

# THE EFFECTIVENESS OF HEALTH PROMOTION USING AUDIOVISUAL MEDIA ON THE KNOWLEDGE LEVEL OF POSTPARTUM MOTHERS ABOUT POSTPARTUM BLUES AT RS. ROMANI SEMARANG

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**ABSTRACT:** From a psychological perspective, there are moments when a postpartum mother experiences feelings of sadness related to her baby; this condition is known as postpartum blues or baby blues. The incidence rate of postpartum blues in Indonesia ranges between 50-70% of postpartum women, while in Central Java Province in 2021, 30% experienced mild postpartum depression and 6.7% experienced moderate postpartum depression. Research findings indicate a low level of knowledge among postpartum mothers regarding postpartum psychological disorders, particularly postpartum blues. This condition is attributed to inadequate and incomplete information about postpartum blues received by many mothers. Therefore, one strategy to enhance mothers' knowledge and understanding of postpartum blues during the postpartum period is through health promotion activities. Understanding the effectiveness of health promotion using video media on the knowledge level of postpartum mothers about postpartum blues at RS. Roemani Semarang. Pre-experimental research design using a one-group pre-post and post-test design, conducted from December 2023 to January 2024 with a sample size of 43 respondents. Nonprobability sampling technique using purposive sampling. The average knowledge score before health promotion was 63.6628, and after health promotion, the average knowledge score improved to 88.3721, indicating an improvement in knowledge about postpartum blues after health promotion using video media. There is an effect of health promotion using audio-visual media on the knowledge level of postpartum mothers about postpartum blues at Roemani Hospital Semarang, as shown by the Wilcoxon test result with a p-value < 0.005.

**Keywords:** health promotion; postpartum blues; postpartum mother; promotion using audiovisual

## INTRODUCTION

The period after giving birth is special in the life of a mother and baby. Women experience a significant transformation throughout their lives, namely turning into mothers. This process includes emotional changes, physical changes, family dynamics, and adjustment to the new role as a mother. (Handayani & Supliyani, 2021). Pregnancy, childbirth, and the postpartum period require support from various parties, especially the husband and family. Mothers will notice several changes in their bodies and emotions during the postpartum period. Some women need some adjustments in facing new activities and roles as mothers in the first weeks after giving birth, both physically and psychologically. The psychological changes experienced by a woman during the postpartum period, if not responded to wisely, will cause various impacts, namely feeling sad, irritated, tired, angry, and hopeless and these are the feelings that make a mother reluctant to take care of her baby, which researchers call postpartum blues. (Ernawati<sup>1</sup> et al., 2020)

In the postpartum period, psychological changes also occur due to the physical changes that occur, which is normal. If the mother can understand and adapt to several changes, both physical and psychological, then the mother will not experience fear, worry, or anxiety. On the other hand, when a new mother is too afraid, worried, and anxious about the changes that occur within herself, the mother can experience psychological disorders. (Susilawati et al., 2020). Other effects caused by fear of pregnancy and childbirth, pain during childbirth, and fatigue due to lack of sleep during childbirth, anxiety about being unable to care for the baby, if not treated will become a more serious disorder, namely postpartum depression. (Purwarini & Armaya, 2021).

Postpartum blues occurs when a person experiences difficulty in adjusting to lifestyle changes caused by pregnancy, the birth process, and the postpartum period. (Liani et al., 2022). Postpartum blues is included in the category of mild psychological disorders. Without proper treatment, this condition can develop into more serious psychological disorders, such as moderate to severe postpartum depression and postpartum psychosis. Usually, this condition occurs between the third and tenth days after giving birth, often after the patient has left the hospital. (Harianis & Sari, 2022). Postpartum Blues, also known as maternity blues or new mother's syndrome, can be identified as a psychological disorder with mild effects and appears in the first week after delivery. Women who are pregnant and about to give birth need to have stable psychological conditions to help them with their birth. Labor. On the other hand, feelings of anxiety, fear, tension, and worry will cause stress to the mother who is about to give birth so that the birth process does not go smoothly. Psychological conditions such as anxiety and stress can continue in the mother after giving birth, which is a form

