EDUCATION ON BREASTFEEDING TO IMPROVE KNOWLEDGE AND SKILLS OF MOTHERS WITH SICK INFANTS

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Abstract

Background: Proper breastfeeding attachment plays a crucial role in ensuring that infants receive optimal nutrition while preventing various complications for breastfeeding mothers, such as sore nipples and mastitis. This study aims to analyze the effect of education on proper breastfeeding techniques on the incidence of sore nipples in postpartum mothers.
Method: The study employed a quantitative approach with a quasi-experimental design of one group pre-test and post-test.
Results: The study involved 20 postpartum mothers with sick infant at PKU Muhammadiyah Yogyakarta Hospital from May to June 2025, selected using purposive sampling techniques. The procedure began with a pre-test, followed by education on proper breastfeeding techniques, and concluded with a post-test. Data analysis using the Wilcoxon test showed significant results with a p-value of 0.001 (< 0.05), indicating a meaningful difference in mother's knowledge and skill between before and after the education was provided.
Conclusion: This study concludes that effective education significantly reduces the incidence of sore nipples in breastfeeding mothers and underscores the importance of educational interventions in optimal breastfeeding practices.

Keywords: Breastfeeding, Breastfeeding Attachment, Exclusive Breastfeeding.

1. Introductions

The benefits of breastfeeding are widely recognized; however, the practice of exclusive breastfeeding remains far below global targets. According to Rosa et al. (2024), only around 44% of infants worldwide and 52.5% in Indonesia receive exclusive breastfeeding during the first six months of life. Other studies report that although the World Health Organization targets 90% coverage, the global rate remains at 44%, with Indonesia achieving approximately 67.7% in 2021 (Purnamasari, 2022; Puspitasari & Candra, 2022). In the Special Region of Yogyakarta, exclusive breastfeeding coverage reached 74.7% in 2021—higher than the national average yet still below the Sustainable Development Goals (SDGs) target of 85% (Puspitasari & Candra, 2022).

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One of the main factors contributing to the low rate of exclusive breastfeeding is mothers' lack of knowledge about proper breastfeeding techniques and adequate nutrition during lactation (Rosa et al., 2024). Hence, breastfeeding education programs are crucial to improve coverage and reduce infant mortality. Policies concerning exclusive breastfeeding have been established through various regulations, such as Law No. 36 of 2009 and Law No. 17 of 2023, which affirm the right of infants to receive exclusive breastfeeding for six months, further reinforced by local regulations at city and provincial levels (Puspitasari & Candra, 2022). These demonstrate the importance of strategic measures, including breastfeeding education, in achieving exclusive breastfeeding targets.

Another study highlights that a lack of breastfeeding skills, particularly among primiparous mothers, is a key factor in the low success rate of exclusive breastfeeding (Rinata et al., 2016). Prior knowledge and experience significantly influence breastfeeding ability, with multiparous mothers tending to have better skills than primiparous ones (Keni et al., 2020; Khoriyah & Prihatini, 2014). Breastfeeding challenges also increase during the first two weeks postpartum, when mothers are still physically and emotionally adjusting (IDAI, 2024). Education level, information access, and healthcare professional support also play a role in shaping breastfeeding behavior (Tamiru et al., 2012; (Sudargo & Kusmayanti, 2023).

According to Lawrence Green's theory, breastfeeding behavior is influenced by predisposing factors (knowledge, attitudes, education, parity), enabling factors (access to facilities), and reinforcing factors (social support) (Anggraeni & Benge, 2022). Education during pregnancy has been shown to enhance mothers' intentions to exclusively breastfeed (Sudarmi et al., 2019). However, obstacles such as low milk production, nipple conditions, work commitments, and formula milk promotion continue to be barriers (Guardi & Puspitasari, 2019).

In PKU Muhammadiyah Hospital Yogyakarta, data from 2024 revealed that among 293 hospitalized sick infants, many mothers lacked knowledge of proper breastfeeding techniques and subsequently opted for formula feeding (Paramashanti et al., 2023). This low level of understanding affects maternal attitudes toward exclusive breastfeeding (Handayani et al., 2014 in Keni et al., 2020). Therefore, appropriate breastfeeding education and support from professionals are essential for increasing breastfeeding success (Park et al., 2021 ; Ellyzabeth Sukmawati et al., 2021).

2. Methods

This study utilized a quantitative correlational approach with a quasi-experimental design, specifically a one-group pre-test and post-test model. The sample comprised 20 breastfeeding mothers in the An Ni'mah ward at PKU Muhammadiyah Hospital, Yogyakarta. Participants were selected through accidental sampling.

Inclusion criteria included mothers with at least junior high school education, residing in Yogyakarta, whose sick infants had been recommended for direct breastfeeding, mothers in the postpartum period regardless of delivery type, mothers with a history of employment, and those willing to participate.

