



## The Relationship Between the Level of Husband Support and The Incidence of Baby Blues In Postpartum Mothers At The Practice of Independent Midwives In Jakabaring District, Palembang City

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### ABSTRACT

Baby blues is an emotional disorder that appears in the first week of postpartum and is characterized by mood swings, anxiety, easy crying, and inability to take care of the baby. One of the factors that affect this condition is the support of the husband as the mother's main companion after childbirth. This study aims to determine the relationship between husband support and the incidence of baby blues in postpartum mothers at the Independent Midwifery Practice, Jakabaring District, Palembang City. The research design used cross-sectional analytical observational with a sample of 75 postpartum mothers who met the inclusion and exclusion criteria. The status of baby blues in respondents showed that severe baby blues was experienced by 26 respondents (34.7%), medium category 29 respondents (38.7%), and mild category 20 respondents (26.7%). Meanwhile, the level of husband support was divided into three categories, namely low support for 22 respondents (29.3%), medium support for 26 respondents (34.7%), and high support for 27 respondents (36.0%). The analysis of the Chi-Square test obtained a p-value = 0.000 so that there was a significant relationship between husband support and the incidence of baby blues.

**Keyword:** Husband support, baby blues, postpartum

### ABSTRAK

**Baby blues** adalah gangguan emosional yang muncul pada minggu pertama setelah persalinan dan ditandai dengan perubahan suasana hati, kecemasan, mudah menangis, serta ketidakmampuan dalam merawat bayi. Salah satu faktor yang memengaruhi kondisi ini adalah dukungan suami sebagai pendamping utama ibu setelah melahirkan. Penelitian ini bertujuan untuk mengetahui hubungan antara dukungan suami dengan kejadian baby blues pada ibu nifas di Praktik Mandiri Bidan, Kecamatan Jakabaring, Kota Palembang. Desain penelitian yang digunakan adalah observasional analitik dengan pendekatan cross-sectional, dengan sampel sebanyak 75 ibu nifas yang memenuhi kriteria inklusi dan eksklusi. Status baby blues pada responden menunjukkan bahwa kategori berat dialami oleh 26 responden (34,7%), kategori sedang sebanyak 29 responden (38,7%), dan kategori ringan sebanyak 20 responden (26,7%). Sementara itu, tingkat dukungan suami dibagi menjadi tiga kategori, yaitu dukungan rendah sebanyak 22 responden (29,3%), dukungan sedang sebanyak 26 responden (34,7%), dan dukungan tinggi sebanyak 27 responden (36,0%). Hasil analisis uji Chi-Square diperoleh nilai p = 0,000 sehingga terdapat hubungan yang signifikan antara dukungan suami dengan kejadian baby blues.

**Keyword:** Dukungan suami; baby blues; ibu postpartum



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**1. Introduction**

The postpartum period is a transitional phase experienced by mothers after childbirth, during which the body requires approximately six weeks to restore reproductive organ function to its pre-pregnancy state (Yuliana & Hakim, 2020). This period is marked not only by physical recovery but also by substantial psychological adjustments. Mothers often experience increased emotional sensitivity and vulnerability to stress, anxiety, and mood disturbances.

Unmanaged emotional changes during this phase may lead to fatigue, irritability, feelings of helplessness, and persistent sadness (Siallagan et al., 2022). One of the most common emotional disturbances is baby blues, which typically appears within the first week postpartum and peaks around the fifth day after delivery (Anandita, 2018). This condition is generally mild and temporary, affecting approximately 50–80% of postpartum mothers. Unlike postpartum depression, which is categorized as a major depressive disorder with peripartum onset in DSM-5, baby blues is not classified as a clinical disorder due to its transient nature (Maslim, 2019).

Globally, maternal mental health remains a significant concern. According to the World Health Organization (2024), approximately 1 in 10 pregnant women and a substantial proportion of postpartum mothers experience mental health disorders, particularly depression, with higher prevalence in developing countries. In Indonesia, data from BKKBN (2024) indicate that approximately 57% of mothers experience symptoms of baby blues. A local study in Palembang reported a prevalence of 46.7% (Kumalasari & Hendawati, 2019).

The occurrence of baby blues is influenced by multiple factors, including maternal age, parity, education level, childbirth experience, and social support. Among these, husband support plays a crucial role as it provides emotional, informational, and instrumental assistance during the postpartum period (Anggraini, 2019). Adequate support from the husband can enhance maternal adaptation, whereas insufficient support may increase the risk of baby blues progressing to postpartum depression (Wahyuni et al., 2023).

Previous studies have highlighted the importance of family support in reducing postpartum emotional disturbances. Meliyanti (2022) reported that 56.5% of postpartum mothers experienced baby blues, with a significant association between family support and the condition. Similarly, Reginta (2025) found a meaningful relationship between family support and the incidence of baby blues among post-cesarean mothers.

Given the high prevalence of baby blues and the critical role of husband support, this study aims to investigate the relationship between husband support and the incidence of baby blues among postpartum mothers in Jakabaring District, Palembang City.

**2. Method**

The type of research used is observational analytics with a cross-sectional design. This research was carried out at the Independent Midwife Practice of Jakabaring District, Palembang City. The population in this study is all postpartum mothers who make postpartum visits at the Independent Midwifery Practice in Jakabaring District. The study sample size was 75 postpartum mothers who met the inclusion and exclusion criteria. Sampling was carried out using purposive sampling techniques. Data analysis was carried out through univariate analysis to describe respondent characteristics and bivariate analysis to determine the relationship between husband support and the incidence of baby blues using the Chi-square test.

