



Relationship of Predisposing Factors with Breast Care in Pregnant Women in Sungai Orosan Village Padang Bolak District North Law

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ABSTRACT

Breast care needs to be done by pregnant women to be able to expedite the release of breast milk. Most pregnant women do not do breast care because of lack of knowledge in breast care itself, lack of information about breast care such as not protruding nipples, or flat, because of the condition of the breasts, especially the nipples. The purpose of this study was to determine the relationship between predisposing factors and breast care for pregnant women in Sungai Orosan Village, Padang Bolak District, North Padang Lawas Regency in 2021. The type of research was quantitative with a cross sectional study design. The population in this study were all pregnant women as many as 36 people. The sample in this study was all pregnant as many as 36 people. Data were analyzed by univariate and bivariate using Chi Square test. The results showed that there was a relationship between knowledge factors ($p= 0.004$), parity ($p= 0.004$) and employment status ($p= 0.003$) with breast care in pregnant women. The conclusion is that there is a relationship between knowledge, parity and employment status with breast care in pregnant women. It is hoped that pregnant women can increase their knowledge about breast care.

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1. INTRODUCTION

The health of pregnant women is one part of the world's health problems both in developed countries and in developing countries, of the 214 million people in Indonesia there are approximately 15 million children under the age of two years. If all babies are suckled until the age of two years,

then the amount of breast milk produced by 15 million mothers who breastfeed approximately 15 million per liter per day [1].

Pregnant women need to do breast care that can facilitate breast milk expenditure. Prenatal breast care is the treatment given to the breast for breastfeeding preparation with the aim of making it easier for babies to suck breast milk, to maintain breast health, so as to prevent disorders that can arise during breastfeeding [2].

Based on World Health Organization (WHO) data in 2017 on exclusive breast milk coverage in the world at only 36%. This achievement is still below the target of exclusive breast milk coverage set by WHO, which is 50%. In the United States, 44% of infants are exclusively breastfed for 3 months and only 22% are given for 6 months. Globally, no more than 35% of babies get breast milk for less than four months, in Egypt 79% of babies under the age of two months are breastfed. However, the proportion of exclusive breast milk decreases rapidly by the time the baby is 4-5 months old. About seven out of ten babies receive some form of supplement [3].

Indonesia Health Profile Data (2019) nationally, the coverage of exclusive breast milk babies in 2019 is 67.74%. This figure has exceeded the national exclusive breast milk coverage target of 50%. The highest percentage of exclusive breastfeeding coverage is in West Nusa Tenggara Province (86.26%), while the lowest percentage is in West Papua Province (41.12%). There are four provinces that have not reached the national target in 2019, namely Gorontalo, Maluku, Papua, and West Papua [4] [5] [6].

North Sumatra Provincial Health Profile Data (2019), from 186,460 infants aged from 186,460 infants aged < 6 months, reported only 75,820 infants who received exclusive breast milk (40.66%), this achievement is still far from the target set in the 2019 North Sumatra Provincial Health Office Strategic Plan of 53%. The districts/cities with the highest exclusive breast milk coverage are North Nias (84.28%), Sibolga (72.12%) and Samosir (69.05%). While the 3 lowest regencies / cities are West Nias (11.96%), Serdang Bedagai (16.20%) and Nias (17.62%). North Padang Lawas Regency is one of the districts whose exclusive breast milk coverage has not reached the target in North Sumatra Province, which is 53% [7] [8].

Breast care is one of the important parts that must be considered as a preparation for breastfeeding so that the baby gets exclusive breast milk, this is because the breast is an essential organ producing breast milk, namely the staple food of newborns so that the treatment must be done as early as possible. Most pregnant women do not do breast care because of lack of knowledge in breast care itself, lack of information about breast care such as nipples do not protrude, or flat, due to the state of the breasts, especially the nipples [9] [10].

Nipples are one of the factors that determine the success of the lactation process, lack of awareness of the importance of breast care during pregnancy, lack of support from the family to carry out breast care since pregnancy, and not yet provided health education by health workers about breast care during pregnancy. Mothers need help and information and support from all parties to take care of the breast during pregnancy to prepare breast milk at the time of delivery so as to increase the confidence that they can breastfeed the baby well and know the function and benefits of breast care during pregnancy [11] [12] [13].

