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Emotional Support for High-Risk Laboring Moms Who Developed a Pregnancy Complication during Postpartum Period



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ABSTRACT

Background: Women across the world dream to be mothers and start a family. Although pregnancy can be a beautiful and exciting event, it can also be very scary and risky. Mothers do not always have the perfect labor and delivery story. Going through these complications can affect their physical and emotional health. **Purpose:** The purpose of this study was to determine emotional support for high-risk laboring moms who developed a pregnancy complication. Method: This is a literature review of pertinent studies. The question used for the investigation was: What is the effect of emotional support for high-risk laboring moms who developed a pregnancy complication during the postpartum period? **Findings**: Family support, emotional support animals, exercise therapy, and counseling were identified as needs for this population. **Conclusion:** Moms who receive therapy including family support, emotional, and mental support postpartum have a better grieving process and mental health status than mothers who do not receive such support.

1. INTRODUCTION

A high-risk pregnancy is defined as any pregnancy in which there is a medical factor, maternal or fetal that potentially acts adversely to affect the outcome of pregnancy [1]. Many mothers have pregnancy complications and are considered high-risk throughout their pregnancy. Being considered high-risk and having pregnancy complications could be hard mentally and emotionally on a mother. Every year in the United States, at least 60,000 mothers experience complications from pregnancy and delivery [2]. It can cause a lot of trauma and depression because mothers may feel as if it is their fault or that they could have done something better to avoid the situation from happening. Also, mothers may not have the support system they need during this hard period of their life that can cause even more trauma and mental issues for them. Pregnancy complications have been going on since life was first created [3]. The purpose of this review was to determine the availability of emotional support for high-risk laboring moms who developed a pregnancy complication during the postpartum period.

2. METHOD

The method used was a review of the literature on the importance of emotional support and therapy for laboring mothers with pregnancy complications. The main databases were the Cumulative Index to Nursing and Allied Health Literature (CINAHL) and EBSCOhost. This review consisted of studies that were recent and peer-reviewed. Using these databases, pertinent studies were collected and analyzed. The question used was: What is the effect of emotional support for high-risk laboring moms who developed a pregnancy complication during the postpartum period?

The nursing evidence-based practice levels of evidence hierarchy were considered when carefully selecting the studies that would be best for research [4]. Most of the studies chosen remained within the top four tiers of the evidence hierarchy. The keywords identified were labor, complications, emotional/mental support, pregnancy, mothers, and high-risk. See Table 1 for the definitions of keywords.

Table No. 1: Keywords and Definitions

Keyword	Definition
Labor	The process by which the fetus and the placenta leave the uterus; can occur two ways (vaginally or by cesarean delivery).
Complications	Physical and mental conditions that affect the health of the pregnant or postpartum person, their baby, or both.
Emotional/mental support	Showing care and compassion for another person to help the person cope with their emotions and experiences and show them they are not alone.
High-risk	When a woman or her fetus faces a higher-than-normal chance of experiencing problems during pregnancy.

3. LITERATURE REVIEW

The purpose of this literature review was to determine the effect of emotional support for highrisk moms during the postpartum period. Studies relating to emotional support were collected and analyzed. The following themes were identified in the literature review along with the impact for moms during the postpartum period.

Screenings for Postpartum Depression

Screening is considered a secondary level of prevention. This could determine if the mom could have postpartum depression (PPD) [5]. PPD can arise from numerous reasons. Since screening is key to preventing further complications for a health condition, Silva de Paz et al. [6] studied 100 pregnant moms and utilized the Beck Anxiety Inventory to screen for anxiety. They concluded high-risk pregnancies tend to be associated with anxiety that leads to PPD. Taple et al. [7] also performed screenings and concluded that screening also helped with anxiety. Sugiyama [8] conducted a self-paced questionnaire that also screened postpartum mothers' depression. Results indicated that screenings help with improving the overall mental health of moms. With the help of screenings, moms can get diagnosed early for PPD.

Pregnancy complications have been going on since life was first created [3]. The importance of long-term care and screenings are needed for mothers who go through different pregnancy complications to help them heal better. Therapy and different forms of support for these moms can help decrease their risk of having mental health problems such as depression and anxiety. Ni et al. [9] indicate that early postpartum depressive disorders are prevalent mental issues among pregnant hospitalized moms. The necessity of paying attention to PPD symptoms among hospitalized women and providing appropriate interventions at the prenatal stage to prevent adverse consequences is vital [9].

