

## ANALYSIS OF FACTORS INFLUENCING STRESS IN BREASTFEEDING MOTHERS

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### ABSTRAK

Stres pada ibu menyusui dapat mempengaruhi produksi ASI. Ibu menyusui yang mengalami stres memiliki produksi ASI lebih rendah dibandingkan dengan ibu yang tidak mengalami stres. Stres pada ibu menyusui yang berlangsung secara terus-menerus berpengaruh terhadap keberlangsungan pemberian ASI Eksklusif. Faktor-faktor yang mempengaruhi stres pada ibu menyusui diantaranya pengetahuan ibu tentang menyusui, usia, dukungan suami, status ekonomi, dan pekerjaan. Penelitian ini bertujuan untuk mengidentifikasi faktor yang mempengaruhi stres Ibu menyusui di Wilayah Kerja Puskesmas Kesugihan I Cilacap. Metode penelitian ini menggunakan penelitian analitik dengan pendekatan *cross-sectional*. Responden dalam penelitian ini adalah ibu yang memiliki bayi 0-6 bulan di wilayah kerja Puskesmas Kesugihan I. Teknik sampling yang digunakan adalah *purposive sampling*. Data yang terkumpul dan memenuhi kriteria dianalisa secara univariat, bivariat menggunakan *chi square* dan multivariat dengan regresi logistik. Hasil penelitian menggunakan *Uji Chi Square* menunjukkan ada variabel yang mempengaruhi stres pada ibu menyusui di wilayah kerja Puskesmas Kesugihan I Cilacap yaitu pengetahuan, dukungan suami, status ekonomi, dan status pekerjaan. Hasil uji multivariat regresi logistik menunjukkan dukungan suami ( $p = 0,000$ ) dan tingkat pengetahuan ( $p \text{ value} = 0,012$ ) menjadi faktor dominan yang berpengaruh terhadap stres pada ibu menyusui di wilayah kerja Puskesmas Kesugihan I. Kesimpulan penelitian ini dukungan suami dan tingkat pengetahuan menjadi faktor dominan yang berpengaruh terhadap stres pada ibu menyusui di wilayah kerja Puskesmas Kesugihan I.

**Kata kunci:** faktor stres, ibu menyusui, stres menyusui

### ABSTRACT

*Stress in breastfeeding mothers can affect milk production. Breastfeeding mothers who experience stress have lower milk production compared to mothers who do not experience stress. Stress in breastfeeding mothers that persists affects the continuity of exclusive breastfeeding. Factors that influence stress in breastfeeding mothers include maternal knowledge about breastfeeding, age, husband's support, economic status, and employment. This study aims to identify factors that influence the stress of breastfeeding mothers in the Working Area of Kesugihan I Cilacap Health Center. This research method uses analytic research with a cross-sectional approach. Respondents in this study were mothers who had babies 0-6 months in the working area of Kesugihan I Health Center. The sampling technique used was purposive sampling. Data collected and met the criteria were analyzed univariately, bivariate using chi square and multivariate with logistic regression.. The results of the study using the Chi Square test showed that there were variables that influenced stress in breastfeeding mothers in the working area of the Kesugihan I Cilacap Health Center, namely knowledge, husband support, economic status, and employment status. The results of the multivariate logistic regression test showed that husband support ( $p = 0.000$ ) and knowledge level ( $p \text{ value} = 0.012$ ) were the dominant factors affecting stress in breastfeeding mothers in the Kesugihan I Health Center working area. The conclusion of this study is that husband's support and level of knowledge are the dominant factors influencing stress in breastfeeding mothers in the Kesugihan I Health Center working area.*

**Keywords:** stress factors, breastfeeding mothers, breastfeeding stress

### INTRODUCTION

Mothers after childbirth (postpartum) experience a transition of both physical and psychological changes (Fazraningtyas, 2020). Physical changes that occur include the breast

glands in preparation for breastfeeding. Breastfeeding is very important for both mother and baby. Breast milk is a food that has a lot of nutrients to optimize growth and development for babies, especially at the age of 0-6 months because they cannot digest solid food. Breast milk drunk by babies with normal quantity and quality, can reduce the risk of neonatal mortality, and increase endurance (Nurkarimah et al., 2018; Winingsih & Yanuarti, 2023).

