



The Effectiveness of Correct Breastfeeding Techniques on Sore Nipple Incidents at the South Bulango Community Health Center

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Abstract, Breastfeeding failures frequently result in issues. Lack of information about proper breastfeeding technique is one of the issues that frequently arises in nursing women, leading to uncomfortable nipples when the infant does not suck the nipple down to the areola. According to the 2022 Indonesian Demographic Health Survey, 79.3 individuals had painful nipples. The purpose of this study is to ascertain how well breastfeeding practices work in relation to the prevalence of painful nipples among nursing moms at the South Bulango Community Health Center in 2025. This kind of study employs a cross-sectional, quantitative research approach. 47 nursing women who were chosen by accidental sampling served as the study's population and sample. There is a correlation between breastfeeding practices and the incidence of sore nipples at the South Bulango Health Center in 2025, according to the results of statistical testing using the chi-square test. The p value (0.000) is not greater than α (0.05), so H_0 is rejected and H_a is accepted. It is intended that the community, especially postpartum moms, would gain more understanding of the connection between breastfeeding methods and the prevalence of painful nipples in nursing moms.

Keywords: Breastfeeding Techniques, Chi-Square Test, Effectiveness, Postpartum Care, Sore Nipples.

1. INTRODUCTION

Breastfeeding is the act of giving a newborn breast milk; the infant uses their sucking reflex to get and consume the milk. According to Marliandiani and Ningrum (2015), breastfeeding is a natural procedure that doesn't require expensive equipment. However, it does demand patience, time, nursing expertise, and support from the family, particularly the husband. One of the most precious gifts a woman can offer her child is breastfeeding. Breastfeeding is a gift that can save a baby's life when they are poor, sick, or malnourished (Nurlaela, 2021).

Giving babies or young children breast milk (ASI) is known as breastfeeding (Vevi Gurnidarsih, 2015). Lactation management is any endeavor to assist women in successfully nursing their infants. According to Rachman (2018), breastfeeding has biological and psychological benefits on the health of both mother and child and is a fundamental method of providing optimal nourishment for the healthy growth and development of newborns.

Giving infants between the ages of 0 and 6 months just breast milk while avoiding other meals like bananas, biscuits, papaya, porridge, and steaming rice, as well as fluids like formula milk, orange juice, honey, tea, and water, is known as exclusive breastfeeding (Haryono R, 2021).

The World Health Organization (2020) reports that 95% of babies worldwide have received breast milk, despite evidence showing that 1-1.5 million newborns perished as a result of not obtaining breast milk. However, just 4%, or 1 in 25 newborns, have never been breastfed in middle-class or low-income nations. Less than half of Indonesian newborns (48.6%) were breastfed within the first hour of life in 2021, down from 58.2% in 2018. In the first six months, just 52.5% of infants were exclusively breastfed, a significant drop from 64.5% in 2018 (UNICEF, 2018).

The postpartum period, or puerperineum, begins two hours after the delivery of the placenta and continues until the 42nd day (six weeks). In Latin, this specific time after childbirth is called puerperineum, a combination of the words *pur* (baby) and *parous* (giving birth). Puerperineum is the recovery period (Ani, 2021).

The Indonesian Demographic Health Survey (2022) stated that the number of postpartum mothers who breastfed their babies was 17.3%, while 20.7% did not breastfeed their babies, and 62% of mothers who stopped breastfeeding their babies. Based on this information, the highest number was postpartum mothers who stopped breastfeeding their babies before the end of the postpartum period, with evidence that 79.3% experienced sore nipples, 5.8% experienced breast milk retention, 12.5% experienced breast milk not flowing smoothly, and 2.4% experienced breast problems or mastitis (SDKI, 2022). According to statistics from the Indonesian Health Profile (2019), 57% of nursing women report having had painful nipples, making it the most prevalent issue with breastfeeding.

Nursing technique is the most crucial of the many elements that affect nursing. Attaching the mother and child to the breast in the proper posture is part of the proper breastfeeding method. Successful breastfeeding requires insight into several appropriate breastfeeding methods. Indicators of effective breastfeeding include proper *body positioning of the mother and baby*, proper latch, and effective sucking (Ministry of Health, 2022). Successful breastfeeding requires effective breastfeeding. According to Azka et al. (2020) and Rinata et al. (2016), effective breastfeeding is an interaction process between mother and child in which breast milk is immediately transported from the mother's breast to the infant in the proper way and in sufficient quantity to suit both mother and baby's demands.

