

Lactation Education to Optimize Breastfeeding Practices and Support Exclusive Breastfeeding Among Post-Caesarean Mothers at RSUD Awet Muda Narmada

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ABSTRACT

The postpartum period is a critical stage for establishing successful breastfeeding, particularly among mothers recovering from caesarean section. Limited knowledge, confidence, and practical breastfeeding skills may contribute to suboptimal breastfeeding practices. This community service program aimed to improve the knowledge, attitudes, breastfeeding skills, and breastfeeding practices of postpartum mothers following caesarean section through structured lactation education. The program was conducted at Awet Muda Narmada Regional General Hospital, West Lombok, Indonesia, involving 30 postpartum mothers following caesarean section. The intervention consisted of interactive health education using posters and leaflets, question-and-answer discussions, demonstrations of proper breastfeeding techniques and lactation massage, and supervised hands-on practice. Program outcomes were evaluated using pre-test and post-test questionnaires and structured observation sheets. The results demonstrated improvements across all evaluated variables. Knowledge increased from a mean score of 5.73 to 8.96, representing an increase of 56.37%. Attitudes toward exclusive breastfeeding increased from 28.27 to 36.43 (28.86%), while breastfeeding skills improved from 5.13 to 9.03 (76.02%). Breastfeeding practices also increased from 4.56 to 7.63, representing an improvement of 67.32%. These findings indicate that structured lactation education incorporating practical demonstrations, lactation massage, supervised practice, and individualized guidance can improve breastfeeding knowledge, attitudes, skills, and practices among postpartum mothers following caesarean section. Integrating structured lactation education into routine postpartum care may support mothers in achieving successful exclusive breastfeeding.

Keywords : Knowledge, Lactation Education, Lactation Massage, Postpartum Mothers, Skills.

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INTRODUCTION

Exclusive breastfeeding is one of the most effective public health interventions for improving infant growth, development, and survival (see : (Couto, Dias, and Oliveira 2020), (Smith et al. 2017), and (Khan and Islam 2017)). The World Health Organization recommends exclusive breastfeeding for the first six months of life because it reduces infant morbidity and mortality and benefits both mothers and infants in the short and long term (Jama et al. 2020). However, successful breastfeeding is often more difficult among mothers who deliver by caesarean section (CS) (see : (Li, Wan, and Zhu 2021), (Ulfa et al. 2023), and (Emam and Ali 2017)) . Postoperative pain, limited mobility, anesthesia effects, delayed skin-to-skin contact, and delayed breastfeeding initiation can interfere with early breastfeeding, increasing the risk of delayed lactogenesis, low breastfeeding confidence, formula supplementation, and lower exclusive breastfeeding rates (see : (Hooda et al. 2023), (Ahmad et al. 2023), and (Herawati et al. 2026)).

Awet Muda Narmada Regional General Hospital is a referral hospital in West Lombok Regency that provides both vaginal and caesarean deliveries. In 2025, the hospital recorded 1,478 deliveries, consisting of 947 caesarean deliveries (64.07%) and 531 vaginal deliveries (35.93%). This high proportion of caesarean births reflects referrals from primary healthcare facilities and indicates that many postpartum mothers at the hospital require breastfeeding support to achieve successful exclusive breastfeeding ((Huang et al. 2019) and (Schliep et al. 2019)).

Poor breastfeeding practices after caesarean delivery can negatively affect both mothers and infants (see : (Li et al. 2021), (Hoang Nguyen et al. 2020), and (Paksoy Erbaydar and Erbaydar 2020)). Delayed or ineffective breastfeeding may lead to delayed milk production, unnecessary formula use, and failure to achieve exclusive breastfeeding ((Pérez-Escamilla et al. 2023) and (Huang et al. 2020)). For infants, this increases the risk of infection, poor growth, and other health problems, while mothers may experience breastfeeding difficulties, reduced confidence, and early cessation of breastfeeding (see : (Lawrence and Lawrence 2021), (Pérez-Escamilla et al. 2023), and (Colombo et al. 2018)). Therefore, interventions that strengthen breastfeeding practices in the postpartum period are essential ((Khatib et al. 2023) and (Kassianos et al. 2019)).

