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Analysis of Factors Affecting Breastfeeding Expenditure on Post Sectio Caesarea Mothers

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Abstract

Breastfeeding provides both short-term and long-term benefits for both the child and the mother, including protecting the child against a variety of acute and chronic disorders. However, the high incidence of CS and the low number of breastfeeding mothers with cesarean delivery have a lot of negative effects on the breastfeeding process. Data obtained from Dairi district in 2021 showed that the coverage of breastfeeding was only 40%, while in Sidikalang Hospital, post-sc mothers gave breast milk. only 35%. The purpose of this study was to determine the effect of the factors that influence the release of breast milk for post SC mothers at Sidikalang Hospital, Dairi Regency in 2021. The type of research was mixed method with sequential explanatory design. The population is 120 respondents and purposive sampling is 54 respondents. 3 key informants representing Post SC mothers, 8 supporting informants. Data analysis used univariate, bivariate and multivariate analysis as well as qualitative data analysis including reduction, display and conclusion drawing/verification. The results showed that there was an effect of breastfeeding frequency (sig 0.000), breast care (sig 0.002), mother's diet (sig 0.000) breastfeeding technique. (sig 0.000) the SPEOS method (sig 0.000), While there was no effect of hospitalization (sig 0.210), birth weight (sig 0.201), gestational age (sig 0.201), the most influential variables were maternal food with a value of B = 4.084 and OR = 59.93 to the expenditure of breast milk for post SCdi RSUD Sidikalang, Dairi Regency in 2021.

Introduction

Breastfeeding provides short-term and long-term benefits for children and their mothers, including protecting children against various acute and chronic disorders (Lumbanraja, 2015). In Southeast Asia, the achievement of exclusive breastfeeding rates in several countries is still low in Southeast Asia, such as the Philippines, where the rate of exclusive breastfeeding is 34%, Vietnam, which is 27%, while in Myanmar, the rate of exclusive breastfeeding is 24% (Sudargo et al. , 2019).

Based on data from the Ministry of Health of the Ministry of Health of the Republic of Indonesia in 2019, in Indonesia, Aceh achieved exclusive breastfeeding at 48.17%, West Sumatra at 68.11%, and the smallest in Riau at 35.01%. West Java is already high by 90.79%, and in East Java by 77.51%. In East Kalimantan it is 70.02%, South Sulawesi is 70.45%, North Maluku is 60.05%. The lowest is in Gorontalo at 30.71% (Indonesia, 2020).

North Sumatra Province from 2012-2017 tends to increase, except in 2016 there was a very drastic decline of 16.09% from the 2015 achievement. The 2017 achievement of 45.31% has reached the national target of 40%. There are 16 out of 33 districts/cities with 40% achievement, namely Asahan 96.61%, South Labuhanbatu 89.41%, Phakpak Bharat 75.11%, Padang Sidempuan 72.05%, Batu Bara 67.77%, Tebing Tinggi 62.44%, Simalungun 61.86%, Langkat 58.93%, Humbang Hasundutan 53.52%, Karo 47.05%. (North Sumatra Provincial Health Office, 2018).

Breast care is an attempt to stimulate the secretion of the hormone Oxytocin to produce breast milk as early as possible and play an important role in dealing with breastfeeding problems. The purpose of the treatment is to expedite the production of breast milk by stimulating the mammary glands and treating sore nipples and caring for the nipples to keep them limp, not hard, and not dry (Mukarramah, 2021).

Implementation of combined care will help facilitate breastfeeding. The hormone oxytocin is very influential on the emotional state of the mother. If the mother is calm and happy because she can hug her baby, then this hormone will increase and the milk will come out quickly so that the baby is more satisfied with getting breast milk (Musafa'ah et al., 2017).

Nutrition of breastfeeding mothers is one of the factors that affect the smooth production and expenditure of breast milk. Inadequate nutrition and stress can reduce the amount of breast milk production (Radharisnawati & Kundre, 2017). Postpartum mother nutrition is needed to produce breast milk and restore maternal health.

Babies with low birth weight (LBW) have a lower ability to suck breast milk compared to babies with normal birth weight >2500 grams. will affect the stimulation of the hormones prolactin and oxytocin in producing breast milk (Gustirini, 2018).

Gestational age plays an important role in the production of breast milk, which is related to the baby's weight, which greatly influences gestational age. When a baby is born at a premature gestational age of <37 weeks, the result is that the baby's suction power is not maximal, causing no stimulation of prolactin to prepare breast milk, so that over time breast milk production is decreasing or stopping (Dewi, 2019).

Breastfeeding and attachment techniques cannot be performed in the first hour of cesarean delivery. The condition of post-SC mothers makes it difficult for mothers to be able to breastfeed their babies. Starting from the position of the mother who has not been able to mobilize to breastfeed before 6 hours post SC. Likewise, after the first mobilization, it was limited to left and right tilted positions. This situation is not uncommon for mothers to breastfeed with the correct breastfeeding technique. With an improper breastfeeding position, the nipples can experience blisters, cracks or fissures are formed. Usually this situation occurs in the first week after the baby is born. In this situation, a mother often rarely breastfeeds or even stops breastfeeding her baby because her nipples hurt (Evayanti, 2019).

According to Maria Porland, (2016) Most healthy babies need 8-12 feedings per day in 24 hours, but if they are sick, born prematurely, or separated from their mother, they will not do as usual. Therefore, mothers should be encouraged to excrete milk as soon as possible by expressing immediately after the baby is born. This is useful for stimulating the production of prolactin starting milk production. One way to facilitate breast milk production is the Marmet technique. The Marmet technique is a manual expression of breast milk and helps the milk ejection reflex (Milk Ejection Reflex). The Marmet technique developed massage and stimulation methods to help lock the milk ejection reflex more optimally. The success of this technique is the combination of massage and milk ejection methods. This marmet technique is one of the safest ways that can be done to stimulate the breasts to produce more milk. (Angriani et al., 2018).

Based on the explanation above, the researchers observed the high incidence of CS and the low number of breastfeeding mothers with cesarean delivery, which had a lot of negative effects on the breastfeeding process. So that researchers are interested in analyzing the factors that influence the frequency of breastfeeding, breast care, hospitalization, maternal diet, birth weight, breastfeeding technique, gestational age, guinea pig technique, SPEOS method on breastfeeding post SC mothers at the Sidikalang Regional General Hospital. Dairi District.

