

Description of Social Support for Postpartum Mothers Comparison of Sectio-Caesarea with Normal Birth in Kartasura Region

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Abstract

The purpose of this study is to understand the social dynamics of a baby using conventional and sectarian sampling techniques. Cross-sectional methodology with purposive sampling as the primary sampling method was used in Kartasura Region. This study was conducted between September 28 and October 15, 2022. For the validated respondent data, there were 54 respondents between the ages of 20 and 41. The type of data collection that is used is descriptive quantitative information analysis. An instrument for doing research employs a self-contained questionnaire. Data analysis using the SPSS 25 program. Nilai is significant ($p=0.05$). The instrument used in this study is the Postpartum Social Support Questionnaire (PSSQ). The sampling analysis process used an Independent T-test. *Results:* There were 54 responses to the survey. Those who are younger than us, they are 20 and 41 years old, respectively. Out of all the respondents, 27 were adults with normal sexual orientation, and the remaining 27 had a Sectio-Caesarean birth. There were no significant differences in the social link between standard and Caesarea childbirth (2-tailed) $> 0,05$ (p -value 0,364), which means that there were no significant differences in the social link between postpartum mother and normal childbirth (2-tailed) $> 0,05$. Friend support received the highest rate of success out of the four social networking systems, which are Husband Support, In-law Support, Parent Support, and Friend Support, with a rate of success of 40,83. *Applications/Originality/Value:* There is no difference between an infant's social network when they give birth normally and when they give birth via cesarean section. The differences between this study and other studies may be seen in the study respondent, study time, study instrument, study literature, study method, and study result. In regards to childbirth, it can be said that the ratio of childbirth to normal childbirth is noticeably higher, and the ratio of childbirth to the fourth subset of social networks is particularly high, with a ratio of 40.83.

Introduction

Although pregnancy and childbirth are biological processes, women are aware of the risk to their physical and mental health during giving birth. childbirth also requires postpartum period lifestyle adjustments. There are several factors that affect sailing, including Energy (power), Fetus and Placenta (passengers), birth canal (passage), Maternity Psychic, and Oblong (Yeyeh, 2013). Power is the single most important factor affecting the persaline process. Power is a collection of traits that exist in adults, including traits like his and straining that can cause services to malfunction and cause a person to go asleep (Sayekti et al., 2016). When the production process is fast or slow, the use of strong and weak is very detrimental. If the persuasion process is in progress when he is leaning, it may be possible to slow it down (Ardhiyanti & Susanti, 2016). If a woman is unable to conceive normally, medical personnel will use alternative methods of procreation to aid in fetus implantation. The only procedure that can be performed is Sectio Caesarea childbirth (Machmudah, 2010).

When birth wasn't safe due to pervaginal childbirth, the Operation Caesar was a surgery that involved killing the fetus with a warning to avoid stomach and uterus. Worldwide, this level of intervention is increasing. Since 2003, the C-section rate in Prancis has been around 21%. (INSERM, 2010). In order to reduce persentase, World Health Organization recommends operating at a level between 10% and 15% in each nation. Uncompleted Caesar operations can alert women to a greater risk of mentally health problems such as post-traumatic stress disorder (PTSD) and post-traumatic depression.

According to AKI, the global average for 2013 was 210 deaths every 100,000 live births. In contrast, AKI in developing countries has increased 14 times more than in developed countries, reaching 230 per 100,000 live births (WHO, 2014).

Postpartum is a type of birth that develops after the mother gives birth and ends with the return of her organs to their pre-pregnancy state (Bobak & Jensen, 2000). Postpartum is a category eight pregnancy complication that continues after delivery and can last up to six months. This period consists of three stages,

namely the acute and early phase (6–12 hours after childbirth), the subacute phase (2–6 weeks after childbirth), and the delayed phase can last up to the first 6 months.

Post-partum is a challenging stage in an expectant mother and child's daily life. 50% of infant deaths during the acute phase are caused by preterm birth, sepsis, eclampsia, and abortions. In contrast, 50% of such death in the mother after childbirth occurred during the first 24 hours after give birth to, with the majority of it occurring over the first eight days of the childbirth.

