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Breast Care Education for Post-Partum Mothers with Ineffective Breastfeeding Nursing Problems

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ABSTRACT

One of the problems that occurs after giving birth is a lack of knowledge about how to care for the breasts, resulting in a decrease in breast milk production. This scientific paper aims to provide breast care education for postpartum mothers with ineffective breastfeeding problems. Using a case study approach on two patients with ineffective breastfeeding problems at Poly GG Sam Husada Kediri on 15 – 17 March 2021. Data collection techniques include interviews, questionnaires, providing breast care education, and observation. Data analysis was carried out descriptively using the principles of nursing care management. Patients are given breast care education and evaluation for three days. Education was carried out for 3 days for client 1 and client 2, where on the first day the researcher provided education about breast care so that both clients understood how to carry out breast care correctly and appropriately. The researchers used the next 2 days to review the mother's knowledge of breast care and evaluate the mother's level of knowledge and ability to carry out breast care independently as well as the mother's ability to breastfeed effectively.

Keywords: Education, breast care, ineffective breastfeeding.

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INTRODUCTION

One of the problems that occurs after giving birth is due to a lack of knowledge about how to care for the breasts, resulting in a decrease in breast milk production. Breast care is an important part that must be paid attention to in preparation for breastfeeding, this is because the breast is the organ that produces breast milk (ASI), which is the staple food for newborn babies, so care must be taken to breastfeed effectively (1). The results of research conducted by Tiyas Arum Minangkanidi at PKU Muhammadiyah Hospital Yogyakarta showed that the frequency of knowledge from the number of respondents was 5 people, the highest results were those who knew breast care, namely good knowledge, namely 2 people (40%), and poor knowledge, namely 3 people (60 %). Respondents who have

insufficient knowledge can be because they have no experience, have never received counseling, and have never received or sought information from the mass media (2) The results of research conducted at Kartika Husada Hospital showed that 19 mothers (47.5%) had a supportive attitude towards breast care and 21 mothers (52.5%) did not support breast care (3).

Seeing how important the breast is as a producer of breast milk, mothers must also know how to care for their breasts properly so that the baby can breastfeed immediately and get enough breast milk from the mother. If the mother experiences a decrease in breast milk production, one of the breastfeeding problems during the postpartum period occurs namely engorgement of the breast. The occurrence of breast milk dams occurs from the third to the sixth day after delivery, when breast milk is normally produced and the breasts become very full. Damage to milk occurs due to the narrowing of the lactiferous ducts or by the glands not being emptied completely, or due to abnormalities in the nipples. Complaints include swollen, hard, and painful breasts. Knowledge about breast care to avoid breast milk dams should be possessed by pregnant women who are approaching delivery. However, the reality obtained in society shows that the level of knowledge of pregnant women about breast care is still relatively low (3).

The solution to preventing problems in breastfeeding mothers is to provide education about breast care. Breast care is very important during pregnancy and breastfeeding. This is because the breast is the only producer of breast milk, which is the staple food for newborn babies, so it must be done as early as possible. One of the goals of breast care after giving birth is to increase breast milk production by stimulating the milk glands through massage (1).

METHODS

This case study uses exploratory description with the aim of describing the knowledge of postpartum mothers about the importance of breast care at the GG Kediri Polyclinic. Participants in this case study were two postpartum mothers who experienced ineffective breastfeeding problems at the GG Kediri Polyclinic with the inclusion, mother in good health, normal postpartum mothers and SC days 2 to 6, mothers who have inverted or non-protruding nipples, mothers whose breast milk does not come out smoothly. Meanwhile for exclusion criteria are others whose consciousness has not fully recovered, and the mother is still being observed in the HCU/Recovery Room. The location used for the research was the GG Kediri Polyclinic. This place was chosen because there are many cases of postpartum mothers who experience problems with ineffective breastfeeding due to a lack of knowledge about breast care and this case study research was conducted in March 2021.

