



## EARLY INITIATION OF BREASTFEEDING IN POSTPARTUM MOTHERS AT PUPUK KALTIM HOSPITAL

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### ABSTRACT

**Background:** Early Initiation of Breastfeeding (IMD) is placing the baby on his stomach on the mother's chest or abdomen at least one hour immediately after birth. In IMD practice, this skin contact will make the milk come out quickly because more oxytocin is released in the mother's bloodstream. Early Breastfeeding Initiation carried out early provides great benefits in smooth breastfeeding in the first days of the baby's birth, the process of exclusive breastfeeding and can meet the needs of babies up to two years.

**Objective:** To see the description of early breastfeeding initiation in postpartum mothers at the Pupuk Kaltim Hospital, Bontang **Method:** The purpose of this study was to see the description of early breastfeeding initiation in postpartum mothers at the Pupuk Kaltim Hospital. This type of research is descriptive quantitative. The population in this study were all mothers who gave birth at the Pupuk Kaltim Hospital, Bontang City from April to June, namely 117 people. This study used purposive sampling, with the sampling criteria were mothers who gave birth within a period of 2 months starting from April 1 to June 30, 2021, namely 30 people.

**Results:** Based on the results of the study, it was found that of the 30 postpartum mothers, almost all of them did early initiation of breastfeeding correctly, namely 23 people (76.7%) and a small portion did not correctly initiate early breastfeeding, namely as many as 7 people (23.3%).

**Conclusion:** Based on the results of the research and discussion in the previous chapter, it was concluded that most postpartum mothers had performed IMD correctly.

### INTRODUCTION

Colostrum is yellowish in color which is produced on the first day to the third day.

The fourth to the tenth day, breast milk contains less immunoglobulin, protein, and lactose than colostrum but has higher fat and

calories with a whiter color. In addition to containing food substances, breast milk also contains certain enzymes that function as absorbent substances that will not interfere with other enzymes in the intestine (Kemenkes RI, 2019).

IMD is closely related to the mother's ability to produce breast milk as a source of infant nutrition. Breast milk that comes out due to IMD provides all kinds of nutrients that babies need in early life, especially for the formation of brain cells. Babies who get enough breast milk will grow up to be great children who have IQ and EQ abilities. IQ (intelligence) abilities such as the ability to count, speak and have a strong memory. Meanwhile, EQ (emotional) abilities such as having a sense of caring for the surroundings, being responsive to new information are also easy to socialize (Dinkes Bontang, 2019).

IMD can provide stimulation to the mother's brain to produce breast milk faster, touch and stimulation of baby's sucking will help stimulate breast milk production hormones (Hasanah & Nindya, 2016).

Babies who are given the opportunity for Early Initiation of Breastfeeding, will get colostrum faster than those who are not given the opportunity for Early Initiation of Breastfeeding. Colostrum is rich in nutrients such as carbohydrates, proteins, antibodies, and contains very high carotene and vitamin A. Besides containing various nutrients, colostrum also helps clean the baby's digestive tract to prepare the baby's digestive tract to

immediately receive breast milk (Widuri, 2013).

According to WHO in 2017, contact between the mother's skin and the baby's skin immediately after birth at the time of IMD will increase the likelihood of exclusive breastfeeding for one to six months of life. Early Initiation of Breastfeeding is also closely related to maintaining breast milk productivity. Baby sucking can increase levels of the hormone prolactin, a hormone that stimulates the mammary glands to produce breast milk. It is the suction that will increase production.

The government in Indonesia supports the WHO and UNICEF policy which recommends IMD as a "life saver" action, because IMD can save 22% of babies who die before the age of one month (Kemenkes RI, 2015).

According to UNICEF (United Nations Children's Fund) and WHO (World Health Organization) estimates that there are 78 million babies or 3 out of 5 babies who are not breastfed in the first hour of life can increase the risk of disease and death. Data from 76 countries show the reasons for delaying Early Initiation of Breastfeeding (IMD), including the provision of food or beverages instead of breast milk (ASI) and discarding colostrum, delivery by sectio caesarea, and gaps in the quality of care for mothers and newborns.

Previous research has shown that newborns who breastfeed between 2 and 23 hours have a 33% greater risk of death compared to babies who breastfeed within 1

hour of birth (WHO, 2018). According to the World Health Organization (WHO), the percentage of Early Breastfeeding Initiation (IMD) is said to be poor (0-29%), moderate (30-49%), good (50-89%), and very good (90%-100%).

Government Regulation of the Republic of Indonesia Number 33 of 2012 concerning Exclusive Breastfeeding, every mother who gives birth must give exclusive breastfeeding to her baby. The presence of protective factors and appropriate nutrients in breast milk guarantees good nutritional status of infants and decreases child morbidity and mortality. Immune substances contained in breast milk, among others, will protect babies from diarrheal diseases and reduce the possibility of babies getting ear infections, coughs, colds and allergic diseases.

