International Journal of Natural and Health Sciences (IJNHS)
Vol.4, No.3, 2026: 183-196

Physiological and Psychological Outcomes of Vaginal and Cesarean Delivery in Postpartum Mothers: A Literature Review

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A R T I C L E I N F O

Keywords: Postpartum Mothers, Vaginal Delivery, Cesarean Delivery, Physiological Outcomes, Psychological Outcomes

Received : 5 May
Revised : 20 Juny
Accepted : 20 July

A B S T R A C T

The postpartum period is a crucial period marked by physiological and psychological changes in mothers after childbirth. The type of delivery, whether vaginal or cesarean section (CS), has a different impact on the mother's recovery process. Mothers who deliver by CS tend to experience higher pain, delayed uterine involution, and difficulty mobilizing. Furthermore, post-CS mothers are at higher risk of breast milk production being disrupted, although this can be improved through interventions such as oxytocin massage. Psychologically, mothers who deliver by CS are more susceptible to post-traumatic stress and postpartum blues, which can affect the adaptation process and attachment with the baby. Therefore, a comprehensive study is needed regarding the differences in the impact of childbirth on the condition of postpartum mothers. This study aims to comprehensively analyze the differences in the impact of normal delivery and cesarean section on the physiological and psychological conditions of postpartum mothers, including aspects of pain, uterine involution, breast milk production, psychological adaptation, and bonding attachment, based on the results of a literature review of various relevant studies. This study employed a literature review with a descriptive approach. Data were obtained from 10 scientific journal articles relevant to the topic of postpartum mothers and types of childbirth. The articles used varied research designs, including cross-sectional, quasi-experimental, and pre-experimental. Analysis was conducted by grouping and comparing research results based on the physiological and psychological aspects of postpartum mothers. Studies show that mothers who deliver by cesarean section tend to experience higher pain, slower uterine involution, and difficulty producing and releasing breast milk compared to those who deliver vaginally. Furthermore, post-cesarean section mothers are also at higher risk of psychological disorders such as post-traumatic stress and postpartum blues, as well as lower attachment to their babies. However, several interventions, such as early mobilization, oxytocin massage, and back massage, have been shown to help improve postpartum maternal recovery

INTRODUCTION

The postpartum period is a critical time in a mother's life cycle that starts after giving birth and lasts until her body returns to its pre-pregnancy condition. This period involves not just physical recovery, but also psychological adjustment and the development of an emotional bond between mother and baby. This adaptation process is influenced by various factors, one of which is the type of delivery the mother experiences, whether it's a normal delivery or a cesarean section (C-section). The different delivery methods have a significant impact on the mother's condition, both physiologically and psychologically (Ruliati et al., 2024).

This aligns with research showing that quality midwifery care during pregnancy, childbirth, and postpartum plays an important role in improving the health of mothers and newborns. The competency of health workers, especially midwives, affects the overall quality of maternal services (Neal et al., 2023).

A cesarean section delivery is a surgical procedure performed through an incision in the abdominal wall and uterus to deliver a baby. Although this procedure is often chosen to save the mother and baby in certain situations, a C-section has more complex consequences compared to normal delivery. One of the most noticeable effects is a slower physical recovery, especially related to the healing of the surgical wound and uterine involution. Research shows that mothers after a C-section experience delayed uterine involution compared to mothers with normal deliveries, indicating obstacles in the process of the uterus returning to its pre-pregnancy size (Ruliati et al., 2024).

Besides that, post-surgery pain is a major issue often experienced by mothers who have a C-section. This pain happens due to tissue damage during the surgery and can last for several days to weeks after delivery. High pain intensity not only affects the mother's comfort but also limits her activities, including moving around, taking care of the baby, and breastfeeding. This condition can potentially slow down overall recovery. Therefore, the right interventions are needed to manage this pain, one of which is early mobilization

LITERATURE REVIEW

Early mobilization is one of the non-drug approaches that has been proven effective in reducing pain intensity and speeding up the wound healing process in mothers after a C-section. This intervention is carried out gradually, starting from simple movements to the ability to walk, aiming to improve blood circulation, prevent complications, and speed up the recovery of body functions. Besides that, early mobilization also helps moms become more independent in doing daily activities, including taking care of their baby.