These challenges are influenced not only by medical conditions but also by limited knowledge, breastfeeding skills, confidence, and professional support. Many mothers do not fully understand the benefits of exclusive breastfeeding, correct breastfeeding techniques, signs of adequate milk intake, or ways to manage common breastfeeding problems after surgery (see: (Charlick et al. 2019), (Lawrence and Lawrence 2021), and (Spencer, Abrams, and Hoppin 2019)). In addition, the lack of structured lactation education during hospitalization often limits mothers' ability to breastfeed successfully (see : (Bookhart et al. 2021), (Hookway, Brown, and Grant 2023), and (Lojander, Axelin, and Niela-Vilén 2024)). Lactation massage is an important component of lactation management that can be incorporated into breastfeeding education to support milk flow, facilitate breastfeeding, and improve mothers' confidence and practical skills. Through education combined with demonstrations and hands-on practice, mothers can gain both knowledge and practical skills to manage breastfeeding challenges, particularly during the post-caesarean period. Therefore, evidence-based lactation management programs that integrate lactation education and lactation massage are needed to support optimal breastfeeding practices.

Based on these considerations, a community service program was implemented at Awet Muda Narmada Regional General Hospital to improve breastfeeding practices among postpartum mothers after caesarean section through structured lactation education. The

program covered the benefits of exclusive breastfeeding, lactation management, correct breastfeeding techniques, signs of adequate milk intake, and strategies for overcoming common breastfeeding problems. This initiative aimed to improve mothers' knowledge, attitudes, skills, and breastfeeding practices, thereby supporting exclusive breastfeeding and better maternal and infant health outcomes.

METHOD

This community service program employed a structured health education approach based on a Health Education Session Plan (HESP) to optimize breastfeeding practices among postpartum mothers following caesarean section. The program was conducted in the postpartum ward of Awet Muda Narmada Regional General Hospital, West Lombok Regency, Indonesia, from 17 to 20 June 2026. The participants comprised 30 postpartum mothers following caesarean section who were admitted to the postpartum ward of Awet Muda Narmada Regional General Hospital during the implementation period. Participants were recruited using a consecutive sampling approach, whereby all eligible mothers who met the inclusion criteria during the program period and agreed to participate were included. The inclusion criteria consisted of postpartum mothers after caesarean section who were physically stable, able to communicate effectively, and willing to participate in the educational activities. Mothers with severe postoperative complications or medical conditions that prevented participation were excluded.

The intervention was delivered by a team consisting of one lecturer specializing in midwifery and one certified midwife. The educational program focused on improving mothers' knowledge, attitudes, practical skills, and breastfeeding practices to support successful exclusive breastfeeding. Educational materials included the definition and benefits of exclusive breastfeeding, Early Initiation of Breastfeeding (EIBF), lactation physiology, breastfeeding management, correct breastfeeding positioning and attachment, signs of adequate breast milk intake, strategies for managing common breastfeeding problems after caesarean section, and lactation massage as a supportive breastfeeding technique.

The educational activities consisted of five sequential components: (1) an interactive lecture using posters and leaflets, (2) question-and-answer discussions, (3) demonstrations of correct breastfeeding techniques and lactation massage, (4) supervised hands-on breastfeeding practice and lactation massage with individualized guidance, and (5) evaluation using pre-test and post-test questionnaires and skills observation. Each educational session lasted approximately 90 minutes, beginning with participant orientation, followed by baseline assessment, educational delivery, practical demonstrations, supervised practice, post-intervention evaluation, and closing remarks.

Educational media included illustrated posters, printed leaflets, and live demonstrations performed by the facilitators. During the practical session, participants were individually assisted in practicing appropriate breastfeeding positions and infant attachment techniques to enhance their confidence and breastfeeding competence.

Program evaluation was conducted using three levels of assessment. Structural evaluation assessed the readiness of the venue, educational materials, equipment, and facilitators. Process evaluation examined participant attendance, engagement during discussions, and active participation in demonstrations and practical sessions. Outcome evaluation compared participants' pre-test and post-test scores to assess changes in breastfeeding knowledge, attitudes, skills, and practices. Descriptive analysis was used to calculate the mean and standard deviation (SD) of pre-test and post-test scores, the mean difference between the two assessments, and the percentage increase from pre-test to post-test.

