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Breastfeeding Self-Efficacy as a Predictor of Exclusive Breastfeeding Success in Mothers of 6-24-Month-Old Toddlers in Rural Indonesia

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Abstract

Exclusive breastfeeding coverage in Indonesia is still low (29.5%). The failure of exclusive breastfeeding is influenced by several factors, one of which is self-efficacy. Mothers with a high level of breastfeeding selfefficacy tend to breastfeed their babies for 6-12 months. This study aims to determine the relationship between the level of breastfeeding self-efficacy and the success of exclusive breastfeeding in mothers breastfeeding toddlers aged 6-24 months in Bunijaya Village, Cianjur. This research design employs an analytic correlation with a crosssectional design. Data were collected from 70 respondents, who were selected using a total sampling technique. The results showed that the majority of mothers had high BSE (92.9%), and most mothers breastfed exclusively (97.1%). A relationship exists between the level of breastfeeding self-efficacy and the success of exclusive breastfeeding (p = 0.004, 95% CI). Based on the results of this study, it is concluded that there is a relationship between the level of breastfeeding self-efficacy and the success of exclusive breastfeeding among mothers of toddlers aged 6-24 months in Bunijaya Village, Cianjur. It is hoped that this research can be further developed by examining other variables beyond breastfeeding self-efficacy about the success of exclusive breastfeeding.

INTRODUCTION

According to the World Health Organization (WHO, 2015), the global rate of exclusive breastfeeding is lowest in Asia, with less than 40% of infants under six months receiving exclusive breastfeeding. In Indonesia, the rate is even lower, with only 29.5% of infants exclusively breastfed up to six months of age. This figure falls significantly short of the Ministry of Health's 2015-2019 target, which aimed for 50% of six-month-old infants to be exclusively breastfed (Health Profile, 2020).

The suboptimal implementation of exclusive breastfeeding is influenced by several factors, one of which is breastfeeding self-efficacy (Lauwers & Swisher, 2011). A significant barrier to successful breastfeeding is the mother's lack of confidence, which often leads to early cessation of breastfeeding (Dwi Rahayu, 2018). This finding is supported by other studies that highlight the mother's belief in her ability to breastfeed as a key determinant in achieving exclusive breastfeeding for six months (Wardiyah et al., 2020).

Pollard and Guill (2010) found a significant relationship between a mother's level of breastfeeding self-efficacy and the duration of breastfeeding, with higher self-efficacy associated with more extended breastfeeding periods.

Self-efficacy refers to an individual's belief in their ability to perform specific actions to achieve desired outcomes (Bandura, 2007). According to Dennis (2010), Breastfeeding Self-Efficacy (BSE) is defined as a mother's confidence in her ability to breastfeed, which encompasses her decision to initiate breastfeeding, the level of effort she exerts, her ability to overcome challenges, and her emotional responses to breastfeeding difficulties.

Exclusive breastfeeding is critical for infant health. Infants who are exclusively breastfed possess stronger immune systems compared to those who are not. Inadequate breast milk intake can lead to a poor nutritional balance, which may hinder the infant's optimal growth and development (Bahriyah et al., 2017). Exclusive breastfeeding refers to the practice of feeding infants only breast milk for the first six months of life, without the addition of other foods or drinks (Ministry of Health, 2019).

A preliminary study conducted in Bunijaya Village, Cianjur, identified 70 mothers with children aged 6–24 months during June and July. Among these, 68 children had received exclusive breastfeeding, while the remaining did not.t

METHOD

This study employed a quantitative research design using an analytical correlational approach with a cross-sectional design. Correlational analysis is a method used to examine the relationship between independent and dependent variables (Lapau, 2013). A total sampling technique was used, in which the entire population that met the inclusion criteria was selected as the sample. The study population consisted of all breastfeeding mothers with children aged 6–24 months residing in Bunijaya Village, Cianjur.

