

The Relationship Between Age, Education, Occupation, and Parity with Exclusive Breastfeeding Among Working Mothers

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Abstract

Exclusive breastfeeding (ASI) is the sole nutrition given to infants from birth to six months, without the inclusion of other foods or drinks except for medication, vitamins, or minerals. It is the first, primary, and best natural nutrition for newborns. This study aims to analyze the relationship between age, education, occupation, and parity in exclusive breastfeeding practices among working mothers. Utilizing a cross-sectional survey design, this study employs univariate and bivariate analyses with Chi-Square tests. Conducted between January and April 2024, the research sampled 50 breastfeeding mothers with children aged six months to two years. The findings indicate significant relationships between age, occupation, and parity with exclusive breastfeeding. Educational interventions on the importance of exclusive breastfeeding and proper breast milk storage are recommended

Keywords: working mothers, exclusive breastfeeding, age, education, parity

Introduction

Colostrum is the yellowish milk produced during the first three days after childbirth. It is rich in antibodies that boost the baby's immunity, thereby reducing the risk of infant mortality. From the fourth to the tenth day, the levels of immunoglobulins (Ig), lactose, and proteins in breast milk decrease, while the fat and calorie content increases. Additionally, breast milk contains enzymes that aid nutrient absorption without interfering with other intestinal enzymes, a benefit that formula milk does not provide (1).

Exclusive breastfeeding (ASI) is the sole source of nutrition for infants from birth to six months of age, without the addition of any food or drinks except for medications, vitamins, and minerals. ASI serves as the first, primary, and most optimal natural nutrition in the early stages of a baby's life. It remains the main nutritional source for infants until six months old. Babies require breast milk and adequate nutritional intake to improve their nutritional status during growth, making exclusive breastfeeding crucial for their development and health. Exclusive breastfeeding reduces the risk of heart disease in adulthood and protects infants from various other health risks. If breast milk intake is insufficient, it can hinder the baby's growth and development (2).

Breastfeeding exclusively for at least six months can increase infant survival rates by 22% if breastfeeding begins within the first hour after birth (3). Breast milk is highly beneficial for physical, mental, and intellectual development (4).

Despite its known benefits, the coverage of exclusive breastfeeding has not reached the established target (5). According to the 2023 SKI data, the exclusive breastfeeding rate in Indonesia was only 55.5%, significantly lower than the national target of 80% (6). In both developed and developing countries, including Indonesia, many career-oriented mothers do not breastfeed exclusively. UNICEF has stated that exclusive breastfeeding is critical in reducing infant mortality rates in Indonesia (7).

Several factors hinder exclusive breastfeeding, including sociodemographic aspects, family support, healthcare access, facilities, maternal knowledge, perceived insufficient milk supply, cultural and social influences, and environmental conditions (5). Research conducted by Desy in 2022 revealed that non-exclusive breastfeeding was higher among mothers with high-risk conditions (68.6%, or 35 mothers) compared to low-risk mothers (31.4%, or 16 respondents). The bivariate analysis demonstrated a significant association between maternal age and exclusive breastfeeding (8).

Additionally, Fitriana's 2021 study found a correlation between maternal knowledge and education with exclusive breastfeeding but no significant relationship with maternal occupation (9). However, research by Humairah et al. in 2021 indicated that maternal occupation was significantly associated with self-efficacy in exclusive breastfeeding practices (10).

Method

This survey employed a cross-sectional design to analyze data collected at a single point in time. Univariate and bivariate analyses using Chi-Square tests were conducted. The study was carried out at RS “B” Depok from January to April 2024, involving 50 breastfeeding mothers of infants aged six months to two years. The independent variables were age, education, occupation, and parity, while the dependent variable was exclusive breastfeeding.

Results

Tabel 1. Univariate Analysis

Variabel	Frequency (F)	Percentage (%)
Exclusive Breastfeeding		
Yes	17	34.0
No	33	66.0
Age		
≤ 35 years	29	58.0
> 35 years	21	42.0
pendidikan		
Education	35	70.0
Basic/Intermediate	15	30.0
Higher		
Occupation	43	86.0
Employed	7	14.0
Parity		
≤ 2 children	19	38.0
> 2 children	31	62.0

Based on Table 1, it was found that 17 respondents (34.0%) provided exclusive breastfeeding, while 33 respondents (66.0%) did not. There were 29 respondents (58.0%) aged 35 years or younger and 21 respondents (42.0%) aged over 35 years. Regarding education, 35 respondents (70.0%) had basic or intermediate education, while

15 respondents (30.0%) had higher education. Additionally, 43 respondents (86.0%) were employed, and 7 respondents (14.0%) were not. For parity, 19 respondents (38.0%) had two or fewer children, while 31 respondents (62.0%) had more than two children.

