Description of Early Childhood Emotional Competence With Postpartum Depression Mothers

Azzahra Cania Putri¹, Zakiah Azzahra², Nabilah Dhiya Janita³, Andrha Octora Wiwansyah⁴, Darma Zidane Gusnambi⁵, Mafaza Mafaza⁶

{azzahracaniaputri@gmail.com¹, zakiahazzahra10@gmail.com², nabiladhiyajanita@gmail.com³, octoraandrha@gmail.com⁴, darmazidan08@gmail.com⁵, mafaza@med.unand.ac.id⁶}

Andalas University, Padang, Indonesia¹,²,³,⁴,⁵,⁶

Abstract. Postpartum depression not only affects the mother, but also the child. Neglect during infancy can affect the development of children’s emotional abilities at an early age. This study aims to determine the description of the emotional abilities of early childhood who have postpartum depression mothers. The method used is a mix method between qualitative-phenomenological to mothers and direct assessment to children using Emotional Competency Test Kits for Children. Subjects were mothers who had a history of postpartum depression and early childhood (3-6 years) obtained by purposive sampling technique. Data were collected through in-depth interviews with 3 mothers and then analyzed using the Interpretative Phenomenological Analysis (IPA) technique and the Emotional Competency Test Kits for Children assessment to 3 children. The results of the assessment also showed that 2 of the 3 subjects were in the medium emotional ability category and one was in the low category. In conclusion, early childhood with postpartum depression mothers are able to express their emotions according to the situation that occurs. However, they still experience limitations in labeling emotions and regulating emotions. Emotions that are often shown are negative emotions, in the form of anger and sadness. In addition, there are factors of maternal effort, maternal perceptions of child characteristics, and limited maternal interactions that affect children’s emotional competence.

Keywords: emotional ability, early childhood, postpartum depression, phenomenology, IPA

1 Introduction

After giving birth, the mother will enter the postpartum period. During this period there will be various changes both physiologically, psychologically, and socioculturally. To survive and care for the child, mothers must adapt to complex changes. However, not all mothers have this ability. This will cause psychological disorders in mothers, both severe and mild [1]. Postpartum depression is a mood disorder that occurs in postpartum mothers caused by the inability to deal with the stress of existing changes, showing symptoms of major depression [2]. Postpartum depression usually occurs during the fourth to sixth week after childbirth.
The prevalence of postpartum depression is quite high in the world, especially in Indonesia. According to [3], the prevalence of postpartum depression in developing countries is 20% of mothers who are in the postpartum period. In Asia, the incidence of postpartum depression is quite high and varies between 26-85%. Meanwhile, in Indonesia alone, as many as 50%-70% of postpartum women experience postpartum depression [2]. This shows that postpartum disorders need special attention.

In DSM V-TR, postpartum depression does not have its own classification, but is included in major depression disorder [4]. In general, depressive disorders in postpartum mothers are characterized by feelings of sadness, loss of enthusiasm for activities, depressed mood, appetite disorders, physical slowdown, feelings of uselessness, and difficulty in concentrating [2]. These symptoms encourage mothers to neglect their caregiving role because they have lost interest and attraction to their babies. For example, mothers become less responsive when the baby cries, do not maintain a gaze with the child, and do not even want to touch and breastfeed the baby. This can cause the child to feel rejected by their parents and have a risk of problems in bonding and attachment [5].

Based on these impacts, it shows that postpartum depression can have a negative impact on children. [6] state that depression experienced by mothers after childbirth can affect neonatal and early childhood development. The early childhood period is in the age range of 3-6 years [7]. This period is also known as the preschool period because children are in preparation for entering the school level. In addition, it is also known as the "problem age" or "trouble age" because children show a lot of rejection and tend to follow their own will [8]. This is in line with the initiative vs guilt psychosocial stage proposed by Erikson [9]. Children tend to make their own decisions and develop initiative, which they will need in school.

Early childhood has developmental tasks that must be fulfilled by each individual, both based on physical, cognitive, and psychosocial development. In psychosocial development, children are expected to be able to relate to people other than family (friends) and maintain these relationships; have initiative, independence and stronger self-control; have a self-concept and understanding of emotions that are more complex than the previous stage [7]. A deeper understanding of emotions can be reflected in children's emotional competence.