Besides physical changes, postpartum mothers also go through psychological changes that are just as important. The postpartum period is a time of emotional adjustment that can bring about various psychological responses, from feelings of happiness to anxiety and stress. Mothers who had a cesarean section, especially emergency ones, are at a higher risk of experiencing post-traumatic stress compared to mothers who gave birth naturally. This condition can be triggered by childbirth experiences that didn't meet expectations, fear, and the fact that their physical condition hasn't fully recovered yet.

Besides post-traumatic stress, postpartum blues is also a psychological disorder that often occurs in mothers after giving birth. This condition is marked by rapid mood swings, feelings of sadness, being easily tearful, and anxiety in taking care of the baby. Factors that influence the occurrence of postpartum blues include the mother's characteristics, the baby's condition, and social support from family, especially the husband (Yetti & Kurniasari, 2015). Good social support can help mothers get through this adaptation period more easily.

Postpartum psychological adaptation in mothers consists of several phases, namely the taking in, taking hold, and letting go phases. In the taking hold phase, mothers start to take an active role in caring for their babies and develop confidence as a mom. However, this adaptation process can be hindered in mothers who had a C-section due to physical limitations and unstable emotional conditions. This shows that the type of delivery affects a mother's ability to adapt psychologically.

Another important aspect during the postpartum period is the bonding attachment between mother and baby. Bonding attachment is the emotional connection formed from the very beginning of a baby's life, playing a key role in the child's future psychological and emotional development. This process is influenced by early interactions between mother and baby, which can be disrupted for mothers who have had a C-section due to limited mobility, pain, and less-than-optimal physical condition. A lack of bonding attachment can affect the long-term relationship between mother and child.

In addition, successful breastfeeding is also an important indicator during the postpartum period. Breast milk is the best source of nutrition for babies, containing various essential substances for growth and development. However, mothers who have had a cesarean section often face challenges in producing and releasing breast milk, especially in the first few days after delivery. This is due to physical, hormonal factors, as well as delays in initiating early breastfeeding.
Various interventions have been developed to boost breast milk production, one of which is oxytocin massage and back massage. Oxytocin massage works by stimulating the parasympathetic nerves, which increases the secretion of the oxytocin hormone that plays a role in milk release. Studies show that oxytocin massage is effective in increasing breast milk production for both mothers who had a normal delivery and those who had a cesarean section (Kristanti et al., 2025). In addition, back massage has also been proven to help the smooth flow of breast milk by relaxing the mother and stimulating lactation hormones (Aini & Suryaningsih, 2021).

Overall, various studies show that the type of delivery has a significant impact on the physiological and psychological condition of postpartum mothers. A cesarean section tends to have more complex effects compared to normal delivery, in terms of pain, recovery process, breast milk production, psychological adaptation, and bonding attachment. Therefore, a comprehensive understanding and proper interventions are needed to support the optimal recovery process for postpartum mothers.

METHODOLOGY

This study uses a literature review method with a descriptive-analytical approach aimed at comprehensively examining various research findings related to the impact of delivery types on the physiological and psychological conditions of postpartum mothers. The data sources for this study were obtained from 10 relevant national scientific journal articles, especially those discussing postpartum mothers with normal deliveries and cesarean sections (C-sections).

The inclusion criteria for selecting articles include: (1) research articles that discuss postpartum mothers, (2) articles that compare or examine the impact of normal delivery and cesarean section, (3) articles that discuss physiological aspects such as pain, uterine involution, and breast milk production, as well as psychological aspects like stress, postpartum blues, and bonding attachment, and (4) articles that use quantitative research methods. Meanwhile, the exclusion criteria include articles that are not directly related to the research topic or do not have clear research result data.

