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Oxytocin Massage to Increase Breast Milk Production During the Postpartum Period: A Case Study of Continuity of Care on Mrs. S in the Kuin Raya Community Health Center, West Banjarmasin

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ABSTRACT

Abstract: WHO and UNICEF show that global exclusive breastfeeding covarage increase from 52% in 2020 to 66,4% in 2024. Successful exclusive breastfeeding still faces various obstaclesThis condition can be influeced by several factors such as inappropriate breastfeeding techniques, the mother psychological condition strees, and lack of family and healthcare support. This study aims to identify and address issues of throug a midwifery care approach of Continuity of Care. This study used method with a case study approach that facueses on the application of midwifery care Continuity of Care for postpartum mothers experiencing difficulties in breast milk production. During the first postpartum visit, the mother experienced complaints of breast milk not being optimally produced, accompanied by anxiety. Examination results showed the breasts felt tense. Out through emotional support educati, oxytocin massage tecfniques, breastt care, as well as recommendations for meeting nutrition and rest needs. Breast milk production increased, and the mother's complaint gradually improed unti they were resoved. The implementation of midwifery care Continuity of Care for Mrs. S was effective addressing the irregularities in breast milk production. A combination of interventions, including oxytocin massage, breast care, psychological support, and education, was proven to help increase breast milk production.

Kata Kunci:

ASI,
Nifas,
Ketidakacaran ASI,
Kelangsungan Perawatan,
Pijat Oksitosin

Abstrak*: Data WHO dan UNICEF menunjukkan peningkatan cakupan pemberian ASI eksklusif secara global dari 52% pada tahun 2020 menjadi 66,4% pada tahun 2024. Keberhasilan pemberian ASI eksklusif masih menghadapi berbagai hambatan yang dapat dipengaruhi oleh faktor-faktor seperti teknik menyusui yang kurang tepat, kondisi psikologis ibu (stres), serta kurangnya dukungan keluarga dan tenaga kesehatan. Penelitian ini bertujuan untuk mengidentifikasi dan mengatasi permasalahan tersebut melalui pendekatan asuhan kebidanan yang berkelanjutan (Continuity of Care). Penelitian ini menggunakan metode studi kasus yang berfokus pada penerapan asuhan kebidanan berkelanjutan (Continuity of Care) bagi ibu pascasalin yang mengalami kesulitan dalam produksi ASI. Pada kunjungan pascasalin pertama, ibu mengeluhkan produksi ASI yang tidak optimal disertai rasa cemas. Hasil pemeriksaan menunjukkan kondisi payudara terasa tegang. Intervensi yang diberikan meliputi dukungan emosional, edukasi, teknik pijat oksitosin, perawatan payudara, serta anjuran pemenuhan kebutuhan nutrisi dan istirahat. Produksi ASI meningkat dan keluhan ibu berangsur membaik hingga akhirnya teratasi. Penerapan asuhan kebidanan berkelanjutan (Continuity of Care) pada Ny. S terbukti efektif dalam mengatasi masalah produksi ASI. Kombinasi intervensi—yang mencakup pijat oksitosin, perawatan payudara, dukungan psikologis, dan edukasi—terbukti membantu meningkatkan produksi ASI.*

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A. INTRODUCTION

Nearly nine out of ten mothers in Indonesia have experience breastfeeding, while only 49.8% provide full breastfeeding for six months as recommended by the World Health Organization (WHO). Limited coverage of exclusive breastfeeding can impact the quality of life of the nation's future generations and national economic growth. Breastfed babies have a higher level of development than formula-fed babies because breast milk contains important nutrients such as DHA and AA, which contribute to optimal brain growth (Feni Noviyani et al., 2024).

The international organizations WHO and UNICEF have shown that breastfeeding contributes to a 3-4 IQ point increase in cognitive development, a reduced risk of childhood obesity, and long-term protection against non-communicable diseases. The World Health Organization (WHO) and UNICEF are implementing various strategic approaches to support successful breastfeeding initiation by optimizing access to professional and competent public health services. These strategies include implementing the Ten Steps to Successful Breastfeeding, implementing the Baby-Friendly Hospital Initiative, strengthening the international code for marketing breast-milk substitutes, and implementing family-friendly policies such as paid maternity leave, providing lactation rooms, and providing flexible work (World Health Organization, 2025).

