, and facilitated the commencement of nursing during the first hour after birth (IMD). In contrast to breastfeeding promotion, which showed no significant link, there was a substantial correlation between breast care and IMD and the success of exclusive breastfeeding.

Novelty: This study emphasizes the crucial importance of midwives in ensuring the success of exclusive breastfeeding. It underscores the necessity for improved training & support for midwives to effectively advocate for and assist with breastfeeding practices.

Social benefits: Can be achieved by implementing specific treatments that focus on promoting exclusive breastfeeding, providing greater support to families, ensuring comprehensive breast care during pregnancy, and improving infant and young child feeding behaviors. These interventions have been shown to have a significant impact in increasing exclusive breastfeeding rates.

© 2024 Inovasi Analisis Data. All rights reserved

1. Introduction

Breast milk is the best single food for babies aged 0-6 months (Zielinska and Hamulka 2018). Exclusive breastfeeding until 6 months of age can fulfill all of the baby's nutritional needs (Dewey 2001). In addition to meeting nutritional needs, exclusive breastfeeding is also beneficial for improving children's intelligence (Pérez-Escamilla et al. 2019). Infants who receive exclusive breastfeeding show better cognitive function compared to infants who do not receive exclusive breastfeeding (Anderson 1999). Another benefit of exclusive breastfeeding is an increase in the baby's immune system due to the antibody content that protects the baby from disease (M'Rabet et al. 2008). Previous research showed a significant effect between exclusive breastfeeding and the incidence of diarrhea in infants in Padang city, where infants who received exclusive breastfeeding experienced diarrhea less frequently than infants who did not receive exclusive breastfeeding (Lamberti et al. 2011; Morrow 2004). Neovita (2016) showed that the duration of breastfeeding greatly affects infant survival. Infants breastfed for 6 months or more had 33.3 times better survival than infants breastfed for less than 4 months, and infants breastfed for 4-5 months had 2.6 times better survival than infants breastfed for less than 4 months (Huffman, Zehner, and Victora 2001). Exclusive breastfeeding has also been reported to reduce morbidity and mortality in infants due to pneumonia (Lamberti et al. 2013).

Exclusive breastfeeding coverage rates in Indonesia are still quite low, despite the many benefits of breastfeeding. According to the Indonesian Health Profile 2023, only about 52.3 percent of infants are exclusively breastfed, while the coverage target is 80 percent (Anjarwati, Waluyanti, and Rachmawati 2019). The success of exclusive breastfeeding is influenced by various factors, one of which is support from health workers, including midwives (Henderson and Redshaw

Corresponding Author; Bestari Anaya



Innovations Midwifery Child Health Practices (IMCHP) © 2024 by Inovasi Analisis Data is licensed under CC BY-SA 4.0

2011). The role of midwives in supporting exclusive breastfeeding includes exclusive breastfeeding promotion efforts that begin during pregnancy. Research showed a significant influence between exclusive breastfeeding counseling and breastfeeding and colostrum for three days postpartum (Jiang et al. 2015; Roudhotul 2020). Other support provided by midwives includes preparing mothers to breastfeed properly through breast care during pregnancy. This breast care aims to maintain cleanliness, ensure nipple readiness, and ensure that breast milk has been released before the baby's birth. Midwives also play a role in facilitating the initiation of early breastfeeding (IMD) within the first hour after the baby is born, avoiding formula feeding, and encouraging joint care (Rina et al. 2018). According to Sherriff, Hall, and Panton (2014) Five key attributes of father support related to breastfeeding have been identified: (1) knowledge about breastfeeding; (2) positive attitude towards breastfeeding; (3) involvement in the decision-making process; (4) practical support; and (5) emotional support. This study aims to analyze the role of midwives in exclusive breastfeeding in the area, which includes exclusive breastfeeding promotion, breast care during pregnancy, and IMD implementation. Nationally, the coverage of exclusively breastfed infants in 2019 reached 67.74%. This figure has exceeded the 2019 Strategic Plan target of 50%. However, there are still 4 out of 34 provinces in Indonesia (11.76%) that have not reached the 2019 Strategic Plan target, namely Gorontalo Province (49.29%), Maluku (43.35%), Papua (41.42%), and West Papua (41.12%).

