



## Hypnobreastfeeding: A Therapy to Reduce Anxiety and Enhance Breastfeeding Self-Efficacy

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### ABSTRACT

**Background:** Maternal anxiety is a psychological factor that can interfere with the breastfeeding process. Self-efficacy in breastfeeding—as a mother's belief in her ability to breastfeed—is a strong predictor of successful exclusive breastfeeding. Hypnobreastfeeding as a combination of relaxation techniques and positive suggestions to help reduce anxiety and increase self-efficacy for successful breastfeeding.

**Purpose:** This study aimed to evaluate the effectiveness of hypnobreastfeeding therapy in reducing anxiety levels and increasing breastfeeding self-efficacy among postpartum mothers.

**Methods:** A quasi-experimental study with a pre-test–post-test control group design was conducted involving 60 postpartum mothers selected using purposive sampling (30 in the intervention group, 30 in the control group). The intervention consisted of four hypnobreastfeeding sessions delivered over a two-week period. Anxiety levels were measured using the Hamilton Anxiety Rating Scale (HARS), and breastfeeding self-efficacy was assessed with the Breastfeeding Self-Efficacy Scale–Short Form (BSES-SF). Data were analyzed using paired *t*-tests and independent *t*-tests to compare pre- and post-intervention scores.

**Results:** The intervention group showed a statistically significant reduction in anxiety levels ( $p < 0.001$ ) and a significant increase in breastfeeding self-efficacy scores ( $p < 0.001$ ) compared to the control group.

**Conclusion:** Hypnobreastfeeding is an effective intervention for reducing maternal anxiety and improving breastfeeding self-efficacy. It is recommended as a supportive approach in breastfeeding education and maternal mental health programs in clinical and community health settings.

**Keywords:** hypnobreastfeeding; anxiety; self-efficacy; breastfeeding; relaxation therapy

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## BACKGROUND

Exclusive breastfeeding during the first six months of life is one of the most effective interventions to reduce infant mortality and improve nutritional status and long-term health. However, the achievement of exclusive breastfeeding targets globally and nationally is still not optimal. Data from (Asih & Nyimas, 2020) shows that only about 48% of babies in the world receive exclusive breastfeeding during the first six months, while in Indonesia this figure has stagnated in the range of 52% in the last five years.

The success of breastfeeding is influenced by various factors, one of which is the psychological condition of the mother. Anxiety is a common problem in the postpartum period that can inhibit the production of the hormone oxytocin, disrupt the let-down reflex, and decrease the frequency of breastfeeding (Hannola et al., 2021). In addition, breastfeeding self-efficacy, which is the mother's confidence in her ability to breastfeed, has been proven to be the main determinant of the success of exclusive breastfeeding (World Health Organization Regional Office for the Eastern Mediterranean, 2022). Low self-efficacy is often associated with negative perceptions, insecurity, and inability to cope with breastfeeding challenges.

Several psychological-based interventions have been developed to overcome breastfeeding barriers, one of which is *hypnobreastfeeding*. This technique is a form of relaxation therapy with a mild hypnosis approach that combines positive affirmations, pleasurable visualizations of breastfeeding, and suggestions to increase maternal confidence (Melo et al., 2021). Studies by Asih and Nyimas (2020) show that hypnobreastfeeding can increase the frequency of breastfeeding and reduce mild anxiety complaints (Asih & Nyimas, 2020). Similarly, recent research by Hulsbosch et al. (2021) states that the mindfulness-hypnosis approach has a positive impact on emotional regulation in breastfeeding mothers (Hulsbosch et al., 2023). However, most studies still focus on aspects of breastfeeding behavior without further exploring its effect on psychological variables such as anxiety levels and self-efficacy simultaneously.

The scientific gap from previous research lies in the lack of empirical evidence that directly and simultaneously examines the effect of hypnobreastfeeding on breastfeeding anxiety and self-efficacy. In fact, these two factors are very interrelated and contribute to the success of lactation. Therefore, this article aims to review and analyze the effectiveness of hypnobreastfeeding therapy in reducing anxiety as well as improving breastfeeding self-efficacy in postpartum mothers (Richter et al., 2019).