Government Regulation Number 33 of 2012 Article 9 paragraph (1) states that health workers and providers of health service facilities are required to carry out IMD on newborns to their mothers for a minimum of one hour. Then in article 12 paragraphs (1) and (2) it is stated that health workers are required to provide information and education on exclusive breastfeeding to mothers and or family members of babies from the pregnancy examination until the period of exclusive breastfeeding is complete.

In 2019, nationally the percentage of newborns who received IMD was 75.58%. This figure has exceeded the 2019 Strategic Plan target of 50.0%. The province with the

highest percentage of newborns receiving IMD was Southeast Sulawesi (94.92%) while the province with the lowest percentage was West Papua (3.06%). There are two provinces that have not yet reached the 2019 Strategic Plan target, namely Maluku and West Papua (Kemenkes RI, 2019).

The National Population and Family Planning Agency (BKKBN) noted that at the end of 2018 Indonesia's Population Growth Rate (LPP) had reached 1.39 percent or there were 4.2 million to 4.8 million babies born each year in Indonesia. Unfortunately, of the number of babies born per year, more than half have not yet obtained the right to exclusive breastfeeding. This is based on the results of the Indonesian Demographic and Health Survey (IDHS) held by the Ministry of Health in 2017.

From the IDHS, it is known that infants aged less than six months who received exclusive breastfeeding reached 52%. This condition is also coupled with the lack of an increase in the rate of early breastfeeding initiation (IMD). The Ministry of Health, as quoted from basic health research data in 2018, stated that the IMD rate in Indonesia had only reached 58.2%.

Based on the results of the publication of Basic Health Research (RISKESDAS), the percentage of the process starting IMD in children aged 0-23 months in Indonesia in 2013 was 34.5%. The percentage of the process of starting to breastfeed between 1-6 hours is 35.2%, the percentage of the process

of starting to get breast milk between 7-23 hours is 3.7%, while the percentage of the process that starts getting breast milk between 24-47 hours is 13 % and the percentage the process of starting breastfeeding more than 47 hours by 13.7%.

East Kalimantan Province, the percentage of newborns receiving IMD, which was 78.15%, exceeded the 2019 Strategic Plan target, which was 50.0%, ranking 17th out of 34 Provinces with IMD coverage (Kemenkes RI, 2019).

According to the Bontang City Health Office, the percentage of new babies who received IMD in 2020 was 2981 with a percentage of 76.7% of the total 3874 deliveries (Bontang City Health Office, 2020). PKT Hospital is one of the hospitals in the city of Bontang that supports the Early Breastfeeding Initiation movement. The percentage of IMD implementation coverage in January 2021 is 89% and those that are not carried out by IMD are around 11%.

A preliminary study conducted on 10 postpartum mothers found that 6 (60%) mothers had IMD and 5 of them leaked breast milk, the frequency of breastfeeding was 8-10 times a day, and the baby was calm for 2-3 hours after feeding. Of the 6 mothers said that the mother felt happy and touched when the baby was placed on the mother's chest during the IMD implementation. While the other 40% did not do IMD because of bleeding exceeding 500 cc after delivery, lack of knowledge, premature birth, and ingestion of amniotic

fluid. As many as 3 out of 4 mothers who did not do IMD experienced swollen breasts and sore nipples so that the mothers felt sad because they could not make early contact immediately after birth with their babies. Babies also remain fussy after breastfeeding and the frequency of breastfeeding is more than 10 times which indicates the baby is not satisfied to breastfeed.

IMD should still be carried out as a method to stimulate the smooth expulsion of breast milk and as an initial step to achieve exclusive breastfeeding. The sooner babies get the IMD program, the more they can provide stimulation to the nipples and bonding, thereby increasing the chances of a successful breastfeeding process from an early age. Based on the description above, researchers are interested in raising the title "Early Initiation of Breastfeeding in Postpartum Mothers at Pupuk Kaltim Hospital"

## **METHODS**

The purpose of this study was to see an overview of early breastfeeding initiation in postpartum mothers at the Pupuk Kaltim Bontang Hospital. This type of research is descriptive quantitative. The population in this study were all mothers who gave birth at the Pupuk Kaltim Hospital, Bontang City from April to June, namely 117 people. This study used purposive sampling, with the sampling criteria were mothers who gave birth within a period of 2 months starting from April 1 to June 30, 2021, namely 30 people.