Primary data were collected using a structured questionnaire, which was distributed to respondents via Google Forms. The main instrument for data collection was a validated questionnaire designed to measure both the level of breastfeeding self-efficacy and the success of exclusive breastfeeding practices. The purpose of this study was to determine the relationship between the level of breastfeeding self-efficacy and the success of exclusive breastfeeding among mothers of children aged 6–24 months in Bunijaya Village, Cianjur.

RESULTS AND DISCUSSION

Based on the research conducted with **70 mothers**, which aimed to examine the relationship between the level of **breastfeeding self-efficacy (BSE)** and the **success of exclusive breastfeeding**, the following results were obtained:

1. Overview of breastfeeding self-efficacy levels

Table 1. Distribution of Breastfeeding Self-Efficacy (BSE) Levels

BSE	Frequency	Percentage
Not confident at all	0	0
Not very confident	0	0
Sometimes confident	0	0
Confident	5	7,1
Very confident	65	92,9
Total	70	100

This study found that 92.9% (n = 65) of respondents demonstrated a very high level of Breastfeeding Self-Efficacy (BSE), while 7.1% (n = 5) showed a high level of confidence. These results are consistent with the findings of Putri (2023), who reported an average BSES-SF score of 46.19—equivalent to 76.98% of the maximum score of 60—indicating that most mothers had high breastfeeding self-efficacy. This aligns with the theory that high self-efficacy enhances intrinsic motivation, perseverance in problem-solving, task engagement, and belief in one's ability to successfully breastfeed (Ruatika, 2012).

Several factors influence BSE. Wati (2022) found that previous breastfeeding experience significantly influenced BSE scores among mothers at Baby-Friendly Hospital (RSSIB) facilities (p=0.000; OR=13.134) as well as non-RSSIB facilities (p=0.001; OR=5.736). The mode of delivery was also significantly associated with BSE at RSSIBs (p=0.016; OR = 5.996).

Positive past experiences play a crucial role in enhancing confidence. Mothers who have previously breastfed successfully are more likely to view breastfeeding challenges as manageable and are thus more motivated to continue breastfeeding (Ngo et al., 2019). This is supported by the breastfeeding self-efficacy theory, which posits that past experiences shape maternal confidence and the duration of breastfeeding (De Roza et al., 2019).

Breastfeeding self-efficacy is a crucial psychological factor influencing a mother's decision to initiate and sustain breastfeeding. The RSSIB program appears to contribute positively to achieving exclusive breastfeeding, suggesting its role in strengthening maternal breastfeeding exclusivity. A higher BSE score is directly correlated with greater maternal confidence in breastfeeding.

Health services are encouraged to provide targeted support for mothers with low BSE. This can be achieved through structured health education and breastfeeding counseling, enabling mothers to gain knowledge and emotional support. Healthcare providers, particularly those working in community health centers (Puskesmas), should be proactive in promoting counseling and Posyandu-based education for pregnant women to enhance BSE from the antenatal period.

The findings of this study also highlight the role of regular monthly education sessions during Posyandu visits. These sessions serve as an effective platform where healthcare workers consistently encourage mothers, build their confidence to breastfeed exclusively until six months of age, and provide motivation to help them overcome breastfeeding challenges.

2. Overview of exclusive breastfeeding success

Table 2. Distribution of Exclusive Breastfeeding Success

Exclusive breastfeeding success	Frequency	Percentage	
Exclusive	68	97.1	

Non exclusive	2	2,9
Total	70	100

The results of this study revealed that 97.1% (n = 68) of the respondents practiced exclusive breastfeeding, while 2.9% (n = 2) did not. This finding aligns with a study by Jamaludin (2022), which reported that 81.4% of mothers in the Waihaong Public Health Center area of Ambon City provided exclusive breastfeeding.

Multiple factors influence the success of exclusive breastfeeding, including internal factors (such as maternal age, education, knowledge, parity, and employment), external factors (husband and family support), and facilitating factors (such as healthcare providers). One of the significant challenges reported is the limited knowledge within the family and cultural practices that encourage early complementary feeding, often influenced by parents or in-laws (Feriyal, 2023).

