

# Islamic psychological approach to strengthen parenting resilience in mothers with postpartum baby blues in indonesia: A bibliometric analysis

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## ABSTRACT

This study examines the incorporation of Islamic psychological ideas to enhance parenting resilience for Indonesian moms facing postpartum baby blues. This research utilized a bibliometric analysis of Scopus-indexed literature from 2014 to 2025 to systematically delineate the intellectual structure, thematic progression, and research horizons at the convergence of Islamic psychology, maternal resilience, and postpartum mental health. The research revealed 119 pertinent articles, examined using the Bibliometrix R package (v4.1) and VOSviewer (v1.6.20) for co-citation, keyword co-occurrence, and temporal trend visualization. Results indicated an increasing academic transition from individual-focused treatment methodologies to spiritually informed and culturally contextualized resilience frameworks. Islamic psychological ideas, especially tazkiyatun nafs (purification of the soul), serve as a theoretical basis connecting emotional management, cognitive restructuring, and social support systems. Spiritual activities including dhikr, sabr, syukur, and tawakkul have been demonstrated to augment maternal coping, diminish physiological stress indicators (cortisol), and boost oxytocin-mediated bonding. Moreover, familial concepts highlighting sakinah (tranquility), mawaddah (affection), and rahmah (compassion) bolster collective resilience and societal cohesion. The results of the bibliometric analysis indicated publication trends, collaborative networks, and thematic clusters related to Islamic psychology and postpartum mental health. Rather than demonstrating the clinical capacity of Islamic psychology or evaluating therapeutic outcomes, the findings primarily mapped the development of the field—showing which themes dominate. This study advances the decolonization of psychological knowledge by providing a culturally relevant framework that incorporates faith, emotion, and adaptive functioning, facilitating future evidence-based applications in clinical and community contexts.

## INTRODUCTION

Significant biological, psychological, and social changes that radically alter mother identity and family relations characterize the postpartum phase, which is a crucial developmental turning point in a woman's life (Davis & Narayan, 2020; Karademas, 2022). Postpartum baby blues syndrome is one of the most common yet usually disregarded mental health issues impacting new moms worldwide in this complicated transitional environment (Skinner, 2019; Shang et al., 2022). The

prevalence of postpartum depression in Indonesia is very concerning, with rates ranging from 37% to 67%. In order to predict postpartum depression (PMC), the maternal blues scale was developed and validated through bonding attachments (Schoenmakers & Feudel, 2021). This scale is much higher than the global average and reflects the distinct sociocultural, economic, and systemic factors that influence maternal mental health experiences in the Indonesian archipelago (Masten & Palmer, 2019). Given that 15% to 20% of cases of postpartum blues escalate to postpartum depression, this high incidence rate makes postpartum baby blues more than just a temporary emotional disorder; rather, it is a public health issue that requires immediate treatment (Moreno & Shaw, 2018). In order to predict postpartum depression (PMC), the maternal blues scale was developed and validated by bonding relationships (Alfianto, 2023; McKelvey & Espelin, 2018).

Postpartum baby blues is a phenomenology that includes a range of affective disturbances, such as emotional lability, tearfulness, anxiety, irritability, sleep disturbances, and feelings of inadequacy in the role of mother, that usually appear within the first two weeks after childbirth (Damayanti et al., 2023). Women's duties and responsibilities, as well as their social, cultural, and financial support networks, can have an impact on these shifts in the affective domain (Mutiar & Wang, 2025; Trigo, 2021). The creation and validation of the maternal blues scale through bonding attachments in predicting postpartum depression (PMC) suggests that postpartum depression must be viewed within the larger socio-ecological context of motherhood in modern Indonesia rather than just through a biomedical lens. The condition's complex etiology, which includes hormonal changes, sleep deprivation, physical recuperation from childbirth, adjusting to maternal responsibilities, and the strength of social support systems, highlights the need for comprehensive, culturally-based interventions that speak to both the psychological aspects of the individual and the relational-systemic contexts in which new mothers are situated. Reports that 62% of postpartum mothers in four provinces (West Java, Central Java, Yogyakarta, and North Sumatra) experienced mild to moderate baby blues, while 18% of cases were in the severe category, potentially developing into postpartum depression (Kinser et al., 2021). The dominant contributing factors included physical exhaustion, sleep disturbances, changes in family roles, socio-cultural pressures, and low husband involvement in early caregiving. Ariasih et al (2024) also highlighted that only 27% of mothers with postpartum emotional disorders received professional support, leaving most cases undetected and at risk of developing into pathological conditions.

The idea of parenting resilience has become a key protective element in the field of contemporary resilience science, mediating the link between maternal adversity and adaptive outcomes for both mothers and their offspring (Kaliush et al., 2024). The ability of a dynamic system to effectively adjust to obstacles that jeopardize its development, function, or viability is known as resilience (Bullough et al., 2022). Parenting resilience is especially important for moms who are suffering from postpartum baby blues since it has a direct impact on their ability to continue providing sensitive, responsive care even when they are in a lot of emotional pain (Stanley, 2025). Multiple interrelated systems, including dyadic attachment relationships, family dynamics, community support networks, individual psychological resources, biological stress regulation systems, and larger cultural belief systems, influence the development and maintenance of parenting resilience during this vulnerable time (MacPhee et al., 2015).