Facilitators also observed participants' ability to correctly perform breastfeeding positioning, attachment techniques, and lactation massage using a structured observation checklist. The results of the pre-test and post-test assessments were then compared to determine the improvement in participants' knowledge, attitudes, breastfeeding skills, and practices following the intervention.

The implementation of this community service program was conducted with permission from the management of Awet Muda Narmada Regional General Hospital. Prior to participation, all mothers received an explanation regarding the objectives and procedures of the program and provided informed consent. Participation was voluntary, participant confidentiality was maintained throughout the activity, and all educational procedures adhered to ethical principles for community-based health promotion activities. Explain in detail about research design, time, variables, population, sample, sampling, instruments, data analysis, and information pass ethical tests.

RESULTS

The community service program entitled "Optimizing Breastfeeding Practices Through Lactation Education Among Postpartum Mothers Following Caesarean Section to Support Exclusive Breastfeeding Success at Awet Muda Narmada Regional General Hospital" was successfully implemented on 17 June 2026 in the postpartum ward of Awet Muda Narmada Regional General Hospital, West Lombok, Indonesia. The program involved 30 postpartum mothers following caesarean section and was conducted through structured lactation education consisting of interactive lectures, demonstrations, supervised breastfeeding practice, and discussion sessions.

The effectiveness of the intervention was evaluated by comparing participants' pre-test and post-test scores on breastfeeding knowledge and attitudes, as well as observation of breastfeeding skills and practices before and after the educational program.

The participants demonstrated a substantial improvement in breastfeeding knowledge following the intervention. The mean knowledge score increased from 5.73 ± 0.69 before the education to 8.96 ± 0.66 after the intervention, representing an average increase of 3.23 points (56.37%). In addition, the decrease in the standard deviation indicates a more consistent level of understanding among participants after receiving the education.

Participants also showed a more positive attitude toward exclusive breastfeeding after completing the program. The mean attitude score increased from 28.27 ± 0.90 at baseline to 36.43 ± 0.93 after the intervention, corresponding to an improvement of 8.16 points (28.86%). Most mothers expressed greater confidence in initiating breastfeeding immediately after birth and a stronger commitment to providing exclusive breastfeeding during the first six months of life.

Breastfeeding skills improved considerably following the demonstration and supervised practice sessions. The mean breastfeeding skill score increased from 5.13 ± 1.00 before the intervention to 9.03 ± 0.49 afterward, reflecting an increase of 3.90 points (76.02%). Participants demonstrated improved proficiency in achieving correct breastfeeding positions, proper infant attachment (latch-on), recognizing signs of adequate breast milk intake, managing common breastfeeding difficulties after caesarean delivery, and performing lactation massage correctly according to the demonstrated technique. The supervised hands-on practice allowed participants to apply the lactation massage technique with guidance from the intervention team, thereby strengthening their practical breastfeeding skills and confidence.

Similarly, breastfeeding practice improved after the educational intervention. The mean practice score increased from 4.56 ± 0.56 before education to 7.63 ± 0.49 after education,

representing an increase of 3.07 points (67.32%). During the practical session, most mothers successfully applied appropriate breastfeeding techniques and demonstrated greater confidence in breastfeeding their infants despite postoperative discomfort.

Overall, the educational intervention achieved its intended objectives by improving participants' knowledge, attitudes, practical breastfeeding skills, and breastfeeding practices. Active participation throughout the educational sessions and positive responses during demonstrations further supported the successful implementation of the program.

Table.1 Changes in Participants' Knowledge, Attitudes, Breastfeeding Skills, and Breastfeeding Practices Before and After Lactation Education

Variable	Pre-test Mean $\pm$ SD	Post-test Mean $\pm$ SD	Mean Difference	Increase ment (%)
Knowledge	5.73 $\pm$ 0.69	8.96 $\pm$ 0.66	3.23	56.37%
Attitude	28.27 $\pm$ 0.90	36.43 $\pm$ 0.93	8.16	28.86%
Breastfeeding Skills	5.13 $\pm$ 1.00	9.03 $\pm$ 0.49	3.90	76.02%
Breastfeeding Practice	4.56 $\pm$ 0.56	7.63 $\pm$ 0.49	3.07	67.32%

Table 1 demonstrates improvements across all evaluated domains following the lactation education program.