Exclusive breastfeeding for the first six months of an infant's life is an important component in meeting nutritional needs and increasing the immune system of the infant (Pérez-Escamilla et al. 2019). Breast milk contains antibodies that protect infants from various diseases. Studies have shown that exclusive breastfeeding can improve cognitive function and result in better outcomes in child development compared to infants who are not exclusively breastfed (Novita, Gurnida, & Garna, 2008). Other benefits include reduced incidence of diarrhea and other illnesses, which contribute to improved infant survival. Thulier and Mercer (2009), shows that the duration of breastfeeding strongly influences infant survival. Infants breastfed for six months or more had 33.3 times better survival than infants breastfed for less than four months.

The purpose of this research is to examine how midwives contribute to exclusive breastfeeding in a particular area. The primary goals are to analyze and assess the tactics utilized by midwives to encourage exclusive breastfeeding before and after childbirth, as well as to investigate the breast care techniques employed by midwives to prepare mothers for breastfeeding and determine their influence on the success of exclusive breastfeeding. This research also looks on the impact of midwives' assistance with early initiation of breastfeeding (EIB) in the first hour following delivery and how successful exclusive breastfeeding is. The research also seeks to evaluate the rate of success in exclusive breastfeeding in the specific location and to determine the factors that influence both successful and unsuccessful exclusive breastfeeding practices. As a result, it is anticipated that this study will present a thorough understanding of the vital role midwives play in promoting exclusive breastfeeding practices as well as suggestions for raising the rate of exclusive breastfeeding in the area.

2. Method Innovation

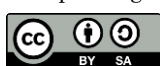
This cross-sectional study, conducted in the Pekanbaru Riau Sub-district in 2023 with 234 women and their 6- to 12-month-old children at the local health center, was chosen due to the health facility's high percentage of exclusive breastfeeding at 39.88%. The research sample was selected using the cluster random sampling technique based on the posyandu area criteria. A questionnaire served as the research instrument, divided into two sections. The first section focused on midwives' responsibilities, including advocating for exclusive breastfeeding, providing breast care guidance, and facilitating early initiation of breastfeeding (IMD). The second section assessed the exclusive breastfeeding behaviors of mothers. Data analysis was conducted using SPSS software, applying the Chi-square test with a significance level of $p < 0.05$. The strength of the effect was evaluated using the risk estimate magnitude.

3. Result Discussion

The study's breakdown of midwives' roles in supporting exclusive breastfeeding shows different degrees of participation. When Kecamatan Sindang Danau's 234 midwives were polled, it was discovered that 42 of them, or 17.9%, actively encouraged exclusive breastfeeding, whereas 192 midwives, or 82.1%, did not. In terms of breast care practices, 30.3% (71 midwives) provided breast care, compared to 69.7% (163 midwives) who did not. In contrast to 14.5% (34 midwives) who reported guaranteeing IMD, 85.5% (200 midwives) did not ensure breastfeeding initiation during the first hour of birth (IMD). Furthermore, 67 midwives, or 28.6%, indicated that they had successfully attained exclusive breastfeeding, while 167 midwives, or 71.4%, reported unsuccessful attempts at exclusive breastfeeding. To improve breastfeeding outcomes, these findings identify areas that may benefit from focused interventions and training. They also highlight the varying degrees of midwives' participation in supporting and promoting exclusive breastfeeding practices.

Table 1. Frequency Distribution of Midwives' Involvement in Exclusive Breastfeeding

Corresponding Author; Bestari Anaya



Innovations Midwifery Child Health Practices (IMCHP) © 2024 by Inovasi Analisis Data is licensed under CC BY-SA 4.0

Distribution of Midwives

Variable Data	Frequency	Percentage (%)
Exclusive breastfeeding promotion		
Not done	42	17.9
Done	192	82.1
Breast Care		
Not Performed	163	69.7
Performed	71	30.3
IMD		
Not done	200	85.5
Done	34	14.5
Exclusive breastfeeding success		
Not Exclusive	167	71.4
Exclusive Breastfeeding	67	28.6
	234	100.0

Table 2. Bivariate Analysis of the Role of Midwives in Exclusive Breastfeeding

Midwives in Exclusive Breastfeeding					
Variable	Breastfeeding	Breastfeeding	OR	95% CI	value
Promotion of Breastfeeding					
Not done	42 (17.9%)	192 (82.1%)	1.55	0.69 - 3.47	0.201
Done	0 (0.0%)	0 (0.0%)			
Breast care					
Not performed	163 (69.7%)	71 (30.3%)	6.35	3.27 - 12.31	0.001
Performed	71 (30.3%)	163 (69.7%)			
IMD (Initiation of breastfeeding within 1 hour)					
Not Performed	200 (85.5%)	34 (14.5%)	11.56	4.04 - 33.07	0.001
Performed	34 (14.5%)	200 (85.5%)			

The table above presents the findings from a study on midwives' practices and their relationship with exclusive breastfeeding among 234 respondents in Sindang Danau District. This research examined several independent variables in relation to the dependent variable of exclusive breastfeeding.

