Oshada; Jurnal Kesehatan
https://nawalaeducation.com/index.php/O/index
Volume 2 Nomor 1, February 2025
e-ISSN : 3047-017X
DOI : https://doi.org/10.62872/gbna7b66

Reproductive Health of Women After Pregnancy: Evaluation and Recovery from Physiological and Psychological Impacts

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ABSTRAK

Post-pregnancy, women experience complex physiological changes, including decreased hormone levels, trauma to the pelvic muscles, and the risk of complications such as pelvic organ prolapse, urinary incontinence or sexual dysfunction. The process of uterine involution requires attention to prevent complications such as bleeding or infection. A comprehensive medical evaluation including examination of the reproductive organs and nutritional status of the mother is essential to ensure optimal recovery. On the other hand, psychological disorders such as postpartum depression (PPD) and anxiety are common in new mothers, affecting both maternal well-being and infant development. Hormonal fluctuations, social pressures and new responsibilities exacerbate these conditions. Lack of social support and cultural stigma compound the challenges mothers face. Psychotherapy-based interventions and integration of mental health services have proven effective in helping mothers overcome these psychological issues. Structural barriers, such as lack of access to health facilities and limited medical personnel, are obstacles to providing adequate post-pregnancy care. Community-based education programs and strengthened health services are needed to increase awareness and access. With a holistic approach that includes both physical and mental aspects, post-pregnancy recovery can be optimized, improving the overall quality of life for mothers and families.

Keywords : Reproductive Health; Post Pregnancy; Holistic Recovery

INTRODUCTION

After pregnancy, a woman's body undergoes complex and significant physiological changes, especially in the hormonal system, pelvic muscles, and reproductive organs such as the uterus and vagina. After childbirth, the levels of hormones such as estrogen and progesterone that increased during pregnancy will drop dramatically, which can affect emotional stability as well as the body's

metabolic functions. In addition, the process of childbirth, whether normal or via cesarean section, has the potential to cause physical trauma to the pelvic muscles and surrounding tissues, often leading to conditions such as pelvic organ prolapse, urinary incontinence or sexual dysfunction. Without a thorough medical evaluation, these disorders can be long-lasting and affect a woman's overall quality of life (Mahayani, 2019).

Furthermore, the physiological changes following pregnancy require immediate treatment to prevent long-term complications. The process of uterine involution, the return of the uterus to its pre-pregnancy size and condition, requires special attention, especially if accompanied by abnormal bleeding or postpartum infection. In this case, a medical examination that includes evaluation of reproductive organ function, pelvic muscle condition, as well as the mother's nutritional status is essential to ensure optimal recovery. Research shows that women who receive comprehensive postpartum care have a lower risk of complications such as endometritis or chronic pelvic pain (World Health Organization, 2020). Thus, understanding and caring for these physiological changes is necessary, both by medical personnel and women themselves, to support effective recovery and promote long-term well-being.

In addition to physiological changes, women's mental health after pregnancy is often compromised due to hormonal fluctuations, social pressures and new responsibilities of motherhood. Postpartum depression (PPD) is one of the most common psychological disorders, with prevalence reaching 10-20% among new mothers (Gusmaladewi & Fadhillah, 2023). Symptoms of PPD, such as a sense of hopelessness, extreme fatigue and difficulty parenting, not only affect the mother's well-being, but can also negatively impact the baby's emotional and cognitive development. In addition, other psychological conditions such as baby blues and postpartum anxiety are often overlooked or considered a normal part of the postpartum process. This lack of understanding results in many women not getting the intervention they need to effectively manage their mental health.

Furthermore, social and cultural factors exacerbate the psychological impact on women after pregnancy. Societal expectations of perfect motherhood often create additional pressures that exacerbate the mental state. Research shows that low social support and strained interpersonal relationships, especially with partners, are major risk factors in exacerbating PPD (Hutchens & Kearney, 2020). On the other hand, psychotherapy-based interventions, such as cognitive-behavioral therapy (CBT) and interpersonal therapy (IPT), have been shown to be effective in helping women cope with these psychological stressors. Therefore, integrating mental health services into postnatal care programs is necessary to provide holistic and comprehensive support to new mothers.