Picture.1 Research giving motivation about exclusive breastfeeding

DISCUSSION

The findings indicate that structured lactation education effectively improves breastfeeding knowledge, attitudes, practical skills, and breastfeeding practices among postpartum mothers following caesarean section. Knowledge demonstrated a marked improvement after the intervention, suggesting that comprehensive educational materials covering exclusive breastfeeding, lactation physiology, breastfeeding techniques, lactation massage and management of breastfeeding problems effectively enhanced participants' understanding. Improved knowledge is considered the first step toward behavioural change because mothers who understand the benefits and techniques of breastfeeding are more likely to adopt appropriate breastfeeding practices.

Positive changes were also observed in mothers' attitudes toward exclusive breastfeeding. Following the educational sessions, participants expressed greater confidence in breastfeeding and stronger motivation to exclusively breastfeed their infants. This finding

supports the concept of Breastfeeding Self-Efficacy, which emphasizes that mothers' confidence plays a critical role in maintaining exclusive breastfeeding, particularly among women recovering from caesarean delivery. Interactive discussions and individualized counselling likely contributed to strengthening mothers' confidence by addressing misconceptions and providing practical solutions to breastfeeding challenges.

The largest improvement was observed in breastfeeding skills, indicating that demonstration and supervised practice were highly effective educational strategies. In particular, the inclusion of lactation massage in the practical component provided mothers with an opportunity to learn and practice a supportive technique directly under the guidance of the intervention team. Unlike lectures alone, hands-on training enables mothers to directly apply correct breastfeeding positions, infant attachment techniques and lactation massage while receiving immediate feedback from health professionals. The improvement in breastfeeding skills therefore reflects not only greater proficiency in breastfeeding positioning and attachment but also improved ability to perform lactation massage correctly according to the demonstrated technique. This practical approach may have increased mothers' confidence and preparedness to manage breastfeeding during the postoperative period. Improved breastfeeding skills subsequently translated into better breastfeeding practices, as reflected by the increase in practice scores after the intervention.

These findings are consistent with previous studies demonstrating that structured breastfeeding education combined with practical support significantly increases breastfeeding knowledge, self-efficacy, breastfeeding technique, and exclusive breastfeeding rates among mothers following caesarean section. Previous research has reported that individualized lactation counselling and practical breastfeeding assistance improve breastfeeding initiation, reduce breastfeeding difficulties, and increase maternal confidence during the postpartum period (see : (Huang et al. 2019), (Organization 2021), and (Beyene et al. 2025)). The present findings further suggest that incorporating lactation massage into structured breastfeeding education may strengthen the practical component of lactation support by allowing mothers to acquire and practice an additional breastfeeding-supportive technique.

The results also support Lawrence Green's PRECEDE-PROCEED Model, which proposes that health behaviour is influenced by predisposing factors (knowledge and attitudes), enabling factors (skills and available resources), and reinforcing factors (support from health professionals and family members). The educational intervention addressed all three components by increasing mothers' knowledge, developing practical breastfeeding skills through demonstration, and supervised practice, including lactation massage, and providing direct support from healthcare educators. Consequently, participants were better prepared to implement appropriate breastfeeding practices despite the physical challenges associated with caesarean recovery.

Although several implementation challenges were encountered, including postoperative pain, interruptions due to routine hospital services, and variations in participants' previous breastfeeding experience, these barriers did not substantially affect the overall success of the program. Flexible educational scheduling, individualized assistance, and interactive teaching methods enabled participants to actively engage throughout the intervention.

Overall, the present community service program demonstrates that structured lactation education incorporating lactation massage, practical demonstrations, and supervised hands-on practice is a feasible approach for improving breastfeeding competence among postpartum mothers following caesarean section. Integrating similar educational interventions into routine postpartum care may contribute to improving exclusive breastfeeding success and enhancing the quality of maternal and newborn healthcare services.

