



Corner of Exclusive Breastfeeding Consultation Through Empowering Breastfeeding Support Cadres in Takome Village

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ABSTRACTS

The role of health cadres in health development is crucial. Specifically, for cadres with an understanding of Exclusive Breastfeeding and lactation management capable of educating the community, the capacity is still limited. The presence of breastfeeding support cadres is expected to help the community provide the best food for infants, namely exclusive breastfeeding up to the age of 6 months, followed by complementary feeding until the age of 2 years. Breastfeeding is essential for the growth of infants, hence the need for understanding among mothers to provide exclusive breastfeeding. The coverage of Exclusive Breastfeeding in infants in the North Maluku Province in 2019 was 64.36%, decreasing in 2020 to 62.41%, and increasing to 66% in 2021. Although the data in the last year increased, it is still below the national coverage of 71.58%. The method used to form a mother's breastfeeding education group is a community-based group consisting of breastfeeding support cadres and pregnant women who hold regular monthly meetings to share experiences and monitor Exclusive Breastfeeding. The goal of the breastfeeding support group is to empower breastfeeding mothers to practice early initiation of breastfeeding (IMD) and provide exclusive breastfeeding smoothly. This community service activity was carried out at the Sulamadaha Community Health Center in Ternate City, and the activity went well. Evaluation was conducted by the responsible midwife at the Integrated Health Post (posyandu) in Takome Village. The target of this activity was the cadres. The service proceeded well and smoothly thanks to the cooperation of the entire service team and the Sulamadaha Community Health Center in Ternate City.

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1. INTRODUCTION

Since the year 2022, the Ministry of Health has been focusing on a health service approach emphasizing quality promotive and preventive services for all life cycles. One of the initiatives is the transformation of primary health care services through integration starting from the district level, village/neighborhood, down to hamlet/neighborhood unit, which is directed towards community-oriented services. This is carried out through the first pillar of health transformation related to primary services. There are six pillars of health transformation initiated by the Ministry of Health, namely Transformation of Primary Services, Transformation of Referral Services, Transformation of Health Resilience Systems, Transformation of Health Financing Systems, Transformation of Health Human Resources, and Transformation of Health Technology. These six broad frameworks are targeted to be achieved by the year 2024 (Kemenkes RI, 2022).

The focus on preventive health services is a key element in the health transformation, specifically in the first pillar, which is the transformation of primary services. This transformation is evident in Community Health Centers (Puskesmas) and Integrated Health Posts (Posyandu). Currently, the Ministry of Health is revitalizing Posyandu to shift its focus towards keeping people healthy rather than treating illnesses. From a cost perspective, maintaining health is more economical than treating illnesses. Additionally, individuals whose health is maintained tend to have better overall health.

Posyandu, with its cadre members, plays a crucial role in community health. However, despite its longstanding existence, it has faced neglect. Efforts are underway to refresh and prepare cadre members to serve the community effectively, revitalizing Posyandu to cater not only to infants but also to pregnant and lactating mothers.

In Sulamadaha Health Center, there are two Posyandu units in Takome Village, serving as a pilot project in the community service activities for 2023. This initiative follows up on the previous activities in June 2022, which included socializing the Breastfeeding Control Card to Posyandu cadres. The event involved cadres from two Posyandu units, health workers responsible for the Sulamadaha Health Center's working area, the village chief, representatives from RT and RW (neighborhood and community unit heads), and other community figures. The activity proceeded smoothly, with enthusiastic participants engaging in discussions about exclusive breastfeeding. Post-activity evaluation revealed that similar cadre refreshment activities were infrequent. Cadres welcomed and were motivated by the initiative, aiming to gain information about Exclusive Breastfeeding to actively contribute to revitalizing Posyandu through education for pregnant and lactating mothers.