Firstly, the "Promotion of breastfeeding" variable indicates that out of the total 234 respondents, 42 mothers (17.9%) received exclusive breastfeeding promotion from midwives, while 192 others (82.1%) did not. The analysis showed no significant association between exclusive breastfeeding promotion by midwives and the practice of exclusive breastfeeding (OR = 1.55, 95% CI 0.69 - 3.47, p = 0.201).

Secondly, regarding "Breast care," it is observed that 163 mothers (69.7%) did not receive breast care from midwives, while 71 others (30.3%) did. There was a significant association found between lack of breast care and reduced practice of exclusive breastfeeding (OR = 6.35, 95% CI 3.27 - 12.31, p < 0.001).

Thirdly, in the variable "IMD (Initiation of breastfeeding within 1 hour)," 200 mothers (85.5%) did not initiate breastfeeding within the first hour of birth, whereas 34 others (14.5%) did. The analysis indicated a significant association between non-initiation of breastfeeding within the first hour and decreased practice of exclusive breastfeeding (OR = 11.56, 95% CI 4.04 - 33.07, p < 0.001).

From the table, it can be concluded that midwives' practices such as promoting exclusive breastfeeding, providing breast care, and encouraging IMD play a crucial role in the success of exclusive breastfeeding in Sindang Danau District. This underscores the importance of midwives in delivering appropriate support to mothers to enhance the rates of exclusive breastfeeding in the area.

Corresponding Author; Bestari Anaya



The objective of this study was to investigate the determinants that impact the adoption of exclusive breastfeeding in Sindang Danau sub-district, with a specific focus on the influence of midwives in promoting this practice. According to data gathered from 234 participants, the findings indicated that the rate of success for exclusive breastfeeding in the region was just 28.6%. A key discovery of this study was that the efforts of health workers, particularly midwives, to encourage exclusive breastfeeding did not achieve the anticipated goal. A minimal fraction of moms were provided with sufficient information and assistance pertaining to exclusive breastfeeding. Mogre, Dery, and Gaa (2016), shown that effective promotion can enhance mothers' understanding and consciousness regarding the significance of exclusive breastfeeding. Despite the lack of a statistically significant correlation between exclusive breastfeeding practices and midwives' promotion of exclusive breastfeeding, the estimated risk indicates that mothers who do not receive this promotion are more likely to not engage in exclusive breastfeeding. It is recommended that future treatments aimed at promoting breastfeeding should focus on these four elements, with particular emphasis on improving breastfeeding knowledge. These interventions should be implemented for a minimum duration of two months after childbirth (Zhang et al. 2018).

Support from family, particularly spouses, has a substantial impact on exclusive breastfeeding practices, in addition to the promotion provided by midwives. Laugen, Islam, and Janssen (2016) discovered that moms who were supported by their husbands were more likely to exclusively breastfeed compared to those who did not receive such support. Thus, bolstering the backing of spouses and families for campaigns promoting exclusive breastfeeding may be a crucial tactic to enhance this practice among the community. At 4 and 6 months, exclusive breastfeeding practices may increase with the help of a father-focused intervention. The integration of dads with mother and child services is a potential strategy for improving exclusive breastfeeding, as suggested by Bich, Hoa, and Målqvist (2014), health care workers in maternity and child health units.

The results also showed that breast care during pregnancy plays an important role in the successful practice of exclusive breastfeeding. Mothers who receive adequate breast care have a higher likelihood of providing exclusive breastfeeding. Ihudiebube et al. (2019) research supports this finding by showing that mothers with good knowledge about breast care tend to be more successful in providing exclusive breastfeeding. Among the four factors, breastfeeding knowledge was the utmost important factor contributing to exclusive breastfeeding (Zhang et al. 2018).

Exclusive breastfeeding practices have also been found to benefit from the establishment of Early Breast Initiation (IMD), which is letting the baby nurse for the first hour following birth. The investigation revealed that women who did not engage in Infant and Young Child Feeding (IYCF) Minimum Dietary Diversity (MDD) had a greater likelihood of not practicing exclusive breastfeeding. Idris and Astari (2023) emphasized the significance of IMD in enhancing exclusive breastfeeding practices. The study conducted by Amri (2020) found evidence of a correlation between a mother's viewpoint on exclusive breastfeeding. The practice of exclusive breastfeeding is greatly impacted by various factors (Shofiya 2020).

