



THE IMPACT OF MINDFULNESS THERAPY ON THE MENTAL HEALTH OF PREGNANT WOMEN: A LITERATURE REVIEW

Lintje Sintje Corputty, Yosef Marsianus Karno, Abdul Thalib*

Nursing Departement, Sekolah Tinggi Ilmu Kesehatan Pasapua Ambon, Jl. Dr. Sitanala, Ahusen, Sirimau, Ambon, Maluku 97127, Indonesia

*abdulthalibhamzah@gmail.com

ABSTRACT

Mental health issues during pregnancy affect 15–25% of women, leading to complications such as preterm birth and low birth weight. Mindfulness-based interventions (MBIs) offer a promising non-pharmacological approach to reducing stress, anxiety, and depression while enhancing maternal and infant well-being. Objective: This review evaluates the effectiveness of mindfulness therapy in improving pregnant women's mental health by reducing anxiety, stress, and depression. A literature review was conducted using PubMed (236), ScienceDirect (106), Google Scholar (965), and Garuda (231) databases. Studies published in the last ten years (2014-2024) on the effects of Mindfulness-Based Interventions (MBIs) on maternal mental health were analyzed. From an initial 1,529 articles, only 10 studies met the inclusion criteria. MBIs, including Mindfulness-Based Cognitive Therapy (MBCT) and Mindfulness-Based Stress Reduction (MBSR), effectively reduce anxiety, stress, and depression. They improve emotional regulation, quality of life, and mother-infant bonding. Digital mindfulness interventions also show similar benefits. Mindfulness therapy significantly improves mental health during pregnancy, promoting maternal and infant well-being. Integrating MBIs into maternal healthcare services is recommended as an effective non-pharmacological approach.

Keywords: anxiety and depression; mental health; mindfulness therapy; pregnant women

How to cite (in APA style)

Corputty, L. S., Karno, Y. M., & Thalib, A. (2024). The Impact of Mindfulness Therapy on the Mental Health of Pregnant Women: A Literature Review. *Indonesian Journal of Global Health Research*, 6(6), 4403-4412. <https://doi.org/10.37287/ijghr.v6i6.5872>.

INTRODUCTION

This literature review examines the impact of mindfulness therapy on the mental health of pregnant women (Dhillon et al., 2017; Lucena et al., 2020). Mental health during pregnancy is a global concern because between 15% and 25% of pregnant women experience anxiety or mood disorders (Yang et al., 2024). Perinatal mental health issues affect mothers, their babies, and society. Psychosocial stress in pregnant women is associated with increased obstetric interventions (Pan et al., 2019). Anxiety, stress, and depression during pregnancy can cause serious side effects on both mother and child, including premature birth and low birth weight, delayed child development, and poor child mental health. Given the negative impact of poor mental health during pregnancy, it is important to focus on prenatal anxiety and psychological stress in pregnant women.

Mindfulness-based interventions (MBIs) are emerging as a promising approach to reducing common mental health problems during pregnancy. MBIs can reduce fetal exposure to stress, anxiety, and depression, thus helping to maintain a more positive intrauterine environment for fetal development (Veena & Mebin, 2019). Mindfulness helps stop the rise of negative thoughts that can exacerbate pain or depression, and counteracts the tendency to be on autopilot (Warriner et al., 2012). Digitally mindfulness interventions can significantly reduce symptoms of depression, anxiety, and stress in pregnant women (Yang et al., 2024). Research shows that mindfulness training is a useful intervention to increase anxiety and stress during pregnancy (Shi & MacBeth, 2017). In addition, MBCT (Mindfulness-Based Cognitive

Therapy) can effectively reduce symptoms of stress and anxiety and help prevent the recurrence of depression (Veena & Mebin, 2019). The PMRB (Prenatal Mindfulness Relationship-Based) program provides early support to improve mindfulness, interoception, mental well-being, and mother-baby relationships during pregnancy and postpartum (Sansone et al., 2024). The results of the study show that MBCT is effective in reducing anxiety in the third trimester of pregnant women (Sundari et al., 2023).

