

Analysis Promotion Efforts of Exclusive Breastfeeding (A qualitative study in Puskesmas Pati II)

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Abstract

The benefits of exclusive breastfeeding in accordance with one of the objectives of the Millennium Development Goals (MDGs) of reducing child mortality and improving maternal health. The promotional efforts of exclusive breastfeeding can analysis approach musty system consisting of input, process aspects, and aspects of the output. The research objective to analyze the promotional efforts of exclusive breastfeeding in Puskesmas Pati II. This type of research is a qualitative which focused on efforts to promotion of exclusive breastfeeding. The informants are determined by purposive sampling and snowball sampling. Data collection techniques with in-depth interviews. Input aspect is human resources midwives, the source of funds of the government ie BOK funds, availability of infrastructure adequate promotion of exclusive breastfeeding, and for the availability of SOP promotion of exclusive breastfeeding need reconsideration. Aspects of the process carried out classroom activities pregnant women and mothers, training of exclusive breastfeeding by midwives, nutrition and health cadres, networking, monitors the evaluation conducted regularly by midwives in coordination with DKK and Puskesmas, and the obstacles faced when promoting exclusive breastfeeding, Aspects of output is less than optimal because there is still no village Puskesmas Pati II failed to reach the target coverage exclusively breastfed. Health Department needs to make clear SOPs to support the promotion of exclusive breastfeeding. Puskesmas need to make special recruitment of health promotion at the health center.

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INTRODUCTION

The health of children under five is one indicator that reflects the level of welfare. Toddlers healthy is a big asset in the future survival of the nation. Pattern and duration of breastfeeding gives a very positive influence on health and child development process optimally. Enzymes in breast milk helps the growth of the brain, bone formation and prevent disease and infection in infants (Badan Pusat Statistik Kabupaten Pati, 2017).

National policy to provide exclusive breastfeeding for six (6) months stipulated in the Health Ministerial Decree No. 450 / Menkes / SK / IV / 2004 (Dinas Kesehatan Kabupaten Pati, 2016). The local government was recommended to build regional regulations that support the implementation of the program early initiation of breastfeeding and exclusive breastfeeding to be legally binding for all parties involved as well as the promotion, monitoring, evaluation and monitoring of the implementation and achievement of program exclusive breastfeeding (Santi, 2017).

Pati District Health Department continues to improve the capacity of breastfeeding counseling training for staff health centers and hospitals in the district of Pati. Through such training to achieve growth and development of infants / children are optimal, while maintaining the health of mothers after childbirth. Follow-up of this activity, in accordance declaring Pati No 54/2012, each Unit of Local Government Leadership lactation required to have a space or place to breastfeed in any health institution. Counselors are experts in breastfeeding counseling should be available in each institution. The counselors after training, is expected to provide and improve counseling (Dinas Kesehatan Kabupaten Pati, 2016).

In national, exclusively breastfed infants coverage of 61.33%. This figure already exceeded the target of the Strategic Plan 2017 is 44%. (Kementrian Kesehatan RI, 2018). The percentage of exclusive breastfeeding in infants 0-6 months in Central Java province in 2017 amounted to 54.4%, a slight increase when

compared to the percentage of exclusive breastfeeding in 2016, namely 54.2% (Dinas Kesehatan Provinsi Jawa Tengah, 2018).

The percentage of children aged less than 2 years who were breastfed exclusively in Pati regency in 2017 amounted to 42.53%, down from the previous year to reach 53.04% (Badan Pusat Statistik Kabupaten Pati, 2017). The highest coverage of exclusive breastfeeding in the Puskesmas Tayu II amounted to 96.7% and the lowest coverage at the Puskesmas Pati II amounted to 60.9% (Dinas Kesehatan Kabupaten Pati, 2017).

METHOD

This type of research is a qualitative which focused on efforts to promotion of exclusive breastfeeding. Data collection was conducted in August-September 2018. The research technic sampling used purposive sampling 5 initial informant and developed with snowball sampling technique to 13 informants consisting of the head of the clinic, the midwife coordinator, promoter of health, nutrition officers, midwives 2 people, nursing mothers 3 (breastfeeding up to 6 months ago), family health section chief, section chief of promotion and community empowerment, and health cadres 2.

