Overview of Mother's Knowledge About Foremilk Balance And Hindmilk in 0-6 Months Old Babies at the Primary Clinic Sunggal Medan 2021

Debora Paninsari¹, Efrida Yanti Siregar², Sonya Gaberiama Naibaho³, Nur Abadi Harahap⁴
D-III Midwifery Study Program, Faculty of Nursing and Midwifery, Prima Indonesia University

ABSTRACT
The mortality rate is the first indicator to determine the level of child health, because it is a guideline according to child health which is now a problem that often occurs in the health sector in Indonesia. The duration of breastfeeding is very important so that the foremilk and hindmilk can be consumed by the baby. The imbalance of foremilk and hindmilk, the baby will feel discomfort and feel pain and then become fussy. This research is descriptive in nature with the aim of knowing the description of mother's knowledge about giving foremilk and hindmilk to infants aged 0-6 months. The population of this study was 30 mothers. Sampling using a total sampling technique of 30 people. The time of data collection was carried out on April 22 - June 30, 2021 by interviewing using a questionnaire. The results showed that the majority of respondents aged 19-25 years were 14 people (46.7%), the minority aged 31-38 years was 5 people (16.6%). The majority have high school education 20 people (66.7%), the minority do not go to school 2 people (6.7%). The majority of their jobs are as housewives for 25 people (83.3%), and the minority of jobs are as employees of 2 people (6.7%). The majority have sufficient knowledge of 15 people (50.0%), the minority with good knowledge of 6 people (20.0%).
Keywords: Knowledge, Foremilk, hindmilk, breastfeeding

This is an open access article below CC BY-NC licence.
INTRODUCTION

According to the WHO (World Health Organization) the mortality rate is the first indicator to determine the health status of children because it is a reflection of the health status of children which is currently also a major problem in the health sector in Indonesia. Because children's health will reflect the nation's health status, because the next generation of the nation is a child who has the ability and can develop in continuing the nation's development.(Sacred Ramadani, 2021).

Breast milk is a dynamic living fluid, breast milk has a very diverse and very complete nutritional content. All the content contained in breast milk according to the needs and circumstances of the baby. 80% of the content contained in breast milk is water, so it is sufficient to meet the fluid needs of babies(Sukma, Hidayati, & Nurhasiyah Jamil, 2017).

Exclusive breastfeeding is giving only breast milk from the time the baby is born until the age of 6 months. During that time the baby is not expected to get additional fluids, such as formula milk, honey or water. When giving exclusive breastfeeding, it is also not recommended to give additional food, for example, such as fruit, porridge, bread and much more. Breastfeeding properly can meet the needs of the baby for 6 months without being given complementary foods. After the baby is more than 6 months old, the baby needs complementary foods but breastfeeding can be continued until the baby is 2 years old.(Sukma, Hidayati, & Nurhasiyah Jamil, 2017).

For DIY health profiles in 2013 the increase in IMR was caused by more and more babies who were not given exclusive breastfeeding. The target of the Millennium Development Goal’s (MDG’s) schedule is to try to reduce the value of the IMR in 2015 by 23 out of 1,000 births. However, most areas in Indonesia such as Yogyakarta still have a large IMR value, which is as much as 25 per 1,000 birth rates(Rahmawati & Susilowati, 2017).

The results of Salamah’s 2019 research, UNICEF reported that 30 thousand infant deaths in Indonesia and 10 million infant deaths in the world each year could be prevented by recommending exclusive breastfeeding for 6 months from the birth of the baby, not giving babies other food or drink other than breast milk. Exclusive breastfeeding coverage in ASEAN such as Vietnam is 27%, India is 46%, Myanmar is 24%, Philippines is 34%, on the other hand Indonesia is 54.3%(Salamah & Hellen Prasetya, 2019).

Data obtained from the Susenas of the province of North Sumatra, the coverage of exclusive breastfeeding in 2013 was 56.6% and the profile of the Medan health department obtained in August 2013 as many as 39 health centers there were 174 (4.08%) infants who were exclusively breastfed and 4089 (95.9%) babies who are not exclusively breastfed(Sihombing, 2018). If the baby is not given exclusive breastfeeding, something bad will happen to the baby. As a result, the risk of infant mortality due to diarrhea is 3.94 times greater than that of infants receiving exclusive breastfeeding.

