

Relationship With Anxiety Breast Milk Expenditure In Post Partum Mothers

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Abstrak — Smoothness expenditure Breast milk is affected by a number of factor, wrong the only one psychological factor, namely anxiety. In general, postpartum mothers often experience fatigue and change mood as worry, worried to herself and worried thinking about the baby. This anxiety can affect the smoothness of expenditure Breastfeeding in post partum mothers. The aim is to determine the relationship between anxiety and smooth discharge of breast milk in post partum mothers while being treated at the Hospitals. Method use design study cross sectional. The sample consists of 91 respondents with a non-probability sampling method sampling with purposive sampling technique . Results using the Chi – Square . test but no fulfil condition and next with test Fisher Exact on level 98% significance, the value of – Value 0.001 is smaller than the significant value of 0.05. The conclusion is that there is a relationship between anxiety and the smooth flow of breast milk on Mother post partum During treated in Hospital.

Kata kunci – Breastfeeding, Breastfeeding, Hospital

Abstract — Kelancaran menyusui dipengaruhi oleh beberapa faktor, salah satunya adalah faktor psikologis yaitu kecemasan. Pada umumnya, ibu nifas sering mengalami kelelahan dan perubahan suasana hati seperti kecemasan; tentang diri mereka sendiri dan tentang bayi mereka yang baru lahir. Kecemasan ini dapat mempengaruhi kelancaran menyusui pada ibu post partum. Tujuan penelitian ini adalah untuk mengetahui hubungan kecemasan dengan kelancaran pengeluaran ASI pada ibu nifas selama dirawat di Rumah. Metode penelitian ini menggunakan desain penelitian cross sectional. Sampel terdiri dari 91 responden dengan metode non probability sampling dengan teknik purposive sampling. Hasil dengan menggunakan Chi-Square tidak memenuhi syarat sehingga dilanjutkan dengan uji Fisher Exact pada taraf signifikansi 98%, diperoleh nilai - Nilai 0,001 lebih kecil dari nilai signifikansi 0,05. Simpulan, ada hubungan kecemasan dengan lancarnya pengeluaran ASI pada ibu post partum selama dirawat di Rumah Sakit.

Keywords – ASI, Menyusui, Rumah Sakit

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INTRODUCTION

Breast milk (ASI) is a liquid secreted by the mother's breast glands in the form of natural food or the best nutritious and high-energy milk produced since pregnancy (Wiji, 2013). The World Health Organization (WHO) and the United Nations International Children's Emergency Fund (UNICEF) recommend that children should only be given breast milk (ASI) for at least 6 months and continue breastfeeding until the child is 2 years old.

According to WHO data (2016), the coverage of exclusive breastfeeding worldwide is only around 36% during the period 2007-2014. The achievement of exclusive breastfeeding in Indonesia of 54.0% has reached the target (Ministry of Health of the Republic of Indonesia, 2016). Meanwhile, in North Sulawesi,

the coverage of infants who received exclusive breastfeeding was 39.42% or an increase compared to 2015 which had a coverage of 33.58% (North Sulawesi Provincial Health Office, 2016). The government regulates breastfeeding in Law Number 33 of 2012 to support exclusive breastfeeding mothers. This regulation states that mothers are obliged to breastfeed their babies exclusively from birth until they are six months old. The government's efforts have received a positive response from the international community. But in reality, the realization of these government regulations is still lacking. Failure in the breastfeeding process is often caused by the emergence of several factors, including socio-cultural changes, psychological factors, maternal physical factors, increased promotion of formula milk, health worker factors, maternal diet, baby's birth weight, use of

contraceptives. Socio-cultural changes where working mothers or mothers who have other activities, imitate friends or neighbors who use bottle milk, feel outdated when breastfeeding. The smoothness of breastfeeding is strongly influenced by psychological factors because the mother's feelings can inhibit or increase the release of oxytocin (Hardiani, R.S, 2017).

There are two important processes in breastfeeding, namely the process of forming milk (the milk production reflex) and the process of releasing milk (let down reflex), both of which are influenced by hormones regulated by the hypothalamus (Badriah, 2011). As with other hormone settings, the hypothalamus will work according to the brain's commands and work according to the mother's emotions (Aprilia, 2011). The mother's calm mental and emotional condition greatly affects the smoothness of breastfeeding. If the mother experiences stress, the mind is depressed, not calm, anxious, sad, and tense will affect the smoothness of breastfeeding (Riksani, 2012).

Anxious mothers will express less milk than mothers who are not anxious. Based on the results of research by Iin Febrina (2011), there is a relationship between the level of anxiety and the smooth discharge of breast milk for primiparous post partum mothers. Efforts to keep breast milk smooth are starting from the mother's strong desire to provide the best nutrition, namely breast milk for her baby. Strong motivation will affect the mother's physical and emotional to produce breast milk. By having a strong desire and sincere and high affection, breast milk production can be stimulated. One of them is support from husband and family, because support from the closest people can affect the smooth flow of breast milk and avoid anxiety so as to create a comfortable atmosphere in the family and the mother feels relaxed and comfortable. Thus breast milk will be produced smoothly. If the mother's mood feels comfortable and happy it will affect the smoothness of breastfeeding, on the contrary if the mother feels anxious and stressed it will hinder the smooth flow of breast milk (Qiftiyah, M, 2018).

