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Effectiveness of the Ayah ASI Group Education on the Self-efficacy of Pregnant Women in Providing Exclusive Breastfeeding

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ABSTRACT

The success of exclusive breastfeeding is related to self-efficacy, the mother's belief in her ability to provide exclusive breastfeeding is getting better, and the support ofher husband plays an important role in increasing the mother's self-efficacy. The purpose of this study was to analyze the effectiveness of Ayah ASI group education on pregnant women's self-efficacy in breastfeeding plans. The method used was a quasi experimental non-equivalent with control group pretest-posttest intervention. The sample consisted of 27 respondents in the intervention group at the clinic of Neri midwife clinic and 27 respondents in the control group at Pratama Niar clinic with consecutive sampling technique. The intervention was given in theform of "Ayah ASI" education for three weeks. data were analyzed using wilcoxon and mann-whitney non-parametric statistical tests. The average value of self-efficacy of pregnant women before the intervention was 40.22 ± 10.522 andincreased to 92.22 ± 7.143 after the intervention with a p-value = 0.000. Group education of "Ayah ASI" is effective in increasing the self- efficacy of third trimester pregnant women in exclusive breastfeeding. husbands who have good knowledge and understanding of exclusive breastfeeding can be an effective supporter to his wife in exclusive breastfeeding.

Keywords: ayah ASI education, exclusive breastfeeding, self-efficacy

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BACKGROUND

Exclusive breast milk is breast milk given to babies from birth for six months, without adding or replacing it with other foods and drinks except medicines, vitamins and minerals (Kemenkes RI, 2022). Providing exclusive breast milk is a recommendation for every mother for her baby, a recommendation that is not only recognized globally by WHO but is also included in regulations in Indonesia. In the government regulatory policy of Law of the Republic of Indonesia concerning health number 17 of 2023 article 42 it is stated that every baby has the right to receive exclusive breast milk from birth to 6 months of age, unless there is a medical indication. Breastfeeding can be continued until the age of 2 years, accompanied by the provision of complementary foods. During breastfeeding, families, central government, regional governments and communities are expected to provide full support to mothers and babies, including providing special time and facilities (Presiden RI, 2023).

Based on data from the Indonesian Ministry of Health in 2021, the percentage of infants under 6 months who received exclusive breastfeeding reached 69.7%, exceeding the target of 45%, with a performance achievement of 154.9% of the 1,845,367 babies who were recalled, as many as 1,287,130 infants under 6 months received exclusive breastfeeding. Overall, the achievement of this indicator has met the 2021 target. There is a provincial distribution showing that 3 provinces, namely Papua 11.9%, West Papua 21.4%, and West Sulawesi 27.8%, are still below the target, while 31 other provinces have reached the target, with the highest achievement in West Nusa Tenggara 86.7% (Kemenkes RI, 2021).

Based on 2020 health profile data in North Sumatra Province, of a total of 234,812 babies aged under 6 months, only 38.42% or around 90,207 babies received exclusive breast milk. This figure shows a decrease from the previous year (40.66%) and is also lower than the North Sumatra Provincial Health Service strategic plan target for 2020, namely 56.0%. When looking at exclusive breastfeeding coverage by district/city, Pakpak Bharat District, North Tapanuli District, and Sibolga City achieved the highest coverage at 68.50%, 66.88%, and 65.15% respectively. Meanwhile, North Nias Regency, West Nias Regency and Tanjung Balai City recorded the lowest coverage at 1.38%, 3.24% and 9.72% respectively. of the 8 districts/cities that achieved the target of 56.00%, including Pakpak Bharat Regency, North Tapanuli Regency, Sibolga City, South Tapanuli Regency, Humbang Hasundutan Regency, Samosir Regency, Dairi Regency, and Central Tapanuli Regency (Dinkes Sumut, 2020).

A number of factors can influence a mother's success in providing exclusive breast milk to her baby, and one of them is the support provided by her husband. The husband's role has a significant impact on the mother's success in breastfeeding. When the husband plays his role well, this can be the key to successful exclusive breastfeeding. The husband's involvement in the breastfeeding process creates a sense of security and comfort for the mother, supporting the smooth reflex of breast milk production. Mothers tend to be more willing and confident to breastfeed if their husbands take an active role. To maximize his role, husbands need to understand and recognize their responsibilities as fathers in providing exclusive breastfeeding. Husbands should realize that this responsibility does not only belong to the mother, but is also a shared responsibility. The husband's knowledge about all aspects related to breastfeeding is important to ensure that the husband's actions and thoughts contribute to the success of the exclusive breastfeeding process (Agrawal *et al*., 2022).

The support provided by fathers for mothers' self-confidence in breastfeeding practices shows that special education programs for fathers have a significant relationship with exclusive breastfeeding. Therefore, a father's active participation has a very important role in improving the practice of exclusive breastfeeding. An intervention strategy that has proven effective in increasing mothers' self-confidence regarding exclusive breastfeeding is involving fathers directly to provide motivation to mothers in carrying out breastfeeding

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practices. The important role of father's support in the early stages of breastfeeding can make a positive contribution to the success of exclusive breastfeeding. by forming a group of fathers who have a deep understanding of the importance of exclusive breastfeeding and its benefits for the health of mothers and babies, couples can make better decisions, thereby increasing mothers' self-confidence in carrying out breastfeeding practices (Panahi *et al*., 2022).

