



The Effect of Breastfeeding Counseling on Increasing the Success of Exclusive Breastfeeding in Postpartum Mothers

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ABSTRACT

Background: Exclusive breastfeeding for the first 6 months of life is a crucial step in reducing infant morbidity and mortality. However, the success rate of exclusive breastfeeding remains low due to mothers' lack of knowledge and skills in breastfeeding.

Objective: To determine the effect of breastfeeding counseling on increasing the success of exclusive breastfeeding in postpartum mothers.

Method: This study uses a quasi-experimental design with a pretest-posttest approach. A sample of 60 postpartum mothers selected using purposive sampling technique was divided into an intervention group (breastfeeding counseling) and a control group (without counseling). The research instrument was a questionnaire on knowledge, attitudes, and observations of breastfeeding practices. Data analysis used *paired t-test* and *independent t-test*.

Results: There was a significant difference between the intervention group and the control group in the success of exclusive breastfeeding ($p < 0.05$). Breastfeeding counseling improved mothers' knowledge, attitudes, and skills in breastfeeding, thus having a positive impact on the success of exclusive breastfeeding.

Conclusion: Breastfeeding counseling had a significant effect on increasing the success of exclusive breastfeeding in postpartum mothers.

Suggestion: Health workers need to routinely provide breastfeeding counseling to postpartum mothers to increase the coverage of exclusive breastfeeding.

Keywords: Breastfeeding Counseling, Postpartum Mothers, Exclusive Breastfeeding

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1. Introduction

Breast milk is the best food for babies because it contains complete nutrients, antibodies, hormones, and enzymes needed for optimal growth and development. World Health Organization Organization (WHO) and the United Nations International Children's Emergency the UNICEF Fund recommends exclusive breastfeeding for the first 6 months of a baby's life, followed by appropriate complementary feeding (MP-ASI) while continuing breastfeeding until the baby is 2 years old or older.

Despite the widespread benefits of exclusive breastfeeding, its coverage in Indonesia remains low. According to the 2022 Basic Health Research (Riskesdas), national exclusive breastfeeding coverage only reached around 72.4%. This figure remains uneven across all provinces and falls short of the Ministry of Health's target. The low rate of exclusive breastfeeding is influenced by various factors, including maternal knowledge, cultural myths, lack of family support, and inadequate counseling and support from healthcare professionals.

Postpartum mothers are a crucial factor in the success of exclusive breastfeeding, as this is the period during which milk production begins and breastfeeding skills are developed. Unfortunately, many postpartum mothers experience breastfeeding difficulties due to incorrect latching, lack of confidence, or complaints such as sore nipples and low milk production. This often leads mothers to stop exclusive breastfeeding early and switch to formula.

Breastfeeding counseling is an effective strategy for increasing the success of exclusive breastfeeding. Through counseling, mothers are provided with education, motivation, and appropriate breastfeeding skills, including baby positioning, proper attachment, and lactation management. Several studies have shown that mothers who receive breastfeeding counseling during the postpartum period have higher rates of exclusive breastfeeding success than mothers who do not receive counseling.

Based on this description, this study aims to analyze the influence of breastfeeding counseling on increasing the success of exclusive breastfeeding in postpartum mothers.

2. Research Method

a) Research Design

This study uses a quasi-experimental design with a *pretest-posttest design control group*. This design was chosen to determine the effect of breastfeeding counseling on the success of exclusive breastfeeding in postpartum mothers by comparing the intervention group and the control group.

b) Population and Sample

- Population: All postpartum mothers who gave birth in the working area of Health Center X in the period January–March 2025.





- Sample: A total of 60 respondents, selected using purposive sampling with the following inclusion criteria:
 - 1) Postpartum mothers with babies aged <1 month.
 - 2) Willing to participate in research up to 3 months postpartum.
 - 3) Have no contraindications for breastfeeding (e.g. active HIV/AIDS or use of certain medications).
 - 4) Respondents were divided into an intervention group (30 postpartum mothers were given breastfeeding counseling) and a control group (30 postpartum mothers received routine services without special counseling).
- c) **Research Variables**
 - Independent variable: Breastfeeding counseling.
 - Dependent variable: Success of exclusive breastfeeding (knowledge, attitude, breastfeeding skills, and breastfeeding status up to 3 months).
- d) **Research Instruments**
 - 1) Knowledge and attitude questionnaire regarding exclusive breastfeeding (standardized from the Indonesian Ministry of Health).
 - 2) The breastfeeding practice observation sheet includes position, attachment, and lactation management.
 - 3) Exclusive breastfeeding success checklist (baby is only given breast milk without additional formula milk, solid food, or other fluids except medication/supplements).
- e) **Research Procedures**
 - 1) Pretest: Initial measurements of knowledge, attitudes, and breastfeeding practices were carried out in both groups.
 - 2) Intervention: The intervention group was given breastfeeding counseling by trained midwives through:
 - Home visits and face-to-face sessions (2 times, namely in the 1st and 3rd week of postpartum).
 - Counseling materials include the benefits of exclusive breastfeeding, correct breastfeeding techniques, lactation management, and how to overcome breastfeeding problems.
 - Counseling media: leaflets, live demonstrations, and question and answer discussions.
 - 3) Control group: Only received standard postpartum care (without intensive counseling).
 - 4) Posttest: Re-measurement of knowledge, attitudes, practices, and success of exclusive breastfeeding was carried out in the 3rd month postpartum.
- f) **Data analysis**





