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Postpartal Parenting Scale:

A Preliminary Study

By

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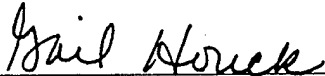
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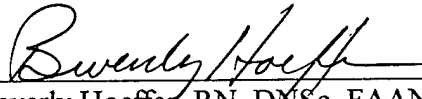
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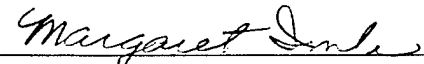
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ABSTRACT

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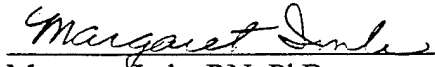
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Parenting Concerns

The relationship between parents and a child is dynamic, with members contributing to the relationship in ways that affect the family unit (Hanson & Boyd, 1996). A variety of internal and external factors influence the process of development, including the child's temperament, the physical environment, and parental attitudes and behaviors (Koniak-Griffin & Verzemnieks, 1995; Melvin, 1995; vonWindeguth & Urbano, 1989). Inadequate parenting has been shown to have detrimental effects on the development of the child, the parents, and the family unit (Cowan, Cowan, Heming, & Miller, 1991; Stafford & Bayer, 1993; Sumner & Spietz, 1994). Studies of interventions with young children who have been compromised have shown that parents and children can benefit from such interventions. However, by the time these families are identified as needing interventions, negative patterns in parent-child relationships may be difficult to change (Cowan, et al., 1991; Mrazek, Mrazek, & Klinnert, 1995). Early intervention with families has shown long-term benefits for families and infants (Brazelton, 1994; Cowan, et al., 1991; Mrazek, et al., 1995; Sumner & Spietz, 1994). It would be useful to be able to screen for possible parenting difficulties at earlier points in order to intervene before development of the child has been compromised and before parents experience too much negative feedback in their attempts to do good parenting.

Numerous studies of parenting have resulted in the development of tools to evaluate parenting and to serve as the basis for planning interventions directed at improving the quality of parenting (Fagot & Kavanagh, 1993; Koniak-Griffin & Verzemnieks, 1995; Sumner & Spietz, 1994). Researchers have identified parenting needs from the literature about children, but have not specified whether the needs were

concerns of parents or of professionals (Fagot & Kavanagh, 1993; Fox, 1992; Koniak-Griffin & Verzemnieks, 1995; Melvin, 1995; O'Brien, 1996; Sumner & Spietz, 1994). Early observational studies of parent-child interactions have provided information about parent behaviors and their role in parent-child interactions (Demick, Bursick, & DiBiase, 1993). Frequently, the tools developed from the studies provided only objective information and are based on professionals' concerns (Ainsworth, Blehar, Waters, & Wall, 1978; Mrazek, et al., 1995; Sumner & Spietz, 1994). There are instruments available to evaluate parenting behaviors and skills (Mrazek, et al., 1995; Sumner & Spietz, 1994). Unfortunately, the instruments consistently focus on aspects of the child (e.g., temperament, behavior, development, etc.) or the effects of parenting on the development of the child. None address parents' concerns about their parenting roles and activities, and only a few address their feelings of efficacy about their own parenting ability (Froman & Owen, 1989; Gross & Rocissano, 1988; Reece, 1992). Many of the tools focus on older children or children identified as already having difficulties (Crnic & Greenberg, 1990; Demick, et al., 1993; Fox, 1992; Seligman & Darling, 1989). Needed are reliable and valid tools that express parents' perspectives and that can be used in the earliest weeks of parenting.

This study will focus on the parents of normal children in the first three months of parenting. Issues identified as important to parents will be used to guide item development. Parents' input will be used to guide development of the instrument and reliability and validity testing will be done. The final instrument will be used as a screening tool to assess the concerns of the parents regarding parenting in a self-report format in pediatric clinic settings.

CHAPTER II

Literature Review

A review of the literature will explore the dynamics of parent-child relationships, development of parenting theories, and tools for data collection.

Parent-Child Relationships

General systems theory describes a system of “interdependent components mutually and simultaneously influencing all other system components” (Stafford & Bayer, 1993, p. 30). Systems theory points to subsystems, such as parent-child dyads and the spousal dyad and suprasystems, such as the health care systems and schools that interact with and influence the family (Boyd, 1996; Sumner & Spietz, 1994). Stafford and Bayer (1993) argue for bi-directional approaches within family relationships where the “parent and child synchronize and regulate their interactions and generally influence each other” (p. 93).

Parents have a profound influence on their children (Demick, et al., 1993). Research has shown a direct relationship between parents’ effectiveness in carrying out parenting tasks and the cognitive, physical, emotional, and social development of the child (Brazelton, 1994; Higley & Miller, 1996; Sumner & Spietz, 1994; vonWindeguth & Urbano, 1989). Parents are shaped by their children as well. The characteristics, developmental progress, and behavior of the child have a significant influence on the socialization of the parents as parents (Stafford & Bayer, 1993), according to the bi-directional theory. However there is little research in this area. Successful parenting provides protection, nurturing, and emotional support, as well as facilitates socialization and encourages learning; all needs of the child (Brazelton, 1994; Higley & Miller, 1996;

Medoff-Cooper, 1995). Yet very few researchers attempt to identify parent's needs and, typically, these studies focus on parents of children with disabilities or developmental delays (Dunst, Cooper, Weeldreyer, Snyder, & Chase, 1988; Seligman & Darling, 1989). Consistently, the early history of family relationships has been found to have considerable effect on the future development of the family (Bailey & Simeonsson, 1988; Dunst, Trivette, & Deal, 1988; Stafford & Bayer, 1993); and poor parenting has been strongly related to difficulties in the cognitive and social development of the child, low parental self-esteem, and family dysfunction (Crnic & Greenberg, 1990; Mrazek, et al., 1995; Sumner & Spietz, 1994; vonWindeguth & Urbano, 1989).

Health care providers, who are in an ideal position to have an influence on families and can intervene with ineffective parents, are also in a position to assess early difficulties. Early interventions, neonatal to three years, have shown improved long-term outcomes for families (Bailey, 1988; Brazelton, 1994; Cowan, et al., 1991; Sumner & Spietz, 1994). Many professionals have believed that the most effective interventions must be implemented before the age of six (Melvin, 1995; Mrazek, et al., 1995). Whether even earlier interventions could be more beneficial is unknown and untested. Preventing problems is the most cost-effective way to address the needs of families (Melvin, 1995). To prevent problems, it is essential that early assessment and interventions be available and utilized by pediatric health care providers and family nurses.

Parent-Child Theories

Demick, et al., (1993), describe some of the theoretical development about parenting. Baumrind's investigations in the 1960's distinguished among the impact of autocratic, authoritative-reciprocal, and permissive childrearing styles on the personality

characteristics of children. Vygotsky's concept of the "zone of proximal development" has had significant effect in understanding the role of the parent in the cognitive and affective development of the child by recognizing the contributions of the individual and the physical/social context to the development of knowledge (as cited in Demick, et al., 1993). Literature on the specific aspects of adult development and the nature and course of parental development, however, is limited. Mercer (1981, 1985) described maternal role attainment but not fathers' development. Galinsky's description of stages in parent-child development is characterized in terms of tasks to be accomplished by parents at a given stage is a highly informative, critical look at parental development (Galinsky, 1981). More recently, parenting studies have examined the impact of parental behavior on child development, especially those that dealt with the maltreatment of children or children with disabilities or chronic illnesses (Demick, et al., 1993; Havermans & Eiser, 1991; Mrazek, et al., 1995; O'Brien, 1996), but again, the effects examined are those on the child.

Parenting Tools Available

Researchers in parenting have utilized many instruments to elicit information about parenting. These tools measure many concepts that relate to parenting, including child's behaviors (Eyberg Child Behavior Inventory, Eyberg & Ross, 1978) and temperament (Toddler Temperament Scale, Fullard, McDevitt, & Carey, 1984), the home environment (Home Observation for Measurement of the Environment [HOME], Bradley & Caldwell, 1977), parenting skills (Parent Risk Scale, Mrazek, et al., 1995; Nursing Child Assessment Feeding Scale, Sumner & Spietz, 1994), parental expectations (Parenting Inventory: Young Child, Fox, 1992; Parent Expectations Survey, Reece,

1992), attachment (Ainsworth Strange Situation, Ainsworth, et al., 1978), maternal confidence (Infant Care Scale, Froman & Owen, 1989; Toddler Care Questionnaire, Gross & Rocissano, 1988), parental stresses and hassles (Parenting Daily Hassles, Crnic & Greenberg, 1990), support (Family Support Scale, Dunst, Trivette, & Jenkins, 1988), and parents' needs (Family Needs Scale, Dunst, Cooper, Weeldreyer, Snyder, & Chase, 1988; Parent Needs Survey, Seligman & Darling, 1989) for some examples. This review will explore only instruments that address parent issues; issues that pertain to the child will be discussed only as they pertain to parents' perceptions or concerns. Self-report questionnaires, interview, and observation are methods used by these instruments to collect data.

Parenting Daily Hassles

The Parenting Daily Hassles (PDH) was developed by Crnic and Greenberg (1970) to evaluate the frequency and intensity of every day hassles experienced by parents. Review of literature, research, and prior work by the authors contributed to the development of this tool. Seventy-four mothers of five-year-old children were asked to complete the questionnaire. Approximately half were full term and the other half had been born prematurely but had been healthy at birth. The two groups were matched for race, mother's education, single versus two-parent families, infant gender, and birth order. The groups did not differ significantly on background demographic variables. The scale included 20 items which were first rated for the frequency of occurrence (rarely = 1 to constantly = 4) and then for intensity (no hassle = 1 to big hassle = 5). Adequate Cronbach's alphas were reported for the Frequency scale (.81) and Intensity scale (.90); additionally, the scales were highly correlated $r = .78$). Two subscales emerged from the

data: Parenting Tasks (no alpha reported) and Challenging behavior ($\alpha = .86$). No differences were found between the term and preterm group scores. A number of instruments were administered concurrently to evaluate the validity of the PDH. Increased maternal scores on the PDH were related to an increase in total child behavior problems (Frequency $r = .38$, Intensity $r = .47$, $p < .001$; Child Behavior Checklist [CBC], Achenbach & Edelbrock, 1983), an increase in maternal psychological symptoms (e.g., hostility, depression, anxiety, etc.; Frequency $r = .27$, $p < .05$; Intensity $r = .36$, $p < .01$; Brief Symptom Index, Derogatis & Spencer, 1982), decreased child social competence (Frequency $r = -.32$, $p < .01$; Intensity $r = -.26$, $p < .05$; CBC, Achenbach & Edelbrock, 1983), decreased satisfaction with parenting (Frequency $r = -.33$, $p < .01$; Intensity $r = -.49$, $p < .001$; Satisfaction With Parenting Scale, Crnic, Greenberg, Ragozin, Robinson, & Basham, 1983), decreased general life satisfaction (Intensity $r = -.32$, $p < .01$; General Life Satisfaction, Crnic, et al., 1983), poorer family relationships (Intensity $r = -.36$, $p < .01$; Family Environment Scale [FES], Moos & Moos, 1981), and decreased family system maintenance (Intensity $r = -.32$, $p < .01$; FES, Moos & Moos, 1981). Thus, for mothers of five-year-olds, both the Frequency and Intensity of parenting daily hassles were positively related to child behavior problems and maternal psychological symptoms, yet negatively related to child social competence and satisfaction with parenting. Intensity was also negatively related to mothers' general life satisfaction, quality of family relationships, and family system maintenance.

Parent Needs Survey

The Parent Needs Survey (PNS) is a questionnaire developed by Seligman and Darling (1989) to help parents of children with disabilities identify family needs. These

needs are used by professionals to plan interventions for the family. The PNS is administered upon entry to the intervention program, then every six months; and is accompanied by an interview, for at least the first administration. The children ranged from birth to 30 months at entry, with a median age of nine months. Families came from urban and rural areas, varied socioeconomic status, and consisted of one- and two-parent nuclear and extended families. Mothers, fathers, and grandparents ($n = 107$) have completed the questionnaire. The PNS was developed from an overview of the literature on families of young children with disabilities. Six major areas of need were identified: (a) information, (b) treatment, (c) formal support, (d) informal support, (e) material support, and (f) competing family needs. The questionnaire consisted of 26 items to be rated: (a) I really need help, (b) I would like help, or (c) I don't need help. No scoring method was reported. There was an open-ended portion at the end for parents to write in any needs not listed.

Field testing included a variety of literacy levels where it apparently was understood and was completely filled out by all respondents. Further, validity was empirically grounded, in that almost no parents completed the open-ended questions and accompanying interviews did not reveal information significantly different from the content of the PNS items. This suggests that the 26 items are inclusive of the major needs of these parents. The authors stated that interrater reliability was evidenced by data from the parents of eight sets of twins which indicated no variation in parental response between forms completed separately for each twin. No additional statistical data were reported to help support reliability or validity.

The PNS showed parents' needs for information, treatment, and material support to be highest initially and that they had decreased significantly 1 year later. This suggests that the intervention program, along with other sources, were successfully meeting these needs. The parents' need for formal and informal support were lowest initially but increased over the year, which may indicate a change of focus from the child's needs to those of the parents. Competing needs of family members showed no consistent pattern over time but there was less need in this regard than in the other areas.

O'Brien (1996) adapted the PNS for families of typical children by eliminating items addressing children's special needs and adding five items (improving parent's education or skills, information about toys, time to keep in shape, information about household safety, and help in dealing with stress). The resulting instrument contained 20 items. Using the same rating scale, data were scored by summing the number of items on which parents indicated any need for help. O'Brien reported data from 413 parents, primarily Caucasian mothers, from a Midwestern suburban area with a child 9, 18, 27, or 36 months of age. The mean total number of needs reported were 10.3 ($SD = 5.7$). More than 50% of the parents reported a need for assistance in the following areas: more time for self (83.3%), time to get in shape (76.5%), help in dealing with stress (68.8%), information about behavior problems (60.0%), someone who can babysit (58.8%), and someone to talk to about child-rearing problems (55.4%).

Parenting Risk Scale

The Parenting Risk Scale (PRS) is an assessment methodology developed by Mrazek, et al. (1995) to identify parenting difficulties. The development of this scale centers around five key dimensions of parenting identified in the child development

literature: emotional availability, parental control, parental psychiatric disturbance, knowledge base of parents, and degree of commitment. The PRS is a systematic, semi-structured interview using the Stress and Coping Interview (Mrazek, et al., 1995) as the organizational structure to collect data on parental behaviors and emotions. Mental health clinicians, trained in the use of the PRS, rate parents on these five dimensions of parenting. These clinical judgments are used to classify the parents into one of three categories: parenting difficulties, concerns about parenting, or adequate parenting. Mrazek and associates do not describe this interview process for content or the scoring methods. Both parents can be interviewed together, but an interview with the mother has proved to be an effective method. The subjects were part of a longitudinal Asthma Risk Study. Most infants ($n = 150$) were at genetic risk for developing asthma because at least one parent had asthma; the remaining infants ($n = 30$) were healthy with no increased risk for asthma. Mothers were interviewed when the child was three weeks old. The majority of families were white, middle or upper class, from the Denver metropolitan area.

Standardized tests and interviews were conducted for validation of the PRS. Interviews conducted at the time of the PRS showed that parents classified as having parenting difficulties were more likely to be coded with poor coping, problematic marital adjustment, and poor maternal modulation ($p = .0001$). Likewise, mothers with postpartum depression were always coded with either parenting concerns or parenting difficulties ($p = .005$). The Minnesota Multiphasic Personality Inventory (MMPI; Hathaway and McKinley, 1970) showed modest elevations in scores for parents with problematic parenting on five scales: psychopathic deviance, schizophrenia, paranoia,

depression, and psychasthenia. These scales are among those most clearly associated with development of psychopathology at extreme elevations. Predictive validity of the PRS was supported by relating PRS data collected three weeks after the infant's birth to attachment scores. At 12 months, the Ainsworth Strange Situation (Ainsworth, et al., 1978) showed children of parents having parenting difficulties at three weeks to be more likely to develop insecure attachments than children of mothers who had been rated with adequate parenting (71% versus 36%, $p = .02$). The Behavioral Screening Questionnaire (Richman & Graham, 1971) was completed at 24 months of age. Sixty percent of the children whose mothers had been rated as having parenting difficulties at three weeks were documented to have developed a sufficient number of behavioral problems to place them in the clinical range of dysfunction ($p = .03$). Additionally, children of parents with parenting difficulties at three weeks of age were more likely to develop asthma by age three than children of parents with adequate parenting (20% versus 5%, $p = .05$). Finally, the PRS showed significant stability at levels from $p < .02$ to $p < .0001$ between time points with all X^2 analyses. Mrazek, et al. report that this method is not sensitive for variations of adequate to superlative parenting, which could add significantly to the literature on parenting.

Parenting Inventory: Young Child

The Parenting Inventory: Young Child (PI) was developed by Fox (1992) to assess the behavioral and developmental expectations of parents who have children one to four years of age. The development of items was guided by a review of the literature, published tests, and clinical experience of the author. The initial set of items was reviewed for relevance and construction by a panel of 16 experts; item clarity was rated

by a panel of 17 parents (6 blacks, 6 Hispanics, and 5 whites). Appropriate revisions were made following the expert and parent reviews. Mothers ($n = 1,140$) of children one year to four years and eleven months (mean age 3.2 years) were asked to rate each item on a four-point frequency scale. The sample was representative of the large urban area from which it was drawn but higher socioeconomic status individuals were overrepresented. Factor analysis identified three subscales. Using statistical item reduction, the total items was reduced from 232 to 100. Alphas for the subscales were Expectations = .97; Discipline = .91; and Nurturing = .82. Test-retest data was collected from 45 mothers for the same child separated by at least one week. Test-retest coefficients for the three factors were Expectations $r = .98$; Discipline $r = .87$; and Nurturing $r = .81$. The PI was tested for readability, yielding a third-grade reading level. Fox suggests several areas for further study of the PI, including testing for early identification of problems, assessing changes following intervention, and continued reliability and validity testing.

Nursing Child Assessment Feeding Scale

The Nursing Child Assessment Feeding Scale (NCAFS) was developed by a research team at the University of Washington's School of Nursing to measure the health and caregiving environments of infants and young children (Sumner & Spietz, 1994). The present scale is an adaptation of the original feeding scale developed for the Nursing Child Assessment Project. The NCAFS is based on a model developed by Barnard (Barnard & Eyres, 1979) which depicts the interconnectedness of the child, caregiver, and environment. The NCAFS is an observational tool where the child and caregiver are observed during a feeding interaction. The NCAFS is used for children from birth to one

year of age and, typically, the mother is the observed caregiver. The NCAFS is a measure of the caregiver's and child's abilities to adapt to one another as well as a measure of parenting skills. Overall concepts include contingency, positioning, verbalness, sensitivity, affect, and engagement/disengagement. The observer codes the 76 observed behaviors as present (1) or not (0). Intensive training and an 85% interrater reliability are required for certification to administer the NCAFS.

The scale is separated into parent/caregiver, child, parent contingency, and child contingency subscales. Cronbach's alphas are reported as follows for parent scales: (a) sensitivity to cues, .60, (b) response to distress, .69, (c) social-emotional growth fostering, .69. For child scales, the Cronbach alphas were: (a) clarity of cues, .56 and (b) responsiveness to parent, .58. Internal consistency estimates (alphas) for the other scales were: (a) parent contingency, .73, (b) child contingency, .19, (c) total parent, .83, (d) total child, .73, and (e) combined total, .86. Test-retest coefficients were $r = .75$ for the parent subscale and $r = .51$ for the child subscale, indicating greater stability for parent scores and lesser stability for infant scores. Most likely this is due to the rapid developmental changes of infancy. The NCAFS has been widely used on diverse samples, yielding standardization scores for Caucasian, African-American, Hispanic, married, single, high and low education, and term and preterm populations (Sumner & Spietz, 1994). Concurrent validity was tested with the HOME scale (Bradley & Caldwell, 1977) with a total scale coefficient, $r = .54$ ($p < .01$). The total Parent score was assessed in relation to the infant's IQ at 3 months (assessed by the Bayley Mental Development Index), and resulted in a correlation of $r = .28$ ($p < .001$). Predictive validity was evaluated by the NCAFS at 10 months in relation to the MDI at 24 months.

The total score yielded $r = .46$ ($p < .01$) and the total parent score resulted in $r = .47$ ($p < .01$).

The Parent Expectations Survey

The Parent Expectations Survey (PES) was developed by Reece (1992) to measure self-efficacy in early parenting. The goals were to identify those women at risk for increased stress in their new role as a parent and to plan for appropriate interventions. The questionnaire items were developed from the literature, discussions between the author and other professionals in maternal-child health, and the clinical experience of the author. Items are summed and divided by the total items (20) to determine the mean PES score. Content validity was established through review by seven doctorally prepared nurse experts; Dr. Bandura, the foremost expert in self-efficacy; four pediatric/family nurse practitioners; and the Nursing Research Committee of a large teaching hospital that specializes in maternal-infant care. Each item is rated by the respondent from 0 (cannot do) to 10 (certain can do) to describe how she feels about herself as a new parent.

The PES was administered to 105 first-time mothers at one and three months postpartum as part of a larger longitudinal study. These women, aged 35 to 42 years, were highly educated and had a cesarean section rate of 45%. Internal consistency was evidenced by alpha coefficients reported as .91 at one month and .86 at three months. Concurrent validity was established with the Self-Evaluation subscale of the "What Being the Parent of a Baby is Like" (Pridham & Chang, 1989), with moderate correlations at one month $r = .75$ and three months $r = .64$). Predictive validity was established with the Postpartum Self-Evaluation Questionnaire (Lederman, Weingarten, & Lederman, 1981) at one year; for the one month PES Pearson's $r = .28$ ($p < .01$) and

for the three month PES $r = .40$ ($p < .01$). Higher PES scores at three months, reflecting less parenting stress and more confidence were negatively associated with stress at one year $r = -.28$, $p < .05$) as measured by the Perceived Stress Scale (Cohen, Kamarck, & Mermelstein, 1983).

Toddler Care Questionnaire

The Toddler Care Questionnaire (TCQ) was developed by Gross and Rocissano (1988) to measure maternal confidence in toddlerhood. Bandura's theory of self-efficacy, a review of the literature, and the authors' clinical work with toddlers guided the development of this instrument. The TCQ was pilot-tested with 20 middle-class mothers of toddlers. Although having an internal consistency reliability alpha of .93, comments from the participants directed revisions of the TCQ which were subsequently unanimously approved by five experts. For the revised 36-item Likert-type questionnaire, each item is rated from very little confidence (A) to quite a lot of confidence (E).

The TCQ was tested with 50 married, highly educated, middle to upper-middle class mothers, most of whom did not work (58%). About half of the toddlers were boys (52%), aged 12 to 36 months (mean = 23 months). The 36-item TCQ yielded a Cronbach's alpha of .95 and a four-week test-retest reliability of $r = .87$. Concurrent validity was tested against demographics, the mother's prior experience with young children, the child's birth order, and the Beck Depression Inventory (Beck, 1972). The only correlations were with maternal depression $r = -.31$, $p < .03$) and maternal education $r = .30$, $p < .04$). Gross and Rocissano provided strong evidence of reliability but only one of the three validity measures provided significant findings. They admitted these

results may indicate that the TCQ is not a valid measure of maternal confidence. They also identified other variables that may affect maternal confidence, such as spousal support and the child's temperament. A second study by Gross, Rocissano, and Roncoli (1989) with 132 mothers of term ($n = 70$) and preterm ($n = 62$) infants reported correlations between the TCQ and prior childcare experience for both groups $r = .45$ for term, $r = .44$ for preterm, $p \leq .001$) and birth order for the preterm group $r = .41$, $p \leq .001$), providing additional validity for the instrument.

Infant Care Survey

The Infant Care Survey (ICS) is a questionnaire developed by Froman and Owen (1989) to assess mothers' confidence about performing infant care tasks for their infants under one year of age. The ICS was based on social learning theory and the concept of self-efficacy. Content validity was assessed by a panel of 11 nurse experts whose comments lead to revisions of the ICS and the final 51-item scale. The scale items were grouped into knowledge or skill subgroups, each with subscales for health, diet, and safety behaviors. Subjects were to indicate levels of self-efficacy, rating each statement from very little confidence (A) to quite a lot of confidence (E).

The ICS was tested with mothers and fathers representing a variety of races, educational levels, and parity. Mothers ($n = 142$) of the boys and girls were 15 to 40 years old and completed the questionnaires in a variety of settings. Internal consistency alphas were reported for the total scale (.98) and for both of the subgroups (Knowledge = .95 and Skill = .96). Gender and number of children were significant predictors of ICS scores. Female infants and parents with more children were found to have higher total scores than male infants or parents with only one child. Because parents with more

children have a greater chance to perform and observe infant care, they were expected to have higher scores, suggesting construct validity of the ICS.

Family Needs Scale

The Family Needs Scale (FNS) was developed by Dunst, Cooper, et al.(1988) to help families with disabled children define their needs for resources and support. These needs would then be used to formulate a plan for interventions with the family. The FNS is a Likert-type, self-report questionnaire. Parents indicated the amount of need for help with each item, from almost never (1) to almost always (5), or not applicable (N/A).

Administered to 54 parents of preschool- and elementary school-aged retarded, handicapped, and developmentally at-risk children the 41-item FNS was found to have an alpha of .95 with a split-half reliability of .96. The items loaded on nine factors: basic resources, specialized child care, personal and family growth, financial and medical resources, child education, meal preparation, future child care, financial budgeting, and household support.

Criterion validity was established by comparing total scale and factor scores to some dimensions of parental beliefs. The parental beliefs correlating with total scale scores were well-being $r = .42, p < .01$), decision-making $r = .40, p < .01$), and internal locus of control $r = .28, p < .05$). Parental beliefs were also related to factor scores: well-being (basic resources, $r = .52, p < .01$; specialized child care, $r = .52, p < .01$; financial and medical resources, $r = .48, p < .01$; and financial budgeting, $r = .35, p < .05$), decision-making (financial and medical resources, $r = .45, p < .01$; future child care, $r = .44, p < .01$; financial budgeting, $r = .33, p < .05$; and household support, $r = .30, p < .05$), and

internal locus of control (specialized child care, $r = .57$, $p < .01$, and financial and medical resources, $r = .43$, $p < .01$).

Family Support Scale

The Family Support Scale (FSS) was developed by Dunst, Trivette, and Jenkins (1988) to measure the helpfulness of sources of support to families rearing young children. These scores are used as a basis for planning interventions to meet support needs for the family. Parents rated each source (item) from not at all helpful (1) to extremely helpful (5), or not applicable (N/A). The 18-item FSS was administered to 139 parents of preschool retarded, handicapped, and developmentally at-risk children. Dunst and associates report an alpha of .77 with a split-half reliability of .75. Test-retest at one month was $r = .75$ ($p < .001$) for mean inter-item correlation and $r = .91$ ($p < .001$) for total scale scores. Items loaded on six factors: informal kinship, social organizations, formal kinship, immediate family, specialized professional services, and generic professional services. Criterion validity was established by comparing total scale scores and factor scores to a number of parent and family outcomes. Correlations were noted between total scale scores and personal well-being $r = .28$, $p < .01$), integrity of the family unit $r = .18$, $p < .01$), parent perceptions of child behavior $r = .19$, $p < .05$), and opportunities to engage in parent-child play $r = .40$, $p < .001$).

Child Behavior Scales

Three tools focus on characteristics of the child. The Ainsworth Strange Situation (ASS; Ainsworth, et al., 1978) was developed to assess attachment organization of one year old children to their mothers. Review of the literature and professional experience contributed to the development of the ASS. Individuals must attend training and achieve

adequate interrater reliability to administer the ASS. Observers rate the frequency of occurrence of 10 infant behaviors when the infant is exposed to a stranger and a strange environment. The behaviors are categorized as: exploratory; crying; searching; seeking, proximity, and contact; maintaining contact; distance interaction; smiling, vocalizing, and looking; resistance; avoidance; or oral. The observer ratings are used to classify the infant into one of three of categories of attachment: anxious avoidant, anxious ambivalent, or secure. Ainsworth, et al., report that the ASS scores have been previously standardized for many groups of subjects (e. g., neonatal separation, twins versus singletons, low birth weight and low Apgar infants, working versus non-working mothers, etc.). Main (1988) added a forth category "disorganized."

The Eyberg Child Behavior Inventory (ECBI; Eyberg & Ross, 1978) was developed to discriminate between problem children and non-problem children. A data base on parent-reported behavior problems in children over two years old was used to develop items for the ECBI. Parents of children aged two to ten years rated the frequency of occurrence of behaviors from never occurs (1) to always occurs (7). Parents are also asked if each behavior is a problem for them (yes = 1, no = 0). The sample included problem children, problem children after treatment, non-problem children, and a non-problem clinic control group of children. No alpha levels were reported.

The Toddler Temperament Scale (TTS; Fullard, et al., 1984) was developed to assess characteristics of temperament in children aged 12 to 36 months. The TTS was pretested with two groups of mothers and revised based on their comments during the development of the tool.

All three instruments were developed by individuals in the fields of Psychiatry/Psychology and Child Development, studying primarily Caucasian mothers. The ECBI compared problem children to control groups and the TTS and ASS assessed normal children. The ECBI subjects were in low and lower-middle SES; the ASS and TTS groups included a large range of SES levels. The ECBI and TTS are self-report questionnaires, measuring the parents' perceptions and the ASS is an observational method, providing only expert observers' ratings. While attachment is certainly related to the quality and style of parenting, a measurement of attachment does not capture the essence of the needs and concerns of new parents, and is a reflection of past parenting behaviors. The ECBI and TTS are developed for parents of children aged two to ten years and 12 months or older, respectively, while the ASS is developed for use with infants one year and older.