Methods

This research was conducted at the Sidikalang Dairi Regional General Hospital in 2021. This research was carried out in September 2021. The population in this study was all mothers who had Post SC at Sidikalang Hospital in 2021 totaling 12 people. The sample in this study was a purposive sampling technique of 54 people. The design of this research uses mix methods with sequential explanatory design. Mixed research is a research approach that combines quantitative and qualitative research. According to Sugiono (2011) states that the combined research method (mix methods) is a research method that combines or combines quantitative methods with qualitative methods to be used together in a research activity, so that more comprehensive, valid, reliable and objective data are obtained. (Sugiyono, 2013). The aim of the study was to determine the factors of breastfeeding frequency, breast care, hospitalization, maternal diet, birth weight, breastfeeding technique, gestational age, SPEOS method that affect breast milk production in post-SC mothers. Analysis of quantitative data used is Univariate, Bivariate, Multivariate analysis. And qualitative data analysis is Reduction, Display, Conclusion Drawing/Verification.

Results and Discussion

After doing research on Factors Affecting Breastfeeding in Post SC mothers at Sidikalang Hospital, Dairi Regency in 2021.

Table 1. Frequency Distribution of Respondents' Characteristics at the Sidikalang Regional General Hospital (RSUD) in 2021.

No.	Characteristics of Respondents	f	Percentage (%)
A	**Mother's Age:**		
1	20-35 Years	41	75,9
2	>35 years	13	24,1
B	**Mother's Education:**		
1	Primary Education (Elementary to junior high)	12	22,0
2	Secondary Education (HIGH SCHOOL)	33	61,1
3	Higher Education	9	16,7
C	**Mother's work:**		
1	Not Working	14	25,9
2	Work	40	74,1
D	**Parity:**		
1	Primipara	12	22,2
2	Sekundipara	20	37,0
3	Multipara	22	40,7
	Sum	**54**	**100,0**

Based on table 1. shows that the frequency distribution of respondents' characteristics at the Sidikalang Regional General Hospital (RSUD) in 2021 based on maternal age is mostly mothers aged 20-35 years as many as 41 people (75.9%) while for mothers age >35 years is 13 people (24.1%), based on the mother's education, most of the mothers had secondary education (SMA) as many as 33 people (61.1%) while for elementary/junior high school and university education, respectively 22.2% and 16.7%, based on the mother's occupation, most of the working mothers were 40 people (74.1%) while for the mothers who did not work as many as 25.9%

For the characteristics of respondents at the Sidikalang Regional General Hospital (RSUD) in 2021 based on maternal parity, most of the parity mothers were multi-par as many as 22 people (40.7%) while for primiparas and secundiparas, respectively 22.2% and 37.0%.

Table 2. Distribution of the Frequency of Breastfeeding, Breast Care, Combined Care, Mother's Food, Baby's Birth Weight, Breastfeeding Techniques, Gestational Age, Breastfeeding Expenditure, Breastfeeding Expenditure after the SPEOS Method at the Sidikalang Regional General Hospital (RSUD) in 2021.

No.	Variable	Frequency (f)	Percentage (%)
A	**Frequency of Breastfeeding**		
1	Disorganized	22	40,7
2	Orderly	32	59,3
B	**Breast Care**		
1	Done badly	16	29,6
2	Well done	38	70,4
C	**Rawat Join**		
1	Not done	2	3,7
2	Done	52	96,3
D	**Mother's Food**		
1	Bad	21	38,9
2	Good	33	61,1
E	**Baby's Birth Weight**		
1	<2500 grams	2	3,7
2	≥2500 grams	52	96,3
F	**Breastfeeding Techniques**		
1	Bad	17	31,5
2	Good	37	68,5
G	**Gestational Age**		
1	Premature (<37 weeks)	2	3,7
2	Matur (37-40 weeks)	51	94,4
3	Postdate (>40 weeks)	1	1,9
H	**Breast milk production**		
1	Not Smooth	25	46,3
2	Fluent	29	53,7
I	**SPEOS method**		
1	Not Smooth	14	25.9
2	Fluent	40	74,1
	Sum	**54**	**100,0**

Based on table 2. above, it shows that the distribution of breastfeeding frequency at the Sidikalang Regional General Hospital in 2021 is mostly the frequency of regular breastfeeding mothers as many as 32 people (59.3%) while the frequency of irregular breastfeeding mothers is

40.7%. Based on the frequency distribution of breast care, most of the mothers who did breast care were 38 people (70.4%) while breast care was not done well 29.6%. Based on the frequency distribution of hospitalization, most of the mothers were joined as many as 52 people (96.3%) while the mothers were not hospitalized with 2 people (3.7%). Based on the frequency distribution of maternal food, the majority of maternal food consumption was good as many as 33 people (61.1%) while the consumption of poor maternal food was 21 people (38.9%). as many as 52 people (96.3%) while the baby's birth weight <2500 grams was 3.7%.

Based on the frequency distribution of breastfeeding techniques, the majority of mothers with breastfeeding techniques performed well as many as 37 people (68.5%) while breastfeeding techniques were carried out poorly 31.5%. Based on the frequency distribution of gestational age, most of the gestational age of mothers were mature (37-40 weeks) as many as 51 people (94.4%) while the least was postdate (>40) as many as 1.9%. Based on the distribution of the frequency of milk expulsion before the SPEOS method was carried out, the majority of the flow of breast milk was smooth as many as 29 people (53.7%) while the expenditure of breast milk was not smooth as much as 46.3%. Based on the distribution of the frequency of breastfeeding after the SPEOS method was used, the majority of the flow of breast milk was smooth as many as 40 people (74.1%) while the expenditure of breast milk was not smooth as much as 25.9%.

