



## The Effect of SEFT and Acupressure St 18 on Breast Milk Production in Postpartum Mothers at Puskesmas Pangenan Cirebon Regency

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**Abstract.** Pangenan Health Center is included in the 10 Puskesmas that contribute the most stunting cases in Cirebon Regency. Stunting can be prevented by exclusive breastfeeding. Factors that affect milk production include peace of mind and soul and breast care. To overcome these factors, SEFT and Acupressure ST 18 were carried out. The purpose of this study was to determine the effect of SEFT and ST 18 Acupressure on breast milk production in postpartum mothers 6-72 hours. This research method uses quasi-experimental method with pretest-posttest with control group design. The study population is 6-72 hour postpartum mothers at UPTD Pangenan Health Center, Cirebon Regency in 2023 as many as 28 postpartum mothers, with 14 postpartum mothers 6-72 hours intervention group and 14 postpartum mothers 6-72 hours control group. Sampling used purposive sampling techniques. The instruments used in this study were observation sheets on breast milk expenditure, SOP for milking and SOP for SEFT and Acupressure ST 18. Data analysis included univariate and bivariate analysis using paired t-test and independent t-test. The average amount of breast milk production after SEFT treatment and ST 18 acupressure was 25.86. The average amount of milk production in postpartum mothers after without SEFT treatment and ST 18 acupressure was 23.93. SEFT and Acupressure ST 18 affect the increase in breast milk production for postpartum mothers at UPTD Pangenan Health Center. There is an effect of SEFT and ST 18 Acupressure on breast milk production in postpartum mothers, so it is expected that health workers can apply SEFT and ST 18 Acupressure to increase breast milk production.

**Keywords:** SEFT and Acupressure ST 18, Breast Milk Production, Postpartum

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### INTRODUCTION

The problem of stunting in Indonesia is classified as a chronic category. According to WHO data, public health problems can be considered chronic when the prevalence of stunting is more than 20%. Based on the results of the 2016 Nutritional Status Monitoring (PSG), the prevalence of stunting in Indonesia reached 27.5%, moreover, the prevalence exceeds the national rate in 14 provinces. Based on data from the Indonesian Nutritional Status Survey (SSGI) in 2021, the prevalence of stunting rates in West Java decreased from 24.5% to 20.4%. Cirebon Regency itself stunting prevalence reached 15,299 or 9.24% and

Pangenan Health Center was included in the 10 puskesmas that contributed the most stunting cases with a prevalence of 315 or 10.3%.

Stunting is a chronic malnutrition problem characterized by short stature. People with stunting are generally susceptible to disease, have a level of intelligence below normal and low productivity. The high prevalence of stunting in the long term will have an impact on economic losses for Indonesia (Ministry of Health of the Republic of Indonesia, 2019). One of the causes of stunting is low nutritional intake in the First 1000 Days of Life, namely from the fetus to the baby aged two years. In the sense that stunting can be prevented by exclusive breastfeeding for six months (Ministry of Health of the Republic of Indonesia, 2019). WHO data in 2016 still shows the average rate of exclusive breastfeeding in the new world is around 38%. In Indonesia although a large number of women (96%) breastfeed their children, only 42% of babies under 6 months of age are exclusively breastfed. By the time children approach their second birthday, only 55% are still breastfed. When compared to the WHO target of 50%, the figure is still far from the target. Based on data collected by the International Baby Food Action Network (IBFAN) 2014, Indonesia was ranked in the bottom three out of 51 countries in the world that participated in the assessment of the status of infant and child feeding policies and programs (Silawati, et al. 2019).

