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THE EFFECT OF BOX BREATHING IN POST PARTUM WOMAN

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ABSTRACT
Factors influencing this include a family history of psychological conditions, childhood trauma, reproductive health factors, and unpleasant experiences during childbirth. Objective: This study aims to determine the effect of box breathing therapy on postpartum mothers. Quasi-experimental pre-post one-group design. This study began with an in-depth exploration of the psychological condition of 55 postpartum mothers. The questionnaire used is the Postpartum Specific Anxiety Scale (PSAS) is validated by Rasch model, alpha coefficient 0,94, unexplained variance values does not exceed 15% and separation item 3.06. The research findings after box breathing showed that 54 respondents experienced a decrease in anxiety scores, while 1 respondent's anxiety score remained constant. 3 respondents were in the anxiety category, and 52 respondents were in the category of not experiencing anxiety. Relaxation therapy with box breathing can be one alternative in managing anxiety in postpartum mothers.

Keywords: anxiety; box breathing; depresi; maternal anxiety; post partum

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INTRODUCTION

Childbirth is the process by which a woman releases fetus and placenta (Hutchison J, 2025). This birthing process impacts the mother both physically and psychologically, especially if she experiences cultural shock, social experience, economic difficulties, and the presence of social support (BS, 2021). In psychiatric nursing, this issue is a primary target for psychosocial problems that must be addressed. Additionally, the feelings experienced by mothers after childbirth include trying to combat the signs and symptoms of labor that cause stressors, cultural stigma, difficulty finding suitable healthcare professionals and an environment that is aware of the risk of psychological problems (Beck, 2023). Influencing factors include a family history of psychological conditions, childhood trauma, reproductive health factors, and unpleasant experiences during childbirth (Landman A, 2024).

These factors affect the mother's mental condition, and I the study (Parivash Ahmadpour, 2023) it was found that the mother's mental condition is related to the occurrence of anxiety and depression. On this study (Manoharan Renugasundari, 2023), from 36th weeks of pregnancy, the mother already showed signs of stress and was at risk of depression, based on (Maleesa M. Pathirana, 2023), is found anxiety problems. Therefore, according to (Wojcieszek AM, 2023)), morhers giving birth must be under supervision for 42 days, as this period is critical for women, babies and families. Therefore, there is a need anxiety therapy that can be used to reduce anxiety levels I postpartum mothers and prevent depression. One of the therapies used is box breathing. . The aim of this study is to understand the effect of box breathing for increasing anxiety post-partum

METHOD

The research design is a quasi-experiemntal pre-post one-group design. This study began with an in-depth exploration of pshychological condition of postpartum mothers. The questionnaire used is postpartum specific anxiety scale (PSAS), is validated by Rasch model, alpha coefficient 0,94, unexplained variance values does not exceed 15% and separation item 3.06 (Gumilang & Linasari2, 2024). The dependent variable in this study is box breathing. The population in this study consists

of postpartum mothers from first day after delivery up to 6 months postpartum, as this period is at risk of high stress. The sample were taken according to the quota sampling technique, with the criteria being postpartum women within the 1–6-month range, history of traumatic childbirth, husband who work. The sample of the quota was 55 for the quantitative study.this research will be conducted by administering the PSAS questionnaire before box breathing is performed. After that, the respondents will perform box breathing and then measurements will be taken again using the PSAS.This research has ethichal approved in STIKES Telogorejo No 093/VII/EC/P3M/STIKES/2025

RESULT

Table 1.
Respondents Characteristic: Ages (n= 55)

Respondents Characteristic	N	%
Usia		
16-25 years old	21	38%
26-30 years old	18	33%
31-35 years old	10	18%
36-40 years old	5	9%
Above 41 years old	1	2 %
Amount	55	100%

Table 2.
Respondents Characteristic: Care Support (n= 55)

Respondents Characteristic	N	%
Care Support		
Helped by husband	25	45.5%
Helped by famillies	23	41.8%
By themselves	7	12.7%
Amount	55	100%

Table 3.
Respondents Characteristic: Sleep Quality (n= 55)

Respondents Characteristic	N	%
Sleep Quality		
Sleep Soundly	36	65.5%
Sleep Poorly	19	34.5%
Amount	55	100%

Table 4.
Respondents Characteristic :Breastfeeding (n= 55)