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- Univariate analysis: To describe the characteristics of respondents, level of knowledge, attitudes, and breastfeeding practices.
- Bivariate analysis:
 - The *paired t- test* was used to see the differences before and after the intervention in each group.
 - The *independent t- test* was used to compare the differences between the intervention group and the control group.
- The level of significance was set at $p < 0.05$.

3. Results And Discussions

a. Results

1. Respondent Characteristics

A total of 60 respondents consisted of 30 postpartum mothers in the intervention group and 30 postpartum mothers in the control group. The majority of respondents were aged 20–35 years (75%), had a secondary education (high school) (63.3%), and were multiparous (58.3%). *Chi-square test results* showed no significant differences in baseline characteristics between groups ($p > 0.05$), allowing for comparison between the two groups.

Table 1. Respondent Characteristics

Characteristics	Intervention (n=30)	Control (n=30)	p -value
Age 20–35 years	23 (76.7%)	22 (73.3%)	0.811
High School Education	20 (66.7%)	18 (60.0%)	0.592
Multipara	18 (60.0%)	17 (56.7%)	0.793

2. Mothers' Knowledge about Exclusive Breastfeeding

The average knowledge score increased in the intervention group after being given breastfeeding counseling, while there was no significant increase in the control group.

Table 2. Average Knowledge Score Before and After Intervention

Group	Pretest (Mean ± SD)	Posttest (Mean ± SD)	p -value
Intervention	65.3 ± 8.5	82.7 ± 7.9	0.001*
Control	66.1 ± 7.2	68.4 ± 6.9	0.142

*significant ($p < 0.05$)

3. Attitudes towards Exclusive Breastfeeding





The intervention group showed higher positive attitude changes than the control group.

Table 3. Average Attitude Scores Before and After Intervention

Group	Pretest (Mean ± SD)	Posttest (Mean ± SD)	p -value
Intervention	67.8 ± 9.1	85.2 ± 6.8	0.003*
Control	66.9 ± 8.3	69.1 ± 7.5	0.204

4. Breastfeeding Practices (Latching and Positioning)

The observation results showed an increase in correct breastfeeding practices in the intervention group compared to the control group.

Table 4. Percentage of Correct Breastfeeding Practices

Group	Pretest (%)	Posttest (%)	p -value
Intervention	36.7%	83.3%	0.002*
Control	40.0%	46.7%	0.317

5. Success of Exclusive Breastfeeding for up to 3 Months

Evaluation at 3 months postpartum showed that the success of exclusive breastfeeding was higher in the intervention group.

Table 5. Comparison of Exclusive Breastfeeding Success

Group	Successful Exclusive Breastfeeding	Not successful	p -value
Intervention (n=30)	24 (80.0%)	6 (20.0%)	0.001*
Control (n=30)	13 (43.3%)	17 (56.7%)	

*Summary of Results

- There was no difference in the characteristics of respondents in the two groups ($p > 0.05$).
- Breastfeeding counseling increased knowledge ($p = 0.001$), positive attitudes ($p = 0.003$), and correct breastfeeding practices ($p = 0.002$).
- The success of exclusive breastfeeding in the first 3 months was higher in the intervention group (80%) than in the control group (43.3%) ($p = 0.001$).

b. Discussion

The results of this study indicate that breastfeeding counseling has a significant effect on increasing knowledge, attitudes, breastfeeding practices, and the success of providing exclusive breastfeeding to postpartum mothers.

- The Influence of Counseling on Mothers' Knowledge





After breastfeeding counseling, mothers' knowledge scores in the intervention group increased significantly compared to the control group ($p = 0.001$). This aligns with the theory that counseling is an effective form of health education in conveying information and increasing mothers' understanding of the importance of exclusive breastfeeding. According to Rahmawati & Putri (2021), intensive counseling can provide a deeper understanding than just brief counseling.