The Head of the village supported this initiative, emphasizing its alignment with the city government's efforts to prevent stunting in Ternate City. Early initiation of breastfeeding and Exclusive Breastfeeding are crucial interventions in preventing stunting in children. The lower-than-targeted national coverage of Exclusive Breastfeeding, issues related to early initiation of breastfeeding, and the understanding of Posyandu cadres and local health workers on controlling mothers with exclusive breastfeeding align with the goals of the Ministry of Health to restructure the health service network, revitalizing Posyandu to a more formal status.

The role of health cadres in health development is crucial, especially for those with an understanding of breastfeeding and lactation management. Supporting cadres are expected to assist communities in providing the best nutrition for infants: exclusive breastfeeding for the first six months, followed by continued breastfeeding and complementary feeding until the age of 2. The phenomenon of low exclusive breastfeeding coverage has negative effects on infants, increasing morbidity and mortality rates compared to infants who receive exclusive breastfeeding.

Nutritionally, breast milk contains macro and micronutrients, with around 88% being water. Exclusive breastfeeding is crucial for supporting the brain and physical development of infants during the first six months. Additionally, it provides benefits to mothers, aiding in postpartum recovery and reducing the risk of breast cancer.

Challenges in exclusive breastfeeding in Indonesia require attention from healthcare professionals, particularly nurses and midwives. While national coverage of exclusive breastfeeding has increased annually, it has not reached the targeted national indicators. North Maluku Province, for example, had exclusive breastfeeding coverage below the national average. Factors such as limited breastfeeding counselors, lack of legislation on breastfeeding, insufficient education, and social and cultural influences contribute to the challenges.

Improving awareness and implementing exclusive breastfeeding in Ternate City, Indonesia, relies on fundamental factors, including knowledge about breastfeeding. Environmental factors, particularly socio-cultural influences and support from the immediate community, play a crucial role in motivating pregnant women to embrace exclusive breastfeeding after childbirth.

2. METHODS

The implementation method used in this community service activity can be outlined as follows:

A. Target Audience

The target audience for this community service activity is the cadres of the integrated health post (posyandu) in the Sulamadaha Health Center, totaling 40 people, exceeding the target. The attendees include 10 cadres from the integrated health post, the village head

(Pak lurah) and the village chief (ibu lurah), community leaders, and several pregnant women.

B. Implementation Phases

The implementation phases of Community Service with Community Partnership Program (PKM) in Takome Subdistrict, North Ternate District, generally include preparation, execution, monitoring, and evaluation as follows:

Table 1. Community Partnership Program (PKM) Phases

Phase	Activity
1. Preparation	<ul style="list-style-type: none"> ▪ Management of activity permits ▪ Team and target partner meetings ▪ Providing an exclusive breastfeeding consultation corner at the integrated health post (posyandu) ▪ Schedule for education sessions for integrated health post cadres, health officers, pregnant and lactating mothers in the reading room and integrated health post ▪ Schedule for integrated health post visits and evaluation
2. Implementation	<ol style="list-style-type: none"> 1. Location: <ol style="list-style-type: none"> a. Education and Training: Reading room in Takome village, integrated health post (posyandu), and health center. b. Establishment of an exclusive breastfeeding consultation corner: Two integrated health posts in Takome village. 2. Implementation Period: October 2023 3. Target Objects: <ul style="list-style-type: none"> - Education and Training: Integrated health post cadres - Breastfeeding Counseling: Pregnant women and integrated health post cadres - Evaluation and Monitoring of the service corner: Cadres and health center staff 4. Target Partners: <ol style="list-style-type: none"> a. Village partners include Health Cadres and Village Officials. b. Health center partners include the Health Center Head and the implementing midwife at the integrated health post in Takome village.
3. Monitoring and Evaluation	<ul style="list-style-type: none"> ▪ Daily activity logbook ▪ Monitoring the results of education and training, as well as the utilization of the exclusive breastfeeding consultation corner ▪ Data collection for activities ▪ Evaluation and analysis of activity results ▪ Activity report

A. Implementation Strategy

Implementation Strategy for Community Partnership Program (PKM)

