

# Implementation of Early Breastfeeding Initiation Challenges After Sectio Caesarea in Hospital

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#### Abstract

Behavior of early initiation of breastfeeding in postpartum mothers is still a health problem in the world. Early initiation of breastfeeding has become an internationally and nationally recommended program as part of Mother and Baby Friendly Hospital services. Caesarean section is one of the obstacles in implementing early initiation of breastfeeding. This scoping review aims to assess the policy of early breastfeeding initiation after cesarean section in hospitals. This research design is a scoping review, using 4 databases, namely Google Scholar, Ebsco, Pro Ouest, and Science Direct. The stages and flow of selecting research articles using PRISMA (Preferred Reporting Items For Systematic reviews and Meta-Analyses) Flowchart, and to assess the quality of the article researchers used a checklist from the Joanna Briggs Institute. Literature study that summarizes several accredited journal articles from 2018-2023 that are relevant to the title. This research selected quantitative and qualitative research articles with cross-sectional or case control research designs. In the journal search, researchers used boolean operators for predetermined keywords, adding "OR", "AND" according to the topic. The results found two themes and six subthemes from the 8 articles screened, namely the success factors of breastfeeding in postcesarean section mothers, maternal knowledge, maternal attitudes, decisions in planning labor and implementation of early breastfeeding initiation. Meanwhile, efforts to make early breastfeeding initiation a success continue with the support of health workers and program policies. Support and policy efforts from health care providers have a positive influence on breastfeeding mothers, especially mothers who undergo cesarean delivery in hospitals.

Keywords: Challenges, Early initiation of breastfeeding, Hospital, Post sectio caesarea

# INTRODUCTION

The Indonesian government program is in line with the guidelines of the United Nations Childrens Fund (UNICEF) and the World Health Organization (WHO) which recommend early breastfeeding initiation as a life-saving measure, with early breastfeeding initiation reducing the number of deaths that occur before the first month of life, 22% of babies will be saved (Schwarzenberg et al., 2018). Globally, exclusive breastfeeding coverage for infants <6 months from 2014-2020 was 44%2. In Sub-Saharan Africa, a region with high infant and child mortality rates, only 33% of infants are exclusively breastfed (Gibbs et al., 2018).

According to UNICEF and WHO, optimal breastfeeding is recommended in order to reduce child morbidity and mortality. Children should receive breast milk immediately after birth, referred to as early initiation of breastfeeding (Sitanggang et al., 2023). Coverage of newborns who received early breastfeeding initiation in 2020 in Indonesia is around (77.6%) according to the province of West Java around (83.7%) the target of the early breastfeeding

initiation program in Indonesia in 2020 is around (54%), in the Bogor city area in 2019 around (83.98%) (Khasawneh et al., 2017).

The main causes of neonatal mortality are infection at 36%, preterm birth at 28%, and asphyxia at 23%. Therefore, although infectious diseases are still the leading cause of neonatal death, initiatives can be taken to increase immunoglobulin levels in newborns by implementing an early breastfeeding initiation program in newborns. One of the key factors for the success of early breastfeeding initiation immediately after the baby is born is the role of health care providers (Sitanggang et al., 2023). The association of early initiation of breastfeeding with infant mortality and morbidity. Approximately 78 million infants, or three in five, are not breastfeed within one hour of delivery. The high incidence of this is due to the risk of death and not being able to continue breastfeeding (Gibbs et al., 2018).

Based on Government Regulation Number 33 of 2012 concerning exclusive breastfeeding article 9 paragraph 1 explains that early breastfeeding initiation is carried out when the condition of the mother and baby is stable and does not require medical action for at least 1 hour. This is intended to provide an opportunity for the baby to breastfeed early by looking for the mother's nipple for a minimum of 1 hour after birth, the baby still does not want to suckle early breastfeeding initiation activities are still being pursued by mothers, health workers, and health care facility organizers. One of the impacts of not initiating early breastfeeding for mothers and infants is increasing newborn mortality (Kemenkes RI, 2012).