The Banjarmasin City Health Office stated that findings showed that the prevalence of exclusive breastfeeding in 2023 reached 67.6%, a figure that shows a decrease when compared to data from 2022. The local government has implemented a mother and toddler class program and meetings with Posyandu cadres to align perceptions in reducing the risk of stunting by providing exclusive breastfeeding(Dinas Kesehatan Kota Banjarmasin, 2023).

The author conducted interviews in the Kuin Raya Community Health Center's work area on February 28, 2026, and obtained data showing that the 2025 exclusive breastfeeding target was 73%, with an achievement of 62.1%. Health workers in the Kuin Raya Community Health Center's work area had conducted outreach during integrated health service posts (Posyandu) activities as an effort to achieve the exclusive breastfeeding target. These results demonstrate that outreach during Posyandu has not been very effective in achieving the exclusive breastfeeding target and requires additional, more optimal efforts.

The position and technique of attachment between the mother's breast and the baby are important elements in determining the success of exclusive breastfeeding. This can be influenced by proper attachment which will make it easier for the baby to suckle effectively (Desni Sagita et al., n.d.). Direct skin contact through placing the baby on the mother's chest in newborns allows the baby's innate instinct to encourage him to look for the mother's nipple, while the baby's sucking stimulation can trigger the release of the hormones prolactin and oxytocin which are involved in increasing the process of breast milk release (Nur Adkhana Sari et al., 2025)

The mother's psychological condition is a crucial component in determining the success of exclusive breastfeeding, as psychological stress and anxiety can inhibit milk production and release. Lack of support from family, healthcare professionals, and the social environment can also lead to early weaning. Cultural factors and the perception that breast milk is insufficient to meet the baby's needs also contribute to the mother's decision to wean early (Pratiwi Puji Lestari & Fika Aulia, 2024).Husband and family support are crucial in assisting with baby care and creating comfort for breastfeeding mothers (Ayu & Fauzi Ali Amin, 2026).

The author's efforts to address breast milk supply difficulties in postpartum mothers included providing psychological support in the form of encouragement and motivation to increase breastfeeding confidence, as well as demonstrating oxytocin massage techniques and proper breast care to Mrs. S's husband. These actions aim to stimulate oxytocin, which can help facilitate milk flow and strengthen the husband's involvement in helping achieve successful exclusive breastfeeding Continuity of Care (CoC) is a continuous and comprehensive service provided from pregnancy through childbirth, the postpartum period, and the use of contraception. This approach is intended to monitor the condition of the mother and baby and is considered to improve the quality of midwifery care, supporting optimal maternal and infant health services (Iva Gamar Dian Pratiwi et al., 2023).

B. RESEARCH METHODS

This study is based on a descriptive case study design that aims to explore the continuity of care midwifery care for Mrs. S. The research subjects were postpartum women with a focus on observation on the smoothness of exclusive breastfeeding during the postpartum period and breastfeeding. Data collection was carried out

through observation and midwifery care notes (SOAP). The research sample consisted of postpartum mothers who were monitored from pregnancy to delivery until the fourth postpartum visit. This study has obtained respondents' approval through informed consent before data collection was carried out.

C. RESULTS AND DISCUSSION

Continuous midwifery care was provided to Mrs. S from pregnancy, delivery, to the postpartum period in the Kuin Raya Community Health Center, Banjarmasin City. The author monitored the condition of the mother and neonate gradually until the last postpartum visit.

The results of the observation of the second day of postpartum visit (KF1) Mrs. S expressed anxiety and a desire to provide breast milk substitutes to the baby because her breast milk had not come out optimally and felt it was not sufficient for her baby's needs. This finding supports the theory that states that the mother's psychological condition influences the success of exclusive breastfeeding through the inhibition of the work of the hormone oxytocin which functions in the release of breast milk (Setiya Hartiningtiyaswati., 2025).

milk for their babies. This worry causes emotional stress that can interfere with the smooth breastfeeding process. The early postpartum period is a phase of adaptation for mothers to fulfill their role as breastfeeding mothers. Doubt and uncertainty about exclusive breastfeeding emerge during this period. A mother's psychological well-being is exacerbated when social support from the environment is suboptimal. Postpartum psychological stress exacerbates a mother's decreased confidence in exclusive breastfeeding (Sina et al., 2025).

