



DETERMINATION OF THE RELATIONSHIP BETWEEN SPOUSE SUPPORT, COMFORT LEVEL AND FEELINGS OF SECURITY PERCEIVED BY WOMEN IN THE EARLY POSTPARTUM PERIOD

ERKEN POSTPARTUM DÖNEMDE KADINLARIN ALGILADIKLARI EŞ DESTEĞİ, KONFOR DÜZEYİ VE GÜVENLİK HİSLERİ ARASINDAKİ İLİŞKİ



EYLÜL GÜLNUR ERDOĞAN¹,



FATMA BAŞARAN²

¹ Bilecik Seyh Edebali University, Faculty of Health Science, Department of Public Health Nursing, Bilecik, Türkiye,

² Ağrı İbrahim Çeçen University, Faculty of Health Science, Department of Midwifery, Ağrı, Türkiye,

ABSTRACT

Introduction: The early postpartum period is a sensitive phase when women recover physically and adapt to motherhood, and perceived spousal support significantly influences their comfort and sense of security. The present study aimed to examine the relationship between perceived spousal support, comfort level, and sense of security among women in the early postpartum period.

Methods: This cross-sectional study was conducted with 268 women in the early postpartum period who gave birth in the hospital between February and July 2025. Data were collected using the Personal Information Form, the Perceived Spousal Support Scale for Women in the Early Postpartum Period, the Postnatal Comfort Scale, and the Mothers' Postnatal Sense of Security Scale.

Results: The women's levels of perceived spousal support and sense of security were high, while their postpartum comfort levels were moderate to high. A strong positive correlation was observed between perceived spousal support and feelings of safety. Higher levels of spousal support, comfort and safety were observed among younger women, women with higher levels of education, employed women, and women whose spouses had higher levels of education. Additionally, women who plan their pregnancy, participate in childbirth preparation classes, and give birth for the first time have significantly higher scores.

Conclusions: Spousal support in the early postpartum period enhances women's sense of security and psychosocial well-being. Care should holistically involve spouses, strengthen social support for multiparous women, expand individualized nursing/midwifery care, and address women's physical and psychosocial needs through a supportive approach.

Keywords: Early Postpartum Period, Spousal Support, Postpartum Comfort, Sense of Security, Nursing Care, Maternal Health.

ÖZET

Giriş: Erken postpartum dönem, kadınların fiziksel olarak iyileştiği ve annelik rolüne uyum sağladığı hassas bir süreçtir. Bu dönemde algılanan eş desteği, kadının konfor düzeyi ve güvenlik duygusunu önemli ölçüde etkilemektedir. Bu çalışma, erken postpartum dönemdeki kadınlarda algılanan eş desteği, konfor düzeyi ve güvenlik duygusu arasındaki ilişkiyi incelemeyi amaçlamıştır.

Yöntemler: Bu kesitsel çalışma, Şubat ve Temmuz 2025 tarihleri arasında hastanede doğum yapan erken postpartum dönemindeki 268 kadın ile gerçekleştirilmiştir. Veriler, Kişisel Bilgi Formu, Erken Postpartum Dönemde Kadınlar İçin Algılanan Eş Desteği Ölçeği, Postpartum Konfor Ölçeği ve Annelerin Postpartum Güvenlik Duygusu Ölçeği kullanılarak toplanmıştır.

Bulgular: Kadınların algılanan eş desteği ve güvenlik duygusu düzeyleri yüksek, postpartum konfor düzeyleri ise orta ile yüksek arasında bulunmuştur. Algılanan eş desteği ile güvenlik duygusu arasında güçlü bir pozitif ilişki saptanmıştır. Daha genç, eğitim düzeyi yüksek, çalışan kadınlar ve eşlerinin eğitim düzeyi yüksek olan kadınlarda eş desteği, konfor ve güvenlik düzeyleri daha yüksek bulunmuştur. Ayrıca, gebeliğini planlayan, doğuma hazırlık eğitimi katılan ve ilk doğumunu yapan kadınların puanları anlamlı şekilde daha yüksektir.

Sonuç: Erken postpartum dönemde eş desteği, kadınların güvenlik duygusunu güçlendirmekte ve psikososyal iyi oluşlarını artırmaktadır. Bakım süreçleri, eşlerin bütüncül biçimde dahil edilmesini sağlamalı; çok doğum yapmış kadınlara yönelik sosyal destek güçlendirilmeli, bireyselleştirilmiş hemşirelik/ebelik bakımı genişletilmeli ve kadınların fiziksel ile psikososyal gereksinimleri destekleyici bir yaklaşımla ele alınmalıdır.

Anahtar Kelimeler: Erken Postpartum Dönem, Eş Desteği, Doğum Sonu Konfor, Güvenlik Hissi, Hemşirelik Bakımı, Anne Sağlığı

INTRODUCTION

Pregnancy, childbirth, and the postpartum period represent significant turning points in a woman's life. The consequences of such processes are twofold. On the one hand, they have a direct impact on individuals, families and close relationships. On the other hand, they also have a profound effect on the overall structure of society (1). The postpartum period is a critical stage in the perinatal process and a highly sensitive time for families (2-3). In the early postpartum period, covering the first week after childbirth, mothers must adapt to physical and psychological changes

(4-5). Mothers also experience significant psychological and social changes during this period, such as adapting to the maternal role, taking on the responsibility of caring for their babies, and reorganizing family relationships (2-6). Providing social, physical, and psychological support to mothers during this period has been shown to help them cope with stress and maintain their mental well-being after childbirth (7-8).

Many women do not feel adequately prepared for motherhood and require support from family members, friends and healthcare professionals during this time (9). It is

Corresponding Author: Eylül Gülnur Erdoğan, Department of Public Health Nursing, Bilecik Seyh Edebali University, Faculty of Health Science, Bilecik, Türkiye

E-mail: eylulgulnurerdogan@gmail.com

ORCID: 0000-0002-4770-385X

Submission Date: 16.09.2025 **Acceptance Date:** 03.11.2025

Cite as: Erdogan EG, Başaran F. Determination Of The Relationship Between Spouse Support, Comfort Level And Feelings Of Security Perceived By Women In The Early Postpartum Period. Eskisehir Med J. 2025; 6(3): 274-288. doi: 10.48176/ esmj.2025.220.

known that women experience many physical and psychological problems during the postpartum period, such as pain, fatigue, engorgement in the early stages, mastitis, small and inverted nipples, infection, stress incontinence, constipation, and feeling inadequate in caring for their newborn. (10-11). During this period, in addition to the changes that cause the mother to experience intense stress, changes in family dynamics and adapting to new parenting roles and responsibilities affect the mother's comfort. (12).

The French term 'comfort' is used to denote economic ease that facilitates daily life. It encompasses assessing an individual's, family's or society's comfort needs, implementing measures to address these needs, providing a fundamental level of comfort and evaluating the level of comfort attained (13). Postpartum comfort is defined as the quality of life experienced by a woman in relation to these issues. The level of comfort experienced by the mother is influenced by factors such as the planned nature of the pregnancy, her perception of childbirth, her overall health status, the behavior of healthcare personnel, the quality of education provided during her hospital stay and her satisfaction with the care provided (14-15).

Another important factor that directly affects women's quality of life in the postpartum period is their sense of security (16). If they experience insecurity during this period, they may have difficulty adapting to the parenting role and bonding with their baby (17-18). During this period, both parents should be informed and supported regarding newborn care. However, mothers have significantly greater needs for physical and emotional support (19). In the postpartum period, a mother's sense of security is directly related to the quality of maternal care, the level of social support, her sense of control, her attitudes and her spousal support (20). Additionally, spouses need to understand and meet the basic needs of newborns in order to safely adapt to their new parenting roles (21).

There are several studies in the literature examining mothers' sense of security in the postpartum period (16-18, 22-27), as well as studies examining their level of postpartum comfort (28-30), no study has been found that comprehensively investigates the relationship between perceived spousal support and comfort in relation to the postpartum sense of security. Maternal and newborn health is important not only at an individual level, but also in terms of family and public health. Therefore, understanding how perceived spousal support affects maternal comfort and sense of security can provide information for interventions that will increase maternal well-being and improve family health outcomes. This study aims to examine the relationship between perceived spousal support, comfort levels and sense of security in women during the early postpartum period.

METHODS

Study Design

This research is a cross-sectional study.

Participants

The study population included 877 births that occurred between January and December 2024. The sample size was calculated using the known population formula with a 5% margin of error and 95% confidence level, resulting in a total of 268 mothers included in the study. Mothers over 18 years old who had a vaginal or cesarean delivery, were

hospitalized in the postpartum unit, had a healthy live baby, were in the early postpartum period, and could communicate in Turkish were included. Mothers with a history of psychiatric or systemic illness, those who experienced maternal or fetal complications during childbirth or postpartum, or those with communication difficulties that could hinder participation were excluded.

Data Collection and Instruments

After obtaining ethical approval and permissions, data were collected through face-to-face interviews with postpartum women who provided informed consent. Data were collected using the "Personal Information Form", the "Perceived Spousal Support Among Women in the Early Postpartum Period Scale", the "Postpartum Comfort Scale" and the "Mothers' Postnatal Sense of Security Scale".

Personal Information Form: This form was developed by the researchers based on existing literature (4,17,31,32) and comprises 24 questions covering the sociodemographic, obstetric and postpartum characteristics of the mothers.

Perceived Spousal Support Among Women in Early Postpartum Period Scale (PSS-AWEPP): The scale was developed by Hotun Şahin et al. (33) and is a 16-item, five-point Likert-type scale. The scale has three sub-dimensions: emotional, social and physical support. There is no cut-off point for the scale. The higher the score obtained, the greater the perception of adequate spousal support in the early postpartum period. The total Cronbach's alpha value of the scale is 0.87; in this study, it was found to be 0.89.

Postpartum Comfort Scale (PCS): The General Comfort Scale was developed by Kolcaba (34) and adapted into Turkish by Kuşuoğlu and Karabacak (35). Karakaplan and Yıldız (36) developed the Postpartum Comfort Scale from the General Comfort Scale. The scale consists of 34 items in a five-point Likert format. It has three sub-dimensions: physical, psychospiritual and sociocultural comfort. A higher score indicates greater comfort. The total Cronbach's alpha value of the scale is 0.78; in this study, it was found to be 0.82.

