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Original Article

The Impact of Nutrion Education for Health Workers on Lactation Knowledge and Healthy Dietary Practices

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ABSTRACT

Background: During the postpartum period, nutritional requirements increase significantly, particularly for breastfeeding mothers. The increase is approximately 25%, as the body needs additional energy for maternal recovery and adequate milk production to support infant health. Nutritional adequacy is determined not only by the quantity of food consumed but also by the quality of nutrients.
Methods: This study employed a pre-experimental design with a One-Group Pretest–Posttest approach. Data were collected using questionnaires administered before and after the intervention, and were analyzed using descriptive statistics and inferential analysis through paired t-tests.
Results: The findings revealed a significant improvement in postpartum mothers' knowledge following the intervention, with a 28% increase observed. Statistical analysis indicated that nutrition education delivered by healthcare professionals had a significant effect on enhancing lactation knowledge and promoting healthy dietary practices among breastfeeding mothers (p-value 0.001 < 0.05).
Conclusion: Nutrition education by health workers has proven effective in improving lactation knowledge and healthy dietary practices among breastfeeding mothers. These findings highlight the need to integrate educational interventions into maternal and child health programs, particularly at community health posts and primary care services.

INTRODUCTION

Globally, although many breastfeeding mothers possess basic knowledge regarding the importance of exclusive breastfeeding for the first six months, a considerable gap remains between knowledge and practice, particularly with respect to maintaining a healthy diet during lactation. Across several Asian countries, mothers' knowledge of breastfeeding and healthy diets still demonstrates significant variation and is often not aligned with ideal practices, despite existing nutrition education interventions (Karcz et al., 2021). For example, a UNICEF survey reported that the rate of exclusive breastfeeding for six months in South Asia increased from approximately 47% in

2000 to around 60% in 2024. However, this figure has yet to reach the Global Breastfeeding Collective target of 70% by 2030 (Ching et al., 2023; Debes et al., 2013; UNICEF South Asia, 2024).

In Indonesia, the coverage of exclusive breastfeeding has shown an upward trend in recent years. Based on the 2021 Basic Health Research (Riskesdas), the percentage of infants aged 0–6 months who received exclusive breastfeeding was recorded at 52.5% (WHO Indonesia, 2022). UNICEF data (2023) further indicated an increase to approximately 66.4% in 2023, while the Central Statistics Agency (BPS) reported an even higher figure of 74.7% in 2024 (Badan Pusat Statistik, 2024). Although these achievements represent a significant improvement compared to 2017, when coverage was only around 35.7% according to the Nutrition Status Monitoring (PSG) (Kementerian Kesehatan RI, 2022), the rates remain uneven across Indonesian provinces. This regional disparity highlights the need for stronger efforts in education, healthcare support, and protective policies for breastfeeding mothers in order to achieve optimal targets for exclusive breastfeeding. In Southeast Sulawesi, particularly in Buton Regency, which is categorized as a disadvantaged, frontier, and outermost (3T) area, the prevalence of stunting based on the 2024 e-PPGBM recording reached 21.32%, with coverage of measurements at approximately 97% of children under five (*Wilayah Prioritas - TP2S*, n.d.). Preliminary surveys in Kapontori District revealed that it has the highest number of stunting-prone villages in Buton Regency, with seven villages designated as stunting loci, including Boneatiro Village.

Although coverage of breastfeeding has increased, meaning that more infants are being breastfed, a significant number of mothers still report difficulties in milk production. Several factors contribute to low milk output, including inadequate maternal diet, psychological stress, lack of rest, and unhealthy lifestyle habits (Achirda et al., 2024). Exclusive breastfeeding for the first six months of an infant's life is a critical effort to improve maternal and child health outcomes. However, limited maternal knowledge about lactation and healthy dietary practices often hinders the successful implementation of exclusive breastfeeding (Ekayamti & Sa'adah, 2025). To ensure adequate milk production, a mother's diet should provide sufficient calories, protein, fat, vitamins, and minerals from vegetables and fruits, in addition to adequate fluid intake of about 8–12 glasses of water per day. Nutrition education during pregnancy and lactation has been shown to positively influence mothers' knowledge of breastfeeding and dietary practices (Frisa Admaja, 2024). Appropriate educational interventions can enhance exclusive breastfeeding practices and ensure adequate dietary intake for both mothers and infants.