This review discusses thirteen scales that have been developed by professionals from child development, child psychiatry, child psychology, education, and nursing for use with the parents of children aged zero to ten years. These scales measure the following concepts: adaptation, affect, attachment, behavior problems, child care knowledge base, commitment to child, competing family needs, contingency, control, disengagement, emotional availability, engagement, family needs, maternal confidence, parent's behaviors, parent's beliefs, parent's expectations, parent's needs, parenting skills, positioning, psychiatric disturbance, self-efficacy, sensitivity, stress, support, temperament, and verbalness.

Self-report questionnaires, interviews, and observations are methods used to collect data from mothers, fathers, and grandparents. Most of the data reported came

from mothers, primarily Caucasian middle-class mothers. Seven scales included a small number of fathers in their samples and one scale included grandparents (PNS). Some samples were from urban and rural settings with a mixture of educational levels, socioeconomic status, and racial backgrounds.

Five scales may be used with the parents of young infants (ICS, Froman & Owen, 1989; NCAFS, Sumner & Spietz, 1984; PES, Reece, 1992; PNS, Seligman & Darling, 1989; and PRS, Mrazek, et al., 1995). The PES and PRS focus specifically on children up to three months old; the other three are for use with infants up to at least one year. Three scales are self-report questionnaires (ICS, PES, and PNS), one is a semi-structured interview process (PRS), and another requires observational method (NCAFS).

Six of the scales focused on normal children, while four additional scales reported results for non-normal as well as normal control groups. The ICS, NCAFS, and PES are for use with normal children and reported reviews by nurse experts during the developmental stages. The PNS was developed for use with parents of disabled children and the PRS for use with parents of children at higher risk for developing asthma; neither of these scales' authors reported review by any experts. None of the scales were reported to have been reviewed by parents or having included parent input during development. The PNS was adapted by O'Brien (1996) for use with parents of normal children, however, it is not available for review.

Reported scale alphas range from .86 for the PES and NCAFS to .98 for the ICS. Only the NCAFS reported test-retest coefficients (.51 to .75). The PNS reported empirical evidence for adequate reliability and validity and the PRS reported moderate concurrent and predictive validity. Only the PNS was tested with mothers, fathers, and

grandparents. The ICS, NCAFS, and PRS report testing with both mothers and fathers, but all three are primarily used with mothers alone, and the PES reported use only with mothers.

The concepts measured by these five scales include: self-efficacy and maternal confidence (ICS and PES); family needs for support, treatment, and information and competing family needs (PNS); parenting skills, emotional availability, control, psychiatric disturbances, knowledge base, and commitment (PRS); and contingency, positioning, verbalness, sensitivity, affect, engagement, and disengagement (NCAFS). Many of these concepts are essential to the understanding of the concerns and needs of parents of young infants. However, there is no scale which provides a combination of concepts to address overall needs and concerns of parents nor one that attempts to retrieve this information from parents' perspective. Two of the scales (NCAFS and PRS) require extensive training, a significant amount of time to administer and score, and provide only the rater's judgments about parenting effectiveness. Only the PNS asks parents to identify their needs but this is specifically for use with disabled children.

Three of the remaining scales may be used with normal children from 12 months to five years (PDH, Crnic & Greenberg, 1990; PI, Fox, 1992; and TCQ, Gross & Rocissano, 1988). The PDH also reported data on children who were born prematurely. All scales are self-report questionnaires and report data on only mothers. The concepts measured include: self-efficacy and maternal confidence (TCQ), parental expectations and beliefs (PI), and stress (PDH), all essential to the understanding of the needs and concerns of new parents. Yet once again no scale provides a sufficient combination of these concepts for measurement. Both the PI and the TCQ report review by parents and

experts in the early stages of development; the PDH does not. All scales reported alpha levels that ranged from .81 to .97. The PDH and the PI reported test-retest coefficients that ranged from $r = .81-.98$. None of these scales have been tested with parents of young infants.

The last two scales were developed for use with disabled and retarded preschool- to elementary school-aged children (FNS, Dunst, Cooper, et al., 1988; and FSS, Dunst, Trivette, & Jenkins, 1988). Both are self-report questionnaires and report data from both mothers and fathers. The concepts measured include: family needs for support and resources (FNS) and areas of support (FSS). Alpha levels were reported as .77 for the FSS and .95 for the FNS. Test-retest coefficients were reported for the FSS as $r = .91$ at one month and $r = .47$ at 18 months. Neither scale's authors reported on early development of the scales. Both measure essential concepts but have not been tested for use with the parents of normal infants.

Summary

There are many methods used in the development of instruments. A concern from this review of literature is the process used to collect information used in item development. These questions are to be posed to parents about some aspect of their parenting. Questions are investigating parent behavior, skills, beliefs, perceptions, attitudes, concerns, or needs. The authors used various sources to develop scales, including literature reviews, parenting theories, published instruments, contact with professional colleagues, professional and clinical experience, and interviews with experts. However, this review revealed that the researchers incorporated very little input from parents in the initial development of instruments, relying primarily on literature,

theory, experts, and published measures (Crnic & Greenberg, 1990; Fox, 1992; Froman & Owen, 1989; Mrazek, et al., 1995; Seligman & Darling, 1989; Sumner & Spietz, 1994; Waltz, Strickland, & Lenz, 1991). Only one scale reported the use of parent input in initial scale development (Eyberg & Ross, 1978), only one author had parents review items for clarity (Fox, 1992), and only two authors conducted pilot testing with parent panels during early instrument development (Fullard, et al., 1984; Gross & Rocissano, 1988). Interviewing parents can provide a clear definition of underlying concepts and dimensions that can provide invaluable input and insight into the development of any scale (Waltz, et al., 1991). One such study was the qualitative analysis of interviews with new parents which helped to define numerous concepts (Imle & Drayden, 1996).

There are several areas of parenting that are not being studied despite the availability of these parent issues scales. Of primary concern is the lack of information regarding parents' issues in the newborn period and the meaning of those issues to parents. Clinical situations arise with parents asking questions of their providers during well child visits. These questions would be a rich source of information about the needs of parents as they are learning the various aspects of their new role, but these data have not been systematically collected. Many studies have shown a connection between parental behavior and outcomes of family, parent, and child development, but none of them described the meaning of the experiences of the parents during this time. Another concern is the lack of parent input in the literature. It is vital that parental input be included in measures designed to assess their feelings, attitudes, concerns, or behaviors, and that parents be involved throughout the process of investigating and implementing interventions designed to improve parenting. Only then can we decide if the needs of

these parents are being met. It is important that tools be developed that accurately assess the needs and concerns of parents at the earliest stages of parenting when they are in frequent contact with the health care providers so that guidance can be given to parents and follow-up planned for parents who are unsure. Because the success of early intervention is only as good as the tool used to measure the need for such interventions, a more adequate tool is needed to assess parents' early concerns.

The purpose of this study is to develop a tool to be used in clinical practice to assess the needs and concerns of first-time parents in the early stages of parenthood which would be useful in planning interventions. This study will test for clarity, internal homogeneity, and content validity of the instrument. The research question is: What is the best set of questions to assess first-time parents' needs and concerns during the early stages of parenthood?

CHAPTER III

Methods

In this chapter, the design, instrument, data collection procedures, and sample will be described.

Design

Instruments

The study was done using a descriptive psychometric design. The Postpartal Parenting Scale instrument being developed by three researchers is based on qualitative data reported by Imle and Drayden (1996) describing the needs and concerns of first time parents during the 11 week postpartum period. The concepts from the original qualitative data (Imle, 1989; Imle & Drayden, 1996) were: labor review, labor support, well-being of the baby in labor, resources for information, personal security base, partner relationship, health caregiver support, family support, friend support, expected baby, parent problem-solving process, baby signals, baby crying, normalizing baby, empathizing with baby, parenting actions, pattern recognition and forecasting, parental self-evaluation, redefinition of relationships, and parental satisfaction. Parents' language and original wording were used whenever possible. Items were deductively developed to represent the conceptual map of each concept identified. The specific aim of this study was to evaluate the initial instrument for: clarity of items and instructions, internal homogeneity, and content validity.

Clarity is a measurement of how well the instructions and questionnaire items get the idea across and how clear they are to the subjects. Internal Homogeneity is a measurement of how well items within a group measure only one domain variable.

Content validity is a measurement of how well the items as a group and individually represent the content of all possible items within that domain variable (Kerlinger, 1986; Waltz, et al., 1991). It is helpful to subject the questionnaire to review by both lay and professional content experts to assess clarity, completeness, and format (Waltz, et al., 1991). This allows the researcher to revise the items before investing time and funds for large-scale testing for reliability and validity (Imle & Atwood, 1988). This study used opinions of two parent panels, one to evaluate items and instructions for clarity and a second panel of parents to assess internal homogeneity and content validity.

Sample & Setting

The target population includes low-risk first-time parents during the postpartum period (up to 90 days after the birth of the child). The two parent panels were selected from parents in the Portland area, primarily at Oregon Health Sciences University (OHSU) clinics and perinatal units, some free standing birth centers, and by personal referrals. Criteria for inclusion in either panel included: (a) parenting a newborn for the first time and going through a normal range of parenting, (b) at least 18 years of age, (c) writing and speaking English as their first language, and (d) a minimum of a high school education or equivalent. Basic education and language skills were considered necessary for obtaining best responses from subjects. Mothers and fathers were both included. Parents did not have to be married, and one or both parents from a family could participate. Parents of diverse cultural and socioeconomic backgrounds were sought within these limits for each panel. Excluded from the sample were individuals who: (a) had reared a newborn previously, for they would have learned from those previous experiences and would not have the same issues and concerns with raising subsequent

infants; (b) had complicated or high-risk pregnancies or newborns; (c) were under 18 years old; and (d) had any other special circumstances surrounding parenting that produced special needs for parents that were beyond the scope of this study. Reading levels and language of the scale will be addressed during subsequent work in developing this instrument.

The sample was recruited from the OHSU Obstetrics Clinics and perinatal inpatient units, the Milwaukie Birth Center, and by word of mouth. Up to ten parents were selected for each parent panel. It is acceptable to use a small panel to review content of the questionnaire prior to use with larger samples (Waltz, et al., 1991). Statistical computations are less complex with groups of even numbers, particularly in multiples of ten (Polit & Hungler, 1995). Future instrument testing and research will include larger groups of parents from other parts of the city and state with a variety of cultural and socioeconomic backgrounds to provide greater opportunities to generalize the results.

There were four subjects on panel I and ten subjects on panel II (see Table 1). All of the subjects on panel I were female; 30% of the subjects in panel II were male. The mean age of the subjects was similar for the two groups, at 27.50 years ($SD = 5.80$ years) for panel I and 29.7 years ($SD = 7.00$) for panel II. The partners were much older on panel I ($M = 34.75$ years, $SD = 5.85$ years) than on panel II ($M = 29.60$ years, $SD = 5.34$ years). Panel II was slightly more educated, with a mean of 16.40 years ($SD = 2.22$ years) than their counterparts on panel I, with a mean of 14.50 years ($SD = 1.91$ years). All of the subjects on panel I and nine of the subjects (90%) in panel II were Caucasian; the other subject was Black/African American. All of the subjects on panel I reported an

Table 1. Demographic Data

Demographic	Phase I	Phase II
Number of subjects	4	10
Gender		
Female	100 %	70%
Male		30%
Age of subject, Mean	27.50yrs	29.50 yrs
Standard Deviation	5.80 yrs	7.00 yrs
Low to High	21-35 yrs	23-46 yrs
Age of partner, Mean	34.75 yrs	29.60 yrs
Standard Deviation	5.85 yrs	5.34 yrs
Low to High	28-42 yrs	25-39 yrs
Education, Mean	14.50yrs	16.40 yrs
Standard Deviation	1.91 yrs	2.22 yrs
Low to High	12-16 yrs	11-19 yrs
Ethnic background		
Caucasian	100%	90%
Black/African American		10%
Income		
Higher than ave		30%
Average	100%	60%
Below ave		10%
Age of infant, Mean	99.75 days	102.50 days
Standard Deviation	39.86 days	35.63 days
Low to High	54-137 days	63-193 days
Gestation		
Term	50%	30%
Early		60%
Mean		2.17 wks
Standard Deviation		2.04 wks
Low to High		1-6 wks
Late	50%	10%
Marital status		
Married	50% (none to each other)	90% (60% to each other)
Partnered	50% (none to each other)	10%
Length of time Married or Partnered, Mean	3.13 yrs	3.90 yrs
Standard Deviation	0.25 yrs	2.17 yrs
Low to High	3.00-3.50 yrs	1.00-8.50 yrs

(table continues)

Demographic	Phase I	Phase II
Maternity care location	OHSU 100%	OHSU 30% St. Vincent 20% McMinnville 20% Milwaukie Birth Center 30%
Normal pregnancy Abnormality	100%	80% 20% (2m bedrest, Hypertension)
Previous pregnancies Mean Low to High	50% 1.5 pregnancies 1-2 pregnancies	0%
Partner previously parented	25%	0%

“average” income where as panel II subjects reported 30% higher than average, 60% average, and 10% below average incomes.

The mean age for the infants was similar with 99.75 days ($SD = 39.86$ days) for panel I and 102.50 days ($SD = 35.63$ days) for panel II, both groups included infants older than originally planned. The infants in panel I were term (50%) or later than term (50%). In panel II, 30% were term, 10% were late, and 60% were early, with a mean of 2.17 weeks early ($SD = 2.04$ weeks).

Fifty percent of the subjects in panel I were married and the other 50% were partnered, while 90% of the subjects in panel II were married and only one was partnered. The subjects in panel I had been married or partnered for 3.13 years ($SD 0.25$ years) and the subjects in panel II had been married or partnered for 3.90 years ($SD 2.17$ years). All of the subjects in panel I compared to only 30% of the subjects in panel II had received maternity care at OHSU. The other subjects in panel II received care in a hospital setting (40%) or a free-standing birth center (30%). All of the subjects in panel I and only 80% of the subjects in panel II had a normal pregnancy, one couple in panel II reported extended bedrest for hypertension. Fifty percent of the subjects in panel I had a mean of 1.5 previous pregnancies; none of the subjects in panel II reported any previous pregnancy. Only one subject (panel I) had a partner that had previously parented. These individuals were similar to the original sample for the qualitative study (Imle, 1989).

Human Subjects Protection

Informed consent was obtained from each participant prior to involvement with any aspect of the study (see Appendix A). Participants were informed of their right to withdraw at any time before or during the study without affecting their health care. The

Institutional Review Board at Oregon Health Sciences University approved the study proposal as exempt from full review before investigators proceeded. Tape recordings of interviews used to make notes on response sheets and were erased following these transcriptions. No names or identifying information appeared on any of the forms, only subject numbers were used. Data will be retained in a locked file by investigators for the required length of time and then destroyed.

Procedures

Researchers sought participants by reviewing the delivery records at the OHSU perinatal unit to identify eligible subjects. Information regarding the study and need for subjects was given to staff at the OHSU perinatal units and Obstetric Clinics and Milwaukie Birth Center. The researchers contacted patients by mail; face-to-face recruitment was not possible. Word of mouth advertising and volunteers from the community also contributed subjects to the sample. The camaraderie and friendship among expectant parents at similar stages of pregnancy has been well documented (Nichols & Humenick, 1988) and, thus, it was expected that volunteers may recruit friends to participate.

Data collection took place in the subject's home or in another location the subject chose. Subjects were given the opportunity to choose the location and appointments were arranged in advance. It was essential that participation not impose a hardship on the subjects. Each parent was contacted two to four hours prior to the appointment to inquire about any circumstances that might interfere with the interview, such as a fussy infant, parental fatigue, visitors, or illness. Participants were given an opportunity to reschedule the interview if necessary. Ideally, the interview took place at a time when the parent was

able to devote his or her attention to the interview and questionnaire (i.e., when the infant is napping) and in a location with few distractions (i.e., telephone, doorbell, visitors, etc.).

Interviews were conducted with each subject. Questionnaires were completed in the presence of the data collector and reviewed with each subject after completion. Separate data forms were used for partners or spouses. Comments by each subject were recorded word-for-word. Interviews with two subjects were conducted in two sessions during Phase Two due to interruptions by the infant. One interview was conducted in a public restaurant, all other interviews were accomplished in the subjects' home. The expected sample for Phase One had been five, but four individuals were utilized due to the perceived quality of responses received from the four subjects and time limits.

Instruments

The instruments were the draft Postpartal Parenting Scale (PPS), the clarity questionnaire and trial questionnaires, and the internal homogeneity/content validity rating form (see Appendices C, D, and E). The PPS questionnaire items were broken down into smaller sets, on pages, that were more manageable. With each item, the possible response formats were given. Participants were given the questionnaire, instructions, and a response sheet. They were encouraged to make remarks on the response sheet and to share their remarks with the researcher after rating all of the items. Printed questionnaire forms were used to facilitate interviews to collect data. Permission for tape recording of comments during the interview portion of data collection was used to ensure capturing the wording and specific comments of the subjects. The tapes were

erased after comments were written on the forms. This procedure has been described by Imle and Atwood (1988).

When developing the scales representing the postpartal-parenting concerns, the researchers believed some concepts to be best measured by Likert-type items and other items to be better indexed by items that could reflect parents' understanding of the ordering of stages (parental development). Other concepts needed items that could be answered by choices among paired adjectives (inter-personal support and experience of parenting) reflecting affective content. These items were developed using a Guttman scaling technique (Kerlinger, 1986). Other concepts could be best measured using a table or a checklist.

The items on the Clarity questionnaire are Likert-type items (see Appendix C). The trial questionnaires utilized a variety of formats. The Partner, Family, and Friend Support items used word-pairs to describe the support given to the individual by the partner, family, and friends. Informational Support utilized a table with the categories of information (e. g., Baby Care, Development) and specific resources which may provide information (e. g., Partner, Family, Friends). The Parent Problem Solving Process items were phrase pairs describing parents feelings about learning the parent problem solving process skills. The two sets of Parental Development items used rank and order of the items to determine the sequencing of the stages of parental development and knowledge.

The original 96 items, in the Clarity Questionnaire, included 37 items previously tested as a part of the Third Trimester Concerns Scale (TTCS, Imle, 1989) as well as the 59 new items deductively developed from the qualitative data collected by Imle and Drayden (1996) during the postpartum period. Fourteen of the previously

tested TTCS items were revised slightly in wording to fit the early postpartum period because they fit conceptually with postpartal concerns concepts (labor review, labor support, health caregiver support, financial adequacy, occupational adequacy) generated by the Imle and Drayden work in 1996. In addition, 34 items were included on the trial questionnaires and matrix table (multiple item response). An additional fifty-nine TTCS items were tested for internal homogeneity and content validity during Phase II to increase subscale size, 16 of these were slightly revised to fit the early postpartum period. These items came from the third trimester concepts (each a subscale) Pregnancy Appearance, Pregnant Body Predictability, Well Being of Infant which appeared conceptually similar to the postpartum and parenting concepts of Closing the Pregnancy, Desire to Be a Parent, Changing Self Definition, Altering Relationships for Family, Changing Daily Life Routines, Negotiating Parental Decisions, Remembered Practice with Children, Defining Expected Baby, Learning Childcare Skills, Partner Relationship, Resources for Information, Social Support of Relatives, and Social Support of Friends (see Table 2). The items needed to be tested for internal homogeneity and content validity along with the new postpartum items if they were to be included in the final instrument. New items represented postpartum and parenting concepts of Closing the Pregnancy, Reformulation of Family, Previous Parent-Child Experiences, Expected Baby, Parent Problem Solving Process, Interpreting Baby Signals, Care Strategies/Parenting Actions, Informed Caregiving, and External Support, concepts that help complete the conceptual map covering the concerns of first-time parents during early postpartum. There were 186 items in the

Table 2. Concept Map

Initial Concepts and Subscales	TTCS Supplementation
Concepts	Concepts
Labor Review	Coping with Labor
Labor Support	Coping with Labor, Labor Support Person
Revisiting the Pregnancy	Pregnancy Appearance, Pregnant Body Predictability
Well Being of Baby in Labor	Well Being of Infant
Resources for Information	Resources for Information
Personal Security Base	Financial Adequacy, Occupational Adequacy, Housing Adequacy
Partner Relationship	Partner Relationship
Health Caregiver Support	Health Caregiver Support
Family Support	Social Support of Relatives
Friend Support	Social Support of Friends
Previous Child Experience	Remembered Practice with Children
Expected Baby	Defining Expected Baby
Parent Problem Solving Process	Learning Childcare Skills
Baby Signals	
Baby Crying	
Normalizing Baby	
Empathizing with Baby	Empathizing with Baby
Parenting Actions	Learning Childcare Skills
Pattern Recognition and Forecasting	
Informed Caregiving	Learning Childcare Skills
Parental Self-Evaluation	
Reformulating Family	Changing Self Definition, Changing Daily Life Routines, Negotiating Parental Decisions
Redefinition of Relationships	Altering Relationships for Family, Partner Relationship
Parental Satisfaction	Desire to Be a Parent

final set of subscales for Internal Homogeneity and Content Validity evaluation, the rank and order sets had 12 items, with a total of 198 items evaluated in Phase II.

Phase One

Panel 1

The first panel of $n = 4$ parents rated items and instructions for clarity. Items from all subscales were randomly placed into sets for clarity evaluation. Parents were asked to answer questions on the clarity and meaning of the items and clarity of instructions. Parents were then asked to help define appropriate rating anchors for responses for each item (i.e., degree of concern, frequency of occurrence, or level of agreement). This information was used to formulate response formats for all items. One page of items will be presented at a time to prevent the meaning of any item from leading the rater to the meaning of any other items. Responses to the items and comments by the subjects were reviewed and items were revised based on an 80% agreement (see Analysis section). The revised items were included in the form for the second panel of parents to evaluate.

Evaluation Form

Subjects were given the Clarity questionnaire form and four trial questionnaires (see Appendix C). The items for clarity ratings were placed in random order on the forms. Individuals were asked to rate instructions and each of the items on the Clarity questionnaire for clearness (1 = Yes, 0 = No) and to choose a response format for each item (A = Agreement, F = Frequency, C = Concern). The trial questionnaires included Partner, Family, and Friend Support, Informational Support, Parent Problem-Solving Process, and Stages of Parental Development. All four of these trial questionnaires were rated for format, clarity, and completeness. Separate ratings were

given for clarity and ease of response for instructions, clarity and ease of response for items, and appropriateness, completeness, and duplication of items using response options of 1 = Yes or 0 = No for all ratings. All forms had additional space marked for comments.

Analysis

Percent agreement (P_o) was used to analyze data collected from the two panels. Percent agreement was determined by the number of positive responses divided by the total number of responses for each item or set. A criterion of 80% agreement was planned to retain items and sets in their original form. P_o values greater than or equal to 80% are generally considered acceptable for most situations (Topf, 1986; Waltz, et al., 1991). However, panel I consisted of only four parents, so the nearest approximation to the criterion was 75% on Yes-No responses. Waltz, Strickland, & Lenz (1991) use a 1-4 rating scale per item, this allows 80% to be achieved by 10 raters if mean rating is 3.2. All items and sets scoring below 80% were reviewed before making decisions about rewriting, rearranging, or deleting (see Appendix F). Parent comments and suggestions were used to guide decisions. Parents' original wording was used whenever possible in revisions. Parents share a common language and use of this native language is likely to aid the subjects' understanding and comprehension (Polit & Hungler, 1995; Waltz, et al., 1991).

Percent agreement is being used because of ease and speed of computation. This analysis will provide information about the appropriateness of questions and subscale sets. A more stringent analysis of data is not necessary in a preliminary study to determine the best set of items for the instrument. While Kappa or Phi may provide more

rigorous analysis as they adjust for agreement by chance, they are much more difficult to compute. These procedures have higher rates of error in computation and require considerable time (Topf, 1986). Percent agreement will provide a rapid analysis and allow instrument development to progress without delay.

Percent agreement was calculated per item by summing the responses to clarity (1 = Yes, 0 = No) and dividing by four, the number of responses received per item. The response format choices were tallied and divided by four.

Phase Two

Panel 2

The second panel of $n = 10$ parents rated groups of items for internal homogeneity and content validity within subscales. The same panel rated subscales for internal homogeneity and content validity so that differences in reliability and validity were clear and not due to differences between panels. All items were grouped within their respective subscale sets for these last two rating procedures. Subscale sets for internal homogeneity were presented without labels or definitions of concepts to allow the raters to judge the general fit of all items together and each individual item to the group of items for each subscale. Following that, the subscale sets for content validity included labels and definitions of concepts for each subscale set. The raters were asked to determine if the items, first as a group and then individually, belonged to the concept labeled, if the label fit the defined concept, if items adequately cover the domain of the concept, and whether any items were redundant. The two sets of Parental Development items were rated last for Content Validity. Subjects were asked to rank order sets of statements.

Evaluation Form

A second panel of ten subjects were given the Internal Homogeneity and Content Validity Questionnaires during a single interview. Items had been sorted by the researcher into sets using the postpartal concepts. Individuals rated the set of items first on Internal Homogeneity followed by Content Validity for each label, definition, and scale. For Internal Homogeneity, the whole set of items was rated as belonging together as a group (1 = Yes, 0 = No) prior to rating the individual questions as belonging to the group (1 = Not at All, 2 = A little, 3 = Somewhat, and 4 = Very much). For the Content Validity assessment, a label and definition were provided. Each rater was asked to respond to their "fit" together (1 = Yes, 0 = No). The group of items as a whole was then rated as belonging to the label and definition (1 = Yes, 0 = No), followed by individual items being rated as belonging to the label and definition (1 = Not at All, 2 = A little, 3 = Somewhat, and 4 = Very much). The Content Validity questionnaire also included two sets of Parental Development items to rank order. The first set was to be ranked according to the order of what happened after a parent had their new baby (1 = First, 7 = Seventh). The second set was rated according to what the individual thought was necessary for a parent to be a successful parent giving care to the baby (1 = First, 5 = Fifth). All forms had additional space for comments.

Analysis

Calculations for label and definition agreement and for fit between the whole set of items and label and definition were made by summing the responses by all raters (1 = Yes, 0 = No) and dividing by 10, the total number of raters. Calculations for the

item mean rating and percent per response were made for each item and each subscale, for Internal Homogeneity and Content Validity evaluations. Item mean ratings for individual items were calculated using the rating scale (1-4). Each rater's response was coded with the corresponding numerical value, the values were summed across raters, and then divided by the total number of raters for that item. The result is reported as the item mean rating (see Appendix G). Mean item percent was calculated by taking the item mean rating and dividing it by 4, the total possible score for each item. Subscale item mean rating was calculated by summing the item means for all items in a subscale and dividing by the total number of items in the subscale. The subscale mean percent was calculated by taking the subscale item mean rating and dividing it by 4, the total possible score for each item.

The Percent agreement (P_o) of 80% or higher was required to retain items and sets in their original form for Internal Homogeneity and Content Validity. For all items rated on the 1-4 response scale, by 10 raters, a mean score of 3.2 or better was needed to achieve the 80% criterion. All other ratings are reported as percentages and the 80% figure was used in evaluation of items.

The Parental Development rank order sets are reported as tallies of subjects ratings of the items. For example, all subjects rating an item first are reported under the heading "First," all subjects rating an item second are reported under the heading "Second" (see Tables 3 and 4). All ten subjects ranked each item.

Table 3. Stages of Parental Development: Set 1

Item	Statements	First	Second	Third	Fourth	Fifth	Sixth	Seventh
1	I am usually satisfied with how I solve my baby's problems.							
2	Sometimes I speak for the baby so that I can explain how the baby feels.							
3	I notice how the baby behaves.							
4	I compare my baby's behavior with my own and with the behaviors of other family members.							
5	I tell others about the labor and delivery experience.							
6	I can anticipate my baby's caregiving needs.							
7	I have come to terms with my labor and delivery experience, including my behavior, and others' behavior during the birth process.							

Table 4. Stages of Parental Development: Set 2

Item	Statements	First	Second	Third	Fourth	Fifth
1	Noticing that the baby's responses to my actions tell me that I'm doing the right thing.					
2	Noticing that my baby's behavior is similar to other family members.					
3	Noticing the way my baby acts to anticipate what he/she will need soon.					
4	Noticing that my baby's behavior changes from time to time.					
5	Noticing that the way my baby acts helps me understand how the baby feels.					

CHAPTER IV

Results

Phase 1

The Clarity questionnaire and the four trial questionnaires (see Appendix C) were administered to four subjects. Of the 96 items on the Clarity Questionnaire, 89 were rated as clear (Yes) by at least 75 % (3 of the 4) of the individuals, 5 were rated as clear by 50% of the individuals, and 2 items were rated as clear by only 25% of the individuals. No items were rated unclear (No) by all participants. Individual's suggestions were used to rewrite 12 items and six additional items were edited by the authors based on feedback and retained. All other items were retained in their original form (see Appendix F).

The individuals chose response formats for all questions. The Agreement response was chosen by at least 50% of the individuals for 22 items. The Frequency response was chosen by at least 50% of the individuals for 18 items. The Degree of Concern was chosen by at least 50% of the individuals for 38 items. Eighteen items were split with responses of 50% for each of two different response formats. Four items had been split in two by the authors during editing and each new item was then assigned a response format. The researchers reviewed the formats chosen by the participants to ensure how the desired information could be interpreted with each response format. They reassigned the response formats for 15 items because of conceptual concerns about the meaning of an item. Agreement was assigned to 42 items, Frequency to 15 items, and Concern to 43 items (items = 100).

