


The relationship between knowledge and attitude of mothers towards infant massage aged 0-12 months in the working area of the Kuta Baro health center in Aceh

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Article Info	ABSTRACT
Keywords: Knowledge, Attitude, Infant Massage	Efforts to improve the health and stimulation of the baby's growth and development that can be done independently by the mother is to provide touch stimulation through baby massage. Factors that influence the management of infant massage by mothers include internal and external factors. There are several factors related to infant massage including the knowledge factor where the mother's extensive knowledge will also affect the mother's desire to do baby massage, besides that there are also work factors, attitudes and perceptions that can influence the mother to do baby massage. This study aims to determine the relationship between knowledge and attitudes of mothers towards infant massage aged 0-12 months in the working area of the Kuta Baro Health Center. This type of research is quantitative with cross sectional design. Data collection used a questionnaire which was conducted from 08 March to 04 April 2023. The population in this study was mothers who had babies aged 0-12 months in the working area of the Kuta Baro Health Center totaling 427, using a proportional random sampling technique of 81 people. Data analysis used chi square with the results of the study showing that there was a relationship between knowledge ($p=0.012$) and attitude ($p=0.046$) with baby massage it is expected that families can stimulate (stimulate) baby breasts which are very useful in stimulating muscles in babies so that children can grow and growing well.
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INTRODUCTION

Infancy is both a golden and critical period of growth and development. It is called the golden period because the infancy period lasts very short and cannot be repeated. Meanwhile, it is called a critical period because at this time the baby is very sensitive to the environment and needs nutritional intake and good stimulation for growth and development (Safitri, Latifah, & Iqmy, 2021).

Baby care in Indonesian means baby care. Babies are children aged zero to 12 months who must be given special care to maintain health during growth and development. There are various kinds to maintain the health of babies from newborns to 12 months of age. One of the parts of baby care is baby massage. Baby massage is health care in the form of touch

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therapy with certain techniques given to babies so that treatment and therapy can be achieved. The purpose of giving massage to babies is to release the endorphin hormone so that it provides a sense of relaxation in the baby's muscles which will make the baby more comfortable carrying himself both physically and psychologically (Wulandari, 2021).

According to the World Health Organization (WHO), globally around 20-40% of infants aged 0-2 years experience developmental delays. The prevalence of child development problems in various developed and developing countries including America is 12-16%, Argentina 22% and Hong Kong 23%. Several studies have evaluated the impact of failure and even shortening life span (Amru, Haryati, & Aziz, 2022).

The Infant Mortality Rate (IMR) in the world is still relatively high. Based on UNICEF data in 2015, infant mortality in the world reached more than 10 million infant deaths, nearly 90% of infant deaths occurred in developing countries. According to WHO in 2015, in ASEAN (Association of South Asia Nations) countries such as Singapore 3 per 1000 live births, Malaysia 5.5 per 1000 live births, Thailand 17 per 1000 live births and Vietnam 18 per 1000 live births. The number of infant mortality rates in Indonesia based on data from the Indonesian Demographic and Health Survey in 2015 (SDKI) is 35 deaths per 1000 live births or around 175,000 infant deaths per year, based on this data shows that the infant mortality rate in Indonesia is still relatively high compared to other ASEAN countries. While the results of the Indonesian Demographic and Health Survey (IDHS) in 2016, the infant mortality rate in Indonesia was 24 per 1000 live births. Based on data from the 2017 Indonesian Health Profile, the results of the inter-census population survey (SUPAS) show that the infant mortality rate in Indonesia is 24 per 1000 live births.

The Indonesian Ministry of Health (2019) states that 16% of infants in Indonesia experience neurodevelopmental and brain disorders ranging from mild to severe. In infancy and toddlerhood, the development of language skills, creativity, social awareness, emotional and intelligence runs very fast and is the foundation of subsequent development. The lack of stimulation given to infants adds to the delay in infants. Many studies show that babies need early stimulation in various parts of the body and sensory organs to help babies adjust to their new environment (Depkes RI cited in Amru, Haryati, & Aziz, 2022).