Mothers' Postnatal Sense of Security Scale (MPSSS): This scale, developed by Persson et al. (37) to measure mothers' feelings of security in the first week postpartum, and its Turkish validity and reliability, were conducted by Geçkil et al. (38). The scale is a four-point Likert-type scale consisting of 18 items. It has four sub-dimensions: empowering behavior; general well-being; family ties; and breastfeeding behavior. The higher the score obtained, the greater the sense of security. The total Cronbach's alpha value of the scale is 0.84; in this study, it was found to be 0.87.

Data Analysis

The research data were analyzed using SPSS 25.0 (Statistical Package for the Social Sciences). Normality of the data was assessed through skewness and kurtosis values. The independent samples t-test was used to compare two groups when the normality assumption was met, while one-way ANOVA was applied to compare more than two groups with normally distributed data. When normality was not assumed, the Mann-Whitney U test was used for two-group comparisons and the Kruskal-Wallis H

Table 1. Sub-dimension and total scores of PSS-AWEPP, PCS, and MPSSS according to socio-demographic characteristics of mothers

Characteristics	N (%)	PSS-AWEPP				PCS				MPSSS				
		$\bar{X} \pm SD$				$\bar{X} \pm SD$				$\bar{X} \pm SD$				
Age		Total	Emotional	Social	Physical	Total	Physical	Psychospiritual	Sociocultural	Total	Empowerin g behavior	General well-being	Family ties	Breastfeeding behavior
18-23 years ^a	68 (25.4)	65.32±11.57	28.82±7.36	23.92±3.95	12.57±2.41	115.48±18.62	43.39±7.65	40.13±7.87	31.95±6.39	53.79±11.43	19.26±4.89	12.04±3.62	13.16±3.25	9.32±2.67
24-29 years ^b	111(41.4)	64.91±8.87	29.33±6.05	23.54±3.59	12.04±2.52	121.00±11.16	47.08±5.53	39.81±5.61	34.09±4.88	53.47±8.23	18.72±4.80	12.79±2.51	12.63±3.12	9.31±2.16
30-35 years ^c	62 (23.1)	61.35±14.13	27.25±6.87	22.25±5.48	11.83±2.93	116.83±8.77	45.37±3.72	39.59±5.80	31.87±5.39	54.51±8.54	19.06±3.46	12.90±4.01	13.35±3.24	9.19± 1.81
36-40 years ^d	27 (10.1)	54.07±15.44	22.51±8.73	21.25±5.01	10.29±3.24	111.96±23.40	43.11±9.36	38.25±8.50	30.59±9.00	53.00±9.88	18.59±5.37	12.77±3.84	12.29±4.16	9.33± 2.44
		F=5.058 p=.003 (a-d) (b-d)	KW=18.128 p=.000 (a-d) (b-d)	KW=5.771 p=.123	KW=10.376 p=.016 (a-d) (b-d)	KW=11.906 p=.008 (b-c)	KW=25.715 p=.000 (a-b)	KW=2.341 p=.505	KW=14.142 p=.003 (b-c)	F=.255 p=.858	F=.230 p=.875	F=.828 p=.482	F=1.065 p=.365	F=.066 p=.978
Sex of the baby														
Girl	138(51.5)	64.13±11.40	28.65±6.72	23.41±4.08	12.07±2.52	117.62±13.28	45.83±5.60	39.40±6.56	32.38±5.49	53.38±8.78	18.55±4.48	12.60±3.18	12.81±3.34	9.39±2.10
Male	130(48.5)	62.00±12.75	27.38±7.53	22.79±4.69	11.83±2.93	117.83±16.27	44.83±7.25	39.99±6.64	33.00±6.53	54.13±9.90	19.32±4.69	12.64±3.50	12.99±3.26	9.17±2.40
		t=1.443 p=.150	t=1.455 p=.147	Z=-.579 p=.563	t=.723 p=.470	Z=-.074 p=.941	Z=-2.219 p=.026	Z=-.901 p=.368	t=.848 p=.397	t=-.660 p=.510	t=-.092 p=.927	tt=-.092 p=.927	Z=-.572 p=.568	t=.804 p=.422
Mother's education level														
Literate/to primary school ^a	57 (21.3)	59.33±14.99	25.89±8.61	22.26±5.21	11.17±3.34	115.47±17.70	45.78±7.54	37.89±7.59	31.78±6.63	52.36±9.48	18.78±4.51	12.89±3.61	11.50±3.71	9.17±2.36
Middle School ^b	57 (21.3)	63.45±9.88	28.57±6.56	22.98±3.15	11.89±2.51	116.68±20.63	44.96±8.74	39.14±8.39	32.57±7.01	55.10±9.46	18.47±5.08	13.19±3.09	13.52±3.15	9.91±2.01
High school ^c	75 (28.0)	60.32±11.91	25.82±7.42	22.52±4.61	11.97±2.30	117.54±11.04	44.32±5.44	39.46±5.41	33.76±6.03	51.92±10.53	18.61±4.85	12.24±3.47	12.33±3.40	8.73±2.40
Associate degree and above ^d	79 (29.5)	68.21±9.52	31.29±4.37	24.37±4.10	12.54±2.66	120.27±9.52	46.29±4.11	41.59±4.77	32.39±4.54	55.50±7.41	19.65±3.99	12.39±3.15	14.00±2.46	9.45±2.09
		F=9.343 p=.000 (a-d) (b-d) (c-d)	KW=30.858 p=.000 (a-d) (b-d) (c-d)	KW=13.976 p=.003 (c-d)	KW=8.109 p=.044 (a-d)	KW=4.817 p=.186	KW=9.556 p=.090	F=4.704 p=.004 (a-d)	F=1.292 p=.278	KW=4.842 p=.184	F=.984 p=.401	F=1.136 p=.335	KW=22.846 p=.000 (a-b) (a-d) (c-d)	F=3.242 p=.023 (b-c)
Spouse's education level														
Literate/to primary school ^a	50 (18.7)	56.42±13.38	23.12±9.24	22.36±4.65	10.94±2.82	112.86±24.77	44.94±9.95	36.40±9.65	31.52±8.27	53.54± 8.66	19.38±3.92	12.42±3.62	12.46±3.72	9.28±2.17
Middle School ^b	66 (24.6)	62.69±13.16	27.87±6.88	22.57±4.73	12.24±2.80	119.60±11.62	45.09±5.52	40.72±5.70	33.78±5.00	51.09± 10.44	17.66±4.90	11.98±3.07	12.22±3.54	9.21±2.42
High school ^c	69 (25.7)	63.55±10.70	28.72±6.48	23.11±4.00	11.71±2.67	117.52±11.99	46.28±6.11	38.55±5.05	32.68±5.79	52.21± 9.08	17.81±4.68	13.75±3.22	12.05±3.47	8.59±2.00
Associate degree and above ^d	83 (31.0)	67.08±9.68	30.55±4.57	23.98±4.19	12.54±2.49	119.33±9.93	45.02±4.53	41.79±5.11	32.51±5.22	57.26± 7.98	20.59±4.12	12.32±3.28	14.40±1.98	9.93±2.21
		F=8.315 p=.000 (a-c) (a-d)	KW=25.496 p=.000 (a-b) (a-c) (a-d) (b-d)	KW=7.099 p=.069	KW=13.253 p=.004 (a-d)	KW=0.930 p=.818	KW=2.767 p=.429	F=7.830 p=.000 (a-b) (a-d) (c-d)	KW=3.089 p=.378	F=6.743 p=.000 (b-d) (c-d)	F=7.269 p=.000 (b-d) (c-d)	F=3.844 p=.010 (b-c) (c-)	F=13.778 p=.000 (a-d) (b-d) (c-d)	F=4.703 p=.003 (c-d)

$\bar{X}$: Mean, SD: Standard deviation, t: Independent samples t-test, F: One-way ANOVA, KW: Kruskal Wallis, Z: Mann-Whitney U test.

Table 1. Sub-dimension and total scores of PSS-AWEPP, PCS, and MPSSS according to socio-demographic characteristics of mothers (CONTINUED)

