

The Factors Which Influence Exclusive Breastfeeding Failure: Scoping Review

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Abstract

Exclusive breastfeeding provides long-term health benefits to mother and infant. Although the benefits of breastfeeding exclusively for maternal and infant health are many, but the prevalence of exclusive breastfeeding for 6 months around the world is less than 36%. This scoping review aims to gain evidence based of the factors affecting the failure of exclusive breastfeeding. This review used methodology for grouping review as Arksey and O'Malley suggested. The relevant articles were the publication of 2010-2019. 108 relevant articles filtered by abstract, subject and outcome, obtained 9 articles. A review of this article explains there are two key factors that influence the failure of exclusive breastfeeding for 6 months, these are: (1) Socio-demographic factors such as: knowledge, education, and employment that each has an influence in the breastfeeding process, (2) Psychosocial factors such as breastfeeding intentions and family support for mothers who are breastfeeding. In conclusion, provider plays an important role in enhancing the success of exclusive breastfeeding apart from family support, husband and workplace, especially attributed to KIE given during the visit.

Keywords: *exclusive breastfeeding, failure factors, breastfeeding problems*

1. Introduction

Based on the results of a survey conducted by the World Health Organization (WHO) in 2016 stated that only about 36% of infants aged 0-6 months in the world given exclusive breastfeeding [1]. Low coverage of exclusive breastfeeding is influenced by several factors [2]. The research conducted by Zhang (2017) said that knowledge is an important factor in the behavior of the proving of exclusive breastfeeding, in addition to the attitude and culture also affects the proving of exclusive breastfeeding [3]. This research is supported by Egata (2015), the low knowledge of mothers about exclusive breastfeeding resulted in mother will not breastfeed her baby until the age of six months [4]. N. Alianmoghaddam expressed his research results that social support is an important factor for mothers in providing exclusive breast milk in six months [5].

The impact of the lack of exclusive breastfeeding coverage is the high AKB, because without exclusive breastfeeding infants are more susceptible to various diseases that increase their mortality and mortality, while AKB in Indonesia in 2010 due to lack of breastfeeding in infants aged less than 6 months reached 54% on infants aged 2-3 months, 19% on infants aged 7-9 months, 13% on infants under 2 months have been given infant formula, and 1 in 3 infants aged 2-3 months have been given additional food [6]. The purpose of scoping this review is to gain evidence based on factors affecting the failure of exclusive breastfeeding. Given the issue of exclusive breastfeeding to date still significant, it is hoped that the scoping review presents some causal factors from the failure of the exclusive breastfeeding evidenced by previous studies.

2. Methodology

This review used methodology for grouping review like Arksey and O'malley suggested. The stages in review scoping reviews consist of: (1) Identifying the scoping questions review, (2) Identifying relevant articles, (3) Article selection, (4) Data charting, (5) Reporting [7].

2.1 Step 1: Identify Question in Scoping Review

Table 1. Framework Research Question

| Population | Exposure | Outcome | Study Design |
|---|-------------------------------------|--|--|
| The mothers who have babies age 6-12 months | Babies with exclusive breastfeeding | The factors related to exclusive breastfeeding failure | Original research, Scopus indexed journals, all over the world from 2010 to 2019 |

Based on the above framework, the scoping review question is "what factors do affect the failure in providing exclusive breastfeeding ?".

2.2. Step 2: Identify the Relevant Articles

In search of articles was using relevant databases, they are PubMed, Ebsco, and Science Direct. The search strategy and the specific keywords used in the search process. The keywords used were (exclusive breastfeeding * OR breastfeeding *) AND (facors OR causes OR influences OR determinants) AND (failure * OR disaster). Researcher identified relevant articles using inclusion criteria: article published in 2010-2019, in English, the article discusses the factors that affect the providing of exclusive breastfeeding and factors that stop the providing of exclusive breastfeeding, including peer-reviewed articles.

2.3. Step 3: Article Selection

The article search was using the Pubmed, Ebsco, and Science Direct databases with the reference list obtained a total of 1,863 articles. From 1,863 articles then filtering based on the title that relates to the failure factors providing exclusive breastfeeding down to 108 articles. Then all the articles were filtered based on the abstract obtained 18 articles, then filtered back based on the subject or the outcome obtained 9 articles to be used for the final review [8]. Prisma Flow Chart can be seen in Figure 1.

