

Family-Centered Maternity Care in Reducing the Risk of Baby Blues Syndrome Among Postpartum Mothers

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Abstract:

Baby Blues Syndrome is one of the most common psychological challenges experienced by mothers during the early postpartum period. Emotional instability, unexplained crying, anxiety, sleep disturbances, and feelings of helplessness commonly occur within the first two weeks after childbirth. Although generally transient, inadequate management may increase the risk of postpartum depression and adversely affect maternal–infant bonding, breastfeeding, and infant development. Family support plays an important role in maternal emotional adaptation following childbirth. Family-Centered Maternity Care (FCMC) is an approach that promotes collaboration among healthcare professionals, mothers, partners, and family members throughout maternity care. This narrative literature review aimed to analyze the role of FCMC in reducing the risk of Baby Blues Syndrome among postpartum mothers. Literature published between 2021 and 2026 was identified from Scopus, PubMed, ScienceDirect, and Google Scholar using keywords related to FCMC, baby blues syndrome, postpartum emotional support, maternal mental health, and family support. Relevant articles were critically analyzed thematically, focusing on emotional adaptation, social support, maternal coping, partner involvement, and nursing interventions. The findings indicate that FCMC may support maternal emotional stability by strengthening family participation, providing emotional reassurance, sharing caregiving responsibilities, and facilitating communication between healthcare professionals and families. Family involvement was also associated with greater maternal confidence, reduced psychological stress, stronger mother–infant attachment, and improved postpartum emotional well-being. Culturally sensitive family-centered approaches may further enhance these outcomes. FCMC represents a holistic and humanistic approach that can support maternal psychological well-being and potentially reduce the risk and severity of Baby Blues Syndrome during the postpartum period.

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INTRODUCTION

The postpartum period is a critical transition in a woman's life because mothers experience major physical, psychological, emotional, and social changes following childbirth. Although postpartum healthcare has traditionally emphasized maternal physical recovery and infant survival, maternal psychological well-being often receives less attention (Sendas & Freitas, 2024). One of the most common psychological conditions during this period is postpartum blues (also commonly referred to as baby blues or maternity blues), characterized by sadness, emotional instability, anxiety, irritability, frequent crying, sleep disturbances, and emotional exhaustion. The prevalence of postpartum blues has been reported to range from approximately 15% to 80% worldwide, depending on diagnostic criteria, assessment instruments, and sociocultural contexts (Tosto et al.,

2023). A recent cohort study also estimated that approximately 40–50% of postpartum women experience postpartum blues during the first week after childbirth (Landman et al., 2024). Although generally temporary, unresolved postpartum blues may progress to more severe mental health disorders and negatively affect maternal well-being, infant care, breastfeeding, mother–infant bonding, and family relationships (Henshaw, 2023).

Maternal mental health has become an important public health concern, particularly following the COVID-19 pandemic, which intensified social isolation, emotional stress, economic instability, and reduced social support (Zhang et al., 2023). During the postpartum period, many mothers experience emotional challenges while adapting to new maternal roles, recovering physically, and managing family responsibilities. It is important to distinguish postpartum blues from other postpartum mental health conditions. Postpartum blues is a transient emotional disturbance that develops within the first few days after childbirth and usually resolves within two weeks (Tosto et al., 2023). In contrast, postpartum depression is a persistent clinical mood disorder requiring professional management, whereas postpartum anxiety is characterized by excessive worry and anxiety that may occur independently or alongside depression. Despite these differences, emotional difficulties after childbirth are often regarded as a normal experience, leading to delayed recognition and inadequate psychological support (Maulina et al., 2023).

Maternal psychological well-being during the postpartum period is influenced by biological, hormonal, psychological, and social factors. Among these, support from partners and family members plays a key role in helping mothers adapt to parenthood. Previous studies have consistently shown that inadequate emotional support, limited partner involvement, poor communication, family conflict, and social isolation are associated with greater psychological distress among postpartum mothers (Low et al., 2023). Conversely, mothers who receive emotional reassurance and practical support are more likely to develop effective coping strategies, greater parenting confidence, and better emotional adjustment. These findings suggest that maternal emotional adaptation is shaped not only by individual factors but also by the family environment (McLeish et al., 2023).