of developing fear reactions that are felt from pregnancy until delivery. Postpartum stress tends to be experienced by most first-time mothers. This stressful condition shows that some new mothers experience emotional changes, namely sometimes feeling happy and at almost the same time feeling sad without feeling sad. Conditions that influence the emergence of maternal stress after giving birth are maternal dependency due to physical weakness after giving birth, low self-esteem due to fatigue, minimal family support, and tension due to new roles. Referring to the explanation above regarding the factors that influence stress levels in mothers after giving birth, it can be concluded that maternal maturity and readiness are the main factors so that mothers do not experience stress that continues to lead to baby blues syndrome. Mothers who have maturity and readiness will be successful in dealing with stress after giving birth, whereas mothers who lack knowledge about childbirth and lack preparation will not be able to handle stress. At that time, it is very necessary to implement effective coping. Mothers who experience stress tend to experience difficulties in adjusting because they are experiencing an imbalance within themselves so to balance and adjust themselves, coping behavior is needed. Most postpartum mothers in Indonesia do not realize that they are experiencing postpartum blues and the community itself still considers that the symptoms that appear in new mothers are normal. People assume that what a new mother feels is a mother's instinct because she has just had a baby and a feeling of wanting to always be near her baby. Apart from that, there has been no official survey from the government regarding postpartum blues in mothers after giving birth (Ningrum, 2017).

World Health Organization (2020) presents data showing that around 10% of pregnant women and 15% of postpartum women experience mental health problems, especially in the form of depression. In developing countries, this incidence reaches 15.6% during pregnancy and increases to 19.8% after delivery. (Setyaningrum et al., 2023). In Asia, the incidence of postpartum blues is quite high, ranging from 26% to 85%. In Indonesia, the prevalence of postpartum blues is estimated to reach between 50% and 70% of women after giving birth. (Ernawati, 2020). In 2021, in Central Java Province, around 30% of women after giving birth experienced mild postpartum depression, while 6.7% experienced moderate postpartum depression. This incident is more likely to occur in the age range of less than 20 years and more than 35 years at birth. (Saputri et al., 2023). Results of research conducted by (Khasanah et al., 2022) In Semarang City, it was found that 44% of mothers who did not receive support from their husbands experienced postpartum blues, while 56% of mothers who received support from their husbands did not experience this condition.

When conducting a preliminary study with the head of the Ayyub 1 room at Roemani Muhammadiyah Hospital Semarang, researchers obtained data on mothers who gave birth (postpartum) during November 2023, there were 171 patients. The results of an interview with one of the midwives at Roemani Hospital Semarang showed that there were patients who experienced postpartum blues. The patient said that he felt anxious when he saw his baby because the breast milk had not yet come out, the patient felt afraid that the baby would lack nutrition and nutrients, the patient said he thought about it so much that it made the patient stressed, had no appetite, couldn't sleep, cried often and had a bad mood. Not calm. These signs indicate that the mother is experiencing Postpartum Blues.