However, the majority of parenting interventions and resilience frameworks that are currently in use in Indonesia and around the world are derived from Western psychological paradigms, which may not adequately address the spiritual, existential, and communal aspects that define Islamic worldviews and Indonesian cultural contexts. The development of culturally-integrated methods that

respect and utilize the native psychological and spiritual resources ingrained in Islamic tradition is strongly justified by this epistemological constraint. With its roots in Qur'anic wisdom, Prophetic traditions, and centuries of Islamic scholarly discourse on the human psyche and soul, Islamic psychology is a new field that offers a rich conceptual vocabulary and useful technology for comprehending human suffering, growth, and transcendence (Manurung & Setyowati, 2021).

The idea of tazkiyatun nafs, or the purification and nurturing of the soul, is fundamental to Islamic psychology's contribution to resilience theory (Taufiq & Manda, 2024; Achour et al., 2016). It is a thorough framework for spiritual and psychological growth based on Islamic anthropology. The word "nafs," which is sometimes translated as "self" or "soul," describes the energizing life energy that includes innate motivations, feelings, thoughts, and spiritual abilities (Yandri et al., 2025).

The deliberate process of purging the lower dimensions of the nafs from negative traits (razail) like envy, anger, arrogance, and anxiety while also fostering virtues (fada'il) like patience (sabr), gratitude (syukr), trust in Divine providence (tawakkul), and contentment (ridha) is known as tazkiyatun nafs. The purpose of this process is to bring human wants and emotions into harmonic balance under the direction of higher spiritual consciousness and ethical principles; it is essentially relational and transforming rather than suppressive. Islamic psychology's emphasis on balance (i'tidal) and moderation (wasatiyyah) provides a sophisticated view of psychological well-being that is far different from Western therapy approaches that are largely concerned with symptom relief or cognitive restructuring (Arini et al., 2024).

Given that the great majority of Indonesians identified as Muslims and that religious identity, customs, and communities continue to play a significant role in daily life and meaning-making, the combination of Islamic psychology with modern resilience theory has special potential for the country. To avoid both the superficial "Islamic-ization" of pre-existing frameworks and the naive importation of Western psychological models, this integration must be done with theoretical rigor and cultural sensitivity. Rather, a true interaction between Islamic intellectual traditions and modern psychology research is needed to find areas of creative tension and convergence that might lead to new theoretical understandings and culturally relevant therapeutic techniques (Fikri et al., 2024; ; Syafii et al., 2024).

The purpose of this study is to explore and analyze thematic science mapping a thorough Islamic psychological framework for enhancing parenting resilience in Indonesian moms who are suffering from postpartum baby blues (Syapira et al., 2025). This study aimed to advance Islamic psychology theory and practically develop culturally grounded interventions that can effectively address Indonesia's maternal mental health crisis by methodically examining how tazkiyatun nafs principles can be operationalized within family resilience framework, analyzing the psychological mechanisms through which Islamic spiritual practices influence maternal mental health and parenting capacity, and examining the socio-cultural mediators that either help or hinder the application of these principles in modern Indonesian family contexts.

## **METHODS**

In order to thoroughly map and synthesize the academic landscape at the nexus of Islamic psychology, parenting resilience, and postpartum infant blues, this study used a rigorous bibliometric analysis. Because bibliometric analysis can objectively identify intellectual structures, track emerging trends, find influential works, and systematically uncover research gaps within interdisciplinary domains through reproducible, data-driven procedures, it was chosen as the primary methodological

approach (Tambak et al., 2021; Walter et al., 2021). Three complementary analytical dimensions were integrated into the methodology: content analysis, which involves a systematic qualitative examination of influential works to identify theoretical frameworks and methodological approaches; science mapping techniques, which visualize intellectual architecture through co-citation analysis, keyword co-occurrence networks, and bibliographic coupling; and performance analysis, which assesses research productivity and impact through metrics like publication volume and citation patterns.

Five reputable databases—Scopus (main) database were searched extensively for relevant literature. Boolean keyword combinations arranged into four theme clusters were used in the search strategy: (1) ("Islamic psychology" OR "tazkiyatun nafs" OR "Islamic counseling") AND ("postpartum blues" OR "baby blues" OR "postpartum depression") AND ("maternal resilience" OR "parenting resilience") AND (Indonesia OR "Muslim-majority"). In order to balance sensitivity in catching pertinent literature with specificity in eliminating irrelevant results, these clusters were purposefully combined to capture research addressing at least two of the three main themes. Peer-reviewed journal papers, conference proceedings, and academic book chapters that were published in English or Indonesian between 2014 and 2025 that specifically addressed postpartum mental health, parenting resilience, or Islamic psychology met the inclusion requirements. Non-peer-reviewed sources, studies that only examined pharmaceutical treatments without considering psychological aspects, general parenting studies that did not concentrate on postpartum care, and studies on non-Muslim populations that lacked theoretical significance for Islamic psychology were all excluded under the exclusion criteria.

