

The Relationship Between Knowledge of Lactation Management and Breastfeeding in the Perinatology Ward of Bhakti Husada Krikilan Hospital, Banyuwangi

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ABSTRACT

Babies who are not breastfed are 13 times more likely to die as a child. While breastfeeding is a natural process, many mothers are unable to breastfeed their babies due to several factors, including a lack of maternal knowledge and support and promotion of formula milk. This study aims to determine the relationship between postpartum mothers' knowledge of lactation management and breastfeeding practices.

The research design used was an observational analytic cross-sectional study. The study population was postpartum mothers at Bhakti Husada Krikilan General Hospital, Banyuwangi, and the sampling technique was purposive sampling, with 34 respondents. Data collection used the Breastfeeding Knowledge Questionnaire to measure knowledge and a questionnaire on exclusive breastfeeding practices.

Data analysis used Spearman Rank test with a significance level of $\alpha = 0,05$, resulting in a p value of 0,01. This indicates that $p < \alpha$, thus, it can be concluded that the alternative hypothesis (H_1) is accepted. This means there is a correlation between postpartum mothers' knowledge of lactation management and breastfeeding practices at Bhakti Husada Krikilan Hospital. Therefore, healthcare workers at the hospital are expected to consistently provide education on lactation management to further enhance the knowledge of postpartum mothers, both those with limited and good knowledge, and to ensure optimal breastfeeding practices..

Keywords: Lactation Management, Knowledge, and Exclusive Breastfeeding

INTRODUCTION

Babies who do not receive breast milk are at higher risk of infection and death, this occurs because breast milk is the best food for babies (1). Breast milk contains growth factors and antibodies. Growth factors in breast milk help with organ and hormone maturation, while antibodies help the immune system mature (2). The World Health Organization (WHO) recommends that babies be exclusively breastfed from birth until they are six months old. (3). However, in practice there are still many mothers who do not love their babies. Some of the contributing factors are lack of knowledge, lack of support, working mothers (4). The low level of understanding among mothers, families and the community regarding the importance of breast milk for babies results in the breastfeeding program not running optimally.

The rate of exclusive breastfeeding for babies under six months of age continues to increase, from 52% in 2017 to 66.4% in 2024. However, many babies still do not receive exclusive breastfeeding for the full six months, the period needed to obtain optimal health benefits(5). In East Java, exclusive breastfeeding rates reached 34.92% until 6 months of age,

while 41.17% of infants were exclusively breastfed for only 5 months. In 2021, exclusive breastfeeding rates in Banyuwangi Regency reached 45% for the third consecutive year. However, this achievement still fell short of the national target of 80% (6).

Breast milk is the best food for babies because it contains sufficient nutrients to meet the needs of infants up to six months of age. Breast milk also contains nearly 200 nutrients, including carbohydrates, fats, proteins, vitamins, and minerals, in proportions appropriate to the nutritional needs of babies from birth to six months (7). Exclusive breastfeeding is defined as providing breast milk completely without any additional or supplementary food from birth until the baby is six months old (8). Breastfeeding can be continued for up to two years, the first two years of a child's life are very important, because optimal nutrition during this period reduces morbidity and mortality, reduces the risk of chronic diseases, and promotes better overall development.(6). According to (9) The decline in breastfeeding is possible due to various reasons, these reasons include: Lack of knowledge of mothers regarding the benefits or advantages of breast milk for their children, fear that it will affect breast milk production so that the amount of breast milk produced is small, The occurrence of a shift in views, that giving formula milk will be considered more modern, Misunderstanding that breastfeeding will quickly look old and reduce beauty. Many women also work to earn a living so they cannot breastfeed regularly. From these reasons, it can be seen the importance of knowledge / understanding of mothers about breast milk in an effort to help the growth and development of their babies in improving the quality of future human resources. Knowledge or cognitive is a very important domain for the formation of a person's actions (10). Acceptance of new behavior in a person goes through the stages of awareness, feeling interested, evaluating, trying, and adopting. Behavior that is based on knowledge, awareness, and a positive attitude will be lasting (11), Based on this background, the researcher is interested in conducting research with the title "The relationship between the level of knowledge of lactation management in postpartum mothers and the provision of breast milk in the Perinatology Room of Bhakti Husada Krikilan Hospital, Banyuwangi".

