The Relationship of Postpartum Blues, Self Efficacy, Family and Socio-Cultural Support for the Implementation of Postpartum Exercise during the Covid-19 Pandemic at the Telagasari Karawang Community Health Center

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ABSTRACT

Maternal Mortality Rate (MMR) in Indonesia is still high. One of the causes of maternal death occurs in the postpartum period. Postpartum exercise is an effort to reduce maternal mortality because it is beneficial for maternal recovery during postpartum. The problem in this study is the high number of post-partum mothers who have not done postpartum exercise, and who do, not optimally. This study aims to analyze the post partum blues relationship, self-efficacy, family support and socio-culture towards the implementation of postpartum exercise during the Covid-19 period in the working area of the Telagasari Community Health Center, Karawang Regency in 2020. This study uses a quantitative approach with a cross sectional approach with the method. analytical descriptive. The population in this study amounted to 736 people. The research sample consisted of 185 people with stratified random sampling technique. Data collection in this study was carried out by using chi-square. Data were analyzed using univariate, bivariate, and multivariate analysis. The results showed that postpartum blues variables, self-efficacy and family support had a significant relationship, and postpartum blues mothers who had good family support tended to do puerperal exercise optimally 6.158 times compared to postpartum mothers who had low family support after being controlled by the post partum blues variable. and self-efficacy. It is hoped that the health ranks both across programs and sectors will empower families for the next postpartum exercise program

1. PRELIMINARY

Maternal mortality rate (MMR) is one indicator that can describe the welfare of the people in a country. According to data from the World Health Organization (WHO), MMR in the world in 2015 was 216 / 100,000 live births, or an estimated number of maternal deaths was 303,000 with the highest number in developing countries at 302,000 deaths, 20 times higher than MMR in developed countries, namely 239 / 100,000 live births, and in 2015 only 12 / 100,000 live births. The MMR is one of the targets set in the 5th Millennium Development Goals (MDGs) development goal to reduce it by three quarters in the 1990-2015 period. The MDGs ended in 2015 and WHO set a new agenda, namely the Sustainable Development Goals (SDGs), with the target of reducing MMR globally to below 70 / 10,000 live births by 2030. Maternal death is death during pregnancy or during a period of 42 days after termination of pregnancy, due to all causes related to or aggravated by pregnancy or its treatment, but not due to accident / injury. The main causes of maternal mortality are related to obstetric complications during pregnancy, childbirth and post-partum (Ramin and Ayuning, 2017). Meanwhile, MMR in Indonesia is high compared to Asian countries. The 2007 IDHS data recorded that MMR in Indonesia reached 228 / 100,000 live births (KH). Although this figure is considered to have improved compared to the previous year, the MDGs target is to reduce MMR to 102 / 100,000 (KH) by 2015 and still requires special efforts and hard work from all parties, including the Government, the private sector and the community. Meanwhile, a high MMR indicates a vulnerable degree of maternal health. (IDHS, 2009).

The puerperium period is the period after childbirth and the birth of the baby, the placenta, and the membranes needed to restore the uterine organs to the way they were before pregnancy with approximately 6 weeks. During the puerperium there will be changes both physically and psychologically. Physical changes include ligaments - ligaments are soft and loose, muscles are tense, the uterus is enlarged, and posture changes to compensate for changes in body weight during pregnancy. The puerperium is a prone period because various risks may occur, such as anemia, pre-eclampsia / eclampsia, post-partum hemorrhage, postpartum depression, and puerperal infection. According to the data, there are two of these risks that most often result in death in postpartum mothers, namely infection and bleeding. Based on the research, uterine involution in postpartum mothers who carry out early mobilization and postpartum exercise are all in good health, and there is an effect of early mobilization and postpartum exercise on uterine invasion. Thus, to reduce morbidity in the postpartum period, postpartum exercise can be done with the aim of stimulating the uterine muscles to function optimally so that postpartum hemorrhage is expected and returns the uterus to its original position. (Nuryani, 2017).

The benefits of postpartum exercise are restoring the strength of the pelvic floor muscles, tightening the muscles of the abdominal wall and perineum, forming a good posture and preventing complications. Complications that can be prevented as early as possible by implementing postpartum exercise are postpartum hemorrhage. When doing postpartum exercise, the abdominal muscles contract, which will help the involution process. One of the efforts to restore normalcy and increase the strength of the abdominal muscles is postpartum exercise (Ambarwati, 2010). Postpartum gymnastics is an exercise that can be done 24 hours after giving birth with movements that have been adapted to the conditions of the mothers after giving birth.

