

Grandmother's Role as a Personal Reference toward Exclusive Breastfeeding Behavior

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Abstract

Grandmother's role in the behavior of exclusive breastfeeding is very necessary because the grandmother is the closest person in the family. Its existence influences decision-making in various family matters, especially the care of children from birth to adulthood. This study aims to analyze differences in the role of grandmothers as a personal reference for exclusive breastfeeding behavior. This type of experimental Quasy research was conducted in May-July 2018 in Sidoarjo Regency, East Java, Indonesia by dividing two experimental groups, namely the treatment group and the control group. Both groups started with a pre-test, and after the treatment was measured again (post-test). Statistical analysis used multivariate covariance analysis (MANCOVA) to test whether there were differences in treatment between the control group and the treatment group after adjusting for confounding variables, namely formula milk promotion. The results of the pre-test statistical test showed that the value of $p = 0.384$ means that there is no difference in the role of the grandmother on the exclusive breastfeeding behavior of the control group and the treatment group. The results of the post-test statistical test showed that the value of $p = 0.000$ means that there are differences in the role of the grandmother on the exclusive breastfeeding behavior of the control group and the treatment group. The role of the grandmother as a personal reference can influence exclusive breastfeeding behavior so that it can be a form of family support for the mother for exclusive breastfeeding and can be used as a way to support exclusive breastfeeding mothers.

Keywords: Behavior, exclusive breastfeeding, grandmother's role, personal reference.

Abstrak

Peran nenek terhadap perilaku pemberian ASI eksklusif sangat diperlukan karena nenek merupakan orang terdekat dalam keluarga. Keberadaannya berpengaruh dalam pengambilan keputusan dalam berbagai urusan keluarga, khususnya pengasuhan anak sejak lahir hingga dewasa. Penelitian ini bertujuan untuk menganalisis perbedaan peran nenek sebagai referensi pribadi terhadap perilaku menyusui eksklusif. Jenis penelitian Quasy eksperimental dilakukan pada bulan Mei-Juli 2018 di Kabupaten Sidoarjo Jawa Timur Indonesia dengan membagi dua kelompok eksperimen yaitu kelompok perlakuan dan kelompok kontrol. Kedua kelompok tersebut diawali dengan pre-test, dan setelah perlakuan diukur kembali (post-test). Analisis statistik menggunakan analisis multivariat kovarians (MANCOVA) untuk menguji apakah terdapat perbedaan perlakuan antara kelompok kontrol dan kelompok perlakuan setelah menyesuaikan dengan variabel perancu yaitu promosi susu formula. Hasil uji statistik pre-test didapatkan nilai $p = 0,384$ artinya tidak terdapat perbedaan peran nenek terhadap perilaku menyusui eksklusif kelompok kontrol dan kelompok perlakuan. Hasil uji statistik post-test didapatkan nilai $p = 0,000$ artinya terdapat perbedaan peran nenek terhadap perilaku menyusui eksklusif kelompok kontrol dan kelompok perlakuan. Peran nenek sebagai referensi pribadi dapat mempengaruhi perilaku menyusui eksklusif sehingga dapat menjadi salah satu bentuk dukungan keluarga terhadap ibu untuk pemberian ASI eksklusif dan dapat digunakan sebagai cara untuk mendukung ibu menyusui secara eksklusif.

Kata kunci: Menyusui eksklusif, peran nenek, perilaku, referensi pribadi.

Introduction

A role is a form of behavior expected by others to someone or a particular social situation in accordance with their position in a system (Friedman, *et al.*, 2010). Behavior is more influenced by people who are considered important (Personal Reference). If someone is important that is said or done tends to be emulated (Friedman, *et al.*, 2010). A person's behavior can be measured based on the domain of behavior, namely knowledge, attitudes, and psychomotor. Exclusive breastfeeding behavior is a world problem because exclusive breastfeeding influences infant morbidity and mortality. Research conducted by Hanieh, *et al* (2015) shows that exclusive breastfeeding at 6 weeks of age significantly reduces the possibility of hospitalization for pneumonia and diarrhea. Breastfeeding can protect babies against the risk of asthma, eczema, rhinitis, and reduce the risk of otitis media in early childhood to 40-50% (Lodge, *et al.*, 2015; Lodge, *et al.*, 2016). Exclusive breastfeeding reduced the risk of ARI (Acute Respiratory Tract Infections) 32,738 times (Hersoni, 2015). The percentage of stunting was greater in infants aged 12-35 months who were not given exclusive breastfeeding (51.4%) than toddlers who received exclusive breastfeeding (19%) (Anjani, 2018; Rambitan, R.B., 2014).

