

The Importance of Psychological Prenatal Care in Preventing Postpartum Depression: An Integrative Literature Review

A Importância do Pré-natal Psicológico na Prevenção da Depressão Pós-parto: Uma Revisão Integrativa de Literatura
La Importancia de la Atención Psicológica Prenatal en la Prevención de la Depresión Posparto: Una Revisión Bibliográfica Integradora

RESUMO

O objetivo do presente estudo foi compreender a importância do pré-natal psicológico para a prevenção da depressão pós-parto. Trata-se de um estudo de revisão integrativa da literatura. O levantamento de dados ocorreu por meio de pesquisa em base de dados: Periódicos Capes, Scientific Electronic Library Online (SciELO), Literatura Latino-Americana e do Caribe em Ciências da Saúde (LILACS). Os Descritores em Ciências da Saúde (DeCS/MeSH) utilizados foram: "Cuidado pré-natal", "Gravidez", "Depressão Pós-Parto", em conjunto com o operador booleano AND. Foram incluídos sete artigos no estudo e categorizados em quatro categorias para discussão. O estudo demonstrou que o pré-natal psicológico tem um impacto positivo não apenas na prevenção da depressão pós-parto, mas também em outros transtornos mentais, ajudando as mulheres e suas famílias a enfrentar as transformações desse período.

DESCRITORES: Cuidado pré-natal. Gravidez. Depressão Pós-Parto.

ABSTRACT

The aim of this study was to understand the importance of psychological prenatal care in preventing postpartum depression. This is an integrative literature review. The data was collected by searching the following databases: Periódicos Capes, Scientific Electronic Library Online (SciELO), Latin American and Caribbean Literature in Health Sciences (LILACS). The Health Sciences Descriptors (DeCS/MeSH) used were: 'Prenatal Care', 'Pregnancy', 'Postpartum Depression', together with the Boolean operator AND. Seven articles were included in the study and categorised into four categories for discussion. The study showed that psychological prenatal care has a positive impact not only on the prevention of postpartum depression, but also on other mental disorders, helping women and their families to cope with the transformations of this period.

DESCRIPTORS: Prenatal care. Pregnancy. Postpartum Depression.

RESUMEN

El objetivo de este estudio fue comprender la importancia de la atención prenatal psicológica en la prevención de la depresión posparto. Se trata de una revisión bibliográfica integradora. Los datos fueron recolectados a través de búsquedas en las siguientes bases de datos: Periódicos Capes, Scientific Electronic Library Online (SciELO), Latin American and Caribbean Literature in Health Sciences (LILACS). Los Descriptores en Ciencias de la Salud (DeCS/MeSH) utilizados fueron: «Prenatal Care», «Pregnancy», «Postpartum Depression», junto con el operador booleano AND. Se incluyeron siete artículos en el estudio y se clasificaron en cuatro categorías para su discusión. El estudio mostró que la atención psicológica prenatal tiene un impacto positivo no sólo en la prevención de la depresión posparto, sino también en otros trastornos mentales, ayudando a las mujeres y sus familias a hacer frente a las transformaciones de este período.

DESCRIPTORES: Atención prenatal. Embarazo. Depresión postnatal.

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INTRODUCTION

Prenatal care is a program designed to care for pregnant women during pregnancy, childbirth and postpartum. It consists of a set of clinical and educational interventions aimed at the early detection, diagnosis and treatment of common complications during this period, in addition to monitoring fetal development and the health of the mother and baby. Actions include health promotion, disease prevention and preparing pregnant women for childbirth and breastfeeding.¹

Pregnancy brings about significant changes in the physical, physiological, psychological, social and cultural spheres, impacting the life of the woman and her family. The discovery of pregnancy can also generate a variety of reactions, such as planning the pregnancy, adapting to new roles and forming a new identity. Each woman deals with these changes in a unique way, and may react positively or negatively, according to her coping resources.²