Characteristics		PSS-AWEPP				PCS				MPSSS				
		$\bar{X} \pm SD$				$\bar{X} \pm SD$				$\bar{X} \pm SD$				
Mother's employment status		Total	Emotional	Social	Physical	Total	Physical	Psychospiritual	Sociocultural	Total	Empowering behavior	General well-being	Family ties	Breastfeeding behavior
Yes	77 (28.7)	66.15±11.03	29.16±7.11	24.19±4.39	12.81±2.33	120.28± 9.96	45.71±4.53	41.64±5.41	32.92± 4.54	55.79±8.86	19.74±4.38	12.61±3.28	13.98±2.59	9.45±2.51
No	189(70.5)	61.83±12.32	27.57±7.16	22.66±4.35	11.59±2.81	116.59±16.29	45.20±7.13	38.85±6.90	32.53± 6.53	52.87±9.45	18.55±4.65	12.62±3.38	12.47±3.47	9.21±2.15
		t=-2.792 p=. .006	Z=-2.110 p=. .035	Z=-3.254 p=. .001	Z=-3.491 p=. .000	Z=-2.308 p=. .021	Z=-1.254 p=.210	t=-3.174 p=. .002	t=-.552 p=.264	t=-2.325 p=. .021	t=-1.914 p=.057	t=.042 p=.966	Z=-3.405 p=. .001	t=-.776 p=.438
Spouse's employment status														
Yes	242(90.3)	63.37±11.30	28.15±6.78	23.25±4.24	11.96±2.60	117.47±15.09	45.39±6.47	39.85±6.67	32.22± 5.95	54.11±9.04	19.04±4.49	12.81±3.30	13.01±3.26	9.23±2.30
No	26 (9.7)	60.61±18.01	26.96±9.98	21.80±5.54	11.84±3.75	120.07±11.49	44.92±6.51	38.15±5.78	37.00± 4.76	50.38±11.38	17.84±5.42	10.88±3.16	11.88±3.52	9.76±1.70
		t=-.764 p=.451	t=-.594 p=.558	t=-1.596 p=.112	t=-.160 p=.874	Z=-.498 p=.618	Z=-1.524; p=.128	Z=-1.774 p=.076	t=3.952 p=. .000	t=-1.944 p=.053	t=-1.265 p=.207	t=-2.838 p=. .005	t=-1.659 p=.098	t=1.139 p=.256
Family Type														
Nuclear Family	238(88.8)	63.55±11.78	28.39±6.72	23.16±4.46	11.98±2.73	117.97±14.90	45.21±6.43	40.09±6.56	32.66±6.13	53.94±9.43	18.92± 4.34	12.74±3.34	12.95±3.23	9.32±2.20
Extended Family	30 (11.2)	59.53±14.10	25.16±9.54	22.66±3.84	11.70±2.71	115.76±13.89	46.46±6.71	36.46±6.02	32.83±5.03	52.23±8.46	19.00± 6.36	11.70±3.18	12.50±3.87	9.03±2.61
		t=1.721; p=.086	t=1.800; p=.081	t=.588; p=.557	t=.542; p=.588	Z=-1.578; p=.115	Z=-.482; p=.630	Z=-3.260; p=. .001	t=-.142; p=.888	t=.944; p=.346	t=-.067; p=.947	t=1.619; p=.107	t=.708; p=.479	t=.664; p=.507
Perception of income status														
Income<Expense	130(48.5)	62.49±13.94	27.31±8.16	23.26±4.76	11.90±2.90	117.33±18.98	45.22±8.11	39.65±7.67	32.45±7.06	53.40±10.16	18.75± 4.78	12.44±3.51	12.92±3.73	9.28±2.37
Income=Expense	114(42.5)	63.64± 8.92	28.50±5.83	23.14±3.64	12.00±2.32	118.57±8.77	45.32±4.29	39.97±5.44	33.27±4.78	52.94±8.43	18.61± 4.50	12.67±3.11	12.50±2.88	9.14± 2.20
Income>Expense	24 (9.0)	63.87±14.63	29.70±6.61	22.16±5.55	12.00±3.57	115.87±11.41	46.16±4.88	38.54±5.21	31.16±4.80	59.41±6.71	21.37± 3.18	13.37±3.41	14.66±1.92	10.00±1.66
		F=.316 p=.730	KW=2.500 p=.286	KW=.376 p=.829	F=.039 p=.962	KW=1.821 p=.402	F=.340 p=.713	KW=2.065 p=.356	F=2.073 p=.134	F=8.814 p=. .000 (a-c) (b-c)	F=3.838 p=. .023 (a-c) (b-c)	F=.804 p=.449	F=10.386 p=. .000 (a-c) (b-c)	F=2.320 p=.105
Number of children alive														
1 ^a	140(52.2)	66.53±10.06	29.89±6.42	24.16±3.85	12.47±2.53	120.40±12.12	45.94±5.98	41.15±5.18	33.30± 5.65	52.87± 9.26	18.84±4.43	11.77±3.04	13.12±3.07	9.12±2.29
2 ^b	67 (25.0)	64.26±10.59	28.47±6.47	23.41±3.94	12.37±2.10	114.86±16.61	43.97±6.55	38.95±7.67	31.94± 6.11	57.50±8.60	19.89±4.36	14.23±3.51	13.76±2.74	9.61±2.11
3 and above ^c	61 (22.8)	53.95±13.40	23.29±7.35	20.36±4.90	10.29±3.13	114.72±17.13	45.50±7.25	37.13±7.37	32.08± 6.62	51.63±9.24	18.06±5.06	12.80±3.15	11.44±3.90	9.32±2.30
		KW=46.491 p=. .000 (a-c) (b-c)	KW=32.554 p=. .000 (a-c) (b-c)	KW=24.476 p=. .000 (a-c) (b-c)	KW=9.443 p=. .009 (a-b) (a-c)	KW=4.864 p=.088	F=8.498 p=. .000 (a-c)	F=1.575 p=.209	F=8.003 p=. .000 (a-b) (b-c)	F=2.612 p=.075	F=13.591 p=. .000 (a-b) (b-c)	F=7.399 p=. .001 (a-c) (b-c)	F=1.084 p=.340	F=21.486 p=. .000 (a-c) (b-c)

$\bar{X}$: Mean, SD: Standard deviation, t: Independent samples t-test, F: One-way ANOVA, KW: Kruskal Wallis, Z: Mann-Whitney U test.

test for comparisons among more than two groups. Post-hoc analyses were performed using Bonferroni and Games-Howell tests. A significance level of $p < 0.05$ was applied for all statistical analyses.

Ethical Considerations

Ethical approval was obtained from the Non-Interventional Clinical Research Ethics Committee of the Faculty of Medicine, Bilecik Şeyh Edebali University prior to the implementation of the study (Date:01.01.2025; No. 2024/11). Following the ethical approval, institutional permission was obtained from Bilecik Training and Research Hospital (Date: 13.01.2025; No. 2025/06).

RESULTS

The mean age of the mothers ($n = 268$) was 27.91 ± 5.36 years. While 29.5% of the mothers had an associate degree or higher, 70.5% stated that they were not employed. Among the participants' spouses, 31.0% had an associate degree or higher, and 90.3% were employed. A total of 88.8% of the participants lived in a nuclear family structure, and 48.5% reported that their income was less than their expenses (Table 1).

The mothers reported that 44.4% had their first pregnancy, 68.3% had a planned pregnancy, and 62.7% gave birth by cesarean section. 71.3% of participants stated that they exclusively breastfed their babies, 35.1% received childbirth preparation education, and 70.9% received infant care and breastfeeding education. In the postpartum period, 89.9% of mothers reported receiving support from family members and 67.2% reported receiving support from their spouses. Among the areas where mothers most needed support in the postpartum period, 75.7% stated sleep and rest, 51.5% stated infant care, 49.3% stated housework, and 42.5% stated emotional support. During the postpartum period, 76.5% of mothers reported difficulty sleeping and resting, 25.7% reported breastfeeding problems, 21.6% reported inadequate nutrition, and 18.7% reported problems bathing (Table 2).

When the PSS-AWEPP mean scores were compared according to the mothers' sociodemographic and birth-related characteristics, statistically significant differences were found based on the mother's age, employment status, educational level, number of living children, total number of pregnancies, whether the pregnancy was planned, participation in childbirth preparation education, receiving care support from the spouse, and the need for support regarding baby care and breastfeeding in the postpartum period ($p < 0.05$). When the median scores of the PSS-AWEPP subdimensions were compared, statistically significant differences were found in all subdimensions except the social support subdimension in relation to the mother's age, the spouse's educational level and whether the pregnancy was planned ($p < 0.05$). Statistically significant differences were also observed across all subdimensions based on the mother's educational and employment status, the number of living children, total number of pregnancies, participation in childbirth preparation education, receiving support from the spouse in the postpartum period and the need for support in baby care and breastfeeding (Tables 1 and 2).

When the PCS mean scores were compared according to the mothers' sociodemographic and birth-related characteristics, statistically significant differences were found in relation to age, employment status, total number of

pregnancies, whether the pregnancy was planned, mode of delivery, pregnancy experience, presence of postpartum emotional coping difficulties, presence of breastfeeding problems, receiving care support from a spouse or healthcare professional, and need for emotional support in the postpartum period ($p < 0.05$). Statistically significant differences were also observed across all PCS subdimensions based on the pregnancy experience and whether the mother received support from her spouse during the postpartum period (Table 1 and Table 2).

When the MPSSS mean scores were compared according to the mothers' sociodemographic and birth-related characteristics, statistically significant differences were found in relation to the spouse's educational level, employment status, perceived income level, mode of delivery, pregnancy experience, participation in childbirth preparation education, difficulties experienced with bathing during the postpartum period, and receipt of care support from the spouse or healthcare professionals ($p < 0.05$). When the MPSSS subdimension mean scores were compared, statistically significant differences were observed across all subdimensions based on the spouse's educational level (Tables 1 and 2).

Table 3 shows the relationships between the total and subscale scores of PSS-AWEPP, PCS, and MPSSS. Mothers' postpartum comfort was moderate (117.72 ± 14.78), while perceived spousal support (63.10 ± 12.10) and sense of security (53.75 ± 9.33) were high. A strong positive correlation was found between PSS-AWEPP and MPSSS total scores ($r = 0.697$, $p < 0.001$). Weak, non-significant positive correlations were observed between PSS-AWEPP and PCS and between PCS and MPSSS ($r = 0.041$ and $r = 0.068$; $p > 0.05$).

DISCUSSION

In this study, conducted to evaluate the levels of perceived spousal support, postpartum comfort, and sense of security among women in the early postpartum period, it was found that women had high levels of spousal support and sense of security, while their postpartum comfort levels were moderate to high. The main factors positively influencing women's perceived spousal support, comfort level, and sense of security included being younger in age, being employed, having a spouse with a higher education level, experiencing a planned pregnancy, receiving childbirth preparation education, receiving spousal support during the postpartum period, and encountering certain challenges after childbirth.

The levels of spousal support and postnatal sense of security among women were found to be high, while their postpartum comfort levels were moderate to high. Women who reported higher levels of spousal support also tended to feel more secure. However, the relatively lower comfort levels suggest that the postpartum period is influenced by more complex factors related to physical and environmental conditions. A review of the literature reveals that, in line with our findings, postpartum comfort is affected by a range of physical, psychospiritual, and sociocultural factors (14). In a qualitative study conducted by Wiklund et al. (22), family support was identified as a significant factor in fostering a sense of security among parents. Similarly, another descriptive study reported that spousal support during pregnancy and the postpartum period was an important determinant of postpartum sense of security for both primiparous and multiparous mothers (39).

