

EDUCATION OF LACTATION PREPARATION IN PREGNANCY FOR THE SUCCESS OF EXCLUSIVE BREASTFEEDING, AT THE HEALTH SERVICE CENTER, JOHAR BARU, CENTRAL JAKARTA

Agustina Ida Pratiwi ¹, Ni Nyoman Sri Artina Dewi ^{2*}, Dyah Woro Kartiko Kusumo Wardani ³, Dewi Novita Sari Suhaid ⁴, Eviyani Margaretha Manungkalit ⁵, Lorensia Panselina Widowati ⁶, Yetty Leoni Irawan ⁷, Baharika Suci Dwi Aningsih ⁸

Sekolah Tinggi Ilmu Kesehatan Sint Carolus, Jakarta ¹ <u>komang.artina@gmail.com</u>, ^{2*} <u>agustinap56@gmail.com</u>, ³ <u>dyahworo0@gmail.com</u>, ⁴ <u>dewinovitasarisuhaid@gmail.com</u>, ⁵ <u>evikalit@gmail.com</u>, ⁶ <u>lorensiapw@gmail.com</u>, ⁷ <u>yettyirawan@gmail.com</u>, ⁸ <u>baharika.suci@gmail.com</u>

Abstract

Lactation / Breastfeeding is a natural process for a woman, but it is vital to prepare in order to achieve the success of exclusive breastfeeding. Indonesian Health Profile (2018) shows that exclusive breastfeeding coverage in Indonesia is 65.16%, falling short of the target of 80%. Only 42% of the 135 million babies born each year are nursed during the first hour of life, 38% exclusively breastfeed for the first six months, and 58% continue to breastfeed until the age of two. The dearth of information among mothers about exclusive breastfeeding and the absence of assistance from medical professionals in this area are two influential factors. Breast milk is a critical source of nutrition and energy for sick people, and it improves infant development, lowers morbidity and mortality, and lowers the risk of chronic diseases. Breastfeeding also improves the health and happiness of mothers, lowers the incidence of ovarian and breast cancer, and conserves resources for both families and the country (WHO, 2021). The method used in this activity is to educate pregnant women and their families on the value of getting ready for lactation during pregnancy. Following counseling, there was an increase in knowledge about pregnancy-related lactation preparation.

Keywords: Exclusive Breastfeeding, Education, Lactation.

INTRODUCTION

Lactation or breastfeeding is a natural process, but very often these mothers are not successful in this process so they fail to give exclusive breastfeeding. To be able to carry out the breastfeeding process smoothly, mothers need knowledge and assistance so that the breastfeeding process can be carried out successfully. Some of the factors that inhibit mothers from not being able to breastfeed are that breast milk is not produced sufficiently, or the baby does not want to suckle. In addition, improper and good breastfeeding methods can cause interference with the mother's nipples. (Fauziah, F. 2019).

Lactation preparation is all efforts made to help mothers achieve breastfeeding success. Preparation for lactation is carried out through 3 stages, namely during pregnancy, during childbirth and during breastfeeding until the child is 2 years old. To meet the needs of the baby, the mother during pregnancy must have received information regarding lactation. From the results of interviews conducted with patients at PMB Istri Yuliani in the study Luthfiyati, Y., & Widaryanti, R. 2019 said that from the results of interviews with 5 pregnant women, 3 of them said that they did not understand about preparation for lactation in pregnant women

Breast milk is a good and ideal food for growing babies. Breast milk helps children grow, prevents malnutrition, improves brain development, and reduces the risk of children becoming overweight. Breastfeeding is also a newborn's first vaccine, and can provide immunity. (Seftia, B. A., Novianti, N., & Maryani, D. 2020). Lactation itself is an integrated part of the reproductive process by providing natural baby food and is the biological and psychological basis needed for growth. Exclusive breastfeeding is one way to prevent infant mortality and can improve the quality of the nation's next generation. (Luthfiyati, Y., & Widaryanti, R. 2019), (Fauziah, F. 2019)

The efforts made by the government in the success of exclusive breastfeeding are to hold programs that are carried out routinely by the health team such as health workers at the puskesmas in the form of: pregnant women's classes and counseling activities. Some of the things that hinder exclusive breastfeeding from the results of research by Arifin, 2017 in Febrina, R. (2022) are work, knowledge, family support and health worker support.

Based on the 2018 Indonesian Health Profile, exclusive breastfeeding coverage in Indonesia is 65.16%, which is still below the target of 80%. Of the 135 million babies born each year, only 42% are breastfed within the first hour of life, 38% of mothers exclusively breastfeed for the first six months, and 58% of mothers continue to breastfeed until the age of two. Based on the results of the 2018 Riskesdas, the proportion of breastfeeding patterns in infants aged 0-6 months in Indonesia was 37.3% exclusive breastfeeding, 9.3% partial breastfeeding, and 3.3% predominant breastfeeding (breastfeeding but had given water or other drinks) (Seftia, B. A., Novianti, N., & Maryani, D. 2020).

