



Description of Husband's Experience in Accompanying His Wife Who Will Perform Sectio Caesarea : A Qualitative Study



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Abstract

Background According to the World Health Organization (WHO) the use of caesarean section continues to increase globally, now accounting for more than 1 in 5 (21%) of all deliveries. In less developed countries, about 8% of women give birth by caesarean section. In Indonesia, the birth rate by cesarean section is 17.6%. In Central Java, the percentage of sectio caesarean deliveries was 17.1%. Experience is something that has been experienced. Husband support is often known by another term, namely support in the form of sympathy, which is evidence of affection, attention and a desire to listen to the complaints of others. Sectio Caesarea is a way of delivering a fetus by making an incision in the uterine wall through the front wall of the abdomen or vagina; or sectio caesarea is a hysterotomy to deliver the fetus from the uterus. The purpose of this study was to determine how the husband's experience in accompanying his wife who will perform sectio caesarea.

Methods This study used a descriptive qualitative method with a phenomenological approach. Data collection used an in-depth interview method, with purposive sampling method.

Results The results of overthinking There is 1 category in this theme, a category that is negative feelings that have the same code, namely fear, worry, anxiety and anxiety. Self management There are 2 categories of the first category, namely surrendering which has the same two codes, namely asking for help from God and asking for parents' prayers. The second category is the husband's behavior which has the same four codes, namely Diverting thoughts by sitting, calming down and asking for parental prayers. Support system there is 1 category of curiosity which has 1 code of husband's curiosity. Self Reward has 1 category of happiness and has the categories of happy, unthinking, happy and confident.

Conclusions In conclusion, this study provides a description and knowledge of the husband's experience in accompanying his wife who will perform Sectio Caesarea.

Keywords: experience, husband, sectio caesarea, qualitative

Introduction

The process of childbirth is a physiological event that will be experienced by pregnant women to remove the baby, placenta and membranes from the uterus through the birth

canal. The process of childbirth is not uncommon to experience obstacles and must be carried out surgically or by sectio caesarea (SC) method (1).

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According to the World Health Organization (WHO) the use of caesarean section continues to increase globally, now accounting for more than 1 in 5 (21%) of all deliveries. In less developed countries, about 8% of women give birth by caesarean section (2). In Indonesia, the birth rate by cesarean section is 17.6% with the highest cesarean section rate in Jakarta at 31.1% and the lowest in Papua at 6.7% of the total number of deliveries (3). In Central Java, the percentage of sectio caesarean deliveries was 17.1%. With causative factors including premature rupture of membranes (KPD) of 6.40%, prolonged partus 5.20%, fetal abnormality 2.30%, placenta covering the birth canal 0.60%, placenta left behind 0.6%, convulsions 0.10% (4).

Sectio caesarea surgery currently uses spinal anesthesia due to safety, low cost, reliability, ease of application, immediate effectiveness, and good surgical conditions (5). Spinal anesthesia is the most common regional technique performed by most anesthesiologists worldwide (6). Sectio caesarea surgery can adversely affect the mother who will undergo surgery. Although it may seem minimal risk, in reality, this type of surgery can have negative physical and psychological effects. Family support is the attitude and behavior of a family in accepting itself which includes: informational support, assessment or evaluation support, instrumental support, and emotional support. Information support such as advice and providing information for those undergoing surgery (7). The family has a major role in maintaining the health of all family members and not the individual alone who seeks to achieve the desired level of health. The family functions as information, advice, and guidance to family members to solve the problems they face (8).

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Some factors affect anxiety in cesarean section patients. Cesarean section patients experience anxiety because they often think, such as: fear of surgical pain, fear of malignancy, fear of facing the operating room. Therefore, family support is needed which can help reduce the level of anxiety in cesarean section patients (9). The husband is one of the important family supports in accompanying his wife before going into labor, it is argued that the role of the husband is a very important factor in the readiness of a pregnant mother in facing labor and the birth of her baby (10).

