

Scoping Review: Inhibiting and Supporting Factors of Exclusive Breastfeeding in Teenage Moms

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Abstract

Introduction: Breast milk has a very important role and is the best nutrition in preventing the onset of disease, and it can save lives and provide healthy growth and development during the first 1000 days of life. Findings in several studies show that adolescent mothers have a shorter duration of breastfeeding and have a lower proportion of breastfeeding initiation when compared to adult mothers, so this scoping review aims to review the inhibiting and supporting factors in adolescent mothers in breastfeeding. **Method:** This scoping review method uses the Arksey & O'Malley framework, which was developed using the PEOs framework; in searching and selecting articles through relevant databases, namely Pubmed, Ebsco, and Wiley, and using Grey Literature through Google Scholar; The literature search process used PRISMA Flowchart, and found that from 73 articles there were 7 articles selected based on inclusion and exclusion criteria. **Results:** The findings based on inhibiting factors show that adolescent mothers lack knowledge about exclusive breastfeeding, practical knowledge in breastfeeding, difficult childbirth or other maternal complications, while supporting factors include maternal education, husband desires and support and support. **Conclusions:** It can be concluded that previous studies show that breastfeeding among adolescent mothers still requires special attention, which is related to inhibiting factors and very diverse supporting factors that occur among adolescent mothers.

Keywords: Exclusive Breastfeeding, Inhibiting Factors, Supporting Factors, Teenage Moms

INTRODUCTION

The pregnancy rate in adolescent or young mothers is still fairly high at around 16 million adolescent girls aged 15 to 19 years, then two million adolescent girls under the age of 15 years give birth every year worldwide; one in five adolescent girls have given birth at the age of 18 years in developing countries has a proportion of teenage pregnancy that tends to be high compared to developed countries, Ranges from 95% of teenage pregnancies occur in developing countries. Indonesia ranks fifth in the top five countries with the largest teenage pregnancies globally. Based on the National Basic Health Research in 2018,

around 46.8% of pregnancies occur at less than 15 years and 1.97% at 15-19 years old (Rizqi et al., 2022; Wijaya & Sabilu, 2022). All births involving adolescents between the ages of 15 and 19 each year, around 130,000 adolescents give birth to a baby. Adolescents themselves have a unique and difficult situation in undergoing pregnancy to become a mother where they will be faced with adjustments simultaneously with tasks that are new to them as well as psychological factors and situations in managing their transition to motherhood, especially during unplanned pregnancies (Nuampa et al., 2022). Adolescent mothers themselves have a very important role in improving health status, especially in

monitoring growth and development in infants. One way to improve the baby's health status is to breastfeed the baby exclusively, but this is something that adolescent mothers need help with due to various factors (Anindia et al., 2021; Astuti et al., 2021; Masrurroh et al., 2022).

Known factors related to influence breastfeeding include economic status, maternal education, employment status, type of residence, and infant feeding counseling through health workers, all of these factors can affect women of all reproductive ages, but research shows that adolescent mothers tend to be physiologically and socioeconomically disadvantaged. That disadvantage can lead to a higher proportion of suboptimal breastfeeding practices. Compared to older mothers, adolescents and younger mothers are less likely to start breastfeeding and more likely to stop exclusive breastfeeding prematurely. The overall duration of breastfeeding is shorter (Agho et al., 2021; Benova et al., 2020).

Several studies show that adolescent mothers have a lower proportion of breastfeeding initiation and a shorter duration of breastfeeding time when compared to adult mothers (Muelbert & Giugliani, 2018; Ongprasert & Siviroj, 2021). This finding is also in line with a 2009 Canadian report that said about 90% of all new mothers started breastfeeding; however, when national initiation rates were examined according to maternal age, mothers of adolescents <19 years began to breastfeed less frequently (83.6%) compared to those older or older than them (88.5% - 92.7%), while in Thailand exclusive breastfeeding in 2016 to 2017 was

only 19.8%, even though breastfeeding to infants is very important (Nesbitt et al., 2013; Thaithae et al., 2023).