Input	Proces	Output
The lack of knowledge about exclusive breastfeeding among cadres and pregnant women can contribute to early stunting, as monitored through the	- Conducting education for cadres, pregnant women, and lactating mothers through seminars, educational video screenings, and distribution of	- Education Material - Presentation slides for seminars (PPT) - Brochures - Banners (Spanduk)

Exclusive Breastfeeding Monitoring Card.	booklets about Exclusive Breastfeeding and stunting.	
	- Providing education on healthy dietary patterns for pregnant and lactating mothers.	
Ignorance regarding the coverage of exclusive breastfeeding in Takome village.	<ul style="list-style-type: none"> ▪ Training for supportive cadres on breastfeeding and the use of the Breastfeeding Control Card at the integrated health post (Posyandu) in Takome village. 	<ul style="list-style-type: none"> - Training Material - Training tools and materials - Exclusive Breastfeeding Control Card
Activating the function of the integrated health post (Posyandu) as a primary service provider and enhancing the role of cadres as educators at the integrated health post.	<ul style="list-style-type: none"> ▪ Formation of a group of supporting breastfeeding cadres. ▪ Simulation for cadres in conducting exclusive breastfeeding education for pregnant women at the Exclusive Breastfeeding Corner on one table at the integrated health post in two locations. ▪ Periodic evaluation, conducted three times in 6 months at two integrated health posts, to monitor the cadres' performance and the achievement of exclusive breastfeeding on the Breastfeeding Control Card, as well as to monitor the sustainability of the activities. 	

Evaluation Phase

1. Evaluation of Activity Implementation

Evaluation of the implementation of the Community Partnership Program (PKM) activities at the integrated health post (Posyandu) in Takome village is conducted through:

- a. Daily activity logbook
- b. Monitoring the Exclusive Breastfeeding Control Card three times over 6 months
- c. Video documentation of activities

2. Results Evaluation

Evaluation of the results of community service activities through the Community Partnership Program (PKM) at the Integrated Health Post in Takome village, emphasizing primary healthcare services and reactivating Posyandu through the empowerment of cadres as a Exclusive Breastfeeding Support Group. Subsequently, data analysis and reporting of activity results are conducted. The final activity report is submitted to the Ternate Health Polytechnic and the Target Partners, with an expectation of consistent follow-up efforts.

3. Outcome Evaluation

Outcome evaluation is tailored to the type of outcomes and target achievements that have been planned, ensuring that the utilization of activity results can serve as a reference for a broader target audience.

3. RESULTS

The results of this Community Partnership Program (PKM) community service activity were carried out at the Integrated Health Post (Posyandu) in Takome Village, under the jurisdiction of Sulamadaha Health Center in Ternate. This community service activity is related to the government program aimed at improving nutrition and preventing stunting. The activities involved providing education and support to breastfeeding cadres and establishing a corner for exclusive breastfeeding at the Posyandu. The community service activities were implemented in stages as follows:

Preparation Phase

Conducting a meeting between the team and the target partners, attended by the village head of Takome, representatives from Sulamadaha Health Center, and cadres, to plan the formation of the Exclusive Breastfeeding Support Group (KP-ASI) and raise awareness about the importance of the exclusive breastfeeding consultation corner. The socialization activity aims to ensure that the cadres understand the Community Partnership Program (PKM) activities related to empowering exclusive breastfeeding support cadres, using the breastfeeding control card, and utilizing the exclusive breastfeeding corner at the integrated health post (Posyandu). The innovative approach is one of the educational strategies and service strategies to revitalize the functions of the integrated health post for the community.



Educational approach efforts begin with recording the number of active cadres obtained from the community in Takome Village. The data collection is assisted by the midwife team responsible for Takome Village. The community service team conducts a self-awareness survey aimed at motivating their participation in the service activities. The results show a positive response from the cadres and the village chief's wife in the implementation of these activities, supported by their awareness of reviving the functions of the integrated health post (Posyandu) for the Takome community, especially for pregnant women and toddlers.

