

The Stunting Prevention Efforts for Babies in Culture and Behavior of Exclusive Breastfeeding

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Abstract: Exclusive breastfeeding is breastfeeding without supplementary food until the baby is six months old. Since pregnancy, the fetus receives nutrition from mother through placenta. Cultural and behavioral factors are factors underlying the behavior of exclusive breastfeeding. This study used cross sectional design with 83 respondents who were breastfeeding with bivariate test by chi square and multivariate using logistic regression test. The results showed that there was relationship between the factors of cultural values, beliefs, knowledge and attitudes with $\alpha < 0.005$, while tradition and education did not show any relationship with exclusive breastfeeding and the most influential factor was knowledge. It is recommended to increase the promotion and campaign of exclusive breastfeeding through cross-sectoral and conduct exclusive breastfeeding counseling to posyandu.

1 INTRODUCTION

Exclusive breastfeeding is the most effective intervention to prevent child mortality (Abbott and Scott, 2017). Exclusive breastfeeding was first launched in 1985, namely breastfeeding for babies aged 0-4 months, then through Minister of Health Decision No. 450 in 2004, exclusive breastfeeding is increased until the baby is six months old. The advantages and benefits of exclusive breastfeeding for six months, ranging from perfect physical growth, rapid intelligence development, to the emotional maturity of child (Ahluwalia et al., 2000). Exclusive breastfeeding is given only breast milk without additional food ingredients until the baby is six months old. Since pregnancy, the fetus receives nutrition from the mother through placenta. During infancy in the mother's body naturally provided food needed for further development and growth in the form of breast milk (American Academy of Family Physicians, 2014).

Breast milk is the best food that mother can give to newborn baby. According to experts, breastmilk is the perfect food for babies' growth and development because it contains various nutrients that are easily digested, besides that in the digestive tract

of breastmilk provides an immune factor / immunity to fight against various cause of disease. Ellia Christinne (2018) said that breastfeeding is very beneficial in addition to nutritional needs which are also useful for activating suprahyoid muscles such as the middle tongue / sublingual caruncles as coordination between swallowing, sucking and breathing.

In the field reality, it shows that low milk production in the first days after giving birth is an obstacle in early breastfeeding. One obstacle that is often experienced by mothers after giving birth when they want to breastfeed early and exclusively namely breastmilk does not flow smoothly in the first days of breastfeeding. It because the breastmilk production on the first day is still limited and the flow does not smooth which is associated with the lack of stimulation for prolactin and oxytocin involved in the breastmilk production. The amount of milk production produced in women who give birth normally and caesarean section is different, especially on the early days of breastfeeding (Sari, 2017).

In addition, the lack of maternal milk production in the first days of post partum is caused by the anxiety and fear suggested by the mother before labor, anxiety and fear can reduce the oxytocin hormone so that breastmilk cannot come out

immediately after giving birth. So finally the mother decided to give formula milk to her baby.

Breast milk expenditure can be influenced by two factors, namely production and expenditure factors. Breastmilk production is influenced by the hormone prolactin while expenditure is influenced by the oxytocin hormone. Oxytocin massage is one of the solutions to overcome the smooth production of breast milk.

In overcoming this problem, a natural effort that can be done to reduce anxiety and fear of the mother is providing hypnobreastfeeding therapy, which treatment can provide comfort and relax so that the breastfeeding process of mothers run smoothly and provide oxytocin massage which is done by massaging along the bones back (vertebrae) to costae bones 5 to 6 so that it can help stimulate the oxytocin hormone expenditure and breast milk is also fast out.

In order to reduce morbidity and babies' mortality, United Nations Children's Fund (UNICEF) and World Health Organization (WHO) recommend that babies should only be breastfed for at least 6 months, and breastfeeding is recommended until babies are two years old (WHO, 2018). In order that mother can maintain exclusive breastfeeding for 6 months, WHO recommends initiating early breastfeeding in the first hour of life, the baby only receives breast milk without additional food or drink, including water, breastfeeding on demand or as often as the baby wants, and does not use bottles or dot. According to Wei Wei Pang's research (2017), women who give exclusive and direct breastfeeding without a bottle of milk will be less likely to experience exclusive breastfeeding failure.

