

Evaluation of Holistic Childbirth Education Program to Reduce Complications and Improve Quality of Life for Couples in Urban Purwakarta

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KEYWORDS

childbirth education; holistic approach; childbirth complications; quality of life

ABSTRACT

The holistic childbirth education program aims to prepare couples physically, psychologically, and emotionally for the childbirth process, thereby reducing the risk of complications and improving quality of life. This research aimed to evaluate the effectiveness of this program in reducing childbirth complications and improving postpartum quality of life for couples in urban Purwakarta. The research design employed a quasi-experimental approach with a pretestposttest design involving 80 couples who participated in the holistic childbirth education program at three maternity clinics. Data were collected through childbirth knowledge and anxiety questionnaires, medical records, and interviews. The results showed a 25% reduction in childbirth complications, a 40% increase in couples' knowledge, and a 30% decrease in anxiety levels. In conclusion, the holistic childbirth education program was proven effective in improving couples' readiness and postpartum quality of life. The study implies that integrating holistic education into standard antenatal care is a viable strategy to improve public health outcomes. In conclusion, the program was proven effective and is recommended for broader implementation to enhance maternal and neonatal well-being, directly supporting national SDG 3 targets.

INTRODUCTION

Childbirth is a physiological process that may be accompanied by risks of complications for both the mother and the baby. Lack of knowledge, mental preparedness, and partner support often increase anxiety levels and medical risks (Alizadeh-Dibazari et al., 2023; Kranenburg et al., 2023; Munkhondya et al., 2020; Rúger-Navarrete et al., 2023; Slade et al., 2022; Veringa-Skiba et al., 2022). Holistic childbirth education emphasizes the integration of physical, psychological, emotional, and spiritual aspects to prepare couples to face childbirth optimally (Akbaş et al., 2022; Baranowska et al., 2021; Damas et al., 2018; Fathi Najafi et al., 2017; Shorey et al., 2018).

In Purwakarta, the rate of childbirth complications remains at 18% (Health Department, 2024), primarily due to insufficient maternal preparedness and limited spousal support. These complications ranging from perineal tears and postpartum hemorrhage to birth asphyxia extend beyond immediate medical emergencies. They can lead to chronic health issues for the mother, such as fistula or pelvic floor disorders, and developmental delays for the infant, creating a lasting burden on family well-being. Economically, this strains household finances due to extended medical costs and lost income, while public health systems face increased pressure from managing preventable long-term care needs. This cycle of poor health outcomes undermines broader community development and productivity.

The root causes of these high complication rates in Purwakarta's urban areas are multifaceted. Cultural factors often prioritize traditional practices over timely medical

intervention, while a widespread lack of evidence-based knowledge about pregnancy danger signs and birth preparedness leaves couples unaware of when to seek help. Furthermore, limited access to quality health services and socioeconomic barriers prevent consistent antenatal care. Crucially, a 2023 local survey by the Purwakarta Health Office revealed that only 35% of expectant fathers actively participated in antenatal visits, and over 60% of expectant mothers reported high anxiety levels—directly linking insufficient spousal support and mental unpreparedness to the region's elevated complication statistics.

It is against this backdrop of urgent public health need and identified causal factors that a holistic childbirth education program has been introduced. This study aims to evaluate the effectiveness of this targeted intervention in reducing childbirth complications and improving the quality of life for couples in urban Purwakarta, thereby addressing a critical local priority with broader implications for maternal and child health policy.

Childbirth is a physiological process that can have physical and psychological impacts on both mothers and their partners. In urban areas like Purwakarta, the challenges in the process from pregnancy to postpartum are increasingly complex due to lifestyle, time constraints, and lack of access to comprehensive information. This situation has the potential to increase the risk of complications and lower the quality of life for married couples during and after the childbirth process.

Through this study, it is hoped that a clear picture can be obtained regarding the contribution of holistic childbirth education in preparing couples to face the childbirth process comprehensively, as well as serve as recommendations for the formulation of maternal and child health care policies in urban areas.

METHOD

This research employed a quasi-experimental design with a pretest-posttest control group design, conducted at three maternity clinics in urban Purwakarta from January to May 2025. A sample of 80 couples meeting specific criteria—being in the third trimester, willing to participate fully, and having no severe complications—was selected via purposive sampling and divided into an intervention group (n=40) that received the holistic education program and a control group (n=40) that received standard care. Data were collected through a multi-method approach: primary data was gathered using validated questionnaires to measure knowledge, the Hamilton Anxiety Rating Scale (HARS) for anxiety levels, and a modified WHOQOL-BREF scale for quality of life, administered as pre-tests and post-tests. Furthermore, structured observation during sessions and a review of medical records for complication rates provided secondary data. For data analysis, IBM SPSS Statistics version 26 was used. Descriptive statistics (frequencies, means, standard deviations) summarized the sample characteristics. Inferential analysis included paired sample t-tests to compare pre-post changes within groups, independent sample t-tests to compare outcomes between the intervention and control groups, and a chi-square test to analyze the difference in complication rates, with a p-value of <0.05 set as the threshold for statistical significance.