Emotional Support

Therapy can provide benefits for anyone who needs a safe place to discuss their problems. An individual may not always find traditional therapy helpful and, therefore may need alternative methods. These alternative methods can pose the same benefits as traditional therapy. In a systematic review, Issac and Andipatin [1] highlighted that moms need more than just medical care after experiencing a high-risk pregnancy. The suggestion concluded that moms should also receive therapy or psychological support. This will in turn help moms find a way to cope with their labor experience. Counseling was found to be a way mothers were able to learn tools on how to cope [1]. During counseling education also takes place. Education is a key factor in helping mothers be able to understand how to navigate trauma.

Seulgi et al. [10] emphasized the importance of having psychological support during the postpartum period. Family support and presence for moms during the postpartum period also helps moms with postpartum depression. Denis et al. [11] underscore the importance of providing appropriate psychological support for women with high-risk pregnancies to avoid depressive disorders and any potential negative consequences during the perinatal period. Hinton et al. [12] noted that midwives can play a key role during pregnancy. Talking to women early in their pregnancy, signposting information, and explaining ways to contact health professionals regarding informational or emotional support would fill a gap that currently is met by other aspects of their network.

Kozel et al. [13] found that social support and optimism contribute to emotional coping. It is recommended that healthcare professionals working in high-risk pregnancy units, and especially

nurses, employ interventions designed to provide professional support and legitimize the sharing of emotions. Pregnant high-risk women manage their emotions mainly through deep emotion work. Less optimistic high-risk pregnant women, experience more emotional disparities. Nurses should give legitimacy to the negative emotions of high-risk pregnant women and identify their social support resources [13].

Family Support

Family can play a vital role for moms during their postpartum period. The mom is not only healing from the birth both mentally and physically but also must provide care for her baby. This is where support from family members can help mothers focus on their mental health and provide peace of mind that someone is caring for their baby.

Maffei et al. [14] found having family members present during the postpartum period can pose beneficial psychological effects for the mother. In another study, Pebryatie et al. [15] argue that support from the husband during pregnancy, birth, and postpartum leads to better maternal health. Multiple studies found that moms need family support [8,16-18]. The support of their family members helped decrease their anxiety and feelings of depression. The comparisons were moms without emotional support versus moms with emotional support. They all pointed out that family is needed for positive mental effects.

Skurzak et al. [19] noted that in addition to being a physiological event, pregnancy creates a burden for the body and induces stress. Pregnant women tend to suffer from fear of the unknown, especially regarding the baby, themselves, the course of delivery, the need for a new role of a mother, economic, professional, emotional situations, and relationship with partner. As shown in Figure 1, the diagnosis of high-risk pregnancy and the need for hospitalization increase the incidence of negative emotions and experiences such as permanent anxiety about the child's life, anger, sadness, and doubts about the diagnosis, fear of pregnancy complications, frustration, and dissatisfaction with the implementation of the functions of maternal concerns during the stay in the hospital [19].

The diagnosis of high-risk pregnancy increases negative emotions for the mom	Anxiety about the child's life Anger
	Sadness Doubts about the diagnosis
	Fear of pregnancy complications Frustration
	Dissatisfaction with the implementation of the fuctions of maternal concerns during the hospital stay

Figure No. 1: Negative Emotions and Experiences Related to High-Risk Pregnancy

If a pregnant woman receives strong social support from her network, the negative emotions and concerns would be reduced. Receiving support also boosts the chances of successful pregnancy completion. As highlighted in Figure 2, the people from the immediate social network of a pregnant woman, such as their partner, spouse, family, friends, midwife, and doctor, are the most vital source of support [19]. The ability of families to adapt to the challenges and consequences of high-risk childbearing is dependent on the internal and external resources available to them [20].

Most	Partner
vital source of support	HUMA Spouse
	Family
	Friends
	Midwife
	Doctor

Figure No. 2: People from the Immediate Social Network of a Pregnant Woman

Support Animals and Exercise

Abdolalipour [21] conducted a qualitative study consisting of 15 pregnant women. These women completed a questionnaire. The questions asked how moms cope with their PPD. Five of the participants found that exercise therapy was beneficial to their health. Different breathing exercises were also found to be beneficial in helping mothers be able to cope with PPD.

