

## Management Analysis of Early Initiation of Breastfeeding in The New Habit Era

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### ABSTRACT

There are still a number of Independent Midwives who have not implemented the early initiation of breastfeeding management in the New Normal Era. As early as 2020, newborns should be separated from their Covid-19 infected mothers. This study aims to analyze the management of the early initiation of breastfeeding in the New Normal Era from the point of view of the midwives' knowledge and the relationship between Midwives' knowledge and the implementation of the early initiation of breastfeeding in the New Normal Era. The research method used is quantitative analysis with a cross-sectional design. The design of this study is quantitative analytic with a cross-sectional research design. The population was all Operative Independent Midwives in East Tanjungkarang District of Bandar Lampung City, which amounted to 42 people, and the entire population was sampled. Data analysis used frequency distribution and bivariate analysis using chi-square. Based on the research results from 42 respondents, most had good knowledge about the early initiation of breastfeeding in the new habit era of 29 people (69%), and most midwives had implemented the early initiation of breastfeeding by complying with the Covid-19 protocol, of which 28 people (66.7%). The results of the chi-square analysis obtained a p-value of 0.015, which shows a relationship between midwives' knowledge of the suitability of the early initiation of breastfeeding implementation and the Covid-19 protocol in the New Habit Era of 2022. It is expected that midwives can consistently increase their knowledge and follow the overall developments as the health workers who play a role in the implementation of the early initiation of breastfeeding so that they can implement the early initiation of breastfeeding following the management of newborns babies in Indonesia as a first step to succeeding in exclusive breastfeeding.

**Keywords:** Midwives, Covid-19 Protocol, New Born Baby

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### INTRODUCTION

Human Resource Development is inseparable from health efforts, including maternal and child health efforts. Therefore, the development of human resources must begin from infancy in the womb. One of the efforts to improve human resources' health is exclusive breastfeeding. There is nothing more valuable in a child's life than getting quality nutrition from the beginning of his life, namely breast milk. Exclusive breastfeeding is breastfeeding a baby with only breast milk during the initial six

months of life without giving additional food and drinks except for drugs and vitamins and continuing to give the milk for up to 2 years<sup>1</sup>. Exclusive breast milk is vital because it is the leading food and the first to contain complete nutrients needed for the growth and development of the baby. Breast milk provides immune benefits for the baby. Breast milk is an ideal nutrient to optimally support the baby's health, growth, and development<sup>2</sup>. For mothers, exclusive breastfeeding will accelerate uterine involution, prevent postpartum bleeding, reduce postpartum pain and mortality, reduce the risk

of ovarian cancer, and reduce the risk of breast cancer<sup>3</sup>.

Since the Covid-19 pandemic, there have been many changes in all sectors, including health services. In early 2020, the newborns were separated from their mothers, who were infected with Covid-19<sup>4</sup>. Even at the outset of the pandemic, the American Academy of Pediatrics and the CDC recommended that hospitals separate Covid-19-confirmed mothers from their babies due to the possible risk of neonatal infections<sup>5</sup>. However, the WHO 2020 recommendations state that close contact, the early initiation of breastfeeding, and exclusive breastfeeding help babies to develop<sup>6</sup>. Women with Covid-19 should be encouraged to breastfeed safely, hold the baby in skin contact, and be treated together. In managing newborns in Indonesia, Early Initiation of Breastfeeding is still carried out for mothers who are not suspect, probable, or confirmed to be Covid-19, but prioritizes the prevention of the SARS-CoV-2 virus through droplets or air<sup>7</sup>. It is reinforced by the American College of Obstetricians and Gynecologists (2022), which explains that Covid-19 does not transfer into breast milk and does not cause infections in infants. Most information suggests that it is safe to breastfeed a baby even when a mother has Covid-19<sup>8</sup>.

