

## HUSBAND'S SUPPORT RELATIONSHIP WITH THE INCIDENCE OF POSTPARTUM BLUES IN PUSKESMAS TG.BALAI KARIMUN

Brain Gantoro<sup>1</sup>, Haivan Kusuma Aji<sup>2</sup>

[briangantoro@univbatam.ac.id](mailto:briangantoro@univbatam.ac.id)<sup>1</sup>, [haivankusuma.a@univbatam.ac.id](mailto:haivankusuma.a@univbatam.ac.id)<sup>2</sup>

Medical Education Program, Faculty of Medicine, University of Batam<sup>1</sup>

Professional Doctor Program, Faculty of Medicine, Batam University<sup>2</sup>

Jl. Abulyatama No 5 – Kota Batam

### Abstract

**Background :** The causes of the postpartum blues include predisposing factors which include hormonal factors, physical fatigue, age, parity, pregnancy status, education level and marital status, enabling factors which include socio-economic as well as driving factors which include social support (Mansur in Hasanah, 2014). This study aims to determine the relationship between husband's support and the incidence of postpartum blues.

**Method :** This study used an analytical survey research method with a cross sectional approach. The population in this study were all postpartum mothers who gave birth at the Tanjung Balai Health Center, totaling 113 people. Samples were taken using purposive sampling technique. Data analysis using computer aids through the SPSS program.

**Result :** The results of the chi square statistical test showed that the p value = 0.01, which means that the p value is less than 0.05 ( $0.01 < 0.05$ ).

**Congclusions :** The conclusion is that  $H_0$  is rejected and  $H_a$  is accepted, this shows that there is a relationship between husband's support for the incidence of postpartum blues.

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**Keywords :** Husband's Support, Post Partum Blues

### INTRODUCTION

The puerperium or postpartum period is the time after delivery for up to six weeks so that the function of the reproductive organs returns to normal. At this time, mothers will experience various adaptation processes ranging from physiological adaptation to psychological adaptation. Some mothers during the postpartum psychological adaptation period are able to adapt to their new role as a mother well, but there are others who fail to adapt, resulting in psychological disorders during childbirth (Machampang, 2015).

One of the danger signs of psychological disorders in postpartum mothers is that the mother looks sad, gloomy and cries without cause or depression (Maternal and Child Health Book, 2016). This psychological disorder is often not realized by postpartum mothers. Health services for postpartum mothers are also more oriented to physical health, so this incident is often undiagnosed and untreated (Gondo, 2017).

In general, postpartum psychological disorders are classified into three, namely postpartum blues, postpartum depression and postpartum psychosis (Machampang, 2015). Postpartum blues is a change in feelings experienced by mothers in the form of sad feelings, difficulty sleeping and mood swings felt by mothers after childbirth, about 80% felt by mothers after childbirth and lasts 3-6 days in the first 14 days (Ambarwati in Murbiah, 2016). Postpartum blues shows symptoms of mild depression experienced by mothers such as crying easily, feeling afraid of not being able to meet their children's needs, fatigue, mood swings, lack of concentration, irritability, eating and sleeping disorders (Perry in Fatmawati, 2015).

The impact on mothers who experience the postpartum blues is not only felt by the mother herself but also by other family members. If this develops into postpartum depression or postpartum psychosis, then the mother will have the heart to hurt the baby and

herself so that it can endanger the safety of the mother and baby, such as throwing away the baby and even killing her own child, as is often the case today (Gondo, 2017).

There are many events that can be caused by the postpartum blues that develop into depression or psychosis, including as quoted from detik.com, namely the case of Andrea Pia Yates in the United States and the case of Aniek Qori'ah Sriwijaya in Bandung who had the heart to kill their own children. Meanwhile, the incident in Riau Islands Province as quoted from mediakepri.co.id was the case of dumping babies which was the fourth highest in Indonesia in January 2018 and in Karimun Regency there was also 1 incident of disposal of newborns dumped in the bush (Dinas Women's Empowerment and Child Protection in Karimun Regency, 2017). So it is possible that the number of incidents could increase if we do not anticipate it early.

The causes of the postpartum blues include predisposing factors which include hormonal factors, physical fatigue, age, parity, pregnancy status, education level and marital status, enabling factors which include socio-economic as well as driving factors which include social support (Mansur in Hasanah, 2014).

From the results of Fatmawati's (2015) study, it was found that the majority of mothers who experienced postpartum blues were mothers with age  $\leq 20$  years, namely around 23 mothers (88%) while from the parity factor, the majority occurred in primiparous mothers, namely around 24 mothers (62%) and from social support factors, the majority of postpartum blues occurred in mothers with moderate social support, namely around 20 mothers (77%) from a total sample of 80 mothers. So it can be concluded that in this study the factors of age, parity and social support are risk factors that greatly influence the incidence of postpartum blues.

There are 4 health centers serving childbirth in Karimun Regency, namely Tanjung Balai Puskesmas, Tanjung Batu Health Center, Moro Health Center and Durai Health Center. Of the four Puskesmas, the highest number of childbirth services was at the Tanjung Balai Karimun Puskesmas, which was 389 deliveries, so it can be ascertained that the highest number of postpartum maternal visits was at the Tanjung Balai Puskesmas (Puskesmas Tanjung Balai, 2017).

