

Application of Breastfeeding Techniques Regarding Breast Latch Positioning Among Primiparous Mothers Post-Cesarean Section at Indriati Hospital Solo Baru

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ABSTRACT

Introduction: The correct breastfeeding technique is how to give breast milk to a baby with the correct attachment and position of the mother and baby. To achieve successful breastfeeding, knowledge of the correct breastfeeding techniques is needed.

Objectives: The objective is to apply breastfeeding techniques to the position of breast attachment in post-Caesarean section mothers at Indriati Hospital, Solo Baru.

Methods: This research used a case study with pre- and post-tests. The implementation instrument used was a breast attachment observation sheet.

Conclusions: This study concluded that there was a significant improvement in breastfeeding techniques. Proper breastfeeding technique also leads to a perfect latch.

Keyword: Breast attachment, Primipara, Sectio Caesarea, Breastfeeding techniques.

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Introduction

Failures in the breastfeeding process often lead to problems for both the mother and the infant. Some mothers do not understand correct breastfeeding techniques, and breastfeeding failure is often attributed solely to issues with the infant. Furthermore, mothers frequently complain that their infants cry and refuse to nurse, leading them to decide to stop breastfeeding. Infant-related issues during breastfeeding often arise from sore or cracked nipples, resulting in weight loss and jaundice due to insufficient breast milk intake. For mothers, incorrect breastfeeding techniques can lead to postpartum physiological complications such as sore nipples, breast engorgement, and even mastitis or breast abscesses (Hasibuan, 2020).

The World Health Organization (WHO) recommends initiating breastfeeding within the first hour after birth and continuing beyond the infant's first six months of life, with the aim of meeting nutritional needs through continued breastfeeding up to the age of two. According to WHO and UNICEF data, the rate of exclusive breastfeeding for infants under six months is 41%, with a target of reaching 70% by 2030 (Puspitasari, 2021). WHO data from 2022 indicates that only 44% of infants received exclusive breastfeeding during their first six months of life, while the figure for 2023 was 38%. These figures remain far below the WHO target of 50% for 2025 (Rika, 2024).

In Indonesia, exclusive breastfeeding is regulated by Government Regulation Number 33 of 2012 concerning Exclusive Breastfeeding. This regulation defines exclusive breastfeeding as the provision of breast milk to an infant from birth for a period of six months, without the addition or substitution of other foods or beverages (with the exception of medicines, vitamins, and minerals). The coverage of exclusive breastfeeding among 6-month-old infants was 56.9% in 2021, 61.5% in 2022, and 63.9% in 2023 (Indonesia Health Profile, 2024). However, the rate of breastfeeding among children under two years of age (0–23 months) in 2022 stood at 92.86%, marking a decline from the figures recorded in 2021 (94.65%) and 2020 (95.19%). This decline is attributed to factors such as a lack of knowledge, incorrect breastfeeding techniques, maternal employment, and health issues affecting either the mother or the infant (Ministry of Women Empowerment and Child Protection, 2023).

ASI Eksklusif di Indonesia masih kurang, disebabkan karena pemberian informasi mengenai ASI dari petugas kesehatan dan tentunya masyarakat yang tidak optimal yaitu 60% masyarakat yang mengetahui informasi tentang pemberian ASI dan sekitar 40% tenaga kesehatan profesional yang mampu memberikan edukasi dan konseling tentang menyusui. Rendahnya cakupan ASI juga dipengaruhi oleh teknik menyusui yang salah. Cara menyusui yang benar dapat dipengaruhi oleh paritas, usia, status pekerjaan ibu, masalah payudara, usia gestasi, dan berat badan lahir (Damayanti, 2023). Persentase pemberian ASI eksklusif pada bayi 0-6 bulan di Jawa Tengah pada tahun 2021 (72,5%), tahun 2022 (71,4%), dan tahun 2023 (64,3%). Pada tahun 2023 menurun bila dibandingkan persentase pemberian ASI eksklusif tahun sebelumnya (Dinkes Provinsi Jateng, 2023).

