

## Lactation Massage and Hypnobreastfeeding Relaxation Techniques in Breastfeeding Mothers

Nina Sunarti<sup>1\*</sup>, Aulia Lutfiyanti<sup>1</sup>

<sup>1</sup>Harum Jakarta Nursing Academy, Jakarta, Indonesia

### Article Information

---

Revised: October 2024

Available online: October 2024

### Keywords

---

Post Partum, Ineffective Breastfeeding,  
Lactation Massage, Hynobreastfeeding  
Relaxation

### Correspondence

---

E-mail : [nina@akperharum.ac.id](mailto:nina@akperharum.ac.id)

### ABSTRACT

---

Breast milk is a kind of food that is good for meeting all the physical needs of babies. Breast milk contains most of the nutritional elements, hormones and immunity of a baby. After that the baby will only get breast milk until the baby is six months old, after the baby is six months old the baby will be given complementary food for breast milk until the baby is even two years old. Purpose: this research is to find out the description of nursing care for normal postpartum mothers who experience ineffective breastfeeding at Koja Jakarta Hospital in 2023 with lactation massage and hypnobreastfeeding relaxation techniques. Methodology: the research used is a descriptive researcher with a case study design that will be carried out in June 2023. Results: a study of patients who experienced ineffective breastfeeding by means of lactation massage and hypnobreastfeeding relaxation techniques, could increase milk production, reduce breast swelling and reduce pain. This can happen because of the willingness of the client to follow. Conclusion: lactation massage techniques and hypnobreastfeeding relaxation techniques can be done when complaints of a little milk coming out, anxiety, swelling in the breasts of post partum mothers are normal.

## INTRODUCTION

The puerperium is the first six weeks after childbirth, which will be a very exciting time, but also a period of adjustment and healing for the mother. During these weeks, the mother will bond with the baby and they will also undergo postnatal check-ups. Postpartum mothers will adjust both physiologically and psychologically to daily life. After giving birth, it has its own challenges, especially if you are a new mum. One of the important things that cannot be avoided is that the mother has to go through a phase of change in her physiology and psychology.

Physiological changes that occur in puerperal mothers are that the mother will experience body changes after childbirth, one of which is breast swelling. The breasts will fill with milk a few days after birth, this is normal. However, it becomes a problem because the swelling can be uncomfortable if the mother does not understand about its care. Some of the things that hinder exclusive breastfeeding include swollen breasts, which is 25%. Breast swelling will increase over time, so knowledge and care is needed for postpartum mothers about lactation massage combined with hypnobreastfeeding relaxation techniques to balance physiological and psychological adaptations in postpartum mothers. Breast milk (ASI) is a type of food that is good for achieving all the physical needs of the baby. Breast milk contains most of the nutritious hormonal elements and immune system of a baby. After that the baby will only get breast milk until the baby is six months old, after the baby is six months old the baby will be given complementary food to breast milk until the baby is two years old (Nurkhofifah, 2021).

Ineffective breastfeeding is a condition where both mother and baby experience dissatisfaction or difficulty during breastfeeding. Failure to breastfeed is often caused by a number of problems, either with the mother or the baby. For some mothers who are unaware of this issue, breastfeeding failure is often considered a problem caused by the child alone. Breastfeeding problems can also be caused by special circumstances, and mothers often complain that the baby cries or refuses to breastfeed, leading them to assume that there is not enough milk, or that the milk is not good, which often leads them to make the decision to stop breastfeeding.

In modern times like today, where information can be accessed easily anytime and anywhere, so for some postpartum mothers who have more than one child (Multipara) lactation massage is a basic knowledge that must be possessed during pregnancy so that during the breastfeeding process the mother is ready with all the changes. However, this is not the case for new mothers who have a baby for the first time, because the knowledge gained is not very easy to apply in reality. Mothers need a support system and support in breastfeeding from family, community and health workers to create a healthy and quality generation.

Lactation massage is a technique with massage performed on the head, neck, back, spine and chest that aims to stimulate prolactin hormones. Lactation massage can help reduce stress, anxiety, pain, tension, and mood. The uniformity of milk production is better in breastfeeding mothers who received breastfeeding massage compared to mothers who did not receive breastfeeding massage. Many

factors can increase breast milk production, including nutritious food, peace of mind, and frequent breast massage (Muawarmah, 2021). Hypnobreastfeeding is a relaxation technique to help smooth the breastfeeding process. The method includes positive affirmation sentences that help the breastfeeding process when the mother is relaxed or very concentrated on something (Saputri, 2017).

