

## Community Service Through Training and Mentoring “Traditional Herbal Recipes for Pregnancy and Postnatal Care”

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### ABSTRAK

The aim of this training activity is to reduce the risk of Maternal Mortality Rate in the pregnant and postpartum women, provide more economical alternative methods, and increase the professional competence of midwives in pregnancy and postnatal care. The methods used are online presentations, questions/answers, and discussions via Zoom webinars as well as online and offline mentoring. The results were the community service activities through training on traditional herbal recipes for pregnancy and postpartum care received a positive response and were quite well received by the participants who took part in the training organized by the collaboration between the Future Insight Training Institute and STIKES Bina Usada Bali. It is hoped that there will be more in-depth collaboration between interested parties, such as carrying out follow-up projects from training with companies that have expertise in traditional medicines such as project partners.

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## INTRODUCTION

Based on data from the Ministry of Health of the Republic of Indonesia (2022), the Maternal Mortality Rate (MMR) in Indonesia is around 183 per 100 thousand births (Gunungmuda, 2023). The Maternal Mortality Rate (MMR) in Indonesia is still the highest in Southeast Asia. Looking at the MMR, Indonesia is still far from the Sustainable Development Goals (SDGs) target of 70 per 100 thousand live births in 2030 (Indonesian Ministry of Health, 2020). Several potential direct factors affecting the Maternal Mortality Rate (MMR) in Indonesia are during pregnancy and postpartum.

Pregnancy is a physiological process in which sperm and ovum cells meet in the ovary or is known as conception until it grows into a zygote which then attaches to the uterine wall, forms the placenta, and grows and develops until the birth of the baby. The normal length of pregnancy is 280 days (40 weeks) calculated from the first day of the last menstruation. In the development of pregnancy under certain conditions, pregnancy can become a problem or complication at any time so that it can endanger the condition of the mother and baby such as infection, hypertension and preeclampsia, miscarriage, abnormalities and others (Efendi et al., 2022). WHO also estimates that around 15% of all pregnant women will develop complications related to their pregnancy and can threaten their lives (Damayanti, 2019). Then, post-natal is a quite critical phase because the mother has to struggle to recover her body and requires greater energy requirements than during pregnancy because the mother needs a lot of food and nutritional intake to breastfeed her baby (Ramadhani et al., 2015). If it is not handled properly during the postpartum process, a mother can suffer from infections, depression and even bleeding that can lead to death. So, pregnancy and postpartum experienced by a mother require good care.

Pregnancy and postnatal care refers to maintaining or improving the health status of pregnant and postnatal women through various efforts including prevention, diagnosis, therapy and recovery. In modern times, the development of medicines, especially chemical medicines, is very rapid. However, it should be noted that the use of chemical drugs in pregnancy and postnatal care must be reconsidered to minimize risks to the mother and baby so that an alternative that can be used to improve health status from within is the use of traditional herbal recipes. These traditional concoction recipes usually come from traditional medicinal plants that are easily available around where you live and are more affordable economically, such as turmeric, betel leaves, katuk leaves, ginger, black ginger, ginger, moringa leaves, gandarusa leaves, landep leaves, young papaya leaves, lime, lemongrass, purple leaves, nutmeg or animal ingredients, mineral ingredients, extract preparations (galenic) and others (Jamal et. al., 2021). Based on this, community service is carried out through training activities using Zoom media online and face to face and in collaboration with the Future Insight Training Institute and STIKES Bina Usada Bali with the aim of reducing the risk of Maternal Mortality Rate (MMR) in pregnant and postpartum women with the theme "Traditional Herbal

Recipes for Pregnancy and Postpartum Care" and providing alternative methods for pregnancy care and postpartum which is more economical.