Breast milk production needs to be maintained, so that the baby's need for breast milk is met. Some studies explain that stress in breastfeeding mothers can affect milk production. Stress experienced by breastfeeding mothers includes a small amount of milk produced, difficulty at the beginning of breastfeeding due to fatigue, sleep disturbances at night, abnormal nipple shape, and nipple blisters (Suyanti et al., 2021; Swanson & Hannula, 2022; Ulfa & Setyaningsih, 2020).

Breastfeeding mothers who experience stress have lower milk production compared to mothers who do not experience stress. Several studies have mentioned that in addition to decreased breast milk production, stress in breastfeeding mothers causes a decrease in the amount and quality of breast milk produced (dr. Adrian, 2021; Foligno et al., 2020; Gila-Díaz et al., 2020). When a mother experiences stress, there is a release of higher amounts of the hormone cortisol from the adrenal glands. Cortisol is the main stress hormone in the body and plays an important role in responding to stressful situations. Elevated cortisol levels can disrupt the balance of other hormones, including oxytocin and prolactin, which play a role in milk production and release (Hidayah et al., 2021; Mizuhata et al., 2020; Swanson & Hannula, 2022).

Stress experienced by breastfeeding mothers has a direct impact on both the baby and the mother. The impact of stress on the mother involves psychological effects. Severely stressed mothers experience anxiety, emotional exhaustion and even postpartum depression. The mother's unstable emotional state can interfere with and affect the quality of the relationship between mother and baby while breastfeeding. Mothers have difficulty in forming a strong emotional bond with their babies, leading to fussier and less effective breastfeeding (Tasripin. M.W & Fitriana. H, 2021; Ulfa & Setyaningsih, 2020; Vukšić et al., 2022).

Suboptimal breastfeeding frequency contributes to decreased milk production. Ongoing stress in breastfeeding mothers affects the continuity of exclusive breastfeeding. (Azad et al., 2022; Isiguzo et al., 2023). Penelitian-penelitian menjelaskan tentang faktor-faktor yang mempengaruhi stres pada ibu breastfeeding including mother's knowledge about breastfeeding, age, education level, husband's support, economic status, and employment (dr. Adrian, 2021; Febriati et al., 2018; Kahforoushan et al., 2021; Pratiwi & Ahmaniyah, 2019; Swanson & Hannula, 2022).

Exclusive breastfeeding coverage in the world is 36% in the period 2017-2021 with a target of 70% by 2030. Nearly 50% of all infants in Indonesia do not receive breast milk, and infants before reaching the age of six months are given complementary foods (WHO, 2021; World Health Organization in South-East Asia Indonesia, 2020). Exclusive breastfeeding coverage in 2021 decreased by 25.6% in Central Java. Preliminary studies on exclusive breastfeeding mothers through interviews in Kesugihan I Cilacap, obtained data on 6 out of 10 breastfeeding mothers felt that their milk production was low due to stress and lack of support from their husbands (Dinkes Provinsi Jateng, 2021).

Previous research discussed the decrease in breast milk production due to self-efficacy (Aderibigbe et al., 2023; Piro & Ahmed, 2020). The novelty of this research is to find out the factors in terms of psychological problems that cause stress in breastfeeding mothers. This study aims to determine the factors that influence stress in breastfeeding mothers in the working area of Kesugihan I Cilacap Health Center.

## METHOD

This type of research is an analytic observational study conducted to assess the dominant factors associated with stress in breastfeeding mothers and decreased milk production. The research design used was a cross sectional design. This study was conducted in the working area of Puskesmas Kesugihan I Cilacap. The population in this study were breastfeeding mothers of infants aged 0-6 months in the working area of Puskesmas Kesugihan I Cilacap.

The sampling technique in this study used purposive sampling. Researchers determined the sample according to the research objectives and in accordance with the inclusion criteria. The inclusion criteria in this study were: Breastfeeding mothers who have babies aged 0-6 months, breastfeeding mothers in the working area of Puskesmas Kesugihan I Cilacap. Breastfeeding mothers were measured for stress levels using a standardized instrument, the Depression, Anxiety and Stress Scales (DASS). Bivariate analysis using Chi Square test. Multivariate analysis test using Multivariate Logistic Regression.

