

Analysis of Knowledge and Stress Levels of Mothers with Exclusive Breastfeeding

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ABSTRACT

Breastfeeding (ASI) for newborns is an effort to prevent death and malnutrition in infants and toddlers. In general, the ideal breastfeeding is given exclusively for the first 6 months of life then continued with complementary foods until the age of 2 years. Some of the benefits of exclusive breastfeeding can prevent postpartum hemorrhage, anemia, and breast carcinoma. This journal search is conducted electronically and online using one database, namely the Google Scholar from 2015-2020 combining the following keywords: Stress with exclusive breastfeeding (Google Scholar), Knowledge with Exclusive Breastfeeding (Google Scholar) The inclusion criteria for journals have the same variables as research, the journals used are journals for the last 5 years which have 30-200 respondents from Indonesia. Based on the journals that have been reviewed, it is found that from the six journals there is a proven relationship between knowledge and stress levels with exclusive breastfeeding. This is evidenced from the results of previous research. So, Mother's Knowledge and Stress Level influence exclusive breastfeeding. The aim of the researcher on the Analysis of Mother's Knowledge and Stress Level by giving exclusive breastfeeding is to analyze the mother's knowledge level, to analyze the mother's stress level, to analyze the giving of exclusive breastfeeding, to analyze the knowledge and the level of mother's stress by giving exclusive breastfeeding.

Keywords: Exclusive Breastfeeding, Knowledge, Stress Level.

INTRODUCTION

Giving of breast milk (ASI) for newborns is one of the efforts to prevent death and malnutrition problems in infants and toddlers. The World Health Organization (WHO, 2010) recommends that newborns be given breast milk until they are 6 months old without giving other foods or fluids, except vitamins, minerals and drugs that have been allowed for medical reasons. According to the United Nations Children's Fund (UNICEF, 2011), as many as 30,000 infant deaths in Indonesia and 10 million under-five deaths in the world each year can be prevented through exclusive breastfeeding.

According to (WHO et al., 2015) states that around 15% of the total cases of death of children under the age of five in developing countries are caused by non-exclusive breastfeeding. Various problems of malnutrition and over nutrition also arise as a result of feeding before the baby is 6 months old (Ariani et al., 2016). Lack of knowledge of breastfeeding mothers about the importance of exclusive breastfeeding, the target of 80% coverage of exclusive breastfeeding in Indonesia is still very far from reality. Exclusive breastfeeding is the best investment for children's health and intelligence (Depkes RI, 2017). The benefits of exclusive breastfeeding are in accordance with one of the goals of the

Sustainable Development Goals (SDGs), namely reducing child mortality and improving mother's health.

Data obtained from (Ministry of Health RI, 2017) shows that the percentage of breastfeeding has increased from 2016 (75.7%). However, overall it has not met the set target of 77%. Through data from the East Java Health Office, 2017 it is known that the lowest prevalence of exclusive breastfeeding is in Bangkalan Regency, namely, 55.2%. This coverage is still very low when compared to the target of a healthy Indonesia of 80% (RI Ministry of Health, 2017).

Mother's knowledge about breastfeeding or good breastfeeding will influence the mother in knowing the benefits or importance of the mother giving breast milk to her baby. A high level of knowledge determines whether it is easy for the mother to understand and absorb information about exclusive breastfeeding. The higher the mother's knowledge, the higher the absorption of information about exclusive breastfeeding (Siregar, 2014).

Based on the problems above, the researcher is interested in conducting research on Knowledge Analysis and Stress Levels of Mothers with Exclusive Breastfeeding with the aim of knowing Knowledge and Stress Levels of Mothers with Exclusive Breastfeeding. The specific objectives are as follows:

1. Analyzing Mother's Knowledge Level
2. Analyze mother's stress level
3. Analyzing Exclusive Breastfeeding
4. Analyzing Mother's Knowledge and Stress Level with Exclusive Breastfeeding.

METHOD

On study research literature the researcher uses at least 1 academic data base from Google Scholar. Search results are limited from 2015 to 2020 and manually select articles that are relevant or in accordance with the question research. Articles that meet the inclusion criteria are 6.

Problem: Exclusive Breastfeeding.