The data collection instrument in this case study research uses a questionnaire sheet to be filled in by the respondents themselves. This questionnaire contains 10 questions and an informed consent form before distributing the questionnaire. The level of knowledge category is divided into three levels based on percentage values, namely, the level of knowledge in the good category if the value is 75%, the level of knowledge in the sufficient category if the value is 56-74%, and the level of knowledge in

the poor category if the value is <55% (4). First, the researcher carried out BHSP (Building Mutual Trust Relationships) and explored the knowledge of both clients about breast care, then provided a consent form to become a respondent which was filled in directly by the respondent, after the respondent was willing/agreeing, the questionnaire sheet was distributed. This question consists of general data and specific data. For general data including the identity of the respondent, the respondent's identity includes: name (initials), age, gender, role in the family, and highest level of education. Meanwhile, special data includes: procedures for carrying out breast care.

RESULT

Before breast care education was carried out, researchers conducted BHSP (Building Mutual Trust Relationships) with both clients and gathered information and knowledge about breast care for both clients.

Table 1. Interview Results before Breast Care Education was carried out

| No. | Question | Client 1 | Client 2 |
|-----|---|------------------|---|
| 1. | What is the meaning of breast care? | Unable to answer | Unable to answer |
| 2. | How important is breast care for pregnant women and mothers in the postpartum period? | Unable to answer | It is important that breast milk can come out |
| 3. | How important is breast care for pregnant women and mothers in the postpartum period? | Unable to answer | Unable to answer |

The implementation of providing breast care education to both clients was carried out by the breast care SOP and there were no differences in the implementation of breast care education. During the implementation of breast care education, both clients were very enthusiastic during the counseling from start to finish and both clients actively asked questions during the counseling.

Table 2. Implementation of Breast Care Education with The Problem of Ineffective Breastfeeding at The GG Kediri Polyclinic March 15, 2021

| No. | Implementation of Giving | Case 1 | | Case 2 | |
|--------------------------|--|--------|----|--------|----|
| | | Yes | No | Yes | No |
| Implementation of Giving | | | | | |
| 1. | 2 towels | √ | | √ | |
| 2. | 2 washcloths | √ | | √ | |
| 3. | Two basins for warm water and cold water | √ | | √ | |
| 4. | Coconut oil/baby oil | √ | | √ | |
| 5. | Hands cones | √ | | √ | |
| 6. | Modified syringe | √ | | √ | |
| 7. | Clean cotton | √ | | √ | |
| 8. | Bras and special clothes for breastfeeding mothers | √ | | √ | |
| 9. | Breasts phantom | √ | | √ | |
| 10. | Baby phantom | √ | | √ | |
| 11. | Leaflet | √ | | √ | |
| Patient Preparation | | | | | |
| 1. | Carry out actions with the 5 S (Smile, Greet, Greet, Polite) | √ | | √ | |

| | | | | | |
|---------------------------|--|---|--|---|--|
| 2. | Carry out self-introduction and patient identification | √ | | √ | |
| 3. | Explain the procedures and objectives that will be carried out | √ | | √ | |
| 4. | Ask for approval | √ | | √ | |
| Environmental Preparation | | | | | |
| 1. | Greet, call the client's name | √ | | √ | |
| 2. | Create a comfortable and safe environment | √ | | √ | |
| 3. | Maintain patient privacy | √ | | √ | |
| Nursing Preparation | | | | | |
| 1. | Prepare tools | √ | | √ | |
| 2. | Preparing the patient | √ | | √ | |
| 3. | Washing hands | √ | | √ | |

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Table 3. Implementation of Breast Care Education with The Problem of Ineffective Breastfeeding at The GG Kediri Polyclinic March 15, 2021

