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Family support in postpartum perineal wound care from a cultural perspective: A qualitative study

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Abstract

Background: Postpartum mothers undergoing vaginal delivery face a significant risk of perineal trauma, a condition with a high global prevalence (2.7 million cases in 2020, with 75% of the incidence in Indonesia) that, if not managed properly, can lead to serious complications such as infection, prolonged pain, and sexual dysfunction, exacerbated by the anatomical reality of persistent exposure to lochia moisture. Effective recovery fundamentally relies on crucial factors including hygiene, nutrition, and early mobilization, yet the role of family support a key determinant in decision-making and practical care remains underexplored, particularly in the highly multicultural context of Indonesia. This cultural perspective is crucial because local traditions and beliefs often introduce dietary or activity taboos that directly impact healing. Therefore, to address the common morbidity associated with perineal wounds and the recorded perineal rupture rate of 54% in regions such as West Java, this qualitative study is urgently needed to address the knowledge gap by in-depth exploring: "How does family support influence perineal wound healing from a cultural perspective?"

Purpose: To deeply explore and describe the various forms of family support provided to postpartum mothers for perineal wound care, specifically examining the influence of diverse cultural aspects (cultural variables) within the Indonesian context. This focus on the cultural dimension represents the novelty of this research.

Results: From analysis of interview transcripts with participants revealed two main themes describing the dimensions of family support: emotional, instrumental, and informational. Each theme consists of several. Emotional: Providing a sense of security and peace, as well as mental strength within the nuclear family. Instrumental: Providing nutritious food and drinks, managing the household, and caring for the baby. Informational: Information from health workers conveyed by the family, and selectively adapted traditional information..

Conclusion: Family support for perineal care in postpartum mothers, viewed from a cultural perspective, is comprehensive and can be categorized into four distinct themes. These themes highlight how culturally embedded practices and family dynamics significantly influence and enhance mothers' ability to perform appropriate perineal wound care, ultimately promising improved maternal health outcomes.

Keywords: Cultural Perspective; Family Support; Perineal Wound Care; Postpartum; Perineal Wound Care; Qualitative.

INTRODUCTION

Cases of perineal wounds in postpartum mothers are still frequently encountered in Indonesia. One of the factors that can influence the healing of perineal wounds is the role of the family in the care of perineal

wounds (Salsabilla, Oktariza, & Purwoko, 2025). Four major themes emerged from the data describing family support provided to women during and after childbirth. These themes were family support during

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childbirth, family support in the postpartum period, importance of family support during and after childbirth, and challenges related to receiving family support. Supportive family members primarily included the husband, the woman's family, and the family-in-law, according to the traditions inherited in the Jordanian context and culture (Ababneh, Alrida, Abu-Abbas, Rayan, Abu Sumaqa, Alhamory, & Al-Zu'bi, 2024).

Some fatal complications generally often occur in the first week of the postpartum period such as bleeding, sepsis and eclampsia (Yustiawan & Nandini, 2018). The risk of complications in postpartum mothers can also be influenced by several factors including the mother's nutritional status during pregnancy, socioeconomic conditions, health conditions during pregnancy until birth, and most importantly the availability and accessibility of mothers to health services in monitoring their health conditions, especially during the postpartum period (Indrayati, & Hikmah, 2017).

According to estimates, 60% of maternal pregnancy deaths occur after birth, and 50% occur within the first 24 hours of puerperal life. In the United States, the rate of infection during the puerperium is 2.7%, with 0.7% evolving into acute infection. A compromised immune system, inadequate care and cleanliness in birth canal injuries, and infection can occur when mothers give birth in the presence of health workers who use non-sterile tools are all factors contributing to the high infection rate (Desti & Yanuarti, 2023).

A perineal wound is a wound caused by a tear in the birth canal, either due to a rupture or an episiotomy during delivery. Many factors influence the healing process of perineal wounds, including culture. The influence of culture on a community's health status cannot be ignored, as health is an integral part of culture. Improper perineal care can lead to postpartum infections (Rahmawati & Tridiyawati, 2023). Postpartum infections remain the leading cause of maternal mortality. Postpartum mothers with perineal wounds are particularly susceptible to infection, as poorly cared for wounds can significantly impact wound healing (Afrilia & Sari, 2018).

