

Implementation of Exclusive Breastfeeding Education for Postpartum Mothers at Maccini Sawah Community Health Centre, Makassar City

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Abstract: Exclusive breastfeeding is breast milk given to babies under 6 months. Mother's knowledge about exclusive breastfeeding is an understanding of the benefits, techniques of giving, and the importance of exclusive breastfeeding for the health of the mother and baby. Mothers' knowledge about exclusive breastfeeding is an understanding of the benefits, techniques for giving, and the importance of exclusive breastfeeding for the health of mothers and babies. This case study was conducted with the aim of evaluating how education related to exclusive breastfeeding is implemented and to what extent it has an impact on increasing the knowledge of postpartum mothers in the working area of the Macini Sawah Community Health Centre, Makassar City. This case study design uses a descriptive approach with a case study method. The case study in this research focuses on exploring the implementation of education on exclusive breastfeeding and its impact on the level of knowledge of postpartum mothers in the working area of the Macini Sawah Community Health Centre, Makassar City. In this case study, data was collected using an observation form aimed at assessing the level of knowledge among postpartum mothers. The observation form was filled out directly by the respondents using paper and pen. The results of observations for 3 days showed the effectiveness of providing exclusive breastfeeding education to postpartum mothers, the level of maternal knowledge increased. After conducting a case study, it was concluded that the implementation of exclusive breastfeeding on postpartum mothers' knowledge increased after the action was given.

Keywords: Exclusive breastfeeding, maternal knowledge, postpartum

1. Introduction

According to the WHO, exclusive breastfeeding is the practice of feeding only breast milk to infants from birth until the age of 6 months, without any additional food or drink. After that, breastfeeding is still recommended to be continued alongside complementary foods (MP-ASI) until the child reaches the age of 2 years (WHO, 2022). In the early stages of life, exclusive breastfeeding for six months contributes greatly to cognitive development, immune system strength, and optimal organ function in infants.

Mothers' understanding of exclusive breastfeeding includes its importance, benefits, and how to breastfeed for the health of both mother and baby. Exclusive breastfeeding itself means providing only breast milk as the baby's primary source of nutrition until six months of age, without any additional food or drinks, except for medications or vitamins recommended by healthcare professionals. In addition to providing significant benefits for the baby's growth, this practice also benefits the mother, such as accelerating the recovery process after childbirth and reducing the risk of breast and ovarian cancer. Through the breastfeeding process, the mother can also strengthen the emotional bond with her child (Arsyad, 2022).

Some mothers face obstacles to exclusive breastfeeding, such as lactation problems or insufficient milk production. Therefore, knowledge about how to overcome these obstacles, such as proper breastfeeding techniques, the use of breast pumps, or consultation with a lactation counsellor, is very important for mothers. Understanding the potential issues that may arise, as well as how to address them, will enhance the success of exclusive breastfeeding without the addition of other foods or beverages. With a good understanding of exclusive breastfeeding, a mother is expected to be able to breastfeed her baby exclusively to the fullest extent possible. (Supriatna, 2020).

Postpartum is a term used to describe the period after childbirth, which begins after the baby is born and lasts for 6 weeks or more. During this period, mothers undergo physical and emotional recovery after giving birth, as well as adjusting to caring for their babies and providing exclusive breastfeeding (Depkes, 2021).

The WHO reports that the rate of early breastfeeding initiation remains low, with only about 44% of babies receiving breast milk within the first hour after birth. The proportion of exclusive breastfeeding among infants under six months of age varies by region, with approximately 25% in Central Africa, 32% in Latin America and the Caribbean, 30% in East Asia, 47% in South Asia, and around 46% in developing countries overall. Globally, less than 40% of infants under six months of age are exclusively breastfed.

In Indonesia, the rate of exclusive breastfeeding has declined, from 69.7% in 2021 to 67.96% in 2022. This decline is influenced by various factors, one of which is the level of education and mothers' understanding of the importance of exclusive breastfeeding for six months, which decreased from 42.2% to 39.5%. At the same time, the use of formula milk has increased significantly, from 10.8% to 32.5%, or nearly threefold (Selasi, 2022).

In 2022, the coverage of exclusive breastfeeding in South Sulawesi was recorded at 70.5%. However, in the service area of the Macini Sawah Health Centre in Makassar, the figure was relatively lower at 72.7%. This finding highlights the need for more intensive efforts through effective strategies and sustained support, both from healthcare workers and the community, to improve exclusive breastfeeding rates and expand mothers' understanding of the importance of this practice.

