

ENHANCING BREASTFEEDING MOTIVATION: THE ROLE OF HUSBANDS' KNOWLEDGE AND SUPPORT AMONG POSTPARTUM MOTHERS

Reni Yuli Astutik¹, Nining Istighosah¹, Stevani Basuki², Fitria Rahayu¹

¹S1 Midwifery Study Program, STRADA Indonesia University, Jawa Timur City, Indonesia

²D3 Midwifery Study Program, STRADA Indonesai University, Jawa Timur City, Indonesia

Email: reniyulia@starad.ac.id, Phone number: +62 85850287346

ABSTRACT

Breastfeeding is a natural process that strengthens the mother-infant bond and requires patience, knowledge, and family support, especially from husbands. This study aimed to examine the relationship between maternal knowledge and husband's support with the motivation of postpartum mothers in breastfeeding. An analytic design with a cross-sectional approach was used, involving 40 postpartum mothers selected through purposive sampling. Independent variables were maternal knowledge and husband's support; the dependent variable was breastfeeding motivation. Data collected using questionnaires and analyzed with the chi-square test. The results were that 50% of respondents had good knowledge, 57.5% received husband's support, and 65% had positive breastfeeding motivation. Chi-Square analysis revealed a significant relationship between maternal knowledge and husband's support and breastfeeding motivation ($p = 0.000 < 0.05$). Maternal knowledge and husband's support are critical determinants of breastfeeding motivation. Strengthening health education and encouraging active husband involvement are recommended strategies to enhance exclusive breastfeeding practices.

Keywords: Husband's Knowledge, Husband's Support, Breastfeeding Motivation, Postpartum

1. INTRODUCTION

Breast milk is the most ideal source of nutrition for newborns, containing essential nutrients, antibodies, and growth factors crucial for optimal growth and development. The World Health Organization (WHO) and UNICEF recommend exclusive breastfeeding (EBF) for the first six months of life, followed by continued breastfeeding alongside complementary feeding until at least two years of age (Victoria et al., 2016). Breastfeeding provides numerous short- and long-term benefits, including reduced risks of infant mortality and infectious diseases, as well as protection for mothers against breast and ovarian cancers (WHO, 2017).

Globally, however, EBF coverage remains below target. The 2024 *Global Breastfeeding Scorecard* reported that only about 48–50% of infants under six months were exclusively breastfed – still below WHO's minimum target of 50% by 2025 (WHO, 2017). In Indonesia, the EBF rate has improved significantly from 52% in 2017 to 68% in 2023, with national statistics indicating a coverage of 73.97%. East Java Province has also demonstrated strong performance, reaching 73.59% EBF coverage in 2024 (East Java Health Office, 2024).

Among its districts, Ponorogo stands out as one of nine areas in East Java that surpassed 80% EBF coverage as early as 2015, positioning it as a regional model of success (Brown & Davies, 2014). However, achieving quantitative targets does not necessarily reflect the quality and sustainability of breastfeeding practices. The current challenge in East Java lies not in coverage, but in ensuring maternal motivation, sustaining breastfeeding beyond six months, and improving the

psychosocial support system during the postpartum period.

Evidence shows that husband's knowledge and support are critical in sustaining maternal motivation to breastfeed. A study by Pisacane et al. (2022) found that mothers who received active support from their partners were twice as likely to maintain EBF for six months compared to unsupported mothers. Similarly, a systematic review by Nguyen et al. (2021) highlighted that including fathers in breastfeeding education improves maternal confidence, early initiation of breastfeeding, and duration. These studies emphasize that breastfeeding programs that exclude male involvement may fail to address crucial behavioral and cultural factors.

Despite East Java's relatively high EBF coverage, many mothers – especially in rural or traditionally patriarchal communities – still face emotional burdens and practical barriers to continued breastfeeding. In these contexts, breastfeeding is often seen as solely a mother's responsibility, leading to physical and emotional fatigue that can decrease breastfeeding motivation over time.

Ponorogo, as a district with a high breastfeeding achievement, presents a valuable context to examine why strengthening husband's knowledge and support remains essential even after reaching EBF targets. Such efforts are necessary not only to maintain coverage, but to ensure quality, consistency, and sustainability of breastfeeding as part of long-term maternal and child health strategies.

Therefore, this study aims to examine the relationship between husband's knowledge and support and

maternal motivation to breastfeed in postpartum mothers in Ponorogo Regency, East Java. The findings are expected to contribute to developing evidence-based, family-centered breastfeeding interventions in both local and national settings.