Breast care can stimulate the breast muscles that will affect the hypophyse to secrete the hormones progesterone, estrogen, and oxytocin to remove breast milk, especially if done routinely during pregnancy to delivery. Mothers will also feel relaxed and comfortable and reduce discomfort, fatigue, stress, and depression in the mother so as to help smoothly breast milk production [14] [15].

One of the problems that occur due to lack of breast care is a decrease in breast milk production. The production and production of breast milk is influenced by two hormones, namely prolactin and oxytocin. Prolactin affects the amount of breast milk production, while oxytocin affects the process of milk production. Breast care is very important, one of which is maintaining breast hygiene, especially the cleanliness of the nipples to avoid infection, softening and improving the shape of the nipples so that the baby can breastfeed properly, stimulate the glands and hormones

prolactin and oxytocin to increase milk production smoothly and know early nipple abnormalities and make efforts to overcome them [16] [17].

Triana's 2018 study found that respondents' knowledge of breast care during pregnancy was mostly less good (40.8%), negative (51%) and did poor breast care (55.1%). There is a relationship of maternal knowledge and attitude with breast care during pregnancy with a value of p of $0.000 < 0.05$, respectively [18].

Preliminary studies that have been conducted found that the number of pregnant women in Sungai Orosan village, Padang Bolak District, North Padang Lawas Regency in 2021 is as many as 36 people. Based on the survey conducted and the results of interviews conducted to 4 pregnant women, 3 people said they did not do breast care during pregnancy because they did not know how to do breast care and did not care about the benefits of breast care in pregnant women and 1 person did breast care.

Based on this, the researchers were interested in conducting research on "Predisposing Factor Relationship with Breast Care in Pregnant Women in Orosan River Village, Padang Bolak District, North Padang Lawas Regency". The purpose of this study is to find out the relationship of predisposing factors with breast care in pregnant women in Orosan River Village, Padang Bolak District, North Padang Lawas Regency.

2. RESEARCH METHOD

This type of research is quantitative research. The design of this study using a cross sectional study with the aim to determine the relationship of predisposing factors with breast care in pregnant women in Orosan River Village, Padang Bolak District, North Padang Lawas Regency in 2022, was observed in the same time period.

This research will be carried out in Sungai Orosan Village, Padang Bolak District, North Padang Lawas Regency. The reason researchers are because many pregnant women do not know about breast care and it is expected that after research the knowledge of pregnant women about breast care is further increased.

The population in this study is all pregnant women in Sungai Orosan Village, Padang Bolak District, North Padang Lawas Regency in 2022 as many as 36 pregnant women. The sample in this study was all pregnant women in Sungai Orosan Village, Padang Bolak District, North Padang Lawas Regency in 2022 as many as 36 pregnant women. The sampling technique in this study is to use the total sampling technique, namely the entire population is used as a sample.

Analyze the data used using the Chi-Square test with a confidence level ($\alpha = 0.05$). The hypothesis is that H_a is accepted if $p < 0.05$ or the value of X^2 calculates $> X^2$ table (3,841), then the variable is declared significantly related, and the hypothesis H_0 is accepted if $p > 0.05$ then the variable is declared unrelated.

3. RESULT AND DISCUSSION

3.1 Results

a. Univariate

Table 1
Distribution of Sample Characteristics

Characteristics	n	Persentase (%)
Education		
SD	14	28,6
SMP	5	10,2
SMA	6	12,2
D3	13	26,5
Jumlah	36	100,0

Characteristics	n	Persentase (%)
Profession		
IRT	9	25,0
PNS	3	8,3
Wiraswasta	5	14,0
Petani	16	44,4
Pegawai Swasta	3	8,3
Jumlah	36	100,0

Table 1 shows that the majority of respondents are in the < 20 age group and the 35-year-old > as many as 20 people (55.6%) and the minority of respondents are in the 20-35 age group as many as 16 people (44.4%). Based on education level shows that the majority of the respondents' education level is high school which is as many as 19 people (52.8%) and the minority level of education respondents is elementary school which is as many as 4 people (11.1%). Based on the type of work shows that the majority of the types of work respondents are farmers, namely as many as 16 people (44.4%) and the minority of respondents' types of work are private employees and civil servants, namely as many as 3 people (8.3%).

