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# Providing Health Education with Leaflets and Perineal Wound Care by Leaflet and Song for Postpartum Mothers

# Fitria Candra Fera 1\*, Sri Rahayu 2, Ida Ariyanti 3

1,3 Poltekkes Kemenkes Semarang
 Poltekkes Kemenkes Denpasar
 Corresponding author: candrafera10@gmail.com

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### **ABSTRACT**

Perineal wound healing is an important aspect of postpartum care that affects the quality of life of postpartum mothers. Proper care and effective health education are considered to support the healing of these wounds. Health education on perineal wound care has become a major focus in health research because of its important role in increasing knowledge and awareness of postpartum mothers on how to care for perineal wounds effectively. Good knowledge of perineal wound care can help prevent infection and accelerate the healing process, thereby improving the quality of life of postpartum mothers. Knowledge given by leaflet and song media so that it can be accept by postpartum mothers easily. This research aimed to know the common description of giving health education by leaflet contained perineal wound care. This is case study research. The data taken in the working area of Kandangan Health Center. The result showed that giving health education about perineal wound care help mothers to increase knowledge and increase perineal wound healing after evaluation. It is hoped that postpartum mothers can carry out perineal wound care independently to avoid the risk of infection. This study was expected to be able to advocates for the integration of creative educational methods in maternal health programs to enhance the quality of care provided to new mothers.

**Keywords:** perineal wound, wound healing, song, leaflet



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### Introduction

Postpartum is the period from six hours to 42 days after delivery. Postpartum maternal health services are health services for postpartum mothers according to standards, which are carried out at least three times according to the recommended schedule, namely at six hours to three days after delivery, on the fourth day to the 28th day after delivery, and on the 29th day to the 42nd day after delivery (Kemenkes RI, 2015). According to data from the World Health Organization (WHO), there are around 2.9 million cases of perineal tears worldwide in mothers giving birth, and this figure is expected to increase to 6.8 million by 2050 (Indriyani et al., 2024). In common, 75% prevaginal delivery experienced perineal rupture(Lestari et al., 2023). In the working area of Kandangan Health Center there was almost 90% woman in labor experienced perineal tears and must be sutured. The postpartum period is a crucial period to monitor and pay attention to in efforts to reduce the Maternal Mortality Rate in Indonesia. Many countries have experience in dealing with maternal and infant mortality, health experts also recommend that efforts to reduce MMR focus on the intrapartum period. This effort has been proven to save more than fifty percent of mothers in labor and newborns with complications in the delivery process or lifethreatening problems (Susilawati & Nilakesuma, 2021).

Perineal wound healing is an important aspect of postpartum care that affects the quality of life of postpartum mothers. Perineal wounds that are not treated properly can cause infection and slow down the healing process, so they require proper care and effective health education (Supiani & Yanti, 2023). One of the roles of midwives in postpartum maternal care is as a provider of health education. Midwives as

educators in practice provide health education to postpartum mothers and families using leaflets and short songs. Leaflets are used because they have the advantage that the information is more detailed and easy to carry anywhere, while short songs help the audience to remember the information provided. It is expected that after being given health education with leaflets and short songs, the knowledge of postpartum mothers and families will increase. With increased knowledge, it is expected to contribute to efforts to prevent infections or complications to reduce maternal mortality rates and improve family health.

Recent study showed the effects of prenatal education with a particular emphasis on wound healing and perineal care were investigated in a comprehensive study. Although the goal of antenatal education is to prepare women for labor and postpartum care, the study concluded that there is not enough data from randomized controlled trials to support its impact on the healing outcomes of perineal wounds, such as pain management or infection rates. To ascertain the advantages of such education in enhancing wound healing and general maternal health after delivery, more research is required (O'Kelly & Moore, 2017). Another research of the goal of an analytical survey at the Bissappu Bantaeng Community Health Center was to find out how postpartum moms' understanding of perineal wound care and the wound-healing process relate to each other. According to the study, the majority of participants (46.9%) had adequate knowledge about how to care for perineal wounds, which resulted in comparatively typical wound-healing processes. This implies that specific communitybased initiatives can successfully teach new moms about the importance of wound care (Qamarya et al., 2023)



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Based on the description above, the author is interested in conducting more in-depth midwifery care on "Providing Health Education and Implementing Songs on Perineal Stitch Wound Care for Postpartum Mothers with Grade II Perineal Rupture in the Kandangan Health Center Work Area".

