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RESEARCH ARTICLE

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Buzz Group Discussion to Build Knowledge and Attitudes of Postpartum Mothers about Breast Care

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ABSTRACT

The postpartum period cannot be separated from the breastfeeding period, where efforts to prevent breast milk problems are very necessary through health education about breast milk, in order to achieve the goals that midwifery care wants to achieve during childbirth. This study aimed to know the influence of health education using buzz group discussions on knowledge and attitude about breast care at Oebobo Community Health Center, Kupang, Indonesia. This research was an experimental study with a pretest-posttest with control group design. Sample size was 60 postpartum mothers, selected using simple random sampling method. The intervention group was given a buzz group discussion method, while the control group was given a lecture method by health workers at the community health center. Data were analyzed using Wilcoxon test and Mann Whitney U test. The p-value of Wilcoxon test for intervention group were 0.000 for knowledge and 0.000 for attitude; while for control group, were 0.242 for knowledge and 0.147 for attitude. The p-value of Mann Whitney U test were 0.000 for knowledge and 0.000 for attitude. As conclusion, there is effect of buzz group discussion on knowledge and attitude about breast care.

Keywords: buzz group discussion; breast care; knowledge; attitude

INTRODUCTION

The postpartum period is the period that must be passed by a mother who has passed the fourth stage of childbirth, namely 2 hours after giving birth to 6 weeks or 42 days.⁽¹⁾ The postpartum period and lactation process are crucial processes for mothers who have babies, where a mother who is at this stage will continue her new role, namely breastfeeding her newborn baby. In the first two weeks of the postpartum period, breastfeeding difficulties often occur, and if not treated it can cause complications. This problem arises when the body produces breast milk. According to Government Regulation of Indonesia Number 33 of 2012, exclusive breast milk is given to babies from birth for six months, without adding or replacing other foods or drinks. However, for 2 decades, almost 2 to 3 babies have not received exclusive breast milk.⁽²⁾ Based on research from which stated that, it was found that there were several postpartum mothers who did not express breast milk immediately after giving birth.⁽³⁾ The breastfeeding process is a very complex interaction between mechanical, nervous and hormonal stimuli. Breastfeeding problems that usually occur in breastfeeding are sore nipples, swollen breasts, blocked milk ducts, mastitis and breast abscesses.⁽⁴⁾

There are several factors inhibiting the achievement of exclusive breastfeeding, namely limited knowledge of postpartum mothers about the benefits of breast care, low knowledge of mothers about breast milk and how to breastfeed, lack of lactation counseling services and support from health workers, behavior of working mothers who do not provide exclusive breastfeeding, and also due to factors from baby milk manufacturing companies that influence mothers and other health workers.⁽⁵⁾

Based on data from the World Health Organization (WHO), 44% of babies aged 0-6 months worldwide received certain types of breast milk globally, for the 2015-2020 period, out of the target of exclusive breastfeeding of 50%.⁽⁶⁾ Based on Indonesian Health data, the target for exclusive breastfeeding is 40%, while the average province in Indonesia achieves exclusive breastfeeding coverage of 56.9%.⁽⁷⁾ In East Nusa Tenggara Province, exclusive breastfeeding coverage in 2021 is 59%, this coverage is above the target for exclusive breastfeeding in 2021, but has decreased from 2020 of 78%.⁽⁸⁾

Kupang City Health Profile data provides exclusive breastfeeding coverage in all Community Health Centers in the Kupang City working area of 65.6%, this coverage is above the target, but one of the Community Health Centers whose coverage is still below the target is the Oebobo Community Health Center in Oebobo Regency, Kupang City at 33.8%.⁽⁹⁾

The origin of the buzz class discussion method is to divide a large group into small groups, consisting of five to 6 people, with the aim of discussing by exchanging ideas, so that a conclusion can be reached about a fight or quarrel health education provided.⁽¹⁰⁾

Based on the background, this study aimed to knowing the influence of health education using buzz group discussions on knowledge an attitude about breast care at Oebobo Community Health Center, Kupang, Indonesia.

METHOD

The type of this research was quasi-experimental study using a pretest-posttest with control group design.⁽¹¹⁾ The research was conducted at the Oebobo Community Health Center, Kupang City, East Nusa Tenggara Province, Indonesia. The population of this study was 70 postpartum mothers at Oebobo Community Health Center; while the sample was 60 postpartum mothers, selected using simple random sampling method.