According to [10] emotional competence is the ability of children to express the emotions experienced, understand the emotions felt by themselves and others and can regulate these emotions [11]. Emotional ability has two dimensions, namely emotional knowledge and emotion regulation [10]. Emotion knowledge is the ability of children to recognize their own emotions and the emotions of others. Emotion regulation is the ability of children to use their emotional knowledge to control and display appropriate emotions. Emotional abilities will help children to socialize in the environment outside the family and predict children's school readiness.

Good emotional skills are also encouraged by good parental teaching and nurturing. However, it is not uncommon for parents to be unaware of this issue. Coupled with the mental problems that mothers have, children with postpartum depression mothers will be disturbed in the development of emotional abilities and will have an impact on the problems of the next stages of development. The tendency of mothers to neglect the care of their children due to symptoms of postpartum depression can affect the way the mother's emotional socialization to the child. Negative reactions, such as mocking or threatening to punish children for showing their
emotions can encourage suppression or avoidance of emotions or show aggressive behavior [12].

Previous research conducted by [6] only looked at whether or not there were differences in physical, behavioral, language, and cognitive development between early childhood children with postpartum depression mothers and children with mothers who did not experience the disorder. The results of this research only outline that postpartum depression has an impact on children's behavioral disorders, but it cannot explain more deeply the emotional abilities that cause these behavioral disorders. However, researchers believe that behavioral disorders are linked to children's inability to manage their emotions during early childhood. Thus, this research will further contribute to explaining how the emotional abilities of early childhood children who have mothers with postpartum depression are described.

2 Method

This research uses a mix method between qualitative-phenomenological and quantitative. Phenomenological studies aim to look at the subjective experience of individuals about an event [13]. The qualitative method using in dept interviews was aimed at 3 mothers to see the subjective experience of their children's emotional abilities. Mothers were selected through purposive sampling which has the following criteria: (1) mothers who have early childhood (3-6 years); (2) mothers who have a history of post partum depression; (3) willing to be a research subject voluntarily marked by informed consent. The data collection method used was in-depth interview with the help of audio-visual tools. The data obtained were analyzed using the Interpretative Phenomenological Analysis (IPA) technique. The analysis began with writing data transcripts, then processed to get emergent themes. From several emergent themes, they were formulated into superordinate themes.

In addition, quantitative methods are carried out through direct assessment of children. The subjects in this method are early childhood children totaling 3 people who are biological children from the first group. Data collection through assessment using the Emotional Competence Test Kits for Children test tool [14]. Emotional Competence Test Kits for Children is a test tool in the form of a picture story. This test tool measures two dimensions of emotional ability, namely emotional knowledge and emotion regulation. Children will be read eight picture stories that trigger certain emotions. Based on the scoring rubric, the answers given by children will be scored between 0, 1 and 2. Based on the total score, children's emotional ability is categorized into 3 groups, namely high (32-48), medium (16-32), low (0-16).

3 Results and Discussion

After conducting in-depth interviews with PPD mothers about children's emotional abilities, themes were obtained that describe how the description of emotional abilities of early childhood children. The following are the themes contained in the interview results.
3.1 Emotion Expression

This theme explains how children express emotions according to the context. Emotional expression is a nonverbal expression of emotions felt through body gestures towards a condition. Overall, all subjects were able to express each basic emotion according to the situation. Subject I expressed angry emotions directly when he did not get what he wanted, expressed happy and amazed emotions by expressing, “masyaAllah” and smiling facial expressions, expressed fearful emotions when looking at the aquarium for fear of flooding, and cried if his wishes were not immediately fulfilled.

“Kalau misalnyo telatlah aa yang dinginkannyo tu nak, tu marah nyo tu, nyo panyasak urang nyo gitu haan.”
(If he is late for what he wants, he will get angry, he is a pushy person)

Subject II is able to express emotions in accordance with the situation where he expresses joy when he gets something, gets angry by stomping his feet if his toy is taken by his brother, is afraid when he meets new people which is indicated by asking his mother to hold him. In addition, subject II also expressed feelings of sadness when he was left by his mother.

(It’s sad to be left out. She calls "Mommy" and chases after her while crying. Even though his mother was just sitting there, he didn't know it. He thought that mom was outside the fence)

Subject III shows angry emotions by slamming things and saying "Mommy is bad," when his wishes are not fulfilled, such as not being given pocket money, not getting cookies, and not being allowed to ride his father's becak. He can express feelings of sadness when his brother does not take him out. In addition, he can show happy expressions when riding the becak, usually shown by getting close to his mother.