Breast milk has an ideal nutritional composition according to the needs and digestive abilities of the baby, easy to digest, can also protect gastrointestinal infections, besides that breast milk is also practical and economical, but the reality in the field is that many mothers experience the ineffectiveness of the breastfeeding process, one of the contributing factors is that milk production is not smooth or little (Safari, F.R.N., Sinaga, E.B. and Purba, K., 2023). To overcome this, efforts must be made to increase breast milk production, especially in the puerperium. These efforts include non-pharmacological efforts, namely Spiritual Emotional Freedom Technique (SEFT) and ST 18 acupressure. According to The Association of Tapping Touch that SEFT tapping is tapping touch or light tapping that is done independently. Touch tapping is a comprehensive care technique that uses touch and rhythm. Gentle tapping helps to reduce tension in the body and mind as well as to promote a feeling of well-being and positive thinking. Seft tapping is a simple therapy that is easy to do by anyone, can be done alone and does not require a lot of money.

Based on research conducted by Nisa (2022) entitled The Application of EFT to the smooth production of breast milk in primipara postpartum mothers at RSUP dr. Kariadi Semarang that after applying EFT for 3 times within 3 days, results were obtained that there

was an increase in breast milk production. Acupressure is a finger prick therapy which is a form of physiotherapy by providing stimulation at certain points or acupoints on the body (Kurniawati, et al. 2016). Acupressure at ST 18 points according to research can increase milk production independently. According to research conducted by Nawang (2016) entitled differences in the amount of prolactin hormone before and after the acupressure-aromatherapy combination in breastfeeding techniques in postpartum mothers in Surakarta. This study was conducted on the first day of childbirth in the hospital which was given acupressure and aromatherapy interventions. This intervention is carried out for 3 consecutive days at the same time in the morning between 8-11 o'clock when the breast is empty or after feeding. Obtained results in significantly increased levels of the hormone prolactin. Increased levels of the hormone prolactin in mothers are associated with increased milk production.

## **LITERATURE**

Breast milk is breast milk is the first, main and best food for babies that is natural. Breast milk contains various nutrients needed in the process of growth and development of infants (Jafar, N., 2011). Breast milk is the best and main food for babies because breast milk contains antibodies needed by babies to fight diseases that attack them (Umboh, E., Wilar, R. and Mantik, M.F., 2013). Maternal knowledge plays an important role in the success of exclusive breastfeeding, so the most effort made in the community is to provide early counseling to mothers and families in order to understand the importance of exclusive breastfeeding in addition to support from closest family and health workers to increase confidence to want to breastfeed (Safitri, A. and Puspitasari, D.A., 2018).

According to Zulfiana (2015) SEFT therapy is a therapeutic technique called psychological energy to overcome psychic and physical problems, namely by doing light acupressure (tapping) active nerve points or meridians of the body. Spirituality here refers to what needs to be done in SEFT therapy is a prayer that the subject answers when it will begin until the therapy session ends (Sucipto, S., Kristanto, H. and Dhevansa, W.C., 2023). The use of SEFT techniques can reduce counseling anxiety levels (Fadli, R.P., Putri, Y.E., Amalianita, B., Zola, N. and Ifdil, I., 2020).

Postpartum depression according to Kusuma (2017) is a condition of mood disorders that occur after childbirth. This disorder reflects psychological dysregulation that is a sign of symptoms of major depression. According to Nasri, Wibowo, & Ghazali (2017),

postpartum depression is usually experienced by mothers after 4 weeks of giving birth. Accompanying signs are feelings of sadness, decreased mood, loss of interest in daily activities, significant weight gain or loss, feeling useless or guilty, fatigue, decreased concentration and even suicidal ideation. In severe cases depression can be psychotic, with hallucinations, delusions and thoughts of killing the baby. It is known that around 20-40% of women report an emotional disorder or cognitive dysfunction in the postpartum period (Sari, R.A., 2020).

## **METHOD**

This study used a quasi-experimental research design. The research design used was quasi-experimental research with a pre-test and post-test design design with control group. The treatment in the intervention group was carried out SEFT technique and ST 18 point acupressure. Sampling in this study used purposive sampling techniques. This research was conducted from March to July 2023 at UPTD Puskesmas Pangenan. The instruments of this study are observation sheets monitoring breast milk production, SOP SEFT and Acupressure ST 18 and SOP for milking. Data analysis includes univariate analysis and bivariate analysis. The results of this research data were processed using statistical tests, paired t-tests, and independent t-tests on computer programs.

