



## The Effect of Breast Care Using Positive Affirmation Oxytocin Massage Techniques on Breast Milk Production in Postpartum Patients

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### ABSTRACT

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Breastfeeding is a natural process that is important for the well-being of the baby, mother and family. Mothers often fail to breastfeed or stop breastfeeding early because the mother needs help to make breastfeeding more successful. The aim of the research is to determine the effect of breast care using oxytocin massage techniques accompanied by affirmations. Positif impact on breast milk production in post partum patients at the Muhammadiyah Kalikapas Lamongan Hospital in 2023. Data collection was obtained through observation of post partum mothers by providing breast care treatment accompanied by positive affirmations in group I. Then the researchers observed whether there was breast milk discharge or not. And observing group II who were not given breast care treatment accompanied by positive affirmation then the researchers observed whether breast milk was being released or not. The research was conducted at the Muhammadiyah Kalikapas Lamongan Hospital in 2023. The population in this study was all post partum mothers, a sample of 30 people was obtained using purposive sampling. Data was collected by filling in an observation sheet the research was conducted at the Muhammadiyah Kalikapas Lamongan Hospital in 2023. The population in this study was all post partum mothers, a sample of 30 people was obtained using purposive sampling. Data was collected by filling in an observation sheet. The Wilcoxon test results showed that  $p=0.002$  ( $p<0.05$ ) in post partum mothers who were given breast care using the oxytocin massage technique accompanied by positive affirmations, which means there was an influence on respondents who were given action and who were not given action. Wiloxon test obtained a p-value of 0.046. Because the  $p\text{-value } 0.000 < \alpha (0.05)$  shows that there is a significant difference in the success of expressing breast milk before and after 2 days in the control group of post partum mothers.

## **INTRODUCTION**

Breastfeeding is a natural process that is important for the well-being of babies, mothers, and families. Often mothers fail to breastfeed or stop breastfeeding early because they need help to make the breastfeeding process more successful. Many reasons are put forward by mothers who do not breastfeed their babies, including not producing enough breast milk or their babies not wanting to suck. In addition, improper and incorrect breastfeeding methods can cause problems with the mother's nipples (Marmi, 2018). According to the results of the Basic Health Research (Riskesdas) in 2020, the coverage of Exclusive Breast Milk (ASI) in infants aged 0-5 months reached 37.3%, partial breastfeeding 9.3% and predominant breastfeeding 3.3%. The data achieved at this time is still far from the target set by the Indonesian Ministry of Health, which is 80% of the maximum target, so it can be concluded that the achievement of exclusive breastfeeding in Indonesia has not met the target. The coverage of exclusive breastfeeding in East Java in 2020 was 66.0%, still below the maximum target set by the Indonesian government. The coverage of exclusive breastfeeding in Lamongan Regency in 2020 reached 68.22%. The coverage of exclusive breastfeeding at the Lamongan City Health Center in 2021 until October 2022 reached 53% (Nuraini, 2023). The problem of achieving exclusive breastfeeding coverage in East Java is due to the marketing of formula milk for babies aged 0-6 months where the baby does not have medical problems which is still being carried out intensively by formula milk producers, there are still many companies that do not provide lactation rooms and supporting equipment to provide opportunities for breastfeeding mothers to carry out exclusive breastfeeding (East Java Health Office, 2021)

The initial survey conducted in March 2023 at the Muhammadiyah Kalikapas Hospital in Lamongan, there were still many postpartum patients who had not produced colostrum after giving birth, this is because there are still many pregnant women until giving birth who do not carry out breast care during the third trimester, which affects the smoothness of breast milk production. During January to February 2023, there were 21 patients (26.25%) out of 125 patients whose breast milk had not come out after giving birth. In general, factors that affect breast milk production are external and internal (Ssari, 2022). External factors such as the quality and quantity of food consumed by postpartum mothers, peace of mind and soul, use of contraceptives, abnormal breast anatomy, breast care, rest and activity patterns, too little pumping time, baby's weight at birth, gestational age at delivery, cigarette and alcohol consumption, early initiation of breastfeeding, social and cultural (Hidayati & Rahmawati, 2023). Internal factors are age, education, occupation, parity, and health conditions. Of these external and internal factors, the focus of research is breast care (Setiawan, 2020)