Among the several treatments used in the management of postpartum depression, living with a pet has had its favorable impacts. Emotional support animals can help reduce stress and anxiety. Matsumura et al. [22] conducted a study that was performed in Japan. They examined the benefit of having support animals as emotional support during the postpartum period. A total of 80,814 mothers were questioned and asked to fill out a survey. The surveyor asked if moms owned any pets after their pregnancy. The results of the study showed dog ownership can reduce the risk of mental health problems. Emotional support animals have a positive effect on postpartum moms' mental health [22].

Caring Outside of Protocols

Curtin et al [23] surveyed a total of 1617 participants from nine countries. Three qualitative findings were synthesized, and a narrative synthesis of quantitative data was completed. The integration of qualitative and quantitative data identified complementary findings on the importance of developing a harmonized relationship with women; increased time counseling women on their choices; and fear of professional reputational damage if caring outside of protocols. Negotiating with women outside of protocols may have a wider impact on the professional than first thought. Understanding how healthcare professionals individualize care for women at risk in labor requires further review [23]. Determining whose role, it is to care for the moms is complicated. Sumarno et al. [24] suggested it may be the role of primary care for women experiencing miscarriage; however, they were not certain if moms are better served through external organizations.

Charvat et al. [16] study was based on the Covid-19 pandemic which caused a lot of emotional traumas for everyone, not just laboring mothers [16]. When participants of that study mentioned how they did not have many support systems during that time to help them it was expected. Then everyone was trying to protect themselves, so they did not think to try to help others. Also, many participants in that study mentioned how they did not have the most serious pregnancy complications such as miscarriage and stillbirths. They had other concerning things such as problems with lactation and just being worried about how COVID-19 would affect them and their baby if they contracted the disease [16].

Summary of Findings

Multiple research studies were used to assess the benefits of emotional support for moms during the postpartum period. The need for family support and emotional support to help cope with symptoms of complications were the two major emerging themes (see Figure 3). The need for screenings for postpartum depression, counseling, exercise, and emotional support animals were also mentioned.

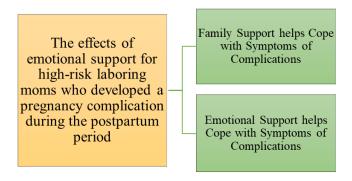


Figure No. 3: Emerging Themes: The Effect of Emotional Support

The review aimed to answer the question: What is the effect of emotional support for high-risk laboring moms who developed a pregnancy complication as opposed to those moms who had no emotional support? The study reveals that moms who receive emotional support during the postpartum period have a decreased chance of having postpartum depression.

4. DISCUSSION

Based on the evidence and findings of this review, overall, the decision made was that mothers who experience high-risk pregnancies and pregnancy complications need emotional support and other forms of therapy to help increase their mental health. Issacs and Adipatin [1] mention how pregnancy compilations and high-risk pregnancies can cause a mom to be hospitalized for a long time throughout their pregnancy. They explain how being hospitalized can cause a lot of emotions for mothers such as anger, loneliness, guilt, and sadness because the usual adaptation to their pregnancies was disrupted [1]. This means mothers have the fairytale view that their pregnancy is going to be straightforward. So, when something out of the ordinary happens they

are filled with a rush of different emotions because they are not experiencing what they expected, leading to a lot of mental traumas for them.

Mothers go through a lot of emotions when they do not get emotional support [16,18]. Emotional support is vital for the prevention of postpartum depression. Whether the support is coming from their partner, their mother, or their primary care doctor, it helps them tremendously mentally and helps them grieve and heal more. Kozel et al (2022) Social support and optimism contribute to their emotional coping. Social support significantly influences the quality of coping with stress in pregnant women [19]. Timely initiation of antenatal care is critical in assessing and educating women [25]. Childbirth educators may be an important source of support through this process [20].

Recommendations

Recommendations for this review would be to educate the mom and staff on the effects of postpartum depression for moms who experience labor complications (see Figure 4). This education could include pamphlets and a video that explains the signs and symptoms moms experience. Another recommendation is for support groups such as emotional support animals and spiritual leaders. This can allow mom to feel comforted along with expressing her feelings. Moms need to feel that they can be understood and taken care of in this difficult time. Education is key to the prevention of postpartum depression. Overall, gathering more relevant data will further help mothers in the future who have pregnancy complications and high-risk pregnancies learn how to heal and get through the emotional trauma they may endure.

