

Husband and Wife Communication Patterns in Period of Baby Blues Syndrome

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ABSTRACT

This study focuses on interpersonal communication in married couples, especially during the period of baby blues disorder. The approach used is social penetration theory. The study aims to describe the interpersonal communication patterns formed through the process of communication and support in husband and wife relationships during the period of baby blues syndrome. The case study method was used with data collection through interviews with five women who had given birth for the first time and had experienced postnatal baby blues disorder. The results showed that the interpersonal communication process in this period is usually started by the wife with an attitude of self-opening. Through interaction with the husband, the wife defines the form of support provided by the husband, both verbally and non-verbally, as a positive reaction to the self-opening that has been done. This communication pattern forms a cycle in each couple, showing that the four couples tend to have balanced and equal communication patterns. Husbands were involved mainly in providing instrumental support related to childcare and household activities. However, in one other couple, the communication pattern was considered unbalanced due to the lack of support from the husband, so the wife sought support from her female friends who also experienced similar baby blues.

Keywords: baby blues syndrome; interpersonal communication; husband-wife communication; communication patterns.

INTRODUCTION

The role of new parents requires husband and wife to adapt and take on great responsibility. Especially for a wife, becoming a new mother means experiencing changes both physically and psychologically. After giving birth, the postpartum condition has many obstacles caused by various factors, including difficult adaptation due to physical changes, hormones, responsibilities, and new routines. In addition, stigma and judgment from the environment towards the role of new mothers also influence. In an unstable condition after childbirth, wives are easily stressed and have the potential to experience more severe depression. Therefore, support from the environment and the closest people, especially from the spouse, is needed. This pressure can cause psychological disorders, which in psychiatric terms are called postpartum blues (baby blues). The transition period of mood after childbirth is characterized by emotional changes such as irritability, sadness, fear, and feelings of hatred for one's own baby. Husbands have an important role in helping wives reduce psychological disorders and get through this pressure by providing positive



support. Pilkington's study cited by Herman and Wati shows that support from spouses is a major protective factor in overcoming mood problems during the postpartum period. Another study by Ernawati also found that most women who had just given birth (74.1%) received support from their husbands and families so they did not experience postpartum blues, while other respondents (25.9%) who did not receive support experienced the condition.

Support is one of the important elements that influence interpersonal communication, especially in husband and wife relationships. Interpersonal communication has various interrelated and dynamic components. If one of its elements does not function properly, communication between two people will not be effective. Liliweri also said that in interpersonal communication, interaction occurs between two people who depend on and influence each other, similar to the relationship between husband and wife.

One of the prominent features in interpersonal communication in husband and wife relationships is the understanding of each individual's psychological data. For example, the wife can predict reactions or responses based on the husband's character, so that she will deliver important communication at a time and with a method that is considered appropriate to obtain support and agreement from her partner. This concept is in line with Budyatna and Ganiem's explanation, which states that in an interpersonal communication relationship, two individuals know each other well. Often, the interactions that occur are only known and agreed upon by both parties because they are familiar with each other's habits, desires, needs, and personal values.

This study aims to illustrate the pattern of interpersonal communication between husband and wife during the baby blues syndrome period by using the social penetration theory approach proposed by Irwin Altman and Dalmas Taylor. The concept of social penetration refers to the process by which people get to know and adapt to each other so that relationships can develop. In this context, self-opening by the wife becomes an important aspect in communication with the husband during the period of baby blues disorder. Openness is a key element in the marital relationship, where information is given widely and deeply. Through self-opening, the wife acknowledges her thoughts and feelings, which in turn builds trust and reliability in the relationship. Husbands who provide positive support according to the conditions and needs of their wives can classify their support into four types, as described by Friedman: (1) Information support involves suggestions, solutions, and providing information related to problems. (2) Appreciative support involves praise, positive affirmations, and good responses that validate the wife's identity as a mother, wife, and woman. (3) Instrumental support focuses on practical assistance in meeting daily needs. (4) Emotional support involves caring and listening with empathy, helping the wife cope with her emotions. This emotional support reflects the husband's affective involvement with his wife.

In addition to openness and support, there are other factors that influence the effectiveness of interpersonal communication. DeVito states that a number

of these components are interrelated and form effective interpersonal communication. Some of these factors include openness in the couple, empathy for the partner's condition, supportive attitude, positive attitude especially in thinking, and equality both in communication and roles as individuals.

Cycles in the interpersonal communication process form certain communication patterns that affect interactions, especially in husband and wife relationships during the baby blues syndrome period. In this study, we categorize four relevant interpersonal communication patterns, as described by DeVito: (1)Equality pattern: This pattern allows free communication and roles, where each individual can express opinions and has an equal position. This pattern is often found in same-sex relationships. (2)Balance split pattern: This pattern emphasizes equal relationships, with separation of roles based on each individual's expertise. There is no adverse dominance, and conflicts tend to be resolved through discussion to reach a common solution. (3)Unbalanced split pattern: This pattern shows the dominance of one individual who has an advantage and better expertise than the others. Dominant individuals often make their own decisions without considering the opinions of others, while non-dominant individuals tend to ask for opinions and accept the decisions that have been made. (4)monopoly pattern of communication: This pattern reflects power, where a prominent individual gives orders without asking for opinions. Decisions are often made by only one party, and conflicts can hurt those without power.