Trial questionnaires included Partner Support, Family Support, Friend Support, Informational Support, Parent Problem Solving Process, and Stages of Parental Development (two scales). The Partner, Family, and Friend Support questionnaire instructions were rated clear and easy to respond to by 75% of the individuals for all sections (see Table 5). The word-pairs were rated clear and easy to respond to and as descriptive of supportive behaviors by 100% of the individuals for all sections. Two additional word-pairs were suggested by 50% of the individuals for partner support (involved, not involved and encouraging, not encouraging) and by 25% of the individuals for family support (approving, disapproving), which were incorporated into the instrument. The friend support section was supplemented with two new word-pairs (interested, not interested and understanding, not understanding) by the researchers based on comments by a subject.

The Informational Support questionnaire instructions and example were rated as clear by 100% of the individuals (see Table 6). The items in the questionnaire table were rated clear and easy to answer by 100% of the individuals. Twenty-five percent of the individuals suggested new items to be included and indicated that there were unneeded duplicates. The researchers reviewed this questionnaire and considered that while it may be an excellent tool to be administered singly, it would require more time of the individuals than desired for inclusion into this instrument. Instead, six items were written to index the availability of reliable information. The table gave more information than needed. The decision to replace it was based on the importance of knowing if they had a source for information. They were:

PPRI1, I have resources available to me for information I need about the baby.

Table 5. Personal Support from Partner, Family, and Friends

Questions	Partner Support	Family Support	Friend Support
Is the set of instructions clear and easy to respond to?	75%	75%	75%
Are the pairs of words clear and easy to respond to?	100%	100%	100%
Are the word-pairs descriptive of behaviors that partners may use to support, or not support, each other?	100%	100%	100%
Are there other word-pairs that should be used?	50%	25%	0%

Table 6. Informational Support Table

Questions	Rating
Are the instructions and example clear?	100%
Are the items clear in their meaning?	100%
Are all items included that should be there?	75%
Are there duplicates that are not needed?	25%
Is it easy to answer?	100%

PPRI2, I have resources available to me for information I need about parenting.

PPRI3, The information I get about parenting is useful.

PPRI4, The information I get about the baby is useful.

PPRI5, I wish I had someone to answer my questions about the baby.

PPRI6, I would like someone to talk to about parenting.

The Parent Problem-Solving Process questionnaire included phrase pairs that described parents' feelings about having to solve problems related to being a parent of a new baby. The instructions were rated clear by 75% of the individuals (see Table 7). Phrases were rated clear and easy to understand and as representing the feelings of new parents challenged with problem solving by 75% of the individuals. No new phrases were suggested.

The Stages of Parental Development questionnaire had two checklist scales of phrase pairs. The phrases describe experiences of new parents and infant behaviors. Subjects were asked to check all phrases that describe experiences they have had with their own baby. The instructions were rated as clear by 100% of the individuals (see Table 7). Phrases were rated clear and easy to understand and as representing the feelings of new parents challenged with problem solving by 100% of the individuals. No new phrases were suggested for set 1, 25% of the individuals suggested a new item for set 2, but it did not fit conceptually and was not incorporated into the instrument. The researchers added one phrase to set 1, to complete the concepts of early postpartum. It was "I tell others about the labor and delivery experience."

Table 7. Parental Development Scales

Questions	Parent Problem-Solving Process	Stages of Parental Development	
		Set 1	Set 2
Are the instructions clear?	75%	100%	100%
Are the phrases clear and easy to understand?	75%	100%	100%
Do these phrases represent the feelings new parents have about the challenge of problem-solving the new baby?	75%	100%	100%
Should other phrases be added to better represent the feelings new parents have about the challenge of problem-solving the new baby?	0	0	25%

Summary

Panel I rated 89 of the 96 items in Phase I as clear and suggested few changes to the remaining items. Fourteen items were rewritten or edited. The researchers split four items and chose response formats for all items. No items were lost to non-clarity or conceptual duplication in Phase I. Panel I rated the trial questionnaires as clear and easy to respond to and suggested a few new items be added. The researchers deleted one detailed trial questionnaire and replaced it with six new items. New items were added to the other trial questionnaires and the formats were retained. Some previously tested items from the TTCS were added during both phases of evaluation to complete the conceptual map of the scale.

Phase 2

The Internal Homogeneity and Content Validity Questionnaires were administered to 10 subjects, corresponding to the expected sample. The subjects answered the Internal Homogeneity (IH) questions first then the Content Validity (CV) questions for each subscale, followed by the rank order lists for CV. Responses were expected from ten persons for each item, but all ten subjects did not respond to all items, so the means are based on the actual number of responses received. Results will be reported by subscale with Internal Homogeneity results reported, followed by Content Validity results and the Stages of Parental Development sets for rank order results.

The Baby Crying subscale, with 21 items (see Appendix G, Table G1), had IH ratings of 100% for the whole set and individual items were rated from one to four, with item mean ratings of 3.5 to 4.0. The subscale mean homogeneity rating was 3.74

Table 8. Baby Crying Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
4.0 (100)	3	4.0 (100)	6
3.9 (97.5)	2	3.9 (97.5)	4
3.8 (95)	4	3.8 (95)	5
3.7 (92.5)	6	3.7 (92.5)	2
3.6 (90)	4	3.6 (90)	3
3.5 (87.5)	2	3.5 (87.5)	1
Subscale n	21	Subscale n	21
Mean Homogeneity	3.74 (93.6)	Mean CVI	3.82(95.6)

(see Table 8). The Baby Crying subscale had CV ratings of 100% for label to definition fit and 100% for whole group to label/definition fit. Individual items were rated from one to four, with item mean ratings of 3.5 to 4.0. The subscale mean Content Validity Index (CVI) rating was 3.82. Two redundant items were identified by 20% of the subjects, items PPBC15 and PPBC16. No new items were suggested. One subject suggested adding to the subscale definition to include "that the baby may cry for a reason," as this is covered by many of the items.

The Labor Review subscale, with eight items (see Appendix G and Table G2), had IH ratings of 100% for the whole set of items and individual items were rated from two to four, with item mean ratings of 3.7 to 4.0. The subscale mean homogeneity rating was 3.84 (see Table 9). The Labor Review subscale had CV ratings of 100% for label to definition fit and 100% for whole group to label/definition fit. Individual items were rated from two to four, with item mean ratings of 3.8 to 4.0. The subscale mean CVI rating was 3.88. No redundant items were identified. One subject (10%) suggested one new item; it was "Prenatal education was helpful/beneficial."

The Health Caregiver Relationship/Supportiveness subscale, with 15 items (see Appendix G and Table G3), had IH ratings of 100% for the whole set of items and individual items were rated from one to four, with item mean ratings of 3.3 to 4.0. This subscale's mean homogeneity rating was 3.80 (see Table 10). The Health Caregiver Relationship/Supportiveness subscale had CV ratings of 100% for label to definition fit and 100% for whole group to label/definition fit. Individual items were rated from one to four, with item mean ratings of 3.1 to 4.0. The subscale mean CVI rating was 3.83. Two redundant items were identified by one subject (10%), items

Table 9. Labor Review Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
4.0 (100)	1	4.0 (100)	2
3.9 (97.5)	3	3.9 (97.5)	2
3.8 (95)	2	3.8 (95)	4
3.7 (92.5)	2		
Subscale n	8	Subscale n	8
Mean Homogeneity	3.84(95.9)	Mean CVI	3.88(96.9)

Table 10. Health Caregiver Relationship/Supportiveness Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
4.0 (100)	3	4.0 (100)	6
3.9 (97.5)	3	3.9 (97.5)	5
3.8 (95)	5	3.7 (92.5)	2
3.7 (92.5)	2	3.4 (85)	1
3.6 (90)	1	3.1 (77.5)	1
3.3 (82.5)	1		
Subscale n	15	Subscale n	15
Mean Homogeneity	3.80(95)	Mean CVI	3.83(95.7)

AT51HCG and PPHCG1. One subject (10%) suggested one new item:

“Doctor/midwife supported my choices/preferences during labor.” The only item rated 3.1 for CV was PPHCG6. Thirty percent of the subjects found this item did not fit the definition because the definition specified providers “in pregnancy, labor or birth” and did not include providers in the pediatric clinic.

The Empathizing with Baby subscale, with six items (see Appendix G and Table G4), had IH ratings of 100% for the whole set of items and individual items were rated from two to four, with item mean ratings of 3.4 to 4.0. The subscale mean homogeneity rating was 3.87 (see Table 11). The Empathizing with Baby subscale had CV ratings of 100% for label to definition fit and 100% for whole group to label/definition fit. Individual items were rated from two to four, with item mean ratings of 3.6 to 4.0. The subscale mean CVI rating was 3.90. Two sets of redundant items were identified by 20% of the subjects. One subject (10%) identified AT172EB and PPEB1, another subject (10%) identified those same two items as being redundant with yet a third item, PPEB3. One subject (10%) suggested one new item: “How concerned are you about doing things the baby needs, even though they may make him unhappy or are things he doesn’t like.”

The Personal Security Base subscale, with eight items (see Appendix G and Table G5), had IH ratings of 100% for the whole set of items and individual items were rated from one to four, with item mean ratings of 2.3 to 3.9. The subscale mean homogeneity rating was 3.49 (see Table 12). The Personal Security Base subscale had CV ratings of 100% for label to definition fit and 100% for whole group to label/definition fit. Individual items were rated from one to four, with item mean

Table 11. Empathizing with Baby Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
4.0 (100)	3	4.0 (100)	4
3.9 (97.5)	2	3.8 (95)	1
3.4 (85)	1	3.6 (90)	1
Subscale n	6	Subscale n	6
Mean Homogeneity	3.87(96.7)	Mean CVI	3.90(97.5)

Table 12. Personal Security Base Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
3.9 (97.5)	4	4.0 (100)	5
3.4 (85)	1	3.9 (97.5)	1
3.3 (82.5)	2	3.5 (87.5)	1
2.3 (57.5)	1	2.5 (62.5)	1
Subscale n	8	Subscale n	8
Mean Homogeneity	3.49(87.2)	Mean CVI	3.74(93.4)

ratings of 2.5 to 4.0. The subscale mean CVI rating was 3.74. Two items, T01HA and T87HA, were identified as redundant by one subject (10%). One subject (10%) suggested one new item: "Future responsibilities, stress of planning future, home, college, etc." Item T234OA was rated 2.3 for IH and 2.5 for CV; comments from 30% of the subjects revealed that "whether my job was satisfying or not" had little to do with providing for one's family because one still had to work. Two subjects (20%) stated that it was a personal fulfillment or quality issue, not a personal security issue.

The Partner subscale, with 13 items (see Appendix G and Table G6), had IH ratings of 100% for the whole set of items. The individual items were rated from two to four, with item mean ratings of 3.7 to 4.0. The subscale mean homogeneity rating was 3.94 (see Table 13). The Partner subscale had CV ratings of 100% for label to definition fit and 100% for whole group to label/definition fit. Individual items were rated from one to four, with item mean ratings of 3.4 to 4.0. The subscale mean CVI rating was 3.89. Items PART6 and T132PR were identified by one subject (10%), as redundant. No new items were suggested.

The Parent Problem Solving Process subscale, with three items (see Appendix G and Table G7), had IH ratings of 100% for the whole set of items and individual items were rated from two to four, with item mean ratings of 3.4 to 3.7. The subscale mean homogeneity rating was 3.53 (see Table 14). The Parent Problem Solving Process subscale had CV ratings of 100% for label to definition fit and 90% for whole group to label/definition fit. Individual items were rated from one to four, with item mean ratings of 3.4 to 3.9. The subscale mean CVI rating was 3.63. No redundant items were identified and no new items were suggested.

Table 13. Partner Subscale Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
4.0 (100)	9	4.0 (100)	7
3.9 (97.5)	2	3.9 (97.5)	2
3.7 (92.5)	2	3.8 (95)	3
		3.4 (85)	1
Subscale n	13	Subscale n	13
Mean Homogeneity	3.94(98.5)	Mean CVI	3.89(97.3)

Table 14. Parent Problem Solving Process Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
3.7 (92.5)	1	3.9 (97.5)	1
3.5 (87.5)	1	3.6 (90)	1
3.4 (85)	1	3.4 (85)	1
Subscale n	3	Subscale n	3
Mean Homogeneity	3.53(88.3)	Mean CVI	3.63(90.8)

The Labor Support subscale, with five items (see Appendix G and Table G8), had IH ratings of 80% for the whole set of items. Individual items were rated from one to four, with item mean ratings of 2.5 to 4.0. The subscale mean homogeneity rating was 3.46 (see Table 15). The Labor Support subscale had CV ratings of 100% for label to definition fit and 80% for whole group to label/definition fit. Individual items were rated from one to four, with item mean ratings of 2.2 to 4.0. The subscale mean CVI rating was 3.32. No redundant items were identified. One new item was suggested by one subject (10%): "Did the labor support person feel effective?" Two items were given low ratings, AT316CWL (IH of 2.8 and CV of 2.2) and PPLR3 (IH of 2.5 and CV of 2.5) because the subjects felt these items belonged in the Labor Review subscale.

The Baby Signals subscale, with five items (see Appendix G and Table G9), had IH ratings of 90% for the whole set of items and individual items were rated from one to four, with item mean ratings of 2.7 to 3.8. The subscale mean homogeneity rating was 3.46 (see Table 16). The Baby Signals subscale had CV ratings of 100% for label to definition fit and 100% for whole group to label/definition fit. Individual items were rated from one to four, with item mean ratings of 2.3 to 4.0. The subscale mean CVI rating was 3.50. Two sets of redundant items were identified by one subject (10%); they were PPBS1 with PPBS4, and PPBS2 with PPBS3, as well as PPBS5. No new items were suggested. Item PPBS3 was rated 2.7 for IH and 2.3 for CV; seven of the subjects (70%) indicated this item fit in the Expected Baby subscale.

The Normalizing Baby subscale, with 4 items (see Appendix G and Table G10), had IH ratings of 100% for the whole set of items. Individual items were rated from

Table 15. Labor Support Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
4.0 (10)	3	4.0 (100)	2
2.8 (70)	1	3.9 (97.5)	1
2.5 (62.5)	1	2.5 (62.5)	1
		2.2 (55)	1
Subscale n	5	Subscale n	5
Mean Homogeneity	34.6(86.5)	Mean CVI	3.32(83)

Table 16. Baby Signals Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
3.8 (95)	2	4.0 (100)	1
3.7 (92.5)	1	3.8 (95)	2
3.3 (82.5)	1	3.6 (90)	1
2.7 (67.5)	1	2.3 (57.5)	1
Subscale n	5	Subscale n	5
Mean Homogeneity	3.46(86.5)	Mean CVI	3.50(87.5)

three to four, with item mean ratings of 3.9 to 4.0. The subscale mean homogeneity rating was 3.95 (see Table 17). The Normalizing Baby subscale had CV ratings of 90% for label to definition fit and 100% for whole group to label/definition fit. Individual items were rated from three to four, with item mean ratings of 3.9 to 4.0. The subscale mean CVI rating was 3.98. Two items were identified as redundant by 30% of the subjects; they were PPNB2 and PPNB3. No new items were suggested.

The Pattern Recognition subscale, with six items (see Appendix G and Table G11), had IH ratings of 100% for the whole set of items and individual items, rated from one to four, had item mean ratings of 3.3 to 4.0. The subscale mean homogeneity rating was 3.75 (see Table 18). The Pattern Recognition subscale had CV ratings of 100% for label to definition fit and 100% for whole group to label/definition fit. Individual items were rated from one to four, with item mean ratings of 3.6 to 4.0. The subscale mean CVI rating was 3.92. Two sets of items were identified as redundant. Two subjects (20%) identified items PPPRF1 with PPPRF3.2 as redundant and one subject (10%) identified PPPRF3.1 with PPPRF4 as redundant. No new items were suggested.

The Parent Self-Evaluation subscale with 12 items (see Appendix G and Table G12) had IH ratings of 70% for the whole set of items. Individual items were rated from one to four, with item mean ratings of 2.8 to 3.8. The subscale mean homogeneity rating was 3.33 (see Table 19). The Parent Self-Evaluation subscale had CV ratings of 90% for label to definition fit and 80% for whole group to label/definition fit. Individual items were rated from one to four, with item mean ratings of 3.3 to 4.0. The subscale mean CVI rating was 3.72. No redundant items

Table 17. Normalizing Baby Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
4.0 (100)	2	4.0 (100)	3
3.9 (97.5)	2	3.9 (97.5)	1
Subscale n	4	Subscale n	4
Mean Homogeneity	3.95(98.8)	Mean CVI	3.98(99.4)

Table 18. Pattern Recognition Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
4.0 (100)	2	4.0 (100)	4
3.9 (97.5)	2	3.9 (97.5)	1
3.4 (85)	1	3.6 (90)	1
3.3 (82.5)	1		
Subscale n	6	Subscale n	6
Mean Homogeneity	3.75(93.8)	Mean CVI	3.92(97.9)

Table 19. Parent Self-Evaluation Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
3.8 (95)	1	4.0 (100)	2
3.7 (92.5)	1	3.9 (97.5)	3
3.6 (90)	1	3.7 (92.5)	3
3.5 (87.5)	3	3.6 (90)	2
3.4 (85)	1	3.3 (82.5)	2
3.3 (82.5)	1		
3.1 (77.5)	1		
3.0 (75)	1		
2.8 (70)	2		
Subscale n	12	Subscale n	12
Mean Homogeneity	3.33(83.3)	Mean CVI	3.72(92.9)

were identified and no new items were suggested. Four items obtained IH ratings of 2.8 to 3.1 (PPPSE1.1, PPPSE2.1, PPPSE2.2, and PPPSE3) but were given 3.3 to 3.7 ratings for CV. Four subjects (40%) commented that this was a “self-”evaluation category but that many of the items referred to evaluation by other individuals not just the parent.

The Resources for Information subscale, with nine items (see Appendix G and Table G13), had IH ratings of 100% for the whole set of items and individual items, rated from one to four, had item mean ratings of 3.1 to 4.0. The subscale mean homogeneity rating was 3.80 (see Table 20). The Resources for Information subscale had CV ratings of 100% for label to definition fit and 100% for whole group to label/definition fit. Individual items were rated from one to four, with item mean ratings of 3.5 to 4.0. The subscale mean CVI rating was 3.86. Four sets of items were identified as redundant: PPRI1 with PPRI2, PPRI3 with PPRI4, PPRI1 with PPRI5, and PPRI5 with PPRI6 and T236RI. No new items were suggested. Item T265RI was rated 3.1 for IH, but was rated 3.5 for CV. One of the subject’s (10%) comments on this item was that “baby supplies weren’t included in the definition.”

The Family Support subscale, with nine items (see Appendix G and Table G14), had IH ratings of 100% for the whole set of items. Individual items, were rated from two to four, had item mean ratings of 3.4 to 4.0. The subscale mean homogeneity rating was 3.90 (see Table 21). The Family Support subscale had CV ratings of 100% for label to definition fit and 90% for whole group to label/definition fit. Individual items were rated from one to four, with item mean ratings of 3.5 to 4.0. The subscale

Table 20. Resources for Information Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
4.0 (100)	3	4.0 (100)	4
3.9 (97.5)	3	3.9 (97.5)	3
3.8 (95)	1	3.5 (87.5)	2
3.6 (90)	1		
3.1 (77.5)	1		
Subscale n	9	Subscale n	9
Mean Homogeneity	3.80(95)	Mean CVI	3.86(96.4)

Table 21. Family Support Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
4.0 (100)	7	4.0 (100)	2
3.7 (92.5)	1	3.9 (97.5)	5
3.4 (85)	1	3.8 (95)	1
		3.5 (87.5)	1
Subscale n	9	Subscale n	9
Mean Homogeneity	3.90(97.5)	Mean CVI	3.87(96.7)

mean CVI rating was 3.87. One subject (10%) identified two sets of redundant items: PPFAMS2 with PPFAMS5 and PPFAMS3 with PPFAMS4. One subject (10%) suggested one new item: "What to do with too much advice? Screen out info?"

The Friend Support subscale, with 12 items (see Appendix G and Table G15), had IH ratings of 100% for the whole set of items. Individual items were rated from three to four, with item mean ratings of 3.7 to 4.0. The subscale mean homogeneity rating was 3.97 (see Table 22). The Friend Support subscale had CV ratings of 100% for label to definition fit and 100% for whole group to label/definition fit. Individual items were rated from two to four, with item mean ratings of 3.6 to 4.0. The subscale mean CVI rating was 3.96. Four sets of items were identified as redundant by 20% of the subjects: PPFRS2 with PPFRS5, PPFRS3 with PPFRS4, and PPFRS7 with PPFRS1, PPFRS2 and PPFRS5. The same subject indicated that PPFRS6 and PPFRS8 were duplicates, suggesting to keep PPFRS8. No new items were suggested.

The Parental Satisfaction subscale, with nine items (see Appendix G and Table G16), had IH ratings of 90% for the whole set of items. Individual items, rated from one to four, had item mean ratings of 3.0 to 3.9. The subscale mean homogeneity rating was 3.63 (see Table 23). The Parental Satisfaction subscale had CV ratings of 100% for label to definition fit and 90% for whole group to label/definition fit. Individual items were rated from one to four, with item mean ratings of 2.5 to 3.9. The subscale mean CVI rating was 3.60. Two items were identified as redundant by one subject: AT216DBP with AT317DBP. No new items were suggested. Item AT04DBP was rated 2.5 for CV and 3.0 for IH. Thirty percent suggested rewording this item,

Table 22. Friend Support Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
4.0 (100)	10	4.0 (100)	10
3.9 (97.5)	1	3.9 (97.5)	1
3.7 (92.5)	1	3.6 (90)	1
Subscale n	12	Subscale n	12
Mean Homogeneity	3.97(99.2)	Mean CVI	3.96(99)

Table 23. Parental Satisfaction Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
3.9 (97.5)	2	3.9 (97.5)	1
3.8 (95)	1	3.8 (95)	2
3.7 (92.5)	2	3.7 (92.5)	4
3.6 (90)	2	3.6 (90)	1
3.5 (87.5)	1	2.5 (62.5)	1
3.0 (75)	1		
Subscale n	9	Subscale n	9
Mean Homogeneity	3.63(90.8)	Mean CVI	3.60(90)

20% indicated it covered desire more than satisfaction, and 10% stated that it did not seem to fit and that it was not an important issue to postpartal parenting.

The Redefinition of Relationships subscale, with five items (see Appendix G and Table G17), had IH ratings of 100% for the whole set of items. Individual items were rated from one to four, with item mean ratings of 2.9 to 4.0. The subscale mean homogeneity rating was 3.76 (see Table 24). The Redefinition of Relationships subscale had CV ratings of 90% for label to definition fit and 90% for whole group to label/definition fit. Individual items were rated from one to four, with item mean ratings of 2.7 to 4.0. The subscale mean CVI rating was 3.68. Two sets of redundant items were identified. ATR14ARF and T014PR were identified by 40% of the subjects as being redundant; the items were found to be identically worded. Items ATR126ARF and T312PR were identified by 30% of the subjects as redundant. Two of the subjects (20%) suggested one new item each; they were, "How you are never alone, not prepared for not having time for self" and "Has the new baby affected your relationship with your partner?" Item RFAM1 was rated 2.9 for IH and 2.7 for CV. Five subjects (50%) indicated that all of the other items were of an intimate nature and this question was not. Two subjects (20%) identified that the definition discusses the changes in relationships with partners and other extended family members but the items only discussed the relationship with the partner.

The Changing Daily Life Routines subscale, with six items (see Appendix G and Table G18), had IH ratings of 100% for the whole set of items. Individual items, rated from two to four, had item mean ratings of 3.6 to 4.0. The subscale mean homogeneity rating was 3.88 (see Table 25). The Changing Daily Life Routines

Table 24. Redefinition of Relationships Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
4.0 (100)	3	4.0 (100)	2
3.9 (97.5)	1	3.9 (97.5)	1
2.9 (72.5)	1	3.8 (95)	1
		2.7 (67.5)	1
Subscale n	5	Subscale n	5
Mean Homogeneity	3.76(94)	Mean CVI	3.68(92)

Table 25. Changing Daily Life Routines Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
4.0 (100)	4	4.0 (100)	5
3.7 (92.5)	1	3.8 (95)	1
3.6 (90)	1		
Subscale n	6	Subscale n	6
Mean Homogeneity	3.88(97.1)	Mean CVI	3.97(99.2)

subscale had CV ratings of 100% for label to definition fit and 100% for whole group to label/definition fit. Individual items were rated from two to four, with item mean ratings of 3.8 to 4.0. The subscale mean CVI rating was 3.97. Two redundant items were identified by one subject (10%): AT191CDLR and AT298CDLR. No new items were suggested.

The Changing Self-Definition subscale, with five items (see Appendix G and Table G19), had IH ratings of 100% for the whole set of items. Individual items were rated from two to four, with item mean ratings of 3.1 to 4.0. The subscale mean homogeneity rating was 3.76 (see Table 26). The Changing Self-Definition subscale had CV ratings of 90% for label to definition fit and 90% for whole group to label/definition fit. Individual items were rated from two to four, with item mean ratings of 3.4 to 3.8. The subscale mean CVI rating was 3.70. No redundant items were identified. No new items were suggested. Item AT114CSD was rated 3.1 for CV but was rated 3.4 for IH.

The Informed Caregiving subscale, with seven items (see Appendix G and Table G20), had IH ratings of 90% for the whole set of items; individual items were rated from two to four, with item mean ratings of 3.2 to 4.0. The subscale mean homogeneity rating was 3.57 (see Table 27). The Informed Caregiving subscale had CV ratings of 100% for label to definition fit and 100% for whole group to label/definition fit. Individual items were rated from one to four, with item mean ratings of 3.2 to 4.0. The subscale mean CVI rating was 3.69. Two redundant items were identified by one subject (10%): AT58LCS and AT233LCS. No new items were suggested.

Table 26. Changing Self-Definition Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
4.0 (100)	1	3.8 (95)	3
3.9 (97.5)	3	3.7 (92.5)	1
3.1 (77.5)	1	3.4 (85)	1
Subscale n	5	Subscale n	5
Mean Homogeneity	3.76(94)	Mean CVI	3.70(92.5)

Table 27. Informed Caregiving Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
4.0 (100)	2	4.0 (100)	2
3.6 (90)	1	3.9 (97.5)	1
3.4 (85)	3	3.8 (95)	1
3.2 (80)	1	3.5 (87.5)	1
		3.4 (85)	1
		3.2 (80)	1
Subscale n	7	Subscale n	7
Mean Homogeneity	3.57(89.3)	Mean CVI	3.69(92.1)

The Parenting Actions subscale, with two items (see Appendix G and Table G21), had IH ratings of 70% for the whole set of items. The individual items were rated from two to four, with item mean ratings of 3.5. The subscale mean homogeneity rating was 3.50 (see Table 28). The Parenting Actions subscale had CV ratings of 90% for label to definition fit and 100% for whole group to label/definition fit. Individual items were rated from one to four, with item mean ratings of 3.7 to 3.9. The subscale mean CVI rating was 3.80. The two items were not redundant. One subject (10%) suggested adding new items with examples of specific parenting strategies.

The Negotiating Parental Decisions subscale, with three items (see Appendix G and Table G22), had IH ratings of 90% for the whole set of items. The individual, rated from two to four, had item mean ratings of 3.4 to 3.9. The subscale mean homogeneity rating was 3.67 (see Table 29). The Negotiating Parental Decisions subscale had CV ratings of 100% for label to definition fit and 100% for whole group to label/definition fit. Individual items were rated from three to four, with item mean ratings of 3.9 to 4.0. The subscale mean CVI rating was 3.97. No redundant items were identified, no new items were suggested.

The Previous Child Experience subscale, with two items (see Appendix G and Table G23), had IH ratings of 100% for the whole set of items. The individual items were rated from three to four, with item mean ratings of 3.9 to 4.0. The subscale mean homogeneity rating was 3.95 (see Table 30). The Previous Child Experience subscale had CV ratings of 100% for label to definition fit and 90% for whole group to label/definition fit. Individual items were rated from one to four, with item mean ratings of 3.7 to 3.8. The subscale mean CVI rating was 3.75. The two items were not

Table 28. Parenting Actions Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
3.5 (87.5)	2	3.9 (97.5)	1
		3.7 (92.5)	1
Subscale n	2	Subscale n	2
Mean Homogeneity	3.50(87.5)	Mean CVI	3.80(95)

Table 29. Negotiating Parental Decisions Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
3.9 (97.5)	1	4.0 (100)	2
3.7 (92.5)	1	3.9 (97.5)	1
3.4 (85)	1		
Subscale n	3	Subscale n	3
Mean Homogeneity	3.67(91.7)	Mean CVI	3.97(99.2)

Table 30. Previous Child Experience Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
4.0 (100)	1	3.8 (95)	1
3.9 (97.5)	1	3.7 (92.5)	1
Subscale n	2	Subscale n	2
Mean Homogeneity	3.95(98.8)	Mean CVI	3.75(93.8)

redundant. One subject (10%) suggested one new item: "Recalled how adults treated/cared for me."

