



LACTATION COUNSELING IMPROVES SUCCESS OF BREASTFEEDING

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ABSTRACT

Breast milk is the ideal food for growing newborns, as many components of breast milk serve as a source of nutrition for growth and as the first line of defense against infection. Mothers often fail to breastfeed or stop breastfeeding earlier than necessary. The problems faced by mothers in the hospital show that low milk production in the first few days after giving birth is an obstacle to breastfeeding their babies. The many reasons for mothers not to breastfeed their babies prove that lactation counseling needs to be given to mothers, especially during the post partum period. Objective: This study aims to determine the effect of lactation counseling on breastfeeding success in the Siti Hajar Room, RSU Islam Klaten. Method: The design of this research is pre-experimental with one group pretest-posttest design. The sampling technique used purposive sampling. The sample used was 21 respondents. The data collection instrument used the LATCH questionnaire. Statistical test using wilcoxon. Results: The results showed that the characteristics of the respondents in this study were an average age of 25.10 ± 3.223 years, most of them had higher education (52.4%), worked (66.7%) and all respondents were primiparas (100%). Breastfeeding success before counseling averaged 6.19 ± 1.327 and after counseling averaged 9.00 ± 0.775 with an average increase of 2.81 while the p value was 0.000; $\alpha = 0.05$. Conclusions: The conclusion of this study is that lactation counseling increases breastfeeding success.

Keywords: breastfeeding; breastfeeding success; lactation counseling

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INTRODUCTION

The 2020 Indonesia Health Profile explains that the percentage of exclusive breastfeeding for babies 0-6 months in Indonesia is 66.1%. While in Central Java it shows 81.4% (Kementerian Kesehatan RI, 2021). In Klaten district in 2020 there was a decrease in exclusive breastfeeding with a percentage of 80.3%, even though in 2019 the coverage was 80.3%. One of the reasons for this decline is that posyandu are inactive and unable to monitor the growth of newborns, and health workers also reduce visits to newborns to prevent the spread of Covid-19, so data on exclusive breastfeeding for infants cannot reach 100% (Dinas Kesehatan Kabupaten Klaten, 2021). Breast milk (breast milk) is a gift from Allah SWT to humans and cannot be replaced either from animal milk, vegetable milk, or processed milk (milk powder). The ideal food for the growth of newborns is breast milk, because it contains many ingredients that function as a source of nutrition for early protection against infection and growth (Nugroho, 2016).

Newborns up to 6 months of age do not need food or drink other than breast milk. Therefore, babies will only get breast milk without adding other liquids, even powdered milk, oranges,

honey, tea water, even water. Apart from that, bananas, milk porridge, papaya, biscuits, porridge, team and other solid foods are also not given to babies (Roesli, 2013). One of WHO's recommendations for infant and child nutrition is that breastfeeding is an integral part of the reproductive process, providing babies with ideal and natural nutrition and a biological basis for their growth. Infant formula should be avoided at birth for any reason (Prawirohardjo, 2014). Arma (2021), also explained that brain growth in children will affect the development of intelligence. The process of breastfeeding is the main factor that influences the growth of a child's brain (Arma, 2021). Mothers often experience failure and stop early in breastfeeding. There are several reasons, such as feeling less breast milk or not enough on the first day of delivery. Actually, it's not because there isn't enough milk, but because the mother doesn't trust herself. In addition, improper breastfeeding can result in problems with the mother's nipples (Marmi, 2017). Vidayanti dan Wahyuningsih (2017), in his study, the problems faced by postpartum mothers who were hospitalized showed that low milk production in the first few days after giving birth became an obstacle to breastfeeding the baby (Vidayanti & Wahyuningsih, 2017).