Some studies mention the existence of obstacles in breastfeeding such as, breast milk not flowing and anatomical factors such as nipples that do not come out, they reveal the causes of breast milk not flowing after childbirth are triggered by factors that come from internal and external individuals such as mood changes, maternal mental health and environmental conditions that affect breast milk production (Pusporini et al., 2021; Salat et al., 2019); Sasi et al., 2022). The main determinants of barriers to early initiation of breastfeeding are mothers who gave birth by cesarean section, low education level, not receiving breastfeeding information, lack of knowledge about the right time to breastfeed, and region of residence (Rahmawati, 2023).

The decision to initiate breastfeeding depends not only on the mother, but also on the role of family, community, information sources and health services (Buss, 2019). Early initiation of breastfeeding is carried out in postpartum mothers, both normal postpartum and post Sectio Caesarea. By doing early initiation of breastfeeding, it is not only beneficial for newborns, but also for new mothers, namely reducing the risk of bleeding after childbirth and

increasing the bounding attachment between mother and baby. Given that the largest contributor to maternal mortality is postpartum hemorrhage (Cohen et al., 2018).

Based on the description above, the researcher is interested in reviewing how the policy of early breastfeeding initiation after sectio caesarea in the Hospital.

### **METHOD**

This study uses the literature scoping review method, which aims to synthesize research evidence and is often used to categorize or classify existing literature and the type of evidence available.

Based on the PEOS framework that has been chosen by the researcher, the inclusion and exclusion criteria for articles are as follows:

**Table 1.Inclusion and Exclusion Criteria** 

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Inclusion Criteria	Exclusion Criteria				
English article or international article	Incomplete article				
Original Article	Book review letter				
Systematic review					
Articles published from 2018 to 2023					
Articles that discuss the policy of early breastfeeding	Incomplete article				
initiation after sectio caesarea to provide exclusive					
breastfeeding					
Articles that discuss the implementation of early	Grey literature				
breastfeeding initiation for Sectio Caesarea mothers					

Selection of articles with Literature Searching using databases, manual searching or gray literature or identification of relevant literature. The information source item explains the source of the literature search used. The databases used to search for relevant articles in compiling this scoping review are 4 databases, namely *Google Scholar*, *Ebsco*, *Pro Quest*, *Science Direct*.

The literature search strategy in this search item explains the literature search strategy. Keywords that have been determined, by adding "OR", "AND" that match the topic.

### **RESULTS**

#### Prisma Flowchart

To select articles, in this case the reviewer uses the Covidence program, which is one of the web-based software that simplifies systematic reviews. First of all, enter the covidence account, then we import files or references, after completing sending the file, covidence checks for duplicates and quarantines duplicate references. The number of duplicates detected and removed as well as the inclusion and exclusion criteria will be displayed automatically in PRISMA. The covidence program is to support the production of systematic reviews that are

more efficient and easier to use. Evidence can be used from titles, abstracts to articles that match the research objectives.

