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The Effect on *Bonding* Behavior Model of a Husband for a Successful Breastfeeding

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ABSTRACT

The exclusive breastfeeding percentage given to a baby in Indonesia in 2018 was 37%. It was still far away from the WHO's target that is 50%. The successful breastfeeding does not only belong to a wife's responsibility but it belongs to husband. This research is aimed at knowing the effect of a husband's bonding behavior model on the knowledge improvement, the husband's attitude and bonding behavior to the successful exclusive breastfeeding.

This research used an experimental quasi design and was conducted from February up to March 2019. Its samples comprises of 31 respondents in intervening group and 31 respondents in controlling one. The respondents are the husbands having wives whose pregnancy ages range ≥ 36 weeks in the Regency of Bungo. The data analysis used is the test of McNemar and Chi Square. The intervening is done with husband's *bonding* behavior module for the successful exclusive breastfeeding as long as 8 days.

The research result showed that the husband's *bonding* behavior model is able to significantly improve the knowledge ($p < 0,0001$), attitude ($p < 0,0001$), and husband's *bonding* behavior ($p < 0,0001$). There is a meaningful difference found in knowledge, attitude, and behavior of husband's *bonding* between kelompok controlling group and intervening one.

The husband's good bonding behavior is meaningfully influential to the successful exclusive breastfeeding.

Keywords: *exclusive breastfeeding, husband's bonding behavior*

Introduction

The breastfeeding is the best food for a baby since the exclusive breastfeeding given to the baby could maximize the baby's growth, to improve the development of the baby's intelligence, to minimize the baby's morbidity and mortality as well as to distance the pregnant frequency^{1,2}. WHO intended to promote the exclusive breastfeeding given to the baby, at least, 50% in 2025³. Based upon the WHO's data in 2016, the coverage level of exclusive breastfeeding given across the world is still below the target approximately 38%.³ In Indonesia, in 2018, the coverage level of exclusive

breastfeeding given did not achieve the target of 37% either⁴. In Jambi Province, the coverage of baby milking the exclusive breastfeeding until six months old merely 27,2% whereas in the Regency of Bungo just reach 21% lower than the target or national achievement⁵.

Majorly, the wives come across a difficulty practicing to give exclusive breastfeeding within the community, health care experience, place and job type, and even their own families. everybody plays a role in helping a wife to surmount the hindrance from being successful to give the exclusive breastfeeding. The husband, particularly, could be one of the important roles and source of the strongest support in helping the wife to manage in giving the exclusive breastfeeding⁷. Based upon the previous study and field experience it showed that the failure of asking the husband to participate and to empower him in intervening the behavior change could inhibit

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both the efficacy and the effectiveness of program. The promotional effort to give an exclusive breastfeeding has set up a target to the wife but the husband seems to be out of participation⁸.

Research Abbass-Dick, showed that the husband informed and supported the exclusive breastfeeding given⁹. This research suggests that the successful exclusive breastfeeding given does not only belong to the responsible of a wife. The husbands are considered the part of co-parenting team that is to collaborate with with the wife to achieve the purpose of exclusive breastfeeding commonly intended and he does not only function as to support the wife¹⁰. Moreover, significantly, more wives in intervening group were satisfied with their couple's involvement in the breastfeeding practice as many as 89% compared to the one of control as many as 78,1% under $p=0,04^{11}$.

The husband's involvement is influenced by knowledge, attitude and behavior of the husband. The Februhartanty's research on husband's role in optimizing the practice of breastfeeding in Wilsuami, Urban of Jakarta showed that the husband having a good knowledge of breastfeeding preserves good and harmonious relationship between both wife and baby¹².

The husband's positive attitude is supported by a good knowledge of breastfeeding. Without sufficient knowledge of exclusive breastfeeding given, the husband will tend to behave negatively to the practice of breastfeeding given and a plan to give a formulated milk to the baby.¹³ The attitude represents the specific reliability of implementing a behavior including the experience attitude (emotional response toward the idea of practicing behavior) and instrumental attitude (reliability on the possibility or the potential result of behavior)¹⁴.

