

WORKING WOMEN'S EXPERIENCE IN GIVING EXCLUSIVE BREASTFEEDING

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ABSTRACT

Introduction: Exclusive breastfeeding occurs during the baby's age 0-6 months without any food or drinks other than breast milk. The current phenomenon is a decrease in exclusive breastfeeding coverage because many mothers work outside the home. The purpose of this study was to explore how the experience of working women in providing exclusive breastfeeding. **Methodology:** This is a qualitative research with a descriptive phenomenological approach to describe the experience of working women in providing exclusive breast milk. The sampling method is purposive sampling to select five participants, with the criteria of working women who have experience providing exclusive breastfeeding in the working area of Taman Baru Kota Cilegon Village. Data collection conducts by in-depth interviews equipped with field records at previously agreed places. The recorded interview was then transcript verbatim and analyzed using the Colaizzi method. **Research finding:** The research produces five themes; 1. Knowledge of mothers on exclusive breastfeeding, 2. Support for nursing mothers, 3. Efforts made by nursing mothers, 4. Barriers experienced by nursing mothers, 5. Response in breastfeeding. **Conclusions:** Mothers' motivation and support from the closest environment, such as family and workplace, are essential factors in the process and success of mothers in exclusive breastfeeding. The results of this research are to be considerations to increase the number of breast milk coverage..

Keywords: Exclusive breast milk, Qualitative Phenomenology, Working Women's Experience

1. INTRODUCTION

Breastfeeding is the best way to get the nutritional needs of babies by providing giving breast milk (ASI). Breast milk should give immediately after the baby is born. They receive breast milk for the first six months without other food or drink, called exclusive breastfeeding. The recommendations of the World Health Organization, the implementation of research results, and government regulations may support exclusive breastfeeding to protect and provide the

best so that children can grow and develop optimally, healthy, intelligently. However, in reality, there are obstacles to exclusive breastfeeding, so that exclusive breastfeeding is still low in some areas in Indonesia¹. Recently, the female workforce has increased. Among the working women, some are breastfeeding. The period of leave obtained by pregnant and lactating women usually ranges from 1-3 months. Mothers whose leave period has expired inevitably have to return to work and leave their children at home.



Preliminary information from first participants stated that she still tried to save her expressed breast milk because of her conditions required to work. She also does not have the heart to leave her child and feels sad if she does not want to breastfeed using a pacifier. Participant 2 stated that it is okay for her to feel tired because she has to work while preparing expressed breast milk because her motivation is to continue giving exclusive breastfeeding. However, she is also sad if the child is fussy and sick, so she does not want to breastfeed. The statements from the two participants illustrate that working women can give it exclusively. However, there are inhibiting factors such as mothers' sadness, the way the mother continues to breastfeed, the demands of work, the mother's physical response, and the mother's motivation to give exclusive breastfeeding.

The sadness felt by the participants varied. Participant 1 said he was sad if his child did not want to breastfeed using a pacifier and participant 2 said he was sad if his child was fussy or sick so that the child did not want to breastfeed. Sadness is one of the signs of emotional depression, which describe by feelings of sadness, confusion, disappointment, small heart, and helplessness. Feeling sad or sad is one of a person's psychological responses. The psychological response defines as a response, behavior, or attitude towards specific problems related to the soul of an individual. Psychological responses can occur in conditions experienced by individuals due to the interaction between the resources within

the individual and the environment as potentially threatening or endangering welfare². Some psychological responses that could be happening by a working woman who gives exclusive breastfeeding include sadness, not accepting or rejecting, feeling inferior, and resigning².

Based on Riskesdas 2018, the coverage of exclusive breastfeeding in Indonesia has only reached 37.3%. Nationally, the coverage of infants who must receive exclusive breastfeeding in 2018 is 68.74%. The percentage of exclusive breastfeeding in Banten Province has reached 36%, which means that the coverage of exclusive breastfeeding in Banten Province is still far from the predetermined coverage rate. Cilegon is one of the cities in Banten Province. Exclusive breastfeeding coverage in Cilegon has reached 45.3%³.