The instruments used in this study consisted of a questionnaire and direct observation using the LATCH scoring system. The knowledge questionnaire contained 20 items formatted with a Guttman scale, offering binary "yes" or "no" responses. Breastfeeding skill assessment was conducted using the LATCH observation sheet, which examines five components of breastfeeding technique.

The questionnaire was designed to assess the breastfeeding process from the mother's subjective perspective while providing objective evaluation based on the infant's condition. Collected data were analyzed using multiple logistic regression, considering two main variables: knowledge and breastfeeding skills. The Wilcoxon test was employed to determine the effect of the breastfeeding education program on the improvement of maternal knowledge and skills in breastfeeding sick infants at PKU Muhammadiyah Hospital, Yogyakarta.

This study received ethical approval from the Ethics Committee of PKU Muhammadiyah Hospital Yogyakarta under Ethical Clearance No. 00159/KT.7.4/V/2025.

3. Results

Based on the research findings, the characteristics of the respondents are presented in Table 1, categorized by maternal age, educational background, parity, and employment status.

Table 1. Frequency distribution by maternal age, education, parity, and employment status

Characteristics	Frequency (f)	Percentage (%)
Age (Years)		
20-35	18	90%
>35	2	10%
Total	20	100%
Education		
SMP	1	5%
SMA/K	8	40%
Perguruan Tinggi	11	55%
Total	20	100%
Parity		
Primipara	14	70%
Multipara	6	30%
Total	20	100%
Employment status		
Bekerja	11	55%
Tidak bekerja	9	45%
Total	20	100%

Source: Primary Data, 2025

Research Results Based on Respondent Characteristics (Table 1) The total number of respondents was 20, with the majority aged between 20–35 years, accounting for 18 respondents (90%). Most respondents had a university-level education, with 11 individuals (55%). A majority of the respondents were primiparous (first-time mothers), totaling 14 respondents (70%). Regarding employment status, 11 respondents (55%) were working mothers.

Table 2. Frequency distribution of knowledge and skills levels

Category	*Pre-test*		*Post-test*	
	Frequency (f)	Percentage (%)	Frequency (f)	Percentage (%)
Knowledge				
Good	17	85%	20	100%
Moderate	2	10%	0	0%
Low	1	5%	0	0%
Total	20	100%	20	100%
Skill				
Good	**0**	**0%**	**11**	**55%**
Moderate	**17**	**85%**	**9**	**45%**
Low	**3**	**15%**	**0**	**0%**
Total	20	100%	20	100%

Source: Primary Data, 2025

Frequency Distribution of Knowledge and Skills (Table 2) The frequency distribution of knowledge and skills is shown in Table 2. Prior to the implementation of the breastfeeding education program, most respondents—17 individuals (85%)—had a high level of knowledge categorized as “good.” After receiving the

breastfeeding education, the number increased to 20 respondents (100%) with "good" knowledge.

In terms of skill distribution, before the breastfeeding education, most respondents—17 individuals (85%)—were classified in the "moderate" category. After receiving the education, 11 respondents (55%) were classified as having "good" breastfeeding skills, while 9 respondents (45%) remained in the "moderate" category.

Table 3. Frequency distribution of knowledge level by age, education, Parity, and Employment Status

Category	Pre-test		Post-test	
	Frequency (f)	Prosentase (%)	Frequency (f)	Prosentase (%)
Age (Years)				
20-35 tahun				
Good	16	80%	18	90%
Moderate	1	5%	0	0%
Low	1	5%	0	0%
>35 tahun				
Good	1	5%	2	10%
Moderate	1	5%	0	0%
Low	0	0%	0	0%
Total	20	100%	20	100%
Education				
SMP				
Good	0	0%	1	5%
Moderate	0	0%	0	0%
Low	1	5%	0	0%
SMA/K				
Good	6	30%	8	40%
Moderate	2	10%	0	0%
Low	0	0%	0	0%
Perguruan Tinggi/PT				
Good	11	55%	11	55%
Moderate	0	0%	0	0%
Low	0	0%	0	0%
Total	20	100%	20	100%
Parity				
Primipara				
Good	12	60%	14	70%
Moderate	1	5%	0	0%
Low	1	5%	0	0%
Multipara				
Good	5	25%	6	30%
Moderate	1	5%	0	0%
Low	0	0%	0	0%
Total	20	100%	20	100%
Employment Status				
Bekerja				
Good	10	50%	11	55%
Moderate	1	5%	0	0%
Low	0	0%	0	0%
Tidak Bekerja				
Good	7	35%	9	45%
Moderate	1	5%	0	0%
Low	1	5%	0	0%
Total	20	100%	20	100%

Source: Primary Data, 2025

Based on Table 3, the level of knowledge prior to the breastfeeding education program—when analyzed according to maternal age, educational background, parity, and employment status—was predominantly categorized as high. Following

the educational intervention, all 20 respondents (100%) demonstrated improved knowledge levels, achieving the "good" category.

