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Exclusive Breastfeeding in Family with Early Marriage

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Abstract---*Background: Breast milk is the best nutrient for infants, providing everything the babies need to survive and drink plenty of fluids during the first six months and that is the perfect combination of various nutrients. Besides that, breast milk is the best way to reduce infant morbidity and mortality from infectious diseases, which often affect toddlers in developing countries who are not getting the appropriate developmental nutrition. Meanwhile, the level of national initiation is checked according to the mother's age. Young mother (< 19 years old) tends to rarely breastfeed (83.6 percent) compared with older one (88.5 percent- 92.7 percent). Therefore, the scoping review aims to explore the description of exclusive breastfeeding on mother with early marriage. Method: the method of this scoping review used Arksey & O'Malley framework consisting of five stages such as identifying scoping review questions by framework PEOs; identifying relevant articles through the relevant database, such as Pubmed, Proquest, ScienceDirect and finding Grey literature through Google Scholar; selecting the article with Prism Flowchart that is used to draw the article search flow, doing critical appraisal to assess the quality of article; doing data charting; result: based on ten (10) articles obtained, it was obtained that there were nine (9) articles having Grade A and one (1) article having grade B. Conclusion: Breastfeeding is an important base for children's development by giving essential nutrients and protection needed for their growing as well as their early development. If their fulfillment is given optimally, breastfeeding could prevent children's death in every year, meanwhile, young mothers (19 years old) may have decreased in experiencing breastfeeding compared to mature.*

Keywords---*early marriage, exclusive breastfeeding, mother married early, young mother*

Introduction

A social phenomenon relate to early marriage and childbirth an early age is happening, this case causes women marrying an early age could have early pregnancy in their age which is still unstable. Pregnancy is a worrisome problem for women an early age due to this case correlate to bad pregnancy results for mother and their children in the future. For instance, breastfeeding from mother to baby is not optimal due to the mother's age factor that cannot be able to receive their physical and phycological condition causing the young mother to feel difficult in applying breastfeeding exclusively to their baby (Efevbera et al., 2017). (Batyra & Pesando, 2021). Indonesian Government Regulation number 33 of 2012 stated that breastfeeding can enhance the nutritional status of babies and children and also affect the next degree of health so all mothers giving birth must be exclusively breastfed to their babies at 6 months of age (Hidayah et al., 2020).

Breast milk is an excellent source of food and fluids for a baby during the first six months of life, and it is a perfect blend of various nutrients. Breast milk is the most effective and affordable way to reduce the morbidity and mortality of infants from infectious diseases that disproportionately affect children under five in developing countries. (Siraneh et al., 2021). WHO and UNICEF themselves jointly recommend that women should breastfeed

their babies within 1 hour of birth, where the baby should be breastfed exclusively for the first 6 months and be able to continue breastfeeding along with the right complementary foods until the age of 2 years (Zhang et al., 2018).

The World Health Organization (WHO) believed that breastfeeding is one of the most important ways to reduce child mortality rates, especially in developing countries. Exclusive breastfeeding provides several protective benefits for both the child and the mother. For instance, breastfeeding for a longer period of time can enhance sensory and cognitive development, protect the baby from infectious and chronic diseases, and reduce infant mortality from childhood diseases such as diarrhoea and pneumonia. (Thet et al., 2016), based on data from the Indonesian Ministry of Health in 2020, it is said that pneumonia and diarrhoea are still the main problems that cause 73.9 percent of deaths due to pneumonia and 14.5 percent of deaths due to diarrhoea in children aged 29 days-11 months, so indirectly by not giving breast milk exclusively can have an impact with an increase in mortality rates in new-borns (Indonesia, 2021).

There are various factors that can obstruct breastfeeding practices among others mothers' education, employment status, type of residence, childbirth mode and place, and the lack of breastfeeding counseling. Even though all of the factors influence women from all reproductive age however in the research (Benova et al., 2020), were mentioned that young mothers tend not to begin breastfeeding, have shorter breastfeeding duration and more likely to stop breastfeeding prematurely. This thing is able to caused by increasing the early marriage.

The prevalence of early marriages globally in Indonesia ranks 2nd in ASSEAN after Cambodia and ranks 10th highest in the world according to the National Development Planning Agency in 2020. Meanwhile, in Indonesia based on data from the Central Statistics Agency (BPS, 2020) the number of early marriages in 2020 was 10.18 percent. This achievement is far from the government's target of specifically targeting a reduction in the early marriage rate from 10.18 percent (2020) to 8.74 percent by the end of 2024.

