

The longitudinal impact of psychological flexibility and compassion on mother-baby

bonding: Care4mommies study protocol

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INTRODUCTION

- ✓ **Becoming a mother is a life-changing event** that is often experienced in a positive way, but may also encompass **great vulnerability and uncertainty**, with the potential to hinder the mother's well-being and foster disorganization (O'Hara et al., 2014), particularly for **women with attachment difficulties dealing with a difficult infant**.
- ✓ Risk factors to the **quality of mother-infant emotional bonding** are well documented (Tichelman et al., 2019), whereas research into the **mothers' protective and modifiable factors** is scarcer.

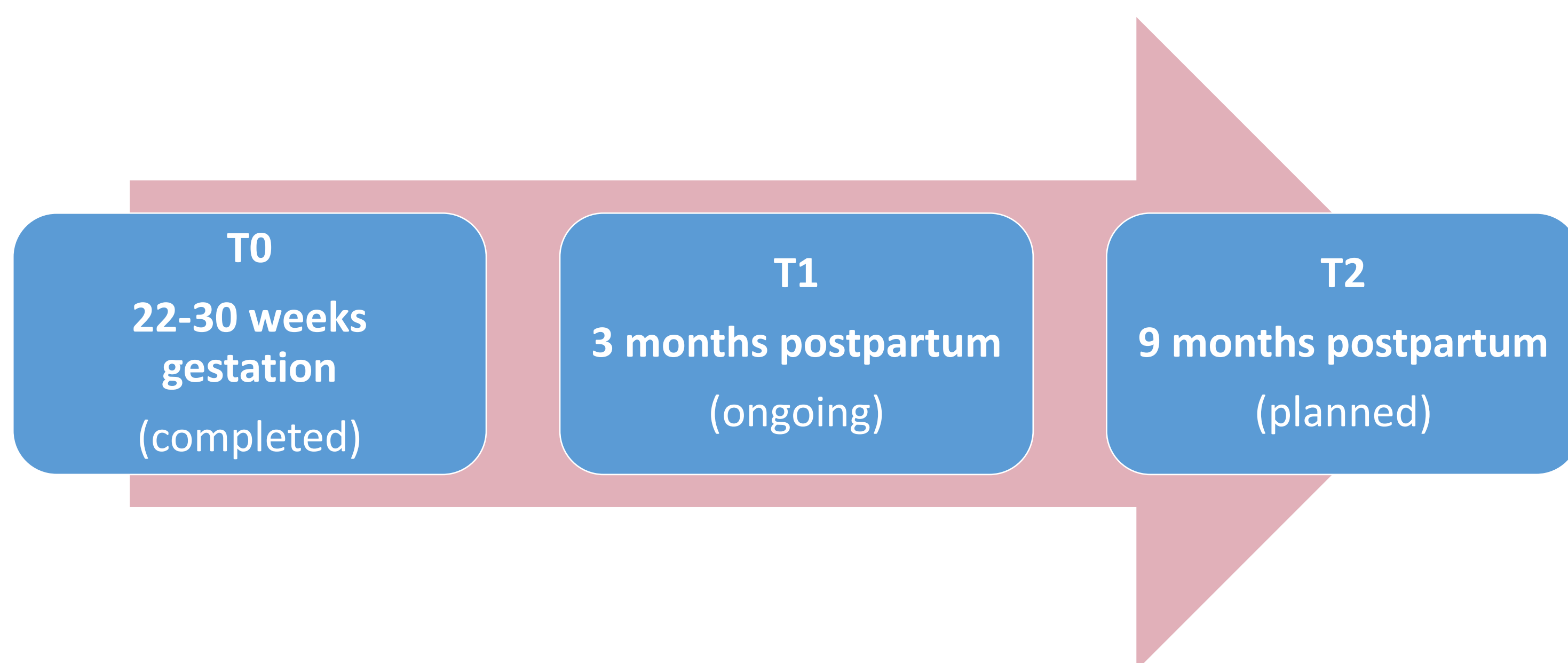
Psychological flexibility and **compassion** are adaptive emotional regulation strategies that have been linked to the wellbeing and mental health in diverse populations (Chio et al., 2021; Gloster et al., 2020).

AIM

To present the **Care4mommies project**, which aims to **examine whether prenatal maternal compassion** (towards others and the self) and **psychological flexibility play a protective role** in the development of **postpartum mother-infant bonding** over time and whether this effect remains relevant regardless of mothers' attachment style and infant temperament.

METHOD

- 298 pregnant women between 22 and 30 weeks of gestation
- Online survey with a longitudinal design
- Recruitment took place through social media advertising, colleagues and acquaintances of the research team members, and family health units who care for pregnant women.