According to the Aceh Health Profile in 2021, it is known that the infant mortality rate in 2021 was 11 per 1000 live births, an increase compared to the previous four years, namely 2017-2020, which was only 9 per 1000 live births. In 2021, the highest infant mortality rate occurred in Pidie Regency with 95 cases, while Aceh Besar Regency was ranked 6th with 51 cases of the highest infant mortality rate with a total of 23 districts in Aceh.

Infant mortality can be prevented if the baby's condition is healthy and of high quality (optimal growth and development of the baby). One of the efforts to improve health and stimulate infant growth and development that can be done by the community is to provide tactile stimulation through infant massage (Putri & Pratiwi, 2021).

Infant massage is more beneficial among weight gain, better sleep-wake patterns, improved neuromotor development, better emotional bonding attachment, reduced nosocomial infection rates and thus, reduced mortality rates in prematurely born babies.

Babies need adaptation because their bodies are still weak. Infant adaptation is more important for development and making their behavior good to prevent from fatal consequences, i.e. death. Babies who cannot calm themselves to fall asleep will cry, so proper handling is needed to help them fall asleep (Sukmawati & Imanah, 2020).

Many experts have proven that infant massage performed by parents (especially mothers) can provide many benefits such as weight and length, better sleep, relief and reduction of abdominal pain, better physiological and behavioral responses. There are two types of touch, namely passive and active. Passive touch such as breastfeeding, holding, kangaroo care, or changing baby for baby. Active touch involves massage therapy. The right massage method for babies is useful for improving sleep quality. Babies crave tactile sensations early in life to adapt to their environment. Gentle touch on babies is a beautiful way of bonding between babies and parents (Sukmawati & Imanah, 2020).

Baby massage can be defined as a comfortable touch of communication between mother and baby. Baby massage is an expression of affection between parents and children through touching the skin which can have a tremendous impact. This is because, touch and hugs are one of the basic needs of babies. The advantage of infant massage done by the mother herself is that when the mother massages her baby, it will provide a unique experience, namely the opportunity to be close to the baby, feel the skin, and be able to create a bond, and reduce stress levels in the mother (Julisia & Wulandari, 2021).

Baby massage is believed to maintain health and be able to stimulate and optimize baby's growth and development. However, without the correct massage technique, infant massage can actually be dangerous, and can even cause death to the baby. Until now, not all traditional birth attendants understand the correct technique of infant massage. It is often found that the baby's head becomes the object of massage. In addition, often the technique of infant massage is almost the same as the massage of the baby's mother because it is one with the delivery assistance package. Baby massage can be started as soon as the baby is born, according to the parents' wishes. By starting the massage sooner, the baby will benefit more. Especially if the massage can be done every day from birth until the baby is 6-7 months old (Safitri, Latifah, & Iqmy, 2021).

The positive impact of baby massage is generally that babies who receive regular massage will be more relaxed and calm. Through the touch of massage to muscle tissue, blood circulation can increase more smoothly, or muscle position can be restored and repaired automatically can improve the functions of the body's organs as well as possible. While the negative impact caused when baby massage is done in the wrong way and not in accordance with medical provisions, the side effects are swelling, bruising, pain in the baby so that the baby becomes fussy, shifting veins, injury, and can even cause death in infants. Therefore, many parents are reluctant to do baby massage, they are afraid that there will be risks of baby massage on their baby. The risks of infant massage are usually caused by the negligence of the massage practitioner in massaging, the wrong massage, and the lack of knowledge of the masseur (Safitri, Latifah & Iqmy, 2021).