“Kalau nyo berang nyo suka bantiang-bantiang”
(If he is angry, he will slam things)

“Ahmad.. yo ndak dapek misalnyo ndak dapek jajan, ndak dapet kue, ndak dapek pe naiak becak. Nyo suko naiak becak”
(The subject gets angry for example if he does not get pocket money, food, and is not allowed to ride becak. He likes to ride becak)

This ability to express emotions has begun to develop since the age of 2 years [10]. At least as early as 3 years old can experience and demonstrate the four basic emotions. Children tend to understand happy emotions first followed by sad, angry, and finally fearful emotions. Emotional disclosure in young children is very important. It can help the child to reflect on his/her own and others' feelings and discuss the causes of the consequences of experiencing and expressing these emotions. In addition, due to verbal limitations, emotions are important social signals for children. Young children learn facial expressions, vocal patterns, and behaviors that are associated to various emotions. Even 2-year-olds understand wanting and getting it leads to happiness, and not getting it leads to sadness. Children at this age also know that anger felt by self and others often involves feelings of dislike, followed by harsh vocals, lowered eyebrows and a tendency to lash out physically or verbally.
Expressing emotions is an early ability that children master in improving emotional skills. Emotional expression can be influenced by exposure to parents expressing their emotions so that children have information on how to express in various conditions [12]. Frequent and intense negative emotions can inhibit children in learning emotions. Children who have postpartum depression mothers are able to express their emotions appropriately. This means that children can still develop skills in expressing emotions even though the exposure to maternal expressions obtained is limited.

3.2 Recognizing Emotions

The theme of recognizing emotions describes the extent to which the subject can know the four basic emotions by verbally labeling each of these emotions. The ability to recognize the subject's emotions is seen from the results of the emotional competency kits assessment and in-depth interviews with the subject's mother. The assessment results can be seen in Table 1. The table presents the total score of the assessment which measures emotional knowledge and emotional regulation in early childhood. The ability to recognize emotions is included in emotional knowledge.

Based on the assessment results, the emotional knowledge possessed by subjects I, II, and III is at scores 16/32, 13/32, and 10/32. This score shows half of the total emotional knowledge score which means that the three subjects have limitations in recognizing the four basic emotions shown to them through emotional competency kits.

Based on the results of interviews with the parents of the three subjects, subjects I, II, and III have limitations in labeling the four basic emotions they feel verbally. The following are the results of interviews with the mothers of subjects I, II, and III regarding limitations in labeling the four basic emotions.

Subject I has not been able to label his amazement at seeing something beautiful as the emotion of pleasure, the crying he shows as the emotion of sadness, and his discomfort at seeing tap water or aquarium water on as the emotion of fear. In contrast to the emotion of anger, subject I was able to label the emotion of anger when he felt upset.

“Yo bantuak itu, kalau nyo kesal yo kesal emang kesal, paham wak. Cuman emosional gitu aja. lebih gampang marahnya.”
(Yes, it's like that. If she is upset, we will understand. However, he becomes more emotional and expresses his anger easily)

Subject II has not been able to verbally label the four basic emotions he feels, namely sadness, anger, happiness, and fear.

“Haa itu lah dia, kalo sekarang belum bisa nengok itu. Maksudnya kalo lagi marah ni, hanya ekspresi. Belum sampai mengungkapkan dia. Misalnya lagi sedih ‘bunda lagi sedih ni’ haa itu belum bisa dia.”
(That's him. Now he can't see that yet. I mean if he's angry, he's just expressing. He hasn't gotten to the point of expressing sad emotions, like, "Mommy, I'm sad")

Meanwhile, subject III, he did not yet have the skills to identify and label all the basic emotions he experienced.

(If Ahmad is happy, he will approach us. After that, he will come close to us and kiss us. Later Ahmad will massage us. He likes to massage us and hit us a little. That is Ahmad when he is happy. Only then do we ask him when he has come close to us, "Where did Ahmad come from?", "Ahmad went by rickshaw"

Therefore, what can be concluded from the theme of recognizing emotions is that subjects I, II, and III have difficulty in recognizing, understanding, or labeling the emotions they feel. Research by Stifter and Fox (1982) shows that three-year-old children and preschoolers are already able to identify and label the emotions of happy, sad, and angry accurately. In another finding, it was found that the labeling of happy, angry, sad, and fearful facial expressions increased relatively quickly before the age of 5 years, but decreased slowly between the ages of 5 and 7 years [15].

