Jurnal Ilmiah Kesehatan Sandi Husada

Volume 14 Number 1 June 2025. Page 87-96
DOI: https://doi.org/10.35816/jiksh.v14i1.313

Original Article Open Access

Effectiveness of pregnant women's class on the success of exclusive breastfeeding

Indrawati Aris Tyarini[1*], Yoga Tri Wijayanti[2], Asridawati Akib[3], Nofita Tudang Rombeallo[4], Sitti Zakiyyah Putri[5]

[1]Department of Midwifery, Universitas Sains Al-Qur'an, Central Java, Indonesia
[2]Department of Midwifery, Poltekkes Kemenkes Tanjungkarang, Lampung, Indonesia
[3]Department of Midwifery, Politeknik Sandi Karsa, South Sulawesi, Indonesia
[4]Departement of Nursing, STIKES Lakipadada, South Sulawesi, Indonesia
[5]Nursing Study Program, Faculty of Medicine and Health Sciences, Muhammadiyah University of Makassar, South Sulawesi, Indonesia

*Correspondence: Indrawati Aris Tyarini, Department of Midwifery, Universitas Sains Al-Qur'an, Central Java, Indonesia. Email: indrawati@unsiq.ac.id
Received: 10 May 2025 ○ Revised: 25 May 2025 ○ Accepted: 01 June 2025

ABSTRACT

Introduction: Exclusive breastfeeding (EBF) during the first six months of life plays a crucial role in infant survival, growth, and development. However, the global rates of EBF remain below the recommended targets. Pregnant women's classes are designed to provide education, support, and skills necessary for successful breastfeeding practices. This study aimed to analyze the effectiveness of pregnant women's classes on the success rate of exclusive breastfeeding.

Methods: A quasi-experimental design with a posttest-only control group was employed. The study involved 120 pregnant women in their third trimester, selected through purposive sampling from two community health centers. The intervention group (n=60) participated in a structured pregnant women's class, while the control group (n=60) received standard antenatal care without additional courses. Data on breastfeeding practices were collected three months postpartum using structured interviews and analyzed using the Chi-square test and logistic regression.

Results: The study found a significantly higher rate of exclusive breastfeeding in the intervention group (78.3%) compared to the control group (53.3%) ($p<0.01$). Attendance in the pregnant women's class was associated with a 2.9 times higher likelihood of practicing exclusive breastfeeding (OR=2.9; 95% CI: 1.5–5.6). Key factors contributing to success included increased maternal knowledge, self-efficacy, and support from health educators during antenatal.

Conclusions: Participation in pregnant women's classes effectively increases the success rate of exclusive breastfeeding. Integrating structured breastfeeding education into routine antenatal care is recommended to improve maternal practices and promote better infant health outcomes.

Keywords: Antenatal education, Exclusive breastfeeding, Maternal knowledge, Pregnant women's class, Self-efficacy.

INTRODUCTION

Exclusive breastfeeding (EBF) for the first six months of life is widely recognized as a critical factor in promoting optimal infant health and development. According to the World Health Organization (WHO), EBF significantly reduces infant mortality due to common childhood illnesses such as diarrhea and pneumonia, and helps with faster recovery during illness (Dabb et al., 2023). Despite these well-documented benefits, the global prevalence of exclusive breastfeeding remains suboptimal, with many mothers facing challenges that hinder their ability to breastfeed exclusively. Exclusive breastfeeding (EBF) during the first six months of life is recognized as a cornerstone of child health and development, significantly reducing the risk of morbidity and mortality in infants (Haq et al., 2024). According to the World Health Organization (WHO), exclusive breastfeeding provides ideal infant nutrition, supports optimal growth, and strengthens the immune system. Despite these well-established benefits, the global prevalence of exclusive breastfeeding remains below the recommended levels, with many mothers encountering barriers related to knowledge, cultural beliefs, lack of support, and insufficient confidence (Ouyang et al., 2024).