Complications of TBA infant massage that have been reported are intracranial hemorrhage and obstructive ileus. Traditional baby massage movements by traditional

healers have some differences with baby massage movements based on baby massage guidelines, namely in the baby massage guidelines there is no massage on the head of the parietal or occipital parts, only in the form of smooth rubbing movements on the face area, and massage movements on the abdomen are only massage movements according to the anatomy of the large intestine called the I LOVE U movement, and this is different from the massage movements by several documented shamans there are massages on the head and abdomen, so it is possible that several complications may occur (Safitri, Latifah, & Iqmy, 2021).

Factors which influence the management of infant massage by mothers include internal and external factors. Internal factors include education, with higher education the mother will understand more about her baby's health. Knowledge factors with extensive maternal knowledge will also affect the mother's desire to do baby massage, besides that there are also employment factors, attitudes and perceptions that can influence mothers to do baby massage. External factors include cultural factors, mothers do baby massage to their babies because it has become a separate belief and tradition, social environmental factors and family support also affect the mother's interest in doing baby massage. (Enidya, Santi, 2012 in Khairani, 2017).

Based on data obtained by the author from the Aceh Besar Health Office in December 2022, it is known that the highest number of babies aged 0-12 months is in Darul Ijarah District with 925 while Kuta Baro District is in fourth position with 427 babies.

The preliminary study obtained by the author from the Kuta Baro Health Center in Aceh Besar in December 2022 found that the number of babies aged 0-12 months was 427 people. Based on the results of interviews and observations with 8 mothers who have babies aged 0-12 months, there are 2 people who know about baby massage, namely the mother said that baby massage to make the baby's body fresh and improve blood circulation, baby massage is done in the morning before the baby is bathed and massaged for approximately 15 minutes. While 6 mothers said that they had never heard of massage in infants and never did massage on their babies.

Based on the description above, the researcher felt interested in conducting a study with the title: "The Relationship between Knowledge and Attitudes of Mothers Towards Massage in Infants aged 0-12 months in the Kuta Baro Health Center Working Area".

METHODS

The research took place from March 08 to April 04, 2023. The study population was all mothers who had babies aged 0-12 months in the Kuta Baro Health Center working area. The sampling technique used Proportional Random Sampling technique with a sample size of 81 respondents.

The data collection technique used a questionnaire consisting of 20 questions about knowledge, 9 statements about attitudes and 1 statement about baby massage, Data collection was carried out after obtaining a research permit from the campus and the Health Office.

Data analysis used in this study was univariate and bivariate analysis. Univariate analysis was conducted to determine the frequency distribution of each variable studied. While bivariate analysis of this study was carried out using the chi-square test, which is to measure the relationship or level of association between the variables studied.

RESULTS AND DISCUSSION

Based on the research conducted, the following results were obtained:

Table 1 Frequency Distribution of Respondent Characteristics in the Kuta Baro Health Center Working Area in 2023 (n=81)

Age category	n	%
Late Adolescence (17-25 years old)	16	19,8
Early Adulthood (26-35 years old)	58	71,6
Late Adulthood (36-45 years old)	7	8,6
Total	81	100
Education Category	n	%
Elementary	7	8,6
Intermediate	35	43,2
High	39	48,2
Total	81	100
Work Category	n	%
Honorer	3	3,7
Housewives	69	85,2
Private Employee	1	1,2
Farmer	4	4,9
Civil servant	4	4,9
Total	81	100

Based on table 1, it can be seen that most respondents with an age range of 26-35 years were 58 people (71.6%), the majority of respondents were at a high education level, namely 39 people (48.2%) and 69 people (85.2%) were active as housewives.

Table 2 Frequency Distribution of Maternal Knowledge of Infant Massage Age 0-12 Months in the Kuta Baro Health Center Working Area in 2023 (n = 81)

The Knowledge	n	%
Good	19	23,5
Moderate	35	43,2
Less	27	33,3
Total	81	100

Based on table 2, it is known that most respondents have knowledge in the moderate category, namely 35 respondents (43.2%) compared to good knowledge, namely 19 respondents (23.5%) and poor knowledge, namely 27 respondents (33.3%).