The research designs in the articles reviewed vary, including cross-sectional, quasi-experimental, pre-experimental, and ex-post facto. Studies with quasi-experimental and pre-experimental designs are generally used to assess the effectiveness of interventions like early mobilization, oxytocin massage, and back massage on postpartum mothers' conditions (Kristanti et al., 2025).

Meanwhile, cross-sectional and ex-post facto designs are used to analyze the relationships and differences between variables, such as differences in bonding attachment and mothers' psychological conditions based on the type of delivery (Novita & Saragih, 2019). The sampling techniques in each of the reviewed studies also vary, including purposive sampling, total sampling, and incidental sampling, with the number of respondents ranging from a dozen to several dozen postpartum mothers. The research instruments used in the articles include questionnaires, observation sheets, and standard measurement tools like the Numeric Rating Scale (NRS) to measure pain intensity (Rukmasari et al., 2023).

The data analysis process in the reviewed article used various statistical tests, such as the independent T-Test, Wilcoxon test, and Mann-Whitney test, which were used to find differences or effects between variables. Furthermore, in this literature review study, the data was analyzed by grouping the research results based on the main themes, namely: (1) postpartum pain, (2) uterine involution, (3) breast milk production and output, (4) the mother's psychological condition, and (5) bonding attachment between mother and baby.

The analysis is carried out systematically by comparing results across studies to find similarities, differences, and patterns of relationships between variables. The analysis results are then narratively synthesized to give a comprehensive picture of the impact of delivery type on the postpartum condition of mothers.

RESULTS

Based on the review of 10 articles, it was found that the type of delivery has a significant impact on the physiological and psychological condition of postpartum mothers.

From a physiological standpoint, mothers who undergo a cesarean section tend to experience higher pain intensity compared to mothers who give birth naturally. Postoperative pain is one of the main factors that limit a mother's activities, including moving around and taking care of the baby. Studies show that early mobilization interventions are effective in significantly reducing pain intensity in post-C-section mothers, especially if done within a few hours after the surgery (Amperaningsih & Siwi, 2018).

From a physiological standpoint, mothers who undergo a cesarean section tend to experience higher pain intensity compared to mothers who give birth naturally. Postoperative pain is one of the main factors that limit a mother's activities, including moving around and taking care of the baby. Studies show that early mobilization interventions are effective in significantly reducing pain intensity in post-C-section mothers, especially if done within a few hours after the surgery (Amperaningsih & Siwi, 2018).

Besides pain, the process of uterine involution also shows differences between mothers with normal delivery and C-section. Mothers who had a C-section tend to experience a slower uterine involution process compared to those with normal delivery, indicating a delay in the recovery of reproductive organs (Ruliati et al., 2024). This is related to the mother's physical condition still being in the post-surgery recovery stage and the limited mobility experienced.

From a lactation perspective, it has been found that mothers who have cesarean sections more often face difficulties in producing and expressing breast milk compared to mothers who give birth naturally. These difficulties are caused by several factors, such as the effects of anesthesia, the mother's weak physical condition, and delays in initiating early breastfeeding (Yetti & Kurniasari, 2015). However, various non-pharmacological interventions have been proven effective in boosting breast milk production, such as oxytocin massage and back massage. Oxytocin massage works by stimulating the release of oxytocin hormone, which plays a role in milk ejection, while back massage provides a relaxing effect that can increase prolactin and oxytocin hormones (Kristanti et al., 2025). From a psychological perspective, postpartum mothers who have undergone a cesarean section are at a higher risk of experiencing psychological issues compared to mothers who give birth naturally. These issues include post-traumatic stress, postpartum blues, and difficulties with psychological adaptation. Research shows that childbirth experiences that don't meet expectations, pain, and physical limitations are major factors affecting a mother's psychological condition. In addition, social support from family, especially the husband, also plays an important role in helping mothers navigate the postpartum adaptation period.