RESULTS AND DISCUSSION

Table 1. Characteristics of Main Informant Medicals

Informants code	Years of service	Education	office
IU.1	5 th	S1, Medicine	head of Puskesmas
IU.2	20 th	D3, Midwifery	midwife Coordinator
IU.3	18 th	D3, Midwifery	Health promoter
IU.4	18 th	D3, Nutrition	Nutrition officers
IU.5	20 th	D3, Midwifery	The village midwife
IU.6	15 th	D3, Midwifery	The village midwife

Table 2. Key Informant Characteristics Breastfeeding

Informants code	Education	age Infants
IU.9	High School	2 months
IU.10	High School	1.5 months
IU.11	High School	2 months

Table 3. Characteristics of informants Triangulation

Informants code	Education	office
IT.1	S2, Master in Management	Kasie Kesga
IT.2	S2, Master of Health	Head of Promotion and Community Empowerment
IT.3	High School	Health cadre
IT.4	High School	Health cadre

RESULTS AND DISCUSSION

Input Aspect efforts Exclusive Breastfeeding Promotion

Availability of Human Resources (HR) at the Regional Health Center Pati II in exclusive breastfeeding promotion efforts shown by the key informant interviews conducted as follows:

"... who hold health promotion program is the midwife DIII, ... the availability of sufficient midwives, one village one midwife, the midwife workforce there are 21 midwife there are 12 and the other is a center midwife" (IU.1)

Aspects input exclusive breastfeeding promotion in Puskesmas Pati II is composed of human resources is a midwife. This is because health centers do not have their Pati II special health promotion. Head of Puskesmas Pati II and the staff in charge of health promotion programs Puskesmas Pati II said that the unavailability of community health extension workers educated in the field of health DIII minimal health promotion. FEA / health

promoters in Puskesmas Pati II is a school graduate Diploma in Midwifery.

In accordance with the Decree of the Minister of Health No. 1114 / Menkes / SK / VII / 2005 indicates that the standard of health promotion health centers for specialized personnel is DIII health interest and talent in the field of health promotion. Based on the guidelines for health centers health promotion is not prohibited a midwife or other health worker holding a health promotion program if there is no special power. But not all health workers can not necessarily hold a health promotion program. Health workers who are not specialized personnel must have the ability of health promotion in the form of knowledge and skill in conveying information or counseling. This is consistent with research Sari & Sulistyowati (2015), that the main supporter of health promotion is human resources.

Puskesmas Pati II empowers midwife and midwives in the village as human resources in the promotion of exclusive breastfeeding. Every village had distributed one midwife in each village. There are 12 midwives in Puskesmas Pati II spread over 12 villages. According Prasetyono (2009) that midwives also contribute to promote exclusive breastfeeding, it is in accordance with the role and authority of midwives, which refers to the Decree of the Minister of Health of the Republic of Indonesia No. 900 / Menkes / SK / VII / 2002 on Registration and Practice of Midwives. In this decision, it is expected all the midwives who provide health services to the people, especially pregnant women, postpartum and breastfeeding strives to provide counseling on exclusive breastfeeding since the prenatal care (Kementerian Kesehatan, 2002).

Midwives in Puskesmas Pati II is still no three midwives are in the process of further studies DIII Midwifery. Midwives in Puskesmas Pati II had been trained exclusively breastfed motivator. The quality of human resources largely determines the success of a program, especially exclusive breastfeeding promotion program. Knowledge of health promotion officer influence the conduct of health

promotion at the health center, it is according to research conducted by Suryani (2009).

Kaepala Education Family Health Section is a Master in Management and the head of health promotion and empowerment of educated Master of Health, while the head of puskesmas educated Bachelor of Medicine. Education Head of Family Health and Head of the Health Center in charge of maternal health services, are in accordance with the Minister of Health Decree No. 971 / Menkes / Per / XI / 2009 on Standards of Competence Structural Health, the education section chief and head of the health centers are educational background of at least Bachelor of Health (Kementerian Kesehatan, 2009c).