## **METHOD**

This research design uses a case study method where the author will explore in the form of Nursing Care for Normal Postpartum Mothers Who Experience Ineffective Breastfeeding at Koja Hospital Jakarta. The participants used were normal postpartum mothers who experienced ineffective breastfeeding after childbirth. The research was conducted in the RPKK room on the 7th floor of Block B for 3 days at Koja Jakarta Hospital in June 2023. In this case study, the researcher collected data by interviewing the mother directly using an interview format that had been made by the researcher. Observation was carried out by direct physical examination of the mother by means of (inspection and palpation) of the breast. Documentation researchers use patient documentation in the treatment room as material for data collection. Teamwork method, here the researcher collaborates with the room nurse and also other health workers who care for the mother. Health education method, researchers apply health education in accordance with what the author will research, namely, Nursing Care for Normal Postpartum Mothers Experiencing Ineffective Breastfeeding at Koja Jakarta Hospital. To reduce the swelling of the mother's breasts, researchers provide Lactation Massage and Hypnobreastfeeding relaxation techniques for mothers who experience breastfeeding ineffectiveness.

In testing the validity of the data, researchers collected data from medical records related to normal postpartum mothers as well as data obtained from families and nurses in the RPKK room on the 7th floor of Block B of Koja Hospital Jakarta. Then the data was adjusted to the mother's needs to establish a diagnosis and develop nursing planning. After the validity of the data is obtained, then the researcher analyses the data collected to compare with the existing theory, then poured in the form of discussion to find a solution. The solutions obtained are conveyed to mothers and families so that they can be applied in everyday life in order to achieve optimal health. Ethics in this study used an approach technique by fostering a trusting relationship with the mother. Where previously the researcher had made an informed consent statement for approval to become a participant, then the informed consent sheet would be signed by the consenting participant. Researchers still maintain the confidentiality of participants by writing the names of participants in the form of initials.

## **RESULTS AND DISCUSSION**

### **Assessment**

At this stage the researcher collects data through the patient, family, nurses in the room and the patient's medical record to establish nursing diagnoses with the help of an assessment format with a nursing process approach. Patient I Mrs L (22 years old), religion Islam, housewife work, last education SMK, obstetric status P1 G0 A0. History of the main complaint is that the milk comes out a little, anxious because the milk comes out a little, the baby sucks not long. Breast milk does not drip / flow, the baby cries / fuss because the milk only comes out a little, the baby sucks not continuously, the nipple protrudes, the mammae is enlarged, the breast is swollen, TTV: BP: 128/85mmHg, N: 87x/min, RR: 19x/min, S: 36.7 °C. Her breasts are

swollen, nipple and breast pain, rarely breastfeeds her baby, pain scale 6, this is her first labour. PQRST: P: Dammed milk, Q: Throbbing pain, R: in the nipple, S: 6, T: intermittent, hard palpable breasts, grimacing holding her breasts, receiving mefenamant 3x500mg acid therapy. Did not know how to breastfeed properly, did not know how to overcome swollen breasts, did not know the benefits of breast milk for mothers and babies, looked confused when asked about the meaning of breast milk, the benefits of breast milk, how to breastfeed properly, how to overcome swollen breasts.

### Nursing Diagnosis

At this stage the researcher formulates nursing diagnoses based on the data obtained from the assessment results: Ineffective Breastfeeding associated with Inadequate Infant Sucking Reflex. The data that supports the diagnosis of Ineffective Breastfeeding associated with Inadequacy of the Baby's Sucking Reflex (D.0029) is that the patient says her milk comes out a little, worried because her milk comes out a little, the baby sucks not long. Breast milk does not drip / flow, the baby cries / fuss because the milk only comes out a little, the baby sucks not continuously, the nipple protrudes, the mammae is enlarged, the breast is swollen, TTV: BP: 128/85mmHg, N: 87x/min, RR: 19x/min, S: 36.7 °C.