According to research (Rahmawati, 2022) Several factors are known to influence the success of exclusive breastfeeding. One of these is the age of the mother, with 64.5% of mothers under the age of 20 not breastfeeding exclusively. In addition, educational attainment also has a significant influence, with 58.7% of mothers with a low level of education not breastfeeding exclusively.

According to research (Roesli, 2021) also revealed that mothers' knowledge plays a significant role, with 73.6% of mothers with low knowledge not exclusively breastfeeding. The results of the study confirm that the better mothers' understanding of the benefits and techniques of breastfeeding, the higher the chances of successful exclusive breastfeeding for the first six months of a baby's life (Roesli, 2020) Family support is cited as the most dominant external factor in determining the success of exclusive breastfeeding, with a rate of 72.8%. This support includes emotional assistance, motivation, and active involvement of family members in accompanying mothers during the breastfeeding process. These findings confirm that the role of the family,

particularly the husband and close relatives, plays a significant role in maintaining the mother's motivation to continue exclusive breastfeeding until the baby reaches six months of age.

Research (Damayanty, 2021) revealed that early contact and immediate breastfeeding after birth are closely related to continued breastfeeding. In fact, 77% of mothers who made direct contact, breastfed immediately, and practised rooming-in from the hospital to home were proven to have successfully breastfed their babies.

2. Materials and Methods

This case study design uses a descriptive approach with a case study method. The case study in this research focuses on exploring the implementation of education on exclusive breastfeeding and its impact on the level of knowledge of postpartum mothers in the working area of the Maccini Sawah Community Health Centre, Makassar City. Inclusion criteria: Mothers willing to participate as respondents, postpartum mothers aged 1–30 days, mothers with an educational background of primary school to high school, mothers aged 17–25 years, and primiparous mothers. Exclusion criteria: Non-cooperative postpartum mothers, mothers with complications, and mothers who work outside the home. In this case study, data was collected using an observation form aimed at assessing the level of knowledge among postpartum mothers. The observation form was filled out directly by the respondents using paper and pen.

This case study will be conducted in the Maccini Sawah Community Health Centre area of Makassar City. The case study will be conducted over three visits. The author presents the data narratively to describe the results of the implementation of education on exclusive breastfeeding for postpartum mothers.

3. Results and Discussion

This case study was conducted in the Maccini Sawah Community Health Centre area of Makassar City with the case study "Implementation of Education on Exclusive Breastfeeding on Postpartum Mothers' Knowledge." The study was initiated on 27–29 April 2025. There were two respondents: Subject 1 (Mrs. A) and Subject 2 (Mrs. B), both of whom met the established criteria and had received explanations from the researcher.

Before the implementation of the intervention, the researcher first reviewed materials related to exclusive breastfeeding, established a therapeutic relationship with the patients to schedule the case study, and obtained informed consent. The researcher explained the purpose and benefits of the activity to the clients and obtained written consent through a consent form. This case study aims to enhance mothers' knowledge about exclusive breastfeeding.

Table 1 Results of Day 1 Observations of Ms. A

No.	Day/Date	Time	Questions	Before Action (Pre)	After Action (Post)
1	Monday, 27 April 2025	(Pre)10.00- (post)11.20	Breast milk is the main source of nutrition that is very beneficial for babies.	2	3
2			Exclusive breastfeeding is the practice of providing breast milk as the sole source of nutrition for babies from birth to six months of age, without any additional food or drink.	1	2
3			Breast milk is able to meet the nutritional needs of babies, support intellectual development, and strengthen the emotional bond between mother and child.	2	3

4	A mother's daily routine does not hinder her ability to breastfeed her baby.	1	2
5	Anxiety: feelings of restlessness, negative thoughts, and fear of one's own thoughts.	2	3
6	Exclusive breastfeeding strengthens the emotional bond between mother and baby.	2	3
7	With exclusive breastfeeding, babies rarely get sick.	1	2
8	Exclusive breastfeeding is cost-effective.	2	3
9	After breastfeeding, always burp your baby.	1	2
10	The nutritional composition of breast milk is superior to that of formula milk.	1	2
TOTAL		15	25

Table 1. Shows that on the first day, client Mrs. A lacked knowledge about exclusive breastfeeding and was given education about exclusive breastfeeding to increase her knowledge for approximately 1 hour. The education was conducted at Mrs. A's home in the vicinity of the Maccini Sawah Health Centre using a brief lecture method combined with educational leaflets with illustrations. The results obtained for Mrs. A before the intervention were 15 points, and after the intervention, 25 points were obtained. Thus, the mother's knowledge increased slightly, but a comparison must be made from the first to the third day to determine whether it increased daily or decreased.