Development of human resources is covering education, research, and meetings to increase knowledge, willingness and skills of health workers and groups of community potential. All the existing workforce in the clinic should have knowledge and skills in providing information or counseling. If this skill is not yet owned, it must be organized training programs / courses (Kementerian Kesehatan, 2007).

Efforts to improve human resources through training given. In interviews with the Head of Section for health promotion and empowerment to say that the training ever held by the Department of Health is training / refreshing cadre PHBs where one indicator is exclusive breastfeeding. According to interviews with the Section Head of Family Health says that the training ever held by the Department of Health is training for health workers involved (nutrition officer, midwife coordinators, and volunteers). Training ever undertaken by DKK related to efforts to promote exclusive breastfeeding, among others: training of counselors for staff nutrition, officers nutritional health centers and midwives coordinator, training motivation on breastfeeding for the cadres, training PMBA (Feeding Infants and Children) for officers nutrition and some bikor,

Research results Cauntiho et al (2005), promotion of exclusive breastfeeding can also be done by training health personnel in the form of training Hospital Baby Friendly Hospital

Initiative (BFHI) and home visits during the postpartum period. Rosita research results (2016), one of the most dominant factor affecting exclusive breastfeeding is counseling on exclusive breastfeeding.

The results Wibowo 2016 on information support for pregnant and lactating mothers in exclusive breastfeeding can be obtained from various parties, namely of those affected (significant others), health professionals, health services, as well as the ease and completeness of information access ASI exclusive.

Health promotion budget is supporting health promotion. The main function of health centers as contained in Permenkes No. 75 of 2014 that the health center for health service delivery function that prioritizes promotive and preventive efforts (Kementerian Kesehatan, 2014). Low budget allocation for the implementation of exclusive breastfeeding promotion program will hamper the implementation of the program optimally. Sugiharto, et al (2012), in his journal explaining that the health budget has been more emphasis on curative services, health promotion budget allocation if less it will hinder implementation promotif and preventive efforts that eventually resulted in the lack of improvement in the health of Indonesia.

Puskesmas Pati II obtain the funds used for the promotion of exclusive breastfeeding comes from Pati regency government in the form of operational funds Health (BOK) is forwarded to the clinic for promotion. Source of funding Exclusive breastfeeding promotion activities sourced from Health Operational Assistance (BOK) is the state budget funds. BOK funds are used to spending eating and drinking participants pregnant women and mothers class. Pregnant women who participated in the class of pregnant women do not get the money because it is not a replacement transport allocations within the budget BOK.

Promotion of exclusive breastfeeding are conducted through the ANC in the clinic does not require special allocation. Promotion of exclusive breastfeeding are conducted through

the ANC in Posyandu, typically using funds from the cash contribution RT or RW for consumption expenditure. While the infrastructure budget for the promotion of exclusive breastfeeding has its own allocation, not be taken from funds BOK.

Media promotion of health is the equipment used to deliver health information to facilitate receiving health messages to the community. Health promotion media, namely print, electronic, and the board (Notoadmodjo, 2010). Promotional media conditions in Puskesmas Pati II based on the results of observation are posters and banners but is still a bit of a wall-mounted Puskesmas, while leaflet there are the health workers. Condition of posters, banners and leaflets still in good condition and easy to read.