Feriyal (2023) found significant associations between several variables and exclusive breastfeeding, including maternal age (p = 0.003, OR = 8.963), education (p = 0.001, OR = 9.321), knowledge (p = 0.003, OR = 9.936), employment (p = 0.003, OR = 7.854), and family support (p = 0.004, OR = 9.854). These findings highlight the multifactorial nature of breastfeeding success.

Firm maternal intention and motivation play a crucial role in ensuring adequate breast milk production. Emotional and psychological support, particularly from the husband and family, has been shown to reduce maternal stress and anxiety, creating a conducive environment for breastfeeding. When mothers feel calm and supported, the let-down reflex is more effective, promoting successful lactation (Qiftiyah in Feriyal, 2023).

This study also observed that monthly educational sessions during community health posts (Posyandu) visits had a significant influence on breastfeeding outcomes. Mothers who regularly attended Posyandu sessions demonstrated higher rates of exclusive breastfeeding, suggesting that consistent health education reinforces positive breastfeeding behaviors.

3. Correlation of Breastfeeding Self-Efficacy and Exclusive Breastfeeding Success

Table 3. Correlation of Breastfeeding Self-Efficacy and Exclusive Breastfeeding Success

	Exclusive breastfeeding success			Total		p-value	
BSE	Exc	clusive	Non Exclusive				
	f	%	f	%	F	%	
Confident							0,004
	3	60,0	2	40,0	5	100	
Very Confident	65	100	0	0,0	65	100	

Bivariate analysis revealed a significant association between Breastfeeding Self-Efficacy (BSE) and the success of exclusive breastfeeding (p = 0.004). This finding is consistent with Popy (2020), who reported a significant relationship between BSE and exclusive breastfeeding using chi-square analysis (p = 0.000). Pollard and Guill (2010) also demonstrated that higher BSE is associated with longer breastfeeding duration.

Supporting this, Fahriani (2014) highlighted that maternal psychological factors, particularly self-efficacy, are strong predictors of exclusive breastfeeding. BSE influences maternal behavior by instilling confidence in their ability to breastfeed. Mothers with high self-efficacy are more likely to persist in exclusive breastfeeding and resist the use of formula (Bandura, as cited in Susanti, 2022).

According to self-efficacy theory, four primary sources shape maternal confidence in breastfeeding: personal mastery (previous breastfeeding experience), vicarious experiences (observing other breastfeeding mothers), verbal persuasion (encouragement from family, peers, and lactation consultants), and physiological states (such as pain, fatigue, and stress). These factors collectively influence the mother's decision to exclusively breastfeed or introduce supplemental feeding (Rasyad & Sujatno, 2012).

Mothers with high self-efficacy are better equipped to manage physical and emotional challenges during the postpartum and lactation periods, thereby increasing the likelihood of exclusive breastfeeding (Rasyad & Sujatno in Susanti, 2022).

Efforts to promote exclusive breastfeeding should prioritize mothers with low education levels and working mothers, as these groups are at higher risk of early breastfeeding discontinuation. Intensive lactation counseling, beginning in the antenatal period and continuing throughout breastfeeding, is recommended. Follow-up visits and home visits by healthcare professionals, particularly midwives and field educators, are essential for identifying and addressing breastfeeding challenges effectively.

CONCLUSIONS AND RECOMMENDATIONS

Statistical analysis revealed a significant relationship between breastfeeding self-efficacy and the success of exclusive breastfeeding among mothers of children aged 6–24 months in Bunijaya Village, Cianjur (p = 0.004, 95% CI), indicating that higher BSE levels are associated with a greater likelihood of exclusive breastfeeding success. Future research is encouraged to explore additional variables beyond **breastfeeding self-efficacy** and the **success of exclusive breastfeeding** to provide a more comprehensive understanding of the factors influencing breastfeeding practices.

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