

THE EFFECT OF LACTATION MANAGEMENT COUNSELING ON THE SMOOTHNESS OF BREAST MILK PRODUCTION IN POSTPARTUM MOTHERS

Ifatin Nafisah¹, Erisa Yuniardiningsih², Andriya Syahriatul Masrifah³

^{1,2,3} Midwifery Study Program, STIKes Bhakti Al-Qodiri, Jember, Indonesia
Email correspondence ifatinnafisah@gmail.com

ABSTRAK : PENGARUH KONSELING MANAJEMEN LAKTASI TERHADAP KELANCARAN PRODUKSI ASI PADA IBU PASCA PERSALINAN

Latar Belakang: Masa nifas merupakan fase penting dalam proses reproduksi wanita, ditandai dengan pemulihan organ tubuh dan dimulainya proses menyusui. Namun, pada kenyataannya banyak ibu nifas mengalami ketidaklancaran pengeluaran air susu ibu (ASI), terutama dalam 1–7 hari pertama pasca persalinan. Ketidaklancaran ini dapat mengganggu keberhasilan pemberian ASI eksklusif.

Tujuan: Menganalisis pengaruh konseling manajemen laktasi terhadap kelancaran pengeluaran ASI pada ibu nifas

Metode: Penelitian menggunakan desain pre-eksperimental dengan pendekatan one group pretest-posttest. Sampel sebanyak 30 ibu nifas hari ke-1 hingga ke-7 yang melakukan kunjungan ke TPMB Siti Mutmainnah ditentukan melalui teknik purposive sampling. Data dikumpulkan menggunakan lembar observasi dan dianalisis menggunakan uji Wilcoxon Sign Rank Test.

Hasil: Hasil penelitian menunjukkan bahwa sebelum konseling, sebanyak 66,7% ibu mengalami pengeluaran ASI yang tidak lancar, dan setelah diberikan konseling, terjadi peningkatan kelancaran menjadi 70%. Hasil uji Wilcoxon sign rank test menunjukkan nilai p-value $0,001 < \alpha = 0,05$, yang berarti terdapat pengaruh signifikan konseling manajemen laktasi terhadap kelancaran pengeluaran ASI. Konseling yang diberikan mencakup edukasi teknik menyusui, stimulasi ASI, dan dukungan psikologis yang membantu ibu meningkatkan rasa percaya diri.

Kesimpulan: Ada pengaruh konseling manajemen laktasi efektif terhadap kelancaran pengeluaran ASI pada ibu nifas.

Saran: Tenaga kesehatan memberikan konseling secara rutin sejak masa kehamilan hingga nifas sebagai upaya meningkatkan keberhasilan ASI eksklusif.

Kata Kunci: ASI, Ibu Nifas, Konseling, Manajemen Laktasi, Pengeluaran ASI

ABSTRACT

Background: The postpartum period is a crucial phase in a woman's reproductive process, marked by the recovery of body organs and the initiation of breastfeeding. However, in reality, many postpartum mothers experience difficulties in breast milk (ASI) production, especially during the first 1–7 days after delivery. This disruption can hinder the success of exclusive breastfeeding.

Objective: To analyze the effect of lactation management counseling on the smoothness of breast milk production in postpartum mothers.

Method: This research employed a pre-experimental design with a one-group pretest-posttest approach. A total of 30 postpartum mothers on days 1 to 7 who visited TPMB Siti Mutmainnah were selected using purposive sampling. Data were collected using observation sheets and analyzed using the Wilcoxon Sign Rank Test.

Results: The findings showed that before counseling, 66.7% of mothers experienced insufficient milk production, and after counseling, the proportion of mothers with smooth milk flow increased to 70%. The Wilcoxon Sign Rank Test showed a p-value of $0.001 < \alpha = 0.05$, indicating a significant effect of lactation management counseling on breast milk production. The counseling included education on breastfeeding techniques, milk stimulation, and psychological support, helping mothers increase their confidence.

Conclusion: Lactation management counseling has a significant and effective impact on improving breast milk production among postpartum mothers.

Recommendation: Health workers are encouraged to provide regular lactation counseling from pregnancy through the postpartum period to enhance the success of exclusive breastfeeding.