Andriani research results, et al (2016), stating that the media and means of an effective tool in helping to promote health. Availability of media and means of adequate health promotion to promote the goals of health promotion for the creation of a change. The addition of media that suits your needs is highly expected. Facilities and infrastructure of health promotion health centers with reference to the standard of facilities / infrastructure health promotion clinic, such as flipcharts and stand, LCD projector, amplifier and wireless microphones, cameras, megaphones / public address system, portable generators, tape / Casset recorder / player, and an information board. Facilities and equipment should be included: screen, television, antenna, VCD-DVD player, computer, printer, laptop completeness gadgets,

Facilities and infrastructure in the Puskesmas Pati II is sufficient, it is enough support in the promotion of exclusive breastfeeding. Lactation room is already available but is in the process improvement to meet the criteria in accordance with the letter issued by the Ministry of Health No. 872 / Menkes / XI / 2006 on Criteria and amenities of the room Lactation (Kementerian Kesehatan, 2006). Promotion of exclusive breastfeeding in the Puskesmas Pati II are carried out during the examination of pregnant women do get

pregnant is to use the book KMS (Card Towards Healthy) and leaflet, while in the class of pregnant women and mothers classroom using posters, breast phantom, and leaflets.

Promotion of exclusive breastfeeding in the Puskesmas Pati II is done by adjusting the SOP extension outside the building because there is no special SOP on the promotion of exclusive breastfeeding. Although there is no special SOP for the promotion of exclusive breastfeeding, but promotion of exclusive breastfeeding is still being done by the center midwife, midwives, nutrition officers, and health promoters. The absence of exclusive breastfeeding promotion SOP does not make exclusive breastfeeding promotion program is not running, but it would be nice if it is available SOP promotion of exclusive breastfeeding. Availability of SOP facilitate the task of midwives and health promoters, as the legal basis in case of deviation, to know clearly the obstacles and easily tracked, directing midwife for discipline in the work, as a guideline in carrying out routine work (Asfian, 2008).

Guidelines in its efforts to the promotion of exclusive breastfeeding in Puskesmas Pati II is Perbup No. 54 2012 in accordance with Government Regulation No. 33 of 2012 article on exclusive breastfeeding. Promotion of exclusive breastfeeding unavailable SOP is expected to be a concern of Pati District Government in order to realize the success of exclusive breastfeeding program.

The Aspect process of efforts Exclusive Breastfeeding Promotion

The implementation process is the promotion of exclusive breastfeeding in Puskesmas Pati II carried out on pregnant women classroom activities and class mothers. The implementation process is the promotion of exclusive breastfeeding in Puskesmas Pati II is also conducted through antenatal care (ANC) or prenatal care in health centers. Promotion of exclusive breastfeeding in the class of pregnant women conducted by the health center midwives and midwives, while those carried out

by the ANC in the clinic conducted by its own health center midwife.

This is consistent with that expressed by key informants as follows:

"... every opportunity, every time, we always promotions, such as no examination of pregnant women we have always expressed about how slam plans to give her breast milk can be done in the classroom or pregnant women" (IU.1 and IU.2)

Class of pregnant women do every month in each of the village by the local village midwife that aims to increase knowledge, change attitudes and behavior of mothers to understand about pregnancy, body changes and complaints during pregnancy, prenatal care, childbirth, postnatal care, family planning postpartum care newborns, exclusive breastfeeding, myths / beliefs / local customs, infectious diseases and birth certificate (Kementerian Kesehatan, 2011).

The results of the interview obtained information that the promotion of exclusive breastfeeding in the Puskesmas Pati II Work Area in class expectant mothers and mothers-class yet fully involve health workers. This is because the necessary adjustment of knowledge and skills of health cadres with their duties in implementing mentoring or counseling (Yuniarti, 2012).

Efforts to optimize the promotion of exclusive breastfeeding is the networking done by the public and health professionals. Puskesmas Pati II empower health workers, which is one form of public participation in efforts to promote exclusive breastfeeding. Bidan village health volunteers coordinate aim to do the crawl against puerperal women and nursing mothers who exclusively breastfed. Village midwives and health workers do motivate the mother to be willing to give exclusive breastfeeding. When encountered certain cases in the exclusive breastfeeding midwife may soon be activated to follow up and to report to the clinic. This is consistent with that expressed by key informants as follows:

"Networking Exclusive breastfeeding continues, keep motivated to want to give

breastfeeding mothers ... to DKK monthly report." (IU.2, IU.3, and IU.4)

Scope of exclusive breastfeeding is influenced by breastfeeding support group. Breastfeeding support groups in the community may involve the role of health workers by increasing the knowledge, attitudes, and practices and training of cadres in accordance with the development of the situation and the new policies. During this cadre are more often implementing activities of course, have never received training in breast milk so it does not provide guidance breastfeeding (Jumiyati, 2014).

