

**MATERNAL PERCEPTION AND FACTORS  
INFLUENCING BREAST FEEDING AMONG  
WORKING AND NON-WORKING MOTHERS  
IN TABANAN REGION, 2011**

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# INTRODUCTION

- **Background**

- Breast milk is the best food and ideal for the growth and development of infants
- Exclusive breastfeeding can significantly reduce the risk serious of lung and digestion infections and can accelerate the healing of disease
- Benefit will not come optimally when giving complementary foods early.

## Continued

- Basic Health Survey (Riskesmas) for 2010 by the Indonesian MOH indicated that coverage of exclusive breastfeeding remains very low, but the coverage breast-fed infants is very high
- Regional Socio-Economic Survey (Suseda) in 2008 showed granting exclusive breastfeeding in Tabanan is equal to 23.93% (national target of 80%)

## Continued

- observations of researchers while working in community Health centre and Department of Health, the low provision of exclusive breastfeeding because erroneous perception and work factors

- **Problem Formulation**

1. how maternal perceptions of various aspects of the provision of exclusive breastfeeding and
2. whether the factors that affect the provision of exclusive breastfeeding.

- **Research Objectives**

- General purpose to explore and compare perceptions of mothers and the factors influencing exclusive breastfeeding among working and non-working mothers
- specific objectives:
  1. Get an overview of the breastfeeding mother's behavior.
  2. Know in depth the main reason mothers give complementary feeding early.

# Continued

3. Understanding the perception of mothers in the seriousness of the problem which might arise in the provision of early complementary feeding.
4. Understanding the perception of mothers in the efforts and anticipate problems in exclusive breastfeeding.

## Continued

5. Understanding the perception of mothers in benefits than obstacles and sacrifices in exclusive breastfeeding.
6. Knowing the factors that influence exclusive breastfeeding.
7. Comparing perceptions of mothers and the factors influencing exclusive breastfeeding among working and non-working mothers.



