



SOCIAL MEDIA SUPPORT TO PREVENT POSTPARTUM DEPRESSION AND INCREASES ENDOGENOUS ENDORPHINS: A SYSTEMATIC REVIEW

Dhea Regita Sastika Putri¹, Rima Muliani², Monica Bella Putri Utami³

1-3 Departement of Midwifery, Politeknik Tiara Bunda, Depok, Indonesia

sastikaputri@gmail.com, rimamuliani47@gmail.com, monicabellaputriu97@gmail.com

ABSTRACT

Perinatal depression affects around 13% of pregnant and postpartum women, with potentially serious consequences for their psychological health, relationships with close family and friends, and the health of their children. This review study aims to analyze the effectiveness of Social Media Support that is most recommended for preventing postpartum depression. This type of systematic review research uses searches from journal databases such as MEDLINE-Pubmed, Web of Science, Scopus and Science Direct. We use the PRISMA checklist as a guideline to ensure all steps are carried out correctly. A total of 410 records were identified through database searches, including 230 records from PubMed, 70 records from Scopus, and 110 records from ScienceDirect. Before screening, 45 duplicate records were removed, and 318 records were automatically excluded by screening tools due to ineligibility based on title, abstract, or format (e.g., non-scholarly sources or non-English language). Based on the relevant articles we reviewed in their entirety, we indicated that more than half of the women reported high support and illustrated the important role played by family, peers, and professionals as well as online and remote channels in providing postpartum informational and emotional support.

Keywords: Postpartum Depression, Social Media, Postpartum, Mobile Phone, Perinatal

INTRODUCTION

Social support encompasses both material and immaterial components of social connections, including empathy, physical assistance, useful knowledge, and feedback (Baker and Yang, 2018). When recover the women from birthing experience and begin nurturing their newborn during the postpartum phase (Kim et al., 2023a). Furthermore, while women were likely to require more informational regarding the physical support emotional health of both themselves and their infants, their in-person contacts with

healthcare providers for professional advice may have been reduced due to afterbirth conditions, decreased maternity facility utilization, and reduced physical interactions (Ye, 2023). To fill a research gap, this study aimed to provide data on perceived social support levels as well as sources of informational and emotional support for postpartum women (Zhou *et al.*, 2024).

In the absence of in-person postpartum support groups, women have turned to online social networking sites and organizations for information and social support (Osman *et al.*, 2025). Video calls





and conversations on popular smartphone apps like LINE and Facebook have essentially replaced family reunions (Silverman *et al.*, 2017).

Perinatal depression is characterized as clinically significant depressed symptoms that occur throughout pregnancy or up to one year after childbirth (Martínez Vázquez et al., 2024). Perinatal depression affects around 13% of pregnant and postpartum women, with potentially serious consequences for their psychological health, relationships with close family and friends, and the health of their children. Perinatal depression is linked to an increased risk of preterm birth, unstable mother-infant connection, and childhood emotional and behavioral issues. Adolescents and young adults under 25 are more likely to experience postpartum depression than older women (16-44% vs 10-20%) (Aksoy et al., 2025).

Smartphone is the most often used technology among women during childbirth, it has enormous potential for PPD education and screening. As a result, an office created the psychoeducational online app with the overarching purpose of raising awareness of PPD among women and healthcare providers who would otherwise be unaware of or unwilling to discuss and examine psychopathological symptoms around birth. The web app is both a tool for providing information on PPD and a tool for screening for the presence of PPD symptoms in its users. Following its establishment, women were made aware of social media support via healthcare practitioners and social media. The viability of the web app was assessed

from the perspectives of both users and healthcare providers (Ye, 2023).

Social media support such as online friend, mother groups who discuss about pregnancies and postpartum are trusted way to prevent Postpartum Disease.

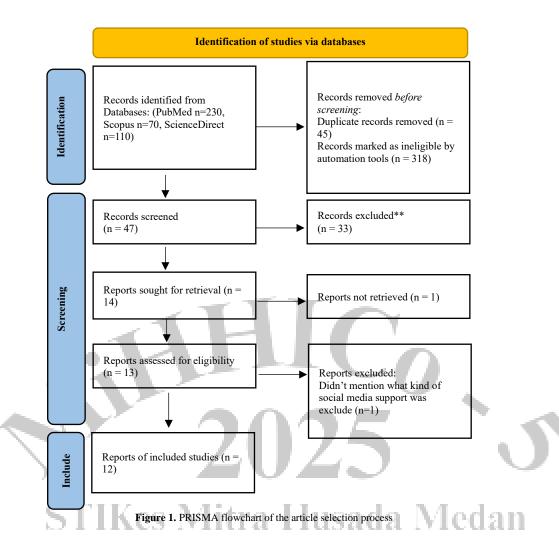
This review study aims to analyze the effectiveness of Social Media Support that is most recommended for preventing postpartum depression.