Another cause that can influence mothers not to breastfeed is due to a lack of knowledge. Jannah (2018), mentioned that breastfeeding will be easy if the mother's knowledge is very good compared to mothers who have low knowledge. This is the reason that it is important to provide counseling to mothers to help mothers to be successful in breastfeeding their babies. Besides that, the many reasons for mothers not to breastfeed their babies prove that lactation counseling needs to be given to mothers, especially during the post partum period (Jannah, 2018). Counseling is the decision of others to identify themselves, understand the problem, look for alternatives to solve problems, and solve problems according to the circumstances and needs that are felt, not because of coercion or persuasion (DepKes, 2017). According to DepKes (2017), Breastfeeding counseling includes all efforts made by health workers (counselors) to provide assistance to mothers to successfully breastfeed their children. In general, counseling aims to help clients have health-related behavior changes so as to improve their health. Changed behavior includes knowledge, attitudes, and skills (Supariasa, 2014). Munawaroh (2018), in his research stated that education on breastfeeding techniques can increase the effectiveness of postpartum mothers in breastfeeding at PKU Muhammadiyah Yogyakarta Hospital (Munawaroh, 2018).

The phenomenon in society regarding the factors of unsuccessful breastfeeding in infants is caused by mothers being busy with their work, lack of knowledge, promoting the continuous use of powdered milk, insufficient milk production and the view that babies become hungry without additional food. Local health workers have tried to provide lactation counseling to mothers with the assistance of a counselor and health cadre, but many mothers cannot practice it properly regarding lactation and breastfeeding resulting in unsuccessful breastfeeding. RSU Islam Klaten is one of the hospitals that serves the delivery process. The number of deliveries at RSU Islam Klaten during January 2022 was recorded as many as 182. The postpartum room Siti Hajar RSU Islam Klaten has 4 counselors. Lactation counseling is given once to each post partum patient, either a normal delivery or a caesarean section. Counseling cannot all be done by counselors due to the limitations of counselors so counseling is sometimes given by midwives or senior nurses except if problems are found in breastfeeding then counseling is continued by the counselor. Based on this background, this study aims to determine the effect of lactation counseling on breastfeeding success in the Siti Hajar Room, RSU Islam Klaten

METHOD

This research method is pre-experimental with one group pretest-posttest design. This research was conducted at the Islamic Hospital of Klaten. Retrieval of research data as well as providing health education was carried out from 21 July to 15 August 2022. The population in this study were all normal post partum mothers in the Siti Hajar Room, RSU Islam Klaten. The total population, seen from data for the January-March 2022 period, is 471 people. The calculation results show that the sample size of the research was 21 respondents. The sampling technique was taken by purposive sampling purposive sampling. Inclusion criteria in this study were normal post partum women who agreed to participate in this study. The instrument used to collect data in this study was the LATCH questionnaire. The LATCH score consists of five indicators of breastfeeding (L: latching / latching), A: audible swallowing, T: type or shape of the nipple, C: comfort level. mother, H: hold positioning/holding position/baby position), each has a score of 0-2, a maximum of 5 indicators for a total score of 10. The LATCH questionnaire is standard and has been used in research with a reliability value of >0.7 (0.921). Data collection was carried out by assessing the success of breastfeeding mothers using the LATCH score as the pretest stage. The assessment was carried out after the vaginal post partum mother was transferred from the delivery room to the Siti Hajar room. The researcher observed the success of breastfeeding by making a checklist of the LATCH instrument. Researchers conducted lactation counseling to respondents. Lactation counseling is given 1 time with a duration of 20-30 minutes on day 0, 6-8 hours after the mother gives birth. After giving lactation counseling, the respondents were reassessed by the researchers to find out the success of breastfeeding using the LATCH score assessment on the 2nd day before the mother went home, as the posttest stage. Data analysis in this study used the Wilcoxon test.