This early marriage is a problem that has occurred for a long time but until now has not been solved. This is considered worrying because the government has clearly regulated in law number 16 of 2019 concerning changes to law number 1 of 1974 concerning marriage which stated that marriage is only permitted if both the man and woman are at least 19 years old, while according to WHO, early marriage is a marriage conducted by a couple who is still categorized as children or under the age of 19 years (Telaumbanua, 2019). Meanwhile, when the national initiation rate is checked according to the mother's age, adolescent mothers (<19 years) begin to breastfeed less frequently. (83.6 percent) compared to those older or older than them. (88.5 percent – 92.7 percent). (Nesbitt et al., 2012).

Some results of previous studies related to breastfeeding, (Agho et al., 2021), stated that young mothers are lacking in terms of experience, education, attitudes, and social support needed for proper breastfeeding practices. In another study conducted by (Hidayah et al., 2020), discussed that the absence of rooming in is one of the factors impeding the success of exclusive breastfeeding, lack of frequency of direct breastfeeding, lack of understanding about breast milk and breast milk production and family support. Meanwhile, (Buckland et al., 2020), explained about interventions and programs to promote breastfeeding: such as counselling strategies, online support, antenatal education, breastfeeding-friendly hospital practices, breastfeeding-friendly workplaces, and leave policies for the elderly. But despite these studies, most young mothers are underrepresented in previous studies.

In the practice of breastfeeding, there are many factors that support the success of breastfeeding. As a result, it is critical to know what things can help in terms of breastfeeding exclusively, especially in mothers of early age, so that based on the facts and phenomena that exist related to early marriage in terms of breastfeeding, it is necessary to explore based on the picture of breastfeeding and find out the factors that support and hinder breastfeeding for mothers at early age (Wahhaj, 2018; Mulyani et al., 2017).

Aim

To explore about the description of exclusive breastfeeding, supported and unsupported determinants of exclusive breastfeeding in mothers at early marriage.

Method

Scoping review is one of the increasingly popular approaches to summarize research evidence that aims to map the literature in interest, find information about research activities related to the topic and investigate the existence of problems or gaps in the research area that will be a research reference (Arksey & O'Malley, 2005). (Pham et al., 2014). The steps that the researcher will use in this scoping review are as follows:

Identifying scoping review question

The first step in compiling scoping review is by identifying research questions to be discussed as a blend of literature search strategies. The question in this study is "how is exclusive breastfeeding in mothers with early marriage?" For the purposes of this study, a scoping review is defined as a type of research summary that aims to map the literature on a specific topic or area of research and provide an opportunity to identify key concepts, gaps in research, types, and sources of evidence to inform practice, policymaking, and research (Pham et al., 2014).

Framework PEO

To develop review focus and search strategies, the researcher use Population, Exposure, and Outcome frameworks (PEOs) and study design in managing and solving review focus. The use of PEOs will help in identifying key concepts in the focus of review, developing appropriate search terms to describe the problem as well as being able to determine the criteria for inclusion and exclusion. The focus of the article search is qualitative research. Therefore, PEOs are considered appropriate for use (Bettany-Saltikov, 2012).

Table 1
Framework PEOs

| P (Population) | E (Exposure) | O (Outcomes) | s (Study Design) |
|---------------------------------------|---------------------------|----------------------|--------------------------------------|
| – Early Marriage | – Exclusive breastfeeding | – Inhibiting factors | Qualitative and Quantitative Studies |
| – Children Marriage | – Exclusive breast milk | – Supporting factors | |
| – Married in early age | | | |
| – Married in teenage age | | | |
| – Mother getting married in early age | | | |
| – Mother of early marriage | | | |
| – Young mother | | | |
| – Teenage mother | | | |

Identifying relevant article

The criteria for articles that will be searched and will be used as a source for this scoping review are the inclusion and exclusion criteria as follows:

Table 2
Inclusion criteria and exclusion criteria

| Inclusion Criteria | Exclusion Criteria |
|---|---|
| a) Article published between 2011-2021 | a) Articles that cannot be accessed full text |
| b) Article published in English and Indonesian languages. | b) Articles published under 2011 |
| c) National and international article | c) Article review |
| d) Article using qualitative and quantitative method | |
| e) Article that discusses about women in early marriage and exclusive breast milk | |

Article selection by prism-flowchart

Starting with searching the databases that will be used, such as PubMed, ProQuest, and ScienceDirect, the ability to enter predetermined keywords into each of these databases, then each database will be filtered such as full text and publish 10 years. The use of keywords in the search for articles is early marriage or child marriage or early marriage or married adolescents or mother married early or mother married young or young mother or teen mother and

exclusive breastfeeding or exclusive breastfeeding or exclusive breastfeeding and exclusive breastfeeding and inhibiting factors and supporting factors and qualitative studies (Coutinho et al., 2005; Kakute et al., 2005).