Husband's assistance during labor has an important role for the mother because it can affect the mother's psychology. A comfortable, relaxed and calm psychological condition can be formed through the support of family love. Forms of support can be in the form of mental support, sharing experiences while undergoing the labor process, or other positive things so that it affects the strength of the mother when giving birth to her baby, husband's support in the labor process will have an effect on the mother, namely in terms of emotions, calm maternal emotions that cause her nerve cells to secrete the hormone oxytocin whose reaction will cause contractions in the uterus at the end of pregnancy to expel the baby, minimal support in the form of touch and words of praise that make you comfortable and provide reinforcement during the labor process (11).

Methods

This study used a qualitative method with a descriptive phenomenological approach. This research was conducted at dr. Soedirman Kebumen Regional General Hospital with data collection and this research began from March - June 2024 by means of interviews. In this study, the population was the husband of the patient who accompanied his wife who would undergo surgery at RSUD dr. Soedirman Kebumen. Sampling of the population was done using purposive sampling technique. This research has received approval from the Harapan Research Ethics Committee of Universitas Bangsa with approval number B.L.PPM-UHB/853/08/2024.

Results

This study involved the patient's husband, totaling 4 (four) participants. The number of participants is in accordance with the saturation of data obtained from the analysis of participants' answers. The participant characteristics table is as follows:





Table 1. Characteristics of participants

| Code | Participants | Age | Last education | Occupation | Frequency of SC | Type of surgery | Duration of presenting feeling |
|------|--------------|-----|----------------|---------------|-----------------|------------------|--------------------------------|
| P1 | Mr. S | 31 | High School | Trader | 1x | Sectio Caesarean | 30 minutes |
| P2 | Mr. N | 33 | High School | Self-employed | 1x | Sectio Caesarean | 30 minutes |
| P3 | Mr. L | 29 | High School | Self-employed | 1x | Sectio Caesarean | 1 hour |
| P4 | Mr. P | 35 | High School | Driver | 1x | Sectio Caesarean | 1 hour |

Table 2. Characteristics of Triangulation

| Code | Name | Age | Occupation |
|------|--------|-----|------------|
| T1 | Mrs. T | 31 | Housewife |
| T2 | Mrs. M | 32 | Housewife |
| T3 | Mrs. R | 29 | Housewife |
| T4 | Mrs. P | 35 | Housewife |

Based on the results of in-depth interviews and analysis, 4 themes were generated related to the experience of parents in accompanying their children who will undergo surgery. The four themes include 1) overthinking 2) Self management / self-management 3) Support system 4) Self reward.

Table 3. Theme 1

| Code | Coding | Category | Theme |
|------|--------------------------|-------------------|--------------|
| P1 | Fear, worry and anxiety | | |
| P2 | Fear and anxiety | | |
| P3 | Fear and uneasy thoughts | Negative feelings | Overthinking |
| P4 | Fear, anxiety and worry | | |

Overthinking. This theme shows how parents react and respond in the process of accompanying their children who have surgery and the feelings of parents that arise in accompanying their children who have surgery. Resignation in the process of his wife's surgery is an attitude of surrender to believe in the process of surgery that his wife is undergoing. Sadness felt by participants when accompanying their wives to surgery is a very natural feeling and can arise for various reasons related to stressful situations. The following are some of the participants' statements that represent the category of negative feelings:

"..... definitely fear, worry and anxiety," (P1, TN.S, 31th)
 ".....fear, thoughts that are basically mixed up lah,"
 "(P2, TN.N, 33th)
 "If you know, you don't really understand, because the first birth was normal, sometimes you see cesarean videos, ..." (P3,TN.L,29th)
 "There is a fear that something will happen to the wife and child and the mind will wander (P4,TN.P,35th)

Table 4. Theme 2

| Code | Coding | Category | Theme |
|------|--|--------------------|-----------------|
| P1 | Asking God for help | | |
| P2 | Asking God for help | | |
| P3 | Asking God for help | Surrender | |
| P4 | Asking God for help and asking for parents' prayers. | | Self management |
| P1 | Distracting the mind by sitting | | |
| P2 | Calming down and asking for parents' prayers | | |
| P3 | Calming down | Husband's behavior | |
| P4 | Ask about wife's feelings and ask for parents' prayers | | |