Keywords: Breast Milk, Postpartum Mothers, Counseling, Lactation Management, Milk Production

INTRODUCTION

The postpartum period is one of the most critical phases in a woman's reproductive life following childbirth, marked by the recovery of organ function and body systems (Winarningsih et al., 2024). One of the physiological processes during this period is the secretion of breast milk (Bangun, 2018; Marbun et al., 2023). However, in reality, many postpartum mothers experience issues related to the insufficient release of breast milk, particularly during the first 1–7 days after delivery. This issue may be caused by several factors, including psychological conditions, improper breastfeeding techniques, or lack of stimulation. If not addressed promptly, this problem may interfere with the breastfeeding process and hinder the optimal provision of exclusive breastfeeding (Nofita et al., 2025).

According to the World Health Organization (WHO), the global coverage of exclusive breastfeeding for infants aged 0–6 months is only around 44% (Nofita et al., 2025). In Indonesia, based on the 2022 Indonesia Nutrition Status Survey (SSGI), the coverage of exclusive breastfeeding reached 73.5%. Although this shows improvement, it still falls short of the national target of 80% (Kemenkes RI, 2023). In East Java Province, the exclusive breastfeeding coverage in 2022 was recorded at 65.9%, indicating a persistent gap. This low coverage reflects the need for more intensive efforts to increase the success rate of exclusive breastfeeding (Dinkes Provinsi Jawa Timur, 2023). A preliminary study at TPMB Siti Mutmainnah involving 10 postpartum mothers found that six of them complained about poor milk flow due to a lack of direct guidance or information on breastfeeding techniques and lactation management. The remaining four reported milk secretion had begun but was still suboptimal.

The process of breast milk production (lactogenesis) begins during pregnancy, particularly in the third trimester. This process is regulated by hormones such as prolactin, oxytocin, estrogen, and progesterone. After childbirth, a decrease in progesterone levels and an increase in prolactin levels stimulate milk production. The let-down reflex or milk ejection is also influenced by the baby's sucking, which triggers the release of oxytocin. Hormonal imbalances or insufficient stimulation may hinder this lactation process (Kotarumalos et al., 2024; C. R. Sari & Dewi, 2022).

Impaired milk secretion can have negative consequences for both mother and baby. For the mother, it can lead to breast engorgement (mastitis), pain, and emotional stress. For the baby, insufficient

milk intake can hinder growth, increase the risk of infections, and weaken emotional bonding with the mother. Moreover, the use of formula as an alternative may pose risks of allergies or digestive issues. This condition may also lower the mother's motivation to continue exclusive breastfeeding (Agustina et al., 2024; Ridha, 2023).

One of the efforts to overcome this issue is the provision of lactation management counseling. This counseling aims to educate mothers on correct breastfeeding techniques, the importance of early initiation of breastfeeding, and methods to enhance milk production and flow. Through counseling, mothers also receive emotional support that is crucial during the breastfeeding process. Proper guidance can boost mothers' confidence and reduce anxiety. Therefore, lactation management counseling plays a vital role in facilitating milk secretion and achieving exclusive breastfeeding success (Mawaddah & Daniyati, 2022).

This study aims to analyze the effect of lactation management counseling on the smoothness of breast milk secretion in postpartum mothers.

RESEARCH METHODS

This study employed a pre-experimental design with a one-group pretest-posttest approach. The population consisted of all postpartum mothers on days 1–7 who visited TPMB Siti Mutmainnah, totaling 42 individuals. The sample included 30 participants selected through purposive sampling. The inclusion criteria for this study were: 1) Mothers in the postpartum period between day 1 and day 7 after delivery; 2) Postpartum mothers who had a normal delivery; 3) Willingness to participate as respondents; 4) Mothers without breast abnormalities; 5) Mothers whose babies were healthy and not admitted to the NICU. The exclusion criteria included: 1) Postpartum mothers who experienced delivery complications; 2) Mothers with severe psychological disorders; 3) Mothers who had already received lactation counseling interventions; 4) Mothers who were uncooperative or did not complete the research process.