Various stimulation of breast milk production in postpartum mothers have begun to develop, which previously focused on pharmacological administration, although pharmacological actions are considered effective in helping breast milk to come out, this method has expensive economic value, and the possibility of side effects from drugs in patients ranging from mild to severe (Pratiwi). As an alternative to breast milk output, it includes consuming high-calorie, high-protein foods, relaxation techniques and massage techniques. The type of massage is oxytocin massage. This technique aims to increase blood circulation, as well as increase physical and mental relaxation. Oxytocin massage is a safe and easy massage to do, does not require tools, does not require costs and does not cause side effects, can be done by the family, not necessarily by health workers. Helping breast milk production in postpartum mothers, various non-pharmacological or complementary actions are now being developed to stimulate breast milk production. So the big problem is the irregular flow of breast milk, and later it will be overcome with breast care using oxytocin massage techniques accompanied by positive affirmations for the flow of breast milk in postpartum patients at the Muhammadiyah Kalikapas Hospital, Lamongan in 2023..

## LITERATURE REVIEW

*Post partum* is a period of several hours after the birth of the placenta until the sixth week after giving birth. The postpartum period begins after the birth of the placenta and ends when the reproductive organs return to their pre-pregnancy state which lasts approximately six weeks (Marmi, 2018).

The postpartum period (puerperium) or Postpartum begins after the birth of the placenta ends and when the reproductive organs return to their pre-pregnancy state. The postpartum period or puerperium begins 2 hours after the birth of the placenta until 6 weeks (42 days) after that (Anggraini, 2017).

According to Suherni (2019), there are three stages of the postpartum period, namely: 1) Early puerperium, which is where the mother is allowed to stand and walk around. In Islam, it is considered clean and working within 40 days. 2) Intermedial puerperium, which is the complete recovery of the genitals which lasts 6-8 weeks. 3) Remote puerperium, which is the time needed to recover and be completely healthy, especially if there are complications during pregnancy or childbirth. The time to be perfectly healthy can be weeks, months or years.

In undergoing this postpartum period, the mother must undergo postpartum care with the aim of maintaining the health of the mother and baby. According to Asih Yusari (2016) postpartum care includes:

1. Early Ambulation (mobilization), generally women are very tired after giving birth and mothers are advised to sleep on their backs for 8 hours postpartum then tilt right and left to prevent thrombosis and thromboembolism. On the second day, they can sit, on the third day they can walk around and on the fourth or fifth day they can go home.

2. Diet is a meal arrangement. One of the advantages for breastfeeding mothers is that it is easier and faster to return to ideal body weight.
3. Urination should be done independently as soon as possible. Sometimes women have difficulty urinating, because during labor the bladder is pressed by the fetal head.
4. Defecation must be done 3-4 days postpartum. If constipation occurs and hard bowel movements occur, laxatives (laxantia) can be given orally or parenterally, or klisma can be performed if it has not ended. Because if not, feces can accumulate in the rectum and cause fever.
5. Breast care has been started since the beginning of pregnancy. So that the nipples are soft, not hard and dry in preparation for breastfeeding the baby.
6. Counseling during the postpartum period is the process of providing objective and complete information carried out systematically to postpartum mothers regarding personal hygiene, breastfeeding, sexual intercourse, family planning and postpartum danger signs. In the postpartum period, what should not be forgotten is breastfeeding.

There are several factors that affect breast milk production in postpartum mothers, including the quality and quantity of food consumed by postpartum mothers, peace of mind and soul, Use of contraceptives, breast anatomy, breast care, rest and activity patterns, pumping, baby's weight at birth, gestational age at delivery, cigarette and alcohol consumption, Early Breastfeeding Initiation, socio-cultural factors, internal factors. According to Maritilia (2013), several internal factors that influence breast milk production include age, education, work, parity and health conditions.

## **METHODOLOGY**

In this design, the study used a Quasi Experiment design. Quasi experiments are studies that test an intervention on a group of subjects with or without a comparison group but are not randomized to enter subjects into the treatment or control group (Dharma 2017). The purpose of this study was to determine the effect of breast care using oxytocin massage techniques accompanied by positive affirmations on breast milk production in postpartum mothers at Muhammadiyah Hospital Kalikapas Lamongan.

The intervention group will be given breast care treatment using oxytocin massage techniques accompanied by positive affirmations while the control group will not. Both treatment and control groups will begin with observation of breast milk production and after breast care using oxytocin massage techniques accompanied by positive affirmations, they will be observed again to determine the success of breast milk production (post test).