Respondents Characteristic	N	%
Breastfeeding		
Breast milk	29	52.7%
Formula milk	13	23.6%
Breast and formula milk	13	23.6%
Amount	55	100%

Tabel 4.
Respondents Characteristic: Anxiety (n= 55)

Anxiety *Pre* and *Post Box Breathing*	N	Total	%	Total
No anxiety	52	55	96%	100%
Anxiety	3		4%	
Decreasing score	54	55	98%	100%
Constant score result	1		2%	

DISCUSSION

In this study, the respondents were aged 16-41 years. The largest number of respondents were in the 16-25 aged group. One of factors for respondets who became pregnant and gave birth at a young age was unwanted pregnancy, due to enviromental factors and the economic situation of their parents. Parents believe that if their child gets married, the financial burden will be reduced. In (Worku, Tessema, Teshale, & Yeshaw, 2021) , it found the discovery of pregnancy in the 15-19 age group is due to several factors, it is caused family's economic status, the desire to have sexual relations, media exposure, education level, and the head of the house'hold condition. During in depth exploration, the mother gave birth at age of 16 due to premarital sexual behavior. Premarital behavior can occur because of a lack of uderstanding of the subsequent consequences, and it also (Moshi & Tilisho, 2023) , found early pregnancy is due lack of understanding of sexual and reproductive health.

Unplanned pregnancies impact the birthing process and care support. Unplanned pregnancies lead to a lack of the social support mothers need (Lundsberg, Cutler, Stanwood, Yonkers, & Gariepy, 2020). In this study, there was only one respondents who were self-caring, married, but their husbands were busy working and their parents lived far away from them. Three respondnets who were found to be experiencing anxiety due to self-care, It also found (Taylor, et al., 2021), mothers who care for their babies themselves are at risk of experiencing psychological problems such as loneliness and are at risk of depression.

Another issue that can exacerbate mother's psychological problems after childbirth is sleep quality. Based on data, 19 respondents or about 34.5% experienced poor sleep quality, characterized by restless sleep and frequent awakenings.This issue is one of the most common problems for mothers. According to the assessment of the respondets, they often woke up because the baby was hungry and needed to be breastfed or given formula. Based on (kun & Lac, 2023), explaiing that 67.8% of postpartum mothers experience insomnia and poor sleep quality, making it a risk factor for postpartum anxiety and depression..

Another issue that needs to be considered is the breastfeeing process, because based on interviews with respondents, one of the perception is that someone is considered a complete mother because ther breastfeed, which puts pressure on postpartum mothers. Among the 55 respondents, 29 exclusively breastfed, 13 gaave breast milk and formula milk, and 13 mothers exclusively gave formula milk. When looking at the results of the anxiety measurement, 17 respondents scored below 80 and the rest scored above 80, indicating that there 35 respondets were in the anxiety risk category. Among the respondents working postpartum mothers chose to combine breastfeeding and formula. In some cases, respondents who are mothers give up on breastfeeding because the amount of milk produced is small. In some studies, the milk that comes out is an indicator of the mother's anxiety level, in other hand (Trinda Penniston, 2020) it found that mothers do not breastfeed but still have family support can reduce postpartum anxiety level. The most influential factor is the pressure from the enviroment for mothers to breastfeed; if this pressure is absent, postpartum mothers are not at risk maternal anxiety and postpartum depression (Trinda Penniston, 2020).

The factors and explanations in the previous paragraph can explain why three respondents were found to experience anxiety. This is because family and enciromental support around the respondents is still high, so 52 respondents are in the category of not experiencing anxiety. However, it should be noted that three are 35 respondents whose anxiety screening scores are above 80, where this questionaire defines anxiety as a score of 112. Therefore, it is necessary to pay attention to prevent postpartum anxiety postpartum depression. Based on the result of the PSAS post-tes questionaire, there was a decrease after box breathing intervention was administered. This box breathing intervention was only performed once. Based on (Avudaiselvi & Prabha, 2025) and (Yu-Fen Chen RN, 2025) explains box breathing can decrease anxiety on women.

CONCLUSION

Based on results, respondents experienced a decrease in PSAS scores after being given box breathing, indicating box breathing can be one of the respiratory relaxations rechiques that can be used in postpartum women. This action can be used at ay time, whenever the mother is experiencing pressure, stress and anxiety.

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