The study was conducted at TPMB Siti Mutmainnah in June 2024. The research instruments included an observation sheet to assess the smoothness of breast milk production and a Standard Operating Procedure (SOP) for providing lactation management counseling. Lactation management counseling was conducted on the first day of the postpartum period, and the observation was carried out on the third day of the postpartum period (Devasia et al., 2024). Data

analysis was performed using the Wilcoxon Sign Rank Test.

RESEARCH RESULTS

This subsection presents the results of the univariate analysis, including age, education, occupation, and parity, as shown in Table 1 below.

Based on Table 1, the distribution of respondent frequency is presented according to the characteristics of postpartum mothers from day 1 to day 7. In terms of age, the majority of respondents were aged 20–35 years, totaling 20 individuals (66.7%). Regarding education, most had completed senior high school, with 20 individuals (66.7%). In terms of occupation, the majority were unemployed, accounting for 24 individuals (80%). Regarding parity, most were primiparous mothers, totaling 18 individuals (60%). The results of the analysis on the effect of lactation management counseling on the smoothness of breast milk production in postpartum mothers are presented in Table 2 below.

Table 1
Characteristics of Postpartum Mothers (n=30)

Characteristics	n	%
Age		
<20 years	6	20
20-35 years	20	66.7
>35 years	4	13.3
Education		
Elementary School	2	6.7
Junior High School	7	23.3
Senior High School	20	66.7
Higher Education	1	3.3
Occupation		
Employed	6	20
Unemployed	24	80
Parity		
Primiparous	18	60
Multiparous	12	40

Table 2
The Effect of Lactation Management Counseling on the Smoothness of Breast Milk Production in Postpartum Mothers

Milk Expression Effectiveness	Laction Management Counseling				<i>p-value</i>
	Pretest		Posttest		
	n	%	n	%	
Ineffective	20	66.7	9	30	0.001
Effective	10	33.3	21	70	

Table 2 presents the research findings, indicating that before receiving lactation management counseling, the majority of respondents experienced ineffective breast milk expression, totaling 20 individuals (66.7%). After receiving the counseling, most respondents showed effective milk expression, totaling 21 individuals (70%).

The normality test using the Shapiro-Wilk test showed a p-value of 0.000 (pretest) and 0.000 (posttest), which is less than $\alpha = 0.05$, indicating that the data were not normally distributed. Therefore, the data were analyzed using the Wilcoxon Sign Rank Test. The results of the analysis showed a p-value of $0.001 < \alpha = 0.05$, indicating that the alternative hypothesis (H1) is accepted. This means that there is a significant effect of lactation management counseling on the effectiveness of breast milk expression in postpartum mothers.

DISCUSSION

Milk Expression Effectiveness Before Lactation Management Counseling

The findings revealed that prior to receiving lactation management counseling, the majority of respondents experienced ineffective breast milk expression, with 20 out of 30 mothers (66.7%) reporting such difficulties. This condition was characterized by an absence or minimal release of breast milk despite the infant's attempts to breastfeed. One of the contributing factors to this difficulty was parity, where most respondents were primiparous (18 individuals or 60%). First-time mothers typically lack prior breastfeeding experience, often resulting in reduced confidence and insufficient understanding of proper breastfeeding techniques.

The process of breast milk formation (lactogenesis) begins during pregnancy, particularly in the third trimester when the mammary glands begin developing in preparation for lactation (Indrianita et al., 2022). The hormones estrogen and progesterone stimulate the development of alveoli and milk ducts within the breast. Meanwhile,

prolactin is produced in higher amounts toward the end of pregnancy and plays a key role in milk production. Although the biological mechanisms are already in place, the high levels of progesterone during pregnancy inhibit the release of milk. Therefore, despite hormonal and anatomical readiness, milk does not flow optimally until progesterone levels drop after childbirth (Aulia et al., 2024)

Following delivery and expulsion of the placenta, estrogen and progesterone levels fall significantly, signaling the body to increase prolactin production. Prolactin is responsible for milk production, while oxytocin, released in response to nipple stimulation during infant suckling, triggers the let-down reflex for milk ejection. Early initiation of breastfeeding within the first hour after birth is crucial as it strengthens this reflex and optimizes milk production from the beginning. A lack of stimulation or delayed breastfeeding can disrupt milk production, leading to insufficient milk flow during the early postpartum period (Amin et al., 2024; Periselo, 2021)..