The impact of incorrect breastfeeding techniques on mothers can cause problems related to the breasts and nipples that mothers often experience while breastfeeding, such as breast swelling, sore nipples, mastitis, not optimal milk flow, thus affecting optimal milk flow and thus affecting milk production and babies are reluctant to breastfeed. This results in insufficient

milk needs, with the correct breastfeeding technique will be a driver for optimal milk flow and thus breastfeeding can be considered successful (Andini Octaviana and Fauzie, 2020).

Breastfeeding practices that indicate ineffective breastfeeding positions are still incorrect, incorrect attachment, suboptimal baby suction and inadequate milk transfer. The inability to breastfeed effectively causes various problems during breastfeeding such as sore nipples . (Wahyuni et al., 2019 ; Wahyuningsih & Wahyuningsih, 2020). Improper breastfeeding techniques can have a negative effect on maternal well-being and exacerbate related diseases through negative impacts on breastfeeding techniques. According to estimates, 58% of moms have nipple injury, and 80–90% of mothers have uncomfortable nipples (Apriyanti and Syahda, 2022).

The proper breastfeeding method, which is evident from the baby's body attachment and mouth attachment to the mother's breast, can help alleviate sore nipples. When nursing, the baby's head should be parallel to his body, his face should be toward the mother's breast, his nose should contact the top of the breast, his chin should be near the breast, and his lower lip should be curled out. (Keni et al., 2020; Azka et al., 2020) Strengthening the baby's sucking reflex and promoting milk production are the goals of proper breastfeeding procedures. The Madonna position or holding, the football position or pincer, and the side-lying posture are all part of the proper nursing technique. (Trisiyah, 2016).

Sore nipples are a common breastfeeding problem, characterized by sore, red, and cracked nipples, which can cause pain. Sore nipples are caused by trauma during breastfeeding. Cracking and fissures can also occur. Cracked nipples can heal on their own within 48 hours (Nurul Azizah, 2019).

Sore nipples are a condition experienced by postpartum mothers who are in the process of breastfeeding, the nipples experience abrasions or wounds on the nipples. Sore nipples are one of the problems that occur during breastfeeding which is characterized by abrasions on the nipples, reddish in color and very painful (Qurratul A'yum, 2022).

Health facilities that provide maternal and child health services, such as hospitals, maternity hospitals, community health centers (Puskesmas) and their networks, as well as independent midwives, need to improve access for mothers, families, and the community to appropriate and correct breastfeeding information. Each health facility should have trained breastfeeding counselors who are competent to assist mothers in exclusively breastfeeding for six months . (Rahmadiyahanti et al., 2021).

Midwives as counselors must be able to guide pregnant women, especially mothers who are having their first child, regarding breastfeeding. Often, multiparous mothers do not

understand how to breastfeed properly . (Damayanti et al., 2023) Midwives can explain to mothers proper breastfeeding techniques as preparation for mothers after the delivery process in providing breast milk to their babies. Counseling for pregnant women aims to ensure mothers understand, so that later mothers can breastfeed with proper techniques . (Annisa Munawarah, 2018).

From the background described, the author can provide a problem formulation "The Effectiveness of Correct Breastfeeding Techniques on the Incident of Sore Nipples at the South Bulango Health Center in 2025."

2. RESEARCH METHODS

This kind of study employs a cross-sectional, quantitative research approach. 47 postpartum women who were selected using the accidental sampling approach made up the study's population and sample. The research was carried out between October and December of 2025. An observation sheet was utilized as the tool to gauge the frequency of painful nipples. The results of statistical tests using the chi-square test showed a p-value (0.000) not greater than α (0.05), which led to the rejection of H_0 and the acceptance of H_a . This indicates that proper breastfeeding techniques were effective in reducing the incidence of sore nipples at the South Bulango Health Center in 2025

3. RESULTS AND DISCUSSION

Univariate Analysis

Age, education, and employment are among the respondent variables in this study's frequency distribution..

Table 1. Frequency Distribution of Respondent Characteristics.