Next, from the perspective of the mother-baby relationship, it was found that bonding attachment in mothers who had a cesarean section tends to be lower compared to mothers who had a normal delivery. This is due to limited early

interaction between mother and baby because of the mother's physical condition not yet recovering and other limitations. Less optimal bonding attachment can affect the baby's emotional development as well as the mother's confidence in taking care of the child.

Overall, the results from the 10 reviewed articles show a consistent pattern that cesarean deliveries have a more complex impact compared to normal deliveries, both in terms of physiological and psychological aspects.
These findings are backed by qualitative research showing that pregnancy and childbirth conditions can trigger various emotional responses in mothers, such as worry, despair, stress, and even feelings of helplessness in dealing with the pregnancy and childbirth process (Khadivzadeh et al., 2022)

Even so, various interventions like early mobilization, oxytocin massage, and back massage have been proven effective in addressing most of the problems experienced by postpartum mothers, so they can improve the overall quality of the mothers' recovery.

Table 1. Characteristics of the Articles Analysed

No	Title	Writer	Design	Population	Intervention	Comparison	Result
1	Differences in uterine involution in postpartum mothers based on the type of delivery	Ruliati et al., 2024	Cross sectional	All postpartum mothers, whether they gave birth normally or by cesarean section	The type of delivery the postpartum mother went through	Comparison between mothers with normal childbirth and sectio caesarea	Mothers with sectio caesarean delivery experience a slower process of uterine involution compared to normal delivery
2	Effect of early mobilization on pain reduction in post-sectio caesarean mothers	Novita & Saragih, 2019	Quasi experimental	Postpartum mothers with sectio caesarea act First to third day postpartum	Gradual implementation of early mobilization after surgery	Conditions before and after early mobilization	There is a significant decrease in pain intensity after early mobilization
3	The effectiveness of oxytocin massage on	Putra & Rukayah, 2020	Pre-experimental	Postpartum mothers who have problems with breast	Giving oxytocin massage intervention Early days postpartum	Mothers without intervention or conditions before	Oxytocin massage has been shown to increase milk

	increased milk production in postpartum mothers			milk production		oxytocin massage	production and production
4	The relationship between the type of childbirth and the psychological adaptation of postpartum mothers	Taviyanda, 2019	Cross sectional	Postpartum mothers	Risk factors such as social support, maternal condition, and childbirth experience	Comparison of mothers with good and poor support Day 3 to day 10 postpartum	Mothers with less support have a higher risk of developing postpartum blues
5	Factors related to the occurrence of postpartum blues in mothers	Kurniasari & Astuti, 2015	Cross sectional	Postpartum mothers	Risk factors such as social support, maternal condition, and childbirth experience	Comparison of mothers with good and poor support	Mothers with less support have a higher risk of developing postpartum blues
6	Influence of childbirth type on post-traumatic stress events	Amperaningsih & Siwi, 2018	Ex-post facto	Postpartum mothers	Type of childbirth as a risk factor for stress	Comparison between mothers with normal childbirth and sectio caesarea	Mothers with cesarean section are more at risk of post-traumatic stress than normal childbirth
7	The relationship between the type of childbirth and the bonding of the attachmen	Sembiring et al., 2021	Cross sectional	Postpartum mothers and babies Early postpartum period	Types of childbirth experienced by the mother	Comparison between normal delivery and sectio caesarea	Bonding attachment in mothers with sectio caesarea is lower than normal childbirth