## RESULT

### Univariate Analysis

#### Breastfeeding Mother's Age Overview

**Table 1. Age Characteristics Distribution of Breastfeeding Mothers in the Working Area of Puskesmas Kesugihan I Cilacap**

No	Age (years)	n	%
1.	20-35 years	114	83.21
2.	<20 years dan >35 years	23	16.79
Totally		137	100

Source: SPSS 25.0 Processed Data

Table 1 shows that of the 137 mothers studied, 114 (83.21%) of the majority of mothers aged 20-35 years, and there were 23 (16.79%) mothers aged less than 20 years and more than 35 years who were breastfeeding exclusively.

#### Overview of the Education Level of Breastfeeding Mothers

**Table 2. Distribution of Education Level Characteristics of Breastfeeding Mothers in the Working Area Puskesmas Kesugihan I Cilacap**

No	Mother's education level	n	%
1.	Lower (< High School)	36	26.28
2.	Higher (≥ High School)	101	73.72
Totally		137	100

Source: SPSS 25.0 Processed Data

Table 2 shows that the majority of breastfeeding mothers at Kesugihan I Health Center, 101 (73.72%) had a high school or college education level, and there were 36 (26.28%) mothers who had less than a high school education.

#### Overview of Breastfeeding Mother's Knowledge Level

**Table 3. Distribution of Knowledge Level Characteristics of Breastfeeding Mothers in the Working Area Puskesmas Kesugihan I Cilacap**

No	Mother's knowledge level	n	%
1.	Less Good	59	43.00
2.	Good	78	57.00
Totally		137	100

Source: SPSS 25.0 Processed Data

Table 3 shows that the majority of breastfeeding mothers at Kesugihan I Health Center of 78 people (57%) had a good level of knowledge, and there were 59 (43%) mothers who had a poor level of knowledge.

### Overview of Husband Support

**Table 4. Distribution of Husband Support Characteristics in Breastfeeding Mothers in the Working Area Puskesmas Kesugihan I Cilacap**

No	Husban support	n	%
1.	Unsupportive	30	21.90
2.	Support	107	78.10
	Totally	137	100

Source: SPSS 25.0 Processed Data

Table 4 shows that of the 137 mothers studied, the majority 107 (78.10%) breastfeeding mothers received husband support, and there were 30 (21.90%) husbands did not support breastfeeding mothers.

### Overview of Economic Status

**Table 5. Distribution of Economic Status Characteristics (Income) of Breastfeeding Mothers in the Working Area of Puskesmas Kesugihan I Cilacap**

No	Economic Status (Income)	n	%
1.	< regional minimum wage (<Rp. 2.383.090)	24	17.52
2.	> regional minimum wage ( $\geq$ Rp. 2.383.090)	113	82.48
	Totally	137	100

Source: SPSS 25.0 Processed Data

Table 5 shows that the majority of economic status or family income of exclusive breastfeeding mothers were 113 (82.48%) more than the minimum wage (Rp.  $\geq$ 2,383,090), and 24 (17.52%) had economic status or income (Rp. <2,383,090).

### Overview of Employment Status

**Table 6. Frequency Distribution of Employment Status Characteristics of Breastfeeding Mothers in the Working Area of Puskesmas Kesugihan I Cilacap**

No	Employment Status	n	%
1.	Not working	118	86.13
2.	Working	19	13.87
	Totally	137	100

Source: SPSS 25.0 Processed Data

Table 6 shows that the majority of breastfeeding mothers at Puskesmas Kesugihan I Cilacap, 118 (86.13%) were not working, and there were 19 (13.87%) working mothers.

