

## Mother's Experience in the Implementation of Bblr Treatment: Scoping Review

Khulasoh<sup>1</sup>, Farida Kartini<sup>2</sup>

<sup>1</sup>Student of Obstetrics Study Program Master Program, 'Aisyiyah University Yogyakarta

<sup>2</sup>Lecturers of Midwifery, Faculty of Health Sciences, 'Aisyiyah University Yogyakarta

**\*Corresponding Author:** Khulasoh, Student of Obstetrics Study Program Master Program, 'Aisyiyah University Yogyakarta

**Abstract:** The purpose of this Scoping review is to find out how the experience of mothers in the implementation of LBW care. The scoping review method is adapting the Prisma-SCR framework. Pubmed, Willey and Google Scholar databases. Prism flowchart and critical appraisal were used to select articles using the Joanna Briggs Institute (JBI) critical appraisal tool. It was found that 4 of 514 articles were selected based on inclusion and exclusion criteria. The implementation of LBW care is explained in the theme. The first theme is the benefits of implementing LBW baby care, support from family and midwife support for mothers in implementing LBW baby care. Information obtained by parents about the implementation of LBW baby care will vary, namely from sources of information and complete information about the experience of LBW baby care, the importance of the role of family or husband's support and midwife support in the implementation of LBW baby care. and goals in the implementation of LBW infant care.

**Keywords:** Experience, Low Birth weight, scoping review

### 1. INTRODUCTION

Low birth weight (BBLR) is the weight of babies born < of 2500 grams. BBLR includes global health problems that have long-term and short-term effects. BBLR is one of the risks of infant death, to prevent infant death, appropriate treatment of BBLR must be carried out. The cause of BBLR is pregnant women who experience anemia, lack of nutritional intake during the womb, or are born less than a month. BBLR is very easy to experience hypothermy and the formation of body organs has not matured, this can be the main cause of infant death so BBLR needs serious treatment (Indrayati, 2020).

Data from the World Health Organization (World Health Organization), states that the prevalence of babies with BBLR in the world is 15.5% or around 20 million babies born every year, about 96.5% of which occurs in countries developing (WHO, 2018). Efforts to reduce BBLR babies by up to 30% in 2025 and so far, there has been a decrease in the number of BBLR babies compared to the

previous 2012 of 2.9%. With this, the data shows that there has been a reduction from 2012 to 2019, namely from 20 million to 14 million BBLR babies (Novitasari et al., 2020).

Based on the results of the Indonesian Demographic and Health Survey (SDKI), the incidence of low birth weight (BBLR) in Indonesia reaches a percentage of 7.5%, Central Sulawesi province is ranked first in the incidence rate of BBLR, which is 8.9% while the province that has the lowest percentage of BBLR incidence rate is Jambi province with a percentage of 2.6%. BBLR figures in Indonesia seem to vary, nationally based on further analysis (SDKI, 2017).

The infant birth rate in the Special Region of Yogyakarta during 2007 to 2017 increased from 1.8 to 2.02 percent. This figure is still below the national average of 2.4 percent. Based on data from the Yogyakarta Special Region Health Office in 2017, the incidence of BBLR in DIY Province fluctuated from 2014 to 2017, namely in 2014 (4.71%), in 2015

(5.32%), in 2016 (5.20%), and in 2017 (4.86%) (Yogyakarta Provincial Health Office, 2017).

Of the 5 regencies in DIY, the prevalence of BBLR in Kulon Progo Regency experienced the first position, namely 6.69%, Gunung Kidul Regency 5.67%, Yogyakarta Regency 5.16%, Sleman Regency 4.65%, and Bantul Regency 3.79%. Although the percentage of BBLR incidence in Bantul Regency is the lowest, in the period from 2014 to 2017 the incidence of BBLR in Bantul Regency has always increased, namely in 2014 (3.58%), in 2015 (3.62%), in 2016 (3.66%) and in 2017 it reached a percentage (3.79%) (Yogyakarta Provincial Health Office, 2017).