Lack of awareness of the importance of post-pregnancy health evaluation is one of the major challenges in maintaining maternal well-being. Many women assume that recovery after childbirth is just a natural process that does not require medical intervention, so they tend to neglect postpartum check-ups. In fact, the postpartum period is a critical phase that requires intensive monitoring to detect

potential complications such as bleeding, infection or hormonal disorders that can affect long-term health. Lack of access to accurate information and health education, especially in remote areas or with low literacy levels, exacerbates this situation. The study by Pamela et al. (2022) shows that more than 60% of women in developing countries do not receive postnatal care, which significantly increases the risk of maternal morbidity and mortality.

On the other hand, structural barriers in the health system also contribute to low postnatal evaluation rates. Limited health facilities, high cost of care, and lack of trained medical personnel are major barriers for many women to access such services. In addition, cultural norms that consider talking about reproductive health as taboo further limit prevention and early intervention efforts for postnatal health problems. Research shows that empowering women through community-based education programs and the provision of affordable health services can increase their awareness and participation in postpartum evaluation (Munawarah, 2024). Therefore, a more inclusive and integrated approach is needed to ensure that every mother receives adequate care and can recover her health optimally.

Holistic recovery that includes physiological and psychological aspects is a key element in maintaining women's reproductive health after pregnancy. Physiologically, recovery involves the process of regenerating tissues damaged during childbirth, stabilizing hormones, as well as restoring the function of reproductive organs. Approaches that only focus on one dimension, such as physical healing alone, are often insufficient to deal with the various challenges faced by new mothers. According to research by Husniawati et al. (2024), mothers who received comprehensive interventions, such as physical therapy for pelvic muscles and lactation counseling, showed faster recovery and lower risk of complications than those who only received basic physical care. Therefore, it is important to ensure that post-pregnancy health services include physical check-ups, nutritional support, and access to rehabilitation programs that support complete recovery.

From a psychological aspect, holistic recovery also includes addressing emotional stress, sleep disturbances, as well as identity changes that mothers often experience after giving birth. Postpartum depression, which is often overlooked in traditional healthcare, can have a long-term impact on the mother's quality of life and the child's development. A comprehensive approach that incorporates emotional support, psychological therapy, and social support has been shown to be effective in accelerating maternal mental recovery after pregnancy (Dennis & Hodnett, 2007). This research highlights the importance of family involvement, particularly spouses, in providing support during this critical period. By providing a supportive environment and holistic health services, the mother can not only recover her optimal health, but also strengthen bonds with the baby and family, ultimately improving overall well-being.

RESEARCH METHODS

This study used a qualitative method with a phenomenology approach to explore the experiences of postpartum women in restoring reproductive health. Participants were selected through purposive sampling, involving 15-20 women who gave birth in the last 6-12 months from various backgrounds. Data were collected through semi-structured in-depth interviews and focus group discussions (FGDs) focusing on physical, psychological changes, as well as social access and support. Data were analyzed using thematic analysis, assisted by NVivo software to ensure consistency. Data validity was maintained through triangulation and member checking. This approach aims to explore the needs and challenges of women after pregnancy and provide recommendations for the development of more holistic and inclusive health services.

RESULTS AND DISCUSSION

Postpartum Reproductive Health Evaluation: Challenges and Needs of Women

1. Lack of Awareness and Information on Postpartum Screening

The lack of awareness and information regarding postpartum check-ups in Indonesia is a cause for concern, given the importance of the postpartum period in ensuring maternal health after childbirth. According to the Ministry of Health, postpartum check-ups should be conducted in three stages: first, between 6 hours to 3 days after delivery; second, on days 4 to 28; and third, on days 29 to 42. This includes evaluating vital signs, the condition of the uterus, and detecting complications such as infection or anemia. Unfortunately, many mothers do not realize the importance of these postpartum visits. Studies show that low education and lack of information play a significant role in noncompliance with postpartum visits. Pramiyana (2024) stated that a low level of education can hinder the acceptance of new information, including the importance of postpartum visits. Research from WHO (2013) also revealed that low public awareness regarding postnatal care contributes to the high rate of postpartum complications in developing countries. Furthermore, Alini et al (2024) found that mothers who received intensive counseling during pregnancy tended to have higher compliance with postpartum check-up.

A midwife in Yogyakarta revealed,

> "*Many mothers feel healthy after giving birth so they are reluctant to do follow-up examinations. In fact, complications such as bleeding or infection can appear without obvious initial symptoms.*"

This statement confirms that without adequate education, mothers may not be aware of the risks that lurk during the postpartum period.

