

2024

## Indonesian Couples' Perception of Spouse's Support during Labour and Childbirth

Johanna Natalia  
University of Surabaya, Indonesia

Follow this and additional works at: [https://scholarworks.gvsu.edu/iaccp\\_papers](https://scholarworks.gvsu.edu/iaccp_papers)



Part of the [Psychology Commons](#)

### ScholarWorks Citation

Natalia, J. (2024). Indonesian Couples' Perception of Spouse's Support during Labour and Childbirth. In E. E. Buchtel & W. Friedlmeier (Eds.), *Year of the Golden Jubilee: Culture Change in the Past, Present and Future. Proceedings from the 26th Congress of the International Association for Cross-Cultural Psychology*, 12. <https://doi.org/10.4087/AHDI6579>

This Article is brought to you for free and open access by the IACCP at ScholarWorks@GVSU. It has been accepted for inclusion in Papers from the International Association for Cross-Cultural Psychology Conferences by an authorized administrator of ScholarWorks@GVSU. For more information, please contact [scholarworks@gvsu.edu](mailto:scholarworks@gvsu.edu).

## **Abstract**

The World Health Organisation (WHO, 2017) stressed the importance of support during labour and childbirth to the women. Indonesia's Ministry of Health in cooperation with the WHO, Indonesian Obstetrics and Gynaecology Association, and Indonesian Midwives Association recommended a support person (family member) to accompany women during labour and childbirth (Kementrian Kesehatan Republik Indonesia, 2013). However, in most parts of Indonesia, this recommendation has not been applied properly. With support from the management of the maternity centre, this study offered the women to have the husband's support during labour and childbirth in order to understand the women's and husband's perspective of support during labour and childbirth. This study used a qualitative method, which was very rare, particularly in Indonesia. A quantitative method was included to investigate the couples' perception of support during labour and childbirth. Eighteen couples were interviewed at three different times: before, during, and after childbirth. This study found similar themes between the women and husbands' perception about support during labour and childbirth except one woman who felt negatively because her husband agreed with the midwife's recommendation to do caesarean while the woman expected the normal childbirth. In addition, cross tabulation was added to understand the couples' perception. This study contributed a new perspective of couples' perception about support during labour and childbirth. Based on the finding, this study recommended maternity centres or local health care centres to provide information about the importance of support during labour and childbirth via posters, pamphlets, and leaflets. In addition, this study recommended to the Indonesian Ministry of Health to use newspapers, television, radio, and social media to inform all Indonesians about the importance of support during labour and childbirth via programs, community service announcements, and advertisements.

Keywords: women, husbands, support, childbirth.

## **Indonesian Couples' Perception of Spouse's Support during Labour and Childbirth**

Many studies conclude that support during labour and childbirth plays an important role for women. Based on 26 trials exploring the benefits of providing continuous support to women during labour and childbirth in 17 high income and middle income countries, the World Health Organisation (WHO, 2017) has recommended that women should be accompanied by a trusted support person during labour and childbirth. However, this WHO recommendation is not yet applied consistently in Indonesia despite a 2013 recommendation by Indonesia's Ministry of Health in cooperation with the WHO, Indonesian Obstetrics and Gynaecology Association, and Indonesian Midwives Association that a support person (family member) accompany women during labour and childbirth (Kementrian Kesehatan Republik Indonesia, 2013). In Indonesia, it is still uncommon to have a support person (family member) accompany women during labour and childbirth (Defiany, Sumarni, Febriarni, Fatonah, & Erlyta, 2013; Johariyah, Sohimah, & Lestari, 2014; Magfuroh, 2012; Sektiawan, 2010; Stiarti, 2011). Around 68% Indonesian women did not have her husband as support person during labour and childbirth (Mahyunidar, 2019).

In Australia, the presence of the husband seemed to be a main support for the women during labour and childbirth. A qualitative study with eight couples in Australia found that women felt positive feelings when they had their husband as a support person during labour and childbirth (Dlugosz, 2013). By being a witnesses of labour and childbirth process, the husbands felt admiration and respected their wives more. As a result, the self esteem of their wives were increased. The women also felt a deeper connection with their husband in that moment and stated that this process strengthened their family bonding.

I had an opportunity to have informal discussions with midwives to understand their reasoning of preventing family members or other support persons from entering the childbirth room during labour and childbirth. The midwives suggested this practice because of their concerns about the possibility that family members or other support persons might engage in undesirable behaviours in the childbirth room (such as panicking or fainting). The midwives could not anticipate that possibility while they need to focus on assisting the women giving birth. However, based on Indonesia's Ministry of Health in cooperation with the WHO, Indonesian Obstetrics and Gynaecology Association, and Indonesian Midwives Association recommendation about the benefit of a support person (family member) accompany women during labour and childbirth (Kementrian Kesehatan Republik Indonesia, 2013), this study was conducted at a maternity centre in Surabaya, Indonesia which supports the recommendation. Investigating women's perspectives and the spouse's perspectives on support during labour and childbirth using qualitative method would provide a deeper understanding of support during labour and childbirth. Understanding the couple perspectives deeply would in turn help ensure policy development and implementation in relation to lay support in labour took account of all the barriers and drivers.

The objective of this study was to explore the experience of Indonesian couples who have husbands acting as support for the women support during labour and childbirth. Therefore, the research question proposed in this study was, how Indonesian couples perceive the support during labour and childbirth.

## Method

### Participants

The participants were obtained from a maternity centre. They were between 18 and 39 years old. Some experienced their first pregnancy and others already had one to three earlier pregnancies. The participants socioeconomic status varied between middle and low status. Their highest education level varied from elementary to undergraduate qualification. All participants lived in city of Surabaya.

