

THE EFFECT OF PSYCHOEDUCATION ON THE INCIDENT OF POSTPARTUM BLUES IN BANJARSARI VILLAGE, BANJARSARI DISTRICT, SURAKARTA

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ABSTRACT

Background : Postpartum blues affect many mothers in Asia. Postpartum blues occur at different rates in various regions of Indonesia. This study will explore the impact of psychoeducation on postpartum blues in women after giving birth.

Method : This study was a quasi-experimental design with a pre-and post-test approach. The subject research is 25 postpartum mothers in Gambirsari Village selected through purposive sampling. To measure the incidence of postpartum blues used EPDS questionnaire and the Wilcoxon test were used for data analysis.

Result : The average pre-test score was 9.92, which categorized at risk for postpartum blues, the post-test score was 7.28, categorized as not at risk for postpartum blues.

Analysis : Wilcoxon test results obtained z value = -4.449 and p-value = 0.000 this means that there is an effect of providing psychoeducation on the incidence of postpartum blues.

Conclusion : Providing therapy in the form of psychoeducation has been proven to be effective in reducing the risk of postpartum blues.

Keywords : Postpartum Blues, Psychoeducation, Puerperal Period

1. INTRODUCTION

Mothers go through physical and psychological changes after giving birth, including psychiatric symptoms. Adjustments may be needed (Silbert-Flagg, & Pillitteri, 2018). During this phase, mothers may experience a sense of vulnerability and may face a variety of challenges. These challenges can trigger emotional changes in the mother, which may be difficult to cope with at times. It's important for mothers to be aware of these changes and seek support when needed (Marwiyah et al., 2022).

It's important to be aware that the postpartum period can be a difficult time for many women, with up to 85% experiencing mood disorders. However, it's important to note that only 10-15% of mothers experience clinically significant symptoms, according to a study by Sylvén et al. For those who do experience advanced symptoms and worsening of their condition, it's possible to be diagnosed with postpartum depression or postpartum blues. It's crucial for new mothers to seek support and treatment if they are experiencing any concerning symptoms during this time. (Cirik *et al.*, 2016).

It's important to note that the incidence of postpartum blues in Asia can range from 26-85%. This is especially apparent in Indonesia, where the incidence of postpartum blues varies by region, with numbers ranging from 50-70% of all mothers who give birth. It's not just limited to Asia, though. In Japan, the incidence of postpartum blues can reach 15-50%, while in Greece it reaches 44.5% and in France it reaches 31.7% (Salat et al., 2021). It's crucial that postpartum blues is handled properly, as it can be dangerous for both the safety of the mother and her child.

Experts believe that postpartum blues may be caused by a combination of internal and external factors. Internal factors include psychological and

personality factors, such as feeling afraid, anxious, and full of tension and worry. Hormonal fluctuations, a history of previous depression, and complications during pregnancy and childbirth can also contribute to postpartum blues. Other internal factors may include breastfeeding difficulties and lack of knowledge about baby care. External factors, on the other hand, may include social support, the condition and quality of the baby, and the mental status and coping abilities of the mother's partner. While the exact cause of postpartum blues remains unknown, understanding these potential factors can help mothers and their support systems better prepare and manage this common experience (Marwiyah et al., 2022). Postpartum blues can be influenced by a variety of factors, such as a mother's age, parity, husband's support, education, economy, and work. It seems that many different things can contribute to the development of postpartum blues, which means that the signs and symptoms of this condition are caused by a combination of factors. It's interesting to think about how complex our experiences can be, and how many different things can affect our mental and emotional well-being (Irawati & Yuliani, 2014)

Among other studies conducted, some research has been done on the topic Desfanita, et al (2015) Through her research on factors that affect postpartum blues, it was revealed that the support of the husband and the readiness for pregnancy had a significant impact on the occurrence of postpartum blues. However, there was no significant correlation found between the type of delivery and the incidence of postpartum blues. Purwati & Noviyana (2020) It has been found that the mother's age and the number of children she has do not impact the factors that trigger postpartum blues symptoms. However, factors such as concern for the baby, the mother's level of

fatigue, feedback from those around her, the support and presence of her husband, and her ability to adjust to the baby's presence can influence the onset of symptoms.

Ristanti & Masita (2020) showed that mean psychoeducation in the intervention group before treatment was 10.29 ± 0.480 , while after treatment it was 8.92 ± 0.738 . The results of psychoeducational analysis before and after treatment in the intervention group with Mann Withney in the intervention group were -1.480 ± 0.727 and the p value obtained is 0.000 which means there is a significant increase in the provision of psychoeducation after the treatment so that there is an influence of the provision of psychoeducation to postpartum mothers before and after the treatment

At the Gambirsari Community Health Center in Banjarsari Subdistrict, Surakarta City, postpartum blues have been observed in women. A preliminary study conducted in March 2022 involved interviewing three postpartum mothers, all of whom reported experiencing postpartum blues during their current postpartum period. Factors that can contribute to postpartum blues include hormonal changes during the puerperium, the mother's knowledge, pregnancy and childbirth status, prior experience with pregnancy and childbirth, support from the husband and family, the mother's age and occupation, and the mother's ability to adapt. If postpartum blues mothers are unable to adjust to their new roles, they may experience emotional disturbances like postpartum depression (DPP).