### **Research Method**

This research used case study design. Data was obtained in the working area of Kandangan Health Center, Temanggung District on 16-30<sup>th</sup> of July 2024. Subject of the research were 5 postpartum mothers, 1 midwife coordinator, and 1 village midwife. The data was taken by observing, interviewing, documentating, literature review, and internet searching. Data obtained by giving health education to postpartum mother by leaflet

contained perineal wound care for postpartum mother with perineal suture and completed with song to memorize it easily, then the researcher observed the development of perineal wound healing after given the health education. Data analyzing used descriptive and content analysis.

## **Results and Discussions**

This study was conducted in the working area of Kandangan Health Center, especially in Tlogopucang, Gesing, and Samiranan Villages. Kandangan Health Center is one of the Health Centers in Temanggung Regency with 16 villages as its working area, namely Kandangan, Malebo, Caruban, Wadas, Samiranan, Ngemplak, Kembangsari, Gesing, Margolelo, Blimbing, Kedungumpul, Rowo, Baledu, Tlogopucang, Kedawung, and Banjarsari Villages.

**Table 1**. Characteristics of Respondents

Characteristics	Frequencies	Percentages
Age		
12-25 years old	1	25%
26-45 years old	4	75%
Parity		
Primiparous	2	40%
Multiparous	3	60%
Education		
Primary	1	20%
Secondary	2	40%
Higher	2	40%
Occupation		
Government employee	1	20%
Taylor	1	20%
Housewife	3	60%

Primary research data obtained from primary data on 5 postpartum mother subjects were obtained as in the table above, the subjects were dominated by adults (26-45 years) totaling

4 people (75%), multiparity parity as many as 3 people (60%), secondary and higher education levels as many as 2 people each (40%), and



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occupation as a housewife as many as 3 people (60%).

After conducting an assessment of the subjects, it was found that the five subjects experienced normal delivery with 2nd degree perineal tears and the lacerations were sutured. The four subjects did not know how to properly care for the feminine area, and one subject already knew but sometimes did not apply it.

After being interviewed, it was found that the five subjects needed correct information on how to care for perineal wounds so that the stitches healed quickly and did not become infected. The results of the examination were that the five subjects' perineal stitches were still wet, some felt pain, and a minority felt itching. The results of the physical examination and TTV showed normal limits:

Table 2. Vital Signs of Subjects

Blood Presure	Pulse	Temperature	Respiratory Rate
128/78 mmHg	66 bpm	36.5°C	21 bpm
106/78 mmHg	78 bpm	37°C	20 bpm
110/70 mmHg	80 bpm	36.4°C	20 bpm
120/70 mmHg	75 bpm	36.8°C	22 bpm
128/78 mmHg	66 bpm	36.5°C	21 bpm
	128/78 mmHg 106/78 mmHg 110/70 mmHg 120/70 mmHg	128/78 mmHg 66 bpm 106/78 mmHg 78 bpm 110/70 mmHg 80 bpm 120/70 mmHg 75 bpm	128/78 mmHg       66 bpm       36.5°C         106/78 mmHg       78 bpm       37°C         110/70 mmHg       80 bpm       36.4°C         120/70 mmHg       75 bpm       36.8°C

Implementation was carried out on the first day of the visit. On the first day of the visit, the subject underwent a physical examination and was given a pre-test with material on perineal suture wound care, then provided management in the form of health education related to perineal suture wound care using leaflets and short songs with the aim of increasing the subject's knowledge about good and correct perineal wound care. After being given health education, the subject was given a sheet containing post-test questions to be worked on. After that, the subject was asked to apply what had been taught about perineal wound care to see its development on the seventh day.

