

# FACTORS AFFECTING EXCLUSIVE BREASTFEEDING OF WORKING MOTHERS IN DEVELOPING COUNTRIES

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**ABSTRACT**

Background: Breast milk is also an important source of energy and nutrients during illness, and reduces mortality among malnourished children. Breastfeeding is a physiological process to provide nutrition to the baby optimally. To review evidence related to factors that influence the success of exclusive breastfeeding for working mothers. In Scoping review using the framework from Arksey and O'Malley, which focuses reviews with the PEOS framework, conducts literature searching using relevant databases and gray literature, selects relevant studies using inclusion and exclusion criteria, conducts critical appraisal for article quality assessment, conducts data extraction, analyzes and can report results. There were 8 articles selected and received Grade A. 8 articles were obtained research conducted in developing countries. There are 7 factors that affect the success of exclusive breastfeeding for working mothers, namely knowledge, educational status, breastfeeding facilities, employment status, husband support, family support, and health worker support.

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## INTRODUCTION

Breastfeeding is a physiological process to provide nutrition to the baby optimally. There is nothing more valuable in a child's life than obtaining quality nutrition from the beginning of life. Breast milk is an ideal nutrient to support the health, growth, and development of babies optimally (Winarsih & Hartini, 2020). Breast milk is also an important source of energy and nutrients for children aged 6-23 months. It can provide half or more of a child's energy needs between the ages of 6 and 12 months, and one-third of the energy needs between 12 and 24 months. Breast milk is also an important source of energy and nutrients during illness, and reduces mortality among malnourished children (Winarsih & Hartini, 2020). In addition, exclusive breastfeeding is the only strategy that prevents babies from dying the most and stabilizes the mental and psychological health of children and women who breastfeed (Michelson et al., 2000). The mortality rate of children under the age of 5 or toddlers globally has dropped dramatically by 61% since 1990. Mortality rates in children under five often occur in low-income countries. According to a UNICEF report, there were 37 deaths of children under 5 out of 1000 births in 2020. This figure is down compared to 2015 which was 43 deaths (HISYAM, 2022). While in Indonesia, data shows that the indicator of infant mortality rate (AKB) in 2017 decreased by 3.903% per year. In the midst of the covid-19 situation, infant mortality rates are soaring. In 2019, about 26,000 cases increased by almost 40% to 44,000 cases in 2021

(Pusat Kajian Anggaran, 2021). According to Saputri and (Saputri & Efriska, 2017), Constraint factors in exclusive breastfeeding include support from the husband. Breastfeeding can be hampered if the condition of father and mother is not harmonious and there is no support from husband and mother cannot communicate properly, mother's feelings are not safe and comfortable if mother does not gain confidence. The existence of beliefs, customs or habits that develop in the community is also one of the obstacles in exclusive breastfeeding for working mothers. This habit is considered to be an obstacle, for example the practice of removing colostrum because it is considered dirty, the baby needs special tea or other liquids before breastfeeding, and the baby does not get enough food or liquid if only given breast milk alone so that a mother will try to give.

## **RESEARCH METHODS**

Scoping review is a way or method of the or an attempt to identify the available literature or sources with a variety of research methods related to the research topic (Tasripin & Fitriana, 2021). Scoping review is a strictly identified protocol used to identify gaps in research on a particular subject. In general, the topics reviewed are not fully mature to justify a systematic review or meta-analysis (Somerville et al., 2017). The purpose of scoping review is to identify gaps, knowledge, actions taken and needed as well as directions for future research. (Atakpa, n.d.).

In compiling a scoping review there are several stages that researchers must do. This stage refers to (Arksey & O'Malley, 2005). The stages are: (1) identifying research questions and adjusted to research objectives, (2) identifying relevant literature sources through various sources, (3) selecting literature that has been able to adjust to the research topic, (4) conducting mapping that collects the literature used, (5) compiling and reporting the results of the selected literature analysis and (6) consultation with competent parties.

### **1. Identify research questions**

The initial step of scoping review is to identify research questions that are tailored to the research objectives. At this stage, researchers identify questions to be used as a reference in article searches. The development of research protocols is one way that researchers can obtain quality research. Thus, it is important to consider aspects of the research question, so important, for example, populations, studies, interventions or outcomes; (Arksey & O'Malley, 2005). Research protocols are also used to prevent the extraction of unqualified sources from being used and used as material for conducting research. This is done as external supervision through peer-review.