In implementing the early initiation of breastfeeding, the baby and mother make skin-to-skin contact immediately after the baby is born, and the baby breastfeeds alone within the first hour of life. This has many benefits, including reducing the risk of hypothermia, making the baby's breathing and heartbeat more stable, increasing the baby's ability to fight bacteria, strengthening the bond of affection (bonding) between mother and baby, helping to sustain exclusive breastfeeding and extended breastfeeding, stimulating the release of the hormone oxytocin and prolactin so that it allows the process of removing the placenta, reduces bleeding, makes the mother relax so that she loves her baby more, and increases the flow of milk from the breast<sup>3</sup>. Adapting to the Covid-19 outbreak, the 2020 Ministry of Health issued Guidelines for Antenatal, Childbirth, Postpartum, and Newborn Services in the New Normal Era, which can be a reference for health workers, mothers, and families in providing and obtaining health services according to procedures, and still protected from Covid-19, including in implementing the early initiation of breastfeeding in the Era of Adaptation to New

Habits<sup>7</sup>.

The principle of helping newborns in the Adaptation Era of New Habits prioritizes preventing the transmission of the Covid-19 virus through droplets or air, where newborns from mothers who are not suspected, probable, or confirmed with Covid-19 still receive essential neonatal services at birth, including the early initiation of breastfeeding, of course by implementing Covid-19 prevention procedures such as Implementation of the early initiation of breastfeeding is based on a decision with parents, provided that parents have received counseling about the dangers and risks of transmission of Covid-19 from mother to baby, counseling about the benefits of the early initiation of breastfeeding, during the early initiation of breastfeeding implementation mothers are required to wear masks, washing hands, and cleaning breasts before breastfeeding<sup>7</sup>.

For this reason, as implementers at the forefront of providing health services to pregnant and maternity women, midwives must understand and carry out health services according to service guidelines issued by the Indonesian Ministry of Health.

Based on Fiantika et al. (2021) research in the Implementation of Early Initiation of Breastfeeding, it is hoped that midwives can realize the importance of complying with the early initiation of breastfeeding protocols as work instructions in implementing the early initiation of breastfeeding. Midwives are expected to improve the early initiation of breastfeeding services following the protocol and increase intents and motivations from within themselves to be more responsible in their duties<sup>9</sup>. The results of the presurvey conducted at 10 midwifery independent practice in Bandar Lampung, all midwifery independent practice's continue to implement the early initiation of breastfeeding as usual, but some midwifery independent practice's have not prioritized the prevention of Covid-19 virus transmission. In the results of the pre-survey, 30% of midwifery independent practice's did not counsel first about the dangers and transmission of Covid-19 from mother to baby, before doing the early initiation of breastfeeding, 50% of mothers did not use masks when doing the early initiation of breastfeeding, 30% of mothers did not wash their hands before doing the early initiation of breastfeeding, and 20% of mothers did not clean

their breasts before doing the early initiation of breastfeeding. Based on the survey results, several independent midwifery practices have not implemented the early initiation of breastfeeding management in the New Normal Era. For this reason, researchers want to know how to manage Early Breastfeeding Initiation in the Era of Adaptation to New Habits from the midwife's side based on the midwife's knowledge and whether there is a relationship between the midwife's knowledge and the implementation of the early initiation of breastfeeding in the Era of New Habits?

## METHOD

This research is quantitative research that is analytic with a cross-sectional design. The independent variable in this study is Midwives' Knowledge, while the dependent variable is the early initiation of breastfeeding management in the New Habit Adaptation Era.

The location of this research is throughout midwifery independent practice in East Tanjungkarang District, Bandar Lampung City. The research was conducted in 2022. The population in this study was all operative midwives in midwifery independent practice throughout East Tanjungkarang District of Bandar Lampung City, which amounted to 42 people, and because the total population in this study was less than 100, the sampling technique in this study used total sampling.