## a. Subject 1

The postpartum visit on the first day of the study obtained interview results that Mrs. IH's perineal sutures still felt pain after giving birth to her baby normally at the Kandangan Health

Center on July 20, 2024, a female with a birth weight of 3200 grams, body length 49 cm. The mother said she ate 3-4 times a day with a varied menu (such as spinach, tempeh, salted fish, egg whites, and also fruits), she drank more than 8 glasses a day, she took a shower twice a day, changed her sanitary napkins 3 times a day. The results of the examination showed good general condition (KU), composmentis consciousness, blood pressure 128/78 mmHg, pulse 66 x / minute, breathing 21 x / minute, temperature 36.5°C, perineal suture wound still looked wet, vaginal discharge in the form of lochia rubra, TFU 2 fingers below the navel, elastic contractions, colostrum breast milk had come out. On examination, the genitalia looked clean, the suture wound was neat and not open, but there were hemorrhoids in the anus.

## b. Subject 2

Postpartum visit on the first day of the study obtained interview results that Mrs. R on



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her perineal stitches still hurts a lot when urinating after giving birth to her baby normally at the Kandangan Health Center on July 20, 2024, a female with a birth weight of 3120 grams, body length 47 cm. The mother said she ate 3 times a day with a varied menu (such as pegagan vegetables, pindang fish, tempeh, tofu, and also fruits), the mother drank less than 8 glasses per day, the mother took a shower 2 times a day, changed her pads 2-3 times a day. The results of the examination showed good general condition (KU), composmentis consciousness, blood pressure 106/78 mmHg, pulse 78 x / minute, breathing 20 x / minute, temperature 37°C, the perineal stitches still looked wet, vaginal discharge in the form of lochia rubra, TFU 2 fingers below the navel, elastic contractions, colostrum breast milk had come out. On examination, the genitalia looked dirty, smelled bad, the stitches looked neat and did not open.

## c.Subject 3

Postpartum visit on the first day of the study obtained interview results that Mrs. Y's perineal stitches were still painful only when urinating and defecating after giving birth to her baby normally at the Kandangan Health Center on July 21, 2024, female with a birth weight of 3380 grams, body length 49 cm. The mother said she ate 3 times a day with a varied menu (such as stir-fried kale, broccoli, free-range chicken, meat, tempeh, and fruits such as bananas and oranges), the mother drank 10 glasses per day, the mother took a shower 2 times a day, changed her sanitary napkins 3-4 times a day. The results of the examination showed good general condition (KU), composmentis consciousness, blood pressure 110/70 mmHg, pulse 80 x / minute, breathing 20 x / minute, temperature 36.4°C, perineal sutures still looked wet, vaginal discharge in the form of lochia rubra, TFU 1 finger below the navel, elastic contractions, colostrum breast milk had come out. On examination, the genitals looked clean, the sutures were neat and not open.

## d. Subject 4

Postpartum visit on the first day of the study, the results of the interview showed that Mrs. A felt pain in her perineal sutures only when urinating and defecating, sometimes itching after giving birth to her baby normally at the Kandangan Health Center on July 21, 2024, female with a birth weight of 2800 grams, body length 47 cm. The mother said that she eats 3 times a day with a varied menu (such as clear vegetable soup, tofu, tempeh, omelettes, and fruits such as guava, banana, and pineapple), she drinks approximately 8 glasses per day, she takes a shower twice a day, changes her sanitary napkins 3 times a day. The results of the examination showed that her general condition (KU) was good, composmentis consciousness, blood pressure 120/70 mmHg, pulse 75 x / minute, breathing 22 x / minute, temperature 36.8°C, the perineal suture wound still looks wet, vaginal discharge is in the form of lochia rubra, TFU 2 fingers below the navel, elastic contractions, colostrum breast milk has come out. On examination, the genitalia looked clean, the suture wound was neat and not open.