# Thinking Framework, Concepts, and Research Hypotheses

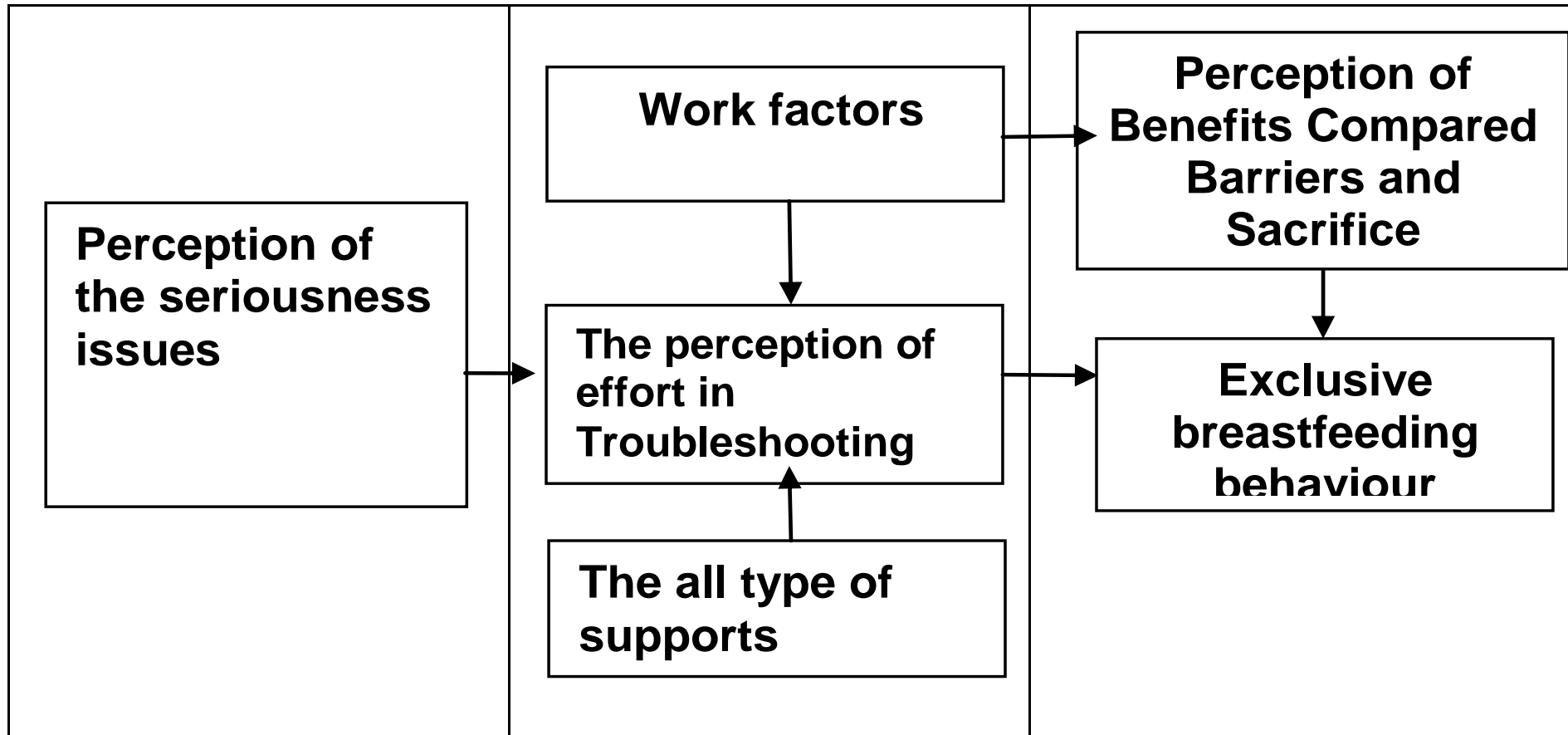


Figure 1. Research framework and concepts

taken based on the theory Health Belief Model (HBM) (Glans et al., 1997; Bartholomew, 2006)

- **Research Hypothesis**

Mother's perception is a major factor in determining the success of both the provision of exclusive breastfeeding working and non-working mothers

# METHOD

- **Research Design**

A qualitative study with a phenomenological approach

- **Types and Sources of Data**

The type of data that will be obtained in the form of qualitative data obtained from focus group discussion (FGD) and in-depth interviews with selected informants

continued

- Who became informants were mothers with children aged 6-12 months
- two major groups the group working and group non-working mother.

- **Research Sites**

FGDs in four selected community Health Center is Selemadeg West , Marga I, Selemadeg and Tabanan II . Locations in-depth interviews conducted in the residence of informants.

- **Data Collection Techniques**

- FGD conducted in-depth interviews before beginning