Various antenatal interventions have been introduced to address these challenges, including the Pregnant Women's Class. This program offers structured education and support to improve maternal knowledge, attitudes, and practices regarding breastfeeding and newborn care (Suprapto, 2024). Through interactive learning and evidence-based information, pregnant women's classes are intended to empower expectant mothers with the confidence and skills necessary to initiate and sustain exclusive breastfeeding. Numerous strategies have been implemented to address this gap, among which educational interventions during pregnancy have shown promising results (Whittaker et al., 2025). Pregnant women’s classes, a structured form of antenatal education, aim to enhance maternal knowledge, build positive attitudes, and equip mothers with the necessary skills and motivation for successful breastfeeding practices (Atchan et al., 2023). Multiple factors influence a mother's ability to breastfeed exclusively, including knowledge, attitudes, cultural practices, and support systems. One strategy to improve breastfeeding outcomes is the implementation of educational interventions during pregnancy, such as the Pregnant Women's Class (PWC). These classes aim to equip expectant mothers with comprehensive knowledge, practical skills, and emotional support to prepare them for breastfeeding challenges postpartum (Boppana et al., 2023).

These classes typically cover various topics, including the benefits of breastfeeding, techniques for proper latching, early breastfeeding initiation, and overcoming common challenges (Hulsbosch et al., 2023). By providing anticipatory guidance and emotional support during pregnancy, pregnant women’s classes are believed to influence maternal decisions and behaviors postpartum significantly. However, evidence regarding the effectiveness of pregnant women's courses in promoting exclusive breastfeeding is still varied, and further empirical studies are necessary to strengthen the basis for integrating these programs into routine antenatal care (Stein et al., 2025). Therefore, this study aims to evaluate the effectiveness of pregnant women's classes in improving the success rate of exclusive breastfeeding among mothers, to inform healthcare practices and policy recommendations to promote optimal infant nutrition. Previous studies have indicated that antenatal education positively influences breastfeeding outcomes (Ngai & Lam, 2023). However, there is a need for more localized research to assess the specific impact of pregnant women's classes on breastfeeding practices within different community settings. Understanding the effectiveness of such educational interventions is crucial to

developing strategies that can enhance breastfeeding rates and improve infant health indicators (Wijenayake et al., 2023).

Pregnant Women's Classes typically cover various topics, including maternal and child health, breastfeeding techniques, benefits of EBF, and problem-solving strategies for common breastfeeding issues. Evidence suggests that antenatal education can significantly enhance breastfeeding self-efficacy, leading to higher initiation and continuation rates of exclusive breastfeeding (Kehinde et al., 2023). However, the effectiveness of such interventions, particularly in diverse healthcare settings, requires further evaluation. Understanding the impact of Pregnant Women's Classes on breastfeeding success can inform public health strategies and enhance maternal-child health programs. Therefore, this study aims to evaluate the effectiveness of Pregnant Women's Classes on the success rate of exclusive breastfeeding among postpartum mothers, providing empirical evidence to support the integration of structured breastfeeding education into routine antenatal care services. This study aims to analyze the effectiveness of pregnant women's classes on the success of exclusive breastfeeding among mothers attending community health centers. By evaluating the relationship between participation in these classes and the achievement of exclusive breastfeeding, this research seeks to provide evidence to support the integration of structured antenatal education into routine maternal care programs.

MATERIALS AND METHODS

Study Design

This research employed a quasi-experimental design with a posttest-only control group approach. The aim was to determine the effectiveness of Pregnant Women's Class participation on the success of exclusive breastfeeding.

Study Setting and Population

The study was conducted at two community health centers, between Februari and March, 20205. The study population consisted of pregnant women in their third trimester who attended antenatal care at these centers.

Sample Size and Sampling Technique

A total of 120 pregnant women were recruited using a purposive sampling method. Participants were divided equally into two groups: Intervention group (n=60): Received participation in a structured Pregnant Women's Class. Control group (n=60): Received standard antenatal care without additional class intervention. Inclusion criteria included women in the third trimester, willingness to participate, and the ability to attend follow-up after delivery. Exclusion criteria were mothers with medical contraindications to breastfeeding or high-risk pregnancies.

Intervention

The intervention group participated in a Pregnant Women’s Class program consisting of four sessions, each lasting approximately two hours, facilitated by certified midwives and lactation counselors. Topics covered included: Benefits of exclusive breastfeeding, Breastfeeding techniques and positioning, Management of common breastfeeding problems, Building maternal confidence and family support for breastfeeding, and the control group received the routine antenatal care service without additional breastfeeding-focused sessions.