This study used qualitative methodology to investigate the couples' subjective experience. This methodology is appropriate to assess the subjective perspectives of the couples to represent the various realities rather than judging the phenomena. In addition, the cross tabulation was added to understand more about the couples' perception of support during labour and childbirth.

### Procedure

This study used natural and familiar settings in order to understand the closest reality (Denzin & Lincoln, 2018). Therefore, I came to the maternity centre that was already familiar to women and the husbands who accompanied the women attending for check-ups, gymnastic classes, and antenatal classes. The observation and interviews in this natural context served to understand the participants' "world" better.

To understand the couples' perception about support during labour and childbirth, I interviewed 18 women and their husbands at three different times at the maternity centre depended on the women check-ups or giving birth schedule:

1. Interviews before labour and childbirth aimed to understand the women's expectations about husband's support during labour and childbirth; and the husbands' imagination about their support to the women during labour and childbirth.
2. Interviews during labour and childbirth (1-2 days after labour and childbirth) aimed to understand the women's perception about husband's support during labour and childbirth; and the husbands' perception about their support to the women during labour and childbirth.
3. Interviews after labour and childbirth (1-2 weeks after labour and childbirth) and the goal to understand the women's perception about husband's support after labour and childbirth; and the husbands' perception about their support to the women after labour and childbirth.

## Data Analysis

I analyzed the couples' story to find the key elements of the story (Creswell, 2015) by using the three-dimensional space narrative structure proposed by Clandinin and Connelly (2000). The story was reorganized into chronological order. After that, I identified the themes from detailed data to more general themes. This process is an inductive process. Besides that, the cross tabulation was applied to understand more about the couples' perception of support during labour and childbirth.

The coding process was started by highlighting with a different colour the statement of thought and feelings (before, during, after) of each participant. Secondly, I reread the statement of thought of each participant and grouped them. Thirdly, I reread the statement of feelings of each participant and grouping them. After that, I tried to categorize the themes of the thoughts and feelings of the participants.

## Results

### **Before the Birth: Women's Expectations about Husband's Support during Labour and Childbirth**

The qualitative analysis regarding the relevance of support by the husband showed three themes (see Table 1): the woman was (1) not sure what is right, (2) wants support or (3) perceives the presence as relevant knowledge for the husband. Each of the themes had some subthemes as described below.

#### ***Women's theme 1: I have no idea***

Most of the women in this study seemed anxious when they imagined the labour and childbirth process. It was reflected in a key sub-theme: "I've avoided thinking about it". The anxiety was reflected in woman 13's response, "I don't want to think about it ..." (laughing while shielding her face with both her hands). As a narrative inquiry researcher, I found a contradiction on the woman gesture. While saying, "I don't want to think about it ...", she was laughing but also shielding her face. Laughing was usually known as an indicator of positive emotion (glad), while shielding face was usually known as an indicator of negative emotion (fear). Therefore, doing this at the same time could make others feel confused because these two behaviors indicated contradictive emotion.

Blot (1992) stated that to understand Indonesia culture, people need to understand its people's behaviour. The woman's contradictive gesture could be understood in Javanese culture perspective. In Javanese culture, to avoid conflict and maintain harmony, Javanese people tend to behave opposite to the genuine (Endraswara, 2016; Prawitasari, 1995; Suseno, 1996). For example: to avoid conflict, Javanese people usually do not express their anger, even they smile and say sorry to someone who hurt them before they explain the reason why they feel hurt. A woman seemed to use this Javanese coping style, by laughing while she was afraid, to maintain harmony within herself.

Anxiety is the struggle of the being against nonbeing (May, 1969). The women who felt anxious during labour and childbirth may relate to the possibility of being closer to death (Batbual, 2014; Handelzalts et al., 2015; Johariyah et al., 2014; Kasdu, 2007; Lowe, 2000; Matinnia et al., 2015; Rahmy, 2013; Ryding et al., 2015; Schetter & Tanner, 2012). The women in this study seemed avoid thinking about support during labour and childbirth. This may be because they are trying to distance themselves from the process of labour and childbirth which has a risk of death.

***Women's theme 2: Just support me***

Most of the women in this study had little expectations about being supported. It reflected on the second theme: Just support me. This expectation is reflected Javanese philosophy *Mangan Ora Mangan Sing Penting Kumpul* that means eating or not, the most important is gathering (Admin, 2021). Javanese people are taught to have simple expectation in any situation. Therefore, it seemed from the women's expectation in this study that they only simply expect support from their husband.

***Women's theme 3: Provide husband with experience of the childbirth process***

Some women want to be accompanied by their husbands so that their husbands know the birthing process. Women hope that their husbands can gain valuable knowledge by being present during the labour and delivery process. The main theme of women's hopes for the benefits of having a companion is " Provide husbands with experience of the childbirth process." As previous research shows, individuals tend to spend their limited opportunities or valuable time with those closest to them, such as their partner and family (Naftali et al., 2017; Natalia & Pramadi, 2007). The women in this study wanted to share their peak experience of giving birth to the person closest to them, their husband. Because giving birth is a family moment, it is hoped that giving birth can be experienced with their beloved partner. In addition, these women believed that accompanying them during labour and witnessing the birth would give those who supported them insight into the birthing process. The women hope that their husbands will love, appreciate, and respect them more after witnessing their life and death struggle in giving birth to their babies.

**Before the Birth: Husbands' Imaginations about Their Support to the Women before Labour and Childbirth.**

***Husbands' Theme 1: I Have No Idea***

Most husband could not describe what kind of support they can provide to the women, because as stated in the sub-theme "(Because) I never expected I would be there". However, some of the husbands tried to find information from articles, websites, YouTube videos, or asked other friends or family members about their experiences. None of the husbands tried to ask the woman about what the woman needs in order to prepare to support the women. It might be because the husbands thought that they already knew that woman's preferences in other contexts or because they thought the woman herself might have no ideas of how her husband's support might help her during labour and childbirth.