Postpartum exercise is useful for accelerating healing, preventing complications, restoring and strengthening the muscles of the back, pelvic floor muscles and abdominal muscles. (Indriyani, 2015). Factors that influence the implementation of postpartum exercise are internal and external factors. Internal factors consist of mother's characteristics, beliefs, psychology, and physiology. Meanwhile, external factors consist of family support and socio-culture. According to Aisyah (2010), psychological status affects the behavior of postpartum mothers in caring for themselves. In addition, the factors of knowledge, education, maternal health, motivation, culture and the role of health personnel also influence postpartum mothers in carrying out postpartum exercise. (Andi Halimah, Anshor, 2018).

Postpartum blues can occur in mothers who are in labor, and are a complex event that can cause stress. Fatigue, worries about the baby's needs, the need for rest, anxiety because of getting a good support system, if it continues without adequate knowledge, will be a trigger factor for the occurrence of postpartum blues and postpartum depression. If this happens, the postpartum mother will experience impaired ability to care for her baby, lack of energy, unable to concentrate, constantly upset and unable to meet the baby's need for love and attention. As a result, the postpartum mother feels guilty and loses confidence in her abilities.

Skills and competencies to motivate someone to act well, an attitude of wanting to move forward, and honing the ability to do better will encourage him to carry out the desired behavior more often than those who feel unable or unable. The self-efficacy of postpartum mothers in doing postpartum exercise is known from the expected results, namely the ability of respondents to do postpartum exercise in the right way and technique. Midwives need to carry out the efficacy assessment by evaluating during the postpartum mother doing postpartum exercise. In general, the mother's effort and readiness to do postpartum exercise can be seen from the self-efficacy value (Indriyani, 2015).

According to Purwanti in Setiadi (2014), family social support is a condition that is beneficial to individuals obtained from others who can be trusted, such as support from husbands, parents and siblings so that someone will know that someone else cares, appreciates and love him. Family social support can also be in the form of emotional care such as accompanying and helping to care for the baby. In his research conducted in Pekalongan, it was concluded that there

was a relationship between family social support and the level of maternal anxiety in caring for low birth weight babies.

Many health problems cannot be solved by medical science or biomedical technical approaches alone, but require synergy and collaboration with various socio-cultural disciplines. For this reason, the direction of social change, the socio-cultural condition of the recipient, their will and aspirations for change and social relations must be taken into account values and norms have been embedded in society (Tumanggor, 2010). The customs of the local area cannot be separated from the culture of postpartum care, because wherever they are there will be their own customs from the area which without exception all people also follow these things, because for them it must be done (Sri, 2015). In terms of postpartum care practices, body massage to restore body fitness after childbirth was done by 83.3% (Suryawati, 2007). The tradition of not leaving the house and not doing strenuous activities is still very strong so that early mobilization or postpartum exercise is considered a frightening activity, can be dangerous and affect the situation even though both are very useful to help accelerate involution (Ummamah, 2015).

Currently, although the benefits of postpartum exercise for health and recovery of the postpartum period are enormous, in fact the implementation of postpartum exercise is still low and has not been implemented optimally. A preliminary study on postpartum exercise which was carried out in July 2020 in the Telagasari Health Center work area, obtained from 30 respondents as many as 80% did not do postpartum exercise, and only 20%. Postpartum mothers who do puerperal exercise have not been optimally carried out either from their movements or regularities. The high number of postpartum mothers who have not done postpartum exercise is due to reluctance to move, the assumption that after delivery they feel healthy and safe, consider postpartum exercise less important, knowledge of the benefits of postpartum exercise is still low, fatigue and the assumption that postpartum mothers are free from risks will reduce the attention of the family so that it affects the psychology, the lack of family and community support for the activities and movements of the mother during the postpartum period because it is related to the socio-culture that is still strong in some village areas.

Of course, with the covid-19 pandemic, the implementation of postpartum exercise is increasingly limited due to various programs related to the prevention and handling of covid-19. Activities are carried out through online and offline approaches so that they require attractive and appropriate information media according to circumstances, limitations and community needs.