## e. Subject 5

The postpartum visit on the first day of the study found that Mrs. MW felt pain in her perineal stitches during certain activities after giving birth to her baby normally at the Kandangan Health Center on July 27, 2024, male with a birth weight of 2860 grams, body length 46 cm. Mother said she eats 3 times a day with a varied menu (such as sour vegetables, stir-fried long beans, fried fish, chicken, boiled eggs, and fruits such as melon, pineapple, and watermelon), mother drinks 12 glasses per day, mother takes a shower 2 times a day, changes her pads 4 times a day. The results of the examination showed good general condition (KU), composmentis consciousness, blood



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pressure 100/70 mmHg, pulse 73 x / minute, breathing 20 x / minute, temperature 36.5°C, perineal suture wound still looks wet, vaginal discharge in the form of lochia rubra, TFU 2 fingers below the navel, elastic contractions, colostrum breast milk has come out. On examination, the genitalia looked clean, the suture wound was neat and not open.

Evaluation was conducted on the seventh day visit to evaluate the behavior of perineal suture wound care by observing the healing of the perineal wound.

#### a. Subject 1

The postpartum visit on the seventh day of the study obtained the results of an interview with Mrs. IH that the pain in her perineal sutures had decreased a lot, the thread had also begun to be felt. For the pattern of fulfilling her nutrition, it was still the same as the first day, the mother said she ate 3-4 times a day with a varied menu (such as spinach, tempeh, salted fish, egg whites, and also fruits), the mother drank more than 8 glasses per day, the mother took a shower 2 times a day, in terms of personal hygiene the mother said that she had carried out the steps for perineal care as taught and remembered the steps for care using the song that had been taught, namely washing hands before touching the feminine area, wiping from front to back, changing pads if they felt damp, and drying the feminine area after urinating or defecating. The results of the examination showed good general condition (KU), composmentis consciousness, blood pressure 120/80 mmHg, pulse 70 x / minute, breathing 20 x / minute, temperature 36.5°C, perineal sutures began to close, vaginal discharge in the form of lochia sanguinolenta (reddish yellow), TFU was in the middle of the navel and symphysis, breast milk was smooth. On examination, the genitals looked clean, the sutures were neat and not open, but there were hemorrhoids in the anus.

#### b. Subject 2

Postpartum visit on the seventh day of the study obtained interview results that Mrs. R's perineal sutures were still a little painful when urinating. The mother said that she sometimes forgot to practice the perineal care that had been taught but had tried to always remember and do it. For the mother's nutritional pattern, she said it was still the same, namely eating 3 times a day with a varied menu (such as pegagan vegetables, pindang fish, tempeh, tofu, and also fruits), she drank less than 8 glasses per day, she took a shower 2 times a day, changed her sanitary napkins 2-3 times a day. The results of the examination showed a good general condition (KU), composmentis consciousness, blood pressure 110/70 mmHg, pulse 75 x / minute, breathing 20 x / minute, temperature 36.8°C, the perineal suture wound had improved but not completely, vaginal discharge in the form of lochia sanguinolenta, TFU was in the middle of the navel and symphysis, breast milk was smooth. On genital examination, the unpleasant odor was no longer smelled, the suture wound was neat and not open.

## c.Subject 3

The postpartum visit on the seventh day of the study found that Mrs. Y's perineal sutures were no longer painful. The mother said that she always applied the knowledge about perineal care that had been taught. For the nutritional fulfillment pattern, the mother said it was still the same, eating 3 times a day with a varied menu (such as stir-fried kale, broccoli, free-range chicken, meat, tempeh, and fruits such as bananas and oranges), the mother drank 10 glasses per day, the mother took a shower twice a day, changed her sanitary napkins 3-4 times a day. The results of the examination showed good general condition (KU), composmentis consciousness, blood pressure 110/70 mmHg, pulse 80 x / minute, breathing 20 x / minute, temperature 36.4°C, the perineal suture wound still looked wet, vaginal discharge in the form of



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lochia rubra, TFU 1 finger below the navel, elastic contractions, colostrum breast milk had come out. On examination, the genitalia looked clean, the suture wound was neat and not open.