The phenomenon that researchers got when in clinical practice, most postnatal mothers did not breastfeed their babies only gave formula milk to their babies, some mothers said they only gave formula milk because breast milk did not come out. One of the factors that breast milk does not come out smoothly is the mother's psychological condition such as anxiety and fear. Initial survey data taken from

From the results of short interviews that the researchers conducted with 5 postpartum mothers, 3 mothers said that only a little milk came out and felt anxious and not confident in giving breast milk to their babies, 2 other mothers said breastfeeding was smooth and never felt anxious.

The phenomenon that occurs at this time, the smooth spending of breast milk is often caused by

anxiety factors. So based on these problems, the researchers were interested in conducting research with the title "The Relationship between Anxiety and the Smooth Expenditure of Mother's Milk in Post Partum Mothers During Hospitalization".

RESEARCH METHOD

The type of research used is analytic research with a cross sectional approach. This research was conducted in a hospital with a population of 98 people. Sampling in this study was conducted by non-probability sampling with purposive sampling technique. Determination of the sample size using the slovin formula, the samples in this study were 68 people who had met the inclusion criteria: all postpartum mothers who were being treated at the hospital, postpartum mothers whose babies were alive and postpartum mothers who were breastfeeding. Exclusion criteria: mothers who take antidepressant drugs and postpartum mothers who refuse to be respondents.

This study used an instrument in the form of a self-data questionnaire and an anxiety level scale The State-Trait Anxiety Inventory (STAI) consisting of The 20 question items contained statements indicating the presence of anxiety which were classified as favorable items and statements indicating the absence of anxiety were classified as unfavorable, and the breastfeeding fluency questionnaire consisting of 4 questions, with the contents divided into two categories. namely Yes or No, which is less fluent if the respondent answers no to one of the questions, and fluent if the respondent answers yes to all questions.

The types of data used in this study are primary data and secondary data. Primary data is data obtained directly from respondents and secondary data is data obtained from the hospital.

Processing of the data obtained from the results of this study was processed manually by grouping the results from the distributed questionnaire sheets and then analyzed using statistical tests. After that it is processed using a computerized system, the stages are Editing, Coding, Processing, and Cleaning.

Univariate analysis in this study will produce a frequency distribution that gives an idea of the number and percentage. Univariate analysis was carried out to analyze the anxiety variable and the variable smooth discharge of breast milk for post partum mothers. Bivariate analysis is an analysis of the results of the independent variables suspected to have a relationship with the dependent variable. The analysis used is the result of cross tabulation. To test the hypothesis, statistical analysis was carried out with the Chi-square test at a significance level of 95% (p - Value <0.05), after being tested the results were not fulfill the requirements and continue with the Fisher Exact test. Through the Fisher Exact calculation, a conclusion is

then drawn, if the value of - Value is less than the value of (0.05), then Ho is rejected and H1 is accepted, which indicates there is a significant relationship between the dependent variable and independent variable..

RESULT

Table 1. Distribution of respondents based on the age of postpartum mothers in the hospital

AGE	N	Percentage (%)
21-25	13	19,1
26-30	28	41,2
31-35	19	27,9
36-40	4	8,8
41-45	7	2,9
Total	91	100,0

The results showed that from 91 respondents, it was found that most of the respondents aged 26-30 were 28 respondents (41.2%). The age factor determines maternal conditions and is related to conditions during pregnancy, childbirth and breastfeeding. Maternal age greatly affects the way mothers make decisions in maintaining their own health where as age increases, mother's knowledge and experience will increase (Anggraini, 2011).

Table 2. Distribution of respondents based on the last education of post partum mothers in the hospital

Last education	N	Percentage (%)
SD	1	1,5
Junior High School	1	1,5
Senior High School	19	27,9
D1	1	1,5
D3	3	4,4
D4	1	1,5
S1	39	57,4
S2	3	4,4
Total	91	100,0

The results showed that of the 91 respondents, it was found that most of the respondents had the latest bachelor's education, totaling 39 respondents (57.4%).

Mother's education is an important factor in breastfeeding infants, low education levels are sometimes difficult to accept explanations about breastfeeding and a good level of education will be easy to receive information, especially about meeting children's nutritional needs so that children's nutritional adequacy can be guaranteed. In general, mothers with moderate to high education can accept new things and can accept changes to maintain health, especially regarding breastfeeding. They can be encouraged to find out, seek experience so that the information obtained will become knowledge and be applied to their lives (Hartini, 2014).