The literature on mindfulness in pregnancy continues to grow exponentially. Several systematic reviews aimed to assess the effects of mindfulness-based interventions conducted during pregnancy and explore mindfulness and mental health outcomes (Dhillon et al., 2017). This review aimed to assess the impact of mindfulness-based interventions on the mental health of pregnant women, and to systematically evaluate the effects of positive thinking interventions on evidence of antenatal anxiety in pregnant women (Yang et al., 2024). The aim of this review was to assess the effects of mindfulness-based interventions carried out during pregnancy, explore mindfulness and mental health outcomes, and assess the existing literature.

METHOD

This study used a systematic literature review design to identify and analyze scientific evidence regarding the impact of mindfulness therapy on the mental health of pregnant women. Article searches were conducted through PubMed, ScienceDirect, Scopus, Google Scholar, and CINAHL databases using keywords such as "Mindfulness Therapy" OR "Mindfulness-Based Intervention" OR "Mindfulness-Based Stress Reduction" AND "Pregnant Women" OR "Pregnancy" AND "Mental Health" OR "Anxiety" OR "Depression" OR "Stress". The inclusion criteria in this study include articles that discuss mindfulness therapy in pregnant women and its impact on mental health, both in the form of experimental studies such as Randomized Controlled Trial (RCT), quasi-experimental, and observational studies. Selected articles must have been published within the last 10 years (2014-2024), written in English or Indonesian, and available in full text. Meanwhile, articles that do not focus on mindfulness in pregnancy, have a less clear methodology, or are in the form of opinions, editorials, and letters to editors will be excluded from this review. The selection process begins with an initial screening based on the title and abstract to assess the relevance of the research. Articles that pass the initial selection are then examined in depth in full text to ensure their conformity with the inclusion criteria. The data collected from each article included the study design, the number of participants, the type of mindfulness intervention used, as well as the outcomes measured such as anxiety, depression, stress, and sleep quality. Furthermore, a narrative analysis was carried out to compare the findings of various studies and draw conclusions about the effectiveness of mindfulness therapy in improving the mental health of pregnant women.