Table 2. PSS- AWEPP, PCS, and MPSSS sub-dimension and total scores of mothers according to the characteristics of the birth process

Characteristics	N (%)	PSS-AWEPP				PCS				MPSSS				
		$\bar{X} \pm SD$				$\bar{X} \pm SD$				$\bar{X} \pm SD$				
Total number of pregnancies		Total	Emotional	Social	Physical	Total	Physical	Psychospiritual	Sociocultural	Total	Empowering behavior	General well-being	Family ties	Breastfeeding behavior
1 ^a	119(44.4)	66.93±10.17	30.17±6.48	24.22±4.01	12.52±2.62	120.47±12.87	46.42±6.14	41.12±5.36	32.93±5.74	53.15± 8.96	18.81± 4.46	11.96±3.11	13.12±3.13	9.24±2.08
2 ^b	60 (22.4)	65.35±9.61	28.45±6.72	24.28±3.15	12.61±1.79	115.46±17.43	43.26±6.98	39.95±7.68	32.25±6.52	55.73± 10.03	19.95± 4.64	12.66±3.76	13.80±2.64	9.31±2.74
3 and above ^c	89 (33.2)	56.47±13.26	24.89± 7.20	20.83±4.74	10.74±2.99	115.57±14.78	45.32±6.24	37.59±6.83	32.65± 6.06	53.21± 9.25	18.39± 4.68	13.48±3.15	12.00±3.72	9.33±2.12
		F=19.743 p=.000 (a-c) (b-c)	KW=46.49 1 p=.000 (a-c) (b-c)	F=20.547 p=.000 (a-c) (b-c)	F=13.041 p=.000 (a-c) (b-c)	KW=6.982 p=.030 (a-c)	KW=11.681 p=.003 (a-b)	KW=16.037 p=.000 (a-c)	F=.258 p=.773	F=1.755 p=.175	F=2.138 p=.120	F=5.438 p=.005 (a-c)	F=6.023 p=.003 (a-c) (b-c)	KW=.054 p=.948
Planned pregnancy														
Planned	183(68.3)	64.84±11.51	29.09±6.93	23.43±4.04	12.30±2.60	119.37±14.79	45.64±6.80	41.02±6.18	32.70±6.29	54.25±9.66	18.97±4.87	12.69±3.34	13.32±2.98	9.25±2.39
Unplanned	85 (31.7)	59.36 12.55	25.75±7.08	22.41±5.03	11.20±2.85	114.18±14.21	44.71±5.64	36.82±6.58	32.64±5.38	52.65±8.53	18.82±3.94	12.48±3.32	11.98±3.75	9.36±1.93
		t=-3.520 p=.001	Z=-4.781 p=.000	Z=-1.430 p=.153	t=-3.136 p=.002	Z=-2.614 p=.009	Z=-.113 p=.910	Z=-5.345 p=.000	Z=-.099 p=.921	t=-1.367 p=.173	t=-.276 p=.783	t=-.482 p=.630	t=-3.139 p=.002	t=-.393 p=.695
Mode of delivery														
Normal vaginal delivery	100(37.3)	63.63±11.33	29.03±6.37	22.66±4.44	11.94±2.82	119.86±16.98	46.06±7.52	40.38±7.18	33.42±6.26	55.69±8.84	19.84±4.17	12.88±2.99	13.21±2.91	9.76±2.21
Cesarean delivery	168(62.7)	62.79±12.56	27.44± 7.51	23.38±4.35	11.96±2.68	116.45±13.19	44.92±5.72	39.27±6.20	32.25±5.83	52.59±9.45	18.38±4.75	12.47±3.52	12.72±3.51	9.01±2.23
		t=-.548 p=.584	Z=-1.601 p=.109	Z=-1.632 p=.103	t=-.070 p=.944	Z=-2.268 p=.023	Z=-1.289 p=.198	Z=-1.960 p=.050	t=-1.544 p=.124	t=-2.654 p=.008	t=-2.258 p=.012	t=-.998 p=.319	t=1.174 p=.241	t=-2.657 p=.008
The baby's diet														
Breast milk only ^a	191(71.3)	63.02±11.70	28.37±6.59	22.83± 4.17	11.81±2.79	116.47±15.90	45.07±6.76	38.84±6.97	32.56± 6.16	54.26± 9.29	19.30±4.47	12.51±3.22	12.94±3.24	9.49±2.25
Only Mama ^b	14 (5.2)	62.35±10.83	28.07±4.85	21.71± 4.41	12.57±2.27	121.78±6.51	46.50±4.84	43.00±4.20	32.28±4.42	52.78± 7.82	19.50±2.37	13.50±3.05	11.07±4.28	8.71±1.89
Breast milk and mama ^c	63 (23.5)	63.50±13.63	27.00±8.94	24.25± 4.88	12.25±2.63	120.61±11.84	45.93±5.81	41.52±5.16	33.15± 5.89	52.41±9.73	17.65±5.11	12.76±3.71	13.19±3.18	8.80±2.27
		F=.065 p=.937	F=.624 p=.541	KW=10.234 p=.079	F=.998 p=.370	KW=3.425 p=.180	KW=.676 p=.713	F=8.640 p=.001 (a-b) (a-c)	F=.266 p=.767	F=1.008 p=.366	F=2.876 p=.068	F=.630 p=.534	F=2.428 p=.090	F=2.688 p=.070

$\bar{X}$: Mean, SD: Standard deviation, t: Independent samples t-test, F: One-way ANOVA, KW: Kruskal Wallis, Z: Mann-Whitney U test.

Table 2. PSS -AWEPP, PCS, and MPSSS sub-dimension and total scores of mothers according to the characteristics of the birth process (CONTINUED)

Characteristics	N (%)	PSS-AWEPP				PCS				MPSSS				
		$\bar{X} \pm SD$				$\bar{X} \pm SD$				$\bar{X} \pm SD$				
Gestational process		Total	Emotional	Social	Physical	Total	Physical	Psychospiritual	Sociocultural	Total	Empowering behavior	General well-being	Family ties	Breastfeeding behavior
Very bad ^a	17 (6.3)	66.76±7.10	30.58±3.57	22.94± 2.81	13.23±1.88	116.11±10.20	45.00±3.98	38.00±5.65	33.11± 3.90	53.29±9.53	18.05±4.86	12.35±4.37	13.29±3.49	9.58±2.00
Bad ^b	23 (8.6)	62.73±12.56	26.56±7.63	23.86± 3.93	12.30±2.78	128.13±9.58	51.91±7.24	42.17±3.40	34.04± 4.36	52.13±6.23	18.26±3.37	11.95±2.88	13.13±2.89	8.78±1.88
Middle ^c	118(44.0)	63.86±10.76	28.27±6.56	23.42± 3.73	12.16±2.66	117.65±14.43	44.85±5.61	39.26±6.82	33.53± 6.32	52.47±9.58	18.35±5.00	12.50±2.85	12.34±3.40	9.27±2.38
Good ^d	69 (25.7)	59.56±14.47	26.31±8.05	22.28± 5.91	10.95±3.13	112.72±16.27	43.82±6.34	37.97±7.34	30.92± 6.36	56.69±8.41	20.24±3.90	13.34±3.57	13.30±3.49	9.79±1.89
Very good ^e	41 (15.3)	65.56±11.85	30.00±7.32	23.24±3.90	12.31±1.96	121.19±13.73	45.80±7.29	43.12±4.58	32.26±5.50	53.56±10.67	19.09±4.64	12.26±3.89	13.53±2.64	8.65±2.58
		F=2.415 p=.057	KW=17.411 p=. 002 (a-d)	F=.691 p=.600	KW=13.034 p=. 011 (a-d) (d-e)	KW=24.879 p=. 000 (b-c) (b-d) (d-e)	KW=19.721 p=. 001 (a-b) (b-c) (b-d) (d-e)	F=8.333 p=. 000 (a-e) (b-c) (b-d) (c-e) (d-e)	KW=8.398 p=.078	F=2.510 p=. 042 (c-d)	F=2.601 p=. 044 (c-d)	F=1.128 p=.351	F=1.565 p=.184	F=2.077 p=.084
Childbirth preparation training														
Yes	94 (35.1)	66.36± 8.64	29.73±6.34	24.17±3.32	12.45±2.02	118.59±15.28	45.81±6.23	40.77±7.07	32.00±5.78	55.64±8.45	19.47±4.32	12.87±3.11	13.76±2.59	9.53±2.28
No	174(64.9)	61.34±13.30	27.12±7.39	22.54±4.79	11.68±3.01	117.25±14.53	45.09±6.58	39.10±6.27	33.05±6.12	52.72±9.64	18.63±4.72	12.49±3.45	12.43±3.55	9.16±2.23
		t=-3.727 p=. 000	Z=-3.114 p=. 002	t=-3.262 p=. 001	t=-2.498 p=. 013	Z=-1.747 p=.081	Z=-1.844 p=.065	Z=-2.814 p=. 005	t=1.376 p=.170	t=-2.471 p=. 014	t=-1.441 p=.151	t=-.885 p=.377	t=-3.501 p=. 001	t=-1.287 p=.199
Receiving information about postnatal baby care and breastfeeding														
Yes	190(70.9)	63.26±11.88	28.11± 6.97	23.15± 4.42	11.99±2.74	116.25±14.55	44.62±6.08	39.38±7.31	32.24± 5.53	54.22± 9.71	19.06± 4.62	12.64±3.51	13.07±3.20	9.43± 2.31
No	78 (29.1)	62.71±12.69	27.84± 7.57	23.01± 4.34	11.85±2.70	121.32±14.82	47.11±7.04	40.43±4.35	33.76± 6.96	52.58± 8.28	18.58± 4.53	12.57±2.88	12.48±3.52	8.93± 2.05
		t=-.334 p=.738	t=-.280 p=.780	Z=-.687 p=.492	t=-.369 p=.712	Z=-1.813 p=.070	Z=-2.140 p=. 032	Z=-.051 p=.959	t=-1.725 p=.087	t=-1.395 p=.165	t=-.774 p=.440	t=-.170 p=.865	t=-1.322 p=.187	t=-1.658 p=.099
Problems at the end of childbirth*														
Bathing														
Yes	50 (18.7)	65.52±10.65	29.92±5.49	23.16±4.51	12.70±2.45	119.72±10.21	46.86±4.52	39.02±6.45	33.84±4.56	56.62±7.17	19.74±4.67	13.02±2.95	13.88±2.71	9.98±1.80
No	218(81.3)	62.55±12.36	27.60±7.41	22.90±3.87	11.78±2.76	117.27±15.63	45.00±6.79	39.84±6.63	32.42±6.27	53.09±9.65	18.74±4.57	12.53±3.41	12.67±3.39	9.13±2.32
		t=-1.569 p=.118	Z=-1.953 p=.051	Z=-.730 p=.465	Z=-2.270 p=. 023	Z=-.993 p=.321	Z=-2.654 p=. 008	Z=-1.072 p=.284	t=-1.507 p=.133	t=-2.921 p=. 004	t=-1.385 p=.167	t=-.923 p=.357	t=-2.337 p=. 020	t=-2.417 p=. 016
Nutrition														
Yes	58 (21.6)	63.03±11.88	29.22±6.00	22.13±4.33	11.67±2.62	116.36±11.02	45.37±4.82	38.34±6.24	32.63±5.18	54.67±9.42	20.18±3.21	12.63±3.82	12.56±3.19	9.27±2.42
No	210(78.4)	63.12±12.19	27.70±7.40	23.38±4.38	12.03±2.76	118.10±15.66	45.34±6.85	40.06±6.66	32.70±6.23	53.49±9.31	18.58±4.85	12.62±3.19	12.99±3.33	9.29±2.21
		t=.050 p=.960	t=-1.432 p=.153	Z=-2.271 p=. 023	t=.891 p=.374	Z=-1.796 p=.072	Z=-.206 p=.837	Z=-2.086 p=. 037	t=-.069 p=.945	t=-.850 p=.396	t=-2.981 p=. 003	t=-.028 p=.977	t=. 869 p=.385	t=-.058 p=.954

