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COMMUNITY SERVICE DATA

PkM Title	**: Socialization to Postpartum Mothers by Providing Exclusive Breast Milk in Bangun Rejo Village in 2024**
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Organizer	: STIKes Mitra Husada Medan
Activity Categories	: Community service
PkM Proposed Year	: 2024
Year of Activity	: 2024
ActivityLocation	: Bangun Rejo Village, Tanjung Morawa District, Deli Regency Serdang
Source of PkM Funds	: STIKes Mitra Husada Medan Foundation

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SUMMARY

Breastfeeding from an early age has a positive impact on both mother and baby. For babies, breast milk has an important role in supporting growth, health and survival because breast milk is rich in nutrients and antibodies. Breast milk contains white blood cells, proteins and immune substances that are suitable for babies. Breastfeeding behavior in mothers can reduce morbidity and mortality because the breastfeeding process will stimulate uterine contractions thereby reducing postpartum bleeding (Ministry of Health of the Republic of Indonesia, 2013). Exclusive breastfeeding is not optimal due to many factors, namely the mother's lack of knowledge about breast milk, working mother, lack of support from family and environment. Another cause is that the role of health workers directly related to childbirth has not fully assisted in the implementation of early initiation of breastfeeding (IMD) and exclusive breastfeeding (Dinkes, 2019). Breast milk is the best food for babies. The breastfeeding program is a priority program, because it has a broad impact on the nutritional status and health of toddlers. The Ministry of Health is targeting an increase in the target of exclusive breastfeeding to 80%. However, exclusive breastfeeding in Indonesia is still low. Achievement of exclusive breastfeeding in Indonesia is only 74.5% (Balitbangkes, 2019). The impact of not giving breast milk is that it contributes to the infant mortality rate due to poor nutritional status which affects the baby's health and the baby's survival. If the baby is not given exclusive breast milk, this will increase the giving of formula milk to the baby. This statement is supported by the results of Siregar's research in 2004 which showed that exclusive breastfeeding was influenced by various factors, including breast milk not coming out immediately after giving birth/lack of milk production, difficulty for the baby to suckle, the condition of the mother's nipples not being supported, the mother working and the influence promotion of breast milk substitutes (Lestari, 2018).

Key Words: breast milk, exclusive breastfeeding, early initiation of breastfeeding

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INTRODUCTION

A. Analyze the situation

Breastfeeding is giving food to the baby directly from the mother's breast. It is important to know about initial difficulties so that they can be resolved immediately in an effort to establish a good relationship between mother and baby. Mothers who breastfeed sometimes stop the breastfeeding process too early for the reason that primiparous mothers, where in the beginning breastfeeding is not an easy thing for mothers to do, will feel stressed and eventually the desire to give up can occur so that mothers start to think about replacing breast milk with formula milk to fulfill their needs. the baby's needs (Werdayanti, R, 2013).

According to basic health research data (Riskesdes, 2013) shows that breast milk coverage in Indonesia is only 42%. The process of starting breastfeeding most often occurs 1-6 hours after birth (34.5%). Meanwhile, the lowest start of breastfeeding occurs 7-23 hours after birth, namely (3.7%). Coverage of exclusive breastfeeding for babies aged 0-6 months according to provinces in 2015 where the percentage for West Nusa Tenggra was 74.1%, South Southeast Nusa Tenggara 77.0%. Bengkulu 75.0%, West Sumatra 74.1% and North Sulawesi 26.3%. Exclusive breastfeeding that is still low can cause malnutrition in toddlers. Efforts to improve the quality of breast milk (Directorate General of the Indonesian Ministry of Health, 2016).

Factors which affects the smooth flow of breast milk during breastfeeding, including the frequency of breastfeeding mothers, avoiding giving formula milk and the psychological influence of mothers when breastfeeding too. Ideally, a baby should breastfeed 8-12 times in 24 hours and 10 to 20 minutes for each breast, with the interval between breastfeeding and the next feeding being between one and a half to 2 hours. But some often take a long time, maybe up to half an hour. Such conditions depend on the baby's sucking strength, swallowing speed, and the baby's comfort when breastfed (Nursanti, I., 2012).