CONCLUSION

This community service program demonstrates that structured lactation education is an effective strategy for optimizing breastfeeding practices among postpartum mothers following caesarean section. The intervention resulted in substantial improvements in participants' breastfeeding knowledge, positive attitudes toward exclusive breastfeeding, practical breastfeeding skills, and breastfeeding practices. These findings suggest that combining interactive lectures, demonstrations, supervised practice, and individualized counselling effectively address common breastfeeding challenges experienced during the postoperative recovery period.

The program highlights the value of structured, practical, and evidence-based lactation support in strengthening mothers' knowledge, confidence, breastfeeding skills, and practices following caesarean section. The integration of lactation education, lactation massage, practical demonstrations, and supervised hands-on practice contributed to meaningful improvements across all evaluated outcomes. These findings suggest that incorporating structured lactation support into routine postpartum care may help strengthen mothers' readiness and competence to practice breastfeeding and support exclusive breastfeeding success.

The findings support the integration of structured lactation education into routine postpartum care, particularly for mothers following caesarean section. Hospitals are encouraged to establish standardized lactation education and breastfeeding support programs that include counselling, practical demonstrations, and ongoing evaluation of breastfeeding competence before discharge. In addition, continued collaboration among healthcare professionals, higher education institutions, mothers, and family members is essential to sustain exclusive breastfeeding practices and improve maternal and infant health outcomes.

Future community service programs and research should involve larger participant groups, longer follow-up periods, and family-centred breastfeeding support to evaluate the long-term impact of lactation education on exclusive breastfeeding rates during the first six months of life. At the end of the community service program, the team took a group photo with the hospital organizing committee.

REFERENCES

- Ahmad, Khadija, Rabiah Mahwish, Mariam Mazhar, Momina Bashir, and Maryam Yousaf. 2023. "Determinants of Early Initiation of Breastfeeding after Caesarean Section in ATertiary Care Hospital." <https://doi.org/10.51273/esc23.251319321>
- Beyene, Belda Negesa, Wako Golicha Wako, Dureti Moti, Alo Edin, and Derese Eshetu Debela. 2025. "Postnatal Counseling Promotes Early Initiation and Exclusive Breastfeeding: A Randomized Controlled Trial." *Frontiers in Nutrition* 12:1473086. doi: 10.3389/fnut.2025.1473086
- Bookhart, Larelle H., Andrea B. Joyner, Kelly Lee, Nikkia Worrell, Denise J. Jamieson, and Melissa F. Young. 2021. "Moving beyond Breastfeeding Initiation: A Qualitative Study Unpacking Factors That Influence Infant Feeding at Hospital Discharge among Urban, Socioeconomically Disadvantaged Women." *Journal of the Academy of Nutrition and Dietetics* 121(9):1704–20. <https://doi.org/10.1016/j.jand.2021.02.005>
- Charlick, Samantha J., Lois McKellar, Andrea L. Gordon, and Jan Pincombe. 2019. "The Private Journey: An Interpretative Phenomenological Analysis of Exclusive Breastfeeding." *Women and Birth* 32(1):e34–42. <https://doi.org/10.1145/3491102.3517620>
- Colombo, Lorenzo, Beatrice Letizia Crippa, Dario Consonni, Maria Enrica Bettinelli, Viola Agosti, Giulia Mangino, Elena Nicoletta Bezze, Paola Agnese Mauri, Lidia Zanotta, and Paola Roggero. 2018. "Breastfeeding Determinants in Healthy Term Newborns." *Nutrients*