Based on a preliminary study conducted by researchers by interviewing 10 postpartum mothers, data obtained from 10 respondents, there were 4 mothers (40%) who said they felt tired, had difficulty sleeping, sadness, felt unhappy, anxious, had no appetite and were irritable. In general, these mothers do not realize that it is a form of psychological disorder during childbirth that can cause bad effects if not treated immediately. Mothers who experience the above problems are dominated by mothers aged less than 20 years, primiparous and lack of social support from their husbands or families.

This study aims to determine the relationship between husband's support and the incidence of postpartum blues.

## **RESEARCH METHODS**

Research design is something that is very important in research that allows maximizing control of several factors that can affect the accuracy of a result. This study used an analytical survey research method with a cross-sectional approach, namely research studying the dynamics of the correlation between risk factors and effect factors by means of an approach where data concerning the independent and dependent variables will be collected at the same time (Notoatmojo, 2014). The population in this study were all postpartum mothers who gave birth at the Tanjung Balai Health Center, totaling 113 people. Samples were taken using purposive sampling technique, meaning that sampling was based on certain considerations made by the researchers themselves, based on previously known characteristics or characteristics of the population (Notoatmodjo, 2014). The location in this study was carried out at the Tanjung Balai Public Health Center, Karimun Regency. The research instrument used in this study was a questionnaire. Data analysis using tools help computers through the SPSS program (Statistical Program for Social Science) 22.0. Data analysis was performed by univariate and bivariate analysis.

## **RESEARCH RESULT**

This research was conducted at the Poli KIA Puskesmas Tanjung Balai, when the mother made a postpartum visit. KIA Poli provides services during working hours, namely 08.00-12.00 WIB on Monday-Thursday, 08.00-10.00

WIB on Friday and 08.00-11.00 WIB on Saturday.

### **Husband's Support**

The results showed that respondents with moderate husband support were 68 people (77.3%), 20 people had high support from their husbands (22.7%), while there was no low support from their husbands.

### **The Postpartum Blues incident**

The results showed that there were 53 respondents who did not experience the Postpartum blues (60.2%) and 35 respondents (39.8%) who experienced the Postpartum blues..

### **Relationship between Husband Support and Postpartum blues incidents**

The results showed that out of 68 respondents with moderate husband support, there were 32 mothers (36.36%) who experienced postpartum blues and 36 others did not experience postpartum blues. Meanwhile, of the 20 respondents with high husband support, there were 3 respondents (3.41%) who experienced the postpartum blues and 17 others (19.32%) did not experience the postpartum blues. From the chi square statistical test, it was obtained that the p value = 0.01, which means that the p value is less than 0.05 ( $0.01 < 0.05$ ). Thus  $H_0$  is rejected and  $H_a$  is accepted, this shows that there is a relationship between husband's support for the postpartum blues.

## **DISCUSSION**

### **Husband's Support**

According to Larson in Fatmawati (2015), the presence of the closest person can affect emotionally or can have a behavioral effect on the recipient. The husband is the closest person to the mother. Husband's social support is useful in increasing the individual's ability to access information and to identify and solve health problems. Social support also has a positive effect on physical, mental and social health.

Husband's support is a form of social interaction in which there is a relationship between giving and receiving real assistance. This assistance will place individuals involved in the social system which in turn will be able

to provide love and attention to both the family and the partner (Ingela in Irawati, 2013).

Husband's support is very important and can build a positive atmosphere, where the wife feels the first tiresome days. Therefore, support or a positive attitude from husband and family will provide its own strength for postpartum mothers.

Lack of husband's support makes mothers feel burdened by the presence of new members in the family. In a family, the role of the husband is not only to earn a living but also to provide support to the wife in terms of emotional support, appreciation, instrumental as well as information support. The existence of husband's support will improve the welfare of mothers and children, considering that professional assistance cannot replace the support provided by families, especially husbands.

Based on the results of the univariate analysis showed that the majority of respondents had moderate husband support as many as 68 people (77.3%), high husband support was 20 people (2.7%), while low husband support was not there.

The results of this study are in accordance with the results of Asmayanti's (2017) research at Panembahan Senopati Bantul Hospital, Yogyakarta, which shows that the majority of postpartum mothers have moderate husband support (sufficient), as many as 40 people (59.7%) out of a total of 67 postpartum mothers.

From the above analysis, it was found that the majority of mothers who gave birth at the Tanjung Balai Puskesmas had moderate husband support, because the range of assessments for husband support was larger, namely 80-120. This is also because the husband has understood that the mother's self-confidence will grow with the support from people around her, especially from the husband so that the mother can go through the postpartum period normally.

### **The Postpartum Blues Incident**

Postpartum blues is categorized as a mental disorder syndrome that is mild and often ignored so that it is not diagnosed and there is no proper treatment and can eventually develop into troublesome, unpleasant and uncomfortable problems that can make women feel uncomfortable. In fact, sometimes this disorder can develop into depression and

postpartum psychosis which has a bad impact, especially in the problem of marital relations with husbands and the development of their children (Robertson in Fatmawati, 2015).