### Bivariate Analysis

Bivariate analysis was conducted to determine the relationship of factors affecting stress in breastfeeding mothers in the Kesugihan I Cilacap working area as contained in Table 7 as follows:

**Table 7. Bivariate Analysis of the Relationship between Factors Affecting Stress in Breastfeeding Mothers in the Working Area of Puskesmas Kesugihan I Cilacap**

Variable	Breastfeeding mom stress						<i>p-value</i>
	Yes		No		Totally		
	n	%	n	%	n	%	
<b>Age:</b>							
a. 20-35 years	51	44.7	63	55.2	114	83.21	0.456
b. <20 years dan >35 years	17	73.9	6	26.1	23	16.79	
<b>Mother's education level:</b>							
a. Lower (< High School)	26	72.2	10	27.8	36	26.28	0.694
b. Higher ( $\geq$ High School)	45	44.6	56	55.4	101	73.72	

<b>Mother's knowledge level:</b>							
a. Less good	45	76.3	14	23.7	59	43	0.000*
b. Good	20	25.6	58	74.4	78	57	
<b>Husband support:</b>							
a. Unsupport	25	83.3	5	16.7	30	21.9	0.000*
b. Support	31	29	76	71	107	78.1	
<b>Economic Status (Income):</b>							
a. < regional minimum wage (<Rp. 2.383.090)	18	75	6	25	24	17.52	0.006*
b. ≥ regional minimum wage (≥Rp. 2.383.090)	28	24.78	85	75.2	113	82.48	
<b>Employment Status:</b>							
a. Not working	41	34.7	77	65.3	118	86.13	0.019*
b. Working	16	84.2	3	15.8	19	13.87	

Source: SPSS 25.0 Processed Data

The results of the Bivariate Test analysis using Chi Square in Table 7 obtained several variables with  $p\text{-value} > \alpha$  showing that there is no significant relationship between the variable age ( $p\text{-value}$  0.456), education level ( $p\text{-value}$  0.694) with stress in breastfeeding mothers in the Puskesmas Kesugihan I Cilacap working area. Furthermore, the results of the analysis with  $p\text{-value} < \alpha$  showed that there was a significant relationship between the variables of knowledge level ( $p\text{-value}$  0.000), husband support ( $p\text{-value}$  0.000), economic status ( $p\text{-value}$  0.006), and employment status ( $p\text{-value}$  0.019) to stress in breastfeeding mothers in the Puskesmas Kesugihan I Cilacap working area.

### Multivariate Analysis

Bivariate analysis results that had a  $p$  value  $\leq 0.25$  were included in this second step. Candidate variables that entered the multivariate analysis are listed in Table 8..

**Table 8 Logistic Regression Analysis of Factors Affecting Stress in Breastfeeding Mothers Breastfeeding Mothers in the Working Area of Puskesmas Kesugihan I Cilacap**

No	Variable	$p\text{-value}$
1	Knowledge level	0.021*
2	Husband support	0.000*
3	Economic status (Income)	0.037*
4	Employment status	0.063*

Source: SPSS 25.0 Processed Data

Description: \* = candidate variable

Table 8 shows that all independent variables can proceed to multivariate analysis. The next step of assessing interaction variables is done by selection, by means of which insignificant variables are removed step by step starting from those with large  $p$ -values using the backward method. The backward method in multivariate analysis automatically excludes candidate variables that have the lowest association with the dependent variable until the most dominant variable is obtained. Modeling logistic regression analysis with the backward method is done three times. The third stage is the final result of logistic regression analysis of the dominant factors listed in Table 9.

**Table 9 Final Results of Logistic Regression Analysis of Dominant Factors Affecting Stress in Breastfeeding Mothers in the Working Area of Puskesmas Kesugihan I Cilacap**

	Variabel	$p\text{-value}$	B	S.E.	Wald
Step 3(a)	Husband support	0.000	3.011	0.905	4.728
	Knowledge	0.012	2.055	1.046	9.609
	Constant	0.000	-9.133	2.241	12.152

Source: SPSS 25.0 Processed Data

Table 9 shows that of all the independent variables analyzed, there are two factors that are declared as the most influential factors (determinants) on stress in Breastfeeding Mothers in the Puskesmas Kesugihan I Cilacap, namely the variable husband support factor which has



a  $\rho$  value is the husband support variable ( $\rho_v = 0.000$ ) and the knowledge factor with ( $\rho_v = 0.012$ ).