The development of children's emotional abilities, which include the skills of recognizing and understanding emotions, plays a very important role in the development of children's socioemotional competence [16]. The development of emotional knowledge is significantly influenced by parenting. Children who were physically abused by their parents showed increased recognition of angry faces and neglected children showed increased difficulty in distinguishing facial emotions compared to physically abused children. In addition, children who are abandoned from birth and experience emotional neglect at an early age tend to show lower performance in tasks involving recognition of emotional facial expressions and understanding the correspondence of emotions to situations [17].

3.3 Emotion Regulation

In subject I, the subject's ability to regulate angry emotions tends to be limited if his wishes are not fulfilled by his parents. This is indicated by threatening and coercive behavior towards his parents. In addition, subject I still really needs his mother's direction to regulate angry emotions so that they are not too excessive.

“Hmm banyak.. kalau kesalnyo tau itu kesal. Kalau misalnyo telatlah aa yang dinginkamnya tu nak, tu marah nyo tu, nyo panyasak urang nyo itu haa. Aa yang dimintanyo harus langsung wak lakukan kalau ndak berangnyo. Kadang lah payah ngecekkan "ngomonglah baik-baik" ee kadang ndak didangaanyo wak do. Lebih emosionalnyo”

(He knows that he feels upset. If he is late in fulfilling his wishes, he will get angry, because he is a pushy individual. All his wishes must be fulfilled immediately and if not then he will get angry. I have advised him to realize what he wants in a good way, but he tends not to listen and is more emotional)

Subject II, has not been able to manage excessive sad emotions despite being guided by his mother so that the mother tends to divert her emotions if the subject cannot regulate his emotions.

“Nangis dia. Nanti kalau ada mainan dan lain-lain tu dah teralihkan”
(He cries. If there are toys and so on, he will be distracted)

Subject III, has difficulty in regulating emotions which is indicated by behavior that tends not to listen to his mother's orders and directions. In addition, subject III expresses happy emotions excessively and has not been able to relieve angry emotions when directed by his mother, instead throwing things around as an outlet for emotions.


(He cannot be advised. Unlike Ahan, who is easy to advise. If he doesn't want something, but is ignored, he will stop by himself. However, if he is cared for, he will become more emotional. It is better to ignore him because he will stop if he gets bored. That is the difference between Ahmad's character and Ahan's)

In conclusion of this theme, subjects I, II, III have difficulties in regulating their emotions and need special guidance and direction in this regard. Emotion regulation is a key developmental task in toddlerhood and the lack of appropriate emotion regulation skills at this age may be the beginning of behavioral problems later in life [18]. In early childhood as described by [19], should have started trying to deal with their own emotions. Early childhood has begun to learn rules and expectations for emotions and modulate emotions in daily interactions with the family [20].

According to previous research, it is explained that the way early childhood regulates its emotions is strongly influenced by parents' reactions to children's emotional expressions [21]. [22] mentioned that negative maternal responses to emotions shown by their children make children tend to have difficulty regulating emotions and show higher levels of stress. Therefore, it is important for parents to show a more supportive reaction to the emotions shown by the child. This will improve the child's emotion regulation ability for the better and reduce the negative impact on the regulation ability itself [20]. When associated with mothers who experience mental disorders, including postpartum depression, research by [23] explains that mothers who experience maternal negative expressivity will be related to emotional dysregulation in children which then affects child development so that various rules are needed through positive discipline in the family to raise children.

3.4 Emotional Tendencies

This theme describes what forms of emotions are often shown by children in their daily lives. The emotional tendencies of early childhood children have significant implications in their development. Emotions that tend to appear in subjects I, II, and III are negative emotions, namely sadness and anger, and rarely bring up emotions of joy and fear. The following are the results of in-depth interviews with the subject's mother regarding the emotional tendencies that the subject often shows in his daily life.

Subject I, the emotional tendency that arises is angry emotions. Angry emotions that are difficult to control occur when the subject wants something but is not fulfilled by his parents.

"Kalau misalnya telatlah aa yang dinginkannya tu nak, tu marah nyo tu, nyo panyasak urang nyo gitu haa. Aa yang dimintannya harus langsung wak lakukan kalau ndak
berangnya. Kadang lah payah ngecekkan “ngomonglah baik-baik” ee kadang ndak didangaanyo wak do. Lebih emosionalnyo
(If we are late in giving her what she wants, she will get angry and force us. We have to give her what she wants immediately. If not, she will get angry.Sometimes, I get tired of telling him to speak nicely, but he doesn't listen, he gets more emotional).