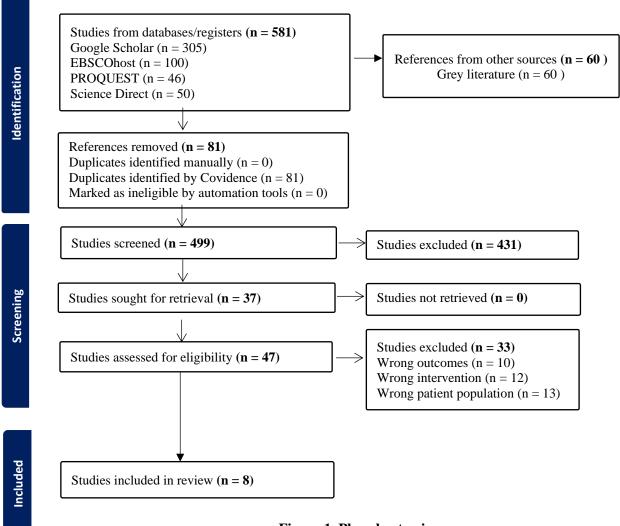


Figure 1. Plowchart prism

**Table 2. Charting Data** 

Table 2. Charting Data				
Number	Title/Author/Year	Countries	Research type and research design	Results
A1	Legal Protection for Health Workers Towards the Implementation of Government Regulation No. 33 of 2012 concerning Exclusive Breastfeeding on Infants with Post Sectio Caesarea Mothers (Siregar et al., 2021)	Indonesian	Qualitative method with descriptive research design	From the results of interviews and observations of all respondents, health workers including ob-gyn doctors, pediatricians, midwives, and breastfeeding counselors have not fully provided information and education on exclusive breastfeeding and breastfeeding counselors have not fully provided information and education about exclusive breastfeeding
A2	Determinants of Successful Implementation of Early Breastfeeding Initiation in RSU PKU Muhammadiyah Gamping, Yogyakarta (Khofiyah et al., 2023)	Indonesian	Quantitative with cross-sectional design	The results showed that there was a significant relationship between the type of delivery. As for the factors of maternal age, parity, education, and occupation, there was no significant relationship with the application of EBI
A3	Determinant Factors of Early Initiation of Breastfeeding in Postpartum Sectio Caesarean Mothers in Aceh, Indonesia (Mutia et al., 2020)	Indonesian	This study was a retrospective quantitative survey	The results showed that maternal complications were the most associated factor with the implementation of early breastfeeding initiation in postpartum women with Caesarean section
A4	The impact of caesarean section on breastfeeding initiation, duration and difficulties in the first four months postpartum (Hobbs et al., 2016)	Canada	The All Our Babies study is a prospective pregnancy cohort in Calgary, Alberta	More women who deliver by planned caesarean section have no intention of breastfeeding or do not initiate breastfeeding
A5	Implementation of Early Breastfeeding Initiation and Bounding Attachment for Postpartum Mothers at Halilulik Hospital In 2021: A Qualitative Study (Naibaho, 2022)	Indonesian	Qualitative study	The implementation of early breastfeeding initiation cannot be evaluated to see and monitor the implementation of early breastfeeding initiation after delivery in the first hour and support the success of exclusive breastfeeding as well as for pregnant women who want to initiate early breastfeeding when giving birth to their babies. Because the implementation of the early breastfeeding initiation program does not exist and is not implemented

Number	Title/Author/Year	Countries	Research type and research design	Results
A6	Factors Associated with Early Breastfeeding Initiation among Women Who Underwent Cesarean Delivery at Tertiary Hospitals in Kelantan, Malaysia (Johar et al., 2021)	Malaysia	A prospective cohort study was conducted on women who electively underwent cesarean section at two tertiary hospitals in Kelantan, Malaysia	Breastfeeding initiation was significantly associated with skin contact (odds ratio [OR], 14.42; 95% confidence interval [CI], 3.58-58.06), mothers who exclusively breastfed during hospitalization (OR, 36.37; 95% CI, 5.60-236.24), and infants who were not sleepy when attempting to breastfeed (OR, 5.17; 95% CI, 1.32-20.21)
A7	Cesarean-sections and early initiation of breast- feeding practices in tertiary care hospitals of Islamabad (Aqeel et al., 2020)	Pakistan	Quantitative cross- sectional design	The mother did not breastfeed her baby after the birth, as she was in the postoperative recovery room. The baby was therefore formula fed. Woman experiences post- operative pain which delays initiation of breastfeeding
A8	Prevalence and Associated Factors of Caesarean Section and its Impact on Early Initiation of Breastfeeding in Abu Dhabi, United Arab Emirates (Taha et al., 2019)	Arab	Quantitative	This study shows that the prevalence of Sectio Caesarea is high in Abu Dhabi, UAE and CS is associated with advanced maternal age, GA, nationality, and obesity. Sectio Caesarea, and particularly emergency Sectio Caesarea, is a major risk factor for delayed initiation of breastfeeding

# **Critical Appraisal**

Critical appraisal results from 8 articles that have been selected and assessed for article quality using critical appraisal from *The Joanna Briggs Institute* (JBI).

**Table 3. Critical Appraisal Score Results** 

Number	Author, Year	Critical Appraisal Score Results
A1	(Siregar et al., 2021)	30/A
A2	(Khofiyah et al., 2023)	24/A
A3	(Mutia et al., 2020)	22/A
A4	(Hobbs et al., 2016)	33/A
A5	(Naibaho, 2022)	29/A
A6	(Johar et al., 2021)	31/A
A7	(Aqeel et al., 2020)	24/A
_A8	(Taha et al., 2019)	30/A

# **Data Analysis Results**

The results of the review there are 8 articles that have been selected and in accordance with good quality, then classify based on the characteristics of the article, the first characteristic is based on characteristics based on country, and research methods.