The husbands said that they appreciate if they are specifically informed what role to play. This showed that the particular information is to target the husbands that they are not only well accepted by their wives but are also effective in promoting their involvements¹⁵. This research is the quantitative research of the continuity titled Model of Husband's Bonding Behavior (HBB) for The Success Of Exclusive Breastfeeding In Rural Sumatra.⁹ This research intends to re-evaluate the HBB model over the promotion of knowledge, the change of both husband's *bonding* attitude and behavior to the successful exclusive breastfeeding.

Method

This research made use of experimental quasi design done from February to March 2019. The research sample comprised from 31 respondents in intervening group and 31 respondents in controlling group. The respondents were the husbands having wives whose pregnancy age are ≥ 36 weeks in the area of Bungo Marketplace and District of Pelepat, Regency of Bungo. This research made use of *multistage random sampling* technique. The data analysis implemented McNemar and Chi Square test with the reliable degree 95%.

Educational Module of husband's *bonding* behavior as a media in defining model of husband's *bonding* behavior. The interning would be done under the educational module for 8 days. The *monitoring* in the husband's change *bonding* behavior was conducted during 66 days. The education was done by the ways of 1) Education I: explanation of intention and learning material based upon the module; 2) Education II: individual learning with various modules for each participant and is asked to learn at home at least 10 minutes per day during six days.

Result and Discussion

Respondents characteristic was intended to see the husband's characteristic frequency. The husband's characteristic in this research was based upon education, age group, and wife's job.

Table 1: Respondent Characteristic in Intervening and Control Groups

Respondent Characteristic	Controlling Group		Intervening Group	
	f	(%)	f	(%)
Education				
Elementary School	5	16,1	5	16,1
Junior High School	16	51,6	8	25,8
Senior High School	7	22,6	14	45,2
College	3	9,7	4	12,9
Age Group				
<35 Years	23	74,2	22	71,0
35-45 Years	5	16,1	8	25,8
>45 Years	3	9,7	1	3,2
Wife's Job				
Household	21	67,7	24	77,4
Private Company	6	19,4	1	3,2

Conted...

Civil Servant	0	0,0	2	6,5
Farmer	3	9,7	4	12,9
Trader	1	3,2	0	0,0

Table 1. Showed that major respondents (51,6%) in controlling group were educated up to junior high school meanwhile in the intervening group majorly as many as 45,2% were educated up to senior high school. The distribution of respondent's age group either controlling or intervening one were majorly in the age group of <35 years. The distribution of wife's job were majorly in the controlling group as many as 67,7% and the intervening one as many as 77,4% worked as housewives.

Table 2: Knowledge, Attitude and Husband's Bonding Behavior in Both Intervening and Controlling Groups

	Controlling Group		Intervening Group		p-value
	f	%	f	%	
Knowledge					
Increasing	3	9.7	31	100.0	<0,0001
Decreasing	28	90.3	0	0.0	
Total	31	100.0	31	100.0	
Attitude					
Positive	4	12.9	31	100.0	<0,0001
Negative	27	87.1	0	0.0	
Total	31	100.0	31	100.0	
Bonding Behavior					
Good	16	51.6	30	96.8	<0,0001
Bad	15	48.4	1	3.2	
Total	31	100.0	31	100.0	

Table 2 showed that the husband's knowledge in the controlling group increased up to 9,7% meanwhile it increased up to 00% in intervening group. Statistically, there was a meaningful difference in the knowledge increase between the controlling group and the intervening one (p<0,0001).

Based upon the Table 2, it could be seen that the husband's attitude to the controlling group is positive as many as 12,9% whereas the intervening one is positive as many as 100%. Statistically, there was a meaningful discrepancies in the husband's attitude between the controlling group and the intervening one (p < 0,0001).