Several problems that mothers often experience at this time breastfeeding, which is a situation that is often encountered is the presence of a mother's nipple that is not protruding or retracted (retracted nipple), so that the baby can suck the nipple well and effectively. In cases like this, it can be treated like when you are still in pregnancy, you can do breast care, like when you are still in pregnancy, you can do breast care like breast care, if the treatment method isbreasts are not effective, so when breastfeeding you can use a nipple connector so that the baby can suckle the breast well, and the nipples not protruding are not a reason for irregular milk production (Nugroho, ddk, 2014).

B. Partner Problems

Moms Those who have babies aged 0-6 months do not give exclusive breast milk to their babies.

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C. Solutions Offered

In this case, STIKes Mitra Husada Medan is making efforts Pregnant women should implement exclusive breastfeeding starting from birth until 6 months of age. This is done through:
1. Health Education about exclusive breastfeeding

Implementation of the exclusive breastfeeding program by explaining what exclusive breastfeeding is, how long to give exclusive breastfeeding, what breast milk contains, what are the benefits of exclusive breastfeeding, what are the benefits for the baby, mother and family from exclusive breastfeeding, what factors influence breast milk production .

D. Outer target

With this activity, it is hoped that pregnant women and breastfeeding mothers will be able to implement exclusive breastfeeding and raise awareness of the importance of exclusive breastfeeding which is done by increasing knowledge, attitudes and behavior regarding exclusive breastfeeding so that it can improve the health status of both mother and baby.

Table 2.1 Outcome Achievement Target Plan

No	Outer Type	Achievement Indicators
1	Scientific publications in national journals	There is
2	Publication in print/online media/PT repository	There is
3	Increased competitiveness (increased quality, quantity, and added value of goods, services, verified products, or other resources)	There is
4	Increasing the application of science and technology in society (mechanization, IT and management)	There is
5	Improvement of community values (arts, culture, social, politics, security, peace, education, health)	There is

LITERATURE REVIEW

2.1. Theoretical basis

2.1.1. Definition of breast milk

Exclusive breastfeeding is breast milk given to babies during the first 6 months of life without additional fluids such as formula milk, oranges, honey, tea water, water and without additional solid foods such as bananas, papaya, milk porridge, biscuits and team rice. After 6

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months, complementary foods (MPASI) were given. Breast milk can be given until the child is 2 years old or more (Nurcahyani, 2017).

However, in reality, not all mothers who have newborn babies breastfeed their babies well due to internal and external factors. Internal factors include low knowledge and attitudes of mothers, while external factors include lack of support from family, community, health workers and government, intensive promotion of formula milk. (Hanifah, Astuti, & Susanti, 2017).

This condition causes delays in breastfeeding. Delays in breastfeeding can cause problems for the mother, namely the buildup of breast milk breasts, causing swelling. Breast engorgement has a psychological impact on the mother, such as pain, anxiety because she cannot breastfeed. This condition will cause psychological problems in the mother, namely the mother will feel unable to breastfeed the baby and feel anxious which will result in a decrease in breast milk production (Deswani, Gustina, & Rochimah, 2014).

2.1.2. Nutritional composition of regular (mature) breast milk

Breast milk contains essential nutrients specifically needed to support the process of brain growth and development and strengthen the body's natural resistance. The main composition of breast milk (Anik Maryunani, 2018):

1. Proteins
   Has a function as a regulator and builder of the baby's body. The basic components of protein are amino acids, which function to form brain structures. Casein is a protein that is difficult to digest and whey protein is a protein that helps make the baby's digestive contents soft. The proteins in milk are whey and casein. Breast milk has a ratio of whey to casein that is suitable for babies. The ratio of whey to casein is one of the advantages of breast milk compared to cow's milk. Breast milk contains more whey, namely 65:35. This composition makes breast milk protein more easily absorbed, whereas cow's milk has a whey: casein ratio of 20:80, so it is not easily absorbed.
2. Fat
   Fat is the second largest nutrient in breast milk and is the baby's main source of energy and plays a role in regulating the baby's body temperature. Functions as the main calorie/energy producer, reducing the risk of heart disease at a young age. Fat in breast milk contains essential fatty acid components, namely: linoleic acid and alda-linoleic acid which will be processed by the baby's body into AA and DHA. Composition in breast milk: fat-2.7-4.8gr/100 ml.
3. Vitamin
   Breast milk contains various vitamins that babies need. Breast milk contains complete vitamins that can meet the needs of babies up to 6 months except vitamin K, because newborn babies' intestines are not yet able to form vitamin K. These vitamins are vitamins: ADEK, including:

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a. Vitamin A: A vitamin that is very useful for the development of a baby's vision.
b. Vitamin D: fat water soluble.
c. Vitamin E: found mainly in colostrum.
d. Vitamin K: functions as a catalyst in the blood clotting process, found in breast milk in sufficient quantities and can be absorbed.