Bivariate Analysis

Table 3. Cross-tabulation of Breastfeeding Frequency, Breast Care, Combined Care, Mother's Food, Baby's Birth Weight, Breastfeeding Techniques, Gestational Age on Post SC Mother's Milk Expenditure at the Sidikalang Regional General Hospital (RSUD) in 2021

No.	Variable	Smooth Production of Breast Milk						P-Value
		Not Smooth		Fluent		Total		
		f	%	f	%	f	%	
A	**Frequency of Breastfeeding**							
1	Irregular	18	33,3	4	7,4	22	40,7	0,000
2	Orderly	7	13,0	25	46,3	32	59,3	
B	**Breast Care**							
1	Done with nobaik	13	24.1	3	5.5	16	29.6	0,002
2	Well done	12	22.2	26	48,2	38	70.4	
C	**Rawat Join**							
1	Not Done	2	3,7	0	0	2	3,7	0,210
2	Done	23	42.6	29	53.7	52	96.3	
D	**Mother's Food**							
1	Bad	20	37,0	1	1,9	21	38,9	0,000
2	Good	5	9,3	28	51,8	33	61,1	
E	**Baby's Birth Weight**							
1	<2500grams	2	3,7	0	0	2	3.7	0,210
2	≥2500grams	23	42,6	29	53,7	52	96,3	
F	**Breastfeeding Techniques**							
1	Bad	16	29,6	1	1,8	17	31.5	0,000
2	Good	9	16,7	28	51,9	37	68,5	
G	**Gestational Age**							
1	Premature <37 weeks	2	3.7	0	0,00	2	3.7	0,000
2	Matur 37-40 weeks	23	42,6	28	51,9	51	94,4	
3	Postdate >40 weeks	0	0	1	1,9	1	1,9	
	Sum	**25**	**46,3**	**29**	**53,7**	**54**	**100**	

Based on table 3 above, the results of the cross tabulation of breastfeeding techniques on the smooth flow of breast milk for post-SC mothers were obtained from 54 people, mothers with poor breastfeeding techniques were 17 (31.5%) with non-smooth milk expulsion as many as 16 people (29.6%). and 1 person (1.8%). Meanwhile, mothers with good breastfeeding techniques were 37 (68.5%) with non-smooth milk expulsion as many as 9 people (16.7%) and smooth breastfeeding as many as 28 people (68.5%). Statistical test results using chi-square test shows that the p value of 0.000 is smaller than 0.05 which means that there is an influence between breastfeeding techniques on the smooth discharge of breast milk for post SC mothers.

Effect of Gestational Age on Smooth Expenditure of Breast Milk

Based on table 3. above, the results of the cross tabulation of gestational age on the smooth flow of breast milk for post-SC mothers were obtained from 54 mothers who gave birth with premature gestational age <37 weeks as many as 2 people (3.7%) with non-smooth milk expulsion as many as 2 people (3.7%) and there is no smooth breastfeeding. And mothers who gave birth with a gestational age of 37-40 weeks were 51 people (94.4%) with 23 people (42.6%) non-smooth breastfeeding and 28 (51.9%). Meanwhile, gestational age >40 weeks only 1 person (1.9%) with smooth breastfeeding. The results of statistical tests using the chi-square test show that the p value of 0.201 is greater than 0.05, which means that there is no effect between gestational age on smooth production of breast milk for post SC mothers

Table 4. The effect of before and after the SPEOS method on breast milk production for post SC mothers at the Sidikalang Regional General Hospital (RSUD) in 2021.

No	Nama Variabel	Mean	S.D	S.E	Sig.	n
	Metode SPEOS				0,000	54
1	Pre Test Experiment SPEOS	4,89	1,850	0,252		
2	Post Test Experiment SPEOS	6,70	1,798	0,245		

The average milk production before the SPEOS method was performed was 4.89 with a standard deviation of 1.850. After using the SPEOS method, the average milk output was 6.70 with a standard deviation of 1.789. It can be seen that the mean difference between before and after the SPEOS method is 1,815 with a standard deviation of 1,100. The results of the statistical test showed that the value of p = 0.000 is smaller than 0.005, so it can be concluded that there is a difference in the smooth flow of breast milk before and after the SPEOS method is carried out so that Ha is accepted and H0 is rejected.

Multivariate Analysis

Table 5. Logistic Regression Test Results

No.	Variable Name	B	S.E.	Wald	Df	Sig.	Exp(B)
1	Frequency of Breastfeeding	2,311	1,065	4,712	1	0,030	10,089
2	Breast Care	1,484	1,232	1,451	1	0,228	4,410
3	Rawat Join	-19,307	630206	0,000	1	1.000	0,000
4	Mother's Food	4,084	1,384	8,707	1	0,003	59,938
5	Baby's Birth Weight	16,210	40192	0,000	1	1,000	1,096
6	Breastfeeding Techniques	1,930	1,621	1,419	1	0,234	6,892
7	Gestational Age	18,316	40192	0,000	1	1,000	9,010
Constant-47,171			55284,957	0,000	1	0,999	0,000

Based on table 5. The results of the Logistic Regression test above are obtained that all research variables are analyzed. These variables include the frequency of breastfeeding obtained sig value. 0.030, breast care obtained sig value. 0.228, hospitalization obtained sig value. 1000 mother's food obtained sig value. 0.003, the baby's birth weight obtained a sig value. 1000, breastfeeding

technique obtained sig value. 0.234, gestational age obtained sig value. 1,000. The most dominant factor that affects the smooth flow of breast milk is the mother's food variable with a Sig value. 0.003 with a value of B = 4.084 and OR = 59.938

Quantitative Research

The Effect of Breastfeeding Frequency on Post SC Mother's Milk Expenditure

Regular breastfeeding frequency can affect milk production. The nipple and areola contain nerve endings which are essential for the suckling reflex. If the nipple is often sucked by the baby, the stimulation will be transmitted to the hypothalamus to secrete prolactin and oxytocin. This causes milk to be produced and flowed (Angriani et al., 2018)

This study is in line with research conducted by Sasmita (2018) entitled Factors with a cross-sectional design which states that there is a significant relationship between breastfeeding frequency (p value = 0.001) and milk production. (SASMITA, 2018)

The Effect of Breast Care on Post SC Ibu Mother's Breast Milk Expenditure

Breast care in pregnancy (Breast Care Antenatal) is an effort to facilitate the flow of milk, and prevent problems that may arise during breastfeeding such as sore nipples or blisters, swollen breasts, blocked milk ducts. Breast care is not only done before giving birth but also after giving birth. Breast care is done twice a day while bathing and if there are problems with breastfeeding, it is also done twice a day (Wahyuningsih, 2018)

The results of this study are in line with Riyanti et al., (2019)'s research suggest with a quantitative research method of observational with a cross sectional design approach. A sample of 38 people was taken by purposive sampling. The results showed that there was an effect of oxytocin massage with breast care on the smoothness of breast milk in post-SC mothers but Breast Care was more effective in increasing the smoothness of breast milk than Oxytocin Massage.