**Table 1.** Nursing Interventions

Nursing Diagnosis	Time	27 July 2023	28 July 2023	29 July 2023
Ineffective breastfeeding associated with inadequate infant sucking reflexes (D.0029)	09.00	Breast examination Observation a. Identify risk factors for breast cancer. Response: client says no history of breast disease b. Identify complaints of pain, discomfort, discharge, changes in breast and nipple shape Response: Client says nipple pain, breast feels hard, breast shape is conical c. Inspect the breasts (e.g. size, shape, texture, and skin colour such as redness, breast skin retraction) Response: enlarged breasts, prominent nipples, no breast lumps d. Observe and palpate the lymph nodes, including the supraclavicular, infraclavicular, lateral, central, subscapular, and anterior nodes Response: no lymph nodes e. Palpate the breast using 3 fingers on the dominant examination	Breast examination Observation a. Identify risk factors for breast cancer. Response: client says she has no history of breast disease b. Identifying complaints of pain, discomfort, discharge, changes in breast and nipple shape Response: The client said the pain in the nipple was reduced, the breast was palpated hard, the shape of the breast was conical c. Inspect the breasts (e.g. size, shape, texture, and skin colour such as redness, breast skin retraction). Response: the breasts are enlarged, the	Breast examination Observation a. identify risk factors for breast cancer. Response: client says she has no history of breast disease b. Identifying complaints of pain, discomfort, discharge, changes in breast and nipple shape Response: The client said the pain in the nipple was reduced, the breast was palpated hard, the shape of the breast was conical c. Inspect the breasts (e.g. size, shape, texture, and skin colour such as redness, breast skin retraction). Response: the breasts are enlarged, the nipples appear prominent, there are no lumps in the breasts d. Observe and palpate lymph nodes, including supraclavicular, infraclavicular, lateral, central, subscapular, and anterior nodes. Response: no lymph nodes e. Palpate the breast using 3 fingers on the dominant examination hand.

Nursing Diagnosis	Time	27 Juny 2023	28 Juny 2023	29 Juny 2023
		<p>hand. Response: client is co-operative during the examination</p> <p>f. Monitor for mastectomy scars, lesions, scarring, redness, erythema. Response: Client says no mastectomy scars, no lesions</p> <p>Therapeutic</p> <p>a. Set up a comfortable position for examination and maintain privacy Response: Client is co-operative</p> <p>b. Perform examination in supine position Response: The client says he is comfortable in this position.</p> <p>c. Asking to remove upper clothing Response: The client cooperatively followed the nurse's direction</p> <p>d. Requested to use four positions during breast inspection. Response: The client cooperatively followed the nurse's direction</p> <p>e. Perform the examination with a circular motion and press the breast tissue against the chest wall. Response: enlarged breasts, no lumps</p> <p>f. Examine the four quadrants of the breast up to the base of the breast and repeat on the other breast. Response: client is co-operative during the examination</p> <p>g. Note the symmetry of the breasts .</p>	<p>nipples appear prominent, there are no lumps in the breasts</p> <p>d. Observe and palpate lymph nodes, including supraclavicular, infraclavicular, lateral, central, subscapular, and anterior nodes. Response: no lymph nodes</p> <p>e. Palpate the breast using 3 fingers on the dominant examination hand Response: client is co-operative during the examination</p> <p>f. Monitoring for mastectomy scars, lesions, scarring, redness, erythema Response: Client says no mastectomy scars, no lesions</p> <p>Therapeutic</p> <p>a. Set up a comfortable position for examination and maintain privacy. Response: Client is co-operative</p> <p>b. Perform examination in supine position. Response: The client says he is comfortable in this position.</p> <p>c. Asking to remove upper clothing Response: The client cooperatively followed the nurse's direction</p> <p>d. Requested to use four positions during breast inspection.</p>	<p>Response: client is co-operative during the examination</p> <p>f. Monitor for mastectomy scars, lesions, scarring, redness, erythema. Response: Client says no mastectomy scar, no lesions</p> <p>Therapeutic</p> <p>a. Set up a comfortable position for examination and maintain privacy Response: Client is co-operative</p> <p>b. Perform examination in supine position Response: The client says he is comfortable in this position.</p> <p>c. Asking to remove upper clothing Response: The client cooperatively followed the nurse's direction</p> <p>d. Requested to use four positions during breast inspection Response: The client cooperatively followed the nurse's direction</p> <p>e. Perform the examination with a circular motion and press the breast tissue against the chest wall Response: enlarged breasts, no lumps</p> <p>f. Record the symmetry of the breast Response: mammary glands appear enlarged, breast swollen</p> <p>Education</p> <p>a. Explain the procedure before the examination is performed Response: The client understands the procedure explained by the nurse</p>