The three main causes of an infant's long-term deaths are bleeding (28%), eklamsia (24%), and infection (11%). Important indirect causes are anemia (51%), too young to get pregnant or (20 years) 10.3%, too old to get pregnant or (35 years) 11.0%, too many children or (> 3 people) 19.3% (Ministry of Health, 2009).

According to reports from the BKKBN, as of the year 2019 up to 4,8 million children were born every year in Indonesian, making every step a risk whether the child is the first or the subsequent one. But not everyone believes this since if something is done without thinking, it will inevitably lead to further problems in the lives of the mother and the daughter (Manafe, 2019).

KF1 has an postpartum visit rate specifically for Semarang that is 95% higher than the aim of 90%, while KF3 has an postpartum visit rate that is 87% higher than the target of 90%. (Semarang City Health Office, 2014). However, this is not related to the development of AKI. In contrast to Semarang's higher than average population, 61% of infant deaths occurred during childbed. The frequency of those aged 20 to 34 who have severe deaths is approximately 69% of the overall AKI (Central Java Health Office, 2015). The highest maternal mortality rate during the postpartum period was 60%, said by bleeding 30.37%, hypertension 32.97%, circulatory system disorders 12.36%, infection 4.34%, metabolic disorders 0.87%, and other causes 19.09%. (Central Java Health Office. 2017. page 82).

The single most important factor at the time when my mother was preparing to launch her new career as an adult was her social network. According to Zimet (1988), a social network is a network that is subject-focused and can originate from three different groups: friends, colleagues, and meaningful others. Zimet (1988) explained that social networks are composed of three dimensions, namely: 1) Family, in which a particular family contains a saliently. 2) Friend, where there are connections that are constantly being made, maintained, and given as gifts or consideration. 3) Meaningful others, where someone who is incredibly important to someone in the socialization process and significantly affects an individual.

According to Cutrona and Russell, additional dimensions include attachment (parallel with emotional), social integration (parallel with interpersonal relationships), value certainty (parallel with positive reinforcement), reliable alliance (parallel with instrumental framework), guidance (parallel with organizational framework), and the capacity for growth. The addition on the Cutrona scale, namely opportunity to care, appears to be highly related to the mother-infant relationship. This dimension refers to responsibility for the well-being of another individual.

Other social factors may also contribute to depression as well as to children who have had successful pregnancies. The primary outcome of prenatal depression is a child who has unfavorable results. While social support may be a moderating factor, several studies have explored the role that social support plays in the relation between depression, fear, and infant mortality.

The following section will outline the social network of the adult child after separation, whether through spontaneous or caesarean pervagination. This study will assist in identifying postpartum discrepancy and will identify the factors that affect an expectant mother's social support network, including relationships with family members, friends, coworkers, and neighbors, in order to improve the health of the expectant mother and the baby.

Method

Respondent

This study was conducted in the Puskesmas Kartasura neighborhood of Sukoharjo. Ibu nifas is the subject of the study, which takes place from August 28, 2022, to October 15, 2022, in the area of Kartasura Health Center Work. The study's respondents must meet certain criteria, including not having any physical or mental health issues, being a respondent, having any close family members, and not having any visual and hearing impairment. The available respondents for conducting this study are around 54 respondents. Purposive sampling is used to

take samples. Husband, support for people, support for in-laws, and support for friends from a tertiary care hospital, So that we can improve the health of our parents and our children.

Design

The sampling method used in Kartasura Region combined a cross-sectional design with a purposive sampling technique. For the validated method known, there were 54 respondents between the ages of 20 and 41. The type of data analysis that is used is descriptive quantitative data analysis. The social environment is the primary variation in this essay.

Instrument

By converting the Postpartum Social Support Questionnaire (PSSQ) from Hopkins & Campbell and Miller into Indonesian, the research instrument is a questionnaire about the social support networks of new mothers.

There are 51 questions about social security in all. As a result of the questionnaire's validity and dependability checks, approximately 44 valid questions and 7 invalid questions were discovered.