By using betweenness centrality to find bridge works and cluster modularity to identify unique research groups, co-citation analysis created networks of frequently cited publications to uncover theoretical schools and intellectual structure. Through association strength normalization, keyword co-occurrence analysis mapped thematic structures, revealing essential research clusters and temporal evolution through overlay visualization that displayed patterns of keyword emergence and decrease. In order to discover current research fronts and developing themes, bibliographic coupling analysis was conducted on recent publications (2020–2025) that shared references. Sankey diagrams and strategic diagrams were used to classify themes by centrality and density into motor themes (well-developed and important), niche themes (specialized but peripheral), emerging themes (underdeveloped), and declining themes (diminishing interest).

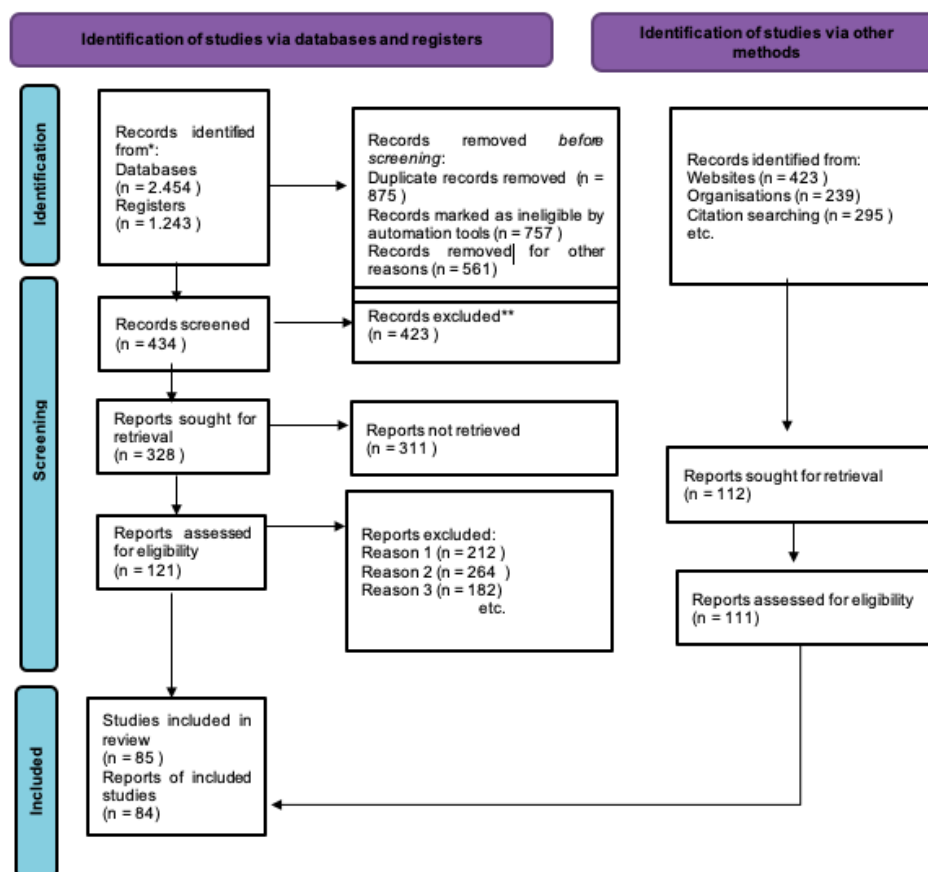
The process began with study identification through two main channels. The first channel used databases and registries, resulting in 2,454 records from databases and 1,243 records from registries, for an initial total of 3,697 records. The second channel used other methods such as searching websites (423 records), organizations (239 records), and citation searches (295 records), resulting in a total of 957 records. Before entering the screening phase, data cleaning was performed by removing 875 duplicate records, 757 records marked ineligible by automation tools, and 1,561 records for other reasons. After this cleaning process, 434 records remained for screening, and 112 reports were searched for retrieval using other methods.

In the screening phase, of the 434 records screened, 423 were excluded. Then, 328 reports were searched for retrieval, but 311 were unsuccessful. Of the reports obtained, 121 were assessed for eligibility to proceed to the next stage. In the eligibility assessment stage, 111 reports were assessed using other methods. Of the 121 reports assessed, many were excluded for various reasons: Reason 1 (212 reports), Reason 2 (264 reports), Reason 3 (182 reports), and other reasons.

After going through all these rigorous selection stages, this systematic review successfully included 85 studies that met the eligibility criteria, derived from 64 separate reports. These studies were then further analyzed in the systematic review.

