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Tools for assessing parenting in the prenatal and postpartum period in Turkey

Aylin Caksak*, Department of Pediatric Nursing, Faculty of Health Sciences, Cankiri Karatekin University, Cankiri
18100, Turkey

Dilek Yildiz, Department of Pediatric Nursing, Gulhane Faculty of Nursing, University of Health Sciences, Ankara
06018, Turkey

Derya Suluhan, Department of Pediatric Nursing, Gulhane Faculty of Nursing, University of Health Sciences,
Ankara 06018, Turkey

Berna Eren Fidanci, Department of Pediatric Nursing, Gulhane Faculty of Nursing, University of Health Sciences,
Ankara 06018, Turkey

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Abstract

Scales describe the scientific quality and reliability of research. Some scales are used to evaluate the relation of parents with a newborn during pregnancy and the postpartum period. This study was carried out to examine the scales adapted to Turkish that assessed parenthood status during pregnancy or the postpartum period. This study is conducted between 20 March 2018 and 30 March 2018 through Turkey Measuring Tools Directory, YOK Thesis Search, and Google Scholar using keywords such as ‘being a parent’, ‘parenting pregnancy’ and so on. Maternal Attachment Inventory, Prenatal Attachment Inventory, Postnatal Paternal–Infant Attachment Questionnaire, Mother to Infant Bonding Scale, What Being the Parent of a New Baby is Like and so on were adapted to Turkish and it has been determined that the majority are valid and reliable. The scales evaluate, especially the new parent, love, stress, fear, feelings and behaviours.

Keywords: Being a parent, prenatal period, postpartum period, parenting scale.

* ADDRESS FOR CORRESPONDENCE: **Aylin Caksak**, Department of Pediatric Nursing, Faculty of Health Sciences, Cankiri Karatekin University, Cankiri 18100, Turkey. *E-mail address:* aylinpekyigit@hotmail.com / Tel.: +90-376-213-1702

1. Introduction

The preparation for parenting begins before the conception. Prenatal and postnatal period is a developmental crisis period perceived positive in which women and men are having parenting role. The postpartum period is a period that can be called the fourth trimester, in which the newborn integrates with the family system and the emotional, physical and social adaptation of the woman. At the same time, it is a special period in which relations with family members are redefined, the birth of a baby, the role of motherhood and paternity are acquired, and the new role is made compatible (Chalmers, Mangiaterra & Porter, 2001; Gill, 1997).

With the birth of the baby, parents' previously learned roles (e.g., spouse) can change and face new anxieties that they are uncommon with their parenting abilities. In this period, the failure to deliver health care to mother and baby at the desired level causes physical, psychosocial and emotional problems in mother and baby. Lack of knowledge about infant care, growth and development and illnesses causes anxiety in parents, can diminish satisfaction from parenting role, adversely affect parent–infant attachment and life change (Darvill, Skirton & Farrand, 2010; Gill, 1997; Pridham, Chang, Lytton & Rutledge, 1991; Wiegers, 2006; Yildiz & Akbayrak, 2014).

For this reason, parents need an empathic health professional who provide individualised care and counselling. Nursing approaches such as giving information, counselling and relieving parental concerns during the period of dynamic changes were important, especially in the first 3 months after birth, in order to improve mother's self-confidence in addressing mother's concerns and enhance self-confidence about babysitting, the mother-positive relationship with social support that started in the prenatal period. There was a positive relationship between self-confidence in adjustment to maternal role and social support starting in the prenatal period (Clemons, 2000; Gill, 1997; Yildiz & Akbayrak, 2014). Social support such as giving information and counselling is very important in increasing parent awareness of baby care and parenting skills. Social support is defined as a variable that can reduce the collision of crisis components with parenting and adjustment to a new baby (Chalmers, Mangiaterra & Porter, 2001; Yildiz, 2008).

The newborn period is the time for the parents to take on the responsibility of a baby who can not communicate from the usual routes. Parents may experience a contradiction between their actual behaviour and role expectations. Parents and babies are alert and ready to get to know each other (Clemons, 2000; Gill, 1997).