Lactation preparation is an effort made to help mothers optimize the breastfeeding process that will be carried out. The formation of breast milk has started since the beginning of pregnancy. The nutritional status of the mother in pregnancy affects the lactation process. Theory says that breastfeeding preparation since pregnancy is important. Mothers who prepare for breastfeeding early on will be better prepared to breastfeed their babies. Midwives who provide services at various service facilities such as community health centers, independent midwife practices, hospitals, clinics, and others, need to facilitate breastfeeding preparation guidance classes, to support the success of breastfeeding and breastfeeding. (Seftia, B. A., Novianti, N., & Maryani, D. 2020).

One of the causes of the failure of exclusive breastfeeding is due to a mother's lack of preparation in providing breast milk so that problems arise. Preparation for breastfeeding should begin when the mother is physically pregnant by paying attention to nutrition, getting enough rest, and preparing the breasts by doing breast care. Psychological preparation by believing that she is ready to breastfeed, able to produce enough milk for her baby, and getting support from the surrounding environment and health workers. The problem that often arises in breastfeeding failure is the physical unpreparedness of the mother, for example, the nipples that do not

protrude and the mother's concern to be able to meet her baby's breast milk needs for this reason, since in the pregnancy stage the mother must have received information and support from family and health workers. (Luthfiyati, Y., & Widaryanti, R. 2019).

From research conducted by several people related to the impact of breast milk preparation on the breastfeeding process, it shows that this counseling activity is very beneficial to changes in pregnant women's knowledge about IMD and exclusive breastfeeding as well as breast care and correct breastfeeding techniques. This is evidenced by the p value at the first counseling of 0.000 which means there is an effect of IMD counseling and exclusive breastfeeding on increasing the knowledge of pregnant women. (Luthfiyati, Y., & Widaryanti, R. 2019). Similar research conducted by Anggraeni, F. D., & Rachmawati, D. (2022). showed that lactation preparation in TM III pregnant women at Asih Waluyo Jati Clinic, Bantul, Yogyakarta before being given education was mostly in the low category (66.67%). While mothers who have been given education are mostly in the high category 52.38%.

The Johar sub-district community health center is located in the middle of the city in the central Jakarta area, but there are still many problems related to exclusive breastfeeding. Based on the situation analysis above, it is important for the community to know about lactation preparation during pregnancy so that when the baby is born the mother is physically and psychologically prepared to breastfeed her baby. If since pregnancy the mother has prepared herself to face the lactation process, there will be no problems in lactation later.

IMPLEMENTATION METHOD

This community service activity began by coordinating with the midwife coordinator of the Johar Baru sub-district health service center, then continued with planning by preparing a proposal with a problem assessment of the counseling theme. This activity includes preparation of proposals, agreement on the time of implementation, preparation of materials and activity schedules. This stage was carried out starting from February 22, 2022 until H-1 of implementation (June 22, 2022).

The next stage is to create a group together with the target that will use the Whatsapp application to build trust and facilitate the target in asking questions related to the preparation of the implementation until the monitoring and evaluation stage.

The next phase is implementation, which is scheduled to begin on June 23, 2022 at 13:00 and end using the Zoom Cloud Meeting platform. "Lactation Preparation in Pregnancy" is a counseling activity.

At the time of the implementation of expansion activities. The activity lasted 90 minutes and was divided into three phases. The first phase is the opening, with 15 minutes for the opening, comments from the coordinating midwife, registration and filling out a Google form with participants' identity details, and the provision of pre-test questions. Next comes the core phase, which is the provision of 15-minute consultation material by speakers professionals on the subject of breast structure and breast care. The final phase is the final phase, lasting 30 minutes, consisting of a question and answer session, the distribution of g-forms as part of the knowledge assessment post-test, and the distribution of door prizes to the public that adequately answer the questions asked can. The activity ended with a closing prayer



Figure 1. Greeting from the Coordinator Midwife

A midwife representative from the Puskesmas of the Johar Baru District officially launched the counseling, which had the theme of "Lactation Preparation in Pregnancy," and she then turned control of the following activity over to the host of community service projects.



Figure 2. The opening by the host

Host consisted of introductions and readings of the Counseling Rules, as well as attendance lists and completing the Pre-test. The pre-test was administered online using the Google Forms tool, which was made available to participants via the Zoom chat room at https://forms.gle/We7Mvuwj4T71vkWb7 Link. The pre-test questions can be completed in 10 minutes.