Table 2 Results of Day 2 Observations of Ms. A

NO	Day/Date	Time	Questions	Before Action (Pre)	After Action (Post)
1	Tuesday, 28 April 2025	(Pre)10.15.00- (post)11.25	Breast milk is the main source of nutrition that is very beneficial for babies.	2	3
2			Exclusive breastfeeding is the practice of providing breast milk as the sole source of nutrition for babies from birth to six months of age, without any additional food or drink.	2	3
3			Breast milk is able to meet the nutritional needs of babies, support intellectual development, and strengthen the emotional bond between mother and child.	3	4
4			A mother's daily routine does not hinder her ability to breastfeed her baby.	2	3
5			Anxiety: feelings of restlessness, negative thoughts, and fear of one's own thoughts.	2	3
6			Exclusive breastfeeding strengthens the emotional bond between mother and baby.	3	4
7			With exclusive breastfeeding, babies rarely get sick.	2	3
8			Exclusive breastfeeding is cost-effective.	2	3
9			After breastfeeding, always burp your baby.	2	3
10			The nutritional composition of breast milk is superior to that of formula milk.	2	3
TOTAL				22	32

Table 2 shows that on the second day, Ms. A's knowledge about exclusive breastfeeding began to increase, and she was given further education about exclusive breastfeeding to improve her knowledge for approximately 1 hour. The education was conducted at Mrs. A's home in the vicinity of the Maccini Sawah Health Centre using a brief lecture method combined with educational leaflets with illustrations. The results obtained for Mrs. A before the intervention were 22 points, and after the intervention, 32 points were obtained. Thus, the mother's knowledge began to increase compared to the first day, but further comparison is needed from the first to the third day to determine whether it increased daily or decreased.

Table 3 Results of Day 3 Observations of Ms. A

NO	Day/Date	Time	Questions	Before Action (Pre)	After Action (Post)
1	Wednesday, 29 April 2025	(Pre)11.00 (Post)12.20	Breast milk is the main source of nutrition that is very beneficial for babies.	3	4
2			Exclusive breastfeeding is the practice of providing breast milk as the sole source of nutrition for babies from birth to six months of age, without any additional food or drink.	2	3
3			Breast milk is able to meet the nutritional needs of babies, support intellectual development, and strengthen the emotional bond between mother and child.	3	4
4			A mother's daily routine does not hinder her ability to breastfeed her baby.	3	4
5			Anxiety: feelings of restlessness, negative thoughts, and fear of one's own thoughts.	2	3
6			Exclusive breastfeeding strengthens the emotional bond between mother and baby.	3	4
7			With exclusive breastfeeding, babies rarely get sick.	3	4
8			Exclusive breastfeeding is cost-effective.	2	4
9			After breastfeeding, always burp your baby.	3	4
10			The nutritional composition of breast milk is superior to that of formula milk.	3	4
TOTAL				27	38

Table 3 shows that on the second day, Ms. A's knowledge about exclusive breastfeeding increased, and was provided with further education on exclusive breastfeeding to enhance her knowledge for approximately one hour. The education session was conducted at Mrs. A's home in the vicinity of the Maccini Sawah Health Centre, using a brief lecture combined with educational leaflets featuring illustrations. The results obtained for Mrs. A before the intervention were 27 points, and after the intervention, 38 points. thus, the mother's knowledge began to improve compared to the first and second days, indicating that the education on exclusive breastfeeding was successfully implemented by Mrs. A in enhancing the postpartum mother's knowledge.

