



Literature Riview: Determinants of Postpartum Blues

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ABSTRACT

Background: Postpartum blues is a kind of psychological problem in the period after childbirth, where a woman feels sad and depressed immediately. Post partum blues symptoms begin to appear two or three days after childbirth and usually go away within a week or two. Objective: to analyze the literature related to the determinants of post partum blues. Methods: articles related to literature review topic were searched in the ScienceDirect, Pudmed. Google Scholar Google Scholar databases and were analyzed using PRISMA through the processes including identification, selection, and finally the assessment of articles according to the inclusion and exclusion criteria. Results: Article searching in chosen databases using keywords in accordance with the study objective resulted in 20 articles which were further selected according to the topics to be reviewed and finally 5 journal articles were discussed in the literature review. The topic to be discussed here was the determinants of postpartum blues. Conclusion: Age, parity, education level, family support, sleep disorders, type of delivery, and readiness to become a mother were involved in the causative factors of Postpartum blues and those factors could be overcome by involving husband, family and the surrounding environment through support for postpartum women.

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ABSTRAK

Postpartum blues adalah masalah psikologis pada masa setelah persalinan, dimana seorang perempuan merasakan sedih dan depresi segera. Gejala *post partum blues* mulai muncul dua atau tiga hari setelah persalinan dan biasanya hilang dalam satu atau dua minggu. Tujuan: untuk menganalisis literatur yang berkaitan determinan *post partum blues*. Metode: yang digunakan dalam mencari artikel adalah *literature review* dengan menggunakan database *ScienceDirect*, *Pudmed*, *google scholar google scholar* dan menggunakan PRISMA yakni dengan melalui proses identifikasi, seleksi dan terakhir penilaian artikel sesuai dengan kriteria inklusi dan eksklusi. Hasil: Dari hasil Pencarian Artikel di databased menggunakan *keyword* atau kata kunci sesuai dengan tujuan penelitian sebanyak 20 artikel, kemudian artikel tersebut di saring sesuai dengan topik yang akan di review sebanyak 5 jurnal dengan judul topik yang dibahas pada *literature review* yaitu faktor penyebab *post partum blues*. Kesimpulan: Usia, *paritas*, tingkat pendidikan, dukungan keluarga, gangguan tidur, jenis persalinan, dan kesiapan menjadi ibu merupakan faktor penyebab terjadinya *Postpartum blues* dan dapat diatasi dengan melibatkan suami, keluarga dan lingkungan sekitar melalui dukungan pada ibu postpartum.

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INTRODUCTION

In Indonesia, the incidence of postpartum blues ranged from 50-70%, or 1 to 2 per 1000 births. Based on this level of incidence, about 50-60% of them experienced postpartum depression when they had their first child and about 50% had a family history of mood disorders.

Based on a WHO report in a study (Febrina, 2021), it was estimated that postpartum women who experienced mild postpartum depression ranged from 10 per 1000 live births and those who experienced moderate or severe postpartum depression ranged from 30 to 200 per 1000 live births.

The periods of pregnancy, childbirth, and postpartum are the phases that require social support from both external parties such as the environment and healthcare workers as well as from internal party, namely the closest family, especially husbands. During the postpartum period, the mother will find some changes in her body and emotions.

The emotional changes experienced by women during the postpartum period are accompanied with adaptation to become a mother. Significant changes in hormonal status during the puerperium lead to mood swings, anxiety, irritability, instability, excessive crying, anger, overwhelming fatigue, restlessness, hopelessness or confusion.

Postpartum blues is a kind of psychological problem in the period after childbirth, where a woman feels sad and depressed immediately. Post partum blues symptoms begin to appear two or three days after childbirth and usually go away within a week or two. Postpartum blues is categorized as a mild psychological disorder syndrome, but if it does not get the right treatment, it will fall into moderate to severe psychological disorders, namely postpartum depression and postpartum psychosis phases.

The cause of post partum blues is not known for certain, but it is suspected that several factors including drastic hormonal changes after childbirth, affect chemicals in the brain that regulate mood, so that a woman's feelings or emotions may be disturbed. In addition, the fatigue after delivery and childbirth and during breastfeeding period can

also cause changes in routine activities. Caring for the baby is very tiring for a woman, and this is made even worse by the lack of support from her husband, family and the surrounding environment to the new mother in going through the postpartum psychological adaptation period.