Babies also exhibit an unstable sucking reflex early in life. Breastfeeding frequency is also insufficient to provide optimal stimulation for milk production in the first few days. This indicates that initial stimulation through sucking in infants is not yet optimal (Triveni Triveni et al., 2024)..Breast milk release is influenced by complex neural and hormonal stimuli involving prolactin and oxytocin. Ineffective sucking can reduce these hormonal stimulations, resulting in suboptimal milk production.

Oxytocin massage and educating Mrs. S about breastfeeding more frequently are interventions that can help address suboptimal breast milk production. This condition is usually related to inadequate stimulation of the hormone oxytocin, which plays a role in the milk release process, so additional stimulation through back massage is necessary. This stimulation can help oxytocin trigger the milk let-down reflex, resulting in a smoother milk flow in the early postpartum period (Feni Noviyani et al., 2024).

Husbands' support is also crucial in improving breastfeeding success. Husbands can provide comfort to mothers through emotional attention and simple physical assistance, such as gentle back and shoulder massages. This form of support can help mothers relax, thereby enhancing the hormonal response that contributes to milk production (Nurhayati et al., 2024).

This nurturing is also reinforced by the values of the Quran, which explain a mother's obligation to provide the right to breastfeed her child. This can encourage mothers to remain consistent and enthusiastic in providing breast milk as part of their parental responsibility. The belief that breastfeeding also has religious value (Quran 2:233).

An evaluation conducted the following day, at the second postpartum visit (KF2) on day 3, showed positive improvements in the mother's condition. Her milk production was steady and her milk letdown was well-established. She also showed greater confidence in breastfeeding her baby directly and regularly. This situation demonstrated that the previous interventions were effective in promoting breastfeeding.

The care provided aligns with midwifery service standards for postpartum monitoring, particularly in supporting the success of exclusive breastfeeding. Postpartum monitoring is conducted regularly to ensure the well-being of both mother and baby, as breast milk is the primary nutrient for infants, containing carbohydrates, protein, vitamins, and minerals that support the infant's growth and development (Khotimah et al., 2024).

A limitation of this research was that it involved only a single sample, thus limiting the overall picture. This prevented a broader and more in-depth understanding of the various factors that may influence breastfeeding success. Research with a larger sample size would likely be more helpful in providing a more comprehensive picture and could be used for evaluation and improvement of healthcare services.

The provision of midwifery care in this case illustrates that a mother's needs during the postpartum period extend beyond physical recovery after childbirth to include readiness to assume the maternal role. This role transition requires gradual adjustment, particularly regarding infant care and meeting the baby's nutritional

needs through breastfeeding. Consequently, communication between healthcare providers and the mother becomes a crucial component of the care process.

Therapeutic communication during visits helps create a comfortable environment for the mother to express any complaints, concerns, or difficulties she is experiencing. Providing information gradually, tailored to the mother's condition, enhances understanding without causing information overload. A mother-centered approach also allows her to participate in determining the interventions to be implemented during the course of care.

Applying the principle of "Continuity of Care" in this case is vital for maintaining consistent information across visits. A record of complaints, interventions performed, and the mother's progress serves as a basis for planning care during subsequent visits. This continuity enables healthcare providers to conduct more targeted evaluations and minimizes the risk of gaps in service delivery.

The mother's involvement in the care process is another important aspect to consider. She should not merely be a passive recipient of care but should understand the rationale and purpose behind each intervention. Such understanding empowers her to make informed decisions regarding her own health and that of her baby. Through appropriate information, demonstrations, and guidance, the mother can develop the independence needed to manage her own care during the postpartum period.

Postpartum care must also address signs that require further medical assessment. Mothers need to recognize abnormal conditions—affecting either themselves or their babies—to ensure prompt assistance if problems arise. Providing information on visit schedules, infant monitoring, self-care, and postpartum danger signs supports the safety and well-being of both mother and baby.

Continuous postpartum visits play a key role in ensuring a successful maternal adaptation process. Each visit serves as an opportunity to assess the mother's health progress, her ability to care for the infant, her readiness to breastfeed, and any ongoing educational needs. Such monitoring also enables healthcare providers to determine whether the mother requires additional support or a referral should any conditions falling outside normal parameters be identified.

The case of Mother S highlights the importance of an individualized approach to midwifery care. Every mother possesses unique experiences, psychological states, adaptive capacities, and needs during the postpartum period. Care tailored to individual conditions and needs ensures more appropriate service delivery compared to generic interventions that fail to account for the mother's specific circumstances.