In this article selection process, researcher used flowchart prism to transparently describe the article selection process to be carried out. Flowchart prisms are considered appropriate to use because it can improve the quality. The stages of article filtering are as follows:

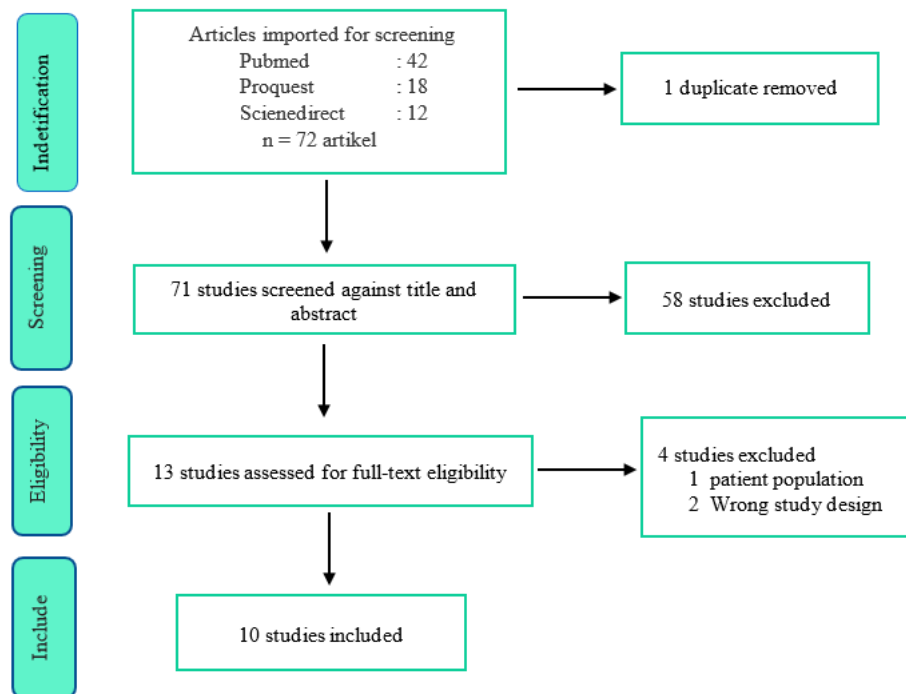


Figure 1. Prisma FlowChar

Table 3
Data extraction

| No | Author Year, Place | Aim | Collecting Data | Informant/Sample and Recruitment | Theme | Result |
|----|--------------------------------------|---|---|--|---|--|
| 1. | (Agho et al., 2021) Bangladesh | The objective of this research is to estimate breastfeeding indicator and factor related to the chosen feeding practice | The data sets were taken in a combined starting from 2004, 2007, 2011 and 2014 from the Demographic and Health Survey in Bangladesh (BDHS). | The final analysis included 2.554 adolescent mothers aged 12-19 years included in the final analysis. (2004:n=614, 2007:n=521, 2011:n=693, 2014:n=726) | <ol style="list-style-type: none"> Breastfeeding indicator Factor of Age Husband's Support Lack of vising the health service Educational factor Working mother The use of mass media | 42.2 percent of adolescent mothers began breastfeeding within the first hour of birth, and 53 percent exclusively breastfeed their babies, 17.3 percent, breastfeed predominantly while 15.7 percent gave bottle milk to their children. Teenage mothers aged 12 to 18 years who watched television did not postpone starting breastfeeding within the first hour of birth. Then, teen mothers who give birth at home and have a postpartum examination within two days have a significant delay in breastfeeding. |
| 2. | (Hackett et al., 2015) Bangladesh | It aims to assess knowledge, attitudes, and | <ol style="list-style-type: none"> FGD (6-8 people) in a group Interview (18 | 1.Unmarried teenage mothers | <ol style="list-style-type: none"> Initiation of breastfeeding Knowledge and | The results that qualitative indicators which appropriate with international |