## d. Subject 4

The postpartum visit on the seventh day of the study found that the results of the interview showed that Mrs. A's perineal suture had improved, sometimes only when urinating and defecating the pain was slightly felt, there was no itching. The mother said she enjoyed practicing the perineal wound care, especially the song that made it easy to remind her of the steps that needed to be taken. For the nutritional fulfillment pattern, the mother said the same thing, namely eating 3 times a day with a varied menu (such as clear vegetable soup, tofu, tempeh, omelettes, and fruits such as guava, banana, and pineapple), the mother drinks approximately 8 glasses per day, the mother takes a shower twice a day, changes the pads 3 times a day. The results of the examination showed a good general condition (KU), composmentis consciousness, blood pressure 120/80 mmHg, pulse 80 x / minute, breathing 22 x / minute, temperature 37°C, the perineal suture wound was slightly dry, vaginal discharge was in the form of lochia sanguinolenta, TFU in the middle of the navel and symphysis, breast milk was smooth. On examination, the genitalia looked clean, the suture wound was neat and did not open.

### e. Subject 5

The postpartum visit on the seventh day of the study found that Mrs. MW's perineal suture was no longer painful. Mother said that sometimes she forgot to apply the perineum care steps that had been taught, but she always tried to remember according to the perineum care steps. In fulfilling the nutritional pattern, mother said it was still the same, namely eating 3 times a day with a varied menu (such as sour vegetables, stir-fried long beans, fried fish,

chicken, boiled eggs, and fruits such as melon, pineapple, and watermelon), the mother drinks 12 glasses per day, the mother takes a shower twice a day, changes her pads four times a day. The results of the examination showed good general condition (KU), composmentis consciousness, blood pressure 120/75 mmHg, pulse 75 x / minute, breathing 20 x / minute, temperature 36.8°C, the perineal suture wound has dried up a little, vaginal discharge in the form of lochia sanguinolenta, TFU mid-center and symphysis, breast milk is smooth. examination, the genitalia looked clean, the suture wound was neat and not open.

Subject 6 is midwife coordinator, she explained, "Many deliveries here are accompanied by perineal tears, especially in mothers who are giving birth for the first time." She added that this condition is quite common and often requires stitches to repair the torn tissue. Perineal wound healing need to be supported by health education which can easily accepted by postpartum mothers.

Subject 7 is village midwife, the village midwife stated that health education needs to be carried out very seriously considering the large number of postpartum mothers who experience perineal stitches. "...as midwives, of course, we must be able to provide health education, especially one that is easy to accept, if so far there are sometimes those who find it difficult to accept the education we provide, then health education is needed that is easy for the community to accept". According to her, this education must also include information on proper perineal wound care, such as washing wounds with soap and clean water, maintaining cleanliness, and using antiseptics to prevent infection. In addition, it is also important to understand that proper perineal wound care can speed up healing and reduce the risk of complications.



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Comparison of postpartum mothers' responses on the first day after being given health education using leaflets and songs are as follows:

- 1. In subject 1, postpartum mothers were able to explain the meaning of the perineum, state the purpose of perineum care, explain the impact if the perineum wound is not treated properly, state 4 out of 5 signs of perineum wound infection, state 4 out of 5 ways to care for the perineum, state good nutrition for healing perineum wounds, and were able to sing a song about perineum care steps fluently.
- 2. In subject 2, postpartum mothers were able to explain and point to pictures of the perineum, state the purpose of perineum care, explain the impact if the perineum wound is not treated properly, state 5 out of 5 signs of perineum wound infection, state 4 out of 5 ways to care for the perineum, state good nutrition for healing perineum wounds, and were able to sing a song about perineum care steps although not fluently.
- 3. In subject 3, postpartum mothers were able to explain what the perineum is, state the purpose of perineal care, explain the impact if the perineal wound is not treated properly, state 5 out of 5 signs of perineal wound infection, state 5 out of 5 ways to care for the perineum, state good nutrition for healing perineal wounds, and

