

The Relationship Between Mothers' Knowledge and Attitude in Breastfeeding and The Occurrence of Nipple Irritation in Pidie Regency

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KEYWORDS

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ABSTRACT

Research indicates that 40% of women do not breastfeed their infants due to experiencing breast pain and swelling, and fear of nipple soreness. This may be due to incorrect breastfeeding techniques, which are often overlooked by mothers who lack the proper breastfeeding management knowledge, thus requiring relevant training and education. Proper breastfeeding requires good attachment between the mother's areola and the baby's mouth so the baby can feed effectively and nipple irritation can be avoided. If not adhered to, nipple irritation may occur, causing mothers to be reluctant to breastfeed their infants, which may impact to the child's growth rate. Breast milk is an excellent source of nutrition for infants, as it contains essential nutrients needed for optimal growth and development (Prasetyono, 2012). Data from the Aceh District/City Breastfeeding Coverage in 2022 shows that the highest coverage was in Sabang City, with only 22.43% of the population (6,006 infants). This study used a cross-sectional design where 375 infants were breastfed, and the Slovin formula was applied. Samples were randomly selected from infants at health centers in Pidie District. Researchers used the Chi-square test for data analysis. The findings from this study, derived from bivariate statistical analysis using the Chi-square test with a 95% confidence level, resulted in a p-value of 0.000 ($p < 0.05$). This indicates that the knowledge variable significantly affects breastfeeding technique. The Chi-square test at a 95% confidence level with $p=0.000$ ($p < 0.05$) also shows that attitude has an impact on the mother's ability to breastfeed. The mother's knowledge and attitude significantly influence their breastfeeding practice. The best way to prevent nipple irritation is by educating mothers on proper breastfeeding techniques. Researchers state that improving maternal knowledge and attitudes can enhance behavior, especially in breastfeeding practices, to prevent irritation. Monitoring by health workers is expected to improve maternal knowledge and attitudes and minimize the incidence of nipple irritation.

1. Introduction

Breastfeeding is a natural process, yet within our cultural environment, it is not always easy, thus requiring proper knowledge and education. Breastfeeding technique refers to the proper attachment of the infant's mouth to the mother's areola. Incorrect breastfeeding may cause nipple irritation, leading mothers to doubt and hesitate to breastfeed their infants, depriving them of optimal breastfeeding. Often, mothers lack adequate information about the benefits of breastfeeding. According to Wattimena (2015), a mother's breastfeeding success depends on the technique used after childbirth. The breastfeeding process, which must be followed for at least six months post-birth, influences the increase in breast milk production and quality. The adequacy of breast milk can be measured by the infant's post-feeding reactions, frequency of urination and defecation, and weight loss of up to 7% after birth. This reflects the mother's desire to breastfeed properly while avoiding breastfeeding issues (Selvianti and Rismayani, 2022). According to UNICEF data, approximately 17.230 million mothers worldwide encounter breastfeeding issues, with 5.64% experiencing sore nipples, 21.12% having swollen breasts, 15% experiencing clogged ducts and mastitis, and 75% with improper breastfeeding practices (Andriani et al., 2021). According to WHO, in 2020, 1 to 1.5 million newborns died due to lack of breastfeeding. Despite this, global breastfeeding achievements have not met expected goals (WHO, 2022), necessitating research on why mothers avoid breastfeeding.

Literature Review

Sore or itchy nipples are common issues for breastfeeding mothers, typically due to incorrect infant positioning. The child only sucks on the nipple as most of the areola is not in the mouth. This may also occur late in the breastfeeding period if breastfeeding is not done correctly. This may also happen if mothers frequently clean nipples with alcohol or soap. Sore nipples can hinder breastfeeding, as mothers may avoid it due to pain. Factors affecting knowledge include memory, curiosity, logical reasoning, language, and human needs (Sudarminta J, 2002). Notoatmodjo (2002) stated that factors influencing knowledge are education level, culture, and experience.

A response is considered an attitude only when it occurs upon facing a stimulus. An attitude towards an object is a feeling of support or prejudice (favorable) or a feeling of non-support or opposition to an object (unfavorable).

2. Method

This research is a cross-sectional study. The population includes breastfeeding mothers in Pidie Regency. The sample is breastfeeding mothers who have given birth to infants under the age of two in Pidie Regency, with a sample size of 375 using Slovin's formula (1960). Data analysis techniques include univariate and bivariate analysis, with the bivariate analysis using the Chi-square test.