Static Analysis

Information was first entered into an Excel spreadsheet and then transferred to an SPSS.25 spreadsheet. Random check for to detect errors during data entry is described. Utilizing statistics for descriptive and inferential purposes (IBM SPSS Statistics 25). Next, perform a normality test to determine whether data distribution is normal or not. The normality test is carried out as a prerequisite for carrying out regression, correlation, and other related tests .

After doing normality test, the result showed that the data were distributed normally. The next step is for the author to conduct an correlation test of the Pearson Social Network Data in order to understand the social connection between the social networks of the subject, an observer, a manager, and a friend.

Ethical Consideration

Research was carried out under the direction of Regional public hospital (RSUD) Dr. Moewardi. This article mentions anonymity and inclusiveness. There is no name or private identity information that is included on the questionnaire or demographic form. Participation in this study is quite successful, and it serves its intended purpose.

Every participant has a responsibility to participate in the study without fear of negative consequences and to get a thorough summary of the study's findings. People admitted that they had a responsibility to protect themselves from whatever conclusions they reached without being questioned.

List of Questions

This lecturer was given to a group of breastfeeding mothers to ensure that any questions were understood and the level of the point was explained. Name, age, last education, marital status, ethnicity, living together, type of work, work, profession, babies born in the 7th week, 1st pregnancy, 2nd birth, number of living children, intention to get pregnant, and desire to become pregnant are some of the specific characteristics of This question urges the respondent to disclose their social tightrope.

Overall at a level of five points (ranging from 1 to 5). Respondent was asked to rate their social environment at home on a scale of 1 to 5 (where 1 denoted never, 2 rarely, 3 sometimes, 4 often, and 5 always).

Result

Table 1. Distribution of the frequency of postpartum mothers according to the characteristics of the respondents

Characteristics	Frequency (N=54)	Percentage (%)
Age		
a. 21-30 years	34	64,8
b. 31-40 years	18	33,3

c. > 40 years	1	1,9
Mother's education		
a. Junior High School	5	9,3
b. Senior High School	30	55,6
c. College	19	35,2
Living together		
a. Lives with husband	49	90,7
b. Lives with husband and family	5	9,3
Type of work		
a. Doesn't work	31	57,4
b. Work	23	42,6
Pregnancy complications		
a. There is	6	11,1
b. There isn't any	48	88,9
Newborn Weight		
a. < 2500 grams	3	5,6
b. 2500 – 3500 grams	43	79,6
c. > 3500 grams	8	14,8
Providing baby nutrition		
a. ASI	40	74,1
b. Breast milk and formula	12	22,2
c. Formula milk	2	3,7

Table 1 shows the distribution of respondent characteristics, with 64% of the majority being female respondents aged 21 to 30; the highest pendidikan intensity was SMA at 55,6%; and the highest level of social interaction was 90,7% with their immediate family. Ratio of respondents who did not report working with a participation of 57,4% divided by 42,6% for those who did. With 88,9% of the persentase being absorbed, the majority of infants do not experience complicated breastfeeding. Next, birth weight 79.6% with body weight around 2500-3500 gram. 74.1% of nutritional products during exclusive breastfeeding.

Tabel 2. Distribution of the frequency of postpartum mothers according to the type of delivery

Type of delivery	Frequency (N=54)	Percentage (%)
Normal Childbirth	27	50
Sectio-Caesarea Childbirth	27	50

Tabel 2 details the type of respondent selection that was made, with 50% (27 respondents) selecting "normal" and 50% (27 respondents) selecting "Sectio-Caesarea."

Normality test

The results of the Normality test study are those of Shapiro Wilk test and Lilliefors. According to Liliefors test, all data for each kelompok category have a normal distribution when p value (Sig) lilliefors 0,200 is applied to 2 category with > 0,05. P value Shapiro Wilk test for category 1 and 2 was respectively 0,966 and 0,570. Given that everything is greater than 0,05, the two category are distributed normally as according Shapiro Wilk test.