In Indonesia, babies who have been exclusively breastfed until the age of six months are 29.5% (Indonesian Health Profile, 2017). This is not in accordance with the Ministry of Health's Strategic Plan target for 2015-2019, which is the percentage of babies younger than 6 months who receive exclusive breastfeeding by 50% (Chaza Akik, 2017).

Based on province, exclusive breastfeeding coverage for babies up to the age of 6 months was the lowest in North Sumatra at 12.4%, Gorontalo at 12.5% and the highest in Yogyakarta at 55.4%. While the condition of West Sumatra obtained exclusive breastfeeding until the age of 6 months was 37.6% (Data and Information on Indonesian Health Profile, 2017).

In reality, the field shows that small amount of milk production in the first days after giving birth is an obstacle in early breastfeeding. One of the obstacles that are often experienced by post-partum mothers when they want to give early and exclusive

breastfeeding namely milk does not flow smoothly on the day first days of breastfeeding. This is because the breastmilk production of breast milk is still limited and it does not flow smoothly which is associated with the lack of prolactin and oxytocin stimulation that involved in the breast milk production. The amount of breastmilk produced in women with normal delivery and caesarean section is different, especially on the early days of breastfeeding according to the study of Lisa-Cristhine Girard (2017).

In addition, the lack of milk production in the first days of post partum is caused by the anxiety and fear felt by the mother before labor, anxiety and fear can reduce the oxytocin hormone so that breastmilk cannot come out immediately after giving birth. So finally the mother decided to give formula milk to her baby (Lorenzo Colombo's, 2018).

In this case, it appears that cultural values about breastfeeding are still inherent and believed by most of the local community. In other words, the cultural value is considered to be able to give influence to the mother gives breastmilk. Furthermore, the experience and education of women since childhood will also affect their attitudes and appearance in relation to breastfeeding later in life. A woman who has family or social environment regularly give breastmilk or she often sees women who breastfeed their babies regularly, she will have a positive view about breastfeeding (Elfgen et al., 2017).

It is suspected that there is relationship between culture and behavior of breastfeeding mothers with breastfeeding, because culture has a very large role in it. And it is strong driving factor for one's behavior. These cultural factors that shape and provide encouragement for mother who wants to provide exclusive breastfeeding.

Factors that caused exclusive breastfeeding were not optimal, namely mother itself, health workers, formula milk producers and health service providers. Exclusive breastfeeding is often constrained because of the lack of mother's knowledge about exclusive breastfeeding. Mother refused to give breastmilk to her baby, arguing that the breastmilk production was not much, thin, and could reduce beauty. Circumstances that do not support about this case often encourage the mother does not give full breastmilk moreover some mothers do not give breastmilk at all to their babies (Ingan, 2012).

Februhartanty (2008) said that the exclusive breastfeeding failure is due to predisposing factors, namely the lack of mother's knowledge and experience, then an important enabling factor that causes it because the mother does not facilitate through early breastfeeding initiation. The results

showed that the mother's knowledge and experience is very important in determining exclusive breastfeeding for her baby (Kusumaningrum, 2016).

The causes of failure in the practice of vary exclusive breastfeeding, such as pre-feeding, mothers have to work, sick babies, tired / sick mothers, mothers lack of confidence, and others. Various factors have also been linked to poor maternal knowledge. Another factor influencing the success of exclusive breastfeeding is the ability to do immediate breastfeeding. Today, it is better known as the Early Breastfeeding Initiation (Fikawati, 2009).

Culture is the values and norms that are believed by individuals or groups so that they take action. Culture is also seen as life plan even though it is not perfect. Culture as a hereditary thing in a society has an influence on exclusive breastfeeding behavior. The case that usually inhibits the success of exclusive breastfeeding is the practice of feeding that should not be done on infants under six months (Hidayat, 2016). Social, cultural and cultural systems are part of the cultural framework. Culture is a whole of the strength and results of human behavior, which is organized by the code of conduct, which must be obtained by learning and all of which are composed in people's life (Koentjaraningrat, 2002).