Postpartum Blues can occur in all mothers after giving birth regardless of ethnicity or race. Whether mothers who are giving birth for the first time (primiparous) or those who have given birth more than once (multiparous), everyone can experience baby blues with different stressors. However, mothers who are experiencing their first birth tend to experience postpartum blues more often, because in the phase after giving birth, primiparous mothers are in the adaptation stage. Pregnancy and childbirth are processes of transition and identity as women. Women need to adapt to changes within themselves during pregnancy and childbirth. This is because at every stage of pregnancy and up to delivery the mother will experience physical and psychological changes so she needs to adjust to these conditions. Self-adjustment is a process that includes mental and behavioral responses, which is an individual's effort to successfully deal with internal needs, tension, frustration, and conflicts and produces a quality of harmony between the demands from within the individual and the demands of the outside world or the environment in which the individual lives. Is at. After the baby is born, the mother who previously only thought about herself must adapt to her new role. If the mother does not understand her role well, it can confuse, her while the baby still needs care. Psychological adaptation in postpartum mothers begins when a mother begins to care for and take care of her baby. This is a new role and responsibility for every woman after giving birth. In this phase, the mother becomes more sensitive to everything, especially those related to herself and her baby. Psychological changes have a very significant role. During this period, mothers tend to be passive and dependent on others. She simply followed the advice, felt uncertain, and made decisions with a focus on meeting her own needs, with the enthusiasm to talk about her birth experience. These new roles and responsibilities often make mothers feel insecure and stressed. The mother feels sad and hopeless because she has not been able to care for the baby well. This condition makes the mother more sensitive. In addition, mothers who give birth by action tend to face a greater risk of complications compared to mothers who give birth naturally. Giving birth with complications, such as

difficulty in coming out for the baby can cause physical trauma for the mother and baby, or experiencing a birth where the baby's condition is not optimal, can cause a traumatic experience. The level of psychological trauma tends to increase along with the level of physical trauma experienced during the birthing process. The experience of giving birth has an important role in the occurrence of postpartum blues (Marwiyah et al., 2022). If we look at the presentation of the incidence of postpartum blues, delivery by cesarean section is much higher because almost all mothers who give birth by cesarean section experience postpartum blues. Symptoms of postpartum blues are triggered by the process of giving birth by cesarean section because it causes financial burdens, the birth process has not been thought about before, surgical wounds leave scars, feelings of not being able to truly be a woman, disruption of daily activities due to surgical wounds. The psychological effects of cesarean delivery are not much different from normal delivery. However, it is the physical complications caused by cesarean delivery that often cause problems. The effects of a cesarean section that require a longer recovery range from limping to walking, to pain when laughing or coughing due to the stitching wound not yet drying out. This often makes mothers feel helpless, and miserable and regret the birth process that has been carried out (Ernawati<sup>1</sup> et al., 2020).

Not understanding postpartum blues can make it difficult for mothers to overcome this condition. If not treated immediately, postpartum blues can hurt the quality of the relationship between mother and baby, child development, harmony in marriage, and relationships with all family members, including other family members (Suardani et al., 2023). Postpartum blues will cause the mother who experiences it to feel uncomfortable. If the symptoms of postpartum blues persist and are not treated quickly, it will turn into postpartum depression or psychosis by showing dangerous symptoms such as hurting herself and her baby. It can also have an impact on the lactation process. When the mother is stressed, she will release the hormones adrenaline and cortisol which will inhibit the release of the hormones prolactin and oxytocin it will affect the production and release of breast milk (ASI). Apart from affecting breast milk, it can also affect the mother's relationship with her husband. So women after giving birth need to receive social support. The form of social support expected by primiparous postpartum mothers can come from husbands, family, friends, neighbors, and health workers because their physical and psychological conditions become weak. The mother's psychological well-being will increase with good social support. Social support can be in the form of emotional support, instrumental support, and appreciation support. The form of emotional social support given to the mother is showing care and attention by accompanying the mother during childbirth and comforting her when she is sad/crying so that the mother's self-esteem increases and

the mother feels comfortable, this form of instrumental support helps the mother in caring for and nurturing baby, helping with household work or meeting the mother's needs, a form of appreciation support, namely giving praise or appreciating the mother's efforts in caring for the baby and taking care of household work, so that the mother becomes more enthusiastic in carrying out her new role as a mother and the mother feels that she is meaningful/valuable (Astri et al., 2020).