Interestingly, this finding is in contrast to the previous study in the UK (Longworth et al., 2011). The husbands in the UK could describe their expectations during labour and childbirth. The possible reason may be because of the cultural differences between the two study populations: In UK, people tended to be able to describe their expectations while in Indonesia, specifically Java, people tended to not express their expectation or emotions openly. Javanese people tend to trust God and do not have highly detailed expectations (Endraswara, 2016; Suseno, 1996).

***Husbands' Theme 2: (I Plan To) Fully Support (Her)***

The second theme of husband's expectation is "(I plan to) fully support (her)". The support person just planned to support the women totally.

The husbands seemed to have difficulties in describing "how" they would give support. They could not describe the "concrete behaviour" they would provide. It seemed that they might still have contradictory expectations about support during labour that was reflected in the third theme. The third theme of husbands' expectation is "I *tidak tega*; don't want to see her in pain; I don't want to see her suffer".

***Husbands' Theme 3: I Tidak Tega; Don't Want to See Her in Pain; I Don't Want to See Her Suffer***

Although women wanted their support person to witness the reality of childbearing, the husbands were wary of doing so. The third theme in the husbands' expectations - "I *tidak tega*; I don't want to see her in pain; I don't want to see her suffer". The Indonesian term "*tidak tega*" refers to both the speaker's compassion and fortitude. Many of the husbands expressed *tidak tega* when they imagined accompanying the women during labour and childbirth. They feared witnessing the pain would exhaust their reserves of compassion and fortitude.

This unwillingness to witness pain perhaps reveals an underlying anxiety that the husbands would not be able to cope with witnessing pain in the women, and would not be able to provide any form of support that could effectively help to minimise or alleviate the pain. Goldstein and Brockmole's (2017) review of recent research on pain perception theory concluded that seeing others suffering pain can stimulate activities in the affective area in the brain, and this provides a theoretical basis for the husbands' concerns.

As May (1977) argued, anxiety also has a positive meaning and can prompt acceptance of new learnings and a willingness to adjust previous plans. In this study, the positive meaning of this husbands' anxiety is discussed in more detail in the section dealing with the husbands' experiences of being present during labour and childbirth. Table 1 shows the cross tabulation about the themes of the women and the husbands about support before labour and childbirth.

Table 1.

*Cross Tabulation about the Themes of the Women and the Husbands about Support before Labour and Childbirth.*

<b>Wife</b>	I have no idea %(n)	Just support me %(n)	Provide husband with experience of the childbirth process %(n)	<b>Margin husband</b>
<b>Husband</b>				
I have no idea	16.67 (3)	5.56 (1)	0	22.23 (4)
(I plan to) fully support (her)	38.89 (7)	16.67 (3)	11.11 (2)	66.67 (12)
I <i>tidak tega</i> ; don't want to see her in pain; I don't want to see her suffer	5.56 (1)	5.56 (1)	0	11.12 (2)
<b>Margin (Wife)</b>	61.12 (11)	27.79 (5)	11.11 (2)	

### **During Birth: Women's Perceptions about Husband's Support during Labour and Childbirth**

This study showed that the presence of the husband contributed to a positive well-being to the women during labour and childbirth. The husbands in this study showed their empathetic behaviour by listening to the women's stories and feelings. Therefore, the women felt understood, supported, and secure. These positive emotions were associated with a decreased perception of pain (Goldstein & Brockmole, 2017; Ogden, 2007).

#### ***Women's Theme 1: I was Pleased with the Support (Having the Support Person Present was Positive)***

Even though at the beginning the women seemed to have no expectations towards the support, the experience of being accompanied by their husbands gave positive experiences to the women. The women reported that their husbands helped them to relax. They felt understood by their husbands. These findings suggested that the women might have hoped for some benefits even if they did not express their expectations at the beginning. In addition, because the women did not have expectations, or have minimal expectations, and had prepared themselves to accept whatever they received (in Javanese term is called *pasrah*), they felt pleased and satisfied because of receiving more than they expected.

As mentioned at the beginning, Javanese values significantly influence Javanese people including the women in this study. Those Javanese values encourage people to be *nrimo*, *pasrah*, *sabar*, hoping *sethithik*, and aware of themselves (particularly as *tiyang alit*) (Endraswara, 2016; Sadli, 1984; Suryadi, Subroto, & Marmanto, 2014; Suseno, 1996).

These Javanese wisdoms seemed to be a Javanese coping style, including the women in this study. Those Javanese values might be a protection from disappointment and



failure and this approach also accords with other spiritual traditions such as Buddhism. As Buscaglia (1972) said:

The Buddhist says that you are well on your way to enlightenment when you "cease desiring." Perhaps we can never reach this enviable state of peace, but to the extent to which we can live without demanding or expecting (except from ourselves), so can we be free from disillusionment and disappointment. (p. 67)

### ***Women's Theme 2: It Gave Me Companionship***

The second theme of the women's experience about support during labour and childbirth was similar to the findings reported in the previous studies (Dlugosz, 2013; Lailia & Nisa, 2015). A study conducted in Australia (Dlugosz, 2013) reported that the presence of their husband made women feel safe and protected. The women felt satisfied to have their husband beside them during labour and childbirth. Their husband seemed to fulfill their psychological needs rather than physical needs. This may have confirmed the findings of Bingel et al.'s study (2011) that even the support person doing nothing, he may provide positive emotions to the woman.