Table 4 Results of Day 1 Observations of Ms. B

NO	Day/Date	Time	Questions	Before Action (Pre)	After Action (Post)
1	Monday, 27 April 2025	(Pre)13.00 (post)14.20	Breast milk is the main source of nutrition that is very beneficial for babies.	1	2
2			Exclusive breastfeeding is the practice of providing breast milk as the sole source of nutrition for babies from birth to six months of age, without any additional food or drink.	2	3
3			Breast milk is able to meet the nutritional needs of babies, support intellectual development, and strengthen the emotional bond between mother and child.	2	2
4			A mother's daily routine does not hinder her ability to breastfeed her baby.	1	2
5			Anxiety: feelings of restlessness, negative thoughts, and fear of one's own thoughts.	1	2
6			Exclusive breastfeeding strengthens the emotional bond between mother and baby.	2	3
7			With exclusive breastfeeding, babies rarely get sick.	2	3
8			Exclusive breastfeeding is cost-effective.	1	2
9			After breastfeeding, always burp your baby.	1	2
10			The nutritional composition of breast milk is superior to that of formula milk.	1	2
TOTAL				14	23

Table 4. Shows that on the first day, client Mrs. B lacked knowledge about exclusive breastfeeding and was given education about exclusive breastfeeding to improve her knowledge for approximately 1 hour. The education was conducted at Mrs. B's home in the vicinity of the Maccini Sawah Health Centre using a brief lecture method supplemented with illustrated educational leaflets. The results obtained for Mrs. B before the intervention were 14 points, and after the intervention, 23 points were obtained. Thus, the mother's knowledge increased slightly, but a comparison must be made from the first to the third day to determine whether it increased daily or decreased.

Table 5 Results of Day 2 Observations of Ms. B

NO	Day/Date	Time	Questions	Before Action (Pre)	After Action (Post)
1	Tuesday, 28 April 2025	(Pre)13.00 (Post)14.20	Breast milk is the main source of nutrition that is very beneficial for babies.	2	3
2			Exclusive breastfeeding is the practice of providing breast milk as the sole source of nutrition for babies from birth to six months of age, without any additional food or drink.	2	3
3			Breast milk is able to meet the nutritional needs of babies, support intellectual development, and	2	3

	strengthen the emotional bond between mother and child.		
4	A mother's daily routine does not hinder her ability to breastfeed her baby.	2	3
5	Anxiety: feelings of restlessness, negative thoughts, and fear of one's own thoughts.	2	3
6	Exclusive breastfeeding strengthens the emotional bond between mother and baby.	3	4
7	With exclusive breastfeeding, babies rarely get sick.	2	3
8	Exclusive breastfeeding is cost-effective.	2	3
9	After breastfeeding, always burp your baby.	2	3
10	The nutritional composition of breast milk is superior to that of formula milk.	3	4
TOTAL		22	32

Table 5. Shows that on the first day, client Mrs. B lacked knowledge about exclusive breastfeeding and was given education about exclusive breastfeeding to improve her knowledge for approximately 1 hour. The education was conducted at Mrs. B's home in the vicinity of the Maccini Sawah Health Centre using a brief lecture method combined with educational leaflets with illustrations. The results obtained for Mrs. B before the intervention were 22 points, and after the intervention, 32 points were obtained. Thus, the mother's knowledge began to improve from the first day, but a comparison must still be made from the first to the third day to determine whether it increased daily or decreased.

Table 6 Results of Day 3 Observations of Ms. B

NO	Day/Date	Time	Questions	Before Action (Pre)	After Action (Post)
1	Wednesday, 29 April 2025	(Pre)14.00 (post)15.20	Breast milk is the main source of nutrition that is very beneficial for babies.	2	3
2			Exclusive breastfeeding is the practice of providing breast milk as the sole source of nutrition for babies from birth to six months of age, without any additional food or drink.	3	4
3			Breast milk is able to meet the nutritional needs of babies, support intellectual development, and strengthen the emotional bond between mother and child.	3	4
4			A mother's daily routine does not hinder her ability to breastfeed her baby.	2	3
5			Anxiety: feelings of restlessness, negative thoughts, and fear of one's own thoughts.	2	3
6			Exclusive breastfeeding strengthens the emotional bond between mother and baby.	3	4
7			With exclusive breastfeeding, babies rarely get sick.	3	4
8			Exclusive breastfeeding is cost-effective.	3	4

9	Setelah menyusui bayi selalu sendawa	3	4
10	Komposisi nutrisi dalam ASI lebih unggul dibandingkan susu formula.	3	4
TOTAL		27	37

Table 6 shows that on the second day, Ms. B's knowledge about exclusive breastfeeding increased, and was provided with further education on exclusive breastfeeding to enhance her knowledge for approximately one hour. The education session was conducted at Mrs. B's home in the vicinity of the Maccini Sawah Health Centre, using a brief lecture combined with an illustrated educational leaflet. The results obtained for Mrs. B before the intervention were 27 points, and after the intervention, 37 points. Thus, the mother's knowledge began to increase compared to the first and second days, indicating that the education on exclusive breastfeeding was successfully applied by Mrs. B in improving the knowledge of postpartum mothers.