Pringsewu District, located in Lampung Province, Indonesia, was selected as the study site due to its relatively high birth rate and ongoing challenges in achieving optimal exclusive breastfeeding coverage. According to local health authority data, the exclusive breastfeeding rate in Pringsewu has fluctuated over the past five years and remains below the national target of 70%. Furthermore, gaps persist in breastfeeding education and the

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provision of psychological support for postpartum mothers, particularly at the level of primary care services such as independent midwifery practices .

This context underscores the need for community-based interventions and more personalized psychosocial approaches to improve breastfeeding outcomes. The selection of Pringsewu is also supported by the researcher's accessibility to the region and the potential for sustained collaboration with local healthcare providers (Berens, 2015). Therefore, this district serves as a representative setting to examine the effectiveness of hypnobreastfeeding therapy in enhancing exclusive breastfeeding through structured psychosocial interventions.

The hypothesis of this study is that structured administration of hypnobreastfeeding therapy will lower maternal anxiety levels and significantly improve breastfeeding self- efficacy compared to standard interventions. The problem-solving approach is carried out by integrating hypnosis-based relaxation therapy in breastfeeding education programs (Berens, 2015). This review is expected to provide a scientific basis for the development of psychosocial interventions in midwifery services and support increasing the coverage of exclusive breastfeeding nationally.

## OBJECTIVE

This study aims to evaluate the effectiveness of hypnobreastfeeding therapy in reducing anxiety and improving breastfeeding self-efficacy in postpartum mothers. The results of the study are expected to provide new insights in the development of psychological intervention programs to support mothers in exclusive breastfeeding, as well as as a reference in the application of hypnotherapy techniques in obstetric practice.

## METHODS

This study used a quasi-experimental design with a pre-test and post-test group design to measure the effectiveness of hypnobreastfeeding therapy in reducing anxiety and improving breastfeeding self-efficacy in postpartum mothers. This study was conducted at the Regional General Hospital (RSUD) in Lampung Province, Indonesia, on mothers who have just given birth and decided to give exclusive breastfeeding.

### Research Stages

#### Research Preparation:

Sample: Postpartum mothers who met the inclusion and exclusion criteria, were selected using a consecutive sampling technique totaling 60 respondents who were divided into two groups (30 respondents for the experimental group and 30 for the control group). Inclusion criteria included mothers who were willing to participate in hypnobreastfeeding therapy sessions and had not received a lactation intervention before. Exclusion criteria

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include mothers with significant mental disorders or other medical problems that affect the ability to breastfeed.

**Materials and Tools:** Hypnobreastfeeding therapists use standardized modules developed based on hypnotherapy techniques for breastfeeding, which include positive visualization, affirmation, and relaxation exercises.

### **Application of Therapy:**

**Experimental Group:** Mothers in the experimental group received four hypnobreastfeeding sessions, each 45 minutes in duration, which were carried out during two weeks postpartum. Therapy sessions are conducted by a certified therapist who is experienced in hypnotherapy. This therapy involves progressive relaxation techniques, positive suggestions about breastfeeding skills, and pleasant and calm visualizations of breastfeeding.

**Control Group:** This group received only standard breastfeeding counseling without hypnobreastfeeding intervention.

### **Variable Measurements:**

Variable Dependen:

1. Anxiety: Measured using the Hamilton Anxiety Rating Scale (HARS) anxiety scale before and after the intervention.
2. Breastfeeding self-efficacy: Measured using a locally context-adjusted Breastfeeding Self-Efficacy Scale (BSES), which includes items related to maternal confidence in breastfeeding, lactation management, and ability to cope with breastfeeding challenges. Data Collection: Anxiety and self-efficacy data were collected at two time points: pre- test and after four therapy sessions (post-test). All measurements are carried out by trained researchers to ensure consistency and reliability of the data.

### **Data Analysis:**

The data collected were analyzed using a paired t-test to compare changes in anxiety scores and self-efficacy within the experimental and control groups. To examine differences between the two groups following the intervention, an independent t-test was employed. This statistical test was utilized to determine whether a significant difference existed between the groups post-intervention. Additionally, the Pearson correlation coefficient was applied to assess the relationship between changes in anxiety and changes in self-efficacy within the experimental group. Prior to conducting these analyses, a normality test was performed, and the results indicated that the data were normally distributed, justifying the use of parametric statistical tests.