Self management. This theme shows about self-management in how to overcome the feelings that arise and the signs and symptoms that appear in the feelings of participants when accompanying his wife who underwent surgery. There are 2 categories of categories in this theme, the first category is surrendering which has the same two codes, namely asking for help from God and asking for parents' prayers at the signs and symptoms that arise in the feelings of respondents who accompany their wives to surgery.method of overcoming feelings that arise. The following are some participant statements that represent the surrender category:

"yes, the point is I pray a lot," (P1, Mr. S, 31 years old)
 "/I always pray to gusti allah swt," (P2, Mr. N, 33 years old)
 "/I pray a lot to ask for help from those above ..." (P3, Mr. L, 29 years old)
 "/I always surrender to the creator, always pray, and I always ask for prayers from my parents and my wife's parents...." (P4, Mr. P, 35 years old).

The second category is the husband's behavior which has the same four codes, namely Diverting thoughts by sitting down, Calming down and asking for prayers from parents and





asking his wife's feelings which are ways to overcome the feelings that arise. The following are some of the participants' statements that represent the reaction to the feeling reaction category:

"I sit alone while thinking about my wife and child," (P1, Mr. S, 31 years old)
"I am always alone and the point is I always ask for prayers from my parents," (P2, Mr. N, 33 years old)
"I usually keep quiet" (P3, Mr. L, 29 years old)
"I always ask my wife how she is and what she feels...." (P4, Mr. P, 35 years old)

Table 5. Theme 3

| Code | Coding | Category | Theme |
|------|-------------------|-----------|----------------|
| P1 | Information | Curiosity | Support system |
| | retrieval process | | |
| P2 | Information | Curiosity | Support system |
| | retrieval process | | |
| P3 | Information | Curiosity | Support system |
| | retrieval process | | |
| P4 | Information | Curiosity | Support system |
| | retrieval process | | |

Support system. This theme is about husbands towards their wives' surgeries, which means that the cause and effect arises from the participants' feelings because every husband must want the best for his wife. They sometimes seek information from trusted experts so that they understand a little about SC surgery. This participant's statement came from the Hospital category, as stated by the participant. Here are some of the participants' statements that represent the category:

"I don't know, what I know is giving birth but through surgery," (P1, Mr. S, 31 years old)
what I know is that mas is an abnormal childbirth operation" (P2, Mr. N, 33 years old)
"....., I don't know what sc surgery is, all I know is that I gave birth abnormally," (P3, Mr. L, 29 years old)
"..... I don't know what a caesarean section is, all I know is that it is an abdominal delivery." (P4, Mr. P, 35 years old)

Table 6. Theme 4

| Code | Coding | Category | Theme |
|------|----------------------|-----------|-------------|
| P1 | Happy | | |
| P2 | Happy and unthinking | | |
| P3 | Happy dan happy | Happiness | Self reward |
| P4 | Happy and confident | | |

Self Reward. This theme shows how a husband's sense of self accompanies his wife

undergoing surgery and how the participant feels after his wife undergoes surgery. Every husband must have hopes for the future for his wife who has undergone surgery. In general, the participants' feelings after their wives underwent surgery were feeling calm, mindless, happy and confident. Here are some statements that represent the category of calmness:

"yes, I am happy, what's more my wife and child are in good health," (P1, Mr. S, 31 years old)
definitely very happy all the fears and thoughts were immediately dispelled ..." (P2, Mr. N, 33 years old)
"....., certainly very happy, very happy because my wife and child are healthy" (P3, Mr. L, 29 years old)
".... certainly very happy and all feelings ranging from fear anxiety and worry are not too much anymore or it feels free....." (P4, Mr. P, 35 years old)

Similar feelings were expressed by triangulation participants. The following is a triangulation participant's statement from the results of the interviews conducted.