Nursing Diagnosis	Time	27 Juny 2023	28 Juny 2023	29 Juny 2023
		<p>Response: mammary glands appear enlarged, breasts swollen</p> <p>Education</p> <p>a. Explaining the procedure before the examination is performed</p> <p>b. Response: The client understands the procedure explained by the nurse</p>	<p>Response: The client cooperatively followed the nurse's direction</p> <p>e. Perform the examination with a circular motion and press the breast tissue against the chest wall . Response: enlarged breasts, no lumps.</p> <p>f. Examine four quadrants of the breast to the base of the breast and repeat on the other breast. Response: client is co-operative during examination</p> <p>g. Note the symmetry of the breasts Response: mammary glands appear enlarged, breast swollen</p> <p>Education</p> <p>a. Explaining the procedure before the examination is performed Response: The client understands the procedure explained by the nurse</p> <p>b. Teaching to do breast self- examination Response: The client is still learning to perform breast examinations independently</p>	

## Nursing Evaluation

Nursing evaluation is the final stage of the nursing care process which explains that the objectives of nursing actions have been achieved or require another approach (Suwignjo et al., 2022). Nursing evaluation documentation is a record of the patient's progress towards the goals to be achieved. Nursing evaluation assesses the effectiveness of care and communicates the client's health status after being given nursing action and provides information that allows revision of care according to the patient's condition after being evaluated (Hutahean, 2010 in Tokan & Sekunda, 2020).

For the nursing diagnosis of Ineffective Breastfeeding associated with the Inadequacy of the Baby's Sucking Reflex (D.0029), the results of this study are not in line with Indria's research (2023), which states that there is a difference in the fluency of breast milk after and before the application of lactation massage. This can be seen from the assessment results obtained, the milk only comes out a little, the nipple has not protruded, and the mother is still not maximally doing lactation massage. This happens because the mother is still in the postpartum period days 1-3 so that the interventions given cannot be maximised by the patients.

In the assessment process, there are no gaps, because the data found from the assessment results in the field are in accordance with those in the theoretical review. When enforcing nursing diagnoses, researchers found differences from nursing diagnoses contained in theory with nursing diagnoses found in the field, namely: In Mrs L Ineffective

Breastfeeding associated with the Inadequacy of the Baby's Sucking Reflex. In the nursing action stage, researchers carry out nursing actions referring to nursing planning that has been previously determined, based on the client's conditions and needs. In the implementation of nursing, it was found that lactation massage and hypnobreastfeeding relaxation techniques can increase milk production, reduce anxiety, and reduce pain. This is supported by the results of research by Indria et al (2023) which says there is an effect of lactation massage and hypnobreastfeeding relaxation techniques on ineffective breastfeeding and postpartum discomfort associated with breast swelling. From the results of his research revealed that to increase milk production, reduce anxiety and ineffective breastfeeding in swollen breasts faster given the combined action of lactation massage and hypnobreastfeeding relaxation techniques on swollen breasts compared to the group that did not perform the combined action of lactation massage and hypnobreastfeeding relaxation techniques.

From the results of research in the field, the data obtained were that the breasts were still swollen, only a little breast milk came out, the nipples were not prominent, and the mother was still not maximally doing lactation massage and hypnobreastfeeding relaxation techniques. This happened because the mother was still in the postpartum period days 1-3 so that the interventions given could not be maximised by the patients. However, education has been well received so that when the patient has recovered and

returned home the role and function of nurses as rehabilitative has been achieved, namely being able to empower patients until the patient recovers as before and nursing problems can be resolved.

## CONCLUSIONS AND RECOMMENDATIONS

During the postpartum period, both primiparous and multiparous mothers experience psychological and physical changes. Breastfeeding is also a natural process, but often mothers are unsuccessful or stop breastfeeding their babies due to lack of experience in primiparous mothers or also because mothers feel that their milk is not enough and does not come out on the first day of the baby's birth. Knowledge is very important for postpartum mothers in applying their attitudes towards breast care, especially for primiparous mothers due to inadequate experience. If supported by good knowledge, it will affect the mother's attitude to perform breast care properly, correctly and regularly.

Family support is needed, especially husbands, to help with lactation massage and hypnobreastfeeding relaxation techniques in dealing with pain due to breast swelling and increasing milk production. For health workers, it becomes information material and encourages health workers to provide information for patients about the implementation of lactation massage and hypnobreastfeeding relaxation techniques in dealing with obstacles to milk production and breast swelling in accelerating the patient's healing process.