Lack of information in the community also exacerbates the situation. In some areas, access to health services is limited, and information on the importance of postpartum care is not widespread. This leaves mothers without the necessary support during the recovery period. According to the data, only 32.8% of mothers in Indonesia had a complete postpartum visit, which is much lower than other countries such as Benin (68%) or Zambia (63%). To overcome this problem, integrated efforts are needed to improve education and access to information on the importance of postpartum check-ups. A study by Junaedi et al (2024) showed that a community-based education program was able to increase the awareness level of pregnant women by 45%. In addition, a study by Susanti et al. (2022) found that training health workers on effective communication can improve maternal compliance in conducting postpartum check-ups. An obstetrician from Jakarta stated,

> "*Socialization about the importance of postpartum examinations must be carried out continuously, both through health facilities and social media, so that mothers understand the risk of complications.*"

Health workers should be proactive in providing counseling since pregnancy, and the community should be involved in disseminating information. Thus, it is hoped that the number of postpartum visits can increase, so that the health of postpartum mothers is more secure.

2. Limited Access to Health Facilities and Services

Limited access to health facilities and services is one of the main challenges in improving the quality of maternal and infant health, especially in remote areas. This challenge is not only caused by geographical factors, but also by economic conditions and weaknesses in the existing health system. The location of health facilities far from where people live is a major obstacle, especially for pregnant women who need regular care or assistance during labor. Previous research by Harahap et al (2021) showed that 40% of pregnant women in remote areas do not have access to adequate health services due to long distances and lack of transportation. According to an interview with a doctor working in rural Kalimantan,

> "*Many pregnant women have to travel hours by boat to reach the nearest health centre, and this often discourages them from getting regular pregnancy check-up.*"

This situation is exacerbated by the lack of transportation infrastructure, which makes access more difficult during the rainy season or natural disasters.

In addition to geographical challenges, the high cost of check-ups is also a significant barrier for underprivileged families. Data from the Central Bureau of

Statistics (BPS) shows that 27% of families in disadvantaged areas cannot afford the cost of medical check-ups on their own. As a result, they tend to neglect important postnatal check-ups to prevent complications such as infection or anemia. A mother from East Sumba Regency, East Nusa Tenggara, revealed in her interview,

> *"We have to choose between buying food for the children or going to the clinic for a checkup. Transportation costs alone are expensive, not to mention the doctor's fees."*

The shortage of medical personnel is also a matter of great concern. The ratio of doctors and midwives in remote areas is often far below the standard recommended by the World Health Organization (WHO). In some areas, one midwife has to serve dozens of villages, resulting in suboptimal service delivery. This shortage leads to poor quality of care and increased maternal and infant mortality. A study published in the Indonesian Journal of Public Health states that areas with limited access to medical personnel have twice the maternal mortality rate as urban areas. Furthermore, weaknesses in the health system in many remote areas, such as limited and inadequate availability of medical equipment, exacerbate the situation. Many health facilities do not have the basic tools to handle cases of labor complications. As expressed by a head of a puskesmas in Yogyakarta,

> *"We often have to refer patients to hospitals in the city due to a lack of equipment, but the journey there can take a whole day. This is very risky for the mother and baby."*

The implications of this limited access are serious. Not only does it jeopardize the health of the mother and baby, but it also exacerbates poverty as families have to spend a lot of money on emergency care that could have been prevented by regular check-ups. Research by Purwaningsih (2020) shows that children of mothers who do not receive prenatal care have a higher risk of developmental delays compared to children whose mothers receive routine care. In addition, this lack of access has an impact on the overall quality of life of the community. Another study by UNICEF (2021) also found that areas with limited basic health services had a child malnutrition prevalence of 25%, well above the national average. Children born to mothers who do not receive adequate care are at risk of malnutrition, low birth weight or developmental delays.

Therefore, strategic measures are needed to address this challenge. Improving health infrastructure in remote areas should be a priority, including the construction of accessible clinics and health centers. Subsidization of health service fees, especially for pregnant and postpartum women, also needs to be expanded to ensure that all levels of society can access the necessary care. In addition, the distribution of medical personnel to remote areas through incentive programs or mandatory work in certain areas can be a long-term solution. As suggested by Dr. SR,

"The government needs to provide decent incentives for doctors and midwives so that they are willing to work in remote areas. Education and training must also be improved to ensure the quality of medical personnel is maintained."