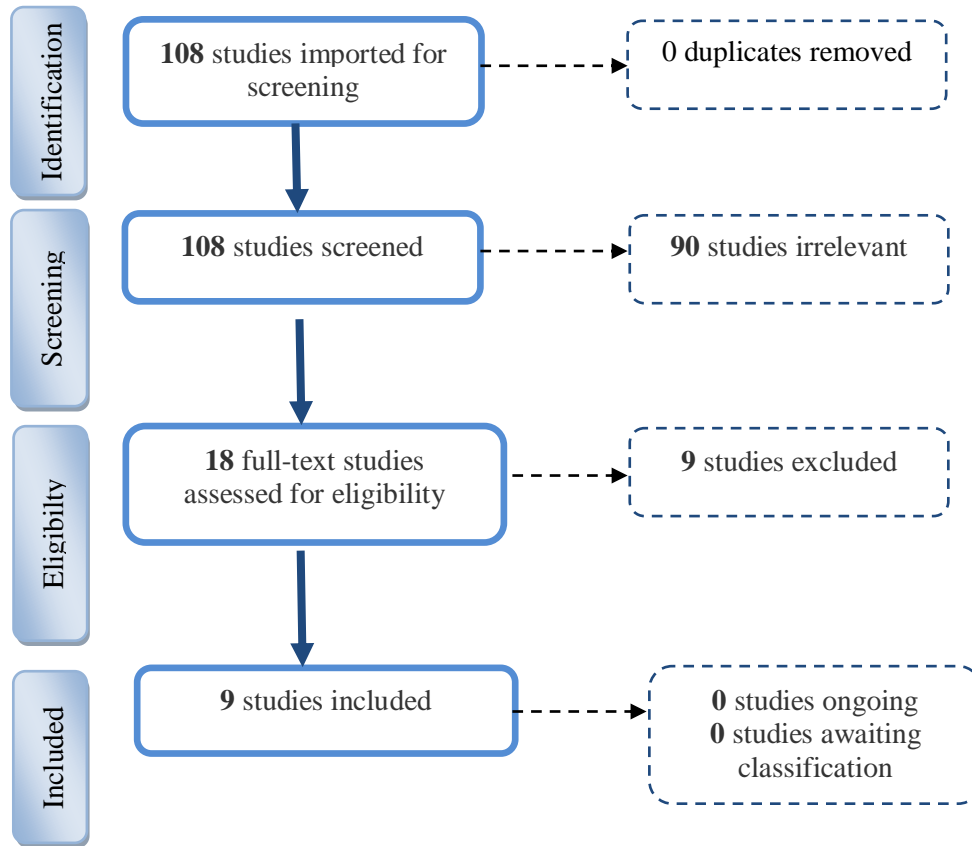


Figure 1. Prism Flowchart

2.4. Step 4: Data Extraction

Data from 9 articles were extracted to include key criteria such as location research, population research, research objectives, methodology, and significant findings or recommendations. The author independently records the information and then compared the extracted data.

Table 2. Data Charting

| No. | Author/Year /Country | Purpose/Study Design / Sample | Results |
|-----|------------------------------|--|--|
| 1. | Lindau et al./ 2015/Italy | This research is to know the factors affecting the proving of exclusive breastfeeding/quantitative administration/542 respondents. | In this study found activities during pregnancy such as pregnant mothers class affects the effectiveness of exclusive giving breastfeeding to 6 months. Compared to women who do not follow the class of pregnant mothers. |
| 2. | Lesorogol et al.,/2018/Haiti | This research aims to see the economic influence on the practice of exclusive breastfeeding/Mix methods/Qualitative 29 participants, quantitative 589 respondents. | Results in this study show that the factors influencing the proving of exclusive breastfeeding are economic factors, area of residence, maternal work, and social support. |