Table 4. Frequency Distribution of Skill Level by Age, Education, Parity, and Employment Status

Category	Pre-test		Post-test	
	Frequency (f)	Prosentase (%)	Frequency (f)	Prosentase (%)
Age (Years)				
20-35 tahun				
Good	0	0%	11	55%
Moderate	15	75%	7	35%
Low	3	15%	0	0%
>35 tahun				
Good	0	0%	1	5%
Moderate	2	10%	1	5%
Low	0	0%	0	0%
Total	20	100%	20	100%
Education				
SMP				
Good	0	0%	1	5%
Moderate	1	5%	0	0%
Low	0	0%	0	0%
SMA/K				
Good	0	0%	3	15%
Moderate	6	30%	5	25%
Low	2	10%	0	0%
Perguruan Tinggi/PT				
Good	0	0%	8	40%
Moderate	10	50%	3	15%
Low	1	5%	0	0%
Total	20	100%	20	100%
Parity				
Primipara				
Good	0	0%	7	35%
Moderate	11	55%	7	35%
Low	3	15%	0	0%
Multipara				
Good	0	0%	5	25%
Moderate	6	30%	1	5%
Low	0	0%	0	0%
Total	20	100%	20	100%
Employment status				
Bekerja				
Good	0	0%	7	35%
Moderate	10	50%	4	20%
Low	1	5%	0	0%
Tidak Bekerja				
Good	0	0%	5	25%
Moderate	7	35%	4	20%
Low	2	10%	0	0%
Total	20	100%	20	100%

Source: Primary Data, 2025

Based on Table 4, the respondents' breastfeeding skills—categorized by age, educational background, parity, and employment status—were primarily rated as "moderate" or "low" prior to the breastfeeding education program. Following the intervention, all participants demonstrated improved performance, with skills classified as "good" or "moderately skilled." Notably, none of the respondents remained in the "low" skill category after the program. This outcome highlights the positive impact of structured breastfeeding education on practical maternal skills.

Tabel 5. *Uji Wilcoxon Test*

Z	**Comparison of Knowledge Levels Before and After the Educational Program**	**Comparison of Breastfeeding Skills Before and After the Educational Program**
	-3.329	-3.967
Asymp.Sig,(2-tailed)	.001	.000

Uji Wilcoxon U Test

Table 6. Output of Wilcoxon Signed-Rank Test

Output Rank Uji Wilcoxon				
	Notes	N	*Mean Rank*	*Sum of Ranks*
Comparison of Knowledge Levels Before and After the Educational Program	*Negative Ranks*	0	.00	.00
	Positif Ranks	14	7.50	105.00
	Ties	6		
	Total	20		
Comparison of Breastfeeding Skills Before and After the Educational Program	*Negative Ranks*	0	.00	.00
	Positif Ranks	20	10.50	210.00
	Ties	0		
	Total	20		

Output Rank Uji Wilcoxon

Based on Table 5 (Wilcoxon Test results), all 20 respondents demonstrated a positive improvement in breastfeeding skills, while 6 respondents showed no change. Importantly, none of the respondents exhibited a decline in knowledge scores. The Wilcoxon test result of -3.367 indicated a statistically significant difference between pre- and post-intervention scores, with a p-value of 0.00, which is less than 0.05. This suggests a significant improvement in breastfeeding skills among mothers after receiving breastfeeding education.

The hypothesis test using the Wilcoxon Signed Ranks Test, presented in Table 6, further confirmed a statistically significant increase in both knowledge and breastfeeding skills among participating mothers, with a p-value < 0.05. Specifically, 14 out of 20 respondents showed improved knowledge (Mean Rank = 7.50; Sum of Ranks = 105), while 6 respondents remained unchanged with no decline. In contrast, all respondents (n = 20) showed comprehensive improvement

in breastfeeding skills (Mean Rank = 10.50; Sum of Ranks = 210), with no stagnation or decrease observed.

These findings indicate that the educational program was more effective in promoting practical behavioral changes (skills) than in enhancing cognitive understanding (knowledge). Consequently, future educational strategies should be further developed to improve theoretical comprehension and maximize the success of exclusive breastfeeding and healthy infant growth outcomes.

4. Discussion

The Impact of Breastfeeding Education on Maternal Knowledge

Based on Table 3, which presents knowledge aspects according to age, education level, parity, and employment status, the study findings demonstrate that the breastfeeding education program positively influenced both maternal knowledge and skills. These results are consistent with previous studies by (Lindayani & Purnamayanti, 2023 ;Wahyuni et al., 2023), which revealed an increase in average scores and breastfeeding competencies post-intervention, indicating improvements in both knowledge and self-efficacy. According to (Lactona & Cahyono, 2024), Bloom's taxonomy model suggests that knowledge empowers individuals to comprehend, articulate, and interact effectively with their surrounding environment.