Culture plays a role in the health behavior of individuals and community groups. Culture can sustain health behavior and it can worsen health. Likewise with the exclusive breastfeeding behaviour which is inseparable from the cultural views that have been passed down for generations in the culture concerned (Firanika, 2010).

Behavior is a response form or reaction to stimuli from the organism outside (people), but it is very dependent on the characteristics or other factors of the person concerned in providing response (Notoatmodjo, 2012).

Yulfira Media et al state that cultural factors are the factors underlying the exclusive breastfeeding behavior. The results of in-depth interviews with a number of informants showed that breastfeeding for newborn is a natural way and it become as mother's natural. Breastfeeding behavior is an act that is considered high in value and has important value for a mother. Cultural values in the community of research area are related to the task and role as a mother. A mother who gives birth to her child, it is only natural to be responsible and obliged to give love to her child, namely by giving breastfeeding and caring for her child as well as possible. Thus, a mother will strive to keep her child growing healthy.

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by most of the local community. In other words, the cultural value is considered to be able to give influence to the mother gives breastmilk. Furthermore, the women experience and education since childhood will also affect their attitudes and appearance in relation to breastfeeding later in life. A woman who has family or social environment which has a habit of breastfeeding or she often sees women who breastfeed their babies regularly, she will have a positive view of breastfeeding (Yulfira, 2005).

Exclusive breastfeeding is heavily influenced by cultural conditions, maternal health, babies health, maternal employment status, the influence of western culture, urbanization, and technological progress cause a shift in the cultural value of society. Breastfeeding for babies is considered as not modern and make mothers in lower position if we compared to mothers in the upper class. The rapid development of the formula milk industry with various promotions in mass media can lead to misunderstanding of formula milk is considered better than breast milk (Mayasari, 2016).

The next cause of low exclusive breastfeeding is cultural aspect. Culture has very big role in exclusive breastfeeding. Someone's culture hereditary tends to be difficult to improve. Many cultures in Indonesia inhibit exclusive breastfeeding because of cultural perceptions. In developing countries, around 10 million babies die and 60% of these deaths should be suppressed by breastfeeding. Breast milk has been proven to improve the babies health status so that 1.3 million babies can be saved (Hidayat, 2016).

The low coverage of exclusive breastfeeding in babies aged 0-5 months and 6 months can be caused by low understanding about exclusive breastfeeding in the community. It is not only occur in the community but also health workers which also do not understand the benefits and various important benefits of exclusive breastfeeding. Beside these, cultural factors are strong driving factor towards one's behaviour. These cultural factors shape and provide encouragement for a mother willing to give exclusive breastfeeding (Hervilia, 2016).

2 METHOD

This research used an observational analytic study by using cross sectional design; it was a study in which studies about the cultural relationship and behavior of breastfeeding mothers with exclusive breastfeeding at Denai working area of Medan Denai Health Center in 2019.

The research population were all breastfeeding mothers who have babies aged 0-6 months who were at the Denai Village working area of Medan Denai Health Center Medan City in 2018, amounting to 305 people with sample of 82 people. The inclusion criteria of research sample were residents of Medan Denai Health Center working area who had babies aged 6-12 months and breastfeeding mothers who were willing to be respondents and interviewed. The exclusion criteria of research sample were respondents who were not willing to be interviewed and unable to read or write.