## DISCUSSION

### **Relationship between Age Factor and Stress of Breastfeeding Mothers in the Working Area of Puskesmas Kesugihan I Cilacap**

The results of bivariate analysis with the Chi-Square test showed that age had a  $\rho$ -value of 0.456 ( $\rho\text{-value} > \alpha = 0.05$ ) which means that there is no significant relationship between age and stress in breastfeeding mothers in the Puskesmas Kesugihan I working area. The results of this study are in line with several studies that say that age does not affect stress in breastfeeding mothers. Mothers of different age groups, both younger and older, can experience similar stress if they face the same challenges in breastfeeding (Seródio Michelin et al., 2021). Some previous studies have shown that stress is more prevalent in primiparous mothers compared to multiparous and grande multiparous mothers who have experienced previous childbirth, not based on maternal age (Andayani et al., 2022; Ulfa & Setyaningsih, 2020). In contrast to research Efriani dan Astuti (2020) which says that there is a relationship between the age of the breastfeeding mother and exclusive breastfeeding.

### **Relationship between Education Level Factor and Stress of Breastfeeding Mothers in the Working Area of Puskesmas Kesugihan I Cilacap**

The results of this study based on bivariate analysis in Table 7 show that the level of education has a  $\rho$ -value of 0.694 ( $\rho\text{-value} > \alpha = 0.05$ ) which means that there is no significant relationship between the level of education and the stress of mothers who are breastfeeding in the working area of Puskesmas Kesugihan I Cilacap. Education is often considered a factor that can influence an individual's ability to deal with various situations, in the context of breastfeeding, several studies have shown that mothers from various educational backgrounds, both those with high and low education, can experience similar levels of stress when they face breastfeeding challenges (Sulupadang et al., 2022). Another study also said that there was a relationship between the level of maternal knowledge and stress in exclusive breastfeeding not based on the mother's education level, the level of education had no significant relationship with exclusive breastfeeding (Berutu, 2021).

### **Relationship between Knowledge Level Factor and Stress of Breastfeeding Mothers in the Working Area of Puskesmas Kesugihan I Cilacap**

The results of the bivariate study in Table 7 state that there is a significant relationship between knowledge and stress in breastfeeding mothers. Knowledge is an important element that can affect stress levels in breastfeeding mothers. Mothers who have a better understanding of the benefits of breast milk, the breastfeeding process tend to experience lower stress levels compared to those who are less informed. This knowledge includes aspects such as proper breastfeeding techniques, signs that the baby is getting enough milk, how to overcome common breastfeeding problems, and an understanding of the physical and emotional changes experienced during breastfeeding (de Moraes Sato et al., 2022; Hartati et al., 2021).

Incorrect positioning or poor technique can lead to problems such as nipple chafing, the baby not getting enough milk, and discomfort for the mother, which in turn increases stress levels. Adequate maternal knowledge can prevent and overcome these problems more effectively, thereby reducing breastfeeding stress (Baranowska et al., 2019; Naragale et al., 2020).

Knowledge of how to overcome common breastfeeding problems also plays an important role. Problems such as mastitis, blocked milk ducts and fussy babies can be a significant source of stress for breastfeeding mothers. Mothers who have information on how to overcome or prevent these problems can reduce their stress more effectively. For example, knowing massage techniques that can help open blocked milk ducts or recognizing the early symptoms of mastitis and how to treat it can help mothers better manage these issues, thereby reducing stress (Cascone et al., 2019; Fitriah et al., 2023; Rana et al., 2020).

### **Relationship between Husband Support Factor and Breastfeeding Mother's Stress in the Working Area of Puskesmas Kesugihan I Cilacap**

The results of bivariate analysis with the Chi-Square test showed that husband's support had a  $p$ -value of 0.000 ( $p$ -value  $< \alpha = 0.05$ ), which means that there is a significant relationship between husband's support and stress in breastfeeding mothers in the working area of Puskesmas Kesugihan I Cilacap. Husband support plays a very important role in influencing stress levels in breastfeeding mothers. The breastfeeding process is a challenging journey, both physically and emotionally, and the presence of a supportive husband can make a big difference in the mother's experience. This support can be in the form of practical help in caring for the baby, emotional support, and understanding and appreciation of the efforts made by the mother. All of these forms of support can help reduce the level of stress experienced by breastfeeding mothers (Agnolon et al., 2020; Silaen et al., 2022; Winingsih & Yanuarti, 2023).

