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TRAINING ON MENU PREPARATION FOR BREAST MILK VOLUME FORMATION IN BREASTFEEDING MOTHERS

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ABSTRACT

Breast milk is the original fluid secreted from the breast after the mother gives birth, which is a flexible and easily available food without special preparation with a temperature that suits the baby. The problem in this service is the low coverage of exclusive breastfeeding in the working area of the Johan Pahlawah health center based on data from the West Aceh Health Office, namely with an achievement of 65%, to 44% (West Aceh District Health Office, 2020, 2021). The purpose of this service is to increase mothers' knowledge about breastfeeding their babies with the goal of achieving the exclusive breastfeeding coverage target of 80%. The method used in this service is the socialization method (pree-test and post-test) and Intervention (menu preparation training) for the formation of breast milk volume in cadres and breastfeeding mothers. Based on the results of the service with the Pree-test and Post-test methods on Training on Menu Formation of Asi Volume, an increase in the average value of respondents' knowledge before and after socialization was obtained, where the pree test results showed 83% of mothers had good knowledge, while the post test increased the mother's knowledge, namely 91%, meaning that socialization is able to increase the mother's knowledge so that if it continues to be implemented it will be able to change the mother's behavior into behavior that can increase the mother's knowledge to give Asi to her baby. The next method is the Intervention on Training on the Preparation of Volume-Building Menus for Breastfeeding Mothers. The result of the intervention is that the mother enthusiastically participates in the activity from the beginning to the end of the intervention activity and can accept the menu provided. In conclusion, based on the results of the service that it is very important for the gampoeng apparatus to support the activities of cadres to continue this service model in order to reduce the coverage rate of exclusive breastfeeding.

Keywords: Pree test, post test, Sosislisasi, Intervention, Menu Preparation, Milk Volume

1. INTRODUCTION

Breast milk (ASI) is the liquid milk secreted from the breast after a mother gives birth. Breast milk is a flexible and readily available food, ready to drink without special preparation at a temperature that suits the baby, the milk is fresh and free from bacterial contamination, reducing the risk of gastrointestinal disorders (Government Regulation No. 33/2012). Breast milk is the best and most natural food for infants. The nutrients contained in breast milk are so high that babies aged 0-6 months do not need any additional composition from outside (Lestari, A., et al, 2022). Naturally, God has indeed created breast milk in such a way that it is very suitable to be used as food that is easily digested by babies by being absorbed through their mother's nipples. The impact that can occur if babies are not breastfed has a lower immune system than babies who get exclusive breastfeeding (Risma, et al, 2022). Babies who are not given breast milk make babies more susceptible to various diseases caused by infections in the body and are at risk of health problems, such as digestive infections, upper respiratory tract infections, to ear infections and babies will also be more susceptible to non-infectious diseases during their growing years such as obesity, allergies,

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malnutrition, asthma, and eczema (Yuen, M., et al, 2022). (Meek, J. Y., et al, 2022) The most ideal natural food for infants, it contains all the nutrients necessary for healthy growth and development. Not breastfeeding can result in infants lacking essential nutrients, such as protein, fat, vitamins and minerals. On the other hand, it is said that babies who are not breastfed have a higher risk of developing various diseases, especially respiratory infections, gastrointestinal infections, and autoimmune diseases. Breast milk contains antibodies that help protect babies from various infections (North, K., et al, 2022).

The problem in this service is the low coverage of exclusive breastfeeding in the working area of the Johan Pahlawan Health Center based on data from the West Aceh Health Office, namely with an achievement of 65%, up to 44% (West Aceh District Health Office, 2020, 2021). Based on the initial survey that the team conducted directly to the field, where the mother had problems with her milk, in other places also said she did not know how to mentor her. The purpose of this service is to increase the knowledge of mothers about breastfeeding their babies with the goal of achieving the exclusive breastfeeding coverage target of 80%. Based on the above problems, the service team is interested in conducting a service with the title "Training on the preparation of a menu for the formation of breast milk volume in breastfeeding mothers in Johan Pahlawan District, West Aceh Regency.

2. SOLUTIONS AND OUTPUT TARGETS

The approach taken in this service is socialization and intervention, this aims to increase the volume of breast milk (breast milk) is an important step in supporting the health of infants and mothers. one of the main targets is to increase the percentage of exclusive breastfeeding. For example, targets can be set to achieve an increase in the percentage of mothers who exclusively breastfeed for the first six months of an infant's life. It is important to have a robust monitoring and evaluation strategy to measure the achievement of these targets and ensure that interventions are successful. In addition, collaboration with cadres, mothers and local government is also important to achieve the expected results.