This study aims to illustrate the interpersonal communication patterns between husbands and wives during the baby blues syndrome period using the social penetration theory approach. This theory emphasizes the self-opening done by the wife regarding her condition, with the aim of obtaining positive support that suits her needs during this period. Information about the communication process carried out by the wife to the husband, including the response and reaction to the support communicated by the husband to the wife, was obtained through the opinion and interpretation of the wife's point of view as an informant.

METHOD

This research uses a qualitative approach with a descriptive case study method. The purpose of the study was to understand the phenomenon of baby blues syndrome thoroughly. Sampling was done through purposive sampling with specific criteria: women who had just given birth for the first time and had experienced baby blues syndrome in a period of no more than one year after birth. Informants were selected based on the age of the baby at the time of the interview. The researcher found five informants through searching social support groups that discuss parenting on platforms such as WhatsApp and Telegram. The informants included Vivi (with a 12-month-old baby), Fara (with a 12-month-old baby), Anas (with a 2-month-old baby), Aisyah (with a 5-month-old baby), and Ninda (with a 4-month-old baby). Data were collected through interviews, and analyzed using qualitative methods.

RESULT AND DISCUSSION

The research results and discussion obtained in this study are explanations and descriptions to answer three points of research objectives. The three aspects are interrelated with a focus on interpersonal communication in the period of baby blues syndrome, which includes the communication process of wives to husbands, husband support to wives, and interpersonal communication patterns that take place in husband and wife.

A. Commuciation Process of Wife to Husband

In the communication process, there are several components that influence, including the message sender, message content, communication channel, message receiver, and feedback. The following is a further explanation: (1) Message sender: In communication during the baby blues period, the wife tends to be the sender of the message. The aim is to convey information or seek support or approval from the husband. (2) Message content: The message includes information about baby blues syndrome, the wife's physical and emotional state (such as fatigue, irritability or sadness), and baby-related needs. Wives also ask for support and physical assistance from their husbands. (3) Communication channel: Communication channels may include direct communication (face-to-face) for messages with deep and intimate meanings. Simpler messages can be delivered by phone or messaging apps such as WhatsApp. (4) Message recipient: The husband is the recipient of the message. The wife considers the husband as the closest person who can be trusted and relied upon. (5) Feedback: The husband's response determines the effectiveness of the communication. Changes in the husband's understanding (cognitive), feelings (affective) and behavior indicate the extent to which communication is working.

Communication during this period involves more self-disclosure on the part of the wife, especially by honestly admitting that she is experiencing a psychological disorder called baby blues syndrome. However, not all women are able to disclose this condition because there is still limited knowledge and stigma in society regarding baby blues. Therefore, it is important for postpartum women to initiate communication with family, especially husbands, and ask for support that suits their needs. Research by Machado et al. shows that many women feel that they lack appropriate support after childbirth, and even when support is available, it is sometimes ineffective because it does not match their needs. Therefore, engaging in specialized consultation sessions or social support groups can help postnatal women identify support that is appropriate to their situation.

This concept is also in line with the basis used in the study, which looks at interpersonal communication between husband and wife through the social penetration theory proposed by Irwin Altman and Dalmas Taylor. This theory helps us understand the depth of interaction in husband and wife relationships, especially in the development of their relationship. The development of the marital relationship is often characterized by the growth of openness and information exchange between the couple, both verbally and non-verbally. In this

period, interpersonal communication between husband and wife should have reached a stable level of exchange. The wife's self-opening during the baby blues syndrome period affects the support provided by the husband. This finding is in line with Widyanisa's research which states that the marital stage involves a stable exchange of information, where the depth and breadth of information are at the highest level. However, if the relationship between husband and wife experiences problems, then what is referred to as depenetration can occur.

B. Husband's Support for Wife

Wives who experience baby blues syndrome really need support from their husbands as the closest person. Through interpersonal communication, wives often convey their difficult conditions during this period. Therefore, husbands need to be more sensitive in understanding and supporting their wives in order to reduce the level of distress experienced and cope with pressure by being more emotionally stable.

Of the five informants, there was one informant who revealed that she did not get support from her partner. Vivi stated that although she had communicated intensively, in reality she did not receive the expected support from her husband.

"I feel that my husband does not give me any support because he leaves everything to his mother because at that time I was living with my in-laws."