Category	Frequency	Presentation
Age		
20-25	11	23.4
26-30	23	48.9
31-35	9	19.1
>35	4	8.5
Total	47	100
Education		

Elementary School	7	14.9
JUNIOR HIGH SCHOOL	9	19.1
SENIOR HIGH SCHOOL	13	27.7
Bachelor	18	38.3
Total	47	100
Work		
housewife	6	12.8
Self-employed	10	21.3
civil servant	18	38.3
Private employees	13	27.7
Total	47	100

Table 1's frequency distribution of features based on respondents' ages at the South Bulango Community Health Center in 2025 reveals that, out of 47 respondents, 23 (48.9%) were nursing moms in the 26–30 age group. The next highest age group was 20–25 years old, with 11 individuals (23.4%), and then 31–35 years old, with 9 individuals (19.1%). In contrast, the age group over 35 had the fewest members—just 4 individuals, or 8.5%.

Of the 47 respondents, 18 (38.3%) held a bachelor's degree, according to the frequency distribution of features based on respondents' education at the South Bulango Community Health Center in 2025. The next educational group consisted of 13 individuals (27.7%) from high school and 9 individuals (19.1%) from junior high school. In contrast, there were only seven (14.9%) nursing moms who had completed elementary school.

Of the 47 respondents, 18 (38.3%) were nursing moms who worked as public servants, according to the frequency distribution of features based on respondents' jobs at the South Bulango Community Health Center in 2025. Private workers made up the next occupational category with 13 individuals (27.7%), followed by self-employed individuals with 10 individuals (21.3%). Housewives (IRT), on the other hand, made up the smallest group—just six individuals, or 12.8%.

Table 2 . Frequency Distribution of Breastfeeding Techniques.

Breastfeeding Techniques	Frequency	Presentation
Correct	19	40.4
Wrong	28	59.6
Total	47	100

Of the 47 respondents, 19 (40.4%) employed the proper breastfeeding method, according to Table 2's frequency distribution of breastfeeding approaches among moms at the South Bulango Community Health Center. In the meantime, 28 (59.6%) breastfed incorrectly..

Table 3 . Frequency Distribution of Sore Nipples.

Sore Nipples	Frequency	Presentation
No Scratches	22	46.8
Scratches	25	53.2
Total	47	100

Table 3 displays the distribution of the frequency of sore nipples among respondents at the South Bulango Community Health Center. Of the 47 respondents, 25 (53.2%) were nursing moms who reported having sore nipples. In contrast, 22 individuals (46.8%) reported not having uncomfortable nipples. According to this statistics, over half of nursing moms experience painful nipples, which may be brought on by improper nursing practices or other causes. As a result, more care and education are needed to enhance the comfort and health of nursing mothers..

Bivariate Analysis

This study's bivariate analysis illustrates how breastfeeding practices and the prevalence of painful nipples at the South Bulango Health Center in 2025 are related.

Table 4 . The Connection Between the Frequency of Sore Nipples and Breastfeeding Methods.

		Nipples				Milk		Amount		P
										value
Breastfeeding Techniques	No	Scratches		Scratches		Scratches		Scratches		
	Scratches	F	%	F	%	F	%	F	%	

Correct	19	40.4	0	0	19	40.4	
Wrong	3	6.4	25	53.2	28	59.6	0.000
Total	22	46.8	25	53.2	47	100	

Table 4 illustrates the correlation between breastfeeding techniques and the prevalence of sore nipples among nursing mothers at the South Bulango Health Center. While no respondents who breastfed using the proper technique reported experiencing sore nipples, 19 mothers (40.4%) did not experience sore nipples. Respondents with the wrong breastfeeding technique and no sore nipples were 3 people (6.4 %), while respondents with the wrong breastfeeding technique and sore nipples were 25 people (53.2%).

This demonstrates that using the right breastfeeding practices greatly lowers the likelihood that nursing moms would experience painful nipples. A p-value of 0.000, which is less than α (0.05), was obtained via statistical testing utilizing the Chi-square test. This suggests that the prevalence of painful nipples among nursing moms at the South Bulango Health Center in 2025 is significantly correlated with proper breastfeeding procedures.

Proper breastfeeding technique includes good attachment, proper positioning, and proper breastfeeding to avoid excessive pressure and friction on the nipples. Correct technique significantly impacts maternal comfort and can prevent problems such as sore nipples . Incorrect technique can cause discomfort, irritation, and abrasions, which are not only painful but can also affect breastfeeding success and the mother's overall health (Ani, 2021).