3. METHOD OF IMPLEMENTATION

Implementation of socialization and interventions to increase breast milk volume requires careful planning and execution, The lecture method presents practical strategies to solve this problem. Identify short-term and long-term goals to be achieved through breast milk volume socialization and intervention with a strategic plan that includes clear targets, objectives, and performance indicators, develop easy-to-understand and informative educational materials on the benefits of breast milk and correct breastfeeding techniques. Train cadres, village officials and social volunteers on the importance of breastfeeding and technical skills related to breastfeeding. Make cadres a group of social mobilizers or model mothers who can help spread information about breastfeeding to other mothers in the community. Organize socialization campaigns that involve activities such as seminars, workshops, group discussions, and other public activities. Use social media and other communication channels to reach a wider audience. Make the targeted neighborhood a breastfeeding-friendly environment, including comfortable breastfeeding places to provide positive support to mothers who are breastfeeding.

Facilitate breastfeeding mothers' groups by providing support for mothers who are breastfeeding, where mothers can share their experiences and support each other, and provide counseling for mothers who are experiencing difficulties with breastfeeding. Counseling for mothers who are having difficulties with breastfeeding. After all is done, conduct continuous evaluation or monitoring to measure the progress and results of the campaign and interventions. The results of the evaluation can be used to make changes and improvements in future programs. Collaborate with local government and NGOs that have experience in maternal and child health to

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strengthen program implementation. Ensure that breastfeeding education does not stop after the initial campaign, with ongoing education activities to maintain community awareness and support.

4. RESULTS

Service Results

Based on the service that has been carried out by conducting pree-test and post-test, where there is an increase in knowledge in mothers and cadres. Socialization succeeded in increasing mothers' knowledge about the benefits of exclusive breastfeeding and correct breastfeeding techniques where the pree-test results showed 83% of mothers had good knowledge, while the post-test increased mothers' knowledge by 91%, meaning that socialization was able to increase mothers' knowledge so that if it continues to be implemented, it will be able to change mothers' behavior to behavior that can increase mothers' knowledge to provide breast milk to their babies. Positive Attitude Change With the information provided through socialization, many mothers have changed their attitude towards breastfeeding, becoming more positive and accepting. Increased Social Support and The socialization program has increased the social support given to mothers who are breastfeeding. Family and friends have been more supportive of mothers'.

The following is documentation of the dedication:



Figure 1. Documentation of Dedication

Discussion

The outcome of this intervention in breast milk volume generation is an important step towards understanding the impact of the intervention on maternal and infant health. One of the main outcomes of the intervention is an increase in the volume of breast milk produced by the mother. After the intervention, it is expected that there will be changes in breastfeeding mothers in terms of increasing breast milk volume. This can be measured in liters or ml per day and compared to before the intervention. In addition to the volume of breast milk, it is also important to consider the quality of breastmilk itself, which means that mothers should always pay attention to the menus they consume every day to maintain the balance of their baby's growth and development. These interventions can help increase the nutritional content of breast milk, such as fat, protein and antibodies, which serve as an antidote for the baby's health.

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If the intervention involves changes in the mother's diet, then it is successful in that there may be significant changes in the mother's diet that support milk production (Tomori, C., et al, 2022). According to If there are no health problems affecting milk production, then the intervention is successful in resolving these problems breastfeeding mothers (Chertok, I. A., et al, 2022). The psychosocial support provided to mothers helps reduce stress and increase their confidence in providing breast milk to their babies (Marniati, M., et al, 2022). It is expected that mothers feel more comfortable and motivated to continue to provide exclusive breastfeeding and try to keep their milk normally available (Judaty, M. D., et al, 2023). It is necessary to conduct post-intervention monitoring to ensure that mothers and babies continue to get the support and care needed to maintain their health in the future, if there are problems regarding breastfeeding, follow-up is needed considering the importance of breastfeeding (Nugraheni, Z., et al, 2022).

It is important to consider the impact of increased breast milk volume on the health of the infant, ensuring that the infant is experiencing good growth, healthy development and no other nutritional or health problems (Prentice, A. M. (2022). Recommendations for the future on how additional steps should be taken to maintain and increase breast milk production for breastfeeding start with changes in the care or support that needs to be provided to the mother (Tomori, C., et al, 2022). The results of the intervention can be used as a basis for creating subsequent care and support plans for mothers and infants. It is also important to involve mothers in these discussions and listen to their experiences and needs to ensure continuity of effective care.

5. CLOSING

Conclusion

The conclusion of this socialization and intervention service is that both have an important role in influencing and improving various aspects in the lives of individuals or groups, especially breastfeeding mothers. The results of the service that has been carried out, where it is very important for the gampoeng apparatus to support the activities of cadres to continue this service model in order to reduce the exclusive breastfeeding coverage rate later. Socialization services help increase the knowledge and understanding of mothers in providing breast milk to their babies, while interventions play a role in responding to problems or processing menus in order to form breast milk volume so that mothers have enough milk for their babies, thus exclusive breastfeeding coverage can reach the target.

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Conflict-Free Statement of Interest

There is no element of publication conflict of interest in this paper

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