Buscaglia (1972) stated that humans are social beings and need other people to help them grow in life. The need for strong relationships is reflected in a marriage (Buscaglia, 1972). Buscaglia said that humans need love. The women in this study also expected to be loved by their husbands. Their husbands might be the only one who cares deeply or the one who cares most deeply for them.

According to health psychology (Ogden, 2007; Sarafino & Smith, 2011) and cognitive psychology (Goldstein & Brockmole, 2017) approaches, positive emotions can be associated with decreasing pain perception. The women in this study who had their husband as a support person seemed relax and secure during labour and childbirth. These positive emotions enabled the women to reduce their perceived pain.

### ***Women's Theme 3: It was Freeing***

The third theme of the women's experience of support during labour and childbirth was 'It was freeing', specifically 'My support person helped me to be free'. The easiest and most rewarding thing in this world is to be ourselves (Buscaglia, 1972). To be ourselves means that our 'inner world' is consistent with our external expression of it. Because no barriers inhibit the process of expressing our 'inner world' to the external expression, we need no energy to express our inner world. That is the reason why it is said to be the easiest thing in this world.

This process is similar to the concept of congruence proposed by Rogers (2004). Congruence means that our experience, awareness, and communications are matching. Rogers (2004) also said that being 'contained' never helps individuals to grow.

Before labour and childbirth, the women in this study might not have been able to express themselves freely. It might be because of believing on Javanese values opposing open expression of themselves or even explicit statements of their expectations. However,

while they experience labour and childbirth, with support from their husband, the one whom they trusted, they did feel free to be themselves at least within the relative privacy of the birthing chamber. The situation might have been different if they had been supported by a person other than their husband whom they 'trusted'. Therefore, the choice of the support person, the husband, during labour and childbirth played a key role in enabling this freedom of expression.

#### ***Women's Theme 4: It was Annoying***

The fourth theme of the women's experience about support during labour and childbirth was 'It was annoying'. This finding informed that having a loved one with them intrapartum was no guarantee of effective support. Interestingly, only one woman felt she was 'not understood' or not optimally supported by her husband.

The data in this theme demonstrate that this woman felt misunderstood by her husband. She was upset by the contradiction between the husband's actual behaviour and his intention about how he expected he would behave during labour (that is, to support the women). The annoyed woman's experience was that the husband seemed to not "turn his mind towards" the woman, but remained focused on himself or the midwives. It meant that the woman who experienced this had no "meaning" to her husband. This awareness that the woman was not meaningful to the husband made the woman feel disappointed.

The woman felt annoyed because the husband's statement of his intended behaviour and his actual behaviour were incongruent. According to Rogers (2004), congruence is one of the general laws of interpersonal relationships. On the basis of the husband's incongruency, the woman might feel that her husband was not trustworthy. However, she needed support from her husband. Because she did not have his support, she felt uncomfortable during labour and childbirth.

#### **During Birth: Husbands' Perception about Their Support to the Women during Labour and Childbirth**

Despite their desires to avoid witnessing the women fighting pain and fears of not being able to do anything to help reduce the pain, most of the husbands in this study had a positive perception of their support during labour and childbirth. As shown in Table 2, the three themes that emerged from the husbands' experiences about support during labour and childbirth were:

- I have a new appreciation for what it takes to give birth,
- I gave my full support,
- I took action to positively end her pain and suffering.

Each of the themes is discussed below.

#### ***Husbands Theme 1: I Have a New Appreciation for What It Takes to Give Birth***

The first theme of the husbands' experience about support during labour and childbirth was 'I have a new appreciation for what it takes to give birth'. The husbands witnessing the childbirth experience for the first time understandably felt anxious and unprepared and had

underestimated the impact this experience would have on them and their understanding of what the birth process involves.

The husbands' anxiety about watching the women struggle with pain and acknowledging the risk of death during labour and childbirth had a positive aspect. As May (1977) stated, "Anxiety has a meaning" (page xiv) and may be the best teacher. In this study the constructive outcome of the husbands' anxiety was evident after labour and childbirth. For example, two changed their plans regarding the number of children they wanted to have. Before commencing their support person role, two husbands had planned to have many children, but after completing their support person role, they were in agreement with their wives' preferences for fewer children and prepared to accept whatever she decided, even if that meant they would be a one-child family.

The husband's anxiety was an enlightenment to them. It changed their point of view and decisions they had made. At the beginning, a husband planned to have many children. However, after seeing how hard his wife struggled to bear their baby, he had a new enlightenment that made him see the world differently. He changed his decision about the number of children that he would have that was totally different to his previous decision.

### ***Husbands' Theme 2: I Gave My Full Support***

Accepting the invitation to serve as a support person demonstrated an "intention" to accompany the women. In an article by May (1965) titled "Intentionality, the heart of human will" stated that intention refers to "meaning" and "toward to". He said that it included human "awareness". Most of the husbands considered the woman they accompanied as precious and meaningful to them. The women were aware that they were also meaningful to the husbands.

In the childbirth room, most husbands showed their unconditional positive regard (Rogers, 2004) by supporting the women to the best of their ability and providing their fullest support. The husbands did whatever was necessary to help the woman get through labour, even "sacrificing" themselves when the woman harmed them in the process. Some of the husbands effectively supported the wives through their difficult time by making no complaints and remaining silent when the women grabbed them, squeezed their lips, pulled their hair or pulled and tore their clothing. They were allowing the women to manage pain by expressing themselves more freely than would be accepted in other circumstances. Others took more active support measures such as praying or providing support through touch, talk, or advocacy. This acceptance made the women feel free as reflected in the theme "My support person helped me to be free".