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|----|---|---|---|
| 3. | Waits, Guo and Chien, 2018/Taiwan | The study aims to analyse the factors affecting the decline of exclusive breastfeeding in 6 months postpartum/quantitative/272 respondents. | The results of this study show that some factors influence the level of exclusive breastfeeding, namely breastfeeding intention, mother's age, education, and also influence of mothers. |
| 4. | (Amaral et al., 2015)/Brazil | To identify the factors that interfere mothers in providing exclusive breastfeeding during the first 6 months of baby/qualitative/14 Participants. | The results of this research show that mostly breastfeeding failure caused by less knowledge of the mothers, less support from the family members who have profession as medical staffs will negatively affect the practice and duration of exclusive breastfeeding. |
| 5. | Lok, Bai and Tarrant, 2017)/Hongkong | The purpose of this research is to explore the impact of infant feeding and the exposure of breastfeeding intentions on the proving of the exclusive breastfeeding/Quantitative/127 respondents. | The results of this study show respondents who intend to breastfeed exclusively more likely to have higher education, follow breastfeeding classes and have the support of family members. |
| 6. | (Buttham et al., 2017)/Thailand | The purpose of this research is to assess non-exclusive breastfeeding levels and related factors. /Quantitative/500 Respondents. | This study explains the factors that affect the proving of exclusive breastfeeding is the trust or intention of breastfeeding and the less production of breast milk when 2 weeks after childbirth. |
| 7. | Alianmoghadam, Phibbs and Benn/2018/New Zealand | The purpose of the study is to highlight socio-economic influences, cultural contexts on the behavior of infant feeding in infants and consider approaches to the mothers for the promotion of exclusive breastfeeding/qualitative/30 participants. | The findings in this study show mothers stop exclusive breastfeeding for up to 6 months because they consider exclusive breastfeeding 6 months is a new thing that they receive, so that many mothers who are not convinced by it, than other reasons they stop breastfeeding because they must go back to work, because the absence affects the duration of breastfeeding. |
| 8. | Egata, Berhane and Worku, 2013/Ethiopia | The purpose of this study to identify non-exclusive breastfeeding predictors in rural areas in eastern Ethiopia/quantitative/8 | The results of this study reveal that mothers who lack access to health facilities could affect the proving of the exclusive breastfeeding, in addition to the lack of knowledge that also affects the proving of exclusive |

| | | | |
|----|---------------------------|--|--|
| | | 60 respondents. | breastfeeding. |
| 9. | Zhang et al., /2018/China | This research aims to investigate factors related to proving of exclusive breastfeeding based on the theory of planned conduct (TPB)/quantitative/400 respondents. | The results of this study reveal the knowledge of mothers is the most important factor related to the exclusive breastfeeding behaviour, in addition to the proving of breastfeeding is influenced by the social environment, the emotional support of family members and close friends. |

3. Results and Analysis

Based on 9 articles that are selected there are several characteristics the country, characteristics of research methods, data collection characteristics and characteristics of the article grade. The characteristic consists of 9 countries the developed countries of Italy, Taiwan, New Zealand, and Hongkong, while developing countries consist of China, Thailand, Haiti, Ethiopia and Brazil (Figure 1). Characteristics of this type of research 9 articles consist of qualitative study of 2 articles, quantitative study 6 articles, and 1 mix method article, characteristics of data collection (Figure 3), and characteristics of article grades (Figure 4).