METHOD

This type of systematic review research uses searches from journal databases such as MEDLINE-Pubmed, Web of Science, Scopus and Science Direct. We use the PRISMA checklist as a guideline to ensure all steps are carried out correctly (Page et al., 2021). The data collection procedure was carried out using a comprehensive strategy such as article searches using Person; Interventions; Comparator; and Outcome (PICO keywords) search ((Postpartum) AND (Social Media Support)) OR (Online Support)) AND ((Prevent Postpartum Depression)). The database search used are MEDLINE-Pubmed, Web of Science, Scopus and Science Direct. We reviewed randomized control trial or clinical trial research that discusses social media support Postpartum Depression, prevent examining the types of social media, duration, and method that have been proven by research results to prevent Postpartum Depression (Coca et al., 2023).

There are 12 articles obtained and analyzed, data extraction was performed on the selected articles to review the text as a whole using the flow.

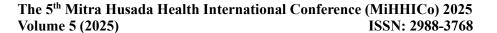




RESULT AND DISCUSSION

A total of 410 records were identified through database searches, including 230 records from PubMed, 70 records from Scopus, and 110 records from ScienceDirect. Before screening, duplicate records were removed, and 318 records were automatically excluded by screening tools due to ineligibility based on title, abstract, or format (e.g., non-scholarly sources or non-English language). This left 47 records to be screened for relevance. After title and abstract screening, 35 articles were excluded for not meeting the inclusion criteria, such as irrelevant population (nonpregnant women), interventions other than yoga, or lack of randomized controlled design. fourteen articles were sought for full-text retrieval. However, 1 full-text articles could not be accessed due to subscription restrictions or broken links. As a result, 13 full-text articles were assessed for eligibility. Of these, one articles were excluded cause didn't mention what kind of social media support.

In total, 12 articles met the predefined inclusion criteria and were included in this systematic review. The study selection process is illustrated in Figure 1 (PRISMA Flow Diagram).







The postpartum period is considering the key factor for women where they will pay a significant attention on its body image, shape, and weight.

. Because of the big change in body shape, for most women, this may cause they have a negative self-cognition and emotion (Chen *et al.*, 2022).

Beyond face-to-face interactions, the vast digital environment of today has an impact on the social experience of pregnancy. Online encyclopedias and mobile applications make a lot of information available, while social media platforms encourage user interaction and mutual support (Banti *et al.*, 2011).

The emotional support and the ability to interact with people in similar situations to share or learn from experiences are two reasons why women value digital platforms, this allows the women attend and benefit from the conversation anonymously (Li et al., 2024). Women may find a wealth of resources, both public and private, in the internet sphere to support them throughout and after pregnancy. However, those who already have a tendency to berate themselves could discover that their anxiety levels rise as a result of their persistent need for online validation and comparison. Investigating how social media use affects PPD is therefore crucial (Rae et al., 2025).

Pregnant women with high expectations for themselves may use social media to validate their behavior and seek reassurance, but susceptible people who make these comparisons are more likely to internalize negative emotions such as guilt, remorse, and a sense of self-worth (Gorman *et al.*, 2021). Mothers have a tendency to

compare themselves to non-mothers; the value of motherhood for women's health, as well as the requirement for secure marriages, may add to mothers' feelings of superiority (Ramsey et al., 2024). However, pregnancy and its aftermath can have a detrimental affects on a woman's selfimage, making her feel less capable of achieving success in life, such as weight body dysmorphia, postpartum depression, and maternity leave. Indicators of outcomes indicate that excessive use of social media may be hazardous to pregnant women's mental health, despite their use of these platforms for knowledge and social support (Badon et al., 2025).

Checking female's social media status during their perinatal period or after may help to prevent PPD. According to Zhang et al., the research conducted on both Western countries and Eastern countries major social software (Facebook, Twitter, WeChat) has shown its effectiveness on anticipating major life changes and maternal postpartum depression (Carter *et al.*, 2019).

Although, there are numerous digital mobile phone applications that can continuously track a woman's health and risk of depression during preventive or postpartum pregnancies, the majority of these have not been professionally tested, which may result in inaccurate information or privacy risks, as well as the disclosure of private mental health information. There are numerous mobile apps that may track activity, sleep, and energy levels in order to monitor physical and mental wellness. This helps mothers comprehend their position.