Tabel 2. Bivariate Analysis

Variable	Exclusive Breastfeeding		Not Exclusive Breastfeeding		Total		p-Value
	F	%	f	%	F	%	
Age $\leq$ 35 years							
Age > 35 years	16	32.0	13	26.0	29	58.0	.000
Education Basic	1	2.0	20	40.0	21	42.0	
Education Higher							
Employed	10	20.0	25	50.0	35	70.0	.329
Unemployed	7	14.0	8	16.0	15	30.0	
Parity $\leq$ 2							
Parity > 2	10	20.0	33	66.0	43	86.0	.000
Age $\leq$ 35 years	7	14.0	0	0.0	7	14	
Age > 35 years							
Education Basic	14	28.0	5	10.0	19	38.0	.000
Education Higher	3	6.0	28	56.0	31	62.0	

Based on Table 2:

It was observed that mothers aged $\leq$ 35 years who exclusively breastfed their babies amounted to 16 respondents (32.0%), while those aged $\leq$ 35 years who did not exclusively breastfeed totaled 13 respondents (26.0%). The chi-square test results showed a p-value = 0.000 (p-value $\leq$ 0.05), indicating a significant relationship between maternal age and exclusive breastfeeding among working mothers.

Mothers with higher education who exclusively breastfed totaled 7 respondents (4.0%), while those with higher education who did not exclusively breastfeed totaled 8 respondents (16.0%). Mothers with basic or intermediate education who exclusively breastfed amounted to 10 respondents (20.0%). The chi-square test results yielded a p-

value = 0.329 ($p\text{-value} \geq 0.05$), indicating no significant relationship between maternal education and exclusive breastfeeding among working mothers.

Among working mothers, 10 respondents (20.0%) exclusively breastfed, while 33 respondents (66.0%) did not. The chi-square test results showed a $p\text{-value} = 0.000$ ($p\text{-value} \leq 0.05$), indicating a significant relationship between maternal occupation and exclusive breastfeeding.

Mothers with a parity of ≤ 2 who exclusively breastfed totaled 14 respondents (28.0%), while 5 respondents (10.0%) with a parity of ≤ 2 did not exclusively breastfeed. The chi-square test results yielded a $p\text{-value} = 0.000$ ($p\text{-value} \leq 0.05$), indicating a significant relationship between parity and exclusive breastfeeding among working mothers.

Discussion

Exclusive breastfeeding (ASI) provides essential nutrition for infants from birth up to six months without the addition of any other food or drinks, except for medications, vitamins, and minerals. ASI is the first, primary, and best natural source of nutrition for infants, supporting growth and reducing health risks, such as heart disease in adulthood. Insufficient intake of ASI can hinder physical and developmental growth. Breastfeeding within the first hour of birth increases infant survival rates by 22%, highlighting its importance for physical, mental, and intellectual development.

Despite its benefits, the rate of exclusive breastfeeding has not met the target. Data from the SKI 2023 showed Indonesia's exclusive breastfeeding rate was 55.5%, far below the national target of 80%. In many developed and developing countries, including Indonesia, working mothers face challenges in exclusively breastfeeding, even though UNICEF emphasizes its critical role in reducing infant mortality rates.

This study revealed a significant relationship between maternal age, occupation, and parity with exclusive breastfeeding among working mothers. The findings align with Desy's (2022) research, which found maternal age significantly affects breastfeeding practices. However, no significant relationship was found between maternal education and exclusive breastfeeding, consistent with Hana et al. (2020). The study also demonstrated a significant relationship between maternal occupation and exclusive breastfeeding, supporting Humairah et al.'s (2021) findings. Additionally, parity was

significantly related to exclusive breastfeeding, as corroborated by Luluk et al. (2021).

Limitation

The study was limited by its cross-sectional design and reliance on secondary data (medical records), which restricted the ability to capture longitudinal patterns.

Conclusion

This study concluded that maternal age, occupation, and parity significantly influence exclusive breastfeeding practices among working mothers.

Ethical Considerations

This research involved human subjects and adhered to ethical principles, including informed consent, data confidentiality, and approval from an ethics committee. Participants were fully informed about the study, and all procedures complied with ethical standards to ensure their rights and safety..

Acknowledgment

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Conflict of Interest

The researchers declare no conflicts of interest in this study. All efforts were made to maintain objectivity and transparency throughout the research process.

Author contribution

The lead researcher was responsible for drafting the proposal, analyzing data, and compiling the report. The second author and the enumerator contributed to data collection, while the second author also prepared the manuscript for publication.

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