- were able to sing a song about perineal care steps fluently.
- 4. In subject 4, postpartum mothers were able to explain and point to a picture of the perineum, state the purpose of perineal care, explain the impact if the perineal wound is not treated properly, state 3 out of 5 signs of perineal wound infection, state 4 out of 5 ways to care for the perineum, state good nutrition for healing perineal wounds even though only a little, and were able to sing a song about perineal care steps even though not fluently.
- 5. In subject 5, postpartum mothers were able to explain what the perineum is, state the purpose of perineal care, explain the impact if the perineal wound is not treated properly, state 5 of 5 signs of perineal wound infection, state 5 of 5 ways to care for the perineum, state good nutrition for healing perineal wounds, and were able to sing a song about perineal care steps fluently.
- 6. Comparison of responses obtained on the seventh day, namely subject 1 said that the mother had applied perineal wound care, the stitches were no longer painful but had not yet fully healed. This is supported by research (Supiani & Yanti, 2023) which states that it can be concluded that there is an influence of health education about perineal wound care on the level of knowledge of postpartum mothers in the Wanasaba Health Center work area with a p-



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value of 0.000 (p < 0.05). Subject 2 said that the mother had not applied it optimally because sometimes she was in a hurry to practice according to theory, this is like not drying the feminine area after rinsing, and still using feminine area soap, the mother's stitches were good, but there was a slightly unpleasant odor from the feminine area. This is supported by research by (Sandri, 2019) which states that vaginal douching can increase exposure to infection to the cervix, uterus, and fallopian tubes, and increase the risk of pelvic inflammatory disease (PID; Pelvic Inflammatory Disease). This is also in line with the research by (Yıldırım et al., 2020) that showed a statistically significant relationship was determined between infection history and VD (p<0.01). Therefore, women who perform vaginal douching are at risk for vaginal infections. Further Subject 3 said that the mother had implemented the material that had been delivered and felt comfortable because the stitches were no longer painful so she could do normal activities. Subject 4 said that she had not been optimal in applying care, especially in terms of fulfilling nutrition, this was due to several taboos from parents that were difficult to explain, such as not being allowed to eat pineapple. This is in line with research (Agustin Dwi Syalfina et al., 2021) which found that perineal stitch wound infections can occur because wound care is not carried out properly and correctly, the behavior of abstaining from high-protein foods, and low personal hygiene behavior in the genital area. Subject 5 said that she was able to apply the treatment so that the stitched wound healed quickly. This is in line with

the research conducted by (Wijayanti & Vellyana, 2021) which found that after being given health education, it can be concluded that during this process there were no significant obstacles when conducting health education on perineal wound care and providing perineal wound care packages. Postpartum mothers who will be given health education are asked for their consent to be given health education on proper perineal wound care, then postpartum mothers are asked for 20-30 minutes to take part in health education. At the end of the session, postpartum mothers are then given the opportunity to ask questions. The results at the end of the service showed that there were 35 postpartum mothers and 34 postpartum mothers who were followed up. The overall evaluation results showed that 30 postpartum mothers had completely closed perineal wounds.