Breastfeeding is the best nutrition for preventing disease, saving lives, and ensuring healthy growth and development during the first 1,000 days of life (Paradila et al., 2021). The World Health Organization (WHO) states that breastfeeding can reduce child mortality and contribute to maternal health. Adolescent motherhood is associated with adverse health outcomes if not breastfeeding, so it is important to breastfeed both mother and baby; the many risk factors adolescent mothers face coupled with low breastfeeding rates highlight the importance of breastfeeding for the population of adolescent mothers. (Nesbitt et al., 2013; Thaithae et al., 2023) Adolescent mothers often lack knowledge and skills in breastfeeding, lack breastfeeding support from family and health workers and perceive breastfeeding difficulties such as latching techniques, positioning, management of breastfeeding problems and fatigue (Nuampa et al., 2022). Health workers have an important role in motivating adolescent mothers to breastfeed babies. Health counseling and psychological care for adolescent mothers are needed in the postpartum period, where this condition can be done before the mother leaves the hospital so that the mother illustrates her role and responsibility as a young mother. Providing education to the family is very important always to encourage and motivate adolescent mothers to breastfeed their babies..

METHOD

The method used in this review research is Scoping review. The scoping review aims to map concepts or literature, explore information about research activities related

to the topic under study, and investigate any problems or gaps in the research area that will be a reference for research. Therefore, scoping reviews can provide basic information regarding research needs that may be carried out related to their topic (Peters et al., 2021). The steps in this review are as follows:

Step 1: Identify the scoping review questions

This scoping review aims to determine "inhibiting and supporting factors of breastfeeding in adolescent mothers? The first step in compiling this scoping review is identifying research questions to discuss as a blend of literature search strategies. Aspects such as research questions, population, interventions and outcomes need to be considered (Peters et al., 2021) To develop focus reviews and search strategies, researchers use the Framework (PEO) Population, Exposure and Outcomes in managing and solving focus reviews. The use of PEO will help in identifying key concepts in the focus of the review, developing appropriate search terms to describe the problem, identifying the impact and determining inclusion and exclusion criteria, as well as a time frame based on the development process. so that PEO is considered appropriate for use (Peters et al., 2021).

Table 1. Framework PEOs

P (Population)	E (Exposure)	O (Outcomes)
Teenage Moms	Inhibiting Factors Supporting Factors	Exclusive breastfeeding

Step 2: Identifying Relevant Articles

The criteria for articles to be searched and will be used as a source of scoping review are identifying relevant articles using the following inclusion and exclusion criteria:

1. Inclusion criteria
 - a. Articles published between 2013-2023
 - b. Articles published in English or Indonesian
 - c. National and international articles
 - d. Article discussing young mothers with breastfeeding
 - e. The article discusses the support of young mothers with exclusive breastfeeding
 - f. The article discusses the factors that influence young mothers to breastfeed
2. Exclusion criteria
 - a. Draft policies/guidelines from WHO/specific formal organizations
 - b. Articles that cannot be accessed in full-text
 - c. Articles discussing the prevalence of exclusive breastfeeding in adolescents
 - d. Articles that discuss the success rate of breastfeeding in adolescents
3. Database to use

In an evidence search, relevant databases are used, namely, PubMed, Ebsco, and Wiley databases. It will also search for Grey Literature using Google Scholar. After determining the relevant database, create the search keywords used: Teenager mother, young mother, Breastfeeding, exclusive Breastfeeding, Obstacle factor, Supporting factor, one* OR two AND three * OR four AND five * OR six.

After identifying keywords, it is necessary to determine the relationship in using keywords to set up a flexible search, i.e., by using OR» find records containing any conditions, AND» combine two words or phrases, and the database will only retrieve records containing both terms. The first step is to enter keywords that match the theme (Teenager mother*) OR young mother*) AND breastfeeding*) OR exclusive breastfeeding*) AND obstacle factors*) OR supporting factors.

To specify the literature search, determine the literature search period, which in this study is limited to articles published in the last 10 years starting from 2013-2023, and the selected articles are free full-text or open access.

Step 3: Article Selection

Done by searching the database to be used by entering keywords determined into each database, namely Pubmed, Ebsco, Wiley, and Google Scholar. In searching the four databases, each is filtered, such as full text, and published ten years. Results include PubMed: sixty-two out of eight hundred and seventy-four articles, Ebsco: four out of thirty articles, Willey Online Library: four out of thirty articles, Google Scholar: three out of twelve thousand articles, Total number of articles seventy-three.

Then to filter articles, researchers save Mendeley articles first, then to be included in Covidence; files will be exported from Mendeley to documents to become one folder, then the folder is imported into Covidence. In the selection process, this article uses a prism flow chart to describe transparently the process that has been carried out. Prisma flow charts are

considered appropriate because they can improve quality.

