A Qualitative & Quantitative Evaluation of Mellow Bumps: An attachment-based antenatal intervention
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Background to Mellow Bumps
Significant correlations have been found between mothers who are stressed in pregnancy and poorer social and cognitive developmental outcomes for children (Talge et al, 2007; O’Connor et al, 2002; O’Connor et al, 2003). Maternal attunement can help the baby to develop secure attachments, become resilient to life stressors and gain strong cognitive skills later in life (Caspi et al, 2006). Mellow Bumps is a group-based intervention which draws on psychological and practical techniques to promote wellbeing and facilitate the development of antenatal attachment. This study explores participants’ experiences of taking part in Mellow Bumps and incorporates quantitative findings from a pilot evaluation of the group.

Method:
A small sample of mothers who had participated in groups in Glasgow, were invited to discuss their experiences in a non-directive interview; interview transcripts were processed using interpretative phenomenological analysis.

Results
Participants said that the group provided support and practical strategies to help them connect with their bumps. One woman said:

‘Without Mellow Bumps I wouldn’t have had the start of that process where I thought “I do love my baby and I’m excited to see her and hold her.” Before that I didn’t feel it was my baby.’

The pilot study of Mellow Bumps showed significant differences in all the subscales of the Adult Wellbeing Scale, including depression. The study also found that group average birth weight and gestational age were within healthy parameters and that all participants had engaged with postnatal services.

Discussion
Several strengths of the Mellow Bumps intervention were identified through the interviews in the qualitative study; these included the facilitator’s provision of support, the social aspect of meeting other mums-to-be, learning about infant development and practical strategies. Barriers to engagement identified were negative preconceptions about antenatal support, fear of being judged and feeling pressured by services to participate. Quantitative findings indicate that Mellow Bumps can have a positive impact on participants’ wellbeing and can act as an engagement tool with populations for who are less likely to access services.

Conclusion
No fundamental issues concerning the validity of the intervention were identified and there were indications of promising quantitative changes; however a need for greater promotion of and referral to the Mellow Bumps groups amongst health professionals was noted.

References