The husband's understanding and appreciation of the mother's efforts is also very important. Breastfeeding is often seen as a natural task, but in reality, many mothers face various challenges during this process. A husband who recognizes and appreciates the hard work and dedication shown by the mother can provide a significant morale boost. Appreciation shown through words, small actions, or even simple gifts can make the mother feel valued and respected, which goes a long way in reducing stress (Abiodun Samuel & Omolade Oluwaseun, 2020b; Suriah et al., 2021; Winingsih & Yanuarti, 2023).

Husband support can also create a positive and harmonious home environment. The presence of a loving and caring husband can create a calm and supportive home atmosphere, which is very important for breastfeeding mothers. When mothers feel safe and comfortable in their homes, they are better able to focus on breastfeeding and taking good care of their babies (Silaen et al., 2022; Suriah et al., 2021).

### **Relationship between Economic Status Factors and Stress of Breastfeeding Mothers in the Working Area of Puskesmas Kesugihan I Cilacap**

The results of bivariate analysis showed that economic conditions ( $p$ -value 0.006) significantly influenced the level of stress in breastfeeding mothers. Low household income is often associated with increased maternal stress due to financial pressures that impact on various aspects of daily life. When financial resources are limited, breastfeeding mothers may face difficulties in meeting basic needs such as nutritious food, clothing, and adequate shelter, all of which are essential for their wellbeing and that of their babies (Relton, 2019; Ulep et al., 2021; Vilar-Compte et al., 2019).

The pressure to meet these basic needs can divert a mother's focus and energy from breastfeeding and caring for the baby. Financial stress makes moms have to think of ways to cope with daily needs, which in turn can reduce the time and attention they can devote to breastfeeding. Research shows that constant worry about finances can reduce milk production because stress can affect hormones that play a role in milk production. As a result, moms may feel frustrated and anxious if they feel they can't provide enough milk for their baby (Sanghvi et al., 2022; Ulep et al., 2021; Vilar-Compte et al., 2019).

In addition, low income can also impact a mother's mental health. Ongoing financial stress can increase the risk of depression and anxiety, which in turn can affect a mother's ability to

breastfeed effectively. Postpartum depression, for example, has been linked to difficulties in breastfeeding and can be exacerbated by poor financial circumstances. Mothers who feel emotionally distressed may struggle to find the motivation and energy to breastfeed, which can create an ongoing cycle of stress and difficulty (Relton, 2019; Shiraishi et al., 2020; Smith & Folbre, 2020).

### **Relationship between Employment Status Factors and Stress of Breastfeeding Mothers in the Working Area of Puskesmas Kesugihan I Cilacap**

The results of bivariate analysis of work status variables ( $p$ -value 0.019) showed that there was an association with stress in breastfeeding mothers. Working breastfeeding mothers have a high workload and lack of time. Working mothers often face busy schedules and strict work demands, which make it difficult for them to breastfeed regularly and meet their baby's needs. The pressure to complete work tasks while taking care of the baby can lead to physical and mental exhaustion. In addition, the lack of rest and relaxation time due to work and childcare can exacerbate stress in working breastfeeding mothers (Sofiyanti et al., 2019; Vandenplas & Basrowi, 2023; Vilar-Compte et al., 2019).

Support from the workplace plays an important role in determining stress levels in working breastfeeding mothers. Mothers who have access to supportive policies such as adequate maternity leave, work time flexibility, and workplace breastfeeding facilities tend to experience lower stress. However, many working mothers do not have access to this support, leading to increased stress. In contrast, stay-at-home moms generally have more flexibility in organizing their time, which allows them to focus more on breastfeeding and baby care without the added pressure of work (Vandenplas & Basrowi, 2023; Vilar-Compte et al., 2019).

This study shows that although working breastfeeding mothers tend to experience higher stress compared to stay-at-home mothers, adequate support and supportive policies can help reduce their stress levels and improve their well-being so that all mothers can live their roles better and happier.