# **Characteristics of articles**

Of the 8 articles extracted, the results of research conducted from developed countries, namely 4 from Indonesia, 1 Canada, and 1 from Arabia and there are from 2 developing countries, namely 1 Malaysia and 1 Pakistan.

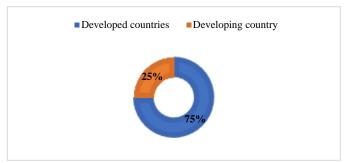


Figure 2. Characteristics by Country

Based on the articles that have been selected and in accordance with the quality obtained, the results show that the 8 articles used 2 quantitative studies, 4 qualitative studies, and 2 cohort studies.



Figure 3. Characteristics based on research methodology

# **Mapping Thematis**

In this mapping step, the author categorizes the findings of interesting studies reviewed in the article, namely:

Tabel 4. Mapping Thematis

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Number	Theme	Theme Section	Article	
1	Factors of successful	a. Mother's knowledge	(Khofiyah et al., ; Mutia	
	breastfeeding in post	b. Mother's attitude	et al., 2020; Hobbs et al.,	
	sectio caesarean	c. Decision in planning	2016; Aqeel et al., 2020;	
	mothers	pregnancy	Taha et al., 2019)	
		d. Implementation of early		
		breastfeeding initiation		
2	Efforts made towards	a. Health personnel support	(Siregar et al., 2021;	
	successful early	b. Program policy	Naibaho, 2022; Taha et	
	initiation of		al., 2019)	
	breastfeeding			

### **DISCUSSION**

# Factors of successful breastfeeding in post sectio caesarean mothers

# 1) Maternal Knowledge

Exclusive breastfeeding has proven benefits in both the short and long term, not only for the baby's healthy start in life, but also for the mother's health and quality of life. (Jakaitè et al., 2021). Antibodies produced by colostrum protect against diarrhea and pneumonia, and breastfed babies are less likely to suffer from ear infections or urinary tract infections. In addition, higher IQ and household income are observed in adults who previously breastfed (Khofiyah et al., 2023). Challenges in breastfeeding are also related to knowledge. High maternal knowledge of breastfeeding increases the prevalence of exclusive breastfeeding practices, and lack of knowledge about breastfeeding has been reported to contribute to low exclusive breastfeeding rates (Mutia et al., 2020).

The same thing is explained in the research results Naibaho (2022), that mothers with low exclusive breastfeeding knowledge are less likely to provide exclusive breastfeeding. In the United States, it was revealed that mothers who have knowledge about exclusive breastfeeding can increase their interest in breastfeeding (Wallenborn et al., 2017). Breastfeeding in the first hour after delivery will increase the bond between mother and child, which is called early breastfeeding initiation. Breastfeeding as early as possible will certainly affect the success of the exclusive breastfeeding program for infants (Rieth et al., 2018).

### 2) Mother's attitude

Attitude is often associated with behavior towards an object with the assumption that beliefs and feelings influence behavior a lot (Horwood et al., 2020). Knowledge and attitudes can be used to predict a mother's desire to provide nutrition to her baby. (Mutia et al., 2020). Lack of knowledge and poor skills in breastfeeding can lead to a variety of problems due to errors in positioning and attachment. Maternal knowledge, attitudes and information about breastfeeding play an important role in the successful breastfeeding of newborns (Gebremariam et al., 2021). Correct knowledge about exclusive breastfeeding will respond to the mother's attitude, and can encourage further responses in the form of actions to provide exclusive breastfeeding to her baby (Shukri et al., 2021).

Attitudes are influenced by various factors including personal experience, the influence of other people who are considered important, the influence of culture, mass media, educational institutions and religious institutions, the influence of emotional

factors. A person's attitude can change with the acquisition of additional information about a particular object. Attitudes arise from various assessments, namely conditions, and behavioral tendencies. Attitudes can also change from experience and innate factors as well as persuasion, for example by counseling or health education (Aqeel et al., 2020).