## BIBLIOGRAPHY

Andriyani, A., & Hasanah, I. U. (2023). Penerapan Pijat Laktasi untuk Meningkatkan Produksi ASI Pada Ibu Post Partum. <https://genius.inspira.or.id/index.php/indogenius/article/view/133>

Aritohang, J. & Simanjuntak, Y. TO. (2021). Asuhan Kebidanan pada Masa Nifas. Yogyakarta : CV Budi Utama. <http://repo.poltekkestasikmalaya.ac.id/806/>

Anggraini, Yetti. 2012. Pelayanan Keluarga Berencana. Yogyakarta: Yohima Press. <https://ejurnal.poltekkes-tjk.ac.id/index.php/JKM/article/view/1414>

Dinas Kesehatan Provinsi Bali. (2016). Profil Kesehatan Provinsi Bali, 282. Retrieved from [http://www.depkes.go.id/resources/download/profil/PROFIL\\_KES\\_PROVINSI\\_2012/17\\_Profil\\_Kes.Prov.Bali\\_2012.pdf](http://www.depkes.go.id/resources/download/profil/PROFIL_KES_PROVINSI_2012/17_Profil_Kes.Prov.Bali_2012.pdf)

Eliyawati, & Sari, Y. M. (2022). Peningkatan Produksi ASI Pada Ibu Nifas dengan Hypnobreastfeeding. <https://journal.ahmareduc.or.id/index.php/AMHJ/article/view/146>

Fitiani, dkk. (2021). Efektifitas Pijat Oksitosin Dan Endorphin Pada Pengeluaran Asi Ibu Postpartum Di Puskesmas Alianyang Kota Pontianak. Jurnal Kebidanan Khatulistiwa, Vol. 7 No. 1, Januari 2021, hlm 9-14 P-ISSN 2460-1853, E-ISSN 2715-727X. <https://stikes-bhaktipertiwi.e-journal.id/Kesehatan/article/view/110/95>

Fitria, dkk. 2019. Penerapan Hypnobreastfeeding Pada Ibu Menyusui. <https://jurnal.unw.ac.id/index.php/ijm/article/view/267>

IDAI. Air Susu Ibu dan Menyusui. IDAI. 2016: 1-28

Idawati., Mirdahni, R., Andriani, S,Y. (2021). Kegagalan Pemberian ASI Eksklusif.

Kemenkes RI. Pedoman Bagi Ibu Hamil, Ibu Nifas dan Bayi Baru Lahir. Kemenkes. 2020: 1-21. IDAI. Air



- Susu Ibu dan Menyusui. IDAI. 2016: 1-28.
- Kemendes RI. (2015). Dukung Ibu Bekerja Beri ASI Eksklusif. Kementerian Kesehatan Republik Indonesia. <https://www.kemkes.go.id/article/print/15091400003/dukung-ibu-bekerja-beri-asi-eksklusif.htm>. <http://abdimasada.stikesdhh.ac.id/index.php/AM/article/view/51/35>
- Marliandiani, Yefi dan Nyna Puspita. (2015). Buku Ajar Asuhan Kebidanan pada Masa Nifas dan Menyusui. Jakarta: Salemba Medika. <https://repository.ump.ac.id/8287/3/OKTALINA%20DWI%20ABRIYANI%20BAB%20II.pdf>
- Muwawarmah, S., Sariyanti, D. 2021. Pengaruh Pijat Laktasi Terhadap Kelancaran Produksi ASI Pada Ibu Menyusui. Jurnal Ilmiah Ilmu Dan Kesehatan. 12(1). 07-15. <https://genius.inspira.or.id/index.php/indogenius/article/view/133>
- Nani Jahriani. (2019). Pengaruh Pijat Laktasi terhadap Produksi ASI pada Ibu di Kelurahan Sendang Sari Kabupaten Asahan Tahun 2019. Excellent. Midwifery Journal, 2(2), 14–20. [file:///C:/Users/Administrator/Documents/jurnal proposal/Pengaruh Pijat Laktasi Terhadap Produksi ASI Pada Ibu menyusui.pdf](file:///C:/Users/Administrator/Documents/jurnal%20proposal/Pengaruh%20Pijat%20Laktasi%20Terhadap%20Produksi%20ASI%20Pada%20Ibu%20menyusui.pdf)
- Napilah, dkk. 2018. Pengaruh Hypnobreastfeeding Pada Ibu Hamil Trimester III Terhadap Kecukupan ASI Pada Bayi Di Puskesmas Kahuripan Kecamatan Tawang Kota Tasikmalaya Tahun 2018. Jurnal Sehat Masada. Volume XII. Nomor 2. 85 – 93.
- Nurapandi, A., Rahayu, Y., Novianti, D., Rahmawati, N., & Firdaus, N. R. (2022). PERSEPSI IBU MENYUSUI USIA PRODUKTIF DIBAWAH 35 TAHUN TENTANG STUNTING. HealthCare Nursing Journal, 4(2), 273-277.
- Nurkofifah, R., Hindriyati, Y, I. 2021. Hubungan Pendidikan Kesehatan Melalui Video Berbasis Android Dengan Pengetahuan Ibu tentang teknik menyusui yang benar di wilayah kerja puskesmas gigayam tahun 2020. Jurnal Of Midwife And Public Heltly. 3(1). 32. <https://genius.inspira.or.id/index.php/indogenius/article/view/133>
- Rahmawati, N. (2022). Pemberian Edukasi Tentang Pijat Laktasi dan Pemijatan Laktasi Pada Ibu Nifas di Praktek Bidan Mandiri di Kota Bandung. <http://abdimasada.stikesdhh.ac.id/index.php/AM/article/view/51/35>
- Ramdan, S. R. K., & Wulandari, R. (2023). Determination of Anthocyanin Levels in Telang Flower (Clitoria Ternatae) Using the Differential PH Method Based on Three Types of Solvents. Jurnal Kesehatan STIKes Muhammadiyah Ciamis, 10(1), 45-53.
- Rukiyah, A. Y. & Yulianti, L. (2018). Asuhan Kebidanan pada Ibu Masa Nifas. Jakarta Timur: CV. Trans Info Media.
- Saputri, T.M., Kadir, A., dkk. 2017. Faktor yang berhubungan dengan kelncaran ASI ibu post partum di RSKD ibu dan anak Siti Fatimah Makasar, Jurnal Ilmiah Kesehatan Diagnosis Vo 10 2017. <https://jurnal.unw.ac.id/index.php/ijm/article/view/267>
- Taylor, 2010 dalam Siregar, D., Pakpahan, M., berliana togatorop, L., indah manurung, E., & ferawati sitanggang, Y. (2021). Pengantar Proses Keperawatan: Konsep, Teori dan Aplikasi (A. Karim (ed.)). Yayasan Kita Menulis
- Tim Pokja SDKI DPP PPNI. (2016). Standar Diagnosa Keperawatan Indonesia (1st ed.). Jakarta: Dewan