BBLR must get special care that is different from normal babies in general to maintain their condition. BBLR treatment can be done by maintaining body temperature, preventing infections, monitoring nutrition (breast milk) and weight control (Rukiyah 2012).

Care for premature babies at home is a burden for the mother after the delivery process. During the beginning of life, premature babies are treated at the Hospital by health workers who have the knowledge and experience in caring for premature babies. Treatment at the hospital is certainly carried out in a limited time, until the baby is worthy of being treated by parents at home. Problems will arise when parents and families in general, have not been directly involved during treatment at the hospital. When premature babies are allowed

**Table1.** Framework PEO

P (Population)	E (Exposure)	O (Outcome)
Maternity mothers and BBLRbabies	Experience	Knowing the care of babies BBLR

In this review process, researchers can identify relevant articles. Researchers identify relevant articles using a *database*, where to search for articles in the study using 3 *databases*, namely: from *Pubmed*, *Willey* and *Google Scholar*. Furthermore, the identification of relevant articles is based on the inclusion and exclusion criteria as follows Inklusi Article Criteria from 2018 – 2021, Articles in English and English, *Originale article*, Article accessible free fulltex, Article that discusses the experience of BBLR baby care. Exclusion Criteria are Opinion articles, Articles that are not accessible with full text, Publication manuscripts, Protocol documents, guidelines, official government policies and formal

to go home, the mother becomes worried about taking care of the baby at home. Many technologies have been developed in an effort to improve the ability of BBLR to survive, one of which is kangaroo method treatment (FMD).

Based on the above presentation in accordance with the word of Allah surat Ali-Imran verse 139 which means "And do not (feel) weak, and do not (also) be sad, because you are the highest (degree), if you are a believer" Therefore it is necessary to *scoping* the review of the article to find out the extent of the mother's experience in caring for the BBLR baby.

## 2. RESEARCH METHODS

The method used in this review study is to use *scoping reviews*. *This scoping review* refers to the PRISMA *Extension for scoping review* (PRISMA-ScR) checklist. *Scoping review* is the study of an ideal approach to determine the scope or scope of a collection of literature on a particular theme, so as to provide a broad overview of the researcher (Munn et al., 2018). *Scoping review* aims to map the literature and dig up information regarding research activities related to certain topics (Peterson et al., 2017), besides that scoping review can be used to synthesize evidence research (David et al., 2013). To identify scoping review questions. Researchers develop review focus and search strategies through the PEO (Population, Exposure, Outcome) framework in managing and solving fokus reviews.

institutions. The literature search strategy in this study is based on the PEO framework. After identifying the keyword, it is necessary to determine the relationship in using the *Boolean operators OR, AND, NOT*.

All databases use *Boolean* to set up flexible searches. *OR* the equation of the previous work, *AND* combining two words or phrases is the same, *NOT* excluding or excluding the word, the database will only retrieve records containing both terms. Researchers also use *exact search* or also called *phrase search* to find information that contains keywords in the form of phrases using the operator "...." (Zohuri & Moghaddam, 2017). The search keywords in this study are Experience\* *AND*

*Low birth Weight. Charting Data* At this stage, all the selected articles are then put into a table which includes: Article title, author name, year, country, destination, type of research, data collection, participants/ sample size, and results.

The results of the review in this study will be compiled in mapping or grouping themes and discussed in detail which has been obtained from the results of articles that have been in *critical appraisal*. *Critical appraisal* is a critical, careful and systematic assessment of articles obtained to assess the strength and relevance of articles to direct researchers in decision making (Al-Jundi and Azzam, 2017). *Critical appraisal* using the tools of *The Joanna Briggs Institute* (JBI). The organization focuses on improving health outcomes globally by producing and disseminating research evidence, software, training, resources, and publications related to health research. The purpose of the assessment

**Table 2.** Mapping or Grouping Themes

Theme	Subthemes	Article
Mother's Experience in BBLR Care	1. Family support	3.4
	2. Health Worker	1.2

**4. PEMBAHASAN**

Based on 4 articles that have met the criteria for review, two themes were obtained, namely the mother's experience in BBLR care which was supported by the family and the mother's experience in BBLR care which was supported by health workers.