Table 2 showed that the husband's bonding behavior in a good controlling group is as many as 51,6% whereas the good intervening one is as many as 96,8%. Statistically, there is a meaningful difference of husband's bonding behavior between the controlling group and the intervening one (p < 0,0001).

The effect of husband's bonding behavior model for a successful exclusive breastfeeding given could be seen on the following table:

Table 3: Husband's Bonding Behavior For Successful Exclusive breastfeeding

Husband's Bonding Behavior	Exclusive Breastfeeding				p-value
	Yes		No		
	f	%	f	%	
Good	26	83.9	5	16.1	<0,0001
Bad	11	36.7	19	63.3	
Total	37	60.7	24	39.3	

Table 3 showed that the percentage of the exclusive breastfeeding given is higher than in the good husband's bonding behavior compared to the one of bad husband's bonding behavior that is as many as 83,9% to 36,7%. Statistically, there is a meaningful difference (p<0,0001). It meant that the husband's bonding behavior model is meaningfully influential to the successful practice of exclusive breastfeeding given.

Discussion

A better part of respondents in this research at the intervening group are educated up to senior high school whereas the one at the controlling one are educated up to junior high school. The result of this research is in line with Abera's *et al.*, showing that almost a half as many as 42% out of husbands taking the senior high school course up to the college one. However, the majority as many as 54,7% out of the husbands only took the education up to elementary school. The husbands taking education up to senior high school are 4,9 times more possible to get involved well in the practice of giving the exclusive breastfeeding rather than those only taking education up to elementary school (AOR = 4,961, 95% CI = 2,483, 9,91).⁶

Respondent's average age, either in intervening group or in the controlling one, mostly are in the age group <35 years. The result of this research does not

come along together with Alra's *et al.*, showing that the husband's average age is 35,64 (SD + 6,023) years. Approximately a half 209 (50,1%), the husbands are over 35 years old whereas 176 (42,2%) in the range of 25 years up to 35 years old and the rest is 32 (7,7%) are under 25 years old.⁶

In this research, the husbands having good perceptions to their husband's involvement in milking practice tend to be involved more in breastfeeding given. This finding is in line with the one conducted by Abbas-Dick *et al.*, in which the husband is ignored during the pregnancy - baby birth cycle as they are prohibited by their wives from participating in the breastfeeding process^{16,17}.

The research result showed that there is a difference found among the respondents found during both pretest and post-test in the intervening group but there is no difference found among the controlling one. It also showed the respondent's interaction between the controlling group and the intervening one. Based upon the theory of behavioral change elaborating it that could happen through a learning process such as information given through a counseling or an education. The learning process could bring about the visible change and it take a long time.

Based on the result of analysis, it showed that the good husband's bonding behavior preserved a significant relationship to the successful exclusive breastfeeding given. Roesli said that the husband is an important part in defining either success or failure of exclusive breastfeeding given so that the husband could play an active role for the successful exclusive breastfeeding given by the behavior emotionally or passionately and gave other practical helps such as replace the diaper or pick up the baby. This important role is the first step for the husbands to support their wives in order to manage giving the exclusive breastfeeding¹⁸.

The exclusive breastfeeding could be beneficial for it is able to improve the child's life quality. However, there are many conditions that are not understood by the husbands. Husbands play roles to create a comfortable environment for their wives so that their both physical and psychological conditions always fit. The husband's support could be in form of his ability described as the husband's knowledge, practical help, and information related to the exclusive breastfeeding given. The

knowledge possessed by a husband would influence the supporting and parenting as well as influencing the wife to feel more optimistic and more confident to exclusively breastfeeding¹⁹.

Conclusion

The husband's *bonding* behavior model is able to meaningfully promote knowledge, behavior, and husband's *bonding* behavior. There is a meaningful difference of knowledge, attitude, and bonding behavior of the husband between the controlling group and the intervening one. The good husband's *bonding* behavior is meaningfully influential to the successful breastfeeding given.

Conflict of Interest: The authors declare that there is no conflict of interest.

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