According to (Risnawati dan Susilawati, 2018) the incidence of postpartum blues abroad was quite high by 26-85%. Globally, it was estimated that 20% of postpartum women experienced postpartum blues. In the Netherlands in 2015, it was estimated that 2-10% of postpartum women experienced such disorder. It is estimated that 50-70% of postpartum women show early symptoms of the emergence of postpartum blues. However these symptoms can disappear slowly due to a good adaptation process and adequate family support. This study aims to analyze the literature related to the determinants of postpartum blues.

METHOD

Articles related to literature review topic were searched in the ScienceDirect, Pudmed, Google Scholar Google Scholar databases and were analyzed using PRISMA through the processes including identification, selection, and finally the assessment of articles according to the inclusion and exclusion criteria. The inclusion criterion was articles which were published in 2013, 2018, 2021, and 2022.

RESULTS AND DISCUSSION

Article searching in chosen databases using keywords in accordance with the study objective resulted in 20 articles which were further selected according to the topics to be reviewed and finally 5 journal articles were discussed in the literature review. The topic to be discussed here was the determinants of postpartum blues.

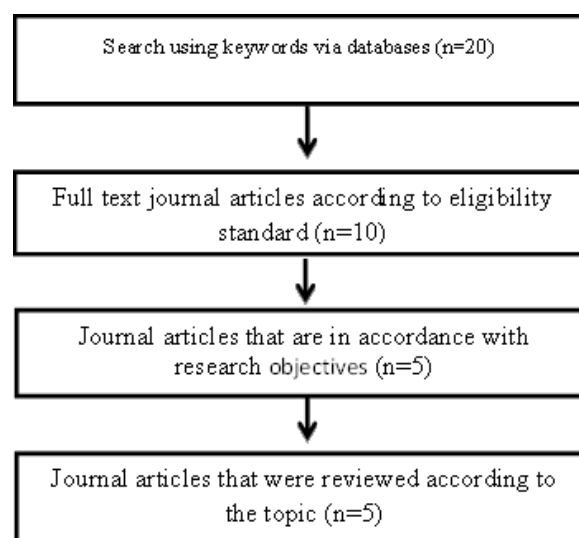


Figure 1. Flowchart of the article selection process

Tabel 1. Literature Review towards Journal Artcles regarding the Determinants of Postpartum Blues

No	Title	Author	Year	Method	Sample	Finding
1.	Factors Affecting Psychological Adaptation (Postpartum Blues) during the Postpartum Period	Muliatul Jannah	2022	Literature was searched through electronic media with the keyword of postpartum mother	Postpartum women	There was a relationship between the causative factors of the incidence of post partum blues during the postpartum period, including age, parity, husband, family and social support, type of delivery, unplanned delivery, low socio-economic status, part-time work, biological vulnerability, psychological vulnerability, stressful situations, and maladaptive strategies.
2.	Factors Associated with the Incidence of Postpartum Blues at "Y" Hospital, Bekasi	Armaya & Purwarini	2021	A quantitative study with a cross-sectional approach	Postpartum Women	There was a relationship between parity and occupation with the incidence of postpartum blues. Furthermore, there was no relationship between age and education with the incidence of postpartum blues.
3.	Factors Associated with the Incidence of Postpartum Blues at the Primary Clinic in the Work Area of Payung Sekaki Community Health Center in Pekanbaru City	Ariesca et al.	2018	An analytical survey study with cross sectional design	Postpartum Women	There was a relationship between age and parity with the incidence of postpartum blues. Furthermore, there was no relationship between type of delivery, income and readiness to become a mother with the incidence of postpartum blues.
4.	Influential Factors of the Incidence of PostPartum Blues	Saraswati	2013	A cross sectional study	Postpartum Women	There was a relationship between age, education and obstetric status with the risk factors of postpartum blues.
5.	Analysis of the Influential Factors of the Incidence of PostPartum Blues	Harianis & Sari	2022	An analytical descriptive study with a cross sectional approach	Postpartum Women	There was a relationship between postnatal health education provided by healthcare workers and family involvement in taking care of the baby of women with postpartum blues

DISCUSSION

1. Age Factor

The results showed that women aged <20 or >35 years experienced postpartum blues. The results of this study are in line with previous study which found that women aged <20 years or >35 years were more susceptible to the incidence of postpartum blues compared to those aged 20-35 years. Scientists from *Royal College of Obstetricians and Gynecologist of Great Britain* found that women aged <17 years and >35 years were more potential for miscarriage, cesarean section, and complications at birth, and the number

of complications increase sharply among women aged 35 years (Kumalasari & Hendawati, 2019)

According to previous studies, age was related to the readiness of the mother in facing pregnancy and childbirth. Furthermore, age also had an effect on the incidence of psychological problems among postpartum women. In general, women aged <20 years old have limited knowledge about pregnancy or lack of information regarding existing health services. In addition, women aged <20 years are also not expected to have physical and mental maturity in caring for their children. Therefore, they may face difficulties adapting to their new roles and activities as mothers. They surely need help from healthcare workers during

hospitalization and through the postpartum period. Too old as a mother leads to a risk of fatigue and the anatomical condition of the body that is no longer good for pregnancy and childbirth. In addition, if the mother already has older children, it creates a separate burden for the mother, thus bringing problems during her postpartum period (Kumalasari & Hendawati, 2019).