**RESULT**

**1) Age**

**Table 1**  
**Age Frequency Distribution of Postpartum Mothers at Pupuk Kaltim Bontang Hospital for April-June Period Year 2021**

No	Age of Postpartum Mother	n	%
1.	15 – 20 years	3	10
2.	21 – 25 years	5	16.7
3.	26 – 30 years	12	40
4.	31 – 35 years	6	20
5.	> 35 years	4	13, 3
	<b>Total</b>	<b>30</b>	<b>100</b>

Based on table 1, it is known that most of the respondents aged 26-30 years were 12 people (40%). Respondents aged 15-20 years were 3 people (10%), respondents aged 21-25 years were 5 people (16.7%), respondents aged 31-35 years were 6 people (20%), and respondents aged > 35 years as many as 4 people (13.3%).

**2) Religion**

**Table 2**  
**Distribution of the Religion Frequency of Postpartum Mothers at Pupuk Kaltim Bontang Hospital for the April-June Period Year 2021**

No.	Religion of Postpartum Mother	n	%
1	Islam	25	83.3
2	Christian	3	10
3	Catholic	1	3.3
4	Buddhist	1	3.3
	<b>Total</b>	<b>30</b>	<b>100</b>

Based on table 2 it is known that most of the respondents are Muslim, as many as 25 people (83.3%) and a small proportion of

respondents are Christian 3 people (10%), Catholic 1 person (3,3%), and Buddhist 1 person (3,3%).

**3) Education**

**Table 3**  
**Table of Education Frequency Distribution of Postpartum Mothers at Pupuk Kaltim Bontang Hospital for the Period April-June 2021**

No.	Education of Postpartum Mothers	n	%
1	Junior High School	2	6,7
2	Senior High School	10	33.3
3	College	18	60
	<b>Total</b>	<b>30</b>	<b>100</b>

Based on table 3, it is known that most of the respondents have tertiary education as many as 18 people (60%), respondents with high school education are 10 people (10 % ), and 2 respondents with junior high school education (6,7%).

**4) Occupation**

**Table 4**  
**Distribution of the Work Frequency of Postpartum Mothers at the Pupuk Kaltim Bontang Hospital for the April-June Period Year 2021**

No.	Employment of postpartum mothers	n	%
1	Housewife	19	63.3
2	Government employees	4	13.3
3	Private	4	13.3
4	State-owned enterprises	3	10
	<b>Total</b>	<b>30</b>	<b>100</b>

Based on table 4, it is known that most respondents are housewives as many as 19

people (63.3% ), PNS as many as 4 people (13.3%), private as many as 4 people (13.3%), and BUMN as many as 3 people (10%).

#### 5) Income

**Table 5**  
**Distribution of Income Frequency of Postpartum Mothers at Pupuk Kaltim Bontang Hospital for the April-June Period Year 2021**

No.	Income of Postpartum Respondents	n	%
1	< Rp. 3,1000,000.	9	30
2	> Rp. 3,100,000	21	70
Total		30	100

Based on table 5, it is known that most respondents earn > Rp. 3,100,000, namely as many as 21 people (70%) and as many as 9 people (30%) earning < Rp. 3,1000,000.00.

#### 6) Baby Birth Weight

**Table 6**  
**Frequency of Baby Birth Weight at Pupuk Kaltim Bontang Hospital April-June Period Year 2021**

No.	Birth Weight	n	%
1	2,500 – 3000 gr	11	36.7
2	> 3000 – 3500 gr	12	40
3	> 3500 – 4000 gr	6	20
4	>4000 gr	1	3,3
Total		30	100

Based on table 6 it is known that most babies born weight > 3000 – 3500 grams as many as 12 babies (40%), the weight of babies born 2500-3000 grams as many as 11 babies (36.7%), the weight of babies born > 3500-4000 grams as many as 6 babies, and > 4000 grams there were 1 baby.

#### 7. Breastfeeding Frequency Distribution

**Table 7**

**Early Initiation of Breastfeeding Frequency Distribution of Early Initiation of Breastfeeding in Postpartum Mothers at PKT Hospital in Bontang City Period April-June 2021**

No.	Early Initiation of Breastfeeding	n	%
1	Right	23	76.7
2	Inaccurate	7	23.3
Total		30	100

Based on table 7, it is known that from 30 respondents postpartum mothers, almost all of them did early initiation of breastfeeding correctly, as many as 23 people (76.7%) and a small proportion did not properly initiate early breastfeeding, namely as many as 7 people (23.3%).

#### DISCUSSION

Many reasons are put forward by mothers who do not breastfeed their babies, among others, mothers do not produce enough breast milk and babies do not suck. In fact, this is not because the mother does not produce enough breast milk, but because the mother lacks confidence that her breast milk is sufficient for her baby (Depkes RI, 2015).