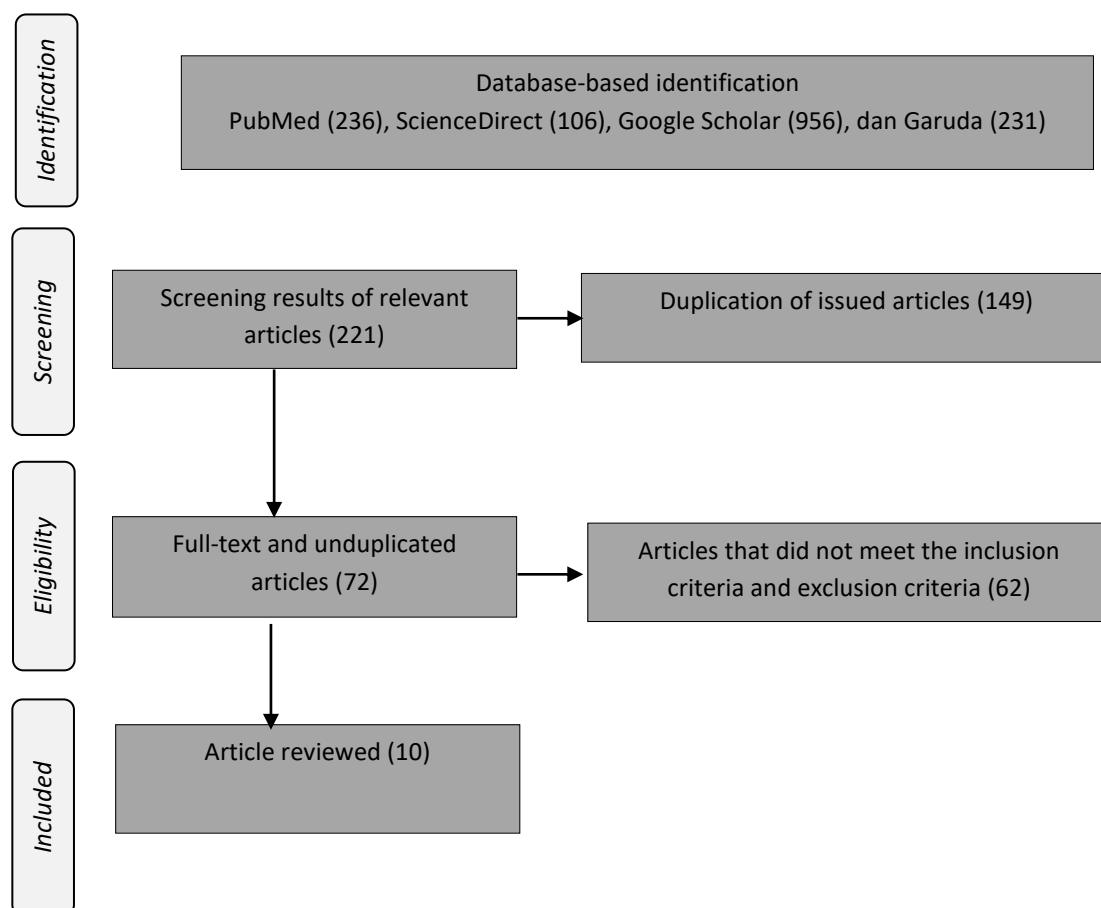


Figure 1. Flowchart

RESULT

Initial identification was carried out by searching for articles from several sources, namely PubMed (236), ScienceDirect (106), Google Scholar (956), and Garuda (231), resulting in a total of 1,529 articles. Next, a screening process was carried out to find relevant articles, resulting in 221 articles that met the initial criteria. However, 149 of those articles were removed because they were duplicates. At the eligibility stage, the remaining 72 articles were evaluated in full-text form, but 62 articles were eliminated because they did not meet the inclusion and exclusion criteria. Finally, only 10 articles were selected for further analysis in the literature review.

Table 1.

Grid Synthesis: The Impact of Mindfulness Therapy on Pregnant Women's Mental Health

Title/Author	Method	Finding
Postpartum Outcomes and Formal Mindfulness Practice in Mindfulness-Based Cognitive Therapy for Perinatal Women. (Luberto et al., 2018)	The study used a single-arm pilot design involving 24 pregnant women who completed self-report actions before and after the Mindfulness-Based Cognitive Therapy (MBCT) intervention for eight weeks, as well as three months postpartum. Participants recorded their daily formal mindfulness exercises on an at-home exercise log during the intervention, which included tracking the duration and frequency of the exercises. To analyze the data, the researchers used a one-way repeating measure ANOVA to assess whether the improvement in psychosocial outcomes	The study found that improved psychosocial outcomes, including anxiety, worry, attention, and self-compassion, were maintained three months postpartum, with further reductions in depression observed ($p < .001$). This suggests that the benefits of an eight-week Attention-Based Cognitive Therapy (MBCT) intervention extend beyond pregnancy to the postpartum period. Participants generally adhered to mindfulness exercise recommendations during the intervention, with 54%-80% weekly adherence and an average of 17.31 hours of total exercise. However, the number of mindfulness exercises did not correlate significantly with