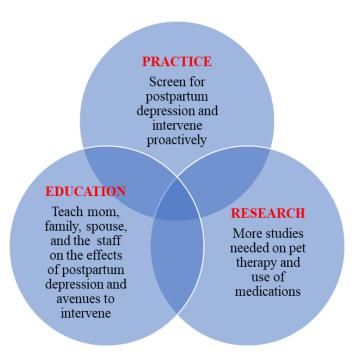


Figure No. 4: Application of Evidence to Practice, Research and Education

CONCLUSION

Mothers who receive therapy and emotional and mental support postpartum have a better grieving process and mental health status than mothers who do not receive such treatment. The postpartum outcomes of both the mother and infant are improved when they receive the adequate support they need. Exercise, counseling, and emotional support animals appear to aid in symptoms of postpartum depression. Make emotional support mandatory for high-risk pregnancy moms in the practice sector.

REFERENCES

- 1. Isaacs, N. Z., & Andipatin, M. G. (2020). A systematic review regarding women's emotional and psychological experiences of high-risk pregnancies. *BMC Psychology*, 8(1), 45. https://doi.org/10.1186/s 40359-020-00410-8
- 2. Zephyrin, L., O'Neil, S., & Zivin, K. (2021). The staggering toll of complications related to pregnancy and childbirth. *STAT News.* https://www.statnews.com/2021/11/23/staggering-toll-pregnancy-childbirth-related-complications/
- 3. Hinkle, S. (2023). Birth complications tied to death risk decades later. Birth Complications Tied to Death Risk Decades Later. https://www.pennmedicine.org/news/news-releases/2023/march/birth-complications-tied-to-death-risk-decades-later
- 4. Schmidt, N., & Brown, J. (2022). *Evidence-based practice for nurses: Appraisal and application of research* (5th ed.). Jones & Bartlett Learning.

- 5. Yaksi, N., & Save, D. (2021). How do social and spousal support influence postpartum depression? *Marmara Medical Journal*, 34(3), 327–334. https://doiorg.10.5472/marumj.1012403
- 6. Silva da Paz, M. M., Campos Diniz, R. de M., de Oliveira Almeida, M., Oliveira Cabral, N., Castro Freire de Assis, T. J., Fernandes de Sena, M., Alves de Pontes, V., da Silva Borges, N. M., & Torres Teixeira Mendes, C. K. (2022). Analysis of the anxiety level in high-risk pregnancy based on the Beck anxiety inventory. *Brazilian Journal of Mother & Child Health (BJMCH) / 22*(4), 1015–1033. https://doi.o.g/10.1590/1806-9304202200 040016
- 7. Taple, B. J., Haldar, S., Tandon, S. D., Reddy, M., Mohr, D. C., & Miller, E. S. (2022). A qualitative examination of the implementation of a perinatal collaborative care program. *Primary Health Care Research & Development*, 23, 1–11. https://doi.org/10.1017/S146342362 200038X
- 8. Sugiyama, S., Momma, H., Yamada, A., Huang, C., Tatsuta, N., Sakurai, K., Nakai, K., Arima, T., Yaegashi, N., & Nagatomi, R. (2023). Social capital and physical activity among Japanese pregnant women: Adjunct study of Japan Environment and Children's Study in Miyagi Prefecture. *The Tohoku Journal of Experimental Medicine*, 259(4), 307–318 doi: 10.1620/tjem.2023.J004
- 9. Ni, Q., Cheng, G., Chen, A., & Heinonen, S. (2020). Early detection of mental illness for women suffering high-risk pregnancies: an explorative study on a self-perceived burden during pregnancy and early postpartum depressive symptoms among Chinese women hospitalized with threatened preterm labor. *BMC Psychiatry*, 20(1), 1–11. https://doi.org/10.1186/s12888-020-02667-0
- 10. Seulgi Jung, Yoojin Kim, Jeongok Park, Miyoung Choi, & Sue Kim. (2021). Psychosocial support interventions for women with gestational diabetes mellitus: A systematic review. *Korean Journal of Women Health Nursing*, 27(2), 75–92. https://doiorg.10.4069/kjwhn.2021.05.13
- 11. Denis, A., Michaux, P., & Callahan, S. (2012). Factors implicated in moderating the risk for depression and anxiety in high-risk pregnancy. *Journal of Reproductive & Infant Psychology*, 30(2), 124–134. https://doi.org/10.1080/02646838.2012.677020
- 12. Hinton, L., Dumelow, C., Hodgkinson, J., Montgomery, C., Martin, A., Allen, C., Tucker, K., Green, M. E., Wilson, H., McManus, R. J., Chappell, L. C., & Band, R. (2023). "Nesting networks": Women's experiences of social network support in high-risk pregnancy. *Midwifery*, 120, N.PAG. https://doi.org/10.1016/j.midw.2023.103622 13. Kozel, E., Barnoy, S., & Itzhaki, M. (2022). Emotion management of women at risk for premature birth: The association with optimism and social support. *Applied Nursing Research*, 64, N.PAG. https://doi.org/10.1016/j.apnr.2022.151568
- 14. Maffei, B., Menezes, M., Krenkel, S., & Aparecida Crepaldi, M. (2022). Significant social networks of highrisk pregnancies: A qualitative study. *Psicologia Em Estudo*, 27, 1–15. https://doi.org/10.4025/psicolestud.V27i0.48904
- 15. Pebryatie, E., Paek, S. C., Sherer, P., & Meemon, N. (2022). Association s between spousal relationship, husband involvement, and postpartum depression among postpartum mothers in West Java, Indonesia. *Journal of Primary Care & Community Health*, 13, 1–10. https://doiorg.10.1177/215013192 21088355
- 16. Charvat, E., Horstman, H. K., Jordan, E., Leverenz, A., & Okafor, B. (2021). Navigating pregnancy during the COVID-19 pandemic: The role of social support in communicated narrative sensemaking. *Journal of Family Communication*, 21(3), 167–185. https://doi.org/10.1080/15267431.2 021.193250 3
- 17. Kawamura, E., & Asano, M. (2023). Changes, differences, and factors of parenthood in high-risk pregnant women and their partners in Japan. *BMC Pregnancy & Childbirth*, 23(1), 1–13. https://doi.org/10.1186/s 12884-023-05519-3
- 18. Pope, J., Redsell, S., Houghton, C., & Matvienko-Sikar, K. (2023). Healthcare professionals' experiences and perceptions of providing support for mental health during the period from pregnancy to two years postpartum. *Journal of Midwifery*, 118, N.PAG. https://doiorg.10.1016/j.midw.202.2.103581
- 19. Skurzak, A., Kicia, M., Wiktor, K., Iwanowicz-Palus, G., & Wiktor, H. (2015). Social support for pregnant women. *Polish Journal of Public Health*, *125*(3), 169–172. https://doi.org/10.1515/pjph-2015-0048
- 20. Lutz K, & May KA. (2007). The impact of high-risk pregnancy on the transition to parenthood. *International Journal of Childbirth Education*, 22(3), 20–22.