Table 2
Distribution Of Research Variables In Desa Sungai Orosan

Variables	n	Persentase (%)
Knowledge		
Less	21	58,3
Good	15	41,7
Parity		
Risk	20	55,6
Not at risk	16	44,4
Types of Jobs		
Work	27	75,0
NotWorking	9	25,0
Breast Care		
Not done	26	72,2
Done	10	27,8
Total	36	100,0

Table 2 shows that the majority of knowledge Respondents were less than 21 people (58.3%) and a minority of respondents of good knowledge as many as 15 people (41.7%). The majority of respondents had a risky parity of 20 people (55.6%) and a minority of respondents had a non-risk parity of 16 people (44.4%). The majority of respondents' employment status was 27 people (75.0%) and the minority of respondents' employment status was not working, which was 9 people (25.0%). The majority of respondents did not do breast care, namely as many as 26 people (72.2%) and a minority of respondents did breast care as many as 10 people (27.8%)

Table 3
Relationship of Age, Knowledge, Trust Status with IUD Contraceptive Use

Variabels	P- value
Knowledge	0,004
Parity	0,004
Employment Status	0,003

Table 3 shows that there is a knowledge, parity and employment status relationship with breast care in pregnant women in Sungai Orosan Village, Padang Bolak District, North Padang Lawas Regency.

3.2 Discussion

a. Knowledge Relationship with Breast Care in Pregnant Women

Based on the results of the study showed that the majority of sample knowledge was less, namely as many as 21 people (58.3%) and a minority of good knowledge samples as many as 15 people (41.7%). Bivariate analysis found that there is a knowledge relationship with breast care in pregnant women in Sungai Orosan Village, Padang Bolak District, North Padang Lawas Regency.

The results of the study found that respondents' knowledge about breast care in Sungai Orosan Village, Padang Bolak District, North Padang Lawas Regency, was largely lacking. Knowledge is influenced by several factors including the level of education. The education of the majority of respondents was high school which was 19 people (52.8%). In addition, knowledge is also influenced by the source of information obtained by mothers about breast care.

Knowledge is the result of "knowing", and this happens after people have sensed a particular object. Knowledge or cognitive is a very important domain for the formation of one's actions (overt behaviour) [19].

Another study conducted by Sriatin (2017) found that most of the knowledge of pregnant women in the category of knowledge is lacking in the Ranomeeto Health Center of South Konawe Regency. Most pregnant women are not prepared for the lactation period at the Ranomeeto Health Center in South Konawe Regency. There is a relationship of maternal knowledge about breast care with readiness to face lactation periods in pregnant women at the Ranomeeto Health Center of South Konawe Regency ($p = 0.000$; $X^2=32,918$) [20].

Breast care during pregnancy is one of the important parts that must be considered in preparation for breastfeeding. But most pregnant women do not do breast care because of the lack of knowledge in breast care itself. Lack of knowledge about breast care is due to a lack of information about the goals and benefits to the self-health of the mother or baby. So it can be said that a pregnant woman who has a good knowledge of the purpose and benefits for the health of the mother or baby and the consequences that can arise if not doing breast care during pregnancy will affect her actions or behavior [21].

According to the assumption of researchers that there is a knowledge relationship with breast care in pregnant women. Based on the results of the study, it can be concluded that the lack of knowledge of respondents about breast care is due to the lack of information about the purpose and benefits of breast care for the health of mothers and babies.

b. Relationship of Parity with Care Breasts in Pregnant Women

The results showed that the majority of the samples had a risky parity of 20 people (55.6%) and the sample minority had a non-risk parity of 16 people (44.4%). Bivariate analysis found that there is a parity relationship with breast care in pregnant women in Sungai Orosan Village, Padang Bolak District, North Padang Lawas Regency in 2022.

Parity broadly includes gravide/number of pregnancies, number of births, and abortus/number of miscarriages. It is in a special sense that is the number or number of children born. Parity is said to be high when a mother/woman gives birth to a fourth or more child. A woman who already has three children and is pregnant again her health condition will begin to decline, often experience lack of blood (anemia), bleeding through the birth canal and the location of the breech or transverse baby [22].

The results of this study are in accordance with research conducted by Anggraeni, which states that there is a relationship between parity and the incidence of breast care ($p = 0.000$) [23].

Information is one of the factors that affect parity, the higher the respondent's education, the easier it is to receive information, so that the mother's ability to think more rationally. Highly educated mothers will think more rationally that the ideal number of children is 2 people [24].