Table 7 Priority Scale for Ny" A"

No	Day/Date	Amount (Pre)	Amount (Post)	Priority level (Pre)	Priority level (Post)
1.	Monday, 27 April 2025	15	25	Low	Currently
2.	Tuesday, 28 April 2025	22	32	Currently	High
3.	Wednesday, 29 April 2025	27	38	Currently	High

On the first day before the implementation of education about exclusive breastfeeding for postpartum mothers on Mrs. 'A', her knowledge level was 15, which is classified as low. After the implementation on Monday, 27 April 2025, her knowledge level increased to 25, which is classified as moderate. This means that before the intervention, Mrs. 'A's knowledge was still low, but after the implementation, her knowledge increased to a moderate level.

On the second day before the implementation of exclusive breastfeeding education for postpartum mothers on Mrs. 'A', the knowledge level was 22, which is in the moderate category. After the implementation on Tuesday, 28 April 2025, the knowledge level increased to 32, which is also in the moderate category. This means that before the intervention, Mrs. 'A' had moderate knowledge, but after the implementation, her knowledge increased to a high level.

On the third day before the implementation of exclusive breastfeeding education for postpartum mothers on Mrs. 'A', the knowledge level was 27, which was classified as moderate. After the implementation on Tuesday, 28 April 2025, the knowledge level increased to 38, which was also classified as moderate. This means that before the intervention, Mrs. 'A's knowledge was still moderate, but after the implementation, her knowledge increased to a high level.

Based on the priority scale table for Mrs. A, there was an increase in the knowledge level of postpartum mothers from the first day to the third day. Initially, the mothers' knowledge was classified as low, then increased to the moderate category, and finally reached the high category. This indicates that the implementation of education on exclusive breastfeeding is effective in improving mothers' understanding of the importance of exclusive breastfeeding.

Table 8 Priority Scale for Ny" B"

No	Day/Date	Amount (Pre)	Amount (Post)	Priority level (Pre)	Priority level (Post)
1.	Monday, 27	15	23	Low	Currently

April 2025					
2.	Tuesday, 28 April 2025	22	32	Currently	High
3.	Wednesday, 29 April 2025	27	37	Currently	High

On the first day before the implementation of education about exclusive breastfeeding for postpartum mothers, Mrs. B's knowledge level was 15, which is classified as low. After the implementation on Monday, 27 April 2025, her knowledge level increased to 23, which is classified as moderate. This means that before the intervention, Mrs. B's knowledge level was still low, but after the implementation, her knowledge level increased to moderate.

On the second day before the implementation of exclusive breastfeeding education for postpartum mothers on Mrs. 'B', the knowledge level was 22, which is in the moderate category. After the implementation on Tuesday, 28 April 2025, the knowledge level increased to 32, which is also in the moderate category. This means that before the intervention, Mrs. 'B' had moderate knowledge, but after the implementation, her knowledge increased to a high level.

On the third day before the implementation of exclusive breastfeeding education for postpartum mothers, Ms. 'A' had a knowledge level of 27, which was classified as moderate. After the implementation on Tuesday, 28 April 2025, her knowledge increased to 37, which was also classified as moderate. This means that before the intervention, Ms. 'A' had moderate knowledge, but after the implementation, her knowledge increased to a high level.

Overall, there was an increase in scores from low to moderate to high for Ms. B postpartum after receiving education on exclusive breastfeeding. This indicates that the educational intervention provided was able to enhance Ms. B's understanding, from initially lacking knowledge (low), to having sufficient understanding (moderate), and finally achieving extensive and accurate knowledge (high).

Discussion

The results of the case study involving Mrs. 'A' and Mrs. 'B' regarding the implementation of education on exclusive breastfeeding and its impact on postpartum mothers' knowledge in the Maccini Sawah Community Health Centre area, Makassar City, were obtained through observations conducted over three consecutive days, from 27 to 29 April 2025.