Based on the various problems, limitations, and potentials possessed in the implementation of postpartum exercise, this study takes the theme "The relationship of postpartum blues, self-efficacy, family and socio-cultural support for the implementation of postpartum exercise during the Covid-19 pandemic in the Telagasari Health Center work area" which aims to determine the postpartum blues relationship, self-efficacy, family support and socio-

culture with the implementation of postpartum exercise. Some of the factors studied were considered very dominant and received less attention. The research is expected to be able to help overcome the problem of mortality and morbidity during the puerperium through preventive and promotive efforts by optimizing the implementation of postpartum exercise which can ultimately reduce MMR.

2. METHOD

This research uses descriptive analytic method, which is a study that tries to explore the phenomenon that occurs and then analyzes the dynamics of the correlation between these phenomena. Quantitative in character with a cross sectional approach or cross-sectional, namely a study to study the correlation between risk factors or independent variables with the effects or dependent variables observed or data collection at the same time. The variables studied consisted of the dependent variable in the implementation of postpartum exercise and the independent variable postpartum blues, self-efficacy, family support, and socio-culture measured using a Likert scale. The research was conducted for 6 months, from September 2020 to February 2021. The primary data collection method was carried out by distributing questionnaires containing a number of written questions that were used to obtain information from the subject. Questionnaire in the form of closed questions by selecting the available answers with a check list ($\sqrt{}$).

The study population was 736 postpartum mothers who live in the working area of the Telagasari Public Health Center, Karawang regency, January - August 2020, consisting of 472 postpartum mothers and postpartum mothers who gave birth with SC 264 people. The sampling stage in this study begins with determining the minimum number of samples required is 185 people. The sampling method was taken by stratified random sampling, taken from each of the 14 villages that were taken professionally. The results of data collection were then analyzed correlatively using SPSS, with univariate, bivariate and multivariate analysis.

3. RESULTS AND DISCUSSION

The results of research implementation up to the univariate, bivariate and multivariate analysis stages are as follows:

UNIVARIATE ANALYSIS RESULTS

Table 1.Univariate Analysis of Respondents Distribution by Age in the Implementation of Postpartum Exercise during the Covid-19 Pandemic in the Work Area of the Telagasari Community Health Center, Karawang Regency in 2020.

Age	total	Percentage
< 20 years	9	4,9
20 – 35 years	147	79,5
> 35 years	29	15,7
total	185	100

In the table above, it can be seen that more postpartum mothers who have 20 - 35 years of age, namely 79.5% compared to postpartum mothers who have> 35 years of age, namely 15.7% and <20 years, namely 4.9% Thus, there are more post-partum mothers who have a healthy reproductive age than post-partum mothers whose reproductive age is unhealthy.

Parity	total	Percentage
< 2	62	33,5
2 – 5	121	65,4
> 5	2	1,1
total	185	100

In the table above, it can be seen that postpartum mothers with parity of 2-5 people are 65.4% more than postpartum mothers with parity <2, namely 33.5% and> 5 people, namely 1.1%. Thus, there were more postpartum mothers with parity of 2-5 people compared with parity <2 and> 5.

Table 3.Distribution of Respondents according to Postpartum Age in the Implementation of Postpartum Gymnastics during the Covid-19 Pandemic in the Work Area of the Telagasari Public Health Center, Karawang Regency, 2020.

Postpartum age	total	Percentage
8 – 28 days	95	51,4
29 – 42 days	90	48,6
total	185	100

In the table above, it can be seen that the postpartum mothers with the postpartum age of 8 - 28 days are slightly more, namely 51.4% compared to postpartum mothers with the postpartum age of 29 - 42 days, namely 48.6%. Thus, the postpartum mother with the postpartum age of 8-28 days (KF 2) was slightly more than the postpartum age of 29-42 days (KF 3).

Table 4.Distribution of Respondents According to Information on the Implementation of Postpartum Gymnastics during the Covid-19 Pandemic in the Work Area of the Telagasari Health Center, Karawang Regency, 2020.

Information	total	Percentage
Yes	121	65,4
no	64	34,6
total	185	100

In the table above, it can be seen that there were more postpartum mothers who got information about postpartum exercise, namely 65.4% compared to postpartum mothers who did not get information, namely 34.6%. Thus, there were more postpartum mothers who received information on postpartum exercise than those who did not.