The government's health care policy on postpartum care, which includes six standards of care, has not been implemented optimally. This is

influenced by cultural perspectives still believed and practiced by Indonesians. Cultural practices during the postpartum period, such as abstinence from food, hot stone compresses, herbal concoctions, herbal baths, and traditional massage therapy, are still widely practiced. These cultural practices have a harmful impact on maternal health, requiring modifications to practices that endanger health (Sitohang, 2023). Traditional postpartum practices are believed to be essential for maternal and infant health in almost all regions of Indonesia. These practices, associated with behaviors, activities, and traditional beliefs, have profound cultural and social significance, varying from region to region (Seran, Huru, Angraeningsih, & Al-Tadom, 2024).

Culture is a crucial factor in shaping action. Adequate cultural influence significantly impacts perineal wound care in postpartum mothers, resulting in appropriate and correct care. Cultural influence on postpartum mothers regarding perineal wound care (Muhammad, Ibrahim, Rahayu, & Ati, 2025). Some postpartum mothers experience difficulty coping with fatigue, which can slow their physical recovery after a normal delivery. This issue makes it crucial to treat postpartum mothers with postpartum wound care, especially if the mother has an episiotomy or a tear in the perineum. This care includes regularly cleaning the wound, applying bandages or stitches if necessary, and ensuring that the wound remains dry and protected from infection. Various treatments are often used to heal wounds after a normal delivery. One treatment still practiced by Indonesians is traditional medicine, adapted to their culture (Baghirzada, Ibrahimov, & Macarthur, 2018).

RESEARCH METHOD

This study employed a qualitative research design with a narrative approach, which facilitated direct and independent exploration, analysis, and description of the phenomenon under study, without relying on untested assumptions. Ethics clearance was officially obtained (No. 279/09.KEPK/UBK/IX/2025). Participants were selected using purposive sampling, focusing on family members living with and accompanying postpartum mothers experiencing perineal wounds within 1 to 7 days postpartum, ensuring representation from diverse cultural backgrounds. Data collection was conducted through

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in-depth semi-structured interviews.

The findings are expected to provide an important foundation for developing culturally sensitive nursing care services aimed at improving perineal wound healing. This study aims to explore in-depth family support for perineal wound care in postpartum mothers from a cultural perspective. Interview data was recorded directly after obtaining consent from the participants. The researcher used a guide. During the interview process, the researcher recorded all interviews and took notes to ensure no questions were missed. The researcher also brought notes for any important points to note. Interviews were conducted using a semi-structured questionnaire developed by the researcher.

Data validity (validation testing) in this study was conducted using triangulation techniques. Source triangulation was used. Source triangulation was used to compare and cross-check data obtained from participants. The participants in question were the husbands and families of postpartum mothers. The researcher conducted triangulation immediately after interviewing each participant to avoid bias. The study was conducted in the Cileunyi Kulon sub-district.

RESEARCH RESULTS

The research findings from interviews with participants revealed three themes:

Emotional Support

Participants in the study revealed that family support contributes to peace of mind for postpartum mothers. This was confirmed by statements from husbands and close family members:

P5: "...I often stay with her when she cries because of the pain. I tell her, every mother feels that way, and she'll get better if she's patient. I also help take care of the baby so she can take a short nap."

P6: "I often talk to her so she doesn't think about the pain all the time. Sometimes I say, 'The important thing is to be healthy and patient, and then you can play with the baby again.' I also praise her for having the courage to have a natural birth."

P7: "...I massage her back and legs to help her relax. Sometimes I chat with her so she doesn't think about the pain all the time."

Instrumental Support

Instrumental support provided by families includes

assistance with housework, meeting nutritional needs, and accompanying mothers during perineal wound examinations. The instrumental support provided by families is evident in the participant statements obtained from the research results:

Wound Care:

P1: "Yes, I help, Ma'am. Sometimes I prepare warm water for him to wash his buttocks, then help him get his medicine and sanitary napkins. Sometimes, if he has difficulty moving, I help him wipe with clean tissues."