The keywords used in the literature review are combinations of keywords as follows: Stress with exclusive breastfeeding (Google Scholar), Knowledge with Exclusive Breastfeeding (Google Scholar)

RESULTS

This chapter will present the results and discussion of the 2015 – 2020 journals that have been accessed by researchers according to research problems. This result will present the relationship between knowledge and maternal stress levels with exclusive breastfeeding.

Based on the results of research on the relationship between knowledge and family support regarding exclusive breastfeeding with exclusive breastfeeding (Elliana, 2018), the results showed that most of the respondents his knowledge enough 51.1% but from respondents who his knowledge enough not to give breast milk entirely Exclusive as much as 51.1%, meanwhile his knowledge good at 25.5% but those who do not provide exclusive breastfeeding as many as 23.4%. There is a relationship between knowledge and exclusive breastfeeding as evidenced by the results of the P-Value Multiple Logistic Regression Test $0.016 < 0.05$. (Elliana, 2018) on his research stated the assumption that the lack of knowledge was caused by the lack of information received about exclusive breastfeeding and some respondents thought that giving formula milk was already exclusive breastfeeding, besides that the mother's ignorance about how to store breast milk and give breast milk that had been expressed caused mothers to prefer giving milk formulas.

Based on the results of the research on the Relationship of Knowledge, Attitudes, and Work Unit/Department Support with Exclusive Breastfeeding (Ariani et al., 2016), the results

showed that the average knowledge score of respondents who did not provide exclusive breastfeeding was 61.53 while the average the average knowledge score of respondents who gave exclusive breastfeeding was 73.07. There is a nutritional relationship between Knowledge and Exclusive Breastfeeding as evidenced by the results of the Chi-Square P-Value Test $0.013 < 0.05$. (Ariani et al., 2016) on his research states the assumption of knowledge with exclusive breastfeeding in accordance with the theory issued by Notoatmodjo 2012, that knowledge is the most important domain for the formation of actions in a person. Behavior based on knowledge will be more enduring than behavior that is not based on knowledge.

Based on the results of research on the level of knowledge and motivation of mothers related to exclusive breastfeeding for working mothers (Listyaningrum & Vidayanti, 2016), the results showed that based on the data above, most of the respondents had good knowledge, 51.3%, but of the respondents who had enough knowledge do not to give Exclusive breast milk as many as 16.2%. There is a relationship between Knowledge Level and Exclusive Breastfeeding for Working Mothers as evidenced by the results of the Fisher's Exact Test P-Value $0.022 < 0.05$. (Listyaningrum & Vidayanti, 2016) on this research stated the assumption that the majority of respondents were in the secondary education category, most of the mothers were included in the multiparity parity category. The level of knowledge of mothers about exclusive breastfeeding is more knowledgeable respondents than respondents with less knowledge. Good knowledge of exclusive breastfeeding can provide motivation for give exclusive breastfeeding for their babies.

Based on the results of the research on the Stress Levels of Breastfeeding Mothers and Breastfeeding in the First Month (Ulfa & Setyaningsih, 2020), it was stated that a small proportion of respondents experienced 25% mild stress and 25% severe stress, but of respondents who experienced mild -severe stress, many respondents did not breastfeed. in the first month each as much as 10% for mild stress and 10% for severe stress. There is a relationship between the stress level of breastfeeding mothers and breastfeeding in the first month as evidenced by the results of the Chi Square test P-Value $0.041 < 0.05$. (Ulfa & Setyaningsih, 2020) on this research stated his assumption that the stress experienced occurred because the mother felt unable to complete the tasks that had to be done, for example breastfeeding, caring for the baby, communicating with the baby, resting, and others. Mothers feel their condition improves if they feel they can overcome their problems compared to other people. If these conditions are not resolved, new problems can emerge and accumulate more and more, thereby increasing the pressure (stressor) for the mother

Based on the results of research on the relationship between social support and stress levels on the continuity of Exclusive breastfeeding (Elsanti & Isnaini, 2018), stated that the results of the study showed that almost all respondents experienced moderate stress, 95.7%, however, the respondents experienced moderate stress, respondents who did not give Exclusive breastfeed as many as 11.4%, while for respondents who experienced severe stress all of them did not give exclusive breastfeeding as much as 2.8%. There is a relationship between stress and the continuity of giving Exclusive breastfeeding evidenced by the results of the Chi Square test P-Value $0.028 < 0.05$. (Elsanti & Isnaini, 2018) on this research states the assumption that mothers who experience moderate stress are due to several factors, namely: knowledge, socio-economic factors, anxiety, and fatigue. Breastfeeding mothers who experience moderate stress and successfully give exclusive breastfeed due to the motivation possessed by the mother will increase the mother's efforts to increase her milk production. The motivation that mothers get can be obtained from various sources, both from themselves, family, environment, health workers, or information related to information about the smooth production of breast milk.