On the first day, the implementation of exclusive breastfeeding education on postpartum mothers' knowledge for Mrs. 'A' after the intervention was conducted on Monday, 27 April 2025, at 10:00 AM, resulting in an increase in knowledge to 25, categorized as 'moderate.' Meanwhile, for Ms. B, after the implementation was provided on Monday, 27 April 2025 at 1:00 PM, her knowledge increased to 23, categorised as 'moderate.' A gap was found between the two respondents on the first day, where after the implementation of the education on exclusive breastfeeding for postpartum mothers, Mrs. 'A' scored 25 (moderate), while Mrs. 'B' scored 23 (moderate). This occurred because Ms. 'A' already understood the importance of breastfeeding to meet the child's nutritional needs, Ms. 'A' had already breastfed her baby and provided breast milk according to the baby's needs. Meanwhile, Ms. "B" did not yet understand the importance of breastfeeding for the child's nutritional needs, which caused Ms. 'B' to breastfeed her baby less frequently and not provide breast milk according to the baby's needs.

On the second day, the implementation of education about exclusive breastfeeding on postpartum mothers' knowledge in Mrs. A after the implementation, which was on Tuesday, 28 April 2025, at 10:15 a.m., showed an increase in knowledge to 32 with a high category. Meanwhile, for Mrs. B, after the implementation on Tuesday, 28 April 2025, at 1:00 PM, her knowledge increased

to 32, categorised as 'high.' After the implementation of exclusive breastfeeding education on postpartum mothers' knowledge, there was no difference between Ms. 'A' and Ms. 'B,' as both had the same level of knowledge after the implementation. This was because both respondents already knew that breast milk could meet the nutritional needs of children and that babies who were exclusively breastfed rarely fell ill. Ms. "A" and Ms. 'B' were already breastfeeding their babies.

On the third day, the implementation of education on exclusive breastfeeding for postpartum mothers' knowledge for Ms. 'A' after the implementation, which took place on Wednesday, 29 April 2025, at 11:00 a.m., resulted in an increase in knowledge to 38, categorised as 'high.' Meanwhile, for Mrs. B, after the implementation on Wednesday, 29 April 2025, at 2:00 PM, her knowledge increased to 37, categorised as 'high.' A gap was found between the two respondents on the third day, where after the implementation of the exclusive breastfeeding education programme, Mrs. A's knowledge score was 38 (high), while Mrs. B's was 37 (high). After three days of implementation, there was still a difference in knowledge levels between Mrs. B and Mrs. A. This was due to the difference in educational levels between Mrs. A and Mrs. B. This occurred because Mrs. A was observed to breastfeed her baby more frequently as recommended, while Mrs. B was observed to breastfeed her baby less frequently as recommended.

From the results of the above case study, it can be concluded that there was an increase in the knowledge of Ms. 'A' and Ms. 'B' each day after the implementation. The increase in knowledge about exclusive breastfeeding occurred consistently from the first day to the third day in Ms. "A" and Ms. 'B,' indicating that the implementation of education about exclusive breastfeeding on postpartum mothers' knowledge is effective in increasing knowledge among postpartum mothers.

A study by Fitriami (2021) on postpartum mothers at the Sumber Kasih Health Post in Tanjung Selor Hilir Village showed that mothers' knowledge about exclusive breastfeeding increased after receiving educational intervention. This finding aligns with the results of NurmalaSari et al."s (2020) study, which emphasises the relationship between mothers" educational levels and stunting incidence, and highlights the important role of parenting practices, as mothers are the primary figures in maintaining children's health and development.

Based on Nordahayu Binti Jalal's (2022) study on the level of knowledge of breastfeeding mothers about exclusive breastfeeding at the Jeulingke Health Centre in Banda Aceh, it was found that 32 respondents (69.6%) had good knowledge and practised exclusive breastfeeding for their babies. Nine respondents (19.6%) had good knowledge but did not provide exclusive breastfeeding. Meanwhile, among respondents with moderate and insufficient knowledge, four (8.7%) and one (2.2%), respectively, did not provide exclusive breastfeeding.

From the case study I conducted, both respondents were postpartum cases with insufficient knowledge about exclusive breastfeeding. After receiving education, the respondents' knowledge levels improved.

