

# THE SPOUSE'S INVOLVEMENT IN ASSISTING WOMEN LABORING AS SECTIO CESAREAN WAY IN THE IMPLEMENTATION OF EARLY INITIATION OF BREAST FEEDING AT HOSPITAL

Sestu Retno dwi Andayani

STIKES PEMKAB Jombang,

Jl. dr. Soetomo No. 75-77 Jombang Jawa Timur 61411 Indonesia,

E-mail: sestu.retno@yahoo.com

## ABSTRACT

**Introduction:** Section caesarean laboring is one of the difficulties to do early initiation of breastfeeding. It is correlated with painful because of post of injury, anesthesia influence, uncomfortable mom, and the breastfeeds which is not ready to produce after operation. Although she already had an anesthesia, but she still suffers the painful. The readiness of mother to give the baby breastfeed, it needs more preparation psychologically, because the mother had her role. The mother's role achievement can be success if the mother become closer with the baby and get the support from the spouse (as father). The spouse's role in the implementation of early breast feeds initiation is very important. Because the spouse will be assist to determine reflect fluency of breastfeeds which is most affected to the emotional or mother's soul. The spouse has an active role in support mother when giving the breast feeds. He can help mother in supporting the breastfeeds with emotional supported and other assistance. **Methods:** This research used descriptive with cross sectional approach, the aims to gain the data from respondents to answer the strategic issues which happen. The factors that make mother of Post SC did not do the early breastfeed initiation. The respondents were 60 mother of post SC that fulfills the criteria of inclusion and exclusion. **Results:** The Spouse mostly had positive support and interaction in early initiation of breastfeeding (43%), but still low number of breastfeeding implementation (9%). **Discussion:** The support and interaction of spouse to the mother who giving a experience the SC is one of the important factor of early initiation of breastfeeding. But, the low number of the implementation of ealy initiation of breastfeeding showed that there are still many factor that cant influenced the positive achievement of early initiation of breast feeding.

**Key words:** Caesarian Delivery, Initiation of Breast Feeding, Spouse's Involvement

## INTRODUCTION:

The implementation of early breastfeeds initiation is affected by the laboring method. The section-caesarean's (SC) method is one of the difficulties to do the early breastfeeds initiation. It is connected with the painful of operating injured, anesthesia influenced, uncomfortable mother, and the breastfeeds which is not ready to produced after operation (Prior, 2012). Although the anesthesia has given but the mother still felt painful. Padmahanhi (2009), in her research showed the reason why mother did not give the early breastfeeds to her child is caused by the painful of operating injury (92%), uncomfortable (78%), anesthesia effect (74%). The post SC painful will be stricken the mother's ability if it

was not directly solved to do the early breastfeeds initiation (Storm, 2007).

The other problem post SC that experienced by the mother beside the painful is anxiety. This anxiety is happen caused by situational crisis when face the SC laboring, self related belief threatening with the health of both mother and baby, and interpersonal communication, which has signed to the increased concern, distress, the anxiety of something happen, the feels that enable to caring the baby maximally, and nervous (Doengus, 2011). The excessive anxiety can get the worst effect to the mom and baby, like the mother experience the post-partum depression (Skoteris, et al, 2008), can influenced the physical condition and mental of both mom and baby (Fertl, et al. 2009), also retardates of

physiology function and the psychology improvement of the baby (Monk, 2011).

The research by Sumanto and Friends (2011) about the painful correlation between anxiety achievements to the post SC patient said that there was a correlation between painful levels with anxiety level to the post SC patients. The higher level of some one painful, it has a higher anxiety also.

The readiness of new mother to give breastfeeds to the baby needs more psychologies preparation, because of the chance of mother's role. Based on the nursing theory *Maternal Role attainment-becoming a Mother* which improved by Ramona T. Mecer, that proposed the main focused from this research is process image of mother's attainment and the process of being a mom. The role of mother attainment can be succeeded if the mother close with the baby and get the spouse's support such as satisfaction expression and the appreciation role after laboring (Alligood, 2002). The role spouse in the implementation of early breastfeeds is very important Because the spouse will be assist to determine reflect fluency of breastfeeds which is most affected to the emotional or the mother's soul. The spouse has an active role in support mother when giving the breast feeds. He can help mother in supporting the breastfeeds with emotional supported and other assistance. Early breastfeeds initiation becomes a recommendation of *World Health Organization (WHO)* as a *baby-friendly hospital initiative* (WHO, 2012).