2. Level of Education

The level of education is very influential on emotional intelligence. Women who have a high level of education will have a more rational way of thinking, and the easier it is to receive information. In contrast, women who do not get adequate information about pregnancy and childbirth will generally find it difficult to adjust to their new roles and activities, thereby allowing psychological disorders such as postpartum blues to occur.

The result of a previous study showed that women who experienced physical exhaustion tended to be easier to experience postpartum blues. The result of this study is in line with the previous study which found that physical fatigue could trigger the incidence of postpartum blues (Kumalasari & Hendawati, 2019).

The results of a previous study regarding the level of education found that some women with low education experienced depression. Education certainly affected readiness and knowledge regarding pregnancy and childbirth (Diniyah, 2019)

3. Parity

The results of previous study showed that most of the women who experienced postpartum depression were primiparous women. Primiparous women are those giving birth for the first time. In the first experience of having a baby, they do not have experience and readiness to become a mother. Women who give birth for the first time are more likely to suffer from depression because they are unable to adapt to their new role during postpartum period. Postpartum disorders related to parity status and obstetric history which includes a history of pregnancy until delivery and whether there are complications from previous pregnancy and childbirth. Primiparous women tend to experience depression because they will enter the process of adaptation after giving birth.

Such women used to only think about herself, once the baby is born, especially if she does not understand her new role, she will be confused while the baby must be cared for (Firmansyah, 2016).

Experience during labor and excruciating pain during the delivery can be a trigger factor. For example women who have to be induced several times, membranes rupture before experiencing the cervical dilation process, episiotomy which causes pain and also sectio caesarean delivery. Experience in labor and delivery plays an important role in the incidence of postpartum blues. Women who have given birth for the first time are more likely to experience postpartum blues compared to those who have given birth before. Women who give birth for the first time should adapt to role changes that have never been passed before. So, they are more likely to experience postpartum blues (Saraswati, 2013). Therefore, husband's support is also necessary for women in dealing with this adaptation period. Lack of husband's support may cause depression among new mothers. Husband's support can be performed in the form of attention, communication and intimate emotional relationships. If these kinds of support are not well established, they can be the most

significant factors which trigger postpartum depression (R. A. Sari, 2020).

4. Type of Delivery

The type of delivery was found to have a significant effect on the incidence of postpartum blues because a woman's bad experience will cause psychological trauma which can result in inability to take good care of themselves and their babies. Labor complications were also associated with the incidence of postpartum blues. Prolonged labor will make a woman to have an unsatisfactory delivery experience, so that she will show a negative self-image and can continue to anger which can complicate the adaptation process to her new role and function.

Based on the results of the current study, among 38 mothers who had vaginal birth, 19 people (50.0%) had no postpartum blues symptoms, blues and none (0.0%) had symptoms of postpartum blues. Furthermore, those who had abdominal birth (Caesarean Section) 11 people (28.9%) had no postpartum blues symptoms, and 8 people (21.1%) had postpartum blues symptoms. The delivery process by cesarean section with indications can cause tissue (physical) trauma and acute section pain so that it interferes with the physical and psychological condition of the women. It also causes longer hospitalization so that it may lead to psychological disorders namely post partum depression (Husna Ali et al., 2020).

5. Readiness to Become a Mother

The postpartum period is a crisis situation for women, partners, and families due to various changes that occur physically, psychologically. Furthermore, the family structure also requires an adaptation or adjustment process. Physical adaptation starts from the time the baby is born until the woman's body returns to its pre-pregnancy condition, which is a period of 6 to 8 weeks. The process of psychological adaptation has started since a woman is pregnant. Pregnancy and childbirth are normal events in life, but many women experience significant stress. There are times when women experience feelings of sadness related to their babies which is so called postpartum blues or baby blues (Fatmawati, 2019).

Postpartum blues can inhibit the growth and development of infants such as language delays and low intellectual quotient (IQ), besides the impact on mothers namely the reduced amount of breast milk production which is useful for infant nutritional intake, and difficulty in understanding the baby's emotional expression. The condition of a mother who is not able to answer the needs of her baby properly can cause stress to the baby. Over time, the mother will judge herself as a failed mother or a woman who cannot be a perfect mother (Marwiyah et al., 2022).