During pregnancy from 7-8 months, you have started to do breast care, so that the breasts can produce enough milk and the nipples are not cracked when the baby is sucked. The purpose of breast care after childbirth is to maintain breast hygiene to avoid infection and increase milk production by stimulating the mammary glands through massage. In addition, this treatment is also useful for preventing breast milk damming/swelling of the breasts, psychological preparation of breastfeeding mothers and flexing and strengthening the nipples. (Mukarramah, 2021)

The Effect of Admission on Breastfeeding Expenditure Post SC

Joining in is a method of care in which the mother and newborn are in a room or place together for 24 hours a day. So that whenever the baby needs, the mother can immediately give attention. (Susanthi, 2021)

The theory according to Roesli (2008) where the mother's feelings can inhibit the release of breast milk. Likewise, babies should be breastfed immediately, but because babies have been given formula milk, even though they are hospitalized, physical and psychological factors are disrupted so that the frequency of breastfeeding is lower so that the oxytocin and prolactin reflexes are reduced to trigger the process of breastfeeding being inhibited.

The results showed that the regression coefficient for the outpatient variable was negative, indicating that by assuming the absence of other independent variables, if hospitalization increased, there was no effect on the fluency of breast milk production. This shows that there is no effect of hospitalization on the smooth flow of breast milk, which will increase. (Roesli, 2000)

The Effect of Mother's Food on Mother's Milk Expenditure Post

The results of this study are in line with Radharisnawati (2017), entitled the relationship of meeting the nutritional needs of mothers with the smoothness of breast milk (ASI) in breastfeeding mothers at the Bahu Health Center in Manado City. Based on the results of statistical tests using Chi-Square, obtained p value = 0.003. This p value is smaller than 0.05, which indicates that there is a relationship between the fulfillment of maternal nutritional needs and the smoothness of breast milk for breastfeeding mothers at the Bahu Health Center in Manado City.

According to Proverawati & Asfuah (2009), the state of malnutrition, namely the level of mother's weight both during pregnancy and breastfeeding can affect the volume of breast milk. Breast milk production in malnourished mothers becomes less in number compared to mothers whose nutrition is fulfilled. (Atikah Proverawati et al., 2009)

The results of the study are in line with this study conducted by Ningrum (2016) entitled the relationship between energy and protein adequacy with breast milk production in breastfeeding mothers in Bawen Village, Bawen District. 2016 and there is a relationship between the level of protein adequacy with milk production in breastfeeding mothers in Bawen Village, Bawen District in 2016.

The lack of smooth breast milk (ASI) and the unmet nutritional needs of mothers are triggered by an imbalance of food consumed by mothers with breast milk (ASI) produced because the nutritional needs of breastfeeding mothers must be more than usual because mothers need nutrition for two people, namely for the mother and the mother. the baby. So that breastfeeding mothers must pay attention and increase their nutritional needs because with balanced nutrition will support the smooth production of breast milk. (Ningrum, 1967)

How can breastfeeding be smooth if the food that the mother consumes is bad, the impact is that the body is unable to produce breast milk because there are no ingredients to be used in the production process. Plus foods that contain lots of high protein are foods that are able to replace or rejuvenate damaged cells during the labor process and the damage becomes more severe due to cesarean delivery. (Wahyuningsih, 2018)

The logistic regression test showed that the regression coefficient of the mother's food variable was positive B=4,093 stating that by assuming the absence of other independent variables, if the mother's diet increased, the smoothness of breast milk production would increase. This shows that the better the food that the mother consumes, the smooth flow of breast milk will increase.

Effect of Baby's Birth Weight on Mother's Breastfeeding Production

Infant birth weight is a condition that describes a baby physically having a normal weight as measured by weighing at birth. (Gustirini, 2018)

Dindy (2016) with the research title Overview of Breastfeeding Babies with Post Sectio Caesarea at RSU Tangerang and private hospitals in Depok. From the results of the study, all babies born with low birth weight conditions experienced delays in breastfeeding. There are several reasons why babies are not given complementary milk other than breast milk because babies with low birth weight (LBW) are considered too weak to suck directly from the mother's breast so that assistance is needed when giving breast milk. (Dindy et al., 2016)

Low birth weight (LBW) babies have a lower ability to suck breast milk than babies with normal birth weight (babies born more than 2500 g or 2.5 kg). Babies with low birth weight have the ability to suck breast milk, the frequency and duration of breastfeeding are lower than normal birth weight babies which will ultimately affect the stimulation of the hormones prolactin and oxytocin in producing breast milk. (Dindy et al., 2016)

The Effect of Breastfeeding Techniques on Breast Milk Production

Breastfeeding technique is a method of giving breast milk by a mother to her baby, in order to meet the nutritional needs of the baby. Correct Breastfeeding Technique is how to give breast milk to the baby with the attachment and position of the mother and baby correctly. According to Rinata (2016) the correct breastfeeding technique is how to give breast milk to the baby with the attachment and position of the mother and baby correctly. To achieve successful breastfeeding requires knowledge of correct breastfeeding techniques. (Rinata et al., 2016)

The research conducted by Purnama and Sulastri (2016) with the research title "Increasing Knowledge of Breastfeeding Techniques for Post Sectio Caesarean Patients at RSU Assalam Gemolong". The design of qualitative research is descriptive method or case study approach, namely the scientific method with the nature of data collection, analyzing data and drawing conclusions. from existing data. The results showed that the results of the above objectives after the 3x24 hour action could be concluded that the patient already knew about breastfeeding techniques or breastfeeding that was good and correct through the health education provided and there was satisfaction while breastfeeding the baby. (Purnama & Sulastri, 2016)

This study is in line with Rinata (2016) entitled Breastfeeding Techniques, Attachment, and Effectiveness of Sucking-Studies on breastfeeding mothers in Sidoarjo Hospital using a cross-sectional analytic design using interview and observation primary data. Sampling technique is random sampling. The results show that there is a significant relationship between attachment and breastfeeding techniques for breastfeeding mothers in Sidoarjo Hospital. (Rinata et al., 2016)

Effect of Gestational Age on PostSC Mother's Breast Milk Production

Gestational age is a limitation of the term pregnancy process and is related to the complete and mature growth and development of the newborn. The period at the end of term pregnancy affects the condition of the child's birth weight and the maturity of the baby's suction power. The theory shows that gestational age plays an important role in milk production related to baby weight which greatly influences gestational age. (SASMITA, 2018)

Research conducted by Purnama E and Sulastri (2016) with the research title "Increasing Knowledge of Breastfeeding Techniques for Post Sectio Caesarea Patients at Assalam Gemolong General Hospital". The research design is qualitative descriptive method or with a case study approach, namely the scientific method with the nature of collecting data, analyzing data and drawing conclusions from existing data. The results showed that the results of the above objectives after 3x24 hours of action can be concluded that the patient already knows about breastfeeding or breastfeeding techniques that are good and correct through the health education provided and there is satisfaction while breastfeeding the baby.

