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The Crying-Baby Phenomenon:
A Personal Construct Perspective

Fay Barbara Deane

Volume II
Appendices: Case-Study Data

Massey University
1986

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Introduction

The objective of the study was to find out from the mothers of babies described as crying a lot what perceptions they had of their infants' crying, and to assist them in finding ways to deal with the crying. The contents of this volume are derived from the case-study notes of the seven mothers who took part in the study and a case study folder has been prepared for each of them.

The mothers were all first-time mothers and were people who had been earning their living from full-time occupations just prior to becoming parents. The mothers and their babies were all reported to be healthy, apart from one infant having a mild case of jaundice, another had an allergic rash for a few days, one had a cold, and another had a severe ear infection that lasted a few days. In other words, the mothers and babies were ordinary people, with the mothers wanting to get on with the job of becoming responsible parents.

The mothers were told about the study by their Plunket nurses, but this was only after a mother had said to her nurse that her baby was crying a lot, or that the baby was being difficult. At that time, the mother was given written information about the study (see Appendix F, Volume 1), and she could then choose whether or not to take part. Although any mother was free to drop out of the study at any time, they all participated until a time when it appeared to the mother and helper that it was appropriate to cease the interviews. All of the babies were younger than three months when the interviews began.

Each mother was informed at the outset that she would be using three different kinds of methods each week in order to record her perceptions of her baby's crying. Two of the methods used were the personal profile method, and the infant profile method. These were completed by the mother once a week. Diary forms were used by five of the mothers to record cry bouts daily in 15 minute blocks. Two of the mothers chose not to use the diary forms.

The study was the first time the personal profile method had been used with mothers who were at that time dealing with infant crying. Previous studies had used a retrospective approach, interviewing mothers who said that they had had a crying baby. For this reason, the final outcomes from this particular study could not be precisely predicted. However, it was anticipated that the personal profile and the supporting methods would be a way of assisting the mothers to cope with the infant's crying.

The methods were intended to provide the mothers with feedback about their own perceptions in a way that would allow them to review what was going on in their environment. They could then make adjustments where this was possible, and perhaps take attention away from the infant's crying.

Four of the seven mothers in the study made some reference to hitting or shaking the baby during the interviews, although only one mother, participant B, talked in her personal profile about shaking the baby. Participant D said at her last interview that earlier she had shaken the baby twice when she was alone with him. Participant E said that shouting at her baby had stopped her from hitting the baby, and participant G said at her last interview she could understand how people who didn't have support could bash a child who was crying. Participant C said how supportive her husband had been during the night on two occasions, and participant F said her husband had been 'marvellous' with his support. These comments do suggest how stressed the mothers felt at times while they were looking after their infants.

The recordings the mothers made of the cry bouts, and their use of the grizzly, grumpy, crying dimension in the infant profiles shows variation amongst the mothers. The data obtained in the study tend to support the view that infant crying can be a stress point that becomes a pre-emptive focus, even though the crying bouts may not be excessive as assessed by some other external standard. The mother's perception of what is happening with her baby and how she feels about how she is coping seem to be more important than whether or not in fact the baby is always or

often crying.

The negative feelings the mothers expressed in their personal profiles to describe the ordinary events in their day also indicate how caring for a new baby can itself cause pressure. It should be noted, nevertheless, that some of the feelings expressed were associated with events other than the infant's crying and people other than the baby.

A sense of having no time for themselves, of having little time for reflection, a sense of being tied down, of having little time with their husbands, and of having dinner time disrupted, are sentiments expressed in the personal profiles. Additional areas of concern were expressed through statements about feelings of incompetence, of lack of reward, and of not feeling in control in the way they had been accustomed to in their work situations.

It appears from the results of the study that the methods used, the personal profiles, the infant profiles, and the diary forms, were of assistance to these mothers in a number of ways that were individual to each of them. Whether or not the mothers would have arrived at their more positive perceptions of the infant's crying without using these methods cannot be ascertained from this study. What the interviews and profiles do show is that in using these methods of support, the mothers were assisted in finding ways to evaluate what was going on in their environment, and as a result each came to view the situation more positively.

It is sometimes argued that the first few months of having a new baby are soon over, that the baby grows out of crying, and that regardless of events mothers just have to get on with being mothers. However, the reports from these mothers show their perspective to be that having support is not only helpful, it is considered necessary. In their evaluations, each reported that they felt taking part in the study had supported and assisted them.

Clustered Personal Profile Explanation

The visual displays of the mothers' personal profiles, which show the clustered items and feelings, are presented in the appendices that follow. The focal point of the clustering is the position that the items hold as a result of the ratings they have been given on each construct. An interpretation of how a mother feels about an item relative to other items can be made from the knowledge that they occupy a particular position within the dichotomous feelings. The feelings, which are the constructs in the personal profile, provide a context in which the items can be viewed. The central thrust of a personal profile is the mother's perception of salient items in her day-by-day environment and the way they relate to each other.

The clustering of the constructs has a different meaning insofar as the clustered feelings do not result from a rating over a dichotomous or paired item. Thus the items do not provide a context for the feelings in the same way as the feelings do for the items. The clustered feelings provide a portrayal of the mother's perception of her emotional state as it relates to each item.

The most negative item or feeling in each of the clustered profiles is found at the base of the profile. The most positive item or cluster is at the top of the profile. The negative or positive region is more readily distinguished in the clustered items than in the clustered feelings. The feelings tend to form one cluster at a high (88% and above) level.

The percentage level at which the clusters in the profiles are grouped indicates the degree of similarity that exists between the items or constructs in that cluster. In this study, 88% is taken as the lower point of high levels of clustering. The two other high levels which are provided by the clustering programme are 92% and 96%. Only the items that cluster at these levels have been indicated in the profiles. The choice of 88% as the cut off point for a high level of clustering is not entirely arbitrary in that this level of association was used with mothers in a pilot study

(Deane 1981) and was one where the mothers found the items associated with each in a way that made sense.