Based on the results of the research on the Relationship between Stress and Breastfeeding (Rizki Amalia, 2016), the results study most of the respondents experience stress

as much as 62.5%, but most of the respondents did not produce breast milk smoothly as many as 54.17%. There is a Relationship between Stress and Breastfeeding as evidenced by the results of the Chi Square test $P \text{ Count} > P \text{ Table}$ ($0.628 > 0.409$). (Rizki Amalia, 2016) on this research stated his assumption that the discomfort from the physical changes felt by postpartum mothers from the first to the second day, for example the feeling of heartburn because the uterus contracts to return to its original state, swollen breasts, painful stitches. Guilt for not being able to breastfeed the baby. This feeling of discomfort causes stress for the mother

DISCUSSION

1. Stress analysis of mothers with exclusive breastfeeding

Based on the results of a study of stress analysis literature with exclusive breast feeding. Get results from 3 journals on Stress with Exclusive Breast feeding get the results of all journals stated that there was a relationship between stress and exclusive breastfeeding.

Breast milk production is strongly influenced by psychological factors (Salamah & Prasetya, 2019). Postpartum stress conditions are experienced by 80% of women after giving birth. Feelings of sadness or gloom that hit the mother arise within two days to two weeks after delivery (Danuatmaja and Meiliasari, 2015). The condition of mothers who are easily anxious and stressed can interfere with lactation so that it can affect milk production. This matter because stress can inhibit milk production (Nature in Arisdiani & PH, 2016). The higher the level of emotional disturbance, the less stimulation of the hormone prolactin is given to produce breast milk (Salamah & Prasetya, 2019).

Based on the results of the three journals (Ulfa & Setyaningsih, 2020) (Elsanti & Isnaini, 2018) (Rizki Amalia, 2016) it can be concluded that stress is one of the factors that can influence breastfeeding, for example, mothers experience difficulties at the beginning of breastfeeding such as fatigue, little milk, sore nipples, and sleep disturbances at night so that they experience stress. Discomfort from the physical changes felt by postpartum mothers from the first to the second day, for example the feeling of heartburn because the uterus contracts to return to its original state, swollen breasts, painful stitches. Guilt for not being able to breastfeed the baby. This feeling of discomfort causes stress for the mother. Stress can affect milk production because it inhibits milk production and will ultimately result in breastfeeding. Mothers also tend to think of themselves and feel that they bear a heavy burden, mothers are reluctant to breastfeed their babies, mothers prefer to give bottle milk to their babies. Difficulties in adjusting roles after delivery, if proper treatment is not immediately carried out, can have an impact on the health and well-being of the mother and her baby. Several days after delivery until the first month, breastfeeding problems are often experienced due to physiological adaptation after delivery. This condition is often experienced by mothers, especially in the experience of breastfeeding children. The stress experienced occurs because the mother feels unable to complete the tasks that must be done, for example breastfeeding, caring for the baby, communicating with the baby, resting, and others. Mothers feel their condition improves if they feel they can overcome their problems compared to other people. If these conditions are not resolved, new problems can emerge and accumulate more and more, thereby increasing the pressure (stressor) for the mother. Mothers who experience moderate stress are due to several factors, namely: knowledge, socio-economic factors, anxiety, and fatigue. Breastfeeding mothers who experience moderate stress and successfully give exclusive breastfeed due to the motivation possessed by the mother will increase the mother's efforts to increase her milk production. The motivation that mothers get can be obtained from various sources, both from themselves, family, environment, health workers, or information related to information about the smooth production of breast milk.

2. Knowledge Analysis with exclusive breastfeeding

Based on the results of research on knowledge analysis literature studies with Exclusive Breastfeeding. Get results of 3 journals about knowledge with Exclusive Breastfeeding get the results of all journals stated that there was a relationship between knowledge and exclusive breastfeeding.