Table 5.Distribution of Respondents According to Information Sources in the Implementation of Postpartum Gymnastics during the Covid-19 Pandemic in the Work Area of the Telagasari Community Health Center, Karawang Regency, 2020.

Sources of information	total	Percentase
Nakes	145	78,4
Non Nakes	40	21,6
total	185	100

In the table above, it can be seen that postpartum mothers who get more information from health workers, namely 78.4% compared to post-partum mothers who get sources of information from non-health workers, namely 21.6%. Thus postpartum mothers who get information sources from health workers are more than those who get information sources from non-health workers.

Table 6.Distribution of Respondents according to Postpartum Blues in the Implementation of Postpartum Gymnastics during the Covid-19 Pandemic in the Work Area of the Telagasari Community Health Center, Karawang Regency, 2020.

Post Partum Blues	Jumlah	Persentase
No *PP Blues*	91	49,2
Not *PP Blues possible*	94	50,8
total	185	100

In the table above, it can be seen that there were 50.8% more postpartum women who did not experience the postpartum blues compared to the postpartum women who were likely to experience the postpartum blues, namely 49.2%. Thus, there were slightly more postpartum blues than those who were likely to experience postpartum blues.

Table 7.Distribution of Respondents according to Self-Efficacy in the Implementation of Postpartum Gymnastics during the Covid-19 Pandemic in the Work Area of the Telagasari Community Health Center, Karawang Regency, 2020.

Self eficacy	total	Percentage
good	103	55,7
less	82	44,3
total	185	100

In the table above, it can be seen that postpartum mothers who have good self-efficacy are more, namely 55.7% compared to post-partum mothers who have less efficacy, namely 44.3%. Thus, there are more post-partum mothers who have good self-efficacy than those who have less self-efficacy.

Table 8.Distribution of Respondents according to Family Support in the Implementation of Postpartum Gymnastics during the Covid-19 Pandemic in the Work Area of the Telagasari Health Center, Karawang Regency, 2020.

Family support	total	Percentage
good	107	57,8
less	78	42,2
total	185	100

In the table above, it can be seen that the postpartum mothers who received good family support were 57.8% more than the postpartum mothers who received less family support, namely 42.2%. Thus postpartum mothers who get good family support are more than those who get less family support.

Table 9.Distribution of Respondents according to Socio-Culture in the Implementation of Postpartum Exercise during the Covid-19 Pandemic in the Work Area of the Telagasari Community Health Center, Karawang Regency, 2020.

Social culture	total	Percentage
Positive	114	61,6
Negative	71	38,4
total	185	100

In the table above, it can be seen that postpartum mothers who have a positive socio-culture are more than 61.6% compared to post-partum mothers who have negative socio-culture, namely 38.4%. Thus postpartum mothers who have a positive socio-culture are more than those who have negative socio-culture.

Table 10.Distribution of Respondents according to Exercise during the Covid-19 Pandemic in the Work Area of the Telagasari Health Center, Karawang Regency, 2020.

Implementation of postpartum	total	Percentage
Optimal	85	45,9
Not Optimal	100	54,1
total	185	100

In the table above, it can be seen that there were more postpartum mothers who did not optimal postpartum exercise, namely 45.9% compared to postpartum mothers who did optimal postpartum exercise, namely 54.1%. Thus, there were more postpartum mothers who did postpartum exercise than those who did optimal postpartum exercise.

4. BIVARIATE ANALYSIS RESULTS

THE RELATIONSHIP OF POST PARTUM BLUES WITH POSITIVE GYMNASTICS

Table 11. Bivariate Analysis of Respondent Distribution according to Postpartum Blues and Implementation of Postpartum Gymnastics during the

Covid-19 Pandemic in the Work Area of the Telagasari Community Health Center, Karawang Regency, 2020.