| | | | | | |
|--|--|--|---|---|--|
| | perceptions regarding breastfeeding and complementary food among young women and adolescent mothers. | informants) this case is done to ensure coverage of relevant topics that may not appear in the FGD. | 2. the married without children 3. married with informant's child recruited using purposive sampling | perception of exclusive breast milk and colostrum 3. Duration of feeding, gender of the child and religion 4. The timing of the introduction of complementary foods 5. Confidence in breastfeeding 6. Perceived generational shift in breastfeeding knowledge | recommendations (WHO/UNICEF 2003) show that knowledge of adolescent girls and mothers of adolescent age is limited, in several cases, the participants realize that breastfeeding recommendation however their interpretation of the deviated recommendation from the intended public health message. |
| 3. (Rahman et al., 2020) Bangladesh | It aims to determine the prevalence of exclusive breastfeeding in adolescent mothers to identify factors affecting breastfeeding practices. | For reaching the purpose of this research, this research used data from Health and Demographic Surveillance System Centre, Bangladesh | There were 2,947 breastfed children of adolescent mothers involved in this research. | 1. Breast milk definition 2. The advantage of breast milk 3. Mother's knowledge 4. Determinants of breastfeeding practices | There were 2.947 cases of adolescent mothers breastfeeding the children in the HDSS region throughout 2007 till 2015. By using the live birth rate as a denominator in both regions, the average EBF percentage in the ISA area is 42 percent, while for the GSA area it is 44 percent. |
| 4. (Muelbert & Giugliani, 2018) Brazil | The objective of this research was to investigate factors related to breastfeeding maintenance for at least 6, 12, and 24 months of adolescent mother. | The collecting data occurs in different time. At first by using interview and questionnaires then participants are contacted again by phone, mail, or social network. If necessary, the family was looked for by using provided address. | There were 257 (80%) participated in 6 months of follow-up, 237 (73%) constantly till 12 months, and 207 (64%) were available for final evaluation (4-7 years). In total, there are 323 of adolescent mother. | 1. The use of pacifier 2. Family's support 3. Husband's support 4. Duration of breastfeeding | We believe that the result of this study can contribute to the challenge of increasing the duration of breastfeeding with an individual-centered approach, that is, considering the related factors identified during the planning and execution of strategies targeted on adolescent mothers. |
| 5. (Hackett et al., 2015) Bangladesh Rural Area | Investigating the barrier in feeding, breastfeeding, and caring of baby between young mothers and daughters who have not given birth. | 1. Focus Group Discussion (FGD) six times discuss 2. open semi-structured interviews with a total of 18 interviews by using the experienced local translators | 1. Unmarried teenage mother 2. Married without children 3. Married and have children informants are recruited using multilevel sampling techniques | 1. Early marriage 2. Pregnancy and teenage birth 3. Conflicts of women's time and work 4. Special challenge in breastfeeding 5. Educational need 6. Self-efficacy to be a mother | There are five main contextual factors which is associated with parenting difficulties including: the early marriage, the conflict of mother time allocation, rural life, the short birth distance, and poverty. There are many daughters and adolescent mother face difficulties in breastfeeding and caring of the children in the early age and before becoming mother. |
| 6. (Benova et al., 2020) Nigeria | Investigating the distinction between adolescents (<20 years) and young women (20-24.9 years) and for investigating the relation between mothers' age group (adolescent and young women) | By using nationally representative with questionnaire model adapted by each country, namely four household surveys 2003, 2008, 2013, and 2018. | The sample was in women from three age groups including: 1. Young teenagers (<18 years old) 2. Old teenagers (18-19.9 years old) 3. Young women (20-24.9 years old) | 1. Definition of breastfeeding 2. Breastfeeding practice 3. ANC visiting 4. Childbirth experience 5. Undesirable pregnancy | The adolescent mothers have higher prevalence than young women so the adolescent mothers have chance to continue breastfeeding at the age of 1 and 2. In multivariate analysis showed that the mothers' age group is not related to early initiation of breastfeeding or by giving exclusive breastfeeding. |