The growing recognition of family support as an important determinant of maternal well-being has encouraged the adoption of Family-Centered Maternity Care (FCMC) in maternity services. Rather than viewing family members simply as companions during pregnancy or childbirth, FCMC recognizes them as active partners throughout pregnancy, childbirth, and the postpartum period (Dworetzky et al., 2023). This approach promotes collaborative relationships between healthcare professionals, mothers, and families through shared decision-making, open communication, mutual respect, emotional support, and shared caregiving responsibilities (Alruwaili et al., 2023; Cantor et al., 2024). By strengthening family engagement, FCMC seeks to create a supportive environment that facilitates maternal recovery and emotional adaptation during one of the most vulnerable stages of motherhood (Woldring et al., 2023).

Recent evidence suggests that family-centered approaches are associated with improved maternal psychological outcomes during the postpartum period. Active partner involvement and positive family engagement have been linked to lower emotional distress, greater breastfeeding confidence, improved maternal self-efficacy, and healthier mother–infant relationships (McLeish et al., 2023). Family-centered care may also facilitate maternal emotional adaptation through effective communication, emotional validation, shared responsibilities, and culturally responsive care. Although these benefits vary across healthcare settings and sociocultural contexts, available evidence consistently highlights the importance of meaningful family engagement in comprehensive postpartum care (Landry et al., 2023).

Despite these encouraging findings, important gaps remain. The implementation of Family-Centered Maternity Care (FCMC) remains inconsistent across healthcare settings, with postpartum services often prioritizing biomedical recovery over psychosocial support and family engagement (Landry et al., 2023). Existing studies and reviews have predominantly focused on postpartum depression, postpartum anxiety, or maternal mental health in general. In contrast, postpartum blues, the most common emotional disturbance during the early postpartum period, has received comparatively less attention (Landman et al., 2024). Furthermore, although family support has been widely recognized as beneficial, the literature provides limited explanation of how specific components of FCMC, including partner involvement, collaborative communication, shared decision-making, emotional support, shared caregiving responsibilities, and culturally responsive care, contribute to maternal emotional adaptation during postpartum blues (Alruwaili et al., 2023).

Another challenge is that family involvement is often interpreted as the physical presence of partners or other family members during pregnancy or childbirth, rather than as continuous engagement throughout the transition to parenthood (Landry et al., 2023). In many healthcare settings, family participation remains limited to accompanying mothers during labor or providing practical assistance after delivery, while their role in supporting mothers' emotional adjustment receives less attention (Afulani et al., 2023). In practice, however, meaningful family-centered maternity care extends beyond physical presence. It requires active collaboration between healthcare professionals and families to provide emotional reassurance, facilitate communication, respect mothers' experiences and preferences, and create a supportive home environment (Alruwaili et al., 2023). Without these essential components, family participation may become superficial and fail to adequately address mothers' emotional, informational, and practical needs during the early postpartum period, when emotional vulnerability is particularly high (Landry et al., 2023).

To address these gaps, this narrative literature review examines postpartum blues from the perspective of Family-Centered Maternity Care. Unlike previous reviews that focused primarily on postpartum depression or family support in general, this review explores how key components of Family-Centered Maternity Care, including partner involvement, family communication, shared decision-making, emotional support, shared caregiving responsibilities, and culturally responsive care, support maternal emotional adaptation and may reduce the risk of postpartum blues. This review addresses the following question: What evidence is available regarding the role of Family-Centered Maternity Care in facilitating maternal emotional adaptation and reducing the risk of postpartum blues among postpartum mothers?

METHOD

This narrative literature review examined the role of Family-Centered Maternity Care (FCMC) in reducing the risk of postpartum blues among postpartum mothers. The review focused on evidence describing how family-centered approaches, including partner involvement, family communication, shared decision-making, emotional support, shared caregiving responsibilities, and culturally responsive care, facilitate maternal emotional adaptation during the postpartum period. The review process was reported in accordance with the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) 2020 guidelines.