The independent variable in this study is breast care using oxytocin massage techniques accompanied by positive affirmations at Muhammadiyah Hospital Kalikapas Lamongan. The dependent variable in this study is breast milk production in postpartum patients at the Muhammadiyah Kalikapas Hospital, Lamongan. The population in this study were all postpartum mothers who gave birth in August 2023 to November 2023 at the Hospital. The sample in

this study was some postpartum mothers who gave birth in August to November 2023, totaling 30 respondents. This primary data was obtained from responses that showed between before and after breast care intervention using oxytocin massage accompanied by positive affirmations. The stages of the study include measuring each indicator of successful breast milk production using observation sheets and checklists in each intervention group and control group, breast care using oxytocin massage accompanied by positive affirmations in the intervention group 1x while in the hospital. Within 1 day there will be feedback from the researcher to each respondent, measuring each indicator of successful breast milk production in both the intervention group and the control group. All results will be recorded on the observation sheet and checklist.

## RESULTS

The results of the study showed the frequency distribution of general data obtained from mothers in the intervention group, the results obtained were as shown in the table below.

No.	Mother's Age Category	Amount	Percentage
1.	Age <30 years	13	86.7
2.	Age 30-40 years	2	13.3
3.	> 40 Years	0	0
<b>TOTAL</b>		<b>15</b>	<b>100</b>

No.	Education	Amount	Percentage
1.	SD	1	6.7
2.	SMP	3	20.0
3.	SMA	4	26.6
4.	Bachelor	7	46.7
<b>Amount</b>		<b>15</b>	<b>100,0</b>

No.	Job	Amount	Percentage
1.	Doesn't work	6	40,0
2.	Job	9	60,0
<b>Amount</b>		<b>15</b>	<b>100,0</b>

No.	Parity	Amount	Percentage
1.	Primipara	8	53.3
2.	Multipara	7	46.7
<b>Amount</b>		<b>15</b>	<b>100,0</b>

No.	Types of labor	Amount	Percentage
1.	Spontaneous	9	60.0
2.	SC/ Operation	6	40.0
<b>Amount</b>		<b>15</b>	<b>100,0</b>

Most of the 13 mothers were aged <30 years (86.7%) and a small number of 2 mothers were aged 30-40 years (13.3%). Most of the 7 mothers had a Bachelor's degree (46.7%) and a small number of 1 mother had an elementary school education (6.7%). Most of the 9 mothers worked (60.0%) and a small number of 6 mothers did not work (40.0%). Most of the 8 mothers were primiparous (53.3%) and a small number of 7 mothers were multiparous (46.7%).

No.	Mother's Age Category	Amount	Percentage
1.	Usia <30 tahun	10	66.7
2.	Usia 30-40 tahun	5	33.3
3.	> 40 tahun	0	0
<b>Amount</b>		15	100

No.	Education	Amount	Percentage
1.	SD	1	6.6
2.	SMP	4	26.7
3.	SMA	10	66.7
4.	Sarjana	0	00.0
<b>Amount</b>		15	100,0

No.	Job	Amount	Percentage
1.	Not working	6	40,0
2.	Working	9	60,0
<b>Amount</b>		15	100,0

No.	Parity	Amount	Percentage
1.	Primipara	8	53.3
<b>Amount</b>		15	100,0

No.	Parity	Amount	Percentage
1.	Primipara	11	73.3
2.	Multipara	4	26.7
<b>Amount</b>		15	100,0

No.	Types of labor	Amount	Percentage
1.	Spontaneous	10	66.7
2.	SC/ Operation	5	33.3
<b>TOTAL</b>		15	100,0

While the frequency distribution in the control group obtained results as in the table below. Most of the 7 mothers had a Bachelor's degree (46.7%) and a small part of 1 mother had an elementary school education (6.7%). Most of the 10 mothers had a high school education (66.6%) and a small part of 1 mother had an elementary school education (6.6%). Most of the 12 mothers did not work (80.0%)

and a small part of 3 mothers worked (20.0%). Most of the 11 mothers were primiparous (73.3%) and a small part of 4 mothers were multiparous (26.7%). A small part of 5 mothers gave birth by CS/section caesarean section (33.3%).