$\bar{X}$: Mean, SD: Standard deviation, t: Independent samples t-test, F: One-way ANOVA, KW: Kruskal Wallis, Z: Mann-Whitney U test, *n is folded more than one option is marked

Table 2. PSS -AWEPP, PCS, and MPSSS sub-dimension and total scores of mothers according to the characteristics of the birth process (CONTINUED)

Characteristics		PSS-AWEPP				PCS				MPSSS				
		$\bar{X} \pm SD$				$\bar{X} \pm SD$				$\bar{X} \pm SD$				
		Total	Emotional	Social	Physical	Total	Physical	Psychospiritual	Sociocultural	Total	Empowering behavior	General well-being	Family ties	Breastfeeding behavior
Problems at the end of childbirth*														
Sleep and rest														
Yes	205 (76.5)	63.51±11.85	28.41± 6.79	23.29±4.36	11.80±2.82	117.78±15.88	45.23±6.83	39.66±6.80	32.88±6.13	54.29±8.82	19.09±4.65	12.63±3.00	13.18±3.15	9.39±2.31
No	63 (23.5)	61.76±12.88	26.79±8.10	22.50±4.48	12.46±2.35	117.55±10.55	45.73±5.09	39.77±5.94	32.04±5.59	51.96±10.72	18.39±4.40	12.60±4.28	12.00±3.62	8.96±2.01
		t=-.007 p=.315	Z=-.843 p=.399	t=-1.248 p=.213	Z=-1.473 p=.141	Z=-.638 p=.524	Z=-.364 p=.716	Z=-.088 p=.930	t=-.964 p=.336	t=-1.738 p=.083	t=-1.051 p=.294	t=-.054 p=.957	t=-2.504 p=.013	t=-1.301 p=.194
Emotional coping														
Yes	73 (27.2)	61.91±12.39	28.64±6.22	21.61±4.48	11.65±2.80	121.06±11.47	45.91±5.19	40.10±5.93	35.04±5.24	52.65±9.86	19.12±4.15	11.76±3.35	12.61±3.71	9.15±2.19
No	195 (72.8)	63.54±11.99	27.81±7.45	23.67±4.24	12.06±2.70	116.47±15.69	45.13±6.87	39.53±6.84	31.80±6.06	54.15±9.12	18.85±4.76	12.94±3.28	13.01±3.14	9.34±2.27
		t=.982 p=.327	t=-.850 p=.396	t=3.477 p=.001	t=1.092 p=.276	Z=-2.064 p=.039	Z=-1.163 p=.245	Z=-.364 p=.716	t=-4.031 p=.000	t=1.173 p=.242	t=-.422 p=.673	t=2.608 p=.010	t=.868 p=.386	t=.623 p=.534
Constipation-distension														
Yes	39 (14.6)	62.43± 9.35	27.66±5.04	22.79±3.96	11.97±2.31	116.48±8.84	44.87±5.62	39.41±5.03	32.20±3.94	52.12±8.10	18.12±2.93	13.38±3.44	12.41±3.12	8.20±2.14
No	229 (85.4)	63.21±12.52	28.10±7.44	23.16±4.47	11.95±2.80	117.93±15.57	45.43±6.60	39.73±6.83	32.76±6.30	54.02±9.51	19.06±4.81	12.49±3.30	12.98±3.33	9.47±2.22
		t=.373 p=.710	Z=-1.464 p=.143	t=-.486 p=.627	t=-.047 p=.962	Z=-1.401 p=.161	Z=-1.037 p=.300	t=.286 p=.775	t=-.744 p=.459	t=1.174 p=.241	t=1.650 p=.103	t=-1.538 p=.125	t=1.007 p=.266	t=3.314 p=.001
Perineal area care														
Yes	36 (13.4)	64.63± 9.02	29.38±5.16	22.61±3.12	12.63±1.88	118.11±9.33	43.30±4.11	40.94±4.78	33.86±4.67	52.58±10.35	18.77±5.06	12.16±3.13	12.44±3.47	9.19±2.83
No	232 (86.6)	62.86±12.51	27.82±7.38	23.18±4.56	11.84±2.82	117.66±15.47	45.66±6.70	39.49±6.82	32.50±6.18	53.93±9.17	18.95±4.53	12.69±3.36	12.97±3.27	9.30±2.15
		t=-.817 p=.415	t=-1.221 p=.223	Z=-1.181 p=.238	Z=-1.231 p=.218	Z=-.251 p=.802	Z=-2.625 p=.009	t=-1.227 p=.221	t=-1.261 p=.209	t=.737 p=.465	t=.212 p=.832	t=.889 p=.375	t=.895 p=.372	t=.276 p=.783
Breastfeeding														
Yes	69 (25.7)	67.79± 7.63	30.46±5.93	24.65±3.06	12.68±2.01	120.89±10.17	46.21±5.22	41.55±4.68	33.13±4.77	55.02±8.61	18.60±4.40	13.50±2.78	13.59±2.61	9.31±2.25
No	199 (74.3)	61.47±12.93	27.19±7.34	22.57±4.66	11.70±2.90	116.62±15.95	45.05±6.82	39.04±7.03	32.53±6.39	53.30±9.55	19.04±4.66	12.32±3.46	12.66±3.48	9.28±2.25
		t=-4.870 p=.000	Z=-3.699 p=.000	Z=-3.336 p=.001	Z=-2.221 p=.026	Z=-2.515 p=.012	Z=-1.211 p=.226	t=-3.325 p=.001	t=-.711 p=.478	t=-1.322 p=.187	t=.671 p=.503	t=-2.853 p=.005	t=-2.326 p=.021	t=-.119 p=.906

$\bar{X}$: Mean, SD: Standard deviation, t: Independent samples t-test, F: One-way ANOVA, KW: Kruskal Wallis, Z: Mann-Whitney U test, *n is folded more than one option is marked

Table 2. PSS -AWEPP, PCS, and MPSSS sub-dimension and total scores of mothers according to the characteristics of the birth process (CONTINUED)

Characteristics	N (%)	PSS-AWEPP				PCS				MPSSS				
		$\bar{X} \pm SD$				$\bar{X} \pm SD$				$\bar{X} \pm SD$				
		Total	Emotional	Social	Physical	Total	Physical	Psychospiritual	Sociocultural	Total	Empowering behavior	General well-being	Family ties	Breastfeeding behavior
Receiving support from family members in the postpartum period														
Yes	241(89.9)	63.21±12.04	28.22±7.07	23.04±4.43	11.95±2.77	118.42±13.54	45.63±6.02	39.91±6.14	32.87±5.93	54.04±9.04	18.86±4.58	12.91±3.24	12.74±3.38	9.34±2.14
No	27 (10.1)	62.07±12.82	26.37±7.64	23.70±4.12	12.00±2.38	111.51±22.49	42.85±9.34	37.70±9.70	30.96±6.56	51.14±11.52	19.51±4.75	10.03±3.05	12.92±3.30	8.85±3.09
		t=-.466 p=.642	t=-1.280 p=.202	t=-.737 p=.462	t=-.090 p=.929	Z=-.941 p=.347	Z=-1.696 p=.090	t=-1.157 p=.267	Z=-.868 p=.386	t=-1.261 p=.217	t=-.702 p=.483	t=-4.395 p=.000	t=-.269 p=.788	t=-.798 p=.431
Family members for whom postpartum support is sought*														
Husband														
Yes	214(79.9)	63.85±11.55	28.49± 6.70	23.18± 4.37	12.16± 2.56	118.44±12.86	45.37±5.50	40.05± 6.20	33.01± 5.75	54.36± 9.21	19.20± 4.55	12.66±3.34	13.28±3.18	9.21± 2.26
No	54 (20.1)	60.14±13.80	26.22± 8.48	22.81± 4.49	11.11± 3.20	114.87±20.63	45.25±9.42	38.24± 7.88	31.37± 6.86	51.31± 9.50	17.83± 4.66	12.48±3.34	11.38±3.37	9.61± 2.20
		t=-2.020 p=.044	t=-2.103 p=.036	Z=-.820 p=.412	t=-2.251 p=.027	Z=-2.108 p=.035	Z=-1.342 p=.179	t=-1.814 p=.071	Z=-2.295 p=.022	t=-2.160 p=.032	t=-1.971 p=.050	t=-.358 p=.721	t=-3.865 p=.000	t=-1.168 p=.244
Mother														
Yes	149 (55.6)	63.67±12.54	28.56± 7.00	23.21± 4.27	11.89± 2.95	117.59±17.02	45.26±7.24	39.81± 6.87	32.52± 6.24	54.66± 8.52	19.55± 3.97	12.02±3.11	13.56±2.87	9.52±2.30
No	119 (44.4)	62.39±11.53	27.37± 7.28	22.98± 4.56	12.03± 2.43	117.89±11.44	45.46±5.36	39.53± 6.26	32.89± 5.74	52.60± 10.17	18.14± 5.18	13.38±3.45	12.07±3.61	9.00± 2.15
		t=-.857 p=.392	t=-1.352 p=.177	Z=.323 p=.747	t=-.428 p=.669	Z=.488 p=.626	Z=.269 p=.788	Z=.550 p=.582	t=-.496 p=.620	t=-1.767 p=.079	t=-2.455 p=.015	t=3.395 p=.001	t=-3.752 p=.000	t=-1.898 p=.059
Mother-in-law														
Yes	91 (34.0)	62.83±13.98	28.79± 6.85	22.28± 5.11	11.75± 3.09	116.10±14.94	45.09±6.10	39.02± 6.83	31.98± 5.78	54.64± 8.60	18.74± 4.78	12.87±2.92	13.07±3.02	9.94± 1.70
No	177 (66.0)	63.24±11.05	27.64± 7.27	23.53± 3.92	12.05± 2.52	118.55±14.67	45.48±6.65	40.03± 6.46	33.04± 6.11	53.28± 9.68	19.02± 4.51	12.49±3.53	12.81±3.44	8.95± 2.42
		t=.242 p=.809	t=-1.265 p=.208	t=2.044 p=.043	t=-.846 p=.398	Z=-.940 p=.347	Z=-.160 p=.873	Z=-1.441 p=.150	t=1.363 p=.174	t=-1.130 p=.259	t=-.464 p=.643	t=-.942 p=.347	t=-.617 p=.538	t=-3.880 p=.000
People supported in postnatal infant care*														
Husband														
Yes	180 (67.2)	65.10±10.93	29.38± 5.99	23.42± 4.45	12.29± 2.61	120.46± 9.48	46.29±4.61	40.83± 5.52	33.32± 4.97	54.82± 7.70	19.38± 4.12	12.71±3.19	13.28±2.84	9.43± 1.93
No	88 (32.8)	59.01±13.34	25.27± 8.44	22.47± 4.22	11.26± 2.85	112.13±20.95	43.42±8.88	37.34± 7.90	31.37± 7.59	51.55± 11.75	18.00± 5.34	12.44±3.62	12.11±3.98	9.00± 2.79
		t=-3.716 p=.000	Z=-4.378 p=.000	t=-1.658 p=.099	t=-2.950 p=.003	Z=-4.385 p=.000	Z=-4.517 p=.000	t=-3.729 p=.000	t=-2.194 p=.030	t=-2.369 p=.019	t=-2.138 p=.034	t=-.629 p=.530	t=-2.474 p=.015	t=-1.311 p=.192