This study aligns with research by (Purnamasari, 2022 ;Widiastuti & Ramayanti, 2022), which found that mothers in the reproductive age range of 20–35 years—comprising 90% (18 respondents)—possessed positive breastfeeding experiences and strong decision-making abilities for their children. This age group is considered optimal for pregnancy, childbirth, and breastfeeding (Soetjiningsih, 2012). Furthermore, Wawan & Dewi (2020) argue that with increasing age, individuals tend to achieve greater personal maturity, mental resilience, and effectiveness in decision-making.

The findings also support previous studies by (Guardi & Puspitasari, 2019 ; Nurapandi et al., 2022), which identified a significant correlation between maternal education levels and exclusive breastfeeding. Post-intervention pre-test results revealed that knowledge was influenced by factors such as education, parity, and employment status, with all categories demonstrating upward shifts in classification following the educational program.

Primiparous mothers showed marked improvements in knowledge, and those with a parity of more than three were more likely to practice exclusive breastfeeding than

those with fewer children. Additionally, both employed and unemployed mothers exhibited equal potential for exclusive breastfeeding, aligning with findings by (Indriani et al., 2022 ; Putri et al., 2020).

Knowledge itself is derived from human perception—an individual's awareness of an object through their five senses, with hearing and vision contributing the most (Notoatmodjo, 2019). Therefore, implementing breastfeeding education programs by nursing professionals is essential in promoting successful breastfeeding practices among mothers with sick infants.

The Impact of Breastfeeding Education on Maternal Skills

Based on the analysis in Table 4, the findings are consistent with previous studies by (Nurhidayah, 2023 ; Triana et al., 2025), which emphasize that improving maternal knowledge through education and health counseling on proper breastfeeding techniques should be initiated early to achieve the target of exclusive breastfeeding for the first six months. The significant increase observed between pre-test and post-test scores indicates the pivotal role of counseling in enhancing postpartum mothers' understanding of proper breastfeeding positioning.

Among the respondents, 11 individuals (55%) with higher education levels showed marked improvement in breastfeeding knowledge and technique, supporting the findings of (Herawati & Gustina, 2025), who concluded that higher education and awareness contribute to better breastfeeding outcomes. This study also aligns with the work of (Amiruddin et al., 2023 ; Salsabila & Ismarwati, 2023), which highlight parity as a critical factor influencing maternal experience and breastfeeding skills. Prior experience serves as a foundation for improved breastfeeding performance, although no significant correlation was found between maternal employment status and exclusive breastfeeding practices.

The analysis of Table 5 confirms that education positively influenced maternal breastfeeding skills, which resonates with (Gustirini et al., 2025), noting that LATCH education was effectively delivered to postpartum mothers before hospital discharge. According to (Nurhidayah, 2023), the latch-on technique is an effective method for optimizing breast milk expression and improving breastfeeding outcomes. Correct nipple placement ensures it does not press against the infant's hard palate and instead reaches the throat, producing an audible swallowing sound—an indicator of successful feeding.

Additionally, nipple type plays a role in breastfeeding success; less prominent nipples may hinder milk flow, affecting production and maternal comfort. The

mother's breastfeeding position and the way she holds the infant also influence milk production efficiency. Mothers who feel physically and emotionally comfortable during breastfeeding are more likely to experience increased milk supply compared to those facing psychosocial challenges. These findings affirm that the latch-on technique is a highly effective strategy for improving breastfeeding ability, particularly among postpartum mothers.

5. Conclusion

Based on the results of data analysis using the Wilcoxon Signed Ranks Test, a significant difference was identified between pre- and post-intervention scores following the implementation of the breastfeeding education program. Among the 20 respondents, all demonstrated positive improvements in breastfeeding skills, with six respondents showing no change, and none experiencing a decline. The Wilcoxon test value of -3.367 and a p-value of 0.000 (< 0.05) indicate that the education program had a statistically significant impact on enhancing both the knowledge and skills of mothers in breastfeeding.

It can therefore be concluded that the breastfeeding education program is not only effective but also contributes positively and constructively to improving maternal breastfeeding competency, especially among mothers with sick infants. This study provides evidence that such educational interventions can support optimal breastfeeding outcomes, including the prevention of nipple soreness and breast engorgement.

6. Recommendations

The role of nurses in breastfeeding education as the primary facilitators and catalysts for change within maternal and child healthcare systems, nurses hold a strategic role in transforming breastfeeding education from a routine clinical activity into a movement that fosters maternal confidence, enhances breastfeeding skills, and reinforces the success of exclusive breastfeeding as a foundation for holistic and optimal infant growth and development.

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