No	Breast Milk Expenditure	Before		After	
		Amount	Percentage	Amount	Percentage
1	Not coming out	15	100	3	20
2	Out	0	0	12	80
	Amount	15	100	15	100

All postpartum mothers did not produce breast milk (100%) and in the post-test observation after receiving breast care, most of them had produced breast milk, namely 12 postpartum mothers (80%) and a small number did not produce breast milk at the time of the post-test, namely 3 postpartum mothers (20.0%).

No	Breast Milk Prouction	Before		After	
		Amount	Percentage	Amount	Percentage
1	Out	0	0	4	26,7
2	Not Coming Out	15	100	11	73,3
	Amount	15	100	15	100

All postpartum mothers did not produce breast milk (100%) and in the post-test observation after day 2 more than half of the postpartum mothers did not produce breast milk (73.3%), only a small portion produced breast milk (26.7%). The results of the normality test from both pre-test and post-test data showed abnormal data results, so the Wilcoxon test was carried out to obtain the results of the comparison test in the control group, the Wilcoxon test obtained a p-value of 0.046. Because the p-value is  $0.000 < \alpha (0.05)$ , this shows that there is a significant difference in the success of breast milk production before and after 2 days in the control group of postpartum mothers at the Muhammadiyah Kalikapas Hospital, Lamongan.

No	Variable	Mean rank	Std deviation	CI	P Value
1	Post test control group	11,50	0,458	1,52	0,004
2	Post test intervention group	19,50	0,414	2,03	

The results of the Mann-Whitney test obtained a significant value, namely p-value 0.004. So  $H_a$  is accepted so that it can be concluded that there is an effect of providing breast care using oxytocin massage accompanied by positive affirmation on breast milk production in postpartum mothers at Muhammadiyah Kalikapas Hospital, Lamongan. Where from the results of the data in the field after observation based on the average difference, the intervention group had a

greater average difference compared to the control group so that providing breast care using oxytocin massage accompanied by positive affirmation was more effective

## DISCUSSION

### *Success of Breast Care Implementation Using Oxytocin Massage Accompanied by Positive Affirmations in Postpartum Mothers*

From the results of the study, there were 15 respondents in the control group and 15 respondents in the intervention group before being given breast care using oxytocin massage accompanied by positive affirmations, all postpartum mothers (100%) did not produce breast milk, while in the intervention group on day -1, all postpartum mothers did not produce breast milk (100%) and in the post-test observation after receiving breast care, most of them had produced breast milk, namely 12 postpartum mothers (80%) and a small portion did not produce breast milk during the post-test, namely 3 postpartum mothers (20.0%). This is due to the lack of stimulation that inhibits prolactin secretion. Along with the formation of prolactin, stimulation from the baby's suction will continue to the anterior pituitary which then releases oxytocin. Through the bloodstream, this hormone is transported to the uterus so that the involution process occurs. Oxytocin that reaches the alveoli will stimulate contractions of cells that will squeeze the milk that has been made out of the alveoli and into the ductular system which then flows through the lactiferous duct into the baby's mouth. From the results of the study that has been conducted, it can be seen that the majority of respondents with healthy reproduction (age <30 years) amounted to 24 respondents (95.5%).

Age factors are often associated with the mental readiness of the woman to become a mother, this mental readiness is usually lacking in young mothers. At the age of over 35 years, reproductive organs and physiological functions decrease compared to the age of 20-35 years, based on this it is highly discouraged to have a pregnancy at the age of <20 and > 35 years (Rudiyanti N, 2019). The time for healthy reproduction at a safe age for pregnancy and childbirth is 20-35 years. The results of the analysis of the age of postpartum mothers with the incidence of breast milk production at the Muhammadiyah Kalikapas Hospital in Lamongan can be concluded that the majority of postpartum mothers are of a safe age, namely 20-35 years. In conclusion, the majority of postpartum mothers whose breast milk has come out are >30 years old but there are also those aged between 31 - 40 years. While the results of the study in the education table, most respondents had high school education as many as 14 respondents (56.7%), In the education variable, this study is in line with Walyani, ES (2015) who stated that the level of education greatly influences how a person acts and seeks causes and solutions in his life. People who are highly educated will usually act rationally. Likewise, postpartum mothers who are highly educated will seek solutions if they experience breast milk that is not smooth with increasingly developing methods.

