

The Effectiveness of Mindfulness Therapy on Post- Partum Depression among New Mothers

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ABSTRACT

In the postpartum period, many women have moderate-to-severe depression, for which medication is frequently the first-line treatment. Because of the possibility for severe effects on their newborn, many breastfeeding moms are hesitant to raise their dose or seek further medicine, despite an incomplete response. For complete symptom remission, these mothers are responsive to non-pharmacological treatments. The goal of this study was to see if an eight-week mindfulness therapy intervention might be used as an additional treatment for postpartum depression. Women were recruited at a maternity hospital's outpatient reproductive mental health clinic. Within the first year after childbirth, the participants were diagnosed with postpartum depression. **Hypothesis:** -1) Mindfulness therapy would be effective in reducing post-partum depression in new mothers. 2) Mindfulness therapy would be effective in mental health of new mothers. **Sample:** The present study carried out on 30 mothers of new born children with post-partum depression at Aurangabad city, ranging age between 25-30 years. **Research design:** Pre-test and post-test research design was used for present research. **Tools:** Bek's Depression inventory, Mindfulness therapy.

Keywords: Post-partum Depression, Mindfulness therapy

Giving birth is regarded by mothers as a valuable experience that affects not only their own lives, but also their social, spiritual, and emotional lives. Pregnancy, on the other hand, is a time when mothers' lives and needs change dramatically. Furthermore, the period can cause various emotional problems and psychological depressions in a woman, necessitating that she be physically and mentally prepared for pregnancy. Many risk factors, including as melancholy, anxiety, and stress, have been linked to postpartum depression in research studies. To put it another way, postpartum depression is a common illness that affects many new mothers. Low self-esteem, a challenging infant temperament, maternal neuroticism, and irritability are all symptoms of depression. Obesity, sleep disturbances, low energy, and irritability, as well as psychological concerns such as low self-esteem, despair, guilt, and shame, are some of the usual challenges that new mothers encounter. Increased hunger and overweightness are two postpartum depression symptoms. Other symptoms of postnatal depression include irritability, aggressive behavior,

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panic attacks, seclusion, and uncontrollable sobbing. The most prominent symptom of postpartum depression is maternity blues, which are thought to be the direct outcome of mothers' rage and frustration.

Post-partum depression is a mental health condition that affects women after they have given birth. For some mothers, experiencing the "baby blues" for a few weeks after giving birth is natural. Sadness, loneliness, worthlessness, restlessness, and anxiety are all symptoms of postpartum depression, and they endure considerably longer than a few weeks. Many women experience mood changes after having a kid. They can be cheerful one minute and then start crying the next. They may become melancholy, have trouble concentrating, lose their appetite, or have trouble sleeping, even when the baby is sleeping. These symptoms normally begin 3 to 4 days after delivery and can persist up to a week.

Symptoms of post-partum depression

- Feeling sad or down often.
- Frequent crying or tearfulness.
- Feeling restless, irritable, or anxious.
- Loss of interest or pleasure in life.
- Loss of appetite.
- Less energy and motivation to do things.
- Difficulty sleeping, including trouble falling asleep, trouble staying asleep, or sleeping more than usual.
- Feeling worthless, hopeless, or guilty.
- Unexplained weight loss or gain.
- Feeling like life isn't worth living.
- Showing little interest in your baby.
- Not feeling attached to your baby.

Although many women become sad shortly after giving birth, some do not become depressed for several weeks or months. Postpartum depression is defined as depression that begins within six months of childbirth. A woman may suffer postpartum psychosis in rare cases. This is a life-threatening illness. All of the symptoms of postpartum depression are present, as well as thoughts of harming yourself or the baby.

What is mindfulness?

The phrase "mindfulness" is a popular translation of a Buddhist psychology term that means "awareness" or "bare attention." It is usually used to refer to a sensitive, accepting, and autonomous method of paying attention to any thoughts that may be present. The definitions in Box 1 illustrate a variety of approaches to expressing this. Although mindfulness may appear to be simple and natural, it is the polar opposite of mental habits in which the mind operates on "automatic pilot." Most events go completely unnoticed in this normal state, and awareness is dominated by a stream of internal commentary that can appear mindless in its insensitivity to what is happening right now. Mindfulness can be acquired with practice, even if most individuals only experience it for limited periods of time.