Therefore, these changes can create an environment conducive to the development of Postpartum Depression (PPD) and other psychological conditions in the postpartum period. In Brazil, it is estimated that 25% of women present depressive symptoms, with causes attributed to inadequate diagnosis and treatment, social stigmas and

lack of knowledge about the pathology.³ In this scenario, it is clear that health programs aimed at women often prioritize biological aspects, leaving the assessment of psychosocial factors, which are crucial for both the mother and the baby, in the background.⁴

However, significant progress has recently been made with the enactment of Law No. 14,721/2023, which expands access to psychological assistance for pregnant women and establishes educational and awareness-raising activities on mental health during pregnancy and postpartum. This new legislation modifies articles 8 and 10 of the Child and Adolescent Statute (ECA) and ensures that women are referred for psychological care after medical evaluation.⁵

Psychologists play an essential role in perinatal care, from the beginning of pregnancy to the postpartum period. They must act ethically and empathetically, creating spaces that promote self-expression and encourage creative adjustment. Their work also involves the promotion and prevention of mental health, offering qualified listening and a space for dialogue, clarifying doubts and addressing the concerns of pregnant women.⁶

Recognizing the importance of emotional support, Psychological Prenatal Care (PPC) emerges as a strategy for caring for psychosocial aspects, aiming at comprehensive assistance during

pregnancy. It is a preventive intervention that can be carried out through psychoeducational groups focused on pregnancy, childbirth and postpartum, facilitated by psychologists to provide socioemotional support and guidance on topics related to motherhood.⁷

Acting as a complement to the traditional prenatal model, the PPC seeks to humanize the gestational experience, encourage the participation of the pregnant woman and her family and offer psychotherapeutic support, preventing adverse emotional conditions, such as anxiety, stress and depression, or avoiding their intensification in the postpartum period.⁶

Currently, studies on PPC are still limited, given that Perinatal Psychology is a recent area of knowledge in the country and is in the process of expansion. In view of this, this study may collaborate with the dissemination of PPC, aiming to contribute to the scientific community, since it is a topic that is still little explored. This study aims to understand the importance of psychological prenatal care for the prevention of postpartum depression, through a literature review.

The terms “woman” and “pregnant woman” are used in this study because they have a theoretical current of materialist feminism, which understands political demands based on materiality and not on self-identification. And

Literature Review

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the use of the term “psychologist” is in accordance with the Federal Council of Psychology (CFP), considering that more than 80% of the category is composed of women.

METHOD

This study consists of an integrative literature review, considered a significant tool in the health field, as it allows the synthesis of available research on a specific topic and bases practices on scientific knowledge. The methodological steps included were: 1) Identification of the topic and formulation of the guiding question; 2) Definition of criteria for inclusion and exclusion of studies; 3) Evaluation of the findings and definition of the information to be extracted from the selected studies; 4) Analysis and interpretation of the results; 5) Presentation of the review and synthesis of knowledge.⁸

The formulation of the guiding question is crucial, as it determines the studies to be included, the identification methods and the information collected. The research question developed was: “What is the importance of Psychological Prenatal Care in the prevention of Postpartum Depression?”. The strategy used for development was the POV method (P = population; V = variable; O = outcome) in which: P = pregnant women; V = humanized care, prevention and health promotion; O = the relevance of psychological prenatal care.

Data collection took place between August and October 2024, using the following databases: Capes Journals, Scientific Electronic Library Online (SciELO) and Latin American and Caribbean Literature in Health Sciences (LILACS). The Health Sciences Descriptors (DeCS/MeSH) used were: “Prenatal care”, “Pregnancy”, “Postpartum depression”, in conjunction with the Boolean operator AND.

The inclusion criteria defined for selection of studies were articles with

abstracts available online and full text in the selected databases, published between 2014 and 2024, in Portuguese and addressing the referred topic. Duplicate publications, editorials, letters and articles unrelated to the topic were excluded.