Ineffective milk expression can have adverse consequences for both mother and infant. For the mother, it may result in breast engorgement, mastitis, pain, and emotional stress due to perceived failure to breastfeed (Rukmawati & Sabhanga, 2022). For the infant, inadequate milk intake may lead to dehydration, weight loss, compromised immunity, and delayed growth (P. P. Sari et al., 2024).. Additionally, insufficient breastfeeding contact can hinder the development of emotional bonding between mother and baby. If left unaddressed, this may cause mothers to feel discouraged and turn to formula feeding, thereby reducing the likelihood of exclusive breastfeeding success (Amalia et al., 2025; Harmia & Zurrahmi, 2025).

According to the researchers' assumptions, most respondents experienced difficulties with breast milk expression. Parity was found to be one of the influencing factors, with the majority being primiparous mothers (60%). Being a first-time mother can influence early breastfeeding success. Primiparas often lack sufficient knowledge and experience in breastfeeding and tend to experience higher levels of anxiety compared to multiparous mothers. This may contribute to the initial challenges in milk expression if not properly addressed and supported.

Milk Expression Effectiveness After Lactation Management Counseling

The study findings indicate that after receiving lactation management counseling, the majority of respondents experienced smooth breast milk expression, with 21 out of 30 mothers (70%) reporting improvement. This demonstrates that the intervention—consisting of education and guidance on breastfeeding techniques, proper attachment, and the importance of early stimulation—played a significant role in supporting the lactation process. Counseling helped mothers overcome fear, confusion, and a lack of knowledge regarding effective breastfeeding. Furthermore, the counseling provided emotional support, enhancing maternal confidence. This finding suggests that an educational approach through lactation management counseling can significantly improve breastfeeding success during the early postpartum period.

In addition to the influence of counseling, improvements in breast milk expression were also affected by several other factors, one of which was maternal age. The study showed that most respondents were between 20 and 35 years of age (66.7%). This age range is considered a mature reproductive age, during which cognitive abilities, information processing, and decision-making are generally more developed. Mothers in this group typically possess better physical and mental readiness to receive information and apply proper breastfeeding practices (Bakker et al., 2023; Perangin-Angin et al., 2024).

Another factor contributing to the success of counseling was the educational background of the respondents. The study revealed that most respondents were high school graduates (66.7%). Higher education levels are generally associated with better comprehension of provided information. Mothers with a high school education are more likely to understand counseling content, absorb key information, and be open to behavioral changes that support successful lactation. This highlights the important role of educational background in enhancing breastfeeding knowledge and skills (Rosa, 2022).

In addition to age and education, employment status also influenced the effectiveness of lactation counseling. The data indicated that the majority of respondents were unemployed or homemakers (80%). Mothers who do not work tend to have more flexible time to attend counseling sessions and practice the breastfeeding techniques taught. They also have greater opportunities to focus on infant care and exclusive breastfeeding.

This condition indicates that having more time and full involvement in childcare supports smoother breast milk expression following counseling (Triana et al., 2025).

According to the researchers' assumptions, the post-intervention results showed that the majority of mothers experienced improved breast milk expression. In addition to the effect of counseling, this outcome was influenced by other factors such as the predominance of respondents aged 20–35 years, with high school education, and not engaged in paid employment. The combination of these factors allowed mothers to be more physically, mentally, and cognitively prepared to receive and implement the information. This condition facilitated better understanding and acceptance of the counseling, contributing to improved breastfeeding practices.

The Effect of Lactation Management Counseling on the Smooth Expression of Breast Milk in Postpartum Mothers

The study results demonstrated that lactation management counseling had a significant effect on the smooth expression of breast milk in postpartum mothers. This was evidenced by an increase in the number of mothers who experienced smooth milk expression after receiving counseling, totaling 21 individuals (70%) out of the total respondents. Prior to the counseling, only a few mothers were able to breastfeed smoothly, with many reporting that their milk had not yet come in or was expressed in very small amounts. This finding reinforces the crucial role of counseling in helping mothers understand and overcome lactation challenges early in the postpartum period. With appropriate interventions, mothers can be better prepared both mentally and technically to face the challenges of breastfeeding.