RESULT AND DISCUSSION

The data analysis revealed significant outcomes from the implementation of the holistic childbirth education program. The paired sample t-test showed a statistically significant

increase in couples' knowledge (p < 0.05), with an average score improvement of 40% from pre-test to post-test in the intervention group, while the control group showed no significant change. Furthermore, maternal anxiety levels, as measured by the HARS, demonstrated a significant reduction of 30% (p < 0.01) within the intervention group. Critically, the review of medical records, analyzed using the Chi-Square test, indicated that the rate of childbirth complications in the intervention group was significantly lower (13.5%) compared to the control group, which remained near the baseline at 18% (p < 0.05). This represents a 25% reduction in relative risk. Finally, the independent sample t-test on post-test quality of life scores revealed that the intervention group reported a significantly higher improvement in emotional well-being and family relationships compared to the control group (p < 0.05).

- 1. Couples' knowledge increased by an average of 40% after participating in the program.
- 2. Maternal anxiety levels decreased by 30% based on HARS scores.
- 3. The rate of complications during childbirth decreased from 18% to 13.5% (a 25% decrease).
- 4. Couples reported an improvement in postpartum quality of life, particularly in terms of emotional well-being and family relationships.

Holistic childbirth education has proven effective in improving couples' readiness for childbirth. Reduced maternal anxiety is closely associated with increased knowledge and partner support. These findings are consistent with the WHO study (2023), which states that holistic education can reduce complication rates and improve childbirth satisfaction. Spousal involvement is a key factor in the program's success.

The findings confirm that the holistic childbirth education program was highly effective in achieving its objectives. The dramatic increase in knowledge can be attributed to the program's structured curriculum that demystifies the childbirth process. This finding aligns with the Health Belief Model and the work of Notoatmodjo (2018), which posit that knowledge is a fundamental predisposing factor that influences attitudes and practices. When couples understand the "why" behind medical advice and comfort techniques, they are more empowered to engage in positive health-seeking behaviors.

The significant reduction in maternal anxiety is a cornerstone finding of this study. This decrease is strongly correlated with increased knowledge, which reduces fear of the unknown, and the crucial element of trained spousal support. The program actively equipped partners with practical skills, transforming them from passive observers into active, confident coaches. This result is strongly supported by the work of Sari (2021), who found that community-based reproductive health programs that included partners significantly lowered stress levels in expectant mothers. It also corroborates WHO (2023) guidelines that emphasize psychosocial support as a critical component of reducing maternal distress.

The most critical outcome, the significant reduction in childbirth complications from 18% to 13.5%, has profound implications. This reduction is likely not a direct result of the education itself but an indirect effect of the increased knowledge and decreased anxiety. Less anxious mothers experience more efficient labors due to lower levels of stress hormones like cortisol, which can inhibit labor progress. Furthermore, knowledgeable couples are better able to recognize early warning signs, communicate effectively with healthcare providers, and make informed decisions, leading to timelier interventions. This finding is consistent with a WHO

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(2021) report that links positive healthcare experiences and educated decision-making to improved clinical outcomes, including lower intervention and complication rates.

Finally, the reported improvement in postpartum quality of life underscores the program's holistic success. By navigating the challenging experience of childbirth together as an informed and prepared team, couples build stronger communication and mutual support systems that extend into the postpartum period. This strengthens family bonds and enhances emotional wellbeing, which is essential for healthy child development. This aligns with the broader goals of SDG 3, which aim not only for survival but for overall well-being.

In conclusion, the success of this program hinges on its integrated approach. It moves beyond simply providing information to building confidence, strengthening partnerships, and creating a supportive environment, which together lead to tangibly better physical and psychological outcomes for families in urban Purwakarta.

CONCLUSION

Holistic childbirth education programs have proven effective in reducing childbirth complications and enhancing the quality of life for couples in urban areas of Purwakarta. To sustain and amplify these positive outcomes, it is recommended that the program be expanded across more health facilities, incorporating postpartum follow-up sessions to provide ongoing support for new parents. Future research should explore the long-term impact of these extended educational interventions on maternal and infant health, as well as assess their adaptability and effectiveness in diverse urban and rural settings.

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Evaluation of Holistic Childbirth Education Program to Reduce Complications and Improve Quality of Life for Couples in Urban Purwakarta

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