When giving breast milk to babies there are 2 kinds of breast milk produced, namely foremilk first and then hindmilk. Foremilk that comes out at the beginning of breastfeeding is more yellow in color, its main content is protein, lactose, vitamins, minerals, and a little fat. Foremilk contains a high water content which makes it more watery than Hindmilk and is produced in large quantities to meet fluid requirements. Breast milk can meet the needs of the baby completely and the baby does not need additional water at 6 months of age, even in hot areas. While Hindmilk comes out after Foremilk when breastfeeding is almost finished is whiter because it contains 4-5 times more fat than Foremilk, this is what makes babies feel full(Sukma, Hidayati, & Nurhasiyah Jamil, 2017).

Nurita’s 2021 research on Foremilk and Hindmilk Balance, shows that more than half of the respondents have poor knowledge (65, 7%), positive behavior (51.4%), abnormal breastfeeding duration (68, 6%), and position and proper breastfeeding attachment (80%), in balancing Foremilk and Hindmilk ASI. A total of 65.7% of respondents have an unbalanced Foremilk and Hindmilk Asi(Sacred Ramadani, 2021).

The results of the research by Paninsari and Eva in 2020 that the balance of Foremilk and Hindmilk did not affect the pattern of defecation in infants, such as the frequency, consistency and color of the stools of breastfed babies. Among breastfeeding mothers, there are still many who do not understand Foremilk and Hindmilk. Foremilk And Hindmilk are all about breastfeeding duration(Paninsari & Latifah Nurhayati, 2020)

The initial survey was carried out by researchers in April 2021. And based on data obtained at the Sunggal Pratama Clinic, Medan, there were 30 people who had babies aged 0-6 months. After that, interviews were conducted with 10 mothers and found that there were 5 mothers with exclusive breastfeeding, 3 mothers with breastfeeding and complementary feeding, and 2 mothers who did not. And 8 out of 10 mothers do not balance Foremilk and Hindmilk.

RESEARCH METHODS

In this study, the method used is descriptive method, namely problems related to existing variables without making a comparison or connecting (Aziz Alimul, 2017). The formulation of this descriptive problem only describes the problem that is to be achieved in the research, namely “Overview of Mother’s Knowledge About Foremilk and Hindmilk in Infants 0-6 Months Old” at the Sunggal Pratama Clinic Medan 2021.

This research was conducted at the Sunggal Pratama Clinic, Jln. Sunggal, Tj. Rejo, sub-district of Medan Sunggal, Medan City, North Sumatra on the grounds that the number of samples met the requirements to conduct
research and obtained permission from the Sunggal Pratama Clinic Medan. The time of this research will be on April 22 – June 30, 2021.

The population in this study were 30 mothers who had babies aged 0-6 months at the Sunggal Pratama Clinic, Medan. The sampling technique in this study was by sampling or 100% of the total population, namely the entire population was used as a sample, namely as many as 30 mothers at the Pratama Sunggal Clinic, Medan. The type of data collection collected is primary data by using direct interviews with respondents using a questionnaire made by the researcher based on the literature to mothers who have babies aged 0-6 months at the Sunggal Pratama Clinic, Medan. This questionnaire aims to measure the extent of mother’s knowledge about the balance of Foremilk and Hindmilk.

RESULTS

The research results are as follows:

Table 1 Frequency distribution of respondents based on age, education and occupation.