The husbands "understood" the women and accepted whatever they did during labour and thus provided unconditional positive regard to them as Rogers (1980) said that unconditional positive regard made individuals, in this study, the women, feel accepted and loved unconditionally. The experience of the women in this study is reflected in Yalom's (2002) assertion that "acceptance and support from one who knows you so intimately is enormously affirming" (p. 14).

Awareness that one is loved, accepted, valuable, and meaningful to others enhances self-esteem, which in turn increases the self-confidence about overcoming obstacles

encountered in life even in – or especially in - the moments as challenging as childbirth. It could be theorised that the husbands' acceptance of women's requests and behaviours in labour made the women feel that they were loved, valuable, and meaningful to the support persons. Being part of a special and meaningful experience may have made the husband feel valued and meaningful.

The support that women received made them believe in their ability to give birth. The encouragement the women received from their husband may have enhanced the women's self-efficacy, which in turn facilitated their labour and childbirth. As noted earlier, the encouragement and support provided to the birthing women included verbal and non-verbal components.

### ***Husbands' Theme 3: I Took Action to Try and End Her Pain and Suffering***

The third theme about the husbands' experience is 'I took action to try and end her pain and suffering'. This clearly conveys both that husbands had some insight into the pain suffered by the women and that they were pleased and proud of the actions they were able to undertake as part of their support role.

Despite their earlier expressed anxieties, the husbands were not mere passive witnesses to the birth process. They demonstrated their empathy for the birthing women by their encouraging them to do whatever they felt they needed to do to manage their pain. They also translated midwives remarks about the birth progress into encouraging messages. According to Sarafino and Smith (2011) this action is an instrumental aspect of support.

The support role also included advocating for the women. These efforts were a source of satisfaction even if they were unsuccessful. One husband was pleased to have advocated for his wife to have a caesarean birth to put an end to her pain. His advocacy efforts had, however, overlooked the clinic's accepted practice of only performing caesareans in cases of medical necessity and the midwives advised him that it was already too late to do a caesarean in that case.

The range of activities that the husbands performed did not include sharing music via mobile phones or other devices and could perhaps be broadened to include this possibility. Table 2 shows the cross tabulation about the themes of the women and the husbands about support during labour and childbirth.

Table 2.  
*Cross Tabulation about the Themes of the Women and the Husbands about Support during Labour and Childbirth.*

<b>Woman</b>	I was pleased with the support 1 % <i>(n)</i>	It gave me companionship % <i>(n)</i>	It was freeing % <i>(n)</i>	It was annoying % <i>(n)</i>	<b>Margin husband %<i>(n)</i></b>
<b>Husband</b>					
I had a new appreciation for what it takes to give birth	5.56 (1)	5.56 (1)			<b>11.12 (2)</b>
I gave my full support	33.33 (6)	38.89 (7)	5.56 (1)	5.56 (1)	<b>83.34 (15)</b>
I took action to try and end her pain and suffering	5.56 (1)				<b>5.56 (1)</b>
<b>Margin wife</b>	<b>44.45 (8)</b>	<b>44.45 (8)</b>	<b>5.56 (1)</b>	<b>5.56 (1)</b>	

Note: 1 - having the support person present was positive

**After Birth: Women’s Perceptions about Husband’s Support after Labour and Childbirth**

The women in this study felt meaningful, loved, and enjoyed unconditionally positive regard. It was because the support of their trusted husband in labour, and continued to experience their support in the postnatal period.

**Women’s Theme 1: Being Supported**

The theme in the women’s experience of being supported aligns with previous studies endorsing support during labour (Bohren, Hofmeyr, Sakala, Fukuzawa, & Cuthbert, 2017; WHO, 2015, 2016, 2017) because of its capacity to increase women’s childbirth satisfaction. As discussed earlier, Javanese values.

**Women’s Theme 2: Just Let Husband Know the Childbirth Process**

The second theme of the women’s experience about support during labour and childbirth was ‘Just let husband know the childbirth process’. When asked about their reasons for choosing their husband to accompany them in labour, the women in this study stated that they wanted to let their husbands witness the childbirth process. The women expected that their husbands would understand and appreciate the birth experience more if they observed it directly, and that in turn this would, as Rogers (2004) suggests, diminish any barriers between them as a couple.

## After Birth: Husbands' Perception about Their Support to the Women after Labour and Childbirth

### *Husbands' Theme 1: Fully Support*

Most husbands were pleased that they had tried to provide their fullest support when they accompanied the woman during labour and childbirth. They felt grateful that they could accompany the woman during labour and childbirth. As discussed earlier, it was their commitment that determined the effectiveness of their support.

This finding is similar to the previous study in that the support persons provided full support to the women (Astutik & Sutriyani, 2017; Defiany et al., 2013; Diponegoro & Hastuti, 2009; Johariyah et al., 2014; Kartini, 2011; Lailia & Nisa, 2015; Primasnia et al., 2013). Table 3 shows the cross tabulation about the themes of the women and the husbands about support after labour and childbirth.

Table 3.