Babies born prematurely or babies born before term have not been able to suckle effectively. This is because babies born prematurely (gestational age less than 37 weeks) are very weak and unable to suckle effectively so that milk production is lower than babies born not premature. Weak sucking ability in premature babies can be caused by low body weight and the imperfect functioning of the baby's organs. As a result, when breastfeeding stimulation is reduced, milk production is also automatically reduced. (Hastuti et al., 2017)

Effect of SPEOS Method on Post SC. Breastfeeding Expenditure

The SPEOS method is an Endorphin, Oxytocin and Suggestive Massage Stimulation method, namely Massage by combining it with several massages to facilitate breast milk. The SPEOS method is to stimulate the release of the hormone oxytocin through oxytocin massage, provide a sense of comfort and foster confidence in mothers that breast milk will come out and mothers can exclusively breastfeed with endorphin and suggestive massage. (Nugraheni & Heryati, 2017)

This research is strengthened by the theory expressed by Pillitry (2003) oxytocin massage can

stimulate the anterior and posterior pituitary to secrete the hormone oxytocin. Thus, frequent breastfeeding is good and it is important to empty the breasts so that breast engorgement does not occur, but on the contrary accelerates the release of breast milk. By doing massage along the spine (vertebrae) to the fifth-sixth costae bone, it will stimulate the hormones prolactin and oxytocin, so that breast milk can automatically run more smoothly. In addition to facilitating breast milk, oxytocin massage provides comfort for postpartum mothers, reduces breast swelling, reduces breast milk blockage, stimulates the release of the hormone oxytocin, maintains milk production when mother and baby are sick. (Husna, 2019)

Endorphins can reduce or relieve pain in mothers who will give birth. Endorphin massage was created which is a light touch massage technique that can normalize heart rate and blood pressure, as well as increase relaxed conditions in the post-Section Caesarea mother's body by triggering a feeling of comfort through the skin surface. This is also in accordance with the theory, oxytocin massage is done to stimulate the oxytocin reflex. Breastfeeding early in the first hours of birth if it can't be done by the mother will cause the breastfeeding process to be delayed. Positive suggestions / affirmations are carried out to prepare breast milk to flow smoothly and meet the needs of the baby from the first day he was born in the world. (Sari & Rahayu, 2017)

Qualitative Research

Informant I

The results of in-depth interviews about the factors that influence the release of breast milk in post-SC mothers from husbands, doctors, and midwives, it was found that. that they know the benefits and importance of breastfeeding. In which Informant 1 clearly stated "What I know is that breast milk is beneficial for babies as food and prevents babies from contracting various diseases." Mother also said "What I know is that breastfeeding is according to the baby's schedule, so if the baby releases itself, it means the baby is enough".

The mother's understanding is due to the information provided by the health worker/midwife where the informant conducts an examination during pregnancy. It is evident from the results of the informant's statement who said "During late pregnancy the midwife taught how to care for breasts and other information about breastfeeding. And at the posyandu, they are given additional food and milk and iron vitamins are carried out in a group class for pregnant women every month. There, they were checked for HB, HIV, TT immunization and were given a pink book. The midwife said it was a ping book, said the midwife, so that you can read it at home as a guidebook." Mother also found out information and got additional food when checking in at the posyandu. Where the mother explained, "My midwife said I had to eat more from the portion I ate before I was pregnant because there was already an extra baby to be fed. And when I checked my pregnancy, I was advised to buy breastfeeding milk and drink it 2 times a day. In the class for pregnant women, I was also given additional food such as bread and green bean porridge and breast-feeding mothers were given milk."

This statement is in line with the statement of the Pediatrician who said that "Theoretically, lactogenesis occurs at 16 weeks of gestation. Milk also comes out along with the release of the placenta from the uterus. From the theory there is no effect of breast milk booster on milk production. The baby's sucking effect stimulates the brain to stimulate breast milk. The breastfeeding supplement that I've seen is domperidone for new mothers. And the katuk leaf is still controversial, but if it is consumed it is not a problem. But more importantly breast milk is prepared during pregnancy through nutrition and fluids; protein carbohydrates and fats. Because nutrition is the main ingredient to form breast milk. So nutrients and fluids that will help increase milk production.

The results of this study are in line with Radharisnawati (2017) with the title of the relationship between meeting the nutritional needs of mothers with the smoothness of breast milk (ASI) in

breastfeeding mothers at the Bahu Health Center in Manado City. Based on the results of statistical tests using Chi-Square, p value = 0.003 was obtained. This p value is smaller than 0.05, which indicates that there is a relationship between the fulfillment of maternal nutritional needs and the smoothness of breast milk for breastfeeding mothers at the Bahu Health Center in Manado City. (Radharisnawati & Kundre, 2017)

The results of this study are in line with the quantitative results of multivariate data analysis. The results obtained are "The most dominant factor that affects the smooth flow of breast milk is the mother's food variable with a value of Sig. 0.003 with a value of B = 4.084 and OR = 59.938".

Informant II

Based on the interview with informant 2, he said that breast milk is the main source of energy for babies and contains immune substances for babies so they are not susceptible to disease. He knows the benefits and importance of breastfeeding. Informant 2 clearly stated that the benefits of breastfeeding for babies are that the baby's immune system is getting stronger, the benefits for mothers are to reduce bleeding after giving birth. The frequency of breastfeeding mothers regularly 8-12 times a day and breastfeeding 7-10 minutes on one breast after the second day after SC surgery. The production of breast milk is getting smoother day by day. She also looks for information on breast care and breastfeeding information by reading from the media and finding out with her friends.

