



LITERATURE REVIEW: THE ADVANTAGES OF BONDING ATTACHMENT TO PREVENT BABY BLUES IN POST PARTUM MOMS

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ABSTRACT

The postpartum period is a transitional period that is physically and emotionally challenging for a mother. One of the emotional disorders that often appear during this period is baby blues, which is a feeling of sadness, anxiety, and irritability that usually occurs in the first week after childbirth. This study aims to identify and analyze the benefits of bonding attachment in preventing baby blues in postpartum mothers through a systematic review of scientific literature. This study used a Systematic Literature Review design with reference to the PRISMA guidelines. Article searches were conducted through two main databases, namely PubMed and Google Scholar, with a publication range between 2020 and 2025. The search strategy was organized based on the PICO approach, using keywords such as "bonding attachment", "baby blues", and "postpartum mother". Of the 320 articles found, a selection process based on inclusion and exclusion criteria was carried out to obtain 10 articles that were analyzed in depth. The analysis showed that bonding attachment has significant benefits in reducing the risk of baby blues. Bonding attachment is a simple but effective intervention in preventing emotional disorders in postpartum mothers, especially baby blues.

Keywords: baby blues; bonding attachment; mother-infant bonding; postpartum mothers; postnatal mental health

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INTRODUCTION

The postpartum period is a challenging transition period for a mother, both physically and psychologically. After childbirth, mothers not only face drastic hormonal changes, but also have to adjust to a new role as the primary caregiver for their baby. This condition can trigger emotional instability known as the baby blues, which is characterized by symptoms such as crying easily, anxiety, sleeplessness, irritability, and feeling overwhelmed. The baby blues generally appear in the 3rd to 2nd week postpartum and are experienced by around 50-80% of postpartum mothers, although some cases can develop into postpartum depression if not treated properly (khademi et al., 2022); Nugrahaeni et al., 2022).

Various factors have been identified as causes of the baby blues, including unpreparedness for motherhood, hormonal changes, lack of social support, delivery method, and the quality of the relationship with the partner. Among these factors, bonding attachment, the emotional bond that exists between mother and baby from the beginning of life, is an important aspect that is often overlooked. Bonding attachment plays a role in increasing a mother's self-confidence, strengthening emotional responses to her baby, and creating positive experiences in parenting. Several studies have shown that mothers who have good quality bonding attachment tend to have a lower risk of experiencing baby blues (A Sintia Nurmala et al., 2024; Sri Wahyuni et al., 2025).

However, there is still a gap in the utilization of attachment bonding as a systematic prevention strategy for baby blues in maternity nursing practice. Many interventions still focus on the physical aspects of the mother or treatment after symptoms appear, rather than prevention based on early emotional and psychosocial approaches. In fact, the application of bonding attachment can be done through simple steps such as skin-to-skin contact, early breastfeeding initiation, and active involvement of the mother in the care of her baby from an early age (Mazúchová et al., 2021; Hildingsson & Rubertsson, 2022) Safaah et al., 2024). Therefore, the purpose of this literature review is to comprehensively examine how bonding attachment can provide benefits in preventing baby blues, so that it can be integrated into a more comprehensive postnatal nursing care program.

METHOD

This study uses a systematic literature review design aimed at identifying and analyzing various scientific findings related to the benefits of bounding attachment in preventing postpartum baby blues in mothers. The literature search was conducted on national and international scientific publications published between 2020 and 2025. Two electronic databases used in the search process were Google Scholar and PubMed, as both provide extensive access to health journals and support open access to full-text publications, enabling optimal data validation and transparency, using the keywords baby blues, bounding attachment, postpartum mothers, mother-infant bonding, and postnatal mental health.

The literature search strategy was based on the PICO (Population, Intervention, Comparison, Outcome) approach, with keyword combinations such as: "bounding attachment", "baby blues", "postpartum mother", "mother-infant bonding", and "postpartum depression prevention". The article selection process refers to the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) guidelines, which includes four main stages: identification, screening, eligibility, and inclusion.