Breastfeeding technique plays a crucial role in the success of a breastfeeding program. If a mother lacks the correct technique, she may experience breastfeeding-related symptoms such as pain. This discomfort is one of the reasons why women may be reluctant to breastfeed their babies (Kurniasari, 2024). Lactation management encompasses all efforts made to help mothers successfully breastfeed exclusively. Lactation, or breastfeeding, involves two processes: breast milk production (the prolactin reflex) and milk ejection driven by the hormone oxytocin (the milk-ejection or "let-down" reflex). Breastfeeding technique is a factor influencing milk production; incorrect technique can cause sore nipples and make mothers reluctant to breastfeed. Infrequent breastfeeding has negative consequences, as the baby's sucking is vital for stimulating subsequent milk production; however, many mothers lack information regarding the benefits of breast milk and proper breastfeeding techniques. A correct breastfeeding technique involves the proper positioning of the baby and correct attachment to the breast (Puspitasari, 2021).

A Caesarean section (C-section) is a surgical procedure involving an incision in the anterior uterine wall to facilitate delivery. Several factors can trigger issues with delayed or inhibited breast milk production in mothers following a C-section, one of which is postoperative pain. This condition affects breastfeeding, as the movements required to nurse the baby can cause pain. Consequently, mothers may become reluctant to breastfeed, potentially leading to a decline in the baby's nutritional status (Ayu, 2022).

Breastfeeding practices are also influenced by parity. Parity refers to a woman's history of giving birth to a viable infant. Parity classifications for mothers who have given birth include nullipara, primipara, multipara, and grand multipara. Parity significantly influences a mother's experience and proficiency regarding breastfeeding. Previous breastfeeding experience supports current breastfeeding skills, as past challenges can motivate a mother to improve her approach. Breastfeeding difficulties often stem from various issues affecting either the mother or the infant. The most common problem experienced by breastfeeding mothers is sore or cracked nipples; this condition typically arises from incorrect infant positioning or improper breastfeeding technique (Damayanti, 2023).

Research by Rosa et al. (2024) supports these findings, revealing through a case study that education on correct breastfeeding techniques led to changes in clients' practices: infant latching improved, mothers were able to position their babies correctly, maternal knowledge regarding breastfeeding techniques increased, mothers experienced no nipple soreness, babies were no longer fussy during feeding, and clients felt more relaxed and confident. According to Yuniarti (2023), breastfeeding counseling influences the adoption of correct breastfeeding methods at RSU Islam Klaten.

Research by Carolina (2023) indicates that bedside teaching on correct breastfeeding techniques influences breastfeeding success among mothers in the postpartum ward of RSUD Kota Palangka Raya. Similarly, Astutia (2020) reported changes in breastfeeding practices among mothers following Cesarean sections after receiving health education, demonstrating that such education is effective in influencing individual behavior.

This study aims to implement breastfeeding techniques specifically focusing on positioning and latching—for mothers who have undergone Cesarean sections at Indriati Hospital Solo Baru.

Method

This study employs a descriptive investigation using a case study framework and a pre-test design, involving a comparative analysis of two postpartum Cesarean section clients. The objective is to implement breastfeeding techniques regarding positioning and latching for these mothers, thereby determining the effectiveness of breastfeeding technique education on latching and positioning.

Results and Discussion

Table 1 Comparison of Breastfeeding Techniques Regarding Breast Latch Position for Mrs. M and Mrs. R

Ny. M (P1)			Ny. R (P2)	
	Pre	Post	Pre	Post
Breastfeeding technique	Many steps not performed	Performed perfectly	Many steps not performed	Performed perfectly
Breast attachment	0	4	0	4

Based on Table 4.1, improvements in breastfeeding technique and latching were observed in both patients. For Mrs. M, prior to the health education intervention regarding breastfeeding technique and latching, observations revealed that many steps of the breastfeeding technique were omitted and the latching position was incorrect (score: 0). Following the intervention, the first evaluation—conducted two hours later during a breastfeeding session showed that the technique was partially performed but still imperfect, while the latching position had improved (score: 2). The second evaluation, performed the following day, showed that the breastfeeding technique was perfect and the latching position was also correct or perfect (score: 4). The third evaluation, conducted two hours later, confirmed that the breastfeeding technique was perfect and the latching position was also correct or perfect (score: 4).