The Expected Baby Subscale, with four items (see Appendix G and Table G24), had IH ratings of 100% for the whole set of items. Individual items, rated from one to four, had item mean ratings of 3.2 to 3.9. The subscale mean homogeneity rating was 3.58 (see Table 31). The Expected Baby subscale had CV ratings of 100% for label to definition fit and 100% for whole group to label/definition fit. Individual items were rated from one to four, with item mean ratings of 3.4 to 4.0. The subscale mean CVI rating was 3.80. No redundant items were identified. One subject (10%) suggested two new items; they were "The baby acts like I imagined" and "The time I devote to baby is what I expected."

The Well-Being of Baby in Labor subscale, with four items (see Appendix G and Table G25), had IH ratings of 100% for the whole set of items. Individual items were rated from three to four, with item mean ratings of 3.6 to 4.0. The subscale mean homogeneity rating was 3.90 (see Table 32). The Well-Being of Baby in Labor subscale had CV ratings of 100% for label to definition fit and 100% for whole group to label/definition fit. Individual items were rated from three to four, with item mean ratings of 3.6 to 4.0. The subscale mean CVI rating was 3.90. No redundant items were identified. Two of the subjects (20%) suggested one new item each. These were "Worrying about the position of the baby's head during labor" and "If there were problems, was there appropriate hospital staff/facilities to care for the baby?"

The Revisiting the Pregnancy subscale, with three items (see Appendix G and Table G26), had IH ratings of 80% for the whole set of items. Individual items, rated

Table 31. Expected Baby Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
3.9 (97.5)	1	4.0 (100)	1
3.8 (95)	1	3.9 (97.5)	2
3.4 (85)	1	3.4 (85)	1
3.2 (80)	1		
Subscale n	4	Subscale n	4
Mean Homogeneity	3.58(89.4)	Mean CVI	3.80(95)

Table 32. Well-Being of Baby in Labor Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
4.0 (100)	3	4.0 (100)	3
3.6 (90)	1	3.6 (90)	1
Subscale n	4	Subscale n	4
Mean Homogeneity	3.90(97.5)	Mean CVI	3.90(97.5)

from one to four, had item mean ratings of 2.8 to 3.9. The subscale mean homogeneity rating was 3.53 (see Table 33). The Revisiting the Pregnancy subscale had CV ratings of 100% for label to definition fit and 90% for whole group to label/definition fit. Individual items were rated from one to four, with item mean ratings of 3.6 to 3.8. The subscale mean CVI rating was 3.70. No redundant items were identified. No new items were suggested. Item AT23PBP was rated 2.8 for IH but was rated 3.6 for CV.

The Stages for Parental Development sets were administered to the subjects following the IH and CV questionnaires. Set 1 items were ranked by the ten subjects (see Table 34). Item 1 data grouped in the later stages of parental development with all subjects rating the item a four or more. Item 2 grouped in the middle stages of parental development with seven of the subjects rating the item from three to five. Item 3 grouped in the early stages of parental development with all subjects rating the item from one to three. Item 4 ranked middle to later stages of parental development with rankings from two to seven. Item 5 ranked in the early stages of parental development with eight of the subjects rating the item from one to three. Item 6 ranked in the middle stages of parental development with seven of the subjects rating the item from four to five. Item 7 ranked near the early and later stages of parental development with four subjects rating the item a one and the other subjects rating the item from three to seven.

Set 2 items were ranked by the ten subjects (see Table 35). Item 1 ranked in the later stages of parental development with seven of the subjects rating the item from four to five. Item 2 ranked in the early stages of parental development with nine of the subjects rating the item a one or two. Item 3 ranked in the middle and later stages of parental development with five subjects rating the item two and three and five subjects

Table 33. Revisiting the Pregnancy Subscale

Internal Homogeneity	n of Items	Content Validity	n of Items
Subscale Item Mean (Percent)		Subscale Item Mean (Percent)	
3.9 (97.5)	2	3.8 (95)	1
2.8 (70)	1	3.7 (92.5)	1
		3.6 (90)	1
Subscale n	3	Subscale n	3
Mean Homogeneity	3.53(88.3)	Mean CVI	3.70(92.5)

Table 34. Stages of Parental Development: Set 1 Results

Item	Statements	First	Second	Third	Fourth	Fifth	Sixth	Seventh
1	I am usually satisfied with how I solve my baby's problems.				2	2	3	3
2	Sometimes I speak for the baby so that I can explain how the baby feels.			1	2	4		3
3	I notice how the baby behaves.	4	2	4				
4	I compare my baby's behavior with my own and with the behaviors of other family members.		2	1	2	2	1	2
5	I tell others about the labor and delivery experience.	1	5	2			2	
6	I can anticipate my baby's caregiving needs.	1	1	1	3	1	3	
7	I have come to terms with my labor and delivery experience, including my behavior, and others' behavior during the birth process.	4		1	1	1	1	2

Values are n subject responses per item.

Table 35. Stages of Parental Development: Set 2 Results

Item	Statements	First	Second	Third	Fourth	Fifth
1	Noticing that the baby's responses to my actions tell me that I'm doing the right thing.	1	1	2	4	2
2	Noticing that my baby's behavior is similar to other family members.	8	1			1
3	Noticing the way my baby acts to anticipate what he/she will need soon.		1	4		5
4	Noticing that my baby's behavior changes from time to time.		4	4	2	
5	Noticing that the way my baby acts helps me understand how the baby feels.	2	3		3	2

Values are n subject responses per item.

rating the item a five. Item 4 ranked in the middle stages of parental development with eight subjects rating the item two and three. Item 5 ranked in the early and later stages of parental development with five subjects rating the item a one or two and the other five subjects rating the item a four or five.

Summary

Panel II rated a few individual items less than the 80% criterion for IH (13 items) and CV (7 items), but all 26 subscales were rated greater than 80% for both mean item IH and CV. Two subscales (Parent Self-Evaluation and Parenting Actions) were rated 70% for whole group IH but had Mean Item Homogeneity ratings of 83.3% and 87.5%, respectively. Panel II identified 51 items as duplicates which will need to be evaluated. The panel ranked the Parental Development items in a slightly different order than the researchers had anticipated.

CHAPTER V

Discussion

The plan for this study was to assess clarity, internal homogeneity, and content validity of the PPS. These were accomplished by panel I and II and changes were made or suggested. The research question was: What is the best set of questions to assess first-time parents' needs and concerns during the early stages of parenthood? The best set for clarity was addressed by panel I with 78 items retained in their original form, 14 items rewritten or edited, and four items split into two questions by researchers. The second part involved more detailed feedback about several aspects (whole group of items fit, individual item fit, label and definition fit, label/definition to whole group of items fit, label/definition to individual item fit, and duplication of items).

Panel II addressed fit of items into their groups, yielding 13 items that did not fit the 80% agreement criterion. The second assessment, that of label, definition, group, and item fit yielded seven items that did not meet the criterion of 80% agreement. All of the subscale labels and definitions met the 80% agreement criterion.

Further Development

A number of issues will need to be addressed in the next stages of development of the PPS. Are the sets of items conceptually adequate? Do all subscales adequately sample the domain or are more items needed for any subscales? What should be done with the items rated as not belonging? Can the number of items be reduced prior to testing? Are all subscale definitions adequate for the concept being represented? Are any new subscales needed? Is it possible to capture the essence of a concept in a set of

items? To what degree do third trimester concerns continue to be active areas of concern and for how long?

Conceptual concerns must be evaluated any time item changes are being considered. Some subscales did not have enough items to sufficiently sample their domain. The Redefinition of Relationships Subscale, for example, will need to have additional items in the subscale to cover the relationships with extended family members described in the definition.

Careful examination for conceptual domain representation will be needed before deleting any duplicate items or items rated as not belonging. Items with poor IH may need to be deleted even if the CV ratings were sufficient. Deleting items that represent critical aspects of a domain may be necessary, however, if new items are added to index the necessary content. But this is beyond the scope of this study.

The scale is very long, making it difficult for a screening scale. Some subscales have too many items. No items have been taken out for IH, CV, duplication. It will be necessary to make attempts to reduce items without compromising CV. If it is possible, the number of items should be reduced prior to further testing.

A number of subscales had comments or implications suggesting that adaptation of the subscale definitions or items were needed to represent ideas expressed in both. For example, Health Caregiver Support's definition was identified as needing added information. It was suggested to add information regarding pediatric clinic staff to the definition. Likewise, the Baby Crying Subscale had items representing the idea "that the baby may cry for a reason," but this was not included in the definition.

Some new items being considered suggested new subscales being formed. New items were suggested for the Expected Baby Subscale that have implications for changing the definition or generating a new subscale about "Expectations of Parenting." Similarly, the new item suggested for Previous Child Experience seems more like "Memories of Being Parented," possibly formulating another new subscale. Each of these conceptual areas had been identified previously during the Imle (1989) study of third trimester parents.

Writing items is a complex task and some concepts are more difficult to capture in a few items in a subscale. Being able to express in an item the ability of the parent to place himself/herself in the cognitive space of the baby to view the world is one such difficulty. Getting this concept into questions is a difficult task. For some items it was not possible to determine where they fit conceptually due to wording or response format. It would be helpful to dual test some items with different response formats to identify best conceptual fit.

Third trimester concerns were included in the PPS through TTCS questions because some postpartal concepts overlapped with third trimester concepts. These concerns certainly overlap with the postpartum period, but for how long? The questions were brought in due to conceptual fit, but some panel II individuals felt some items were not appropriate. This is possibly due to the fact that some subjects were later in postpartum than anticipated. At what point are these concepts no longer appropriate for postpartum subjects?

Feasibility

The primary costs involved in this study were related to the time commitment of the researcher and subjects. Approximately two hours were required of each subject for data collection and it was estimated that the researcher would spend 40 hours in data collection and 40 hours for analysis and rewriting. The actual time expended in recruiting was 60 hours, 53 hours for data collection, and 75 hours for analysis and rewriting. It is well known that preliminary studies have been successfully conducted and that, in general, subjects appear willing to participate in these studies, presumably with the hope that the information obtained will be of benefit to the population. Several issues affect this success, however, and will be addressed in following sections of this chapter.

Limitations

This instrument will have significant limits in generalizability until further development and testing are conducted. Full psychometric testing will be conducted with a more diverse population of first-time parents in other locations. Reading levels will need to be analyzed and the instrument revised to include reading levels below the high school level. Items need to be tested for appropriateness to a variety of cultures and socioeconomic levels. Final revisions will incorporate these additional analyses prior to use for clinical decision-making.

There were many issues with accessing the sample and subjects that limited this study. The researchers were unable to contact subjects face to face at the OHSU Perinatal Unit, the primary source planned for recruitment. Letters had to be mailed to the potential subjects, leading to a predictably poor rate of return (5 subjects yielded from 64 letters sent over six months). This primary source also had few subjects fitting

the study criteria during the months of recruiting. It is difficult to count on these difficulties in advance. Secondary sources were identified and approval for recruiting subjects was sought but not received until late in the study; and researchers were unable to recruit any subjects from these secondary sources. The best sources for recruitment were through the researcher's personal and professional contacts who themselves recruited the subjects. Increased response rate in Phase II (panel II) was due to increased interest shown through these contacts.

Another difficulty with this study was getting subjects willing to spend time with researchers during this stressful time of the intense first three months of parenthood. More subjects had responded positively to the request for volunteers, but had declined when they learned that completing the forms required setting up time for an interview.

One significant limitation was the mail system to recruit potential subjects. The delayed returns, inaccurate addresses on hospital records, coupled with slow responses by subjects caused some subjects to be farther along in the parenting process than was planned or desired. These later subjects were taken, however, due to the generally poor response to recruitment and time limitations. These individuals who were farther out from postpartum found some items not applicable, possibly due to the later stages of postpartal transition and parenting. This potentially changed some ratings of items.

A limitation that affects generalizability was the age and socioeconomic status of the subjects. The subjects were older, middle class individuals, primarily female. This is similar to the group of studies reviewed previously (Crnic & Greenberg, 1990; Fullard, et al., 1984; Gross & Rocissano, 1988; Mrazek, et al., 1995; Reece, 1992).

Ideally, the sample would have included younger subjects and subjects from lower socioeconomic levels. This may be difficult, because historically younger and poorer subjects do not tend to volunteer as frequently as their older and middle class counterparts. This may be due to many factors (Polit & Hungler, 1995). Some individuals may not be as interested in research for the value of the outcome, because it may not impact them directly. Individuals from lower socioeconomic levels may be working longer hours and may have more life stresses and less available time. Even though all of the females in this study were partnered, few fathers participated. It would be important to include greater numbers of fathers in such research, but fathers frequently are unavailable at the time scheduled for the study.

Issues for future study

The next phase is to pilot test the instrument with a sufficient number of subjects for psychometric testing and factor analysis, then testing with more high risk groups. Some of the subjects included in the study had not indicated any risk on initial screening, but had some prenatal risk issues that had good outcomes. These subjects could have been considered high risk for these prenatal concerns. Items from the TTCS may be of use in further studies of parent concerns in later stages of parenthood, but this model has not been tested. Longitudinal study with the same parents should be done at a future date.

Conclusions

The literature identified 27 concepts as important to parents (Ainsworth, et al., 1978; Crnic & Greenberg, 1970; Dunst, Cooper, et al., 1988; Dunst, Trivette, & Jenkins, 1988; Eyberg & Ross, 1978; Fox, 1992; Froman & Owen, 1989; Fullard, et

al., 1984; Gross & Rocissano, 1988; Mrazek, et al., 1995; O'Brien, 1996; Reece, 1992; Seligman & Darling, 1989; Sumner & Spietz, 1994). The PPS addressed certain of these concepts identified plus others identified by interviews with the parents (Imle & Drayden, 1996). We have combined many of the concepts important in understanding the needs and concerns of new parents of young infants. The goal of the instrument is to identify the needs and concerns of the parents during a provider interaction. The provider may then use this information to guide their communication with the parents as well as their anticipatory guidance.

Thus far, parents have validated that the concerns covered by the items are indeed concerns they are having as new first-time parents and that these issues need to be attended to during provider interactions. This also reinforces the need to include parents in all stages of development, as was done during the development of the PPS.

This instrument will be used with typical families. While there are many tools for use with at-risk families, they are often limited to risk due to a disease process or limitation. Very little is being done to assess families at risk of decreased parenting skills. This instrument will begin the process of filling that void.

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Appendix A

IRB# _____
Approved: _____
Page 1OREGON HEALTH SCIENCES UNIVERSITY
Consent Form

TITLE: Family Postpartal Concerns Scale - Preliminary Study, Clarity Phase

PRINCIPAL INVESTIGATORS: Margaret A. Imle, RN, Ph.D., (503)494-3823
Cynthia Martin, RN, B.S, Masters Student (503)848-4030
Adele Spegman, RN, MS, Doctoral Student (503)494-3880

PURPOSE: You have been invited to participate in this research study because you have had your first child within the past 3 months. The purpose of this phase of the study is 1) to judge the clearness of questionnaire items and instructions to be used for development of a new instrument, 2) to prepare improved instrument instructions so that new parents' needs and concerns may be assessed by nurses. Participation will be voluntary and will involve asking for your own opinion about how well and how clearly the instrument items describe experiences, such as yours, of being a new first-time parent. You will be involved for 1 to 3 interviews over a period of up to 6 weeks.

PROCEDURES: The interview(s) will last up to 2 hours each and will be at your home or another quiet place chosen by you. The time used will be a time convenient to you and the data collector. The kinds of questions to be asked during the interview are: 1) Is the meaning of the item clear to you?; 2) What is the best way [response format] to answer this item?; 3) Are the set of instructions and example clear and easy to respond to? 4) Are the word-pairs, or phrases, descriptive of behaviors of [type of person]? To make the interview faster, some of your responses will be recorded by audio-tape.

RISKS AND DISCOMFORTS: There are no foreseeable risks from participating in this study. Any inconvenience from participating involves your time. Because babies are unpredictable, the interview time can be interrupted by the baby's needs or if you are fatigued. If you need to reschedule the interview or to break up the interview into several shorter sessions because of these needs, that is all right.

BENEFITS: You may or may not personally benefit from participating in this study. However, by serving as a subject, you may contribute new information which may benefit parents in the future.

ALTERNATIVES: You may choose not to participate in this study.

CONFIDENTIALITY: All questionnaire forms and audiotapes will be marked with a subject number. Audiotapes will be used only to help the researchers mark the forms with your new information that was not previously included in the questionnaires. The audiotapes will be

erased. Neither your name nor your identity will be used for publication or publicity purposes. According to Oregon Law, suspected child or elder abuse must be reported to appropriate authorities.

COSTS: There are no costs to you.

LIABILITY: The Oregon Health Sciences University, as a public corporation, is subject to the Oregon Tort Claims Act, and is self insured for liability claims. If you suffer any injury from this research project, compensation would be offered to you only if you establish that the injury occurred through the fault of the University, its officers or employees. However, you have not waived your legal rights by signing this form. If you have further questions, please call the Medical Services Director at (503)494-6020.

PARTICIPATION: Cynthia Martin [(503) 848-4030] or Margaret Imle [(503) 494-3823] have offered to answer any other questions you may have about this study. If you have questions regarding your rights as a research subject, you may contact the Oregon Health Sciences University Institutional Review Board at (503) 494-7887. You may refuse to participate, or you may withdraw from this study at any time without affecting your relationship with or treatment at the Oregon Health Sciences University. If the investigator believes you are too fatigued to continue the study, she will suggest that the interviews either be rescheduled or discontinued. You will receive a copy of the consent form. Your signature below on this consent form indicates that you have read the foregoing and agree to participate in this study.

Signature

Date

IRB# 4583

Approved: Sept. 5, 1997

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OREGON HEALTH SCIENCES UNIVERSITY
Consent Form Phase 2

TITLE: Family Postpartal Concerns Scale - Preliminary Study, Content Validity Phase

PRINCIPAL INVESTIGATORS: Margaret A. Imle, RN, Ph.D., (503)494-3823
Cynthia Martin, RN, B.S., Masters Student (503)848-4030
Adele Spegman, RN, M.S., Doctoral Student (503)494-3880

PURPOSE: You have been invited to participate in this research study because you have had your first child within the past 3 months. The purpose of this phase of the study is 1) to validate the underlying concepts from an earlier qualitative study of new postpartal parents' needs and concerns during the first 8-12 weeks of the postpartum and 2) to prepare improved instrument items so that new parents' needs and concerns may be assessed by nurses with a reliable and valid instrument. Participation will be voluntary and will involve asking for your own opinion about how well the instrument items describe experiences, such as yours, of being a new first-time parent. You will be involved for 1 to 3 interviews over a period of up to 6 weeks.

PROCEDURES: The interview(s) will last up to 2 hours each and will be at your home or another quiet place chosen by you. The time used will be a time convenient to you and the data collector. The kinds of questions to be asked during the interview are: 1) Do the label and definition fit with each other?; 2) Do all the items below, in general, belong together as a group?; 3) Taken one at a time, does each item belong with the label and definition of this set?; 4) Are there other items that you think should be included in this set?; 5) Do any of the items duplicate each other's ideas? To make the interview faster, some of your responses will be recorded by audio-tape.

RISKS AND DISCOMFORTS: There are no foreseeable risks from participating in this study. Any inconvenience from participating involves your time. Because babies are unpredictable, the interview time can be interrupted by the baby's needs or if you are fatigued. If you need to reschedule the interview or to break up the interview into several shorter sessions because of these needs, that is all right.

BENEFITS: You may or may not personally benefit from participating in this study. However, by serving as a subject, you may contribute new information which may benefit parents in the future.

ALTERNATIVES: You may choose not to participate in this study.

CONFIDENTIALITY: All questionnaire forms and audiotapes will be marked with a subject number. Audiotapes will be used only to help the researchers mark the forms with your new

Page 2

information that was not previously included in the questionnaires. The audiotapes will be erased. Neither your name nor your identity will be used for publication or publicity purposes. According to Oregon Law, suspected child or elder abuse must be reported to appropriate authorities.

COSTS: There are no costs to you.

LIABILITY: The Oregon Health Sciences University, as a public corporation, is subject to the Oregon Tort Claims Act, and is self insured for liability claims. If you suffer any injury from this research project, compensation would be offered to you only if you establish that the injury occurred through the fault of the University, its officers or employees. However, you have not waived your legal rights by signing this form. If you have further questions, please call the Medical Services Director at (503)494-6020.

PARTICIPATION: Cynthia Martin [(503)848-4030] or Margaret Imle [(503)494-3823] have offered to answer any other questions you may have about this study. If you have questions regarding your rights as a research subject, you may contact the Oregon Health Sciences University Institutional Review Board at (503)494-7887. You may refuse to participate, or you may withdraw from this study at any time without affecting your relationship with or treatment at the Oregon Health Sciences University. If the investigator believes you are too fatigued to continue the study, she will suggest that the interviews either be rescheduled or discontinued. You will receive a copy of the consent form. Your signature below on this consent form indicates that you have read the foregoing and agree to participate in this study.

Signature

Date

Appendix B

August 14, 1997

Dear Parents,

We are three nurse researchers at the Oregon Health Sciences University School of Nursing who are very interested in how first-time parents' experience the time period after the birth of their first baby. Specifically we are developing a questionnaire for health care providers to use with new parents to help identify areas of greatest worry or concern about the postpartum period and the first 3 months of being a parent. We need some advice from new parents about the questionnaire's content.

Since you had your baby within the last 3 months, you are being invited to volunteer to help the researchers make sure their questionnaire is appropriate to other first-time parents like you who are experiencing postpartum changes and learning to care for a new baby. Your name and address were obtained from the OHSU Hospital delivery records.

We would like to invite you and your partner to participate in the development of this questionnaire because you have recently had your first child and know from personal experience about both the easy and difficult things that new parents go through. Though we would like very much for partners to participate, it is not a requirement. Participation involves being interviewed about your opinion of the questionnaire's content. There are no costs to you and your participation will be scheduled at a time and place convenient to you, around the schedule of your baby's needs.

If you would like to get more information about the project before deciding whether to participate, you can call one of the two researchers listed below or return the self-addressed stamped postcard asking for them to call you. Please provide your phone number if you leave a phone message for one of the researchers or write it onto the postcard before it is mailed.

Researchers: Margaret A. Imle, R.N., Ph.D.
(503) 494-3823

Cynthia Martin, R.N., B.S.,
(503) 848-4030 or 313-1008 (cellular)

This project has been reviewed and approved by the OHSU Institutional Review Board which is OHSU's committee for the protection of human subjects that are used in research studies.

Thank you for your consideration about helping with this project to develop a new parent postpartum questionnaire.

Sincerely,

Margaret A. Imle, R.N., Ph.D., Associate Professor in Family Nursing

Cynthia Martin, R.N., B.S., Masters Student in Pediatric Nurse Practitioner Program

Adele Spegman, R.N., M.S., Doctoral Student in Nursing

[content of self-addressed, stamped postcard to be enclosed with letter]

Please check-mark your response below:

☐ I am not interested

☐ I am interested.

Please call me to make the appointment _____
(Fill in phone number and best time to call)

☐ I don't know yet if I am interested.

Please give me more information.

Call me at _____
(Fill in phone number and best time to call)

Your name _____

Appendix C

July 31, 1997

Dear New Parents,

You are being asked to help develop a questionnaire for postpartal parents by answering sets of questions about the questionnaires themselves and their various parts. When developing a questionnaire, there are several things the nurse researcher must be sure are correct in order for the questionnaire to be useful to healthcare researchers and other new parents. They are:

- (1) the clearness (clarity) of questionnaire instructions and the individual items (Parts A and B),
- (2) the degree to which the sets of questionnaire items belong together as a group (Part C),
- (3) whether particular items should be used as measures of the topic (Part D).

These are the items that have been developed as a result of interviews 6-10 years ago with "normal" (no complications anticipated prenatally) new parents' during the first 72 days postpartum. They had been asked to tell me what it was like at this stage of childbearing, what topics or concerns they thought most important. They knew the purpose of the study was to identify expectant and new first-time parents' learning needs and concerns.

Because birth practices, health care, and the characteristics of parents themselves may have changed to reflect societal changes, we will want to know if your views about the postpartal months differs from that of the parents interviewed. Please tell us anything that you think we have left out of the picture of postpartal parents' experiences during the 10-12 weeks after birth of the first child.

Please read the pages in order. For each page or two there is information to read and questions to be answered. Please write comments on the pages as you go. At the end of each page or two is a place for you to make any overall comments about those particular page(s).

Thank you for your time and expertise,

Cynthia Martin, Margaret Imle, and Adele Spegman

Part A. Clarity:

This interview today has 2 parts:

- (1) One part about the clearness of items and which response format is the best way to answer each item.
- (2) Then you will be given some sets of trial questionnaires with their instructions and items. These are for your critique and feedback about the format, clarity and completeness.

Throughout the process of looking at the questionnaires, your written comments are appreciated. After you finish with reading and giving written feedback, we may ask you for more explanation. Because your ideas are extremely valuable, we will ask your permission to audiotape what you say at those times. The audio tapes are to make sure we don't miss anything and that we get your wording about the things left out. Your audio taped comments will be transcribed and then erased. Your name will not be on the tapes, only a subject number and date.

Part A - Item Clarity:

Potential items for the questionnaires are listed below. For each item below answer the question, "It this item clear?" Circle Y (yes) or N (no). Then consider the various possible ways to answer this item and choose one that you think helps to answer it best, or write in another way.

Clarity, Page 1		HOW CLEAR IS IT TO YOU?		
Items	Is meaning clear to you? Y (yes) or N (no)	What is best way to answer this item? *Agreement? SD - D - A - SA	** Frequency? Rarely <---> Always	*** Degree of Concern None <---> Extreme
I am worried when my baby cries. (PPBC14)	Y N			
Whether the labor support person did well coaching labor. (AT170/336LSP).	Y N			
Whether I alone will have to support the baby. (T36FA)	Y N			
Enough space in house for raising my baby. (T01HA)	Y N			
Balancing my job and home responsibilities. (T89OA)	Y N			
I expected to be more satisfied with parenting. (PPPSE8)	Y N			

Key to Response Formats in Table:***Agreement:**

SD=strongly disagree, D=Disagree, A=Agree, SA=strongly agree

****Frequency:**

Rarely <-----> Always

Never ---- Almost never ---- Sometimes ---- Almost All the Time

*****Degree of Concern or Worry About Topic of Item:**

None (No Concern) <-----> Extreme (Very Concerned)

Clarity, page 2		HOW CLEAR IS IT TO YOU?		
Items	Is meaning clear to you? Y (yes) or N (no)	What is best way to answer this item? *Agreement? SD - D - A - SA	** Frequency? Rarely <---> Always	***Degree of Concern? None <---> Extreme
Trusting this doctor or midwife. (PPHCG1)	Y N			
A baby's behavior tells what his/her needs are. (PPBS1)	Y N			
I am frantic when my baby cries. (PPBC15)	Y N			
Doctor/midwife was a source of emotional support. (PPHCG3)	Y N			
I trust my own strategies to solving my baby's problems. (PPPSE6)	Y N			
My baby cries for reasons I don't understand. (PPBC1)	Y N			
My baby makes me feel like I do a good job as a parent. (PPPSE1)	Y N			
The need for technical or medical interventions in labor.(AT100CWL)	Y N			

Key to Response Formats in Table:

***Agreement:**
SD=strongly disagree, D=Disagree, A=Agree, SA=strongly agree

****Frequency:**
Rarely <-----> Always
Never --- Almost never --- Sometimes --- Almost All the Time

*****Degree of Concern or Worry About Topic of Item:**
None (No Concern) <-----> Extreme (Very Concerned)

Clarity, Page 3
HOW CLEAR IS IT TO YOU?

Items	Is meaning clear to you? Y (yes) or N (no)	What is best way to answer this item?		
		*Agreement? SD - D - A - SA	** Frequency? Rarely <---> Always	*** Degree of Concern? None <---> Extreme
My baby cries when he/she is tired or hungry. (PPBC18)	Y N			
Understanding what my birth attendant explained to me. (AT160HCG)	Y N			
I worry how much my baby's crying bothers my partner. (PPBC21)	Y N			
Whether the job(s) of the wage earner(s) in my family are adequate to my family's new needs. (T99OA)	Y N			
I talk about the labor & delivery experience. (PPLR2)	Y N			
Standing labor without medication. (AT252)	Y N			

Key to Response Formats in Table:

*Agreement:
SD=strongly disagree, D=Disagree, A=Agree, SA=strongly agree

**Frequency
Rarely <-----> Always
Never --- Almost never --- Sometimes --- Almost All the Time

***Degree of Concern or Worry About Topic of Item:
None (No Concern) <-----> Extreme (Very Concerned)

HOW CLEAR IS IT TO YOU?