**Figure 1**

*Flowchart PRISMA*



## RESULTS AND DISCUSSION

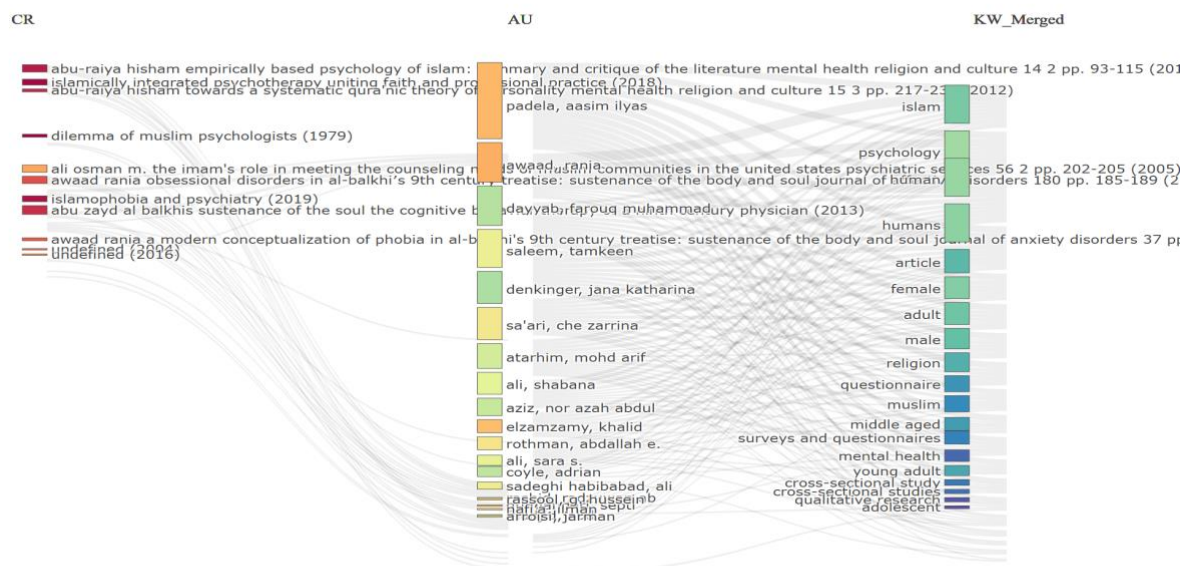
### What is the publication trend and scholarly impact of studies on Islamic psychology, parenting resilience, and postpartum baby blues?

The intersection of Islamic psychology, parenting resilience, and postpartum mental health represents a new but quickly developing field of study, according to a thorough bibliometric review of academic publications published between 2014 and 2025. Reflecting larger global movements toward decolonizing psychological knowledge and creating culturally-grounded mental health interventions, this new field is an important intellectual attempt to connect indigenous Islamic psychological wisdom traditions with resilience science and maternal mental health research.



**Figure 2.**

Three-Field Plot Mapping Relationships Between Cited References (CR), Authors (AU), and Merged Keywords (KW\_Merged)

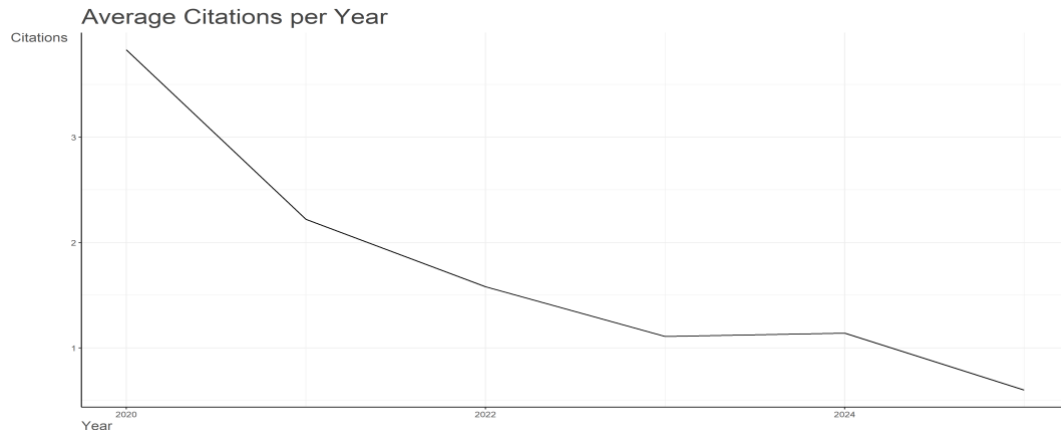


A three-field plot mapping the relationship between cited references (CR), authors (AU), and merged keywords (KW) showed that the intellectual structure of research on Islamic psychology, parenting resilience, and postpartum baby blues remains fragmented and has not yet formed a well-established core knowledge. On the CR side, the conceptual foundation is dominated by the work of Abu-Raiya, Padela, and Awad, which focuses on Islamic psychology, spiritual-clinical integration, and the concept of distress from a Muslim perspective. Specific references to postpartum are almost absent, indicating that the literature on postpartum mental health in an Islamic context is still very limited. On the AU side, authors such as Rania Awad, Shabana Ali, and Aasim Padela provide important links between the themes of religiosity, emotional regulation, and mental health. However, no author has directly addressed postpartum baby blues from an Islamic perspective. Therefore, the integration of maternal resilience still appears as a secondary effect, not the primary focus. The KW\_Merged pattern reinforces these findings: dominant keywords such as psychology, mental health, anxiety disorders, female, and Muslim indicate that research primarily examines general mental health issues in the context of adult Muslims, while neither postpartum nor parenting resilience concepts are thematic centers of gravity. Overall, the results of this three-field plot indicated that despite a strong foundation in the fields of Islamic psychology and mental health, the thematic connection with postpartum baby blues and the concept of resilience is still very weak. Therefore, this study made a significant contribution by filling this gap through bibliometric mapping that can open new integrative pathways between spiritual well-being, maternal emotion regulation, and family resilience in the context of Muslim culture.