- 21. Abdolalipour, S., Mousavi, S., Hadian, T., Meedya, S., Mohammad -AlizadehCharandabi, S., Mohammadi, E., & Mirghafourvand, M. (2023). Adolescent pregnant women's perception of health practices: A qualitative study. *Nursing Open*, *10*(9), 6186–6196. https://doi.org/10.1002/nop2.1852
- 22. Matsumura, K., Hamazaki, K., Tsuchida, A., & Inadera, H. (2022). Pet ownership during pregnancy and mothers' mental health conditions up to 1 year postpartum: A nationwide birth cohort: The Japan environment and children's study. *Social Science & Medicine*, 309, 1–10. https://doi.org/10.1016/j.socscimed.2022.115216.
- 23. Curtin, M., Murphy, M., Savage, E., O'Driscoll, M., & Leahy-Warren, P. (2023). Midwives', obstetricians', and nurses' perspectives of humanized care during pregnancy and childbirth for women classified as high risk in high-income countries: A mixed methods systematic review. *PLoS ONE*, *18*(10), 1–21. https://doi.org/10.1371/journal.pone.0293007
- 24. Sumarno, V., Temple, Smith, M. J., & Bilardi, J. E. (2020). Whose role is it? Primary care and the provision of emotional support for women experiencing miscarriage: A pilot qualitative Australian study. *Australian Journal of Primary Health*, 26(5), 388–395. https://doi.org/10.1071/PY20042
- 25. Tessema, D., Kassu, A., Teshome, A., & Abdo, R. (2023). Timely initiation of antenatal care and associated factors among pregnant women attending at Wachemo University Nigist Eleni Mohammed Memorial Comprehensive Specialized Hospital, Hossana, Ethiopia: A cross-sectional study. *Journal of Pregnancy*, 1–9. https://doi.org/10.1155/2023/70543 81



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