Table 3 Frequency Distribution of Maternal Attitudes Toward Infant Massage Age 0-12 Months in the Kuta Baro Health Center Working Area in 2023 (n = 81)

Attitude	N	%
Negative	31	38,3
Positive	50	61,7
Total	81	100

Based on table 3, it is known that most respondents have positive attitudes, namely 50 respondents (61.7%) compared to negative attitudes, namely 31 respondents (38.3%).

Table 4 Frequency Distribution of Baby Massage Age 0-12 Months in the Kuta Baro Health Center Working Area in 2023 (n=81)

Baby Massage	n	%
Performed	36	44,4
Not Performed	45	55,6
Total	91	100

Based on table 4, it is known that most respondents did not do baby massage, namely 45 respondents (55.6%) compared to those who did, namely 36 respondents (44.4%).

Table 5 The Relationship between Maternal Knowledge and Baby Massage Age 0-12 Months in the Kuta Baro Health Center Working Area in 2023 (n = 81)

Knowledge	Baby Massage				Total		P Value
	Performed		Not Performed		n	%	
	N	%	n	%			
Good	12	63,2	7	36,8	19	100	0.012
Moderate	18	51,4	17	48,6	35	100	
Less	6	22,2	21	77,8	27	100	
Total	36		45		81		

Based on table 5, it is known that out of 81 respondents, 35 respondents with sufficient knowledge mostly do baby massage, namely 18 respondents (51.4%) while out of 27 respondents with less knowledge most of them do not do baby massage, namely 21 respondents (77.8%). Meanwhile, of the 19 respondents who had good knowledge, 12 respondents (63.2%) performed baby massage. After cross testing, the p value was 0.012 ($< \alpha = 0.05$), indicating that H_a was accepted which means there is a relationship between knowledge and baby massage.

Table 6: Relationship between mother's attitude towards infant massage aged 0-12 months in the Kuta Baro Health Center Working Area in 2023 (n=81)

Attitude	Baby Massage				Total		P Value
	Performed		Not Performed		N	%	
	N	%	N	%			
Negative	9	29	22	71	31	100	0,046

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Attitude	Baby Massage				Total	P Value
Positive	27	54	23	46	50	100
Total	36		45		81	

Based on table 6, it is known that out of 81 respondents, 50 respondents with positive attitudes mostly did baby massage, namely 27 respondents (54%), while out of 31 respondents who had a negative attitude where 22 respondents (71%) did not do baby massage. After cross testing, the p value is 0.046 ($< \alpha = 0.05$), indicating that H_a is accepted which means there is a relationship between attitude and baby massage.

Relationship between Maternal Knowledge and Baby Massage

Based on table 5, it is known that out of 81 respondents, 35 respondents with sufficient knowledge mostly do baby massage, namely 18 respondents (51.4%) while out of 27 respondents with less knowledge most of them do not do baby massage, namely 21 respondents (77.8%). Meanwhile, of the 19 respondents who had good knowledge, 12 respondents (63.2%) performed infant massage. After cross testing, the p value was 0.012 ($< \alpha = 0.05$), indicating that H_a was accepted which means there is a relationship between knowledge and baby massage.

According to Hartati & Nurazila (2018) information is important in shaping one's behavior. Information obtained from formal and non-formal education can provide short-term knowledge resulting in changes and increases in knowledge. The more information received, the more knowledge gained. information can change knowledge in a way that there will be an individual reaction when dealing with a baby massage stimulus.

Internal factors can be caused by the mother's lack of knowledge about infant massage and a sense of worry about the risks of massage such as bruising, sprains, uncomfortable and fussy babies when done independently. So that most mothers entrust baby massage to traditional healers who are considered more understanding and proficient in doing baby massage. In addition to internal factors, there are external factors, namely the lack of support from the family and the culture of the community itself (Salamah & As, 2021).