Post Partum Blues	postpartum				Total		OR (95% CI)	P Value
	Optimal		Not optimal		n	%		
	n	%	N	%				
Not PP Blues	34	37,4	57	62,6	91	100	0,503	0,021
Possible PP Blues	51	54,3	43	45,7	94	100		
total	85	45,9	100	54,1	185	100		

The results of the analysis of the relationship between post partum blues and postpartum blues showed that of the 91 respondents who were not post partum blues there were 34 respondents (37.4%) who carried out puerperal exercise optimally and from 94 respondents who were likely to post partum blues there were 51 respondents (54, 3%) who carry out postpartum exercise optimally. The results of statistical tests obtained p value = 0.021, it can be concluded that there is a difference in the proportion of optimal postpartum exercise between respondents who are not post partum blues and the possibility of post partum blues. The results of the analysis also obtained an OR value = 0.503, meaning that respondents who are not post partum blues tend to do puerperal exercise optimally 0.503 times less than respondents who are likely to be post partum blues or in other words respondents who do not post partum blues as an obstacle to doing senan postpartum optimally

The results of the study are in line with research conducted by Indriyani (2015), that there is a relationship between postpartum blues and the implementation of postpartum exercise at the Polindes Bunda Meddelan, Lenteng District in 2015, with an OR = 8,400, which means that 8,400 times postpartum blues determines the respondent to do puerperal exercise. Postpartum mothers who have peace of mind and have no psychological problems will certainly feel happier, more enthusiastic and easy to receive information that is useful for their health.

RELATIONSHIP OF SELF-EFFICIENCY WITH PUBLIC Gymnastics
Table 12. Bivariate Analysis of Respondents Distribution according to Self-Efficacy and Implementation of Postpartum Exercise during the Covid-19 Pandemic in the Work Area of the Telagasari Community Health Center, Karawang Regency, 2020.

Self efficecy	postpartum

	Optimal		Not optimal		Total n		OR (95% CI)	P value
	N	%	N	%	%			
good	74	71,8	29	28,2	103	100	16,470	0,000
less	11	13,4	71	86,6	82	100		
total	85	45,9	100	54,1	185	100		

The results of the analysis of the relationship between self-efficacy and postpartum exercise showed that out of 103 respondents who had good self-efficacy there were 74 respondents (71.8%) who carried out postpartum exercise optimally and of the 82 respondents who lacked self-efficacy there were 11 respondents (13.4%) who carry out postnatal exercise optimally. The results of statistical tests obtained p value = 0.000, it can be concluded that there is a difference in the proportion of optimal postpartum exercise between respondents with good self-efficacy and less self-efficacy. The results of the analysis also showed that the OR value = 16.47, meaning that respondents with good self-efficacy tend to do postpartum exercise optimally 16.47 times greater than respondents with less self-efficacy.

The results of the study are in line with Indriayani's research that the postpartum mother. Most of the postpartum exercise exercises were positive, while respondents who had negative self-efficacy were almost entirely negative. Self-efficacy can be a determining factor in the implementation of postpartum exercise. Midwives can make efforts to improve the quality of participation of mothers in the implementation of postnatal exercise through self-efficacy approaches. (Indriyani, 2015). Post-partum mothers with good self-efficacy will have good confidence and ability to receive information and train their skills to do postpartum exercise.

THE RELATIONSHIP OF FAMILY SUPPORT WITH PUBLIC Gymnastics

Table 13. Bivariate Analysis of Respondents Distribution according to Family Support and Implementation of Postpartum Gymnastics during the Covid-19 Pandemic in the Work Area of the Telagasari Community Health Center, Karawang Regency, 2020.

| Support family | postpartum | | | | Total | | OR | P |
| | Optimal | | Not optimal | | | | | |
	N	%	N	%	n	%	(95% CI)	value
good	76	71,0	31	29,0	107	100	18,796	0,000
less	9	29,0	69	88,5	78	100		
total	85	45,9	100	54,1	185	100		

The results of the analysis of the relationship between family support and postpartum exercise showed that out of 107 respondents who had good family support there were 76 respondents (71.0%) who carried out postpartum exercise optimally and of the 78 respondents who lacked family support there were 9 respondents (29%) who carried out postpartum gymnastics optimally.

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The results of the statistical test showed that the value of p = 0.000, it can be concluded that there is a difference in the proportion of optimal postpartum exercise between respondents who received good family support and less family support. The results of the analysis also showed that the OR = 18.79, meaning that respondents who had good family support tended to do puerperal exercise optimally 18.79 times greater than respondents who had less family support.

The results of the study are in line with the research conducted by Hartati (2018) that postpartum mothers who receive good support from the majority of the family do postpartum care, who receive sufficient support from the family who do postpartum care, a small proportion, and postpartum mothers who get less support from the family do not exist who perform postpartum care. (Hartati, 2018). The family is the closest person to the postpartum mother, very influential on her life so that good family support is needed in postpartum exercise.