Subject II, the emotional tendencies that arise are sadness and anger. If asking for something, children will tend to show sad emotions by crying to influence parents to fulfill their wishes. For example, the subject cried so that his mother would not leave him.

“He is sad when he is left behind, "Mother... Mother" [shouting]. She chased her mother while crying)

Subject III, the emotional tendencies that emerge are emotions of sadness and anger.

“He likes to cry a lot. He sheds tears easily. It is very visible. If he is angry, he will like to slam things. It's hard)

Regarding emotional tendencies that arise, [24] in their research said that a 2-year-old child will begin to be able to recognize the four basic emotions well, especially when given a stimulus, giving rise to expressions of happy, sad, angry, and afraid emotions. These expressions will also be used in daily conversation when they are 3 years old. 3-year-olds begin to understand the emotions they feel, although they still have little control over them. In expressing emotions, if the child finds something funny, they will laugh out loud. If something makes them sad or angry, they will cry [33].

In mothers with postpartum depression, their expression of negative emotions affects their children's ability to interpret and understand their own and others' emotional reactions. The child will express their emotions in an inappropriate way, and the low ability can lead to low levels of self-regulation and social skills [26]. Maternal negative expression is positively associated with children's self-discomfort, passive-aggression, and venting [27].

3.5 Factors Affecting Children's Emotional Abilities

There are three subthemes in the theme of factors affecting children's emotional abilities, namely efforts made by mothers so that children do not feel excessive negative emotions, mothers' perceptions of children's characteristics, and mothers' interaction time with children.

3.5.1 Mothers' Efforts to Prevent Their Children from Feeling Excessive Negative Emotion

This subtheme describes how each mother acts when her child expresses negative emotions, such as sadness or anger.

In subject I, the efforts made by the mother to relieve the child's negative emotions are by asking the child's wishes, calming by quieting, holding, and coaxing the child. In addition, the mother also often scolds the child in a high tone and lets the child continue to cry or get angry.
“Iyo nangisnyo. Ee kadang dibujuaknyo”
(Yes, he cries. Sometimes he is also persuaded)
“Yo kak kecekan “yo sabar dulu, tunggu dulu” elok-elok lu. Mulai dari level satu lu tu beko sampai level awak lah berang gitu kan. Sampai akhirnyo nyo ndak narimo, nyo antok tu, cuman bekonyo nangihnyo.”
(Yes, my brother said "wait a minute, wait a minute”. Show a good attitude. Starting from the first level to the level where we get angry. In the end, he doesn't accept it, he's quiet for a while, then he cries again)

In subject II, in addition to asking about the child's wishes, the mother provides opportunities to relieve excessive negative emotions independently and divert the child's negative emotions so that they do not last long.

(Yes, try to be calm. Try not to cry. Reduce your crying. If he's still crying, "If he's still crying, over time it will decrease”. Decide what he wants? Is he asking to go shopping? Or asking for something else. If he wants to go shopping, "Mommy, I want to go shopping." “Just a minute...” If there is, if Allah gives, then it will be given. However, if he is not invited to go shopping then he must be patient first, since he is a boy).

It can be concluded that there are differences in the way mothers help relieve children's negative emotions from the three subjects. Mothers of subjects I and II use more or less the same approach by asking about the child's feelings and providing calm when the child is experiencing negative emotions. With a different approach, the mother of subject III feels that telling stories is a trusted way to manage negative emotions felt by children. The role of mothers in minimizing negative emotions in children is in accordance with research conducted by [28] that children can eliminate the negative emotions they feel when they can communicate, label, and understand what they are feeling. So, mothers as the closest figure to children must have a qualified understanding to be able to recognize what children feel and how to deal with emotions that are felt to bother them.