Promotion of exclusive breastfeeding constraints faced by Puskesmas Pati II is caused by several things, namely human resources (HR), budget, infrastructure, and public awareness is still lacking in exclusive breastfeeding. Promotion of exclusive breastfeeding in Puskesmas Pati II is done by midwives for HR or personnel do not have a special promotion. In accordance with the Decree of the Minister of Health No. 1114 / Menkes / SK / VII / 2005 that the standard of health centers for specialized personnel health promotion is health DIII interest and talent in the field of health promotion (Kementerian Kesehatan, 2005). This is consistent with that expressed by key informants as follows:

"... lactation room that can not be used and is still in the process of improvement." (IU.1 and IU.2)

"FEA do not have a health center ... there is a midwife DIII is assigned as the officer promotion ...". (IU.1)

"People still do not want to give exclusive breastfeeding even though we have the motivation many times ..." (IU.4)

Obstacles when doing classroom pregnant woman is not able to present all pregnant women because there are some women who work and can not bring the family (husband), because some husbands also work. Support from family, especially her husband in pregnant women attend classes with a very big influence on pregnant women in the planning of exclusive breastfeeding (Puspitasari, 2012).

Midwives in Puskesmas Pati II is in conformity with Regulation of the Minister of Health (Minister of Health) 2010 1464 number of permits and the implementation of midwifery practice. Article 18 explains that in carrying out the practice, the midwife is obliged to form a government program to increase the degree of public health status. One government program is a class of pregnant women (Kementerian Kesehatan, 2010c).

Efforts to promote exclusive breastfeeding in Puskesmas Pati II and to overcome the constraints of the above, then do the supervision and technical guidance, as well as monitoring and evaluation. Supervision is an essential component and the determinant factors for the effectiveness of medical care. According Gusna, et al (2016) that the ability of the supervisor to provide guidance in the form of knowledge and technique a good mentor is an important factor so that the supervisor can also be a motivator for improved performance midwife.

Monitoring and evaluation of exclusive breastfeeding promotion efforts undertaken by DKK is family health section and promotion health and empowerment section. Family health section monitoring every month to the nutritional health centers and evaluation officer at the meeting of officials coordinating nutrition clinic. Section health promotion and empowerment of supervision and evaluation based on data PHBs indicator of exclusive breastfeeding. Data PHBS used as guidelines for the preparation of an intervention plan in cooperation with family health section.

"Monitoring and Evaluation was performed 1 month, clerk to the nutritional health centers" (IU.1 and IU.4)

"... a report every month once, after that there is monitoring and evaluation of Puskesmas and DKK ...". (IU.5 and IU.6)

Monitoring and evaluation of the promotion of exclusive breastfeeding is done once a month at nutrition officer the Puskesmas Pati II is a midwife. Exclusive breastfeeding data reported by each midwife in Puskesmas Pati II. Puskesmas reported exclusive breastfeeding of data to DKK each month.

Feedback from health centers report will be presented during the coordination meeting with officials nutrition clinic. Monitoring and evaluation aimed at assessing the level of achievement of the program. According to Ahmad, et al (2013) that surveillance (monitoring) by the program manager will affect the quality of the performance of health workers, especially midwives in villages.

Table 4. Output Aspect efforts Exclusive Breastfeeding Promotion

N	Village	Infants 0-6 months	Exclusiv e breastfeeding	(%)
1	Kutoharjo	54	35	64.7
2	Purworejo	22	15	68.2
3	sinoman	10	5	50.0
4	Widorokanda ng	11	7	63.6
5	Sugiharjo	24	16	66.7
6	Ngepungrojo	26	13	50.0
7	payang	15	11	73.3
8	Sidokerto	29	19	65.5
9	Mulyoharjo	27	25	92.6
10	Tambaharjo	47	47	100
11	Sarirejo	19	9	47.4
12	Tambahsari	16	5	31.3
	total	300	207	69.0

Source: Profile of Puskesmas Pati II 2017

Based on interviews with the Section Head of Family Health coverage data obtained exclusively breastfed Pati regency in 2017 amounted to 76.84%.