- FGD is a researcher facilitator and note-taker is a research assistant. interviews ranged from 60-100 minutes.

- **Data Analysis**

Credibility and reliability of research data obtained by triangulation, debriefing, member checking dan rich data

- **Presentation of Data Analysis Results**

Results of data analysis are presented in narrative and scheme form by theme and sub-sub-theme research.

## **RESULT AND DISCUSSION**

### **1. Research Subjects**

Subjects numbered 32 people consisting of 24 informants FGD (4 groups) and 8 people informant in-depth interviews.

**Table1. Characteristics of Informants**

Non-working Mothers				Working Mothers			
Code	Age (years)	education	Parity	Code	Age (years)	education	Parity
FGD 1.1	33	SMA	2	FGD 3.1	27	SMA	2
FGD 1.2	24	SMA	1	FGD 3.2	21	SMP	1
FGD 1.3	37	SD	1	FGD 3.3	28	S1	2
FGD 1.4	30	SMA	2	FGD 3.4	30	SMA	2
FGD 1.5	35	SMA	2	FGD 3.5	26	SMA	2
FGD 1.6	30	SMA	1	FGD 3.6	26	D3	2
FGD 2.1	23	SMP	1	FGD 4.1	26	S1	1
FGD 2.2	19	SMP	1	FGD 4.2	24	D2	2
FGD 2.3	30	SMA	4	FGD 4.3	19	SMA	1
FGD 2.4	23	SMA	2	FGD 4.4	26	D3	1
FGD 2.5	20	SMP	1	FGD 4.5	23	D3	1
FGD 2.6	29	SMA	2	FGD 4.6	25	SMA	2
WM 3	32	SD	3	WM 1	26	S1	1
WM 4	29	SMA	2	WM 2	29	S1	1
WM 5	29	SD	1	WM 7	41	S1	3
WM 6	33	SMA	2	WM 8	32	D3	1