Clarity, Page 4

Items	Is meaning clear to you? Y (yes) or N (no)	What is best way to answer this item?		
		*Agreement? SD - D - A - SA	** Frequency? Rarely <---> Always	***Degree of Concern? None <---> Extreme
My baby's crying amuses me. (PPBC19)	Y N			
I recognize my own feelings and responses in my baby's behaviors.(PPNB2)	Y N			
My baby makes me feel like my partner is a good parent.(PPPSE2)	Y N			
I think my baby's signals form consistent patterns. (PPPRF2)	Y N			
I imagine what my baby feels like in certain situations. (PPEB2)	Y N			
My baby cries to irritate me. (PPBC2)	Y N			

Key to Response Formats in Table:

*Agreement:

SD=strongly disagree, D=Disagree, A=Agree, SA=strongly agree

**Frequency:

Rarely <-----> Always

Never ---- Almost never ---- Sometimes ---- Almost All the Time

***Degree of Concern or Worry About Topic of Item:

None (No Concern) <-----> Extreme (Very Concerned)

Clarity, Page 5		HOW CLEAR IS IT TO YOU?		
Items	Is meaning clear to you? Y (yes) or N (no)	What is best way to answer this item? *Agreement? SD - D - A - SA	** Frequency? Rarely <---> Always	*** Degree of Concern? None <---> Extreme
Labor nurse provided helpful assistance in labor. (PPHCG4)	Y N			
My baby's crying does not affect me. (PPBC20)	Y N			
My home being convenient for raising a baby. (T161HA)	Y N			
A baby's personality can be seen in his/her behavior. (PPBS2)	Y N			
Others are critical of my parenting. (PPPSE3)	Y N			
Having a steady income. (T166FA)	Y N			
My baby cries for attention. (PPBC4)	Y N			

Key to Response Formats in Table:

***Agreement:**

SD=strongly disagree, D=Disagree, A=Agree, SA=strongly agree

****Frequency:**

Rarely <-----> Always
Never ---- Almost never ---- Sometimes ---- Almost All the Time

*****Degree of Concern or Worry About Topic of Item:**

None (No Concern) <-----> Extreme (Very Concerned)

Clarity, Page 6		HOW CLEAR IS IT TO YOU?		
Items	Is meaning clear to you? Y (yes) or N (no)	What is best way to answer this item? *Agreement? SD - D - A - SA	** Frequency? Rarely <---> Always	*** Degree of Concern? None <-----> Extreme
Mother-Baby nurse was a source of emotional support. (PPHCG5)	Y N			
Whether there is enough money to buy anything more than the basics. (T97FA)	Y N			
My baby's behavior changes from time to time. (PPBS4)	Y N			
Whether my home is adequate for a child's needs. (T87HA)	Y N			
Crying is part of babyhood. (PPBC10)	Y N			
I feel like a parent now. (PPPSE9)	Y N			
Where income would come from if I or my partner is laid off. (AT135FA)	Y N			

Key to Response Formats in Table:

*Agreement:

SD=strongly disagree, D=Disagree, A=Agree, SA=strongly agree

**Frequency:

Rarely <-----> Always

Never ---- Almost never --- Sometimes ---- Almost All the Time

***Degree of Concern or Worry About Topic of Item:

None (No Concern) <-----> Extreme (Very Concerned)

Clarity Pilot
September 16, 1997
Page 9

HOW CLEAR IS IT TO YOU?

Clarity, Page 7

Items	Is meaning clear to you? Y (yes) or N (no)	What is best way to answer this item? *Agreement? SD - D - A - SA	** Frequency? Rarely <---> Always	*** Degree of Concern? None <---> Extreme
Baby nurse in clinic is a source of emotional support to my parenting efforts. (PPHCG6)	Y N			
My baby cries because I don't do the right things. (PPBC3)	Y N			
I think about how labor & delivery may have affected my baby's health. (PPLR3)	Y N			
I speak for my baby to express his/her experiences and feelings. (PPEB4)	Y N			
Whether my nurses understood what I was afraid of. (AT46HCG)	Y N			
Enough financial security to comfortably raise a family. (T184FA)	Y N			

Key to Response Formats in Table:

*Agreement:

SD=strongly disagree, D=Disagree, A=Agree, SA=strongly agree

**Frequency:

Rarely <-----> Always

Never --- Almost never --- Sometimes --- Almost All the Time

***Degree of Concern or Worry About Topic of Item:

None (No Concern) <-----> Extreme (Very Concerned)

Clarity, Page 8

HOW CLEAR IS IT TO YOU?

Items	Is meaning clear to you? Y (yes) or N (no)	What is best way to answer this item?		*** Degree of Concern? None <---> Extreme
		*Agreement? SD - D - A - SA	** Frequency? Rarely <---> Always	
My baby cries because he/she is spoiled. (PPBC5)	Y N			
Whether I should have trusted my birth attendant. (AT51HCG)	Y N			
Whether I need a better job. (T144OA)	Y N			
I know my baby's personality. (PPBS5)	Y N			
Needing the type of stimulation that my job provides to me. (PPOA1)	Y N			
My baby cries at the same time every day. (PPBC17)	Y N			
Whether my doctor or midwife has time to spend with me. (T112HCG)	Y N			

Key to Response Formats in Table:

*Agreement:

SD=strongly disagree, D=Disagree, A=Agree, SA=strongly agree

**Frequency:

Rarely <-----> Always

Never --- Almost never --- Sometimes --- Almost All the Time

***Degree of Concern or Worry About Topic of Item:

None (No Concern) <-----> Extreme (Very Concerned)

Clarity, Page 9		HOW CLEAR IS IT TO YOU?		
Items	Is meaning clear to you? Y (yes) or N (no)	What is best way to answer this item? *Agreement? SD - D - A - SA	** Frequency? Rarely <---> Always	*** Degree of Concern? None <---> Extreme
My baby is like what I expected. (PPBS3)	Y N			
I have come to terms with my pregnancy and labor experiences. (PPLR4)	Y N			
My baby does little things that I do. (PPNB3)	Y N			
Whether I will want to stay with my job very long. (T188OA)	Y N			
My baby cries differently to signal specific needs. (PPBC6)	Y N			
My doctor or midwife getting upset with me in labor. (AT167HCG)	Y N			
I am handling parental responsibilities. (PPPSE4)	Y N			

Key to Response Formats in Table:***Agreement:**

SD=strongly disagree, D=Disagree, A=Agree, SA=strongly agree

****Frequency:**Rarely <-----> Always
Never ---- Almost never ---- Sometimes ---- Almost All the Time*****Degree of Concern or Worry About Topic of Item:**

None (No Concern) <-----> Extreme (Very Concerned)

HOW CLEAR IS IT TO YOU?

Clarity, Page 10

Items	Is meaning clear to you? Y (yes) or N (no)	What is best way to answer this item?		*** Degree of Concern? None <---> Extreme
		*Agreement? SD - D - A - SA	** Frequency? Rarely <---> Always	
I understand why my baby acts the way he/she does. (PPEB3)	Y N			
A house that's big enough, at a reasonable cost. (T326HA)	Y N			
I recognize reasons for my baby's crying. (PPBC7)	Y N			
Feeling stupid around my doctor or midwife. (T151HCG)	Y N			
Whether my partner or I will need more training to stay on the job. (AT225OA)	Y N			
I use my past experience with my baby to predict how I should do things for my baby. (PPPRF3)	Y N			

Key to Response Formats in Table:

*Agreement:

SD=strongly disagree, D=Disagree, A=Agree, SA=strongly agree

**Frequency:

Rarely <-----> Always

Never ---- Almost never ---- Sometimes ---- Almost All the Time

***Degree of Concern or Worry About Topic of Item:

None (No Concern) <-----> Extreme (Very Concerned)

Clarity, Page 11		HOW CLEAR IS IT TO YOU?		
Items	Is meaning clear to you? Y (yes) or N (no)	What is best way to answer this item? *Agreement? SD - D - A - SA	Frequency? Rarely <---> Always	*** Degree of Concern? None <---> Extreme
Whether my job is satisfying. (T234OA)	Y N			
I get desperate when my baby cries. (PPBC16)	Y N			
I recognize other family members in my baby's behavior or responses. (PPNB4)	Y N			
A home that is too small for the family. (TR72)	Y N			
I feel connected and close to my baby when I am voicing his/her perspective. (PPEB5)	Y N			
I compare my baby with myself. (PPNB1)	Y N			
I am frustrated with my baby's crying. (PPBC8)	Y N			

Key to Response Formats in Table:

***Agreement:**

SD=strongly disagree, D=Disagree, A=Agree, SA=strongly agree

****Frequency:**

Rarely <-----> Always

Never ---- Almost never --- Sometimes --- Almost All the Time

*****Degree of Concern or Worry About Topic of Item:**

None (No Concern) <-----> Extreme (Very Concerned)

Clarity, Page 12		HOW CLEAR IS IT TO YOU?		
Items	Is meaning clear to you? Y (yes) or N (no)	What is best way to answer this item? *Agreement? SD - D - A - SA	** Frequency? Rarely <---> Always	*** Degree of Concern? None <---> Extreme
Whether my job is more than just a source of income to me. (T308OA)	Y N			
I can imagine my baby's viewpoint. (PPEB1)	Y N			
Having enough savings put away. (T324FA)	Y N			
I anticipate what my baby's needs are. (PPPRF1)	Y N			
How well-prepared my doctor or midwife is for anything that might go wrong. (AT226HCG)	Y N			
I have a specific way I cope with my baby's crying. (PPBC9)	Y N			
I can tell what my baby likes and dislikes. (PPPRF5)	Y N			

Key to Response Formats in Table:

***Agreement:**

SD=strongly disagree, D=Disagree, A=Agree, SA=strongly agree

****Frequency:**

Rarely <-----> Always
Never ---- Almost never ---- Sometimes ---- Almost All the Time

*****Degree of Concern or Worry About Topic of Item:**

None (No Concern) <-----> Extreme (Very Concerned)

HOW CLEAR IS IT TO YOU?

Clarity, Page 13

Items	Is meaning clear to you? Y (yes) or N (no)	What is best way to answer this item?		
		*Agreement? SD - D - A - SA	** Frequency? Rarely <---> Always	*** Degree of Concern? None <---> Extreme
I don't see anything predictable about my baby's behaviors. (PPPRF4)	Y N			
I was as prepared for parental responsibility as I should have been. (PPPSE5)	Y N			
Whether my doctor or midwife discussed choices about birth with me. (AT250HCG)	Y N			
My baby's crying makes me feel ineffective as a parent. (PPBC11)	Y N			
Whether my job might change unexpectedly. (T183OA)	Y N			
I am concerned when my baby cries. (PPBC13)	Y N			

Key to Response Formats in Table:

*Agreement:

SD=strongly disagree, D=Disagree, A=Agree, SA=strongly agree

**Frequency:

Rarely <-----> Always

Never --- Almost never --- Sometimes --- Almost All the Time

***Degree of Concern or Worry About Topic of Item:

None (No Concern) <-----> Extreme (Very Concerned)

HOW CLEAR IS IT TO YOU?

Clarity, Page 14

Items	Is meaning clear to you? Y (yes) or N (no)	What is best way to answer this item?		
		*Agreement? SD - D - A - SA	** Frequency? Rarely <---> Always	*** Degree of Concern? None <---> Extreme
Losing control of myself during labor. (T82CWL)	Y N			
Frustration over finances. (T37FA)	Y N			
How we supported each other in labor. (AT177LSP)	Y N			
Getting good explanations when I ask doctor or midwife about questions. (ATR292HCG)	Y N			
I can predict when my baby will cry. (PPBC12)	Y N			
I think about my labor & delivery experience. (PPLR1)	Y N			
I feel I can ask for help from others with my baby's problems. (PPPSE7)	Y N			

Key to Response Formats in Table:

*Agreement:

SD=strongly disagree, D=Disagree, A=Agree, SA=strongly agree

**Frequency:

Rarely <-----> Always

Never ---- Almost never --- Sometimes ---- Almost All the Time

***Degree of Concern or Worry About Topic of Item:

None (No Concern) <-----> Extreme (Very Concerned)

Clarity, Page 15		HOW CLEAR IS IT TO YOU?		
Items	Is meaning clear to you? Y (yes) or N (no)	What is best way to answer this item? *Agreement? SD - D - A - SA	** Frequency? Rarely <---> Always	*** Degree of Concern? None <---> Extreme
Working more hours to improve the finances. (T57FA)	Y N			
Whether my doctor or midwife understood my concerns. (AT271HCG)	Y N			
Coping with the unknowns in labor. (T334CWL)	Y N			

Key to Response Formats in Table:

*Agreement:
SD=strongly disagree, D=Disagree, A=Agree, SA=strongly agree

**Frequency:
Rarely <-----> Always
Never ---- Almost never --- Sometimes --- Almost All the Time .

***Amount of Concern or Worry About Topic of Item:
None (No Concern) <-----> Extreme (Very Concerned)

Part B. Trial Questionnaires:

Here are three trial questionnaires about support. People behave in ways that can make you feel supported, or not supported, by them. On the next 3 pages, please read over the set of instructions and items for three small questionnaires. Tell us if they are clear and easy to respond to and whether they represent the idea of support. The questions in **bold type** below each trial questionnaire are where you can put your answers.

Support from Partner Questionnaire

Instructions: Please think about your partner's behaviors toward you since you have become a parent. Circle one of the numbers between each pair of words that might be used to describe your experience with your partner's supportiveness. You may choose to circle the number next to a word if that word closely describes your partner's behaviors or you may choose to circle a number farther away from the words if your partner's behavior is not much like one of the pair of words.

My partner is:

not helpful	1	2	3	4	5	helpful
concerned	1	2	3	4	5	not concerned
not available	1	2	3	4	5	available
willing	1	2	3	4	5	not willing
not caring	1	2	3	4	5	caring
supportive	1	2	3	4	5	not supportive

FEEDBACK:

1. Is the set of instructions above clear and easy to respond to? ____Yes ____No
2. Are the pairs of words above clear and easy to respond to? ____Yes ____No
3. Are the word-pairs descriptive of behaviors that partners may use to support, or not support, each other? ____Yes ____No

Comments:

4. Are there other word-pairs that should be used? ____Yes ____No

Comments:

Support from Family Questionnaire

Instructions: Please think about your family's behaviors toward you since you have become a parent. Circle one of the numbers between each pair of words that might be used to describe your experience with your family's supportiveness. You may choose to circle the number next to a word if that word closely describes your family's behavior or you may choose to circle a number farther away from the words if your family's behavior is not much like one of the pair of words.

My family is:

not helpful	1	2	3	4	5	helpful
concerned	1	2	3	4	5	not concerned
not available	1	2	3	4	5	available
willing	1	2	3	4	5	not willing
not caring	1	2	3	4	5	caring
supportive	1	2	3	4	5	not supportive

FEEDBACK:

1. Is the set of instructions above clear and easy to respond to? ____Yes ____No
2. Are the pairs of words above clear and easy to respond to? ____Yes ____No
3. Are the word-pairs descriptive of behaviors that family members may use to support, or not support, each other? ____Yes ____No

Comments:

4. Are there other word-pairs that should be used? ____Yes ____No

Comments:

Support from Friends Questionnaire

Instructions: Please think about your friends' behaviors toward you since you have become a parent. Circle one of the numbers between each pair of words that might be used to describe your experience with your friends' supportiveness. You may choose to circle the number next to a word if that word closely describes your friends' behaviors or you may choose to circle a number farther away from the words if your friends' behavior is not much like one of the pair of words.

My friends are:

not helpful	1	2	3	4	5	helpful
concerned	1	2	3	4	5	not concerned
not available	1	2	3	4	5	available
willing	1	2	3	4	5	not willing
not caring	1	2	3	4	5	caring
supportive	1	2	3	4	5	not supportive

FEEDBACK:

1. Is the set of instructions above clear and easy to respond to? ____Yes ____No
2. Are the pairs of words above clear and easy to respond to? ____Yes ____No
3. Are the word-pairs descriptive of behaviors that friends may use to support, or not support, each other? ____Yes ____No

Comments:

4. Are there other word pairs that should be used? ____Yes ____No

Comments:

Informational Support

The following trial questionnaire is about informational support that new parents may use, particularly the sources parents use for information and how helpful these sources are to them. In this trial questionnaire, we want your feedback about (1) the instructions and (2) the content of the items. We are especially interested in whether this questionnaire is easy enough to understand and answer. It is a questionnaire about where people go to get information they need when they are becoming a parent. This page is the instruction page of the questionnaire. Please look it over and answer the **bolded FEEDBACK** questions below it.

Informational support - Where I go to get answers about things I need to know:

It is normal that first-time expectant and new parents have to ask about things they do not already know. We are interested in knowing all the places/sources you have gone to for information about birth, the baby, and parenting. We also want to know how useful each source of information was for you personally. Thank you for your thoughtful remembering of this.

Instructions:

1. Please read the 6 topics listed at the tops of columns and then possible sources of information listed in the rows. Then checkmark (✓) all sources that you used to get information on the 6 topics.
2. After you finish check marking all sources and topics that apply, please rate the helpfulness of the sources by giving a "grade" to each source that you check marked. The range of possible grades you can give to an informational source is anywhere between, and including:

"A"= outstanding/ excellent to.... "F"= bad/wrong information.

EXAMPLE: An example might be that you remember having asked for information about How to Cope with Labor from your *mother* and your *doctor*; about Baby Care from your *sister* and *doctor*; but you *Didn't Need More Information* about the Baby's Development or How to Be a Good Parent. After you finished check-marking the sources *Mother*, *Doctor*, *Sister*, and *Didn't Need More Information*, your grades of these sources (where you did need more information) might have been *Mother* as "A" (excellent), *Doctor* as "C" and an "A," and *Sister* as "B" (see example below).

<u>Sources of Information</u>	<u>Baby Care</u>	<u>Baby's Development</u>	<u>Understanding the Baby</u>	<u>How to Be a Good Parent</u>	<u>How to Cope with Labor</u>	<u>What Birth Would Be Like</u>
<i>Mother</i>					✓ A	
<i>Sister</i>	✓ B					
<i>Prenatal Care Doctor</i>	✓ C				✓ A	
<i>Didn't Need More Information (no grade needed)</i>		✓		✓		

FEEDBACK:

Are the instructions and example clear? ____Yes ____No

Comments:

Trial Questionnaires
September 16, 1997, Page 7

Now, here are the complete set of items for that **Informational Support** questionnaire. Please look it over and answer the **bolded** questions listed after it in the **FEEDBACK** section.

<i>Sources of Information</i>	<u>Baby Care</u>	<u>Baby's Development</u>	<u>Understanding the Baby</u>	<u>How to Be a Good Parent</u>	<u>How to Cope with Labor</u>	<u>What Birth Would Be Like</u>
<i>Mother</i>						
<i>Father</i>						
<i>Sister</i>						
<i>In-laws</i>						
<i>Other Relative</i>						
<i>Hospital Nurse</i>						
<i>Prenatal Care Doctor</i>						
<i>Midwife</i>						
<i>Clinic Nurse</i>						
<i>Neighbor or Friend</i>						
<i>Book or Magazine</i>						
<i>Labor and Delivery Nurses</i>						
<i>Other Community Resources</i>						

Trial Questionnaires
September 16, 1997, Page 8

	<u>Baby Care</u>	<u>Baby's Development</u>	<u>Understanding the Baby</u>	<u>How to Be a Good Parent</u>	<u>How to Cope with Labor</u>	<u>What Birth Would Be Like</u>
<i>Sources of Information</i>						
<i>Nurses in Baby Doctor's Office</i>						
<i>Pediatrician or Baby Doctor</i>						
<i>Teacher of Childbirth Class</i>						
<i>Didn't Need More Information (no grade needed)</i>						

FEEDBACK:

1. Are the items clear in their meaning? ___Yes ___No

Comments:

2. Are all items included that should be there? ___Yes ___No

Comments:

3. Are there duplicates that are not needed? ___Yes ___No

Comments:

4. Is it easy to answer? ___Yes ___No

Comments:

Trial Questionnaires
September 16, 1997, Page 9

Trial Formats for Questionnaires:

In these 3 trial questionnaires, we want to know if the format of each questionnaire works. To answer that issue, we ask you to just try answering the questions as if it were your own situation. Then give us some feedback about the format for each of the questionnaires (in each one's FEEDBACK section).

Parent Problem-Solving Process Questionnaire

Instructions: Please circle one number for each pair of phrases. Pick the number closest to the words that most closely describe your feelings about having to solve problems related to being a parent of a new baby. The more strongly the phrase describes you, the closer your circled number should be to that phrase.

When I have to figure out why some things work and others don't with my baby, I think of these activities as:		
Ways to develop myself as a parent	1 2 3 4 5	Things which prevent my development as a parent
Something which I dread	1 2 3 4 5	Opportunities I look forward to and enjoy
Something I am satisfied about	1 2 3 4 5	Something I am disappointed about
An impossible challenge	1 2 3 4 5	A rewarding challenge
Something at which I get better over time	1 2 3 4 5	Something that doesn't get any easier

FEEDBACK:

1. Are the instructions clear? ☐ Yes ☐ No

Comments:

2. Are the phrases clear and easy to understand? ☐ Yes ☐ No

3. Do these phrases represent the feelings new parents have about the challenge of problem solving the new baby? ☐ Yes ☐ No

Comments:

4. Should other phrases be added to better represent the feelings new parents have about the challenge of problem-solving the new baby? ☐ Yes ☐ No

Comments:

For each of the two (2) sets of statements, indicate by a check-mark (✓) the statements which describe your own experiences and understanding of your baby.

Set 1:

- ☐ I have come to terms with my labor and delivery experience, including my behavior, and others' behaviors during the birth process.
 - ☐ I notice how the baby behaves.
 - ☐ I compare my baby's behavior with my own and with the behaviors of other family members.
 - ☐ Sometimes I speak for the baby so that I can explain how the baby feels.
 - ☐ I can anticipate my baby's caregiving needs.
 - ☐ I am usually satisfied with how I solve my baby's problems.
-

FEEDBACK:

1. Are the instructions clear? ☐ Yes ☐ No

Comments:

2. Are the phrases clear and easy to understand? ☐ Yes ☐ No

3. Do these phrases represent the feelings new parents have about the challenge of problem solving the new baby? ☐ Yes ☐ No

Comments:

4. Should other phrases be added to better represent the feelings new parents have about the challenge of problem-solving the new baby? ☐ Yes ☐ No

Comments:

Set 2

- ☐ My baby's behavior changes from time to time.
 - ☐ My baby's behavior is similar to other family members.
 - ☐ The way my baby acts helps me understand how the baby feels.
 - ☐ By the way my baby acts, I can anticipate what he/she will need soon.
 - ☐ The baby's responses to my actions tell me that I'm doing the right thing.
-

FEEDBACK:

1. Are the instructions clear? ☐ Yes ☐ No

Comments:

2. Are the phrases clear and easy to understand? ☐ Yes ☐ No

3. Do these phrases represent the feelings new parents have about the challenge of problem solving the new baby? ☐ Yes ☐ No

Comments:

4. Should other phrases be added to better represent the feelings new parents have about the challenge of problem-solving the new baby? ☐ Yes ☐ No

Comments:

Internal Homogeneity and Content Validity: Postpartum Parenting Scale -

There will be two (2) forms per set of items. Each form will have several questions that are **bolded**. Read the **bolded questions** above, inside, and below the tables on each page. Answer them in order. There will be lots of sets, representing lots of things new parents are worried about. Each set will be stapled together.

Start and finish one stapled set at a time, then move on to another set. Keep these instructions in front of you while you work on the various sets.

First Form in a set:

Read the **bolded directions and questions** inside the table. Answer the questions in numerical order.

- A. First, read all items in the first column and answer question #1 at the top of the column.
- B. Then read each individual item and tell us your opinion of each item (see question #2 for each item in the far right column).

Second form in a set:

On the second form the instructions to be followed are:

- A. First read the label and definition. Then read and answer question #1.
- B. Then read all items in the first column and answer question #2 at the top of the column.
- C. Then read each individual item again with the way it will be answered. Tell us your opinion about each item (see question #3 for each item in far right column).
- D. Then answer the two questions that come after the table.

We know this takes lots of thought and some of your valuable time. Thank you so much for donating your time and thinking to help us develop a questionnaire that may help other new parents in the future.

Margaret Imle and Cynthia Martin

Demographic Information: Preliminary Study - Phases 1 and 2

1. Your age _____ Partner's age _____
2. Your gender ☐ Male
 ☐ Female
3. Highest grade you completed _____
4. Usual occupation: Yours _____
 Spouse's/partner's occupation _____
5. Your ethnic background
☐ Hispanic
☐ Caucasian
☐ Black or African American
☐ Oriental
☐ African
☐ Middle Eastern
☐ Other (specify _____)
6. When was baby born?/ Or due to be born? _____
(Was baby born ☐ on time? ☐ early? or ☐ late?)
If baby was early, how early? _____
7. Are you ☐ married? How long? _____.
 ☐ partnered? How long? _____.
 ☐ single?
 ☐ separated or divorced?
 ☐ widowed?
8. Where did you get your maternity care? _____
9. Was the pregnancy normal? ☐ yes
 ☐ no: What happened? _____
10. Have you ever expected a baby before? ☐ yes: What happened? _____
 ☐ no
11. Has your partner ever been a parent before? ☐ yes; ☐ no
12. Would you say that your household income is
☐ higher than average?
☐ about average for your size family?
☐ lower than income of others like you?

Internal Homogeneity PPS Set 2.1
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>			
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1			
Answer just once for the whole list by circling here: "Yes" or "No"				
My baby crying for reasons I don't understand.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
The reasons my baby cries.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
How much my baby's crying bothers my partner.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
My baby cries to irritate me.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
My baby's crying does not affect me.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
My baby cries for attention.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
My baby cries because he is spoiled.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
My baby cries differently to signal specific needs.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I recognize reasons for my baby's crying.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I have a specific way I cope with my baby's crying.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1

<u>List of Items</u>	<u>Fit of Each Item</u>			
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1			
Crying is part of babyhood.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I am concerned when my baby cries.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
My baby cries at the same time every day.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
My baby cries when he is tired or hungry.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
My baby's crying makes me feel ineffective as a parent.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I can predict when my baby will cry.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I am frustrated with my baby's crying.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I am worried when my baby cries.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I am frantic when my baby cries.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I get desperate when my baby cries.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
My baby's crying amuses me.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1

Internal Homogeneity PPS Set 2.2
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>			
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1			
Answer just once for the whole list by circling here: "Yes" or "No"				
Losing control of myself during labor.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
The need for medical interventions in labor	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Going through labor without medication.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Whether the labor and delivery were like what I expected	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Coping with the unknowns in labor.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I think about my labor & delivery experience.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I talk about the labor & delivery experience.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I have come to terms with my pregnancy and labor experiences.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1

Internal Homogeneity PPS Set 2.3
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Answer just once for the whole list by circling here: "Yes" or "No"	
Whether my doctor or midwife had time to spend with me.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Feeling stupid around my doctor or midwife.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Understanding what my provider explained to me.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
My doctor or midwife getting upset with me in labor.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
How well-prepared my doctor or midwife was for anything that might have gone wrong.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Whether my doctor or midwife discussed choices about birth with me.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Whether my doctor or midwife understood my concerns.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Getting good explanations when I ask doctor or midwife about questions.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Trusting the doctor or midwife.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

<u>List of Items</u>	<u>Fit of Each Item</u>			
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1			
My nurses understood what I was afraid of.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I trusted my provider.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Doctor/midwife was a source of emotional support.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Labor nurse provided helpful assistance in labor.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Post-Partum nurse was a source of emotional support.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Baby nurse in clinic is a source of emotional support to my parenting efforts.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1

Internal Homogeneity PPS Set 2.4
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>			
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1			
Answer just once for the whole list by circling here: "Yes" or "No"				
Being able to understand the baby's point of view.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I can imagine my baby's viewpoint	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I imagine what my baby feels like in certain situations.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I understand why my baby acts the way he does.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I can tell others what my baby is feeling or experiencing.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I feel connected and close to my baby when I am voicing his perspective.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1

Internal Homogeneity PPS Set 2.5
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Answer just once for the whole list by circling here: "Yes" or "No"	
Whether there is enough money to buy anything more than the basics.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Having a steady income.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Enough financial security to comfortably raise a family.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Enough space in home for raising my baby.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Whether my home is adequate for a child's needs	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Whether the job(s) of the wage earner(s) in my family are adequate to my family's new needs.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Whether my job might change unexpectedly.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Whether my job is satisfying.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

Internal Homogeneity PPS Set 2.6
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>			
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item:			
	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Answer just once for the whole list by circling here: "Yes" or "No"				
My partner and I are sensitive to each other's state of mind.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I have a good relationship with my partner.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
A partner could be described as: ----> helpful vs. not helpful	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
----> concerned vs. not concerned	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
----> available vs. not available	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
----> willing vs. not willing	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
----> caring vs. not caring	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
----> supportive vs. not supportive	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
----> encouraging vs. not encouraging	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Sharing feelings with my partner.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
How the relationship with my partner is changing.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
My partner being around to help parent the baby	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1

<u>List of Items</u>	<u>Fit of Each Item</u>			
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item:			
	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Whether my partner understands me	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1

Internal Homogeneity PPS Set 2.7
Postpartum Parenting Scale -

<u>List of Items</u> 1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	<u>Fit of Each Item</u> 2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Answer just once for the whole list by circling here: "Yes" or "No"	
Learning on-the-job how to care for child.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I have to figure out why some things work and others don't with my baby.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Parenting to me, so far, is: --->Something at which I get better over time vs. something that doesn't get any easier	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

Internal Homogeneity PPS Set 2.8
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Answer just once for the whole list by circling here: "Yes" or "No"	
Whether the labor support person made me feel supported during labor.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
How we supported each other in labor.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
How labor began	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Whether we applied what we learned about working as a team during labor	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I think about how labor & delivery may have affected my baby's health.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

Internal Homogeneity PPS Set 2.9
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Answer just once for the whole list by circling here: "Yes" or "No"	
A baby's behavior tells what his needs are.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
A baby's personality can be seen in his behavior.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I know my baby's personality.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
My baby is like what I expected.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
My baby's behavior changes from time to time.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

Internal Homogeneity PPS Set 2.10
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>			
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1			
Answer just once for the whole list by circling here: "Yes" or "No"				
I compare my baby with myself.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
My baby does little things that I do.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I recognize other family members in my baby's behavior or responses.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I recognize some of my own traits in my baby's behavior.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1

