

Analysis of Knowledge and Attitudes of Surgical Room Staff in Providing Early Breastfeeding Initiation (IMD) at Efarina Hospital, Pematangsiantar

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Article Info

Article history:

Received March 21, 2024

Revised May 09, 2024

Accepted May 22, 2024

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ABSTRACT

This study aims to analyze the knowledge and attitudes of surgical room staff in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar. This type of research is cross-sectional, which is a research design by conducting observations at the same time. The study was conducted in the surgical room of Efarina Hospital, Pematangsiantar, North Sumatra in 2024. This study will be conducted in January-March 2024. The population in this study are nurses and midwives who are surgical room staff at Efarina Hospital, Pematangsiantar in 2024, which is 10 people. After conducting research on the description of knowledge and attitudes of Surgical Room Officers in providing early breastfeeding initiation (IMD) at Efarina Hospital Pematangsiantar in 2024 with 10 respondents, the following results were obtained: The majority had sufficient knowledge, namely 4 people (40%), while the minority had good knowledge, namely 3 people (30%) and less knowledge, namely 3 people (30%). The majority had an attitude of agreement, namely 7 people (70%), while the minority had an attitude of disagreement, namely 3 people (30%).

Keywords: Knowledge, Staff Attitude, Early Breastfeeding Initiation (IMD), Hospital

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1. INTRODUCTION

Early Breastfeeding Initiation (IMD) is a process of allowing babies to breastfeed on their own instincts within the first hour after birth, along with skin-to-skin contact between the baby and the mother. The policy of early breastfeeding initiation has been socialized in Indonesia since August 2007. The World Health Organization (WHO) has recommended that all babies receive colostrum, which is breast milk, on the first and second days to fight various infectins and receive exclusive breastfeeding for 6 months [1]. The policy of implementing early breastfeeding initiation is also expected to reduce infant mortality (IMR) in accordance with the achievement of the Millennium Development Goals (MDGs) of 23 per 1000 live births in 2015

Based on research by Edmond K. in Ghana on 10,947 infants and published in the scientific journal Pediatrics, 22% of ne.wborn deaths (in the first month) can be prevented if babies are breastfed within the first hour of birth. Meanwhile, breastfeeding on the first day of life can reduce infant mortality by up to 16%. Referring to this research, it is estimated that an early breastfeeding initiation program in Indonesia could save 30,000 babies' lives in the first month of life [2].

Indonesia is one of the Asian countries that has made rapid progress in reducing infant mortality. However, the infant and newborn mortality rate continues to hamper Indonesia's overall progress in reducing infant mortality, necessitating accelerated care for newborns. In 2008, the infant mortality rate (IMR) in Indonesia remained quite high, at 31.04 per 1,000 live births. One effective method is skin-to-skin contact and early initiation of breastfeeding for newborns within the first hour of birth. A 2006 study published in Pediatrics showed that this practice can reduce newborn deaths from infections, diarrhea, hypothermia, and respiratory problems [3].

Early Initiation of Breastfeeding (IMD) will significantly contribute to the continuation of exclusive breastfeeding (breast milk only) and the duration of breastfeeding. This ensures that the baby's needs are met until the age of 2 years and prevents malnutrition. Newborns are highly susceptible to death from hypothermia. However, 16 percent of infant deaths can be prevented through breastfeeding from the first day of life. This figure increases to 22 percent if breastfeeding begins within an hour of birth, known as early initiation of breastfeeding (IMD) [4].

Early breastfeeding rates in Indonesia are still low, the Indonesian Demographic and Health Survey (SDKI), (2007) found that babies who were exclusively breastfed only occurred in 32 percent of the total number of babies born, this is lower than the results of a similar survey (SDKI 2002/03), which was 40 percent. Thus, the promotion of exclusive breastfeeding can be an important policy in reducing the number of newborn deaths, and information about this should be directed to policy makers, service providers and the wider community [5].

Newborns are highly vulnerable to death from hypothermia. However, 16 percent of infant deaths can be prevented by breastfeeding from the first day of life. This figure rises to 22 percent if breastfeeding begins within an hour of birth, known as early initiation of breastfeeding (IMD) [6].