## 2. Giving Behavior In Exclusive Breastfeeding

**Table 2. . In giving an overview informant Behavior In Exclusive Breastfeeding**

Maternal behavior	Working Mothers	Non-working Mothers
	total (person)	total (person)
Not breastfeeding	1	0
0 month of Exclusive Breasfeeding	7	5
1 month of Exclusive Breasfeeding	2	0
2 month of Exclusive Breasfeeding	0	1
3 month of Exclusive Breasfeeding	5	4
4 month of Exclusive Breasfeeding	0	1
5 month of Exclusive Breasfeeding	0	1
6 month of Exclusive Breasfeeding	1	4
Total	16	16



**Table 3. The type of the first complementary foods**

First complementary food	Working Mothers	Non-working Mothers
	total (person)	total (person)
Formula Milk	12	7
Banana	1	4
Porridge	1	1
Total	14	12

# 3. Main reason for Complementary Feeding early

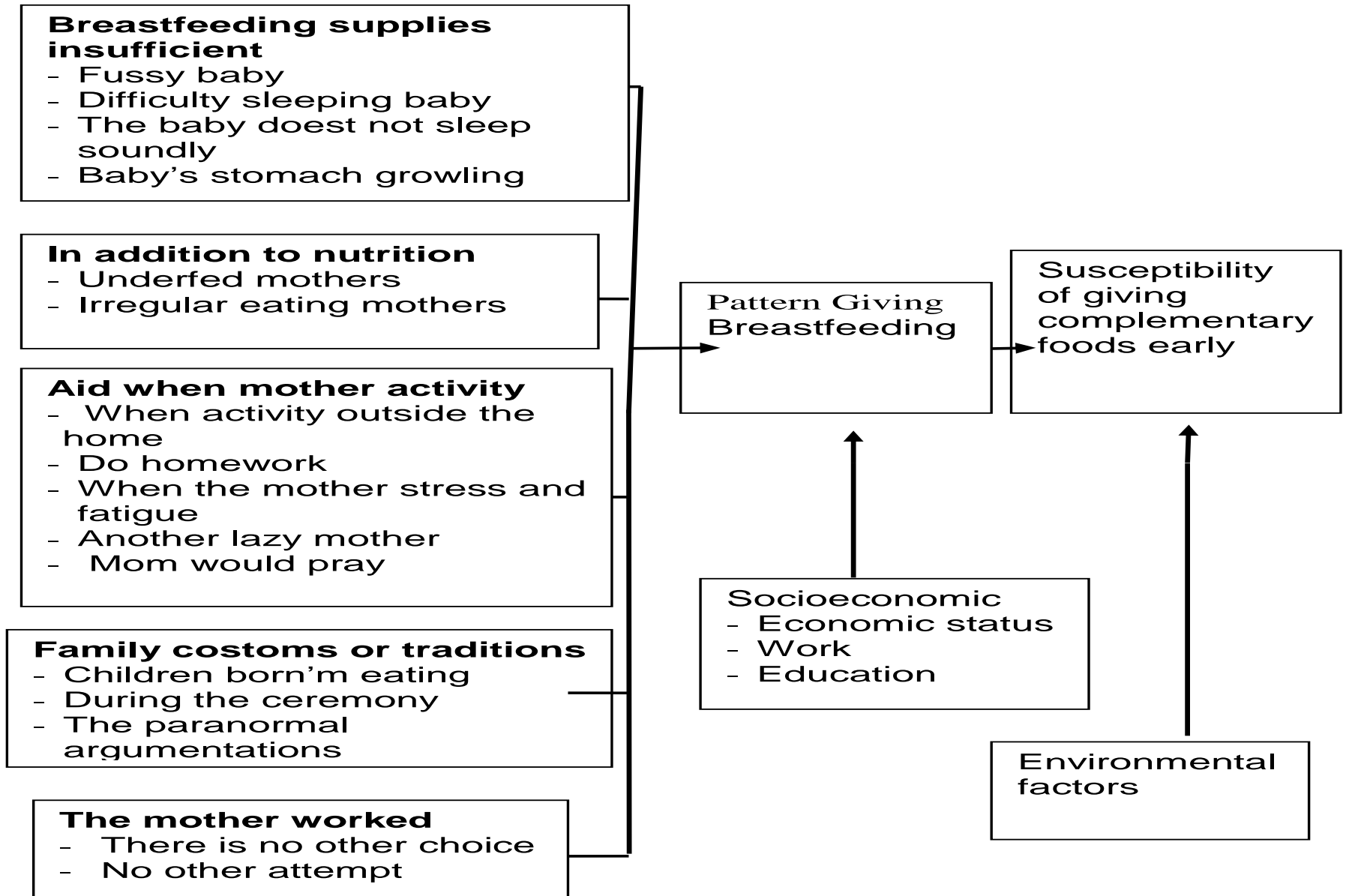


Figure 2. Pattern Main reason for Complementary Feeding early (n=32)