Title/Author	Method	Finding
	(anxiety, depression, worry, self-compassion, attention) was maintained from baseline to post-intervention and postpartum.	outcomes at post-intervention or postpartum, suggesting that while the exercises were maintained, their direct impact on outcomes was still unclear.
Protocol for a Randomized Controlled Trial Comparing Phone-Based Prenatal Mindfulness Training to Usual Care for Pregnant People at Risk for Hypertensive Disorders of Pregnancy (Ayala et al., 2024)	The study used a randomized controlled trial design in which pregnant women at risk of developing gestational hypertension disorder (HDP) were randomized to an 8-week mindfulness training (MT) intervention delivered via telephone or usual care, allowing for a comparison of the effectiveness of MT on maternal cardiovascular parameters. The study uses subjective and objective ecological momentary assessment methodologies combined with wearable biosensor technology to capture detailed psychological, physiological, and interpersonal processes, allowing for an evaluation of how mindfulness training may affect cardiovascular health in participants.	A randomized controlled trial aimed to evaluate the effectiveness of an 8-week telephone mindfulness (MT) training intervention compared to usual care in pregnant women at risk of gestational hypertension disorder (HDP), focusing on its impact on maternal cardiovascular parameters. The study will use ecological momentary assessment methodologies and wearable biosensor technology to capture psychological, physiological, and interpersonal responses, thus linking mindfulness training to improved cardiovascular health among participants.
'I've Changed My Mind', Mindfulness-Based Childbirth and Parenting (MBCP) for pregnant women with a high level of fear of childbirth and their partners: study protocol of the quasi-experimental controlled trial (Veringa et al., 2016)	The study used a quasi-experimental controlled trial design, involving 128 pregnant women with high levels of Fear of Childbirth (FoC) who were allocated to either the Mindfulness-Based Childhood and Parenting (MBCP) intervention group or the Fear of Childhood Consultation (FoCc) comparison group. Data will be collected through four assessment waves over the total duration of the six-month study, which includes pre- and post-intervention assessments, as well as postpartum and at the end of the maternity leave period, focusing on various outcomes such as FoC, labor pain, and overall mental health indicators.	The study aimed to evaluate the effectiveness of Mindfulness-Based Childhood and Parenting (MBCP) in reducing Fear of Childbirth (FoC) among pregnant women, focusing on various outcomes such as labor pain, willingness to accept midwifery interventions, and overall mental health indicators such as anxiety and depression. The study will involve a quasi-experimental controlled trial with 128 pregnant women who experience high levels of FoC, compare the effects of MBCP on Fear of Childhood Consultation (FoCC), and will assess multiple outcomes over a six-month period through four assessment waves.
Does Mindful Parenting Mediate the Association between Maternal Anxiety during Pregnancy and Child Behavioral/Emotional Problems? (Henrichs et al., 2021)	The study used a cohort design involving 118 mother-child pairs, in which mothers filled out questionnaires at three time points during pregnancy (each trimester) and when the child was 4 years old. The questionnaire assesses maternal state anxiety, generalized anxiety, attentive parenting, and child behavioral/emotional problems using validated scales. The data analysis included a sequential double mediation model to examine the mediating effects of maternal anxiety and attentive parenting on the relationship between maternal anxiety during pregnancy and child internalization problems. The analysis uses the SPSS macro PROCESS, using the bootstrap method to estimate the indirect effect and calculate the bias-corrected confidence interval.	The study found that maternal anxiety during pregnancy was positively related to the child's internalization problems at age 4. These associations are mediated sequentially by concomitant maternal generalized anxiety and attentive parenting, suggesting that higher maternal anxiety leads to more conscious parenting, which in turn is linked to more internalized problems in children. Generalized maternal anxiety during pregnancy is related to internalization and externalization problems in children, but does not show a significant relationship with attentive parenting. This suggests that while maternal anxiety influences child behavior, the quality of parenting, particularly attentive parenting, plays an important role in mediating the effects of maternal state anxiety on child internalization issues.
The influence of mindfulness-based stress reduction (MBSR) on stress, anxiety and depression due to unwanted pregnancy: a randomized clinical trial. (Nejad et al., 2021)	The study involved 60 women with unwanted pregnancies who were randomly divided into two groups: an intervention group that received awareness-based stress reduction (MBSR) sessions, home exercises, and voice recordings, and a control group that did not receive the intervention.	The study found that participants in the intervention group, who received mindfulness-based stress reduction (MBSR) sessions, reported a significant reduction in mean scores of stress, anxiety, and depression after the eight-week program, with a p-value of 0.0 indicating strong statistical significance. In contrast, the control group