In the midwife's knowledge variable, data collection was carried out by filling out a questionnaire before implementing the early initiation of breastfeeding, whereas observing the implementation of the early initiation of breastfeeding in the New Normal Era was carried out using direct observation techniques the early initiation of breastfeeding was being implemented with the approval of the midwife and patient. A questionnaire served as the instrument for this study to measure midwives' knowledge and an observation sheet to see the management of the early initiation of breastfeeding in the New Habit Adaptation Era. Data processing uses frequency distribution and bivariate analysis with the Chi-Square Test to see whether there is a relationship between midwives' knowledge of the suitability of the early initiation of breastfeeding implementation and the Covid-19 Protocol in the New Normal Era of 2022.

This research has received ethical

exemption from the Health Research Ethics Committee of the Tanjung Karang Health Polytechnic with number 012/KEPK-TJK/X/2022.

## RESULTS

**Table 1. Characteristics of Respondents**

Characteristics	Frequency	Percentage
Age		
≤ 35 years old	33	78.6
>35 years old	9	21.4
Education		
Diploma of Midwifery	34	81
Str Midwifery	8	19

Table 1 shows that most respondents are 35 years and under, as many as 33 people (78.6%), while those over 35 years are 9 people (21.4%). The most common education was D3 Midwifery, with 34 people (81%), while the remaining 8 (19%) were Str Midwifery.

**Table 2. Respondents' Knowledge of The Early Initiation of Breastfeeding Implementation in the New Habit Era**

Respondent Knowledge	Frequency	Percentage
Less Good	13	31
Good	29	69

Table 2 shows that most respondents have good knowledge about the early initiation of breastfeeding in the New Habit Era, as many as 29 people (69%), and 13 people (31%) have less good knowledge.

For the early initiation of breastfeeding implementation, all operative midwives in East Tanjungkarang District have done the early initiation of breastfeeding, but the suitability of the early initiation of breastfeeding implementation with the Covid-19 protocol in the new habit era can be seen in the table below:

**Table 3. Suitability of The Early Initiation of Breastfeeding Implementation with Covid-19 Protocol in the New Habit Era**

The Early Initiation of Breastfeeding Implementation	Frequency	Percentage
Unsuitable	14	33.3
Suitable	28	66.7

Based on table 3, it can be seen that most midwives have implemented the early initiation of breastfeeding by complying with

the Covid-19 protocol, which is as many as 28 people (66.7%), but there are still midwives whose implementation of the early initiation of

breastfeeding in the new habit era is not following the Covid-19 protocol, which is as many as 14 people (33.3%).

**Table 4. The Relationship of Knowledge with the Suitability of The Early Initiation of Breastfeeding Implementation with the Covid-19 Protocol in the New Habit Era**

Knowledge Respondent		p-Value				
		Less Good		Good		
		n	%	n	%	
The Early Initiation of Breastfeeding Suitability	Unsuitable	8	61.5	6	20.7	0.015
	Suitable	5	38.5	23	79.3	
Total		13	100	29	100	

Based on table 4, p-value=0,015 means  $p < 0.005$ , shows a relationship between midwives' knowledge of the suitability of the early initiation of breastfeeding implementation and the Covid-19 protocol in the New Habit Era of 2022.

## DISCUSSION

### Midwives' Knowledge of The Early Initiation of Breastfeeding Implementation in the New Habit Era

Based on the study results, it is known that most respondents have good knowledge about the early initiation of breastfeeding in the new habit era, as many as 29 people (69%). According to Warner et al. (2022), as frontline service providers, nurses and midwives play an essential role in providing support and education about the risks and benefits of breastfeeding for individuals with Covid-19<sup>4</sup>. Brown & Shenker (2021) also said that more than 70% of mothers who stopped breastfeeding occurred due to a lack of support during the pandemic, both from health workers and families<sup>10</sup>. Many assumptions circulating in the community about the spread of Covid-19 make most mothers afraid to breastfeed their babies, including the fear of mothers and families implementing the early initiation of breastfeeding. Therefore, midwives should be able to provide relevant information to families about the risk of Covid-19 and the benefits of breastfeeding. By providing relevant information, the midwives can explain the steps of the Covid-19 protocol that can prevent the transmission of the Covid-19 virus from mother to baby in carrying out the early initiation of breastfeeding and while breastfeeding the baby. Thus, midwives can support mothers to continue to give their milk, even to mothers

infected with Covid-19. It follows the WHO statement, which states that even women with Covid-19 should be encouraged to breastfeed safely, hold their babies in skin contact, and be treated together<sup>11</sup>.