Homogenitas test

Homogenitas test is intended to present the results of Homogenitas test using the Levene Test method. Score Levene is analyzed using the score based on Mean optimal value of 0,001 with a p value (sig) greater than 0,309 when > 0,05 denotes the presence of shared or homogeneous variation among groups.

Table 3 Tendency of social support scores

Variable Group	N	Mean	Std. Deviation	Std. Error Mean
Normal birth score	27	149,3333	25,25105	4,85957
Score of cesarean delivery	27	143,3333	23,13339	4,45202

According to analysis in Table 3, the results of the 27 responses from women who answered the questions normally resulted in a total score for women who answered the questions normally of 149,33. in contrast, the 27 responses from women who answered the questions in a sectio caesarea yielded a score for women who answered the questions in a sectio caesarea of 143,33.

Table 4 Independent T Test

Variabel	Frequency (N=54)	Std. Deviasi	Std. Error	p-value
Mother gave birth normally	27	25,25	4,85	0,367
Mother gave birth to SC	27	23,13	4,45	

In table 4 above, there were 27 mothers who gave birth normally. Caesarean section combined total 27. From the results above, it can be inferred that at 5% alpha, there wasn't statistically significant difference of both the value of either the family and friends who had normal and caesar births

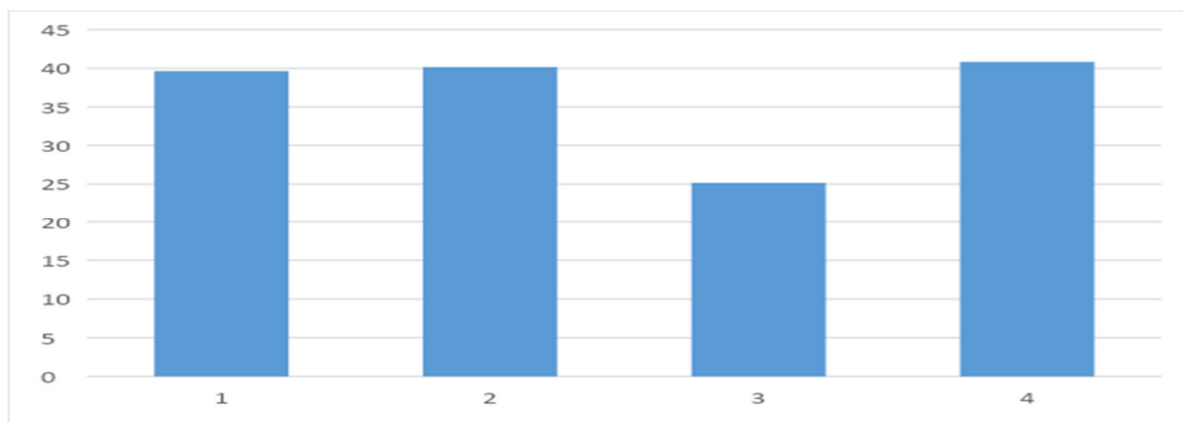


Table 5. Rationalization of the Social System of the Kartasura Area

1. Husband Support (39.63), 2. Parent Support (40.16), 3. In-law Support (25.16) and 4. Friend Support (40.83)

According to table 5, the results for the overall rate-ratio of four systems with high rate-ratio gains are from the Friend Support. After that, Husband's Support and Lasting Mother-in-law's Support were disseminated through Parental Support. As a result of the social networking data above, it can be inferred that compared to Parental Support, Husband Support, and Mother-in-law Support. Postpartum mothers gave birth normally and earnestly received more support from his or her friends.

Discussion

Postpartum is defined as an uncommon upgrades period, which may also produce as a defence for their first child behind. Childbirth and postpartum are also a persistent event reproduction that can impair a person's emotional and physical health. In similar to other anxiety disorder, women experiences symptoms twice as frequently as men. Consider a certain symptoms or anxiety disorder recurrence that has already been the topic of some research may have an impact on the prevalence of reproduction life in women.

Parental or family support that provides support for the success of Social Support with an average of 40,16 as a result of this study there is a bond between the success of the social network and the support of the person or group of people. Statistic test results from T test produced amounts with p-value = 0.553, where $0,553 > 0,05$ means that there is no variation between the two results.