This study also explains that the response of parents, including mothers, in helping children express emotions will have an effect until the child becomes an adult. Mother's indifference in helping children express and regulate emotions will affect the way children manage their emotions. If it is associated with the condition of mothers who experience mental disorders including postpartum depression, it proves that mothers have not been able to make efforts so that children do not feel negative emotions. As research conducted by [12] shows that mothers with a history of depression during childhood will respond to children with negative emotions and support, such as tendering to provide punishment, neglecting, or magnifying the negative emotions felt by children. For this reason, it is important for mothers to help their children to express their emotions.
3.5.2 Mother's Perception of Child Characteristics

This subtheme describes the mother's subjective assessment seen from the extent to which she recognizes her child's nature and temperament in responding to things around her that affect the mother's response when the child expresses his emotions. In a sense, subtheme 2 shows how the mother's perception of the child's characteristics affects the mother's response to the child's emotional disclosure.

In subject I, the mother has the perception that her child is an individual who is easily upset and angry and pushy, and will even threaten her mother if she does not immediately fulfill her wishes. Based on this perception, the mother responded in various ways. First, trying to fulfill these wishes. Second, avoiding the child because they do not want to feel negative emotions.

"Hmm banyak.. kalau kesalnyo tau itu kesal. Kalau misalnyo telatlah aa yang dinginkannya tu nak, tu marah nyo tu, nyo panyasak urang nyo gitu haa. Aa yang dimintanyo harus langsung wak lakukan kalau ndak berangnya. Kadang lah payah ngecekkan “ngomonglah baik-baik” ee kadang ndak didargaannya wak do. Lebih emosionalnya."

(He would get really upset. If he is late in fulfilling what he wants, he will get angry, he has a pushy character. All his wishes have to be given directly if he doesn't want to get angry. Sometimes I have advised her by saying "speak nicely", but sometimes she doesn't listen to me. She is more emotional)

"Itu kadang kakak menghindar. Daripada kena marah kan, kakak menghindar"

(Sometimes you will avoid. You will avoid if you don't want to be scolded)

In subject II, the mother perceives the child as a quiet child who cries easily. According to his mother, she was quite confused by the character of the child who cried very easily. However, the answer that can be given is the reason that the mother feels that the child is not comfortable with other people, except with his own mother, so it is easy to cry if the mother figure is far from his existence. She also has the perception that although the child often cries, this is not a problem because the child only cries for a short time even though the intensity is frequent and will be distracted by the fulfillment of something he wants.

"Sedih.. ntah sedih apo kesal tu"

(Sad... I am confused whether it is sad or upset)

In subject III, the mother has the perception that the child has a hard and unruly nature. However, the mother feels that her child's character is an innate factor from birth and is not influenced by external factors (environment). The mother also feels that she as a parent cannot impose her will to control her child's character excessively because the child's character is difficult to direct so that following what the child wants is the right way so that her child does not show worse rebellious behavior. However, in general, the three subject parents believe that understanding children's character is important as parents.

"Beda cara maaja kan dek beda sifat nyo kan. Caro kasih pengertiannya babeda. Kalau iko agak lebih keras stek dari kakak-kakaknya. "
There are differences in the way emotions are taught due to differences in nature. There are different ways of giving understanding to children. His character is harder than his other siblings.

It can be concluded that the three subject mothers have different perceptions. The mother of subject I has the perception that the child's character who is easily upset and angry encourages the mother's perception to take action in responding to the child's character, namely by fulfilling the wishes and avoiding the negative emotions felt by the child. Whereas in subject II, the mother's perception is in the form of confusion with the child's character who cries easily and makes an assumption that her child who often cries is a natural thing because it only lasts for a short duration. In contrast to subject III who has the perception that the child's character occurs biologically, in the sense that it is innate from birth so that he tends to accept the child's irritable character (temperament).

Based on theory, pre-school children are in a stage of strong emotional development, are easily influenced, and most problems occur in psychological aspects rather than physical [29]. This illustrates that the mother's perception in subjects I and II considers that the child is indeed at the age of emotional development so that it aligns with the child's character. In addition, the perception of the mother of subject III is also driven by the research of [30] which explains that children's character comes from internal (within the child) and not from social factors and will affect the way children socialize and control emotions in their environment. When linked between mothers' perceptions of their children's characteristics and mothers who experience mental disorders including postpartum depression, research conducted by [31] that mothers who have levels of anxiety and depression symptoms will tend to have more negative perceptions of their children's temperament as indicated by lower levels of mindfulness parenting.

3.5.3 Mother-Child Interaction Time

This subtheme describes the lack of interaction time between mothers and children caused by various things, one of which is the mother's busy work.