| No. | Implementation | Case 1 | | Case 2 | |
|----------------|---|--------|----|--------|----|
| | | Yes | No | Yes | No |
| Assessment | | | | | |
| 1. | Give opening greetings | √ | | √ | |
| 2. | Introduce yourself to patients. | √ | | √ | |
| 3. | Ask about the patient's feelings and what the patient complains about | √ | | √ | |
| 4. | Ask participants what they know about how to care for breasts. | √ | | √ | |
| Planning | | | | | |
| 1. | Explain the purpose of counseling. | √ | | √ | |
| 2. | Explain the subject matter of counseling. | √ | | √ | |
| 3. | Distribute leaflets | √ | | √ | |
| Planning | | | | | |
| 1. | Explain the meaning of breast care | √ | | √ | |
| 2. | Explain the benefits of breast care | √ | | √ | |
| 3. | Explains the tools and materials needed to carry out breast care. | √ | | √ | |
| Implementation | | | | | |
| 4. | Practicing the correct way to perform breast care on phantom breasts. | √ | | √ | |
| 5. | Explain the consequences if breast care is not carried out. | √ | | √ | |
| Evaluasi | | | | | |
| 1. | Provide feedback on explanations about breast care. | √ | | √ | |
| 2. | Give praise or rewards to patients who can explain breast care. | √ | | √ | |
| 3. | Allow participants to ask questions that are not clear. | √ | | √ | |

| | | | |
|----|---|---|---|
| 4. | Give praise or rewards to patients who want to ask questions. | √ | √ |
| 5. | Provide answers to participants' questions. | √ | √ |

From the two cases, it was found that there were differences in knowledge before providing education about breast care, namely in case 1 the client was able to answer 9 questions. Of these 9 questions, the client was only able to answer 90% of 100% so it could be categorized as good. Meanwhile, in case 2, the client was able to answer 7 questions. Of the 7 questions, the client was only able to answer 70% of 100% so it was categorized as sufficient according to the method of assessing educational results in the attachment.

Table 4. Evaluation after being given education on breast care with ineffective breastfeeding problems at the GG Kediri Polyclinic on day I

| No. | Question | Case 1 | | Case 2 | |
|-----|--|--------|-------|--------|-------|
| | | True | False | True | False |
| 1. | Breast care is an action to care for the breasts to facilitate the release of breast milk. | √ | | √ | |
| 2. | Breast care makes the mother's nipples sink or not stand out. | | √ | √ | |
| 3. | Tools used for breast care are towels, washcloths, baby oil, warm and cold water, and cotton wool. | √ | | √ | |
| 4. | If the mother does not take care of her breasts, the milk will come out smoothly. | | √ | | √ |
| 5. | Breast care can be done by pregnant women and postpartum mothers. | √ | | √ | |
| 6. | Breast care only makes the breasts soft and unattractive. | | √ | | √ |
| 7. | When you find out that the mother is not expressing breast milk smoothly and does not receive immediate breast care, breast swelling will occur. | √ | | √ | |
| 8. | Breast care can only be done in the morning. | | √ | | √ |
| 9. | Breast care can be done alone, with the help of your husband, or while in the hospital with the help of a nurse. | √ | | | √ |
| 10. | Tools used for breast care are gauze, betadine, and bandages. | √ | | | √ |

From the two cases, there was a difference in knowledge after providing education about breast care, namely in case 1 the client was able to answer 10 questions. Of the 10 questions, the client was able to answer 100% so it could be categorized as good and case 2 had an improvement, namely the client was able to answer 9 questions. Of the 9 questions, the client was only able to answer 90% of 100% so it was categorized as good by assessing the educational results in the attachment.

Table 5 Evaluation After being Given Breast Care Education with Ineffective Breastfeeding Problems

at The GG Sam Husada Polyclinic on d Day II

| No. | Question | Case 1 | | Case 2 | |
|-----|---|--------|-------|--------|-------|
| | | True | False | True | False |
| 1. | Tools used for breast care are towels, washcloths, baby oil, warm and cold water, and cotton wool. | √ | | √ | |
| 2. | If the mother does not take care of her breasts, the milk will come out smoothly | | √ | | √ |
| 3. | Breast care can be done by pregnant women and postpartum mothers. | √ | | √ | |
| 4. | Breast care makes the mother's nipples sink or not stand out. | | √ | | √ |
| 5. | Breast care is an action to care for the breasts to facilitate the release of breast milk. | √ | | √ | |
| 6. | Breast care can only be done in the morning. | | √ | | √ |
| 7. | Breast care can be done alone, with the help of your husband, or while in the hospital with the help of a nurse. | √ | | √ | |
| 8. | Tools used for breast care are gauze, betadine, and bandages. | | √ | | √ |
| 9. | When you find out that the mother is not expressing breast milk smoothly and does not receive immediate breast care, breast swelling will occur | √ | | √ | |
| 10. | Breast care only makes the breasts flabby and unattractive. | | √ | √ | |