	t of mother and baby						
8	The effect of back massage on the smooth production of breast milk	Aini & Suryaningsih, 2021	Pre-experimental	Postpartum mothers Early days postpartum	Giving back massage	Before and after the intervention	Back massage improves the smooth production and production of breast milk
9	The effectiveness of oxytocin massage on breast milk production in postpartum mothers	Kristanti et al., 2025	Quasi experimental	Postpartum mothers	Oxytocin massage as an intervention	Intervention groups and control groups	There was an increase in milk production in the group given oxytocin massage compared to the control group
10	Effectiveness of early mobilization on maternal recovery post sectio caesarea	Cahyawati & Wahyuni, 2023	Quasi experimental	Postpartum mothers with sectio caesarea act	Early mobilization as a recovery intervention	Conditions before and after early mobilization	Early mobilization accelerates the recovery process and improves the physical condition of the mother
11	Childbearing Barriers among Iranian Women: A Qualitative Study	Jalali-Aria K	Qualitative study	Iranian women who are procrastinating or choose not to have children	An exploration of experiences and barriers to the decision to have children	-	The main obstacles were found in the form of economic problems, work-family conflicts, changes in values

							towards motherhood, readiness to become parents, and social factors
12	Diverse Pre-service Midwifery Education Pathways in Cambodia and Malawi: A Qualitative Study Utilising a Midwifery Education Pathway Conceptual Framework	Sarah Neal, Martha Bokosi, Dorothy Lazaro, Sreytouch Vong, Andrea Nove, Sarah Bar-Zeev, Sally Pairman, Erin Ryan, Petra ten Hoope-Bender, Caroline S.E. Homer	Qualitative study	21 maternal health informants in Cambodia and Malawi	Semi-structured interviews on midwifery education	Comparison of Cambodia and Malawi	Variety of educational pathways affects maternal health competencies and services
13	High Risk-pregnant Women's Experiences of Risk Management: A Qualitative Study	Talat Khadivzadeh, Zahra Shojaeian, Ali Sahebi	Qualitative study	25 High-risk pregnant women in Iran	Exploration of pregnancy risk management experiences	-	Emotional responses, self-reflection, and maternal actions in dealing with high-risk pregnancies were found

DISCUSSION

The results of the analysis of the ten articles that have been reviewed show that the type of childbirth has a very significant role in determining the physiological, psychological, and adaptive conditions of the mother during the postpartum period. Sectio caesarean delivery (SC) is consistently associated with a variety of more complex challenges compared to normal delivery.

This condition shows the importance of supporting a comprehensive maternal service system. Research states that health workers with adequate obstetric competence can improve the quality of maternal and infant health services so that the risk of complications can be minimized (Neal et al., 2023). This complexity is not only related to the medical aspect, but also includes the psychosocial dimension that affects the overall quality of life of the mother.

From a physiological aspect, one of the main differences found is the level of pain experienced by postpartum mothers. Mothers with cesarean delivery experience higher pain due to incision wounds in the abdominal wall and uterus. This pain is not only acute, but it can also last for a certain period of time affecting the mother's mobility and activity. Research shows that postoperative pain can hinder the mother's ability to perform basic activities, such as walking, sitting, and even caring for the baby (Risya Ahriyasna, Def Primal, 2023). This condition has implications for delaying the recovery process and increasing maternal dependence on the help of others.

Furthermore, pain that is not handled properly can also trigger physiological stress responses that have an impact on other body systems, such as sleep disturbances, decreased appetite, and decreased immunity. This suggests that pain is not only a physical problem, but also has systemic implications that affect the mother's overall health. Therefore, effective pain management is one of the important aspects of postpartum maternal care.

In this context, early mobilization becomes an intervention that has a strategic role. Based on the results of the study, early mobilization has been proven to be able to significantly reduce pain intensity and accelerate the wound healing process (Ruliati et al., 2024). Early mobilization helps increase blood flow to traumatized tissues, thereby accelerating the process of cell regeneration and wound healing. In addition, early mobilization also plays a role in preventing complications such as deep vein thrombosis and respiratory distress that often occur in postoperative patients. Thus, early mobilization serves not only as an intervention to reduce pain, but also as a preventive effort against more serious complications.

In addition to pain, the process of uterine involution is also an important indicator in the physiological recovery of postpartum mothers. Uterine involution is the process of returning the size of the uterus to its pre-pregnancy state, which is affected by the contraction of the uterine muscles and the hormone oxytocin. The results showed that mothers with sectio caesarean delivery experienced delayed uterine involution compared to mothers who gave birth normally (Ruliati et al., 2024). This delay can be caused by various factors, such as limited mobilization, the effects of anesthesia, as well as surgical wound conditions that affect uterine contractions.