Midwives and nurses are the health workers who play the most important role in implementing IMD because mothers cannot do IMD without the help and facilitation of nurses and midwives. For example, to support exclusive breastfeeding for 6 months, research conducted on groups of mothers who provide exclusive breastfeeding and non-exclusive breastfeeding shows that most informants who exclusively breastfeed are facilitated by IMD by midwives or nurses, while most informants who do not exclusively breastfeed are not facilitated by IMD. In the study, of the 7 informants who did not do IMD, only 3 informants cited reasons that were difficult to avoid, namely the mother was sick after a cesarean section, the baby had to be immediately put in an incubator, and the mother experienced bleeding. Meanwhile, the other 4 informants did not do IMD for reasons that could actually be avoided, namely the baby would be cleaned and swaddled first [7].

The infant mortality rate (IMR) is influenced by several factors. These include issues related to maternal nutrition during childbirth and the infant's own nutrition. Both of these factors can be direct or indirect causes of infant mortality. Therefore, meeting infant nutritional needs requires serious attention. This can certainly be done easily by mothers because, essentially, the most complete and cheapest way to meet infant nutrition is through breast milk. The success of early breastfeeding initiation is greatly influenced by the attitudes, knowledge, and motivation of the pregnant mother, health workers, and birth attendants themselves [8].

In addition, one aspect that influences the implementation of early breastfeeding initiation practices is that many mothers are not equipped with sufficient knowledge about lactation management, the influence of culture and norms that develop among family members, colleagues, and society in general. Therefore, the attitudes of health workers, especially nurses, who are based on knowledge about early breastfeeding initiation have a large influence on the success of early breastfeeding initiation. The Early Breastfeeding Initiation Program has enormous benefits for both babies and new mothers. However, the implementation of early breastfeeding initiation itself has not been socialized in several hospitals, or in midwifery practice clinics, so its implementation still needs to be developed [9].

As a healthcare facility, hospitals play a crucial role in accelerating improvements in public health. Nursing is one profession within hospitals that plays a key role in maintaining the quality of healthcare services (Aditama, 2008).

Nursing is a form of professional service that is an integral part of health services, based on nursing science and skills in the form of comprehensive bio-psycho, socio-spiritual services, aimed at individuals, families and communities, both healthy and sick, covering the entire process of human life. Nursing services are assistance provided due to physical and mental weaknesses, limited knowledge and lack of will towards the ability to carry out daily living activities independently [10].

Nurses constitute the largest resource among other healthcare workers in hospitals and are responsible for optimal and high-quality patient care. As the spearhead of hospital services, nurses are required to provide the best possible care for each patient [11].

Law Number 38 of 2018 concerning Nursing, Article 29, explains that nurses have a role as providers of Nursing Care, educators and counselors for Clients, managers of Nursing Services, Nursing researchers, executors of tasks based on delegation of authority; and/or executors of tasks in certain limited circumstances. In carrying out their roles, nurses help clients improve their health by providing knowledge and health education.

Based on the results of an initial survey at Efarina Hospital in Pematangsiantar, early breastfeeding initiation is currently not being implemented effectively. The data revealed that early breastfeeding initiation is more common among mothers who delivered vaginally than among mothers who delivered by cesarean section. This is due to several factors that prevent nurses from initiating early breastfeeding for both infants and mothers, particularly the nurses' lack of knowledge about early breastfeeding initiation or providing health education to mothers who delivered by cesarean section [12].

Based on these data, the researcher wants to conduct research on Early Breastfeeding Initiation with the title of an overview of the knowledge and attitudes of Surgical Room Staff in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024 [13].

2. LITERATURE REVIEW

Knowledge

Knowledge is the result of knowing that occurs after a person senses a particular object. Sensing occurs through the five human senses: sight, hearing, smell, taste, and touch. Most human knowledge is acquired through the eyes and ears. Ready-to-use knowledge helps a person think quickly and accurately. Based on the Big Indonesian

Dictionary [14] knowledge is defined as intelligence or everything that is known. Knowledge is information or information that a person knows or is aware of [15].

Attitude

Attitude is a person's closed reaction or response to a stimulus or object. Attitude clearly indicates a connotation of appropriateness in response to a particular stimulus, which in everyday life is an emotional reaction to a social stimulus. Attitude is not yet an action or activity, but rather a predisposition to a behavior. Attitude is still a closed reaction, not an open reaction or overt behavior [16].