- 10(1):48. <https://doi.org/10.3390/nu10010048>
- Couto, Germano Rodrigues, Vanessa Dias, and Isabel de Jesus Oliveira. 2020. "Benefits of Exclusive Breastfeeding: An Integrative Review." https://www.sid.ir/en/VEWSSID/J_pdf/H50005420200408.pdf
- Emam, EAER, and Aml Sayed Ali. 2017. "Factors Influencing Breastfeeding Practice after Caesarean Section Delivery." *J Nurs Health Sci* 6(5):63–70. https://www.researchgate.net/profile/Aml-Ali-2/publication/334031379_Factors_influencing_breastfeeding_practice_after_caesarean_section_delivery/links/5d134fc4299bf1547c7f9570/Factors-influencing-breastfeeding-practice-after-caesarean-section-delivery.pdf
- Herawati, Ita, Budi Hermanto, Agnes Andika, Jumsinah Jumsinah, Lia Widiyanti, Ocha Gries Tika, and Yanti Marlita. 2026. "Caesarean Delivery and Early Breastfeeding Outcomes: A Cross-Sectional Study of EIBF and Early Postpartum Difficulties." *Journal of Applied Nursing and Health* 8(1):788–97. <https://doi.org/10.55018/janh.v8i1.487>
- Hoang Nguyen, Phung Thi, Colin W. Binns, Anh Vo Van Ha, Cong Luat Nguyen, Tan Khac Chu, Dat Van Duong, Dung Van Do, and Andy H. Lee. 2020. "Caesarean Delivery Associated with Adverse Breastfeeding Practices: A Prospective Cohort Study." *Journal of Obstetrics and Gynaecology* 40(5):644–48. <https://doi.org/10.1080/01443615.2019.1647519>
- Hooda, Reetu, Nisha Malik, Prachi Pathak, Hemant More, and Vikram Singh. 2023. "Impact of Postoperative Pain on Early Initiation of Breastfeeding and Ambulation after Caesarean Section: A Randomized Trial." *Breastfeeding Medicine* 18(2):132–37. <https://doi.org/10.1089/bfm.2022.0208>
- Hookway, Lyndsey, Amy Brown, and Aimee Grant. 2023. "Breastfeeding Sick Children in Hospital: Exploring the Experiences of Mothers in UK Paediatric Wards." *Maternal & Child Nutrition* 19(2):e13489. <https://doi.org/10.1111/mcn.13489>
- Huang, Li, Shangzhi Xu, Xi Chen, Qian Li, Lixia Lin, Yu Zhang, Duan Gao, Huanzhuo Wang, Miao Hong, and Xuefeng Yang. 2020. "Delayed Lactogenesis Is Associated with Suboptimal Breastfeeding Practices: A Prospective Cohort Study." *The Journal of Nutrition* 150(4):894–900. https://academic.oup.com/jn/advance-article-abstract/doi/10.1093/jn/nxz311/5686879?redirectedFrom=fulltext&itm_medium=sidebar&itm_source=trendmd-widget&itm_campaign=The_Journal_of_Nutrition&itm_content=The_Journal_of_Nutrition_0
- Huang, Pan, Jianrong Yao, Xinghui Liu, and Biru Luo. 2019. "Individualized Intervention to Improve Rates of Exclusive Breastfeeding: A Randomised Controlled Trial." *Medicine* 98(47):e17822. 10.1097/MD.00000000000017822
- Jama, Abdiasis, Hailay Gebreyesus, Tewolde Wubayehu, Tsigehana Gebregyorgis, Mebrahtu Teweldemedhin, Tesfay Berhe, and Negasi Berhe. 2020. "Exclusive Breastfeeding for the First Six Months of Life and Its Associated Factors among Children Age 6-24 Months in Burao District, Somaliland." *International Breastfeeding Journal* 15(1):5. <https://doi.org/10.1186/s13006-020-0252-7>
- Kassianos, Angelos P., Emma Ward, Antonio Rojas-Garcia, Allison Kurti, Fiona C. Mitchell, Dian Nostikasari, Jamie Payton, Julian Pascal-Saadi, Claire Adams Spears, and Caitlin Notley. 2019. "A Systematic Review and Meta-Analysis of Interventions Incorporating Behaviour Change Techniques to Promote Breastfeeding among Postpartum Women." *Health Psychology Review* 13(3):344–72. <https://doi.org/10.1080/17437199.2019.1618724>
- Khan, Md Nuruzzaman, and M. Mofizul Islam. 2017. "Effect of Exclusive Breastfeeding on