Internal Homogeneity PPS Set 2.11
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>			
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1			
Answer just once for the whole list by circling here: "Yes" or "No"				
I anticipate what my baby's needs are.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I can tell what my baby likes and dislikes.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I can predict what I should do for my baby.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
My baby's signals indicate what he needs.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I have figured out my baby's behavior patterns.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I don't see anything predictable about my baby's behaviors.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1

Internal Homogeneity PPS Set 2.12
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>			
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item:			
	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Answer just once for the whole list by circling here: "Yes" or "No"				
How my baby makes me feel.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
How my baby responds to my partner.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Others criticizing my parenting.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I am handling parental responsibilities.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I was as prepared for parental responsibility as I should have been.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I trust my own strategies to solve my baby's problems.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I feel I can ask for help from others with my baby's problems.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
My partner is a good parent.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I do a good job as a parent.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I expected to be more satisfied with parenting.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I feel like a parent now.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I don't do the right things for the baby.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1

Internal Homogeneity PPS Set 2.13
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>			
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1			
Answer just once for the whole list by circling here: "Yes" or "No"				
I have resources available to me for information I need about the baby.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I have resources available to me for information I need about parenting.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
The information I get about parenting is useful.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
The information I get about the baby is useful.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I wish I had someone to answer my questions about the baby.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I would like someone to talk to about parenting.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Whether I should listen to what others tell me about what to do	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Having a trustworthy person to answer my questions	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Finding information on baby products	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1

Internal Homogeneity PPS Set 2.14
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Answer just once for the whole list by circling here: "Yes" or "No"	
Our relatives helping us get baby supplies	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
What happens when my relatives' advice conflicts with my opinion concerning the baby	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Family members may be described as: ----->helpful vs. not helpful	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
----->concerned vs. not concerned	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
----->available vs. not available	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
----->willing vs. not willing	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
----->caring vs. not caring	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
----->supportive vs. not supportive	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
-----> approving vs. not approving	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

Internal Homogeneity PPS Set 2.15
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>			
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item:			
	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Answer just once for the whole list by circling here: "Yes" or "No"				
Sharing with others friends who are going through the same thing	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Being able to count on friends when no family is around	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Having a friend who realizes when I need to talk about something	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Needing contact with others outside of my home.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
My friends may be described as: ---->helpful vs. not helpful	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
----> concerned vs. not concerned	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
----> available vs. not available	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
----> willing vs. not willing	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
----> caring vs. not caring	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
----> supportive vs. not supportive	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
----> interested vs. not interested	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
----> understanding vs. not understanding	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1

Internal Homogeneity PPS Set 2.16
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>			
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1			
Answer just once for the whole list by circling here: "Yes" or "No"				
Wanting a child more than other things	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Feeling a sense of accomplishment about becoming a parent	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Feeling invested enough in parenthood	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Living up to my desire to be a parent	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Feeling invested enough in parenthood	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Parenting to me, so far, is: ----> Ways to develop myself as a parent vs. Things which prevent my development as a parent	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
----> Opportunities I look forward to and enjoy vs. Something which I dread	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
----> Something I am satisfied about vs. Something I am disappointed about	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
----> A rewarding challenge vs. An impossible challenge	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1

Internal Homogeneity PPS Set 2.17
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Answer just once for the whole list by circling here: "Yes" or "No"	
Effect of baby on relationship with partner	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
How the baby's needs affect sex life	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Effect of baby on relationship with partner.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Enough energy to have sex after getting up with the baby at night.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
My partner and I share household responsibilities.	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

Internal Homogeneity PPS Set 2.18
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>			
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1			
Answer just once for the whole list by circling here: "Yes" or "No"				
Giving up the little things I am used to having for the baby	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Changing housekeeping practices for the baby's safety	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Restrictions on my freedom to pick up and go as I used to do	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Working out a routine to fit the baby and me	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
The schedules being different at home with a baby	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Changes in sleeping and eating habits	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1

Internal Homogeneity PPS Set 2.19
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>			
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1			
Answer just once for the whole list by circling here: "Yes" or "No"				
Family responsibility	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Uncertainty about feeling very parent-like	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Whether I am mature enough to be a parent	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Whether I have the personality necessary to care for a child	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Changing into a parent	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1

Internal Homogeneity PPS Set 2.20
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>			
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1			
Answer just once for the whole list by circling here: "Yes" or "No"				
Choosing what is best for the baby	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Knowing what my baby expects of me	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Knowing what is good, or not good, for the child	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Having a beneficial influence on my child	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Molding this new person	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Handling the baby safely	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Deciding when to respond to baby's cries	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1

Internal Homogeneity PPS Set 2.21
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Answer just once for the whole list by circling here: "Yes" or "No"	
Knowing what to do for the baby	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Whether to try to get the baby into a schedule	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

Internal Homogeneity PPS Set 2.22
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Answer just once for the whole list by circling here: "Yes" or "No"	
Conflicting expectations of time to be spent with baby	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Deciding who has to get up with the baby at night	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Deciding how much money to spend on baby	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

Internal Homogeneity PPS Set 2.23
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Answer just once for the whole list by circling here: "Yes" or "No"	
Whether I have had any practice caring for children before this baby	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Remembering my babysitting experience and applying it in caring for my child	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

Internal Homogeneity PPS Set 2.24
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Answer just once for the whole list by circling here: "Yes" or "No"	
Baby's sex being different from expected	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
The kind of personality the baby will have	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
The baby as a real person	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
The baby is like what I expected	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

Internal Homogeneity PPS Set 2.25
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>			
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1			
Answer just once for the whole list by circling here: "Yes" or "No"				
Wondering if I could cope with any difficulties with the baby's health	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Worry over the baby's well-being during labor	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
Remembering worries about the baby's heartbeat during labor	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1
I think about how labor & delivery may have affected my baby's health.	<u>Very much</u> 4	<u>Somewhat</u> 3	<u>A Little</u> 2	<u>Not at All</u> 1

Internal Homogeneity PPS Set 2.26
Postpartum Parenting Scale -

<u>List of Items</u>	<u>Fit of Each Item</u>
1. Read all the set's items in this column. Do all of them, in general (as a group), belong together?	2. Taken one at a time, to what degree does each item belong (or fit) with the group as a whole? Circle one of the numbered responses beside each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Answer just once for the whole list by circling here: "Yes" or "No"	
Remembering how I felt about the weight gain during pregnancy	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Feeling too large in the bust during pregnancy	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I was worried about recognizing the signs of labor during my pregnancy	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

Content Validity - PPS (Postpartum Parenting Scale) Set 2.1

The label and definition for this set of items:

Label for this set: Baby Crying

Definition: A noisy type of baby signal that arouses in the parent a feeling of urgency to do something to stop this baby signal from occurring. Aspects of baby crying include how often it occurs, what it sounds like, how long it lasts, whether it is predictable, how bothersome it is to the parent, and whether it stops in response to what the parent does.

1. Do this label and definition fit together with each other? Circle: Yes or No

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item:</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item. Very much Somewhat A Little Not at All 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Answer just once for the whole list by circling here: "Yes" or "No"		
My baby crying for reasons I don't understand.	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1
The reasons my baby cries.	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1
How much my baby's crying bothers my partner.	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1

List of Items	The Way Item Will Be Answered	Fit of Each Item: 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item. Very much Somewhat A Little Not at All 4 3 2 1
My baby cries to irritate me.	Agreement: SD=Strongly Disagree, D=Disagree, N=Neutral, A=Agree, SA=Strongly Agree	Very much Somewhat A Little Not at All 4 3 2 1
My baby's crying does not affect me.	Agreement: SD=Strongly Disagree, D=Disagree, N=Neutral, A=Agree, SA=Strongly Agree	Very much Somewhat A Little Not at All 4 3 2 1
My baby cries for attention.	Agreement: SD ----- D ----- N ----- A ----- SA	Very much Somewhat A Little Not at All 4 3 2 1
My baby cries because he is spoiled.	Agreement: SD ----- D ----- N ----- A ----- SA	Very much Somewhat A Little Not at All 4 3 2 1
My baby cries differently to signal specific needs.	Agreement: SD ----- D ----- N ----- A ----- SA	Very much Somewhat A Little Not at All 4 3 2 1
I recognize reasons for my baby's crying.	Agreement: SD ----- D ----- N ----- A ----- SA	Very much Somewhat A Little Not at All 4 3 2 1
I have a specific way I cope with my baby's crying.	Agreement: SD ----- D ----- N ----- A ----- SA	Very much Somewhat A Little Not at All 4 3 2 1
Crying is part of babyhood.	Agreement: SD ----- D ----- N ----- A ----- SA	Very much Somewhat A Little Not at All 4 3 2 1

List of Items	The Way Item Will Be Answered	Fit of Each Item:
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item. Very much Somewhat A Little Not at All 4 3 2 1
I am concerned when my baby cries.	Agreement: SD ----- D ----- N ----- A ----- SA	Very much Somewhat A Little Not at All 4 3 2 1
My baby cries at the same time every day.	Agreement: SD ----- D ----- N ----- A ----- SA	Very much Somewhat A Little Not at All 4 3 2 1
My baby cries when he is tired or hungry.	Agreement: SD ----- D ----- N ----- A ----- SA	Very much Somewhat A Little Not at All 4 3 2 1
My baby's crying makes me feel ineffective as a parent.	Frequency: Rarely <-----> Always Never---Almost never---Sometimes---Often---Almost all the time	Very much Somewhat A Little Not at All 4 3 2 1
I can predict when my baby will cry.	Frequency: Rarely <-----> Always Never---Almost never---Sometimes---Often---Almost all the time	Very much Somewhat A Little Not at All 4 3 2 1
I am frustrated with my baby's crying.	Frequency: Rarely <-----> Always Never---Almost never---Sometimes---Often---Almost all the time	Very much Somewhat A Little Not at All 4 3 2 1
I am worried when my baby cries.	Frequency: Rarely <-----> Always Never---Almost never---Sometimes---Often---Almost all the time	Very much Somewhat A Little Not at All 4 3 2 1

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item:</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item. <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I am frantic when my baby cries.	Frequency: Rarely <-----> Always Never---Almost never---Sometimes---Often---Almost all the time	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I get desperate when my baby cries.	Frequency: Rarely <-----> Always Never---Almost never---Sometimes---Often---Almost all the time	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
My baby's crying amuses me.	Frequency: Rarely <-----> Always Never---Almost never---Sometimes---Often---Almost all the time	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

4. Do any of the items duplicate each other? [Draw line(s) connecting the ones that are duplicates]

5. Are there other items that you think should be included in this set?
(List your ideas below)

Content Validity - PPS (Postpartum Parenting Scale) Set 2.2

The label and definition for this set of items:

Label for this set: Labor Review

Definition: Remembering and thinking about the birth and labor, especially the pain, coping with pain and the length of labor.

1. Do this label and definition fit together with each other? Circle: Yes or No

List of Items	The Way Item Will Be Answered	Fit of Each Item: 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Answer just once for the whole list by circling here: "Yes" or "No"		
Losing control of myself during labor.	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
The need for medical interventions in labor	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Going through labor without medication.	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Whether the labor and delivery were like what I expected	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item:</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: Very much Somewhat A Little Not at All 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Coping with the unknowns in labor.	How much concern do I feel about..... None ----- A little ----- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1
I think about my labor & delivery experience.	<u>Frequency:</u> Rarely <-----> Always Never--Almost never---Sometimes---Often---Almost all the time	Very much Somewhat A Little Not at All 4 3 2 1
I talk about the labor & delivery experience.	<u>Frequency:</u> Rarely <-----> Always Never---Almost never---Sometimes---Often---Almost all the time	Very much Somewhat A Little Not at All 4 3 2 1
I have come to terms with my pregnancy and labor experiences.	<u>Agreement:</u> SD=Strongly Disagree, D=Disagree, N=Neutral, A=Agree, SA=Strongly Agree	Very much Somewhat A Little Not at All 4 3 2 1

4. Are there other items that you think should be included in this set?
(List your ideas below)

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.3

The label and definition for this set of items:

Label for this set: Health Caregiver Relationship/Supportiveness

Definition: The remembered supportiveness of the health care provider toward the parent in pregnancy, labor or birth. It is evaluated by the parent in terms of being able to trust the provider's care to be supportive and give the information needed. The basis for feeling of trust may come from the parent feeling understood and helped by the provider in the past. The provider may be nurses, childbirth educators, midwives, or physicians.

1. Do this label and definition fit together with each other? Circle: Yes or No

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Answer just once for the whole list by circling here: "Yes" or "No"		
Whether my doctor or midwife had time to spend with me.	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Feeling stupid around my doctor or midwife.	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Understanding what my provider explained to me.	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
My doctor or midwife getting upset with me in labor.	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
How well-prepared my doctor or midwife was for anything that might have gone wrong.	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Whether my doctor or midwife discussed choices about birth with me.	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Whether my doctor or midwife understood my concerns.	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Getting good explanations when I ask doctor or midwife about questions.	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Trusting the doctor or midwife.	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
My nurses understood what I was afraid of.	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I trusted my provider.	<u>Agreement:</u> SD=Strongly Disagree, D=Disagree, N=Neutral, A=Agree, SA=Strongly Agree <u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Doctor/midwife was a source of emotional support.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Labor nurse provided helpful assistance in labor.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Post-Partum nurse was a source of emotional support.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Baby nurse in clinic is a source of emotional support to my parenting efforts.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

4. Are there other items that you think should be included in this set?
(List your ideas below)

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.4

The label and definition for this set of items:

Label for this set: Empathizing with Baby

Definition: One step in the Parent Problem-Solving process is interpreting the meaning of the baby's behaviors from the baby's perspective. This is done by imagining what the baby is experiencing or what he feels like. Being able to put oneself in the baby's place helps the parent know what the baby needs done. Empathizing is noticeable when the parent helps to express what the baby may be feeling when the baby cannot express it himself clearly.

1. Do this label and definition fit together with each other? Circle: Yes or No

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u>
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: Very much Somewhat A Little Not at All 4 3 2 1
Answer just once for the whole list by circling here: "Yes" or "No"		
Being able to understand the baby's point of view.	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1
I can imagine my baby's viewpoint	Frequency: Rarely <-----> Always Never--Almost never---Sometimes---Often---Almost all the time	Very much Somewhat A Little Not at All 4 3 2 1
I imagine what my baby feels like in certain situations.	Agreement: SD=Strongly Disagree, D=Disagree, N=Neutral, A=Agree, SA=Strongly Agree	Very much Somewhat A Little Not at All 4 3 2 1

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
I understand why my baby acts the way he does.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I can tell others what my baby is feeling or experiencing.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I feel connected and close to my baby when I am voicing his perspective.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

4. Are there other items that you think should be included in this set?
(List your ideas below)

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.5

The label and definition for this set of items:

Label for this set: Personal Security Base

Definition: The presence and quality, or lack of presence and/or quality, of a basic support system composed of enough money, job security, and appropriate housing for the parent who is rearing a baby.

1. Do this label and definition fit together with each other? Circle: Yes or No

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Answer just once for the whole list by circling here: "Yes" or "No"		
Whether there is enough money to buy anything more than the basics.	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Having a steady income.	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Enough financial security to comfortably raise a family.	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Enough space in home for raising my baby.	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

List of Items	The Way Item Will Be Answered	Fit of Each Item
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: Very much Somewhat A Little Not at All 4 3 2 1
Whether my home is adequate for a child's needs	How much concern do I feel about..... None ----- A little ----- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1
Whether the job(s) of the wage earner(s) in my family are adequate to my family's new needs.	How much concern do I feel about..... None ----- A little ----- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1
Whether my job might change unexpectedly.	How much concern do I feel about..... None ----- A little ----- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1
Whether my job is satisfying.	How much concern do I feel about..... None ----- A little ----- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1

4. Are there other items that you think should be included in this set?
(List your ideas below)

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.6

The label and definition for this set of items:

Label for this set: Partner

Definition: How helpful the partner is to the new parent in the postpartum period. Whether the partner is supportive is seen in actions, words and perceived emotional connections. Expectations of the partner relationship go beyond assistance with tasks and goods; they include an emotionally close, sharing relationship between the partner.

1. Do this label and definition fit together with each other? Circle: Yes or No

<u>List of Items</u>	<u>The Way Item Will Be Answered:</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: Very much Somewhat A Little Not at All 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?	Not Applicable _____ or (See Below)	
Answer just once for the whole list by circling here: "Yes" or "No"		
My partner and I are sensitive to each other's state of mind.	<u>Agreement</u> : SD=Strongly Disagree, D=Disagree, N=Neutral, A=Agree, SA=Strongly Agree	Very much Somewhat A Little Not at All 4 3 2 1
I have a good relationship with my partner.	<u>Agreement</u> : SD ----- D ----- N ----- A ----- SA	Very much Somewhat A Little Not at All 4 3 2 1

<u>List of Items</u> 2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?	<u>The Way Item Will Be Answered:</u> Not Applicable ____ or (See Below)	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: Very much Somewhat A Little Not at All 4 3 2 1
A partner could be described as:	Choose a numerical rating closest to your opinion helpful 1 2 3 4 5 not helpful concerned 1 2 3 4 5 not concerned available 1 2 3 4 5 not available willing 1 2 3 4 5 not willing caring 1 2 3 4 5 not caring supportive 1 2 3 4 5 not supportive encouraging 1 2 3 4 5 not encouraging	Very much Somewhat A Little Not at All 4 3 2 1 Very much Somewhat A Little Not at All 4 3 2 1 Very much Somewhat A Little Not at All 4 3 2 1 Very much Somewhat A Little Not at All 4 3 2 1 Very much Somewhat A Little Not at All 4 3 2 1 Very much Somewhat A Little Not at All 4 3 2 1
Sharing feelings with my partner.	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1
How the relationship with my partner is changing.	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1

<u>List of Items</u>	<u>The Way Item Will Be Answered:</u>	<u>Fit of Each Item</u>
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?	Not Applicable _____ or (See Below)	3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: Very much Somewhat A Little Not at All 4 3 2 1
My partner being around to help parent the baby	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1
Whether my partner understands me	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1

4. Are there other items that you think should be included in this set?
(List your ideas below)

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.7

The label and definition for this set of items:

Label for this set: Parent Problem Solving Process

Definition: A cyclic process of trial and error in which the parent perceives the baby's behavioral cues, interprets them by normalizing and empathizing, learns to recognize the baby's patterns and forecast needs, acts to meet the baby's need for care, and evaluates the outcomes of the parental care actions. Recycling the whole process is commonly done one or more times before a satisfactory solution to the baby's need occurs.

1. Do this label and definition fit together with each other? Circle: Yes or No

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Answer just once for the whole list by circling here: "Yes" or "No"		
Learning on-the-job how to care for child.	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Learning on-the-job how to care for child	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I have to figure out why some things work and others don't with my baby.	<u>Frequency:</u> Rarely <-----> Always Never---Almost never---Sometimes---Often---Almost all the time	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Parenting to me, so far, is:	<u>Choose a numerical rating close to your opinion</u> Something at which I get better over time 1 2 3 4 5 I get better over time doesn't get any easier	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

4. Are there other items that you think should be included in this set?
(List your ideas below)

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.8

The label and definition for this set of items:

Label for this set: Labor Support

Definition: Remembering the presence or coaching behaviors of the labor support person for how helpful they were during labor and birth. The partner or coach may remember what he or she did to help out the laboring woman and the new mother may remember specific instances of the labor support person's actions.

1. Do this label and definition fit together with each other? Circle: Yes or No

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Answer just once for the whole list by circling here: "Yes" or "No"		
Whether the labor support person made me feel supported during labor.	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
How we supported each other in labor.	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
How labor began	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Whether we applied what we learned about working as a team during labor	<u>How much concern do I feel about.....</u> None ----- A little ----- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I think about how labor & delivery may have affected my baby's health.	<u>Agreement:</u> SD=Strongly Disagree, D=Disagree, N=Neutral, A=Agree, SA=Strongly Agree	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

4. Are there other items that you think should be included in this set?
(List your ideas below)

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.9

The label and definition for this set of items:

Label for this set: Baby Signals

Definition: The behaviors of the baby that tell what he is like and what he needs. These behaviors have to be noticed by the parent who is learning to know how to care for his or her real baby. Noticing baby signals is part of the parent's process of problem-solving their own baby's needs.

1. Do this label and definition fit together with each other? Circle: Yes or No

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Answer just once for the whole list by circling here: "Yes" or "No"		
A baby's behavior tells what his needs are.	<u>Agreement:</u> SD=Strongly Disagree, D=Disagree, N=Neutral, A=Agree, SA=Strongly Agree	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
A baby's personality can be seen in his behavior.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I know my baby's personality.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
My baby is like what I expected.	Agreement: SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
My baby's behavior changes from time to time.	Frequency: Rarely <-----> Always Never--Almost never--Sometimes--Often--Almost all the time	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

4. Are there other items that you think should be included in this set?
(List your ideas below)

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.10

The label and definition for this set of items:

Label for this set: Normalizing Baby

Definition: One of the steps in parent problem-solving cycle is to interpret the meaning of the baby's behaviors and characteristics. This is done by comparing the baby to themselves, or another relative, and then realizing that what the adult feels in a certain situation may be what the baby is also experiencing in a similar situation. This helps to make sense out of the baby who cannot talk for himself.

1. Do this label and definition fit together with each other? Circle: Yes or No

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: Very much Somewhat A Little Not at All 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Answer just once for the whole list by circling here: "Yes" or "No"		
I compare my baby with myself.	<u>Agreement:</u> SD=Strongly Disagree, D=Disagree, N=Neutral, A=Agree, SA=Strongly Agree	Very much Somewhat A Little Not at All 4 3 2 1
My baby does little things that I do.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	Very much Somewhat A Little Not at All 4 3 2 1
I recognize other family members in my baby's behavior or responses.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	Very much Somewhat A Little Not at All 4 3 2 1

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
I recognize some of my own traits in my baby's behavior.	Frequency: Rarely <-----> Always Never----Almost never----Often----Almost all the time	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

4. Are there other items that you think should be included in this set?
(List your ideas below)

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.11

The label and definition for this set of items:

Label for this set: Pattern Recognition

Definition: After seeing many instances of baby signals related to specific needs, the parent draws conclusions about the baby's general patterns and begins to forecast more accurately what care the baby needs. Pattern Recognition and forecasting result in connecting all components of the parent problems-solving process in a meaningful way.

Do this label and definition fit together with each other? Circle: Yes or No

List of Items	The Way Item Will Be Answered	Fit of Each Item 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: Very much 4 Somewhat 3 A Little 2 Not at All 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Answer just once for the whole list by circling here: "Yes" or "No"		
I anticipate what my baby's needs are.	Frequency: Rarely <-----> Always Never---Almost never---Sometimes---Often---Almost all the time	Very much 4 Somewhat 3 A Little 2 Not at All 1
I can tell what my baby likes and dislikes.	Frequency: Rarely <-----> Always Never---Almost never---Sometimes---Often---Almost all the time	Very much 4 Somewhat 3 A Little 2 Not at All 1

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
I can predict what I should do for my baby.	<u>Frequency:</u> Rarely <-----> Always Never---Almost never---Sometimes---Often---Almost all the time	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
My baby's signals indicate what he needs.	<u>Agreement:</u> SD=Strongly Disagree, D=Disagree, N=Neutral, A=Agree, SA=Strongly Agree	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I have figured out my baby's behavior patterns.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I don't see anything predictable about my baby's behaviors.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

4. Are there other items that you think should be included in this set?
(List your ideas below)

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.12

The label and definition for this set of items:

Label for this set: Parent Self-Evaluation

Definition: One part of the parent problem-solving process. Thinking about and evaluating the effectiveness of parental actions tried with baby in terms of their effect on the baby and on themselves. Key elements are evaluative words about how well he/she or the partner is doing, emotional terms describing how he or she feels about this evaluation, and reactions of acceptance or dismay about those feelings.

1. Do this label and definition fit together with each other? Circle: Yes or No

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: Very much Somewhat A Little Not at All 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Answer just once for the whole list by circling here: "Yes" or "No"		
How my baby makes me feel.	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1
How my baby responds to my partner.	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1
Others criticizing my parenting.	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
I am handling parental responsibilities.	<u>Agreement:</u> SD=Strongly Disagree, D=Disagree, N=Neutral, A=Agree, SA=Strongly Agree SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I was as prepared for parental responsibility as I should have been.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I trust my own strategies to solve my baby's problems.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I feel I can ask for help from others with my baby's problems.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
My partner is a good parent.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I do a good job as a parent.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I expected to be more satisfied with parenting.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I feel like a parent now.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I don't do the right things for the baby.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

4. Are there other items that you think should be included in this set?
(List your ideas below)

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.13

The label and definition for this set of items:

Label for this set: Resources for Information

Definition: The availability, types and helpfulness of information available to the new parent in the postpartum. Types of support are books, videos, or someone to ask advice about the baby. Availability is how easily the parent can get this information. Helpfulness is how valuable the information is in solving baby care or self care problems.

1. Do this label and definition fit together with each other? Circle: Yes or No

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: Very much Somewhat A Little Not at All 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Answer just once for the whole list by circling here: "Yes" or "No"		
I have resources available to me for information I need about the baby.	<u>Agreement:</u> SD=Strongly Disagree, D=Disagree, N=Neutral, A=Agree, SA=Strongly Agree	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I have resources available to me for information I need about parenting.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
The information I get about parenting is useful.	<u>Agreement:</u> SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
The information I get about the baby is useful.	Agreement: SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I wish I had someone to answer my questions about the baby.	Agreement: SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I would like someone to talk to about parenting.	Agreement: SD ----- D ----- N ----- A ----- SA	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Whether I should listen to what others tell me about what to do	<u>How much concern do I feel about.....</u> None ----- A little ----- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Having a trustworthy person to answer my questions	<u>How much concern do I feel about.....</u> None ----- A little ----- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Finding information on baby products	<u>How much concern do I feel about.....</u> None ----- A little ----- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

4. Are there other items that you think should be included in this set?
(List your ideas below)

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.14

The label and definition for this set of items:Label for this set: Family SupportDefinition: The degree of helpfulness or non-helpfulness of relatives and family members to the new parent at birth and in the early postpartum. Help or lack of help can be evaluated when it is present in what the relative does and says to the parent.**1. Do this label and definition fit together with each other? Circle: Yes or No**

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Answer just once for the whole list by circling here: "Yes" or "No"		
Our relatives helping us get baby supplies	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
What happens when my relatives' advice conflicts with my opinion concerning the baby	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: Very much Somewhat A Little Not at All 4 3 2 1
Family members may be described as:	Choose a numerical rating closest to your opinion helpful 1 2 3 4 5 not helpful	Very much Somewhat A Little Not at All 4 3 2 1
	concerned 1 2 3 4 5 not concerned	Very much Somewhat A Little Not at All 4 3 2 1
	available 1 2 3 4 5 not available	Very much Somewhat A Little Not at All 4 3 2 1
	willing 1 2 3 4 5 not willing	Very much Somewhat A Little Not at All 4 3 2 1
	caring 1 2 3 4 5 not caring	Very much Somewhat A Little Not at All 4 3 2 1
	supportive 1 2 3 4 5 not supportive	Very much Somewhat A Little Not at All 4 3 2 1
	approving 1 2 3 4 5 not approving	Very much Somewhat A Little Not at All 4 3 2 1

4. Are there other items that you think should be included in this set?
(List your ideas below)

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.15

The label and definition for this set of items:

Label for this set: Friend Support

Definition: The degree of helpfulness or non-helpfulness of friends for the new parent in the postpartum time period. Help or lack of help is present in what the friend does and says.

1. Do this label and definition fit together with each other? Circle: Yes or No

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: Very much Somewhat A Little Not at All 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Answer just once for the whole list by circling here: "Yes" or "No"		
Sharing with others friends who are going through the same thing	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1
Being able to count on friends when no family is around	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1
Having a friend who realizes when I need to talk about something	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1
Needing contact with others outside of my home.	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1

List of Items	The Way Item Will Be Answered	Fit of Each Item 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: Very much Somewhat A Little Not at All 4 3 2 1
My friends may be described as:	Choose a numerical rating closest to your opinion helpful 1 2 3 4 5 not helpful	Very much Somewhat A Little Not at All 4 3 2 1
	concerned 1 2 3 4 5 not concerned	Very much Somewhat A Little Not at All 4 3 2 1
	available 1 2 3 4 5 not available	Very much Somewhat A Little Not at All 4 3 2 1
	willing 1 2 3 4 5 not willing	Very much Somewhat A Little Not at All 4 3 2 1
	caring 1 2 3 4 5 not caring	Very much Somewhat A Little Not at All 4 3 2 1
	supportive 1 2 3 4 5 not supportive	Very much Somewhat A Little Not at All 4 3 2 1
	interested 1 2 3 4 5 not interested	Very much Somewhat A Little Not at All 4 3 2 1
	understanding 1 2 3 4 5 not understanding	Very much Somewhat A Little Not at All 4 3 2 1

4. Are there other items that you think should be included in this set?
(List your ideas below)

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.16

The label and definition for this set of items:

Label for this set: Parental Satisfaction

Definition: Parent's statements of pride in what he or she is able to do with the baby, what he has helped the baby achieve, and expressions of satisfaction and enjoyment about doing parenting with this baby. Talking about the parenting role has a flavor of positiveness or enjoyment.