$\bar{X}$: Mean, SD: Standard deviation, t: Independent samples t-test, F: One-way ANOVA, KW: Kruskal Wallis, Z: Mann-Whitney U test, *n is folded more than one option is marked

Table 2. PSS -AWEPP, PCS, and MPSSS sub-dimension and total scores of mothers according to the characteristics of the birth process (CONTINUED)

Characteristics	N (%)	PSS-AWEPP				PCS				MPSSS					
		$\bar{X} \pm SD$				$\bar{X} \pm SD$				$\bar{X} \pm SD$					
		Total	Emotional	Social	Physical	Total	Physical	Psychospiritual	Sociocultural	Total	Empowering behavior	General well-being	Family ties	Breastfeeding behavior	
People supported in postnatal infant care*															
Mother															
Yes	137 (51.1)	64.28±12.44	28.78±6.99	23.49±4.22	12.00±3.01	119.32±14.74	45.76±6.81	40.60±5.89	32.95±5.91	54.25±8.70	19.27±4.28	12.20±3.01	13.25±3.10	9.52±2.35	
No	131 (48.9)	61.87±11.65	27.25±7.23	22.70±4.55	11.90±2.40	116.05±14.69	44.91±6.07	38.73± 7.16	32.40±6.13	53.22±9.95	18.57±4.89	13.06±3.60	12.53±3.47	9.04± 2.12	
		t=-1.638 p=.103	t=-1.767 p=.078	Z=-1.620 p=.105	t=-.275 p=.783	Z=-1.731 p=.084	Z=-.953 p=.341	Z=-1.856 p=.063	t=-.750 p=.454	t=-.906 p=.366	t=-1.243 p=.215	t=2.133 p=.034	t=-1.793 p=.074	t=-1.748 p=.082	
Mother-in-law															
Yes	98 (36.6)	63.56±13.03	28.81± 6.91	22.91±4.99	11.82±3.03	118.80±10.53	45.85±5.05	40.00± 5.58	32.94±5.07	53.47±9.03	18.28±5.05	12.71±2.87	12.96±3.26	9.51±2.10	
No	170(63.4)	62.84±11.56	27.58±7.25	23.22±4.02	12.02±2.54	117.10±16.75	45.05±7.14	39.51±7.12	32.53±6.50	53.90±9.53	19.30±4.28	12.57±3.58	12.86±3.33	9.16±2.33	
		t=-.468 p=.640	Z=-1.828 p=.068	t=-.546 p=.585	t=-.558 p=.578	t=-.906 p=.366	t=-.974 p=.331	Z=-.105 p=.916	t=-.541 p=.589	t=.359 p=.720	t=1.746 p=.082	t=-.325 p=.745	t=-.249 p=.803	t=-1.209 p=.228	
Friend															
Yes	37 (13.8)	64.64±11.94	27.72±6.89	24.64±4.58	12.27±2.59	121.18±10.40	44.21±4.70	43.13±6.12	33.83±5.33	56.18±10.31	21.27±3.71	11.45±3.70	13.27±2.89	10.18±2.77	
No	231 (86.2)	62.85±12.13	28.08±7.19	22.86±4.32	11.90±2.75	117.17±15.31	45.53±6.69	39.13±6.51	32.50±6.10	53.35±9.13	18.55±4.62	12.81±3.24	12.84±3.36	9.14±2.13	
		t=-.835 p=.404	t=.282 p=.778	Z=-2.692 p=.007	Z=-.547 p=.585	Z=-1.604 p=.109	Z=-1.521 p=.128	Z=-4.067 p=.000	t=-1.255 p=.210	t=-1.718 p=.087	t=-3.402 p=.001	Z=2.310 p=.022	t=-.728 p=.468	t=-2.639 p=.009	
Healthcare worker															
Yes	29 (10.8)	67.96±7.30	29.62±5.90	25.00±2.82	13.34±2.05	120.06±13.52	43.41±4.53	43.75±5.05	32.89±7.13	59.37±6.85	21.44±2.99	13.17±3.70	14.62±2.04	10.13±2.48	
No	239(89.2)	62.51±12.44	27.84±7.26	22.88±4.50	11.78±2.75	117.44±14.93	45.58±6.62	39.19±6.60	32.66±5.88	53.06±9.37	18.62±4.66	12.56±3.29	12.69±3.36	9.18±2.20	
		t=-3.455 p=.001	t=-1.266 p=.207	t=-3.525 p=.001	Z=-3.188 p=.001	Z=-1.599 p=.110	Z=-1.500 p=.134	Z=-3.822 p=.000	t=-.199 p=.843	Z=-4.276 p=.000	t=-.932 p=.352	t=-.932 p=.352	t=-4.403 p=.000	t=-2.157 p=.032	

$\bar{X}$: Mean, SD: Standard deviation, t: Independent samples t-test, F: One-way ANOVA, KW: Kruskal Wallis, Z: Mann-Whitney U test, *n is folded more than one option is marked

Table 2. PSS -AWEPP, PCS, and MPSSS sub-dimension and total scores of mothers according to the characteristics of the birth process (CONTINUED)

Characteristics	N (%)	PSS-AWEPP				PCS				MPSSS					
		$\bar{X} \pm SD$				$\bar{X} \pm SD$				$\bar{X} \pm SD$					
		Total	Emotional	Social	Physical	Total	Physical	Psychospiritual	Sociocultural	Total	Empowering behavior	General well-being	Family ties	Breastfeeding behavior	
Issues that need support*															
Babysitting															
Yes	138 (51.5)	65.88± 9.21	29.57±6.14	24.01±3.66	12.29±2.45	119.94±11.65	45.94±5.62	40.40±5.33	33.60±5.46	54.02±8.31	18.71±4.69	12.51±2.95	13.36±3.02	9.42±2.17	
No	130 (48.5)	60.15±13.99	26.40±7.76	22.15±4.89	11.59±2.96	115.36±17.24	44.72±7.22	38.93±7.67	31.71±6.42	53.46±10.33	19.16±4.50	12.73±3.71	12.41±3.52	9.14±2.33	
		t=-3.933 p=.000	Z=-3.795 p=.000	t=-3.506 p=.001	t=-2.113 p=.036	Z=-1.413 p=0.158	Z=-.574 p=0.566	t=-1.818 p=.070	t=-2.593 p=.010	t=-.487 p=.627	t=.803 p=.423	t=.527 p=.599	t=-2.365 p=.019	t=-1.021 p=.308	
Breastfeeding															
Yes	71 (26.5)	67.88± 9.22	30.40±5.52	24.77±3.24	12.70±1.86	116.87±9.99	45.50±4.49	40.39±6.06	30.97±4.10	55.19±8.07	18.61±4.71	13.33±3.25	13.61±2.57	9.61±1.98	
No	197 (73.5)	61.38±12.56	27.18±7.47	22.51±4.60	11.68±2.94	118.03±16.18	45.29±7.04	39.43±6.77	33.30±6.46	53.22±9.71	19.04±4.56	12.37±3.33	12.64±3.50	9.17±2.33	
		t=-4.600 p=.000	Z=-3.224 p=.001	t=-4.469 p=.000	t=-3.346 p=.001	Z=-1.170 p=.242	Z=-.345 p=.730	Z=-.690 p=.490	t=3.477 p=.001	t=-1.665 p=.098	t=.661 p=.509	t=-2.107 p=.036	t=-2.471 p=.014	t=-1.436 p=.152	
Emotional															
Yes	114 (42.5)	64.12±11.33	29.04±5.81	22.99±4.50	12.08±2.75	121.00±10.61	45.78±5.31	40.85±5.11	34.36±5.02	53.72±10.54	19.65±4.10	11.94±3.53	12.98±3.43	9.14±2.46	
No	154 (57.5)	62.35±12.62	27.29±7.92	23.20±4.33	11.85±2.72	115.30±16.86	45.03±7.19	38.83±7.41	31.44±6.38	53.76±8.36	18.38±4.87	13.12±3.10	12.84±3.21	9.40±2.08	
		t=-1.186 p=.337	t=-2.088 p=.038	t=-.386 p=.700	t=-.683 p=.495	Z=-3.005 p=0.003	Z=-.995 p=0.320	t=-2.638 p=.009	t=-4.050 p=.000	t=.032 p=.975	t=-2.250 p=.025	t=2.907 p=.004	t=-.338 p=.735	t=.941 p=.347	
Household															
Yes	132 (49.3)	62.28±12.56	27.96±6.79	22.46±4.72	11.84±2.81	117.70±16.97	45.78±6.62	39.00±7.55	32.90±6.21	54.18±8.84	19.12±4.51	12.43±2.84	12.99±3.54	9.63±2.16	
No	136 (50.7)	63.90±11.63	28.10±7.49	23.74±3.97	12.05±2.64	117.75±12.36	44.92±6.29	40.35±5.45	32.47±5.83	53.32±9.80	18.73±4.68	12.81±3.75	12.81±3.06	8.95±2.29	
		t=1.099 p=.273	t=.152 p=.879	Z=-2.096 p=0.036	t=-.630 p=.529	Z=-1.841 p=.066	Z=-3.248 p=.001	t=1.666 p=.097	t=-.596 p=.552	t=-.758 p=.449	t=-.700 p=.485	t=.946 p=.345	t=-.436 p=.663	t=-2.494 p=.013	
Sleep and rest															
Yes	203 (75.7)	62.72±12.80	27.69±7.46	23.19±4.70	11.83±2.92	117.81±15.98	45.18±6.87	39.54±6.85	33.08±6.15	53.50±9.34	18.98±4.65	12.13±3.27	13.03±3.42	9.35±2.34	
No	65 (24.3)	64.29± 9.58	29.09±5.96	22.86±3.26	12.33±1.97	117.44±10.28	45.87±4.97	40.13±5.75	31.43±5.42	54.52±9.34	18.76±4.43	14.16±3.08	12.49±2.88	9.09±1.95	
		t=1.052 p=.295	t=1.371 p=.172	t=-.633 p=.528	t=1.581 p=.116	Z=-.881 p=.378	Z=-.643 p=.520	Z=-.283 p=.777	t=-1.944 p=.053	t=.766 p=.444	t=-.322 p=.748	t=4.427 p=.000	t=-1.257 p=.211	t=-.895 p=.373	