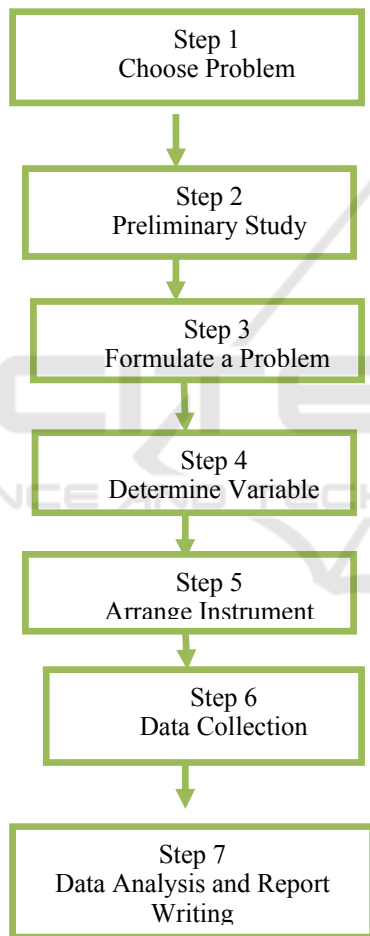


Figure 1: Research Flow

Univariate data analysis uses to explain / describe the characteristics of each variable studied. This analysis illustrates the frequency distribution of each independent and dependent variable in order to obtain a picture of exclusive breastfeeding at Denai Village Medan Denai Public Health Centre Medan

City. Bivariate analysis is an analysis to see the relationship between independent with dependent variable by using chi-square test at 95% degree of confidence that is $\alpha = 0.05$ with the provision that if the p value ≤ 0.05 then there is a significant relationship between two variables. To testing the relationship between two research variables, namely independent with dependent variable by using multiple regression analysis test with 95% confidence level where the significant level of 0.05, so if it is found the statistical analysis results ($P < 0.05$), then the variables stated are significantly related.



Figure 2: Exclusive Breastfeeding Culture Form

3 RESULT AND DISCUSSIONS

3.1 Respondent Characteristics

Respondent characteristics of this study include age, gender, education, occupation, and income. For more details can be seen as follows

Table 1: Breastfeeding Characteristics

Characteristics	Total (n)	Percentage (%)
1. Age		
<30 Years Old	48	57.8
≥30 Years Old	35	42.2
Total	83	100,0
1. Income		
High	38	45.8
Low	45	54.2
Total	83	100,0
3. Occupation		
Permanent	47	56.6

Not Permanent	36	43.4
Total	83	100,0
4. Babies number		
>3 Babies	54	65.1
< 3 Babies	29	34.9
Total	83	100,0

Respondents distribution based on the age of respondents in this study, most of them were <30 people aged 48 people from 83 people. The respondents distribution based on maternal income in this study was high as many as 38 out of 83 people. The respondent's distribution based on the occupation in this study was mostly they have permanent work of 47 people from 83 people. The respondent's distribution based on the children number in this study was mostly the children number > 3 children as many as 54 people out of 83 people.

Respondents distribution based on mother's knowledge in this study from 83 people mostly good as many as 42 people and not good as many as 41 people. Respondents distribution based on maternal attitudes in this study were mostly good attitudes as many as 45 people from 83 breastfeeding mothers. Respondents' distribution based on maternal education factors in this study mostly higher education 48 people from 83 breastfeeding mothers. Respondents' distribution based on cultural value factors in this study most good cultural values as many as 39 people from 83 respondents. Respondents distribution based on traditional factors in this study were mostly good as many as 42 people from 83 breastfeeding mothers. Respondents based on confidence factors in this study were mostly good as many as 41 people from 83 breastfeeding mothers. Respondents distribution based on exclusive breastfeeding in this study mostly gave exclusive breastfeeding as many as 47 people out of 83 breastfeeding mothers.

Table 2 : Univariate Analysis

Variable	Total (n)	Percentage (%)
1. Mother's Knowledge		
Good	42	50.6
Poorly	41	49.4
Total	83	100,0
2. Attitude		
Good	45	54.2
Poorly	38	45.8

Total	83	100,0
3. Education		
High	48	57.8
Low	35	42.2
Total	93	100,0
4. Culture Value		
Good	39	47.0
Deficient	44	53.0
Total	83	100,0
5. Tradition		
Good	42	50.6
Deficient	41	49.4
Total	83	100,0
6. Confidence		
Good	41	49.4
Deficient	42	50.6
Total	83	100,0
7. Exclusive Breastfeeding		
Yes	47	56.6
No	36	43.4
Total	83	100,0