# 3) Decision to plan for childbirth

The decision to plan for delivery is one of the factors that determine whether the mother will have a normal delivery or a section caesarean section. According to Maryani et al., (2022), patients who decide to prefer surgical delivery compared to normal, this is based on the lack of knowledge and self-efficacy of the mother and the lack of support from people around. Sectio caesarean (SC) delivery has become one of the most prevalent surgeries in the world. This increase occurs for various reasons, mostly due to obstacles experienced by the fetus and mother. However, not a few sectio caesarean (SC) surgeries are performed at the request of mothers who do not want to undergo normal labor due to fear of the procedure (Naibaho, 2022).

According to the World Health Organization (WHO), the average Sectio caesarean (SC) delivery is 5-15% per 1000 births in the world. The incidence rate in public hospitals averages 11%, while in private hospitals it can be more than 30%. The demand for sectio caesarean (SC) surgeries in a number of developing countries is also increasing rapidly every year (Mutia et al., 2020). According to Mohamed et al., (2018) The mode of delivery can also be one of the factors affecting infant breastfeeding. Cesarean delivery has a psychological impact that causes anxiety, depression and stress, which can interfere with the mother's bond with her baby and result in long-term psychological effects for the mother and her family (Mutia et al., 2020). The psychological impact on women post sectio caesarea (SC) is fear and anxiety if analgesics are missing then the pain will be more pronounced (Rahman et al., 2020).

# 4) Implementation of early breastfeeding

Early initiation of breastfeeding is the act of a baby starting to start breastfeeding on its own immediately after birth, with the pounding of the baby's head against the mother's chest, the touch of the baby's hand on the nipple and its surroundings, the baby's emanation and licking on the mother's nipple stimulates the release of the hormone oxytocin, where the oxytocin hormone helps the uterus contract so that it helps accelerate the release and expulsion of the placenta (placenta) and reduce bleeding, the hormone oxitocin also stimulates the production of other hormones that make the mother more

relaxed, love her baby more, increase the pain threshold, and feel very happy (Setyorini et al., 2022).

However, early initiation of breastfeeding in mothers with post sectio caesarea is difficult due to the presence of suture scars on the mother's abdominal area, so the implementation of early initiation of breastfeeding is not optimally done by the baby himself because there is help from health workers who help the baby to suckle as soon as possible after the mother gives birth (Hobbs et al., 2016).

There is a significant relationship between early breastfeeding initiation and exclusive breastfeeding (Assriyah et al., 2020). Early breastfeeding can facilitate milk production because the release of breast milk begins after birth, which is stimulated by the baby's mouth on the mother's nipple (Naibaho, 2022). Embedding the principle of exclusive breastfeeding in every care provided by midwives to the community is important. This is related to efforts to change the behavior of midwives so that they always initiate early breastfeeding in every delivery assistance and support exclusive breastfeeding (Sari et al., 2023).

Early initiation of breastfeeding can prevent 22% of infant deaths in the first 1 hour under 28 days of age and prevent 16% of infant deaths under 28 days of age if the infant first breastfeeds between 2 hours and 24 hours. Early breastfeeding initiation followed by exclusive breastfeeding will save about 1 million babies per year 36. Early breastfeeding can be done not only for mothers with normal delivery, but also for post SC mothers, although sectio caesarean delivery (SC) is one of the obstacles to breastfeeding (Aqeel et al., 2020). Midwives should be able to oversee the implementation of exclusive breastfeeding by providing advice, awareness, and actions that support the implementation of exclusive breastfeeding. The ANC period is the most appropriate time for health workers to inform mothers about breastfeeding preparation and the importance of exclusive breastfeeding (Taha et al., 2019).

# Efforts towards successful early breastfeeding initiation

### 1) Health personnel support

The role of midwives or health workers is needed by breastfeeding mothers. Teaching the correct breastfeeding technique is very important as it helps the mother to be able to breastfeed her baby. Breastfeeding mothers appreciate the support of midwives and health care providers. This early stage is very important as it determines whether a breastfeeding mother will stop exclusive breastfeeding or not (Mary et al., 2022).

