

BREAST CARE FOR BREASTFEEDING PREPARATION DURING THE COVID-19 PANDEMIC IN JOHAR BARU VILLAGE 2

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Abstract

The COVID-19 pandemic has limited face-to-face health education, including for pregnant women who need information about breastfeeding preparation. One important aspect of successful breastfeeding is breast care during pregnancy. This community service activity aims to increase pregnant women's knowledge about breast care in preparation for breastfeeding through online counseling. The activity was carried out in Johar Baru Village, Central Jakarta, targeting 9 pregnant women. The activity methods included counseling through Zoom Cloud Meeting and mentoring through WhatsApp Group. Evaluation was conducted using pre-tests and post-tests to measure the increase in participants' knowledge. The results of the activity showed a significant increase in the level of knowledge of pregnant women, with an average pre-test score of 61.1 and a post-test score of 87.8, representing an increase of 43.7%. Participants gained a better understanding of proper breast care techniques and their benefits in facilitating milk production and preventing lactation disorders. This online counseling activity proved to be effective in increasing the knowledge of pregnant women and became an alternative form of practical health education during the pandemic. It is hoped that similar activities can be carried out continuously to support the success of the exclusive breastfeeding program and improve the quality of health of mothers and babies in the community.

Keywords: Breast Care, Pregnant Women, Breastfeeding, Online Counseling, COVID-19 Pandemic

INTRODUCTION

Breast milk is the most ideal natural source of nutrition for infants because it contains complete nutrients, antibodies, enzymes, and immunological factors that play an important role in the growth and immunity of infants. The World Health Organization (WHO) recommends exclusive breastfeeding for the first six months of life to ensure optimal growth, development, and health of infants. (1) Exclusive breastfeeding has been shown to reduce infant morbidity and mortality, particularly due to respiratory tract infections and diarrhea. (1)

Despite various policies enacted by the government, the coverage of exclusive breastfeeding in Indonesia has not yet reached the national target. Based on data from the 2021 Indonesian Basic Health Research (Riskesdas), the proportion of infants aged 0–5 months who

are exclusively breastfed has only reached 70%, while the target of the National Medium-Term Development Plan (RPJMN) is 80%. This low achievement indicates that there are still challenges in the breastfeeding process, both from the physiological and psychosocial aspects of mothers. (2)

One important factor contributing to successful breastfeeding is the mother's preparedness during pregnancy, including breast care. Breast care is a preventive measure aimed at maintaining hygiene, strengthening the muscles around the breasts, stimulating the growth of mammary glands, and preparing the nipples so that they are easy for the baby to suck. (3) Research by Trisnawati and Distrilia (2018) states that pregnant women who receive education and perform regular breast care are 2.5 times more likely to successfully provide exclusive breastfeeding compared to those who do not perform breast care. Thus, education about breast care is an important part of antenatal counseling that every pregnant woman should receive. (4)

The COVID-19 pandemic that has been ongoing since 2020 has had a significant impact on the healthcare system, including antenatal care (ANC) services. Social restrictions and concerns about virus transmission have led to a decline in visits by pregnant women to healthcare facilities. According to a report by the DKI Jakarta Health Office (2021), around 30% of pregnant women in the DKI area postponed their pregnancy check-ups during the pandemic, which limited their access to maternal health education, including breast care education. This condition has the potential to reduce mothers' readiness to breastfeed and affect the achievement of exclusive breastfeeding in the future. (5)

As a form of adaptation to this situation, innovation is needed in the delivery of health education that remains effective but does not pose a risk of transmission. One strategy that can be applied is online health education using digital media such as Zoom Meetings and WhatsApp Groups. Online media allows for two-way interaction between health workers and participants, and can reach a wider audience at an efficient cost. (6)

In line with this, the Midwifery Study Program at STIK Sint Carolus carried out community service activities aimed at providing education to pregnant women regarding breast care as preparation for breastfeeding during the COVID-19 pandemic. This activity employed an interactive online counseling method via Zoom Cloud Meeting with the aid of visual media such as infographic slides and demonstration videos. Through this activity, it is expected that there will be an increase in the knowledge, attitudes, and skills of pregnant women in breast care, as well as heightened awareness of the importance of preparing for breastfeeding during the antenatal period. In addition, this activity is expected to serve as a model for community empowerment based on digital education in the field of maternal and child health, which is relevant to national policy directions in supporting the Healthy Living Community Movement (GERMAS) and the First 1000 Days of Life (HPK) program. By utilizing information technology, healthcare workers can continuously provide effective and sustainable educational services, both during the pandemic and post-pandemic, to support the success of the exclusive breastfeeding program and the improvement of maternal and infant health in Indonesia.

This community service activity was carried out by a team of lecturers and midwifery students from STIK Sint Carolus with the aim of educating pregnant women about breast care in preparation for breastfeeding during the COVID-19 pandemic. Through this activity, it is hoped that there will be an increase in the knowledge, awareness, and skills of pregnant women

in caring for their breasts so that they can support the success of exclusive breastfeeding. This activity is also expected to serve as a model for community empowerment based on digital education in the field of maternal and child health.

METHOD

This community service activity was carried out over one day, with assistance provided from November 9 to 20, 2023, held online in the Johar Baru 2 sub-district, DKI Jakarta. The target of the activity was pregnant women in their second and third trimesters who were registered in the Johar Baru 2 sub-district health center working area, involving lecturers, students, and health cadres as activity partners.

The activity consisted of three main stages, namely:

1. Stage I - Participant Data Assessment

Data collection was conducted through Google Forms to obtain information on participant identity, gestational age, and medical history. This assessment aimed to map the educational needs and readiness of participants in participating in online activities.