Public education on the importance of health check-ups should also be improved through counseling programs. By raising awareness and providing adequate facilities, the challenge of limited access to health facilities can be overcome, and ultimately, the quality of maternal and child health in Indonesia can be significantly improved.

3. **Social Stigma and Cultural Barriers in Reproductive Health Discussion**

In many societies, especially in developing countries, the discussion of women's reproductive health is still considered a taboo topic. This is rooted not only in deeply-held traditional values, but also in a lack of understanding about the importance of reproductive health. Social norms that restrict open discussion about women's bodies and biological functions create a serious barrier for women to seek medical help or even share their experiences. A study by Sunita (2024) showed that 70% of women in rural Indonesia felt embarrassed to discuss their reproductive health with medical personnel, even though they were aware of concerning symptoms. According to an interview with Dr. SA, a reproductive health specialist, she stated,

"Many of the women who came to me were already in a bad condition because they delayed getting checked. Fear of stigma often makes them feel ashamed or afraid of being considered immoral just because they want to take care of their own health."

This stigma also hinders proper education and dissemination of information about reproductive health. In a survey conducted by the Indonesian Women's Health Institute (2021), it was found that 65% of women in rural areas felt uncomfortable talking about menstrual problems or other reproductive health disorders, even to medical personnel. This figure shows that social stigma has created an atmosphere that makes women feel isolated and vulnerable. As a result, many women experience health complications that could have been prevented with early detection and proper treatment. Research by Akbar et al. (2021) also highlighted that low reproductive health education in remote areas contributes to low rates of routine screening such as pap smears, which are important for early detection of cervical cancer. A clear example is the increasing incidence of cervical cancer, which is often diagnosed at an advanced stage due to the lack of routine screening such as pap smears.

The dominating patriarchal culture also plays a significant role in reinforcing these barriers. In some families, especially in traditional communities, women who want to talk about reproductive health are often seen as violating moral boundaries or modesty values. This is reinforced by the lack of access to reproductive health education in schools. The curriculum often ignores this

important aspect, so young people grow up without sufficient understanding of their own bodies. A study by Puspitaningrum et al (2017) found that less than 30% of female students in junior high school had correct knowledge about the menstrual cycle and the importance of maintaining hygiene during menstruation. A similar study by Amelia (2020) revealed that in some rural areas, almost 75% of school-aged women do not get formal information about reproductive health, which exacerbates myths and misconceptions among them.

In addition, these cultural barriers often lead to significant psychological impacts. Women who face reproductive health issues but lack social support tend to experience greater mental distress. They feel guilty or ashamed for being perceived as the cause of the problem. Clinical psychologist, AP revealed in an interview that,

> "*Feelings of shame and fear of negative judgments from the surrounding environment can worsen a woman's mental state, even triggering depression. They often feel that there is no safe place to talk or seek help.*"

To address this challenge, a collective effort from various parties is required. The government, for instance, should play a more active role in promoting the importance of reproductive health through culturally sensitive educational programs. For example, research by Susilowati & Maryam (2024) shows that community-based interventions involving local leaders can increase reproductive health knowledge by up to 40% in rural areas. Meanwhile, communities and civil society organizations should also be involved in creating a more inclusive and supportive environment. One successful example is the "Open Discussion on Reproductive Health" program initiated by an NGO in Yogyakarta. This program has successfully increased awareness and encouraged women to discuss their health issues through a friendly and approachable method. This is supported by the findings of Yunita et al. (2025), which highlight the effectiveness of this approach in reducing stigma among women of reproductive age.

In conclusion, social stigma and cultural barriers in reproductive health discussions are complex issues that require a multidimensional approach to overcome. By creating a supportive environment, providing access to accurate information, and increasing public awareness, women are expected to feel more comfortable and confident in maintaining their reproductive health without fear or shame.