3. Results and Discussion

1. Variable Data Analysis

Table 1: Knowledge

Knowledge	F	%
Good	167	44,5
Poor	208	55,5
Total	375	100

From table 1, it is observed that the majority of respondents have poor knowledge, with 208 (55.5%) respondents, while 167 (44.5%) respondents have good knowledge.

Tabel 2. Attitude

Attitude	F	%
Good	175	46,7
Poor	200	53,3
Total	375	100

From Table 2, it is noted that a majority of respondents with a good attitude account for 175 (46.7%) respondents, whereas those with a poor attitude are more significant, with 200 (53.3%) respondents.

2. Dependent Variable

Data analysis results for the dependent variable (nipple irritation) are as follows:

Tabel 3. Nipple Irritation Variable

Papila Mamae	f	%
Irritation	218	58,1
No	157	41,9

immitation		
Total	375	100

From table 3, 218 (58.1%) respondents experienced nipple irritation, whereas 157 (41.9%) respondents did not experience irritation. Proper breastfeeding technique was observed in 48 (49%) respondents, while 50 (51%) respondents did not employ the correct technique.

3. Bivariate test result

The bivariate test was conducted to assess the relationship between maternal knowledge and the occurrence of nipple irritation during breastfeeding.

Table 4: Relationship between Maternal Knowledge in Breastfeeding and Nipple irritation

Knowledge	Iritati on	No Irritation	Value
	n	n	
Good	19	148	0,00
Poor	138	70	
Total	157	218	

The study revealed that respondents with good knowledge and nipple irritation accounted for 19, while those with poor knowledge and nipple irritation accounted for 138. Good knowledge with no nipple irritation was seen in 148 respondents, and poor knowledge with no nipple irritation was found in 70 respondents. The Chi-square test yielded a P Value of 0.000, which is smaller than the Alpha value ($0.0001 < 0.05$). This statistically indicates, with a 95% confidence level, a significant relationship between maternal knowledge and nipple irritation.

Table 5: Relationship between Maternal Attitude in Breastfeeding and Nipple Irritation

Attitude	Irritation	No Irritation	P Value
	N	N	
Good	57	119	0,00
Poor	100	99	
Total	157	218	

The study showed that respondents with a good attitude and nipple irritation were 57, while those with poor attitude and irritation were 100. Respondents with good attitude and no nipple irritation were 119, and those with poor attitude and no irritation were 99. The Chi-square test result yielded a P Value of 0.000, which is smaller than the Alpha value ($0.000 < 0.05$). This statistically indicates,

with a 95% confidence level, a significant relationship between maternal attitude and nipple irritation.

Knowledge Variable

Table 1 shows that 167 respondents (44%) have good knowledge about breastfeeding mothers because they obtained information from various sources, such as television and other social media. In contrast, 208 respondents (55%) lack knowledge about breastfeeding due to a lack of experience and information given to mothers. The research results indicate that 19 respondents have good information regarding nipple irritation, and 138 respondents have poor information about nipple irritation. There are 148 respondents with good knowledge who did not experience nipple irritation and 70 respondents with less knowledge who did not experience irritation. The chi-square test results show a p-value of 0.00, which is less than the alpha value ($0.001 < 0.05$). Therefore, statistically, it can be concluded with 95% confidence that there is a relationship between maternal knowledge and nipple irritation in breastfeeding mothers. These findings align with Hepilita's research (2016), which states a relationship between breastfeeding mothers' knowledge level and proper breastfeeding techniques. The chi-square statistical test results with $\alpha = 0.05$ are $p = 0.004$, $p < \alpha$.

According to Musriah (2018), experience can influence one's knowledge. Experience is the most valuable source of knowledge and is used as a reference or basis for future actions. Mothers must also possess knowledge about breastfeeding techniques, as a lack of knowledge can adversely affect both mother and child. When asked about breastfeeding techniques, most respondents answered that breastfeeding should be done until the age of two years. This is because mothers are unaware that breastfeeding alone until two years old can impede child development. Conversely, most respondents correctly answered when asked about the appropriate time to breastfeed when the baby needs it. This is because mothers know that a baby's stomach cannot hold much food.