## **DISCUSSION**

Based on table 1, it can be seen that the characteristics of postpartum mothers based on the age of the majority of postpartum mothers at the Pangenan Health Center, Cirebon Regency are in the age group of 20-35 years in the intervention group as many as 12 people (85.7%) and based on the parity of the majority of postpartum mothers with multiparity in the intervention group as many as 11 people (78.6%). Based on table 2, it can be seen that the average amount of breast milk production in postpartum mothers for 6-72 hours at UPTD Puskesmas Pangenan Cirebon Regency in 2023 before SEFT treatment and ST 18 acupressure in the intervention group was 18.07, the median value was 17.50 with a standard deviation of 9.288. The amount of breast milk production in postpartum mothers 6-72 hours is at least 6 cc and the amount of breast milk production in postpartum mothers 6-72 hours maximum is 33 cc. While the average amount of breast milk production in postpartum mothers for 6-72 hours at UPTD Puskesmas Pangenan Cirebon Regency after SEFT treatment and ST 18 acupressure was 25.86, the median value was 23 with a standard

deviation of 10.538. The amount of milk production in the minimum postpartum mother is 13 cc and the amount of milk production in the maximum postpartum mother is 45 cc.

**Table 1. Distribution of Frequency Characteristics Based on Age and Parity of Nifas Mothers**

Characteristics	F - Intervention	%	F - Control	%
Age				
< 20	1	7,1	1	7,1
20-35	12	85,8	10	71,5
>35	1	7,1	3	21,4
Total	14	100	14	100
Paritas				
Primipara	3	21,4	4	28,6
Multipara	11	78,6	10	71,4
Total	14	100	14	100

**Table 2 Distribution of Total Breast Milk Production in Postpartum Mothers 6-72 hours Before and After SEFT and ST 18 acupressure in the intervention group**

Breast milk production (MI)	Mean	Min-Max	SD
Before the experiment	18,07	6 -33	9,228
After the Experiment	25,86	13-45	10,538

Based on table 3, it can be seen that the average amount of breast milk production in postpartum mothers for 6-72 hours at UPTD Puskesmas Pangenan, Cirebon Regency in 2023 before in the control group without SEFT treatment and ST 18 acupressure was 25.27, a median value of 24.00 with a standard deviation of 11.863. The amount of breast milk production in postpartum mothers 6-72 hours is at least 7 cc and the amount of breast milk production in postpartum mothers 6-72 hours maximum is 46 cc. While the average amount of breast milk production in postpartum mothers for 6-72 hours at UPTD Puskesmas Pangenan Cirebon Regency after in the control group without SEFT treatment and ST 18 acupressure was 23.93, the median value was 21.50 with a standard deviation of 12.035. The amount of milk production in the minimum postpartum mother is 6 cc and the amount of milk expenditure in the maximum postpartum mother is 45 cc.

**Table 3 Distribution of Total Breast Milk Production in Postpartum Mothers 6-72 hours Before and After in the Control Group without SEFT Treatment and ST 18 Acupressure**

Breast milk production (MI)	Mean	Min-Max	SD
Before the experiment	25,27	7-46	11,863
After the Experiment	23,93	6-45	12,035

**Table 4 Effect of SEFT and ST 18 Acupressure on Breast Milk Production in Postpartum Mothers**

Group	Paired Differences				t	Sig.(2-tailed)
	Mean	Std. Deviation	95% Confidences Interval of the Difference			
			Lower	Upper		
<i>Pre Test-Post Test Intervensi</i>	-7.786	3.017	-9.528	-6.044	-9.655	.000
<i>Pre test-Post Test Kontrol</i>	1.643	2.735	.064	3.222	2.248	.043

Based on table 4 it can be seen that the results of the Paired Samples Test test in the Pre test-Post test Experiment obtained a t value of -9.655 with p value (Asymp. Sig 2 tailed) of 0.000 which is less than the critical limit of the study of 0.05 so that the hypothetical decision of  $H_a$  is accepted which means that there is an effect between before and after SEFT treatment and Acupressure ST 18 on increasing the amount of breast milk production in postpartum mothers at UPTD Puskesmas Pangenan Cirebon Regency. Based on the results of the study in table 1, it can also be seen that the characteristics of postpartum mothers based on the age of the majority of postpartum mothers at the Pangenan Health Center, Cirebon Regency are in the age group of 20-35 years in the intervention group of 12 people (85.7%) and based on the parity of the majority of postpartum mothers with multiparity in the intervention group of 11 people (78.6%).