| | | | | | |
|---------------------------------------|--|--|--|--|--|
| | and two primary indicators of breastfeeding (early initiation of breastfeeding and exclusive breastfeeding) | | | | |
| 7. (Sipsma et al., 2013) New York | For investigating the intention between adolescent pregnant women and young adults and the male couple to enhance the intention of breastfeeding in young mothers. | Using questionnaires | From 413 eligible couples, 296 couples were registered in this research. Pregnant women and the couples were recruited between July 2007 and February 2021 from obstetrics, gynecology, and ultrasound. | <ol style="list-style-type: none"> 1. The advantage of breastfeeding 2. Intention to breastfeed 3. Do not want to breastfeed | There are about 73% women were reported have intention to breastfeed and 80% men were reported want the couple to breastfeed, because "it is healthier for baby" and "the more natural way to feed baby." |
| 8. (Lee et al., 2013) Laos | To identify the reason and the influence which become the background for deciding to breastfeed first-time mothers in Laos. | <ol style="list-style-type: none"> 1. Deep interview individually (7 people) 2. Focus Group Discussion (2 FGD) using a semi-structured interview guide | informants consist of mothers that were first-time intentionally identified, health staff including midwives, parents, and key informants. | <ol style="list-style-type: none"> 1. The advantage of breastfeeding 2. Early breastfeeding initiation 3. The reason of breastfeeding initiation 4. Family's support 5. Duration of breastfeeding 6. Working mom 7. Breast milk is not sufficient 8. Nipples go inside | The participants showed positive attitude and realized the importance of breastfeeding. Nevertheless the breastfeeding practices are less than optimal. Several of them give exclusive breastfeeding during six months of babies' life and most of mothers who followed the sample for the first time have stopped or plan to stop breastfeeding when the babies are 18 months. |
| 9. (Sipsma et al., 2013) New York | To describe the experience and attitude of breastfeeding between young women group and the initiation test predictor and breastfeeding duration. | The data collection was conducted by interview and taken from pregnant adolescent mother cohort and the couple. The research was observed from pregnancy to six months postpartum. This couple was recruited between July 2007 and February 2011 from obstetric and gynecology clinic of four university in Connecticut. | 296 women who completed the initial assessment during pregnancy (on average, 29 weeks of pregnancy), then 225 mothers participated in the second interview (76.0 percent), approximately 6 months after the date of delivery. samples are recruited based on inclusion criteria | <ol style="list-style-type: none"> 1. The advantage of breastfeeding 2. Common obstacle 3. Sociodemographic 4. Partner's attitude 5. Health worker's support | There are 84% breastfeeding adolescent mother begin to stop at six months postpartum, the average breastfeeding is 5 weeks. The participants who provide exclusive breastfeeding have longer duration than participants who had faced intimate partner violence. The fat women and women who face breastfeeding difficulties have lower chance to provide breastfeeding exclusively. |
| 10. (Monteiro et al., 2014) Brazil | For characterizing breastfeeding practices in adolescent and identifying the need of breastfeeding | <ol style="list-style-type: none"> 1. The first phase was gathered from online database 2. The second phase was 10 adolescent mother, were recruited from the primary health care unit with the highest prevalence of adolescent mother, who will to | 1. 2028 people participated in the survey, including 229 (11 percent) adolescent mothers with an average age of 17 years. | <ol style="list-style-type: none"> 1. Concern for the health of the baby 2. Difficulty in breastfeeding 3. The support from family and health worker | Breastfeeding relates to the babies' needs. In this case, there is an ambiguity of the adolescent mother statements. They realize the importance of breastfeeding for their babies' health but they do not feel safe regarding their breastfeeding ability. It leads to other food introduction and it causes |

| | | |
|--|---|----------------------------------|
| participate and convey the breastfeeding experience. | 2. The 10 teenage mothers interviewed were <19 years old. | early stopping of breastfeeding. |
| | Informant recruited based on inclusion criteria | |

Discussion

The concept of early marriage *Early marriage*

Usually, early marriage i.e. (before the age of 18). Domestic law prohibits early marriage, but the practice continues to this day. Married girls are often seen as a financial burden on the family and marriage in early adolescence seems to reduce the financial stress on the family. The perception that girls are valuable to the family is related to the practice of brides (goods or money that the brides give to the groom's family) which encourages early marriage as the bride's prices increase with age of the daughter. According to the United Nations, adolescents (10 to 19 years) is an important step for all kinds of human development, as poor adolescents and women become poor children, and in the next generation, poverty and injustice will be sent to this country. In low-income environments, teens do not marry at an early age and do not lead to early childhood and risk of death of mother and illness ([Hackett et al., 2015](#)).

Adolescent's pregnancy and childbirth

Teenage pregnancy is associated with various negative health consequences for mothers and children. A study in Bangladesh found that pregnancy and breastfeeding during adolescence can slow linear growth and lead to lower weight, fat and body mass in young people. In addition, early pregnancy is associated with premature birth and low birth weight, which pose a significant threat to infant illness and mortality. Despite these risks, research shows that inadequate or insufficient maternal care can negatively affect breeding, including breastfeeding, and the results of feeding babies. ([Hackett et al., 2015](#)).

