

# OPTIMIZATION OF BREASTFEEDING DURING THE COVID-19 PANDEMIC

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# Abstract

The covid-19 pandemic is a serious problem that is facing the whole world. The pandemic has caused social restrictions that cause concern and stress for many people. The results of preliminary studies conducted on several breastfeeding mothers stated that during the Covid-19 pandemic, there were many mothers' concerns about continuing the process of breastfeeding babies directly. According to global data, the rate of exclusive breastfeeding is quite low, which is only 41 percent. In Indonesia itself, based on Basic Health Research data in 2018, shows that the rate of exclusive breastfeeding only reaches 30.2 percent. The number of exclusive breastfeeding rates, which are small globally and in Indonesia, has worsened with the COVID-19 pandemic. To overcome this, people need to be given health education about the importance of breastfeeding. This community service activity has been carried out from February to April 2021. The results of this activity have a positive impact on the community, especially on breastfeeding mothers.

Keywords: Breastfeeding, Pandemic, Breast Milk

# INTRODUCTION

The COVID-19 pandemic is a serious problem facing the whole world. One of the sectors affected is family resilience. The existence of a pandemic causes social restrictions that cause worry and stress for many people. With this pandemic, the psychological condition of breastfeeding mothers is disturbed. This pandemic situation has also made many breastfeeding mothers worry about breastfeeding their children (Widaryanti, 2021).

Since March 18, 2020, the World Health Organization (WHO) has recommended that women with COVID-19 continue to breastfeed their babies because the COVID-19 virus has not been found in breast milk so that mothers can continue breastfeeding their babies because the benefits of breastfeeding outweigh the risks of COVID-19 infection. -19. To support sustainable breastfeeding practices, UNICEF and WHO have developed guidelines on COVID-19 and breastfeeding. In these guidelines, WHO explains that in the first 6 months the child should only be given breast milk and continued until the child is 2 years old. Because breast milk contains complete and balanced nutrition that is easily digested by the baby's stomach (WHO, 2020).

Until now there has been no scientific evidence of the Covid-19 virus being detected in breast milk. However, what must be maintained for breastfeeding mothers is the correct breastfeeding technique and still using a mask, and washing hands before and after breastfeeding. Considering that the transmission of the Covid-19 virus is transmitted through the respiratory tract and the aerosols released by the patient enter the eyes, nose, and mouth of other people who are not affected (Kresnawati, 2020).

In line with the research results of Pereira et al. (2020) stated that newborns of mothers infected with Covid-19 have greater benefits if mothers breastfeed directly to babies with skin-to-skin (90.9%) by implementing strict health protocols.

Mothers who are declared infected with COVID-19 and want to breastfeed must always maintain respiratory health and use masks when breastfeeding, wash their hands before and after touching the baby, and regularly clean surfaces to kill germs and nipple surfaces before and after breastfeeding. The surface of the nipple can be cleaned by bathing more often or by applying breast milk to the nipple area before and after breastfeeding (WHO, 2020).

According to global data, the rate of exclusive breastfeeding is quite low at only 41 percent. In Indonesia, based on the 2018 Basic Health Research (Riskesdas) data, the rate of exclusive breastfeeding only reached 30.2 percent. The low number of exclusive breastfeeding rates globally and in Indonesia has worsened with the COVID-19 pandemic (Kemenkes RI, 2018).

The continuity of the breastfeeding process during the pandemic is influenced by various factors, including knowledge and attitudes. The results showed that almost all breastfeeding mothers (87.5%) had never received information about breastfeeding during the COVID-19 pandemic. This shows that the knowledge of breastfeeding mothers is still very lacking so it affects inappropriate breastfeeding behavior during the COVID-19 pandemic (Kusumaningrum, 2021).

The results of a preliminary study conducted on several breastfeeding mothers stated that during the COVID-19 pandemic, many mothers were worried about continuing to breastfeed their babies directly. This causes some mothers who experience signs of symptoms such as cough, runny nose, and sore throat, to decide to stop breastfeeding their children, for fear that their children will be infected. The mother's ignorance regarding the transmission of the Covid-19 virus is because the mother has not received information about the transmission of the virus through breast milk or the breastfeeding process. Therefore, it is very important to be given health education by carrying out community service activities to overcome the problems faced by partners, both knowledge about breastfeeding during a pandemic, how to breastfeed correctly, and the spread of the Covid-19 virus through breast milk. So that the mothers after being given counseling continue the process of breastfeeding their children without feeling anxious, but still paying attention to the health protocol.

### **IMPLEMENTATION METHOD**

This community service activity is carried out by a team of lecturers and students. The location of this service was carried out in Lolang Village, North Satar Mese District, Manggarai Regency. This activity was carried out for 3 months, from February to April 2022. The subjects in this service activity were breastfeeding mothers, totaling 25 people. The stages carried out in the implementation of service activities, include:

1. Preparation Stage

At this stage, administrative arrangements or permits are carried out at the Manggarai District Health Office. After that, it was followed up to Lolang Village, North Satar Mese District, Manggarai Regency. Furthermore, the team coordinated with midwives and health cadres to gather breastfeeding mothers and inform the schedule of activities.