METODE

The research design used was an observational analytic approach with a cross-sectional study. The sample of this study were postpartum mothers who met the criteria of healthy postpartum mothers, had healthy babies born at term, and had no postpartum complications. The research variables were knowledge of lactation management and breastfeeding. The study was conducted from February 4 to March 29, 2025, at Bhakti Husada Krikilan Hospital, Banyuwangi, with 34 respondents using purposive sampling. Data collection used a knowledge questionnaire, namely the Breastfeeding Knowledge Questionnaire (12) with parameters of understanding exclusive breastfeeding, benefits of exclusive breastfeeding, time limit for giving exclusive breastfeeding, and how long expressed breast milk can be stored in the refrigerator with 20-item (13) and a breastfeeding questionnaire with parameters of duration, frequency, alternating breastfeeding between 2 breasts, method of giving expressed breast milk, support from breastfeeding mothers, patting the baby's back after giving breast milk, loving the baby when he is sick, time to give breast milk to the baby (14). Data analysis used the Spearman Rank test with a significance value of 0,01 ($\alpha = 0,05$). If the p value < 0,05: then H1 is accepted, which means there is a relationship between postpartum mothers' knowledge and the implementation of lactation management in the Perinatology Room of Bhakti Husada Krikilan Hospital, Banyuwangi. This study has passed the ethical feasibility test with the number: No. 0598-KEPKSHJ.

RESULTS

Table 1. Frequency distribution of respondent characteristics in the Perinatology room of Bhakti Husada Krikilan Hospital, Banyuwangi on (February 4- March 28, 2025)

No	Criteria	Frequency	Percentage (%)
1	Age		
	26-30 Years old	18	53,0
	31-35 Years old	11	32,0
	>35 Years old	5	15
2	Education		
	Elementary School	2	6,0
	Middle School	3	9,0
	High School	21	62,0
	University	8	23,0
3	Occupation		
	Housewife	22	65,0
	Self-Employed	10	29,0
	Civil Servant	2	6,0
4	Number of Children		
	1 Child	11	32,0
	2 Children	18	53,0
	>3 Children	5	15,0
5	Breastfeeding History		
	Exclusive Breastfeeding	23	68,0
	Formula Milk	5	14,0
	Breast Milk + Formula Milk	6	18,0
		34	100

Table 1 shows the distribution of respondent characteristics, half of the respondents are aged 26-30 years as many as 18 respondents (53.0%). High school education as many as 21 respondents (62.0%), work as housewives as many as 22 respondents (65.0%), the number of children as many as 2 children owned by 18 respondents (53.0%) and have a history of exclusive breastfeeding 23 respondents (68.0%).

Table 2. Distribution of Knowledge Level of Lactation Management of Postpartum Mothers in the Perinatology Room of Bhakti Husada Krikilan Hospital, Banyuwangi on (February 4-March 28, 2025)

No	Criteria	Frequency	Percentage (%)
	Knowledge Level of Lactation Management		
1	Good	27	79,0
2	Poor	7	21,0
	Total	34	100

Table 2 This indicates that almost all respondents (27 respondents) had good knowledge of lactation management.

Table 3. Distribution of breastfeeding in the Perinatology Ward of Bhakti Husada Krikilan Hospital, Banyuwangi, from February 4 to March 28, 2025.

No	breastfeeding	Frequency	Percentage (%)
1	Good	31	92,0
2	Poor	3	8,0
	Total	34	100

Tabel 3 This indicates that almost all respondents (31 respondents, 92.0%) were breastfeeding well.