From the two cases, there was a difference in knowledge after providing education about breast care, namely in case 1 the client was able to answer 10 questions. Of the 10 questions, the client was able to answer 100% so it could be categorized as good and case 2 had an improvement, namely the client was able to answer 9 questions. Of the 9 questions, the client was only able to answer 90% of 100% so it was categorized as good by assessing the educational results in the attachment.

DISCUSSION

In this discussion, the results of a case study of providing breast care education to postpartum mothers will be presented, starting from preparation for providing education, implementation of education, evaluation of education, and the results of providing education to case 1 and case 2 patients with ineffective breastfeeding nursing problems at the Polyclinic. GG Sam Husada Kediri.

Breast care is an important part that must be paid attention to in preparation for breastfeeding, this is because the breast is the organ that produces breast milk (ASI), which is the staple food for newborn babies, so care must be taken to breastfeed effectively (1). Preparations for providing breast care education are carried out to prepare all the things needed to provide breast care education. The first thing we do is determine the topic: breast care for postpartum mothers, determine the method: lecture, demonstration, question, and answer, determine the media and tools needed: leaflets and phantoms, and determine the implementation time.

Preparation for providing breast care education includes preparing tools, introducing yourself, explaining the subject and objectives, informed consent, maintaining privacy, providing a comfortable position, and distributing leaflets as a medium for providing education. The preparation of tools and provision of leaflets are needed as supporting media for researchers in providing breast care education to postpartum mothers. Researchers made preparations to provide breast care education to patient 1 and patient 2 with ineffective breastfeeding problems to obtain consent and build a relationship of mutual trust before providing education about breast care.

Based on this case study, in preparation for providing breast care education, there is no difference between theory and practice because the tools needed can be reached easily, but for the second and third days, the researchers did not distribute any more leaflets because on the second and third days, the breast care procedures were immediately carried out. correct and on the first day both clients need correct breast care education to breastfeed effectively and increase their knowledge to the client and we can make it easier for clients by practicing on the phantom so that both clients can receive this education well and correctly and can increase Mother's knowledge about the importance of breast care. When preparing to provide breast care education, both clients were very cooperative when asked by the researcher and were able to follow directions from the researcher so that when preparing for the education there were no obstacles.

Implementation is one of the components of the nursing process, namely the category of nursing behavior, which is the action required to achieve the goals and results expected from the implementation of nursing care (5). Breast care is an action to care for the breasts, especially during the post-partum period (breastfeeding period) to facilitate the release of breast milk. One of the goals of breast care is that apart from improving the flow of breast milk, it can also treat inverted nipples or flat milk (6).

The implementation of breast care education includes explaining the meaning, benefits, and objectives, the tools needed to carry out breast care, and the consequences of not carrying out breast care. In this case study, education was carried out for 3 days for client 1 and client 2, where on the first day the researcher provided education about breast care so that both clients understood how to carry out breast care correctly and appropriately. The researchers used the next 2 days to review the mother's knowledge of breast care and evaluate the mother's level of knowledge and ability to carry out breast care independently as well as the mother's ability to breastfeed effectively.

CONCLUSION

In implementing the action of providing breast care education to postpartum mothers, the implementation stage of the action for providing education was by the plan. When providing education and practicing breast care for the first time, the client is still assisted by a nurse, but in subsequent implementation, the client can carry out breast care measures independently and the nurse evaluates the success of carrying out breast care measures. In evaluating the action of providing breast care education to postpartum mothers, clients gain increased knowledge about breast care and can carry out breast care with proficiency in established breastfeeding techniques.

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