"I feel happy" (T1, wife of Mr. S, 31 years old)
".... definitely happy because it is always accompanied by the husband," (T2, Wife of Mr. N, 32)
"..... I am very happy to be accompanied by my husband during the surgery process...." (T3, Wife of Mr. L, 29 y.o.)
"..... feel certainly calm and happy, which before I felt fear" (T4, Wife of Mr. P, 34th)

Discussion

This study will export the findings obtained from the experience of the patient's husband in accompanying his wife who will undergo surgery. The research found four themes. These themes include: overthinking, self-management, sport system and self-reward.

Overthinking

The results of this study found that there are reactions and responses to the patient's husband's experience in accompanying his wife who will undergo SC surgery, with negative feeling categories, this reveals reactions and responses in the form of feelings of fear when knowing his wife will undergo surgery, a husband will feel anxiety, worry and excessive thoughts about his wife's condition after undergoing surgery. Overthinking is a tendency when someone spends a lot of time thinking about certain things excessively and repeatedly. When experiencing overthinking, a person will find it difficult to focus on anything other than what he is thinking about. Feelings of anxiety that cause stress during labor result in increased levels of endorphin, adrenocorticotrophic hormone (ACTH), cortisol





and epineprin. These hormones are hormones associated with stress, the effect of increasing these hormones can cause obstruction of the labor process, this is associated with dystocia labor patterns (12).

According to Mohammadpour et al. (2021), overthinking is one of the dominant forms of emotional response in husbands who accompany their wives to undergo cesarean section. Husbands often experience excessive anxiety, triggered by uncertainty and fear of possible medical complications. Negative thoughts, such as the possibility of losing their wife or baby, haunt and worsen their mental state. The study revealed that feelings of helplessness and inability to control the situation created significant psychological distress, which was often not conveyed verbally, but internalized as profound stress and anxiety. In general, overthinking is defined as the behavior or habit of thinking about something excessively. Understanding and experiencing rumination and worry. A series of open and closed questions informed by the main theoretical models of Repetitive negative thinking (RNT) and existing clinical interventions (e.g. the functional analysis component of rumination-focused cognitive behavioral therapy (13)). According to the researcher's assumption when a person spends so much time thinking about or analyzing something in a way that is more harmful than helpful or in other words, long-winded and unnecessary thinking. When experiencing overthinking, a person will find it difficult to focus on anything other than what they are thinking about. Rumination and worry have each been shown to be major factors contributing to the onset, severity, maintenance, and risk of recurrence of depressive and anxiety disorders (13).

In the face of a situation where a husband accompanies his wife who will undergo a caesarean section, it is assumed that the husband will experience significant emotional distress. This assumption is based on the belief that the husband's role in supporting his wife at this critical time involves not only physical, but also mental and emotional support. The husband is assumed to feel anxious about the safety of his wife and baby, which may trigger overthinking and excessive worry. In addition, it is assumed that the husband may feel helpless because he cannot directly participate in the medical process, which may exacerbate his

feelings of stress and anxiety. In contrast to research (Nedergaard et al., 2022) said that there were participants who did not react or respond when the husband accompanied his wife to surgery, namely ordinary or did not feel fear or anxiety. In research conducted (14). Saying that more participants who accompany their wives to surgery feel calm or may not have any reaction.

Self-management

Based on the results of the study, participants stated how to overcome the feelings that arise by asking for help from God and asking for mother's prayers. There is also a way to divert feelings by sitting down, calming down, asking for parents' prayers, praying and asking about the wife's feelings. Self-management in a psychological context refers to a person's ability to control emotions, behaviors, and reactions to stressful situations. in situations such as accompanying a wife who is about to undergo a caesarean section, optimal support is expected from husbands who can surrender, accept the situation, and deal with their emotions effectively. Surrendering in this case does not mean giving up, but rather a form of active acceptance that allows the husband to focus on supporting his wife emotionally and practically, so as to mutually improve the well-being and outcome of labor. This is supported by recent research showing that self-management and dedication in situations beyond direct control can increase an individual's ability to provide more effective support in interpersonal relationships, including birth situations (15).

