



## Thought stopping and supportive therapy can reduce postpartum blues and anxiety parents of premature babies

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### KEYWORDS

Anxiety;  
Postpartum blues;  
Supportive therapy;  
Thought stopping

### Abstract

**Objective:** The parents of premature baby tend to be at risk undergoing postpartum blues and anxiety. It is due to many problems faced by postpartum mother of premature baby. This research is aim to identifying influence of thought stopping and supportive therapy of postpartum blues and anxiety parents of premature babies.

**Method:** This is quantitative with quasi-experiment with control group pretest-posttest design and consecutive sampling method. Sample in this research are 62 postpartum mothers of premature babies in perinatal NICU (neonatal intensive care unit).

**Results:** The results show that there is significant decrease of postpartum blues and anxiety ( $p$  value = 0.000) in the group that was treated by using nursing intervention, thought stopping and supportive therapy and greater significant decrease than the group that was only treated by nursing intervention.

**Conclusions:** Thought stopping and supportive therapy are able to decrease postpartum blues and anxiety parents of premature babies.

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### Introduction

Postpartum period is a crisis moment for mother, husband and family due to the physical and psychological changes as well as family structure that need adaptation process<sup>1</sup>. Physiological adaptation process is begun immediately after the birth of a child until the body recovery is started and it is extending for about six up to eight weeks<sup>2</sup>, postpartum mother that delivers her baby prematurely in sectio caesarea needs more adaptation process rather than a normal postpartum mother that delivers her baby in enough months. It is because of a post-sectio caesarea mother undergoes parturition period with two problems: post-birth recovery process and SC abdominal-wound heal-

ing process<sup>3</sup>, as well as the premature baby who needs special treatment.

Psychological adaptation of postpartum is classified into three phases: taking in, taking hold and letting go<sup>4</sup>. Those three phases will be well passed through if postpartum mother is socially supported by the surround people.

Postpartum mother who is failed on taking in phase will face postpartum blues<sup>5</sup>. The symptoms of postpartum blues are sad reaction, easy-crying, anxiety, touchy, labile, tending to blame themselves, feeling incapable to treat baby, sleep habit disturbance and feeling no appetite. These symptoms appear after birth and they are extending in about fourteen days. Primipara and post sectio caesarea are vulnerably undergoing postpartum blues.

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Anxiety is a psychosocial disorder which often experienced by individual<sup>6</sup>. The individual therapy effective to overcome anxiety are cognitive therapy, behavioral therapy, thought stopping, and cognitive behavioral therapy<sup>7</sup>. Thought stopping therapy is a mind-stopping technique that can accordingly learned by postpartum mother and it can be used when she wants to eliminate disturbance or negative thinking and consciously unwanted thought<sup>8</sup>.

Supportive therapy is a part of psychotherapy that is applied on sanity based-community<sup>9</sup>. The aim of supportive therapy is improving supportive individual, increasing individual's strength, self-defense ability and using self-defense sources.

The choice of both therapy is due to parents of premature babies undergoes thought disturbance because of their baby's condition in perinatal NICU (neonatal intensive care unit). They face anxiety and problems, not only about the baby's condition, but also after the premature baby is brought back home. It is because the treatment of the premature baby needs relative long time and thus the parents of premature baby need internal/external support continually.

The researcher measures the anxiety symptoms and postpartum blues to parents of premature baby in perinatal NICU and then conduct nursing intervention, thought stopping and supportive therapy to solve anxiety problems and to know whether the parents of premature baby undergoes postpartum blues.

## Method

This research used quasi-experiment with control group pretest-posttest design that examined the influence of nursing intervention, thought stopping and supportive therapy to postpartum blues and anxiety parents of premature baby in perinatal NICU. Sampling method used convenience sampling; there were 62 respondents. The research duration was 25 weeks, starting from December until June 2016. The instruments that used in this research were HARS and EPDS. Furthermore, anxiety is treated by nursing intervention with relaxation techniques and specialist nursing intervention with thought stopping and supportive therapy. The data that have been collected, then, are inputted and analyzed by using software. The data collection is done after the researchers explain a detailed procedure and process to the respondent. The study was conducted after the respondents agreed and filled the informed consent. The planning of this study was legalized through the ethic test by the ethics agency Faculty of Nursing, Universitas Indonesia.

## Results

The parents of premature baby undergo postpartum blues and high anxiety before gets nursing intervention and thought stopping therapy.

The results of statistical test in Table 1 show that after get nursing intervention and thought stopping therapy, the anxiety is decrease from high to moderate and the value of postpartum blues is decrease, but the value is still in the postpartum blues range.

After performing nursing intervention, there was significant average decrease from high to moderate anxiety and

**Table 1** The difference of postpartum blues and anxiety parents of premature baby between before and after get nursing intervention, thought stopping therapy (n = 62)

Variable	Mean before	Mean post	p value
<i>Postpartum blues</i>			
Ners	PP blues	PP blues	
Ners, TS	PP blues	PP blues	0.038
<i>Anxiety</i>			
Ners	High	Moderate	0.032
Ners, TS	High	Moderate	0.032

the value of postpartum blues is decrease, but the value is still in the postpartum blues range.

The decrease of postpartum blues and anxiety parents of premature baby's group who get nursing intervention and thought stopping therapy is significantly greater than group that only get nursing intervention.

The research's result show that thought stopping and supportive therapy are able to decrease postpartum blues and anxiety parents of premature baby twice as great than only nursing intervention. The statistical test results in Table 2 show that after nursing intervention, thought stopping and supportive therapy were conducted, there was significantly average decrease from moderate anxiety to be normal and the value of postpartum blues is decrease from positively postpartum blues to negatively postpartum blues/normal.

## Discussion

The research's result show that before nursing intervention and thought stopping therapy, all parents of premature babies in perinatal NICU suffer postpartum blues and high anxiety.

Lindberg and Ohrling<sup>10</sup> research's result show that mostly mother are not ready having premature baby and they get difficulties being a mother in early moments after delivering their babies. Mother experiences anxiety since she is separated from her baby. Melnyk et al<sup>11</sup> state that nursing hospitalization in NICU gives negative impact to parent's psychological condition and the future premature baby growth.

**Table 2** The difference of postpartum blues and anxiety parents of premature baby between post nursing intervention, thought stopping and post nursing intervention, thought stopping and supportive therapy (n = 62)

Variable	Mean	SD	p value
<i>Postpartum blues</i>			
Post (Ners, TS)	PP blues	3.049	0.000
Post (Ners, TS, S)	Normal	3.294	
<i>Anxiety</i>			
Post (Ners, TS)	Moderate	4.089	0.000
Post (Ners, TS, S)	Normal	4.856	

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