The government is taking steps to reduce maternal and infant mortality rates by providing health services that involve all stages (continuum of care). Continuum of care or CoC pays attention to the quality of care over time. It is a process in which patients and healthcare professionals engage cooperatively in ongoing healthcare for the common goal of high-quality, cost-effective healthcare. Successful implementation of programs to improve the continuum of care depends on a better understanding of where gaps in seeking care exist along the pathway and what factors contribute to them. Continuum of care focuses on pregnancy, childbirth, and postpartum to prevent maternal and newborn deaths. The goal is to give women the reproductive health care they need before, during, and after pregnancy and childbirth and to enable newborn babies to grow into healthy children. Emphasis is placed on a unified integrated approach for mothers and newborns and the role of primary care facilities, outpatient and community-based care, or home care throughout the life cycle. (Utami, 2020). In implementing this program, cooperation from all parties involved is very important. The continuum of care program is intended to enable mothers who are in the postpartum period to be closer and interact with health workers throughout pregnancy, delivery, and the postpartum period. By assisting postpartum mothers, it is hoped that it can improve the monitoring of maternal and baby health, as well as reduce the incidence of postpartum blues in postpartum mothers. (Taufiqoh et al., 2021).

Preventive steps that can be taken by midwives as educators to prevent postpartum blues in postpartum mothers is to provide counseling. Counseling education by health workers is very important to prevent postpartum depression. Midwives as women's partners throughout their life cycle have the main role of early detection of psychological disorders and helping or providing education and counseling (support person) to clients, families, and the community. The parenting counseling carried out is to provide knowledge about matters related to preparation for facing the role as a parent and solutions to problem-solving. The knowledge gained will form a person's understanding of himself with all his abilities, including his thoughts, desires, and feelings. The importance of providing this counseling is for postpartum mothers so that they can pay more attention to their condition, namely checking their condition by regularly attending posyandu. The incidence of

post-partum blues in postpartum mothers is a predictor of the possibility of post-partum depression in the months after giving birth. This makes it possible for health workers, especially nurses and midwives, together with mothers and families to discuss alternative actions to prevent postpartum depression (Sudarto et al., 2022). This action aims to increase understanding and at the same time reduce the possibility of postpartum blues after giving birth (Syahida et al., 2020). One of the counseling methods that can be provided to increase postpartum mothers' knowledge regarding postpartum blues is prevention efforts with health education (Suardani et al., 2023). Health education or health promotion involves collaboration in the learning process to improve health, which is implemented through increasing understanding and forming positive attitudes in individuals (Farlikhatun & Holilah, 2023). Health promotion is not just a method of disseminating and increasing public awareness of health-related information, it is also an effort that has the potential to build bridges. Changes to the way people act in different contexts, including at work and home. The physical and non-physical, social and cultural, economic, and political environments are expected to change as a result of health promotion initiatives. Environmental change can be facilitated through health promotion initiatives that include educational, organizational, policy, legal, and regulatory support (Kenre, 2022).

After giving birth, women need social support from various sources, including husbands, extended family, and friends. This is because the people around the mother can also be a stress factor. Social support from the family has an important role in helping pregnant women maintain their emotional balance and prevent stress. Not all pregnant women are lucky enough to get love and support from their families and partners. Social problems, such as disputes with partners or family members, low socio-economic position, and ignorance of information can cause stress itself. Apart from that, the existence of prohibitions that come from people around pregnant women, in the form of certain myths, can create discomfort and make pregnant women feel like they are the target of these mythical perceptions, which then have an impact on their feelings. After giving birth, mothers need information about how to care for their babies at home, how to care for themselves after giving birth, and other information, especially primiparous mothers so that mothers can adapt to the physical and psychological changes that occur so mothers need informational support, this support can be obtained from family, health workers friend or neighbor.

Based on the description above, researchers are interested in carrying out research on postpartum blues with the title "Effectiveness of Health Promotion Using Audio Visual Media About

Postpartum Blues on the Level of Knowledge of Postpartum Mothers at Roemani Hospital Semarang".