The scope of exclusive breast milk *Definition of exclusive breast milk*

The World Health Organization (WHO) defines exclusive breastfeeding as getting only breast milk without additional food or drink. WHO recommends exclusive breastfeeding for the first six months of a child's life. Breast milk is recognized as the main food that saves life, prevents disease and ensures healthy growth in the first 1,000 days of life. Exclusive breastfeeding has well-documented benefits for both mother and baby ([Rahman et al., 2020](#)). According to ([Benova et al., 2020](#)), breastfeeding is an important foundation for a child's survival and health, providing essential nutrients and protection necessary for early growth and development. Optimal breastfeeding could prevent 823,000 baby deaths a year. This makes it a very effective remedy to prevent infant mortality, breastfeeding is also important for the mother's reproductive health, increases uterine contractions immediately after delivery, protects against breast and ovarian cancer and provides more effective protection against postpartum contraception due to amenorrhea during breastfeeding. In addition, breastfeeding improves other CUS, including CUS 4, 5 and 6, in which (the impact of breastfeeding on intelligence, economic growth and improvement of human resources) and reduces the inequality between the rich and the poor. To improve these benefits, it recommends dairy for 6 months for 1 hour birth and makes dairy up to 2 years ([Benova et al., 2020](#)).

The advantage of breast milk

Breastfeeding is beneficial for both mother and child. For babies, breast milk is a very nutritious and excellent source of energy, protein, iron and vitamin A, and also provides antibodies and various biological components to protect against disease. Babies who are breastfed have a lower risk of life-threatening diseases such as diarrhoea, ear and

respiratory infections, and a lower risk of chronic diseases later in life. For nursing mothers, if breastfeeding begins shortly after delivery, it helps the mother's uterus contract to expel the placenta and reduces the risk of postpartum bleeding and infections. Other benefits include a reduced risk of breast and ovarian cancer (Lee et al., 2013).

According to a review (Sipsma et al., 2013), exclusive breastfeeding can have significant benefits over breastfeeding, especially among young mothers, including financial and health savings. Additionally, breastfeeding due to milk amenorrhea, increased postpartum weight loss and fewer visits to the pediatrician due to decreased ear infections may increase the interval / interval between pregnancies. and urinary tract infections Breastfeeding improves the bond between mother and child and reduces the risk of postpartum depression. There are many advantages of breastfeeding, as follows: breastfeeding is estimated to prevent 13% of death among children, the low of postnatal mortality, sudden death syndrome, the lower risk of childhood infection, and lower of diabetes. There also have advantages for mother including the lower risk of developing breast and ovarian cancers, weight recovery, and lactational amenorrhea (Rahman et al., 2020).

The illustration of exclusive breastfeeding Concern for baby's health

In this research, the participants expressed the importance of breastfeeding because it is beneficial to the health and development of their babies. The women describe breastfeeding as something positive, focusing on the well-being of the baby. They stated that breastfeeding provides more protection to their children, which is everything they need, breastfeeding helps them to become fatter, smarter, more active. So that, by focusing on breastfeeding can be beneficial for the baby, mothers say if they have a baby they will still breastfeed and will not stop. mothers will allow their babies to breastfeed because breast milk contains proteins that they eat, all these things are in their milk and it also contains vitamins (Monteiro et al., 2014).

Perception of breast milk and colostrum

In a study conducted by (Hackett et al., 2015), based on data collected on the concept of breast milk, according to study participants, it was clarified that the term exclusive breastfeeding includes more than breast milk alone. But also, other liquids. Then other participants said that in summer one should eat like water. Water is a non-lactating liquid and is given to babies up to 6 months, after which they have cow's milk followed by fruit juice. According to the participants, young babies should always be given water with breast milk because "too much heat" dries the baby's throat and breast milk is not enough to quench thirst. Fruit juices that are given to children up to 6 months are mango and orange. Participants noted that fresh homemade juices are more useful for children than those packaged in a store (Delprato & Akyeampong, 2017; Mulyani, 2018).

At the same time the participants expressed different opinions about colostrum. Many participants considered colostrum as the "first yellow milk" and some noted that it is "rich in vitamins" and should be given because it is good for the health of babies. But some participants argue otherwise, insisting that colostrum is "bad milk" and should not be given to babies. It is said that children do not digest it and get diarrhea or cholera. These different ideas explain that mothers should delay breastfeeding until the main milk comes so that they can feed their children with formulas for some time, and other participants in the recent generation of cholesterol, older mothers have their first milk or cholesterol. Rejected but young mothers knew there were vitamins so they gave him a child (Hackett et al., 2015).

The perception that colostrum was once discarded but is now commonly given to babies suggests that recent efforts to promote first-time feeding/colostrum in infants have been made. It demonstrates that this case is effective in changing some suboptimal colostrum administration practices. These findings are consistent with recent data from Bangladesh, which show that 92 percent of Bangladeshi babies received first milk or colostrum during the study (NIPORT, Partners and Associates & Macro International 2009) (Hackett et al., 2015).