Mother's knowledge about breastfeeding or good breastfeeding will influence the mother in knowing the benefits or importance of the mother giving breast milk to her baby (Haryati, 2017). A high level of knowledge determines whether it is easy for a mother to understand and absorb information about exclusive breastfeeding. The higher the mother's knowledge, the higher the absorption of information about exclusive breastfeeding (Siregar, 2014).

Based on journal results study (Elliana, 2018), (Ariani et al., 2016), (Listyaningrum & Vidayanti, 2016) concluded that in exclusive breastfeeding this is due to the low understanding of mothers, families and communities regarding the importance of breastfeeding for babies resulting in exclusive breastfeeding programs not run optimally. The low level of understanding about exclusive breastfeeding is due to the lack of information or knowledge possessed by mothers regarding all the added nutritional values and benefits contained in breast milk. A mother who has a higher education is likely to have a wider knowledge and insight, including knowledge and insight on the issue of fulfilling good nutrition for her baby or toddler. Lack of knowledge is caused by a lack of information received about exclusive breastfeeding, most respondents think that giving formula milk is already exclusive breastfeeding, besides that the mother's ignorance about how to store breast milk and give breast milk that has been expressed causes mothers to prefer giving formula milk. Knowledge is the most important domain for the formation of action on a person. Behavior based on knowledge will be more enduring from knowledge-based behavior.

3. Analysis of Knowledge and Stress Levels of Mothers with Exclusive Breastfeeding.

Based on the results of a literature study on the relationship between stress and exclusive breastfeeding get results from 3 journals on Stress with Exclusive Breastfeeding get the results of all journals stated that there was a relationship between stress and exclusive breastfeeding. While the results of the study of literature study the relationship between knowledge and exclusive breastfeeding get results of 3 journals about knowledge with Exclusive Breastfeeding get the results of all journals stated that there was a relationship between knowledge and exclusive breastfeeding.

Milk production is strongly influenced by psychological factors. Mothers who experience emotional disturbances can interfere with the letdown reflex process which results in breast milk not coming out, so the baby does not get enough breast milk and the baby will continuously crying. The baby's crying also makes the mother anxious and bother let down reflex process. The more depressed the mother feels because of the baby's crying, the less milk is released (Roesli, 2012). In addition, mother's knowledge about breastfeeding or good breastfeeding will influence mothers in knowing the benefits or importance of mothers giving breast milk to their babies (Haryati, 2017). A high level of knowledge determines whether it is easy for a mother to understand and absorb information about exclusive breastfeeding. The higher the mother's knowledge, the higher the absorption of information about exclusive breastfeeding (Siregar, 2014).

Based on the discussion above stress and knowledge greatly affect the process of giving breast milk to children, this is due to knowledge If there is not enough, the mother will think that breastfeeding is not very important so that the mother tends not to pay attention to the timing of breastfeeding that occurs, the child will be given another substitute food which causes exclusive breastfeeding to fail, besides that stress, the mother who is stressed will experience

not focusing on something, including her child. Who need exclusive breastfeeding, what happens is that the time for giving exclusive breastfeeding is also disrupted and replaced with other complementary foods for breastfeeding, in addition to that, mothers with stress will affect milk production due to reduced milk, so what happens is that the child's need for exclusive breastfeeding is replaced with other foods such as formula milk. From this elaboration it can be concluded that there is a relationship between knowledge and maternal stress levels with exclusive breastfeeding.

Based on the results of the discussion above, the similarities and differences in knowledge and stress on exclusive breastfeeding are the similarities in each journal related to the title and there is no difference, but according to researchers, knowledge influences exclusive breastfeeding more, this is because knowledge is the basic foundation that influences a person's behavior, so if knowledge is good, then someone will also know the impact that occurs, while stress is a process where someone cannot find a solution to deal with the problems it faces due to poor knowledge.

CONCLUSION

Based on the results of the analysis of Knowledge with Exclusive Breastfeeding, good knowledge will give mothers an idea about the importance of exclusive breastfeeding, so it can be concluded that there is an influence of knowledge on exclusive breastfeeding

Based on the results of stress analysis with exclusive breastfeeding. Stress will affect the mother's psychology, when the mother's psychology is disrupted, the mother's nutritional needs will decrease and cause milk production to decrease, so it can be concluded that there is an effect of stress on exclusive breastfeeding

Based on the results above, the results of the analysis of Mother's Knowledge and Stress Levels with Exclusive Breastfeeding stated that Mother's Knowledge and Stress Levels affected exclusive breastfeeding.

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