The independent variable was health education using buzz group discussion method regarding breast care; while dependent variables were knowledge and attitude about breast care. Data were collected using questionnaire, then analyzed using Wilcoxon test and Mann Whitney U test.

This research was conducted by paying attention to the ethical principles of health research which include respect for autonomy, providing benefits, not harming and being fair to respondents.

RESULTS

The results of the analysis of changes in knowledge in the intervention group showed that in the pretest phase, knowledge in the good category was only 13.3% and increased to 93.3% in the posttest phase; this change was significant, marked by a p value = 0.000. In the control group, in the pretest phase, knowledge in the good category was 0 and in the posttest phase it was still 0; so there was no significant change, marked by a p value = 0.242. The increase in knowledge in the intervention group was significantly higher, marked by a p value for the Mann Whitney U test = 0.000 (Table 1).

The results of the analysis of changes in attitude in the intervention group showed that in the pretest phase, attitude in the positive category was only 40% and increased to 56.7% in the posttest phase; this change was significant, marked by a p value = 0.000. In the control group, in the pretest phase, attitude in the positive category was 60% and in the posttest phase it was 43.3%; so there was no significant change, marked by a p value = 0.147. The increase in attitude in the intervention group was significantly higher, marked by a p value for the Mann Whitney U test = 0.000 (Table 1).

Table 1. Changes in knowledge and attitudes between pretest and posttest in the intervention group and control group

Variables	Intervention group					Control group				
	Before		After		p-value	Before		After		p-value
	Frequency	Percentage	Frequency	Percentage		Frequency	Percentage	Frequency	Percentage	
Knowledge										
-Good	4	13,3	28	93.3	0.000 (Wilcoxon)	0	0	0	0	0.242 (Wilcoxon)
-Moderate	7	23.3	2	6.7		2	6,7	3	10	
-Bad	19	63.4	0	0		28	93.3	27	90	
The p-value	0.000 (Mann Whitney U test)									
Attitude										
-Positive	12	40	17	56.7	0.000 (Wilcoxon)	18	60	13	43.3	0.147 (Wilcoxon)
-Negative	18	60	13	43.3		12	40	17	56.7	
The p-value	0.0 Mann Whitney U test)									

DISCUSSION

Based on results, it was found that there was an influence of health education using buzz group discussion method on postpartum mothers' knowledge about breast care. Other research showed an increase in knowledge and changes in attitudes before and after the buzz group discussion method was carried out.⁽¹²⁾ The results of this study is also in line with other finding which states that the buzz group method of health education is more effective in increasing knowledge, attitudes and actions, so it is recommended that buzz group discussion method health education be used as a promotive and preventive effort.⁽¹³⁾ Kusuman stated that there is a significant influence of the buzz group discussion method on respondents' knowledge.⁽¹⁴⁾ According to research results of Wirabumi, it is stated that the weakness of the lecture method is the lack of opportunity to carry out a discussion process to solve problems, and develop courage in expressing opinions and the process of absorbing knowledge is lacking, because it relies on one direction.⁽¹⁵⁾

From the research results, it was found that there was an influence of health education using the buzz group discussion method on the attitudes of postpartum mothers regarding breast care. Buzz group discussion method is strengthened by research from Romeike, which stated that after 4 meetings the buzz group discussion method can

motivate and increase student interest.⁽¹⁶⁾ This is in line with research of Lindensi, which showed that knowledge, attitudes and actions in the intervention group using the buzz group method had the most significant influence on increasing knowledge, attitudes and actions in the control group using other methods.⁽¹³⁾ This is reinforced by research from Romeike, which states that after 4 meetings using the buzz group discussion method it can motivate and increase student interest.⁽¹³⁾

Buzz group discussions are an effective interactive method in health promotion because they allow for active participation from participants. They support the direct exchange of ideas and experiences, which can improve understanding and retention of information.^(17,18) In the context of health promotion, buzz group discussions facilitate open discussion on health issues, allowing participants to learn from each other's experiences. This not only improves knowledge but also community attitudes towards good health practices. Research shows that the buzz group method is more effective in improving mothers' knowledge, attitudes and actions regarding disease prevention compared to the traditional lecture method. In addition, buzz group discussions encourage engagement and creativity, which can lead to innovative solutions to health problems. They can also be adapted to different groups and settings, making them a flexible tool in health promotion. Thus, buzz group discussions are a valuable approach in improving community knowledge and attitudes for health promotion.^(19,20)

CONCLUSION

Based on the results, there is effect of buzz group discussion on knowledge and attitude of postpartum mothers about breast care.

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