Subject I rarely builds interactions with the mother due to busy work (selling), the mother's hope that the child will immediately go to school and be taught by the teacher, involving close relatives to take care of the child (for example: playing and bathing), and the mother's resigned attitude by directly involving the husband in taking care of the child when crying can affect the mother's knowledge and way of socializing emotions to the child.


(For me personally, I haven't really been able to teach it, I have a busy life. I can't monitor Yubi. Hopefully he can be taught well at school. We leave it to the teachers at school. Same with her sister, Raisya, at that time my sister was busy selling. Satt Raisya has started school, during corona, using the zoom
application, at that time my brother was busy selling, when he entered school, then signed up for tutoring with the teacher, by kindergarten he was already good at reading)

In subject II, the mother admitted that she did not have time to simply ask about how the child was feeling at that time, let alone teach the child to manage emotions.

"Hmm... enggak, jarangnya, ndak ado kesempatan."
(Never, rarely, no opportunity)

In subject III, there is minimal interaction with the child as evidenced by neglecting and not directing the child to express happy emotions excessively. In addition, emotional socialization is taught through punishment (e.g. pinching and threatening to hit the child using a belt).

(It's good, if the child has a lot of positive emotions, this will be good. It is important to shape their personality. The child will become a cheerful person and easily understand others. It is different if they have an angry character)

It can be concluded that the three subject parents lack time and are reluctant to build interactions with their children. This is believed to be potentially bad for child development. As explained by [28] that parents play an important role in building an environment that can make it easier for children to communicate with parents so that they can understand each other. In addition, [28] also believes that parents who rarely interact with their children for economic reasons will be prone to emotional problems. When it comes to the timing of mother-child interactions with mothers who experience mental disorders, including postpartum depression, research by [32] proves that mothers with mental disorders, in this case researchers focus on borderline personality disorder, show that mothers with this disorder tend to perceive interactions with children as less useful and stressful, resulting in negative interactions (limited, tense, and uncoordinated behavior).

The following are the results of the assessment through the Emotional Competence Test Kits for Children test tool conducted on the child, namely:

Table 1. Assessment Results of Emotional Competence Test Kits for Children.

<table>
<thead>
<tr>
<th>Subject</th>
<th>Age</th>
<th>Emotion</th>
<th>Total</th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Angry</td>
<td>Happy</td>
<td>Sad</td>
</tr>
<tr>
<td>1</td>
<td>4</td>
<td>4</td>
<td>2</td>
<td>6</td>
</tr>
<tr>
<td>2</td>
<td>3.5</td>
<td>7</td>
<td>0</td>
<td>7</td>
</tr>
<tr>
<td>3</td>
<td>3.5</td>
<td>2</td>
<td>2</td>
<td>4</td>
</tr>
</tbody>
</table>

Notes: EK = Emotional Knowledge; ER = Emotion Regulation; T = Total
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This research is only limited in explaining how the description of the emotional abilities of early childhood who have postpartum depression mothers. For this reason, it is recommended that further research explore more deeply how the dynamics of postpartum depression mothers' conditions affect the way their children feel.

4 Conclusion

Based on the results obtained, five themes were obtained, namely expression of emotions, recognizing emotions, regulation of emotions, and factors that influence children's emotional abilities. Emotional abilities are needed by early childhood to be able to interact and establish relationships with others and maintain these relationships. Children's inability to do this can lead to behavioral problems at a later stage of development. Young children with mothers who have a history of postpartum depression are able to express four basic emotions, namely happy, sad, angry, and afraid. However, this ability is limited in labeling the expressed emotions and regulating emotions. Verbally labeling emotions should have been able since the child was 2 years old. In addition, it was found that the emotions that were often displayed by children were negative emotions, in the form of anger and sadness. It was also found that there are factors in the way mothers socialize their children's emotional abilities, including mothers' efforts to reduce children's negative emotions, mothers' perceptions of children's characteristics, and limited time to interact.

The results of this study can provide an understanding to the community, especially mothers and mothers-to-be, that depression experienced after childbirth can have a negative impact on children's emotional development. To minimize this risk, mothers should be aware of and regulate their emotions first before helping their children develop these skills, given that mothers are important socializers of children's emotions. In addition, early screening for depression in mothers during the postpartum period can also be done to detect postpartum depression earlier and to conduct training on how to socialize mothers' emotions to children so that the limitations of children's emotional abilities can be reduced.

Acknowledgments. Thank you to the Ministry of Education, Culture, Research and Technology (Kemendikbudristek) and Andalas University for funding this research.

References