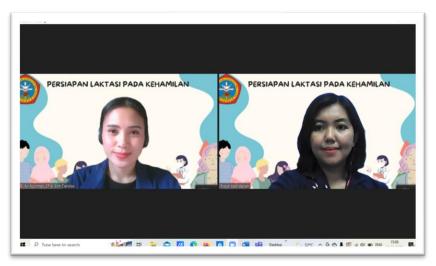


Figure 3. Welcome and introduction of the speakers to all counseling participants

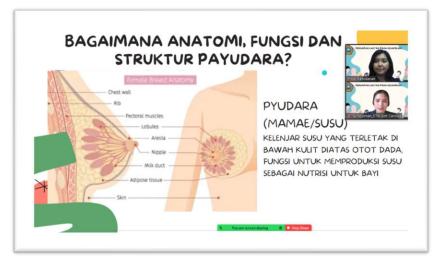


Figure 4. Explanation of the anatomy, structure and function of the breast



Figure 5. Preparation for lactation during pregnancy



Figure 6. Discussion (Question & Answer Sessions)



Figure 7. Dorprice and closing prayer

RESULTS AND DISCUSSION

Community service projects are completed successfully. On June 23, 2022, at 15.00 WIB, community service activities are conducted. The counseling participants were pregnant women in the working area of the health service center of Johar Barut, total of 36 pregnant women from the Johar Baru District's health service facility participated in the counseling session.

Table 1. Table Frequency Distribution of Extension Participant Profile Based on
Condon and A co

Gender and Age			
Variables	Ν	%	
Gender			
Female	36	100 %	
Age (in years)			
<20 years	1	2,78	
20-35 years	25	69,44	
>30	10	27,78	

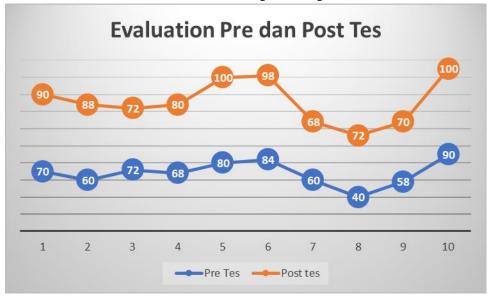


 Table 2. Resul evaluation pre dan post tes

The final result of this education is an evaluation by providing questions that can be answered through gform. of the 10 questions that have been filled in, the results of increased knowledge are seen from the increasing scores given by counseling participants, which can be seen from the table above.

CONCLUSION

Community service in partnership with Johar Baru District Community Health Center is going well. The counseling participants were pregnant women in the work area of the Community Health Center, Johar Baru district, a total of 36 participants. The counseling material provided comprehensively covers breast anatomy and breast care during pregnancy. The process went very well, as the results of the participant assessment showed, there was an increase in knowledge after the consultation.

REFERENCES

- Anggraeni, F. D., & Rachmawati, D. (2022). Pengaruh Edukasi Pijat Oxitoxin Dengan Persiapan Laktasi Pada Ibu Hamil Tm Iii Di Klinik Asih Waluyo Jati, Bantul, Yogyakarta. Jurnal Kebidanan, 68-74.
- Fauziah, F. (2019). Gambaran Persiapan Laktasi pada Ibu Hamil di Poli Kebidanan Rumah Sakit Umum Daerah Dr. Zainoel Abidin Banda Aceh. *Jurnal Aceh Medika*, *3*(1), 1-11.
- Febrina, R. (2022). Persiapan Laktasi pada Ibu Hamil di Puskesmas Pakuan Baru Kota Jambi. *Jurnal Abdimas Kesehatan (JAK)*, 4(1), 17-20.
- Luthfiyati, Y., & Widaryanti, R. (2019, November). Persiapan Laktasi pada Ibu Hamil untuk Mencegah Masalah dalam Pemberian ASI Eksklusif di PMB Istri Yuliani Sleman. In *Prosiding Seminar Nasional Multidisiplin Ilmu* (Vol. 1, No. 2, pp. 74-79).
- Putri, S. K. (2018). Gambaran Pengetahuan Ibu Hamil Trimester Iii Tentang Persiapan Laktasi Di Puskesmas Kertasari Kabupaten Bandung Tahun 2018.

Pratiwi, A. I., ... & Wicaksono, D. (2022). Pengantar Promosi Kesehatan. Pradina Pustaka.

- Pratiwi, A. I., & Irawan, Y. L. M. (2022). Peningkatkan Kesehatan Ibu dan Janin Selama
 Kehamilan di Puskesmas Kecamatan Johar Baru Jakarta pada masa Pandemi Covid-19. *Indonesia Berdaya*, 3(2), 315-322.
- Seftia, B. A., Novianti, N., & Maryani, D. (2020). Implementasi Manajemen Persiapan Laktasi. *Journal Of Midwifery*, 8(2), 15-23.
- Nurhidayah, N. (2021). Fisiologi Laktasi. Manajemen Laktasi Berbasis Evidence Based Terkini, 1-20.
- Manungkalit, E. M., Pratiwi, A. I., Suhaid, D. N., & Irawan, Y. L. (2023). Faktor-Faktor yang Berhubungan dengan Perilaku Perawatan Payudara pada Ibu Post Partum. *PROMOTOR*, 6(2), 73-79.
- Wijayanti, A. R., & Komariyah, S. (2018). Pengetahuan Persiapan Laktasi bagi Primigravida di Wilayah Puskesmas Tiron Kecamatan Banyakan Kabupaten Kediri. Jurnal Kebidanan, 7(2), 131-139.