- Selected Adverse Health and Nutritional Outcomes: A Nationally Representative Study.” *BMC Public Health* 17(1):889. <https://doi.org/10.1186/s12889-017-4913-4>
- Khatib, Mahalaqua Nazli, Abhay Gaidhane, Shilpa Upadhyay, Shital Telrandhe, Deepak Saxena, Padam Prasad Simkhada, Shailendra Sawleshwarkar, and Syed Zahiruddin Quazi. 2023. “Interventions for Promoting and Optimizing Breastfeeding Practices: An Overview of Systematic Review.” *Frontiers in Public Health* 11:984876. <https://doi.org/10.3389/fpubh.2023.984876>
- Lawrence, Ruth A., and Robert M. Lawrence. 2021. *Breastfeeding: A Guide for the Medical Professional*. Elsevier Health Sciences. https://www.google.com/books?hl=id&lr=&id=uwkqEAAAQBAJ&oi=fnd&pg=PP1&dq=Lawrence,+Ruth+A.,+and+Robert+M.+Lawrence.+2021.+Breastfeeding:+A+Guide+for+the+Medical+Professional.+Elsevier+Health+Sciences.&ots=6b7xeX7S70&sig=9znkSe_rov4O7V5R03DtU8UxkBY
- Li, Leixi, Wenlin Wan, and Chan Zhu. 2021. “Breastfeeding after a Caesarean Section: A Literature Review.” *Midwifery* 103:103117. <https://doi.org/10.1016/j.midw.2021.103117>
- Lojander, Jaana, Anna Axelin, and Hannakaisa Niela-Vilén. 2024. “Breastfeeding Exclusivity, Difficulties, and Support in the First Days after Hospital Discharge: A Correlational Study.” *European Journal of Obstetrics & Gynecology and Reproductive Biology* 296:76–82. <https://doi.org/10.1016/j.ejogrb.2024.02.029>
- Organization, World Health. 2021. “Implementation Guidance on Counselling Women to Improve Breastfeeding Practices.” <https://iris.who.int/bitstreams/c79d2ab6-94d5-4c80-94f0-9398c2e097a2/download>
- Paksoy Erbaydar, Nüket, and Tuğrul Erbaydar. 2020. “Relationship between Caesarean Section and Breastfeeding: Evidence from the 2013 Turkey Demographic and Health Survey.” *BMC Pregnancy and Childbirth* 20(1):55. <https://doi.org/10.1186/s12884-020-2732-6>
- Pérez-Escamilla, Rafael, Cecília Tomori, Sonia Hernández-Cordero, Phillip Baker, Aluisio J. D. Barros, France Bégin, Donna J. Chapman, Laurence M. Grummer-Strawn, David McCoy, and Purnima Menon. 2023. “Breastfeeding: Crucially Important, but Increasingly Challenged in a Market-Driven World.” *The Lancet* 401(10375):472–85. [https://doi.org/10.1016/S0140-6736\(22\)01932-8](https://doi.org/10.1016/S0140-6736(22)01932-8)
- Schliep, Karen C., Daniel Denhalter, Lisa H. Gren, Katherine A. Panushka, Tejinder Pal Singh, and Michael W. Varner. 2019. “Factors in the Hospital Experience Associated with Postpartum Breastfeeding Success.” *Breastfeeding Medicine* 14(5):334–41. <https://doi.org/10.1089/bfm.2018.0039>
- Smith, Emily R., Lisa Hurt, Ranadip Chowdhury, Bireshwar Sinha, Wafaie Fawzi, Karen M. Edmond, and Neovita Study Group. 2017. “Delayed Breastfeeding Initiation and Infant Survival: A Systematic Review and Meta-Analysis.” *PloS One* 12(7):e0180722. <https://doi.org/10.1371/journal.pone.0180722>
- Spencer, Jeanne, S. A. Abrams, and A. G. Hoppin. 2019. “Patient Education: Common Breastfeeding Problems (Beyond the Basics).” https://www.misurgeon.com.au/wp-content/uploads/2020/05/Patient-education_-Common-breastfeeding-problems-Beyond-the-Basics-UpToDate.pdf
- Ulfa, Yunefit, Naoko Maruyama, Yumiko Igarashi, and Shigeko Horiuchi. 2023. “Women’s Experiences of Breastfeeding after a Caesarean Section: A Meta-synthesis.” *Japan Journal of Nursing Science* 20(3):e12534.