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## Platforms and Tools:

Platform: Data collection was carried out through face-to-face interviews and paper-based questionnaires for self-efficacy, while for anxiety using an android-based application using the Hamilton Anxiety Rating Scale (HARS). Auxiliary Tools: The tools used for data analysis are SPSS 26 or similar statistical software for t-tests and descriptive analysis.

## RESULTS

This study successfully identified the significant impact of hypnobreastfeeding therapy on anxiety and breastfeeding self-efficacy in postpartum mothers. The following table shows changes in average anxiety and self-efficacy scores in both groups (experimental and control) after the intervention:

**Table1. Descriptive Statistics and Paired t-Test Results for Anxiety and Self-Efficacy Scores (n = 30 per group)**

Variable	Group	Time	Mean ± SD	Min	Max	p-value
Anxiety Score (HARS)	Intervention	Pre-Test	21.8 ± 2.5	18	26	< 0.001
		Post-Test	12.0 ± 3.0	6	18	
	Control	Pre-Test	21.0 ± 2.7	17	25	0.071
		Post-Test	20.2 ± 2.9	15	24	
Self-Efficacy (BSES-SF)	Intervention	Pre-Test	42.0 ± 4.0	34	48	< 0.001
		Post-Test	60.5 ± 3.5	54	66	
	Control	Pre-Test	41.5 ± 4.2	35	47	0.052
		Post-Test	43.2 ± 4.0	36	50	

Table 1 presents the descriptive statistics and paired t-test results for anxiety scores (HARS) and breastfeeding self-efficacy scores (BSES-SF) in both the intervention and control groups, measured before and after the intervention.

In the intervention group, the mean anxiety score decreased significantly from 21.8 ± 2.5 at pre-test to 12.0 ± 3.0 at post-test ( $p < 0.001$ ), indicating a substantial reduction in anxiety following the intervention. In contrast, the control group showed a slight, non-significant decrease in anxiety score from 21.0 ± 2.7 to 20.2 ± 2.9 ( $p = 0.071$ ), suggesting that no meaningful change occurred without the intervention.

Regarding self-efficacy, the intervention group demonstrated a statistically significant increase in mean score from 42.0 ± 4.0 to 60.5 ± 3.5 ( $p < 0.001$ ), reflecting a

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strong improvement in breastfeeding confidence. Meanwhile, the control group showed only a modest increase in self-efficacy from  $41.5 \pm 4.2$  to  $43.2 \pm 4.0$ , which was not statistically significant ( $p = 0.052$ ).

These results indicate that the intervention was effective in significantly reducing postpartum anxiety and enhancing breastfeeding self-efficacy, while minimal changes were observed in the control group.

## DISCUSSION

This study aimed to evaluate the effectiveness of hypnobreastfeeding therapy in reducing postpartum anxiety and enhancing breastfeeding self-efficacy. The results demonstrated that the intervention significantly improved maternal psychological well-being and confidence, supporting its potential role in postpartum care.

### Reduced Maternal Anxiety in the Experimental Group

The marked decrease in anxiety scores among mothers who received hypnobreastfeeding therapy suggests the intervention's strong psychological impact during the early postpartum period. The average reduction of 9.1 points in the experimental group, compared to 0.7 in the control group, reflects a clinically meaningful change. Based on the Hamilton Anxiety Rating Scale (HARS), a pre-test average score of 21.8 in the experimental group falls within the range of moderate anxiety (18–24), while the post-test score of 12.0 indicates a shift to the mild anxiety range (8–17) (Anstey, E. & Jevitt, 2011; Ratnasari et al., 2017). This reduction not only demonstrates statistical significance but also represents a transition from a clinically concerning anxiety state to a more manageable level, which is crucial in the early postpartum period when mothers are vulnerable to emotional disturbances.