Delayed uterine involution has serious implications, such as an increased risk of postpartum bleeding and infection. Therefore, strict monitoring and appropriate intervention are needed to ensure that the involution process runs optimally. Interventions such as early mobilization, breastfeeding, and stimulation of the hormone oxytocin through mother-infant contact can help accelerate the process of uterine involution.

From the lactation aspect, the results of the study show that mothers with sectio caesarean delivery tend to experience obstacles in milk production and excretion. This is caused by a combination of physiological and psychological factors, such as the effects of anesthesia, pain, fatigue, and stress experienced by the mother. In addition, delays in initiating early breastfeeding are also factors that contribute to low milk production in post-SC mothers.

Breast milk production is strongly influenced by the hormones prolactin and oxytocin, which work synergistically in the lactation process. Therefore, interventions that can stimulate the production of these hormones are very important. Oxytocin massage is one of the interventions that has been proven to be effective in increasing milk production through parasympathetic nerve stimulation that stimulates the secretion of the hormone oxytocin.

The support of health workers also has an important role in increasing the success of interventions in postpartum mothers. The involvement of midwives in providing education, mentoring, and services according to the needs of mothers has an effect on better maternal health outcomes (Neal et al., 2023).In addition, back massage also provides a relaxation effect that can reduce stress and increase the production of lactation hormones.

From a psychological perspective, postpartum mothers with sectio caesarean delivery showed a higher level of susceptibility to psychological disorders compared to mothers who gave birth normally. One of the disorders that is often found is post-traumatic stress, especially in mothers who have had sudden or unplanned SC delivery. A traumatic experience of childbirth can leave a lasting psychological impact, affecting the mother's mental well-being.

In addition, postpartum blues is also a common condition in postpartum mothers, which is characterized by unstable emotional changes, feelings of sadness, and anxiety in caring for the baby (Farhandika Putra, Bayu Purnama Atmaja, 2020). This condition can progress to postpartum depression if not treated properly. Factors such as lack of social support, fatigue, and pressure in carrying out the role of mother can worsen this condition.

The psychological adaptation of postpartum mothers is a complex process and is influenced by various factors, including the type of delivery. Mothers with cesarean delivery tend to experience obstacles in the adaptation process, especially in building confidence as a mother. This shows the importance of adequate emotional support and education to help mothers through the postpartum adaptation period. The bonding attachment aspect between mother and baby was also an important focus in this study. Bonding attachment is an emotional relationship formed from the beginning of a baby's life, which plays a role in the psychological and emotional development of children.

The results showed that mothers with sectio caesarean delivery tended to have lower bonding attachment compared to mothers who gave birth normally (Ruliati et al., 2024). Other studies show that mothers often experience emotional responses in the form of anxiety, fear, despair, and helplessness while facing risky pregnancy and childbirth. These psychological conditions can affect the mother's adaptation after childbirth, including the process of forming emotional bonds with the baby.

This is due to the limited initial interaction between mother and baby due to the mother's physical condition that has not yet recovered and the existence of medical procedures that limit direct contact. Lack of bonding attachment can have an impact on the baby's emotional development as well as the long-term relationship between mother and child. Therefore, interventions such as early breastfeeding initiation, skin-to-skin contact, as well as emotional support are essential to improve bonding attachment.

Overall, the results of this study show that sectio caesarean delivery has a more complex multidimensional impact than normal delivery. However, the right interventions can help address these problems and improve the quality of postpartum maternal recovery. A holistic approach, which includes physical, psychological, and social aspects, is indispensable in the management of postpartum motherhood.

CONCLUSIONS AND RECOMMENDATIONS

Based on the results of the analysis of ten scientific articles that have been reviewed, it can be concluded that the type of childbirth has a significant influence on physiological, psychological, and maternal and infant interactions in the postpartum period. Cesarean delivery in general has a more complex impact compared to normal delivery, both in physical and emotional aspects.