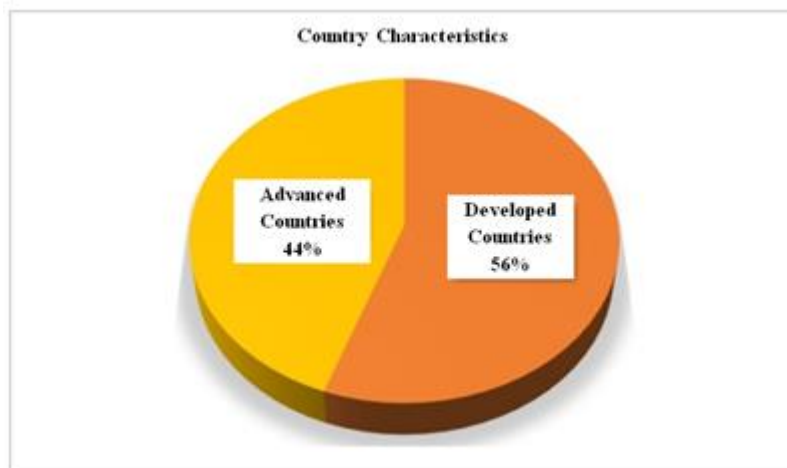


Figure 2. Country Characteristic

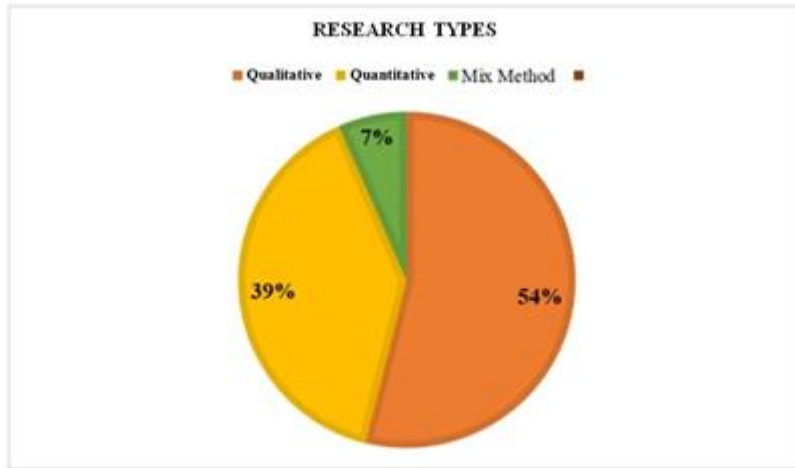


Figure 3. Research Method

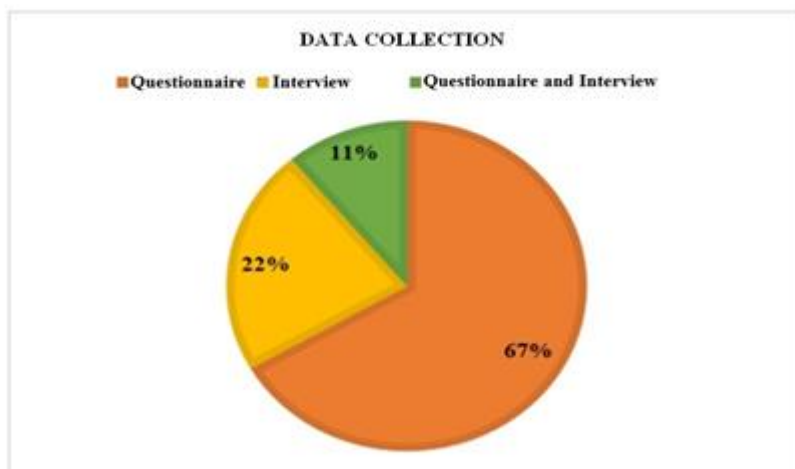


Figure 4. Characteristics of Data Collection

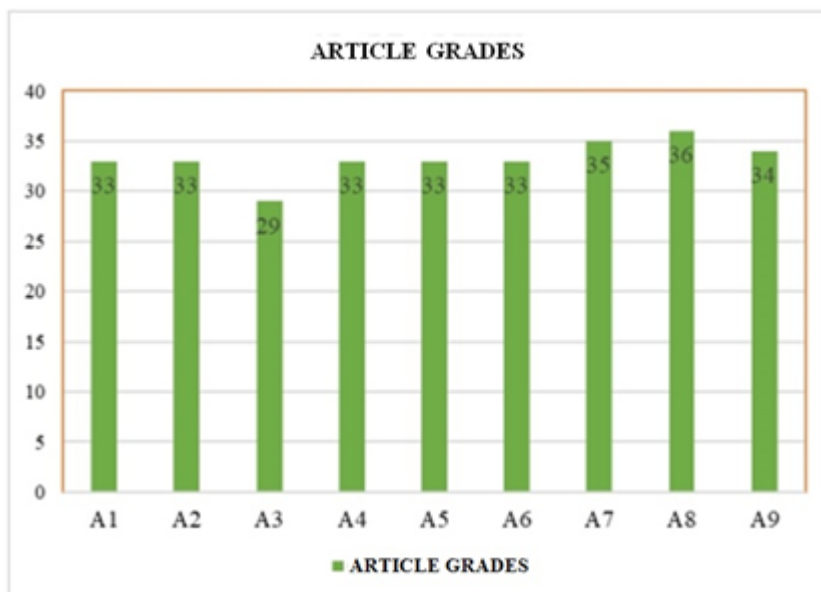


Figure 5. Characteristics of Article Grades

4. Discussion

4.1. Knowledge

According to the results of the study Amaral (2015), mother's understanding of the exclusive breastfeeding affects their attitudes towards breastfeeding, the statements given by participants show that participants do not know the benefits of breastfeeding, foster mother and child's inner bonds, reduce family spending to buy infant formula, and reduce the risk of post partum bleeding [9]. The research is supported by Zhang (2018), knowledge of mothers about breastfeeding or good breastfeeding will affect the mother in knowing the benefits or significance of the mother in giving breast milk to her baby [3]. The high level of knowledge is to determine the ability of mothers to understand and absorb information about exclusive breastfeeding [10].

4.2. Education

Education can influence the behavior to motivate themselves so as to play a role in health development [11]. The higher the level of a person's education, the easier it is to receive information. Generally people with higher education have a higher curiosity about the importance of exclusive breastfeeding to their babies and affect behavior during the breastfeeding process [12]. Wan Lok (2017) revealed that higher education will open up access to wider knowledge so that mothers can upgrade their knowledge [13]. Antenatal education can be a role model in breastfeeding and can increase the confidence to perform exclusive breastfeeding [14]. Knowledge, whether it is education-based or experience-based is a very important factor and determines the successful implementation of exclusive breastfeeding [11].

4.3. Job

Mothers who have to go back to work because the parental leave has completed so that it can affect the duration of breastfeeding [4], there is a tendency for mothers who work not give exclusive breastfeeding because at least the opportunity to give exclusive breastfeeding must be ruled out of from obligation to perform the work [15]. The result above shows that if the mothers have job status then it is likely that mothers do not give exclusive breastfeeding on the baby, and if mother do not work then it is likely that mothers can give exclusive breastfeeding [14]. This is in accordance with previous research by Lesorogol (2017) working mothers experiencing difficulties in providing exclusive breastfeeding because they should manage the time, lack of knowledge of mothers on the right way of breastfeeding and how to acquire breast milk especially when they have to work, so that many mothers give infant formula [16].