## METHOD

This research is a type of quantitative research, which uses the pre-experimental design method with a one-group pretest post-test approach. The population in this study was taken from all postpartum maternal patients in Ayyub Room 1, Roemani Muhammadiyah Hospital, Semarang, totaling 171 respondents. Non-probability sampling technique using purposive sampling. The samples in this study were taken from postpartum patients in Ayyub Room 1, Roemani Muhammadiyah Hospital, Semarang, who met the researchers' inclusion and exclusion criteria, totaling 43 respondents. The data analysis carried out was univariate and bivariate. Bivariate analysis was carried out by conducting a data normality test using the Shapiro-Wilk test because the number of samples was less than 50. The results of the Shapiro-Wilk test stated that the data was not normally distributed as evidenced by a p-value < 0.005. So to determine the effectiveness of health education about Postpartum blues using a non-parametric test with This type of Wilcoxon test is used on 2 groups of paired subjects with an ordinal/interval scale.

## RESULTS

The results of this research are explained in the form of tables and narratives based on the results of respondent characteristics, the results of univariate analysis, and bivariate analysis.

### Respondent Characteristics

The characteristics of respondents who were given health education in terms of age, parity, education, and occupation are as follows:

#### a. Age

**Table 1** Distribution of respondent characteristics based on the age of postpartum mothers in Ayub Room 1, Roemani Muhammadiyah Hospital, Semarang, December 2023 – January 2024

Age	Frequency	Percentage %
< 20 years	1	2.3

20 – 35 years	35	81.4
> 35 years	7	16.3
<b>Total</b>	<b>43</b>	<b>100.0</b>

b. Parity

**Table 2.** Distribution of respondent characteristics based on parity of postpartum mothers in Ayub Room 1, Roemani Muhammadiyah Hospital, Semarang, December 2023 – January 2024

<b>Parity</b>	<b>Frequency</b>	<b>Percentage %</b>
Primipara	16	37.2
Multipara	26	60.5
Grandemultipara	1	2.3
<b>Total</b>	<b>43</b>	<b>100.0</b>

c. Education

**Table 3.** Distribution of respondent characteristics based on the education of postpartum mothers in Ayub Room 1, Roemani Muhammadiyah Hospital, Semarang, December 2023 – January 2024 (n=43)

<b>Education</b>	<b>Frequency</b>	<b>Percentage %</b>
Elementary School	3	7.0
Junior High School	6	14.0
Senior High School	21	48.8
University	13	30.2
<b>Total</b>	<b>43</b>	<b>100.0</b>

d. Work

**Table 4.** Distribution of respondent characteristics based on work of postpartum mothers in Ayub Room 1, Roemani Muhammadiyah Hospital, Semarang, December 2023 – January 2024

<b>Work</b>	<b>Frequency</b>	<b>Percentage %</b>
Qhouse Wife	27	62.8
Private employee	11	25.6

Government employees	5	11.6
Total	43	100.0

## Univariate Analysis

### a. Distribution of Knowledge Levels Before Health Promotion About Postpartum Blues

Table 5. Distribution of knowledge level before health promotion was given to postpartum mothers in Ayub Room 1, Roemani Muhammadiyah Hospital, Semarang, December 2023 – January 2024

Knowledge Category	F	%
Not enough	8	18.6
Enough	26	60.5
Good	9	20.9
Total	43	100.0

Data Group	Min	Max	Mean	Sd
Before Video	43.75	81.25	63.6628	11.43172

### b. Distribution of Knowledge Levels After Health Promotion About Postpartum Blues

Table 6. Distribution of knowledge level after being given health promotion to postpartum mothers in Ayub Room 1, Roemani Muhammadiyah Hospital, Semarang, December 2023 – January 2024

Knowledge Category	F	%
Not enough	0	0
Enough	6	14.0
Good	37	86.0
Total	43	100.0

Data Group	Min	Max	Mean	Sd
After Video	62.50	100.00	88.3721	9.98337

### Bivariate Analysis

#### a. The Effectiveness of Health Promotion Using Audio Visual Media on the Level of Knowledge of Postpartum Mothers About Postpartum Blues at Roemani Hospital Semarang