From a physiological aspect, mothers with sectio caesarean delivery tend to experience higher pain intensity, delayed mobilization, and slower uterine involution processes. This condition suggests that physical recovery in post-SC mothers takes longer and requires appropriate interventions to speed up the healing process. In addition, post-SC mothers are also more at risk of experiencing obstacles in breast milk production and production, which can affect the success of exclusive breastfeeding.

From a psychological aspect, mothers with cesarean section delivery have a higher risk of experiencing psychological disorders, such as post-traumatic stress and postpartum blues. This condition is influenced by childbirth experience, physical condition, and social support received by mothers. In addition, the psychological adaptation process of postpartum mothers is also influenced by the type of childbirth, where mothers with SC childbirth tend to experience obstacles in adjusting to their new role as mothers.

From the aspect of mother-baby relationship, bonding attachment in mothers with sectio caesarean delivery tends to be lower compared to mothers with normal delivery. This is due to the limited initial interaction between mother and baby and the mother's physical condition that is not optimal. Overall, the results of this study show that sectio caesarean delivery requires more comprehensive attention in postpartum management. Interventions such as early

mobilization, oxytocin massage, back massage, and psychological support have been proven effective in improving the quality of postpartum maternal recovery. Therefore, a holistic and integrated approach is indispensable to impro Based on the results of an in-depth analysis of ten scientific articles that have been reviewed, it was found that postpartum mothers, especially those who undergo sectio caesarean delivery, face various problems that are multidimensional, including physiological, psychological, and social aspects. These problems are not only related to physical conditions such as postoperative pain, delayed uterine involution, and obstacles in the production and production of breast milk, but also include psychological aspects such as post-traumatic stress, postpartum blues, and difficulties in the process of adapting to a new role as a mother. In addition, the limitation in the initial interaction between mother and baby also has an impact on the formation of optimal bonding attachments.

The complexity of these problems shows that the postpartum period is a very crucial phase and requires comprehensive attention from various parties. Not optimal treatment during this period can have a long-term impact on maternal health and baby development. Therefore, integrated and continuous efforts are needed to improve the quality of postpartum maternal recovery, both through promotive, preventive, curative, and rehabilitative approaches.

Furthermore, the results of the study also show that the level of readiness, knowledge, and motivation of mothers in facing the postpartum period is greatly influenced by the type of delivery, physical condition, social support, and quality of health services received. Mothers with cesarean delivery tend to have greater challenges in the recovery process, so they need more intensive support from health workers, families, and the surrounding environment. A mother's lack of knowledge and readiness can worsen the condition experienced, including in terms of self-care, breastfeeding, and the ability to care for the baby.

In addition, social support factors, especially from husbands and families, have proven to have a very important role in helping mothers get through the postpartum period. The support provided is not only in the form of physical assistance, but also emotional support that can increase the mother's confidence and psychological stability. On the other hand, the role of health workers is also very crucial in providing education, mentoring, and appropriate interventions according to the needs of mothers.

Taking into account these findings, strategic efforts are needed that not only focus on handling the problems that have occurred, but also on improving women's health behavior, readiness, and motivation in facing the postpartum period from an early age. The approach must be holistic and oriented to the needs of the mother, by actively involving various parties. Therefore, some of the following recommendations can be considered as a more comprehensive step in improving the quality of health and well-being of postpartum mothers. To improve women's behavior and motivation in dealing with the postpartum period, especially in the recovery process after normal childbirth or sectio caesarea, several recommendations can be considered.ve the health and well-being of mothers and babies.

FURTHER STUDY

This study has limitations; therefore, further research on the topic "Physiological and Psychological Outcomes of Vaginal and Cesarean Delivery in Postpartum Mothers: A Literature Review" is needed to refine the current study and broaden the insights of both the author and the reader.

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