This finding is consistent with previous studies reporting that hypnotherapy promotes emotional regulation and attenuates the stress response via deep relaxation, guided imagery, and cognitive restructuring (Ingram et al., 2015; Ketsuwan et al., 2018). Moreover, postpartum anxiety has been associated with adverse outcomes such as impaired maternal–infant bonding, delayed lactogenesis, and reduced breastfeeding duration (Fallon et al., 2018; Kassebaum et al., 2016; Tovar et al., 2016). Therefore, the reduction in anxiety observed in this study may contribute positively to both maternal psychological well-being and breastfeeding success. The results highlight hypnobreastfeeding as a promising non-pharmacological intervention for postpartum anxiety, aligning with the growing emphasis on integrative, patient-centered maternal care.

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The mechanisms underlying the anxiolytic effect of hypnobreastfeeding likely involve the downregulation of sympathetic nervous system activity and modulation of cortisol levels. Such physiological changes create a more conducive environment for lactation by enhancing oxytocin release, which is often inhibited by anxiety (Gharaei et al., 2020). These findings align with research by Panggabean and Siregar (2025), who found significant reductions in postpartum anxiety following structured hypnotherapy sessions. Furthermore, integrative interventions that combine mindfulness, hypnosis, and relaxation—such as hypnobreastfeeding—have been shown to reduce anxiety more effectively than standard psychoeducational approaches (Asih & Nyimas, 2020). From a midwifery perspective, addressing maternal anxiety is critical not only for mental health but also for successful breastfeeding initiation. The World Health Organization emphasizes the integration of psychosocial care in maternal services, particularly for women in low-resource settings who may lack access to formal psychological support (UNICEF & WHO, 2023).

## **Enhanced Breastfeeding Self-Efficacy**

The study also revealed a substantial increase in self-efficacy scores among participants in the experimental group, with an average improvement of 11.6 points, rising from a pre-test mean of 42.0 to a post-test mean of 60.5. This outcome underscores the potential of hypnobreastfeeding to significantly strengthen maternal confidence in breastfeeding. Based on the Breastfeeding Self-Efficacy Scale-Short Form (BSES-SF), a score of 42.0 reflects moderate self-efficacy, whereas 60.5 falls within the high self-efficacy range, indicating a clinically meaningful improvement in the mother's belief in her ability to breastfeed (Stewart & Henshaw, 2022).

Aligned with Bandura's Social Cognitive Theory, perceived self-efficacy strongly influences maternal motivation, persistence, and resilience in managing breastfeeding-related difficulties, such as latching issues, fatigue, and nipple pain. Recent evidence confirms that mothers with higher self-efficacy are more likely to initiate breastfeeding, maintain exclusivity, and overcome common postpartum challenges (Negash et al., 2014; Petrozzi & Gagliardi, 2016). The hypnobreastfeeding intervention likely contributes to these outcomes by reducing anxiety, fostering emotional regulation, and reinforcing maternal confidence through relaxation and positive suggestion. Therefore, the significant improvement in self-efficacy observed in this study highlights the value of integrating mind-body techniques such as hypnobreastfeeding into comprehensive, evidence-based postpartum care.

The cognitive-behavioral components of hypnotherapy—such as affirmations, guided imagery, and positive suggestion—likely contributed to the enhancement of self-belief

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among participating mothers. This is supported by Wardiyah et al. (2020), who observed increased maternal confidence following structured hypnotherapy sessions in postpartum women. Interventions that target psychological readiness for breastfeeding may be especially impactful in the early weeks when maternal identity is still forming.

The findings are further supported by (Gungor & Beji, 2007), who reported improved breastfeeding outcomes in mothers receiving mindfulness-based and guided visualization techniques. Similarly, found that psychosocial interventions incorporating relaxation and affirmations led to improved maternal self-efficacy and increased rates of exclusive breastfeeding. This study observed a marked increase in maternal confidence following structured hypnobreastfeeding sessions, highlighting the intervention's psychological benefits during the early postpartum period. Enhancing psychological readiness for breastfeeding—particularly in the first few weeks after childbirth when maternal identity is still evolving—can significantly influence breastfeeding outcomes. Targeted interventions that reduce anxiety and foster self-belief are crucial during this sensitive window.

These findings are further supported by (Rai & Unisa, 2013), who demonstrated that mindfulness-based breastfeeding interventions significantly increased maternal breastfeeding self-efficacy and improved exclusive breastfeeding rates. Similarly, reported that relaxation techniques combined with positive affirmations led to enhanced maternal self-efficacy and sustained exclusive breastfeeding practices. These results are consistent with (Er et al., 2016), who found that self-efficacy serves as a mediator between psychological interventions and breastfeeding duration.