2) The Influence of Counseling on Mothers' Attitudes

Positive changes in attitudes were also seen in the intervention group ($p = 0.003$), indicating that counseling not only increased knowledge but also influenced mothers' beliefs and motivation to exclusively breastfeed. This is consistent with *Health Theory. The Belief Model* explains that changes in health behavior are influenced by an individual's perception of benefits, barriers, and external incentives. Counseling can help mothers feel more confident, understand the benefits of breastfeeding, and overcome doubts about breastfeeding.

3) The Influence of Counseling on Breastfeeding Practices

The improvement in correct breastfeeding practices in the intervention group indicates that counseling is effective in equipping mothers with technical skills, particularly regarding proper positioning and attachment. These results align with research by Nugroho et al. (2020) stated that proper breastfeeding skills can reduce lactation problems such as sore nipples and poor milk flow, thereby increasing breastfeeding success.

4) The Influence of Counseling on the Success of Exclusive Breastfeeding

At the end of the 3-month evaluation, 80% of mothers in the intervention group were successful in exclusively breastfeeding, higher than the control group (43.3%) ($p = 0.001$). This confirms UNICEF's (2022) findings that support from health workers through counseling can increase the duration of exclusive breastfeeding. Furthermore, counseling plays a crucial role in addressing psychological barriers such as anxiety, fatigue, and low self-confidence that postpartum mothers often experience.

5) Comparison with Previous Research

The results of this study align with research by Lestari & Yuliana (2019), which reported a significant relationship between breastfeeding counseling and the success of exclusive breastfeeding. Similarly, international research by Jones et al. et al. (2018) showed that breastfeeding education interventions can increase exclusive breastfeeding rates by up to 60% in developing countries.

6) Research Implications

These findings underscore the importance of breastfeeding counseling as an effective intervention to increase exclusive breastfeeding rates. Counseling needs to be provided continuously from pregnancy through the postpartum period. Furthermore,





family involvement, especially husbands, is crucial to ensure mothers receive full support during the breastfeeding process.

4. Conclusion and Suggestion

a. Conclusion

This study demonstrates that breastfeeding counseling significantly increases the success of exclusive breastfeeding in postpartum mothers. Breastfeeding counseling has been shown to:

- 1) Increase mothers' knowledge about the benefits, techniques, and management of lactation.
- 2) Forming a positive attitude of mothers towards exclusive breastfeeding.
- 3) Improving proper breastfeeding practices, including baby positioning and attachment.
- 4) Increase the success of exclusive breastfeeding up to 3 months postpartum compared to mothers who did not receive counseling.

Thus, breastfeeding counseling is an effective intervention that can increase the coverage of exclusive breastfeeding and support the achievement of maternal and child health targets in Indonesia.

b. Suggestion

1. For health workers (midwives/nurses):

Breastfeeding counseling should be an integral part of routine postpartum care, either through home visits or at health facilities.

2. For postpartum mothers:

It is expected that you will attend counseling sessions and practice correct breastfeeding techniques, and will not be easily influenced by myths or misinformation regarding breastfeeding.

3. For families:

Husbands and other family members are expected to provide emotional and practical support so that mothers are more confident in providing exclusive breastfeeding.

4. For policy makers:

It is necessary to develop a sustainable program in the form of *breastfeeding support programs* at the community health center, integrated health post (posyandu), and hospital levels to expand the scope of breastfeeding counseling.

5. For further researchers:

It is recommended to conduct research with a longer time span (up to 6 months) to fully evaluate the success of exclusive breastfeeding.