Kristiningtyas (2022) emphasized that milk production is not solely influenced by nutrition but also by psychological well-being, use of medication (including contraceptives), breast care, anatomical and physiological conditions of the breast, rest patterns, infant sucking behavior, and lactation counseling (Kristiningtyas, 2022). The nutritional needs of postpartum mothers, particularly those who breastfeed, increase by approximately 25% to support recovery after childbirth and milk production. During the first six months, breastfeeding mothers require an additional 700 kcal per day, followed by 500 kcal per day thereafter. Beyond caloric intake, dietary quality is also crucial, especially the balance of carbohydrates, protein, fat, and vitamins (Mahayati, 2023). Several community-based approaches have been implemented to support milk production, one of which is the consumption of katuk leaves (Rizka Salsabila et al., 2024). Katuk leaves are widely recognized for their potential to stimulate and increase breast milk production (Suyanti & Anggraeni, 2020). Consuming katuk leaf extract two to three times per day has been shown to significantly increase prolactin hormone levels among mothers breastfeeding infants aged 0–6 months. In addition, katuk leaves are rich in provitamin A in the form of beta-carotene, which plays an important role in eye health (Ikhlasiah et al., 2020).

Lactation education provided by healthcare workers plays a critical role in improving the knowledge and skills of breastfeeding mothers. Interventions such as counseling and mentoring have been shown to increase the success of exclusive breastfeeding and improve appropriate breastfeeding practices. Support from healthcare workers during pregnancy and postpartum not only enhances

mothers' confidence in breastfeeding but also contributes to achieving optimal infant nutrition. Studies indicate that mothers who receive lactation education from healthcare workers are more likely to practice exclusive breastfeeding than those who do not (Gayatri, 2021; Tadesse et al., 2019). Therefore, healthcare professionals hold a strategic responsibility to strengthen breastfeeding practices through evidence-based and continuous education.

METHODS

This study employed a pre-experimental design with a One-Group Pretest–Posttest approach. A pretest was administered prior to the intervention, followed by the delivery of nutrition education, and subsequently a posttest was conducted to assess changes in mothers' knowledge of lactation and healthy dietary practices. The intervention consisted of nutrition education delivered by health workers focusing on lactation knowledge and healthy diet practices.

The study was conducted in Boneatiro Village, Buton Regency, from June to August 2025. The sampling technique employed was total sampling, involving all postpartum mothers residing in Boneatiro Village. Although the initial data indicated that there were 28 postpartum mothers, field observations identified a total of 30 respondents. Primary data collection was carried out using a structured questionnaire as the research instrument. The instrument had undergone validity and reliability testing. Validity testing was conducted using item–total correlation analysis, and all items demonstrated significant correlations ($p < 0.05$). Reliability testing using Cronbach's alpha yielded a coefficient of 0.82, indicating good internal consistency.

Prior to the main analysis, a normality test was performed using the Shapiro–Wilk test, which confirmed that the data were normally distributed ($p > 0.05$). Accordingly, bivariate analysis was conducted using the paired t-test to compare the mean knowledge scores of postpartum mothers before and after the intervention, since measurements were taken from the same group of respondents at two different times. This test was chosen because it is appropriate for analyzing within-subject changes in continuous data. Data were processed using Microsoft Excel and SPSS software. Furthermore, this study received ethical approval under reference number 172/STIKES-NH/KEPK/V/2025.