4.4. Breastfeeding Intentions

The desire for breastfeeding proved to be associated with the exclusive breastfeeding process up to 6 months after giving birth [11]. The intention of breastfeeding is allowed to grow naturally in the mother when pregnant, the reason mother giving exclusive breastfeeding includes mothers that want healthy babies, breast milk that can not be replaced by infant formula, mothers want babies avoid infectious diseases, breastfeeding is practical, efficient and economical because it does not cost anything different from the use of infant formula [17]. The intention of breastfeeding can also be influenced by social environment [18]. People who are in a social environment who can influence a person's beliefs including parents, close friends, and someone who is able to encourage someone to commit or not conduct a behavior [15].

4.5. Family Support

Family support is crucial in the success of breastfeeding, especially for exclusive breastfeeding [19]. Family emotional support is significant in facing social pressure that doubts the need for breast milk. The family is the first fortress when the mothers get the temptation that comes from the closest friends, parent or in-laws [12]. Families should also play a role in pregnancy screening, providing nutritious food to mothers and helping relieve wife's work [5]. Zhang (2017) revealed the mother who received informational support in the form of information about the importance of providing exclusive breastfeeding for 6 months [11], such as providing counseling and education from family and from health workers will be encouraged to give exclusive breastfeeding compared them who never get the information or support from family so that the role of family is very important for the success of providing exclusive breastfeeding [20]. Instrumental support obtained from health or family officers, especially parents or mother-in-law, to prepare nutritious food that can facilitate breast milk, teaching mothers the right way of breastfeeding also teaches mothers to how to care for the right correctly [10].

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