The bivariate test results of RP value = 2,667 (95% CI 1,085 - 6,553) where mothers with low education have the opportunity did not give exclusive breastfeeding 2,667 times and p value of 0.053 then H0 is rejected P value > 0.05 where there was no relationship between mother's education with exclusive breastfeeding. With RP value = 2,580 (CI95% 1,160 - 7,005) where the unfavorable cultural values provide an opportunity did not give exclusive breastfeeding 2,580 times and p value of 0.037 then H0 was rejected P value < 0.05 where there was relationship between mother's cultural values with exclusive breastfeeding. RP value = 0.857 (95% CI 0.360 - 2.045) where the tradition was not good provides an opportunity did not give exclusive breastfeeding as much as 0.857 times and p value of 0.900 then H0 was rejected P value > 0.05 where there was no relationship between maternal cultural traditions. With RP value = 3,222 (95% CI 1,298 - 7,996) where deficient confidence provide

an opportunity did not give exclusive breastfeeding for 3,222 times and p value of 0.019 then H0 was rejected P value <0.05 where there was relationship between confidence with exclusive breastfeeding. With RP value = 5.547 (95% CI 2.139 - 14.38) where low knowledge provides an opportunity did not give exclusive breastfeeding as much as 5,547 times and p value of 0.001 then H0 was rejected P value <0.05 where there was relationship between mothers' knowledge with exclusive breastfeeding . With RP value = 3,774 (CI95% 1,511 -9,431) where deficient attitude provides an opportunity did not give exclusive breastfeeding as much as 3,774 times and p value of 0.007 then H0 was rejected P value <0.05 where there was relationship between mothers attitude with exclusive breastfeeding at Denai Village in the working area of Medan Denai Public Health Center in 2018.

Table 3. Logistic Regression Results

Variable	B	p-value	RP
Knowledge	1.713	0.000	5.547
Constant	2.876	0.000	0.056

The above table shows that variable knowledge was a significant variable ($p < 0.05$) towards exclusive breastfeeding. Thus the picture above was the most suitable modeling in this study. When seen the RP value with 95% CI, low knowledge (RP = 5,547) provides as many as 5,547 opportunities to encourage mothers did not give exclusive breastfeeding.

Value influences individuals to behave or make decisions according to these values. Value is the life concept in the most citizens' mind, it is about what is considered valuable and important in life and it serves as a guide to the life of its citizens. The person or community behavior is strongly influenced by the values they have. If behavior is considered good by an individual / society according to the values which is believed then the individual / society will carry out the behavior. In Aceh province the values prevailing in the community are strongly influenced by religious values. The community's belief breastfeeding is something that is considered important, valuable and also influenced by the values that exist in religious teachings. Values in religious encourage that breastfeeding should be given until the baby is 2 years old. The values in religious affect the individual / community directly or indirectly. So that breastfeeding mothers aware that breast milk is something that is very important for the baby.

Green and Lewis (1986) explain that health behavior is influenced by three factors, namely: 1)

driving factors include knowledge, attitudes, beliefs, values, traditions and norms; 2) enabling factors namely access to services and government / community commitment and 3) reinforcing factors namely the family attitudes and behavior, friends, leaders and health workers. This opinion reinforces that exclusive breastfeeding is also influenced by driving factors; one of them is related to values / norms.

The data above shows not too far the difference in exclusive breastfeeding between the mothers' traditional effects in breastfeeding their children. Although mothers with good cultural traditions are more likely to give exclusive breastfeeding, but the percentage is not much different from mothers who do not provide exclusive breastfeeding.

It shows that breastfeeding mothers' beliefs are closely related to exclusive breastfeeding. The statistical test results also showed that there was a significant relationship between breastfeeding women's beliefs and exclusive breastfeeding. As expressed by Kurniawan (2013) that the strong beliefs or confidants of mothers is an important determinant of the exclusive breastfeeding success. Robbins (1996) also explains that the individuals / communities beliefs / confidants influence certain attitudes and behaviors including exclusive breastfeeding behavior. In the research it was also seen that the majority of 49.4% of mothers answered that exclusive breastfeeding sincerely will get reward from God. It shows that mothers believe that breastfeeding will get a reward, and this belief has a positive value so that mothers are motivated to provide exclusive breastfeeding.