**3. Result and Discussion**

**3.1 Univariate Analysis**

Table 1. Frequency distribution of respondent characteristics

Respondent Characteristics	Frequency (n)	Percentage (%)
Age (Years)		
< 20	5	6,7
21-30	33	44,0
31-40	37	49,3
Total	75	100
Total Parity		
Primipara	16	21,3
Multipara	59	78,7
Total	75	100

Masa Postpartum

Respondent Characteristics	Frequency (n)	Percentage (%)
< 1 Week (3-7 days)	47	62,7
1-2 Weeks (8-14 days)	28	37,3
Total	75	100
Final Education		
SD	5	6,7
SMP	17	22,7
High School/Vocational School	46	62,7
SI/D4/D3	7	8,0
Total	75	100

Based on table 1, it shows that out of 75 postpartum mothers, the most respondent age range is 31-40 years old as many as 37 people (49.3%). The highest number of parity is multipara as many as 59 people (78.7%). In addition, the most postpartum period is in the first week (3-7 days) which is 47 people (62.7%). and the last education is the most is high school/vocational school as many as 46 people (62.7%).

Table 1. Status frequency distribution baby blues in the mother postpartum

Status Baby Blues	Frequency (n)	Percentage (%)
Weight	26	34,7
Medium	29	38,7
Lightweight	20	26,7
Total	75	100

Based on table 2, it is known that the status of baby blues in postpartum mothers is medium baby blues, which is 29 respondents (38.7%), while heavy baby blues are 26 people (34.7%), and light baby blues are 20 people (26.7%).

Table 2. Distribution of the frequency of husband's support to the mother postpartum

Husband's Support	Frequency (n)	Percentage (%)
Low	22	29,3
Medium	26	34,7
Height	27	36,0
Total	75	100

Based on table 3, it is known that the majority of postpartum mothers received high husband support as many as 27 people (36.0%), while postpartum mothers who received low husband support were 22 people (29.3%).

### 3.2 Bivariate Analysis

Bivariate analysis was conducted to see if there was a relationship between husband support and baby blues in postpartum mothers described in the following table:

Table 4. Chi-square bivariate test

Husband's Support	Baby Blues			Total	p-value	Odd Ratio
	Weight	Medium	Lightweight			
	n (%)	n (%)	n (%)			
Low	15 (68,2%)	4 (18,2%)	3 (13,6%)	22 (100%)	0,000	-
Medium	8 (30,8%)	13 (50,0%)	5 (19,2%)	26 (100%)		
Height	3 (11,1%)	12 (44,4%)	12 (44,4%)	27 (100%)		
Total	26 (34,7%)	29 (38,7%)	20 (26,7%)	75 (100%)		

Table 4 shows that postpartum mothers with low husband support experienced the most severe baby blues, which was 68.2%. Meanwhile, postpartum mothers with high husband support mostly experienced mild baby blues, which was 44.4%. The results of the Chi-Square test were obtained with a value of  $p =$

0.000, which shows that  $p < 0.05$  so that H1 is accepted. This means that there is a meaningful relationship between the level of husband support and the incidence of baby blues in postpartum mothers.

Although the Odds Ratio could not be calculated because the variable had more than two categories and therefore did not qualify for a 2x2 table, the results showed a tendency that low husband support was associated with an increased risk of baby blues. These findings confirm the importance of the husband's supporting role in maintaining the mother's emotional balance during the postpartum period.

The findings indicate that the majority of postpartum mothers were within the age range of 31–40 years, reflecting a stage of greater emotional maturity and psychological readiness. However, even at this stage, mothers remain vulnerable to hormonal fluctuations and the demands of newborn care (Wulan et al., 2023).

Multiparous mothers constituted the majority of respondents, suggesting that prior childbirth experience does not necessarily eliminate emotional challenges. Instead, additional caregiving responsibilities may increase fatigue and emotional stress (Rahmawati & Wulandari, 2019).

The highest prevalence of baby blues occurred during the first week postpartum, a period characterized by intense hormonal changes, physical recovery, and sleep disturbances. These findings are consistent with previous research indicating that early postpartum is the most critical period for emotional instability (Utami & Nurfitra, 2022).

Husband support emerged as a significant factor influencing maternal emotional well-being. Mothers with low levels of support were more likely to experience severe baby blues, while those receiving high support tended to experience milder symptoms. Emotional support, practical assistance, and effective communication from husbands contribute to reducing maternal stress and enhancing coping mechanisms (Sari et al., 2024).

The statistically significant relationship identified in this study aligns with previous research indicating that family support serves as a protective factor against postpartum emotional disorders (Nurhayati, 2020). Husband involvement plays a crucial role in stabilizing maternal emotional conditions and preventing the progression of baby blues into postpartum depression (Handayani et al., 2023).

#### 4. Conclusion

Based on the results of the study, there was a significant relationship between the level of husband support and the incidence of baby blues in postpartum mothers at the Independent Midwifery Practice in Jakabaring District, Palembang City with a p-value = 0.000, where low husband support increased the risk of baby blues. Therefore, husbands are expected to be more active in providing support during the postpartum period, and health workers, especially midwives, need to provide education and counseling regarding the importance of husband support to maintain the mental health of postpartum mothers.

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#### Conflicts Of Interest

There is no form of competing interests that exists among the authors.

#### Author's Contributions

All authors contributed to the various components of the study such as research design, collection of data and its analysis, write-up of the initial and final manuscript, and the submission of the finalized manuscript.

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