2. METHODS

This study is a quasi-experimental research with a one group pretest and posttest design. The dependent variable is measured twice - before and after the intervention is given. The research was conducted in Banjarsari Village, which

falls under the working area of Gambirsari Health Center. The study was conducted from September 2022 to May 2023. The research instrument used was the Edinburgh Postpartum Depression Scale (EPDS) questionnaire to measure the incidence of postpartum blues. The target population for this study was postpartum mothers in Banjarsari Village, Surakarta. The sample size was 25 people, selected using quotas and purposive sampling. The data analysis was done using Wilcoxon test.

3. RESULT

Characteristics of continuous data respondents in this study include age, parity, and risk of postpartum blues. The results of continuous data characteristics can be seen in Table 1

Table 1. Characteristics of Respondents in Continue Data

Variabel	Min.	Max.	Mean	SD
Usia	24,00	38,00	31,00	4,17
Paritas	1,00	3,00	1,48	0,65
Pretest	8,00	12,00	9,92	1,08
Posttest	5,00	9,00	7,28	1,28

Source : primary data processed, 2023

Based on the continous data showed that the average age of research respondents is 31.00 years, which is included in the productive age. Meanwhile, the average pretest score was 9.92, which was included in the category of being at risk of developing postpartum blues, while the average posttest score was 7.28, which was included in the category of not being at risk of developing postpartum blues.

Table 2. Characteristics of Respondents in Categorical Data

Education	n	%
Senior high school	15	60,0
College	10	40,0
Work	n	%
Working mothers	5	20,0
Housewife	20	80,0
Type of delivery	n	%

Spontaneous labour	18	72,0
Childbirth with action	7	28,0

Source : primary data processed, 2023

Based on the categorical data provided, it can be seen that 60% of the respondents had completed their education up to the SMA/SMK level. Additionally, 80% of the research respondents were identified as housewives. Furthermore, 72% of the respondents' birth history indicated that their delivery was spontaneous.

Based on the results of the normality test using Shapiro Wiljk, it is evident that both the pretest value ($p = 0.009 < 0.05$) and the posttest value ($p = 0.021 < 0.05$) indicate that the data is not normally distributed. Therefore, the hypothesis will be tested using non-parametric statistics, specifically the Wilcoxon test. To analyze the effect of psychoeducation on the incidence of postpartum blues in the Banjarsari Surakarta area, a biivariate analysis was conducted using IBM SPSS for windows with the Wilcoxon test. The results of this analysis can be found in the following table :

Table 2. Wilcoxon Test (n = 25)

Variable	Mean	z	p value
Pretest	9,92	-4,449	0,000
Posttest	7,28		

Source : primary data processed, 2023

According to Table 2, there is a z value of -4.449 and a p value of 0.000. This indicates that there is a significant difference in the incidence of postpartum blues among women in the Banjarsari sub-district of Surakarta before and after receiving psychoeducation treatment.

4. DISCUSSIONS

It's important to recognize that childbirth can be a challenging experience for many mothers. Some experts believe that stress during the birth process could contribute to the development of

postpartum blues. It's essential to provide support and care for new mothers during this time to help them adjust and recover.

The experience of giving birth, the length of labor, and any difficulties encountered after delivery can have an impact on a mother's mental well-being. The more physical trauma a mother experiences, the more likely she is to suffer psychological trauma. This is especially true for first-time mothers who have no prior experience with raising children. Such mothers are at risk of developing postpartum blues. According to Pramudya's research, a quarter of new mothers (primipara) experience postpartum blues (Wijayarini, et al, 2005). Some postpartum mothers may experience postpartum blues either through natural delivery or spontaneously. However, it has been observed that mothers who undergo surgical delivery tend to experience higher levels of postpartum blues. This is because it is believed that such mothers may feel confused and sad, particularly if the operation is performed as an emergency. (Yuliawan & Rahayuningsih, 2014).

Psychoeducation can be implemented either individually or in groups. Its focus is on providing problem-solving strategies that are tailored to the specific challenges faced by postpartum mothers. This approach places a strong emphasis on learning, education, and self-awareness. Self-awareness involves having a fundamental understanding of one's weaknesses, strengths, abilities, and limitations, which can impact their quality of life. It is also related to interpersonal communication and being aware of oneself when communicating with others (Siswoyo et al., 2016).

Psycho-education services are provided by professionals who may not have a background in psychology or counseling, or who may have some knowledge but are not fully qualified as

psychologist-counselors. They are trained in basic counseling skills by professional psychologist-counselors and can offer basic counseling services to meet the needs of postpartum mothers efficiently and effectively.

5. CONCLUSION

The conclusion of the study is that there is a psychoeducational effect on the incidence of postpartum blues in postpartum mothers in the Banjarsari Village, Surakarta, so it is hoped that postpartum mothers can increase information and knowledge related to psychological disorders during the postpartum period, especially prevention of postpartum blues during the postpartum period.

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