RESULTS

Table 1.
Characteristics of Respondents by Age (n=21)

Variable	Min	Max	Mean ± SD
Age	16	29	25,10 ± 3,223

Table 2.
Frequency distribution of education, occupation and parity of respondents in 2022 (n=21)

Variable	f	%
Education		
Elemntary School	0	0,0
Junior high school	1	4,8
Senior high school	9	42,8
College	11	52,4
Total	21	100,0
Job status		
Work	14	66,7
Doesn't work	7	33,3
Total	21	100,0
Parity		
Primipara	21	100,0
Multipara	0	0
Grandemultipara	0	0
Total	21	100,0

Table 3.
Respondents' average success in breastfeeding (n=21)

Success in Breastfeeding	Min	Max	Mean ± SD
<i>Pretest</i>	4	8	6,19 ± 1,327
<i>posttest</i>	7	10	9,00 ± 0,775

Table 4.
Effect of Lactation Counseling on Breastfeeding Success (n=21)

Variabel	Z hitung	p value
Breastfeeding success before intervention	4,051	0,000
Breastfeeding success after intervention		

DISCUSSION

The results of the research that was conducted in the Siti Hajar Room of Klaten Islamic Hospital showed that the average age of the respondents was 25.10 ± 3.223 years. Research result Kurniawati dan Kurniasari (2019), in his research showed that the majority of research respondents aged 20-35 years, namely 35 people (85.4%). These results indicate that the age of 25 is included in the category of the 20-35 year age range. The mean age of the mother in the results of this study indicated that the mother was in the category of healthy reproductive age. Manuaba (2015) explained that the age between 20-35 years is a healthy reproductive period, because physically the reproductive organs are ready and the psychological condition of the mother has an impact on readiness in accepting the presence of the baby and giving breast milk. Usually a person's age will affect the condition of fitness and endurance. Younger mothers will be stronger and have more energy to take care of the household and stay up late to breastfeed their babies (Hakim, 2020).

Characteristics of education found that most of the respondents had higher education as many as 11 respondents (52.4%). These results are comparable to research Rosidi (2018), that out of 90 respondents most of the respondents had higher education as many as 63 respondents (70.0%). At the time of the program taking education is quite easy. Besides that, the respondents also understood the importance of education, that is what affected the respondent's education (Rosidi, 2018b) Mother's education influences breastfeeding, although it cannot be separated from socio-economic factors. It can be seen that mothers who receive formal education and those with tertiary education can breastfeed their babies longer than mothers who do not receive formal education, including mothers whose socioeconomic conditions are low so they are forced to breastfeed themselves, while mothers who are highly educated because they are aware of the advantages of breastfeeding and mothers who are secondary education because of the influence of adjunct food adverts (Rohmawati, 2019).

The characteristics of the work of the respondents showed that the majority of the respondents worked as many as 14 respondents (66.7%). These results indicate that the respondents in this study are working respondents. Study Malidia, Susilowati dan Nurhasanah (2019), also mentioned that the majority of patients who will undergo endoscopy are working (Malidia et al., 2019). Hakim's research (2020), states that the results of the chi square test show a P-Value = 0.011, meaning that there is a relationship between the mother's working status and exclusive breastfeeding. Working mothers will have very little time to take care of their family, home, especially their children. So that mothers will give less breast milk to their

babies and even mothers will give breast milk to their babies without a regular schedule. In addition, the mother will also provide formula milk to meet the nutritional needs of the baby when the mother is left working (Ningsih, 2020).

Based on the parity of the respondents, it was found that all respondents had primipara parity (100%). This result is supported by Vidayanti dan Wahyuningsih (2017), based on parity, the majority of post-cesarean section mothers were primiparas as many as 25 respondents (60.9%) (Vidayanti & Wahyuningsih, 2017). Parity affects the LATCH score in breastfeeding a baby, because parity is related to the mother's experience. Breastfeeding experience and knowledge about how to increase breastfeeding are influenced by the number of deliveries experienced by the mother. So that mothers do not experience problems in breastfeeding. Mothers who are giving birth for the first time or who have given birth to two or more children often have problems breastfeeding. Common problems include nipple pain due to inexperience and non-physiological breastfeeding maturity, and changes in the shape and condition of the nipple (Vidayanti & Wahyuningsih, 2017).