For the second patient, Mrs. R, prior to the health education intervention regarding breastfeeding technique and latching, observations revealed that many steps of the breastfeeding technique were omitted and the latching position was incorrect (score: 0). Following the intervention, the first evaluation conducted two hours later during a breastfeeding session showed that the technique was partially performed but still imperfect, while the latching position had improved (score: 2). The second evaluation, performed the following day, showed that the breastfeeding technique was perfect, though the latching position was not yet perfect (score: 3). The third evaluation, conducted two hours later, confirmed that the breastfeeding technique was perfect and the latching position was also correct or perfect (score: 4).

Discussion

Discussion 1 (Assessment)

Based on the assessment results, it was found that both patients reported a lack of knowledge regarding breastfeeding techniques and latching. Both patients had delivered via Caesarean section and were first-time mothers (primiparae). With IV lines still in place, the patients felt unable to hold their babies correctly during breastfeeding; they appeared

exhausted due to nighttime nursing and insufficient rest, while their babies nursed briefly and were fussy.

Observations (objective data) revealed that the patients could not explain breastfeeding techniques or latching and appeared confused when asked about them. Incorrect breastfeeding techniques and latching were observed; the babies did not latch onto the breast properly and were fussy during feeding. Additionally, the babies' intake was inadequate, and the mothers showed signs of fatigue.

These findings align with research by Obinna et al. (2021), which indicates that primiparous women lacking breastfeeding experience or practice require intensified efforts to promote exclusive breastfeeding through proper instruction on correct techniques. Furthermore, these results are consistent with research by Rosa (2024), showing that primiparous mothers face difficulties in understanding and achieving a correct breastfeeding latch.

A lack of knowledge regarding breastfeeding techniques and the benefits of proper latching can negatively impact the quality of breastfeeding and the baby's health. Primiparous mothers often do not know the correct way to position the baby or ensure an optimal latch on the areola.

Discussion 2 (Diagnosis)

Based on the results obtained during the nursing diagnosis process, it was determined that this diagnosis arose because both patients reported a lack of knowledge regarding breastfeeding techniques and latching. Neither patient had received information during pregnancy, nor did they have prior breastfeeding experience. Objective data for both respondents showed that they could not explain breastfeeding techniques or latching, appeared confused when answering questions about these topics, and demonstrated incorrect breastfeeding techniques and latching. Consequently, the nursing diagnosis established—based on the Indonesian Nursing Diagnosis Standards (SDKI)—was "Deficient Knowledge" related to a lack of exposure to information, evidenced by incorrect breastfeeding techniques and latching (D.0111). According to the SDKI (2022), "Deficient Knowledge" is a nursing diagnosis defined as the absence or deficiency of cognitive information related to a specific topic; one of the causes is a lack of exposure to information. This aligns with the condition of both patients, who had not received information during pregnancy and lacked prior breastfeeding experience.

Both patients reported still having IV lines in place, making it difficult to hold their babies correctly during breastfeeding; they also suffered from sleep deprivation due to night feedings and lingering surgical pain, while the babies were fussy during nursing. Objective data revealed incorrect breastfeeding techniques and latching in both patients, resulting in inadequate infant nursing and maternal fatigue. These are indicators of the diagnosis "Ineffective Breastfeeding." Thus, the second nursing diagnosis identified was "Ineffective Breastfeeding" related to the infant's inadequate sucking reflex, evidenced by the infant failing to latch onto the mother's breast correctly (D.0029). In the SDKI (2022), "Ineffective Breastfeeding" is defined as a condition in which the mother and infant experience dissatisfaction or difficulty during the breastfeeding process. This corresponds to the condition of both patients.