Increased breastfeeding self-efficacy has been shown to predict greater breastfeeding success, including higher rates of initiation, longer duration, and exclusive breastfeeding in the first six months (Saber et al., 2014). Mothers with high self-efficacy are more resilient when facing breastfeeding difficulties, more motivated to persevere, and more likely to seek support when needed. As such, the observed improvement in self-efficacy in this study likely contributed to better breastfeeding outcomes, reinforcing the importance of addressing emotional and cognitive factors in postpartum care.

## **Alignment and Advancement of Previous Research**

These findings are in line with the broader literature supporting the efficacy of hypnosis and guided relaxation in maternal health. Concluded that hypnotherapy effectively reduces anxiety and improves emotional resilience in postpartum women. However, the current study advances this knowledge by applying a focused intervention—hypnobreastfeeding—that specifically targets breastfeeding-related psychological barriers.

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Unlike earlier studies that examined anxiety and self-efficacy as separate outcomes, this study evaluated both domains simultaneously, providing a more comprehensive understanding of maternal psychological adaptation. Furthermore, the structured intervention protocol used in this study enhances methodological rigor and strengthens its potential for replication in midwifery practice.

## Theoretical and Practical Implications

Theoretically, this study reinforces the relevance of Bandura's self-efficacy model in explaining maternal behaviors and supports biopsychosocial frameworks that consider emotional regulation as vital for successful lactation. The observed reduction in anxiety aligns with evidence that emotional distress can suppress oxytocin release and interfere with milk ejection.

Practically, hypnobreastfeeding represents a non-pharmacological, cost-effective, and culturally adaptable intervention suitable for integration into maternal health services. Given the simplicity of delivery, midwives and trained health educators can apply this approach during antenatal classes or early postpartum care. Its potential scalability makes it particularly relevant in primary care settings such as community health centers (Puskesmas) and independent midwifery practices, especially where access to mental health services remains limited.

This approach aligns with WHO's call for the integration of mental health into routine maternal care (Wong et al., 2022; Wu et al., 2020). In the Indonesian context, where exclusive breastfeeding rates remain suboptimal, hypnobreastfeeding may serve as a strategic intervention to overcome psychological barriers and support national breastfeeding goals.

In conclusion, hypnobreastfeeding is an effective intervention that simultaneously reduces maternal anxiety and enhances breastfeeding self-efficacy. Its dual benefits support its inclusion in holistic postpartum care strategies. Future research is warranted to explore its long-term effects and implementation across diverse cultural and healthcare settings.

## CONCLUSION

This study demonstrates that hypnobreastfeeding therapy is an effective non-pharmacological intervention for reducing postpartum anxiety and enhancing breastfeeding self-efficacy. The significant improvements observed in the intervention group suggest that incorporating hypnobreastfeeding into postpartum care may contribute to better psychological outcomes and increased breastfeeding success. These findings highlight the importance of addressing maternal mental health through integrative

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approaches and support the inclusion of mind–body therapies in evidence-based postpartum care strategies.

The findings of this study offer several implications for current practice in maternal healthcare. Midwives, healthcare providers, and maternal support programs should consider incorporating hypnobreastfeeding as part of postpartum care routines, especially in resource-limited settings where psychological support for new mothers may be insufficient. Its non-invasive nature, cost-effectiveness, and ease of implementation make it a viable option for improving maternal mental health and breastfeeding outcomes.

Future research should explore the long-term effects of hypnobreastfeeding on maternal health, as well as its potential to improve breastfeeding rates across diverse populations. Additionally, studies investigating the optimal duration and frequency of hypnobreastfeeding sessions could further refine its implementation guidelines.

In conclusion, hypnobreastfeeding therapy offers a promising approach to supporting new mothers during the postpartum period, reducing anxiety, and enhancing breastfeeding self-efficacy. Given the positive impact on maternal well-being and lactation success, its integration into routine midwifery and maternal healthcare practice could significantly contribute to better outcomes for both mothers and infants.

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