Based on the interview, the researcher asked whether the mother had an IMD in the hospital after surgery? Mother replied, "Mom, no, no. Nobody recommends it." This explains why breast milk on the first day of birth is not smooth, as explained by an OBGIN Specialist when asked about the effect of SC on breast milk production that "From several studies, SC has a risk of slow milk production, especially for mothers who do not do IMD. So we modify it by doing IMD at 1 hour after giving birth at the longest." Ami J Hobbs et al research conclusion statement that "We found that when controlling for socio-demographic and labor and delivery characteristics, planned c-section is associated with early breastfeeding cessation. Anticipatory guidance around breastfeeding could be provided to women considering a planned c-section. As well, additional supportive care could be made available to lactating women with emergency c-sections, within the first 24 hours post birth and throughout the early postpartum period".

In this situation, it is the health workers who should play a greater role. Midwives are health workers who can assist the implementation of IMD. However, midwives/health workers prefer to give formula milk on the grounds that many patients cannot express breast milk, wherein the midwife stated "The obstacle I saw from the mother was the pain experienced by the mother after the operation made the mother focus on recovery and choose formula milk to be given. for the baby, and breast milk has not yet come out, so we encourage families to give formula milk. "The role of health workers is very important in supporting government programs to increase the achievement of breastfeeding. So that health workers must actively support mothers to give breast milk at the beginning of birth by doing IMD.

The importance of the information provided by health workers in the implementation of IMD as researched by Ginting E (2018) about the factors that influence the failure of Early Breastfeeding Initiation in post sectio caesarea mothers at the Binjai Army Hospital in 2018. The study used a qualitative descriptive method. Based on the results of interviews and observations, it was found that the mother's lack of knowledge about the importance of implementing IMD was due to the lack of information provided by health workers, husband's support, and motivation, both from the referring midwife during ANC visits and the role of the midwife on duty at the hospital who was supposed to facilitate mother did IMD. The rampant promotion of formula milk in the mass media, friends, direct offers to mothers, has caused a mother's mindset to think that formula milk is as good as breast milk. (Ginting, 2019)

Informant III

Based on the results of in-depth interviews about the factors that influence the release of breast milk in post-SC mothers from husbands, doctors and midwives, Informant 3 said that they knew what the benefits and information were about breastfeeding. Where clearly the mother said "What I know is that breast milk is useful for babies as food and prevents babies from contracting various diseases".

The researcher's findings on the second informant were when the mother said that the old mother-in-law who took care of the mother because her husband was busy taking care of the baby's BPJS administration. To which the mother said “But sometimes she goes to take care of my baby's administration and BPJS card, so I'm just being looked after by my in-laws here and even then, I'm old.

Husband and family support apparently affect the mother's behavior to give breast milk. The weak husband's support was clearly seen when the researcher asked whether the husband wanted the mother to breastfeed the baby. Researchers also analyzed the answers of the three husbands. Informant I's husband answered “Yes. I want my wife to breastfeed my baby.” Informant II's husband also answered “I really want and support my baby to be healthy because of the benefits”. Likewise, the husband of Informant III answered “Yes. I want my baby to be breastfed”.

But the researcher saw that the husband also gave formula milk to the baby and the researcher asked again why the husband chose to delay breastfeeding for the baby and preferred formula milk to which the husband of Informant I replied "My wife has just had surgery so I don't think she can breastfeed and can't sit up. comfortable and still in pain so while my baby is giving formula milk. The nurse said to buy the formula first and wait for the milk to come out. Informant II's husband answered, “The problems are, among others. After the operation my mother is still sore. Also pain and the second is the level of fear and stress of the mother which makes the breast milk not come out as well as does not seem relaxed or not moving freely making breast milk not given, while the husband of Informant III replied "Because the mother has just had surgery, the breast milk has not come out, the baby has not been given and given formula milk for fear of starvation”

This is the same as the answer from another informant, Mrs. Post Sectio Caesaria, who said that because there were many people closest to her who suggested formula milk, she also used formula milk and preferred formula milk because she thought that formula milk contained the same good as breast milk. who have tried formula and their children are smarter and fatter. However, this assumption is wrong. So that mothers who are less informed about breastfeeding will be less confident to breastfeed due to the wrong support from the closest people.

A mother during breastfeeding also needs to get the support of a calm and harmonious atmosphere from her husband in addition to the extended family and environment for the smooth breastfeeding of the baby. The husband plays a very important role in the success of the breastfeeding process, the husband must be number one for his wife and actively participates in caring for the little one. Husband's support for breastfeeding mothers has been supported by a number of studies that show a higher success rate of breastfeeding in mothers who get support from their partners. Meanwhile, breastfeeding mothers who do not get support from their husbands have less success in breastfeeding.

A harmonious relationship with the wife during breastfeeding is able to increase the work of the hormone oxytocin and stimulate the release of endorphins which accelerate the release of breast milk. This hormone affects muscle contractions in the milk ducts so that the breasts are able to expel milk. Husband's support, for example, giving SPEOS massage to his wife lovingly or helping to take care of the little one and accompanying the mother while breastfeeding the little one, it increases the smooth flow of breast milk.

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However, this is far from the reality that was obtained by the researchers. The results of interviews with husbands support none of the husbands who knew about the SPEOS method, instead giving babies formula milk as an alternative before breastfeeding was smooth.

Another factor that slows the release of breast milk at birth is physical and psychological. The results of an interview with a Pediatrician said, “The effect of Sectio on breast milk production can be seen from two sides, namely psychological and physical: Physically we can see the mother feeling pain, fatigue, Psychologically the mother is worried about the surgical wound. Both of these factors greatly affect the production of breast milk. So from what I see, the milk output in post SC is on average on the third day. There are also co-morbidities of pre-eclampsia, maternal age.”