Paediatric nurses and midwives are those who facilitate parenting and maintain long-term physical and psychological well-being of both parents and babies, using their educational and counselling roles (Chalmers, Mangiaterra & Porter, 2001; Clemons, 2000; Yildiz, 2008). Therefore, in order to determine the necessity of rearranging family roles in the prenatal and postnatal period in which new roles are undertaken, they should be able to use appropriate objective measurement tools.

2. Methods

In this study, evaluation of prenatal and postnatal parenting scales which are valid and reliable was done in Turkey. This study is conducted between 20 March 2018 and 30 March 2018 through Turkey Measuring Tools Directory, YOK National Thesis Services, Google Scholar, and Dergipark using keywords such as 'being a parent', 'being a parent in the postpartum period', 'parenting pregnancy', 'postpartum', 'parenting scale' and so on.

3. Results

Maternal Attachment Inventory (MAI), Prenatal Attachment Inventory, Neonatal Perception Inventory (NPI), The Postpartum Parenting Behaviour Scale (PPBS), Prenatal Self Evaluation Questionnaire (PSEQ), Postnatal Paternal–Infant Attachment Questionnaire (PPAQ), Semantic

Differential Scale-Myself As Mother, Mother to Infant Bonding Scale (MIBS) and What Being the Parent of a New Baby is Like (WPL) were adapted to Turkish, and it has been determined that the majority are valid and reliable (Table 1). Tools with Likert-type options have been used in seven studies and all of the studies have been conducted as a thesis. Seven studies have been released before 2010 and three studies have been released in 2010 up to now.

Table 1. Tools for evaluating parenting in prenatal and postnatal periods

Name of tool	Variable assessed	Where published	
		Original version	Turkish version
Prenatal attachment inventory	The inventory evaluating prenatal attachment consists of 21 items. It is an inventory with four Likert-type options in order to determine the levels of attachment to the foetus, mother's thoughts and feelings in the prenatal period	Muller ME. (1993). Development of the prenatal attachment inventory. <i>Western Journal of Nursing Research</i> , 15: 199–215	Turkish reliability and validity of the inventory was conducted in 2009 Yilmaz, S.D, Kizilkaya Beji, N. (2013). Turkish Version of Prenatal Attachment Inventory: A Study of Reliability and Validity. <i>Journal of Anatolia Nursing and Health Sciences</i> , 16: 103–109
WPL	Parents' beliefs about themselves and their perceptions of the parenting experience; subscales measure centrality of an infant in parent's life, change experienced by parent and evaluation of parenting performance	Pridham K.F., Chang A.S. (1989) What Being The Parent of a New Baby Is Like: Revision of an Instrument. <i>Research in Nursing and Health</i> , 12, 323–329	Yildiz D., Akbayrak N. (2014) The Effect Of The Education And Counseling Services Given o The Primipar Mothers During Postpartum Period on Infant Care, Anxiety Level And Role of Motherhood. <i>Journal of Gulhane Medicine</i> , 56, 36–41
MAI	For measuring maternal attachment to the infant is the MAI developed by Muller in 1994 It is an inventory consisting of 26 items with four Likert-type options. The higher the scores obtained from the inventory mean that the maternal attachment is higher. The lowest score that might be obtained from the inventory is 26 and the highest score is 104 MAI used in measuring the postpartum maternal affectionate at 1 and 4 months and to determine the factors that effect the maternal attachment level at 1 month after birth	Muller M.E. (1994). A Questionnaire to measure mother to Infant Attachment, <i>Journal of Nursing Measurement</i> . 2(2), 129–141	Turkish version of Maternal Attachment Inventory was conducted as a doctorate thesis in 2004 Kavlak O, Sirin A. T. (2009). Turkish version of Maternal Attachment Inventory. <i>Journal of Human Sciences</i> , 6: 188–202
NPI	Aim of NPI I and II By Broussard ve Hartner in 1970 is to measure the mothers' perception status regarding their baby The inventory consists of two parts to be	Broussard E.R., Hartner M.S.S. (1970). Maternal perception of the	Balci S. the perceptions of the mothers whose first labor of their babies, Master of Thesis,