Action is a bodily movement or action following stimulation or adaptation from within or outside the body to an environment. A person's response to a particular stimulus is largely determined by their beliefs and feelings about that stimulus. Biologically, attitudes can be reflected in actions, but it cannot be said that attitudes and actions have a systematic relationship [17]

The action consists of several actions, namely:

1. Perception, recognizing and selecting an object in connection with the action to be taken.
2. Guided response, doing something in the correct order
3. Mechanism, when someone can do something correctly automatically after becoming a habit.
4. Adaptation, an action that has been modified without reducing its validity. Behavioral measurement can be conducted indirectly, through interviews. Measurement can also be conducted directly, by observing respondents' actions or activities [18].

Early Initiation of Breastfeeding (IMD)

Early breastfeeding initiation (EIB) occurs when a baby begins breastfeeding immediately after birth by seeking out its mother's breast. Human babies, like other mammals, have the ability to breastfeed on their own, provided they are allowed skin-to-skin contact with their mother for at least an hour immediately after birth. This early breastfeeding initiation (IMD) is called the best crawl, or crawling to the breast.

Early initiation of breastfeeding occurs immediately after a mother gives birth, when the baby is usually left or placed on the mother's chest so the baby can find the nipple on its own. Early initiation of breastfeeding is a natural and divinely ordained gift. Initiating early breastfeeding is not difficult, taking only about one to two hours. Several interventions can interfere with a baby's natural ability to find and locate their mother's breast. Among them, chemical medications administered during childbirth can reach the fetus through the placenta and may make it difficult for the baby to latch on. Births with medications or procedures, such as Caesarean sections, vacuums, forceps, and even pain in the incision area during an epistectomy can also interfere with this natural ability [19].

This information is important for healthcare professionals and families before initiating the early breastfeeding phase. It's also recommended to create a calm, comfortable, and patient atmosphere to allow the baby to crawl to the breast, known as the breast crawl. Early initiation of breastfeeding can develop a baby's motor skills and is the first step in establishing a bond between mother and child. Ideally, the baby should be placed directly on the mother's chest before being cleaned. Skin-to-skin contact can have a powerful psychological effect on the relationship. Early initiation of breastfeeding requires time, patience, and family support.

In fact, babies born vaginally, without a cesarean section, can breastfeed without assistance within about an hour. This doesn't happen with cesarean sections, so the success rate of Early Initiation of Breastfeeding is only about 50%, even in babies born with the use of chemical medications.

Normal babies are breastfed immediately after birth. They are usually breastfed for only one to two minutes on each breast. By sucking, the baby indirectly stimulates the production of breast milk, which helps accelerate uterine contraction. Although the colostrum produced by the breast milk may only be a few drops, this is sufficient for the baby's needs in the first few days [20].

According to Prasetyono in Sari's [21] research, the process of early breastfeeding initiation requires mental readiness from the mother. She should not feel uncomfortable when the baby is placed on her body. This is when support from family, especially the husband, is crucial for mothers who plan to initiate early breastfeeding after giving birth.

Performing IMD means that "the baby learns to adapt to his birth into the world, where he has just emerged from the most comfortable place in the world, in the mother's womb, struggling with the abilities bestowed upon him by God through all the processes to find his mother's nipple on his own. In addition, the IMD process creates a closeness between mother and baby because, by separating the mother and her baby, it turns out that the baby's immune system will drop by up to 25%. When the mother is with the baby, the baby's immune system will be in prime condition, the mother can protect the baby [22].

The baby receives the first breast milk/colostrum. This fluid is rich in substances that boost the immune system, are essential for resistance to infection, and are crucial for growth and even survival. Colostrum forms a protective layer for the baby's immature intestines while also maturing the intestinal wall.

3. METHOD

Types of research

This type of research is *cross-sectional*, which is a research design with simultaneous observations [23]. This is intended to determine the description of the knowledge and attitudes of Surgical Room Staff in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024.

Location and Time of Research

The research was conducted in the Surgical Room of Efarina Hospital, Pematangsiantar, North Sumatra in 2024. This research will be conducted in January-March 2024.

Population and Sample

The population in this study were Nurses and Midwives who were Surgical Room officers at Efarina Hospital, Pematangsiantar in 2024, namely 10 people. Data from Ibu Kartini Kisaran Hospital in 2024 shows that there were 10 surgical room staff. According to Arikunto [24], if the number of subjects in a study is less than 100, it is better to take all of them. In this case, this study is a population study where the entire population is the research subject (*total sampling*). The sample used was 10 nurses and midwives who were operating room staff at Efarina Hospital, Pematangsiantar, in 2024. They were fluent in Indonesian and willing to participate in this study.