1. Do this label and definition fit together with each other? Circle: Yes or No

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u>
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: Very much Somewhat A Little Not at All 4 3 2 1
Answer just once for the whole list by circling here: "Yes" or "No"		
Wanting a child more than other things	How much concern do I feel about..... None ----- A little ---- Moderate ---- High ---- Extreme	Very much Somewhat A Little Not at All 4 3 2 1

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Feeling a sense of accomplishment about becoming a parent	<u>How much concern do I feel about.....</u> None ----- A little ----- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Feeling invested enough in parenthood	<u>How much concern do I feel about.....</u> None ----- A little ----- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Living up to my desire to be a parent	<u>How much concern do I feel about.....</u> None ----- A little ----- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Feeling invested enough in parenthood	<u>How much concern do I feel about.....</u> None ----- A little ----- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
(Skip)		

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Parenting to me, so far, is:	Choose a numerical rating closest to your opinion Ways to develop 1 2 3 4 5 Things which prevent my development as a parent	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
	Opportunities I 1 2 3 4 5 Something which I dread look forward to and enjoy	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
	Something I am 1 2 3 4 5 Something I am satisfied about disappointed about	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
	A rewarding 1 2 3 4 5 An impossible challenge challenge	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

4. Are there other items that you think should be included in this set?
(List your ideas below)

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]
Content Validity - PPS (Postpartum Parenting Scale) Set 2.17

Set # 2.17

The label and definition for this set of items:Label for this set: Redefinition of RelationshipsDefinition: Changes in the parent's intimate affiliation with his or her partner. Thinking about or making changes in associations with extended family members in order to prioritize the nuclear family's ability to integrate one more person into a family unit that will meet the needs of all persons.**1. Do this label and definition fit together with each other? Circle: Yes or No**

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Answer just once for the whole list by circling here: "Yes" or "No"		
Effect of baby on relationship with partner	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
How the baby's needs affect sex life	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Effect of baby on relationship with partner.	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Enough energy to have sex after getting up with the baby at night.	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

<u>List of Items</u> 2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: Very much Somewhat A Little Not at All 4 3 2 1
My partner and I share household responsibilities.	Agreement: SD=Strongly Disagree, D=Disagree, N=Neutral, A=Agree, SA=Strongly Agree	Very much Somewhat A Little Not at All 4 3 2 1

4. Are there other items that you think should be included in this set?
(List your ideas below)

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.18

The label and definition for this set of items:

Label for this set: Changing Daily Life Routines

Definition: Alterations and adjustments in everyday schedule and activities of the parent in order to accommodate the new baby's needs and a changed family role configuration. Parents have to consider their habitual activities and perhaps change their priorities to adapt to the needs of the reconfigured family unit.

1. Do this label and definition fit together with each other? Circle: Yes or No

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Answer just once for the whole list by circling here: "Yes" or "No"		
Giving up the little things I am used to having for the baby	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Changing housekeeping practices for the baby's safety	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Restrictions on my freedom to pick up and go as I used to do	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Working out a routine to fit the baby and me	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
The schedules being different at home with a baby	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Changes in sleeping and eating habits	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

4. Are there other items that you think should be included in this set?
(List your ideas below)

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.19

The label and definition for this set of items:

Label for this set: Changing Self Definition

Definition: A mental process of considering one's basic adult characteristics, and/or those of the partner, and expanding them to include more characteristics and qualities such as those of a parent.

1. Do this label and definition fit together with each other? Circle: Yes or No

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: Very much 4 Somewhat 3 A Little 2 Not at All 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Answer just once for the whole list by circling here: "Yes" or "No"		
Family responsibility	How much concern do I feel about..... None ----- A little ----- Moderate ----- High ----- Extreme	Very much 4 Somewhat 3 A Little 2 Not at All 1
Uncertainty about feeling very parent-like	How much concern do I feel about..... None ----- A little ----- Moderate ----- High ----- Extreme	Very much 4 Somewhat 3 A Little 2 Not at All 1
Whether I am mature enough to be a parent	How much concern do I feel about..... None ----- A little ----- Moderate ----- High ----- Extreme	Very much 4 Somewhat 3 A Little 2 Not at All 1
Whether I have the personality necessary to care for a child	How much concern do I feel about..... None ----- A little ----- Moderate ----- High ----- Extreme	Very much 4 Somewhat 3 A Little 2 Not at All 1

<u>List of Items</u> 2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: Very much Somewhat A Little Not at All 4 3 2 1
Changing into a parent	<u>How much concern do I feel about.....</u> None ----- A little ----- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1

4. Are there other items that you think should be included in this set?
(List your ideas below)

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.20

The label and definition for this set of items:

Label for this set: Informed Caregiving

Definition: An outcome of the successful parent problem-solving process. The parent makes factual statements about what the baby needs and seem to really know his or her baby. The baby's needs get met by purposeful caring behaviors; and parents are able to forecast baby's needs and adjust to changes in the baby while being protective of the baby's well-being. Developmentally enhancing parental behaviors.

1. Do this label and definition fit together with each other? Circle: Yes or No

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: Very much Somewhat A Little Not at All 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Answer just once for the whole list by circling here: "Yes" or "No"		
Choosing what is best for the baby	How much concern do I feel about..... None ----- A little ----- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1
Knowing what my baby expects of me	How much concern do I feel about..... None ----- A little ----- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1
Knowing what is good, or not good, for the child	How much concern do I feel about..... None ----- A little ----- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Having a beneficial influence on my child	<u>How much concern do I feel about.....</u> None ----- A little ----- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Molding this new person	<u>How much concern do I feel about.....</u> None ----- A little ----- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Handling the baby safely	<u>How much concern do I feel about.....</u> None ----- A little ----- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Deciding when to respond to baby's cries	<u>How much concern do I feel about.....</u> None ----- A little ----- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

4. Are there other items that you think should be included in this set?
(List your ideas below)

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.21

The label and definition for this set of items:

Label for this set: Parenting Actions

Definition: The strategies the parent tries to meet the baby's needs.

1. Do this label and definition fit together with each other? Circle: Yes or No

List of Items	The Way Item Will Be Answered	Fit of Each Item
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: Very much 4 Somewhat 3 A Little 2 Not at All 1
Answer just once for the whole list by circling here: "Yes" or "No"		
Knowing what to do for the baby	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	Very much 4 Somewhat 3 A Little 2 Not at All 1
Whether to try to get the baby into a schedule	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	Very much 4 Somewhat 3 A Little 2 Not at All 1
4. Are there other items that you think should be included in this set? (List your ideas below)		

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.22.

The label and definition for this set of items:

Label for this set: Negotiating Parental Decisions

Definition: A mental and behavioral process of considering current and future issues about mother's and/or father's parent roles and attempting to make choices that are mutually satisfactory.

1. Do this label and definition fit together with each other? Circle: Yes or No

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Answer just once for the whole list by circling here: "Yes" or "No"		
Conflicting expectations of time to be spent with baby	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Deciding who has to get up with the baby at night	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Deciding how much money to spend on baby	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

4. Are there other items that you think should be included in this set?

(List your ideas below)

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.23

The label and definition for this set of items:

Label for this set: Previous Child Experience

Definition: Remembering his or her experiences with children either as an adult or when a child him/herself. This occurs in the early weeks after birth. It serves as a guide in deciding how to act as a parent now with one's own baby.

1. Do this label and definition fit together with each other? Circle: Yes or No

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: Very much Somewhat A Little Not at All 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Answer just once for the whole list by circling here: "Yes" or "No"		
Whether I have had any practice caring for children before this baby	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1
Remembering my babysitting experience and applying it in caring for my child	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1

4. Are there other items that you think should be included in this set? (List your ideas below)

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.24

The label and definition for this set of items:

Label for this set: Expected Baby

Definition: Remembrances in the early postpartum weeks about what the parent had imagined or expected the baby would be like, either in appearance or in how the baby acts.

1. Do this label and definition fit together with each other? Circle: Yes or No

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Answer just once for the whole list by circling here: "Yes" or "No"		
Baby's sex being different from expected	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
The kind of personality the baby will have	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
The baby as a real person	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
The baby is like what I expected	Agreement: SD=Strongly Disagree, D=Disagree, N=Neutral, A=Agree, SA=Strongly Agree	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

4. Are there other items that you think should be included in this set?
(List your ideas below)

5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.25

The label and definition for this set of items:

Label for this set: Well-Being of Baby in Labor

Definition: Remembering what it was like to be worried about the baby during labor and birth.

1. Do this label and definition fit together with each other? Circle: Yes or No

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: Very much Somewhat A Little Not at All 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Answer just once for the whole list by circling here: "Yes" or "No"		
Wondering if I could cope with any difficulties with the baby's health	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1
Worry over the baby's well-being during labor	How much concern do I feel about..... None ----- A little ---- Moderate ----- High ----- Extreme	Very much Somewhat A Little Not at All 4 3 2 1
Remembering worries about the baby's heartbeat during labor	Frequency: Rarely <-----> Always Never---Almost never---Sometimes---Often---Almost all the time	Very much Somewhat A Little Not at All 4 3 2 1
I think about how labor & delivery may have affected my baby's health.	Agreement: SD=Strongly Disagree, D=Disagree, N=Neutral, A=Agree, SA=Strongly Agree	Very much Somewhat A Little Not at All 4 3 2 1

4. Are there other items that you think should be included in this set?
(List your ideas below)
5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Content Validity - PPS (Postpartum Parenting Scale) Set 2.26

The label and definition for this set of items:

Label for this set: Revisiting the Pregnancy

Definition: Thinking about and remembering aspects of the pregnancy experience soon after birth. This category included any worries about the baby's or mother's safety or well-being during pregnancy.

1. Do this label and definition fit together with each other? Circle: Yes or No

<u>List of Items</u>	<u>The Way Item Will Be Answered</u>	<u>Fit of Each Item</u> 3. Taken one at a time, to what degree does each item belong (or fit) with the label and definition of this set? Circle one of the numbered responses for each item: <u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
2. Read all the set's items in this column. Do all of them, in general, belong together with this label and definition?		
Answer just once for the whole list by circling here: "Yes" or "No"		
Remembering how I felt about the weight gain during pregnancy	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
Feeling too large in the bust during pregnancy	<u>How much concern do I feel about.....</u> None ----- A little ---- Moderate ----- High ----- Extreme	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1
I was worried about recognizing the signs of labor during my pregnancy	<u>Agreement:</u> SD=Strongly Disagree, D=Disagree, N=Neutral, A=Agree, SA=Strongly Agree	<u>Very much</u> <u>Somewhat</u> <u>A Little</u> <u>Not at All</u> 4 3 2 1

4. Are there other items that you think should be included in this set?
(List your ideas below)
5. Do any of the items duplicate each other's ideas? [Draw line(s) connecting the ones that are duplicates]

Please rank order the sentences/phrases below according to what you think happened to you first, second, third, fourth, etc. after you had your baby.

- ___ I am usually satisfied with how I solve my baby's problems.
- ___ Sometimes I speak for the baby so that I can explain how the baby feels.
- ___ I notice how the baby behaves.
- ___ I compare my baby's behavior with my own and with the behaviors of other family members.
- ___ I tell others about the labor and delivery experience
- ___ I can anticipate my baby's caregiving needs.
- ___ I have come to terms with my labor and delivery experience, including my behavior, and others' behaviors during the birth process.

Please rank order the sentences below according to what you think is necessary for a parent to be successful in giving care to the baby. First will be the least successful, second will be moving toward success but still not successful yet, third will be more successful, etc.

You may want to reflect back on what happened to you in the early day and weeks after the baby was born and rank order the sentences according to what happened to you as you learned what to do.

- ___ Noticing that the baby's responses to my actions tell me that I'm doing the right thing.
- ___ Noticing that my baby's behavior is similar to other family members.
- ___ Noticing the way my baby acts to anticipate what he/she will need soon.
- ___ Noticing that my baby's behavior changes from time to time.
- ___ Noticing that the way my baby acts helps me understand how the baby feels.

Appendix F

Clarity Questionnaire Results

Item #	Text	n	% Clear	Decision Made	Response Format (%)	Format Decision
PPBC14	I am worried when my baby cries.	4	100	Retained	F(50) C(50)	F
AT170/ 336LSP	Whether the labor support person did well coaching labor.	3	75	Rewritten	C(50)	C
T36FA	Whether I alone will have to support the baby.	4	100	Retained	C(100)	C
T01HA	Enough space in house for raising my baby.	4	100	Retained	C(75)	C
T89OA	Balancing my job and home responsibilities.	4	100	Retained	C(100)	C
PPPSE8	I expected to be more satisfied with parenting.	4	100	Retained	A(50)	A
PPHCG1	Trusting this doctor or midwife.	4	100	Retained	C(75)	C
PPBS1	A baby's behavior tells what his/her needs are.	4	100	Retained	A(50) F(50)	A
PPBC15	I am frantic when my baby cries.	4	100	Retained	F(50)	F
PPHCG3	Doctor/midwife was a source of emotional support.	4	100	Retained	A(75)	A
PPPSE6	I trust my own strategies to solving my baby's problems.	4	100	Retained	A(50) F(50)	A
PPBC1	My baby cries for reasons I don't understand.	4	100	Retained	F(75)	C
PPPSE1	My baby makes me feel like I do a good job as a parent.	4	100	Edited by researchers, split in two	F(50)	C & A
AT100C WL	The need for technical or medical interventions in labor.	2	50	Rewritten	C(75)	C
PPBC18	My baby cries when he/she is tired or hungry.	4	100	Retained	F(50)	A
AT160H CG	Understanding what my birth attendant explained to me.	2	50	Rewritten	C(50)	C

Item #	Text	n	% Clear	Decision Made	Response Format (%)	Format Decision
PPBC21	I worry how much my baby's crying bothers my partner.	4	100	Retained	C(100)	C
T99OA	Whether the job(s) of the wage earner(s) in my family are adequate to my family's new needs.	4	100	Retained	C(100)	C
PPLR2	I talk about the labor & delivery experience.	4	100	Retained	F(100)	F
AT252C WL	Standing labor without medication.	3	75	Rewritten	C(50)	C
PPBC19	My baby's crying amuses me.	3	75	Retained	F(50)	F
PPNB2	I recognize my own feelings and responses in my baby's behaviors.	2	50	Rewritten	F(50)	F
PPPSE2	My baby makes me feel like my partner is a good parent.	4	100	Edited by researchers, split in two	A(100)	A & C
PPPRF2	I think my baby's signals form consistent patterns.	3	75	Rewritten	A(75)	A
PPEB2	I imagine what my baby feels like in certain situations.	4	100	Retained	A(75)	A
PPBC2	My baby cries to irritate me.	4	100	Retained	A(100)	A
PPHCG4	Labor nurse provided helpful assistance in labor.	4	100	Retained	A(100)	A
PPBC20	My baby's crying does not affect me.	4	100	Retained	A(50) F(50)	A
T161HA	My home being convenient for raising a baby.	3	75	Rewritten	A(50) C(50)	C
PPBS2	A baby's personality can be seen in his/her behavior.	4	100	Retained	A(100)	A
PPPSE3	Others are critical of my parenting.	4	100	Retained	C(50)	C
T166FA	Having a steady income.	4	100	Retained	C(75)	C
PPBC4	My baby cries for attention.	4	100	Retained	A(50) F(50)	A
PPHCG5	Mother-Baby nurse was a source of emotional support.	3	75	Rewritten	A(75)	A

Item #	Text	n	% Clear	Decision Made	Response Format (%)	Format Decision
T97FA	Whether there is enough money to buy anything more than the basics.	4	100	Retained	C(75)	C
PPBS4	My baby's behavior changes from time to time.	4	100	Retained	F(50) C(50)	F
T87HA	Whether my home is adequate for a child's needs.	4	100	Retained	C(75)	C
PPBC10	Crying is part of babyhood.	4	100	Retained	A(75)	A
PPPSE9	I feel like a parent now.	4	100	Retained	A(75)	A
AT135F A	Where income would come from if I or my partner is laid off.	4	100	Retained	F(50) C(50)	C
PPHCG6	Baby nurse in clinic is a source of emotional support to my parenting efforts.	4	100	Retained	A(50) C(50)	A
PPBC3	My baby cries because I don't do the right things.	4	100	Edited by researchers, split in two	A(50)	A & C
PPLR3	I think about how labor & delivery may have affected my baby's health.	4	100	Retained	A(75)	A
PPEB4	I speak for my baby to express his/her experiences and feelings.	1	25	Rewritten	F (50)	A
AT46HC G	Whether my nurses understood what I was afraid of.	4	100	Edited by researchers	C(75)	A
T184FA	Enough financial security to comfortably raise a family.	4	100	Retained	F(50) C(50)	C
PPBC5	My baby cries because he/she is spoiled.	4	100	Retained	A(75)	A
AT51HC G	Whether I should have trusted my birth attendant.	4	100	Edited by researchers	C(75)	A
T144OA	Whether I need a better job.	4	100	Retained	C(75)	C
PPBS5	I know my baby's personality.	4	100	Retained	A(50)	A
PPOA1	Needing the type of stimulation that my job provides to me.	2	50	Rewritten	C(50)	C
PPBC17	My baby cries at the same time every day.	4	100	Retained	A(50) C(50)	A

Item #	Text	n	% Clear	Decision Made	Response Format (%)	Format Decision
T112HC G	Whether my doctor or has time to spend with me.	4	100	Rewritten	F(50) C(50)	C
PPBS3	My baby is like what I expected.	4	100	Retained	A(75)	A
PPLR4	I have come to terms with my pregnancy and labor experiences.	4	100	Retained	A(50)	A
PPNB3	My baby does little things that I do.	3	75	Retained	F(75)	A
T188OA	Whether I will want to stay with my job very long.	4	100	Retained	C(75)	C
PPBC6	My baby cries differently to signal specific needs.	4	100	Retained	A(50) C(50)	A
AT167H CG	My doctor or midwife getting upset with me in labor.	4	100	Retained	C(100)	C
PPPSE4	I am handling parental responsibilities.	4	100	Retained	A(50) C(50)	A
PPEB3	I understand why my baby acts the way he/she does.	4	100	Retained	F(50)	A
T326HA	A house that's big enough, at a reasonable cost.	2	50	Rewritten	C(100)	C
PPBC7	I recognize reasons for my baby's crying.	4	100	Retained	F(75)	A
T151HC G	Feeling stupid around my doctor or midwife.	4	100	Retained	C(75)	C
AT225O A	Whether my partner or I will need more training to stay on the job.	4	100	Retained	C(75)	C
PPPRF3	I use my past experience with my baby to predict how I should do things for my baby.	3	75	Edited by researchers, split in two	A(75)	A & F
T234OA	Whether my job is satisfying.	4	100	Retained	C(50)	C
PPBC16	I get desperate when my baby cries.	4	100	Retained	F(50)	F
PPNB4	I recognize other family members in my baby's behavior or responses.	3	75	Retained	A(50) F(50)	A
TR72HA	A home that is too small for the family.	4	100	Retained	C(75)	C

Item #	Text	n	% Clear	Decision Made	Response Format (%)	Format Decision
PPEB5	I feel connected and close to my baby when I am voicing his/her perspective.	3	75	Retained	F(50)	A
PPNB1	I compare my baby with myself.	4	100	Retained	A(50) F(50)	A
PPBC8	I am frustrated with my baby's crying.	4	100	Retained	F(75)	F
T308OA	Whether my job is more than just a source of income to me.	4	100	Retained	C(75)	C
PPEB1	I can imagine my baby's viewpoint.	4	100	Retained	A(50) F(50)	F
T324FA	Having enough savings put away.	4	100	Retained	C(100)	C
PPPRF1	I anticipate what my baby's needs are.	4	100	Retained	F(50)	F
AT226H CG	How well-prepared my doctor or midwife is for anything that might go wrong.	4	100	Retained	C(75)	C
PPBC9	I have a specific way I cope with my baby's crying.	4	100	Retained	A(50) F(50)	A
PPPRF5	I can tell what my baby likes and dislikes.	4	100	Retained	A(50)	F
PPPRF4	I don't see anything predictable about my baby's behaviors.	4	100	Retained	C(50)	A
PPPSE5	I was as prepared for parental responsibility as I should have been.	4	100	Retained	A(100)	A
AT250H CG	Whether my doctor or midwife discussed choices about birth with me.	3	75	Retained	C(75)	C
PPBC11	My baby's crying makes me feel ineffective as a parent.	4	100	Retained	A(50)	F
T183OA	Whether my job might change unexpectedly.	4	100	Retained	C(100)	C
PPBC13	I am concerned when my baby cries.	4	100	Retained	C(75)	A
T82CW L	Losing control of myself during labor.	3	75	Retained	C(75)	C
T37FA	Frustration over finances.	4	100	Retained	C(75)	C

Item #	Text	n	% Clear	Decision Made	Response Format (%)	Format Decision
AT177L SP	How we supported each other in labor.	1	25	Retained	C(75)	C
ATR292 HCG	Getting good explanations when I ask doctor or midwife about questions.	4	100	Retained	C(75)	C
PPBC12	I can predict when my baby will cry.	4	100	Retained	F(75)	F
PPLR1	I think about my labor & delivery experience.	4	100	Retained	F(100)	F
PPPSE7	I feel I can ask for help from others with my baby's problems.	4	100	Retained	F(50)	A
T57FA	Working more hours to improve the finances.	4	100	Retained	C(75)	C
AT271H CG	Whether my doctor or midwife understood my concerns.	3	75	Retained	A(50)	C
T334CW L	Coping with the unknowns in labor.	3	75	Retained	C(50)	C

Table G1. Baby Crying Subscale

Item Number	Text of Item	Internal Homogeneity					Content Validity				
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit			
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating	
Group of Items	Baby Crying Subscale	100%					100%				
PPBC1	My baby crying for reasons I don't understand.		4 ^a = 80 3 = 10 2 = 10 1 =	92.5	3.7			4 ^a = 80 3 = 10 2 = 1 = 10	90	3.6	
PPBC2	My baby cries to irritate me.		4 ^a = 70 3 = 30 2 = 1 =	92.5	3.7			4 ^a = 80 3 = 20 2 = 1 =	95	3.8	
PPBC3	The reasons my baby cries.		4 ^a = 80 3 = 20 2 = 1 =	95	3.8			4 ^a = 90 3 = 10 2 = 1 =	97.5	3.9	
PPBC4	My baby cries for attention.		4 ^a = 100 3 = 2 = 1 =	100	4.0			4 ^a = 90 3 = 10 2 = 1 =	97.5	3.9	
PPBC5	My baby cries because he is spoiled.		4 ^a = 80 3 = 2 = 20 1 =	90	3.6			4 ^a = 80 3 = 10 2 = 1 = 10	90	3.6	
PPBC6	My baby cries differently to signal specific needs.		4 ^a = 100 3 = 2 = 1 =	100	4.0			4 ^a = 100 3 = 2 = 1 =	100	4.0	

Item Number	Text of Item	Internal Homogeneity				Content Validity				
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit		
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating
PPBC7	I recognize reasons for my baby's crying.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 90 3 = 10 2 = 1 =	97.5	3.9
PPBC8	I am frustrated with my baby's crying.		4* = 80 3 = 10 2 = 10 1 =	92.5	3.7			4* = 100 3 = 2 = 1 =	100	4.0
PPBC9	I have a specific way I cope with my baby's crying.		4* = 80 3 = 10 2 = 1 = 10	90	3.6			4* = 70 3 = 30 2 = 1 =	92.5	3.7
PPBC10	Crying is part of babyhood.		4* = 60 3 = 30 2 = 10 1 =	87.5	3.5			4* = 70 3 = 10 2 = 20 1 =	87.5	3.5
PPBC11	My baby's crying makes me feel ineffective as a parent.		4* = 70 3 = 30 2 = 1 =	92.5	3.7			4* = 90 3 = 2 = 10 1 =	95	3.8
PPBC12	I can predict when my baby will cry.		4* = 80 3 = 20 2 = 1 =	95	3.8			4* = 90 3 = 2 = 10 1 =	95	3.8
PPBC13	I am concerned when my baby cries.		4* = 90 3 = 10 2 = 1 =	97.5	3.9			4* = 80 3 = 20 2 = 1 =	95	3.8

Item Number	Text of Item	Internal Homogeneity				Content Validity				
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit		
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating
PPBC14	I am worried when my baby cries.		4* = 80 3 = 20 2 = 1 =	95	3.8			4 = 100 3 = 2 = 1 =	100	4.0
PPBC15	I am frantic when my baby cries.		4* = 80 3 = 10 2 = 10 1 =	92.5	3.7			4* = 100 3 = 2 = 1 =	100	4.0
PPBC16	I get desperate when my baby cries.		4* = 80 3 = 10 2 = 10 1 =	92.5	3.7			4* = 100 3 = 2 = 1 =	100	4.0
PPBC17	My baby cries at the same time every day.		4* = 80 3 = 20 2 = 1 =	95	3.8			4* = 100 3 = 2 = 1 =	100	4.0
PPBC18	My baby cries when he is tired or hungry.		4* = 90 3 = 10 2 = 1 =	97.5	3.9			4* = 90 3 = 10 2 = 1 =	97.5	3.9
PPBC19	My baby's crying amuses me.		4* = 60 3 = 30 2 = 10 1 =	87.5	3.5			4* = 80 3 = 10 2 = 1 = 10	90	3.6
PPBC20	My baby's crying does not affect me.		4* = 80 3 = 10 2 = 1 = 10	90	3.6			4* = 70 3 = 30 2 = 1 =	92.5	3.7

Item Number	Text of Item	Internal Homogeneity			Content Validity			
		Ratings of Group Homogeneity	Ratings of Item to Group Fit		Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit	
			Response Scale and Percent	Mean Item Percent			C.V.I.	Item Mean Rating
PPBC21	How much my baby's crying bothers my partner.		4* = 70 3 = 20 2 = 10 1 =	90	3.6		4* = 80 3 = 20 2 = 1 =	95 3.8

* 4 very much, 3 somewhat, 2 a little, 1 not at all

Table G2. Labor Review Subscale

Item Number	Text of Item	Internal Homogeneity				Content Validity					
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit			
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating	
Group of Items	Labor Review Subscale	100%				100%	100%				
T82CW L	Losing control of myself during labor.		4* = 90 3 = 10 2 = 1 =	97.5	3.9			4* = 90 3 = 10 2 = 1 =	97.5		3.9
AT100C WL	The need for medical interventions in labor		4* = 90 3 = 10 2 = 1 =	97.5	3.9			4* = 100 3 = 2 = 1 =	100		4.0
AT252C WL	Going through labor without medication.		4* = 90 3 = 10 2 = 1 =	97.5	3.9			4* = 100 3 = 2 = 1 =	100		4.0
T334CW L	Coping with the unknowns in labor.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 90 3 = 2 = 10 1 =	95		3.8
PPLR1	I think about my labor & delivery experience.		4* = 90 3 = 2 = 10 1 =	95	3.8			4* = 90 3 = 10 2 = 1 =	97.5		3.9
PPLR2	I talk about the labor & delivery experience.		4* = 80 3 = 10 2 = 10 1 =	92.5	3.7			4* = 80 3 = 20 2 = 1 =	95		3.8

Item Number	Text of Item	Internal Homogeneity				Content Validity				
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit		
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating
PPLR4	I have come to terms with my pregnancy and labor experiences.		4* = 80 3 = 10 2 = 10 1 =	92.5	3.7			4* = 80 3 = 20 2 = 1 =	95	3.8
PPLR5	Whether the labor and delivery experience were like what I expected.		4* = 90 3 = 2 = 10 1 =	95	3.8			4* = 80 3 = 20 2 = 1 =	95	3.8

* 4 very much, 3 somewhat, 2 a little, 1 not at all

Table G3. Health Caregiver Relationship/Supportiveness Subscale

Item Number	Text of Item	Internal Homogeneity			Content Validity			
		Ratings of Group Homogeneity	Ratings of Item to Group Fit		Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit	
			Response Scale and Percent	Mean Item Percent			C.V.I.	Mean Item Percent Item Mean Rating
Group of Items	Health Caregiver Relationship/Supportiveness Subscale	100%			100%	100%		
AT46HC G	My nurses understood what I was afraid of.		4* = 90 3 = 10 2 = 1 =	97.5	3.9		4* = 100 3 = 2 = 1 =	100 4.0
AT51HC G	I trusted my provider.		4* = 90 3 = 2 = 10 1 =	95	3.8		4* = 90 3 = 10 2 = 1 =	97.5 3.9
T112HC G	Whether my doctor or midwife had time to spend with me.		4* = 90 3 = 10 2 = 1 =	97.5	3.9		4* = 100 3 = 2 = 1 =	100 4.0
T151HC G	Feeling stupid around my doctor or midwife.		4* = 70 3 = 30 2 = 1 =	92.5	3.7		4* = 80 3 = 10 2 = 10 1 =	92.5 3.7
AT160H CG	Understanding what my provider explained to me.		4* = 100 3 = 2 = 1 =	100	4.0		4* = 100 3 = 2 = 1 =	100 4.0
AT167H CG	My doctor or midwife getting upset with me in labor.		4* = 70 3 = 20 2 = 10 1 =	90	3.6		4* = 80 3 = 10 2 = 10 1 =	92.5 3.7

Item Number	Text of Item	Internal Homogeneity				Content Validity				
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit		
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating
AT226H CG	How well-prepared my doctor or midwife was for anything that might have gone wrong.		4* = 90 3 = 2 = 10 1 =	95	3.8			4* = 90 3 = 10 2 = 1 =	97.5	3.9
AT250H CG	Whether my doctor or midwife discussed choices about birth with me.		4* = 90 3 = 2 = 10 1 =	95	3.8			4* = 90 3 = 10 2 = 1 =	97.5	3.9
AT271H CG	Whether my doctor or midwife understood my concerns.		4* = 90 3 = 10 2 = 1 =	97.5	3.9			4* = 100 3 = 2 = 1 =	100	4.0
ATR292 HCG	Getting good explanations when I ask doctor or midwife about questions.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0
PPHCG1	Trusting the doctor or midwife.		4* = 90 3 = 2 = 10 1 =	95	3.8			4* = 90 3 = 10 2 = 1 =	97.5	3.9
PPHCG3	Doctor/midwife was a source of emotional support.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0
PPHCG4	Labor nurse provided helpful assistance in labor.		4* = 90 3 = 2 = 10 1 =	95	3.8			4* = 90 3 = 10 2 = 1 =	97.5	3.9