P2: "Yes, I help every day, Ma'am. Usually I prepare warm water for him to wash his buttocks, then help him get clean sanitary napkins..."

Taking Over Household Duties and Baby Care:

P2: "...Sometimes I also help bathe the baby so he can rest for a while."

Nutritional Needs:

P1: "...Sometimes I buy him fish, vegetables, and fruit to help his wounds heal quickly."

P2: "...I also always cook clear vegetable soup, snakehead fish, and chicken liver so that the blood flow is restored quickly and the wound heals quickly."

Informational Support

Informational support was divided into two sources: from health workers, as expressed by the family, and from tradition-based sources. The statements obtained from the research results are:

Health workers, as expressed by the family:

P1: "The midwife said not to use any concoctions, just clean water and mild soap."

P7: "Yes, ma'am. When the midwife came to the house, she said not to put any powder or oil on the wound. Just clean water and dry it with a tissue...."

P8: "... Clean the wound with clean water and dry it with a tissue..."

Tradition-Based

P6: "I don't help directly with that, but I prepare boiled betel leaf water every morning and evening. I taught her how to wash herself: pour from front to back so dirt doesn't get into the wound."

P7: "I learned this from my mother, ma'am. She said betel leaves are good for drying wounds, and turmeric can help remove the smell of blood. But I also asked the midwife during my checkup, and she said it's okay as long as the water is clean and not too hot."

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P7: "I learned this from my mother, ma'am. She said betel leaves are good for drying wounds, and turmeric can help remove the smell of blood. But I also asked the midwife during my checkup, and she said it's okay as long as the water is clean and not too hot." P4 "P: ... In this village, if someone has just given birth, I usually help them learn how to treat the wound using boiled pandan leaves and turmeric. I use the water to wash the wound, so the stitches dry quickly and don't smell."

The Role of Reminders:

P7: "Yes, ma'am. I often remind her to take her midwife's medication on time and to change her sanitary napkin every four hours. If she forgets, I'll help her get it."

P3: "I often remind her to change her sanitary napkin two to three times a day, and don't wait until it's full. If she forgets, I'll say, 'Come on, change it first, it'll make it itchy.'"

P1: "I often remind her, ma'am. Because when she's tired from taking care of the baby, she sometimes forgets to change her sanitary napkin."

DISCUSSION

Emotional Support

Emotional support plays a crucial role in maintaining a balanced psychological state for postpartum mothers and can increase their motivation and compliance with wound care. This ultimately has a positive impact on the healing process, making it more effective and faster. This form of support is usually provided by those closest to them, such as husbands, mothers, in-laws, or other family members, through attention, empathy, affection, and concern for the mother's condition after childbirth (Melinda, Yusuf, & Hamzah, 2017).

This support can be demonstrated in various ways, for example, by listening to the mother's complaints about pain or concerns about possible infection, providing a sense of comfort and security, providing emotional support, and helping reduce stress levels during the perineal wound healing process.

The findings of this study indicate that the emotional support received by mothers after childbirth is a major factor in reducing anxiety and pain perception. This is consistent with the concept of

Emotional Support in Social Support Theory, which emphasizes the importance of expressions of affection, empathy, attention, and other forms of encouragement so that individuals feel valued, loved, and cared for (Cohen & Wills, 1985).

Supporting Quotes

P5: "...I often accompany her when she cries because of the pain. I tell her, 'All mothers feel that way, and it will get better if you're patient.' I also help look after the baby so she can take a short nap."

P6: "I often chat with her so she doesn't think about the pain all the time. Sometimes I say, 'The important thing is to be healthy and patient, and then you can play with the baby again.' I also praise her for having the courage to have a natural birth".