The role of health workers is vital in influencing the positive thoughts of mothers who are breastfeeding. One of the roles that health workers must carry out is to provide information and education related to breastfeeding and exclusive breastfeeding, counseling about breastfeeding, and conducting counseling⁴. Therefore, researchers conducted this study to explore the meaning and experience of working women in providing exclusive breastfeeding to optimize the role of health workers in increasing the number of exclusive breastfeeding coverage, especially in the Cilegon City area.

2. METHODS

The type of research used is qualitative research with a descriptive phenomenological approach. The sampling technique used purposive sampling to recruit working women who gave exclusive breastfeeding in the Banten City area. Participants in this study were working women who succeeded in giving exclusive breastfeeding because they had experienced various challenges and obstacles in fulfilling exclusive breastfeeding to be a motivation for other working women. The researcher stopped at the fifth participant at the time of sampling because it had reached data saturation and did not find any additional information. As an ethical consideration, all participants signed the informed consent. The researcher kept the participant data confidential, changed the participant's name with a code, kept the participant's information confidential. When collecting data, the researcher maintains participants' comfort by choosing a comfortable place when providing information, collecting data using an in-depth interview method using the researcher himself as the research instrument. Researchers used other tools such as cell phones to record interviews and document pictures, notes, and writing tools to record nonverbal reactions in the field notes shown by participants. Data analysis used Colaizzi's method by listening to interviews' results and reading transcripts repeatedly to find significant statements from participants, coding and arranging the statements, then making them into categories which are then analyzed⁵.

3. RESULTS

Characteristic of participants

Participants in this study consisted of five working women. The age range was 22-40 years. The last education of the five participants were four college graduates and one high school graduate. The average participant's job is a teacher, but one participant is a factory employee, and one participant is a minimarket employee. The five participants have children who are still in the breastfeeding stage, on average, are the first children, but one participant is the third child. All participants are also Muslim and use the Indonesian language who are domiciled in Cilegon City, especially in the working area of the Taman Baru sub-district.

Themes Analysis

Theme analysis based on in-depth interviews with the five participants resulted in 3 themes describing working women's experience in exclusive breastfeeding.

A. Mother's knowledge of exclusive breastfeeding, this theme has two subcategories:

a. Understanding the definition of exclusive breastfeeding

"Exclusive breastfeeding is what it has called, we give breast milk from 0-6 months..." (P1), "Exclusive breastfeeding is breastfeeding babies from 0-6 months without giving food or drinks other than breast milk..." (P2), "...and the baby's age ranges from 0-6 months but..." (P3), "...as far as I know, only breastfeeding for six months..." (P4), "...Breast milk is essential for the development and growth of babies..." (P2),

"...Exclusive breastfeeding is very good for babies..." (P5).

b. Benefits of breastfeeding

"The benefit is that maybe the child can be smart, the cost is also cheaper..." (P1), "...the two save money..." (P3), "...also, cost-effective..." (P4), "...first for the baby's health..." (P2), "...can maintain immunity and the growth and development of children..." (P2), "...healthy and strong immune system..." (P5), "...can communicate directly with the baby..." (P2).

A. Support for mothers who give breastfeeding

a. Support resources

Mothers have obtained support from various sources, from the closest family, husband, and closest friends or co-workers. "Alhamdulillah, my husband and my family is very supportive..." (P1), "...husband is supportive and family too..." (P2), "My husband's support me...my family is okay..." (P3), "...husband and family agree..." (P4), "...very supportive of me giving exclusive breastfeeding..." (P5), "...my friends at the office are very supportive and allow me to go home during breaks..." (P2)

b. Form of support

The forms of support that the participants received were also different. One participant said that his workplace provides a special clinic for breastfeeding mothers.

"...there is also a clinic for breastfeeding mothers, we can use it to pump the breastmilk or take a rest..." (P3)

However, not all workplaces provide positive support for breastfeeding mothers. "...at work, that is just how it is; there is no place for pumping..." (P4).