Husbands who apply good self-management, especially in terms of surrender, are expected to display cooperative and calm behavior while accompanying their wives undergoing cesarean section (SC). Rephrase Husbands who can surrender to the situation and control their emotions well are expected to provide important psychological support for their wives, and have a positive impact on the psychological health of both parties during the labor process (16). While many studies emphasize the importance of self-management and surrendering to stressful situations in cases of oerasi sc, it is less understood how these aspects specifically affect the husband's behavior when accompanying his wife. Some studies suggest that husbands who are better at managing emotions tend to be more supportive, but these results are not always





consistent. There are differences in how husbands apply self-management and prayer, which may be influenced by cultural factors, educational background, and personal experiences, and have not been sufficiently explored in the recent literature. Further research is needed to understand this variability and to identify factors that prevent husbands from exhibiting cooperative behavior despite having good interpersonal relationships, including birth status.

Support System

Based on the results of the study, participants stated how to provide support or support to a wife who will perform SC surgery. With the Curiosity category, this shows a reaction to provide support in the form of an information search process. Deci & Ryan (1985), state that curiosity is a powerful motivator for active participation in situations in which people are involved, as shown by their study of cognitive processes. In the situation of accompanying his wife who will undergo a caesarean section, a curious husband will be more willing to seek information about the caesarean section procedure, risks, and the best way to provide for his wife. This is supported by research showing that husbands who actively participate in seeking medical and emotional information can provide greater support to their wives and reduce their anxiety (17).

Increased curiosity can facilitate better interactions between husbands and healthcare providers, as well as medical professionals themselves. Curiosity encourages individuals to ask questions, seek clarification, and gain a deeper understanding of others' needs. Higher husband's curiosity was also associated with better preparedness in dealing with unexpected events during caesarean section. A study by Zhang & Axinn (2021), found that husbands who showed curiosity in understanding the details of surgery and possible complications were more mentally prepared and more likely to support their wife's emotional and physical needs during and after surgery. This suggests that curiosity, as part of an effective support system, may play an important role in improving men's motivation and responsiveness. Effective communication between husbands and medical personnel is a key element in supporting wives during caesarean section. Husbands' curiosity encourages them to ask questions and seek clarification from doctors and nurses, which may strengthen their understanding of the

procedure and their role in supporting their wives. Research by (Martins et al., 2021). confirms that open and curiosity-driven communication can reduce anxiety and increase the wife's satisfaction with the support provided by the husband.

According to this theory focuses on how individuals cope with stress and adapt to stressful situations. According to Lazarus and Folkman, effective support in stressful situations such as caesarean section depends more on a man's ability to cope with stress than his curiosity for additional information. A study by Borrelli et.al (2019) suggested that husbands who are in stressful situations. People who give birth by caesarean section seek control and emotional control rather than seeking information that can increase fear. An approach that focuses on emotional support may be more beneficial. This highlights the gap in using curiosity as a key strategy for support systems.

Self Reward

Based on the results of the study, participants expressed the feelings experienced by respondents for their wives who had undergone SC surgery. With the theme of Self reward that gets the category of happiness. For the feelings of participants after their wives underwent surgery, the average husband felt happy, did not think about it and began to trust himself again. In the context of husbands accompanying their wives during Caesarean section, self-reward can serve as an important mechanism to maintain emotional and mental balance. By rewarding themselves for the role they have played, husbands can increase feelings of happiness and personal satisfaction. This not only strengthens the support provided to the wife, but also improves the husband's overall well-being. Several recent studies have shown that self-reward practices are positively correlated with happiness, which in turn can reinforce supportive behaviors and strengthen the couple relationship during stressful periods such as childbirth(18).