Data Collection

Data were collected three months postpartum through structured interviews using a validated questionnaire. The questionnaire captured demographic data, breastfeeding

practices, and adherence to exclusive breastfeeding. Measurement of Exclusive Breastfeeding. As per WHO guidelines, exclusive breastfeeding was defined as feeding the infant only breast milk without any additional food or drink, not even water. Successful exclusive breastfeeding was assessed based on maternal self-reporting and confirmation during home visits.

Data Analysis

Data were analyzed using SPSS. The Chi-square test was employed to compare exclusive breastfeeding rates between the intervention and control groups. Logistic regression analysis was conducted to estimate the strength of association (Odds Ratio and 95% Confidence Interval) between class participation and exclusive breastfeeding success. Statistical significance was set at p-value < 0.05.

Ethical Considerations

Ethical approval was obtained. Informed consent was secured from all participants before enrollment. Participant confidentiality and the right to withdraw at any stage were upheld throughout the study.

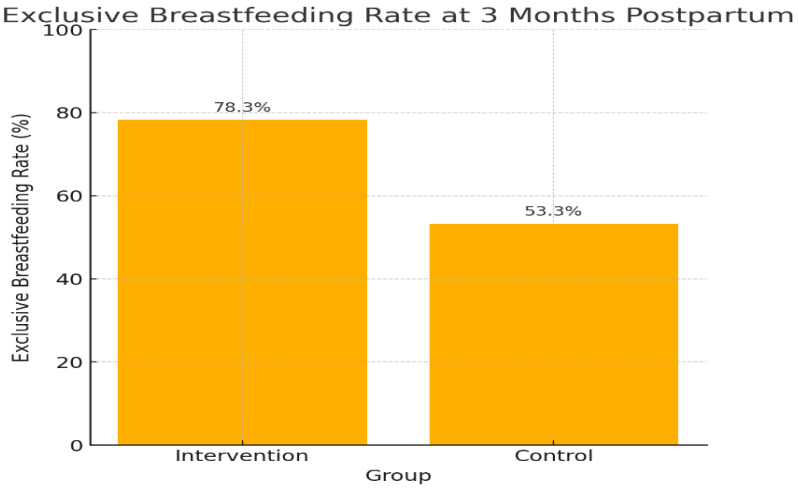
RESULTS

Table 1. Summary Table of Respondent Characteristics

Characteristics	Intervention Group (n=60)	Control Group (n=60)	p-value
Age (Mean ± SD)	27.8 ± 4.5	28.1 ± 4.2	0.612
Education Level (High School %)	66.7%	63.3%	0.732
Parity (Primipara %)	53.3%	55.0%	0.821
Employment (Employed% %)	41.7%	38.3%	0.697

Table 1 presents the baseline characteristics of respondents in both the intervention and control groups. The average age of participants in the intervention group was 27.8 ± 4.5 years, while in the control group it was 28.1 ± 4.2 years, with no statistically significant difference (p=0.612). Regarding education level, 66.7% of mothers in the intervention group and 63.3% in the control group had completed high school (p=0.732). Regarding parity, the proportion of primiparous mothers was similar between groups (53.3% in the intervention group vs. 55.0% in the control group; p=0.821). Employment status showed that 41.7% of mothers in the intervention group and 38.3% in the control group were employed (p=0.697). Overall, there were no significant differences between the intervention and control groups across all measured characteristics, indicating that the groups were comparable at baseline.

One hundred twenty participants were successfully followed up until three months postpartum, with no dropouts in either group. The characteristics of the respondents, including age, education level, and parity, were similar between the intervention and control groups (p>0.05), indicating baseline comparability.



The bar graph and table above show the success rate of exclusive breastfeeding in the three months postpartum between the two groups: Intervention Group: 78,3% ibu berhasil melakukan ASI eksklusif setelah mengikuti Pregnant Women's Class. Control Group: 53,3% ibu yang hanya menerima perawatan antenatal standar berhasil melakukan ASI eksklusif.