C. The Mother's effort to give exclusive breastfeeding

Efforts made by breastfeeding mothers obtain from 2 categories: the mother's way continues giving breast milk and the mother's motivation.

a. How is the mother's keep giving breastmilk

Various ways that working women do to continue breastfeeding their child. "...but I tried in various ways to make my breast milk going smooth." (P2). "...so we have to be smart enough to manage the time..."(P5), "...first, by pumping..." (P3), "...pumping the breastmilk at home before leaving..." (P4), "...I pumped breast milk and gave it..." (P5)

b. The mothers motivation

A mother's motivation to continue exclusive breastfeeding plays a significant role. Motivation can be in the form of belief or feeling able to do something to be achieved. "...but I have to continue to breastfeed my baby exclusively..." (P2). Participant 2 felt that she had to continue to breastfeed her baby no matter what happened. She also feels

that breastfeeding is one of the obligations of a mother for her child. "... also actually still able to give breast milk..." (P2). Participant 4 also felt that as long as she could still give breast milk, she would give it. "...as long as I can still give her breast milk, why not, just enjoy being a mother, a risk for me while I am working...only while can still give breast milk, why not." (P4). "...I want my child to be exclusively breastfed so that the child..." (P5).

D. Barriers on giving exclusive breastfeeding

a. Limited time

Limited time does have a role in the obstacles during the breastfeeding process. "Yes, the problem is most of the time, because I have to teach..." (P2). "... even though it is hard to keep up with, we also have limited time..." (P3). It is not just a tight and challenging time, and rest time does not affect. Because the time used for pumping is not short, the time off during work becomes one of the obstacles. "... the time is short because I have to take turns during breaks..." (P4).

b. Physiological obstacles from mothers and child

In addition to time constraints, the difficulties experienced by mothers are one of the obstacles that occur during breastfeeding mothers. "...I give breast milk, but I have difficulty because my milk does not come out smoothly..." (P2). "...my child cannot drink breast milk using a pacifier, so it is difficult

to drink expressed breast milk..." (P5).

c. Unsupported facilities

Not all workplaces have special facilities for breastfeeding mothers. So that breastfeeding mothers who work feel it is one of the obstacles. "...at work, that is just how it is. There is no place for pumping breastmilk..." (P4).

d. Job demands

Working women who do much work sometimes forget to prepare breastmilk for their children and leave their children while working. "...because I also have duties and responsibilities that cannot be left behind... so inevitably I have to leave." (P2). "... also work, there must be many responsibilities while working... But what can I do, I have to work, I have a contract too..." (P4). "...but what can I do? I have to work" (P3).

E. Mother's respon when giving breastmilk

a. Psychological response

Mother's feeling of pleasure when breastfeeding is one of the positive responses. "It is enjoyable, huh..." (P1). "...I am pleased...I am delighted because I can give breast milk..." (P2). "My experience as a mother is happy... but yes, there are joys too because... happy anyway, because..." (P3). "Happy for sure..." (P4). "Breast milk is very fun because..." (P5).

Moreover, there are also feelings of sadness and worry experienced by mothers because they have to leave their children to work. "It is sad actually..." (P3). "...even though sometimes it is sad to leave him... just

enjoy it even though it is sad to leave him..." (P4). "Yes, at first I thought hard and always called people at home, I was afraid to cry..." (P1). "...do not have the heart to leave the child at home..." (P2). "Even though it was hard at first... at first it was hard to leave the house..." (P4). "Her feelings are always worried about children...and always want to go home quickly..." (P5). "...I was stressed because of my child..." (P5)

b. Physical response

The physical response is experienced by the mother and from the child. "Yes, if I am tired, yes, because..." (P1, P2). "...but there is also a sense of tiredness because...I feel exhausted because I am working..." (P3)

"... it is just that I am tired sometimes... at first I feel exhausted..." (P4)

"...even though I have to go back and forth to go home..." (P2).

"...Thank God he is not fussy... The factor is that because the child does not want formula milk, he wants to continue breastfeeding until now...But now he used to being left by me, thank God he is smarter and more understands..." (P1)

4. DISCUSSION

Characteristic of participants

The age of the participants in this study ranged from 22 to 40 years. Physiologically, the age of 25-35 years is the best age for women to get pregnant, give birth, and breastfeed because at that age the

reproductive organs and other related organs are in optimal condition. Even though their age is different, all participants have a strong motivation to give exclusive breastfeeding. Most of the participants have a higher education background, only one has vocational education, which affects their knowledge regarding exclusive breastfeeding. All participants already understand the meaning and benefits of exclusive breast feeding, therefore they strive to be able to exclusively breastfeed. Research about the relationship between mother experience and education level with exclusive breastfeeding shows that low maternal education is more difficult to receive direction about exclusive breastfeeding. Respondents who have higher education, are more open to new information, especially related to exclusive breastfeeding, so it is easier to understand the benefits of breastfeeding to meet the nutritional needs of babies so that the success of giving exclusive breastfeeding to respondents with higher education is more than those with low education⁶.