References





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1. Bachri, S., Palembang, A., Limbong, K., Sima, Y., Treasa, AD, & Pannyiwi, R. (2025). Implementation Of Nursing Care in Improving Productivity And Quality Of Nursing Services Towards Nurses Performance Which Must Be Completed At A Certain Time Time *International Journal of Health Sciences*, 3 (2), 173–179. <https://doi.org/10.59585/ijhs.v3i2.640>
2. Fitriani, N. (2020). The Effectiveness of Breastfeeding Education on Postpartum Mothers' Knowledge. *Journal of Nursing Science*, 8(2), 110–118.
3. Horta, B.L., & Victora , C.G. (2019). Long-term effects of breastfeeding: A systematic review. *World Health Organization*. Geneva: WHO Press.
4. Herlina, H, Bara, FT, Suardi, YS, Ilham, R., H., Basir, AA, Kurniati, E., & Nuryani, S. (2024). Health Education Using Breast Self-Examination in Preventing Cancer. *Sahabat Sosial: Journal of Community Service*, 3 (1), 42–50. <https://doi.org/10.59585/sosisabdimas.v3i1.513>
5. Herlina, H., Qudratullah, F., Pudyastuti, RR, Subani, ND, & Rahmat, RA (2025). The Influence of Education and Attitude of Pregnant Women on Antenatal Care Visits at Health Centers. *International Journal of Health Sciences*, 3 (2), 311–314. <https://doi.org/10.59585/ijhs.v3i2.672>
6. Jones, G., Steketee , R.W., Black, R.E., Bhutta , Z.A., & Morris, S.S. (2018). Exclusive breastfeeding and infant health outcomes: Systematic *Public review Health Nutrition*, 21(9), 1639–1647.
7. Ministry of Health of the Republic of Indonesia. (2023). *Indonesian Health Profile 2022*. Jakarta: Ministry of Health of the Republic of Indonesia.
8. Kusuma, H., & Wulandari, D. (2020). The Effect of Lactation Counseling on Exclusive Breastfeeding. *Journal of Midwifery and Health*, 12(1), 55–62.
9. Lestari, P., & Yuliana, R. (2019). The Relationship between Breastfeeding Counseling and Exclusive Breastfeeding. *Journal of Reproductive Health*, 6(3), 150–158.
10. Malaha, N., Rusdi, M., Syafri, M., Pannyiwi, R., Sima, Y., & Rahmat, RA (2022). The Relationship Between Knowledge Level and Smoking Behavior at SMA N 1 Liang, Banggai Islands Regency. *Barongko : Journal of Health Sciences* , 1 (1), 11–16. <https://doi.org/10.59585/bajik.v1i1.17>
11. Mustamin, R., Asmirah, R., Ningsih, ES, Delimayani, D., Sembiring, EA br., Anggeraeni, A., &. (2024). Socialization and Health Education on Good and Correct Handwashing Methods for Pregnant Women. *Sahabat Sosial: Journal of Community Service*, 3 (1), 78–85. <https://doi.org/10.59585/sosisabdimas.v3i1.519>
12. Nugroho, H., Fitri, R., & Anggraeni, R. (2020). Determinants of Exclusive Breastfeeding in Postpartum Mothers. *Indonesian Public Health Media*, 19(1), 45–52.
13. Naim, H., Mahendika, D., Afifah Harahap, N., Prabu Aji, S., Batubara, A., Yunita, L., & Pannyiwi, R. (2023). The Relationship between Maternal Knowledge of Complementary Foods with the Nutritional Status of Toddlers. *International Journal of Health Sciences*, 1 (1), 20–25. <https://doi.org/10.59585/ijhs.v1i1.47>
14. Permatasari, T., & Rahman, F. (2021). Factors Influencing the Success of Exclusive Breastfeeding. *Andalas Public Health Journal*, 15(2), 87–96.





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International Journal of Health Sciences (IJHS)Journal Homepage: <https://jurnal.agdosi.com/index.php/IJHS/index>

Volume 3 | Number 3 | September 2025 |



15. Pannyiwi, R., & Misnarliah, M. (2025). Descriptive of Night Tooth Brushing Habits with Dental Caries Status in Grade I, II, III Children at Makassar Public Elementary School. *International Journal of Health Sciences*, 3 (2), 327–331. <https://doi.org/10.59585/ijhs.v3i2.675>
16. Pratiwi, D., & Yanti, R. (2020). The Effectiveness of Breastfeeding Counseling in Increasing the Success of Exclusive Breastfeeding. *Indonesian Midwifery Journal*, 11(1), 25–33.
17. Riskesdas. (2022). *Main Results of Basic Health Research 2022*. Health Research and Development Agency, Ministry of Health of the Republic of Indonesia.
18. Sari, M., & Handayani, F. (2019). Breastfeeding Education on Postpartum Mothers' Self-Confidence. *Journal of Nursing*, 7(2), 102–109.
19. Silaen, CAM, Manurung, H., & Pannyiwi, R. (2025). The Geostorm in Great Major Power of the United States and NATO: The Impact of Climate Change to Southeast Asia. *JIMAD: Multidisciplinary Scientific Journal*, 2 (3), 165–173. <https://doi.org/10.59585/jimad.v2i3.701>
20. Setiawan, A., & Maharani, A. (2021). Breastfeeding Counseling to Increase Exclusive Breastfeeding Practices: A Literature Reviews. *International Journal of Nursing and Midwifery*, 13(3), 45–53.
21. UNICEF. (2022). *Breastfeeding: A Mother's Gift for Every Child*. New York: UNICEF.
22. World Health Organization. (2021). *Infant and Young Child Feeding: Guideline for Exclusive Breastfeeding*. Geneva: WHO Press.