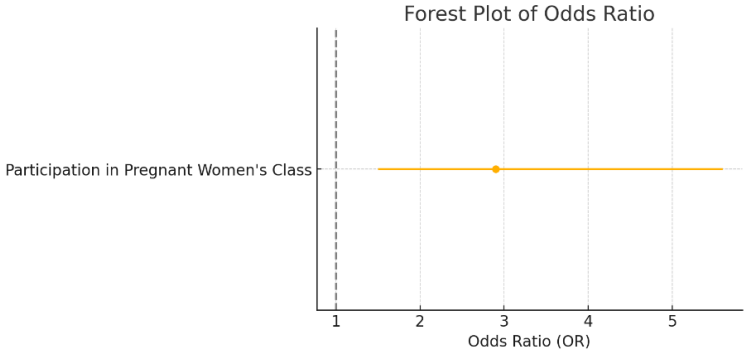


Figure 1 illustrates the forest plot showing the Odds Ratio (OR) and 95% Confidence Interval (CI) for the association between participation in the Pregnant Women's Class and the success of exclusive breastfeeding. The analysis demonstrates that mothers who participated in the Pregnant Women's Class were significantly more likely to practice exclusive breastfeeding than those who did not. The Odds Ratio was 2.9, with a 95% Confidence Interval of 1.5 to 5.6, indicating a nearly threefold increase in the likelihood of exclusive breastfeeding among the intervention group. The confidence interval does not cross the value of 1, suggesting a statistically significant association (p<0.01). The vertical dashed line at OR=1 represents the null value, and the point estimate lies to the right, further supporting the positive impact of the intervention.

Table 2. Chi-Square Test Results

Group	Exclusive Breastfeeding (n)	Non-Exclusive Breastfeeding (n)
Intervention	47	13
Control	32	28

Chi-square test p-value = 0.004

Table 2 presents the Chi-square test results comparing exclusive breastfeeding rates between the intervention and control groups.

Table 3. Logistic Regression Output

Variable	Odds Ratio (OR)	95% CI Lower	95% CI Upper	p-value
Participation in Pregnant Women's Class	2.9	1.5	5.6	<0.01

Table 3 shows the logistic regression analysis examining the association between participation in the Pregnant Women's Class and exclusive breastfeeding success. Both studies demonstrate a significant positive impact of the intervention. These findings suggest that structured antenatal education, specifically through Pregnant Women's Classes, is an effective intervention to enhance breastfeeding practices and should be integrated into routine maternal care programs.

DISCUSSION

This study aimed to evaluate the effectiveness of Pregnant Women's Class participation on the success of exclusive breastfeeding at three months postpartum. The findings demonstrated that attendance in structured antenatal classes significantly improved exclusive breastfeeding outcomes compared to standard antenatal care alone. The exclusive breastfeeding rate of 78.3% in the intervention group is notably higher than the 53.3% observed in the control group, suggesting that antenatal breastfeeding education is crucial in promoting optimal infant feeding practices. The findings align with previous studies, which indicated that maternal education and support during pregnancy enhance breastfeeding knowledge, confidence, and problem-solving abilities. By providing accurate information and addressing common breastfeeding challenges before delivery, the Pregnant Women's Class empowers mothers to initiate and maintain exclusive breastfeeding (Jalil et al., 2024).

Increased Knowledge. Mothers received detailed information about the benefits of EBF and practical techniques. One of the key factors contributing to the higher success rate of exclusive breastfeeding among the intervention group was the significant increase in maternal knowledge (Nurhayati et al., 2023). Mothers who participated in the Pregnant Women's Class received detailed and structured information regarding the benefits of exclusive breastfeeding (EBF) for infants and mothers. These sessions highlighted breast milk's nutritional superiority and emphasized its protective effects against infections, allergies, and chronic diseases (Qi et al., 2025). In addition to theoretical knowledge, practical skills were also taught, including correct latching techniques, effective breastfeeding positions, and ways to manage common breastfeeding problems such as nipple pain, engorgement, and low milk supply (Rakha et al., 2025). This combination of knowledge and skill-building helped mothers feel more competent and better prepared to initiate and sustain exclusive breastfeeding. Furthermore, the classes allowed mothers to

ask questions and clarify doubts, thus dispelling breastfeeding myths and misconceptions. By enhancing their understanding and practical readiness, the Pregnant Women's Class empowered mothers to make informed decisions and to persist with exclusive breastfeeding even when faced with challenges postpartum (Couto et al., 2025).