$\bar{X}$: Mean, SD: Standard deviation, t: Independent samples t-test, F: One-way ANOVA, KW: Kruskal Wallis, Z: Mann-Whitney U test, *n is folded more than one option is marked

Table 3. The relationship between PSS-AWEPP, PCS, and MPSSS stress in mothers

Scales and sub-dimensions	$\bar{X} \pm SD$	Median (min-max)	PSS-AWEPP				PCS				MPSSS				
			Total	Emotional Support	Social Support	Physical Support	Total	Physical comfort	Psychospiritual comfort	Sociocultural comfort	Total	Empowering behavior	General well-being	Family ties	Breastfeeding behavior
PSS-AWEPP Total	63.10±12.10	64.00 (16.00-80.00)	1												
Emotional Support	28.03±7.14	28.00 (7.00-35.00)	.134**	1											
Social Support	23.11±4.39	24.00 (6.00-30.00)	.053**	.430**	1										
Physical Support	11.95±2.73	12.00 (3.00-15.00)	.049**	.634**	.555**	1									
PCS Total	117.72±14.78	115.00 (55.00-170.00)	.041	.166**	-.086	.035	1								
Physical comfort	45.35±6.46	46.00 (24.00-70.00)	-.140*	.011	-.086	-.116	.682**	1							
Psychospiritual comfort	39.69±6.59	34.00 (16.00-50.00)	.186**	.283**	.313**	.211**	.619**	.090	1						
Sociocultural comfort	32.68±6.01	35.00 (15.00-50.00)	-.063	.053	-.084	-.044	.682**	.401**	.107*	1					
MPSSS Total	53.75±9.33	42.00 (30.00-72.00)	.697**	.259**	.268**	.204**	.068	-.201**	.380**	-.196**	1				
Empowering behavior	18.92±4.59	18.00 (6.00-24.00)	.630**	.183**	.202**	.166**	.029	-.236**	.266**	-.139*	.851**	1			
General well-being	12.62±3.33	15.00 (5.00-20.00)	.014	.127*	.080	.036	-.082	-.018	.135*	-.279**	.348**	.007	1		
Family ties	12.90±3.30	12.00 (4.00-16.00)	.503**	.249**	.328**	.211**	.107	-.138*	.343**	-.101	.774**	.586**	.038	1	
Breastfeeding behavior	9.29±2.25	9.00 (3.00-12.00)	.123*	.134*	.053	.049	.041	-.140*	.186**	-.063	.697**	.630**	.014	.503**	1

$\bar{X}$: Mean, SD: Standard deviation , *p< 0.05, **p<0.001 r: Spearman **Correlation**

Among the primary factors that positively influenced women's perceived spousal support, comfort level, and sense of security were being younger in age, being employed, having a spouse with a higher level of education, experiencing a planned pregnancy, receiving childbirth preparation education, receiving spousal support during the postpartum period, and encountering certain postpartum challenges. Notably, the significantly higher scores across all scales among women who received care support from their spouses indicate that partner support contributes to a holistic sense of well-being in the postpartum period. Although the findings of this study are consistent with previous research (14, 31, 39), it is noteworthy that, in addition to sociodemographic characteristics, obstetric, neonatal, and postpartum factors also play a role in influencing maternal outcomes. Therefore, it is believed that identifying the factors affecting a mother's sense of security and level of comfort early in the postpartum period will play a critical role in guiding the subsequent process.

There was a significant difference between the levels of spousal support perceived by women in the postpartum period and their age groups; women aged 24-29 had higher spousal support scores than women aged 30-35. This suggests that younger mothers perceive more spousal support and experience greater comfort. No significant difference was found between age groups regarding sense of security. Previous studies show mixed results: Erkaya et al. (40) found no link between age and comfort after vaginal or cesarean delivery, while another study found no association between age and sense of security but a link with age at marriage (39). Akbay and Taşçı-Duran observed that spousal support decreased with increasing age (4). These variations are likely due to differences in sample characteristics and multiple factors affecting the variables.

A significant difference was found between women's perceived spousal support and their educational level, with women holding associate or bachelor's degrees reporting higher support. Similarly, these women scored higher in postpartum psychospiritual comfort and family bonding. Consistent with the literature, men with high school education or less tend to provide less support (4). These results suggest that higher education enables women to access social support more effectively, feel psychologically stronger, assess and cope with life events better, enhance communication with spouses, reinforce family bonds, and interpret the postpartum experience more positively.

A significant difference was found between the spouse's education level and women's perceived spousal support, comfort, and sense of security. Women whose spouses had a university degree reported higher scores. This aligns with previous studies, suggesting that both partners' education influences perceived support, postpartum comfort, and sense of security (4,31,39). Higher-educated partners may provide more informed support, communicate better, and positively affect the mother's physical and psychological well-being, highlighting education's indirect yet important role in women's health.

Significant differences were found between women's employment status, number of living children, total number of pregnancies, and whether the pregnancy was planned, in relation to perceived spousal support, comfort level, and sense of security. These findings are consistent with previous literature (4,31,32), indicating that women who considered their income level sufficient, had fewer children, and experienced a planned pregnancy reported higher levels

of spousal support, comfort, and especially a stronger sense of security. These results suggest that being employed has an empowering effect on women, facilitates access to social support resources, and enhances individual autonomy. Furthermore, having fewer children and experiencing a planned pregnancy appear to increase spousal involvement in the pregnancy and childbirth process, thereby strengthening support and a sense of security, and ultimately contributing to improved comfort levels in the postpartum period.

Significant differences were found between mode of delivery and both comfort and sense of security. In a study by Erkaya et al. (40), it was reported that women who gave birth vaginally had higher comfort scores compared to those who underwent cesarean delivery. Another study also found that mode of delivery significantly affected physical and sociocultural comfort, with postpartum comfort being higher among women who had a vaginal birth (13). The fact that women who gave birth vaginally scored higher on these measures suggests that the birth experience itself has a direct impact on overall well-being.

Women who received childbirth preparation education had significantly higher scores in spousal support, comfort, and sense of security. A previous study identified participation in educational programs during pregnancy and the postpartum period both by the woman and her partner as an important variable influencing the mother's postpartum sense of security (39). Another study reported that mothers who received prenatal care felt more secure during the postpartum period (32). This finding suggests that education enhances awareness, strengthens the pursuit of support, and reinforces the sense of security.

It was found that women who needed support in baby care and breastfeeding during the postpartum period had higher spousal support scores. Additionally, women who received support from their spouses and healthcare professionals in baby care had significantly higher scores in both spousal support and sense of security. A previous study reported that mothers who received education and were satisfied with the care provided during their hospital stay had higher levels of postpartum comfort (14). This finding highlights the importance of social support in the postpartum period, showing that it enhances both physical health and psychological security. Support from spouses and healthcare professionals is recommended to be included in care processes, as it helps mothers adjust and strengthens the mother-infant bond.

This study found a strong, significant positive correlation between PSS-AWEPP and MPSSS scores, consistent with previous research (22-39). This suggests that spousal support not only provides emotional help but also enhances a woman's psychological sense of security in the postpartum period, reducing loneliness and promoting adjustment. Weak, non-significant positive correlations were observed between PSS-AWEPP and PCS scores and between PCS and MPSSS. Although these three variables have not been studied together, prior research shows that postpartum comfort is influenced by a broader, more complex set of factors than spousal support or sense of security (14,31,39). This suggests that postpartum comfort is shaped by a broader and more complex set of variables compared to spousal support and sense of security.

CONCLUSION

This study found a strong and significant relationship between women's perceived spousal support and their sense of security in the early postpartum period. Women who reported higher levels of spousal support also tended to feel more secure. Overall comfort levels ranged from moderate to high; this indicates that while many women adapted well, there is room for improvement in comprehensive postpartum support. These findings emphasize that supporting women's emotional well-being through spousal involvement is important not only for maternal adjustment but also for strengthening family health during the postpartum period. Therefore, postpartum care should holistically include partner involvement, incorporate partners into childbirth preparation programs, strengthen social support services, and promote individualized nursing care.

Limitations

This study has several limitations. It was conducted at a single center, limiting the generalizability of the findings. The cross-sectional design prevents drawing conclusions about cause and effect between spousal support, comfort, and sense of security. Data were collected through self-report, which may be affected by bias. Women with psychiatric or systemic illnesses or communication difficulties were excluded, leaving out some vulnerable groups. Future research should include larger and more diverse samples and use qualitative methods to better understand women's postpartum experiences.