Table 8. Results of the Wilcoxon Signed Rank test value of the effectiveness of health promotion using audio-visual media on the level of knowledge of postpartum mothers about postpartum blues in Ayyub Room 1 of Roemani Muhammadiyah Hospital Semarang in December 2023 - January 2024

	N	Mean Rank	Sum of Ranks	ofZ	P-value
Posttest knowledge	–Negative Ranks 0 <sup>a</sup>	.00	.00	-5.735 <sup>b</sup>	0.000
Pretest knowledge	Positive Ranks 43 <sup>b</sup>	22.00	946.00		
	Ties 0 <sup>c</sup>				
	Total 43				

## DISCUSSION

### Respondent Characteristics

The characteristics of respondents in the study include age, education parity, and employment.

Based on the results of Table 4.1, the distribution of respondents based on age is as follows, namely, of the 43 people, there is 1 respondent aged  $\leq 20$  years (2.3%),

35 people aged 20-35 years (81.4%) and  $\geq 35$  years old as many as 7 people (16.3%).

Based on the results of Table 4.2, the distribution of respondents based on parity is as follows, namely, out of 43 people, respondents indicated that the total number of primiparous postpartum mothers was 16 people (37.2%), the number of multiparas was 26 people (60.5%) and the number of grand multiparas was 1 person (2.3%).

Based on Table 4.3, the distribution of respondents based on education is as follows, of the 43 respondents, there are 3 postpartum mothers with elementary school education (7%), 6 people with junior high school education (14%), 21 people with high school education (48.8%) and 21 people with higher education. 13 people (30.2%). In this study, the majority of respondents had a high school education, namely 21 people.

Based on Table 4.4, the distribution of respondents based on education is as follows, of the 43 respondents, there are 27 postpartum mothers as housewives (62.8%), 11 postpartum mothers who work in the private sector (25.6%), and 5 people who work as ASN. (11.6%). Based on research results, the majority of respondents are housewives or do not work.

### **Postpartum Mothers' Knowledge Before Being Given Health Promotion About Postpartum Blues**

The research results in Table 4.5 illustrate the level of knowledge of respondents before health promotion was carried out. Of the total number of respondents, 8 people (18.6%) had a low level of knowledge, 26 people (60.5%) had a sufficient level of knowledge, and 9 people (20.9%) had a good level of knowledge. With a minimum value of 43.73, a max value of 81.25, a mean value of 63.6628, and a standard deviation value of 11.43172. It can be concluded that the majority of respondents have a level of knowledge that can be categorized as sufficient, some even have insufficient knowledge. The low knowledge of some respondents could be caused by a lack of health promotion regarding postpartum blues. Although some respondents had received information from health workers, such as village midwives, when providing counseling, this information was not as clear as compared to special health promotion that specifically discussed postpartum blues. Media selection is one of the key factors in communicating information to the public. Media has a significant impact on the formation of individual opinions and beliefs so appropriate media selection can influence the mother's level of knowledge during childbirth. The respondents' inadequate level of knowledge can be seen from the pre-test results, where many of them did not answer correctly. Based on research

findings, several respondents' answers still contained errors, especially in answering questions about the causes and signs of postpartum blues.

Research result (Syahida et al., 2020) Explaining that the majority of respondents, namely 29 people (64.4%), had a level of knowledge that was classified as lacking before receiving health promotion. This research is in line with research from (hidayat fahrul, 2023) Based on the research results, before receiving health education regarding postpartum blues, the majority of respondents, namely 53 people (96.4%), had an insufficient level of knowledge.

A person can gain knowledge from various sources of information. Information is the result of a learning process, experience, or guidance, and can be found in everyday life through the surrounding environment, such as family, relatives, or other media. (hidayat fahrul, 2023).