4. Salt and Minerals
   Breast milk contains complete minerals, although the levels are relatively low, but can meet the needs of babies up to 6 months of age.
5. The iron and calcium in breast milk are very stable and easily absorbed minerals and their amounts are not influenced by the mother's diet. Iron is a substance that helps blood formation to prevent babies from anemia and anemia. Ferum is low in Fe but easily absorbed. In PASI the mineral content is high, but most of it cannot be absorbed. This will make the intestines work harder and increase the growth of harmful bacteria, resulting in abnormal contractions of the baby's intestines.
6. Lactose (carbohydrate)
   Lactose is the main type of carbohydrate in breast milk which plays an important role as an energy source. As a source of energy production, as the main carbohydrate, increases calcium absorption in the body, stimulates the growth of lactobacilius bifidus. Lactobacilius bifidus functions to inhibit the growth of microorganisms in the baby's body which can cause various diseases or health problems. This substance helps the absorption of calcium and magnesium during the baby's growth period. Composition in breast milk: Lactose-7gr/100 ml.
7. Lactoferrin
   Lactoferrin is a protein that binds to iron. Lactoferrin is a type of immune component that binds iron in the digestive tract. Lactoferrin absorbs Fe from the digestive tract, reducing the supply of C.Albicans and E.coli.

2.1.3. Benefits of Breastfeeding

There are many benefits to early initiation of breastfeeding, both for the mother and baby, as well as psychological benefits (Anik Maryunani, 2018).

a. Benefits for mothers
   1. Improve the special relationship between mother and baby.
   2. Stimulates uterine muscle contractions thereby reducing the risk of bleeding after childbirth.
   3. Increases the mother's opportunity to establish and continue breastfeeding during infancy.
   4. Reduces maternal stress after giving birth.
   5. Prevent pregnancy.

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6. Maintaining maternal health.

b. Benefits for babies
   1. Maintains the baby's temperature warm.
   2. Calms the mother and baby and regulates breathing and heartbeat. Bacterial colonization of the baby's skin and intestines with normal maternal body bacteria (bacteria that are harmful and provide a good place for beneficial bacteria) and accelerates the release of colostrum as the baby's antibodies).
   3. Reduces baby crying thereby reducing stress and energy used by the baby.
   4. Enables the baby to find the mother's breast on his own to start breastfeeding.
   5. Regulates blood sugar levels and other biochemicals in the baby's body.
   6. Accelerates the discharge of meconium (slightly blackish green baby feces that first come out of the baby due to drinking amniotic fluid.
   7. Babies will be trained in their motor skills when breastfeeding, thereby reducing breastfeeding difficulties.
   8. Helps the development of the baby's innervation (djrvcus systj`).
   9. Obtaining colostrum is very beneficial for the baby's immune system.
   10. Prevents the peak of the "sucking reflex" in babies which occurs 20-30 minutes after birth. If the baby is not breastfed, the reflex will decrease quickly, and will only appear again in sufficient levels 40 hours later.

c. Psychological benefits

   There is emotional bonding (emotional bonding):
   1. The mother-baby relationship is closer and full of love.
   2. Mom feels happier.
   3. Babies cry less often.
   4. Mothers behave more sensitively (affectionately).
   5. Less often torturing babies (child abuse).

2.1.4. Signs that your baby is getting enough breast milk

According to Ari Sulistiyawawti (2016), signs that a baby is sufficiently breastfed are as follows:

1. The number of urinations in one day is at least 6 times.
2. Art colors are not usually pale yellow.
3. Babies often have yellowish, seed-colored stools.
4. The baby looks satisfied, wakes up whenever he feels hungry and sleeps well.
5. Babies breastfeed at least 10 times in 24 hours.
6. The mother's breasts feel soft every time she finishes breastfeeding.
7. Mothers can feel the tingling feeling of breast milk flowing every time the baby starts breastfeeding.