## **IMPLEMENTATION AND METHODS**

Community service through training on traditional herbal recipes for pregnancy and postpartum care is carried out using presentations, questions and answers, discussions and mentoring using Zoom webinars as well as online and offline mentoring. This training activity was held at 09.00 WITA on Saturday, February 3 2024. This activity was organized by STIKES Bina Husada Bali in collaboration with the Future Insight Training Institute supported by SKP IBI. This training activity was attended by a total of 129 participants including resource persons, STIKES Bina Usada Bali lecturers, Puskesmas/Hospital midwives, STIKES Bina Usada Bali midwife profession students, and traditional healers. This training activity aims to provide further knowledge to health workers about medicinal plants and how to use them to care for the health of pregnant or postpartum women, natural alternatives to health products that have minimal side effects and can provide support for the mental well-being of pregnant or postpartum women. The timeline of this training activity is shown as follows:

### **1. Preparation**

Several things that must be done before starting the training activity with the theme "Traditional Herbal Recipes for Pregnancy and Postpartum Care" via the Zoom application in collaboration with STIKES Bina Usada Bali and the Future Insight Training Institute are:

- a. Planning training activities with related parties, namely the Future Insight Training Institute and STIKES Bina Usada Bali to improve the professionalism of midwives. This planning includes the place or application used, the material to be taught, what equipment needs to be prepared, activity schedule, learning methods and others.
- b. Identify which lecturers will be resource persons in training activities on traditional herbal recipes for pregnancy and postnatal care and who have special expertise in this field.
- c. Prepare the electronic equipment used to ensure that there are no obstacles in using the online Zoom application in training activities such as lost signal, inaudible sound or miscommunication when providing material.
- d. Identify participants in training activities on traditional herbal recipes for pregnancy and postnatal care so that their participation in the training activities can be guaranteed until the end.
- e. Preparation of learning materials that include basic and advanced information regarding traditional herbal recipes used for pregnant and postpartum women.
- f. Prepare evaluation tools to measure the success of activities and determine how to get good feedback from participants to improve the quality of subsequent training.

## **2. Implementation of Training Activities**

Participants in the training activity on traditional herbal recipes used for pregnant and postpartum women with a total of 129 resource persons, STIKES Bina Usada Bali lecturers, Puskesmas/Hospital midwives, STIKES Bina Usada Bali midwife profession students, and traditional healers entered the Zoom media room on The predetermined schedule is 09.00 WITA. Then, the next thing to do is:

- a. The opening remarks made by the resource person include an introduction to the resource person's name, position and expertise. The resource person also expressed the aim of training on traditional herbal recipes for pregnancy and postnatal care so that training participants are more aware of the dangers of the pregnancy and postnatal process.
- b. The resource person also explained the procedures for asking questions after the presentation material was explained.
- c. The presenter began to explain the material on the Zoom webinar screen related to the introduction of various traditional medicinal plants which are generally used as herbal medicine during pregnancy and the birthing process, an explanation of how medicinal plants can provide specific health benefits for pregnant women and babies, an explanation of physical changes and hormones experienced by pregnant and postpartum women, a step by step guide on how to prepare traditional concoctions (recipes), an explanation of safe dosages and the right time to use these medicinal plants, an explanation of the risks and safety of using medicinal plants during pregnancy and postpartum and others.
- d. online question and answer sessions via Zoom media . Participants are invited to ask questions related to the speaker's presentation.
- e. The resource person began to invite the participants to discuss after the question and answer session was completed. The resource person asked whether there were any answers from the source that were less relevant. If there is, this session will discuss it in more depth.
- f. The resource person received feedback from the participants after the discussion session was over.
- g. Closing. The speaker ends the session to change to the next speaker

## **3. Accompaniment**

Assistance in training on traditional herbal recipes for pregnancy and postpartum care is carried out for 3 (three) months with 1 (one) meeting every week. Mentoring is carried out online using Zoom webinars and offline using face to face meetings with participants in the practice room or STIKES Bina Usada Bali Laboratory. The activities carried out are:

- a. The resource person provided an explanation of important nutrition, discussed healthy foods and the importance of nutritional intake during pregnancy and postpartum.
- b. Teaches the selection of ingredients, how to use and the benefits of various traditional herbs
- c. Assist in preparing herbal recipes based on the needs and health conditions of pregnant and postpartum women.

- d. Demonstrate how to process ingredients correctly and emphasize the importance of cleanliness in the processing process.
- e. Provide information about possible side effects of the herb and explain potential interactions with other medications or supplements that may be used.
- f. Convey information about physical and emotional changes that may be experienced during pregnancy and postpartum and provide suggestions for stress management.
- g. Ensure that pregnant and postpartum women can understand and apply the recipes and advice given.