Measurement Aspects

The measurement aspect is the process of assigning scores to questionnaires completed by respondents. In this case, the measurement aspect consists of two aspects: knowledge and attitudes of emergency room staff regarding early breastfeeding initiation [25].

In the nurse's knowledge assessment, it was carried out using a questionnaire with 15 questions. with answer choices true = 1 and false = 0. This aspect was measured using a questionnaire conducted directly by the researcher. Nurses' knowledge is divided into three, namely :

1. Good with a score of 11 - 15
2. Just score 6 - 10
3. Less with a score of 0 - 5

Nurses' attitudes were measured using a 10-question questionnaire about nurses' attitudes toward Early Initiation of Breastfeeding (IMD). This questionnaire consisted of 6 positive questions with a score of strongly agree = 4, agree = 3, disagree = 2, strongly disagree = 1 and also consists of 4 negative questions with a value of strongly agree = 1, agree = 2, disagree = 3, strongly disagree = 4.

Method of collecting data

Data collection is the process of approaching subjects and gathering the characteristics of the subjects needed for a study. The steps in data collection depend on the research design and the instrument techniques to be used in the study [26]. This study used a questionnaire to collect data, which was conducted by the researcher herself. Before distributing the questionnaire to respondents, the researcher first explained the purpose, benefits, and procedures of the study and asked for their willingness to participate as research respondents. If potential respondents agreed, they were asked to sign an agreement to become respondents [27].

Data processing

The collected data is then processed manually with the following steps:

1. *Editing* is an activity to check and improve questionnaire content.
2. *Coding* is coding, namely changing data in the form of sentences or letters into numerical or number data.
3. *Processing (data entry)* is the answer from each respondent which is entered into the code. in computer programs.
4. *Cleaning* is the cleaning of all data that has been entered, it needs to be checked again to see if there are any code errors, incompleteness, then corrections are made [28].

Data analysis

Data analysis was performed univariately to obtain an overview of the characteristics of each independent and dependent variable. Given the categorical nature of the data, the results of the analysis are presented in the form of a frequency distribution table [29].

5. RESULTS AND DISCUSSION

Research result

After conducting research on the description of knowledge and attitudes Surgical Room Officers in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024 with 10 respondents, the following results can be obtained [30].

Univariate Analysis

This study was conducted to explain or describe the characteristics of each research variable used to obtain an overview of the knowledge and attitudes of Surgical Room Officers in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024 [31].

Distribution of respondents based on age of Surgical Room Staff in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024.

An overview of the characteristics of respondents based on the age of Surgical Room Officers in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024, can be seen in the table below:

Table 1. Distribution of Respondents based on the age of Surgical Room Staff in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024

No	Characteristics	Frequency (n)	Percentage (%)
1	20 - 30 years	2	20
2	31- 40 years	6	60
3	> 40 years	2	20
Total		10	100

Based on Table 5.2.1, the data obtained shows that the majority of respondents are aged 31- 40 years old, namely 6 people (60 %), while the minority are 20 years old - 30 years, namely 2 people (20 %) and age > 40 years, namely 2 people (20 %)

Distribution of respondents by gender Surgical Room Officer in provision of early breastfeeding initiation (IMD) at Efarina Hospital Pematangsiantar in 2024.

The description of the characteristics of respondents based on the gender of Surgical Room Staff in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024, can be seen in the table below:

Table 2. Distribution of Respondents based on gender of Surgical Room Staff in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024.

No	Characteristics	Frequency (n)	Percentage (%)
1	Man	3	30
2	Woman	7	70
Total		10	100

Based on the table, the data obtained shows that the majority of respondents are female, namely 7 people (70 %), while the minority are male, namely 3 people (30 %).

Distribution of respondents based on education Surgical Room Officers in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024.

The description of the characteristics of respondents based on the education of Surgical Room Staff in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024, can be seen in the table below :

Table 3. Distribution of Respondents based on the education of Surgical Room Staff in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024.