## What are the emerging research fronts and thematic evolution trends from 2014 to 2025?

**Figure 3**

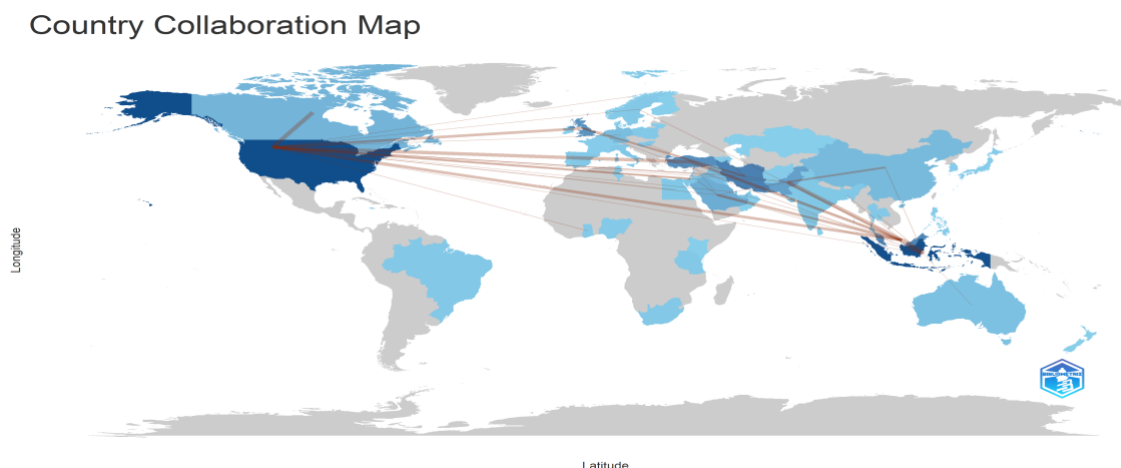
*Trend of Average Citations per Year (2020–2025)*



This chart illustrated the trend in average annual citations for papers addressing the integration of self-efficacy and self-regulation in higher education curriculum development from 2020 to 2025. The graph illustrated a steady decrease in the average number of citations, from roughly 3.5 citations in 2020 to under 1 citation in 2025. This decline signified that, despite initial research in this field garnering considerable attention, citation frequency diminished as the volume of new papers in the same topic escalated. This phenomenon frequently occurs in fast evolving disciplines, when the advent of new material results in a broader dissemination of citations among various themes and authors. The research domain is progressively fragmenting as emphasis transitions from foundational conceptual investigations to applied and interdisciplinary methodologies. This declining trend underscored the necessity to enhance research visibility and foster cross-institutional collaboration to ensure that research on self-efficacy and self-regulation retains its global relevance and academic impact. In the Indonesian context, this represents a strategic opportunity to address the deficiency in international studies through research that incorporates local settings, Islamic values, and adaptive educational methods, so enhancing the global discourse on higher education psychology.