Enhanced Self-Efficacy. Role-playing, demonstrations, and discussion sessions boosted mothers' confidence. Another significant factor contributing to the success of exclusive breastfeeding in the intervention group was the enhancement of maternal self-efficacy. The Pregnant Women's Class incorporated interactive teaching methods such as role-playing, practical demonstrations, and group discussion sessions, which played a crucial role in building mothers' confidence in their ability to breastfeed exclusively (Mahmud, 2020). Mothers could simulate real-life breastfeeding situations through role-playing scenarios, including correct attachment techniques, managing difficulties such as a sleepy baby or engorgement, and responding to common breastfeeding challenges. This active participation allowed mothers to practice new skills in a supportive environment and receive immediate feedback from health professionals, reinforcing correct techniques and building practical competence (Ali & Adiaksa, 2023). Demonstrations provided visual and hands-on learning experiences, which enhance understanding and retention of complex behaviors such as breastfeeding positioning and latch correction.

Meanwhile, discussion sessions created a safe space for mothers to share their concerns, exchange experiences, and gain peer support, further strengthening their belief in their ability to breastfeed successfully (Xie et al., 2023). By fostering knowledge and confidence, these educational strategies significantly improved maternal self-efficacy, a strong predictor of breastfeeding initiation and continuation. Mothers who feel capable and prepared will likely overcome early breastfeeding challenges and practice exclusive breastfeeding for the recommended six months.

Peer and Professional Support. Interaction with other pregnant women and healthcare providers during the classes created a supportive environment that reinforced positive breastfeeding behaviors. Peer and professional support emerged as another vital element influencing the success of exclusive breastfeeding among mothers who participated in the Pregnant Women's Class (Ayu Rahmadani et al., 2025). The interactive nature of the classes allowed mothers to engage directly with healthcare providers, including midwives and lactation counselors, who provided technical guidance and emotional encouragement throughout the antenatal period. This direct interaction ensured that mothers could access trusted, evidence-based information and receive personalized advice tailored to their specific needs and concerns (Setiawati et al., 2023).

The presence of supportive healthcare providers helped address misconceptions early and prepared mothers to face real-world breastfeeding challenges with greater confidence. Equally important was the peer support that developed during these classes. Sharing experiences, questions, and encouragement with fellow pregnant women fostered a sense of community and belonging. Mothers realized they were not alone in their journey, reducing feelings of anxiety and self-doubt that often accompany the early stages of breastfeeding (Yeshitila et al., 2024). This peer interaction normalized breastfeeding challenges and provided emotional reinforcement, motivating mothers to continue exclusive breastfeeding. Together, peer and professional support created a strong, enabling environment that reinforced positive breastfeeding behaviors and contributed significantly to the higher exclusive breastfeeding rates observed in the intervention group. Despite the positive outcomes, some mothers still discontinued exclusive breastfeeding due to external pressures, such as returning to work and misconceptions

within the family environment. Future programs should consider including family members, especially partners, in antenatal education to further enhance support for breastfeeding mothers. Limitations of this study include its quasi-experimental design, which may introduce selection bias. Additionally, self-reported breastfeeding practices could be subject to recall or social desirability bias. However, triangulating data with home visits helped to minimize these risks (Lontaan et al., 2023).

Implications for Practice

The findings of this study suggest that integrating Pregnant Women's Classes into routine antenatal care programs could be a cost-effective and impactful strategy to promote exclusive breastfeeding. Healthcare systems should prioritize structured antenatal education interventions to enhance maternal and child health outcomes. Future programs could also benefit from involving family members, especially partners, to further strengthen breastfeeding support at the household level.

CONCLUSIONS

This study demonstrated that participation in Pregnant Women's Classes significantly increased the success rate of exclusive breastfeeding at three months postpartum. Mothers who attended the structured classes were nearly three times more likely to practice exclusive breastfeeding than those who only received standard antenatal care. The intervention effectively enhanced maternal knowledge and self-efficacy and created a supportive environment through peer and professional interactions, all of which improved breastfeeding outcomes. These findings highlight the critical role of structured antenatal education programs in promoting exclusive breastfeeding practices. Integrating Pregnant Women's Classes into routine antenatal care services is strongly recommended as an effective and practical strategy to support maternal and child health. Further research is encouraged to explore the long-term effects of such interventions and to identify strategies for sustaining exclusive breastfeeding beyond the early postpartum period, including engagement of family members and workplace support initiatives.