There is a connection, albeit slight, between success of social support and in-law support, according to in-law support that provides advice regarding social support status on a ratio of about 25,16. The statistics test

result obtained using the T method has a p-value of 0.514, meaning there was no difference between the two of them because $0,514 > 0,05$.

The statistics test result obtained using the T method has a p-value of 0.514, meaning there was no difference between the two of them because $0,514 > 0,05$.

In Table 5, it is stated that, relative to other dungeons, Friends Support has more inhabitants than they do. This can be verified, according to what is written there (Burns et al., 2020; McLardie-Hore et al., 2020) By having emotional support from others, it may be said that an individual has emotional support without having to ask for it or beg for it since they have support from others who have also experienced negative emotional conditions. T test received a p-value result of 0.949, where $0.949 > 0,05$ indicates that there is no difference between both of them.

There is a connection between the husband support and the success of postpartum mother in this study so the husband support that provides the support with research refers to postpartum mother is average 39,63. Statistics test results from the T test were obtained with a significant p-value of 0.884 and showed that $0,884 > 0,05$ meant there was no variation between the two of them. The social environment described here, which consists of reflection, direct communication, and emotional closeness, is the most significant factor that contributes to the occurrence of postpartum depression and the postpartum blues. Support for women become more high than for men. Increased support from friends, family, and healthcare professionals should be given to women in order for them to recognize their own goals and aims.

Based on the results of the study, it can be concluded that, in contrast to Sectio Caesarea, the majority of the women in the 12 Villagers in Kartasura Regency have normal childbirth activity. The results support the findings of Saifuddin (2010), who stated that the majority of childbirth activity is considered to be normal, with only a small minority (12–15%) considered to be pathological. This result also aligns with the findings of Lucky Wijaya Sari (2015), which indicate a significant amount of normal childbirth events. The results of Litti (2014) show that 22 respondents, or 55 percent, use the Sectio Caesarea childbirth method. In the 44 legitimate questions that were answered, there were four social support networks, including those in In-laws, Parents, Friends, and Husbands. the highest score was achieved by mothers who gave birth normally; these scores are in line with. According to Indiarthi (2015), the process of joining the Sectio Caesarea has become a key area for breast-feed, particularly the first few days after joining.

Mothers who give birth to by caesarean section suffer from physical weakness, low self-esteem due to fatigue, physical discomfort and tension with the new role, and the need to spend more time resting. Pursuant to postoperative pain, fatigue, side effects of anesthesia, self-care, difficulty in fulfilling activities of daily living, nursing care, breastfeeding problems, and other factors, there may be decline that differs from vaginal childbirth in terms According to (Ningrum et al., 2011), young adults under the age of 20 or older than 35 are more at risk for developing caesarean delivery. This is because teenagers under the age of 20 are more likely to just be uterus and have pelvis that has not yet begun to improve.

Conclusion

Based on the results of the study, it can be concluded that the majority of postpartum women in the country are between the ages of 20 and 35 (94,6%); the majority of respondents who go out with their friends are 4,9%; and respondents who work are 3,1% more numerous than those who do not.

Housewife, with a response rate of 3.2%, and health professional, with a response rate of 0.2%, are the two professions with the highest response rates. Out of all the respondents, 27 are babies with normal growth and development and 27 others gave birth by caesarean section. In the table it is also stated that there are 6 infants who experience complications during labor and 48 infants who do not. Almost 40 children were given Breast milk by the mother as daily food. Around 12 women provided breast milk and formula as food for the baby, while the other two women there in postpartum mother group also provided formula milk.

As shown in this study's findings about the functioning of babies with postpartum, there are several sociodemographic and clinical characteristics of these infants that may help explain how their social functioning is improved.

There is no significant difference between how childbirth is carried out by an postpartum mother and how it is carried out normally or by sectio-caesarea among the four social support systems, namely parental support, in-law support, husband support, and friend support. However, there is a significant difference with how childbirth is carried through an postpartum mother.

friends support with a ratio of 40,83 is the most common social networking tool for the top four social networking sites.

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