And the statement of the informant's husband who said "The obstacles include. After the operation, the mother is still sore.. also in pain and the second is the level of fear and stress of the mother which makes the breast milk not come out as well as not looking relaxed or not moving freely.. making breast milk not given”

These findings are in line with the research conducted by Pratiwi et al. 2019 with the title The relationship between surgical wound pain, maternal anxiety and baby sucking with milk production at a post-cesarean section at Abdul Wahab Sjahranie Hospital. It was found that there was a significant relationship between surgical wound pain and breast milk production. in post cesarean section with p value 0.000, which means p value < 0.05. There is a significant relationship between maternal anxiety and milk production at post-cesarean section with p value 0.000, which means p value <0.05. There is a relationship between baby's suction and milk production in post-cesarean section with p value 0.028, which means p value < 0.05. (Pratiwi et al., 2016)

Based on the conditions seen by the researcher that the mother who had just had surgery looked sick and anxious about her surgical wound, it was hoped that health workers could overcome this pain and anxiety problem by providing appropriate pain management to reduce maternal pain and anxiety so that the mother could breastfeed the baby. Families and husbands are given health education about this issue so that families can know and support mothers to breastfeed.

Supporting Informants

Based on interviews with OBGYN Specialists, he said that he always promotes breastfeeding by providing education to mothers who have elective CS at 36 weeks of pregnancy. And in emergency patients, education is given 1 hour post SC. The informant also said that breastfeeding should be issued by educating mothers on how to massage their breasts, good and balanced food, and educating mothers so that they do not panic even though they have not yet come out. Emptying more breast milk (supply on demand).

If the baby is not cooperative in breastfeeding, breast milk can be expressed, teaching the mother breastfeeding techniques. Our husbands educate so that their husbands support mothers in breastfeeding. The most important thing is the position when giving breast milk so that the baby can be full. Obstacles to breastfeeding that are seen are disturbing pain. If it hurts, the position we expect to breastfeed must be disturbed. And on the first day it was still tilted left and right so the mother was awkward in breastfeeding if she didn't sit down. So that the milk will take about 2-3 days to come out for those who post SC. The informant had also read about the SPEOS method and he recommended it because it was able to expedite the expulsion of breast milk.

Based on an interview with a Pediatrician, he said that the informant always promoted breastfeeding by convincing the mother and family that breastfeeding was beneficial for the baby and for the mother, as well as bonding for the mother and baby. Breast milk is also beneficial for families from an economic point of view, practical because it does not bother preparing breast milk. Second. Promoting breastfeeding by teaching mothers breastfeeding techniques and

attachments to prevent sore nipples from interfering with the lactation process. Third, with IMD, Rooming In, so breast milk can be stimulated out by the mother seeing and hearing the baby beside her.

Obstacles in breastfeeding that are seen are there are 2 factors, namely psychological and physical. Physical factors are disturbing pain. If it hurts, the position we expect to breastfeed must be disturbed. Psychologically, the mother is worried about the surgical wound. Family support who is worried and not sure about the mother's condition. The solution is to tell them that breastfeeding can help mothers recover faster. Another obstacle is that the baby requires intensive care so that the baby cannot breastfeed. The solution, which is expressed breast milk and given to the baby, is very helpful for the baby's antibodies.

The informant has also read about the SPEOS method that I read that was found to increase milk production and ultimately affect the baby's weight gain. Performed in the first hour and the sixth hour of birth and every day for up to 4 weeks.

Based on an interview with the person in charge of the midwifery room, he said that he always promoted breastfeeding by encouraging roommates to encourage and encourage post sc mothers to breastfeed. Mothers also know how to stimulate milk production. The barriers to breastfeeding seen so far are that post sc mothers feel the pain experienced by mothers after surgery, which makes mothers focus on self-recovery and choose formula milk to be given to their babies, and so there is no milk production so that families give formula milk as a substitute. options until breastfeeding is smooth again.

From the results of interviews with midwives who work in the midwifery room, she understands the benefits of breastfeeding. However, he confirmed that giving formula milk at the beginning of birth is still recommended considering the condition of the mother who is still in pain and worried about the surgical wound and the mobilization of the mother who is still awkward to breastfeed. Midwives also teach correct breastfeeding techniques and breast care so that breast milk comes out quickly and provide education about maternal food so that milk production is abundant.

From interviews with midwives, the referrer said that when doing posyandu the midwife always promoted the benefits and importance of breastfeeding and had a class program for pregnant women in collaboration with village government officials which was held once a month. In the mother's class, midwives and health workers provide education about breast care, lactation information and things that need to be prepared for childbirth.

Conclusion

Based on the results of the research and discussion with the title Analysis of Factors Affecting Breast Milk Expenditure in Post Sectio Caesarea Mothers at the Sidikalang Regional General Hospital in 2021, as described above, it can be concluded that there is a positive and significant effect between the frequency of breastfeeding and the production of breast milk. (sig 0.000<0.05), breast care (sig 0.002<0.05), maternal food (sig 0.000<0.05), breastfeeding techniques (sig 0.000<0.05), SPEOS method (sig 0.000<0, 05). There was no positive and significant effect between hospitalization (sig 0.210 <0.05), birth weight and breast milk expulsion. (sig 0.201 <0.05), gestational age with milk expulsion. (sig 0.201<0.05).

Suggestion

It is recommended for health workers at Sidikalang Hospital to continue to promote breastfeeding by doing IMD and encouraging mothers in breastfeeding and training mothers in breastfeeding techniques, SPEOS techniques. As well as supporting government programs related to breastfeeding and educating mothers to increase breast milk production and not relying on formula milk when the newborn is born. It is hoped that pregnant women, breastfeeding mothers, especially Post SC mothers can increase knowledge and education on

breastfeeding during antenatal care in the third trimester and Post SC conduct IMD and how to stimulate milk production by asking the midwife or nearest health worker.

References

Angriani, R., Sudaryati, E., & Lubis, Z. (2018). Hubungan Frekuensi Menyusui dengan Kelancaran Produksi ASI Ibu Post Partum di Wilayah Kerja Puskesmas Peusangan Selatan Kabupaten Bireuen Provinsi Aceh Tahun 2017. *Jurnal Muara Sains, Teknologi, Kedokteran, Dan Ilmu Kesehatan*, *2*(1), 299–304.

Atikah Proverawati, S. A., Hadijono, R. S., & PP POGI. (2009). *Buku Ajar Gizi untuk Kebidanan*. In Maret.

Dewi, A. D. C. (2019). Faktor-Faktor yang Mempengaruhi Kelancaran Produksi ASI. *Jurnal'Aisyiyah Medika,* 4.