According to the assumption of parity researchers related to breast care in pregnant women. Parity is thought to have something to do with the direction of finding information about the mother's knowledge in caring for breasts. It is associated with the influence of one's own and others' experiences on knowledge that can influence current or later behavior. The experience gained can expand a person's knowledge in caring for breasts.

c. Relationship of Employment Status with Breast Care in Pregnant Women

Based on the results of the study showed that the majority of the sample employment status was 27 people (75.0%) and the minority of the sample's employment status was not working, which was as many as 9 people (25.0%). Bivariate analysis found that there is a relationship between work status and breast care in pregnant women in Sungai Orosan Village, Padang Bolak District, North Padang Lawas Regency in 2022. Working respondents are less likely to have time for breast care during their pregnancy.

Work is a bridge to earn money in order to meet the needs of life and to get the quality of life, one of which is the health care facilities he wants. Many assume that a person's high employment status, then can have many children because they are able to meet the needs of daily life. High family economic conditions encourage mothers to have more children because the family feels able to meet the needs of life.

A solid job status will affect the mother's chances of breast care during her pregnancy. Due to the solid work status causes mothers not to pay attention to the condition of the body if fatigue, nutrient intake and rest that must be met every day [25].

The results of a study conducted by Annisa (2018) found that breast care behavior was more performed in mothers who did not work by 76.0%, compared to working mothers by 68.8% [26].

The results of this study are also in line with research conducted by Rosyati & Sari (2016) which found that there is a relationship of employment status with breast care. Mothers who do not work do not do breast care due to lack of knowledge about it [27].

According to the researchers' assumptions, the mother's employment status is related to breast care during pregnancy. If the mother's employment status is working, then it is very likely that the mother did not do breast care during pregnancy. Because most working mothers do not have time to do breast care, so it allows the mother not to give breast care.

4. CONCLUSION

There is a relationship of breast care knowledge in pregnant women with a value of $p = 0.004$. There is a parity relationship with breast care in pregnant women with a value of $p = 0.004$. There is a relationship of employment status with breast care in pregnant women with a value of $p = 0.003$.

REFERENCES

- [1] R. HS, "Pedoman dan Perawatan Kehamilan yang Sehat dan Menyenangkan," *Bandung: Nuansa Aulia*, 2010.
- [2] R. P. Sari, "Analisis kuantitatif bakteri escherichia coli pada air minum isi ulang di wilayah Sungai Besar Kota Banjarbaru," *J. Ilm. Ibnu Sina*, vol. 1, no. 1, pp. 26–35, 2016.
- [3] W. H. Organization, "Exclusive breastfeeding for optimal growth, development and health of infants," *World Heal. Organ. https://www.who.int/elena/titles/exclusive_breastfeeding/en/*. Publ., 2019.
- [4] L. Kambera, B. A. Pratiwi, R. Yanuarti, O. Oktarianita, and N. Wati, "Pengetahuan dan Sikap Ibu Menyusui Tentang Asi Eksklusif Pada Masa Pandemi Covid-19," *Poltekita J. Ilmu Kesehatan*, vol. 15, no. 3, pp. 256–262, 2021.
- [5] M. Siafitra, H. Febriani, and Y. Ernawati, "Faktor-faktor Yang Berhubungan Dengan Pemberian ASI Eksklusif di Posyandu Desa Nogotirto Puskesmas Gamping II Sleman," 2021.
- [6] S. Rosa and M. Duana, "Pengaruh Sosialisasi Kader Posyandu terhadap Peningkatan Pengetahuan Tentang IMD dan Asi Eksklusif," *Syntax Idea*, vol. 4, no. 1, pp. 198–206, 2022.
- [7] T. Z. Fahira, "Faktor-Faktor Yang Berhubungan dengan Pemberian ASI Eksklusif di Wilayah Kerja Puskesmas Galang Kecamatan Galang Kabupaten Deli Serdang." Universitas Islam Negeri Sumatera Utara Medan, 2021.
- [8] A. E. P. H. ZAI, "FAKTOR YANG MEMENGARUHI HAMBATAN DALAM PEMBERIAN ASI EKSKLUSIF PADA BAYI USIA 0-6 BULAN DI UPTD PUSKESMAS NON RAWAT INAP MANDREHE BARAT TAHUN 2019." INSTITUT KESEHATAN HELVETIA, 2019.
- [9] A. Rahmawati and F. Realita, "Pengetahuan Ibu hamil tentang perawatan payudara," *J. Kebidanan*, 2016.
- [10] L. DAMNIK, "Hubungan Perawatan Payudara Pada Ibu Dengan Kelancaran Asi Pada Ibu Postpartum Di