- 7. The 6<sup>th</sup> and 7<sup>th</sup> subjects stated that the healing of perineal wound also could be affected by the suture techniques. This is in line with the research of Hartinah which mentioned that Sutures and technique/suturing second-degree perineal tears or a postpartum episiotomy can affect perineal pain. Cold gel pad therapy and treatment with natural oil on perineal wounds can affect perineal pain and wound healing (Hartinah et al., 2021). So, taking care of perineal wound was very important things to do for postpartum mother care.
- 8. The 6<sup>th</sup> subjects also stated, "as a midwife, we can provide health education that can easily accept by our patients, especially about personal



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hygiene to give care for the perineal wound". Another statement also given by the 7<sup>th</sup> subject, she stated, "Beside personal hygiene, the other important elements in perineal wound healing is about nutrition", this is in line with the previous research which found that The healing of perineal wounds was found to be correlated with the dietary habits of the puerperal mother. A puerperal mother's high intake of calories, protein, hydration, minerals, and vitamins will speed up the process of new cell regeneration, resulting in a quicker healing of the puerperal perineal lesion. In order to cure the perineal wound, postpartum moms are encouraged to follow a nutritional regimen and avoid following any dietary restrictions throughout the puerperium (Frilasari et al., 2020).

9. Providing health education added with song can be interesting media for health educational methods. This is in line with the research of Batt-Rawden showed that Nursing home employees perceived singing and have potential benefit to patients like reducing uneasiness. increasing comfort, improving sleep quality, well-being, and song could be use to sing as a part of their "art of caring" themselves (Batt-Rawden & Stedje, 2020). Another research showed that participants' anxiety and depressive decreased after the symptoms singing Additionally, experience. there was an improvement in the reported performance of routine activities from baseline to follow-up. The English study found that there was a difference in mental health after three and six months, as well as after three months on particular measures of anxiety and depression, between the singing and non-singing groups. Similar results are seen in this study (Rome), with improvements noted on particular anxiety and depression measures (Corvo et al., 2020). Supported research also found in Feng's research which showed that singing in a chorus can enhance cognitive function as people age. In a community of senior citizens, the favorable effect is at least equivalent to that of health education in preventing cognitive deterioration. Additional research should be done on the biological mechanisms underlying the observed efficacy (Feng et al., 2020). Another research about song mentioned that the general opinion among participants was that using song and music had many benefits and positive impacts to the patients with dementia(Ekra & Dale, 2020). Based on the research mentioned, song can increase understanding of the human to accept some knowledge.

10. Leaflet media combined with song became more interesting in presenting some health education. This is in line with the research of (Wulandari, 2020) stated that health education by leaflet media can increase the habits of the respondent to do the things like written in the media. Another research showed that health education of the population in general, through the activity of specific preventive-promotional health care for young people in schools and faculties, should be given priority in order to influence the more positive and healthy lifestyles of the population, thereby reducing the negative health outcomes and high costs of health care (Hasanica et al., 2020). The education about personal hygiene is very important after defecating or urinating, the perineum is cleaned



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routinely. The method is to clean it with mild soap at least once a day. Cleaning starts from the front to the back so that infection does not occur. Postpartum mothers must receive education about this. Mothers are told how to change sanitary napkins, namely the inside should not be contaminated by hands. Dirty sanitary napkins are changed at least 4 times a day. Mothers are informed about the amount, color, and odor of lochia so that if there is an abnormality it can be detected early. Advise mothers to wash their hands with soap and water before and after cleaning their genital area (Sulfianti et al., 2021).

## Conclusion

Based on the results of a case study on the implementation of perineal wound care health education for postpartum mothers conducted on July 16 - July 30, 2024, it can be concluded that the implementation of perineal wound care health education for postpartum mothers can help increase mothers' knowledge in meeting their learning needs on how to properly and correctly care for perineal wounds. Based on the results of the case study after the implementation of perineal wound care health education in the two managed cases, the results obtained showed differences in responses when evaluated. The difference in speed in understanding information between the two respondents was not always caused by different levels of education and age. In addition to leaflets and songs, incorporate demonstrations of proper perineal care

techniques. This hands-on approach can help mothers feel more confident in managing their wounds effectively. Hopefully midwife can use the interesting media to give health promotion so that the material can approve easily by the patients.

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## **Conflic of Interest**



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