By the second day postpartum, the patient was already breastfeeding her baby using both breasts and was able to demonstrate proper breastfeeding techniques. Objective data showed the baby latching correctly, the mother positioning the baby properly, a correct latch, no nipple excoriation, and the baby remaining calm during feeding. Observations of both patients indicated that they could position their babies correctly, used proper breastfeeding techniques, and their babies were not fussy during feeding. These findings support the diagnosis of "Effective Breastfeeding." According to the SDKI (2022), effective breastfeeding is a nursing diagnosis defined as the direct provision of breast milk from the breast to the infant or child in a manner that meets nutritional needs.

Discussion 3 (Intervention)

Regarding the interventions, the researcher developed a nursing care plan featuring relaxation therapy as a primary intervention, in accordance with the Indonesian Nursing Intervention Standards (SIKI). The intervention provided to address the "Knowledge Deficit" diagnosis was breastfeeding education (I.12393). According to SIKI (2022), breastfeeding education is an intervention wherein nurses provide information and advice regarding breastfeeding across the antepartum, intrapartum, and postpartum periods; in this specific case, the education was directed at postpartum patients. This was supplemented by the application of breastfeeding techniques aimed at assessing positioning and latch quality in both patients. Both patients received instruction on correct breastfeeding techniques. Applying correct techniques ensures optimal positioning and latching, allowing the baby to feed effectively while protecting the mother from breastfeeding complications such as nipple excoriation. Through this instruction, it is expected that the patients will be able to practice these techniques independently, thereby consistently maintaining correct positioning and latching.

The intervention provided to the patient diagnosed with ineffective breastfeeding was lactation counseling (I.03093). According to SIKI (2022), lactation counseling is an intervention performed by nurses to provide guidance on proper breastfeeding techniques for infant feeding. The aim of this intervention was to teach the patient the correct breastfeeding technique, as observations revealed that the patient was still using incorrect techniques and improper latching positioning. Consequently, re-instruction on the correct technique was necessary.

The intervention provided to the patient diagnosed with effective breastfeeding was also lactation counseling (I.03093). According to SIKI (2022), lactation counseling is an intervention performed by nurses to provide guidance on proper breastfeeding techniques for infant feeding. The aim of this intervention was to teach the patient the correct breastfeeding technique. By the third observation, the patient was already able to breastfeed using the correct technique, and the latching position was perfect. However, the patient was still re-instructed on the correct technique so that she could practice it independently during breastfeeding, thereby ensuring the infant received breast milk optimally.

Discussion 4 (Implementation)

The implementation addressing the diagnosis of "deficient knowledge" involved providing breastfeeding education (I.12393), specifically covering breastfeeding techniques, so that the patients could practice and apply the correct methods. Both patients were highly enthusiastic about learning and practicing these techniques, as they were first-time mothers who were committed to breastfeeding their babies.

The second implementation addressed the diagnosis of "ineffective breastfeeding" through breastfeeding counseling. Upon evaluation, it was found that neither patient was yet able to execute the breastfeeding techniques correctly, resulting in improper latching. The researcher then re-taught the correct techniques. It was anticipated that this counseling would enable both patients to practice the techniques properly.

The third implementation addressed the diagnosis of "effective breastfeeding" through lactation counseling (I.03093). During the third evaluation, both patients were able to practice the breastfeeding techniques correctly, and observations confirmed that their latching positions were perfect.

In this study, patients received education on correct breastfeeding techniques, followed by three evaluations or observations of their technique and latching position while breastfeeding. This aligns with the study by Rosa (2024), which involved three client visits to assess breastfeeding techniques among primiparous postpartum mothers. The nursing

interventions and implementation included education on latching, correct techniques, and various breastfeeding positions.

Meanwhile, according to Obinna et al. (2021), effective breastfeeding practices are significantly associated with mothers receiving counseling on techniques immediately after delivery and attending at least two postnatal visits.