Table 4. Cross-tabulation of the Relationship between Postpartum Mothers' Knowledge of Lactation Management and Breastfeeding in the Perinatology Ward of Bhakti Husada Krikilan Hospital, Banyuwangi, from February 4 to March 28, 2025.

Knowledge Level of Lactation Management	breastfeeding						p-value:	Coefficient Value:
	Good		Poor		Total			
	f	%	f	%	f	%	0,01	0,531
Good	26	77	1	3	27	79		
Poor	5	15	2	6	7	21		
Total	31	92	3	8	34	100		

Table 4 cross tabulation shows that there is 1 respondent who has good knowledge but does not carry out lactation management properly, and there are 5 respondents who have less knowledge but their lactation management is good. The results of the analysis using the Spearman Rank test obtained a p value of $0,01 < \alpha = 0,05$, which means there is a relationship between postpartum mothers' knowledge and the implementation of lactation management in the Perinatology Room of Bhakti Husada Krikilan Hospital, Banyuwangi 2025. The correlation coefficient value is 0,531, which means that there is a moderate relationship between the independent and dependent variables.

DISCUSSION

Level of Knowledge of Lactation Management among Postpartum Mothers in the Perinatology Ward of Bhakti Husada Krikilan Hospital, Banyuwangi, from February 4 to March 28, 2025

Based on Table 2, the level of knowledge of almost all respondents, 27 (79.0%) with good knowledge, was measured using the Breastfeeding Knowledge Questionnaire parameter (12) namely regarding the meaning of exclusive breastfeeding, the benefits of exclusive breastfeeding, the time limit for providing exclusive breastfeeding, and how long expressed breast milk can be stored in the refrigerator (13). In line with research (15) Mothers, as pioneers in improving the quality of Indonesia's human resources, should be aware of and increase their knowledge to support successful lactation management. The better a mother's knowledge, the better she will be able to absorb information. Several factors can influence postpartum mothers' knowledge regarding lactation management, including support and education from healthcare professionals, the mother's previous education and knowledge, family support, and the role of the mass media (16) as well as the correct way to breastfeed, lack of lactation counseling services, socio-cultural factors, the aggressive marketing of formula milk, lack of support from health workers, and the factor of working mothers (4). Breastfeeding mothers who have good knowledge tend to be curious about how to achieve success in breastfeeding by reading information, attending counseling about the benefits and advantages of breast milk and the benefits of breastfeeding for both the mother and her baby (16). This good knowledge is also supported by educational factors, where the majority of respondents' education level is high school (62%) and is relatively better than respondents with elementary and junior high school education (65%). A high level of education allows for a better level of knowledge and understanding of mothers about breastfeeding. Education is related to the transmission of knowledge, attitudes, beliefs, skills and other behavioral aspects. With a high level of education, it will influence a person's thought patterns to act and make the best decisions, thus emerging maturity. In addition, factors that influence breastfeeding are experience and experience that make respondents not give anything to their babies other than their own breast milk without having to give formula milk to their babies (4).

The results of the study showed that 18 respondents (53.0%) aged 26-30 years were of productive age in line with (17) which revealed that the age of 20-35 years is the ideal age range for mothers to have a mature understanding of maternal health practices. The majority of respondents were housewives, as many as 22 respondents (62.0%). Working mothers are at greater risk of not loving their babies because the mother's absence from home for a certain period of time for work usually causes problems in managing time due to long working hours and the long distance between the workplace and the mother's home, so there is no desire to learn more about breastfeeding, resulting in a lack of knowledge related to breastfeeding. This is in line with research (13) The mother's employment status also influences postpartum mothers' knowledge regarding lactation management. Eighteen respondents (53.0%) had two children, and 23 respondents (68.0%) had a history of exclusive breastfeeding. The number of children and breastfeeding history also influenced mothers' knowledge due to previous breastfeeding experiences (3) (18).