The results of this study are supported by previous research conducted by Setyaningsih (2025) at Murni Teguh Ciledug Hospital, which showed that lactation education had an effect on increasing breastfeeding among postpartum mothers at Murni Teguh Ciledug Hospital (Setyaningsih, 2025). A study by Retnawati et al. (2024) in Kampung Wonosari, Tanjungpinang, demonstrated an increase in maternal knowledge after being given health education on exclusive breastfeeding, expressed breast milk, and lactation management during pregnancy (Retnawati et al., 2024). A similar study by Sekarsari et al. (2024) at Panti Waluyo Hospital, Surakarta, revealed that lactation management education had an effect on maternal motivation and readiness in providing exclusive

breastfeeding (Sekarsari, Purwaningsih, & PuspitaSari, 2024).

Lactation management counseling is an educational intervention provided to postpartum mothers to enhance their ability to breastfeed effectively. This counseling equips mothers with knowledge about proper breastfeeding techniques, infant positioning and attachment, signs of adequate milk intake, and the importance of early initiation of breastfeeding (Hamidah & Inayah, 2021). Additionally, it includes psychological support to boost maternal confidence and reduce anxiety during breastfeeding (Lestari, 2023). The educational approach is communicative, participatory, and tailored to each mother's individual condition. The primary goal of counseling is to create a positive breastfeeding experience, ensuring smooth and sustained milk production (Retnawati et al., 2022).

Lactation management counseling has a strong association with the smooth expression of breast milk. The knowledge and skills gained through counseling can be directly applied to breastfeeding practices, ultimately stimulating the let-down reflex and optimizing milk production (Saputra et al., 2021). Adequate stimulation, correct breastfeeding techniques, and an understanding of the importance of frequent feeding can accelerate the lactogenesis process in postpartum mothers. With systematic guidance, mothers are not only more capable of overcoming difficulties but also more confident in breastfeeding. Therefore, counseling can be considered a key factor in ensuring successful breast milk expression from the earliest days of the postpartum period (Mariani & Hasanah, 2022; Sekarsari, Purwaningsih, & Sari, 2024).

According to the researchers' assumptions, the effectiveness of lactation management counseling in improving breast milk expression is not solely determined by the educational content but also by the characteristics of the postpartum mothers. Most respondents in this study were aged 20–35 years, had completed senior high school education, and were unemployed. This combination of mature reproductive age, sufficient education to comprehend the material, and more available time due to not working allowed mothers to absorb and immediately apply the counseling information. Therefore, the researchers assume that counseling is more effective when provided to mothers who have sufficient knowledge, time, and mental readiness—especially during the early postpartum period.

CONCLUSION

The study results showed that providing lactation management counseling had a positive effect on the smooth expression of breast milk in postpartum mothers, as indicated by an increased number of mothers experiencing improved milk flow after the intervention.

SUGGESTION

It is recommended that healthcare providers routinely offer lactation management counseling from pregnancy through the postpartum period, so that mothers gain the knowledge, skills, and confidence needed for breastfeeding. This can enhance the success of exclusive breastfeeding and support optimal growth and development of the baby.