Psychological Recovery After Pregnancy: The Role of Social Support and Integrated Services

1. The Impact of Postpartum Depression and Anxiety on Maternal Mental Health

Postpartum depression (PPD) and postpartum anxiety are mental health conditions commonly experienced by mothers during the postpartum period. Their impact on maternal mental health is significant, which, in turn, can affect infant development and the overall quality of family life. Research indicates that mothers with PPD often struggle to establish a healthy emotional bond with their babies, potentially hindering the child's social and emotional development in the future (Anggraini & Setiyowati, 2024). For example, a longitudinal study by Waty et al. (2024) found that children raised by mothers with PPD exhibited higher stress levels and lower emotional regulation abilities compared to children of mothers without PPD. This situation is further exacerbated by feelings of guilt, helplessness, and social isolation that often accompany PPD and anxiety. Trinanda (2023) emphasized the need for early intervention to mitigate the long-term effects on both mother and child.

One of the major consequences of PPD is the disruption of a mother's ability to fulfill her caregiving role optimally. According to an interview with Dr. AK, a clinical psychologist specializing in maternal and child health,

> "*Mothers with PPD often feel unable to take care of their babies, which causes emotional strain and worsens their mental state.*"

Additionally, postpartum anxiety can cause mothers to become overly protective or, conversely, avoid interactions with their baby due to a fear of making mistakes. This phenomenon also affects the quality of relationships between the mother and other family members, including her partner, ultimately increasing the risk of conflict and feelings of isolation (Winarno, 2020).

Furthermore, if left untreated, PPD and postpartum anxiety can develop into chronic mood disorders, such as major depression or generalized anxiety disorder, which may require long-term treatment. It is important to note that the long-term effects of these conditions are not only experienced by the mother but also by the entire family. Children raised by mothers with postpartum depression are at a higher risk of developing behavioral issues, learning difficulties, and emotional disorders (Sulistyaningsih & Wijayanti, 2020).

Additional research by Sartika et al. (2024) indicates that exposure to maternal depression during early childhood can affect brain development, particularly in areas related to emotional regulation and stress response. These findings further highlight the urgency of addressing PPD in a serious and systematic manner.

Therefore, comprehensive interventions are needed to manage PPD and postpartum anxiety. Approaches such as cognitive-behavioral therapy (CBT), interpersonal therapy, and support groups have been proven effective in helping

mothers manage their symptoms (Saragih et al., 2023). In addition, healthcare providers should conduct routine screenings for pregnant and new mothers to detect PPD symptoms early.

> "*Education during pregnancy about the possible onset of PPD can mentally prepare mothers and increase their likelihood of seeking help sooner,*" Dr. R.

Social support is also a crucial element in the recovery process. Husbands, family members, and friends should be involved in creating a supportive and empathetic environment. For example, research by Umma et al. (2023) indicates that strong social support significantly reduces PPD symptoms in new mothers. Additionally, public campaigns to raise awareness about PPD and the importance of maternal mental health can help reduce the stigma that often prevents mothers from seeking help. A study by Yantina et al. (2024) confirmed that information delivered through community education programs can enhance public understanding of PPD, ultimately encouraging more mothers to seek early intervention. With the right and well-integrated approach, the negative impact of PPD and postpartum anxiety can be minimized, allowing mothers to embrace their roles with greater confidence and happiness.

2. The Role of Social Support in Accelerating Psychological Recovery

Social support plays a fundamental role in accelerating the psychological recovery of mothers after pregnancy, especially when facing the emotional and physical pressures that often accompany the postpartum period. Several studies have shown that the involvement of partners, family, and the community not only reduces the risk of postpartum depression but also enhances the overall mental health quality of mothers (Fardi, 2023). This form of social support includes emotional support, practical assistance, and the creation of an inclusive social environment. Emotional support, such as listening to complaints and offering empathy, allows mothers to feel valued and understood, which in turn can reduce feelings of isolation and stress. This is reinforced by an interview with a clinical psychologist, Dr. AM, who stated,

> "*Emotional support from a partner, even if it may seem simple, can be an important foundation for mothers to rebuild their confidence after childbirth.*"

n addition to emotional support, practical assistance also plays a significant role in alleviating the physical burden on mothers. Fatigue caused by sleep deprivation and the routine of caring for a baby can trigger more severe psychological pressure if not addressed. Practical help from a partner or family members in terms of caring for the baby, household chores, or meeting the mother's basic needs can provide her with time to rest and regain energy. In an interview with a 32-year-old mother, NS, she revealed that her husband's

involvement in caring for the baby every night was extremely helpful in maintaining her emotional stability.

> "*When I know someone is ready to help, my anxiety decreases and I feel calmer towards the new days,*" she said.