2. METHODS

This research used the analytical survey method. The type is analytical with an observational approach. The time approach used in this research is cross sectional. The research was conducted in December 2023. The population in this study were postpartum mothers who gave birth January until December 2023 in one of hospital in Ponorogo regency, a total of 217 people. The sampling technique used purposive sampling who met the inclusion and exclusion criteria, samples amount 40 postpartum mothers. The inclusion criteria in this study were normal postpartum mothers, rooming in, no complications in the mother and baby. Exclusion criteria were postpartum mothers who refused to be respondents. The variables are: independent variable (X1) husband's knowledge, (X2) husband's support and dependent variable (Y) breastfeeding motivation.

This research has received an ethical approval letter from STRADA Indonesia University Number 000564/EC/KEPK/I/12/2023., 5 December 2023.

The research data are displayed in percentages. Data analysis includes editing, coding, scoring, and tabulating. The analysis of the influence test uses the chi-square test.

3. RESULTS

Based on table 1 above, almost half of the total respondents were found,

half of them were aged 18-25 years namely 42.5%, had high school education namely 45%. For working data, half of them were worked as housewife, namely 40%. Based on parity, amount 55% were multiparous.

Table 1. Characteristic respondents

Respondent characteristics	Amount	Percentage (%)
Age		
18-25 years	17	42.5
26-35 years	15	37.5
36-40 years	8	20
>40 years	0	0
Education		
Elementary	0	0
Junior high	9	22.5
High	18	45
Collage	13	32.5
Working		
Not working	0	0
Housewife	16	40
Private sector	10	25
Self-employed	9	22.5
Teacher	5	12.5
Parity		
	19	44.5
Primiparous	18	55
Multiparous	3	7.5
Grande		
Total	40	100

Based on the respondents' level of knowledge, 20 people (50%) had a good level of knowledge. (Table 2).

Table 2. Distribution of Husband's Knowledge Levels

N o.	Knowled ge Levels	Frequen cy	Percentag e
1	Good	20	50
2	Sufficient	16	40

3	Less	4	10
	Total	40	100

Based on Table 3, 23 respondents (57.5%) have their husband's support, while 17 respondents (43.5%) do not.

Table 3. Distribution of Respondent's Husband Support

N	Husband's Support	Frequency	Percentage
1	Support	23	57.5
2	No Support	17	43.5
	Total	40	100

Based on Table 4, 26 respondents (65%) have positive breastfeeding motivations, while 14 respondents (43.5%) have negative breastfeeding motivations.

Table 4. Distribution of Breastfeeding Motivations

N	Breastfeeding motivations	Frequency	Percentage
1	Positive	26	65
2	Negative	14	35
	Total	40	100

Table 5 shows that there was an influence of the husband's level of knowledge and motivation on breastfeeding motivations (p value=0.001)

Table 5. Husband's Level of Knowledge Regarding Motivation for Breastfeeding

Knowledge levels	Breastfeeding Motivation	p value
	Negative	Positive
Less	4 (10%)	(0%)
Sufficient	10 (25%)	6 (15%)
Good	0 (0%)	20 (50%)
		0.001

Table 6 shows that there was an influence of the husband's support and motivation on breastfeeding motivations (p value =0.001)

Table 6. Husband's Support Regarding Motivation for Breastfeeding

Huband's Support	Breastfeeding Motivation	p value
	Negative	Positive
Not Support	11 (27.5%)	6 (15%)
Support	3 (7.5%)	10 (50%)
		0.001

4. DISCUSSION

Based on table 4.5, the research results show that the majority of respondents had good knowledge, namely 20 respondents (50%), 16 respondents (40%) had sufficient knowledge, and 4 respondents (10%) had less knowledge. A mother's knowledge about breastfeeding can influence her breastfeeding decisions. The better a mother's knowledge of the benefits of breastfeeding, the more likely she is to breastfeed her child. Conversely, the less a mother knows about the benefits of breastfeeding, the less likely she is to breastfeed.

The findings of this study revealed that more than half of the respondents (57.5%) received support from their husbands, while 42.5% reported not receiving such support. This result indicates that although a majority of husbands were involved, there remains a substantial proportion of mothers who did not benefit from spousal support during breastfeeding. Lack of husband support for wives in motivating mothers to breastfeed can lead to postpartum mothers' failure to breastfeed their babies. Husband

support during exclusive breastfeeding can influence the amount of breast milk produced, the duration of exclusive breastfeeding, and the mother's breastfeeding choices.

The results of the study showed that 26 respondents (65%) had positive breastfeeding motivations, while 14 respondents (43.5%) had negative breastfeeding motivations. Positive breastfeeding motivation is a key determinant of exclusive breastfeeding practices. Mothers who are highly motivated are more likely to overcome initial challenges, such as nipple pain, fatigue, or perceptions of insufficient milk supply, and to continue breastfeeding exclusively (Nguyen et al., 2021). Motivation is influenced by various factors, including maternal knowledge, cultural beliefs, social support, and husband involvement. Previous studies have emphasized that spousal support significantly strengthens maternal motivation and contributes to better breastfeeding outcomes (Brown & Davies, 2014; Victora et al., 2016). Conversely, negative motivation may hinder mothers from maintaining exclusive breastfeeding, potentially leading to early introduction of formula or complementary feeding. Research has shown that low maternal motivation is often associated with inadequate support systems, maternal employment, and lack of access to breastfeeding counseling services.

