

# **The Relationship Between Employment Status And Mother's Nutrition Patterns In Exclusive Feeding In Mangunsari Village Lumajang District**

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## **ABSTRACT**

Breast-feeding to newborns is one of the efforts to prevent death and undernourishment problems in infants and toddlers, about 15% of the total incidence of children under five years of age in developing countries as a result of exclusive breast-feeding. Exclusive breast milk that is given to infants for up to 6 months is not added to other foods such as formula, lemon, honey, tea, water, bananas, milk porridge, cookies, and other foods. Infants who are exclusively breast-fed can avoid diseases. Sick infants are given exclusively by breast feeding can accelerate. This journal's search process electronically and online using one database, which is google scholar from 2015-2020. The inclusion criteria of the journal have the same variable as research, the journal used is the journal's 30-200 Indonesian respondents. Based on the journals received results that from the six journals it is evident there is a link between work status and a nutrient pattern in exclusive breast-feeding. This is confirmed by prior research. Thus, mother's work and nutritional patterns influence exclusive breast-feeding.

**Keywords :** Exclusive Breast Milk, Nutrition Patterns, Work

## **BACKGROUND**

WHO (2015) states that around 15% of the total cases of death of children under the age of five in developing countries are caused by non-exclusive breastfeeding. Various problems of undernutrition and over nutrition also arise as a result of feeding before the baby is 6 months old (Ariani, 2015). Lack of knowledge of breastfeeding mothers about the importance of exclusive breastfeeding, the target of 80% coverage of exclusive breastfeeding in Indonesia is still very far from reality. Exclusive breastfeeding is the best investment for the health and intelligence of children (Ministry of Health, 2017). The benefits of exclusive breastfeeding are in accordance with one of the goals of the Sustainable Development Goals (SDGs), namely reducing child mortality and improving mother's health.

Data obtained from the East Java Health Office (DinKes) in 2017 shows that the percentage of breastfeeding has increased from 2016 (75.7%). However, overall it has not met the set target of 77%. Through data from the East Java Health Office, 2017 it is known that the lowest prevalence of exclusive breastfeeding is in Bangkalan Regency, namely, 55.2%. This coverage is still very low when compared to the healthy Indonesia target of 80% (East Java Health Office, 2017).

Exclusive breastfeeding, namely breast milk given to babies up to 6 months without adding other foods such as formula milk, oranges, honey, tea, water, bananas, milk porridge, biscuits, and others. Babies who are exclusively breastfed can avoid various diseases. Sick babies who are exclusively breastfed can speed up the healing process. Breast milk can also help the process of growth and development of intelligence.

working mothers increase the frequency of failure of exclusive breastfeeding. Working mothers experience several obstacles in exclusive breastfeeding because of the time allocation, the quality of being together with the baby, workload, stress, and the low confidence of working mothers to be able to provide exclusive breastfeeding. This is exacerbated by Law no. 13 of 2003 concerning manpower article 82 which states "women workers/laborers are entitled to rest for 1.5 months before giving birth to a child and 1.5 months after giving birth to a child".

Based on the phenomenon above, the formulation of the research problem is, is there a relationship between employment status and maternal nutritional patterns in exclusive breastfeeding in Mangunsari Village, Lumajang Regency in 2020?

The general objective of this research is to analyze the employment status and nutritional patterns of mothers with exclusive breastfeeding in Mangunsari Village, Lumajang Regency in 2020. Meanwhile, the specific objectives are:

1. Analyze Employment Status
2. Analyze Nutritional Patterns
3. Analyzing Exclusive Breastfeeding
4. Analyzing the Relationship between Employment Status and Nutritional Patterns in Exclusive Breastfeeding.

## **METHOD**

Problem: Exclusive Breastfeeding

The keywords used in the literature search are a combination of keywords as follows: diet of mothers with exclusive breastfeeding (Google Scholar), Occupation with Exclusive breastfeeding (Google Scholar), nutritional status of mothers with exclusive breastfeeding (Google Scholar).

## **DISCUSSION**

### **A. Jobs With Exclusive Breastfeeding**

Based on the results of a literature study on the relationship between employment status in exclusive breastfeeding. Obtaining results from 3 journals on work with exclusive breastfeeding, obtaining results from all journals stating that there is a relationship between work and exclusive breastfeeding.