In the identification stage, 320 relevant articles were found based on the initial search, consisting of 289 articles from Google Scholar and 31 articles from PubMed. Next, an elimination process was carried out for duplicate articles, and 118 duplicate articles were removed, leaving 202 unique articles for the next stage. The screening stage was conducted by reading the titles and abstracts of the 202 articles to ensure direct relevance to the topic of bounding attachment and baby blues. From this stage, 104 articles were deemed unsuitable and excluded from the analysis, leaving 98 articles.

Next, at the eligibility stage, a thorough reading of the full-text of the remaining 98 articles was conducted. The articles were selected based on the inclusion criteria, namely: (1) addressing the relationship between bounding attachment and baby blues prevention; (2) available in full-text format; (3) published within 2020-2025; and (4) using Indonesian or English. From the assessment results, 88 articles did not meet one or more of these criteria, so only 10 articles were declared eligible for further analysis. In the final stage, namely inclusion, 10 articles that met all selection stages were critically reviewed using a critical appraisal approach. The review was conducted by considering several main aspects, namely: (1) methodological quality based on study design, internal validity, and bias control; (2) strength and relevance of data, including sample size, analysis techniques, and the alignment of findings with the research objectives; and (3) the article's contribution to understanding the benefits of bounding attachment in preventing baby blues and strengthening the mother-infant bond.

A total of 10 articles that passed all stages of selection were analyzed in depth based on methodological quality, data strength, and relevance of content to the research topic. These

articles were considered the most representative in explaining the benefits of bounding attachment and its role in preventing emotional disorders such as baby blues in mothers after giving birth.

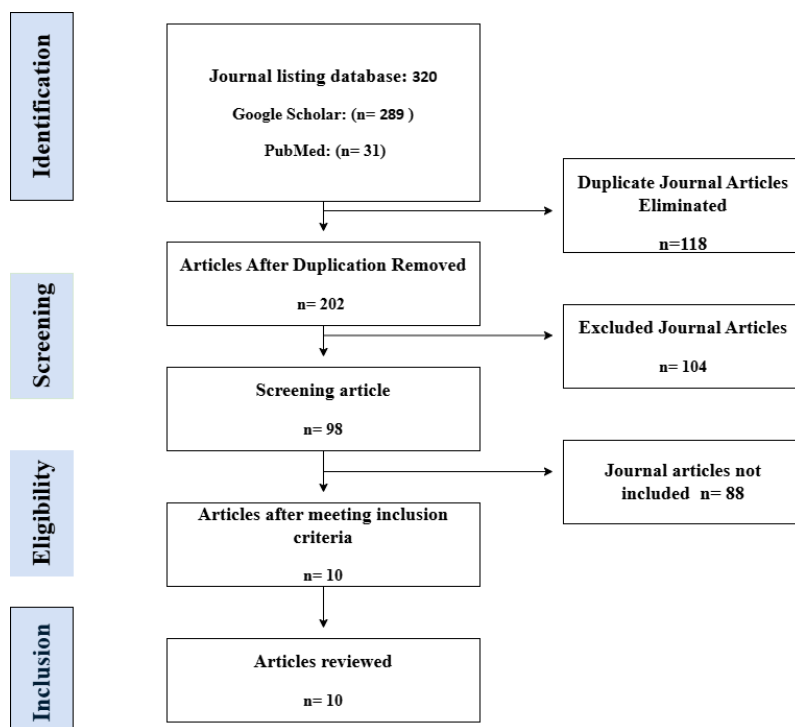


Figure 1. Flow chart

RESULT

The article search and selection process began with the identification stage, where 320 articles were found from two databases, namely Google Scholar with 289 articles and PubMed with 31 articles. After checking for duplicates, 118 articles were identified as duplicates and eliminated, leaving 202 articles for the next stage. At the screening stage, of the 202 articles, 104 articles were irrelevant and excluded from the process, so only 98 articles continued to the next stage. Furthermore, at the eligibility assessment stage, selection was made based on predetermined inclusion criteria. As a result, only 10 articles met the criteria and were declared eligible for further analysis, while 88 other articles were excluded because they were not suitable. Finally, at the inclusion stage, the 10 articles were thoroughly reviewed as part of a literature review or systematic review.