# 4. Perception of Early Complementary Feeding Seriousness

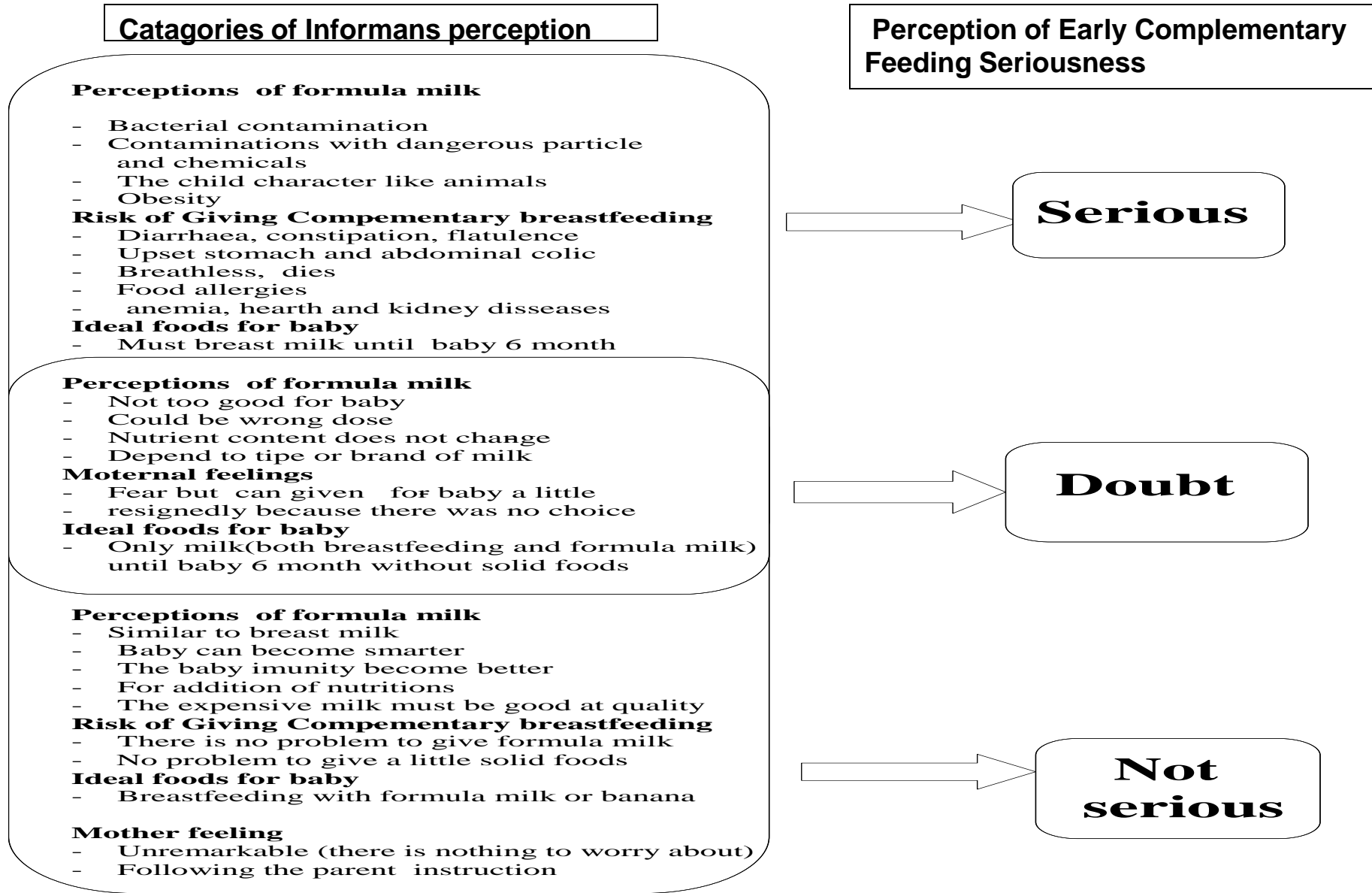


Figure 3. Pattern Perception Seriousness EarlyComplementary feeding (n=32)

# 5. The perception of effort in Troubleshooting

## Effort in Troubleshooting

### Breastfeeding has not come out or less

- Constantly stimulate without formula milk
- Constantly stimulate with aid susu formula
- drink drug/herba to expedite supplai breastfeeding

### When mother feel exhausted

- eat and drink more
- mother drink milk or supplement
- share task with husband

### Have activity outside the home

- pumping breasfeeding

### Left work

- back and forth to work

### Perceptions of milking and milk store

- same quality depend on how the storage
- can not be stored long

## Mother Behavior

**May be  
exclusive  
breastfeeding**

### Breastfeeding has not come out or less

- Mix with formula milk
- Mix with solid foods
- Full formula

### When mother feel exhausted

- Aided formula
- Plus foods that are not fussy

### Have activity outside the home

- Formula feeding
- Giving solid food

### Left work

- Formula feeding
- Giving solid food

### Perceptions of milking and milk store

- Hard milking
- Contaminated with bacteria and germs
- A sense of being unwell
- Baby could be nausea and vomiting
- Quality decreases
- Hesitant because they do not know
- Breastfeeding will clot, sedimentation could even be blood