Dindy, C., Studi, P., Keperawatan, I., Kedokteran, F., Ilmu, D. A. N., Islam, U., & Syarif, N. (2016). *Gambaran pemberian asi pada bayi dengan ibu post sectio caesarea di rsu kabupaten tangerang dan rs swasta di depok*.

Dinkes Prov Sumut. (2018). *Profil Kesehatan Sumatera Utara Tahun 2018*. In Dinas kesehatan sumatera utara.

Evayanti, A. (2019). Tekhnik Menyusui Yang Baik Dalam Menurunkan Kejadian Crecked Nipple. *Jurnal SMART Kebidanan, 5(*2), 37. https://doi.org/10.34310/sjkb.v5i2.204

Ginting, E. P. (2019). *Faktor-faktor yang memengaruhi kegagalan inisiasi menyusui dini pada ibu post sectio caesaria di rumah sakit tentara binjai tahun 2018*.

Gustirini, R. (2018). Hubungan Antara Berat Badan Lahir Bayi Dengan Waktu Terjadinya Lactogenesis II Pada Ibu Postpartum. *Masker Medika*, *6*(2), 472-479.

Hastuti, P., Wijayanti, I. T., Bakti, A., Pati, U., Bakti, A., & Pati, U. (2017). Pengaruh pemenuhan nutrisi dan tingkat kecemasan terhadap pengeluaran asi desa sumber rembang. *II*(2).

Husna, N. (2019). Pengaruh Pijat Oksitosin Terhadap Produksi ASI Pada Ibu Post Sectio Caesarea Dirumah Sakit Umum Sundari Medan. Pengaruh Pijat Oksitosin Terhadap Produksi ASI Pada Ibu Post Sectio Caesarea Dirumah Sakit Umum Sundari Medan.

Indonesia, K. 2020. (2020). Profil Kesehatan Indonesia Tahun 2019 (M. Boga Hardhana, S.Si & M. Farida Sibuea, SKM, MSc.PH Winne Widiantini, SKM (eds.)). Kementrian Kesehatan Republik Indonesia.

Lumbanraja, S. N. (2015). *ASI dan Aspek Klinisnya (S. N. Lumbanraja (ed.);* 1st ed.). USU press.

Mukarramah, S. (2021). Pengaruh Perawatan Payudara Terhadap Kelancaran Produksi Asi Pada Ibu Postpartum Di Puskesmas Kassi-Kassi, Makassar. *Media Keperawatan: Politeknik Kesehatan Makassar*, *12*(1), 11. https://doi.org/10.32382/jmk.v12i1.2143

Musafa'ah, M., A, S. R. D., & Kholis, A. H. (2017). Hubungan Rawat Gabung Dengan Produksi Asi Pada Ibu Nifas Di Ruang Melati Rsud Kabupaten Jombang. *Jurnal Ilmiah Keperawatan (Scientific Journal of Nursing)*, *3*(2), 59–66.

Ningrum, E. F. (1967). Hubungan Tingkat Kecukupan Energi dan Protein Dengan Produksi ASI Pada Ibu Menyusui didesa Bawen Kecamatan Bawen Tahun 2016. *Angewandte Chemie International Edition*, *6*(11), 951–952., 13(April), 15–38.

Nugraheni, D. E., & Heryati, K. (2017). Metode speos (stimulasi pijat endorphin, oksitosin dan sugestif) dapat meningkatkan produksi ASI dan peningkatan berat badan bayi. *Jurnal*

Kesehatan, *8*(1), 1–7.

Pratiwi, C. D., Rahayu, A. P., & Wahyuni, T. (2016). Hubungan antara Nyeri Luka Operasi, Kecemasan Ibu dan Hisapan Bayi dengan Produksi ASI pada Post Seksio Sesarea di RSUD Abdul Wahab Sjahranie.

Purnama, E., & Sulastri, S. K. (2016). Peningkatan Pengetahuan Teknik Menyusui Pasien Post Sectio Caesarea Di Rsu Assalam Gemolong. Universitas Muhammadiyah Surakarta.

Radharisnawati, N. K., & Kundre, R. (2017). Hubungan Pemenuhan Kebutuhan Gizi Ibu Dengan Kelancaran Air Susu Ibu (ASI) Pada Ibu Menyusui. 5.

Rinata, E., Rusdyati, T., & Sari, P. A. (2016). Teknik Menyusui Posisi, Perlekatan Dan Keefektifan Menghisap - Studi Pada Ibu Menyusui Di Rsud Sidoarjo. *Temu Ilmiah Hasil Penelitian Dan Pengabdian Masyarakat*, 128–139.

Riyanti, E., Mulyani, R. D., & Astutiningrum, D. (2019). Efektivitas Pijat Oksitosin terhadap Pengeluaran ASI pada Ibu Post Partum SC Primipara di RS PKU Muhammadiyah Gombong. *Proceeding of The URECOL*, 850-858.

Roesli, U. (2000). *Mengenal ASI eksklusif*. Niaga Swadaya.

Sari, D. P., & Rahayu, H. E. (2017). Pengaruh Metode Speos Terhadap Produksi Asi Pada Ibu Post Seksio Sesarea di Rumah Sakit Umum Daerah Tidar Kota Magelang Tahun 2017. 183–190.

Sasmita, F. (2018). Faktor-Faktor Yang Memengaruhi Kelancaran Produksi Air Susu Ibu (Asi) Pada Ibu Menyusui Di Rumah Sakit Umum Daerah Simeulue.

Sudargo, T., Kusmayanti, N. A., Aristasari, T., Meliawati, Z., & Nurhayati, S. (2019). *Pemberian ASI Eksklusif sebagai makanan sempurna untuk bayi*. Gadjah Mada University Press.

Sugiyono, D. (2013). Metode penelitian pendidikan pendekatan kuantitatif, kualitatif dan R&D.

Susanthi, N. N. T. (2021). Pengaruh Pelaksanaan Rawat Gabung Dengan Produksi Asi Pada Ibu Post Sectio Caesarea. *Jurnal Keperawatan Priority*, *4*(2), 85–92. https://doi.org/10.34012/jukep.v4i2.1573

Wahyuningsih, H. puji. (2018). Buku Ajar Kebidanan: Asuhan Kebidanan Nifas dan Menyusui (M. K. Elly Dwi Wahyuni, SST (ed.); Pertama)