4. Conclusion

From the results of this study, it can be concluded that the role of midwives is very important in supporting exclusive breastfeeding practices in Sindang Danau sub-district. More intensive promotion of exclusive breastfeeding, better support from families, more comprehensive implementation of breast care during pregnancy, and improved IMD practices could be effective strategies to increase exclusive breastfeeding rates in this region. Recommendations for future research include improving training for midwives in providing comprehensive information and support to mothers, actively involving husbands and families in exclusive breastfeeding campaign approaches, and increasing community awareness of the importance of exclusive breastfeeding practices for maternal and child health.

Refrence

- Amri, Siskawati. 2020. "The Relationship between Knowledge and Mother 's Attitude towards Exclusive Breastfeeding in the Independent Practice of Midwife Indah Suryawati Kel . Sumber." 9(1):335-43.
- Anderson, James W., Bryan M. Johnstone, and Daniel T. Remley. 1999. "Breast-Feeding and Cognitive Development: A Meta-Analysis*2." *The American Journal of Clinical Nutrition* 70(4):525-35. doi: <https://doi.org/10.1093/ajcn/70.4.525>.
- Anjarwati, Nurul, Fajar Tri Waluyanti, and Imami Nur Rachmawati. 2019. "Exclusive Breastfeeding for Twin Babies and Its Influencing Factors: A Study in East Java, Indonesia." *Comprehensive Child and Adolescent Nursing* 42(sup1):261-66. doi: 10.1080/24694193.2019.1594458.
- Bich, Tran Huu, Dinh Thi Phuong Hoa, and Mats Målqvist. 2014. "Fathers as Supporters for Improved Exclusive Breastfeeding in Viet Nam." *Maternal and Child Health Journal* 18(6):1444-53. doi: 10.1007/s10995-013-1384-9.
- Dewey, Kathryn G. 2001. "Nutrition, Growth, and Complementary Feeding of The Breastfed Infant." *Pediatric Clinics of North America* 48(1):87-104. doi: [https://doi.org/10.1016/S0031-3955\(05\)70287-X](https://doi.org/10.1016/S0031-3955(05)70287-X).
- Henderson, J., and M. Redshaw. 2011. "Midwifery Factors Associated with Successful Breastfeeding." *Child: Care, Health and Development* 37(5):744-53. doi: <https://doi.org/10.1111/j.1365-2214.2010.01177.x>.
- Huffman, Sandra L., Elizabeth R. Zehner, and Cesar Victora. 2001. "Can Improvements in Breast-Feeding Practices Reduce