Title/Author	Method	Finding
	Mental health was evaluated using the DASS-21 questionnaire to measure stress, anxiety, and depression before the intervention and at the end of eight sessions, with data analyzed using the Chi-square, Mann-Whitney U, and Wilcoxon tests to compare pre-test and post-test scores.	showed no significant decrease in mean scores for stress, anxiety, and depression, with p-values of 0.346, 0.212, and 0.343, respectively, suggesting that the MBSR program was effective in improving mental health outcomes for women experiencing unwanted pregnancies.
Mindfulness Training and Quality of Life Among Pregnant Women: A Randomized Clinical Trial (Yazdanimehr et al., 2016)	The study used a randomized clinical trial design, in which 80 pregnant women were selected through convenience sampling from three health centers in Kashan, Iran. Participants were randomly allocated into experimental and control groups (n = 40 each) using the block randomization method. The experimental group received eight 90-minute mindfulness training sessions, while the control group received only routine prenatal care services. Data collection involved the provision of a demographic questionnaire and a short-form health survey questionnaire 36 (SF-36) to measure quality of life (QOL). Data analysis was carried out using statistical methods including Chi-squared test, independent sample T test, and iterative measurement variance analysis to assess the difference in QOL scores between the two groups before and after the intervention.	The study found that mindfulness training significantly improved overall quality of life (QOL) scores among pregnant women, with significant improvements in subscales such as emotional role function, vitality, mental health, social functioning, and general health. The average total QOL score increased from 44.84 before the intervention to 50.42 after the intervention and 49.42 at the follow-up period, indicating the positive impact of the training. Mindfulness training is identified as an effective psychological prenatal care strategy that helps pregnant women manage negative emotions and cope with the psychological and physical changes associated with pregnancy. The findings suggest that such training can improve coping strategies and overall psychological well-being during this period.
The relationship between pregnancy stress and mental health of the pregnant women: the bidirectional chain mediation roles of mindfulness and peace of mind (Sun et al., 2024)	The study involved 713 pregnant women seeking treatment at Sun Yat-Sen University's First Affiliated Hospital, who completed a self-report demographic questionnaire along with several validated scales: the Pregnancy Stress Scale (PPS) to assess pregnancy stress, the Mindful Attention Awareness Scale (MAAS) to measure awareness, the Peace of Mind Scale (POM) for peace of mind, and the Chinese Health Questionnaire (CHQ) to evaluate mental stress. Structural equation modeling was used using the Amos 23.0 system to analyze the relationship between pregnancy stress, mindfulness, peace of mind, and mental health, revealing that mindfulness and peace of mind act as parSIAL mediators in the relationship between pregnancy stress and mental health.	The study found that pregnancy stress was positively correlated with mental stress in pregnant women, while it was negatively correlated with attention and peace of mind. Specifically, 22.9% of participants experienced moderate or higher levels of pregnancy stress, and 29.7% showed mental stress. Mindfulness and peace of mind were identified as parSIAL mediators in the relationship between pregnancy stress and mental health, suggesting that improving these positive psychological qualities may reduce the negative impact of pregnancy stress on mental health outcomes. The analysis also revealed a two-way pathway in which mindfulness and peace of mind influence each other, which further contributes to improved mental health in pregnant women.
Effects of mindfulness-based childbirth education on prenatal anxiety: A quasi-experimental study (M et al., 2014)	The study used a quasi-experimental design to assess the effects of awareness-based childbirth education on prenatal anxiety levels among participants. Participants were divided into an intervention group that received awareness-based childbirth education and a control group that did not, allowing for a comparison of anxiety levels before and after the intervention.	The study found that awareness-based childbirth education significantly reduced prenatal anxiety levels among participants compared to those who did not receive this type of education. Participants who engaged in mindfulness practices reported improved emotional well-being and a greater sense of control over their childbirth experiences, demonstrating the positive impact of mindfulness on prenatal mental health.
Online prenatal trial in mindfulness sleep management (OPTIMISM): protocol for a pilot randomized controlled trial (Kantrowitz-Gordon et al.,	Participants in this study will be randomized in blocks to receive an OPTIMISM intervention or an active control group using a computer-generated random allocation sequence. This assignment will take place	The study aims to test the feasibility and estimate the efficacy of a 6-week online mindfulness meditation intervention designed to help pregnant women in remission from depression manage insomnia on their own, with the primary clinical outcome measure

Title/Author	Method	Finding
2020)	immediately prior to orientation to the online intervention platform, ensuring that participants do not know which intervention they are receiving to minimize bias. The study will involve a total of 50 pregnant women who will complete six weekly online modules, maintain a daily sleep diary, and have the option to participate in a care-specific online discussion forum. Eligibility outcomes will be assessed through recruitment, retention, adherence to the intervention, and acceptance, while clinical outcomes will include sleep quality, fatigue, mood, and self-management behaviors measured at the beginning and post-intervention.	being sleep quality assessed using the Pittsburgh Sleep Quality Index. and self-management behaviors, with assessments occurring at the beginning and post-intervention to analyze differences within groups in outcome change scores.
Mindful parenting begins at the beginning: Potential benefits of perinatal meditation training for family well-being (Shaddix & Duncan, 2016)	This paper discusses the integration of mindfulness training into childbirth and early parenting programs, highlighting its application in reducing perinatal stress and anxiety for pregnant women and parents during the early stages of childcare. It emphasizes the psychological support provided through mindfulness training, which benefits not only the mother but also the father/partner during childbirth and early care, as well as the breastfeeding mother, thus enhancing the emotional connection between parents and the baby.	Mindfulness training integrated into childbirth and early care programs has been shown to reduce perinatal stress and anxiety, providing psychological support to pregnant women and parents during pregnancy, childbirth, and early stages of caregiving. Reducing maternal stress during the prenatal period can positively affect a child's physical health by altering the intrauterine environment, which can have a lasting effect on the child's health and the emotional quality of the early parent-child relationship.