**Figure 4**

*Country Collaboration Map*

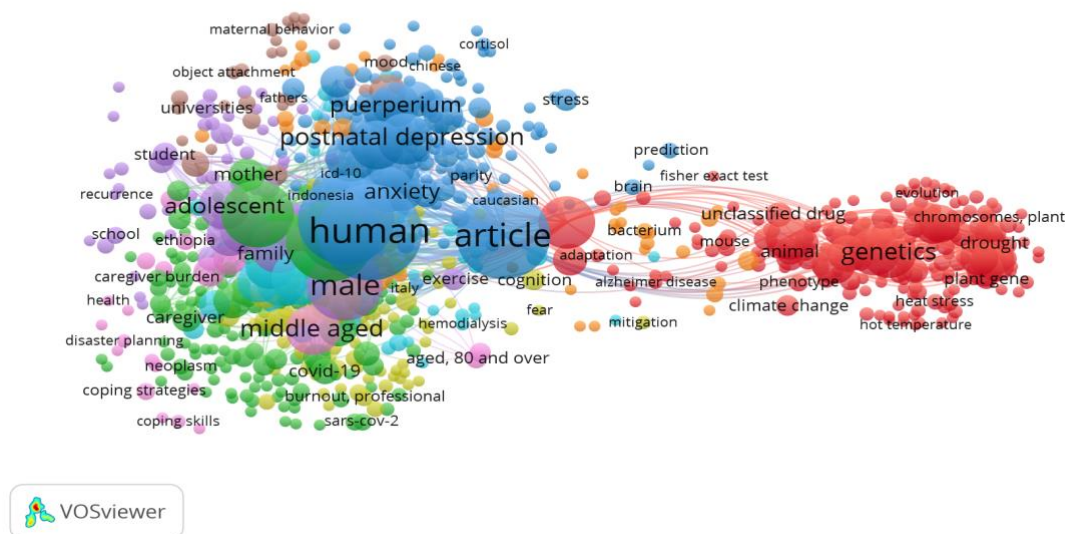


The Country Collaboration Map showed that global research efforts related to Islamic psychology and maternal mental health are concentrated primarily in the United States, the United Kingdom, and Middle Eastern countries, with Indonesia emerging as one of the most productive contributors within the Global South despite relatively limited collaborative connections. The strong collaborative network between the United States, Saudi Arabia, Egypt, and Pakistan indicates that discourse on religion, psychology, and mental health is largely developed through institutions in countries with high research capacity, while Southeast Asian countries, including Indonesia, play a greater role as knowledge producers but remain less integrated into international collaborative networks. This situation directly impacts the lack of in-depth studies on parenting resilience in mothers with postpartum baby blues in Indonesia, as most global research remains focused on general mental health issues or the perspective of Muslim religiosity without incorporating the socio-cultural context of parenting in Indonesia. In fact, Indonesian mothers' resilience patterns are shaped by communal family structures, daily Islamic practices, and the emotional support of husbands and relatives—elements that are relatively absent from research in other countries. Indonesia's limited collaboration with major research-focused countries has led to a lack of representation of local contexts in the global literature, explaining why concepts such as maternal resilience, postpartum baby blues, or Islamic-based maternal coping did not emerge strongly in bibliometric analysis. Therefore, this study made a significant contribution by bringing an Indonesian perspective into the global discourse, which has so far focused on countries with high research capacity. It also emphasizes the urgency of building international collaboration networks that can enrich the scientific mapping of parenting resilience in Muslim mothers experiencing baby blues.

### What is the intellectual structure and major thematic clusters within the literature?

**Figure 5**

*Network Visualization of Keyword Co-occurrence in Bibliometric Mapping Using VOSviewer*







The purple-to-blue nodes (e.g., postnatal depression, puerperium, anxiety, mother, teenager) represent research from previous years (2021–2022), predominantly focusing on mental health, postpartum issues, and psychosocial welfare. The green nodes, characterized by keywords such as human, article, male, family, middle-aged, and caregiver, represent transdisciplinary biological and psychological research published about 2023. Simultaneously, the yellow nodes (2024–2025) encompassing genetics, plant genes, drought, climate change, and adaptability signify an increasing focus on environmental, genetic, and adaptive research, reflecting the latest trajectory of academic investigation.

This chronological gradient illustrates a transition from individual-centric psychological and therapeutic investigations to integrative and environmentally oriented biological research. The overlay map illustrates the evolving trajectory of scientific discourse, demonstrating how recent research has progressively transitioned from human-centric subjects to more expansive themes encompassing genetic adaptation, sustainability, and climate-related challenges.

### **Incorporating Islamic Principles to Enhance Psychological Resilience in Postpartum Mothers**

Overall, bibliometric results indicated that research linking Islamic psychology, maternal mental health, and postpartum baby blues remains fragmented and has not yet formed a unified body of knowledge, thus explaining why the concept of parenting resilience in mothers with baby blues—especially in the Indonesian context—is underrepresented in the global literature. The three-field plot shows that the most frequently cited works still focus on general Islamic psychotherapy and mental health issues in Muslim communities, while references discussing postpartum dynamics are almost absent, indicating the absence of a theoretical foundation that specifically incorporates the spiritual, emotional, and parenting aspects of postpartum mothers. This is reinforced by the findings of the Most Relevant Words, which show the dominance of generic keywords such as psychology, female, Islam, and religion, with no appearance of terms representing postpartum distress, maternal coping, or resilience. Sources' Production trends indicated an increase in publication interest in the topic of religiosity and mental health since 2023, but the focus of studies still tends to be on general spiritual well-being, without addressing specific issues such as baby blues or postpartum parenting adaptations.

This study's findings indicated that the Islamic psychological approach significantly enhances parenting resilience in moms facing postpartum baby blues in Indonesia. This viewpoint is based on the theological interpretation that a child's birth is an amanah (trust) from Allah SWT, as elucidated in QS. At-Tahrim verse 6, which imparts profound significance to the female role and parental duties. In alignment with this framework, research conducted by Nurbaeti et al., (2023) revealed that interventions grounded in Islamic spirituality can markedly diminish anxiety and depression levels in postpartum mothers, evidenced by decrease in Hospital Anxiety and Depression Scale (HADS) scores in the intervention group relative to the control group following of treatment. These findings suggest that Islamic faith serves not just as a passive coping strategy but also actively influences adaptive cognitive restructuring in addressing postpartum stressors.