A healthy reproductive age range is at the age of 20-35 years. This period is the best period for pregnancy, childbirth and breastfeeding. In the period of healthy reproduction, milk production will be sufficient because the function of the reproductive organs can still work optimally. Mothers over 35 years old are considered dangerous because both their reproductive organs and other organs have decreased so that the risk of complications both in pregnancy, childbirth and breastfeeding is very high. (Prawirohardjo, 2017). Maternal parity is related to milk production as seen from the infant weight gain variable, although parity is not related to milk production from the variable amount of milk. Parity is associated with the beginning of lactation. The beginning of this lactation will determine the success of subsequent breastfeeding (Frieska., P &; Windhu. P, 2018).

Breast milk will be produced more in mothers who give birth more than once. This is because they have more knowledge and experience about the breastfeeding process so that lactation management will be carried out properly. Psychological readiness between primiparous and multiparous is very different. A primiparous person is more easily anxious

and labile psychological condition, this will affect the production of hormones that play a role in breast milk production (Pranajaya, R & Rudiyantri, N. 2013). This is in accordance with the researchers' assumption that the age of the mother when breastfeeding is very influential on increasing milk production because psychologically the age range of 20-35 years is considered a mature age reproductively. Because psychologically depressed, sad and tense mothers will reduce the volume of breast milk. Similar to psychological readiness between primiparous and multipara, a primiparous is more easily labile than multiparous which will certainly affect the production of hormones that play a role in milk production. This is in line with the theory written by Pranajaya, R & Rudiyantri, N. 2013).

Based on the results of the research described above in table 2, it can be seen that the average amount of breast milk production in postpartum mothers is 6-72 hours at the Pangenan Health Center in Cirebon Regency in 2023 before the treatment of SEFT and ST 18 acupressure in the intervention group is 18.07 cc, the minimum amount of milk production is 6 cc and the maximum amount of expenditure is 33 cc. While the average amount of breast milk production in postpartum mothers 6-72 hours after SEFT treatment and ST 18 acupressure is 25.86 cc, the minimum amount of milk production is 13 cc and the maximum amount of milk production in postpartum mothers is 45 cc. This is in accordance with research conducted by (Nisa, 2022) entitled The application of EFT to smooth breast milk production in primipara postpartum mothers at RSUP dr. Kariadi Semarang that after applying EFT for 3 times within 3 days, results were obtained that there was an increase in breast milk production.

Acupressure is a finger prick therapy which is a form of physiotherapy by providing stimulation at certain points or acupoints on the body (Kurniawati, et al. 2016). Acupressure at ST 18 points according to research can increase milk production independently. According to research that has been conducted (Nawang, 2016) entitled differences in the amount of prolactin hormone before and after the acupressure-aromatherapy combination in breastfeeding techniques in postpartum mothers in Surakarta. This study was conducted on the first day of childbirth in the hospital which was given acupressure and aromatherapy interventions. This intervention is carried out for 3 consecutive days at the same time in the morning between 8-11 o'clock when the breast is empty or after feeding. Obtained results in significantly increased levels of the hormone prolactin. Increased levels of the hormone prolactin in mothers are associated with increased milk production. This is in line with the researchers' assumption that to increase milk production is not only resigned to the

conditions that mothers experience, but there needs to be an effort, namely treatment or intervention that can increase more milk production, so there is no longer any reason for mothers not to be able to exclusively breastfeed.