<table>
<thead>
<tr>
<th>No</th>
<th>Age</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>19-25</td>
<td>14</td>
<td>46.7</td>
</tr>
<tr>
<td>2</td>
<td>26-30</td>
<td>11</td>
<td>36.7</td>
</tr>
<tr>
<td>3</td>
<td>31-38</td>
<td>5</td>
<td>16.6</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>30</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Table 2 Distribution of respondent frequency description knowledge of mothers about the balance of foremilk and hindmilk in infants aged 0-6 months

<table>
<thead>
<tr>
<th>No</th>
<th>Knowledge</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Well</td>
<td>6</td>
<td>20.0</td>
</tr>
<tr>
<td>2</td>
<td>Enough</td>
<td>15</td>
<td>50.0</td>
</tr>
<tr>
<td>3</td>
<td>Not enough</td>
<td>9</td>
<td>30.0</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>30</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Based on table 3.1 above, we can see that the majority of respondents aged 19-25 years were 14 people (46.7%), while the minority respondents aged 31-38 years were 5 people (16.6%). The majority of respondents had high school education as many as 20 people (66.7%), while the minority of respondents did not attend school as many as 2 people (6.7%). The majority of respondents work as housewives as many as 25 people (83.3%), while the minority of respondents work as employees as many as 2 people (6.7%).

Table 2 Distribution of respondent frequency description knowledge of mothers about the balance of foremilk and hindmilk in infants aged 0-6 months

<table>
<thead>
<tr>
<th>No</th>
<th>Knowledge</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Well</td>
<td>6</td>
<td>20.0</td>
</tr>
<tr>
<td>2</td>
<td>Enough</td>
<td>15</td>
<td>50.0</td>
</tr>
<tr>
<td>3</td>
<td>Not enough</td>
<td>9</td>
<td>30.0</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>30</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Based on table 3.2 above, it can be seen that the mother’s knowledge about the balance of foremilk and hindmilk is the majority of respondents who have sufficient knowledge of 15 people (50.0%), while the minority of respondents have good knowledge of 6 people (20.0%).

DISCUSSION

Mother’s knowledge about the balance of foremilk and hindmilk, the majority of respondents had sufficient knowledge of 15 people (50.0%), while the minority of respondents had good knowledge of 6 people (20.0%).
The results of the research conducted by this researcher are related to or agree with Nurita's 2020 research, concerning Foremilk and Hindmilk Balance, showing that more than half of the respondents have poor knowledge (65.7%), positive behavior (51.4%), long breastfeeding duration (68.6%), and the right position and attachment of breastfeeding (80%), in balancing Foremilk and Hindmilk ASI. As many as 65.7% of respondents have an unbalanced Foremilk and Hindmilk Asi.

From the results of the research, the knowledge of mothers at the Pratama Sunggal Medan 2021 clinic in the balance of foremilk and hindmilk from many respondents who answered questionnaires number 1 to 3 answered incorrectly where the question discussed the meaning of Foremilk and Hindmilk. So the researcher assumes that there are still many respondents who do not know about the balance of Foremilk and Hindmilk and respondents think that the first milk that comes out is thicker. And many mothers are still confused whether when breastfeeding with one breast until the breast is empty or using breasts alternately.

According to the assumption of the researcher, respondents who are knowledgeable are influenced by education and work, the majority of whom have high school education and work as housewives so that mothers are more busy taking care of the household and less socializing with other people. And it can also be said that the respondents lacked experience in taking care of their families, especially babies when breastfeeding. And the majority of respondents aged 19-25 years are more so that the knowledge and experience of respondents is still lacking. Meanwhile, mothers who have good knowledge because they have a college education so that mothers know better how to give breast milk properly.

CONCLUSION

Based on the results of research on the description of mother's knowledge about the balance of foremilk and hindmilk in infants aged 0-6 months at the Pratama Sunggal clinic in Medan 2021 with a total of 30 respondents, the following conclusions were obtained: The majority of respondents had sufficient knowledge, namely 15 people (50.0%), while the minority respondents had good knowledge, namely 6 people (20.0%) about the balance of foremilk and hindmilk at the Sunggal Pratama clinic in Medan 2021.

It is hoped that researchers can share the knowledge that has been gained in studying and researchers can also add experience when conducting this research. It is hoped that respondents can provide information to the public, especially in providing breast milk to babies so that they can increase the knowledge of other people. It is hoped that the research place can provide benefits, especially to mothers on how to give breast milk properly. And where researchers can improve health services.

ACKNOWLEDGEMENTS

Thank you to the owner of the Pratama Sunggal Medan clinic who has facilitated and provided support in carrying out this research. Thanks also to the mother and baby who have been willing to help carry out this research so that this research can run smoothly.

REFERENCE