REVIEW OF LITERATURE

Hajieh Sheydaei (2017) study on the effectiveness of mindfulness training on reducing the symptoms of postpartum depression. In 2014, Shahid Chamran Hospital in Tehran conducted a quasi-experimental study on 410 new moms. 67 moms were chosen and

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randomly separated between experimental and control groups, each with 32 applicants, using the Beck Depression Inventory (BDI), Structured Clinical Interview, and Psychological Clinical Diagnosis. Following that, the experimental group had 8 sessions of mindfulness training, each lasting two hours, while the control group received no instruction. In SPSS, version 20, the data were analyzed using descriptive statistics and Analysis of Covariance (ANCOVA). The experimental group's post-test scores were significantly higher ($p < 0.001$) than the control groups, according to the Beck Inventory results. In addition, the control group's pre- and posttest mean scores for postpartum depression were 25.81 and 25.12, respectively, while the experimental group's values were 24.75 and 18.5. Because the experimental group's posttest mean score was lower than the pretest, the treatment, i.e., mindfulness training, was helpful in reducing depressive symptoms in mothers.

Josefs prezz baslo (2017) investigate that Effects of a mindfulness-based intervention on psychological distress, well-being, and maternal self-efficacy in breast-feeding mothers: results of a pilot study. An 8-week mindfulness-based intervention targeted at boosting mother self-efficacy, mindfulness, self-compassion, life satisfaction, and subjective happiness, as well as reducing psychological distress, was created and tested by the researchers. Treatment and control groups ($n = 26$) and pretest and posttest assessments were employed in a randomized controlled, between-groups design. Mothers in the treatment group scored considerably higher on maternal self-efficacy, various characteristics of mindfulness (observing, behaving with awareness, non-judging, and non-reactivity), and self-compassion than mothers in the control group, according to ANCOVA data (self-kindness, mindfulness, over-identification, and total self-compassion). Furthermore, mothers who received the treatment showed a significant reduction in worry, tension, and psychological discomfort. Previous research findings about the benefits of mindfulness-based intervention in women from the perinatal and postpartum periods through the early parenting period were confirmed by the early pregnancy periods.

Statement of the Problem

The effect of mindfulness therapy on post-partum depression among new mothers.

Objective of the Research

To study of mindfulness therapy on post-partum depression among new mothers.

Hypothesis of the Research

1. Mindfulness therapy would be effective in reducing post-partum depression in new mothers.
2. Mindfulness therapy would be effective in mental health of new mothers.

Sample

The present study carried out on 30 mothers of new born children with post-partum depression at Aurangabad city, ranging age between 25-30 years.

Variables

Independent variables

- Mindfulness therapy

Dependent variables

- Post-partum depression

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- Mental Health

Research Tool

- **Beck Depression inventory:** The Beck Depression Assessment (BDI) is a self-report rating inventory with 21 items that assesses depression-related attitudes and symptoms (Beck, et al., 1961). Several computerized versions of the BDI have been produced, as well as a card form (May, Urquhart, Tarran, 1969, mentioned in Groth-Marnat, 1990), a 13-item short form, and the more current BDI-II by Beck, Steer, and Brown, 1996. (For more details on the clinical value of the BDI-II, see Steer, Rissmiller, and Beck, 2000.) The BDI takes around 10 minutes to complete, but clients must be able to read at a fifth or sixth grade level to fully comprehend the questions (Groth-Marnat, 1990).
- **Mindfulness therapy:** Mindfulness is a 2500-year-old concept that comes from ancient eastern and Buddhist philosophy. Jon Kabat-Zinn was the first to introduce the notion of mindfulness to the Western world.

Procedure of Data Collection

For the present study 30 mothers who experience first time pregnancy with post-partum depression. At the first pretest was taken all mothers with Post-partum depression by given beck's depression inventory used for data were collected. After that mindfulness therapy was given to 30 mothers for one month. After therapy given post-test was conducted on all 30 samples by given by Beck's depression inventory data were collected.

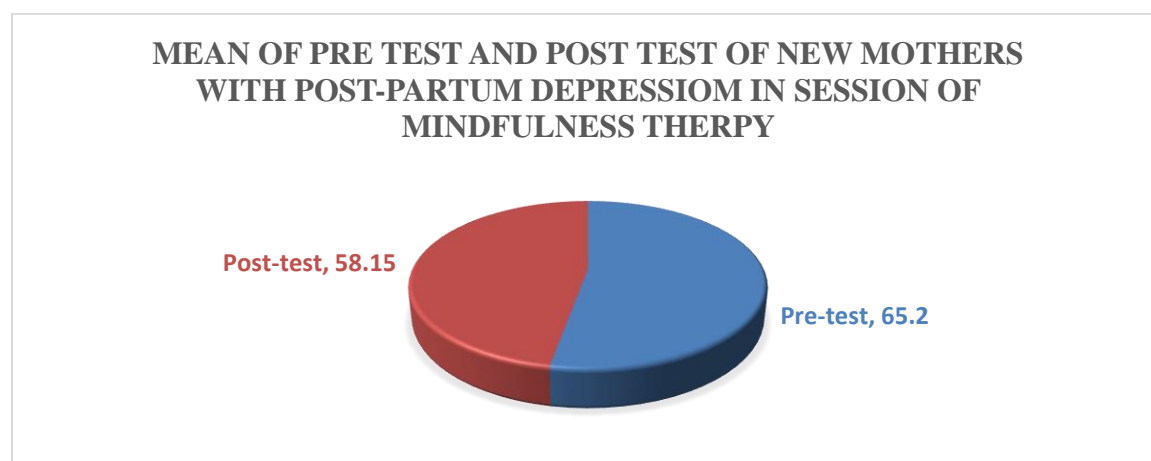
Research design

For the present experimental study pre-test post-test research design was use for session of Mindfulness therapy.