The results of this case study are in line with Kasmawati's (2021) research, which shows that after receiving counselling on the importance of exclusive breastfeeding, the respondents' knowledge level increased, with 38 people (95.0%) now having good knowledge. This increase is thought to be related to the education provided during the intervention. Previous research also confirms that continuous exposure to health information can improve mothers' understanding of exclusive breastfeeding. Therefore, efforts to increase mothers' knowledge about exclusive breastfeeding and its benefits need to be continued through health education and counselling by health workers. This step not only expands understanding but also has the potential to improve mothers' attitudes and breastfeeding practices. Based on the above case study, it can be concluded that there are benefits and impacts of implementing education on exclusive breastfeeding, as both respondents were cooperative and willing to follow research instructions, enabling the education provided to proceed smoothly and knowledge to increase

4. Conclusions

The results of a case study involving two postpartum mothers, Mrs. A and Mrs. B, in the working area of the Maccini Sawah Community Health Centre, Makassar City, which was conducted over three consecutive days, showed an increase in the mothers' level of knowledge. After receiving intervention in the form of education about exclusive breastfeeding, both respondents achieved a good level of knowledge. Additionally, mothers with adequate knowledge about exclusive breastfeeding tend to exhibit higher self-confidence and better ability in consistently practising proper breastfeeding techniques. They are also better prepared to cope with social or cultural pressures that encourage the use of formula milk. Reducing the Risk of Health Problems in Infants Proper education can prevent incorrect and premature feeding practices, thereby reducing the risk of diarrhoea, allergies, or gastrointestinal infections in infants. Supporting Mothers' Mental Health Armed with knowledge, mothers will feel calmer and less stressed when caring for their babies, including during the breastfeeding process.

References

Al., W. et. (2022). Pijat Oketani untuk Meningkatkan Produksi Air Susu Ibu pada Ibu Post Partum: Literature Review. *Jurnal Ilmiah Ners Indonesia*, 3(2), 86–95.

Al, S. et. (2020). Dukungan Keluarga dalam Pemberian ASI Eksklusif. *Jurnal SMART Kebidanan*, 7(1), 47.

Amin. (2022). Faktor-Faktor Yang Berhubungan Dengan Tingkat Kecemasan Ibu Postpartum. *Jurnal 'Aisyiyah Medika*, 7(1), 180–190.

Anwar. (2019). Pengaruh Konseling Cara Menyusui Terhadap Pelaksanaan Cara Menyusui Pada Ibu Yang Mempunyai Bayi Usia 0-2 Minggu Di Puskesmas Ngombol. *Jurnal Komunikasi Kesehatan*, 10(1), 29–37.

Arikunto. (2020). Gambaran Tingkat Pengetahuan Ibu Postpartum Primipara tentang Perawatan Payudara di Puskesmas Saronggi. *Journal Of Health Science (Jurnal Ilmu Kesehatan)*, 5(1), 25–30.

Arsyad. (2022). Hubungan Usia Ibu Dengan Pemberian ASI Eksklusif Di Kota Yogyakarta. *Jurnal Bina Cipta Husada*, XVIII(1), 131–139.

Damayanty. (2015). ASI Eksklusif dan Persepsi Ketidakcukupan ASI. *Kesmas: National Public Health Journal*, 9(3), 282.

Damayanty. (2021). Hubungan Pengetahuan dan Sikap Ibu dengan Pemberian ASI Eksklusif. *Professional Health Journal*, 2(2), 84–89.

Depkes. (2021). Hubungan Faktor Pemberian ASI Eksklusif dengan Kejadian Stunting Pada Anak Balita. *Jurnal Ilmiah Kesehatan Sandi Husada*, 10(1), 285–289.

Dewi. (2020). Pengaruh Pemberian Kombinasi Perawatan Payudara dan Pijat Oksitosin terhadap Produksi ASI pada Ibu Post Partum. *Jurnal Mahasiswa Kesehatan*, 1(2), 87–94.

Harseni. (2022). Pengetahuan dan Motivasi Ibu Hamil untuk Menyusui di Wilayah Kerja Puskesmas Banda Raya Kota Banda Aceh. *Jurnal Ilmiah Mahasiswa Fakultas Keperawatan*, 6(2), 1–7.

Hidayat. (2023). Edukasi Asi Ekslusif (Studi Kasus di SMPN 5 Jombang). 3(3), 338–349.