2. Stage II - Formation of Assistance Groups

After the initial assessment, participants were placed in a WhatsApp group called “Counseling and Support for Breast Care in Pregnant Women.” This group served as a medium for interactive communication and consultation between participants and the implementation team. Through this group, participants could ask questions, share experiences, and receive direct guidance from resource persons.

3. Phase III – Online Counseling (Zoom Cloud Meeting)

The main counseling session was held via Zoom Cloud Meeting with the topic “Breast Care for Pregnant Women.” The material was presented by the team. The activity was interactive, using lectures and two-way discussions, and was supplemented with PowerPoint (PPT) materials and demonstration videos on breast care techniques. Before and after the activity, participants filled out pre-tests and post-tests via Google Forms to assess their knowledge improvement.

Additionally, a consultative mentoring session was conducted by the team via WhatsApp messages. This activity provided participants with the opportunity to consult personally regarding challenges in breast care during pregnancy.

RESULTS

The results of the community service activities were carried out through pre-tests and post-tests to assess the increase in pregnant women's knowledge about breast care. Before the activity, the average knowledge score of the participants was 61.1, indicating that most pregnant women had not properly understood the techniques or benefits of breast care. After being given online counseling via Zoom Cloud Meeting using an interactive lecture method and visual presentation, the average post-test score increased to 87.8. Thus, there was a knowledge increase of 26.7 points, resulting in a 43.7% improvement.

This increase confirms that interactive online education has a positive impact on improving the knowledge of pregnant women. Participants gain a better understanding of the

correct breast care steps, such as gentle circular massage, cleaning of the areola and nipple areas, as well as exercises for flat or inverted nipples. This knowledge is important because, physiologically, breast care can facilitate milk flow, prevent blocked milk ducts, reduce the risk of breast engorgement, and prepare the breasts for optimal breastfeeding. These findings are in line with the research of Trisnawati and Distilia (2018), which stated that structured breast care education can enhance mothers' readiness for breastfeeding. (4)

The results of this community service are also in line with the community service activities conducted by Widyaningsih and Fitriani (2021), who reported an increase in pregnant women's knowledge about breast care from an average of 60.4 to 85.2 after receiving online education. Both activities demonstrate that digital-based learning can significantly enhance participants' understanding, especially during the COVID-19 pandemic, which limits face-to-face interaction. (7)

Furthermore, the study by Nasution, Siregar, and Marpaung (2022) reinforces this finding by showing that a digital technology-based health education model increases pregnant women's participation by more than 40% compared to conventional methods. Therefore, online counseling approaches can serve as an effective, flexible, and efficient innovation for sustainable education in maternal and child health promotion activities, both during and after the pandemic. (6)

The results of this activity indicate that online-based counseling has a significant positive impact on increasing pregnant women's knowledge regarding breast care. These results are in line with various studies that confirm health education through a digital approach can enhance learning effectiveness, especially in the context of public health promotion. Observations during the activity showed that participants were very enthusiastic in attending the counseling, with most actively asking questions about common breast issues experienced during pregnancy, such as flat nipples, pain, and pre-lactation fluid discharge.

Some participants admitted that they had never received education about breast care, either from healthcare professionals or digital sources, before this activity. After the activity, almost all participants stated that the material presented was easy to understand, practical, and relevant to their condition. In addition to increasing knowledge, this activity also had an impact on attitude changes and readiness. Feedback results showed that 8 out of 9 participants (88.9%) were committed to performing routine breast care at home, 7 participants (77.8%) stated they would share information with other pregnant women in their surroundings, and 9 participants (100%) rated the online method as easy to follow and enjoyable. From an implementation perspective, this activity also demonstrated that online media such as Zoom Cloud Meeting can serve as an effective educational tool, especially in areas with limited mobility or far from healthcare facilities. The use of visual media (videos and infographic slides) facilitated participants' understanding of breast care concepts and practices.

This counseling not only increases knowledge but also enhances the self-efficacy (confidence) of pregnant women in performing breast care. According to Bandura (1997), self-confidence in one's own abilities is an important factor that influences a person's success in adopting new behaviors, including health behaviors. This activity also supports the policy of the Ministry of Health of the Republic of Indonesia regarding the strengthening of the Healthy Living Community Movement (GERMAS) and the First 1000 Days of Life program, where educating pregnant women becomes one of the important pillars to improve maternal and infant

health. Overall, this activity not only increases knowledge but also fosters motivation and awareness among pregnant women to independently carry out breast care at home. This indicates that community service based on digital education is capable of providing a tangible impact on the readiness of breastfeeding mothers, as well as serving as an alternative solution in supporting the success of exclusive breastfeeding programs in the community.

CONCLUSION

The online educational activity on breast care in preparation for breastfeeding for pregnant women in Johar Baru Village went well and received positive responses from all participants. The evaluation results showed a significant increase in knowledge, with an average pre-test score of 61.1 increasing to 87.8 on the post-test after the activity. This indicates that the education was effective in increasing pregnant women's understanding of the importance of breast care from the third trimester as an effort to prepare for milk production and prevent lactation problems.

In addition to increasing knowledge, this activity also encouraged changes in attitude and readiness among pregnant women to practice breast care independently at home. The use of online media such as Zoom Cloud Meeting and WhatsApp Group proved to be an effective and adaptive alternative in providing health education during the COVID-19 pandemic.

This activity is expected to become a model for sustainable education for health workers and cadres in providing counseling to pregnant women, thereby contributing to increased breastfeeding success and the quality of maternal and infant health in the community.

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