Acknowledgement

The authors would like to express their sincere gratitude to all the mothers who participated in this study for their valuable time and commitment. We also thank the healthcare providers and staff of Community Health Centers for their support and assistance in facilitating the Pregnant Women's Classes and data collection process.

Funding Source

This study is self-funded

Availability of data and materials

The data and materials for this study are available upon reasonable request.

Authors' contributions

Both of the authors have contributed to all aspects of this study.

Conflict of Interest

No potential conflicts of interest.

REFERENCES

Ali, S. A., & Adiaksa, B. W. (2023). Faktor Yang Berhubungan dengan Pemberian Asi Eksklusif Pada Bayi. *Jurnal Ilmiah Kesehatan Sandi Husada*, *12*(1), 255–261. https://doi.org/10.35816/jiskh.v12i1.1040

Atchan, M., Graham, K., Hartney, N., Martis, R., Kearney, L., Davey, K., Daellenbach,

R., Hall, H., & Sweet, L. (2023). Either 'a blessing in disguise' or 'I couldn't get help,': Australian and Aotearoa NZ women's early infant feeding experiences during COVID-19. *Women and Birth*, *36*(3), e305–e313. https://doi.org/10.1016/j.wombi.2022.11.003

Ayu Rahmadani, R., Setiawati, A., Aris, I., Lontaan, A., & Prasetyowati, P. (2025). Effectiveness of nutrition education on stunting prevention behavior in mothers under five. *Jurnal Edukasi Ilmiah Kesehatan*, *3*(1), 01–08. https://doi.org/10.61099/junedik.v3i1.68

Boppana, S. B., van Boven, M., Britt, W. J., Gantt, S., Griffiths, P. D., Grosse, S. D., Hyde, T. B., Lanzieri, T. M., Mussi-Pinhata, M. M., Pallas, S. E., Pinninti, S. G., Rawlinson, W. D., Ross, S. A., Vossen, A. C. T. M., & Fowler, K. B. (2023). Vaccine value profile for cytomegalovirus. *Vaccine*, *41*, S53–S75. https://doi.org/10.1016/j.vaccine.2023.06.020

Couto, C., Prata, A. P., Souto, S. P., Machado, J., & Viana, C. R. (2025). Nurse and midwife interventions to protect, promote and support breastfeeding: An umbrella review. *Midwifery*, *144*, 104337. https://doi.org/10.1016/j.midw.2025.104337

Dabb, C., Dryer, R., Brunton, R. J., Yap, K., & Roach, V. J. (2023). Paternal pregnancy-related anxiety: Systematic review of men's concerns and experiences during their partners' pregnancies. *Journal of Affective Disorders*, *323*, 640–658. https://doi.org/10.1016/j.jad.2022.11.092

Haq, Z. U., Naeem, A., Zaeem, D., Sohail, M., & Pervaiz, N. ul A. (2024). Development of a Digital Platform to Promote Mother and Child Health in Underserved Areas of a Lower-Middle-Income Country: Mixed Methods Formative Study. *JMIRx Med*, *5*, e48213–e48213. https://doi.org/10.2196/48213

Hulsbosch, L. P., Nyklíček, I., Boekhorst, M. G., Potharst, E. S., & Pop, V. J. (2023). Breastfeeding continuation is associated with trait mindfulness but not with trajectories of postpartum depressive symptoms. *Midwifery*, *124*, 103770. https://doi.org/10.1016/j.midw.2023.103770

Jalil, H., Chong, M.-C., Jalaludin, M. Y., Wong, L. P., & Hmwe, N. T. T. (2024). Knowledge, attitude, and practice among mothers toward breastfeeding and complementary feeding in community health setting, Malaysia. *Heliyon*, *10*(21), e39746. https://doi.org/10.1016/j.heliyon.2024.e39746

Kehinde, J., O'Donnell, C., & Grealish, A. (2023). The effectiveness of prenatal breastfeeding education on breastfeeding uptake postpartum: A systematic review. *Midwifery*, *118*, 103579. https://doi.org/10.1016/j.midw.2022.103579

Lontaan, A., Anggeraeni, A., Settawati, A., Mulyanti, M., & Hartaty, H. (2023). Determinants of Malnutrition Status Events in Toddlers. *Jurnal Edukasi Ilmiah Kesehatan*, *1*(1), 24–30. https://doi.org/10.61099/junedik.v1i1.8