- RSU Estomihi Medan Tahun 2018." INSTITUT KESEHATAN HELVETIA, 2018.
- [11] N. Indrasari, "Hubungan Pengetahuan Ibu Hamil Dengan Pelaksanaan Perawatan Payudara," *J. Ilm. Keperawatan Sai Betik*, vol. 12, no. 1, pp. 1-7, 2017.
- [12] U. Roesli, *Mengenal ASI eksklusif*. Niaga Swadaya, 2000.
- [13] S. Jeniawaty, "Pengalaman Dan Harapan Asuhan Keperawatan Psikososial Masa Nifas Menghadapi Asi Belum Keluar 0-3 Hari Pascasalin," *J. Ners*, vol. 11, no. 2, pp. 261-268, 2016.
- [14] A. P. Rizqiani, "Pengaruh Terapi Pijat Oksitosin terhadap Produksi ASI pada Ibu Post Partum Primigravida di Rumah Bersalin Citra Insani Semarang." Universitas Muhammadiyah Semarang, 2017.
- [15] L. Fatmawati, Y. Syaiful, and N. A. Wulansari, "Pengaruh Perawatan Payudara terhadap Pengeluaran Asi Ibu Post Partum," *Journals Ners Community*, vol. 10, no. 2, pp. 169-184, 2019.
- [16] T. S. Purwanto and T. P. Rahayu, "ASUHAN KEBIDANAN NIFAS DAN MENYUSUI."
- [17] R. Haltitah, "Manajemen Asuhan Kebidanan Berkelanjutan pada Ny.'R' Usia Kehamilan Trimester III Sampai Post Partum Minggu Ke-IV dengan Kelainan Bentuk Puting di Puskesmas Bara-Baraya Makassar Tanggal 17 September-04 November Tahun 2018." Universitas Islam Negeri Alauddin Makassar, 2018.
- [18] H. Triana, "HUBUNGAN PENGETAHUAN DAN SIKAP IBU DENGAN PERAWATAN PAYUDARA SELAMA HAMIL," *J. KEPERAWATAN FLORA*, vol. 11, no. 1, 2018.
- [19] W. dan Dewi, *Teori dan Pengukuran Pengetahuan, Sikap dan Perilaku Manusia*. Yogyakarta: Nuha Medika, 2011.
- [20] Sriatin, "HUBUNGAN PENGETAHUAN IBU TENTANG PERAWATAN PAYUDARA DENGAN KESIAPAN MENGHADAPI MASA LAKTASI PADA IBU HAMIL DI PUSKESMAS RANOMEETO KABUPATEN KONAWA SELATAN," vol. 110265, p. 110493, 2017.
- [21] N. Indrasari, "Hubungan Pengetahuan Ibu Hamil dengan Pelaksanaan Perawatan Payudara," *J. Keperawatan*, vol. 12, no. 1, pp. 1-7, 2016.
- [22] Marmi, *Asuhan Kebidanan Pada Ibu Nifas*. Yogyakarta: Pustaka Belajar, 2015.
- [23] Anggraeni, "Gambaran Tindakan Perawat pada Pasien Post Operasi Nyeri di RSUD Panembahan Senopati Bantul Yogyakarta," 2016.
- [24] S. Pujiastuti, "Hubungan Paritas dengan Penggunaan IUD Post Plasenta Di RSUD Wates Kabupaten Kulon Progo Tahun 2016," *Univ. 'Aisyiyah Yogyakarta*, 2017.
- [25] L. P. S. P. Sutama, S. Arifin, and I. Yuliana, "Hubungan Pekerjaan, Paritas, dan Keterampilan Perawatan Payudara dengan Perilaku Pemberian ASI Eksklusif," *Homeostasis*, vol. 3, no. 3, pp. 385-394, 2020.
- [26] A. A, "Faktor- Faktor yang Mempengaruhi Perilaku Perawatan Payudara (Breast Care) pada Ibu Berhasil Menyusui ASI Eksklusif di Wilayah Kerja Puskesmas Pegandan Kota Semarang," *Undergrad. thesis, Diponegoro Univ.*, 2018.
- [27] R. I. Sari, Y. I. Dewi, and G. Indriati, "Efektivitas Kompres Aloe Vera Terhadap Nyeri Pembengkakan Payudara Pada Ibu Menyusui," *J. Ners Indones.*, vol. 10, no. 1, p. 38, 2019.