Moreover, creating an inclusive social environment is also crucial. A non-judgmental and pressure-free environment allows mothers to feel accepted and supported. New mother communities, both online and offline, often serve as ideal spaces to share experiences and receive support from individuals facing similar challenges. According to research conducted by Dennis and Letourneau (2007), involvement in support groups can significantly reduce postpartum depression symptoms and increase feelings of social connection.

Overall, this social support plays a vital role in accelerating the mental recovery process for mothers, helping them cope with the emotional and physical changes that occur after childbirth. With strong social support, mothers are better able to build a positive relationship with their baby, which ultimately impacts the quality of caregiving and family well-being as a whole. Therefore, it is essential for partners, families, and communities to proactively offer the necessary support to help mothers navigate the postpartum period more effectively.

3. Integration of Mental Health Services into Post-Pregnancy Programs

Integrating mental health services into post-pregnancy programs is a strategic step that is crucial for improving the well-being of mothers and families. The postpartum period is a critical time in which mothers face various physical and emotional challenges that can significantly affect their mental health. Research by Yim et al. (2015) shows that approximately 10-20% of mothers experience postpartum depression, which, if left unaddressed, can lead to long-term psychological disorders such as anxiety or severe depression. Therefore, providing integrated mental health services, such as cognitive-behavioral therapy (CBT), individual and group counseling, and psychological education, is extremely important.

One of the main benefits of integrating mental health services is the ability to detect early signs of mental disorders and prevent more severe consequences. According to Dr. Siti Rahmawati, a clinical psychologist who was interviewed,

> "*Hormonal changes, social pressures, and cultural expectations can be a heavy burden for new mothers. Post-pregnancy mental health programs provide a space for mothers to express their feelings without fear of being judged.*"

Programs like this can also help mothers develop healthy coping mechanisms, ultimately enhancing the bond between mother and baby. These

outcomes not only contribute to the emotional development of the baby but also create a more stable and harmonious family environment.

However, the implementation of such programs is not without challenges. One of the main barriers is the stigma still attached to mental health, especially in communities that lack understanding of the importance of psychological intervention. Additionally, the limited access to mental health professionals, especially in rural or remote areas, further complicates the situation. According to a report by the World Health Organization (WHO), only 1 in 10 mothers in developing countries have access to post-pregnancy mental health services. In an interview with a community midwife, Mrs. Lina, she stated,

> "*We often see mothers who seem depressed or cry for no reason, but they are reluctant to seek help for fear of being seen as weak or incapable of being a good mother.*"

To overcome this challenge, a systematic effort from various parties is needed. The government and health institutions must develop policies that support the integration of mental health services into the postpartum care system. Additionally, training healthcare workers on the detection and intervention of mental health disorders is urgent. Public education must also be promoted to reduce stigma, so that mothers feel more comfortable seeking help. For example, community education programs organized by non-governmental organizations in several areas have successfully increased public understanding of the importance of maternal mental health.

In this context, the integration of mental health services functions not only as a clinical intervention but also as a preventive measure. By providing easy and affordable access, mothers can feel holistically supported, both physically and emotionally. This step is expected to create a generation of healthier and more resilient mothers and children. As Dr. Rahmawati stated at the end of her interview,

> "*Maternal mental health is the foundation of family health. When you feel good, the whole family will also feel the impact.*".

CONCLUSION

Awareness of the importance of postpartum check-ups in Indonesia remains low, with only 32.8% of mothers completing full postnatal visits. Low education levels and limited access to information are the primary reasons for noncompliance with these essential check-ups. Community-based education programs and healthcare worker training have proven effective in improving maternal adherence. However, access to healthcare services remains a significant challenge, particularly in remote areas, due to distance, lack of transportation, and high costs. Additionally, shortages of medical personnel and inadequate healthcare facilities further compromise the quality of maternal and child healthcare services. Developing healthcare infrastructure,

providing financial subsidies, and ensuring the equitable distribution of medical professionals are strategic steps to address these issues. On the other hand, social stigma and patriarchal cultural norms often make discussions about reproductive health taboo, hindering early detection of complications. The lack of reproductive health education reinforces myths and misconceptions within society. A community-based approach involving local leaders can help reduce stigma and raise awareness of the importance of reproductive health.Therefore, an integrated approach combining education, improved healthcare access, and community empowerment is essential to ensuring maternal health after childbirth.

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