"Scope of exclusive breastfeeding Pati regency since the year 2015 -2017 is still above its target. The target set was 55%, the coverage in 2015 was 66.59%, the coverage in 2016 was 74.2%, and the coverage in 2017 was 76.84%." (IT.1)

Output promotion of exclusive breastfeeding in Puskesmas Pati II is not optimal. This can be seen from the scope of exclusive breastfeeding every village in Puskesmas Pati II Regional. There are still 4 villages in Puskesmas Pati II that do not meet the target of achieving a minimum of exclusive

breastfeeding, the Sinoman village 50.0%, 50.0% Ngepungrojo, Sarirejo 47.4%, and 31.3% Tambahsari.

Promotion of exclusive breastfeeding in Puskesmas Pati II relies on the role and function of the village midwife. Still the villages not yet reached the target exclusive coverage due to non-optimal performance of midwives in carrying out promotion of exclusive breastfeeding. Quantity midwife in Puskesmas Pati II had been met, but not all midwives attended training at ASI motivator. Not optimal performance of midwives because there is no clear SOPs regarding the promotion of exclusive breastfeeding and because most of them have not been trained midwives who support skills in the promotion of exclusive breastfeeding.

Strategy to increase exclusive breastfeeding based on research results Widodo (2003) which is a strategy counseling done informally with individual goals and family in an atmosphere of NFE communicated with informative accompanied by a discussion with the target extension to sustained and good enough to motivate and maintain behaviors giving ASI exclusive, This is in accordance with the results of Morrow, et al (1999), Haider, et al (2000) and Tylleskar, et al (2011) in sub-Saharan Africa that counseling by health workers who do home visits are powerful strategies to improve the delivery Exclusive breastfeeding. Exclusive breastfeeding promotions are highly dependent on support and performance of health workers are supported with funds, facilities and infrastructure,

Efforts to improve education and the promotion of breastfeeding is also necessary because the public's understanding of breastfeeding is still low. Target education about breastfeeding that mothers, husbands, families and communities. Counseling assistance in the form of suggestions / advice to mothers on issues that arise during breastfeeding counseling conducted by trained personnel stationed at the health center, clinic / hospital maternity ward and in the workplace (Kurniawan, 2013).

CONCLUSIONS AND SUGGESTIONS

Input aspect promotional efforts of exclusive breastfeeding in Puskesmas Pati II is supported by adequate and qualified human resources, the financial resources, the availability of sufficient facilities and infrastructure, and the availability of good SOP. Aspects of the process carried out classroom activities pregnant women and mothers, training of exclusive breastfeeding by midwives, petugas nutrition and health cadres, netting exclusive breastfeeding is done by health workers, monitors the evaluation conducted regularly by midwives in coordination with DKK and Puskesmas, and constraints while doing the promotion of exclusive breastfeeding class on pregnant women are not able to bring the family or husband. Aspects of the output is not optimal because there are still villages in Puskesmas Pati II that have not reached the target coverage exclusively breastfed.

Health Department needs to make clear SOPs for the promotion of exclusive breastfeeding for the promotion of officers to support the promotion of exclusive breastfeeding. Puskesmas need to make special efforts to recruiting health promotion as a major human resources implementing health promotion activities at the health center. Midwives should continue to improve the quality and quantity of exclusive breastfeeding promotion activities in an active way to enhance public participation in the networking of health cadres especially exclusive breastfeeding, so as to increase the coverage of exclusive breastfeeding. We recommend that pregnant women with a family or husband to follow the activities undertaken by midwives, such as pregnant women and class mothers, because it can increase the knowledge of the mother and the family/husband about exclusive breastfeeding.

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