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8. Mothers can hear soft swallowing sounds when the baby swallows breast milk.
9. The baby is gaining weight

2.1.5. Factors causing lack of breast milk

a. Breastfeeding factors

Things that can disrupt breast milk production are not initiating or scheduling breastfeeding.

b. Maternal Psychological Factors

The mother's psychological preparation greatly determines the success of breastfeeding, because mothers who do not have confidence in being able to produce breast milk generally produce less breast milk.

c. Baby Factors

There are several problems that originate from babies, for example sick babies, premature babies and babies with congenital abnormalities so that the mother cannot provide breast milk, this can cause reduced breast milk production (Ministry of Health, 2015).

IMPLEMENTATION METHOD

The implementation method for this community service program is structured systematically:

A. Preparation Stage

Activities carried out in the preparation stage are:

1. Survey the location of the activity
2. Administrative management and licensing of community service locations
3. Preparation of educational materials and promotion of the importance of exclusive breastfeeding

B. Activity Implementation Stage

Service activities will be carried out after preparations and permits are completed. The activity will be carried out in Bangun Rejo Village, Tanjung Morawa District. In its implementation, the target will be explained about exclusive breastfeeding, timing of exclusive breastfeeding, breast milk content, benefits of exclusive breastfeeding, benefits for babies, mothers and families from exclusive breastfeeding, factors that influence breast milk production, then ask several mothers to repeat what they said. has been explained.

C. Creation of Service Articles

Service articles are created as the final result of service activities that have been carried out so that later the benefits of this service can truly be achieved.

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D. Evaluation Stage

The evaluation stage is a stage carried out to assess the activity as a whole and review whether there were any deficiencies during the activity. This evaluation stage aims to ensure that the activities carried out can run effectively and as expected. The evaluation stage focused on participants' ability to implement exclusive breastfeeding for babies aged 0-6 months.

E. Report Creation Stage

Making reports is adjusted to the results that have been achieved while carrying out community service activities.

RESULTS AND DISCUSSION

A. Results of Implementation of PPM Activities

The results of implementing service activities can be described through 2 (two) activity stages, namely preparation and implementation. In the preparation stage, which is planning the service program, the following activities are carried out:

1. Coordination with village midwife

Coordinating with the village midwife, the village midwife accepts and supports community service activities carried out by the Community Service Team in order to implement exclusive breastfeeding in Bangun Rejo Village

2. Determining the time for community service

Implementation of community service is based on an agreement with the Village Head which will be carried out on March 26 2024

3. Determining goals and targets for training participants

From coordination with the Village Midwife, the target of community service is 18 pregnant women and mothers with babies aged 0-6 months in Bangun Rejo Village.

4. Planning community service materials

The community service material that has been planned by the community service team includes the meaning of exclusive breastfeeding, timing of exclusive breastfeeding, breast milk content, benefits of exclusive breastfeeding, benefits for babies, mothers and families from exclusive breastfeeding, factors that influence breast milk production.

The preparation stages above are then followed by the implementation stage. At the implementation stage of the service program it can be explained that:

1. Community service activities regarding exclusive breastfeeding were carried out on March 26 2024, in Bangun Rejo Village, Deli Serdang Regency.
2. The community service activity was attended by 18 participants based on the direction of the local Village Midwife.
3. Pregnant women are quite happy and enthusiastic about the community service program. Health education material in the form of: (a) definition of exclusive breastfeeding, (b) timing of

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exclusive breastfeeding, (c) content of breast milk, (d) benefits of exclusive breastfeeding, (e) benefits for babies, mothers and families from exclusive breastfeeding, (f) factors that influence breast milk production.

4. In the question and answer session, there were pregnant women who asked questions, namely: what impact could occur on the baby if they were not given exclusive breast milk
5. In community service activities, several mothers were asked to repeat several materials related to exclusive breastfeeding

CLOSING

A. Conclusion

1. Community service activities regarding exclusive breastfeeding in Bangun Rejo Village, Tanjung Morawa District, Deli Serdang Regency can increase mothers' knowledge about exclusive breastfeeding.
2. This community service activity is carried out using lecture and demonstration methods.
3. Increasing mothers' knowledge about exclusive breastfeeding is expected to increase the awareness of mothers, especially pregnant women, to provide exclusive breastfeeding to their babies.

B. Suggestion

It is hoped that this community service program can be followed up in other places in subsequent activities.

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DOCUMENTATION