The findings of this case study illustrate to healthcare providers the importance of conducting comprehensive assessments of postpartum mothers. Such assessments should encompass not only physical health but also psychological aspects, knowledge levels, infant care skills, environmental conditions, and family support. A comprehensive assessment facilitates the prioritization of issues and the formulation of a care plan aligned with the mother's specific needs.

The limited number of subjects in this case study means the findings cannot be generalized to represent the experiences of all postpartum mothers. Variations in individual characteristics can influence the adaptation process and the response to the care provided. Consequently, the study's results must be interpreted with caution, taking into account the specific conditions of the research subjects.

Future research could employ study designs involving larger sample sizes to yield more diverse data. Variables such as the mother's psychological state, family support, breastfeeding knowledge, rest patterns, nutritional status, and the infant's condition could be examined in greater depth. Investigating these factors would provide a broader understanding of the various elements contributing to successful breastfeeding during the postpartum period.

Applying the findings of this case study to midwifery practice is expected to enhance the quality of care for both mothers and infants. Key elements include continuity of care, effective communication, family involvement, and the provision of appropriate education.

D. CONCLUSIONS AND SUGGESTIONS

Based on a case study conducted by the author, with a case study approach regarding efforts to optimize breast milk production through oxytocin massage in Continuity of Care (CoC) care for Mrs. S in the working area of Kuin Raya Health Center, West Banjarmasin, it can be concluded that providing continuous care from the initial visit to the postpartum follow-up visit is able to identify problems with irregular breast milk production earlier and provide appropriate treatment earlier.

Mrs. S's case, her initial complaint of insufficient milk production, accompanied by breast tension and anxiety, was identified at the first visit. Treatments provided included oxytocin massage, breast care, education on breastfeeding techniques, recommendations for adequate nutrition and rest, and emotional support. After gradual and continuous monitoring, the mother's condition showed signs of improvement, with milk production returning smoothly and the previous complaints disappearing.

Health workers are expected to increase education on exclusive breastfeeding from pregnancy, including teaching oxytocin massage techniques and breast care, as these are highly effective in helping to increase breast milk production in postpartum mothers.

Implementing midwifery care based on the "Continuity of Care" model enables healthcare professionals to continuously monitor the mother's condition. Periodic monitoring assists professionals in identifying changes in the mother's health, evaluating the care provided, and determining appropriate interventions based on her specific needs. This continuous approach also fosters better communication between the mother and healthcare professionals, making it easier for the mother to voice concerns and obtain relevant information regarding postpartum care and breastfeeding.

Postpartum mothers are encouraged to improve their knowledge regarding breast care, proper breastfeeding techniques, and methods to maintain smooth breast milk production and flow. Regular breastfeeding tailored to the baby's needs should be maintained throughout the breastfeeding period. Adequate nutrition, hydration, and rest are essential for maintaining the mother's health. Mothers should consult healthcare professionals if they encounter breastfeeding difficulties or experience issues requiring further attention.

Families are expected to provide optimal support to the mother during the postpartum and breastfeeding periods. Such support can take the form of assistance with household chores, meeting the mother's needs, offering attention, and providing emotional support. The involvement of husbands and family members helps the mother feel calmer, more comfortable, and more confident in breastfeeding her baby.

Healthcare professionals are encouraged to enhance education regarding exclusive breastfeeding, starting from pregnancy through the postpartum period. Education on proper breastfeeding techniques, breast care, oxytocin massage, nutritional and fluid intake, and the importance of rest should be provided consistently. Clear and easily understandable information empowers mothers and their families to manage care independently at home.

Educational institutions are encouraged to use the findings of this case study as learning material to help students understand the application of continuous midwifery care. Topics such as oxytocin massage, breast care, breastfeeding techniques, and meeting the needs of postpartum mothers can be incorporated into the midwifery practical curriculum. The findings of this case study can serve as a reference to enhance students' understanding of the importance of the "Continuity of Care" approach in providing care to mothers and infants.

Future studies could delve deeper into the application of oxytocin massage to facilitate the flow of breast milk. Other factors influencing breast milk production and let-down could be examined more broadly to provide a more comprehensive overview. Employing more systematic research methods and a larger sample size could be considered to yield more robust results.

This case study demonstrates that providing continuous midwifery care—while attending to the mother's physical and psychological well-being—can support successful breastfeeding. Oxytocin massage, combined with education, breast care, emotional support, attention to nutrition and rest, and ongoing monitoring, can form part of a holistic approach to postpartum care for mothers.

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