Based on table 3 above, it can be seen that the average amount of milk production in postpartum mothers 6-72 hours before in the control group without SEFT treatment and Acupressure ST 18 was 25.27 cc, the minimum amount of milk production was 7 cc and the maximum amount of milk expenditure was 46 cc. While the average amount of breast milk production in postpartum mothers 6-72 hours after in the control group without SEFT treatment and ST 18 acupressure was 23.93 cc, the minimum amount of milk production was 6 cc and the maximum amount of breast milk expenditure was 45 cc. The results of evidence-based research prove the existence of the "Prolactin Receptor Theory" which states that frequent breast milk secretion in the early postpartum days increases the number of active prolactin receptor sites, thereby increasing milk production. Based on the results of the study showed that breast milk production increased but for the average amount of milk production decreased from before without SEFT intervention and ST 18 acupressure was 25.27 to 23.93 after without SEFT intervention and ST 18 acupressure.

Based on table 4, it can be seen that in the significant column (Sig) for all data, both in the kolmogrof-smirnov test and the Shapiro-wilk test, the probability is more than 0.05, then  $H_0$  is accepted, which means that the data is normally distributed. Because the research data is normally distributed, the next analysis uses parametric statistics, namely paired sample t test and independent sample test. Furthermore, a hypothesis test was carried out with the Paired Samples Test test on the Pre-test-Post test Experiment, then the t value obtained was -9.655 with p value (Asymp. Sig 2 tailed) of 0.000 which is less than the critical limit of the study of 0.05 so that the hypothetical decision of  $H_0$  is accepted which means that there is an influence between before and after SEFT treatment and ST 18 Acupressure on increasing the amount of breast milk production in postpartum mothers at the Pangenan Health Center, Cirebon Regency in 2023. The results of the above research are in accordance with the research of Rajin, M., et al (2015) that Acupressure can help balance the work system of the organs of the body and other parts of the body as well as its function. The ST 18 point also plays a role in milk production because it is associated with the mammary glands that address the problem of lactation insufficiency. This point is the main point in acupressure to help smooth.

This is also supported by research that has been conducted (Nawang, 2016) entitled differences in the amount of prolactin hormone before and after the acupressure-aromatherapy combination on breastfeeding techniques in postpartum mothers in Surakarta. The study was conducted on the first day of childbirth in the hospital given acupressure and aromatherapy interventions divided into four groups, the group that received acupressure was given emphasis on acupressure points ST 16, ST 17, ST 18, SP 18, CV 17, SI 1 and ST 36 for 30 clockwise turns at each point. This intervention is carried out for 3 consecutive days at the same time in the morning between 8-11 when the breasts are empty or after feeding. The average level of the hormone prolactin increased significantly to 151.058 ng/ml with a standard deviation of 32.246 (p value = 0.0001). The average level of the hormone prolactin before the combination therapy between acupressure and aromatherapy was 59.102 ng/ml with a standard deviation of 16.652. After 3 days of combination therapy, the average level of the hormone prolactin was elevated to 221,894 ng/ml with a standard deviation of 20,684. (P-value = 0.0001). In contrast to the intervention group, the hormone prolactin in the control group after 3 days showed insignificant changes. The hormone prolactin was measured at 64.084 ng/ml with a standard deviation of 21.272 at baseline, and increased slightly to 65.160 ng/mL with a standard deviation of 21.543 (p-value = 0.006). Results of statistical calculations showed that there was a significant increase in prolactin hormone levels before and after treatment in all four groups. Increased levels of the hormone prolactin among mothers are associated with increased milk production.

## CONCLUSION

Based on the results of the study, it shows that there is no gap between the theory and the results of the study that there is an influence of SEFT and Acupressure ST 18 on the amount of breast milk expenditure for postpartum mothers in the work area of UPTD Pangenan Health Center, Cirebon Regency, hypothetically proven. It is hoped that health workers can apply SEFT and Acupressure ST 18 as non-pharmacological alternatives to overcome breast milk production problems and increase milk production in postpartum mothers.

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