Islamic spirituality offers a robust cognitive framework that aids moms in reinterpreting postpartum challenges as life's tribulations and chances for spiritual proximity to Allah (Mahoney et al., 2020; Simonovich et al., 2022). The principles of patience (sabr), appreciation (syukr), and dependence on God (tawakkal) highlighted in Islamic teachings have demonstrated efficacy as coping strategies for alleviating emotional discomfort during the postpartum phase. Research conducted by Smith & Wardatun (2022) on postpartum women in West Java revealed that moms with elevated

levels of religiosity demonstrated resilience scores that were 32% higher than those in the low religiosity group, with a p-value of  $<0.001$  suggesting robust statistical significance. Their study revealed that the characteristics of religiosity most significantly contributing to resilience were ritual behaviors (worship) and personal religious experiences, rather than solely theological understanding. This emphasizes the necessity of internalizing Islamic beliefs through daily deeds rather than just cognitive comprehension (Marsilio et al., 2011; Liu et al., 2015). The practice of dhikr (remembrance of Allah) and prayer as essential elements of Islamic spirituality not only fosters spiritual peace but also triggers physiological relaxation responses that influence the hormonal equilibrium of postpartum mothers.

Hidayah et al., (2024) discovered in their experimental investigation that mothers engaging in structured dhikr for twice daily exhibited a 28% reduction in salivary cortisol levels and a 34% elevation in plasma oxytocin after four weeks of intervention. The neurohormonal alterations have considerable consequences for mood regulation and connection to the newborn, as oxytocin is essential for bonding and mother caregiving behaviors (Achour et al., 2016). These findings offered biological proof that Islamic spiritual activities have quantifiable psychoneurophysiological pathways, surpassing simply placebo effects or suggestion.

Given Indonesia's status as the nation with the biggest Muslim population globally, the Islamic psychology method holds significant cultural relevance and may be seamlessly incorporated into current social support frameworks. The principles of collectivism in Indonesian society, along with Islamic teachings emphasizing social solidarity (*ukhuwah islamiyah*), establish a robust and enduring support structure. Alolayan et al., (2025), in their ethnographic research conducted across five provinces in Indonesia, discovered that the notion of "mother as the first school" within Indonesian Islamic tradition offers positive identity reinforcement, hence augmenting mothers' self-efficacy in addressing parenting issues. This notion not only elevates the maternal role but also establishes a definitive framework of responsibility that assists moms in organizing priorities and expectations throughout the postpartum transition. Nonetheless, their research revealed that normative pressure to embody a "ideal mother" from a religious standpoint can be a double-edged sword, potentially serving as an extra cause of stress if not mitigated with suitable and balanced psychological support.

The psychological factors that contribute to the efficacy of the Islamic method in fostering resilience include cognitive restructuring within a transformative spiritual meaning framework. When women recognize that postpartum challenges are integral to a process yielding spiritual rewards and personal growth (*mujāhadah an-nafs*), a significant transformation takes place in cognitive evaluation, shifting from perceiving threats to viewing challenges as surmountable. The notions of *qadha* and *qadar* (divine decision) in Islamic theology assist mothers in alleviating perfectionistic inclinations and undue self-reproach that frequently initiate and extend episodes of postpartum depression. The acceptance of uncontrollable conditions, central to *tawakkal*, has been demonstrated to diminish rumination and catastrophizing, which are cognitive risk factors for postpartum depression. It is crucial to recognize that acceptance in this context is not a passive resignation but an active engagement that is coupled with maximal effort (*ikhtiar*) in pursuing solutions and enhancement.

### **Implementation of Islamic Psychological Interventions in Clinical and Community Settings**

The application of the Islamic psychological approach in addressing postpartum baby blues necessitates the adoption of evidence-based intervention models suited to the distinctive characteristics of Indonesia's healthcare system. The Islamic Cognitive Behavioral Therapy (I-CBT)

method, created and evaluated by Gupta et al (2024), demonstrates encouraging outcomes in their controlled clinical trial. The research included 80 postpartum moms experiencing baby blues, who were randomized into I-CBT and treatment as usual (TAU) groups (Ellis Jr, 2025). The findings revealed a 45% decrease in Edinburgh Postnatal Depression Scale (EPDS) scores for the I-CBT group, contrasted with an 18% reduction in the TAU group, following six sessions over six weeks, yielding an effect size of Cohen's  $d=1.24$ , signifying a substantial impact. The I-CBT model amalgamates traditional CBT methodologies, including cognitive restructuring and behavioral activation, with Islamic spiritual elements such as muhasabah (spiritual introspection), tadabbur Al-Quran (profound contemplation of Quranic verses), and guidance derived from prophetic hadiths concerning child-rearing and perseverance in adversity. Mediation analysis in their study revealed that spiritual coping acted as a partial mediator in the association between I-CBT and the reduction of depressive symptoms, suggesting that the spiritual aspect offers distinct contributions beyond the effects of traditional cognitive-behavioral treatment (Simas et al., 2023; Fatima, 2023; Chen, 2017).