Factors that influence a mother's lack of interest in providing exclusive breastfeeding to her toddler include: 1) The conveniences obtained as a result of technological advances in making baby food such as making baby food flour, artificial baby milk, encourage mothers to replace breast milk with other processed foods; 2) Misleading advertisements from baby food production cause mothers to assume that these foods are better than breast milk; 3) Mothers often leave the house either because of work or because of social duties, so cow's milk is the only way out in providing food for babies left at home; 4) There is an assumption that giving bottle milk to children is a symbol of a higher social level, educated and following the developments of the times; 5) Mothers are afraid that the shape of their breasts will be damaged if breastfeeding and their beauty will be lost; 6) The effect of giving birth in a hospital or maternity clinic. Not all paramedics have been given the message and given enough information to encourage every mother to breastfeed their babies, as well as the wrong practice of giving bottle milk to newborns (3).

Breastfeeding in the Perinatology Ward of Bhakti Husada Krilan Hospital, Banyuwangi, from February 4 to March 28, 2025.

The study found that the majority of respondents (31 respondents) practiced good breastfeeding practices with their infants. This research uses a breastfeeding questionnaire with parameters of duration, frequency, alternating breastfeeding between 2 breasts, method of giving expressed breast milk, support from breastfeeding mothers, patting the baby's back after giving breast milk, loving the baby when he is sick, time to give breast milk to the baby (14).

Breastfeeding is strongly supported by proper lactation management, as it encompasses a series of efforts to support successful breastfeeding, including understanding the physiology of breast milk production, proper breastfeeding techniques, addressing common breastfeeding problems, and strategies for maintaining adequate breast milk production. These efforts are implemented in three stages: during pregnancy (antenatal), during labor until the mother is discharged from the hospital (perinatal), and the subsequent breastfeeding period until the child is 2 years old (postnatal) (17). Lactation management consists of how to care for the breasts, breastfeeding positions, correct breastfeeding steps, how to observe correct breastfeeding techniques, how to release the baby's suction, how to burp the baby, how to store breast milk and how to express breast milk. (19). For breastfeeding to run smoothly, a mother must possess breastfeeding skills so that milk can flow effectively from the mother's breast to the baby. Good breastfeeding skills include proper breastfeeding positioning and attachment of the baby to the breast. Breastfeeding by mothers has been a tradition and a mother's obligation since ancient times. Mothers provide breast milk based on instinct and the demands of their responsibilities. Exclusive breastfeeding offers benefits for both the baby and the mother, as well as the family in general. If practiced properly, exclusive breastfeeding provides the primary nutrient for the baby. For the breastfeeding mother, it can prevent several maternal illnesses

and psychological issues. Furthermore, exclusive breastfeeding has an economic impact, as breast milk provides sufficient nutrition for the baby, eliminating the need for formula, which reduces family expenses (4). Exclusive breastfeeding can reduce the risk of infant mortality because it contains colostrum, which is rich in antibodies, which contain proteins that support the immune system and are useful for killing germs in high concentrations. Breast milk also contains certain enzymes that function as absorbents that won't interfere with other enzymes in the intestines. Formula milk doesn't contain these enzymes, so food absorption depends entirely on the enzymes found in the baby's intestines (8). The benefits of breastfeeding for babies are that exclusive breastfeeding can reduce mortality and morbidity rates, optimize infant growth, help the development of children's brain intelligence because there is a B12 binding protein or an important amino acid that helps increase the number of brain cells in babies and breast milk is related to the development of their intelligence and increases the bond between mother and baby. Other benefits can also be obtained by the mother, namely to accelerate the return of pre-pregnancy weight and help in extending the spacing of pregnancies and providing adequate exclusive breastfeeding (7).

If lactation management is not implemented, it will result in a decrease in breastfeeding, which will result in an increase in the number of cases of malnutrition and undernutrition, which will increase the risk of morbidity and mortality in infants (4). Factors that can influence breastfeeding are age, mother's physical condition, family support (8). The husband is the closest person for a breastfeeding mother whose presence is always expected to be by the mother's side and always ready to provide assistance so that the mother does not become physically exhausted because when the baby is born the mother experiences fatigue after giving birth, hormonal changes, a series of household tasks such as cooking, washing, cleaning the house, as well as the role of being a mother, namely burping the baby, carrying the baby, bathing the baby, calming a restless baby, changing diapers, taking the baby for a walk in the park, giving expressed breast milk, and massaging the baby. All of these tasks can make the mother feel tired so that the support of the family, especially the husband, is very necessary.