	administered within the first week after birth and 1 month after birth and four Likert-type options. It is a tool with five Likert-type options As a result of the measurement, it identifies babies who may have emotional disturbances in the future while determining the problems related to the mothers' expectations about the baby and related to the relations between mother and baby	neonate as related to development. <i>Child Psychiatry Hum Dev</i> . 1:16–25	University of Istanbul, 1997
PPBS	The scale was formulated to measure clearly defined observed maternal behaviours towards the infant shortly after birth by Britton et al. in 2001 It measures behaviours of mother and father regarding baby in the postpartum period. It consists of seven items. While fulfilling of the scale, the behaviours of the parent against the baby are observed by the observer during the first 10 minutes after the birth, when the parent and the baby meet. The total score of the scale is between 0 and 7 points. The high score on the scale indicates that the parent has more positive parenting behaviour against the baby	Britton HL, Gronwaldt V, Britton JR (2001). Maternal postpartum behaviour and mother-infant relationship during the first of life. <i>The Journal of Pediatrics</i> 138:905–909	Calisir, H., Karacam, Z., Akgul, F. A., Kurnaz, D. A. (2009). Validity and reliability of the Turkish version of the Postpartum Parenting Behavior Scale. <i>Journal of Anatolia Nursing and Health Sciences</i> , 12(1), 1–8
PSEQ	The PSEQ was developed by Lederman in 1979. It is used for determining adaptation against to pregnancy and motherhood. There are seven subdimensions and 79 items. It is a tool with four Likert-type options. The total score of the scale is between 79 and 316 points. Low scores indicate high compliance	Lederman R, Lederman E (1979). Relationship of psychological factors in pregnancy to progress in labor. <i>Nursing Research</i> 28 (4): 94–97	Beydag, K. D., Mete, S. (2008). Validity and reliability study of the Prenatal Self Evaluation Questionnaire. <i>Journal of Anatolia Nursing and Health Sciences</i> , 11(1), 16–24
PPAQ	PPAQ was developed to determine the father–infant attachment by John T. Condon et al. in 2008. The scale included three subdimensions and 19 items. The high total score of the scale indicates high attachment	Condon J.T., Corkindalea, C., Boyce, P. (2008). Assessment of Postnatal Paternal-Infant Attachment: Development of a Questionnaire Instrument, <i>Journal of Reproductive and Infant Psychology</i> , 26(3): 195–210	Gulec D., Kavlak O. (2010). The study of reliability and validity of paternal-infant attachment scale in Turkish society. <i>International Journal of Human Sciences</i> , 10(2), 170–181
Semantic differential scale- myself as mother	The scale was developed to determine of myself as a mother by Walker et al. in 1986. It consists of 22 items The total score of the scale is between 11 and 77 points. The high total score of the scale indicates herself as a mother positively	Walker LO, Crain H, Thompson E. (1986). Maternal role attainment and identity in the postpartum period:	Calisir, H. (2003). Investigation of the factors affecting the maternity role attainment of primiparas.

		Stability and change. Nursing Research. 35(2):68–71	(Unpublished doctoral thesis), Izmir, Turkey: Institute of Health Sciences, Ege University
MIBS	The MIBS was developed by Taylor et al. in 2005 in order to evaluate the bonding of mother/father to an infant It consists of eight items. It is a tool with four Likert-type options The total score of the scale is between 0 and 24 points. The high total score of the scale indicates herself as a mother positively	Taylor A, Atkins R, Kumar R, Adams D, Glover V. (2005). A new Mother-to-Infant Bonding Scale: links with early maternal mood. <i>Arch Womens Mental Health</i> , 8: 45–51	Turkish reliability and validity of the scale was conducted in 2008 Aydemir Karakulak, H., Alparslan, O. (2016). Adaptation of Mother to Infant Bonding Scale to The Turkish Society: Aydin Sample, <i>Journal Of Contemporary Medicine</i> , 6(3), 188–199

4. Conclusion

It has been determined that many of the scales are valid and reliable for Turkish society. Likert-type scales are the most commonly used scaling techniques in social studies. There are many scales that include parents as well as mothers. The scales evaluate, especially the new parent, love, stress, fear, feelings and behaviours. As a result, health professionals should demonstrate a holistic and objective approach to postpartum parents using their knowledge, skills and professional attitudes. For this reason, the use of scales in units where health services are provided apart from academic studies enables parents to be evaluated as multidimensional and standard and increases the quality of care.

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