To provide such education and support, a midwife or health worker must know about implementing the early initiation of breastfeeding in the New Habit Era. With good knowledge, midwives or health workers can provide health education to families about the benefits and risks of breastfeeding in the New Habit Era. Health education provided by midwives or health workers must be able to provide information about preventive measures such as wearing masks, washing hands before and after breastfeeding and maintaining distance from newborns after breastfeeding. Thus, midwives or health workers are expected to be able to convince and encourage mothers to continue to do the early initiation of breastfeeding with the Covid-19 protocol.

Based on the study results, 31% of respondents still have poor knowledge of implementing the early initiation of breastfeeding in the New Habit Era. It is possible because some levels of midwives' education with less good knowledge are Diploma of Midwifery, which is as much as 85%. For this reason, it is expected that midwives, as frontline service providers, can increase their knowledge through formal and informal education. Midwives and other health workers must realize that mothers and families need support, education, and safety in breastfeeding their babies. To provide the best to clients, midwives and other health workers must be aware of rapidly changing information, follow it, and have good knowledge to provide appropriate and evidence-based information to mothers and families.

### **Suitability of The Early Initiation of Breastfeeding Implementation with Covid-19 Protocol in the New Habit Era**

In 2018, WHO stated that breastfeeding improves the health of mothers and babies and has a positive impact on the family's socio-economy<sup>11</sup>. However, fears of Covid-19 virus transmission from mother to baby have resulted in the separation of newborns from their mothers, making formula often an option for breastfeeding<sup>10</sup>. A survey of hospital practices conducted by the CDC in 2020 showed that 32.8% of hospitals did not provide support in the breastfeeding process<sup>5</sup>. It occurred because of doubts from health workers, mothers, and families<sup>5</sup>. The researchers reported that separating the newborn from the mother impacts the baby and the mother<sup>12</sup>. Even Wang et al. (2020) stated that the separation of newborns for 35 days from mothers diagnosed with Covid-19 had caused communication disorders, gross motor, and personal and social development skills in newborns, while there was no evidence of transmission during breastfeeding, in terms of economics<sup>13</sup>. Mialon et al. (2021) stated that there is an increased cost for purchasing formula milk as a consideration factor for mothers to continue breastfeeding their babies even though the mother is infected with Covid-19<sup>14</sup>.

The WHO recommendations (2020) stated that close contact, the early initiation of breastfeeding, and exclusive breastfeeding help babies to develop<sup>15</sup>. Covid-19 mothers should be encouraged to breastfeed safely, have skin-to-skin contact with their infants, and get treatment. Following the WHO directive in 2020, the Ministry of Health of the Republic of Indonesia implemented clinical procedures for the implementation of the early initiation of breastfeeding in the New Habit Era, which includes: counseling or health education regarding the risk of Covid-19 transmission and the benefits of the early initiation of breastfeeding and breastfeeding, implementation is carried out based on mutual agreement with parents, and implementing Covid-19 infection prevention procedures (protocols) such as using masks during the early initiation of breastfeeding, washing hands and cleaning breasts before breastfeeding. All of these procedures must be done to minimize the transmission of Covid-19 from mother to baby<sup>7</sup>.