Discussion 5 (Evaluation)

Based on the evaluation of both patients, a change in breastfeeding technique was observed following the provision of education on breastfeeding techniques. This education increased the patients' knowledge, enabling them to breastfeed using the correct technique. Employing the correct breastfeeding technique facilitates proper latching.

This finding aligns with research by Gustina (2023), which indicates that lactation education influences breastfeeding techniques among primiparous mothers. Similarly, a study by Yuniarti (2023) demonstrates the impact of lactation counseling on correct breastfeeding practices; following counseling, mothers showed significant improvement in their breastfeeding methods. Successful breastfeeding requires a good latch to ensure effectiveness and adequate breast milk intake for the infant.

These results are also consistent with the case study by Rosa (2024), which found that educating patients on correct breastfeeding techniques led to positive changes: improved infant latching, correct infant positioning, increased maternal knowledge, prevention of nipple soreness, reduced infant fussiness during feeding, continuous infant sucking, and a greater sense of relaxation and confidence among the mothers.

Discussion 6 (Comparison of conditions before and after the implementation of breastfeeding techniques)

Prior to the implementation of breastfeeding techniques, both patients stated they lacked knowledge regarding these methods. Mrs. M had prepared for breastfeeding by performing breast care but had never received information on actual breastfeeding techniques. Mrs. R had neither performed breast care nor received information on breastfeeding techniques, although she had consistently monitored her fetus's condition throughout her pregnancy.

Following the implementation of breastfeeding techniques and three subsequent evaluations, a significant improvement in breastfeeding technique was observed. The application of proper breastfeeding techniques resulted in perfect latching. The patients actively practiced the techniques, driven by their desire to breastfeed their infants. Motivated by the goal of providing adequate nutrition through breastfeeding, they recognized the importance of mastering and applying these techniques.

This aligns with research by Yuniarti (2023), which indicates that breastfeeding counseling influences correct breastfeeding methods and affects behaviors related to positioning and latching. It also corresponds with findings by Novayelinda (2019), showing that after receiving support and guidance, the infant latching scores in the intervention group were significantly higher than those in the control group.

Obinna et al. (2021) noted that while more mothers receive orientation on breastfeeding techniques from healthcare workers before delivery, very few receive it postpartum. This situation requires improvement, as effective breastfeeding practices are significantly associated with mothers receiving counseling on techniques immediately after delivery and attending at least two postnatal visits. Research by Rosa (2024) indicates that, following education on correct breastfeeding techniques, clients demonstrated changes in their breastfeeding practices: the baby's latch improved, mothers were able to position the baby correctly, maternal knowledge regarding breastfeeding techniques increased, mothers experienced no nipple soreness, babies were no longer fussy during feeding, and mothers felt

more relaxed and confident. Education on correct breastfeeding techniques can enhance the knowledge of primiparous mothers.

The goal of providing education on breastfeeding techniques is to enhance a mother's knowledge regarding proper baby positioning and holding, correct latching, and the prevention of breast-related issues, while also ensuring the baby remains calm and content. This aligns with research (Rosa, 2024), which indicates that such education aims to improve the baby's latch, the mother's ability to position the baby correctly, and the mother's confidence; it also fosters outcomes such as the baby sleeping after feeding, the breast emptying effectively, and stronger sucking, while preventing fussiness or crying during the process. Proper latching is crucial; it enables the mother to breastfeed optimally and ensures the baby receives adequate nutrition. Furthermore, it helps prevent complications such as sore nipples or other breastfeeding difficulties. Primiparous mothers—who often lack prior knowledge or experience—benefit significantly from education on latching, as it supports successful breastfeeding. Receiving adequate education on latching is essential for these mothers. Research (Rosa, 2024) supports this, noting that latching education helps primiparous mothers understand the health and developmental benefits of breast milk, learn correct latching techniques, and receive psychological support. These factors contribute to breastfeeding success and offer long-term benefits for both mother and baby. Ultimately, educating primiparous mothers on latching plays a vital role in ensuring effective and comfortable breastfeeding.