### **Postpartum Mothers' Knowledge After Being Given Health Promotion About Postpartum Blues**

The research results in Table 4.6 illustrate the level of knowledge after health promotion was carried out. Respondents with a poor level of knowledge were 0 (0%), respondents with a sufficient level of knowledge were 6 people (14%) and respondents with a good level of knowledge were 37 people (86%). With a minimum value of 62.50, a max value of 100.00, a mean value of 88.3721, and a standard deviation value of 9.98337. It can be concluded that there was an increase in the level of knowledge for the majority of respondents after receiving health promotion regarding postpartum blues. The level of knowledge was categorized as good by 37 people (86%), and there were no longer any respondents with poor knowledge.

Knowledge is an impression formed in the human mind as a result of the use of the five senses. Education influences most information, and health-related information can influence behavior through medium-term effects such as emotional reactions or belief in the correctness of a chosen object. If someone has limited experience with an object, the influence of other people who are considered important in social life will have a significant impact on forming attitudes. (Ria Marsalena, 2021).

The results of this research are in line with research from Syahida et al (2020) who explained that after receiving health promotion, the majority of respondents showed a positive increase in knowledge, reaching 32 people (71.1%). If you look at the average score on the pre-test, the initial

level of knowledge is in the poor category with a score of 52.931. However, in the post-test, there was an increase in the average knowledge score after receiving health education, reaching 80.711, which is in the good category. This increase shows that health promotion makes a positive contribution to increasing the knowledge of these mothers.

In line with research from hidayat fahrul (2023) From the research results, it can be seen that after receiving health education about postpartum blues, the majority of respondents showed a good increase in knowledge, namely 52 respondents (94.5%). The average answer value before education was 2.62 and increased to 10.40 after education from a total of 11 questions on the questionnaire given to respondents.

The increase in knowledge after health education is due to health promotion being successful in increasing mothers' insight, knowledge, and skills in the field of prevention and treatment of postpartum blues. By using audiovisual media, target audiences can learn and receive information more effectively. Audio visual media is a learning tool that combines image elements with sound elements. In its use, this media displays images and sound simultaneously when conveying messages or information. The benefit of using audiovisual media is its ability to present a more realistic picture and increase memory retention because the impression is more interesting and easy to remember. (Setiawati, 2020).

### **The Effectiveness of Health Promotion Using Audio Visual Media on the Level of Knowledge of Postpartum Mothers About Postpartum Blues at Roemani Hospital Semarang**

Based on Table 4.8, data from the Wilcoxon Signed Rank test shows a change in values between before and after treatment. There are negative ranks with an N value of 0, which indicates there is no decrease from the pretest value to the posttest value. Meanwhile, positive ranks with an N value of 43 indicate that the entire sample experienced an increase in results from the pretest to posttest scores. The average increase, as measured by mean rank, was 22.00. The number of positive ranks, as measured by the sum of ranks, is 946.00, with a Ties value of 0 indicating that there is no similarity between the pretest and posttest scores. This shows that the results of the Wilcoxon Signed Rank statistical test for the variable level of knowledge of postpartum mothers before and after receiving health promotion regarding postpartum blues has a p-value <0.05. Therefore, the null hypothesis (Ho) is rejected, and the alternative hypothesis (Ha) is accepted. This implies that there is effectiveness in health promotion using audio-visual media on the level of knowledge of postpartum mothers regarding postpartum blues in hospitals. This is by the results of research conducted by

(Dita Nur Safitri, 2022). The research results stated that providing education through video media had a positive impact on increasing respondents' knowledge about postpartum blues. This is confirmed by the results of the Wilcoxon test which shows a p-value of 0.000 ( $<0.05$ ) so it can be concluded that the null hypothesis ( $H_0$ ) is rejected and the alternative hypothesis ( $H_a$ ) is accepted (Dita Nur Safitri, 2022). Explaining that videos have been proven to be effective in a learning context, demonstrated by their effectiveness in increasing grades which can be seen through a comparison of the average pretest and posttest scores.

The results of this research are also by research from (hidayat fahrul, 2023) Which produces a p-value of 0.000 ( $p < 0.05$ ), the conclusion is that there is a significant difference in the level of knowledge of postpartum mothers before and after receiving health education regarding postpartum blues.