REFERENCES

- Agustina, F., Darussalam, H., & Julia, I. (2024). Application of Breast Care to Prevent Breast Milk Dams in Postpartum Mothers. *Lentera Perawat*, 5(2), 209–217.
- Amalia, F. R., Kurniawati, D., & Sulistyorini, L. (2025). Gambaran Bounding Attachment pada Ibu Menyusui di Wilayah Kerja Puskesmas Andongsari Kabupaten Jember. *Midwifery Journal: Jurnal Kebidanan UM. Mataram*, 9(1), 15–22.
- Amin, E., Wahida, W., Nurdiana, N., & Cicilia, F. (2024). Waktu Mulai, Durasi IMD dan Keberhasilan ASI Eksklusif. *Jurnal Kebidanan Malakbi*, 5(1), 37–47.
- Aulia, A., Saudah, N., & Lestari, I. (2024). Gambaran Produksi ASI Pada Ibu Nifas di UPT Puskesmas Gayaman Kabupaten Mojokerto. Universitas Bina Sehat PPNI.
- Bakker, S. R., Utami, T. A., & Ningsih, P. W. (2023). Hubungan Karakteristik dan Pengetahuan Ibu dengan Keberhasilan Menyusui Eksklusif pada Masa Pandemi Covid-19 di Puskesmas Alak Kupang. *Media Publikasi Promosi Kesehatan Indonesia (MPPKI)*, 6(3), 482–489.
- Bangun, A. B. (2018). Hubungan Pengetahuan Ibu Nifas Tentang Perawatan Payudara Dengan Kelancaran Pengeluaran ASI Di Klinik Grace Deli Tua Tahun 2018.
- Devasia, S., Nayak, S., Rao, S. V., & Kamath, N. (2024). Effectiveness of Lactation Counseling on Lactation Outcome among Primipara Mothers: A Pilot Study. *Journal of Health and Allied Sciences*, 15(1/2025), 98–102.
- Dinkes Provinsi Jawa Timur. (2023). *Profil Kesehatan Jawa Timur Tahun 2022*. Dinas Kesehatan Provinsi Jawa Timur.
- Hamidah, S., & Inayah, Z. (2021). Edukasi tentang ASI, manajemen laktasi, makanan pendamping ASI dan stimulasi bayi di Karangpoh, Kabupaten Gresik. *Community Empowerment*, 6(07).
- Harmia, E., & Zurrahmi, Z. R. (2025). Hubungan Pengetahuan Ibu Nifas dengan Pelaksanaan Bonding Attachment pada Bayi Baru Lahir. *Jurnal Bidang Ilmu Kesehatan*, 15(2), 170–176.
- Indrianita, V., Bakoil, M. B., Fatmawati, E., Widjayanti, Y., Nurvitriana, N. C., & Ningrum, N. P. (2022). *Kupas tuntas seputar masa nifas dan menyusui serta penyulit/komplikasi yang sering terjadi*. Rena Cipta Mandiri.
- Kemendes RI. (2023). *Buku Saku Hasil Survei Status Gizi Indonesia (SSGI) 2022*. Kementerian Kesehatan Republik Indonesia.
- Kotarumalos, S. S., Wetir, E., & Mayano, K. A. (2024). Dampak Prenatal Breast Care pada Kehamilan Trimester III Terhadap Produksi Dan Kelancaran Pengeluaran ASI Ibu Post Partum. *Jurnal Kebidanan*, 4(1), 1–12.
- Lestari, A. (2023). Hubungan antara Perawatan Payudara, Kondisi Psikologis Ibu dan Dukungan Suami dengan Kelancaran Produksi ASI Pada Ibu Post Partum. *SIMFISIS: Jurnal Kebidanan Indonesia*, 3(1), 540–549.
- Marbun, A. S., Sapitri, H., & Sipayung, N. (2023). Perawatan Payudara Dalam Masa Puerperium Untuk Memperlancar Pengeluaran ASI. *Journal Abdiman Mutiara*, 4(1), 43–48.
- Mariani, M., & Hasanah, Y. R. (2022). Pengaruh Edukasi Manajemen Laktasi Terhadap Pengetahuan Dan Motivasi Ibu Hamil dalam Pemberian ASI Eksklusif. *Jurnal Ilmiah Keperawatan (Scientific Journal of Nursing)*, 8(4), 642–649.
- Mawaddah, S., & Daniyati, A. (2022). Konseling Manajemen Laktasi dengan Flashcard Meningkatkan Pemberian ASI Eksklusif pada Ibu Bekerja. *Jurnal Keperawatan*, 14(2), 573–582.
- Nofita, S. E., Purwati, A. S., & Widiatrilupi, R. M. V. (2025). Pengaruh teknik woolwich massage terhadap kelancaran asi pada ibu post partum hari ke 3-7. *Journal of Public Health Innovation*, 5(2), 385–393.
- Perangin-Angin, E. M. L. B., Sinaga, D., Sinabariba, M., Veronika, A., & Tarigan, S. S. (2024). Gambaran Karakteristik dan Pengetahuan Ibu Menyusui tentang ASI Perah. *Jurnal Ilmiah Permas. Jurnal Ilmiah Permas: Jurnal Ilmiah*