The methods used in community service through training activities on traditional herbal recipes for pregnancy and postnatal care are presentations, questions and answers, discussions and mentoring using Zoom webinars as well as online and offline mentoring . Participants will also receive an IBI SKP e-Certificate. This activity was attended online by a total of 129 participants including resource persons, STIKES Bina Usada Bali lecturers, Puskesmas/Hospital midwives, STIKES Bina Usada Bali midwife profession students, and traditional Indonesian herbal healers.

The equipment used by resource persons in online Zoom webinars is a laptop, internet, laptop camera, laptop microphone and Zoom application space which has been paid for unlimited time. The equipment used offline is the practice room for offline assistance at STIKES Bina Usada Bali and the tools used (such as grinders, cups, spoons, squeezers, etc.) to process natural ingredients into traditional potions.

The materials used in the training activity on traditional herbal recipes for pregnancy and postpartum care are material related to traditional herbal recipes (measurements and preparation methods) for pregnancy and postnatal care, examples of natural ingredients that will be made into potions and also powerpoints.

## **RESULTS AND DISCUSSION**

In community service activities through training on traditional herbal recipes for pregnancy and postpartum care via Zoom webinar, Dr. Teguh Setiawan Wibowo, MM, M.Si., M. Farm., Apt., Director of the Yannas Husada Bangkalan Pharmacy Academy and Traditional Medicine Expert, acted as one of the speakers. The resource persons began the training by introducing themselves and the rules that had to be followed before the presentation was given to a total of 129 participants including resource persons, STIKES Bina Usada Bali lecturers, Puskesmas/Hospital midwives, STIKES Bina Usada Bali midwife profession students, and traditional healers. Then, the resource person, while sharing his presentation material via share screen on the Zoom application, stated that traditional medicine is a concoction of ingredients in the form of plant ingredients, animal ingredients, mineral ingredients, extract preparations (galenic) or mixtures of ingredients that have been used for generations for treatment in accordance with established norms. applies in society. Traditional medicine also usually uses natural ingredients known as

"JAMU". The resource person explained that herbal medicine has great potential because it comes from nature, meets human purchasing power, the species are diverse, and around 50% of Indonesians use herbal medicine, of which 96% feel the benefits. This is supported by Indonesia which has various species of flowering plants (10%), mammal species (12%), amphibian and reptile species (16%), bird species (17%), fish species (15%), and insecticide species (15%). Viewed from health, economic and socio-cultural dimensions, cultural heritage in the form of traditional medicine has been empirically proven and has comparative advantages over chemical medicine.

Traditional herbs (Jamu) are holistic, provide nutrition to body cells, are effective for chronic and degenerative diseases, have few side effects, have multiple benefits, are safe for long-term use, have been tested by time, and are widely grown around where you live. The resource person explained how herbal medicine is used for the elderly, working age, teenagers, school children, toddlers, pregnant and post-natal mothers and the use of herbal medicine since colonial times. Jamu "Brand" Indonesia was also declared on March 4 2008. Then, herbal medicine products began to be developed by indigenous UKM which were adapted to scientificization and a competitive transformation system for the peak of Indonesian public health and urged that herbal medicine should no longer be discriminated against.

So far, traditional ingredients are most widely used in DIY, East Java and Papua (49% of ingredients). The government also regulates traditional health services in Article 48 paragraph 1 of Law no. 36 of 2009 concerning Health. However, sources said that it was still difficult for Indonesia to face competition from chemical drugs supplied by the United States, even though Indonesia is the second largest provider of herbal raw materials in the world. Apart from that, it is still difficult for Indonesian traditional medicines to be exported. In fact, naming and marking herbal medicines in Indonesia has been done using logos for traditional medicines. The concept of health is also increasingly developing with the existence of Jamu Cafes in Jakarta.

The resource person explained the things that need to be considered in making herbal medicine as traditional medicine, namely identifying plant materials (not using the wrong plant materials), don't use aluminum equipment, weighing and measuring using grams and liters as units, the degree of fineness of plant materials affects the process of releasing materials. efficacious, and storage such as refrigerators/shady places/dark bottles greatly affect the quality of herbal medicine. The important thing to remember is that herbal medicine must be made from fresh ingredients as traditional medicinal ingredients. These traditional ingredients are left in boiling water for around 10-15 minutes with the pan covered. The order of adding natural ingredients is to prioritize the hard parts such as wood stems, rhizomes, bark and roots. After that, add softer ingredients such as bulbs, flowers and leaves. Once again, the most important thing is not to use aluminum equipment because it will easily react with medicinal plants so that it can poison or reduce the efficacy of the medicinal plants. The resource person explained that traditional measurements can be converted to more accurate measurements, for example 1 teaspoon is

equivalent to 5 ml, 1 tablespoon is equivalent to 20 ml, 1 glass is equivalent to 200 ml, and 1 glass of wine is equivalent to 70 ml or 150 ml.