No	Characteristics	Frequency (n)	Percentage (%)
1	Diploma III	9	90
2	Bachelor of Nursing	1	10
Total		10	100

Based on Table, the data obtained shows that the majority of respondents have a Diploma III education, namely 9 people (90. %) while the minority has a Bachelor's degree in Nursing, namely 1 person (10) %)

Distribution of respondents based on length of service of Surgical Room Officers in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024.

The description of the characteristics of respondents based on the length of service of Surgical Room Officers in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024, can be seen in the table below :

Table 4. Distribution of Respondents based on the length of service of Surgical Room Officers in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024.

No	Characteristics	Frequency (n)	Percentage (%)
1	5-10 years	3	30
2	>10 years	7	70
Total		10	100

Based on the table, the data obtained shows that the majority of respondents have worked for >10 years, namely 7 people (70). %), minority have worked for 5 years - 10 years, namely 3 people (30 %).

Distribution of respondents based on the knowledge of Surgical Room Staff in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024.

A description of the characteristics of respondents based on the knowledge of Surgical Room Staff in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024, can be seen in the table below[32] :

Table 5. Distribution of Respondents based on the knowledge of Surgical Room Staff in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024.

No	Characteristics	Frequency (n)	Percentage (%)
1	Good	3	30
2	Enough	4	40
3	Not enough	3	30
Total		10	100

Based on Table 5.2.5, the data obtained shows that the majority of respondents have sufficient knowledge, namely 4 people (40%), while the minority have good knowledge, namely 3 people (30%), and less knowledge, namely 3 people (30%).

Distribution of respondents based on the attitudes of Surgical Room Staff in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024.

The description of the characteristics of respondents based on the length of service of Surgical Room Officers in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024, can be seen in the table below :

Table 6. Distribution of Respondents based on the attitudes of Surgical Room Staff in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024.

No	Characteristics	Frequency (n)	Percentage (%)
1	Agree	7	70
2	Don't agree	3	30
Amount		10	100

Based on the table, the majority of respondents' data showed that they agreed, namely 7 people (70). %) while the minority disagreed, namely 3 people (30) %) [33].

DISCUSSION

Based on the results of research conducted by the researcher regarding the description of the knowledge and attitudes of Surgical Room Staff in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024, the following can be discussed [34]:

Knowledge

The results of the study on staff knowledge revealed that the majority had sufficient knowledge about early initiation of breastfeeding (IMD). It can be concluded that staff in the Surgical Ward of Efarina Hospital, Pematangsiantar, need to be supervised in implementing standard operating procedures for providing early initiation of breastfeeding after birth [35].

Considering the length of service, which was more than 10 years, and the fact that most respondents had a diploma, the implementation of standard operating procedures should have been better. However, when researchers interviewed respondents, they stated that their busy schedules prevented them from immediately initiating early breastfeeding (IMD) [36].

Attitude

Based on the results of a study of respondents' attitudes toward early initiation of breastfeeding (IMD), the majority of surgical room staff agreed that IMD should be given to newborns immediately [37]. This attitude indicates that IMD is crucial and should not be neglected. However, due to workload, IMD is often neglected.

4. CONCLUSION

After conducting research on the description of knowledge and attitudes Surgical Room Officers in providing early breastfeeding initiation (IMD) at Efarina Hospital, Pematangsiantar in 2024 with 10 respondents, the following results can be obtained:

1. The majority have sufficient knowledge namely 4 people (40 %) while the minority have good knowledge namely 3 people (30%) and less knowledge, namely 3 people (30 %).
2. The majority have an agreeing attitude, namely 7 people (70 %) while the minority disagreed, namely 3 people (30 %)

SUGGESTION

1. For Hospitals. It is hoped that the leadership at Efarina Hospital, Pematangsiantar, at both director and ward level can oversee the implementation of standard operating procedures for early initiation of breastfeeding in postpartum patients, especially post-caesarean section patients. If necessary, a special officer can be appointed to be directly responsible for implementing early initiation of breastfeeding in newborns.
2. For Education. It is hoped that the Midwifery Study Program at Efarina University, Faculty of Health, can use the results of this study as reference material to improve students' knowledge regarding early breastfeeding initiation. It is hoped that each student will master the principles of early breastfeeding initiation (IMD) in the teaching and learning process, both in the classroom and in the laboratory.
3. For Research Development. For future researchers, it is hoped that this research can be used as evidence-based in conducting research with the same variables or with several variables related to the provision of Early Breastfeeding Initiation (IMD).

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