Based on the results of the study (Fitriyani et al, 2017) stated in his research of the total respondents who carried out exclusive breastfeeding as many as 77 respondents (50.7%), 52 respondents (34.2%) did not work and exclusively breastfed, only 25 respondents (16.5%) respondents who work but still provide exclusive breastfeeding to their children. There is a relationship between mother's work and exclusive breastfeeding in infants as evidenced by the results of the chi-square test  $p\text{-value } 0.018 < 0.05$ .

Based on the results of the study (Anggrania et al, 2018) stated the results of the total respondents who carried out exclusive breastfeeding as many as 44 respondents (61.1%), 42 respondents (58.3%) did not work and provided exclusive breastfeeding, only 2 respondents (2.8 %) of respondents who work but still provide exclusive breastfeeding to their children. There is a relationship between mother's work and exclusive breastfeeding in infants as evidenced by the results of the chi-square test  $p\text{-value } 0.000 < 0.05$ .

Based on the results of the study (Sihombing, 2018) the results of the study showed that of the total respondents who did not practice exclusive breastfeeding, there were 23

respondents (42.6%), 21 respondents (38.9%) did not work and exclusively breastfed, only 2 respondents (3.7 %) of respondents who work but still provide exclusive breastfeeding to their children. There is a relationship between mother's work and exclusive breastfeeding in infants as evidenced by the results of the chi-square test  $p\text{-value } 0.005 < 0.05$ .

According to Danso (2014) working mothers experience difficulties in exclusive breastfeeding because they have to share their time with their work, besides that the influence of family members also influences the practice of exclusive breastfeeding. Several factors cause babies not to be given breast milk properly. These factors are characteristic factors. mother, baby factors, environment, family support, health education, socio-economic and culture (Budiharjo, 2013). In urban areas where relatively more mothers work to earn a living, mothers cannot breastfeed their babies properly and regularly. This is significant because the situation in the workplace does not yet support the practice of breastfeeding, for example there is no place to express and store breast milk, there are not many available or there are no babysitting places so that working mothers can breastfeed their babies at certain times (Sari, 2011).

Based on the results of the research above, it is stated that all journals state that there is a relationship between employment status in exclusive breastfeeding. So it can be concluded that work affects exclusive breastfeeding to infants, the employment status of a working mother means that the mother is most likely not to provide exclusive breastfeeding to her baby, and if the mother's employment status is not working, it is highly likely that the mother can provide exclusive breastfeeding. Because most mothers work, they have less time to care for their babies, thus allowing mothers not to exclusively breastfeed their babies. Actually, if a working mother can still give exclusive breastfeeding to her baby by pumping or expressing breast milk, then it can be stored and given to her baby later. Most working mothers do not give exclusive breastfeeding to their babies. Apart from that, the reasons for not giving exclusive breastfeeding to their babies include formula milk, the mother reasons because it is easier so that breastfeeding is interspersed with formula milk and also because they feel they do not have time to always give exclusive breastfeeding because there is a lot of homework that drains time and energy.

### **B. Nutrition Pattern With Exclusive Breastfeeding**

Based on the results of a literature study on the Relationship between Nutritional Patterns in Exclusive Breastfeeding. on nutritional patterns, the result was that out of 3 journals, 2 journals stated that there was a relationship, while 1 journal belonging to Evi Rinata (2015) stated that there was no relationship.

Based on the results of the study (Adila et al, 2015) stated that the results of the study showed that of the total respondents who did not practice exclusive breastfeeding, there were 45 respondents (51.1%), 27 respondents (30.7%) who had nutritional status according to exclusive breastfeeding, while 18 Respondents (20.5%) who had inappropriate nutritional status gave exclusive breastfeeding. There was maternal nutrition for exclusive breastfeeding in infants as evidenced by the results of the multiple logistic regression test  $p\text{-value } 0.829 < 0.05$ .

Based on the results of the study (Pranajaya et al, 2013) stated the results of the research showed a decrease

## **CONCLUSION**

1. There is a relationship between work and exclusive breastfeeding.
2. There is a relationship between nutritional patterns and exclusive breastfeeding.
3. There is a relationship between employment status and nutritional patterns in exclusive breastfeeding.