Author	Characteristic	Intervention	Outcome	
(Gewali et	Eligible youth	Eligible youth	Our findings	
al., 2021)	were pregnant or ≤2 years	included those who were	underscore the impact of	
	postpartum,	pregnant or ≤2	stigma	
	aged 14-24	years	associated	





	years during	postpartum,	with early	-		the maternity	and	
	pregnancy, had	aged 14-24	pregnancy			social support	emotional	
	access to a	years during	and social			scale (MSSS)	support	
	smartphone	pregnancy, had	determinants			to evaluate the	during the	
	•	a smartphone,	of health on			levels of social	pandemic.	
		and spoke	juvenile			support	•	
		English. These	perinatal			perceived by		
		parameters	mental			perinatal		
		were chosen to	health.			women. The		
		represent the	Stakeholders			assessment was		
		target	endorsed the			simple, useful,		
		demographic	usage of a			time-efficient,		
		for the	social media			objective, and		
		IMAGINE pilot project.	group to foster a			easily interpreted.		
		Although	supportive			interpreted.		
		perinatal	community	(Ronen et	Eligible	IMAGINE was	This pilot	
		depression is	and better	,	narticinants	a structured	study	
		defined as	access to	al., 2024)	were pregnant	digital group of	provides	
		occurring up to	evidence-		or ≤80 days	up to 7	promising	
		one year after	based		postpartum,	participants,	evidence of	
		childbirth,	depression		aged 16 to 24	with scheduled	the	
		youth up to	prevention		years, had	MB content	acceptability	
		two years	strategies.		access to a	and open	and utility of	
		postpartum			smartphone,	discussion for	IMAGINE	
		were included to allow			spoke English, and had a	12 weeks,	among perinatal	
		participants to			Patient Health	facilitated by a social worker.	youths. Our	
	, T	consider the			Questionnaire	Scheduled	study's small	
	- 4	complete			score <10.	content	sample size	
		period of risk			Participants	included	did not detect	
	170	for perinatal		-	were recruited	asynchronous	changes in	
- 4	- 1	depression.	_/_		throughout the	SMS text	clinical	
		Eligible	- 7 8		United States	messages,	outcomes;	
	/	practitioners included			from August 2020 to	graphics, prerecorded	our findings	
	N	nurses,			January 2021	videos, mood	suggest IMAGINE	
	7	physicians,	4		through paid	polls, and	warrants	
		social workers,			social media	optional	larger-scale	
	6000000	and mental	N. 10 P. 1		ads, in-person	weekly	evaluation.	
	- N. I.	health care	Mitra	H-111	outreach at	synchronous	11	
	E.J. III. I	workers	TATELL OF		clinics, and	video calls.	1.1	
		(HCWs) who			respondent-	Eligible		
		worked with			driven	participants		
		perinatal youth			sampling.	were pregnant		
		and were aged 18 or older.				or ≤80 days		
		10 OI OIUCI.				postpartum, aged 16 to 24		
(Kim et al.,	The responses	This	The results			years, had		
	of 840 eligible	anonymous	of this study			access to a		
2023b)	women up to	and self-	indicated that			smartphone,		
	six months	administered	more than			spoke English,		
	postpartum in	questionnaire	half of the			and had a		
	Thailand were	for data	women			Patient Health		
	obtained.	collection was	reported high			Questionnaire		
		developed in	support and			score <10.		
		English, translated into	illustrated the important		In total, 12	2 articles	met the	
		Thai, and	role played	predefi	ined inclusion	r criteria a	nd were	
		translated back	by family,	-	predefined inclusion criteria and were included in this systematic review. The			
		into English to	peers, and	ınclude	ea in this sys	stematic rev	iew. The	
		ensure	professionals	study	selection prod	ess is illus	trated in	
		accuracy of	as well as	•	-			
		translation. The	online and	_	1 (PRISMA F	_	*	
		dependent variable of	remote channels in	57% o	of women repo	orted to rece	eive high	
		maternal social	providing	support. Women in the high social support				
		support was	postpartum			•		
		assessed using	informational	group	were more 1	ikely to be	married	





(aOR:2.70; 95% CI:1.57-4.66), have a university education or above (1.88; 1.35-2.64), have an intended pregnancy (2.06; 1.34-3.16), good health (2.01; 1.44-2.81), good sleep quality (1.62; 1.14-2.31), receive counsel from peers or family (1.56; 1.13-2.16), and use internet or social media to reduce stress and depression (1.51; 1.08-2.11). Meanwhile, women in the high social support group were significantly less likely to feed complementary foods to infants within 24 hours of completing the survey (0.28; 0.15-0.52).

CONCLUSION

Based on the relevant articles we reviewed in their entirety, we indicated that more than half of the women reported high support and illustrated the important role played by family, peers, and professionals as well as online and remote channels in providing postpartum informational and emotional support.

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STIKes Mitra Husada Medan