**Failed  
exclusive  
breastfeedin**

**Figure 4. Pattern Perception informant in an attempt to overcome the problem (n=32)**

# 6. Perception of Benefits Compared Barriers and Sacrifice

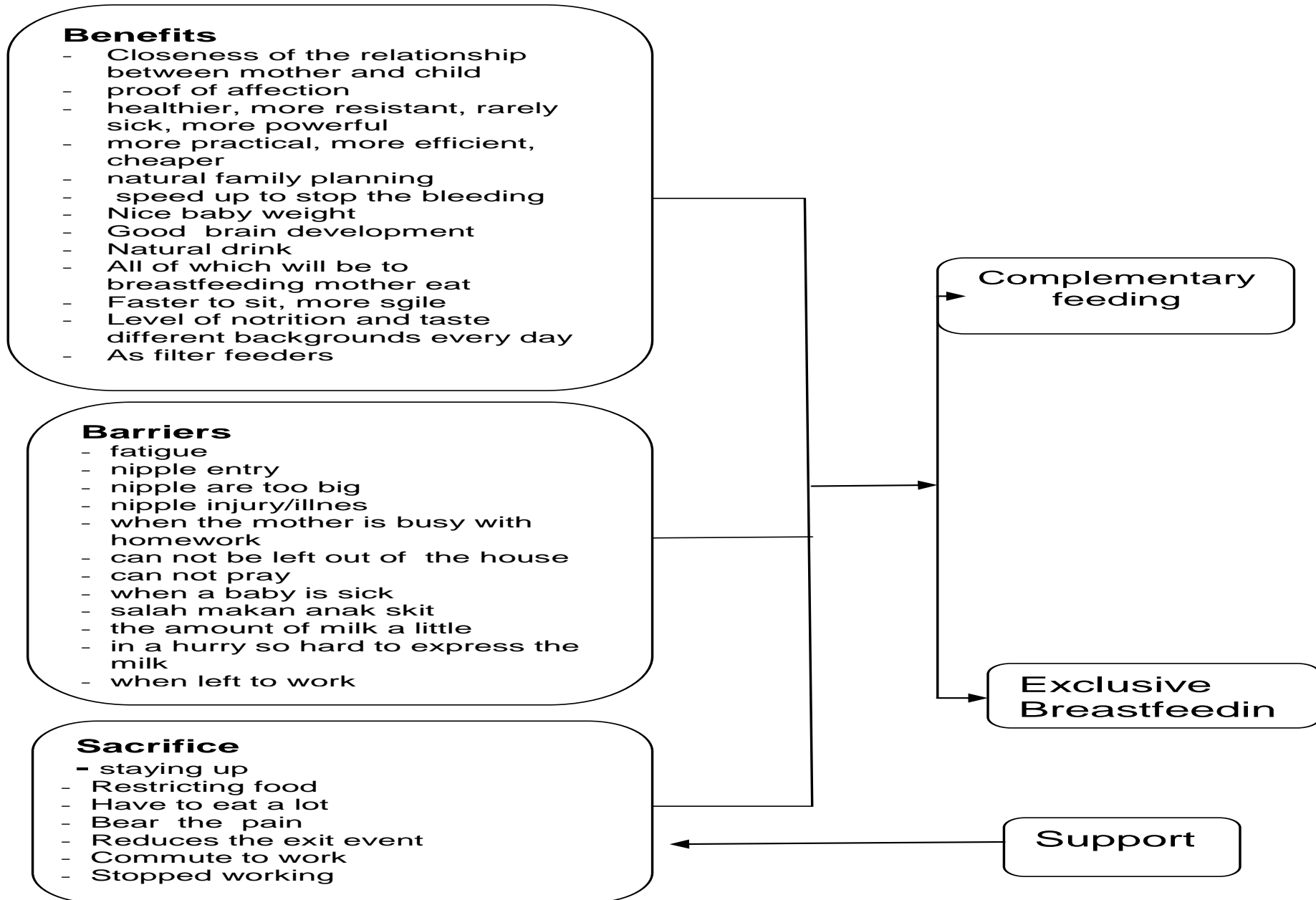


Figure 5. Pattern Perception Informan of Benefits Compared Barriers and Sacrifice (n=32)