Table 1.
Article Results

Title	Author	Objective	Method	Result
Baby Blues: psychosocial impact and intervention strategies to improve maternal health	(Ramos et al., 2024)	The primary objective was to conduct an integrative literature review to identify the impact of baby blues on maternal health and appropriate nursing interventions. Specific objectives included identifying causes and risk factors, describing typical symptoms, and distinguishing between baby blues and postpartum depression, as well as exploring effective management, intervention, and treatment strategies.	Qualitative and exploratory research, this study analyzed publications in the fields of nursing and psychology that addressed postpartum depression and baby blues and interventions by health professionals.	The results highlight that, despite the differences and similarities between baby blues and postpartum depression, adequate monitoring of mothers during the postpartum period is essential. The literature highlights the importance of strong emotional and social support networks and early intervention by health professionals. Humanizing care, with a focus on both mother and baby, is essential to prevent more serious complications and improve the well-being of both mother and child.

Title	Author	Objective	Method	Result
The Relationship between Social Support and the Incidence of Postpartum Blues in Postpartum Mothers in the Pomalaa Health Center Working Area	(Marian y et al., 2022)	This study aims to determine the relationship between social support and the incidence of postpartum blues in postpartum mothers in the Pomalaa Health Center working area.	The type of research used was correlational analytic with a cross-sectional design with a population of 50 postpartum mothers.	There is a relationship between social support and postpartum blues in postpartum mothers in the Pomalaa Health Center working area with a p value of 0.002.
Bounding Attachment and Postpartum Blues in Patients After Sectio Caesarea Surgery	(Anita et al., 2024)	Objective To determine the relationship between bounding attachment and the incidence of postpartum blues in post-cesarean section patients at AMC Hospital Metro City.	Quantitative research type, cross sectional method. Sample of 75 respondents, purposive sampling technique, data collection tools, Edinburgh Postnatal Depression Scale questionnaire & bounding attachment observation. Chi Square test analysis.	The results of this study indicate that postpartum mothers who do not do good bonding attachment experience post partum blues as many as 37 (88.1%), mothers who do good bonding attachment experience post partum blues as many as 3 respondents (9.1%). Lbuididd The results of the chi square test obtained a p-value = 0.000 so that it was found that bounding attachment had a significant relationship with the incidence of postpartum blues in post-cesarean section patients. OR = 74.000 means that mothers with poor bonding attachment have a risk of 74 to experience postpartum blues.
The Effect of Bounding Attachment in Maternal Postpartum Blues Madura Ethnic	(Ristant i & Masita, 2020)	The purpose of this study was to determine the effectiveness of bounding attachment in postpartum blues mothers.	This type of research is descriptive analytic research with cross sectional design. Sampling using rule of thumb sampling technique, can be used as respondents using EPDS screening questionnaire and PBQ questionnaire.	There is a relationship between bounding attachment and postpartum blues with a P value of 0.29 so it can be assumed that postpartum blues affects bounding attachment.
The relationship between husband's support and bounding attachment with the risk of postpartum blues in postpartum cesarean section mothers in the sakura room at RSUD Dr. Soedomo Trenggalek.	(Winda yati et al., 2024)	The purpose of this study was to determine the relationship between husband support and bounding attachment with the risk of postpartum blues in cesarean section postpartum mothers.	This research design uses cross sectional. The sampling technique used was non-probability sampling, purposive sampling type with a total sample of 59.	The results showed a relationship between husband support and the risk of postpartum blues with a p-value = 0.000. There is a relationship between bounding attachment with the risk of postpartum blues with a p-value = 0.000, and there is a relationship between husband support and bounding attachment with the risk of postpartum blues simultaneously with a p-value = 0.000.
Analysis of Factors Associated with the Incidence of Baby Blues Syndrome in Postpartum Mothers at the Cempaka Medical Center Tambun Bekasi Clinic in 2023	(Yuhaeni & Indawati, 2024)	The purpose of this study was to analyze the Factors Associated with the Incidence of Baby Blues Syndrome in Postpartum Mothers.	This study is a quantitative analytic study with a cross sectional design. The sample in this study were postpartum mothers who had one week postpartum at the Cempaka Medical Center Tambun Bekas Clinic as of February 2023, totaling 63 respondents using accidental sampling technique.	The results of univariate analysis showed that most postpartum mothers did not experience baby blues syndrome (63.5%), had readiness (77.8%), high husband support (82.5%), normal type of delivery (63.5%), good knowledge (77.8%), and planned pregnancy (69.8%). The results of bivariate analysis showed that there was a significant relationship between maternal readiness (p value = 0.006), husband support (p value =