The Relationship Between Postpartum Mothers' Knowledge of Lactation Management and Breastfeeding in the Perinatology Ward of Bhakti Husada Hospital, Krikilan, Banyuwangi, from February 4 to March 28, 2025.

The Spearman Rank test analysis yielded a p-value of $0,01 < \alpha = 0,05$, indicating a relationship between knowledge of lactation management and breastfeeding in the Perinatology Ward of Bhakti Husada Hospital, Krikilan, Banyuwangi, in 2025. The correlation coefficient was 0,531, indicating a moderate relationship between the independent and dependent variables.

Good knowledge of lactation management can lead to good breastfeeding. This is in line with research (17) A mother's good knowledge of lactation management can support breastfeeding behavior. Knowledge theory is a mental activity process developed through learning and stored in memory, which will be explored when needed through memory forms. Knowledge is obtained from experience derived from various sources (16). Exclusive breastfeeding is the first, most important, and best natural food for babies. According to the WHO, exclusive breastfeeding is the provision of only breast milk without any additional fluids, such as formula milk, water, orange juice, or other supplements, from birth to 6 months of age (7).

The results showed that one respondent had good knowledge but inadequate lactation management, and five respondents had poor knowledge but good lactation management. This could be due to several factors contributing to successful breastfeeding,

including family support, which is significantly related to maternal exclusive breastfeeding behavior (20).

The higher a person's education, the easier it is for them to receive information, thus increasing their knowledge. Conversely, a lack of education will hinder the development of a person's attitude toward the values being introduced (20). Good knowledge tends to have a good mindset, insight or perspective for someone to take a stance, decision, to take good actions and easily get information from other people or from the mass media, so that it can change a mother's perspective and can provide exclusive breastfeeding to her baby. Toddlers who are not given exclusive breastfeeding are 61 times more likely to experience stunting than toddlers who are given exclusive breastfeeding (19). Lactation management includes Breastfeeding Techniques and Positioning: The mother's ability to position the baby correctly and ensure a good latch is crucial for effective milk transfer, preventing nipple pain, and ensuring the baby's satisfaction. Frequency and Duration of Breastfeeding: Breastfeeding on demand (around 8-12 times per day or more) and for sufficient duration (>10 minutes per breast) is positively correlated with infant weight gain and adequate milk production. Social Support and Health Professionals: The role of lactation counselors, medical personnel, and support from husbands and families has been shown to be significant in increasing maternal confidence and adherence to exclusive breastfeeding practices. Maternal Psychological Condition: Factors such as anxiety or stress can affect milk production due to hormonal interactions (oxytocin and prolactin). Stress management and emotional support are important parts of lactation management. Antenatal and Perinatal Care: Lactation management begins during pregnancy (antenatal) and continues immediately after birth (Early Initiation of Breastfeeding/IMD), including the practice of rooming-in (mother and baby are in the same room) in health facilities. Not Providing Prelactal Food/Fluids: Consistency in providing exclusive breastfeeding, avoiding giving formula milk or other fluids (such as water) to newborns, is an important parameter for the success of exclusive breastfeeding (21).

CONCLUSION

Knowledge of lactation management at Bhakti Husada Hospital, Krikilan, Banyuwangi was in the good category for 27 respondents (79%).

Breastfeeding at Bhakti Husada Hospital, Krikilan, Banyuwangi was in the good category for 31 respondents (92%).

There is a relationship between knowledge of lactation management among postpartum mothers and breastfeeding at Bhakti Husada Hospital, Krikilan, Banyuwangi, as evidenced by the Spearman rank test with a p-value of $0,01 < 0,05$, thus accepting H1.

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