It is expected that husbands who practice self-reward after assisting their wives in the Caesarean section process will experience increased happiness and emotional well-being. By rewarding themselves for their role, husbands not only strengthen their motivation to continue providing optimal support, but also reinforce positive feelings about the experience. This practice of self-reward is





assumed to create a happiness loop that strengthens the husband's personal well-being, which in turn can positively influence the couple relationship during and after the labor process. These findings are expected to align with recent research showing that self-reward has a direct impact on increasing individual happiness in high-stress situations (19). Although many studies have shown that self-reward plays a role in increasing happiness and emotional well-being, there is a gap in understanding the effectiveness of self-reward in the context of husbands accompanying their wives during Caesarean section. Some studies suggest that in high-stress situations such as this, self-reward may not be sufficient to cope with significant emotional distress. In addition, not all individuals respond to self-reward in the same way; some husbands may feel that self-reward is irrelevant or inadequate in the face of a challenging situation, which may lead to a lack of the expected increase in happiness. Factors such as social support, previous experiences and personality might influence the effectiveness of self-reward, which is not yet fully understood or explained in the recent literature (20).

Conclusion

In this study, the experience of the patient's husband in accompanying his wife who will undergo surgery is discussed in four main themes based on the results of the interview. The first theme found was overthinking, which includes negative feelings of fear, worry, anxiety, anxiety and uneasy thoughts. Self management in how to overcome the feelings that arise as well as signs of symptoms that appear in the feelings of participants when accompanying his wife who underwent surgery 2 categories of categories in this theme, the first category is surrendering which has the same two codes, namely asking for help from God and asking for prayers from parents on signs and symptoms that appear in the feelings of respondents who accompany their wives to surgery. Methods of overcoming feelings that arise. The second category is the husband's behavior which has the same four codes, namely Diverting thoughts by sitting, Calming down and asking for parental prayers and asking his wife's feelings which are ways to overcome the feelings that arise. This theme shows the husband's support system for his wife's surgery, which means the cause and effect that arises from the participant's feelings because every husband must want the best for his wife. There is one category in this theme,

namely the curiosity category. the first category that has the same code is the information search process. This theme shows how a husband's self-feeling accompanies his wife undergoing surgery and a participant's feelings after his wife undergoes surgery. every husband must have hopes for the future for his wife who has undergone surgery. There are 1 category in this theme, the first category is; happy which has the same code, namely: happy, not thinking, happy and confident.

Limitations

There are several factors of limitations and obstacles in this study on the husband's experience in accompanying his wife who will perform Sectio Caesarea. There are still many participants who use their own local language so that researchers find it difficult to understand participants' statements, and researchers are assisted by participants' families to translate the intentions of participants. Most participants were embarrassed to be asked for information, on the contrary, those who were enthusiastic about providing information were the wives who would undergo surgery. The results of all interviews, there were participants who said that participants did not accompany their wives in labor, but the experiences conveyed by participants were the same as those conveyed by families who were more dominant in taking care of their wives.

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Author's contributions

Made substantial contributions to conception and design, or acquisition of data, or analysis and interpretation of data: IY, SS, HSM, AM, TH; Involved in drafting the manuscript or revising it critically for important intellectual content: IY, SS, HSM; Given final approval of the version to be published. Each author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content: IY, SS, HSM, AM, TH; Agreed to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved: IY, SS, AM. All authors read and approved the final manuscript.

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**Availability of data and materials**

The data that support the findings of this study are available from the corresponding author, [IY], upon reasonable request