Table 3. Distribution of respondents based on the occupation of post partum mothers

Profession	N	Percentage (%)
IRT	30	44,1
Honorary	3	4,4
Teacher	1	1,5
Pastor	1	1,5
Private	15	22,1
Self-employed	3	4,4
Employee BNI	1	1,5
Employee BUMN	6	8,8
Doctor	3	4,4
Nurse	1	1,5
civil servant	4	5,9
Total	91	100,0

The results showed that from 91 respondents, it was found that some respondents were only housewives (IRT) totaling 30 respondents (44.1%). The employment status of the respondents shows that the majority of respondents do not work (as housewives). The duties of a housewife are many, including cooking, washing, taking care of children and husband. This results in fatigue or fatigue in the mother which triggers a decrease in breast milk production (Hardiani, 2017).

Table 4. Distribution of respondents based on the status of postpartum mothers

Parturition Status	N	Percentage (%)
Primipara	52	39,7
Multipara	49	60,3
Total	91	100,0

The results showed that of the 91 respondents found the most respondents with multiparous parturition status amounted to 52 respondents (60.3%), and primiparas amounted to 49 respondents (39.7%). Of the 41 multiparous respondents who experienced anxiety, 28 respondents (68.3%) and 13 respondents were not anxious (31.7%), but for primiparas there were 27 respondents and most of them were primiparas who experienced anxiety, namely 25 respondents (92.6%).) and not anxious 2 respondents (7.4%).

DISCUSSION

Analysis of the results of the hypothesis test of anxiety with the smooth discharge of breast milk using the Chi - Square statistical test (χ^2) and continued with the Fisher Exact test at a significance level of 95% ($\alpha = 0.05$), from the results of research that has been carried out, there is a significant relationship between anxiety with the smooth release of breast milk in the hospital. Where the value of - Value = 0.001 is smaller than = 0.05.

This is in accordance with previous research conducted by Febrina (2011) the relationship between anxiety levels in primiparas and the smooth discharge of breast milk at 2-4 days postpartum in the working area of the Lubuk Kilang sub-district health center with a score of most (73.3%) respondents experiencing mild anxiety and most (66.7%) experienced non-smooth breastfeeding.

Based on the results of the study, there were 5 respondents who did not experience anxiety but their breast milk was not smooth, this was because the 5 respondents gave birth by sectio caesarea. Sectio caesarea delivery can affect the smooth flow of breast milk, because often mothers who give birth by sectio caesarea have difficulty breastfeeding their babies after the baby is born. Especially for mothers who are given general anesthesia, mothers will experience a decrease in awareness to take care of their babies in the first hour of respondents who experience anxiety but their milk is smooth, this is because most of these respondents are multiparous mothers who previously had experience in breastfeeding. Researchers assume that some of these respondents feel anxious due to the smooth delivery and breastfeeding process because they already have knowledge and experience in breastfeeding. As stated by Fauziah (2009), the second and third lactation experienced by the mother means that the mother has had experience in breastfeeding her child.

Interviews conducted by researchers, most mothers who experience anxiety are worried about how to take care of their babies in the future, especially for primiparous mothers they are worried because they do not have experience taking care of babies and need to adapt to the situation because a new family member has arrived. Some other mothers said they were anxious and afraid because they did not work, because they thought having a baby would cost quite a lot of money to buy baby equipment and so on.

Hawari (2011) states that anxiety is a mood disorder characterized by deep feelings of fear or worry. The symptoms complained of are dominated by psychological factors but can also be caused by physical factors. A person will experience an anxiety disorder when the person concerned is unable to cope with psychosocial stressors.

Postpartum mothers must prepare to breastfeed their babies, but some mothers experience anxiety so that it affects the smoothness of breastfeeding. Breastfeeding mothers must think positively and relax so as not to experience anxiety and the mother's psychological condition becomes good, a good psychological condition can trigger the work of hormones that produce breast milk. In accordance with the results of research conducted by Kamariyah (2014) that there is a relationship between the psychological condition of the mother and the smooth production of breast milk, a good psychological state of the mother will motivate her to breastfeed her baby so that the hormones that play a role in breast milk production will

increase because milk production starts from the breastfeeding process and will stimulate milk production.

Based on the results of the study and supporting theories, the researcher assumes that the anxiety that occurs in postpartum mothers is because they think too much about negative things. Post partum mothers should think positively, try to love their baby, and relax while breastfeeding. When mothers think positively and remain calm, it will trigger milk production so that breast milk can come out smoothly, on the contrary, mothers whose psychological conditions are disturbed such as feeling anxious will affect milk production so that milk production can decrease and cause breast milk to be less smooth..

CONCLUSION

The relationship between anxiety and the smooth release of breast milk in post partum mothers while being treated at the Mother and Child Hospital, that most respondents experienced mild anxiety, most of the respondents breast milk was not smooth. There is a relationship between anxiety and the smooth release of breast milk in post partum mothers during hospitalization.

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