There is a need for psychological empowerment of breastfeeding mothers by ensuring that infants receive nutritious and adequate nutrition from the mother's breast milk exclusively (Taha et al., 2019). In antenatal and postnatal care, health workers can provide information about breastfeeding to mothers and also provide encouragement and motivation to continue breastfeeding exclusively (Flax et al., 2022).

Mothers who consulted received support from health workers including midwives (Sarı et al., 2022). Breastfeeding education on infant feeding provided to mothers during pregnancy enables mothers to breastfeed their babies. Support for breastfeeding mothers provided by midwives helps mothers to answer questions related to breastfeeding issues (Khofiyah et al., 2023). Information provided to breastfeeding mothers by health workers is nutrition counseling during the initial postnatal visit (between 7 and 15 days after birth). The mother is then given the option of a follow-up visit or a phone call to receive guidance on breastfeeding issues (Barona-Vilar et al., 2009).

The role of health workers, especially midwives by involving cadres, is very important to change the behavior of mothers so that mothers can provide exclusive breastfeeding to their babies by providing information about the differences in the content of breast milk and complementary foods, the benefits of breast milk for babies and how to store breast milk safely if mothers have to work or leave their babies at home (Taha et al., 2019). The results of this study are in line with the research of Debby Sitohang et al., (2019) that there is a significant relationship between health worker support and maternal behavior in exclusive breastfeeding.

# 2) Program Policy

The main source of information for consultation is health workers who are experts in their fields. The communication media used by the counselor can provide information that is easily accepted and remembered by the mother so as to encourage the mother to be curious and gain a better understanding. The forms of media used are pamphlets given to mothers, flip charts, lactation props, and movie screenings as visual material. Movie screening is a communication media that is very preferred by mothers in the consultation process, mothers can find out more clearly about the practice of Early Breastfeeding Initiation, the process of breastfeeding and baby attachment that is comfortable for mothers and babies and how to deal with fussy children (Siregar et al., 2021).

The United Nations Children's Fund (UNICEF) and the World Health Organization (WHO) continue to support governments in protecting, promoting and supporting optimal breastfeeding practices by sharing tools and resources to help implement the 10 Steps to

successful breastfeeding, strengthening government capacity to provide quality breastfeeding counseling services and gathering evidence to encourage stronger action against inappropriate marketing of breastmilk substitutes (Kemenkes RI, 2023).

To support the success and welfare of breastfeeding mothers, the government has established laws related to breastfeeding mothers as stipulated in Law Number 36 of 2009 that during breastfeeding, the family, local government and community must fully support the mother by providing special time and facilities (Undang - Undang Republik Indonesia Nomor 36 Tahun 2009 Tentang Kesehatan, 2009). Health workers, especially midwives in this case, play a role in accordance with the health minister's decision number 450 / MENKES / SK / VI / 2004 concerning exclusive breastfeeding that health workers should inform all new mothers to provide exclusive breastfeeding by referring to the 10 steps of successful breastfeeding.

Prenatal visits are associated with an 11% increase in the prevalence of breastfeeding in children under six months of age. These visits aim to provide education on the positive impact of breastfeeding. Studies have shown that interventions in medical care, including antenatal counseling, exclusive breastfeeding promotion, and antenatal visits are not only indicators of health quality, but have a direct impact on exclusive breastfeeding rates (Naibaho, 2022). Exclusive breastfeeding promotion can be a useful solution in providing education and counseling to pregnant women about the benefits of breast milk for both babies and mothers, and trainers can demonstrate to mothers the correct breastfeeding process and techniques (Taha et al., 2019; Purnamasari et al., 2021).

### **CONCLUSIONS**

Based on the results of the search and discussion, it was found that there was no implementation of early breastfeeding initiation in accordance with the management of early breastfeeding initiation in Sectio Caesarea (SC), namely in terms of duration and position of the baby on the mother's chest. The obstacles faced by the medical team in implementing early breastfeeding initiation in Sectio Caesarea are the condition of the baby or mother that does not allow for early breastfeeding initiation, refusal from the mother, lack of cooperation from the medical team involved, lack of socialization and support from management, lack of manpower and time needed to carry out early breastfeeding initiation optimally.

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