A literature search was conducted in PubMed, Scopus, ScienceDirect, and Google Scholar for articles published between 2021 and 2025. The Population–Concept–Context (PCC) search strategy framework was guided by postpartum mothers as the population, Family-Centered Maternity Care as the concept, and postpartum blues as the context. Search terms included "Family-Centered Maternity Care," "family-centered care," "family support," "partner involvement," "family

communication," "shared decision-making," "postpartum blues," "baby blues," "maternity blues," "maternal emotional adaptation," "maternal mental health," and "postpartum period," combined using the Boolean operators AND and OR. The complete search strategy for each database is presented in Table 1. Search strings were combined using the Boolean operators AND and OR and adapted to each database's indexing system.

Table 1. Search strategy based on the PCC framework

Component	Search terms
Population	postpartum mothers OR postpartum women
Concept	"Family-Centered Maternity Care" OR family-centered care OR family support OR partner involvement OR family communication OR shared decision-making
Context	postpartum blues OR baby blues OR maternity blues OR maternal emotional adaptation OR maternal mental health

Eligible studies were original research articles published in English between 2021 and 2025 that examined Family-Centered Maternity Care or family involvement during the postpartum period and reported outcomes related to postpartum blues, maternal emotional adaptation, or maternal mental health. Review articles, editorials, conference abstracts, commentaries, letters to the editor, duplicate publications, and studies without accessible full texts were excluded. The database search identified 253 records. After duplicate records were removed and titles and abstracts were screened, 46 articles were assessed for full-text eligibility. Following the full-text review, 14 studies met the inclusion criteria and were included in the final narrative literature review. The study selection process is illustrated in the PRISMA 2020 flow diagram (Figure 1).