Item Number	Text of Item	Internal Homogeneity				Content Validity				
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit		
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating
PPHCG5	Post-Partum nurse was a source of emotional support.		4* = 90 3 = 2 = 1 = 10	92.5	3.7			4* = 80 3 = 2 = 1 = 20	85	3.4
PPHCG6	Baby nurse in clinic is a source of emotional support to my parenting efforts.		4* = 70 3 = 2 = 20 1 = 10	82.5	3.3			4* = 70 3 = 2 = 1 = 30	77.5	3.1

* 4 very much, 3 somewhat, 2 a little, 1 not at all

Table G4. Empathizing with Baby Subscale

Item Number	Text of Item	Internal Homogeneity				Content Validity					
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit			
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating	
Group of Items	Empathizing with Baby Subscale	100%				100%	100%				
AT172E B	Being able to understand the baby's point of view.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0	
PPEB1	I can imagine my baby's viewpoint.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0	
PPEB2	I imagine what my baby feels like in certain situations.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0	
PPEB3	I understand why my baby acts the way he does.		4* = 90 3 = 10 2 = 1 =	97.5	3.9			4* = 80 3 = 20 2 = 1 =	95	3.8	
PPEB4	I can tell others what my baby is feeling or experiencing.		4* = 90 3 = 10 2 = 1 =	97.5	3.9			4* = 100 3 = 2 = 1 =	100	4.0	
PPEB5	I feel connected and close to my baby when I am voicing his perspective.		4* = 60 3 = 20 2 = 20 1 =	85	3.4			4* = 70 3 = 20 2 = 10 1 =	90	3.6	

* 4 very much, 3 somewhat, 2 a little, 1 not at all

Table G5. Personal Security Base Subscale

Item Number	Text of Item	Internal Homogeneity				Content Validity					
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit			
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating	
Group of Items	Personal Security Base Subscale	100%				100%	100%				
T97FA	Whether there is enough money to buy anything more than the basics.		4* = 90 3 = 10 2 = 1 =	97.5	3.9			4* = 90 3 = 10 2 = 1 =	97.5	3.9	
T166FA	Having a steady income.		4* = 90 3 = 10 2 = 1 =	97.5	3.9			4* = 100 3 = 2 = 1 =	100	4.0	
T184FA	Enough financial security to comfortably raise a family.		4* = 90 3 = 10 2 = 1 =	97.5	3.9			4* = 100 3 = 2 = 1 =	100	4.0	
T01HA	Enough space in home for raising my baby.		4* = 60 3 = 20 2 = 10 1 = 10	82.5	3.3			4* = 100 3 = 2 = 1 =	100	4.0	
T87HA	Whether my home is adequate for a child's needs.		4* = 60 3 = 20 2 = 10 1 = 10	82.5	3.3			4* = 100 3 = 2 = 1 =	100	4.0	
T99OA	Whether the job(s) of the wage earner(s) in my family are adequate to my family's new needs.		4* = 90 3 = 10 2 = 1 =	97.5	3.9			4* = 100 3 = 2 = 1 =	100	4.0	

Item Number	Text of Item	Internal Homogeneity				Content Validity			
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit	
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent Item Mean Rating
T183OA	Whether my job might change unexpectedly.		4* = 60 3 = 20 2 = 20 1 =	85	3.4			4* = 70 3 = 20 2 = 1 = 10	87.5 3.5
T234OA	Whether my job is satisfying.		4* = 20 3 = 10 2 = 50 1 = 20	57.5	2.3			4* = 20 3 = 40 2 = 10 1 = 30	62.5 2.5

* 4 very much, 3 somewhat, 2 a little, 1 not at all

Table G6. Partner Subscale

Item Number	Text of Item	Internal Homogeneity				Content Validity					
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit			
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating	
Group of Items	Partner Subscale	100%				100%	100%				
AT049PR	My partner and I are sensitive to each other's state of mind.		4* = 90 3 = 10 2 = 1 =	97.5	3.9			4* = 90 3 = 2 = 10 1 =	95		3.8
AT113PR	I have a good relationship with my partner.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 90 3 = 2 = 10 1 =	95		3.8
TI32PR	My partner being around to help parent the baby.		4* = 70 3 = 30 2 = 1 =	92.5	3.7			4* = 90 3 = 10 2 = 1 =	97.5		3.9
TI73PR	Whether my partner understands me.		4* = 90 3 = 10 2 = 1 =	97.5	3.9			4* = 90 3 = 2 = 10 1 =	95		3.8
T221PR	Sharing feelings with my partner.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 90 3 = 10 2 = 1 =	97.5		3.9
PPPR1	How the relationship with my partner is changing.		4* = 80 3 = 10 2 = 10 1 =	92.5	3.7			4* = 60 3 = 30 2 = 1 = 10	85		3.4

Item Number	Text of Item	Internal Homogeneity				Content Validity				
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit		
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating
PART1	A partner could be described as: helpful ---- not helpful		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0
PART2	concerned ---- not concerned		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0
PART3	available ---- not available		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0
PART4	willing ---- not willing		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0
PART5	caring ---- not caring		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0
PART6	supportive ---- not supportive		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0
PART7	encouraging ---- not encouraging		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0

* 4 very much, 3 somewhat, 2 a little, 1 not at all

Table G7. Parent Problem Solving Process Subscale

Item Number	Text of Item	Internal Homogeneity				Content Validity					
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit			
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating	
Group of Items	Parent Problem Solving Process Subscale	100%				100%	90%				
T33ILC S	Learning on-the-job how to care for child.		4 = 70 3 = 10 2 = 20 1 =	87.5	3.5			4 = 80 3 = 10 2 = 1 = 10	90		3.6
PPPPSP 1	I have to figure out why some things work and others don't with my baby.		4 = 70 3 = 30 2 = 1 =	92.5	3.7			4 = 90 3 = 10 2 = 1 =	97.5		3.9
PPPPSP 2	Parenting to me, so far, is: Something at which I get better over time vs. Something that doesn't get any easier		4 = 60 3 = 20 2 = 20 1 =	85	3.4			4 = 60 3 = 20 2 = 20 1 =	85		3.4

* 4 very much, 3 somewhat, 2 a little, 1 not at all

Table G9. Baby Signals Subscale

Item Number	Text of Item	Internal Homogeneity				Content Validity					
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit			
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating	
Group of Items	Baby Signals Subscale	90%				100%	100%				
PPBS1	A baby's behavior tells what his needs are.		4 = 80 3 = 20 2 = 1 =	95	3.8			4 = 100 3 = 2 = 1 =	100		4.0
PPBS2	A baby's personality can be seen in his behavior.		4 = 70 3 = 30 2 = 1 =	92.5	3.7			4 = 90 3 = 2 = 10 1 =	95		3.8
PPBS3	My baby is like what I expected.		4 = 20 3 = 50 2 = 10 1 = 20	67.5	2.7			4 = 10 3 = 20 2 = 60 1 = 10	57.5		2.3
PPBS4	My baby's behavior changes from time to time.		4 = 80 3 = 20 2 = 1 =	95	3.8			4 = 80 3 = 20 2 = 1 =	95		3.8
PPBS5	I know my baby's personality.		4 = 70 3 = 2 = 20 1 = 10	82.5	3.3			4 = 80 3 = 2 = 20 1 =	90		3.6

* 4 very much, 3 somewhat, 2 a little, 1 not at all

Table G10. Normalizing Baby Subscale

Item Number	Text of Item	Internal Homogeneity				Content Validity			
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit	
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent
Group of Items	Normalizing Baby Subscale	100%				90%	100%		
PPNB1	I compare my baby with myself.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100 4.0
PPNB2	I recognize some of my own traits in my baby's behavior.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 90 3 = 10 2 = 1 =	97.5 3.9
PPNB3	My baby does little things that I do.		4* = 90 3 = 10 2 = 1 =	97.5	3.9			4* = 100 3 = 2 = 1 =	100 4.0
PPNB4	I recognize other family members in my baby's behavior or responses.		4* = 90 3 = 10 2 = 1 =	97.5	3.9			4* = 100 3 = 2 = 1 =	100 4.0

* 4 very much, 3 somewhat, 2 a little, 1 not at all

Table G11. Pattern Recognition Subscale

Item Number	Text of Item	Internal Homogeneity			Content Validity			
		Ratings of Group Homogeneity	Ratings of Item to Group Fit		Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit	
			Response Scale and Percent	Mean Item Percent			C.V.I.	Mean Item Percent Item Mean Rating
Group of Items	Pattern Recognition Subscale	100%			100%	100%		
PPPRF1	I anticipate what my baby's needs are.		4* = 100 3 = 2 = 1 =	100			4* = 100 3 = 2 = 1 =	4.0
PPPRF2	My baby's signals indicate what he needs.		4* = 90 3 = 10 2 = 1 =	97.5			4* = 100 3 = 2 = 1 =	4.0
PPPRF3.1	I have figured out my baby's behavior patterns.		4* = 60 3 = 10 2 = 30 1 =	82.5			4* = 90 3 = 10 2 = 1 =	3.9
PPPRF3.2	I can predict what I should do for my baby.		4* = 100 3 = 2 = 1 =	100			4* = 100 3 = 2 = 1 =	4.0
PPPRF4	I don't see anything predictable about my baby's behaviors.		4* = 60 3 = 30 2 = 1 = 10	85			4* = 80 3 = 10 2 = 1 = 10	3.6
PPPRF5	I can tell what my baby likes and dislikes.		4* = 90 3 = 10 2 = 1 =	97.5			4* = 100 3 = 2 = 1 =	4.0

* 4 very much, 3 somewhat, 2 a little, 1 not at all

Table G12. Parent Self-Evaluation Subscale

Item Number	Text of Item	Internal Homogeneity				Content Validity			
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit	
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent Item Mean Rating
Group of Items	Parent Self-Evaluation Subscale	70%				90%	80%		
PPPSE1.1	How my baby makes me feel.		4* = 30 3 = 40 2 = 10 1 = 20	70	2.8			4* = 60 3 = 20 2 = 10 1 = 10	82.5 3.3
PPPSE1.2	I do a good job as a parent.		4* = 80 3 = 10 2 = 10 1 =	92.5	3.7			4* = 90 3 = 10 2 = 1 =	97.5 3.9
PPPSE2.1	How my baby responds to my partner.		4* = 20 3 = 60 2 = 1 = 20	70	2.8			4* = 80 3 = 10 2 = 10 1 =	92.5 3.7
PPPSE2.2	My partner is a good parent.		4* = 50 3 = 30 2 = 1 = 20	77.5	3.1			4* = 80 3 = 10 2 = 1 = 10	90 3.6
PPPSE3	Others criticizing my parenting.		4* = 50 3 = 20 2 = 10 1 = 20	75	3.0			4* = 80 3 = 10 2 = 10 1 =	92.5 3.7
PPPSE4	I am handling parental responsibilities.		4* = 90 3 = 2 = 10 1 =	95	3.8			4* = 100 3 = 2 = 1 =	100 4.0

Item Number	Text of Item	Internal Homogeneity			Content Validity			
		Ratings of Group Homogeneity	Ratings of Item to Group Fit		Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit	
			Response Scale and Percent	Mean Item Percent			C.V.I.	Item Mean Rating
PPPSE5	I was as prepared for parental responsibility as I should have been.		4* = 80 3 = 2 = 20 1 =	90	3.6		4* = 90 3 = 10 2 = 1 =	97.5 3.9
PPPSE6	I trust my own strategies to solve my baby's problems.		4* = 70 3 = 20 2 = 1 = 10	87.5	3.5		4* = 90 3 = 10 2 = 1 =	97.5 3.9
PPPSE7	I feel I can ask for help from others with my baby's problems.		4* = 70 3 = 10 2 = 1 = 20	82.5	3.3		4* = 80 3 = 2 = 20 1 =	90 3.6
PPPSE8	I expected to be more satisfied with parenting.		4* = 60 3 = 30 2 = 1 = 10	85	3.4		4* = 60 3 = 20 2 = 10 1 = 10	82.5 3.3
PPPSE9	I feel like a parent now.		4* = 70 3 = 20 2 = 1 = 10	87.5	3.5		4* = 70 3 = 30 2 = 1 =	92.5 3.7
PPPSE10	I don't do the right things for the baby.		4* = 70 3 = 10 2 = 20 1 =	87.5	3.5		4* = 100 3 = 2 = 1 =	100 4.0

* 4 very much, 3 somewhat, 2 a little, 1 not at all

Item Number	Text of Item	Internal Homogeneity				Content Validity				
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit		
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating
PPRI4	The information I get about the baby is useful.		4* = 90 3 = 10 2 = 1 =	97.5	3.9			4* = 100 3 = 2 = 1 =	100	4.0
PPRI5	I wish I had someone to answer my questions about the baby.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 90 3 = 10 2 = 1 =	97.5	3.9
PPRI6	I would like someone to talk to about parenting.		4* = 80 3 = 20 2 = 1 =	95	3.8			4* = 90 3 = 10 2 = 1 =	97.5	3.9

^a 4 very much, 3 somewhat, 2 a little, 1 not at all

Table G14. Family Support Subscale

Item Number	Text of Item	Internal Homogeneity				Content Validity			
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit	
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent Item Mean Rating
Group of Items	Family Support Subscale	100%				100%	90%		
T96SSR	Our relatives helping us get baby supplies.		4* = 70 3 = 2 = 30 1 =	85	3.4			4* = 70 3 = 20 2 = 1 = 10	87.5 3.5
AT219S SR	What happens when my relatives' advice conflicts with my opinion concerning the baby.		4* = 80 3 = 10 2 = 10 1 =	92.5	3.7			4* = 80 3 = 20 2 = 1 =	95 3.8
PPFAM S1	Family members may be described as: helpful ---- not helpful		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100 4.0
PPFAM S2	concerned ---- not concerned		4* = 100 3 = 2 = 1 =	100	4.0			4* = 90 3 = 10 2 = 1 =	97.5 3.9
PPFAM S3	available ---- not available		4* = 100 3 = 2 = 1 =	100	4.0			4* = 90 3 = 10 2 = 1 =	97.5 3.9
PPFAM S4	willing ---- not willing		4* = 100 3 = 2 = 1 =	100	4.0			4* = 90 3 = 10 2 = 1 =	97.5 3.9

Item Number	Text of Item	Internal Homogeneity				Content Validity				
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit		
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating
PPFAM S5	caring ---- not caring		4* = 100 3 = 2 = 1 =	100	4.0			4* = 90 3 = 10 2 = 1 =	97.5	3.9
PPFAM S6	supportive ---- not supportive		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0
PPFAM S7	approving ---- not approving		4* = 100 3 = 2 = 1 =	100	4.0			4* = 90 3 = 10 2 = 1 =	97.5	3.9

* 4 very much, 3 somewhat, 2 a little, 1 not at all

Table G15. Friend Support Subscale

Item Number	Text of Item	Internal Homogeneity					Content Validity				
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit			
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating	
Group of Items	Friend Support Subscale	100%					100%				
T81SSF	Being able to count on friends when no family is around.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100		4.0
T105SS F	Having a friend who realizes when I need to talk about something.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100		4.0
T174SS F	Sharing with other friends who are going through the same thing.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 90 3 = 10 2 = 1 =	97.5		3.9
PPFRS1	My friends may be described as: helpful ---- not helpful		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100		4.0
PPFRS2	concerned ---- not concerned		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100		4.0
PPFRS3	available ---- not available		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100		4.0

Item Number	Text of Item	Internal Homogeneity				Content Validity				
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit		
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating
PPFRS4	willing ---- not willing		4* = 90 3 = 10 2 = 1 =	97.5	3.9			4* = 100 3 = 2 = 1 =	100	4.0
PPFRS5	caring ---- not caring		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0
PPFRS6	supportive ---- not supportive		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0
PPFRS7	interested ---- not interested		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0
PPFRS8	understanding ---- not understanding		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0
PPFRS9	Needing contact with others outside of my home.		4* = 70 3 = 30 2 = 1 =	92.5	3.7			4* = 70 3 = 20 2 = 10 1 =	90	3.6

* 4 very much, 3 somewhat, 2 a little, 1 not at all

Table G16. Parental Satisfaction Subscale

Item Number	Text of Item	Internal Homogeneity				Content Validity					
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit			
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C. V. I.	Mean Item Percent	Item Mean Rating	
Group of Items	Parental Satisfaction Subscale	90%				100%	90%				
AT04D BP	Wanting a child more than other things.		4* = 40 3 = 30 2 = 20 1 = 10	75	3.0			4* = 20 3 = 30 2 = 30 1 = 20	62.5	2.5	
AT06D BP	Feeling a sense of accomplishment about becoming a parent.		4* = 80 3 = 10 2 = 10 1 =	92.5	3.7			4* = 90 3 = 2 = 1 = 10	92.5	3.7	
AT216D BP	Feeling invested enough in parenthood.		4* = 80 3 = 10 2 = 10 1 =	92.5	3.7			4* = 70 3 = 20 2 = 10 1 =	90	3.6	
AT303D BP	Living up to my desire to be a parent.		4* = 90 3 = 10 2 = 1 =	97.5	3.9			4* = 80 3 = 10 2 = 10 1 =	92.5	3.7	
AT317D BP	Feeling invested enough in parenthood.		4* = 90 3 = 2 = 10 1 =	95	3.8			4* = 80 3 = 10 2 = 10 1 =	92.5	3.7	
PPPSAT 1	Parenting to me, so far is: Ways to develop myself as a parent vs. Things which prevent my development as a parent.		4* = 90 3 = 10 2 = 1 =	97.5	3.9			4* = 80 3 = 10 2 = 10 1 =	92.5	3.7	

Item Number	Text of Item	Internal Homogeneity				Content Validity				
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit		
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating
PPPSAT 2	Opportunities I look forward to and enjoy vs. Something which I dread.		4+ = 60 3 = 30 2 = 10 1 =	87.5	3.5			4+ = 90 3 = 10 2 = 1 =	97.5	3.9
PPPSAT 3	Something I am satisfied about vs. Something I am disappointed about.		4+ = 70 3 = 20 2 = 10 1 =	90	3.6			4+ = 90 3 = 2 = 10 1 =	95	3.8
PPPSAT 4	A rewarding challenge vs. An impossible challenge.		4+ = 70 3 = 20 2 = 10 1 =	90	3.6			4+ = 90 3 = 2 = 10 1 =	95	3.8

* 4 very much, 3 somewhat, 2 a little, 1 not at all

Table G17. Redefinition of Relationships Subscale

Item Number	Text of Item	Internal Homogeneity			Content Validity			
		Ratings of Group Homogeneity	Ratings of Item to Group Fit		Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit	
			Response Scale and Percent	Mean Item Percent			C.V.I.	Item Mean Rating
Group of Items	Redefinition of Relationships Subscale	100%			90%	90%		
ATR14 ARF	Effect of baby on relationship with partner.		4* = 100 3 = 2 = 1 =	100	4.0		4* = 100 3 = 2 = 1 =	4.0
T014PR	Effect of baby on relationship with partner.		4* = 100 3 = 2 = 1 =	100	4.0		4* = 100 3 = 2 = 1 =	4.0
ATR126 ARF	How the baby's needs affect sex life.		4* = 100 3 = 2 = 1 =	100	4.0		4* = 90 3 = 10 2 = 1 =	3.9
T312PR	Enough energy to have sex after getting up with the baby at night.		4* = 90 3 = 10 2 = 1 =	97.5	3.9		4* = 80 3 = 20 2 = 1 =	3.8
RFAM1	My partner and I share household responsibilities.		4* = 30 3 = 40 2 = 20 1 = 10	72.5	2.9		4* = 40 3 = 10 2 = 30 1 = 20	2.7

* 4 very much, 3 somewhat, 2 a little, 1 not at all

Table G18. Changing Daily Life Routines Subscale

Item Number	Text of Item	Internal Homogeneity				Content Validity					
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit			
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating	
Group of Items	Changing Daily Life Routines Subscale	100%				100%	100%				
AT22C DLR	Giving up the little thing I am used to having for the baby		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0	
AT27C DLR	Changing housekeeping practices for the baby's safety		4* = 80 3 = 2 = 20 1 =	90	3.6			4* = 90 3 = 2 = 10 1 =	95	3.8	
AT101C DLR	Restrictions on my freedom to pick up and go as I used to do.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0	
AT191C DLR	Working out a routine to fit the baby and me.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0	
AT298C DLR	The schedules being different at home with a baby.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0	
AT309C DLR	Changes in sleeping and eating habits.		4* = 80 3 = 10 2 = 10 1 =	92.5	3.7			4* = 100 3 = 2 = 1 =	100	4.0	

* 4 very much, 3 somewhat, 2 a little, 1 not at all

Table G19. Changing Self-Definition Subscale

Item Number	Text of Item	Internal Homogeneity					Content Validity				
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit			
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating	
Group of Items	Changing Self-Definition Subscale	100%					90%	90%			
AT114C SD	Family responsibility.		4* = 30 3 = 50 2 = 20 1 =	77.5	3.1				4* = 60 3 = 20 2 = 20 1 =	85	3.4
AT133C SD	Uncertainty about feeling very parent-like.		4* = 90 3 = 10 2 = 1 =	97.5	3.9				4* = 80 3 = 10 2 = 10 1 =	92.5	3.7
AT143C SD	Whether I am mature enough to be a parent.		4* = 100 3 = 2 = 1 =	100	4.0				4* = 90 3 = 2 = 10 1 =	95	3.8
AT239C SD	Whether I have the personality necessary to care for a child.		4* = 90 3 = 10 2 = 1 =	97.5	3.9				4* = 90 3 = 2 = 10 1 =	95	3.8
AT332C SD	Changing into a parent.		4* = 90 3 = 10 2 = 1 =	97.5	3.9				4* = 90 3 = 2 = 10 1 =	95	3.8

* 4 very much, 3 somewhat, 2 a little, 1 not at all

Table G20. Informed Caregiving Subscale

Item Number	Text of Item	Internal Homogeneity				Content Validity					
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit			
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating	
Group of Items	Informed Caregiving Subscale	90%				100%	100%				
AT58LC S	Choosing what is best for the baby.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0	
AT107L CS	Knowing what my baby expects of me.		4* = 50 3 = 20 2 = 30 1 =	80	3.2			4* = 80 3 = 20 2 = 1 =	95	3.8	
AT233L CS	Knowing what is good, or not good, for the child.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100	4.0	
AT262L CS	Having a beneficial influence on my child.		4* = 70 3 = 20 2 = 10 1 =	90	3.6			4* = 80 3 = 2 = 10 1 = 10	87.5	3.5	
AT268L CS	Molding this new person.		4* = 60 3 = 20 2 = 20 1 =	85	3.4			4* = 60 3 = 10 2 = 20 1 = 10	80	3.2	
AT287L CS	Handling the baby safely.		4* = 60 3 = 20 2 = 20 1 =	85	3.4			4* = 70 3 = 10 2 = 10 1 = 10	85	3.4	

Item Number	Text of Item	Internal Homogeneity				Content Validity				
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit		
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating
AT294L CS	Deciding when to respond to baby's cries.		4* = 60 3 = 20 2 = 20 1 =	85	3.4			4* = 90 3 = 10 2 = 1 =	97.5	3.9

* 4 very much, 3 somewhat, 2 a little, 1 not at all

Table G21. Parenting Actions Subscale

Item Number	Text of Item	Internal Homogeneity				Content Validity			
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit	
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent
Group of Items	Parenting Actions Subscale	70%				90%	100%		
AT39LC S	Knowing what to do for the baby.		4 ^a = 50 ^b 3 = 20 2 = 10 1 =	87.5	3.5			4 ^a = 90 3 = 2 = 1 = 10	92.5
AT267L CS	Whether to try to get the baby into a schedule.		4 ^a = 50 ^b 3 = 20 2 = 10 1 =	87.5	3.5			4 ^a = 90 3 = 10 2 = 1 =	97.5
									3.9

^a 4 very much, 3 somewhat, 2 a little, 1 not at all

^b 20% of subjects gave no response

Table G22. Negotiating Parental Decisions Subscale

Item Number	Text of Item	Internal Homogeneity			Content Validity			
		Ratings of Group Homogeneity	Ratings of Item to Group Fit		Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit	
			Response Scale and Percent	Mean Item Percent			C.V.I.	Item Mean Rating
Group of Items	Negotiating Parental Decisions Subscale	90%			100%	100%		
AT203N PD	Conflicting expectations of time to be spent with baby.		4* = 70 3 = 30 2 = 1 =	92.5	3.7		4* = 90 3 = 10 2 = 1 =	3.9
AT228N PD	Deciding who has to get up with the baby at night.		4* = 90 3 = 10 2 = 1 =	97.5	3.9		4* = 100 3 = 2 = 1 =	4.0
AT283N PD	Deciding how much money to spend on baby.		4* = 50 3 = 40 2 = 10 1 =	85	3.4		4* = 100 3 = 2 = 1 =	4.0

* 4 very much, 3 somewhat, 2 a little, 1 not at all

Table G23. Previous Child Experience Subscale

Item Number	Text of Item	Internal Homogeneity			Content Validity			
		Ratings of Group Homogeneity	Ratings of Item to Group Fit		Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit	
			Response Scale and Percent	Mean Item Percent			C.V.I.	Item Mean Rating
Group of Items	Previous Child Experience Subscale	100%			100%	90%		
AT227R PC	Whether I have had any practice caring for children before this baby.		4* = 90 3 = 10 2 = 1 =	97.5	3.9		4* = 90 3 = 2 = 10 1 =	3.8
T245RP C	Remembering my babysitting experience and applying it in caring for my child.		4* = 100 3 = 2 = 1 =	100	4.0		4* = 90 3 = 2 = 1 = 10	3.7

* 4 very much, 3 somewhat, 2 a little, 1 not at all

Table G24. Expected Baby Subscale

Item Number	Text of Item	Internal Homogeneity				Content Validity			
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit	
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent
Group of Items	Expected Baby Subscale	100%				100%	100%		
T03DEB	Baby's sex being different from expected.		4* = 60 3 = 20 2 = 20 1 =	85	3.4			4* = 90 3 = 10 2 = 1 =	97.5
T40DEB	The kind of personality the baby will have.		4* = 90 3 = 10 2 = 1 =	97.5	3.9			4* = 90 3 = 10 2 = 1 =	97.5
T128DEB	The baby as a real person.		4* = 50 3 = 30 2 = 10 1 = 10	80	3.2			4* = 70 3 = 10 2 = 10 1 = 10	85
PPBS3.1	The baby is like what I expected.		4* = 90 3 = 2 = 10 1 =	95	3.8			4* = 100 3 = 2 = 1 =	100
									4.0

* 4 very much, 3 somewhat, 2 a little, 1 not at all

Table G25. Well-Being of Baby in Labor Subscale

Item Number	Text of Item	Internal Homogeneity				Content Validity					
		Ratings of Group Homogeneity	Ratings of Item to Group Fit			Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit			
			Response Scale and Percent	Mean Item Percent	Item Mean Rating			C.V.I.	Mean Item Percent	Item Mean Rating	
Group of Items	Well-Being of Baby in Labor Subscale	100%				100%	100%				
AT56W BI	Wondering if I could cope with any difficulties with the baby's health.		4* = 60 3 = 40 2 = 1 =	90	3.6			4* = 60 3 = 40 2 = 1 =	90		3.6
AT297 WBI	Worry over the baby's well-being during labor.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100		4.0
PPWBB L1	Remembering worries about the baby's heartbeat during labor.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100		4.0
PPLR3	I think about how labor & delivery may have affected the baby's health.		4* = 100 3 = 2 = 1 =	100	4.0			4* = 100 3 = 2 = 1 =	100		4.0

* 4 very much, 3 somewhat, 2 a little, 1 not at all

Table G26. Revisiting the Pregnancy Subscale

Item Number	Text of Item	Internal Homogeneity			Content Validity			
		Ratings of Group Homogeneity	Ratings of Item to Group Fit		Rating of Label to Definition Fit	Rating of Group to Label-Definition Fit	Ratings of Item to Label-Definition Fit	
			Response Scale and Percent	Mean Item Percent			C.V.I.	Item Mean Rating
Group of Items	Revisiting the Pregnancy Subscale	80%			100%	90%		
AT23PB	I was worried about recognizing the signs of labor during my pregnancy.		4 ^a = 30 ^b 3 = 30 2 = 10 1 = 20	70			4 ^a = 80 3 = 10 2 = 1 = 10	3.6
AT85PA	Remembering how I felt about the weight gain during pregnancy.		4 ^a = 80 ^b 3 = 10 2 = 1 =	97.5			4 ^a = 80 3 = 20 2 = 1 =	3.8
AT244P	Feeling too large in the bust during pregnancy.		4 ^a = 80 ^b 3 = 10 2 = 1 =	97.5			4 ^a = 80 3 = 10 2 = 10 1 =	3.7

^a 4 very much, 3 somewhat, 2 a little, 1 not at all^b 10% of subjects gave no response