The results showed that one of the factors influencing the lack of support from Vivi's husband was the difference in education level. Vivi has a baccalaureate (D3) educational background, while her husband is only a senior high school graduate. The level of education affects a person's knowledge and the tendency to seek information independently through various sources. Although Vivi has tried to explain her condition and seek information about baby blues syndrome, her husband has no understanding of the condition. He considers Vivi's emotional disturbance as a normal thing after childbirth. The husband's level of education also affects his access to health information, making decision-making more difficult, in accordance with Khotimah and Sari's research.

Given the conditions faced by Vivi and the lack of support from her husband, Vivi decided to seek support from female friends of the same age who had experienced similar experiences. The support provided by Vivi's best friend was informative, providing solutions to the problems she faced. Therefore, Vivi was recommended to consult a health professional, especially a psychiatrist who is experienced in dealing with postpartum psychological disorders.

The research findings show that when a spouse as the closest person cannot provide support as needed, support can be obtained from other people, such as friends or friends who have similar experiences. Sharing stories with peers about similar experiences can also be a solution, without neglecting the interpersonal communication process that occurs. When a postpartum mother feels that family or significant others are unable to provide support, she usually seeks out peers who have had similar experiences. This woman considers that experiencing baby

blues syndrome is not something strange, in line with the paradigm that still prevails in the majority of environments today, as expressed by Marshall and Thompson.

In contrast, the other four informants tended to get support from their spouses. The support provided by the informants' husbands has their own characteristics. Anas, for example, often gets appreciation support from her husband through positive and calming words. Aisyah receives informational support, where her husband always provides solutions to the problems she faces. Ninda is more likely to receive instrumental support from her husband regarding childcare and household tasks. Fara, on the other hand, gets emotional support from her husband, who frees her to do whatever she wants and needs. Fara's husband understands that his wife is experiencing a difficult and tired condition in parenting, so he does not ask for many things to reduce the burden and pressure felt by his wife.

C. Interpersonal Communication Patterns Formed

Based on the communication process that tends to be carried out by the wife and the support provided by the husband during the baby blues syndrome period, the interpersonal communication pattern of husband and wife is formed. This pattern describes the communication relationship that occurs in married couples during this period. Factors that influence the effectiveness of communication include the wife's openness, empathy from the husband, support that suits the wife's needs, a positive attitude, and equality in communication and roles in the family.

Based on all elements of interpersonal communication experienced by married couples during the baby blues syndrome period, researchers have identified communication patterns. This pattern describes the communication relationship that occurs in married couples during this period. Factors that influence the effectiveness of communication include the wife's openness, empathy from the husband, support that suits the wife's needs, positive attitudes, and equality in communication and roles within the family. According to DeVito, a separate balanced communication pattern is considered the most ideal in the family. Husbands and wives occupy positions based on their respective expertise, so that no individual is more dominant than another.

The results of this study are also in line with previous research by Sari and Ramadhana. The study found that the couple's communication pattern used in dealing with postpartum stress is a balanced split pattern. This pattern is characterized by each individual in the couple sharing equal responsibilities in different roles. In addition, this pattern is supported by positive attitudes such as giving positive affirmations, encouraging, and being a good listener. In terms of childcare and household chores, husbands and wives contribute to each other. Openness between partners is also established through compromise, listening to each other, and airing grievances.

However, this study also found that the interpersonal communication pattern between Vivi and her husband is unbalanced. This imbalance is

influenced by the difference in education level, where the husband has a lower education level than Vivi. As a result, their knowledge and understanding of baby blues syndrome is different, which impacts on their ability to make decisions regarding their wife's health. Vivi experienced resistance when trying to explain her condition to her husband, and this may be due to the husband's lack of understanding of the disorder. Other studies have also shown that a lack of social support and understanding plays an important role in postnatal depression in new mothers, in line with the results of a study cited by Herman and Wati.

The communication pattern between Vivi and her husband is considered unbalanced, which is in line with DeVito's explanation of the unbalanced split pattern of communication. In this pattern, one individual dominates and often makes their own decisions without discussing or considering the opinions of others. On the other hand, non-dominant individuals tend to ask for opinions and accept decisions that have been made by the dominant party.

CONCLUSION

To reduce the psychological disturbances experienced during the baby blues syndrome period, the wife communicated with the aim of obtaining support from her husband. In this process, the wife initiated communication by opening up about her condition. Wives often convey messages to their husbands about the feelings of fatigue, stress, and sadness they experience, and ask for support or help in parenting. This communication initiation aims to influence the husband's understanding and response, both verbally and non-verbally, so that the wife obtains information support, appreciation, practical support, and emotional support.

Based on the communication and support processes that occur during the baby blues syndrome period, the communication patterns that are formed tend to prioritize equality and balance between husband and wife. This pattern was observed in all four informants and their spouses, namely Fara, Anas, Aisyah, and Ninda. However, in Vivi's case, the communication pattern experienced an imbalance due to barriers in knowledge and understanding, especially from the husband. The difference in education level between husband and wife affects the effectiveness of communication and the support provided, so Vivi experienced a lack of support from her husband.

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