Title	Author	Objective	Method	Result
				0.013), type of delivery (p value = 0.026), knowledge (p value = 0.006), and pregnancy planning (p value = 0.042) with the incidence of baby blues syndrome in postpartum mothers. Maternal readiness, husband support, type of labor, knowledge, and pregnancy planning are associated with the incidence of baby blues syndrome in postpartum mothers.
The Relationship between Husband Support and the Incidence of Post Partum Blues in Bungursari Village, Bungursari Health Center, Tasikmalaya City	(Istiana h & Faulina, 2024)	To determine the relationship between husband support and the incidence of post partum blues in mothers in Bungursari Village, Bungursari Health Center, Tasikmalaya City.	Researchers used quantitative methods with a correlational design with a cross sectional approach. This research was conducted from April to June 2023. The population in this study were all postpartum mothers in Bungursari Village, Bungursari Health Center, Tasikmalaya City, totaling 35 people. The sample was taken with total sampling technique so that 35 people were taken. Data were analyzed using univariate analysis and bivariate chi square analysis.	The results of univariate research obtained from 75 respondents, most of the 55 respondents (73.3%) had husband support in the good category. The chi-square test results showed $p = 0.036 < \alpha = 0.05$ with $r = 0.25$. There is a relationship between husband's support and the occurrence of postpartum blues in postpartum mothers in Bungursari Village Area, Bungursari Health Center, Tasikmalaya City.
Development and validation of the maternal blues scale through bonding attachments in predicting postpartum blues	(Manurung & Setyowati, 2021)	Objectives This study aims to develop a maternal blues scale through bonding attachment to predict postpartum blues.	Methods The research design consisted of three stages: 1) phenomenological design and focus group discussions; 2) development and construction of the maternal blues scale, and 3) cross-sectional study to measure the validation of the scale.	Item analysis resulted in 32 items consisting of 24 items regarding maternal roles and duties as internal factors and eight factors involving social, cultural, and economic support as external factors. Both factors are valid and reliable in predicting postpartum blues with indicators (factor t loading ≥ 1.96 , factor standardized loading (SLF) ≥ 0.50 , internal factors: construct stability (CR) ≥ 0.70 and extraction variants (VE) ≥ 0.50 and external factors: CR ≥ 0.74 to 0.83 VE ≥ 0.50 to 0.63). The association with Kennerley's maternity blues as the gold standard was significant. Internal factors had a score of 53, with a sensitivity of 60.2%. The external factors score was 19, with a sensitivity of 77.3%.