Conclusions and Recommendations

Conclusions

Assessment

Assessment results indicated that both patients had undergone cesarean sections and were first-time mothers (primiparae). Although the patients had initiated breastfeeding, their techniques were incorrect, and they had never received prior information regarding proper breastfeeding methods. With IV lines still in place, the patients felt unable to hold their babies correctly during breastfeeding; they appeared fatigued due to nighttime breastfeeding and a lack of rest, while the babies nursed briefly and were fussy.

Diagnosis

Based on the nursing assessment of both patients, the nursing diagnoses established in accordance with the Indonesian Nursing Diagnosis Standards (SDKI) were: first, Knowledge Deficit related to lack of exposure to information, evidenced by incorrect breastfeeding techniques and latching (D.0111); second, Ineffective Breastfeeding related to inadequate infant sucking reflex, evidenced by the infant failing to latch correctly onto the mother's breast (D.0029); and third, Effective Breastfeeding, evidenced by the mother's ability to position the infant correctly and the infant achieving a proper latch.

Intervention

The planned nursing interventions in this study adhered to the Indonesian Nursing Intervention Standards (SIKI), specifically Breastfeeding Education and Lactation Counseling (I.03093). These interventions were selected due to their relevance to the patients' condition, as they lacked knowledge regarding breastfeeding techniques.

Implementation

Implementation was tailored to the planned interventions involving both the patients and their infants. Instruction on breastfeeding techniques was provided to both patients, followed by three rounds of evaluation.

Evaluation

Evaluation of both patients was conducted using the Standard Operating Procedure (SOP) for breastfeeding techniques and a latching observation checklist. Evaluations took place on three separate occasions while the patients were breastfeeding their infants. Both patients demonstrated improvement in their breastfeeding techniques, progressing from incorrect to perfect execution; this improvement extended to their positioning and latching, which also advanced from incorrect to perfect.

Conditions were assessed before and after the implementation of the intervention.

The intervention was administered to two primiparous patients at Indriati Hospital Solo Baru who had delivered via Caesarean section. Both patients received education on breastfeeding techniques, followed by evaluations of their latching (attachment) technique. Following the breastfeeding instruction and three rounds of evaluation, a highly significant improvement in breastfeeding technique was observed. The application of correct breastfeeding techniques resulted in a perfect latch. The patients actively practiced the techniques, driven by their desire to breastfeed their infants and ensure adequate nutrition. For Mrs. M, prior to the health education on breastfeeding and latching techniques, observations revealed that many steps were omitted and the latch was incorrect (score: 0). The first evaluation, conducted two hours later during a breastfeeding session, showed partial implementation of techniques—though still imperfect and an improved latch (score: 2). The second evaluation, performed the following day, showed perfect breastfeeding technique and a correct/perfect latch (score: 4). The third evaluation, conducted two hours later, confirmed perfect breastfeeding technique and a correct/perfect latch (score: 4).

For the second patient, Mrs. R, the initial observation prior to health education revealed that many steps were omitted and the latch was incorrect (score: 0). The first evaluation, conducted two hours later during a breastfeeding session, showed partial implementation of techniques—though still imperfect—and an improved latch (score: 2). The second evaluation, performed the following day, showed perfect breastfeeding technique but an imperfect latch (score: 3). At the third evaluation, conducted two hours later, it was found that the breastfeeding technique was perfect and the latching position was also correct or perfect (4).

Recommendations

Based on the conclusions above, the author offers the following recommendations:

For Clients

It is hoped that this study will enhance clients' knowledge regarding breastfeeding techniques and latching positions, and that they will be able to independently apply these techniques at home to achieve successful breastfeeding.

For the Institution

The researcher hopes this study will serve as a reference for future research on breastfeeding techniques and latching positions among postpartum mothers, whether following a normal delivery or a delivery involving medical intervention.

For the Researcher

It is expected that the author will utilize the knowledge gained from the experience of providing nursing care to breastfeeding mothers—whether they delivered spontaneously or via medical intervention.

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