SOCIAL-CULTURAL RELATIONSHIPS WITH PUBLIC Gymnastics

Table 14. Bivariate Analysis of Respondents Distribution according to Socio-Culture and Implementation of Postpartum Exercise during the Covid-19 Pandemic in the Work Area of the Telagasari Community Health Center, Karawang Regency, 2020.

Social culture	postpartum				Total		OR (95% CI)	P Value
	Optimal		not optimal					
	N	%	n	%	n %			
Positive	47	41,2	67	58,8	114	100	0,609	0,103
Negative	38	53,5	33	46,5	71	100		
total	85	45,9	100	54,1	185	100		

The results of the analysis of the relationship between socio-culture and postpartum exercise showed that out of 114 respondents who were positive socio-culture there were 47 respondents (41.2%) who carried out postpartum exercise optimally and from 71 respondents who were negative socio-culture there were 38 respondents (53.5%) who carry out postnatal exercise optimally. The results of statistical tests obtained p value = 0.103, it can be concluded that there is no difference in the proportion of optimal postpartum exercise between respondents who are socially positive and socially negative.

Research is not in line with research conducted by Rochiana, Pratiwi (2017) that there is a significant relationship between postpartum exercise, early mobilization, and local traditions with uterine involution (Rochiana, Pratiwi, 2017). This may be differences in socio-culture, beliefs and customs that are different in each region in various regions, education level, level of knowledge or other factors that are more dominant in influencing postpartum exercise.

5. MULTIVARIATE ANALYSIS RESULTS

Multivariate analysis aims to determine the multivariate model, to estimate its strength and significance and to determine the dominant factors between post partum blues, self-efficacy, family support, and socio-culture with the implementation of postpartum gymnastics during the Covid-19 pandemic in the Telagasari Health Center work area in 2020. The analysis used simple logistic regression with the backward method then carried out multivariate modeling with multiple regression tests. The results of the multivariate analysis are as follows

Table: 15 Multivariate Analysis of Multiple Logistic Regression Variables Determinant factors of post partum blues, self-efficacy, family support, with the implementation of postpartum exercise during the Covid-19 pandemic in the Telagasari Health Center work area in 2020

step	Variable	score p	OR	Change OR	information
Full Model	Postpartum blues	0,032	0,424		
	Self eficacy	0,006	4,804		
	Support family	0,002	6,107		
	Social culture	0,563	1,269		Removed from model
1	Postpartum blues	0,039	0,453	-6,43	
	Self eficacy	0,007	4,524	6,19	
	Support family	0,002	6,158	-0,83	
	Social culture				Not confounding

In the full model stage, all candidate model variables are entered simultaneously, including because the p value <0.25. The confounding test for socio-cultural variables was excluded because the significant value was> 0.005. The final result indicated that three variables were related to nifasiary exercise. (table 16)

Table 16. The Final Model of Multiple Logistic Regression Multivariate Analysis The determinant factors of post partum blues, self-efficacy, family support, with the implementation of postpartum exercise during the Covid-19 pandemic in the Telagasari Health Center work area in 2020.

Variable	B	Wald	Sig	Exp (B)	95% CI For Exp (B)	
					Lower	Upper
Post partum blues	-.792	4.264	0.039	0.453	0.214	0.961
Self eficacy	1.509	7.188	0.007	4.524	1.501	13.636

Support family	1.818	9.657	0.002	6.158	1.957	19.377

From the results of the above analysis, it can be concluded that the variables that remain significantly related to the implementation of postpartum exercise are post partum blues, self-efficacy and family support. Family support is the most dominant variable. From the model above, it can be explained that postpartum mothers who have good family support tend to do puerperal exercise optimally 6.158 times compared to postpartum mothers who have low family support after being controlled by the post partum blues and self-efficacy variables.

6. CONCLUSION

There is a significant relationship between postpartum blues, self-efficacy, and family support in the implementation of postpartum exercise. Family support is the most dominant variable, which means that postpartum mothers who have good family support tend to do puerperal exercise optimally 6.158 times compared to postpartum mothers who have low family support after being controlled by postpartum blues and self-efficacy variables.