Furthermore, the resource person explained that there would be problems faced by a mother during pregnancy and postpartum, such as leg muscle cramps, anemia, nausea and vomiting, postpartum pain, poor breastfeeding, hemorrhoids, lack of sleep and others. The resource person shared traditional herbal recipes for treating leg muscle cramps using landep leaves and betel lime, treating muscle pain using willow leaves and betel lime, preventing anemia using Moringa leaves, treating nausea and vomiting using ginger and honey, treating postpartum pain using ginger and turmeric, helps restore the uterus after giving birth using black ginger and honey, increases breast milk production using ginger, meniran and gotu kola, helps smooth and tighten the skin using lime and whiting, improves fitness after giving birth using lemongrass, brown sugar, cinnamon and tea, treat hemorrhoids using violet leaves and honey, improve sleep quality using nutmeg, bangle and coconut oil. The resource person also explained that there are traditional spice recipes used for postpartum baths, spice recipes for cebokan, herbal medicine recipes for 3 months pregnant, herbal medicine recipes for 5 months pregnant, herbal medicine recipes for 7 months pregnant, herbal medicine recipes for swollen feet during pregnancy, maternity herbal medicine, fragrant pilis and others.

After explaining all the material presented, the resource person opened a question and answer session to the participants who took part in this training. The questions that arise are recorded first and answered by the resource persons one by one so that the questions raised can be answered properly. After the question and answer session was completed, the resource person held a discussion session together with all the participants present, such that any input or dissatisfaction with the resource person's answer would be discussed in more depth by the resource person if necessary. Resource persons also receive suggestions and input provided by participants present or from the activity committee. Then, the resource person asked for feedback from all participants present to improve the quality of the training in the future.

During the training activity with the theme "Traditional Herbal Recipes for Pregnancy and Postpartum Care", training participants who used the Zoom webinar application included resource persons, STIKES Bina Usada Bali lecturers, Puskesmas/Hospital midwives, STIKES Bina Usada Bali midwife profession students, and traditional healers with a total of 129 participants, they still rarely use traditional recipes or ingredients in pregnancy and postpartum care in community health centers and hospitals, especially community health centers and hospitals in big cities. However, the online participants were very enthusiastic and interested in learning traditional herbal recipes for pregnancy and postnatal care. The use of traditional concoctions known as herbal medicine can also be an alternative to the high prices of modern treatments at Community Health Centers/Hospitals which are much cheaper and more economical. Apart from that, it is also easy to find around your residence or house. Some documentation related to the process of training activities with the

theme "Traditional Herbal Recipes for Pregnancy and Postnatal Care" via Zoom webinar is shown in the following image.



Figure 1 Banner and Virtual Background for Traditional Herbal Recipe Training Activities for Pregnancy and Postnatal Care (Source: Personal Documentation)