According to Hasni in Fitriana (2015), psychologically a woman who has just given birth will experience psychological pressure. Many women at first glance feel happy with the birth of their baby, but in line with that, there will be mood disturbances, feelings of sadness and pressure experienced by a woman after giving birth that lasts in the first week, especially on the third to the fifth day. This psychological disorder is called the postpartum blues.

Based on the data obtained, the results show that respondents who did not experience the Postpartum blues were as many as 53 people (60.2%) and those who experienced the Postpartum blues were 35 respondents (39.8%) from 88 respondents.

The results of this study are in line with the results of research by Fatmawati (2015) at the Puskesmas in the Yogyakarta City Work Area which showed that there were 43 postpartum mothers who did not experience postpartum blues and 37 mothers (46%) had postpartum blues. 80 postpartum mothers.

The results of this study are also in accordance with the opinion of Iskandar in Fatmawati (2015) which states that the prevalence of postpartum blues varies between 26-85%. From these data it can be concluded that the incidence of postpartum blues is quite high and should not be ignored or left alone because it can develop into a worse condition.

The results of the analysis in this study found that there was a high incidence of postpartum blues. This is due to emotional changes in pregnancy and childbirth, which can increase a mother's sensitivity so that it can be a source of stress and even depression. The safe emotional adjustment at each stage must be completed properly in order to move on to the next stage.

### **Relationship between Husband Support and Postpartum blues incidents**

According to Irawati (Desfanita, 2015), husband's support is important in building a positive atmosphere where the wife feels the first tiresome days. Support or a positive attitude from the family will provide its own strength for the postpartum mother. High husband support in the form of attention,

communication and intimate emotional relationships are the most significant factors for postpartum mothers to minimize the possibility of psychological disorders (Sylvia in Desfanita, 2015).

This is also in accordance with Marshall's opinion (Fatmawati, 2015) which states that one of the factors for the emergence of postpartum blues is support from the surrounding environment, especially support from husbands. A wife who does not receive support from her husband will have five times the risk of a wife who receives support from her husband.

Based on the results of univariate research, it can be seen that the majority of respondents have moderate husband support, namely 68 people (77.3%) and high husband support as many as 20 people (22.7%). Meanwhile, based on the results of the bivariate test, out of 68 mothers with moderate husband support, there were 32 mothers (47.1%) who experienced Postpartum blues and of 20 mothers with high husband support as many as 3 mothers (15%) experienced Postpartum blues and this means that the majority of mothers Those who experience the Postpartum blues have moderate husband support. The results of the statistical test showed that the value of  $p = 0.01$  which means  $<0.05$  so that  $H_a$  is accepted and  $H_o$  is rejected so that it can be concluded that there is a significant relationship between husband's support and the incidence of Postpartum blues.

The results of this study are in accordance with research conducted by Fatmawati (2015) with the title of risk factors that affect the incidence of postpartum blues in 2015, which states that of the 26 respondents with moderate husband support, 20 of them (77%) experienced postpartum blues while 54 respondents with Husband's support was high, only 17 respondents (31%) experienced Postpartum blues. From the results of the study, it was found that the value of  $p = 0.000$  and OR 2.44, which means that the value of  $p < 0.05$ , which means that there is a relationship between husband's support and the incidence of postpartum blues.

The results of this study are also in accordance with the research conducted by Desfanita (2015) with the title of the factors that influence the Postpartum blues in Camar 1 Room at Arifin Achmad Hospital Pekanbaru and the Midwifery Room at Petala Bumi

Hospital Pekanbaru in 2015, the results showed that from 39 mothers with support High husbands, 12 mothers (30.8%) experienced postpartum blues while of 36 mothers with moderate husband support, 28 mothers (77.8%) experienced postpartum blues. From the results of statistical tests, it was found that the value of  $p = 0.000$ , which means  $p < 0.05$ , so it can be concluded that there is a relationship between husband's support and the incidence of postpartum blues.

In this study also obtained data, namely the presence of respondents with high husband support and moderate husband support but still experiencing postpartum blues. This may be due to the fact that the mother is not mentally ready to become a mother due to unplanned pregnancy status, low socioeconomic status so that the mother is worried about not being able to meet her child's needs, the birth spacing is too close (less than 2 years) or because of a history of postpartum blues. in a previous pregnancy.

Based on the results of the research and theory described above, it can be analyzed that husband's support has a significant relationship with the incidence of Postpartum blues. Because the support of the husband (the closest person) can affect emotionally so that it can increase the mother's ability to access information and solve health problems and can have a positive effect on physical, mental and social health. The forms of support that husbands can provide to mothers include emotional support, appreciation, instrumental as well as information support

### CONCLUSION

There is a relationship between husband's support and the incidence of Postpartum blues with a  $p$  value = 0.010 ( $p < 0.05$ ).

### SUGGESTION

Share the research place

It is hoped that early detection and early anticipation of the postpartum blues will not develop into a worse condition

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