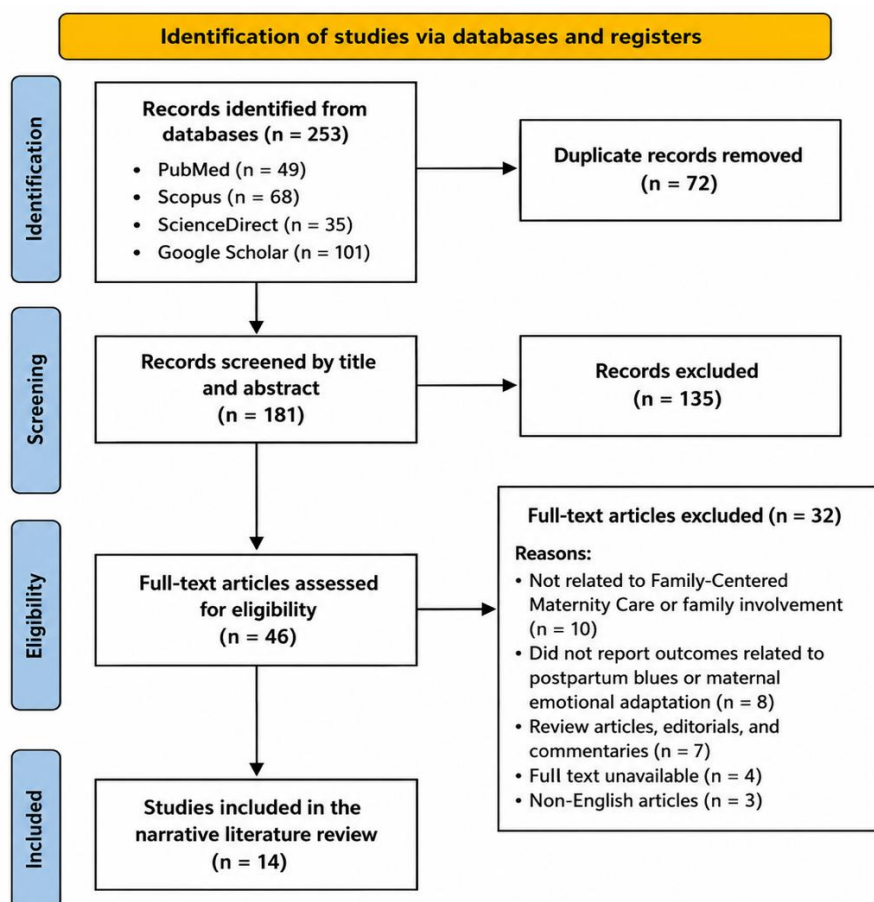


Figure 1. Search strategy based on the PCC framework

The methodological quality of the included studies was assessed using the Joanna Briggs Institute (JBI) Critical Appraisal Checklist. The appropriate checklist was selected according to the design of each included study. Quality appraisal was conducted to identify potential sources of bias and to support the interpretation of the findings rather than to determine study eligibility. Data extraction included the author, publication year, country, study design, participant characteristics, characteristics of Family-Centered Maternity Care, indicators of postpartum blues, maternal emotional adaptation, psychological outcomes, and the main findings. The findings were synthesized thematically by grouping similar concepts into broader themes describing how Family-Centered Maternity Care supports maternal emotional adaptation and its potential contribution to reducing the risk of postpartum blues. Ethical approval was not required because this review was based solely on previously published studies.

RESULT

Fourteen studies published between 2021 and 2025 met the inclusion criteria and were included in this review. As presented in Table 2, the studies were conducted across ten countries, including Hong Kong, the United States, Australia, South Korea, India, Indonesia, Türkiye, China, Portugal, and Pakistan, representing diverse healthcare settings and cultural backgrounds. Most studies employed quantitative designs, particularly cross-sectional and quasi-experimental approaches, while qualitative studies provided in-depth perspectives on mothers' postpartum experiences. The included studies primarily involved postpartum mothers, although several also included partners, family members, and healthcare professionals. Maternal psychological outcomes were assessed using various validated instruments and qualitative interviews, with the most commonly reported outcomes including postpartum depressive symptoms, anxiety, emotional adaptation, psychological resilience, postpartum traumatic stress, maternal–infant bonding, and family support.

Table 2. Characteristics and synthesis of the included studies

Author (Year)	Country	Study Design	Participants	Instrument	Main Outcome	Theme
Oktavia et al. (2025)	Indonesia	Quasi-experimental	Postpartum mothers	EPDS	Family-Centered Maternity Care improved maternal psychological outcomes and reduced postnatal depressive symptoms.	Emotional support; Communication
Khademi et al. (2023)	Iran	Cross-sectional (SEM analysis)	455 postpartum women	Postpartum Quality of Life Questionnaire ; Family Social Support Scale	Family social support had a positive direct and indirect effect on postpartum quality of life.	Emotional support
Jafari et al. (2023)	Iran	Qualitative	Mothers and NICU healthcare personnel	Semi-structured interviews	Communication barriers influenced the implementation of Family-Centered Care in neonatal services.	Communication

Author (Year)	Country	Study Design	Participants	Instrument	Main Outcome	Theme
Rajabzadeh et al. (2024)	Iran	Randomized controlled trial	Mothers of premature infants	PTSD Checklist	Family-centered education reduced post-traumatic stress symptoms among mothers of premature infants.	Emotional support; Communication
Ashifa et al. (2025)	Indonesia	Scoping review	Published studies	Literature synthesis	Husband's support consistently contributed to better maternal mental health and the prevention of postpartum depression.	Partner involvement
Pebryatie et al. (2022)	Indonesia	Cross-sectional	336 postpartum mothers	EPDS; Spousal Relationship Scale	Strong spousal relationships and husband involvement were associated with lower postpartum depression.	Partner involvement; Cultural sensitivity
Wang et al. (2023)	China	Cross-sectional	406 postpartum mothers	Perceived Social Support Scale; Marital Satisfaction Scale	Social support reduced postpartum stress through marital satisfaction and maternal attachment.	Emotional support; Cultural sensitivity
Xiao et al. (2024)	China	Cross-sectional	1,233 postpartum mothers	EPDS	Family support mediated the relationship between socioeconomic status and postpartum depressive symptoms.	Emotional support
Chen et al. (2024)	China	Cross-sectional	Postpartum women	PTSD Scale; Social Support Rating Scale	Greater social support was associated with lower postpartum PTSD symptoms.	Emotional support
Hameed et al. (2025)	Pakistan	Cross-sectional	Women after childbirth	Structured questionnaire	Birth companionship reduced postpartum anxiety and depression while improving childbirth experiences.	Partner involvement; Communication
Li et al. (2025)	China	Multicenter cross-sectional	230 postpartum women	Birth Trauma Scale	Partner involvement and emotional support were associated	Emotional support; Partner involvement