RESULTS

After researching 30 respondents, the characteristics of the respondents, knowledge of lactation and healthy dietary practices were described as follows:

Table 1. Respondent Characteristics

Characteristics	frequency	Percentage (%)
Age		
<20 Years	3	9.7
20 – 35 Years	24	77.4
>35 Years	4	12.9
Education		
Elementary / Junior High School	3	9.7
Senior High School	16	51.6
Higher Education	12	38.7
Work		
Work	10	32.2
Doesn't work	21	67.7

Tabel 1 shows the characteristics of respondents. The majority of respondents were 20-35 years old (77.4%), Doesn't work (67.7%) and had a senior high school education (51.6%).

Table 2. Pretest and Posttest Knowledge about Lactation and Healthy Diet Practices

No Respondents	Pretest	Posttest	No Respondents	Pretest	Posttest
1	55	85	16	65	86
2	57	78	17	69	92
3	65	80	18	65	94
4	60	88	19	65	87
5	50	88	20	65	96
6	55	93	21	58	94
7	66	95	22	60	99
8	68	92	23	63	80
9	56	97	24	64	85
10	64	94	25	69	96
11	65	99	26	65	86
12	69	86	27	60	90
13	67	83	28	65	93
14	56	84	29	68	96
15	69	89	30	54	96

Based on the pretest and posttest results in Table 2, there was a significant increase in knowledge among breastfeeding mothers regarding lactation and healthy dietary practices after being provided with nutrition education intervention by health workers. Prior to the intervention, the average knowledge of respondents was in the sufficient category with a score of 62%. After receiving nutrition education, the average posttest score increased to 90%, which is categorized as good. This average increase of 28% indicates that the nutrition education provided was effective in enhancing breastfeeding mothers' understanding. These findings highlight the important role of health workers in improving maternal knowledge through educational interventions. Strengthening mothers' knowledge of lactation and dietary practices is expected to support the success of exclusive breastfeeding and ensure adequate, balanced nutrition for both mother and child.

Table 3. The Relationship between Nutrition Education by Health Workers and Breastfeeding Mothers' Knowledge of Lactation and Healthy Dietary Practices

Knowledge Score	Pretest	Posttest
Mean	62.57	90.03
Median	65	91
Standard Deviation	5.289	5.869
P-Value	0.001	

Based on Table 3, the analysis demonstrated a significant difference in the average knowledge scores of postpartum mothers before and after the intervention. The mean pretest score of 62% increased to 90% in the posttest, reflecting an average improvement of 28%.

DISCUSSION

Nutrition education has been proven to be an effective intervention for enhancing both knowledge and breastfeeding practices among lactating mothers. Education delivered by healthcare professionals enables mothers to gain a comprehensive understanding of the benefits of exclusive breastfeeding, proper breastfeeding techniques, and the nutritional requirements that support breast milk production. This is consistent with findings from meta-analyses indicating that systematic educational interventions can improve maternal self-efficacy in breastfeeding and extend the duration of exclusive breastfeeding (Fitriani, A., & Indrayani, 2021; Maleki et al., 2021; Saavedra Sanchez et al., 2024).

In this study, nutrition education provided by healthcare professionals was significantly associated with increased lactation knowledge and healthy dietary practices among breastfeeding mothers ($p < 0.05$). These results align with recent studies demonstrating that health education can enhance nutrition literacy and promote positive behavioral changes in breastfeeding practices (Ismail, R., Sari, D. P., & Amelia, 2024; Lestari, P., & Handayani, 2020; Prasetyo et al., 2023). Beyond increasing knowledge, educational interventions also foster positive attitudes, strengthen self-efficacy perceptions, and encourage healthier dietary behaviors (Hiito et al., 2024). Therefore, nutrition education can be regarded as an important preventive and promotive measure to support the success of lactation programs in Indonesia.