Title	Author	Objective	Method	Result
The Relationship Between Family Support And The Incidence Of Post Partum Blues: The Relationship Of Family Support With The Incidence Of Post Partum Blues	(Sri Yunita Suraida Salat et al., 2021)	The purpose of this study was to determine whether there is a relationship between family support and the incidence of postpartum blues in Marengan Laok Village, Kalianget District, Sumenep Regency.	This research is a type of analytic survey with a cross sectional design.	The results of data analysis with the spearman rank test showed ? value = 0.000 which means that there is a relationship between family support and postpartum blues in Marengan Laok Village, Kalianget District, Sumenep Regency. Correlation coefficient shows -0.875 which means that the relationship between family support and the incidence of postpartum blues is very strong.
Analysis of Spousal Support and The Correlation with Postpartum Blues	(Qomar et al., 2023)	to analyze Spousal Support and its Correlation with Postpartum Blues	Methods: This study was a quantitative research project utilizing a correlational design and cross-sectional approach. The research tools used were a questionnaire on partner support, as well as the Edinburgh Postpartum Depression Scale (EPDS).	The results showed that the Asymp-sig values for emotional support, appraisal support, instrumental support, and information support were 0.00 and 0.01, which were less than 0.05. This indicates that emotional support, appraisal support, instrumental support, and information support from spouses affect the occurrence of postpartum blues.

DISCUSSION

Baby blues or postpartum blues is a mild mood disorder experienced by most mothers after giving birth. Although temporary, it can develop into a more serious psychological disorder if not treated early. A number of previous studies have examined factors that influence the occurrence of baby blues, such as social support, motherhood readiness, and delivery method (Wahyuni et al., 2023; Siallagan et al., 2022). However, gaps are still evident in the lack of attention to bonding attachment as one of the main protective factors (Fika Fika et al., 2023; Wahyuni et al., 2023). Not many studies have explicitly addressed the benefits of bonding attachment in preventing baby blues as part of holistic nursing interventions in the postpartum period.

The findings of the studies reviewed in this literature review suggest that bonding attachment plays an important role in reducing the risk of baby blues. Study Anita et al. (2024) showed that mothers with poor attachment bonding had a 74 times higher risk of experiencing baby blues than mothers with good bonding ($p = 0.000$). Similar findings were also reported by Windayati et al. (2024), who found that bonding attachment and husband support had a significant relationship with the risk of postpartum blues. Ristanti & Masita (2020) also revealed a relationship between bonding attachment and baby blues, although the results were not as strong as other studies. Meanwhile, Manurung & Setyowati (2021) developed a baby blues prediction scale that integrates elements of bonding attachment, proving its importance in psychometric risk assessment. In general, the data suggest that bonding attachment can be an effective and applicable preventive approach in maternal and child nursing practice.

When compared with other studies, these results reinforce the understanding that the emotional bond between mother and baby has an important role in regulating the psychological stability of mothers in the postpartum period. Some other studies such as Qomar et al. (2023) and Istianah & Faulina (2024), which highlighted the role of partner support, also showed that the quality of interpersonal relationships strongly influenced the incidence of baby blues. Thus, bonding attachment does not stand alone, but is reinforced by a supportive social and emotional environment (Rahmawati et al., 2022; Rahmawati et al., 2022). This supports the holistic concept in maternity nursing care, where psychosocial aspects are an integral part of care.

However, the studies reviewed in this literature review are not free from limitations. The majority of the studies used a cross-sectional design, which cannot confirm a direct causal relationship between bonding attachment and baby blues. In addition, differences in bonding attachment measurement tools between studies make it difficult to compare results consistently. Small sample sizes and non-randomized sampling techniques are also potential biases that may affect the external validity of the findings.

Therefore, to strengthen the scientific evidence, further research with longitudinal or experimental designs is needed to test the effectiveness of bonding attachment as a preventive intervention against baby blues. Future research is also recommended to develop bonding attachment-based interventions that can be applied from pregnancy to the postpartum period. In addition, it is also necessary to explore contextual factors such as culture, socioeconomic status, and the quality of family relationships, which may strengthen or weaken the effect of bonding attachment on maternal psychological well-being.

CONCLUSION

In conclusion, this literature review confirms that bonding attachment has many advantages in preventing baby blues in postpartum mothers. Bonding attachment practices, such as early breastfeeding initiation, skin-to-skin touch, and emotional interaction between mother and baby, have been shown to be effective in maintaining maternal emotional balance. By integrating bonding attachment into postnatal nursing care, as well as involving support from partners and families, it is hoped that the incidence of baby blues can be prevented more thoroughly and systematically.

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