Mahmud, Y. (2020). Studi Pemanfaatan Antenatal Care Pada Ibu hamil di Puskesmas Aeng-Towa. *Jurnal Ilmiah Kesehatan Sandi Husada*, *11*(1), 505–511. https://doi.org/10.35816/jiskh.v11i1.337

Ngai, F.-W., & Lam, W. (2023). Couple-based interpersonal psychotherapy for first-time parents: A process evaluation. *Journal of Pediatric Nursing*, *72*, e193–e200. https://doi.org/10.1016/j.pedn.2023.06.028

Nurhayati, E., Hapsari, E. D., Rosyidah, R., & Helmyati, S. (2023). Educational models of infant and young child feeding among prenatal and postnatal women during the COVID-19 pandemic (January 2020–January 2023): A scoping review. *Nutrition*, *115*, 112150. https://doi.org/10.1016/j.nut.2023.112150

Ouyang, Y.-Q., Guo, J., Zhou, J., Zhouchen, Y., Huang, C., Huang, Y., Wang, R., & Redding, S. R. (2024). Theoretical approaches in the development of interventions to promote breastfeeding: A scoping review. *Midwifery*, *132*, 103988. https://doi.org/10.1016/j.midw.2024.103988

Qi, W., Huang, S., Zhao, J., Cui, X., Wei, Z., Cui, G., Guo, Q., & Hu, J. (2025). The preventive effect of psychological and psychosocial interventions on postpartum depression: An overview of systematic reviews. *Journal of Psychiatric Research*, *182*, 21–33. https://doi.org/10.1016/j.jpsychires.2024.11.050

Rakha, A., Jabbar, A., Rasheed, H., Tul-Muntaha, S., Munir, A., Fatima, A., Anwar, R., Sohail, M., & Aadil, R. M. (2025). Nutrition crisis management after floods: A multisectoral perspective. *International Journal of Disaster Risk Reduction*, *116*, 105141. https://doi.org/10.1016/j.ijdrr.2024.105141

Setiawati, A., Arda, D., Nordianiwati, N., Aris Tyarini, I., & Indryani, I. (2023). Factors associated with nutritional status in children under five. *Jurnal Edukasi Ilmiah Kesehatan*, *1*(3), 99–106. https://doi.org/10.61099/junedik.v1i3.24

Stein, E., Dixon, K., & Burns, E. (2025). "They painted a rosy view, but I would have preferred to hear the reality"- Australian women's experiences of antenatal breastfeeding education. *Women and Birth*, *38*(2), 101888. https://doi.org/10.1016/j.wombi.2025.101888

Suprapto. (2024). *Keperawatan kesehatan masyarakat dan homecare : pendekatan terintegrasi untuk pelayanan kesehatan komunitas*. LP2M Akademi Keperawatan Sandi Karsa. https://jurnal.edi.or.id/index.php/bci/article/view/73

Whittaker, X., Meedya, S., & Capper, T. (2025). Factors and interventions that positively influence breastfeeding rates at six months postpartum: An integrative literature review. *Women and Birth*, *38*(3), 101904. https://doi.org/10.1016/j.wombi.2025.101904

Wijenayake, S., Martz, J., Lapp, H. E., Storm, J. A., Champagne, F. A., & Kentner, A. C. (2023). The contributions of parental lactation on offspring development: It's not udder nonsense! *Hormones and Behavior*, *153*, 105375. https://doi.org/10.1016/j.yhbeh.2023.105375

Xie, E. B., Jung, J. W., Kaur, J., Benzies, K. M., Tomfohr-Madsen, L., & Keys, E. (2023). Digital Parenting Interventions for Fathers of Infants From Conception to the Age of 12 Months: Systematic Review of Mixed Methods Studies. *Journal of Medical Internet Research*, *25*, e43219. https://doi.org/10.2196/43219

Yeshitila, Y. G., Gold, L., Abimanyi-Ochom, J., Riggs, E., Tolossa, T., & Le, H. N. D. (2024). Effectiveness and cost-effectiveness of models of maternity care for women from migrant and refugee backgrounds in high-income countries: A systematic review. *Social Science & Medicine*, *358*, 117250. https://doi.org/10.1016/j.socscimed.2024.117250