The results of the study showed that the success of breastfeeding based on the mean of respondents before counseling was 6.19 and after counseling it increased to 9.00. This result is supported by Pambudi (2020), the average success of breastfeeding using the LATCH instrument for vaginal delivery women in the first 24 hours was 9.1, the average success of breastfeeding in elective SC birth mothers in the first 24 hours was 8.7 and the average success of breastfeeding in emergency SC birth mothers in the first 24 hours was 6,4 (Pambudi, 2020). The results of this study indicate that the success of breastfeeding in respondents is still relatively low because the maximum LATCH score is 10 which is characterized by good attachment, strong and rhythmic suction, frequent and regular swallowing sounds, normal nipple type or shape, the level of comfort of the mother when breastfeeding has no complaints and the position of the baby does not need assistance. Helmet (2012), explaining success is the desire we want to achieve or the ability to avoid things that failed before without reducing enthusiasm (Helmet, 2012).

The low success of breastfeeding is caused by the condition of the baby, rooting, the lack of knowledge of the mother about lactation techniques, the physical and mental condition of the mother, the anatomy and physiology of the breast and the anatomy and physiology of the baby. The condition of the baby who is sleepy when he wants to suckle causes him to be unable to maintain his suction on the mother's nipple. Mothers who have good knowledge of lactation techniques will find it easier to breastfeed their babies than mothers who do not have knowledge or experience. Mental illness and stress also affect mothers in producing breast milk, so encouragement and motivation from the surrounding environment are needed by mothers. Disturbances in the milk production process and galactoposis result in heterogeneous milk production and secretion, which may affect milk migration. The baby's anatomy that has a big influence on breastfeeding is when the baby's lips and palate are abnormal and hinder the movement of milk. Therefore, certain techniques should be used while breastfeeding (Jannah, 2018).

In this study, the results of bivariate analysis showed a p value of 0,000; $\alpha = 0,05$, so that H_0 is rejected, which means that there is a difference in the success score of the respondents before and after giving lactation counseling so that it can be concluded that there is an effect of lactation counseling on breastfeeding success in the Siti Hajar Room of RSU Islam Klaten. This result is supported by Kurniawati dan Kurniasari (2019), based on the results of the study, the implementation of how to breastfeed mothers has increased after counseling. Prior to

counseling, the researcher first conducted a pre-test on how to breastfeed the mother. From the results of the practical pre-test assessment, the highest score was 75, the lowest score was 50, and the average value was 64.46. After counseling, one week later each mother is given a post-test on how to breastfeed again. From the results of the post-test assessment, the highest score was 91, the lowest score was 66, with an average of 79,05 (Kurniawati & Kurniasari, 2019).

This research can be explained that after being given counseling, a mother is able to know something that has been conveyed in counseling so that she can change her behavior so that she can process it into a better behavior, in this case breastfeeding the baby. When you have not been given counseling, you first do a pretest, from the pretest it is found that on average the mother has not been able to breastfeed properly. After being given counseling, the average mother gets better at breastfeeding. With this, mothers can have their own awareness to apply the things that have been conveyed in counseling and carry out correct breastfeeding procedures wherever and whenever. It is supported by Supariasa (2014), in general, counseling aims to provide client assistance in changing health-related behaviors so that they can improve their health. Changed behavior includes knowledge, attitudes, and skills (Supariasa, Bakri, & Ibnu, 2016).

CONCLUSION

The characteristics of the respondents in this study were an average age of $25,10 \pm 3,223$ years, most of them had university education (52,4%), worked (66,7%) and all respondents were primiparas (100%). The success of breastfeeding before counseling has an average of $6,19 \pm 1,327$. Breastfeeding success after counseling has an average of $9,00 \pm 0,775$ with an average increase of 2,81. There is an effect of lactation counseling on the success of breastfeeding in the Siti Hajar Room, RSU Islam Klaten, indicated by a p value of 0,000; $\alpha = 0,05$.

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