Author (Year)	Country	Study Design	Participants	Instrument	Main Outcome	Theme
					with lower birth trauma symptoms.	
Fidalgo et al. (2025)	Portugal	Cross-sectional	284 postpartum women	EPDS; STAI	Partner support during childbirth was associated with better maternal mental health, particularly among women with previous mental health problems.	Partner involvement
Rahyani et al. (2025)	Indonesia	Hermeneutic phenomenology	Postpartum women	In-depth interviews	Spousal and family support strengthened mothers' emotional coping and adaptation during the postpartum period.	Emotional support; Cultural sensitivity
Oktavia et al. (2025)	Indonesia	Quasi-experimental	Postpartum mothers	EPDS	Family-Centered Maternity Care improved maternal psychological outcomes and reduced postnatal depressive symptoms.	Emotional support; Communication

Across the included studies, the most commonly reported outcomes were postpartum depressive symptoms, anxiety, emotional adaptation, psychological resilience, postpartum traumatic stress, and maternal–infant bonding. The findings of the included studies were synthesized into four recurring themes: (1) emotional support as the core component of Family-Centered Maternity Care, (2) partner involvement and shared parenting responsibilities, (3) communication between healthcare providers and families, and (4) cultural sensitivity in postpartum care.

Emotional support was the most frequently reported component of Family-Centered Maternity Care across the included studies. Mothers who perceived greater emotional support from their partners and family members generally reported lower levels of sadness, loneliness, and emotional distress during the postpartum period (Chen et al., 2024; Khademi et al., 2023; Oktavia & Kanathasan, 2025; Wang et al., 2023; Xiao et al., 2024). Several studies also found that family support was associated with better emotional adaptation and greater resilience when mothers adjusted to the physical and psychological changes following childbirth (Kordsalarzahi et al., 2024; Li et al., 2025; Tavares et al., 2025). Qualitative findings further described that mothers valued emotional reassurance, empathy, and the continuous presence of spouses and family members, which helped them cope with emotional challenges during the early postpartum period (Rahyani et al., 2025).

Partner involvement also emerged as a recurring finding across the included studies. Active participation of partners in infant care, household responsibilities, and emotional support was consistently associated with better maternal psychological well-being and a smoother transition to parenthood (Ashifa et al., 2025; Li et al., 2025; Pebryatie et al., 2022; Tavares et al., 2025). Recent

studies further reported that women who received greater support from their partners during childbirth and the postpartum period experienced fewer symptoms of anxiety, depression, and childbirth-related traumatic stress (Hameed et al., 2025; Li et al., 2025; Tavares et al., 2025). In addition, shared caregiving responsibilities were frequently associated with increased maternal confidence and stronger family relationships during the postpartum period (Ashifa et al., 2025; Pebryatie et al., 2022).

Communication between healthcare providers and families was another recurring theme identified in this review. Several studies reported that involving family members in education, discussions, and shared decision-making improved their understanding of postpartum care and maternal emotional needs (Jafari et al., 2023; Kordsalarzahi et al., 2024; Oktavia & Kanathan, 2025). Clear communication also encouraged greater family participation in postpartum care and helped mothers feel more confident in caring for themselves and their infants (Hameed et al., 2025; Jafari et al., 2023). Across the included studies, communication was consistently described as an important component of family-centered postpartum care (Hameed et al., 2025; Jafari et al., 2023; Kordsalarzahi et al., 2024; Oktavia & Kanathan, 2025).

Cultural factors were also reported to influence family involvement during the postpartum period. The included studies suggested that cultural beliefs shaped mothers' perceptions of emotional support, family roles, and help-seeking behaviors following childbirth (Pebryatie et al., 2022; Wang et al., 2023). Qualitative findings from Indonesia further illustrated that support from spouses and extended family members was closely related to local cultural practices and family traditions (Rahyani et al., 2025). Mothers described culturally appropriate family support as an important part of their postpartum experience and emotional adjustment (Pebryatie et al., 2022; Rahyani et al., 2025).