Illustration of breastfeeding duration

Relates to a broad opinion in the reported duration or the planned duration of breastfeeding from one month to two years, or when the babies stop on their own. The first advice that mother received from health workers and the oldest female family about the optimal duration of breastfeeding was also inconsistent. Some reported that it depended on the baby, one of them was told 18 months, and others said they were not given any advice at all (Lee et al., 2013).

Most participants believed that all babies should be breastfed frequently, on demand or when crying. However, a large difference in opinion regarding the duration of breastfeeding was reported. According to most participants in the study, many participants of Islamic law emphasized Hadis's book, expressed the age of boys and girls. At this age, there were many differences, and many participants asked boys and girls to feed 2 and 2.5 years of breast milk, while others believed that the boys should be longer than girls. Boys tend to breastfeed longer to make money and care for the elderly, while girls go out earlier. Despite reports of sex discrimination during breastfeeding, most participants were clear that a mother cannot intentionally discriminate against her child during breastfeeding and that all children should be treated equally (Hackett et al., 2015).

Supported determinant
The use of mass media

The use of mass media is useful in delivering information in community circle. A teenage mother that watch television has higher possibility to make a useful decision about breastfeeding. This case can be related to the fact that teenage mother has higher possibility to practice breastfeeding properly since they get information from television (Agho et al., 2021).

Education

A teenage mother having higher level education has little possibility to give formula milk for her baby compared to those having lower-level education. This founding is in line with the cross-sectional study community based conducted among mothers that have poor economic condition in Karachi, Pakistan. It was found that mother with low level of education has high possibility to give formula milk to her baby compared to those having higher level education.

Increased breastfeeding among out-of-school adolescent mothers, driven by maternal economic resources and higher education, increases decision-making in relation to child health. This finding includes the proper use and practice of breast milk, which can improve the mother's attitude toward receiving support from significant health professionals to gain knowledge regarding proper breastfeeding practices (Agho et al., 2021).

Partner's support

A previous study conducted in Bangladesh showed that most of women visiting ANC were accompanied by their husband to a health facility. Couples/husbands play an important role in increasing breastfeeding because the information is obtained on time in the antenatal and postnatal periods. Besides that, they use social media such as Facebook to improve their knowledge so that it can be applied by encouraging and supporting mothers to breastfeed (Agho et al., 2021).

The characteristics of mate can influence the teenage mother's attitude of breastfeeding since they tend to be influenced by their mate. The support of their husbands about breastfeeding becomes a strong predictor for breastfeeding attitude. Meanwhile, if they have domestic violence, it will have negative impact to breastfeeding because the victim feels shame, hopelessness and unconfident because of the domestic violence they have (Sipsma et al., 2013).

Grandmother/family's support

Family's support including grandmother to breastfeed shows a crucial relationship in breastfeeding preservation at least for six months and twelve months, as they receive support to breastfeed from various sources, mainly from parents. This case is considered could encourage breastfeeding practice. A systematic observation shows that the grandmother from female side about breastfeeding affect mother's positive decision. It can increase 12 percent of the possibility for mother to begin to breastfeed (Muelbert & Giugliani, 2018).

Besides the health professional and the mother's own belief, elders in the family (usually the mother of the mother herself or mother-in-law) were identified as an important influence in the practice of breastfeeding. As one of the participants explained "my mother was the first person that motivate me to breastfeed, she talked about breastfeeding before the doctor did it". So that mothers already have provisions related to breastfeeding practices (Lee et al., 2013).

Health worker's support

Several studies have cited support from health professionals describing positive support for overcoming obstacle and refusal reinforcement and burden for early breastfeeding (Giles et al., 2010). Mothers who begin long-term breastfeeding may live in environments where breastfeeding is considered the normal way to feed a baby (Brown et al., 2011). This case shows how important it is to support and encourage breastfeeding for teen mothers to overcome the uncertainty and fulfill the breastfeeding needs.

According to Wambach & Cohen (2009), stated that the influence of individual and professional support is significantly important for initiating and maintaining breastfeeding. The needs of adolescent mother are emotional support, praising, and useful information. Besides, the other needs are the certainty from health worker that the baby has breastfed correctly and provide enough breast milk. In addition, the desire of technical and emotional support are also needed. Health professionals need to know how to effectively promote the practice of breastfeeding. Recognition of the adolescent mother's intent to breastfeed, care for breastfeeding, and involvement of family and friends in support and promotion of adolescent breastfeeding (Monteiro et al., 2014).