Result and discussion

Table no 1 show mean, SD, and t-value of pre-test and post-test of new mothers with post-partum depression in Session of Mindfulness therapy.

Test	N	Mean	SD	T value	Sign level
Pre test	30	65.22	4.33	5.10	0.00
Post test	30	58.15	2.15		



Present study investigate effect of mindfulness therapy on post-partum depression among new mothers. The result table show that there is mean difference pre-test mean is 65.22 and

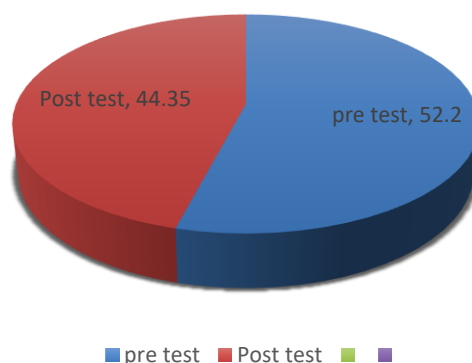
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SD is 4.33 and Post-test mean is 58.15 and SD is 2.15 and t value is 5.10 which is significant on 0.00 level. There for hypothesis one Mindfulness therapy would be effective in reducing post-partum depression in new mothers was accepted. **Barbara Shulmana Royce Dueckb (2018)** study that, Feasibility of a mindfulness-based cognitive therapy group intervention as an adjunctive treatment for postpartum depression and anxiety. Women were recruited at a maternity hospital's outpatient reproductive mental health clinic. Within the first year after childbirth, the participants were diagnosed with postpartum depression/anxiety. They were randomly assigned to either the MBCT intervention group (n = 14) or the treatment-as-usual control group (n = 16) and were asked to complete the Patient Health Questionnaire-9 (PHQ-9), the Generalized Anxiety Disorder-7 (GAD-7) questionnaire, and the Mindful Attention Awareness Scale (MAAS) at baseline, four weeks, eight weeks, and three months later. Multivariate analysis revealed that in the MBCT group, depression and anxiety levels dropped while mindfulness levels increased, but not in the control group. Although the differences were not always statistically significant, several of the between-group and over-time comparisons showed signs of significance. Furthermore, the effect sizes for anxiety, sadness, and mindfulness were usually big, implying that the MBCT intervention had a clinically significant impact on individuals.

Table no 2 show mean, SD, and t-value of pre-test and post-test mental health of new mothers in Session of Mindfulness therapy.

Test	N	Mean	SD	T value	Sign. level
Pre test	30	52.20	5.2	5.55	0.01
Post test	30	44.35	3.00		

Mean of pre and post test on mental health of new mothers in session of mindfulness therapy



Present study investigates effect of mindfulness therapy on post-partum depression among new mothers. The result table 2 show that mental health of new mothers there is mean difference pre-test mean is 52.20 and SD is 5.2 and Post-test mean is 44.35 and SD is 3.00 and t value is 5.55 which is significant on 0.01 level. Hence hypothesis no 2 Mindfulness therapy would be effective in mental health of new mothers was accepted. **Wan-Lin Pan (2019)** Assessing the effectiveness of mindfulness-based programs on mental health during pregnancy and early motherhood - a randomized control trial. This study was a single-blinded randomized controlled trial. After receiving formal approval from the partnering hospital, recruitment commenced. A total of 74 women between the ages of 13 and 28 weeks of pregnancy were randomly assigned to one of two groups: intervention or

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comparison. The intervention programme included eight 3-hour seminars delivered once a week and one day of silent meditation lasting 7 hours. At the beginning of the study and three months after the baby was born, the participants' psychological well-being was examined. In both groups, significant variations in stress and depression were seen over time. At 3-months postpartum, the intervention group had significantly lower stress and depression levels than the control group ($F = 7.19$, $p = .009$ and $F = 7.36$, $p = .008$, respectively). At 3-months postpartum, there was no significant difference in mindfulness scores between the groups. The intervention program effectively reduced postpartum self-perceived stress and sadness, implying that it provides acceptable and long-term benefits to pregnant and postpartum women. Teaching and practicing mindfulness meditation and parenting education throughout pregnancy may help pregnant women cope with stress and despair as they prepare to become parents.

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Conflict of Interest

The author(s) declared no conflict of interest.

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