Khofiyah. (2021). Hubungan Tingkat Pengetahuan Ibu Tentang Asi Eksklusif Dengan Perilaku Pemberian A. Skripsi, 9(2), 16–26.

Komering et al. (2022). Puskesmas Johar Baru. 2(2), 9–14.

Mubarok. (2020). Determinan Tingkat Pengetahuan Ibu Hamil Tentang Pemeriksaan Triple Eliminasi. *Husada Mahakam: Jurnal Kesehatan*, 10(1), 85.

Nila Kusumawati Elison. (2020). Rendahnya Caupan ASI Eksklusif di Kabupaten Kampar Riau. *Jurnal Ilmiah Penelitian Kualitatif*, 5(2), 11–21.

Notoadmodjo, 2020. (2020). Hubungan Usia, Pekerjaan Dan Pendidikan Ibu Dengan Pemberian Asi Eksklusif. *Intan Husada Jurnal Ilmu Keperawatan*, 8(1), 9–18.

Pratiwi. (2020). Pengaruh Pendidikan Kesehatan Dengan Audio Visual. *Jurnal Ilmiah Ilmu Kebidanan Dan Kesehatan Sekolah Tinggi Ilmu Kesehatan Bakti Utama Pati*, 11(2), 19–24.

Rahmawati. (2022). Faktor-Faktor yang Memengaruhi Pemberian ASI Eksklusif pada Bayi di Desa Daulat Kecamatan Langsa Kota Tahun 2021. *Miracle Journal*, 2(1), 178–192. <https://ojs.unhaj.ac.id/index.php/mj/article/view/253>

Ratnasari. (2025). HUBUNGAN PEMBERIAN ASI EKSKLUSIF TERHADAP PERTUMBUHAN PADA BAYI 7-12 BULAN DI KLINIK AL-FATIH MEDIKA KARAWANG TIMUR TAHUN 2024. 9, 1791–1796.

Roesli. (2020). Hubungan Tingkat Pengetahuan Terhadap Sikap Masyarakat Pada Orang Dengan Gangguan Jiwa. *Health Care : Jurnal Kesehatan*, 9(2), 77–85.

Roesli. (2021). Hubungan Pendidikan Dan Pengetahuan Ibu Tentang Asi Eksklusif Dengan Pemberian Asi Perah Pada Ibu Bekerja. *Jurnal Kesehatan Ilmiah Indonesia (Indonesian Health Scientific Journal)*, 6(2), 212–218.

Sari. (2020). Hubungan Pemberian Asi Eksklusif Dengan Status Gizi Baduta Usia 6-24 Bulan Di Desa Timbuseng Kabupaten Gowa. *Jurnal Gizi Masyarakat Indonesia: The Journal of Indonesian Community Nutrition*, 9(1), 51–62.

Selasi. (2022). Determinan Kegagalan Pemberian Asi Eksklusif Pada Ibu Menyusui Di Wilayah Puskesmas Banda Raya Kota Banda. *Care : Jurnal Ilmiah Ilmu Kesehatan*, 10(3), 438–449.

Setiawan. (2020). Peran Petugas Kesehatan Terhadap Pemberian ASI Eksklusif di Puskesmas Bajeng Kabupaten Gowa Tahun 2020. *Prosiding Seminar Nasional SMIPT 2020 Sinergitas Multidisiplin Ilmu Pengetahuan Dan Teknologi*, 3(1), 256–264.

Sugiyono. (2023). Analisis Data dalam Penelitian Tindakan Kelas. *Jurnal Kreativitas Mahasiswa*, 1(2), 140–153.

Supriatna. (2020). Correlation of Mothers' Knowledge and Employment Status with Exclusive Breastfeeding in Sidotopo. *Jurnal PROMKES*, 8(1), 36.

Utami, N. et al. 2022. Skala Perioritas terhadap Ibu menyusui Vol. 7, No. 1 (2022), 633–640.

WHO. (2022). Hubungan Pengetahuan dan Sikap Ibu Tentang Pemberian ASI Eksklusif. *Jurnal Ilmiah Kesehatan Sandi Husada*, 11, 201–207.

Wijaya. (2021). Faktor-Faktor Yang Berhubungan Dengan Pemberian Asi Eksklusif Di Wilayah Kerja Puskesmas Sitinjo Kabupaten Dairi Tahun 2020. *Jurnal Ilmiah Keperawatan Imelda*, 7(1), 53–67.