However, only around 2/5 of babies worldwide are exclusively breastfed and only about 2/3 of babies are introduced to solid foods at the right time. WHO data that determine the average number of exclusive breastfeeding in the world is only 38%. Data on exclusive breastfeeding in Indonesia is still below the national target (80%) which is 52.3% (2014), 55.7% (2015), and 54% (up to 6 months) and 29.5% (0-5 months) (2016). While the data of exclusive breastfeeding in East Java is 74% (2014), 74.1% (2015), and 2016 there were 31.3% (up to 6 months) and 48.1% (0-5 months). Data on exclusive breastfeeding in Sidoarjo Regency is 54.5% (2014), 57.3% (2015), and 54.7% (2016) (Kemenkes, 2014; Kemenkes, 2015; Kemenkes, 2016).

Efforts that have been made by the Sidoarjo regency government, among others, stipulate regional regulation No. 1 of 2016 on improving nutrition and providing exclusive breastfeeding as outlined in regent regulation no. 99 of 2017. Together with the health office conducted counseling training for health workers in health services and the formation of breastfeeding support groups in villages in the working area of community health centers. Although many efforts have been made by the government, family support is needed because families with breastfeeding mothers need patience, time, and knowledge about breastfeeding. The family's role includes family support and the intention of pregnant

women to breastfeed. The most important family support is from each family member (husband/mother/mother-in-law), as well as other relatives who live in one house, which can have an impact on the initial initiation and duration of breastfeeding (Sukmawati et al., 2019; Etika & Partiw, 2015; Suradi, 2010; Roesli, 2005). The role of the family (grandmother) is very necessary because grandmother is the closest person in the family, its existence has an influence in making decisions in various family matters especially parenting children from birth to adulthood (Hariyani, 2014). The form of family in Sidoarjo Regency is mostly in the form of traditional families, namely nuclear family and extended family. The form of extended family family, grandmother's role greatly influences family decision making including breastfeeding decisions (Sudiharto, 2007). Research conducted by Kurniawan (2013) and (Grasley, J., Clark, M., Schleis (2012) shows that mother/mother-in-law support has a positive correlation with the success of exclusive breastfeeding.

The role of the family includes providing motivation for pregnant women/nursing mothers to exclusively breastfeed, accompanying mothers while breastfeeding, helping to complete homework such as cleaning the house, bathing the baby, cooking, etc (Etika & Partiw, 2015; Suradi, 2010). Research conducted by Siswono (2014) shows that the intentions of pregnant women, family support, and support of health workers affect the coverage of exclusive breastfeeding. In addition to family support, the intention of pregnant women to exclusively breastfeed is needed so that to increase family support and the intention of pregnant women to breastfeed, the grandmother is appointed as a personal reference (Siswono, 2014). The research objective is analyze the role of the grandmother as a personal reference for exclusive breastfeeding behavior.

Method

Study setting and participants: Quasi-experimental research was conducted in May-July 2018 by making two experimental groups, treatment groups and control groups. This research was conducted in Sidoarjo Regency, East Java, Indonesia. In both groups it was preceded by a pre-test, and after the treatment was measured again (post-test). The sampling technique using purposive sampling technique, is a sample selection technique by determining research subjects that meet the research criteria (Nursalam, 2016). Samples were 30 the grandmother with final trimester pregnant women. Then put in the control group and the treatment group respectively 15 respondents. The research sample was 30

grandmothers who have children/daughter-in-law who is pregnant in the last trimester. The sample size is determined using the Gay formula, which is the minimum sample size that can be used when using the experimental method as many as 15 subjects per group (Wiyono, 2011). Then determine the control group and treatment group for each of 15 respondents according to the inclusion criteria, namely willingness to be a respondent, a pregnant woman in the final trimester, the form of an extended family, and living in the Sidoarjo district.