Efficacy of Mindfulness Therapy for Pregnant Women

Reduction of Anxiety and Depression; Several studies have shown that mindfulness-based interventions (MBI) significantly reduce symptoms of anxiety and depression in pregnant women. For example, an eight-week Mindfulness-Based Cognitive Therapy (MBCT) program was found to improve anxiety, depression, worry, attention, and compassion in pregnant women with increased anxiety (Luberto et al., 2018). Similarly, a randomized clinical trial of Attention-Based Stress Reduction (MBSR) showed significant reductions in stress, anxiety, and depression in women with unwanted pregnancies (Nejad et al., 2021). These findings are consistent with other studies highlighting the effectiveness of mindfulness training in reducing psychological distress during pregnancy (Yazdanimehr et al., 2016). ***Quality of Life Improvement (QOL);*** Mindfulness training has been shown to improve various aspects of quality of life, including emotional role functioning, vitality, mental health, social functioning, and general health. A randomized controlled trial found that pregnant women who received mindfulness training reported a significant improvement in their total QOL scores compared to the control group (Yazdanimehr et al., 2016). These improvements were maintained even at follow-up assessments, demonstrating the long-term benefits of mindfulness interventions. ***Reduction of Pregnancy-Related Stress and Fear of Childbirth;*** Pregnancy-related stress and fear of childbirth (FoC) are common problems that can negatively impact a mother's mental health. A quasi-experimental study found that Mindfulness-Based Childhood and Parenting (MBCP) significantly reduced FoC and improved mental health outcomes in pregnant women (Veringa et al., 2016). Another study highlights that mindfulness interventions can reduce the negative effects of pregnancy stress by fostering peace of mind and improving psychological resilience (Sun et al., 2024). ***Positive Effects on Infant and Family Well-being;*** The benefits of mindfulness extend beyond mothers to babies and families. Digitally guided self-help mindfulness interventions were found to improve infants' neuropsychological outcomes, including temperament and developmental behavior. In addition, mindful parenting practices

have been associated with better emotional regulation and reduced behavioral problems in children, suggesting that mindfulness during pregnancy can have long-term benefits for family well-being (Henrichs et al., 2021; Shaddix & Duncan, 2016).

The Mechanisms Underlying the Effects of Mindfulness Therapy

Mindfulness as a Mediator of Stress and Anxiety; Mindfulness practices, such as meditation and mindful breathing, have been shown to reduce stress and anxiety by promoting current awareness and emotional regulation. A study using structural equation modeling found that mindfulness and peace of mind act as mediators in the relationship between pregnancy stress and mental health, suggesting that mindfulness interventions can buffer the negative effects of stress on maternal mental health (Sun et al., 2024). ***Increased Self-Compassion and Emotional Resilience;*** Mindfulness interventions often emphasize self-compassion and self-awareness, which are essential for building emotional resilience during pregnancy. For example, MBCT was found to increase self-compassion in pregnant women, which contributed to improved mental health outcomes (Luberto et al., 2018). Similarly, MBCP has been shown to improve the practice of attentive parenting, which is associated with better emotional regulation and reduced stress in mothers (Duncan & Bardacke, 2010). ***Physiological Benefits;*** While the main focus of mindfulness interventions is on psychological outcomes, some research suggests that these practices may also have physiological benefits. For example, mindfulness training has been associated with increased cardiovascular parameters, which may reduce the risk of hypertensive disorders during pregnancy (Ayala et al., 2024). Additionally, mindfulness practices have been shown to improve sleep quality, which is important for overall mental and physical health during pregnancy (Kantrowitz-Gordon et al., 2020)