The cause of the mother's lack of knowledge about baby massage can lead to a negative attitude of the mother towards independent baby massage. This is in line with research conducted by Pemayun et al., (2021); Ayun et al., (2018) found that there is a relationship between mothers who have knowledge about baby massage and mothers' behavior in doing baby massage independently.

Similarly, the results of Sari's research (2023), where from the results of the Chi-Square test obtained a relationship between maternal knowledge and the practice of infant massage aged 3-12 months in Baturanta South Sumatra with p value = 0.005. So it can be concluded that there is a relationship between maternal knowledge and the practice of massage for babies aged 3-12 months.

According to the researcher's assumption, the better the mother's knowledge, the better the information she has. The mother's ability to absorb information is related to the mother's level of education where most of the mothers in this study are highly educated,

besides that most of the respondents are at the age of 26-35 years so that the ability to absorb information is better. Mothers who get more information will increase their knowledge about baby massage and mothers are increasingly convinced that doing baby massage is good for their baby's health so that in the end their attitude becomes good.

Based on the respondents' answers, it can be seen that most of the respondents answered correctly by more than half. Most of the respondents knew about the benefits of doing baby massage, knew when to do baby massage, and most of the respondents said that the baby sleeps better after doing baby massage.

Relationship between attitude and baby massage

Based on table 6, it is known that out of 81 respondents, 50 respondents with positive attitudes mostly did baby massage, namely 27 respondents (54%), while out of 31 respondents who had a negative attitude where 22 respondents (71%) did not do baby massage. After cross testing, the p value is 0.046 ($< \alpha = 0.05$), indicating that H_a is accepted which means there is a relationship between attitude and baby massage.

The manifestation of attitudes cannot be directly seen, but can only be interpreted first from closed behavior. Attitudes clearly indicate the connotation of the suitability of reactions to certain stimuli and in everyday life as an emotional reaction to social stimuli (Nanny, 2019).

The mother's attitude about infant massage is shown by her willingness to massage her baby either independently or to a health worker. In this study there were a number of mothers who did not massage their babies. Maternal attitudes about infant massage are influenced by experience, culture, sources of information and emotional factors (Imelda, 2018).

The results of this study are in line with Andriyani (2017), where the results of research on the relationship between maternal attitudes towards infant massage with the behavior of massaging babies at the Posyandu of the Sidomulyo Puskesmas Work Area Pekanbaru, it can be concluded that there is a relationship between maternal attitudes towards infant massage with maternal behavior in massaging babies at the Posyandu of the Sidomulyo Puskesmas Work Area Pekanbaru in 2014 with a P-Value of 0.002 ($< \alpha 0.05$).

Likewise with Amri's research (2020), where the results of his research showed that there was a significant relationship between maternal knowledge about infant massage at BPM Wulansari, East Binjai sub-district, Binjai Regency Municipality with a p.value = 0.020 < 0.05 and there was a relationship between maternal attitudes towards infant massage at BPM Wulansari, East Binjai sub-district, Binjai Regency Municipality with a p.value = 0.032 < 0.05 .

According to the researcher's assumption in this study, it can be concluded that between attitudes and actions are interconnected, the majority of respondents have a positive attitude. The positive attitude of the mother strongly supports the implementation of baby massage actions properly and correctly. With this problem, the mother's belief about the importance of doing baby massage for health.

Based on the respondents' answers, it is known that mothers are not afraid to do baby massage, mothers say that by doing baby massage the child's development becomes better, say that they use baby oil to do baby massage, do not do baby massage in the village, do not do baby massage independently because they do not have good skills and knowledge and do baby massage only when the child is fussy. this illustrates that most respondents have a positive attitude towards baby massage activities.

CONCLUSION

Based on the results of research conducted in the Kuta Baro Health Center Working Area which was conducted on March 08 to April 04, 2023, the following conclusions can be drawn: There is a relationship between knowledge and baby massage in the Kuta Baro Health Center Working Area with a p value of 0.012. There is a relationship between attitude and baby massage in the Kuta Baro Health Center Working Area with a p value of 0.046.

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