Subsequently, jointly establishing the schedule for education sessions for Posyandu cadres, health officers, and pregnant and lactating mothers in the Posyandu reading room, as well as scheduling integrated health post visits and evaluations.

Implementation Phase

The community service activity took place on Monday, October 9, 2023, at Sulamadaha Health Center in Ternate City, and the event proceeded smoothly. The program started at 09:00 and concluded at 13:00. The community service was attended by the Sulamadaha Village Chief and her staff, the cadres of Sulamadaha Health Center in Ternate City, nursing students, and members of the community.

The objective of this activity was to enhance the skills, knowledge, and awareness of the cadres regarding the importance of exclusive breastfeeding for nursing mothers. The stages of the activity were as follows:

- 1) Explaining the purpose, steps, and duration of the activity to the target group.
- 2) Presentation of Material:
 - a) Providing material to the cadres and community leaders, including knowledge about exclusive breastfeeding, the benefits and advantages of breastfeeding, and lactation management for cadres. The material was presented over a duration of 2 (two) hours.



Strengthening the cadres with readiness for education and utilization of the exclusive breastfeeding corner, along with receiving flipcharts and banners for the Exclusive Breastfeeding Consultation Corner that can be displayed during the integrated health post (Posyandu) activities in the current month.



At the end of the meeting, an evaluation of the cadres' readiness to provide education to pregnant women is conducted. The knowledge results of the cadres before and after training can be seen in Table 1.

Tabel 1. Results of Cadre Understanding Pre and Post-Education

Variabel	Before			After		
	Min	Max	Mean + SD	Min	Max	Mean + SD
Intervention	30	80	64 + 13,52	60	80	74 + 6,32

Based on Table 1, there was an improvement in the cadres' understanding before the education, with an average pre-test score of 64 and a post-test score of 74.

Evaluation Phase

a. Evaluation of Activity Implementation

The evaluation of the implementation of the Community Partnership Program (PKM) in Takome Village, within the jurisdiction of Sulamadaha Health Center, is conducted through monitoring activities at the integrated health post (Posyandu) in the following month. This evaluation focuses on the role of the cadres in providing information about exclusive breastfeeding, the utilization by pregnant women of the exclusive breastfeeding corner, and the introduction of the Breastfeeding Control Card to pregnant and lactating mothers.



Results Evaluation

The evaluation of the results of the Community Partnership Program (PKM) community service activity in the Sulamadaha Health Center's working area is conducted by ensuring the availability of an exclusive breastfeeding corner for pregnant women, displayed at the integrated health post (Posyandu), where the cadres can play a role as exclusive breastfeeding educators. They utilize flipcharts to facilitate their education to pregnant and lactating women



The results of this activity are as follows:

- a) For the cadres, this program has successfully increased their knowledge about the importance of exclusive breastfeeding, enabling them to provide accurate educational guidance to pregnant and lactating women for exclusive breastfeeding.
- b) Introduction of the Breastfeeding Monitoring Card and the signing of a commitment by supporting cadres for exclusive breastfeeding.

KARTU KONTROL KAWAL ASI EKSLUSIF

KARTU KONTROL KAWAL ASI EKSLUSIF

ASI EKSLUSIF	PEMANTAUAN		ASI		KETERANGAN
	MINGGU	TGL	Y	TIDA	
F	U	KONTROL	A	K	N
AE KE I	Minggu ke 1				
	Minggu ke II				
	Minggu ke III				
	Minggu keIV				
	Minggu ke I				
AE KE II	Minggu ke II				
	Minggu ke III				
	Minggu ke IV				
	Minggu ke I				
	Minggu ke II				
AE KE III	Minggu ke III				
	Minggu ke IV				
	Minggu ke I				
	Minggu ke II				



4. DISCUSSION

The counseling activities were carried out by directly meeting with the community, especially breastfeeding mothers and mothers of toddlers in Takome Village. The activities took place at the Exclusive Breastfeeding Corner in Posyandu Swara 1 and 2 in Takome Village.