- Pengurus Pusat Persatuan Perawat Nasional Indonesia.  
<http://repository.poltekkes-denpasar.ac.id/2261/3/BAB%20II.pdf>
- Tim Pokja Pedoman SPO DPP PPNI. 2021. Standar Prosedur Operasional Keperawatan. Jakarta Selatan: DPP PPNI.
- Tim Pokja SDKI DPP PPNI. 2018. Standar Diagnosa Keperawatan Indonesia. Jakarta Selatan: DPP PPNI.
- Tim Pokja SDKI DPP PPNI. 2018. Standar Intervensi Keperawatan Indonesia. Jakarta Selatan: DPP PPNI.
- Tim Pokja SDKI DPP PPNI. 2018. Standar Luaran Keperawatan Indonesia. Jakarta Selatan: DPP PPNI.
- Wahyuningsih, S dan Mahasiswi D3 Keperawatan. (2019). Asuhan Keperawatan Post Partum. Yogyakarta: CV Budi Utama.  
<http://repo.poltekkestasikmalaya.ac.id/806/>
- Wahyuningsih dan Rohmawati. (2019). Efektivitas Pijat Endorpin dan Pijat Breastcare Terhadap Kelancaran Produksi Asi Pada Ibu Nifas di RSU PKU Muhammadiyah Delanggu. *Jurnal Involusi Kebidanan* Vol. 9 No. 17
- Wahyuningsih, S. (2019). Asuhan Keperawatn Post Partum (C. Morris Sartono (ed.)). Deepublish.  
<http://repo.poltekkestasikmalaya.ac.id/806/>
- World Health Organization (WHO).2020). Pekan Menyusui Dunia: UNICEF dan WHO menyerukan Pemerintah dan Pemangku Kepentingan agar mendukung semua ibu menyusui di Indonesia selama COVID-19.  
<https://www.who.int/indonesia>
- Widiartini, I. AP. (2017). Inisiasi Menyusui Dini dan ASI Eksklusif. Yogyakarta: Darul Hikmah.  
<http://repo.poltekkestasikmalaya.ac.id/806/>
- Zubaidah, et al. (2021). Asuhan Keperawatan Nifas. Yogyakarta: CV Budi Utama  
<http://repo.poltekkestasikmalaya.ac.id/806/>