Time point assessment	Instrument	Dimensions
T0, T1 & T2	Sociodemographic information	e.g., age, educational level, marital status, length of gestation (for T0).
T0	Adult Attachment Scale-R (Collins, 1996)	<ul style="list-style-type: none"> • Anxiety; • Comfort with proximity; • Trust in others .
T0, T1 & T2	Compassion Action and Engagement Scales (Gilbert et al., 2017)	<ul style="list-style-type: none"> • Self-compassion; • Compassion to others; • Compassion from others.
T0, T1 & T2	Comprehensive Assessment of Acceptance and Commitment Therapy Processes (CompACT; Francis et al., 2016)	<ul style="list-style-type: none"> • Openness to experience; • Behavioural awareness; • Valued action.
T1 & T2	Infant Characteristics Questionnaire (Bates et al., 1979)	<ul style="list-style-type: none"> • Fussy/difficult; • Unadaptable; • Dull; • Unpredictable.
T1 & T2	Postpartum Bonding Questionnaire (Brockington et al., 2001)	<ul style="list-style-type: none"> • Impaired bonding

EXPECTED RESULTS

We expect that:

- higher levels of mother's compassion and psychological flexibility will predict higher quality of mother-infant bonding (Fig. A);
- the impact of less adaptive maternal attachment styles and infant difficult temperament on mother-infant bonding will be moderated by mother's compassion and/or psychological flexibility (Fig. B);
- mother-infant bonding at T2 will be predicted by mothers' attachment style, compassion and psychological flexibility, infant temperament, and mother-infant bonding assessed previously (Fig. C).