A mother needs, and is even required to receive, support on proper breastfeeding techniques . Successful breastfeeding can be influenced by how the baby is positioned at the breast. Midwives can help establish proper breastfeeding positioning or demonstrate breastfeeding techniques (Sulymbona et al., 2021).

Other studies that corroborate the findings of this study include Mujenah (2023), "The relationship between breastfeeding techniques and the incidence of sore nipples in postpartum mothers at RSD dr. H. Soemarno Sosroatmodjo Tanjung Selor." According to this study, the mother's ability to produce breast milk is influenced by a number of factors, including the attachment of the baby's mouth and the breastfeeding position so that the baby can easily suck the nipple. Sore nipples are a phenomenon that mothers often experience, because they always think it is normal, especially for mothers who are breastfeeding for the first time, there are many factors that cause sore nipples.

Research by A. Rizky Amaliah, et al. (2023) titled "The Effect of Breastfeeding Techniques on Sore Nipples in Postpartum Mothers at Siti Fatimah Hospital Makassar" supports this study

by stating that improper breastfeeding techniques frequently result in sore nipples in nursing mothers. According to data, 56.4% of moms globally report having painful nipples, compared to 79.3% in Indonesia. The incorrect breastfeeding technique can result in nipple discomfort, breast enlargement, clogged milk ducts, breast abscesses, mastitis, and poor milk flow, all of which can hinder the development of breastfeeding.

Thus, these factors impact breast milk production. Specifically, most nipple pain is caused by improper breastfeeding techniques. This includes incorrect detaching, improper pulling, and improper breast care, such as incorrect massage or leaving the areola wet. Other factors include oral moniliasis, contact with the areola with soap, and this can occur in children with short tongues.

This research is in line with the research conducted by Yusrolana, et al (2023) with the title "The Relationship Between Breastfeeding Techniques and the Incidence of Sore Nipples in Postpartum Mothers in Sruni Village, Klakah District" claimed that 95% of infants globally have had breast milk at some point. However, just one infant (4%) in middle- and low-income nations has never been breastfed. According to Riskesdas statistics from 2018, only 37.3% of Indonesian infants are exclusively breastfed, while 70.2% of children in East Java Province are unable to breastfeed. 3.9% of children get separate care, 8.8% of children are taken from their mothers for medical reasons (4.6%), and 67.5% of moms fail to breastfeed because they don't know how to do it correctly, which can lead to painful nipples

research aligns with lactation theory, which states that breastfeeding success is significantly influenced by positioning and latch-on. Correct breastfeeding technique not only prevents sore nipples but also increases breast emptying effectiveness, thus maintaining milk production. This contributes to mothers' greater comfort while breastfeeding and increased motivation to exclusively breastfeed.

Additionally, the findings of this study corroborate earlier research that indicates breastfeeding instruction is essential for reducing breastfeeding issues in postpartum moms. Inadequate information and assistance from medical experts might raise the risk of improper nursing practices, particularly for primiparous moms. Thus, it is crucial to provide information and assistance on appropriate nursing practices during pregnancy and the postpartum period.

Based on the description above, researchers assume that the breastfeeding technique used by breastfeeding mothers is closely related to the occurrence of sore nipples. This is caused by incorrect breastfeeding techniques, such as an inappropriate latch, which can cause the baby to suck incorrectly, causing pain when the baby's mouth moves continuously. If left untreated, this pain can cause further soreness and lead to mastitis.

4. CONCLUSION

The following findings may be made in light of studies on breastfeeding methods, the prevalence of sore nipples, and the relationship between the incidence of painful nipples and the efficacy of proper breastfeeding procedures at the South Bulango Health Center in 2025:

1. Of the 47 breastfeeding mothers, 19 (40.4%) used the correct breastfeeding technique, while 28 (49.6%) used the incorrect technique. This indicates that although the majority of breastfeeding mothers use the correct technique, some still use the incorrect technique.
2. Of the 47 breastfeeding mothers, 25 (53.2%) experienced sore nipples, while 22 (46.8%) did not. The high incidence of sore nipples indicates a significant problem in breastfeeding practices, most likely caused by improper breastfeeding techniques.
3. The results of the analysis using the Chi-square statistical test showed a p-value = 0.000, which is smaller than α (0.05), indicating a significant relationship between correct breastfeeding techniques and the incidence of sore nipples.

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