The articles were then selected, their abstracts were assessed, and an exploratory reading of the publications was subsequently carried out. To analyze and categorize the articles, an interpretative reading and descriptive analysis of the data were carried out in accordance with the proposed objective.

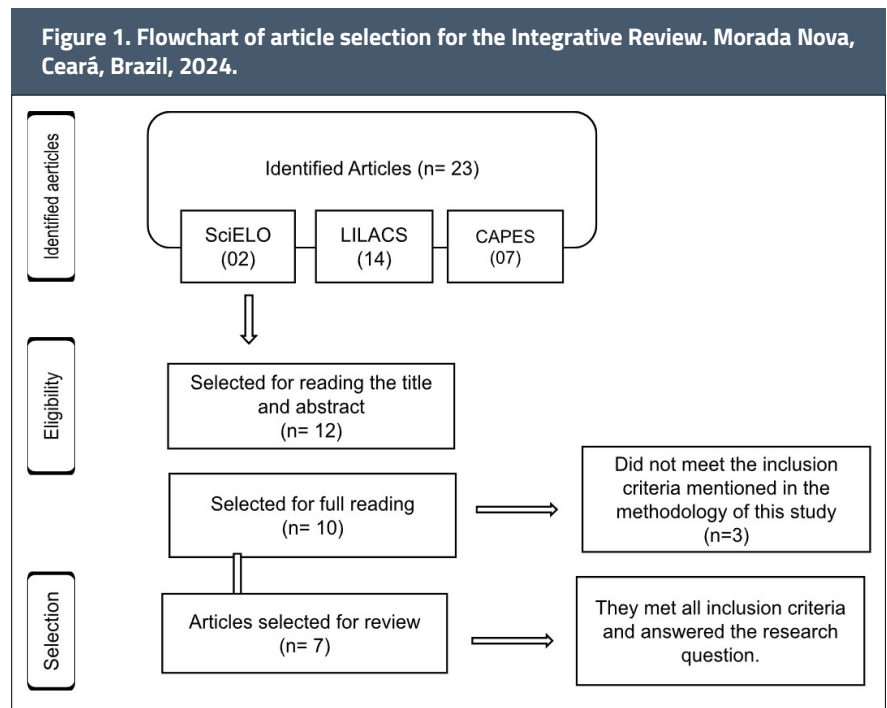
To simplify the analysis of the articles included in this integrative review, a form was developed that addressed the issues relevant to data collection and that met the research objective. This form contained the following in-

formation: title, authors, year of publication, journal, and design.

Data analysis was carried out using the content analysis technique, which involves a set of tools designed to examine the research material and interpret the content after data collection, with the aim of analyzing the material reproduced through recording units.⁹

RESULTS

After selection, 23 articles were found, which are represented below in Figure 1, of which 12 were chosen for reading the title and abstract. After this reading and the application of the exclusion criteria, 7 articles remained to compose this integrative review.



Source: Prepared by the author, 2024.

The final sample was organized in a synoptic table, presenting relevant information about each article, such as title, authors, year of publication and journal. In Brazil, Brasília was the pio-

neer in implementing the PPC, created by psychologist Fátima Bortoletti, originally called Psychoprophylaxis, with evidence of advances in the use of the program in other states.¹⁰

Quadro 1. Síntese dos artigos selecionados para compor a revisão. Morada Nova (CE), Brasil, 2024.