Research conducted by (Ajike *et al*., 2020) to assess the effect of a health education program about breastfeeding, namely providing exclusive breastfeeding education for 3 weeks aimed at men or husbands on their desire to support their wives in the practice of exclusive breastfeeding . Husbands who understand breastfeeding and how to provide support have been proven to help with optimal breastfeeding practices. Educational sessions are an effective way to increase knowledge, skills and attitudes that support breastfeeding. Education about breastfeeding, as part of efforts to encourage exclusive breastfeeding, has proven beneficial in helping women acquire the necessary knowledge, skills and attitudes, as well as increasing a mother's self-confidence or self-efficacy in implementing breastfeeding practices. This recommendation also suggests that family members, including men, participate in exclusive breastfeeding programs.

Objective states the major aim of the study to analyze the effectiveness of Ayah ASI group education on pregnant women's self-efficacy in breastfeeding plans.

METHODS

This type of research is quantitative research and the design used in this research is Quasy Experimental Non-Equivalent with Control Group Pretest-Posttest Design. The number of samples in this study was 54. 27 respondents in the intervention group, 27 respondents in the control group. The samples in this study were third trimester pregnant women with a gestational age of 28-40 weeks who were registered as patients at the Neri midwife maternity clinic and Pratama Niar Clinic who met the specified research criteria. The sampling technique for this research uses a non-probability sampling technique with a consecutive sampling method. The time of implementation of this research was carried out from April to May 2024.

The instrument used in this research was a questionnaire containing demographic data and a self-efficacy questionnaire for pregnant women based on the Breastfeeding Self-Efficacy Scale Short-Form (BSES-SF) and modified by researchers based on cognitive behavior and motivation with The references or literature obtained by the researcher will then be tested for validity using assessments from experts regarding the validity of each item in the questionnaire to two experts who are experienced in their fields. the results of the content validity index (CVI) of the instrument from the two experts for the self-efficacy variable for pregnant women were 1.00, so the self-efficacy instrument for pregnant women with 20 statement items was declared Acceptable and worthy of being continued with a reliability test.

After that, a validity test was conducted using the Pearson product moment correlation on 30 pregnant women in the third trimester at the Obgyn (Pregnancy) Polyclinic at Malahayati Islamic Hospital, Medan. The valid limit value based on the r table product moment results with a significance level of 5% or 0.05 was 0.361. The results of the validity test showed that the self-efficacy questionnaire questions for pregnant women had the lowest value of 0.406 and the highest value of 0.695 so that the questionnaire was declared valid. The reliability test results showed a Cronbach's Alpha value of 0.863 so that the questionnaire was declared reliable. Providing Breastfeeding Father Group Education intervention for 3 meetings over 3 weeks. data were analyzed using wilcoxon and mann-whitney non-parametric statistical tests.

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RESULTS

Table 1. Differences in Mean Self-Efficacy Values for Pregnant Women in the Third Trimester Pre-Test and Post-Test In the Intervention Group (n=27)

Self-Efficacy of Pregnant Women	Intervention Group		*p value*
	Mean	Standard Deviation	
Pre-test	40.22	10,522	0,000
Post-test	92.22	7,143	

Based on table 1, the results of the analysis using the *Wilcoxon Signed Rank-Test* show that the mean self-efficacy value of pregnant women in the third trimester in the intervention group increased significantly after being given the educational intervention in the breastfeeding father group. The mean value of self-efficacy before the intervention was 40.22 with a standard deviation of 10.522, while after the intervention it increased to 92.22 with a standard deviation of 7.143. This difference is statistically significant with a p-value of 0.000, which indicates that there is a significant increase in self-efficacy in third trimester pregnant women after being given education in the breastfeeding father group.

Table 2. Differences in Mean Self-Efficacy Values for Pregnant Women in the Third Trimester Pre-Test and Post-Test In the Control Group (n=27)

Pregnant Women's Self-Efficacy	Control Group		*p value*
	Mean	Standard Deviation	
Pre-test	38.74	13,595	1,000
Post-test	45.19	13,621	

Based on table 2, the results of the analysis using the Wilcoxon Signed Rank-Test found that there was no significant difference in the mean self-efficacy scores of pregnant women in the control group between before (pre-test) and after (post-test). In the pre-test, the mean self-efficacy score was 38.74 with a standard deviation of 13.595, while in the post-test, the mean self-efficacy score increased slightly to 45.19 with a standard deviation of 13.621. These results indicate that there is no significant change in the self-efficacy of third trimester pregnant women in the control group, as shown by the high p-value of 1,000.