In this scoping review, researchers use the Population, Exposure, Outcome and Setting (PEOS) question format. Review questions guide and direct the development of specific review criteria and facilitate more effective searching, and provide structure for the development of a full review report (Munn et al., 2020). The purpose of using the question format is to help researchers find relevant articles both using qualitative methods and using quantitative methods (Darmody & Bradshaw, 2020).

Based on this, the question in this study is "How is the family support received by working mothers in providing exclusive breastfeeding in developing countries?"

**Table 2.1 PEOS Framework**

<i>Population</i>	Working and lactating mothers
<i>Exposure</i>	Factors
<i>Outcome</i>	Exclusive breastfeeding
<i>Settings</i>	Developing countries

**1. Identify relevant literature sources**

In this review, researchers will identify relevant articles using the following inclusion and exclusion criteria:

**a. Inclusion Criteria**

- 1) Published from 2013 to 2023
- 2) Published in English or Indonesian
- 3) Articles discussing the influencing factors received by working mothers in providing exclusive breastfeeding in developing countries

**b. Criteria Execution**

- 1) Report document/draft policy/guideline from WHO/
- 2) certain formal organizations
- 3) Articles discussing the prevalence of exclusive breastfeeding in developing countries
- 4) Articles discussing the coverage of exclusive breastfeeding in developing countries
- 5) Articles discussing the success rate of exclusive breastfeeding in developing countries

Source literature can be obtained through searching using several search engines. The search engines in question consist of PubMed, Science Direct, and Wiley (Widiasih & Hermayanti, 2020). In this study researchers searched for Grey Literature using Google scholar as a search engine and looked at specific websites WHO, UNICEF, Ministry of Health.

After determining the relevant database, then the researcher made the keywords used, namely:

- a. Working Mothers
- b. Family support OR Experience
- c. Breasfeeding OR Lactation
- d. Developing country

**RESULTS AND DISCUSSION**

Based on the 8 articles that have been obtained and then grouped in the theme mapping, namely factors that affect exclusive breastfeeding for working mothers and divided into 7 sub-themes, as follows:

**1. Knowledge**

Good knowledge will affect positive behavioral attitudes towards something, therefore the knowledge factor is very important in working mothers who provide exclusive breastfeeding. The factor of knowledge of working mothers in exclusive breastfeeding is described in the article [A1, A2, A3, A4, A6]. In the five articles discuss the knowledge factor of working mothers in providing exclusive breastfeeding.

The mother's ignorance of the benefits of exclusive breastfeeding is a major obstacle to breastfeeding. Therefore, the educational factor is a category that is significantly related to the method of breastfeeding. More effective education is needed to increase the mother's knowledge base about breastfeeding as a first step to starting and maintaining breastfeeding (Waszak et al., 2018).

During pregnancy, you gain knowledge about breastfeeding and make psychological adjustments and prepare expectations for your new role. So at the birth of the baby, you already understand about her new role to provide exclusive breastfeeding to her baby. (Nukpezah, Nuvor, & Ninnoni, 2018)

### **1. Education Status**

Education identification as a factor influencing the success of exclusive breastfeeding. The educational factors of working mothers in exclusive breastfeeding are described in articles [A1, A7]. In both articles discuss the educational factors of working mothers in providing exclusive breastfeeding.

The level of education is a long-term process employing systematic and organized procedures, which study conceptual and theoretical knowledge for general purposes (Maringan, Pongtuluran, & Maria, 2016).

Mothers with higher education are more likely to breastfeed longer than mothers with lower levels of education. In addition, mothers with a higher level of education can practice breastfeeding because they are more aware of the importance and benefits of exclusive breastfeeding (Shen et al., 2021).

### **1. Breastfeeding Facilities**

The availability of health worker facilities includes a breast milk corner, a storage area for dairy milk. The availability of facilities for working mothers in exclusive breastfeeding is described in the article [A1, A2, A5, A6]. In the four articles discuss the factors of breastfeeding facilities for working mothers in providing exclusive breastfeeding.

The lactation room is not just for milking but more than that the function of the breastfeeding corner is a place where breastfeeding mothers gather and exchange experiences. This will certainly enrich knowledge about breast milk and lactation (Septiani and Budi, 2017).

### **2. Employment status**

One of the causative factors that has an impact on the effectiveness of exclusive breastfeeding is employment status.