6. Family Support

Family support is an attitude and act of acceptance of family members that can be shown in the forms of informational support, assessment support, instrumental support and emotional support. In other words, family support is a form of interpersonal relationship that includes attitudes, actions and acceptance of family members, so that everyone in family feels to be cared for.

Family support can be in the form of internal family social support such as support from a husband, siblings, brother-in-law, parents, parents-in-law, grandfather and grandmother. This form of family support can make a person feel comfortable, being loved and cared for by the family

which can further have an impact on a person's ability to deal with problems well.

Help from husband and family members is very influential in the success of a woman during postpartum period so that the postpartum blues do not develop into more severe conditions such as postpartum depression. Small and fun things can help women ease postpartum stress. Things to do include telling stories and expressing feelings to the husband about what she wants, looking for a new atmosphere, carrying out daily activities according to self abilities, exercising and relaxing, immediately resting when the baby sleeps, consuming healthy food, and most importantly instilling positive thoughts that match the reality that the presence of a baby is not something to be feared and worried about (Purwati & Noviyana, 2020)

A study conducted in Pekanbaru showed that there was a relationship between husband's support and the incidence of postpartum blues influenced by education, work, mother's parity, baby's condition and husband's social support. In this case, husband's support is the most influential factor for the incidence of postpartum blues (Dinarum & Rosyidah, 2020).

The results of a previous study showed that postpartum blues were due to lack of social support from family and closest people. In contrast, in some cases of women who gave birth at a young age who received social support, there were no postpartum blues symptoms. Therefore, social support from the closest people is required so that women are able to undergo new phases and responsibilities after childbirth and avoid the postpartum blues. Postpartum blues management can focus on emotions or problems. Coping strategies that focus on emotions aims to overcome stressful situations or perceived threats by controlling emotional responses, while coping strategies that focus on problems aims to overcome perceived stressful situations (Rahayu & Mulyani, 2020).

Based on the results of the previous study, it was shown that 100% of postpartum women who received very good support from their families did not experience postpartum blues. This was due to postpartum women get full support from the family in terms of in the forms of informational support, assessment support, instrumental support and emotional support. Meanwhile, most of women who got good family support (80%) experienced mild postpartum blues. This was due to some parts of the support that the women did not get during the postpartum period, such as informational support related to changes during the postpartum period. In contrast, most of postpartum women who lacked of family support (68%) experienced moderate postpartum blues. This was due to they did not fully get family support during the postpartum period such as the inactivity of the family in helping postpartum women to care for the baby, lack of family time in accompanying and assisting mothers during the postpartum period, lack of information related to care during the postpartum period (Sri Yunita Suraida Salat et al., 2021).

7. Sleep Disorders

Post-partum sleep disorders can contribute to increased maternal stress and increased vulnerability to mood swings. The mother's sleep pattern is disturbed and she wakes up more often because of her baby. In a state of postpartum depression, mood also affects the quality of sleep of postpartum women (R. Sari & Anggorowati, 2020).

Fulfilling the need for rest and sleep in the postpartum period is very important for women who are breastfeeding and recovering after pregnancy and childbirth processes. Breastfeeding women need sleep at least 8 hours a day. Such

need are often not met. The adverse effects of the lack of rest and sleep among postpartum women include the reduced milk supply, the slow uterine involution process, and the inability to care for the baby. Postpartum blues normally occurs for 2-3 days. It is very natural for a mother who has just given birth to feel tired, anxious, and less enthusiastic in carrying out daily activities due to a decrease in hormones and changes in brain chemicals (Harianis & Sari, 2022).

Based on the results of the study conducted by (Hasna et al., 2018) menyatakan, it was found that a state of lack of sleep will cause fatigue and exhaustion so that mothers cannot adapt to physical activities and this may lead to postpartum blues.

CONCLUSIONS AND SUGGESTIONS

Postpartum blues is a condition where a woman experiences psychological changes that often appear among postpartum women. Age, parity, education level, family support, sleep disorders, type of delivery, and readiness to become a mother were involved in the causative factors of Postpartum blues and those factors could be overcome by involving husband, family and the surrounding environment through support for postpartum women.

ETHICAL CONSIDERATIONS

This study was approved by the research Ethics Committee, Politeknik Kesehatan Gorontalo

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Conflict of Interest Statement

The author declares that there is no potential conflict of interest concerning the authorship and publication of this article.

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