Measurement: The control group and treatment group were pre-tested for 60 minutes. The treatment group was given an explanation and implementation of the family manual. The implementation of the family guidebook was conducted 4 times (Figure 1). The first intervention was carried out for 2x60 minutes with the target of grandmothers with pregnant women in the final trimester. Objective: To determine the role of grandmothers in providing knowledge and attitude formation for pregnant women on exclusive breastfeeding. The second intervention was carried out 1x60 minutes with the target of the grandmother with the mother who gave birth for 1 week along with the postpartum visit by the village midwife. Objective: To determine the role of grandmothers in motivating and supporting exclusive breastfeeding mothers and the actions taken if they encounter problems. The third intervention was carried out 1x60 minutes with the target of the grandmother and had given birth for 2 weeks along with the postpartum visit by the village midwife. Objective: To determine the role of grandmothers in motivating and supporting exclusive breastfeeding mothers and the actions taken if they encounter problems. The fourth intervention was carried out for 1x60 minutes with the target of the grandmother with the mother having given birth for 4 weeks along with the postpartum visit by the village midwife. Objective: To determine the role of grandmothers in motivating and supporting exclusive breastfeeding mothers and the actions taken if they encounter problems. Evaluation (post-test) is done when a pregnant woman has given birth and a 1-month-old baby. Interventions in the treatment group were carried out by the researchers themselves.

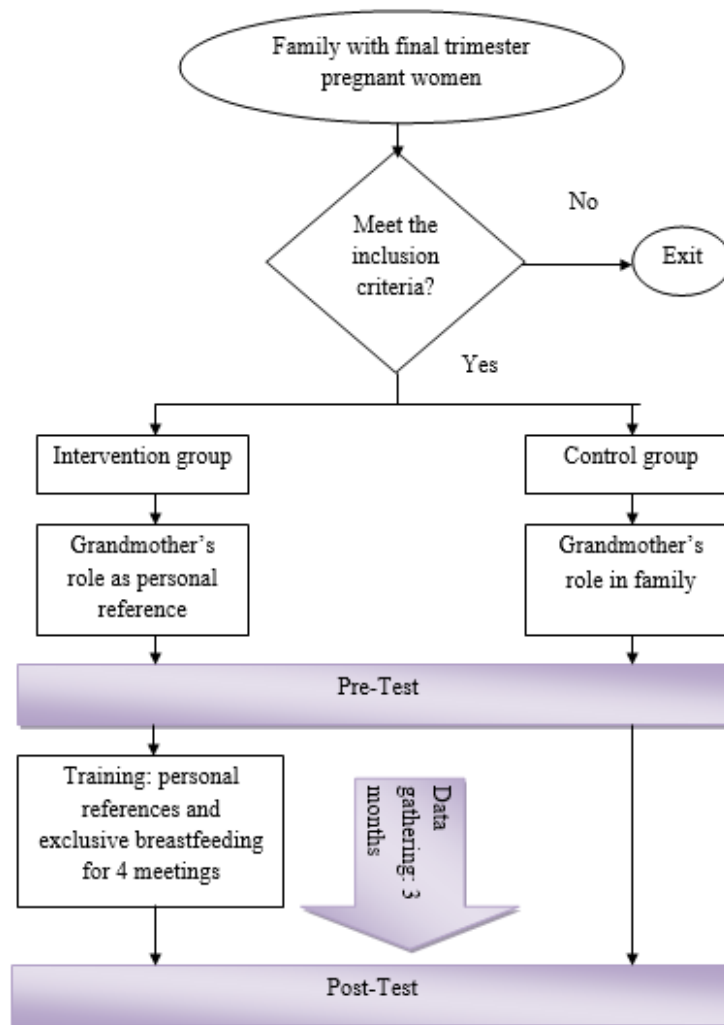


Figure 1: the Flowchart of personal reference approach

Variables of the study: The dependent variable is exclusive breastfeeding behavior which includes knowledge, attitude, and psychomotor. The independent variable is the role of grandmother as a personal reference which includes support (informational, assessment, instrumental, emotional support) and the intention of pregnant women to breastfeed. Confounding variable is promotion of formula milk.