Ethics Committee Approval: The present study was conducted in accordance with the principles of the Helsinki Declaration. Ethical approval was obtained from the Non-Interventional Clinical Research Ethics Committee of the Faculty of Medicine, Bilecik Şeyh Edebali University prior to the implementation of the study (Date: 01.01.2025; No. 2024/11). Following the ethical approval, institutional permission was obtained from Bilecik Training and Research Hospital (Date: 13.01.2025; No. 2025/06).

Informed Consent: Informed consent was obtained from the patients.

Authorship Contributions: Idea/Concept: EGE, FB Design: EGE, FB Supervision: EGE, FB, Data Collection and Processing: EGE, Analysis or Interpretation: EGE, FB Literature Search: EGE, FB, Writing: EGE, FB Critical Review: EGE, FB.

Conflict of Interest: The authors declare that they have no conflicts of interest

Financial Disclosure: The authors declared that this study has received no financial support

Acknowledgments: We would like to thank the patients who agreed to participate in the study for their support.

REFERENCES

1. Keshavarz M, Norozi F, Seyedfatemi N, Haghani H. Effect of skin to skin contact on maternal state anxiety in a cesarean section ward. *Knowledge & Health* 2011; 5(4):1–6.
2. Güleşen A, Yıldız D. Investigation of maternal-infant attachment in the early postpartum period with evidence based practice. *TAF Prev Med Bull.* 2013;12(2): 177–82.
3. Gölbaşı Z, Evci F. Perinatal Bakım. In: Şentürk AE, Vural G, editörs. *Hemşireler ve Ebeler için Perinatal Bakım.* İstanbul: İstanbul Tıp Kitabevleri; 2020.309-39
4. Akbay AS, Taşçı Duran E. How does spousal support affect women's quality of life in the postpartum period in Turkish culture? *Asian Women* 2018;34(3):29–45.
5. Şahin NH, Dişsiz M, Dinç H, Soypak F. Erken lohusalık sürecinde kadınların algıladıkları eş desteği: ölçek geliştirme çalışması. *Anadolu Hemşirelik ve Sağlık Bilimleri Dergisi* 2014;17(2):73-9.
6. Beydağ KD. Doğum sonu dönemde anneliğe uyum ve hemşirenin rolü. *TSK Koruyucu Hekimlik Bülteni* 2007; 6(6): 479-84.
7. Eslahi Z, Bahrami N, Allen K A, Alimoradi Z. Spouse's social support in the postpartum period, predictors and its relationship with postpartum depression in a sample of Iranian primiparous women. *International Journal of Gynaecology and Obstetrics* 2021;154(1): 24–30.
8. Kızılırmak A, Calpbinici P, Tabakan G, Kartal B. Correlation between postpartum depression and spousal support and factors affecting postpartum depression. *Health Care for Women International* 2021;42(12): 1325–39.
9. Ghodsin F, Yazdani K, Jahanbin I. Impact of supportive efforts on the quality of life of primiparous women in the first six weeks after delivery. *Iranian Journal of Obstetrics, Gynecology and Infertility* 2012;15(17): 17–24.
10. Yenigül NN, Aydoğan Mathyk B, Aslan Cetin B, Yazıcı Yılmaz F, Ayhan I. Efficacy of chewing gum for improving bowel function after cesarean sections: A randomized controlled trial. *The Journal of Maternal-Fetal & Neonatal Medicine* 2020;33(11): 1840–5.
11. Zhang Y, Jin Y, Vereijken C, Stahl B, Jiang H. Breastfeeding experience, challenges and service demands among Chinese mothers: A qualitative study in two cities. *Appetite* 2018; 128:263–70.
12. Perry W, Nejad SB, Tuomisto K, Kara N, Roos N, Dilip TR, Hirschhorn LR, Larizgotia L, Semrau K, Mathai M, DihingraKumar N. Implementing the WHO safe childbirth checklist: lessons from a global collaboration. *BMJ Global Health* 2017;2(3): e000241
13. Erdemir F, Çırlak A. Rahatlık kavramı ve hemşirelik kuramı. *Dokuz Eylül Üniversitesi Hemşirelik Fakültesi Elektronik Dergisi* 2013; (6):4.
14. Çapık A, Özkan H, Apay SE. Determination of affecting factors and postnatal comfort levels of postpartum women. *Dokuz Eylül Üniversitesi Hemşirelik Fakültesi Elektronik Dergisi* 2014;7(3):186-92.
15. Akgün Ö, Aksoy ÖD. Determination of mothers' postpartum comfort levels and affecting factors. *Journal of Contemporary Medicine* 2010;10(3):385–93.
16. Persson EK, Fridlund B, Kvist LJ, Dykes AK. Mothers' sense of security in the first postnatal week: interview study. *Journal Of Advanced Nursing* 2011;67(1):105-16.
17. Koçak V, Altuntuğ K, Ege E. Annelerin öz yeterlikleri ve doğum sonu güvenlik hislerinin değerlendirilmesi. *Ebelik ve Sağlık Bilimleri Dergisi* 2021; 4(1): 34–44.
18. Werner-Bierwisch T, Pinkert C, Niessen K, Metzger S, Hellmers C. Mothers' and fathers' sense of security in the context of pregnancy, childbirth and the postnatal period: an integrative literature review. *BMC Pregnancy And Childbirth* 2018;18(1):473.
19. Waldenström U, Rudman A, Hildingsson I. Intrapartum and postpartum care in Sweden: women's opinions and risk factors for not being satisfied. *Acta Obstet Gynecol Scand.* 2006;85(5):551-60.

20. Persson EK, Dykes AK. Important variables for parents' postnatal sense of security: evaluating a new Swedish instrument (the PPSS instrument). *Midwifery*. 2009;25(4):449-60.
21. Kvist LJ, Persson EK. Evaluation of changes in postnatal care using the "Parents' Postnatal Sense of Security" instrument and an assessment of the instrument's reliability and validity. *BMC Pregnancy Childbirth* 2009;9: 35.
22. Wiklund I, Wiklund J, Pettersson V, Boström AM. New parents' experience of information and sense of security related to postnatal care: A systematic review. *Sex Reprod Healthc*. 2018;17:35-42.
23. Escribano S, Oliver-Roig A, Cano-Climent A, Richart-Martínez M, Juliá-Sanchis R. Factors related to the intra-partner postnatal sense of security in a Spanish sample. *J Pediatr Nurs*. 2020;51:e85-e91.
24. Baykal S, Karakoç A. Doğum sonrası dönemde depresyona yatkınlığın güvenlik his düzeyi ile ilişkisi. *Journal of Health Sciences and Management* 2021;1(3): 101-107.
25. Koçak V, Persson EK, Svalenius EC, Altuntuğ K, Ege E. What are the factors affecting parents' postnatal sense of security? *European Journal of Midwifery* 2021; 5: 38.
26. Katı GN, Altuntuğ K. Eş desteğinin annelerin doğum sonu güvenlik hisleri ile ilişkisi. *Güncel Hemşirelik Araştırmaları Dergisi* 2024;4(1):22-34.
27. Schaming C, Wendland J. Postnatal mental health during the COVID-19 pandemic: Impact on mothers' postnatal sense of security and on mother-to-infant bonding. *Midwifery* 2023; 117:103557.
28. Kurt Can E, Ejder Apay S. Doğum şekli: Doğum sonu konfor ve doğumdan memnuniyet düzeylerini etkiler mi? *İnönü Üniversitesi Sağlık Hizmetleri Meslek Yüksekokulu Dergisi* 2020;8(3): 547-65.
29. Ünal E, Kaya Şenol D. Primipar annelerde doğum şeklinin doğum sonu konfor ve emzirme başarısına etkisi. *Ordu Üniversitesi Hemşirelik Çalışmaları Dergisi* 2022;5(2): 158-65.
30. Söker F, Şolt Kırca A. The Effect of delivery method on optimality level and postpartum comfort in primiparous women. *Eur J Obstet Gynecol Reprod Biol X*. 2023;20:100231.
31. Sirli B, Altuntuğ K. Assessment of postnatal sense of security of primipara mothers and associated factors in Turkey. *African Journal of Reproductive Health* 2023;27(5): 41-49.
32. Yazar M, Ege E. The relationship between fear of birth and feelings of security. *Current Psychology* 2024;43(32): 26214-22.
33. Hotun Şahin N, Dişsiz M, Dinç H, Soypak F. Erken lohusalık sürecinde kadınların algıladıkları eş desteği: Ölçek geliştirme çalışması. *Anadolu Hemşirelik ve Sağlık Bilimleri Dergisi* 2014;17(2):73-9.
34. Kolcaba K. *Comfort Theory and Practice: A Vision for Holistic Health Care and Research*. New York: Springer Publishing Company; 2003.
35. Kuğuoğlu S, & Karabacak Ü. Genel konfor ölçeğinin Türkçe'ye uyarlanması. *İstanbul Üniversitesi Florence Nightingale Hemşirelik Dergisi* 2008;16(61): 6-23.
36. Karakaplan S, & Yıldız H. Doğum sonu konfor ölçeği geliştirme çalışması. *Maltepe Üniversitesi Hemşirelik Bilim ve Sanatı Dergisi* 2010; 3(1): 55-65.
37. Persson EK, Fridlund B, Dykes AK. Parents' postnatal sense of security (PPSS): development of the PPSS *Scandinavian Journal of Caring Sciences* 2007;21(1):118-25.
38. Geçkil E, Koçak V, Altuntuğ K, Ege E. Annelerin doğum sonu güvenlik hisleri ölçeği. *Anadolu Hemşirelik ve Sağlık Bilimleri Dergisi* 2016;19(4):233-42.
39. Yazar M, Altuntuğ K. Postnatal sense of security of primiparous and multiparous mothers and affecting factors. *Current Psychology* 2024;43(38): 30061-71.
40. Erkaya R, Türk R, Sakar T. Determining comfort levels of postpartum women after vaginal and caesarean birth. *Procedia – Social and Behavioral Sciences* 2017;237: 1526-32.



This work is licensed under a [Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International License](https://creativecommons.org/licenses/by-nc-nd/4.0/).