This shows that breastfeeding mothers' beliefs are closely related to exclusive breastfeeding. The results of statistical tests also show that there is a significant relationship between breastfeeding women's beliefs and exclusive breastfeeding. As expressed by Kurniawan (2013) that the beliefs or beliefs of strong mothers is an important determinant factor for the success of exclusive breastfeeding. Robbins (1996) also explains that the beliefs / beliefs of individuals / communities influence certain attitudes and behaviors including exclusive breastfeeding behavior. In the study it was also seen that the majority of 49.4% of mothers answered that exclusively exclusive breastfeeding would earn merit from God. This shows that the mother believes that breastfeeding will get a reward, and this is a belief that has a positive value so that the mother is motivated to provide exclusive breastfeeding. Confidence in the existence of "Dena" shows that

breastfeeding by a mother is also influenced by trust in the community. This is in accordance with the explanation of Abdurrahman (2002) that there are socio-cultural factors that do not support breastfeeding such as the belief in giving sweet liquid when a baby is born as one of the ways in religion. Susilawati's research (2005) also revealed that there is a close relationship between social culture and exclusive breastfeeding.

In order to reduce the false beliefs about exclusive breastfeeding, the family needs to be given a correct understanding, because family understanding also plays a very important role. Less understanding of the family about breastfeeding and its benefits results in the family being unable to provide good social support for exclusive breastfeeding. Therefore, it is expected that there will be a great attention from local health workers to improve counseling, counseling, and exclusive breastfeeding assistance to mothers and families, especially to husbands who are the closest people to mothers.

The husband should be the first to support an exclusive breastfeeding program for his baby. In addition, there is no harm if the family also learns the ins and outs of breast milk such as the benefits of breast milk, excess breast milk compared to formula milk or other foods. This is very important considering that in society there are still many beliefs / beliefs, the wrong assumption about exclusive breastfeeding. With the support of husband and family, a mother feels that she has support in providing exclusive breastfeeding. As research by Ida (2012) also explains that family support is the most dominant in exclusive breastfeeding. As for Rayuni (2010) also revealed that the culture that supports the exclusive breastfeeding is family attachment.

Belief is strongly influenced by socio-cultural factors of local community. Many socio-cultural factors lie behind the behavior of exclusive breastfeeding. As in Bener Meriah Regency, there was a belief that breast milk contains "Dena" which was as community's belief that breastmilk contains germs that are marked by itching in the nipples and the baby did not want to be breastfed. The community believes that "Dena" will disappear if treated by a shaman. This belief certainly has an influence on exclusive breastfeeding, although it has been lost gradually from the community because of the continuous promotion of exclusive breastfeeding.

In this study the behavioral factors of breastfeeding mothers, namely mothers' knowledge and attitudes, have P value <0.05 where there was relationship between mothers' knowledge and attitudes with exclusive breastfeeding in Denai

village at Medan Denai Public Health Center in 2018. Knowledge has $Exp\ B = 4.335$ which means that mothers with good knowledge have the opportunity to provide exclusive breastfeeding for their babies of 4,335 compared to mothers with less knowledge.

In determining attitudes, knowledge, thinking, beliefs and emotions play an important role. Variables of knowledge, beliefs, thinking, and attitudes of breastfeeding mothers can be changed through communicative messages such as through breastfeeding campaigns. Myrnawati's (1995) states that knowledge and attitude is a mutable variable that can be changed by providing information and technical guidance. A person's behavior is strongly influenced by attitudes namely the level of affection (feeling) both positive (beneficial) and negative (detrimental). Attitude is a person's potential behavior towards a desire that is done (Notoatmojo, 2007).

4 CONCLUSIONS

From the four cultural factors, values and beliefs have a significant relationship while educational factors and traditions do not have a significant relationship with exclusive breastfeeding. Behavioral factors of knowledge and attitudes have a significant relationship with exclusive breastfeeding. The most influential factor significantly is knowledge where with prevalence ratio of 4,335 times that mothers with poor knowledge have a chance as much as 4,335 times for mothers did not provide exclusive breastfeeding.

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