Analysis of Determinant Factors of Low Exclusive Breastfeeding Practice in Urban Slum Community of Surabaya

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ABSTRACT

Background: The World Health Organization’s recommendation for infant feeding is exclusive breastfeeding for the first six months followed by semi-solid food. The purpose of the study is to analyse determinant factors related to low exclusive breastfeeding’s practice in the urban slum community of Surabaya.

Methods: This is a qualitative study with a case study in one of the urban slum areas of Surabaya. Data were collected by in-depth interviews and focus group discussion (FGD) with mothers, interviews with key-informants; posyandu cadre and the community leader for validation. Ishikawa diagram tool was used to identify and categorize determinant factors. The Urgency, Seriousness, Growth (USG) method was used to prioritize factors.

Results: There are 9 determinant factors categorized into 5 categories; two ‘main’ factors, three ‘method’ factors, two ‘material’ factors, one ‘money’ factor and one ‘environment’ factor. The one factor that was considered the priority to be resolved is from the environment factor that is local beliefs of breastfeeding and expressed breast milk.

Discussions and Conclusions: Education of mothers about expressed breast milk is an initial step to overcome low exclusive breastfeeding’s practice in this community due to mothers having to work outside the house. There is also a need for strengthening support groups so working mothers continuously exclusive breastfeed and provide optimal nutrition for infants.

Keywords: exclusive breastfeeding, determinant, urban, slum

INTRODUCTION

The provision of food to infants and children recommended by experts and the World Health Organization (WHO) is exclusive breastfeeding for 6 months and continued until the age of 2 years. After 6 months, breast milk must be combined with additional food. Breastfeeding in the first six months is crucial to achieving optimal growth and development. Breast milk also contains adequate nutrition and antibodies to prevent infants from contagious diseases such as diarrhea and pneumonia and plays a very important role in the future growth and development of children¹. There is a close relationship between the child’s histories of exclusive breastfeeding with the incidence of stunting².

Unfortunately, not all infants get their rights to have exclusive breastfeeding for a variety of reasons and conditions. Globally, it can be said that only 2 out of 5 infants are exclusively breastfed³. In Indonesia, data in 2016 showed that only 29.5% of infants received exclusive breast milk until the age of 6 months and the percentage of infants received breast milk in less than 6 months was 54%⁴. From the same data, it was found that the percentage of infants who received breast milk for up to 6 months in East Java Province was 31.3%. One of the cities in East Java is Surabaya. According to data from Surabaya Health Office in 2016, there were 65.1% of infants who received exclusive breastfeeding, a 0.11% enhancement from the previous year⁵. This shows that there is an increase in health awareness and behaviour regarding the importance of exclusive breastfeeding even though there is no detailed data on this matter.

Surabaya is a densely populated city. One reason for