**METHODS:**

This research used descriptive with cross sectional approach, the aims to gain the data from respondents to answer the strategic issues of early breastfeeds initiation which happened. The issues are including the factors that make mother who giving birth by SC did not do the early breastfeed initiation. The respondents are 60 mother post SC that fulfills the criteria of inclusion and exclusion. Inclusion criteria: the pregnancy age > 37 weeks, mother with anesthesia SAB, mother agreed become a respondent, the sign of breast prominent, the indication of SC is not because of PEB/eclampsia. Exclusive criteria: the baby with abnormal congenital, the baby is not healthy, mother with SC complication.

**RESULTS:**

Spouse's involvement in assisting women giving birth in the SC in implementing the early initiation of breastfeeding consists categorized into 2 categories, they are:

a. Support spouse.

Almost the spouse supports the implementing of early initiation of breastfeeding wife even though her labor with SC method. But implementation of early initiation of breastfeeding remains low.

Table 1: spouse's support to post SC mother in the implementation of early initiation of breastfeeding

No	Indicator	IMD		No IMD		Total	
		(f)	(%)	(f)	(%)	(f)	(%)
1.	Spouse's support : Positive	4	9	3	91	4	10
2.	Negative	4	23	1	77	1	10
				3		7	0

Most of the mothers who have positive support from spouse did not do the early initiation of breastfeeding

b. Spouse's interaction

Table 2: spouse's interaction to the post SC mother to did the early initiation of breastfeeding

No	Indicator	IMD		No IMD		Total	
		(f)	(%)	(f)	(%)	(f)	(%)
1.	Spouse's support : Positive	4	9	3	91	4	10
2.	Negative	4	23	4	13	1	10
						7	0

Nearly all the women who get a positive interaction of the spouse about the implementation of early initiation of breastfeeding did not do it.

**DISCUSSION:**

The early initiation of breastfeeding spouse's involvement in the implementation of maternal post SC includes support and empathy. In achieving the role (role Attainment) the

woman who had just given birth needs the support of her spouse. But the results of this study almost all spouses have provided support and interaction to his wife. But implementation of early initiation of breastfeeding is still low.

As an effort to reach the mother's role is influenced also by a set of cycles Microsystems, mesosystems and macrosystem. Micro System is the immediate environment in which the role of the mother has achievement. Mikrosistem components include family functioning, mother-father relationship, social support, economics status, family trust and newborns stressor are seen as individuals inherent in the family system. Mercer (1990) revealed that the family is seen as a semi-closed system which maintains restrictions and oversight between the change in the family system and other systems. Mesosystem includes the influence and interaction with individuals in mikrosistem. Mesosystem can affect the development of the role of mother and baby. Mesosystems include child care, schools, workplaces, places of worship and the environment generally in society. Micro system is a culture on the individual environment. The macro system consists of social, political, cultural, and health system policies that impact on maternal role attainment.

The results of this research showed that the mother-father relationship has been established. So the low implementation of the early initiation of breastfeeding is not possible only because of the father-mother's relationships. The other factors such as the condition of the mother, the baby, the provider, and the healthcare system may also influence the implementation of early breastfeeding initiation.

## CONCLUSION

Involvement of the spouse to the mother who gave birth to by SC in the implementation of the early initiation of breastfeeding is very big, but the achievement is still low. It showed there are still many other

factors that affect the implementation of the early initiation of breastfeeding in the mother post SC, among other maternal factors itself, infant factors (micro components), meso component and macro components.

The need for further research to find a definitive answer on preventing the implementations of the early initiation of breastfeeding in the mother post SC, Because the excellent benefits of the early initiation of breastfeeding for the growth and development of generation in Indonesia.

## REFERENCES

- Alligood, M. R. (2002). A Theory of the art of nursing discovered in Rogers' Science of Unitary Human Beings. *International Journal for Human Caring*, 6, pp. 55-60.
- Doenges, M. E., Moorhouse, M. F., & Murr, A. C. (2013). *Nursing diagnosis manual: planning, individualizing, and documenting client care*. FA Davis.
- Mercer, R. T., & Ferkehch, S. L. (1990). Predictors of parental attachment during early parenthood. *Journal of Advanced Nursing*, 15(3), pp. 268-280.
- Padmavathi, P., Jayadeepa, T., & Babu, A. A. (2014). Initiation of Breast Feeding After Caesarian Delivery. *Asian Journal of Nursing Education and Research*, 4(1), P. 114.
- Prior, E., Santhakumaran, S., Gale, C., Philipps, L. H., Modi, N., & Hyde, M. J. (2012). Breastfeeding after cesarean delivery: a systematic review and meta-analysis of world literature. *American Journal of Clinical Nutrition*, 95(5), pp. 1113-1135. doi:10.3945/ajcn.111.030254
- Skouteris, H., Germano, C., Wertheim, E. H., Paxton, S. J., & Milgrom, J. (2008). Sleep quality and depression during pregnancy: a prospective study. *Journal of sleep research*, 17(2), pp. 217-220