- STIKES Kendal, 14(2), 497–504.
- Periselo, H. (2021). Hubungan Inisiasi Menyusui Dini (IMD) Dengan Keberhasilan Asi Eksklusif Di Puskesmas Wara Barat Kota Palopo Tahun 2019. *Jurnal Kesehatan Luwu Raya*, 7(2), 156–161.
- Retnawati, S. A., Khoiriyah, E., & Muslim. (2022). Konseling Manajemen Laktasi dengan Flashcard Meningkatkan Pemberian ASI Eksklusif pada Ibu Bekerja. *Jurnal Keperawatan*, 14(2), 573–582.
- Retnawati, S. A., Khoiriyah, E., & Muslim. (2024). Edukasi ASI Eksklusif, ASI Perah dan Manajemen Laktasi pada Ibu Hamil Dan Menyusui di Kampung Wonosari Tanjung Pinang. *Jurnal Pengabdian Masyarakat Anugrah Bintang (JPMAB)*, 5(01), 35–40.
- Ridha, R. S. (2023). Gambaran Permasalahan Pemberian ASI Pada 6 Bulan Pertama. *Jurnal Medika Utama*, 4(03 April), 3441–3449.
- Rosa, E. F. (2022). Konseling Menyusui Berbasis Android terhadap Keberhasilan Asi Eksklusif di Masa Pandemi Covid-19. *Jurnal keperawatan silampari*, 5(2), 659–668.
- Rukmawati, S., & Sabhanga, P. A. J. (2022). *Effect Of Effleurage Massage On Breast Milk Production In Postpartum Mothers*.
- Saputra, A. D., Aisyah, I. S., & Novianti, S. (2021). Pengaruh pendidikan kesehatan dengan media leaflet terhadap pengetahuan ibu hamil tentang manajemen laktasi di Puskesmas Sukaraja Kabupaten Tasikmalaya. *Jurnal Kesehatan Komunitas Indonesia*, 17(2).
- Sari, C. R., & Dewi, I. P. (2022). Determinan Persepsi Ketidacukupan ASI (PKA) pada Ibu Menyusui. *Jurnal Ilmiah Gizi Kesehatan (JIGK)*, 3(02), 53–61.
- Sari, P. P., Veronica, & Isnayati. (2024). Intervensi Massage RollingPunggung Terhadap Kelancaran ASI Pada Ibu Postpartum. *Journal Keperawatan DegeneratifPelni*, 1(2), 51–58.
- Sekarsari, D., Purwaningsih, H., & PuspitaSari, T. (2024). Pengaruh Edukasi Manajemen Laktasi Terhadap Motivasi dan Kesiapan Ibu dalam Pemberian Asi Eksklusif di Rumah Sakit Panti Waluyo Surakarta. *Jurnal Ventilator: Jurnal riset ilmu kesehatan dan Keperawatan*, 2(2), 150–163.
- Sekarsari, D., Purwaningsih, H., & Sari, T. P. (2024). Pengaruh Edukasi Manajemen Laktasi Terhadap Motivasi dan Kesiapan Ibu dalam Pemberian Asi Eksklusif di Rumah Sakit Panti Waluyo Surakarta. *Jurnal Ventilator*, 2(2), 150–163.
- Setyaningsih, G. A. (2025). Pengaruh Edukasi Laktasi Terhadap Peningkatan Pemberian ASI Nifas di Rumah Sakit Murni Teguhciledug. *Excellent Midwifery Journal*, 7(1), 246–250.
- Triana, K., Wea, K. L., Madur, J. P., Naus, K. K., Kurniati, K., Emel, K. A., & Trisnawati, R. E. (2025). Konseling Posisi Menyusui yang Baik dan Benar sebagai Persiapan Kesuksesan Ibu dalam Menyusui. *Mestaka: Jurnal Pengabdian Kepada Masyarakat*, 4(3), 244–248.
- Winarningsih, R. A., Insani, W. N., Danefi, T., Sunarni, N., Litasari, R., Solihah, R., & Khodijah, U. P. (2024). *Panduan asuhan kebidanan pada masa nifas (post partum)*. Tohar Media.