Babies who are lazy to suckle will make the mother's breasts unable to be completely emptied so that milk production is not smooth. Mothers who breastfeed early are less likely to have problems with breastfeeding. Mothers who experience non-fluent breastfeeding will affect breastfeeding that is less than optimal (Wiknjastro, 2012).

Contact between the mother's skin and the baby's skin immediately after birth at the time of IMD will increase the likelihood of exclusive breastfeeding for one to six months of life. Early Initiation of Breastfeeding is also closely related to maintaining breast milk productivity. Baby sucking can increase levels of the hormone prolactin, a hormone that stimulates the mammary glands to produce breast milk. It is this sucking that will increase milk production two times (Yuliarti, 2015).

According to (Widuri, 2013) there are several efforts for mothers to successfully breastfeed properly and smoothly since the breastfeeding process, one of which is by breastfeeding as soon as possible after the baby is born, namely starting with IMD and skin contact between mother and baby. Direct contact is needed to create satisfaction for both mother and baby. Babies feel safe and satisfied because they get the warmth of their mother's arms. Mothers who feel relaxed and comfortable will produce breast milk well (Wulandari & Handayani, 2011). The baby's sucking reflex on the mother's nipple will stimulate milk production. The earlier and more often the baby suckles, the breasts will produce more milk (Nugroho, 2011).

In IMD practice, this skin contact will make breast milk come out quickly because more and more oxytocin is released in the mother's bloodstream (Depkes RI, 2012). According to Sulistyawati (2012), the hormone oxytocin is a hormone produced by the hypothalamus which is stored in the posterior

pituitary. When the baby sucks the mother's nipple, there will be a flow of transmitter through the IV thoracic nerve fibers to the neurohypophysis resulting in the release of more and more oxytocin hormones.

Oxytocin will enter the mother's bloodstream and stimulate the muscle cells around the alveoli to contract making the milk that has accumulated in it flow into the ducts. Oxytocin also functions to cause uterine contractions so that it helps reduce postpartum bleeding (Khairani, 2012). Oxytocin will make the mother feel satisfied, happy, confident in being able to breastfeed her baby, thinking about her baby with love and other positive feelings will make the oxytocin reflex work, and milk production will run smoothly.

Another study conducted by Fikawati & Syafiq (2013), said that the high knowledge of mothers about IMD was not followed by practice. According to Roesli (2012), IMD is often not carried out because there are not enough health personnel available, the mother must have stitches after giving birth, and the mother is too tired to breastfeed. Even if vitamin K and eye drops are urgently needed, they can be delayed by up to an hour.

IMD has been implemented in every hospital in the city of Bontang. The results of a preliminary study by researchers at the Pupuk Kaltim Hospital found that the criteria for patients undergoing IMD were normal delivery without complications, full-term pregnancy, normal bleeding after delivery ( $\leq 500$  cc), and good condition of the baby (no

complications). The description of the IMD implementation at the Pupuk Kaltim Hospital is that after the baby is born, the baby is dried all over except for his hands and does not clean the vernix. IMD is performed after the baby's umbilical cord is cut.

The baby is placed on the mother's chest without being swaddled with the head tilted and the body position like riding a horse. The mother hugs the baby, then is given a blanket over the baby. The baby is left attached to the mother's skin and actively seeks the mother's nipple for 2 hours. If the baby has not reached the mother's nipple after 1 hour, the baby's mouth is brought to the mother's nipple for early feeding. Babies are rarely able to reach the mother's nipple independently to breastfeed only as many as 6 babies out of 10 babies performed by IMD. The IMD implementation is carried out accompanied by a husband or family so that the mother feels calm.

## **CONCLUSION**

Based on the results of research and discussion in the previous chapter, it is concluded that the relationship between early initiation of breastfeeding and the smooth release of breast milk in the working area of the PKT Hospital is as follows:

1) The distribution of respondents shows that

the average age of the respondents is 26-30 years. The majority of respondents are Muslim (83.3%). The last education level varied from Junior High School (6.7%), Senior High School (33.3%), and College (60%). Most of the respondents are housewives (63.3%). Most of the respondents have an income of more than IDR 3,100,000 (70%). Most respondents' parity status was multipara (70%). The average birth weight of a baby is 3000 - 3500 grams.

2) Most of the respondents belong to the right category of IMD (76.7%).

3) Most of the respondents experienced a smooth expulsion of breast milk (70%).

4) The distribution of respondents shows that the average age of respondents is 26 - 30 years. The majority of respondents are Muslim (83.3%). The last education level varied from Junior High School (6.7%), Senior High School (33.3%), and College (60%). Most of the respondents are housewives (63.3%). Most of the respondents have an income of more than IDR 3,100,000 (70%). Most respondents' parity status was multipara (70%). The average birth weight of a baby is 3000 - 3500 gram.

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