## REFERENCES

- Adila dkk. (2015). ASI Eksklusif dan Persepsi Ketidacukupan ASI. *Kesmas: National Public Health Journal*, 9(3), 282. <https://doi.org/10.21109/kesmas.v9i3.691>
- Anggrania dkk. (2018). Hubungan Status Pekerjaan Ibu Dengan Pemberian Asi Eksklusif Di Wilayah Kerja Puskesmas Kawangkoan. *Jurnal Keperawatan*, 6(1), 1–6.
- Ariani, A., Rusmil, K., & Yuniati, T. (2016). Hubungan Pengetahuan, Sikap, dan Dukungan Unit Kerja/Departemen dengan Pemberian Air Susu Ibu Eksklusif pada Tenaga Kesehatan Rumah Sakit Hasan Sadikin. *Sari Pediatri*, 18(1), 45. <https://doi.org/10.14238/sp18.1.2016.45-49>
- Depkes RI. (2017). Pedoman Penyelenggaraan Pelatihan Konseling Menyusui Dan Pelatihan Fasilitator Konseling Menyusui. In *BREASTFEEDING-EDUCATION*.
- Dinas Kesehatan Propinsi JawaTimur. (2017). Profil Kesehatan Propinsi Jawa Timur 2017. *Nucleic Acids Research*.
- Diyan dkk. (2018). HUBUNGAN STATUS GIZI DENGAN KADAR PROLAKTIN SERUM IBU MENYUSUI Diyan. *Asuhan Ibu Dan Anak*, 3(1), 45–50.
- Fikawati. (2015). *Gizi Ibu dan Bayi*. Jakarta: Rajawali Pers.
- Fitriyani dkk. (2017). Hubungan Pekerjaan Ibu Terhadap Pemberian Asi Eksklusif Pada Bayi Di Wilayah Kerja Puskesmas Sipayung. *Jurnal Endurance*, 2(2), 113. <https://doi.org/10.22216/jen.v2i2.1699>
- Haryono. (2014). *Manfaat Asi Eksklusif Untuk Buah Hati Anda*. Gosyen Publishing. Edisi 1. Hal: 17-30.
- Kementerian Kesehatan RI Badan Penelitian dan Pengembangan. (2018). Hasil Utama Riset Kesehatan Dasar. *Kementerian Kesehatan Republik Indonesia*. <https://doi.org/10.2196/1> Desember 2013
- Kristiyanasari. (2011). *ASI, Menyusui & Sadari*. Yogyakarta: Nuha Medika.
- Notoatmodjo. (2012). *Metodologi Penelitian Kesehatan*. Jakarta: Rineka Cipta.
- Nugroho, T. (2011). *Asi dan Tumor Payudara*. Yogyakarta : Nuha Medika.
- Pranajaya dkk. (2013). Determinan Produksi ASI pada Ibu Menyusui. *Jurnal Keperawatan*, IX(2), 227–237.
- Sihombing, S. (2018). Hubungan Pekerjaan Dan Pendidikan Ibu Dengan Pemberian Asi Eksklusif Di Wilayah Kerja Puskesmas Hinai Kiri Tahun 2017. *Midwifery Journal*, 5(01), 40–45.
- Sugiyono. (2014). *Metode Penelitian Pendidikan Pendekatan Kuantitatif, Kualitatif, dan R&D*. Bandung: Alfabeta.
- Sugiyono. (2015). *Metode Penelitian Kombinasi (Mix Methods)*. Bandung: Alfabeta.
- UNICEF. (2011). *Ringkasan Kajian Gizi*. Jakarta: Pusat Promosi Kesehatan - Kementerian Kesehatan RI; 2012.
- WHO, UNICEF, UNFPA, Bank, W., & United Nations. (2017). Trends in Maternal Mortality : 1990 to 2015, Estimates by WHO, UNICEF, UNFPA, World Bank Group and United Nations Population Devision. In *WHO*. <https://doi.org/ISBN 978 92 4 150363 1>
- Yuli Astutik. (2014). *Payudara dan Laktasi*. Jakarta: Salemba Medika.