N	Title	Authors and Year	Periodical	Study design
1	Motherhood and its psychological impacts on postpartum depression	Silvério; Paiva, 2023.	Rev. Saúde dos vales	Qualitative research, using Integrative Literature Review
2	Depressive symptoms at term in low-risk women	Silva et al., 2019.	J Bras Psiquiatr.	Cross-sectional, quantitative, descriptive and correlational study
3	Risk and Protective Factors Associated with Postpartum Depression in Psychological Prenatal Care	Arrais; Araújo; Shiavo, 2018.	Psicologia: Ciência e Profissão	Longitudinal, short-term research, with a design based on the Action Research methodology
4	Psychological Prenatal Care as a Program for Preventing Postpartum Depression	Almeida; Arrais, 2016.	Psicologia: Ciência e Profissão	Excerpt from a larger research project
5	Psychological prenatal care as a program for preventing postpartum depression	Arrais; Mourão; Fragalle, 2014.	Saúde Soc.	The method used was action research
6	Psychological prenatal care in the prevention of perinatal depression and anxiety	Araújo e Cerqueira-Santo, 2022.	Revista da SPAGESP	Quasi-experimental design of the clinical trial type, longitudinal and non-randomized
7	Depressive symptoms during pregnancy and associated factors: a longitudinal study	Lima et al., 2017	Acta Paul Enferm.	Longitudinal study carried out in three stages

Source: Prepared by the author, 2024.

DISCUSSION

Aiming to understand, according to recent literature, the importance of Psychological Prenatal Care in the prevention of Postpartum Depression, after delimitation of the articles in a framework, full reading and analysis of the studies included in this integrative review, four thematic categories emerged: Postpartum Depression (PPD); Risk factors for postpartum depression; Protective factors for postpartum depression; Psychological Prenatal Care (PPC).

Postpartum depression

PPD is characterized as an episode of

major depression that occurs up to four weeks after delivery.¹¹ However, the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) changed this definition, now designated as peripartum episodes or perinatal depression, covering the gestational period and the first four weeks postpartum. Studies indicate that approximately 50% of cases of postpartum depression begin before delivery.¹² However, the term Postpartum Depression was adopted in this study, as the new term was not yet widely used in the articles that were part of this review and thus the search in the databases could be impaired.

The symptoms of PPD are similar to those of major depression, including intense sadness, low self-esteem, feelings of

inadequacy, mood swings, excessive guilt, loss of motivation and suicidal ideation. The literature highlights that among these symptoms, feelings of guilt and inability to perform the maternal role are the most frequent.¹³

Symptoms of depression are often overlooked by women and even by professionals, who believe that they are part of the gestational process and are often accepted as normal changes in pregnancy that can be adjusted over time. Although these symptoms are relatively common at this stage, health professionals should be aware of these symptoms and perform early screenings to enable appropriate diagnoses and interventions that can benefit the mother, baby and family.¹⁴

Screening for these symptoms should be carried out at an early stage of pregnancy to diagnose perinatal depression and begin treatment. An accurate diagnosis and early intervention lead to a reduction in depressive symptoms during this period, and bring important benefits to the mother and baby, as well as to the family.³

Risk factors for postpartum depression

Risk factors for PPD are behaviors, conditions, or situations that increase the likelihood of physical, psychological, and social problems occurring. Risk factors for PPD are established events that increase the chances of emotional problems occurring after delivery.¹⁰

In the literature review that was the basis for the present study, it was observed that the risk factors for PPD include psychological, social and physical conditions that increase the likelihood of emotional problems after childbirth. Among the psychological factors, the following stand out: a history of depressive episodes before or during pregnancy, unwanted pregnancy and experience of stressful events.¹¹

Social factors, such as lack of family support and unfavorable socioeconomic conditions, are also relevant. The lack of parental support, weakened family and social support networks, unsatisfactory marital relationships, exposure to domestic violence, low levels of care during pregnancy and childbirth, and unfavorable socioeconomic conditions are the most common factors highlighted in the literature.¹⁰

Regarding physical factors, which were more common, they include obstetric complications such as bleeding, hypertension and gestational diabetes, which can cause women to feel fear about the possibility of the condition worsening; history of pregnancy loss; premature birth; malformations; stillbirth; complications in the placenta; and previous traumatic birth.¹¹

Therefore, it is essential that professionals identify these factors during prenatal consultations to plan preventive actions and diagnose PPD early. This allows

for appropriate treatment for mothers and the mother-baby relationship and, in the future, for the child's emotional balance. Thus, the impact on the lives of those involved requires care not only from a curative perspective, but also from a preventive perspective, in order to prevent this serious disorder from taking hold.¹²

Therefore, if pregnant women have any of these stories, especially gestational depression, which is one of the major risk factors for PPD, they need more attention from both family members and health professionals during this period.¹⁰ However, this is something that is often forgotten by professionals who accompany them in gynecological prenatal care, because the team's attention is more focused on biological aspects and not on comprehensive care.