Fig. A

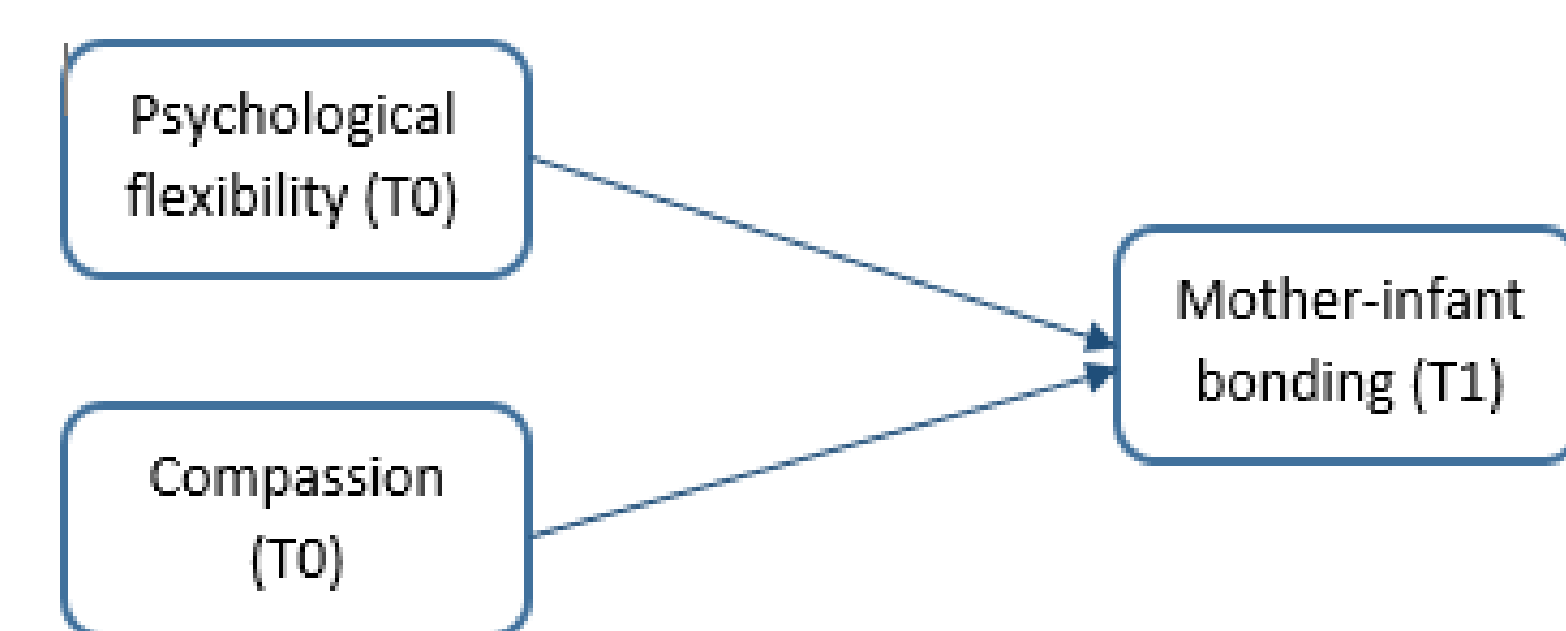


Fig. B

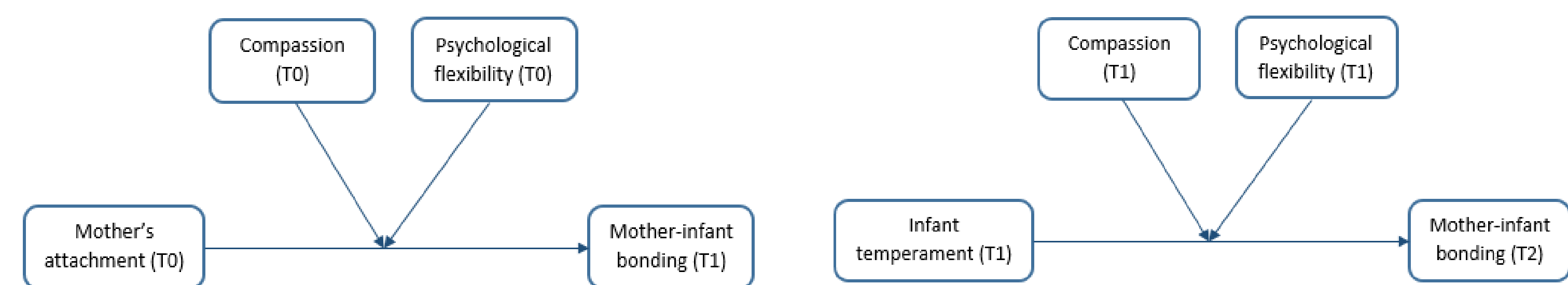
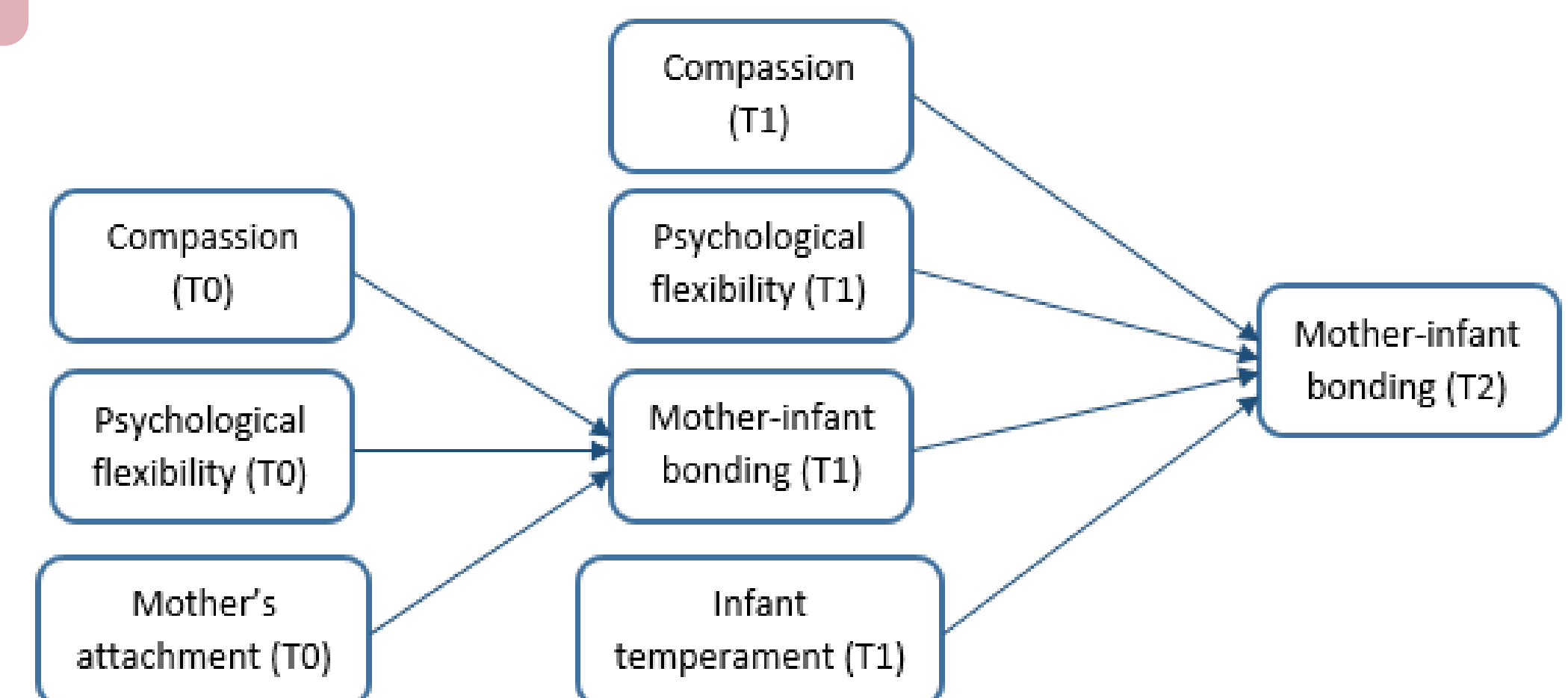


Fig. C



CONCLUSION

- ✓ The study findings will identify specific mother's personal factors related to their bonding experience with their infant and clarify whether compassion and psychological flexibility may be protective for mother-infant bonding.
- ✓ Focus on protective factors in the transition to motherhood.
- ✓ Implications for the development of preventive actions to foster mother's resilience and wellbeing, and promote a secure mother-infant bond in the postpartum period.

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Funding: This research was supported by national funds through FCT (Portuguese Foundation for Science and Technology), within the project EXPL/PSI-GER/0259/2021.