The results of the research analysis on the knowledge and support of husbands about breastfeeding on the motivation of postpartum mothers in providing breastfeeding obtained the results $p = 0.001 < 0.05$ so H_0 was rejected and H_1 was accepted which means there is a relationship between

knowledge and support of husbands about breastfeeding on the motivation of postpartum mothers in providing breastfeeding. Similarly, another Indonesian study (Widayani, et.,al, 2025) evaluated the husbands' knowledge and attitude, finding that 95.7% had good knowledge, and both knowledge and attitude were significantly related to exclusive breastfeeding behaviors ($p < 0.05$). Furthermore, husbands' knowledge contributes not only to practical support but also to emotional encouragement. Research indicates that fathers who understand the importance of breastfeeding are more likely to motivate their wives and reinforce positive attitudes toward breastfeeding. This emotional support reduces maternal stress and increases confidence in the ability to breastfeed successfully. In patriarchal societies where men are key decision-makers in household health matters, the husband's role becomes even more influential in determining whether a mother continues exclusive breastfeeding or shifts to formula feeding (Bolakale et al., 2022).

There was an influence of the husband's support and motivation on breastfeeding motivations (p value = 0.001). Similarly, a community-based father education intervention (2024) improved early initiation of breastfeeding and exclusive breastfeeding rates at 1, 4, and 6 months, confirming the value of father-inclusive approaches. When partners provide warm, active support, mothers' basic psychological needs (relatedness, competence, autonomy) are met. This fosters **autonomous motivation**, which is more sustainable and strongly linked to breastfeeding duration.

5. CONCLUSION

This study found that most respondents had good knowledge about breastfeeding, received adequate support from their husbands, and demonstrated positive motivation in providing breast milk. Furthermore, the findings revealed a significant relationship between knowledge and husband's support with the motivation of postpartum mothers to breastfeed. These results highlight the importance of maternal knowledge and spousal involvement as key determinants of successful breastfeeding practices.

6. REFERENCES

- BMC Pediatrics. (2024). A community-based father education intervention on breastfeeding: Effects on early initiation and exclusive breastfeeding. *BMC Pediatrics*.
<https://bmcpediatr.biomedcentral.com/articles/10.1186/s12887-024-05372-z>
- Bolakale, A., Lawoyin, T., & Bello, A. (2022). Male partner involvement in exclusive breastfeeding and associated factors: A cross-sectional study. *BMC Pregnancy and Childbirth*, 22(1), 487.
<https://doi.org/10.1186/s12884-022-04898-y>
- Brown, A., & Davies, R. (2014). Fathers' experiences of supporting breastfeeding: Challenges for breastfeeding promotion and education. *Maternal & Child Nutrition*, 10(4), 510–526.
<https://doi.org/10.1111/mcn.12129>
- East Java Health Office. (2024). *Provincial report on exclusive breastfeeding coverage*. Surabaya: Dinas Kesehatan Jawa Timur.
- Nguyen, P. H., Menon, P., Ruel, M., & Hajeerbhoy, N. (2021). A systematic review of the effectiveness of mass media, interpersonal counseling and community mobilization for behavior change in improving infant and young child feeding. *Maternal & Child Nutrition*, 17(S1), e13064.
<https://doi.org/10.1111/mcn.13064>
- Victora, C. G., Bahl, R., Barros, A. J. D., França, G. V. A., Horton, S., Krasevec, J., Murch, S., Sankar, M. J., Walker, N., & Rollins, N. C. (2016). Breastfeeding in the 21st century: Epidemiology, mechanisms, and lifelong effect. *The Lancet*, 387(10017), 475–490.
[https://doi.org/10.1016/S0140-6736\(15\)01024-7](https://doi.org/10.1016/S0140-6736(15)01024-7)
- World Health Organization. (2017). *Guideline: Protecting, promoting and supporting breastfeeding in facilities providing maternity and newborn services*. World Health Organization.
<https://www.who.int/publications/i/item/9789241550468>
- Widayani, W., Miftah, D. J., Hufad, A., Hasanah, V. R., Wahyudin, U., Saepudin, A., & Yahya, F. H. (2025). Family Education in Exclusive Breastfeeding: Husband's Knowledge and Attitude in Supporting Breastfeeding Women. *International Journal of Recent Educational Research*, 6(2), 440–450.
<https://doi.org/10.46245/ijorer.v6i2.792>