Table 3. Effectiveness of Group Educational Interventions for Breastfeeding Fathers on Self-Efficacy Values of Pregnant Women in the Third Trimester Between Groups Intervention After Following Intervention and Post Test on Control Group (n=54)

Variable	Intervention Group		Control Group		*p value*	*Z*
Self-Efficacy of Pregnant Women	*Mean rank*	*Sum of ranks*	*Mean rank*	*Sum of ranks*	0,000	-6.331
	40,96	1106,00	14,04	379,00		

Based on table 3, the results of the analysis using the Mann-Whitney test show that the intervention post-test group has a higher Mean Rank (40.96) compared to the control post-test group (14.04). This shows that the self-efficacy of pregnant women in the third trimester is significantly higher in the intervention group compared to the control group. The results of the Mann-Whitney test show a significant difference between the two groups, with a p-value of 0.000. It can be concluded that the education of the ASI Father group is effective

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in increasing the self-efficacy of pregnant women in the third trimester in providing exclusive breastfeeding.

DISCUSSION

Based on the research results, the increase in self-efficacy of pregnant women in the third trimester in the intervention group was higher after being given the educational intervention in the breastfeeding father group compared to before being given the intervention. In the results of this study, the majority of respondents had low self-efficacy, 15 people (56%) after being given the breastfeeding father group educational intervention, the majority of respondents showed an increase in self-efficacy to high, 25 people (93%). The mean self-efficacy value of third trimester pregnant women in the intervention group increased significantly after being given the educational intervention in the breastfeeding father group, with a p-value of 0.000.

The mean self-efficacy value of pregnant women in the control group between before (pre-test) and after (post-test) shows that there is no significant change in the self-efficacy of pregnant women in the third trimester in the control group with a high p-value of 1,000. Breastfeeding father group education is effective in increasing the self-efficacy of third trimester pregnant women in providing exclusive breastfeeding with a p-value of 0.000. After receiving the breastfeeding father group educational intervention, the majority of respondents showed a significant increase in self-efficacy, with the number of respondents who had high levels of self-efficacy increasing drastically from before. This indicates that the intervention is effective in increasing the self-efficacy of third trimester pregnant women in providing exclusive breastfeeding.

The results of the study showed that education in the breastfeeding fathers group was effective in the self-efficacy of pregnant women in providing exclusive breastfeeding in the intervention group after being given the educational intervention in the breastfeeding fathers group compared to the control group without treatment. the occurrence of changes in the efficacy of pregnant women from cognitive behavioral and motivational aspects. The results of the assessment after being given treatment in the intervention group and the post test assessment in the control group showed significant differences so that providing education by forming groups of fathers (husbands) can be an important intervention that can influence the self-efficacy of wives or the self-confidence of pregnant women in the first trimester. III in preparation for exclusive breastfeeding to the baby.

The results of this research are in line with research conducted (Baldwin *et al*., 2021) Breastfeeding provides many health benefits, and improving global breastfeeding practices could have a positive impact on public health. The role of the father or partner is very important in supporting breastfeeding mothers. Therefore, educating them about exclusive breastfeeding can increase knowledge, self-confidence (Self Efficacy) and support. although initial information is provided to fathers or partners, this may encourage their involvement in breastfeeding. guidance that covers various backgrounds is needed to support them in providing exclusive breastfeeding.

From the research conducted by Asih & Nurlaila (2022) it shows that self-efficacy is a very important psychological factor in the context of breastfeeding. Self-efficacy can influence a mother's motivation and belief in her ability to breastfeed her baby. In addition, self-efficacy is also believed to function as a strong foundation in predicting the success of the breastfeeding process, reflecting the mother's belief in her ability to provide breast milk to her baby.

Research conducted (Krikitrat *et al*., 2023) shows that mothers' level of confidence in breastfeeding is often influenced by the level of support and encouragement provided by their partners. When partners provide strong support, mothers tend to feel more capable and

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confident in facing challenges and making decisions regarding breastfeeding. The important thing to note is that the father's role in providing social and practical support when his partner is breastfeeding the baby has a significant impact on the level of exclusive breastfeeding.

Breastfeeding fathers are also known as "Breastfeeding Fathers" which means the father's involvement in providing full support both morally and materially to his wife in the breastfeeding process. The father is responsible for ensuring the availability of breast milk and helping to give it to the baby when needed. The support provided can be in the form of assistance in caring for the baby and accompanying the wife when breastfeeding so that the wife can provide the best breast milk (Mufdlilah *et al*., 2019) .

The educational intervention for breastfeeding fathers is the main target group so that they can support mothers in providing breast milk to their babies optimally. Breastfeeding fathers have an important role in the mother's decision to breastfeed exclusively. support from breastfeeding fathers in giving attention, reminding mothers and informing mothers about the importance of breast milk for the baby's growth and development so that mothers who feel loved, supported, cared for will emerge positive emotions which increase the production of the hormone oxytocin so that breast milk production runs smoothly (Ronasari Mahaji Putri & Lidia Laka Bora, 2021).

CONCLUSION

Ayah ASI group education is effective in increasing the self-efficacy of pregnant women in the third trimester in providing exclusive breastfeeding.

THANK YOU NOTE

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CONFLICT OF INTEREST

The authors declare that they have no conflicts of interest.

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