Furthermore, the effectiveness of nutrition education depends not only on the content delivered but also on the quality of communication and the methods employed. Participatory approaches, such as counseling, group discussions, and demonstrations of breastfeeding techniques, have been shown to be more effective than one-way information delivery (Anjelina et al., 2023; Putri, L. D., & Susanti, 2021). Such approaches not only improve knowledge but also develop practical skills and enhance mothers' confidence in addressing breastfeeding challenges, such as improper latching or perceived low milk supply. This is in line with the Health Belief Model, which posits that knowledge and perceived benefits are key factors influencing individual health behaviors (Widiastuti, et al, 2023)

Maternal knowledge of breastfeeding is influenced by both internal and external factors. Internal factors include education level, age, and prior experience, whereas external factors include access to information, family support, and the role of healthcare professionals. Wardani et al. (2022) reported that mothers with higher formal education demonstrate better health literacy and are more capable of assimilating nutrition and lactation information (Rahmawati, D., & Puspitasari, 2021; Wardani, et al., 2022). Age also plays a role; age influences a person's way of thinking, experience, and cognitive maturity. Mothers of productive age tend to absorb health information more easily than those who are too young or too old (Sari, N., Utami, R., & Dewi, 2020). Mothers of reproductive age generally have more mature cognitive abilities, while younger generations tend to access information more quickly through digital media (Shofiya et al., 2024). Consequently, nutrition education programs should be tailored to the characteristics of the target population, including age and educational background.

In addition to individual factors, access to mass media and social media serves as an important channel for enhancing postpartum mothers' knowledge. Audio-visual educational materials have been shown to be more easily understood and retained compared to written information alone (Lestari, P., & Handayani, 2020). Nevertheless, it is essential to ensure that the information disseminated through these channels originates from trusted and peer-reviewed sources to prevent misinformation. In this context, midwives and healthcare professionals play a crucial role as facilitators and information filters. Continuous support from healthcare providers has been shown to improve exclusive breastfeeding success, as emphasized in WHO reports (2020) (World Health Organization, 2020).

Despite the positive effects of nutrition education on maternal knowledge observed in this study, several limitations should be acknowledged. First, the sample size was relatively small and

limited to a single study site, thus caution is required when generalizing the findings to a wider population. Second, the intervention period was relatively short, so the long-term effects of nutrition education on breastfeeding practices remain uncertain. Third, some references were based primarily on local studies and should be complemented by international peer-reviewed literature. These limitations provide opportunities for future research using multicenter designs, larger sample sizes, and longer intervention periods to assess the long-term impact on breastfeeding success and infant nutritional status.

The practical implications of this study are extensive. For midwives, the findings underscore the importance of educational skills in providing nutrition and lactation counseling. Midwives serve not only as information providers but also as mentors who enhance maternal confidence in breastfeeding practices. For community health centers (puskesmas), the results can inform the integration of maternal nutrition education into routine services, such as prenatal classes, posyandu programs, or home visits. For policymakers, the findings highlight the need for policies that strengthen the capacity of healthcare professionals to provide nutrition education, including the provision of evidence-based standardized modules and continuous training. Consequently, nutrition education functions not only as an individual-level intervention but also as a public health strategy that supports the achievement of national targets for exclusive breastfeeding.

CONCLUSION

The results of this study indicate that nutrition education provided by healthcare professionals is closely associated with improvements in lactation knowledge and healthy dietary practices. This is demonstrated by an increase in the mean pre-test score from 62% to 90% in the post-test, reflecting a difference of 28%, with statistical analysis showing a P-value of 0.001 (<0.05). The findings suggest that the better the quality of education provided, the higher the level of maternal knowledge, which in turn contributes to optimal breastfeeding practices and improved infant health outcomes.

It is essential to integrate nutrition education into maternal health services continuously, through platforms such as posyandu, antenatal care (ANC) visits, and postpartum services. Midwives and other healthcare providers should be actively engaged in lactation and nutrition counseling, employing interactive methods such as demonstrations, individual counseling, and digital media resources. These efforts can strengthen maternal health literacy, enhance self-efficacy in breastfeeding, and ensure the adoption of healthy dietary practices that support high-quality breast milk production.

Author's Contribution Statement: Harnaningsi played key roles in conceptualizing the idea and designing the research methodology. Indah Yun Diniaty contributed to data analysis and drafting the article. Ika Lestari Salim was responsible for final editing before the article was submitted to the journal.

Conflict of Interest: This authors declare no conflict of interest related to this study.

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