Corresponding Author; Bestari Anaya



- Neonatal Mortality in Developing Countries?" *Midwifery* 17(2):80–92. doi: <https://doi.org/10.1054/midw.2001.0253>.
- Idris, Haerawati, and Dea Widya Astari. 2023. "The Practice of Exclusive Breastfeeding by Region in Indonesia." *Public Health* 217:181–89. doi: <https://doi.org/10.1016/j.puhe.2023.02.002>.
- Ihudiebube-Splendor, Chikaodili N., Chinyelu B. Okafor, Agnes N. Anarado, Nonyelum N. Jisieike-Onuigbo, Anthonia U. Chinweuba, Ada C. Nwaneri, Joyce C. Arinze, and Paulina C. Chikeme. 2019. "Exclusive Breastfeeding Knowledge, Intention to Practice and Predictors among Primiparous Women in Enugu South-East, Nigeria." *Journal of Pregnancy* 2019(1):9832075. doi: <https://doi.org/10.1155/2019/9832075>.
- Jiang, Beiqi, Jing Hua, Yijing Wang, Yun Fu, Zhigang Zhuang, and Liping Zhu. 2015. "Evaluation of the Impact of Breast Milk Expression in Early Postpartum Period on Breastfeeding Duration: A Prospective Cohort Study." *BMC Pregnancy and Childbirth* 15(1):1–13. doi: [10.1186/s12884-015-0698-6](https://doi.org/10.1186/s12884-015-0698-6).
- Lamberti, Laura M., Christa L. Fischer Walker, Adi Noiman, Cesar Victora, and Robert E. Black. 2011. "Breastfeeding and the Risk for Diarrhea Morbidity and Mortality." 11(Suppl 3).
- Lamberti, Laura M., Irena Zakarija-grkovi, Christa L. Fischer Walker, Evropi Theodoratou, Harish Nair, Harry Campbell, and Robert E. Black. 2013. "Breastfeeding for Reducing the Risk of Pneumonia Morbidity and Mortality in Children under Two : A Systematic Literature Review and Meta-Analysis." 13(Suppl 3).
- Laugen, Chris M., Nazrul Islam, and Patricia A. Janssen. 2016. "Social Support and Exclusive Breast Feeding among Canadian Women." *Paediatric and Perinatal Epidemiology* 30(5):430–38. doi: <https://doi.org/10.1111/ppe.12303>.
- M'Rabet, Laura, Arjen Paul Vos, Günther Boehm, and Johan Garssen. 2008. "Breast-Feeding and Its Role in Early Development of the Immune System in Infants: Consequences for Health Later in Life1,2." *The Journal of Nutrition* 138(9):1782S–1790S. doi: <https://doi.org/10.1093/jn/138.9.1782S>.
- Mogre, Victor, Michael Dery, and Patience K. Gaa. 2016. "Knowledge , Attitudes and Determinants of Exclusive Breastfeeding Practice among Ghanaian Rural Lactating Mothers." *International Breastfeeding Journal* 1–8. doi: [10.1186/s13006-016-0071-z](https://doi.org/10.1186/s13006-016-0071-z).
- Morrow, Ardythe. 2004. "Protection Against Diarrhea in Breast-Fed Infants." *The Journal of Pediatrics* 297–303.
- Neovita. 2016. "Timing of Initiation, Patterns of Breastfeeding, and Infant Survival: Prospective Analysis of Pooled Data from Three Randomised Trials." *The Lancet Global Health* 4(4):e266–75. doi: [https://doi.org/10.1016/S2214-109X\(16\)00040-1](https://doi.org/10.1016/S2214-109X(16)00040-1).
- Pérez-Escamilla, Rafael, Gabriela S. Buccini, Sofia Segura-Pérez, and Ellen Piwoz. 2019. "Perspective: Should Exclusive Breastfeeding Still Be Recommended for 6 Months?" *Advances in Nutrition* 10(6):931–43. doi: <https://doi.org/10.1093/advances/nmz039>.
- Rina, Belinda, Marie Spagnoletti, Linda Rae Bennett, Michelle Kermode, Belinda Rina, Marie Spagnoletti, Linda Rae Bennett, and Michelle Kermode. 2018. "Moralising Rhetoric and Imperfect Realities : Breastfeeding Promotions and the Experiences of Recently Delivered Mothers in Urban Yogyakarta , Indonesia Moralising Rhetoric and Imperfect Realities : Breastfeeding Promotions and the Experiences of Recently Delivered." *Asian Studies Review* 42(1):17–38. doi: [10.1080/10357823.2017.1407291](https://doi.org/10.1080/10357823.2017.1407291).
- Roudhotul, Dewi. 2020. "ORIGINAL RESEARCH EFFECTIVENESS OF FORMING BREASTFEEDING SUPPORT GROUP PROGRAM TO IMPROVE EXCLUSIVE." 8(1).
- Sherriff, Nigel, Valerie Hall, and Christina Panton. 2014. "Engaging and Supporting Fathers to Promote Breast Feeding: A Concept Analysis." *Midwifery* 30(6):667–77. doi: <https://doi.org/10.1016/j.midw.2013.07.014>.
- Shofiya, Dian, Sri Sumarmi, and Faruk Ahmed. 2020. "Nutritional Status, Family Income and Early Breastfeeding Initiation as Determinants to Successful Exclusive Breastfeeding." *Journal of Public Health Research* 9(2):jphr.2020.1814. doi: [10.4081/jphr.2020.1814](https://doi.org/10.4081/jphr.2020.1814).
- Thulier, Diane, and Judith Mercer. 2009. "Variables Associated With Breastfeeding Duration." *Journal of Obstetric, Gynecologic & Neonatal Nursing* 38(3):259–68. doi: [10.1111/j.1552-6909.2009.01021.x](https://doi.org/10.1111/j.1552-6909.2009.01021.x).
- Zhang, Zhihong, Yu Zhu, Lijuan Zhang, and Hongwei Wan. 2018. "What Factors Influence Exclusive Breastfeeding Based on the Theory of Planned Behaviour." *Midwifery* 62:177–82. doi: <https://doi.org/10.1016/j.midw.2018.04.006>.
- Zielinska, Monika A., and Jadwiga Hamulka. 2018. "Reasons for Non-Exclusive Breast-Feeding in the First 6 Months." *Pediatrics International* 60(3):276–81. doi: <https://doi.org/10.1111/ped.13480>.