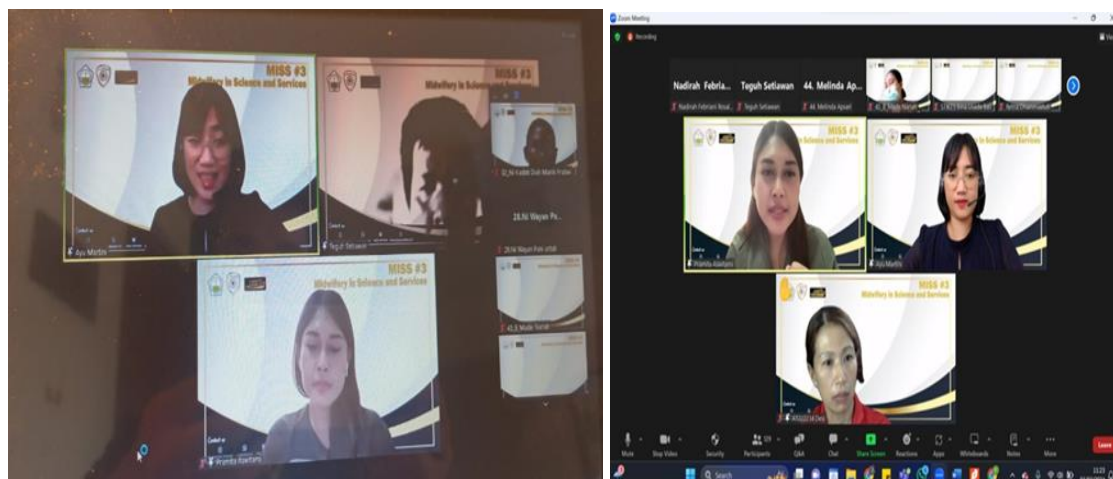


Figure 2 Screenshot of Zoom Webinar Training Activities on Traditional Herbal Recipes for Pregnancy and Postpartum Care (Source: Personal Documentation)



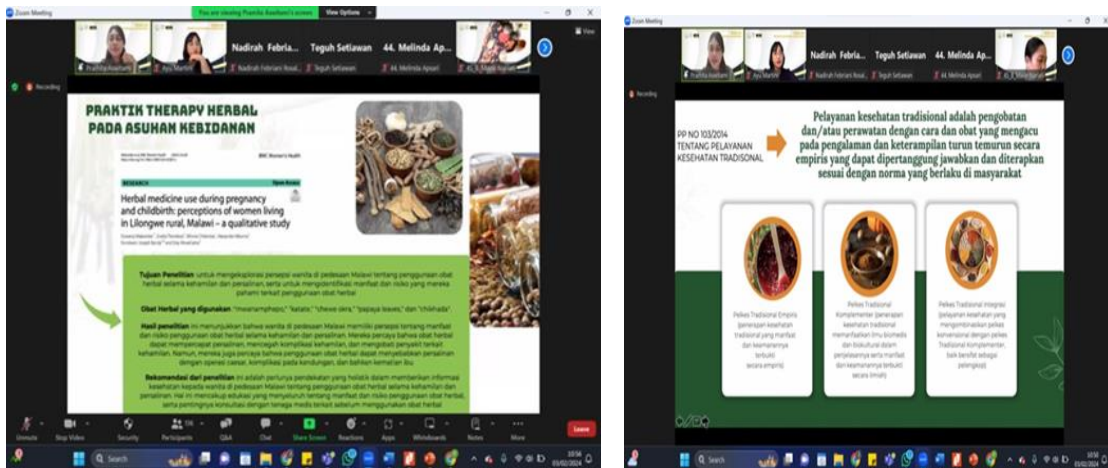


Figure 3 Screenshot of Training Material for Traditional Herbal Recipes for Pregnancy and Postpartum Care from One of the Resource Persons (Source: Personal Documentation)

## CONCLUSIONS AND RECOMMENDATIONS

Community service activities through training on traditional herbal recipes for pregnancy and postpartum care include presentations, questions and answers, discussions and assistance using Zoom webinars as well as online and offline assistance by resource persons as an alternative form of treatment rather than using chemical drugs which can harm the condition of the mother and baby in critical times which have minimal side effects and provide further knowledge to health workers about medicinal plants and how to use them to care for the health of pregnant or postpartum women. This training activity received a positive and quite good response from a total of 129 participants, including resource persons, STIKES Bina Usada Bali lecturers, Puskesmas/Hospital midwives, STIKES Bina Usada Bali midwife profession students, and traditional healers. It is hoped that the local government, Health Service, Community Health Center and Hospitals in the Bali area will support this kind of training as an alternative medicine and can collaborate more deeply, such as carrying out follow-up projects from training with companies that have expertise in traditional medicines as project partners so that they can supports pregnant and postpartum women to minimize the consumption of chemical drugs.

Based on the results of the training activities on traditional herbal recipes for pregnancy and postpartum care above, it is hoped that graduates of STIKES Bina Usada Bali will be able to more deeply apply the use of traditional herbal recipes (jamu) as medicine prescriptions issued by Community Health Centers or Hospitals (already in packaging form). drug). Apart from that, policy holders in the world of Indonesian health, especially the Ministry of Health, can make clear rules regarding the regulation of traditional medicines as alternative medicines for pregnant and postpartum women, as well as Community Health Center/Hospital midwives, recommend that pregnant and postpartum women

patients tend to use traditional ingredients that have been used. has packaging like ordinary medicine.

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