Operational definitions: Grandmother's role as a personal reference: grandmother as a role model, source of information, experience in caring for babies, and participate in deciding every family matter (Wahyuni, YT., Abidin, 2015).

Statistical analysis: The collected data was examined manually for completeness then analyzed the effect of the intervention using the multivariate analysis of covariance (Mancova) test. Mancova test to analyze differences in treatment of a group of dependent variables after adjusting for the effects of confounding variables. Significant statistics are stated at $p < 0.05$.

Ethics approval and consent to participate: Ethical clearance was obtained from Health Research Ethics Committee Faculty of Public Health Airlangga University No. 550-KEPK. Each study participant was adequately informed about the objective of the study and anticipated benefits and risk of the study. Verbal consent was obtained from study participants for protecting autonomy and ensuring confidentiality. Respondents were also told the right not to respond to the questions if they didn't want to respond or to terminate the interview at any time.

Result

Socio-demographic characteristics: The sample size was 30 families with final trimester pregnant women who were divided into treatment and control groups. Most (87%) grandmothers are 45-59 years old. Length of stay > 10 years 21 (70%), employment status 27 (90%) does not work, grandmother's status as mother-in-law 21 (70%). Most (93%) of pregnant women are 25-45 years old. 30 (100%) employment status works.

Grandmother's role as a personal reference toward exclusive breastfeeding behavior:

The results of the pre-test statistical test showed that the value of $p = 0.384$ means that there is no difference in the role of the grandmother on the exclusive breastfeeding behavior of the control group and the treatment group. The results of the post-test statistical test showed that the value of $p = 0.000$ means that there are differences in the role of the grandmother on the exclusive breastfeeding behavior of the control group and the treatment group.

Table 1. The pre-test and Post-Test Scores of The Grandmother's Role as a Personal Reference for Exclusive Breastfeeding Behavior in Sidoarjo Regency May-July 2018

No.	Impact	Pre-test			Post-test		
		Value	F	Sig.	Value	F	Sig.
1.	Group	0,76	0,992	0,384	62,516	812,714	0,000
2.	Formula milk promotion	0,164	2,138	0,138	0,007	0,91	0,913

Discussion

The role of the family (grandmother) is very necessary because grandmother is the closest person in the family, its existence has an influence in making decisions in various family matters especially parenting children from birth to adulthood (Hariyani, 2014).

Current lifestyle changes, the role of a mother begins to change by having a dual role as a career woman and a housewife. If parents (mothers and fathers) have a career, the responsibility of caring for children is generally given to grandmothers (Wahyuni & Abidin, 2015).

Grandmother's role as a personal reference is a form of family support for pregnant women so that the mother can give the right decision, especially exclusive breastfeeding after giving birth. Research by Furi & Megatsari (2014) shows that there are three factors that have an influence on decision making namely important people as references, affordability of health care facilities, and culture. The most significant factors are important people as references (Personal Reference). Grandmother's role as a personal reference referred to here is grandmother as an important decision maker in the family given their knowledge and skills about exclusive breastfeeding through a family manual. Furthermore, grandmothers can provide knowledge and skills to pregnant women (especially in pregnant women who work) so that they can increase knowledge, attitudes, and psychomotor exclusive breastfeeding from pregnant women. The family guidebook contains things related to the role of the family, breastfeeding behavior, stages of breastfeeding, conditions that are often encountered in breastfeeding, and milk. After being given the material in the guidebook and practicing it, grandmothers can motivate and support pregnant women to breastfeed exclusively after giving birth. In addition, there is a need for further assistance from cadres of integrated service posts and midwives in optimizing support for breastfeeding mothers.

Conclusion

Grandmother's role as a personal reference (including family support and intention of pregnant women to breastfeed) increases knowledge, attitudes, and psychomotor exclusive breastfeeding. This shows that the role of grandmother as a personal reference can be used as a form of family support for pregnant women to breastfeed exclusively after giving birth.

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