### **The Most Dominant Factor Associated with Stress in Breastfeeding Mothers in the Working Area of Puskesmas Kesugihan I Cilacap**

Table 9 multivariate analysis results show that the husband support factor has ( $p$  value = 0.000) and the knowledge factor with ( $p$  value = 0.012) is the most dominant factor associated with stress in breastfeeding mothers in the Kesugihan I health center working area. Research conducted by Silaen et al (2022) showed that good husband support can help breastfeeding mothers cope with the stress they experience. Husband support can help breastfeeding mothers overcome feelings of anxiety and stress experienced. This study also showed that husband's support can help breastfeeding mothers overcome physical problems that arise during breastfeeding such as fatigue, practical support from husbands is very helpful in alleviating the physical burden felt by breastfeeding mothers.

The results of multivariate tests with logistic regression showed that less supportive husband support was the most dominant factor that had a 3.01 times greater tendency to breastfeeding stress. Abiodun Samuel & Omolade Oluwaseun (2020); Handayani & Wulandari (2022); Suriah et al (2021) said that breastfeeding can be a tiring activity, especially if the baby feeds frequently and does night feeds, or the baby is fussy. Husbands who actively help with household tasks, such as cooking, cleaning, or taking care of other children, give moms more time to rest and focus on breastfeeding. Husbands can also help by changing diapers, soothing the baby, or bringing the baby to the mother for feeding, all of which can reduce the physical burden and allow the mother to conserve energy.

In addition to practical help, emotional support from husbands is also crucial. Breastfeeding can be a stressful experience, especially if the mother is facing problems such as



sore nipples, low milk production, or a difficult baby to feed. Husbands who provide emotional support by listening to mom's complaints, providing words of encouragement, and showing understanding can help moms feel calmer and more motivated. When mothers feel emotionally supported, they are better able to cope with the stress and challenges that arise during breastfeeding. This emotional support also helps mothers feel appreciated and recognized for their efforts, which in turn improves their mental and emotional well-being. (Abiodun Samuel & Omolade Oluwaseun, 2020; Silaen et al., 2022; Suriah et al., 2021).

High levels of knowledge can significantly reduce stress levels in breastfeeding mothers. Knowledge allows mothers to know how to deal with breastfeeding challenges more effectively, increases self-confidence, and provides a sense of control over situations encountered during breastfeeding. Therefore, it is important for breastfeeding mothers to have access to adequate information and support to ensure a more positive and satisfying breastfeeding experience (Hartati et al., 2021; Huang et al., 2022; Nufus et al., 2021; Rochana et al., 2022)

Multivariate analysis using logistic regression showed that low knowledge was the most dominant factor in having a 2.1 times greater likelihood of breastfeeding stress. An understanding of the physical and emotional changes that occur during breastfeeding can also affect mothers' stress levels. Breastfeeding is not just about feeding the baby, but also involves hormonal changes that can affect the mother's mood and emotions. Knowledge of how hormones such as oxytocin and prolactin play a role in the breastfeeding process and how these hormonal changes can affect feelings and emotions can help breastfeeding mothers understand and accept the changes they are experiencing. Thus, mothers can better manage their feelings and reduce stress (Berutu, 2021; Nurfatimah et al., 2022; Ulloa Sabogal et al., 2023).

## CONCLUSION

The conclusion of the study of factors associated with stress in breastfeeding mothers in the working area of Puskesmas Kesugihan I Cilacap, includes several things including: The results of the bivariate test showed a significant relationship between the level of maternal knowledge, husband's support, economic status, and employment status with stress in breastfeeding mothers in the Puskesmas Kesugihan I working area. Multivariate test results showed that husband support ( $p = 0.000$ ) and knowledge level ( $p$  value = 0.012) were the dominant factors affecting stress in breastfeeding mothers in the Kesugihan I Health Center working area. The results of this study are expected to be a policy consideration in the preparation of exclusive breastfeeding programs, especially husband support programs and increasing maternal knowledge. Researchers also hope that there will be further research aimed at evaluating exclusive breastfeeding programs and further research with a much larger sample size, including research to gain deeper insight into the experiences and perceptions of breastfeeding mothers and husband support related to stress in breastfeeding mothers.

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