7. SUGGESTION

Related agencies can increase cooperation both across programs and across sectors in postpartum exercise program activities through empowering families as the closest people who can motivate postpartum mothers in carrying out postnatal exercise. Creating a model as a media for socialization and guidance that attracts more interest so as to increase public interest in supporting the implementation of postnatal exercise.

REFERENCE

Asmuji. and Indriyani, D. (2016) 'Family Centered Maternity Care Model as a CompetentMothering Optimization Strategy', Ners Airlangga, 11 (1), pp. 17–28. Available at:
https://e-journal.unair.ac.id/JNERS/article/view/1905/pdf_17
Endriyani, A. (2020) 'The experience of postpartum mothers towards culture in postpartum care', Journal of Midwifery, 9 (1), p. 45. doi: 10.26714 / jk.9.1.2020.45-52.
Heni, P (2018) 'Postpartum and Breastfeeding Midwifery Assistance', Midwifery Teaching Materials. Ministry of Health of the Republic of Indonesia Center for Health Human Resources Education, 2018 Edition of the Health Human Resources Development and Empowerment Agency.
Hartati, I. (2018) "The Relationship between Family Support and Attitudes Toward Post Partum Care Independently in Mothers with Sectio Caesarea Delivery at Rsud Langsa", Journal of Education and Health Practices, 1 (1). Available at:

http://www.stikescnd.ac.id/jurnal/index.php/smart/article/view/8.

Halimah, Anshor (2018) 'Factors Affecting the Implementation of Postpartum Exercise', Media Journal of Physiotherapy, Makassar Health Polytechnic, at:

http://journal.poltekkesmks.ac.id/ojs2/index.php/mediafisio/article/view/801

Hida Fitri M., M. (2011) 'Training on Posyandu Cadre Skills', Journal of Public Health, 7 (1), pp. 22–27. doi: 10.15294 / kemas.v7i1.1789.

Indriyani, R. (2015) "The Relationship of Postpartum Blues, and Self Efficacy with the Implementation of Postpartum Gymnastics at the Tunas Bunda Polindes, Manddelen Village, Lenteng District, 2015", Journal of Health "Wiraraja Medika", pp. 21–35.

Maqfiroch, A. F. A. (2018) "The Effectiveness of Training in Increasing the Role of Cadres as Family Assistants for Pregnant Women at Ii Sumbang Community Health Center", Kesmas Indonesia, 10 (1), p. 13. doi: 10.20884 / 1.ki.2018.10.1.507.

Nuryani (2017) "The Effect of Early Mobilization and Postpartum Gymnastics Against Involution of the Postpartum Uterus in An-Nisa Ward, PKU Muhammadiyah Bantul Hospital", Nursing.

Prasetyawati, N., Tamtomo, D. G., Hanim, D., & Salimo, H. (2019). Pregnant gymnastics, ANC, and IEC pregnancy lower the stress on pregnant women. Bali Medical Journal, 8 (2), 509. https://doi.org/10.15562/bmj.v8i2.1389

Ramin, syaflindawati and ayuning, dwi putri (2017) "The Relationship of Postpartum Exercise with the Decrease in Uterine Involution in Post Partum Mothers Day 1-3 at RSIA CICIK Padang in 2016", Jik- Journal of Health Sciences, 1 (1), pp. 117–122. doi: 10.33757 / jik.v1i1.5.

Roichana, S. and Pratiwi, Y. A. (2019) "The Relationship of Postpartum Exercise, Early Mobilization, and Postpartum Traditions to the Involution Process in Post Partum Mothers", Indonesian Midwifery Scientific Journal, 7 (04), pp. 225–233. doi: 10.33221 / jiki.v7i04.444.

Rianti, E., Elina, Mugiati, Fratidhina, Y., Suparman, & Triwinarto, A. (2019). Effectiveness of the Otaria's postpartum gymnastic model and caregiver assistance on decreasing of uterine fundal height in postpartum mothers. Indian Journal of Public Health Research and Development, 10 (6), 758–763.

https://doi.org/10.5958/0976-5506.2019.01369.X.

Uba, M. N., Alih, F. I., Kever, R. T., & Lola, N. (2015). International Journal of Nursing and Midwifery. International Journal Of Nursing and Midwifery, 7 (4), 54–60.

https://doi.org/10.5897/IJNM20.