DISCUSSION

This review highlights the potential contribution of Family-Centered Maternity Care (FCMC) to maternal emotional well-being during the postpartum period. Across the included studies, emotional support, partner involvement, effective communication, and culturally responsive care were repeatedly identified as central elements of family-centered postpartum care (Jafari et al., 2023; Khademi et al., 2023; Oktavia & Kanathan, 2025; Pebryatie et al., 2022; Rahyani et al., 2025). Together, these findings suggest that postpartum emotional adjustment is influenced not only by physical recovery after childbirth but also by the quality of relationships mothers have with their families and healthcare providers. This interpretation is consistent with recent evidence indicating that family-centered support promotes maternal psychological well-being and facilitates adjustment during the transition to motherhood (Khademi & Kaveh, 2024; Noonan et al., 2021).

One of the most consistent findings in this review was the importance of emotional support from partners and family members. Mothers who perceived greater emotional support generally reported lower levels of emotional distress, anxiety, and depressive symptoms during the postpartum period (Chen et al., 2024; Khademi et al., 2023; Li et al., 2025; Oktavia & Kanathan, 2025; Xiao et al., 2024). These findings are consistent with the stress-buffering model of social support, which proposes that emotional support can lessen the psychological impact of stressful life events by strengthening individuals' coping capacity. During the transition to motherhood, reassurance, empathy, and emotional availability from family members may help mothers interpret postpartum challenges as manageable rather than overwhelming (Rahyani et al., 2025). This supportive environment may help mothers feel more emotionally secure and adapt more positively to the

postpartum period. This finding is consistent with recent systematic reviews highlighting the benefits of interventions that strengthen social support (Sharifipour et al., 2022).

The findings also highlight the importance of partner involvement as a core component of Family-Centered Maternity Care. Across the included studies, active participation of partners in infant care, household responsibilities, and emotional support was consistently associated with better maternal emotional well-being and psychological adjustment during the postpartum period (Ashifa et al., 2025; Hameed et al., 2025; Li et al., 2025; Pebryatie et al., 2022; Tavares et al., 2025). Shared caregiving may reduce maternal role overload and enhance mothers' confidence in adapting to new parenting responsibilities. Consistent with Family Systems Theory, active partner involvement can strengthen family functioning and collaborative parenting while supporting maternal emotional well-being. These findings align with a recent systematic review showing that father-inclusive interventions improve maternal, paternal, and family outcomes (Jeong et al., 2023).

Communication between healthcare providers and families also emerged as an important component of Family-Centered Maternity Care. The included studies suggested that involving partners and other family members in education and shared decision-making improved their understanding of postpartum emotional changes and enhanced their ability to provide appropriate support (Hameed et al., 2025; Jafari et al., 2023; Kordsalarzehi et al., 2024; Oktavia & Kanathasan, 2025). From a nursing perspective, effective communication helps translate clinical information into practical family support, enabling family members to recognize maternal emotional needs better and respond appropriately during the postpartum period. This finding is consistent with recent evidence showing that family-centered communication promotes greater family engagement, shared decision-making, and more responsive postpartum care (Alqarawi & Alhalal, 2024; McCarter et al., 2022).

Another finding of this review was the influence of cultural values on mothers' emotional experiences after childbirth. Rahyani et al. (2025) showed that family traditions and local beliefs shaped mothers' perceptions of emotional support, family roles, and help-seeking during the postpartum period. Participants described support from spouses and extended family members as an important resource for emotional adjustment, illustrating how family-centered care is closely intertwined with local cultural practices. These findings suggest that Family-Centered Maternity Care should be adapted to the cultural context of each community while providing a safe environment for mothers to express their emotional needs. This interpretation is supported by a recent systematic review showing that family-based support interventions are more effective when tailored to the social and cultural context of postpartum care (Sharifipour et al., 2022). Similarly, a recent meta-analysis found that support from extended family members was associated with better maternal mental health, highlighting the value of culturally responsive family support during the transition to motherhood (Riem et al., 2023).