Protective factors for postpartum depression

Protective factors are resources that can improve the response to risk events, such as support networks, emotional stability, self-esteem, tolerance to suffering, emotional stability, problem-solving skills, autonomy and optimism.¹¹

The protective factors for PPD found in the studies were: support from another woman, especially a woman with more experience regarding motherhood; early detection of depressive symptoms; social support; a good marital relationship and emotional support from the partner; planned pregnancy; desired pregnancy; socioeconomic stability; family support network; prevention work such as psychological prenatal care.¹⁰

Social support, especially from a partner, is an indicator of protection against PPD, which refers to support provided through affection, companionship, and assistance through sharing responsibilities, both in terms of care and finances. This allows women to feel cared for, valued, and safe. Therefore, it is very important that the partner, family, and friends are involved to ensure the perception of social support, which acts as a protective factor against PPD.¹²

The literature also shows that prenatal care carried out through a specific psychotherapeutic approach for pregnant women acts as a highly relevant protective factor. A study¹¹ conducted with high-risk pregnant women at a public hospital in Brasília, comparing two groups of pregnant women: an intervention group with pregnant women who participated in the PPC and a control group with those who did not participate.

The results showed that both groups were vulnerable to developing PPD, but only the participants in the control group who did not participate in the PPC developed the disorder, which suggests that the PPC is a protective factor against PPD. For the women who participated in the intervention group, the PPC, through psychotherapeutic interventions, proved to be a significant protective factor, contributing to safety, bonding between pregnant women and demystification of motherhood.¹¹

Another study¹⁵ carried out with 60 women treated in public or private obstetric services, in the city of Aracaju, Sergipe, compared the percentages of participants in the intervention and control groups, and it was found that participants in the intervention group presented lower rates of depressive symptoms in relation to participants in the control group.

Psychological Prenatal

Psychological Prenatal Care is a type of perinatal care that is rarely found in obstetric services because it is a new and little-known concept. It is a program that began with the aim of humanizing the gestational process, promoting the integration of the pregnant woman and her family throughout the process, through meetings that emphasize the preparation and construction of motherhood.¹⁰

The main objective of the PPC is to provide qualified listening on the pregnancy process and a safe space for mothers to share their experiences, fears, fantasies and anxieties arising from this phase, in addition to facilitating the exchange of experiences, discoveries and information

with other women who share feelings at a similar time, but experienced in a unique way by each of them. This care also extends to the family, especially the partner and grandparents, aiming at their participation in the pregnancy and postpartum period.¹²

There is no single model for carrying out PPC, but studies on this topic show that interventions have been carried out through groups where topics such as: changes brought about by motherhood and fatherhood, changes in family relationships, mother-baby bond, social demands, real versus imaginary baby, types of birth, emotional states after birth and

breastfeeding are worked on.¹⁵ To participate in psychological prenatal care, the pregnant woman does not need to have emotional difficulties or specific mental health needs. She just needs to demonstrate an interest in psychological support for a healthier experience during this period.

CONCLUSION

The pregnancy-puerperal period represents a time of significant vulnerability for women's mental health, which can result in emotional illness. Therefore, monitoring through PPC is essential, as it can

help prevent and reduce symptoms of anxiety and depression.

Psychological intervention during pregnancy provides emotional support and psychoeducation about the emotional changes characteristic of this period. The support of a psychologist is essential, given their knowledge of mental health and the ability to carry out psychotherapeutic interventions. The study demonstrated that PPC has a positive impact not only on the prevention of PPD, but also on other mental disorders, helping women and their families to face the transformations of this period.

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