DISCUSSION

The results of this literature review show that mindfulness therapy has a significant positive impact on the mental health of pregnant women. Various studies support the effectiveness of mindfulness-based interventions in reducing anxiety and depression, improving quality of life, reducing pregnancy-related stress and fear of childbirth, and even providing benefits for the well-being of babies and families. One of the key findings is that mindfulness therapy can significantly reduce symptoms of anxiety and depression during pregnancy. Interventions such as Mindfulness-Based Cognitive Therapy (MBCT) and Mindfulness-Based Stress Reduction (MBSR) have been shown to be effective in lowering psychological stress. A study by Luberto et al. (2018) found that an eight-week MBCT program can increase self-awareness, reduce anxiety, and increase self-compassion in pregnant women with high anxiety. In addition, a randomized clinical trial by Nejad et al. (2021) showed that MBSR was able to significantly reduce stress, anxiety, and depression, especially in women with unwanted pregnancies. In addition, mindfulness also contributes to improving the quality of life of pregnant women. As reported by Yazdanimehr et al. (2016), women who took part in mindfulness training experienced significant improvements in aspects of emotional role function, vitality, mental health, and social functioning. These positive effects were not only felt during the intervention but also persisted in the long term, suggesting that mindfulness can be a sustainable strategy in supporting mental well-being during pregnancy.

Mindfulness also has an important role in reducing pregnancy stress and fear of childbirth (FoC). Excessive stress during pregnancy can negatively affect the psychological condition of the mother and the development of the fetus. A study conducted by Veringa et al. (2016) shows that the Mindfulness-Based Childbirth and Parenting (MBCP) program is effective in reducing the fear of childbirth and increasing the psychological resilience of mothers. Additionally, research by Sun et al. (2024) highlights how mindfulness helps foster peace of mind and improves coping mechanisms, which allows pregnant women to be better mentally prepared for the labor process. Furthermore, the benefits of mindfulness are not only limited

to mothers but also impact babies and families. Studies by Henrichs et al. (2021) and Shaddix & Duncan (2016) show that mindfulness interventions during pregnancy can improve maternal emotional regulation, ultimately contributing to the baby's neuropsychological development, including temperament and behavior. In addition, mindfulness-based parenting practices are associated with improved quality of parent-child relationships as well as a reduction in behavioral problems in children later in life.

From the perspective of working mechanisms, mindfulness serves as a mediator between pregnancy stress and maternal mental health. Mindfulness practices, such as meditation and conscious breathing techniques, help individuals to focus more on the present moment, thereby reducing negative emotional responses to stress. A study by Sun et al. (2024) confirms that mindfulness and peace of mind play an important role in lowering the impact of pregnancy stress on maternal mental health. In addition, self-compassion and emotional resilience are also increased with mindfulness therapy. Pregnant women who underwent MBCT programs showed improvements in self-compassion, which contributed to improved overall mental health (Luberto et al., 2018). The same is true for MBCT, which has been shown to improve emotional regulation and reduce stress in mothers, while strengthening more conscious and responsive parenting practices (Duncan & Bardacke, 2010). Not only providing psychological benefits, mindfulness also contributes to the physiological health of pregnant women. Some studies suggest that mindfulness may improve cardiovascular parameters, potentially reducing the risk of hypertensive disorders during pregnancy (Ayala et al., 2024). In addition, the improved sleep quality observed in pregnant women who practice mindfulness (Kantrowitz-Gordon et al., 2020) may also support better physical and mental health during pregnancy.

These findings confirm that mindfulness therapy is an effective approach in improving the mental health of pregnant women. With a range of benefits that include reduced anxiety and depression, improved quality of life, and positive effects on babies and families, these interventions can be a recommended strategy in prenatal care to improve maternal and child well-being. However, more studies with a more rigorous design and a wider population are needed to strengthen the evidence regarding the effectiveness and mechanism of action of mindfulness therapy in supporting the health of pregnant women.

CONCLUSION

Mindfulness therapy is effective in improving the psychological and physical well-being of pregnant women. Interventions such as MBCT and MBSR can reduce anxiety, depression, and stress, as well as improve quality of life and emotional resilience. Mindfulness also helps reduce the fear of childbirth and supports better parenting, positively impacting mothers, babies, and families. Mechanically, mindfulness improves mindfulness, self-compassion, and emotional resilience, as well as providing physiological benefits such as better sleep. Therefore, this therapy can be integrated in pregnancy care to support the mental and physical health of pregnant women.

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