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**Midwifery Care For Women In Labor With A Mother-Loving Approach**Rahmiyani Saad^{1*}, Kiki Uniatri Thalib², Sulistyani Prabu Aji³^{*1}Midwifery Study Program, Cokroaminoto University Makassar, Indonesia²Midwifery Study Program, St. Fatimah Mamuju Health and Business Institute, Indonesia³Doctoral Programs in Community Empowerment and Health Promotion, Sebelas Maret University, Indonesia*Correspondent Author: Rahmiyani Saad, Email: rahmiyanisaad14@gmail.com**ABSTRACT**

The Mother-Friendly approach is a midwifery service concept that emphasizes fulfilling the physical, psychological, social, and cultural needs of mothers during the labor process. This approach aims to create a safe, comfortable, dignified, and mother-centered labor experience. This study aims to describe the implementation of midwifery care for mothers giving birth using the Mother Friendly approach. The study used a descriptive design with a case study approach. The research subject was a mother giving birth in the first–fourth stage who received midwifery care using the Mother Friendly approach at Community Health Center X. Data collection was carried out through interviews, observations, physical examinations, and SOAP documentation. The results of the study indicate that the implementation of the Mother Friendly approach can increase comfort, reduce anxiety, and support a physiological labor process. It was concluded that the Mother Friendly approach is effectively implemented in midwifery care for mothers giving birth.

Keywords: Midwifery Care, Childbirth, Mother-Friendly Approach



1. Introduction

Childbirth is a crucial physiological process in a woman's life. Although natural, it is often accompanied by pain, anxiety, and fear, which can impact the smoothness of the delivery. Therefore, midwifery care is essential, focusing not only on clinical aspects but also on the psychological and emotional aspects of the mother.

The Mother-Friendly Approach is a midwifery care approach that focuses on the mother's needs, respects her rights, and provides physical and emotional support during labor. This approach aligns with the concept of *women's empowerment, centered care* and is recommended in normal delivery services.

Unfriendly delivery services can increase the risk of birth trauma, lower maternal satisfaction, and negatively impact breastfeeding and mother-infant bonding. Therefore, implementing a Mother Friendly approach is crucial for improving the quality of midwifery care and the safety of mothers and babies.

Based on this background, this study aims to describe midwifery care for mothers giving birth using a comprehensive Mother-Friendly approach.

2. Research Method

a. Types and Design of Research

This research is a descriptive study using a case study approach. The case study design was chosen to provide an in-depth and comprehensive description of the implementation of midwifery care for women in labor using the "Sayang Ibu" approach, from the first to the fourth stage of labor. This approach allows researchers to directly observe woman - *centered midwifery practices, care*).

b. Midwifery Care Approach

The approach used is the Dear Mother approach, which emphasizes:

- 1) Respect for the rights and dignity of mothers
- 2) Physical, psychological and emotional support
- 3) Family involvement (husband/companion)
- 4) Minimal unnecessary medical intervention
- 5) *Informed consent choice & consent*

This approach is in line with the standards of Normal Delivery Care (APN) and WHO recommendations on *positive childbirth experience*.

c. Location and Time of Research

The study was conducted at Community Health Center X/Independent Midwife Practice (PMB), which provides normal delivery services. The study was conducted in May 2025, starting from the mother's first stage of labor until the completion of the fourth stage.

d. Research Subjects





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The research subject was 1 mother who gave birth through normal delivery.

Inclusion Criteria

- 1) Pregnant women at term (37–42 weeks)
- 2) Normal delivery (without complications)
- 3) Willing to receive care with a Loving Mother approach
- 4) Willing to be a research subject

Exclusion Criteria

- 1) Mothers with obstetric complications (severe preeclampsia, bleeding, fetal distress)
- 2) Delivery by operative action

e. Focus of Midwifery Care

Midwifery care focuses on:

- Fulfillment of the basic needs of mothers in labor
- Emotional and psychological support
- Therapeutic communication
- Childbirth assistance
- Prevention of trauma and unnecessary interventions
- Care is provided during the four stages of labor (Stages I–IV).

f. Data collection technique

Data collection is carried out comprehensively through:

- 1) Interview
 - Obstetric history, psychological history, and family support
 - Maternal perception and comfort during labor
- 2) Direct Observation
 - The labor process and maternal response
 - Implementation of the principle of Mother's Love at all times
- 3) Physical and Obstetric Examination
 - Vital signs
 - Labor progress (VT, his, DJJ)
- 4) Documentation Study
 - KIA Book
 - Obstetric notes
 - Partograph

g. Research Instruments

The instruments used in this study include:

- 1) SOAP format (Subjective, Objective, Assessment, Plan)
- 2) Observation sheet for the application of Loving Mother





- 3) WHO Partograph
- 4) KIA Book

Instruments are used to ensure that care is documented systematically and accurately.

h. Research Implementation Procedures

The research procedure is carried out through the following stages:

- 1) Research permit management
- 2) Explanation of the purpose and procedures of the research to the mother
- 3) Informed signing consent
- 4) Provision of midwifery care in the first to fourth stages of labor using a Mother-Friendly approach
- 5) SOAP documentation of care
- 6) Evaluation of midwifery care results

i. Data Analysis Techniques

The data was analyzed descriptively qualitatively, namely:

- Data from observations, interviews and physical examinations are arranged in narrative form.
- The analysis was conducted by comparing care practices with midwifery theory and standards.

j. Data Validity

Data validity is maintained through:

- Triangulation of methods (interviews, observation, documentation)
- Consistency of care recording
- Comparison with APN standards and WHO guidelines

k. Research Ethics

The research was conducted in accordance with the ethical principles of health research:

- 1) Informed consent
- 2) Confidentiality of mother's identity
- 3) Nonmaleficence (doing no harm to the subject)
- 4) Respect for autonomy

3. Research Results And Discussion

a. Research Result

This research is a case study of one woman giving birth who received midwifery care using the "Sayang Ibu" approach from the first to the fourth stage of labor. The results are presented based on the stages of labor and the mother's response to the care provided.





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1) First Stage of Labor (Opening Stage)

During the first stage of labor, the mother presented to a health care facility complaining of intermittent abdominal pain and bloody mucus. Examination revealed that both mother and fetus were within normal limits.

Midwifery care with a Mother-Friendly approach provided includes:

- Providing clear and repeated information about the birth process
- Emotional support and therapeutic communication
- Accompanying husband during labor
- Granting freedom of position and mobilization
- Fulfillment of fluid and nutritional needs
- Non-pharmacological pain management (deep breathing, relaxation, touch)

Results:

The mother appeared calmer, more cooperative, and better able to manage labor pain. Labor progressed physiologically, according to the partograph.

2) Stage II of Labor (Fetus Delivery Period)

During the second stage, the mother is guided to push according to her natural urges, without coercion. The midwife provides positive verbal support and maintains the mother's privacy.

Loving mother care in the second stage includes:

- Correct guidance for meneran
- No routine episiotomy was performed.
- Verbal and emotional support
- Respect for the mother's choice of position

Results:

The baby was born spontaneously, had a strong cry, was male/female, and was in good condition. The mother expressed confidence and satisfaction during the birth.

3) Stage III of Labor (Placenta Delivery Stage)

The third stage of labor progressed safely and quickly. The midwife performed active management of the third stage according to standards.

Loving mother care in the third stage includes:

- Administration of uterotonics as indicated
- Explanation of each action to the mother
- Skin-to-skin contact between mother and baby

Results:

The placenta was delivered intact, uterine contractions were good, and bleeding was within normal limits. The mother felt safe and was not anxious.





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4) Fourth Stage of Labor (Observation Period)

In the fourth stage, the mother is monitored intensively for the first 2 hours after delivery.

Loving Mother Care in the fourth stage includes:

- Monitoring of vital signs and uterine contractions
- Breastfeeding support and implementation of IMD
- Postpartum and newborn care education
- Postpartum emotional support

Results:

The mother's condition was stable, there was no postpartum hemorrhage, and the mother was able to breastfeed her baby well.

5) Summary of Midwifery Care Results

- a) The labor process takes place physiologically from stages I–IV
- b) Mother feels comfortable, safe, and emotionally supported
- c) There was no unnecessary medical intervention.
- d) The Loving Mother approach can be implemented optimally

b. Discussion

1) A Mother-Friendly Approach to Supporting Physiological Labor

Research results show that the "Love Mother" approach plays a crucial role in creating a comfortable and safe birthing environment. Emotional support, therapeutic communication, and the husband's support help reduce maternal anxiety, allowing oxytocin to function optimally during labor.

This approach is in line with the *woman-centered concept. care*, where the mother is positioned as the center of service and is actively involved in every decision-making process.

2) Non-pharmacological Pain Management and Its Impact

Non-pharmacological pain management techniques such as breathing techniques, relaxation, and touch have been shown to help mothers cope with labor pain. Well-managed pain allows mothers to remain cooperative and focused during labor, allowing labor to progress normally.

3) Husband's Companionship and Psychological Support

The presence of a husband as a birth companion provides a significant sense of security and psychological support. The mother feels more confident and less alone during the birth process. This strengthens the emotional bond between the family from the moment the baby is born.

4) Prevention of Unnecessary Interventions





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The Mother-Friendly approach emphasizes the principle of minimal intervention. Avoiding routine episiotomies and allowing for freedom of position have been shown to promote a physiological birth and reduce birth trauma.

5) The Impact of a Mother's Loving Approach on Mothers' Satisfaction

Mothers reported high levels of satisfaction with the midwifery care they received. This satisfaction was closely linked to good communication, respect for the mother's choices, and consistent emotional support.

6) Implications for Midwifery Practice

The results of this case study demonstrate that the "Sayang Ibu" approach can be effectively implemented in midwifery practice and contribute to improving the quality of childbirth care. Midwives play a strategic role in ensuring every mother has a safe, comfortable, and dignified birth experience.

4. Conclusion And Suggestions

a. Conclusion

Midwifery care for mothers in labor using the "Love Mother" approach can be implemented well and has a positive impact on the comfort, safety, and smoothness of the delivery process.

b. Suggestion

- 1) Midwives are expected to consistently implement the Mother-Friendly approach.
- 2) Health facilities need to support mother-friendly delivery services.
- 3) Further research could use an analytical design to assess the effectiveness of the Sayang Ibu approach.

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