2. Implementation Stage

Before the team gave health education, they gave pretest questions by distributing informed consent sheets and questionnaires to be filled out by participants. Furthermore, providing counseling about breastfeeding during the pandemic, demonstrating the correct way of breastfeeding. During the activity, the team and activity participants still pay attention to health protocols, namely all must wash their hands before entering the room and use hand sanitizer, and all must wear masks and keep their distance. Considering that those present during the activity were breastfeeding mothers, including their babies.

3. Evaluation Stage

At this stage, the team evaluates the process of service activities that have been carried out from beginning to end and conducts evaluations and discussions with participants giving posttest questions and re-practicing how to breastfeed correctly. This was done to determine the extent of the participants' understanding of lactation management during the COVID-19 pandemic and the mother's skills regarding correct breastfeeding techniques. Furthermore, the questionnaire data and the results of the pre-test and post-test were analyzed using SPSS.

# **RESULTS AND DISCUSSION**

# a. Results

Table 1. Results of 1 recest and 1 ostest on Exclusive Dreastreeuing							
Category	Pretest		Posttest				
	Frequency (N)	Percentage (%)	Frequency (N)	Percentage (%)			
Well	9	36	22	88			
Not enough	16	64	3	12			
Total	25	100	25	100			

#### Table 1 Results of Pretest and Posttest on Exclusive Breastfeeding

Table 1 shows that the posttest results on exclusive breastfeeding were mostly good (88%), compared to the pretest results. This shows that after being given health education, respondents understand exclusive breastfeeding.

Table 2. Results of Pretest and Posttest on the Right Way of Breastfeeding							
Category	Pretest		Posttest				
	Frequency (N)	Percentage (%)	Frequency (N)	Percentage (%)			
Well	8	32	21	84			
Not enough	17	68	4	16			
Total	25	100	25	100			

Table 2 shows that the posttest results on the correct way of breastfeeding were mostly good (84%), compared to the pretest results. This shows that after being given health education, respondents understand the correct way to breastfeed.

Table 5. Results of Freest and Fostest on freath Freeton						
Category	Pretest		Posttest			
	Frequency (N)	Percentage (%)	Frequency (N)	Percentage (%)		
Well	10	40	20	80		
Not enough	15	60	5	20		
Total	25	100	25	100		

Table 3. Results of Pretest and Posttest on Health Protocol

Table 3 shows that the post-test results about the health protocol are mostly good (80%), compared to the pretest results. This shows that after being given health education, respondents understand health protocols that must be considered before breastfeeding a baby.

# **b.** Discussion

This community service activity has a positive impact on the community, this shows an increase in community knowledge and can be seen from the results of the pretest and posttest. Where in the post-test results, most of the mothers got good knowledge, because mothers had been given health education through counseling about exclusive breastfeeding, the correct way to breastfeed during a pandemic.

This is in line with the theory that states that knowledge is the result of knowing and this occurs after people have sensed a certain object. Sensing occurs through the five human senses, namely the senses of sight, hearing, smell, taste, and touch. Knowledge is a very important domain in shaping one's actions (overt behavior). Knowledge is also the result of remembering something, including recalling events that have been experienced either intentionally or unintentionally and this happens after people make contact with or observations of a certain object (Mubarok, 2011).

# CONCLUSION

This community service activity concludes that there are differences in the knowledge of the respondents seen from the results of the pretest and posttest. This shows that the existence of this PKM activity can help government programs to provide education to the public about the spread of the covid-19 virus, so that people, especially breastfeeding mothers, continue the breastfeeding process without feeling worried, because the covid-19 virus cannot be infected through mother's milk. However, mothers also pay attention to health protocols such as using masks, washing hands, and before breastfeeding, mothers need to clean their breasts and nipples. In addition, this PkM activity increases mothers' knowledge about exclusive breastfeeding and the correct way of breastfeeding to overcome problems such as sore nipples. Because one of the factors that cause sore nipples is the wrong way or position of breastfeeding.

# REFERENCES

Kemenkes RI. (2018). Riset Kesehatan Dasar. Jakarta.

Kusumaningrum, A. T. (2021). a Faktor-Faktor Yang Mempengaruhi Pola Menyusui Pada Masa Pandemi Covid-19. *Jurnal Ilmiah Kesehatan Media Husada*, 10(1), 74–81. https://doi.org/10.33475/jikmh.v10i1.259

Kresnawati, Windhi. 2020. Webinar Pemberian ASI di masa Pandemi. https://www.ibi.or.id/

Mubarak. (2011). Promosi Kesehatan Untuk Kebidanan. Jakarta: Salemba Medika

- Pereira, A., Melguizo S.C., Adrien M., Fuentes L., Marian E., Forti A and Median T.P.(2020). Breastfeeding mothers with COVID-19 infection: a case series. *International Breastfeeding Journal*, 15(1), pp. 1–8. doi: 10.1186/s13006-020-00314-8.
- WHO. (2020). Breastfeeding advice during the COVID-19 outbreak. <u>http://www.emro.who.int/noncommunicable-diseases/campaigns/breastfeeding-advice-</u> <u>during-thecovid-19-outbreak.html.</u> Accessed 6 Jul 2020.
- Widaryanti, Rahayu. (2021). Pendampingan Ibu Menyusui Pada Masa Pandemi COVID-19 Guna Menjaga Ketahanan Keluarga. *Jurnal Pancajana Jurnal*, 2(1), pp 1-8.