The majority of babies are not effectively breastfed by working mothers. The work of the mother affects the time of care of the child and also the lower duration of breastfeeding. Mothers who have activities outside the home or work are less

likely to practice exclusive breastfeeding compared to mothers who do not have activities outside the home or mothers who do not work. The success status of exclusive breastfeeding practices in non-working mothers was significantly better than that of working mothers (Chekol, Bikis, Gelaw, & Melsew, 2017).

For working mothers, exclusive breastfeeding efforts often experience obstacles due to the short period of maternity and maternity leave. Before exclusive breastfeeding ends completely, she must return to work. Mothers' activities or work are often used as an excuse not to provide exclusive breastfeeding, especially those who live in urban areas (Amalia, 2016).

#### **1. Husband support**

Spousal support can determine the success or failure of breastfeeding. The factors of husband support for working mothers in exclusive breastfeeding are described in articles [A4, A8]. In both articles discuss the factor of husband support for working mothers in providing exclusive breastfeeding.

Husband support will cause comfort in the mother so that it will affect milk production and increase enthusiasm and comfort in breastfeeding. In reality, there are still many husbands who argue that breastfeeding is a mother's business with her baby, so they care less (Sartono & Utaminigrum, 2012).

Support from the husband is associated with the success of the exclusive breastfeeding practice. Mothers who did not receive support from their husbands were 68% less likely to exclusively breastfeed their children compared to mothers who received attention from their husbands (Alam & Jama, 2020).

Husband support is very necessary for the achievement of exclusive breastfeeding. The husband must give a sentence of praise or words that can encourage the mother to breastfeed her baby. One of the supports that can be given by husbands to breastfeeding mothers is by not criticizing the wife's body shape (Abidjulu, Hutagaol, & Kundre, 2015).

#### **1. Family support**

Family support is support to motivate mothers to breastfeed their babies only until 6 months of age. The factors of family support in working mothers in exclusive breastfeeding are described in the article [A3, A4, A8]. In all three articles discuss the factor of family support for working mothers in providing exclusive breastfeeding.

Maternal grandmother's support of breastfeeding showed a significant association with breastfeeding maintenance for at least 6 and 12 months (Muelbert & Giugliani, 2018). One of the other supporting factors is the support factor from other people, especially intimate partners. Father's support greatly influences breastfeeding decisions and behavior. Mothers who perceived fathers as having a positive attitude toward breastfeeding mothers were more likely to be active in breastfeeding (Rempel, Rempel, & Moore, 2017).

#### **1. Health worker support**

The intention to breastfeed before birth is one of the strongest predictors of early initiation of breastfeeding and the prolonged exclusive duration of providing advice and education by health workers is a key requirement for breastfeeding. The support factors of health workers in working mothers in exclusive breastfeeding are

described in articles [A4, A8]. In both articles discuss the support factors of health workers in working mothers in providing exclusive breastfeeding.

It is important to note that the institutional role of health workers who are paid by the government and have the duty to regulate and monitor their clients. In research conducted by Alianmoghaddam et al, mothers appreciated and acknowledged the effective support they received from midwives, strengthened their self-esteem and encouraged them to breastfeed their babies exclusively for a longer period of time (Alianmoghaddam, Phibbs, & Benn, 2017).

Education or education about how to feed babies given by health workers plays an important role in breastfeeding. Health education by health workers about exclusive breastfeeding is important to be given before pregnancy or during pregnancy and then given again after postpartum. Understanding from health workers is very necessary for mothers because it can affect the attitudes made by mothers. Information obtained by mothers from health workers about exclusive breastfeeding tends to be given to exclusively breastfeed for a relatively long period of time (Kristanti, Herawati, & Susilawati, 2019)

## CONCLUSION

The results of the scoping review conducted there are 7 factors that affect the success of exclusive breastfeeding for working mothers, namely knowledge, educational status, breastfeeding facilities, employment status, husband support, family support, and health worker support. Knowledge factors have an important influence on the success of exclusive breastfeeding for working mothers. Husband support, family support, health worker support are very important in exclusive breastfeeding for working mothers. Inadequate facilities are one of the factors in breastfeeding mothers not succeeding in providing exclusive breastfeeding. So there is a risk that causes mothers to switch to formula milk to provide nutrition to their babies. The provision of proper facilities for mothers provides opportunities for mothers to pump their milk more attention, thus giving mothers the opportunity to provide exclusive breastfeeding, especially for working mothers.

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