*Cross Tabulation about the Themes of the Women and the Husbands about Support after Labour and Childbirth.*

<b>Woman Husband</b>	Glad... calm... relax... being supported %(n)	Just let husband know the childbirth process %(n)	<b>Margin husband</b>
Fully support	88.89 (16)	11.11 (2)	<b>100 (18)</b>
<b>Margin wife</b>	<b>88.89 (16)</b>	<b>11.11 (2)</b>	

### Summary of the quantitative aspect

Even though in Indonesia 68% of the women did not have a support person beside them in the childbirth room (Mahyunidar, 2019), they were glad if they could have one as the findings of this study demonstrated. However, it might be because they have never expected in advance, they did not expect anything (61.12 % I have no idea) or except just support them (27.79 %) (see Table 1). Similar to the women, the husbands also did not know what to do (22.23 % mentioned "I have no idea") even though 66.67 % wanted to fully support, if they could accompany the women during labour and childbirth in the birthing room (see Table 1). In Javanese culture, people are taught to be *nrimo* (accept whatever in this life given by God), *pasrah* (submit to the God's will), *sabar* (patience), hoping *sethithik* (expect a little), and aware of themselves (particularly as *tiyang alit* (unworthy people, people from middle to low social economic status usually perceived themselves as unworthy people) (Endraswara, 2016; Sadli, 1984; Suryadi et al., 2014; Suseno, 1996). Expecting too much detail was seemed too ambitious in Javanese culture. This findings might contrast to the study in UK (Longworth et al., 2011) in which the husbands could describe their expectations during labour and childbirth.

At the moment of childbirth, the women had positive feelings when they were accompanied by their husband (44.45 % was pleased, 44.45 % felt being accompanied).

Even though they did not know what to do, 83.34 % of husbands tried to fully support the women (Table 2).

Similar to the moment of childbirth, in table 3 the women also had positive feelings (88.89 %) after labour and childbirth while 100 % husbands provided full support to the women.

## Discussion

These findings showed that in Indonesia, the women also need to have support during labour and childbirth, particularly from their husband. However, this study also showed that the husband did not know what to do to support the women. Therefore, this study recommended a preparation class, particularly for the husband so that they can prepare themselves much better to support the women. By having enough knowledge and preparation, the husbands would also provide effective support to the women. As a result, the labour and childbirth process would be smoother. This would also help the midwives' work.

This qualitative and quantitative data reflected Indonesian couples' perception of spouse's support during labour and childbirth. Most couples could not express their perception in detail. It might be because of the Javanese values they believed. In Javanese culture, people should accept whatever is given in this life. Expecting too much detail seemed to be too ambitious in this life (Endraswara, 2016; Sadli, 1984; Suryadi et al., 2014; Suseno, 1996). In addition, in Javanese culture, people also tend to hide their emotions to maintain harmony with others. For example: if one feels angry, it is good to not express it rather than hurting others, even they usually express it in the opposite way, with a smile. Because of that, sometimes it is quite difficult for foreigners to understand Javanese people. This might be what happened in this study. Many participants could not express their needs or expectations openly, particularly at the beginning (before). However, the women felt positive about receiving their husband' support during labour and childbirth.

This study is not without limitations. One limit refers to the fact that the qualitative and quantitative coding of the interviews was only done by me. The lack of a second coder hinders the ability to test the interrater agreement and reliability to guarantee no subjective bias. The lack of significance testing of the quantitative data was another limit. For the purpose here, the quantitative data are presented on a descriptive level, also due to the low sample size. Increasing the interviewees would be desirable to carry out statistical tests.

## Conclusions

This study explored the Indonesian couples' perception of spouse's support during labour and childbirth. Even though initially they could not express their expectations or imagination because of Javanese values they had, the women felt positive experiences receiving their husband's full support during labour and childbirth. Based on the understanding of the women's needs of support, this study allows us to derive some recommendations.

## Recommendations

1. Promoting the husband's support during labour and childbirth to Indonesian women in Indonesia and other countries with similar cultures or maternity practices in order to show the importance of husbands' role during labour and childbirth to support the women.
2. Working with the Indonesian Ministry of Health to provide information about the importance of husband's support during labour and childbirth through programs, community service announcements, advertisements, and posters at local health care centres, newspapers, television, radio and social media.
3. Preparing prenatal class for the husbands so they will have enough knowledge and preparation in order to support the women more effectively.

## References

- Admin (2021, September 11). *Javanese Life Philosophy*. Bead Daily <https://beadgrup.com/news/filosofi-hidup-orang-jawa/>
- Astutik, V. Y., & Sutriyani, T. (2017). Hubungan senam hamil, dukungan suami dan dukungan bidan dengan tingkat kecemasan ibu menjelang persalinan di BPS Ny. Hj. M. Indriyati [The relationship among pregnancy gymnastic, husband support, midwife support and the level of anxiety of women prior to childbirth at the Private Practice Midwife Mrs. Hj. M. Indriyati]. *Jurnal Care*, 5(1), 140-147.
- Batbual, B. (2014). *Pengaruh hypnobirthing terhadap kejadian asfiksia bayi baru lahir di RSUD Prof. Dr. W.Z. Johannes Kupang tahun 2013* [The influence of hypnobirthing on the newborn asfixia at Prof. Dr. W.Z. Johannes Public Hospital Kupang in 2013]. [Paper presented]. The Pertemuan Ilmiah Tahunan Bidan Tahun 2014 [The Indonesian Midwives Association Annual Scientific Meeting 2014], Bekasi, Indonesia.
- Bingel, U., Wanigasekera, V., Wiech, K., Mhuirheartaigh, R. N., Lee, M. C., Ploner, M., & Tracey, I. (2011). The effect of treatment expectation on drug efficacy: Imaging the analgesic benefit of the opioid remifentanyl. *Science Translational Medicine*, 3(70), 1-9. <https://doi.org/10.1126/scitranslmed.3001244>
- Blot, P. D. (1992). *Analisis Transaksional*. Jakarta: Gramedia pustaka utama.
- Bohren, M. A., Hofmeyr, G. J., Sakala, C., Fukuzawa, R. K., & Cuthbert, A. (2017). Continuous support for women during childbirth (Review). *Cochrane Database of Systematic Review* (7). <https://doi.org/10.1002/14651858.cd003766.pub6>
- Buscaglia, L. F. (1972). *Love*. C. B. Slack.
- Clandinin, D. J., & Connelly, F. M. (2000). Narrative inquiry: Experience and story in qualitative research. *Jossey-Bass A Wiley Company*.
- Creswell, J. W. (2015). *Educational research: Planning, conducting, and evaluating quantitative and qualitative research* (5th ed.). Pearson Australia.
- Defiany, Sumarni, Febriarni, H., Fatonah, Y., & Erlyta, N. N. (2013). Pendamping persalinan sebagai pengurang rasa nyeri saat bersalin di RS Margono Soekardjo Purwokerto