Step 4: Data charting

At this stage, all articles that have been selected are included in a table which includes: author name, year, title, country name, research destination, type of research, research method, number of participants/samples, inhibiting factors, supporting factors and research limitations.

RESULT

Research Characteristics

The following mapping is obtained based on the extraction of data that has been carried out on the selected article by categorizing the title, year, research objectives, methods, number of samples, and research results.

Table 2. Research characteristics

No Article	Author/ Year Published	Country	Method	Respondents	Grade
1	(Muelbert & Giugliani, 2018)	Brazil	Randomized control trials (quantitative) Study	Teenage Moms	A (Good)
2	(Wijaya et al., 2021)	Indonesia	Qualitative description Prospective study, observation, (quantitative)	Teenage Moms	A (Good)
3	(Colombo et al., 2018)	Italy	Qualitative and quantitative methods Cross-sectional analysis (qualitative)	Teenage Moms	A (Good)
4	(Nuampa et al., 2019)	Thailand	Qualitative and quantitative methods Cross-sectional analysis (qualitative)	Teenage Moms	A (Good)
5	(Benova et al., 2020)	Canada	Qualitative	Teenage Moms	A (Good)

6	(Thaithae et al., 2023)	Thailand	Cross-sectional analysis (qualitative)	Teenage Moms and Husband	A (Good)
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Theme

In this mapping step, researchers map into 2 themes, namely:

Table 3. Research Mapping Theme

Theme	Article
Inhibiting Factors in Breastfeeding	
Mother's age	3, 6
Mother's knowledge	2
Use of pacifiers	1, 3
Ways of childbirth	5
Culture and assessment	3
Supporting Factors in Breastfeeding	
Supporting Factors in Breastfeeding	3
Supporting Factors in Breastfeeding	2
Supporting Factors in Breastfeeding	2, 4, 5
Supporting Factors in Breastfeeding	6

DISCUSSION

Inhibiting Factors in Breastfeeding

Mapping in this scoping review obtained causal factors, which include: maternal age, maternal knowledge, use of pacifiers, mode of delivery as well as culture and assessment.

Mother's age

According to Colombo et al. (2018) regarding maternal age, several studies show that younger mothers tend to stop exclusive breastfeeding early compared to older mothers.

Mother's knowledge

Nesbitt et al. (2013) and Thaithae et al. (2023) in their research explained the lack of knowledge of adolescent mothers about breastfeeding, such as: how often the baby will breastfeed and how to know whether the baby is getting enough milk or not.

In addition, some mothers also worry that their nutritional intake may affect the quality of the breast milk to be given to their babies and lack of practical knowledge in breastfeeding, such as signs of satiety which can lead to frustration resulting from the

mother's lack of knowledge. However, mothers revealed that the support nurses provide in the early postpartum period will be very useful to increase their knowledge, confidence and skills in breastfeeding. Mothers highly value the information and direct assistance they receive at the hospital where they are being treated (Wijaya et al., 2021; Thaithae et al., 2023), resulting in the need for healthcare professionals to spend appropriate time in order to build relationships to overcome maternal knowledge deficiencies and work together in setting goals from breastfeeding.

Use of pacifiers

According to WHO recommendations, artificial pacifiers should be completely avoided when breastfeeding infants (Colombo et al., 2018). The relationship between pacifier use in infants and the duration of exclusive breastfeeding of each breastfeeding has been extensively investigated, with evidence suggesting that pacifier use can hurt breastfeeding duration. The negative relationship between pacifier use and maintenance of breastfeeding in adolescent mothers in a Brazilian study, babies who do not use pacifiers can increase the chances of maintaining at least 6 months to 1.5 years and double the chances of maintenance of breastfeeding for at least 12 or 24 months (Muelbert & Giugliani, 2018). The use of pacifiers has also previously been reported to be associated with early weaning, as it can lead to frequent ear infections and dental problems, and nipple confusion that causes breastfed babies difficulty breastfeeding (Colombo et al., 2018).

Ways of childbirth

Benova Research et al., (2020). Finding a negative association between ANC visits and early initiation of breastfeeding (IMD), we believe frequent ANC visits can signal

increased care contact between health workers and pregnant women educated on those maternity visits. However, conversely, if mothers do not make ANC visits, it is potentially complicated to experience antenatal and intrapartum challenges requiring medical intervention. When combined with research findings that babies born by cesarean section are 87% less likely to breastfeed within an hour after birth compared to babies born vaginally, that cesarean section decreases the likelihood of early initiation of breastfeeding due to factors such as separation of mother and child performed after surgery, surgical surgery problems such as the effects of anesthesia and stress or fatigue from a difficult delivery or other maternal complications. Overall, it highlights that intrapartum or labor experience is an important determinant for early initiation of breastfeeding (Benova et al., 2020).