Instrumental Support

Instrumental family support, such as taking over housework and providing wound care needs, is an important element in postpartum maternal recovery. This assistance allows the mother to get the optimal rest needed for perineal wound healing (Jantik & Sulastri, 2025). Husband's support also contributes to reducing the mother's physical and emotional burden, thereby minimizing postpartum stress (Ningsih & Harahap, 2022). Practical measures including preparing warm water, helping with baby care, and providing nutritious food can prevent excessive activity that risks causing dehiscence. This is in line with previous findings which confirmed that family involvement plays a role in accelerating the recovery process of postpartum mothers (Nandia, Anggorowati, & Asmara, 2021).

Supporting Quotes

P1: "Yes, I help, Ma'am. Sometimes I prepare warm water for him to wash his buttocks, then help him get his medicine and sanitary napkins. Sometimes, if he has difficulty moving, I help him wipe with clean tissues."

P2: "Yes, I help every day, Ma'am. Usually, I prepare warm water for him to wash his buttocks, then help him get clean sanitary napkins".

Informational Support:

The family plays a role in conveying and reminding him of information related to wound care.

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In this study, sources of informational support came from health workers (midwives) and traditional communities (parents and traditional leaders), reflecting the continuity of cultural values within the community. Information provided regarding perineal wound care has been shown to support the healing process (Ningsih & Harahap, 2022), in line with findings that good knowledge contributes to proper wound care practices (Marlina, 2022).

Furthermore, families ensure maternal adherence to care regimens, such as taking medications and changing sanitary napkins, to prevent infection and support nutritional needs. However, this study also found culturally based recommendations and prohibitions given to postpartum mothers. This situation, as explained by previous researchers, is related to families' limited understanding of postpartum maternal nutritional needs, especially among groups with lower levels of education and socioeconomic status, who tend to adhere to traditional taboos (Ade, Pratheeka, & Guthi, 2023).

Supporting Quotes

Health Worker-Based:

P1: "The midwife said not to use random concoctions, just clean water and mild soap."

P7: "Yes, ma'am. When the midwife came to the house, she said not to apply any powder or oil to the wound. Just use clean water and dry it with a tissue...."

P8: "..... The wound was cleaned with clean water and dried with a tissue..."

Perineal Wound Care:

P6 "I don't help directly with that, but I prepare boiled betel leaf water every morning and evening. I teach her how to wash herself: pour from front to back to prevent dirt from getting into the wound."

P7 "I learned this from my mother, Ma'am. She said betel leaves are good for drying wounds, and turmeric can help remove the smell of blood. But I also asked the midwife during my checkup, and she said it's okay as long as the water is clean and not too hot."

P4 "P: ... In this village, if someone has just given birth, I usually help show them how to treat the wound using boiled pandan leaves and turmeric. I use that water to wash the stitches so they dry quickly and don't smell."

Nutrisi:

P2: "...always cook her clear vegetable soup, snakehead fish, and chicken liver so her blood will recover quickly and her wounds will heal quickly."

P4: "...Ma'am. When you just give birth, you shouldn't eat salted fish, chili sauce, or jackfruit. They say it will take a long time for the stitches to heal and sting." "...I also often bring her turmeric and tamarind herbal drink, Ma'am. They say it helps cleanse the blood and keeps her body from aching."

P6: "...I also cook her clear vegetable soup, chicken liver, snakehead fish, and green bean porridge so she can recover quickly." "...I also give her boiled turmeric and ginger water to drink, so she won't catch gas and her postpartum blood will come out quickly. I believe it helps with internal healing."

CONCLUSION

This study shows that family support is a fundamental pillar in the successful care and recovery of perineal wounds in postpartum mothers, with a holistic and multidimensional character encompassing emotional, instrumental, and informational aspects. Emotional support acts as an effective stress buffer, reducing anxiety and pain perception through moral reinforcement and a calming presence. Instrumental support, in the form of direct assistance such as providing warm water, changing sanitary napkins, and taking over household chores, has proven crucial for ensuring optimal rest and preventing complications. Meanwhile, informational support obtained from both healthcare professionals and culturally based practices, such as recommendations for using clean water or the use of boiled water from betel leaves, binahong, and pandan rovides practical knowledge that strengthens mothers' capacity for self-care. Overall, these three forms of support contribute synergistically to improving comfort, treatment compliance, and accelerating the healing process.

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