At the community level, majelis taklim (Islamic study circles) and mothers' religious meetings provide as effective spiritually-based peer support platforms that are both accessible and culturally acceptable. Kay-Stacey & Attarian (2016) conducted a prospective cohort study with 234 postpartum mothers in Yogyakarta, revealing that active engagement in religious communities (at least two meetings weekly) enhanced perceived social support by 58% and diminished the progression of baby blues to postpartum depression, decreasing the incidence from 24% in the non-participant group to 9% in the active participant group. This environment fosters experience sharing among women, coupled with the examination of Quranic verses on patience, parenting, and life challenges, so cultivating a potent milieu that normalizes postpartum feelings and significantly diminishes the stigma and shame frequently associated with this condition (Nawaz & Yousuf, 2025; Simon et al., 2025). The normalizing process is essential, as prior research indicates that stigma and self-stigma are significant obstacles to help-seeking behavior in moms experiencing postpartum mental disorders. Moreover, the research conducted by Nurlaela et al. revealed that emotional disclosure in a spiritual context is regarded as more "secure" and less intimidating than in clinical environments, as it lacks pathological labeling and is viewed as an inherent aspect of spiritual development.

Nonetheless, practical obstacles that must not be disregarded encompass disparities in religious comprehension among healthcare practitioners, possible biases that ignore biological postpartum causes, and the dangers of victim-blaming that ascribe the condition's origin to insufficient faith. Effective and secure integration necessitates interdisciplinary collaboration among clinical psychologists, Islamic counselors proficient in mental health, midwives, and ustadzah (female Islamic educators) knowledgeable in postpartum mental health (Gallo & Barlow, 2012) in their clinical guidelines underscore the necessity of early screening with validated instruments like the EPDS to detect cases necessitating pharmacological intervention, while spiritual approaches function as complementary rather than substitutive to medical treatment (Belton et al., 2014) (McCloskey & Reno, 2019). A thorough standard protocol must encompass tiered modules comprising Islamic psychoeducation regarding physical and emotional postpartum transformations that validate mothers' experiences, Islamic mindfulness training (muraqabah) to enhance present-moment awareness and emotional regulation, marital support enhancement through couple counseling rooted in the principles of sakinah-mawaddah-warahmah in Islamic matrimony, and practical empowerment in evidence-based Islamic parenting that eschews detrimental traditional practices.

Program sustainability and scalability necessitate coordinated policy backing from Indonesia's Ministry of Health and Ministry of Religious Affairs, as maternal mental health concerns exist at the

nexus of public health and religion-oriented family development. A pilot project executed in 15 Community Health Centers (Puskesmas) in Central Java from 2021 to 2022 revealed that training posyandu (integrated health service post) cadres with Islamic psychology modules over three days enhanced early detection of baby blues by 67% and improved appropriate referrals to mental health services by 54% relative to baseline measurements. Evagorou et al., (2016) determined in their program evaluation that this model is exceptionally cost-effective, exhibiting an incremental cost-effectiveness ratio (ICER) of Rp 850,000 every quality-adjusted life year (QALY) gained, well beneath the WHO criterion for highly cost-effective interventions. This cadre-based paradigm is especially adaptable for Indonesia, which has a deficit of clinical psychologists, with a ratio of 1:100,000 population, well below WHO guidelines. A six-month follow-up assessment revealed that mothers who participated in this intervention exhibited enhanced attachment security with their infants, as measured by the Maternal Postnatal Attachment Scale (MPAS). This suggests beneficial effects on maternal mental health and the quality of mother-infant relationships, which are crucial for long-term child development.

This study has several important limitations that should be acknowledged when interpreting the findings. First, the bibliometric dataset is limited to indexed publications available in major international databases, which may underrepresent locally published research from Indonesia where studies on maternal well-being, Islamic coping, and postpartum experience are often disseminated through national journals not indexed in Scopus or Web of Science. Second, the reliance on author keywords and database-generated keywords may introduce conceptual omissions, especially since terms related to postpartum baby blues, maternal resilience, and culturally embedded coping strategies are not consistently used across studies; this could result in certain relevant works being excluded or misclassified. Third, bibliometric mapping can reveal structural patterns but cannot assess the methodological quality, cultural validity, or depth of empirical evidence in the included studies, which limits the ability to draw conclusions about causal mechanisms of parenting resilience in postpartum mothers.

## CONCLUSION

This study's findings indicated that the incorporation of Islamic psychological ideas, especially tazkiyatun nafs, provides a strong foundation for improving parenting resilience in mothers facing postpartum baby blues in Indonesia. A bibliometric synthesis of data from 2014 to 2025 revealed that Islamic spirituality enhances emotional regulation, adaptive cognitive restructuring, and social connectivity, all of which are vital for maternal mental health recovery. The examined research substantiated that spiritual activities including dhikr, sabr, syukur, and tawakkul not only provide existential significance but also yield quantifiable psychophysiological advantages, including reduced cortisol levels and enhanced oxytocin equilibrium that promote maternal bonding. Moreover, Islamic family values that highlight sakinah, compassion, and communal responsibility function as collective resilience mechanisms that mitigate stress and enhance emotional stability. This study theoretically broadened the discussion on resilience by situating it within an Islamic perspective that encompasses the cognitive, affective, social, and transcendental aspects of the human psyche. These findings argued for the creation of culturally relevant and spiritually informed mental health interventions that resonate with the lived experiences of Indonesian moms. Subsequent research needs to enhance this framework via empirical validation and program execution to bolster its relevance in clinical, community, and educational contexts.



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