# 7. Giving Support Exclusive Breastfeeding

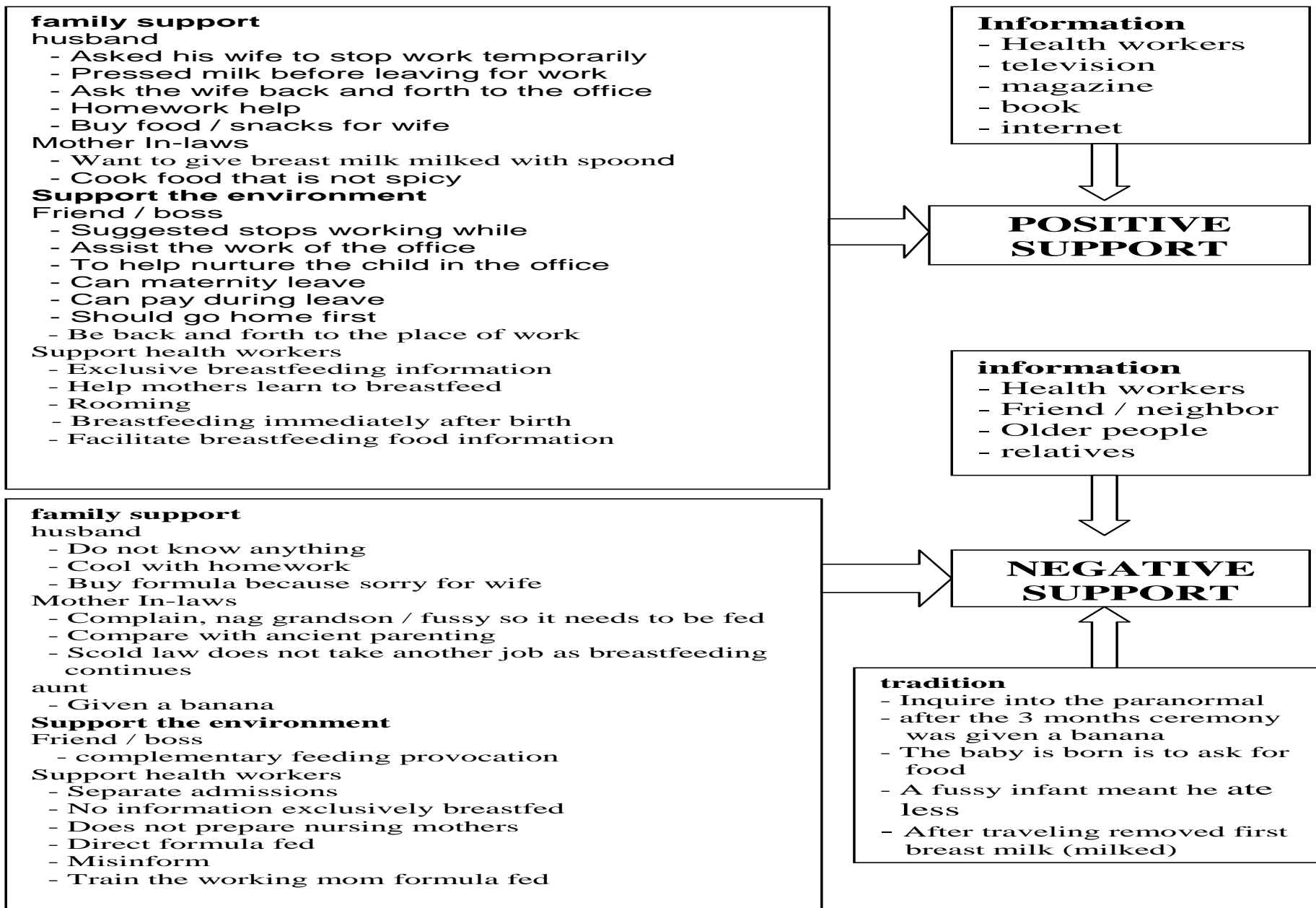


Figure 6. Pattern Support Exclusive Breastfeeding

# DISCUSSION

- Almost all informants are giving breastfeeding, but only a fraction are able to give exclusive breastfeeding. This phenomenon occurs due to various reasons with the main reason for inadequate breastfeeding supplies and occupational factors.

continued

- All mothers are not able to give exclusive breastfeeding has a misperception on more than one aspect of the study of perception, and capable of exclusive breastfeeding mother does have a strong commitment from the unborn baby, despite the lack of family support.



continued

- Lack of information seems to be the root causes of all phenomena. Health officials have not been able to provide the right information, that may be because they did not have a good knowledge and do not follow the latest scientific developments, especially in efforts milking and storage of breastfeeding. This is certainly a very interesting issue for further research.

# CONCLUSION

1. Maternal perceptions on various aspects and all forms of support are the two main factors in the success of exclusive breastfeeding and the provision of maternal perception is the dominant factor.
2. Perception of lack of breast milk supplies both in quality and quantity are the main causes of failure in giving exclusive breastfeeding in non-working mothers group

continued

3. whereas in the group of working moms is a bad perception of the quality of breast milk stored and the difficulty breastfeeding milking process so that there is no other attempt to anticipate employment issues in addition to providing supplementary food.



THANK YOU