From the results of the study, the majority of respondents did not work, as many as 18 respondents (60%), postpartum mothers who worked had dual roles as career women and housewives. As career women, these women are required to carry out their obligations in the office. On the other hand, as mothers, these women must take care of their families and do breast care in preparation for breastfeeding. This is different from housewives who do not have work demands outside the home so they still have time to rest without being chased by office responsibilities. The results of the analysis of maternal employment with the incidence of breast milk production in postpartum mothers at the Muhammadiyah Kalikapas Hospital in Lamongan can be concluded that the majority of mothers who experienced breast milk production were mothers who did not work. In the control group after 2 days, most (73.3%) postpartum mothers did not experience breast milk production, and a small portion (26.7%) of postpartum mothers had experienced breast milk production. In the intervention group after breast care using Oxytocin massage technique accompanied by positive affirmation, most (80%) postpartum mothers have successfully produced breast milk, and a small portion (20%) of postpartum mothers have not succeeded in producing breast milk. Good breast milk production occurs after oxytocin massage accompanied by positive affirmation because it can trigger the release of the oxytocin hormone which will cause the alveoli glands of the breast milk glands to contract, so that breast milk will come out. The work of the oxytocin hormone is influenced by the mother's psyche such as feelings of joy, happiness, and positive feelings/thoughts that can be given through positive affirmations that will optimize the work of the oxytocin hormone so that breast milk will flow smoothly. The results of the study showed that in the control group, most (66.7%) and in the intervention group, most (53.3%) postpartum mothers had high school education. The high average education of the community is very important for the nation's readiness to face global challenges in the future. Higher levels of education will make it easier for a person or society to absorb information and implement it in daily behavior and lifestyle, especially in terms of health. The level of formal education forms a person's value, especially in accepting new things (Suhardjo, 2017), and makes it easier for someone to get a suitable job. This happens when women with high education and experience tend to be more receptive to information than those with low education.

The results of the study showed that in the control group almost all (46.7%) postpartum mothers worked, and in the intervention group almost all (33.3%) postpartum mothers did not work, thus affecting socioeconomic status which had an impact on welfare. Postpartum mothers who work have a dual role as career women and as housewives. As workers, these women are required to carry out their obligations in the office. On the other hand, as mothers, these women must care for their families and carry out breast care in preparation for breastfeeding. Work is a symbol of a person's status in society. Work is a bridge to earn money to meet the needs of life and to get the desired health services (Friedman 2014).

A person's economic level is closely related to various health problems. People with low economic levels will concentrate more on fulfilling basic needs that support their lives and the lives of their families. On the other hand, people with high economic levels will have greater opportunities to pursue education where people with higher economic levels will find it easier to receive information so that they will have more knowledge so that they will pay attention to their own and their family's health. Mothers who have a good economic level will pay attention to breastfeeding preparations starting from pregnancy and after giving birth.

The Mann-Whitney test results obtained a significant value of p-value 0.004. Then  $H_a$  is accepted so that it can be concluded that there is an effect of providing breast care using Oxytocin massage techniques accompanied by positive affirmations on breast milk production in postpartum mothers at Muhammadiyah Kalikapas Hospital, Lamongan. Where from the results of the data in the field after observation based on the average difference, the intervention group had a greater average difference than the control group so that providing breast care using Oxytocin massage techniques accompanied by positive affirmations was more effective. A touch and massage on the muscle tissue around the back to smooth blood circulation and stimulate nerves that will have a positive effect (Utami, 2018). Providing early stimulation in the form of massage touches to the back muscle tissue can increase blood circulation, increase muscle function and stimulate the release of the oxytocin hormone which will cause the alveolar glands of breast milk to contract, so that breast milk will come out. The work of the oxytocin hormone is influenced by the mother's psyche such as feelings of joy, happiness, and positive feelings/thoughts that can be given through positive affirmations that will optimize the work of the oxytocin hormone.

According to researchers, it is necessary to provide breast care using oxytocin massage techniques accompanied by positive affirmations to stimulate the release of the oxytocin hormone in postpartum mothers so that it will affect the release and breast milk.

## **CONCLUSIONS AND RECOMMENDATIONS**

Before breast care using oxytocin massage technique accompanied by positive affirmation, all postpartum mothers did not experience breast milk production. After breast care using oxytocin massage technique accompanied by positive affirmation, most postpartum mothers experienced breast milk production. There is an effect of breast care using oxytocin massage technique accompanied by positive affirmation on breast milk production in postpartum mothers at Muhammadiyah Kalikapas Hospital, Lamongan.

## **FURTHER STUDY**

Research is needed on other variables that influence the smoothness of breast milk flow.

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