According to the study's findings, it is known that most midwives have implemented

the early initiation of breastfeeding by complying with the Covid-19 protocol, which is as many as 28 people (66.7%), but there are still midwives whose implementation of the early initiation of breastfeeding in the new habit era is not following the Covid-19 protocol, which is as many as 14 people (33.3%). The results of the study by Sullivan & Thompson (2020) stated that to minimize the transmission of Covid-19 infection from mothers to neonates, nursing mothers should apply infection control measures, including hand washing, breast washing, and wearing masks<sup>16</sup>. Similarly, according to the findings of Jiménez et al. (2021), among the 403 respondents who commenced early breastfeeding, there was no verified mother-to-child transmission of Covid-19<sup>17</sup>. Even Fox et al. (2020) reported that the breast milk of mothers diagnosed with Covid-19 contained IgA and IgM antibodies and the neutralizing qualities of Covid-19 infection<sup>18</sup>.

The pandemic conditions since the end of 2019 have led to the incorporation of breastfeeding promotion with fairly reasonable infection control measures such as washing hands, using masks during breastfeeding, and cleaning the breasts before breastfeeding. These measures are expected to prevent transmission from mother to baby during periods of the early initiation of breastfeeding and breastfeeding. Therefore, midwives as health operative personnel should always comply with the Covid-19 infection prevention protocol measures in providing services to the community, including in the implementation of the early initiation of breastfeeding. Therefore, early breastfeeding initiation can be carried out well as one of the first steps to succeeding in exclusive breast milk, and Covid-19 transmission from mother to baby can be prevented.

### **The Relationship of Knowledge with the Conformity of The Early Initiation of Breastfeeding Implementation with the Covid-19 Protocol in the New Habit Era**

The results of the chi-square analysis obtained a p-value of 0.015, which shows a relationship between midwives' knowledge of the suitability of the early initiation of breastfeeding implementation and the Covid-19 protocol in the New Habit Era of 2022. The research of Syukaisih et al. (2018) shows a significant relationship between knowledge and the role of midwives in implementing the early

initiation of breastfeeding<sup>19</sup>. Human perceiving or awareness of items through the senses produces knowledge<sup>20</sup>. Knowledge is a critical domain in the formation of one's behavior. In this study of 29 respondents with good knowledge, most (29.3%) implemented the early initiation of breastfeeding following the covid-19 infection control protocol. It follows the research of Warner et al. (2022), which states that in line with the development of knowledge about the Covid-19 protocol, the practice has changed, and a protocol that is not too rigid can be implemented. Combining the promotion of following with Covid-19 infection prevention measures is the best alternative in the Covid-19 pandemic situation<sup>4</sup>. It follows the American Academy of Pediatrics (2021) statement that the early initiation of breastfeeding practices can continue to be implemented, and mothers must wear masks when carrying or breastfeeding their babies<sup>21</sup>.

For this reason, midwives, as health care workers, must be able to realize and follow information or knowledge that is constantly changing rapidly. By consistently following changes in knowledge, midwives can provide evidence-based information and services to mothers and families. Included in the provision of the early initiation of breastfeeding services, by following changes in knowledge, midwives can provide the best direction for mothers and families in implementing the early initiation of breastfeeding as a first step to succeeding in exclusive breastfeeding while still minimizing the risk of spreading Covid-19 from mother to baby.

Based on the above research results, there are still midwives who have poor knowledge, and their early initiation of breastfeeding implementation is not following the Covid-19 control protocol. After further study, three midwives had poor knowledge that the management of Covid-19 was not based on decisions with parents. According to Syukaisih (2018), the practice of the early initiation of breastfeeding will be achieved if there is support from recipients of health services and health service providers, namely midwives<sup>19</sup>. In a newborn clinic procedure without symptoms, Indonesia's Ministry of Health (2020) explained that a joint decision of parents implements the early initiation of breastfeeding<sup>7</sup>. It is also under the results of Salvatore et al. (2020) state that in the implementation of the early initiation of breastfeeding and breastfeeding, the risks and

benefits have been discussed with the mother, and finally, the mother makes the decision to breastfeed her baby<sup>22</sup>. This means that the early initiation of breastfeeding is carried out based on health workers' wishes and the government's procedures. For this reason, as health workers, midwives must have a lot of time to interact with maternity patients. Midwives must also realize that during the Covid-19 pandemic, there is a risk of transmission of the spread of the Covid-19 virus from mother to baby during the implementation of the early initiation of breastfeeding, so counseling is needed for mothers and families regarding the dangers and risks of transmission of Covid-19 from mother to babies about the benefits of the early initiation of breastfeeding, and the benefits of breastfeeding for mothers and babies. After the mother and family understand it, early breastfeeding initiation can be implemented if the parents agree by considering that the benefits outweigh the possible risks. The consent of the parents must be contained in the informed consent.