4.2. Mother's knowledge of exclusive breastfeeding

Participants' understanding of exclusive breastfeeding mostly said that exclusive breastfeeding was given when children were 0-6 months old. This result is in line with preview research that breast milk is given to infants aged 0-6 months and without giving other food than breast milk only. This result is in line with preview research that breast milk is given to infants aged 0-6 months and without giving other food than breast milk only. That statement proves that almost all participants in this study already know that

they must give only breastfeeding to their infants aged 0-6 months without other complementary foods or drinks⁵.

Moreover, understanding the age limit for exclusive breastfeeding, other knowledge that the participants in this study knew that breastfeeding could make a better immune system and the children's growth and development. That statement is similar to the result of the research which states that breast milk is good for immunity and supports the growth and development of babies. By the benefits of exclusive breastfeeding, one of which is to improve the immune system and support child development⁵.

A mother's high knowledge will increase the mother's confidence and have a high motivation to breastfeed her baby⁷. In addition to knowledge, the benefits of exclusive breastfeeding are one of the mother's races to continue to give exclusive breastfeeding. One of the benefits of exclusive breastfeeding is that it makes children smarter. These results support by research which says that one of the advantages of breastfeeding is brain intelligence. In addition, the benefits obtained by mothers during exclusive breastfeeding are savings in spending. Mothers do not need to spend more money to buy formula milk⁸. A similar result from another research states that the benefits obtained in immunity can also make spending economical⁹.

Support for mothers who give breastfeeding

Support is holding or providing something to meet the needs of others and providing encouragement, spirit, and advice

to others in a situation¹⁰. Working women who give exclusive breastfeeding may obtain support from anywhere: family support and social support. Family support is a beneficial thing when individuals experience something. This support is very effective regardless of which strategy is used¹¹. While social support is information or feedback from others that shows that someone is loved and cared for, valued and respected, and involved in a network of communication and reciprocal obligations¹¹.

Husband's support can affect the success and smoothness of the milk-excreting reflex. Because the positive support that the wife receives from her husband can provide peace in psychological conditions. The brain provides a stimulus to the organs of breast milk formation to launch the manufacturing process⁹. Support from coworkers also has a positive impact on mothers. Mothers feel much support so that mothers are happy when giving breast milk to their children. Similar research also stated that when coworkers understand and support participants in exclusive breastfeeding, it will make participants enthusiastic about breastfeeding⁵.

The Mother's effort to give exclusive breastfeeding

In addition, to support, the efforts made by mothers to continue to provide exclusive breastfeeding are essential to support the success of exclusive breastfeeding. In this research, mothers try in various ways to continue to provide breast milk to their children, including taking the time to go home during breaks, providing expressed breast milk before going to work, and

expressing breast milk during breaks. The right timing will make the mother successful in giving breast milk because it can adjust the time for work and breastfeeding or pumping. This result is also in line with another research stated that working women can overcome obstacles in breastfeeding because they can manage the time well between milking activities and their work⁸.

The way that working women can do to get expressed breast milk is by pumping breast milk either manually or using a pumping device on the sidelines of working or at home before going to work and at night. Expressed breast milk can be stored in the refrigerator to last longer than in the air. After being expressed, the milk should be in warm condition when the baby receives it. The warming process is possible by flushing the breast milk bottle or soaking the breast milk bottle in warm water. The length of heating depends on the desired temperature according to body temperature so that it resembles the temperature of breast milk that is issued directly from the mother's breast¹².