Although the findings generally support the value of Family-Centered Maternity Care, the available evidence also suggests that its effectiveness may vary across individuals and care settings. Several included studies reported positive associations between family support and maternal emotional well-being (Chen et al., 2024; Khademi et al., 2023; Li et al., 2025; Xiao et al., 2024), whereas the magnitude of these benefits appeared to depend on factors such as relationship quality, family dynamics, and the availability of social and healthcare resources (Rahyani et al., 2025). Recent evidence likewise indicates that family-centered interventions are most effective when integrated with broader psychosocial and health system support rather than implemented as a stand-alone strategy (Sharifipour et al., 2022). Therefore, Family-Centered Maternity Care should be considered an important component of comprehensive postpartum care rather than a universal solution for maternal mental health.

This review contributes to the growing body of evidence on Family-Centered Maternity Care by synthesizing recent findings on maternal emotional well-being in the postpartum period. Unlike previous reviews, which have primarily focused on social support interventions or specific postpartum mental health outcomes, this review integrates emotional support, partner involvement, communication, and cultural sensitivity within a single family-centered care framework. By bringing these interrelated components together, the review provides a broader understanding of how family-centered approaches may facilitate maternal emotional adaptation and strengthen psychosocial support during the transition to motherhood. These findings complement recent systematic reviews highlighting the importance of strengthening social support and family engagement as essential components of comprehensive postpartum care (Sharifipour et al., 2022; Sufredini et al., 2022).

The findings also have important implications for nursing practice, education, and health policy. Nurses and midwives should routinely assess maternal emotional well-being while actively involving partners and family members in postpartum care. Family-centered education, therapeutic communication, and emotional support strategies can be integrated into routine maternity services to strengthen family participation and improve the continuity of postpartum care. These recommendations are consistent with recent evidence emphasizing the importance of family-centered nursing practices and supportive postpartum interventions in improving maternal psychosocial outcomes (Alqarawi & Alhalal, 2024; Landry et al., 2023). Nursing education should continue to emphasize family-centered care, communication skills, and culturally responsive practice so that future healthcare professionals are better prepared to address maternal mental health needs. At the policy level, postpartum care programs may benefit from integrating family-centered approaches into existing maternal and child health services to facilitate early identification of emotional difficulties and provide timely psychosocial support, consistent with recent evidence supporting coordinated and continuous postpartum care (Huang et al., 2026).

Several limitations should be considered when interpreting the findings of this review. First, the included studies varied substantially in study design, sample characteristics, cultural settings, and outcome measures, making direct comparison across studies challenging. Second, most of the included studies were observational, limiting the ability to draw causal conclusions about the effectiveness of Family-Centered Maternity Care. Third, the included studies assessed a range of postpartum psychological outcomes, including depressive symptoms, anxiety, emotional adaptation, psychological resilience, and maternal-infant bonding, using different measurement instruments. This heterogeneity limited direct comparison across studies.

Future research should prioritize well-designed intervention studies to assess the effectiveness of structured Family-Centered Maternity Care programs in improving maternal emotional well-being, psychological adaptation, and family engagement during the postpartum period. Longitudinal studies are also needed to examine how family support influences maternal psychological adaptation over time. In addition, future research should explore culturally adapted family-centered interventions, digital family support programs, and the influence of socioeconomic conditions, family structure, and healthcare accessibility on maternal emotional well-being during the postpartum period.

CONCLUSION

This narrative literature review highlights the potential of Family-Centered Maternity Care (FCMC) to support maternal emotional well-being during the postpartum period. Across the included studies, emotional support, partner involvement, effective communication, and culturally responsive care consistently emerged as key elements of postpartum care. Together, these components

facilitate maternal emotional adaptation, strengthen family engagement, and foster a supportive environment during the transition to motherhood. The findings also underscore the important role of nurses and midwives in implementing family-centered approaches through emotional assessment, family education, therapeutic communication, and active family involvement. Integrating these components into routine postpartum services may enhance psychosocial support while encouraging greater involvement of partners and families. Future research should prioritize well-designed longitudinal and intervention studies to evaluate the effectiveness of structured Family-Centered Maternity Care across diverse cultural and healthcare settings and further clarify its role in promoting maternal emotional well-being.

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CONFLICT OF INTEREST

The authors declare no conflicts of interest related to this study.

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