This research is in line with Muliawati's study (2012), which applied breastfeeding techniques for single children at RB MTA Semanggi Surakarta. In this study, 37 people were randomly selected. The survey results showed that 20 respondents (54%) had low knowledge, 15 respondents (41%) had sufficient knowledge, and 2 respondents (5%) had good knowledge about breastfeeding single children at MTA. Semanggi Maternity Hospital Surakarta in April 2011. The findings of this study are in line with the research by Yuliasri and Satyaningrum (2012), who found a relationship between breastfeeding knowledge and practice in Panggungharjo Village, Sewon District, Bantul Regency. According to the researchers, the higher the level of knowledge, the greater the independence of respondents in breastfeeding. The study involved several mothers. Although many mothers correctly practiced breastfeeding, they still experienced nipple pain. The mothers' knowledge significantly affected nipple irritation in this study.

Attitude Variable

The survey results showed that 57 respondents had a good attitude towards nipple irritation, and 100 respondents had a bad attitude towards nipple irritation. There were 119 respondents with a positive attitude if there was no nipple irritation and 99 respondents with a negative attitude if there was no nipple irritation. The chi-square test results show a p-value of 0.00, which is less than the alpha value ($0.001 < 0.05$). Therefore, statistically, it can be concluded with 95% confidence that there is a relationship between maternal attitude and nipple irritation in breastfeeding mothers. According to Trianita and Nopriantini (2018), the attitude of breastfeeding mothers is reflected in the mothers' assessment of breastfeeding, especially regarding breastfeeding practices. A breastfeeding mother's attitude may or may not be reflected in her breastfeeding actions or practices. A positive attitude is expressed as an interest in trying to accept and change inadequate or inappropriate breastfeeding behaviors into correct ones using proper breastfeeding techniques (Qomariah and Fitiyanti, 2012). Based on Nia et al.'s research in 2020, survey results showed that 16 respondents had negative attitudes. Nine respondents had negative attitudes, most of whom incorrectly practiced breastfeeding techniques. Even though some respondents had a poor attitude, there were still 7 respondents who

correctly implemented breastfeeding techniques. The incorrect breastfeeding techniques were mainly due to improper attachment, not expressing milk before breastfeeding, and not burping the baby after breastfeeding. This indicates that the mother's attitude towards good breastfeeding practices is related to the effort to breastfeed her baby correctly.

These research findings align with the study by Trianita and Nopriantin (2018), which found a relationship between breastfeeding mothers' attitudes and correct breastfeeding practices in infants aged 0-24 months in Sumberannyari Village, Nguling District, Pasuruan Administrative Region. According to Trianita and Nopriantin (2018), if the attitude towards breastfeeding practices is positive, mothers can breastfeed using proper techniques. However, there may be mothers with positive attitudes who do not practice correct breastfeeding techniques, as even though they agree with the proper breastfeeding methods, their physical condition and environmental factors may still affect their well-being.

The results of this study indicate that maternal attitudes affect breastfeeding techniques in preventing nipple irritation. Lack of information about nipple irritation significantly impacts mothers, especially new breastfeeding mothers. In this study, some mothers knew how to breastfeed and maintain proper positions but did not practice them, often due to haste, affecting breastfeeding positions

3. Conclusion

Based on the results and discussion, it can be concluded: There is a relationship between breastfeeding mothers' knowledge and the prevalence of nipple irritation, with a p-value of 0.00 in the chi-square test. There is a relationship between breastfeeding mothers' knowledge and attitudes and the occurrence of nipple irritation. The chi-square test gives a p-value of 0.00. programs that incorporate designated and delicate healthful intercessions. These projects require cross-area collaboration and coordination at all administrative, private, and social levels. To quit stunting, an incorporated COMBI (Communication for Behavioral Impact) technique is required. The ineffectively planned plan set up makes it trying to facilitate, simply decide, and consider individuals responsible. The 20 individuals from the Union Group for the Speed increase of Lessening Stunting act as the populace and test for this review. The motivation behind this study is to learn what the COMBI approach means for the rate at which stunting episodes happen in Pamekasan Regency in 2024. Methods: This sort of study utilizes an example size of 20 respondents and a semi trial nonequivalent benchmark group plan. approaches for get-together information that utilization pre-and post. In the event that there was a massive contrast between the treatment gathering's and the benchmark group's posttest scores, the information was examined utilizing a free t test and the Standardize Quality Test (N-Gain score). Results: In light of the exploration discoveries, the COMBI method affects the information level of the stunting union group for the situation and control bunches in Pamekasan Regency (Sig. 0.042 <0.05). It likewise affects the disposition of the case and control bunch stunting union group in Pamekasan Regency (Sig. 0.042 <0.05). At long last, there is no impact of the COMBI method of Conduct Change Communication System with the activities of the stunting union group for the case and control bunches in Pamekasan.

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