The results of research conducted by researchers show the effectiveness of health promotion using video media in increasing postpartum mothers' knowledge about postpartum blues. This fact can be seen from the comparison of the pretest and posttest results that have been carried out. Before receiving health promotion, 8 people (18.6%) of postpartum mothers knew the poor category, 26 people (60.5%) in the sufficient category, and 9 people (20.9%) in the good category. After receiving health promotion, only 6 people (14%) remained in the fair category, while 37 people (86%) improved to the good category.

Based on these data, it can be seen that there has been an increase in the percentage of postnatal mothers who have a good level of knowledge, while the percentage of mothers with sufficient and poor levels of knowledge has decreased.

So, it can be concluded that there is an increase in understanding or knowledge in postpartum mothers after receiving health promotion regarding postpartum blues. In this research, providing health promotion was used as a method to convey information to postpartum mothers regarding postpartum blues. Through message communication, building self-confidence, and ensuring a good understanding of the information conveyed, health promotion plays a role in increasing postpartum mothers' knowledge about postpartum blues.

The use of audiovisual media as a tool for health promotion received a positive response from respondents during the research, because this media was considered an innovation that attracted the interest of many respondents.

Audiovisual media is a learning tool that presents images and sounds simultaneously, presenting image and sound elements simultaneously when communicating messages or information. The benefit of using audiovisual media lies in its ability to present more realistic representations and increase memory retention through visual appeal, as well as simplifying the memory process (Setiawati, 2020).

The results of this research are in line with research from Suardani (2023) The research results showed an increase in the average pretest and posttest scores from 21.45 to 33.90 after providing health promotion using video media regarding postpartum blues. Video media has a significant impact on knowledge and attitudes, and can quickly change perceptions of things that are considered important. This is very useful, especially in raising health issues, because video media can help us see the importance of a problem more concretely and realistically.

The results of this study are in line with theory and previous research, indicating that health promotion using video media regarding postpartum blues is effective in increasing the knowledge of postpartum mothers. This success occurred because health promotion was able to change people's previously limited knowledge and skills for the better. The use of media as a promotional tool allows us to convey health messages through various senses. According to researchers, the advantages of this research are the provision of health promotion and the use of video media. Respondents' interest in health promotion materials is influenced by the use of videos that have interesting content and are easy to understand. In addition, respondents' active participation in the question and answer session reflects a good level of engagement with the topic of postpartum blues. Providing health promotion not simultaneously but one by one to patients also had a positive impact on this research. This is because respondents feel more comfortable and safe in discussing and delivering material in videos is easily accepted.

Video as a modern learning tool is very suitable for current developments. Messages conveyed via video tend to be more interesting and concise. The success of video in learning is proven by its ability to attract attention, increase information retention, and facilitate better visualization of concepts, objects, and their relationships.

## **CONCLUSION**

1. Characteristics of respondents in this study according to age, the majority were between 20 and 35 years old, including 35 people (81.4%). Judging from parity, the majority of participants had multiparous parity status, namely 26 people (60.5%). In terms of education, the majority of

respondents were high school graduates, namely 21 people (48.8%). Meanwhile, in terms of work, the majority of respondents were housewives, namely 27 people (62.8%).

2. The level of knowledge before receiving health promotion regarding postpartum blues can mostly be grouped as sufficient, including 26 people (60.5%). Furthermore, there were 9 people (20.9%) who were in the good category, and those with the least knowledge were in the poor category, namely 8 people (18.6%).
3. The level of knowledge after receiving health promotion regarding postpartum blues was mostly in the good category, covering 37 people (86%). Furthermore, there were 6 people (14%) who had sufficient level of knowledge, and there were no respondents who were included in the insufficient category.
4. There is the effectiveness of health promotion using audio-visual media on the level of knowledge of postpartum mothers about postpartum blues at Roemani Hospital Semarang as shown by the results of the Wilcoxon test with a p value <0.05.

### **CONFLICT OF INTEREST**

We have no conflict of interest

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