- [The childbirth companion as a pain reduction during childbirth at Margono Soekardjo Hospital Purwokerto]. *Bidan Prada : Jurnal Ilmiah Kebidanan*, 4(1), 190-198.
- Denzin, N. K., & Lincoln, Y. S. (Eds.). (2018). *The Sage handbook of qualitative research*. Sage.
- Diponegoro, A. M., & Hastuti, S. F. B. (2009). Pengaruh dukungan suami terhadap lama persalinan kala II pada ibu primipara [The influence of husband support on the duration of stage II of labour on primipara women]. *Humanitas*, VI(2), 123-135.
- Dlugosz, S. (2013). *Fathers at birth: Women's experiences of their partner's presence during childbirth*. [Undergraduate Thesis, Edith Cowan University]. Perth.
- Endraswara, S. (2016). *Berpikir Positif Orang Jawa*. Yogyakarta: Narasi.
- Goldstein, E. B., & Brockmole, J. R. (2017). *Sensation and perception* (10<sup>th</sup> ed.). Cengage Learning.
- Handelzalts, J. E., Becker, G., Ahren, M.-P., Lurie, S., Raz, N., Tamir, Z., & Sadan, O. (2015). Personality, fear of childbirth and birth outcomes in nulliparous women. *Archives of Gynecology and Obstetrics*, 291, 1055–1062. <https://doi.org/10.1007/s00404-014-3532-x>
- Johariyah, Sohimah, & Lestari, Y. A. (2014). Perbedaan pengaruh pendamping persalinan terhadap lama kala II persalinan pada ibu primigravida [The influence of support person on the duration of stage II of primigravida mothers]. *Jurnal Kesehatan Al-Irsyad (JKA)*, V(1), 24-34.
- Kartini, T. (2011). *Pengaruh Pendampingan Suami terhadap Kualitas Kontraksi Uterus pada Primigravida Kala I Fase Aktif Persalinan Fisiologis di Ruang Bersalin RS. Siti Khodijah Sepanjang* [The Influence of husband companion on the quality of uterus contraction on primigravida active phase of stage I of physiological labour at the childbirth room of Siti Khodijah Hospital Sepanjang]. [Undergraduate thesis, Universitas Muhammadiyah Surabaya] Surabaya.
- Kasdu, D. (2007). *Solusi Problem Persalinan*. Jakarta: Puspa Swara.
- Kementrian Kesehatan Republik Indonesia. (2013). *Pelayanan Kesehatan Ibu di Fasilitas Kesehatan Dasar dan Rujukan* [The mother health service at the basic and recommendation health facilities]. Jakarta: Kementrian Kesehatan Republik Indonesia.
- Lailia, I. N., & Nisa, F. (2015). Pendampingan suami terhadap kelancaran proses persalinan di BPM Arifin S Surabaya [The husband companion on the smoothness of childbirth process at the Independent Practice Midwife Arifin S Surabaya]. *Jurnal Ilmiah Kesehatan*, 8(1), 22-28.
- Longworth, H. L., Kingdon, C. K., & Cert, P. (2011). Fathers in the birth room: What are they expecting and experiencing? A phenomenological study. *Midwifery*, 27(5), 588-594. <https://doi.org/10.1016/j.midw.2010.06.013>
- Lowe, N. K. (2000). Self-efficacy for labor and childbirth fears in nulliparous pregnant women. *Journal of Psychosomatic Obstetrics & Gynecology*, 21, 219-224. <https://doi.org/10.3109/01674820009085591>
- Magfuroh, A. (2012). *Faktor-faktor yang berhubungan dengan nyeri persalinan kala I fase aktif di ruang bersalin Rumah Sakit Umum Kabupaten Tangerang* [Factors associated