Health information was provided to the community, including aspects such as nutritional intake for infants, toddlers, and breastfeeding mothers, proper breastfeeding techniques, and examples of creating menus for breastfeeding mothers and toddlers. Counseling on providing nutritional support for mothers and toddlers was conducted using lecture and question-and-answer methods.

Based on the results of pre-tests and post-tests measuring the understanding of the cadres, there was an improvement before and after the counseling. The material presented in providing knowledge and skills to the cadres in enhancing exclusive breastfeeding included the benefits of exclusive breastfeeding for infants and mothers, the implementation of Early Initiation of Breastfeeding (IMD), and proper breastfeeding techniques. The content also covered storing breast milk, the role of cadres, and family support in breastfeeding. This was followed by practical sessions on expressing breast milk. The aim of the practice was to enable cadres to demonstrate proper breastfeeding techniques to mothers, including expressing breast milk, and addressing problems in breastfeeding.

Several studies indicate an increase in cadre knowledge after training. Malonda (2020) showed a significant difference in knowledge before and after exclusive breastfeeding training for cadres in the working area of PKM Koya, Tondano Selatan sub-district. Alyensi and Laila (2019) also reported an increase in knowledge among exclusive breastfeeding support group (KP ASI) mothers regarding Early Initiation of Breastfeeding (IMD) and breastfeeding materials at the Rejosari Pekanbaru Health Center. Furthermore, the research by Zurhayati & Hidayah (2022) suggests that participants in the exclusive breastfeeding support group have a 3,701 times greater chance of providing exclusive breastfeeding to their infants compared to mothers who are not participants. There is a difference in the nutritional status of infants aged 6–12 months in both groups. If mothers and infants are not educated and supported in the subsequent breastfeeding stage, there is a likelihood that mothers will supplement breastfeeding with formula milk.

Cadres, often community health workers or volunteers, serve as a bridge between healthcare professionals and the local community. They are trained to provide essential health education, with a particular focus on exclusive breastfeeding. Their role involves disseminating accurate information, addressing misconceptions, and supporting mothers in adopting proper breastfeeding practices. Research studies, such as those conducted by Malonda (2020), Alyensi and Laila (2019), and Zurhayati & Hidayah (2022), have shown that exclusive breastfeeding training significantly improves the knowledge of cadres. These studies indicate that cadres trained in exclusive breastfeeding are more effective in educating

mothers, resulting in positive outcomes such as increased rates of exclusive breastfeeding and improved nutritional status among infants.

Exclusive breastfeeding training among cadres plays a crucial role in promoting optimal infant health and contributing to the overall well-being of communities. The knowledge imparted through such training empowers cadres to serve as reliable sources of information and support for mothers, ensuring that the benefits of exclusive breastfeeding are understood and embraced. Efforts to enhance this training and address challenges will contribute to creating healthier communities and fostering a positive start for infants in their crucial early months of life.

5. CONCLUSION

The community service activity took place on Monday, October 9, 2023, at Sulamadaha Health Center in Ternate City. The event proceeded smoothly, commencing at 09:00 and concluding at 13:00. The community service was attended by the Head of Sulamadaha, along with her staff, the cadres of Sulamadaha Health Center in Ternate City, Nursing D.3 students, and various community representatives.

The primary objective of this activity was to ensure that the cadres could actively participate in the training until the end of the event. This was evident through the numerous inquiries posed by the cadres regarding the presented material. The community service unfolded successfully, thanks to the collaborative efforts of the entire service team and the Sulamadaha Health Center in Ternate City. The empowerment of cadres in supporting the success of exclusive breastfeeding has yielded positive impacts on the health of both mothers and children, contributing to a reduction in infant and child mortality rates as well as maternal mortality.

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