A mother's motivation to continue to give exclusive breastfeeding also affects its success. Strong motivation makes mothers think that this is one of the essential things that their children must get. This result is also in line with another research, which states that the most dominant motivations consist of identified regulations and intrinsic motivation. Identified regulation is the motivation of working women to give breast milk because of something that is considered necessary. It means that working women consider that exclusive breastfeeding is essential for them. A working mother who is motivated by identification and regulation

consciously assesses and decides that exclusive breastfeeding is an essential treatment for her¹³.

Barriers on giving exclusive breastfeeding

There are several barriers to exclusive breastfeeding: socio-cultural changes, psychological factors, maternal physical factors, lack of motivation, and increased promotion of canned milk¹⁴. Socio-cultural factors are very influential because as the culture develops, many changes will occur. The increasing number of women working in Indonesia may assume that breastfeeding is tricky because they have to share their time between work and preparing breast milk for their children, primarily if the workplace does not facilitate a place to express breast milk. Second, psychological factors also determine the success of mothers in exclusive breastfeeding. If the mother's psychology is terrible, the success rate will be less because it can reduce her motivation. Third, when the mother is physically weak, either sick or tired, the mother's physical factor makes her unable to give breast milk. Fourth, the lack of motivation, with strong motivation, they will pass with pleasure. So motivation is one of the most influencing factors. Lastly is the rampant promotion of canned milk which makes many mothers switch to giving canned milk instead of breast milk.

Working mothers have the right to continue to breastfeed their babies. The government supports this by providing the Regulation of the Minister of Health of the Republic of Indonesia (2013) Number 15 concerning procedures for providing special facilities for breastfeeding or pumping breast

milk. Article 3 states that workplace managers must support the exclusive breastfeeding program through special provisions for breastfeeding and exclusive breastfeeding during work. The increase in working mothers is also one of the obstacles to the success of the exclusive breastfeeding program¹.

Mother's respon when giving breastmilk

Responses to the process of exclusive breastfeeding can arise from both the mother and the baby. The psychological response is related to behavior and attitudes to a stimulus given by the body to someone's soul. An unsettled psychological response can affect milk production because it inhibits the prolactin and oxytocin reflexes. The feelings of breastfeeding mothers who work are generally impatient, heavy, sad when they have to leave their children to work. An unsettled psychological response can affect milk production because it inhibits the prolactin and oxytocin reflexes. The feelings of breastfeeding mothers who work are generally impatient, heavy, sad when they have to leave their children to work. This result is the same as previous research that states that breastfeeding mothers who work generally have a heavy heart and feel guilty for leaving their babies. These feelings, of course, psychologically make the mother worried¹⁵.

Even so, mothers feel happy when they are successful in exclusive breastfeeding. The feelings of pleasure and happiness experienced by the mother will strengthen the mother to work even though the mother still feels uneasy and sad. Other studies support this result that most of the

participants expressed feelings of happiness while breastfeeding and a good relationship between mother and baby¹⁶.

In addition to psychological responses, the mother also feels a physiological response like feeling tired when she is at home because of the mother's obligation to work and use their energy for doing their job. In this study, participants revealed that even though they felt tired, they still gave exclusive breastfeeding to their children. Sometimes a little milk came out due to the effects of fatigue. Sometimes they only produce a little breastmilk due to the effects of fatigue. This physical response is the same as previous research, which stated that when the mother returns to work, the feeling of tiredness or fatigue experienced by the mother will affect breast milk production⁵. Physical responses are also experienced by children when their mothers leave them to work. In the beginning, children tend to show a fussy attitude, cry, and others when there is no mother beside them, but over time, the child gets used to it so that he is not too fussy when his mother leaves him to work.

5. Conclusions

The results of this study describe the various experiences of working mothers in providing exclusive breastfeeding. Several factors affect a mother's process when breastfeeding her baby, either from herself or from outside, such as the workplace and co-workers. Mothers' motivation and support from the closest people such as parents and husbands to provide exclusive breastfeeding to their children are essential factors in the process and success of mothers

in exclusive breastfeeding. However, many obstacles happen to breastfeed mothers who work, such as limited time, unavailability of facilities for breastfeeding, to obstacles from their children. Therefore, it is crucial to share knowledge and motivation for mothers who are still breastfeeding. Future research shall develop an intervention model to increase to increase the number of exclusive breastfeeding coverage.

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