Declarations

Ethics approval and consent to participate
Not applicable

Competing Interest

The authors declare no competing interest

References

1. Rizki SR, Utami T, Danang D. Asuhan Keperawatan Nyeri Akut pada Pasien Post Sectio Caesarea di Ruang Gayatri RST Wijayakusuma Purwokerto. *J Manag Nurs.* 2024;3(2):334–40.
2. World health O. Caesarean section rates continue to rise, amid growing inequalities in access [Internet]. 2021. Available from: <https://www.who.int/news/item/16-06-2021-caesarean-section-rates-continue-to-rise-amid-growing-inequalities-in-access>
3. Kementrian Kesehatan RI. Enhanced Recovery after Caesarean Section (ERACS) [Internet]. 2022. Available from: https://yankes.kemkes.go.id/view_artikel/236/enhanced-recovery-after-caesarean-section-eracs
4. Riskesdas. Laporan Provinsi Jawa Tengah. 2018.
5. Demilew BC, Tesfaw A, Tefera A, Getnet B, Essa K, Aemero A. Incidence and associated factors of postdural puncture headache for parturients who underwent cesarean section with spinal anesthesia at Debre Tabor General Hospital, Ethiopia. 2021;9.
6. Vadhanan P. Recent Updates in Spinal Anesthesia-A Narrative Review. 2021;2:41–50.
7. Putri BSWR. Gambaran Dukungan Keluarga Pada Pasien Pre Operasi Sectio Caesarea Di Rumah Sakit Tk. li Udayana Denpasar. 2021;
8. Rangkuti WFS, Akhmad AN, Hari M. Dukungan Keluarga Berhubungan Dengan Tingkat Kecemasan Pada Pasien Pre Operasi Sectio Caesarea. *J Keperawatan Jiwa* [Internet]. 2021;9:409–18. Available from: <https://jurnal.unimus.ac.id/index.php/JKJ/article/viewFile/7202/pdf>
9. Agustina S. Hubungan Dukungan Keluarga Dengan Tingkat Kecemasan Ibu Pre Operasi Sectio Caesarea Di RSU PKU Muhammadiyah Gamping Yogyakarta. 2018.
10. Dina R, Toyibah A, Asworoningrum. Hubungan Peran Suami Dengan Kesiapan Ibu Menghadapi Sectio Caesarea Di Rumah Sakit Islam Universitas Islam Malang. *J Pendidik Kesehat.* 2018;7(2):113–24.
11. Novria Hesti, Zulfita. Peran Suami Dalam Mempercepat Proses Persalinan Istri. *J Abdi Mercusuar.* 2021;1(1):001–10.
12. Suciawati DDE, Nuryani. The Relationship of Husband Support with Pre-sectio Caesarea Wife Anxiety. *Nusant Hasana J.* 2021;1(2):99–103.
13. Joubert AE, Moulds ML, Werner-Seidler A, Sharrock M, Popovic B, Newby JM. Understanding the experience of rumination and worry: A descriptive qualitative survey study. *Br J Clin Psychol* [Internet]. 2022 Nov;61(4):929–46. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/35411619>
14. Wicaksana IPA, Shammakh AA, Pratiwi MRA, Maswan M, Azhar MB. Hubungan Dukungan Suami, Status Gravida, dan Kepatuhan Ibu Melakukan Antenatal Care (ANC) terhadap Tingkat Kecemasan Ibu Hamil Trimester III. *J Glob Ilm.* 2024;1(6):376–88.
15. Pardede JA, Purba JM. Family Support Related To Quality of Life on Schizophrenia Patients. *J Ilm Permas J Ilm STIKES Kendal.* 2020;10(4):645–54.
16. Nenko I, Kopeć-Godlewska K, Towner MC, Klein LD, Micek A. Emotional factors, medical interventions and mode of birth among low-risk primiparous women in Poland. *Evol Med public Heal* [Internet]. 2023;11(1):139–48. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/37252430>
17. Miller, Rollnick. Enhancing Motivation for Change in Substance Use Disorder





Treatment. In 2019. p. 21. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK571068/>

18. Thomson G, Morgan H, Crossland N, Bauld L, Dykes F, Hoddinott P. Unintended Consequences of Incentive Provision for Behaviour Change and Maintenance around Childbirth. 2014; Available from: <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0111322>

19. Yankouskaya A, Lovett G, Sui J. The relationship between self, value-based reward, and emotion prioritisation effects. *Q J Exp Psychol (Hove)* [Internet]. 2023 Apr;76(4):942–60. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/35543595>

20. Dinan TG, Kennedy PJ, Morais LH, Murphy A, Long-Smith CM, Moloney GM, et al. Altered stress responses in adults born by Caesarean section. *Neurobiol Stress* [Internet]. 2022 Jan;16:100425. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/35024387>

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