- with pain labor active phase stage I in General Hospital District of Tangerang ]* [Undergraduate thesis, Universitas Islam Negeri Syarif Hidayatullah]. Jakarta.
- Mahyunidar. (2019). Hubungan Pendamping Suami Terhadap Kelancaran Proses Persalinan Pada Ibu Primigravida Di Klinik Murniati Kisaran Tahun 2018. *Excellent Midwifery Journal*, 2(2), 41-46.
- Matinnia, N., Faisal, I., Juni, M. H., Herjar, A. R., Moeini, B., & Osman, Z. J. (2015). Fears related to pregnancy and childbirth among primigravidae who requested Caesarean versus vaginal delivery in Iran. *Maternal and Child Health Journal*, 19(5), 1121–1130. <https://doi.org/10.1007/s10995-014-1610-0>
- May, R. (1965). Intentionality, the heart of human will. *Journal of Humanistic Psychology*, 5(2), 202-209. <https://doi.org/10.1177/002216786500500209>
- May, R. (1969). The emergence of existential psychology. In R. May (Ed.), *Existential psychology* (2nd ed., pp. 1-48). McGraw-Hill.
- May, R. (1977). *The meaning of anxiety* (Revised ed.). Norton.
- Naftali, A. R., Ranimpi, Y. Y., & Anwar, M. A. (2017). Kesehatan spiritual dan kesiapan lansia dalam menghadapi kematian. *Buletin Psikologi*, 25(2), 124-135.
- Natalia, J., & Pramadi, A. (2007). “*Andaikan Aku Harus Meninggal Malam ini ...*” : Sebuah Studi Refleksi tentang Eksistensi Manusia (If I Must Die Tonight ...” : A Reflective Study about Human Existence). [Paper presented]. Seminar Nasional Psikologi, Indonesia, Salatiga.
- Ogden, J. (2007). *Health psychology: A textbook* (4<sup>th</sup> ed.). McGraw-Hill Open University Press.
- Prawitasari, J. E. (1995). Mengenal emosi melalui komunikasi nonverbal. *Buletin Psikologi*, 3(1), 27-43.
- Primasnia, P., Wagiyono, & Elisa. (2013). *Hubungan pendampingan suami dengan tingkat kecemasan ibu primigravida dalam menghadapi proses persalinan kala I di rumah bersalin kota Ungaran [The relationship between husband companion and the level of anxiety on primigravida women during stage I labour at the maternity centre in Ungaran]*. [Paper presented] . Konferensi Nasional PPNI, Jawa Tengah.
- Rahmy, C. (2013). *Hubungan tingkat kecemasan dengan kelancaran proses persalinan ibu primigravida di Rumah Sakit Ibu dan Anak Banda Aceh tahun 2013 [The relationship between the level of anxiety and the smoothness of childbirth process on primigravida women at the maternal and child hospital Banda Aceh in 2013]*. (Diploma III), Sekolah Tinggi Ilmu Kesehatan U'Budiyah, Banda Aceh.
- Rogers, C. R. (1980). *A Way Of Being*. Houghton Mifflin.
- Rogers, C. R. (2004). *On becoming a person: A therapist's view of psychotherapy*. Constable.
- Ryding, E. L., Lukasse, M., Parys, A.-S. V., Wangeli, A.-M., Karro, H., Kristjansdottir, H., Schei, B. (2015). Fear of childbirth and risk of Cesarean delivery: A cohort study in six European countries. *Birth*, 42(1), 48 - 55. <https://doi.org/10.1111/birt.12147>
- Sadli, S. (1984). Kepribadian wanita Jawa [Javanese woman personality]. In M. A. W. Brouwer, J. S. Nimpoeno, F. Bastaman, S. Sadli, M. Sidharta, H. H. B. S. D. Twhat

- are these initials?. Pariaman & W. Parthiana (Eds.), *Kepribadian dan perubahannya [Personality and its change]*. Jakarta: Penerbit PT Gramedia.
- Sarafino, E. P., & Smith, T. W. (2011). *Health psychology : Biopsychosocial interactions* (7<sup>th</sup> ed.). Hoboken, NJ: Wiley.
- Schetter, C. D., & Tanner, L. (2012). Anxiety, depression and stress in pregnancy: implications for mothers, children, research, and practice. *Current Opinion in Psychiatry*, 25(2), 141-148. <https://doi.org/10.1097/ycp.0b013e3283503680>
- Sektiawan, H. (2010). *Gambaran Tingkat Kecemasan Suami ketika Menunggu Istri Melahirkan dengan Tindakan Vacum di Balai Pengobatan dan Rumah Bersalin PKU Muhammadiyah Kartasura [The Description about the Level of Anxiety of Husbands during Waiting for Their Wives Giving Birth with Vacuum at PKU Muhammadiyah Health and Maternity Centre Kartasura]*. [Undergraduate thesis]. Universitas Muhammadiyah Surakarta, Surakarta.
- Stiarti, D. (2011). *Hubungan dukungan suami dengan tingkat kecemasan ibu hamil primigravida trimester 3 di RSUD Temanggung [The relationship between husband support and the level of anxiety of 3rd trimester primigravida women at the Public Hospital in Temanggung]* [Undergraduate thesis]. Sekolah Tinggi Ilmu Kesehatan 'Aisyiyah, Yogyakarta.
- Suryadi, M., Subroto, H. D. E., & Marmanto, S. (2014). The use of Krama Inggil (Javanese Language) in family domain at Semarang and Pekalongan cities. *International Journal of Linguistics*, 6(3), 243-256. <https://doi.org/10.5296/ijl.v6i3.4553>
- Suseno, F. M. (1996). *Etika Jawa: Sebuah Analisa Falsafati tentang Kebijakanan Hidup Jawa*. Jakarta: Penerbit PT Gramedia Pustaka Utama.
- WHO. (2015). *WHO recommendations on health promotion interventions for maternal and newborn health 2015* Retrieved from [http://apps.who.int/iris/bitstream/handle/10665/172427/9789241508742\\_report\\_eng.pdf;jsessionid=82913A5FDC0B5829679C13DA37B2A49D?sequence=1](http://apps.who.int/iris/bitstream/handle/10665/172427/9789241508742_report_eng.pdf;jsessionid=82913A5FDC0B5829679C13DA37B2A49D?sequence=1)
- WHO. (2016). Companion of choice during labour and childbirth for improved quality of care. Retrieved 7 June, 2018, from <http://apps.who.int/iris/bitstream/handle/10665/250274/WHO-RHR-16.10-eng.pdf;jsessionid=979C4413F0CFA137AA35B1FB9781A233?sequence=1>
- WHO. (2017, 11 July 2017). Continuous support during childbirth may improve health outcomes for women and infants. Retrieved 7 June 2018, from [http://www.who.int/reproductivehealth/topics/maternal\\_perinatal/support-during-childbirth/en/](http://www.who.int/reproductivehealth/topics/maternal_perinatal/support-during-childbirth/en/) not sure if these 3 WHO articles are formatted correctly since I'm not sure how to cite PDFs
- Yalom, I. D. (2002). *The gift of therapy : reflections on being a therapist*. Piatkus.