Inhibitory determinants

Age factor

According to the result of research, it was found that teenage mother that is in age of <18 years old have a decrease to practice breastfeeding compared to those that are in 18 to 19 years old. This finding is consistent with cross-sectional study conducted in Nigeria founding that 36 percent of teenage mothers in age 12 to 18 years old have little intensity in breastfeeding compared to teenage mother in age 20 to 24.9 years old. Younger mother has less experience, education and social support needed to practice breastfeeding (Agho et al., 2021).

Working mother

Work is one of the main reasons for mothers to stop the practice of breastfeeding before 6 months and even for 2 years. As one participant explained, "work is the biggest breastfeeding challenge and it is inconvenient for mothers to combine breastfeeding and work". Some mothers feel that they do not have time to work if they breastfeed (Lee et al., 2013). The low duration of breastfeeding relate to the duration of off work since teenage mother should be back to work full time, as most of them are in low level of economic condition. Moreover, other reasons are the lack intervention program of effective breastfeeding among working mother as well as the lack of breastfeeding room for mother in their working place i (Agho et al., 2021).

The use of dot

The evidence suggests that the use of dot has a negative effect on the duration of breastfeeding. This study showed a negative association between the use of dot and breastfeeding maintenance in adolescent mothers in Brazil. infants who do not use dot in our population could maintain breastfeeding for at least 6 months with the possibility for the maintenance of breastfeeding for 12 or 24 months. In some countries, although the use of a point to reduce sudden death or sudden death (SID), the Academy of Child and Grandmother in the United States and other politicians in Canada, England, New Zealand and Ladon must delay at 4 or 6 years of Australia. However, the method of security point of the parties is unclear, so pay attention to the signs of using the point to avoid the negative effect on breastfeeding (Muelbert & Giugliani, 2018).

Type of childbirth

A pregnant woman tends to have antenatal and intrapartum challenge that needs medical intervention. The baby who was born by caesarean delivery has less possibility to be fed in one hour after childbirth compared to baby who was born by normal delivery (Brown et al., 2011; Budiati, 2019). Another finding stated that caesarean delivery reduces the possibility to early breastfeeding initiation due to anaesthesia effect and stress or the anxiety during difficult childbirth or other complication. In overall, this case focuses that intrapartum or childbirth experience is an important determinant of early breastfeeding initiation. However, the increase of health worker involvement after postpartum period related to higher possibility of exclusive breastfeeding to baby (Benova et al., 2020).

Self-Efficacy to be a mother

The result of study showed that self-efficacy becomes crucial factor for early mother. It can be associated with several dimensions in social context with negative perception of mothers and the less hope become early mothers, such as breastfeeding and caring of children. The lack of self-efficacy is caused by life pressure including poverty. The low of mothers' self-efficacy related to bad breastfeeding of babies. This can interfere the relationship between mother and baby. That also causes anxiety, depression, and motivation for mother. The self-efficacy of mother has been linked with the mothers' ability in providing society stimulation and nurturing in raising the children (Hackett et al., 2015).

Undesired pregnancy

The Baby born with undesired pregnancy has little possibility to be breastfed early. An unplanned pregnancy can make the mother unwilling to use maternal health services and not receive the breastfeeding counseling provided, therefore, it affects the practice of breastfeeding in their later babies (Benova et al., 2020).

Special challenge in breastfeeding

In this research, respondents described some perceptions for breastfeeding. They conveyed that mother with the higher social economic status tend to feel uncomfortable if breastfeeding in front of others. Therefore, they provide formula milk to preserve social status and save the prestige. Besides that, mothers do not breastfeed their children for the sake of maintaining prestige (Hackett et al., 2015).

Conclusion

Based on the results of the scoping review, it was found that although national laws prohibit early marriage, this case has continued to happen today. Adolescents do not tend to continue their study since they must marry at an early age that leads them to have early childbirth and an increased risk of mother death and morbidity, therefore, it has an impact on breastfeeding from the mother to her baby. Breastfeeding is an important foundation for the survival and health of children, providing essential nutrients and protection necessary for early growth and development. Optimal breastfeeding can prevent one baby from dying a year, while young mothers under 19 or first-time mothers are less likely to breastfeed than older mothers. Moreover, younger mothers are lacking in terms of experience, education, attitudes, and social support necessary for proper breastfeeding practices. For further research, it can be observed deeply into mother knowledge, mother intentions, special challenges, and maternal traditions/habits about exclusive breastfeeding, especially in mothers who get married at an early age.

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