In the results of the study above, some midwives have poor knowledge and allow mothers to do the early initiation of breastfeeding without wearing a mask (6 respondents), do not wash their hands before the early initiation of breastfeeding (2 respondents), and do not wash their breasts before the early initiation of breastfeeding (2 respondents). Apart from knowledge and understanding of the importance of the early initiation of breastfeeding, midwives should apply the early initiation of breastfeeding every time they assist with childbirth and provide support to mothers in labor to carry out the early initiation of breastfeeding because, in general, mothers will obey what the midwife says. This is also by Dennis et al. (2012), who stated that midwife support during childbirth and breastfeeding is necessary for mothers to increase positive behavior in early breastfeeding initiation<sup>23</sup>. The Ministry of Health (2020) has stated that one of the procedures of the Covid-19 protocol in the implementation of the early initiation of breastfeeding is the use of masks by mothers during the early initiation of breastfeeding and breastfeeding, hand washing, and breast cleaning before breastfeeding<sup>7</sup>. It also follows the research of Dumitriu et al. (2021), which states that in mothers diagnosed with Covid-19, applying a mask during breastfeeding, washing their hands, and washing their breasts before

breastfeeding does not transmit the virus to their babies<sup>24</sup>. Even Dumitriu et al. (2021) specifically reported that one of the newborns was declared Covid-19 positive because the mother removed the mask while breastfeeding her baby. We know that the method of transmission of Covid-19 is droplets (can be spread through tiny droplets) from the mouth or nose when sneezing<sup>24</sup>. Therefore, in implementing the early initiation of breastfeeding, the midwives must follow the directions that the Ministry of Health has set, where mothers must use masks during breastfeeding, wash their hands, and wash (clean) their breasts before breastfeeding. Midwives must understand the importance of the Covid-19 protocol in implementing the early initiation of breastfeeding. They must be able to emphasize the importance of complying with the Covid-19 protocol in implementing the early initiation of breastfeeding and breastfeeding to mothers and families to prevent transmission of the virus from mother to baby.

Of 13 respondents with poor knowledge, 85% had a Diploma education. It is in line with Mubarak (2011), which states that seven factors affect one's knowledge, one of which is education, where the higher one's education, the easier one will receive information, and in the end, the more knowledge one will have<sup>12</sup>. Besides that, the limited information during the pandemic made some Midwives not keep abreast of health developments in an updated manner. By consistently following the story news, midwives as health practitioners will have adequate knowledge to provide health education according to updated evidence-based heads of mothers and families. They can also initiate early breastfeeding by complying with the Covid-19 infection prevention protocol.

## CONCLUSION

There is a relationship between midwives' knowledge of the suitability of the early initiation of breastfeeding implementation and the Covid-19 protocol in the New Habit Era in 2022. The existence of a pandemic has contained changes in the implementation of the early initiation of breastfeeding, where the early initiation of breastfeeding is implemented based on a joint decision of parents, and mothers must use masks during breastfeeding, wash their

hands, and wash (clean) their breasts before breastfeeding. All of them are conducted to continue to succeed in exclusive breastfeeding milk while minimizing the spread of Covid-19 from mother to baby. For this reason, midwives as health workers must always follow changes in knowledge and implement health services following the directives of Indonesia's Ministry of Health or the appropriate governance in Indonesia. This study's limitation lies in the narrowness of the research area taken, but it does not reduce the meaning of this study's results.

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