Culture and assessment

In one study, it found that culture also played an important role in breastfeeding failures among young mothers. Young mothers experience helplessness to cultural discourses and practices applied by their parents and in-laws, which fail exclusive breastfeeding, such as giving certain foods or liquids to babies. Various countries have also shown various beliefs and traditions related to breastfeeding that make women reluctant to practice breastfeeding their babies (Astuti et al., 2021).

Supporting Factors in Breastfeeding

Mapping in this scoping review obtained supporting factors which include: maternal education, commitment to breastfeeding, social support, and partner desires.

Mother's education

Colombo et al. (2018) explained that a higher education level positively impacts exclusively breastfeeding. The same is observed for the presence of prenatal classes in mothers in the literature that has

been reported to support maternal education in breastfeeding during antenatal by providing antenatal classes during pregnancy in order to increase interest in breastfeeding initiation in mothers, in research studies suggesting to start breastfeeding promotion early in pregnancy. In addition, awareness about the importance of postpartum hospitalization is needed to increase women's chances of success in breastfeeding (Colombo et al., 2018)

Commitment to breastfeeding

Research Wijaya et al. (2021) explained that most adolescent mothers who participated in the study stated that their decision to start breastfeeding was made during the prenatal period even though the opinions of their partners and families had no effect; the adolescent mother made the decision independently. Adolescent mothers may have understood the usefulness and emphasized the benefits of breast milk for the baby's health as the main motivator for deciding to breastfeed. Some mothers decide only to try breastfeeding, have a lower duration rate compared to mothers who are truly committed to breastfeeding their babies (Wijaya et al., 2021).

Researchers identified their decision to breastfeed as strongly influenced by several female family members who were close to them and had previous positive breastfeeding experiences. These female family members were also identified as the main source of support for new mothers in breastfeeding (Wijaya et al., 2021).

Social support

Promotion and support are needed by adolescent mothers, especially among expectant mothers breastfeeding, where caregivers and family members influence exclusive breastfeeding in the first six months of birth. For support from medical

personnel, there are two sets of breastfeeding support during hospitalization and after discharge through four types of social support which include emotional and informational support; at first adolescent mothers need information about the benefits of exclusive breastfeeding, Next their medical personnel must explain in detail about milking techniques, breastfeeding in public and agreement and support from family (Nuampa et al., 2022).

Adolescent mothers who are given support or support for breastfeeding from family members and their partners are more positive regarding breastfeeding. To overcome breastfeeding difficulties, immature mothers rely on their families as a source of support in breastfeeding. While peer support also has an impact on the effects of breastfeeding. Being in a supportive environment surrounded by other young mothers was identified as influencing the mother's experience of breastfeeding (Wijaya et al., 2021).

Spouse's desire

Young adolescents and their partners or husbands support reasons for caring for or wanting to breastfeed related to feeding naturally and healthily than exclusive formula. Among participants who did not intend or did not want their partner to breastfeed, one of the most frequent reasons was fear of pain while breastfeeding. The second generally approved reason is the teenage mother's plan to work or return to school. These concerns should be addressed calmly in managing breastfeeding and pumping time and safe storage of breast milk. In addition, advocacy to improve access to work areas and schools for breastfeeding and pumping breast milk is essential. Other commonly supported reasons for not breastfeeding include their inability to imagine or not want to. This may reflect perceptions of the norm for young

women not to breastfeed (Thaithae et al., 2023) So there needs to be support and encouragement from couples to motivate mothers to give milk to their babies.

CONCLUSION AND ADVICE

The findings in previous studies have shown that breastfeeding among adolescent mothers still requires special attention, which is related to the inhibiting factors and very diverse supporting factors that occur among adolescent mothers in breastfeeding their babies. Adolescent mothers often lack knowledge and skills in breastfeeding, lack breastfeeding support from family and health workers and perceive difficulties in breastfeeding. The duties and responsibilities of health workers in providing motivation and psychological support are needed in adolescent mothers. Support and encouragement from the closest people, such as family, partners and friends, will also be very helpful in breastfeeding.

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