Mother's experience in BBLR care in Support by Family

The results of 2 articles describing the mother's experience in the implementation of BBLR treatment with family support will affect the mother in caring for the BBLR baby. Family and husband are important factors for success in the learning process and ability in the implementation of BBLR treatment so that mothers feel confident in caring for their babies, so that the risks to the baby that threaten the baby's health can be resolved.

The research is in line with research (3) explaining that families who provide primary support when we experience problems and the main support for a mother in caring for her BBLR baby. Mothers who have a BBLR baby is more egocentric, inexperienced, lacks knowledge in baby care so it requires adequate support such as emotional support, information

using these JBI tools is to assess the methodological quality of the study and to determine the extent to which a study has addressed possible biases in design, behavior and analysis (Peters *et al.*, 2015).

**3. ARTICLE SEARCH RESULTS**

In this step, it was obtained based on the results of article analysis, all articles came from the Asian Country, yes, articles from the State of Indonesia were obtained as many as 2 articles, African Countries as many as 1 article and The State of Korea as many as 1 article. Of the 4 types of articles obtained, namely qualitative research.

In this step the researcher classifies the results of interesting findings reviewed based on 4 articles obtained, the researcher makes mapping by mapping into 2 themes, namely where the mapping is explained in the following table

support, and physical support. The support provided is very useful and affects the care of BBLR by mothers while at home and home. The mother is aware of the development of the baby after treatment but, at the same time, experiences the burden of keeping her child healthy. The mothers actively participate with the therapist in a physical game designed to stimulate the baby's brain and then play this game with their baby by imagining themselves as therapist (Sukirno, 2019).

Maternal experience in BBLR care is supported by health workers

BBLR treatment is the care of babies with low birth weight very much needs to be done carefully, because low newborns have a weaker immune system. Therefore, the treatment of BBLR babies should be carried out intensively.

The results of the 2 articles explain that mom feels that her touch to mothers is very important because it can cause attachment in the baby and mother. I am aware of the development of the baby after treatment. Mothers want information on the long-term prognosis and developmental problems of BBLR babies (Mhango *et al.*, 2020).

The mothers who have a BBLR baby is more egocentric, inexperienced, lacks knowledge in infant care so it requires adequate support such as emotional support, information support, physical support. The support provided is very useful and affects the care of BBLR by mothers while at home and home. The mother is aware of the development of the baby after treatment but, at the same time, experiences the burden of keeping her child healthy. The mothers actively participate with the therapist in physical games designed to stimulate the baby's brain and then play this game with their baby by imagining themselves as terapis. Article 3 explains that it is the midwife who provides the main support when we experience problems and the main support for a mother in caring for her BBLR baby (Sukirno, 2019).

## 5. CONCLUSIONS AND SUGGESTIONS

### SIMPULAN

The information obtained by parents about the implementation of BBLR baby care will vary, namely from sources of information and complete information about BBLR baby care, the importance of the role of the family or husband's support and midwife support in the implementation of BBLR baby care there will be a positive Uh in the implementation of BBLR infant care including the benefits as well as objectives in the implementation of BBLR baby care.

### SARAN

1. For maternity mothers who have BBLR babies

For mothers who give birth, especially with BBLR babies, they must be more patient, diligent and meticulous in caring for their babies for the sake of their baby's health and camping.

2. For Medical Personnel

Medical personnel, especially midwives, to always provide support and knowledge support to mothers who have BBLR babies. Midwives are able to be patient in accompanying mothers who give birth with BBLR babies.

3. For the Workplace

It is hoped that the workplace will be a reference in improving the quality of BBLR health services, so as to reduce the neonatal mortality rate.

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