Clustered Infant Profile Explanation

The infant profile clustered situations and clustered attributes have been analysed by the same computer programme that is used for the personal profiles. There are two differences between the procedures used for the infant and personal profiles. These differences have implications for the interpretations that can be placed on the visual displays and the relationship between the two sets of clusters obtained for each infant profile.

One difference between the two methods is that whereas the items and feelings for the personal profiles are elicited from the mother, the situations and the attributes for the infant profile are externally supplied to her. There is, then, an assumption with the infant profile that the situations and attributes will have meaning for each mother, and that mothers will share these meanings.

A second difference between the infant and personal profiles arises from the meaning of the 1-5 scale used with each method. The distinction between a positive and negative region is made explicit with the personal profiles. This is not done with the infant profile. Thus, while distinctions can be made in the infant profile in terms of position at the top and base of the clustered visual displays, and ratings allocated as 4 and 5 are at the base of each cluster, an interpretation of this region as being negatively perceived by the mother is not appropriate. A 4 or 5 rating is assigned where the attributes on the right side of the attribute form (see Appendix A, Volume 1) are chosen by the mother.

The clustered situations have relevance to the study in terms of their association with each other and the changes apparent in these over the interview weeks while all of the attributes tend to remain clustered at a high level of similarity over the interviews. the mothers' use of attribute 6, the grumpy, grizzly, crying dimension, has relevance for the present study, and is discussed in the results section of Volume 1.

Diary Form Explanation

The five mothers in the study who chose to use the diary forms completed them on a daily basis during their participation in the study. The diary form is constructed so that any infant behaviour can be recorded, but the behaviour of interest to this study was the infant's crying as recorded by the mother. The diary form is constructed so that 15 minute blocks of behaviour can be recorded over a 24 hour period.

The purpose of the diary form in this study was to obtain a mother's perception of the infant's crying in a form different from that of the personal and infant profiles. Thus the information obtained for the study assumes that the record on the diary form will be of bouts of crying behaviour, rather than being an accurate recording of crying for a fifteen minute period. The mother's interpretation may have included restless and grizzly behaviours within the broader term of 'crying', and the 'crying' may have been intermittent and so occurred for less than 15 minutes.

The information from the diary forms provides an indication of the number of cry bouts the mother perceived as occurring each day and the time of day at which the bouts occurred.

Appendix H

Case-Study Notes: Participant A

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Interview Notes

Participant A

Susan (33 years) had been married for two and a half years. Her husband (35 years) was an executive with a manufacturing firm. Susan had worked in banking and accounting positions for the past 16 years, and had worked until 6 weeks before the baby's delivery, her first. The baby was a male, aged 8.3 weeks at the first interview. He was being breastfed and was in good health. His progress was considered satisfactory by her paramedical.

Susan said that her pregnancy had been without problems, and that she had been able to work throughout. When she described her delivery, Susan said she had no labour pains. She had a caesarian delivery with an epidural. After the birth, the baby was laid across her chest for a few minutes, and then her husband had held the baby. Neither Susan or the baby had any drugs while they were in hospital. The baby had roomed in with her after the first two nights, and although he had screamed for a couple of nights, he slept most of the time. They had gone home after 10 days.

First Interview Notes (2 hours)

Researcher's impressions. Susan is an attractive, dark-haired person who looked pale and very tired at the first interview. There was a sense of an underlying tension. The outward expression was one of 'forced' calm. Susan was welcoming and seemed pleased to have an opportunity to talk about her baby and how she felt about him. She breastfed during the interview.

Susan's description of being at home with the baby.

The baby screamed within a week of being at home, at night and sometimes during the day. There was no cycle to it. I felt like a blob going from one feed to another. Then one day I felt really human. I took the baby for a walk.

Maybe he hadn't been crying so much - but he is making demands on me. I am doing something for him all the time and getting exhausted. I put on a different dress and did up my face (at the time of taking the baby for the walk), and then felt human. I have been dragging the chain, wanting to do things.

Housework basics are done, but there is frustration in not getting done what I want to get done. I can't fit it all in and I'm tired all the time just cleaning up and doing the basic essentials. Baby is done first, nappies, washing, and cleaning up, and then the kitchen. It makes me feel better when it's not too much of a shambles, then I clean up me.

I water the plants, organise dinner, and seeing what there is to do after that gets ignored. I do the dusting and cleaning over the week, there's so much to do, I feel terrible about not doing things because I'm tired. I can't climb the stairs, and I'm tired and tense because he seems to cry from early morning. I'm in a mess.

When I feel I can't help the baby any more... I was in tears. There is not time for myself. I couldn't help him all the time and I feel guilty because of it. I need time away from the baby, a friend to talk to to help.

I knew the baby would be tough, but I didn't have enough knowledge, I had no knowledge of small babies. When I went to a new job I knew the first three weeks would be difficult with can'ts, but you eventually manage to control the

situation, you look back and know it wasn't too difficult.

Living through some of the terrible times at home its been pretty bad and I've been beside myself. At night when he was fed he'd scream for 2 hours. I didn't know why he was screaming, it couldn't be wind, nothing I did pacified him. I'd be walking around and he'd be pulling. I'd hold him, talk to him, and want to get rid of him because nothing helped him. If my husband helped, I'd feel protective toward the baby.

Interview Two

Researcher's impressions. Susan seemed much brighter this week, with a more positive attitude.

Susan's comments. On viewing her personal profile, Susan said she was surprised at the clusters and that she was managing much better than she had thought. She said; "Perhaps I don't have a problem baby, there are other things in the situation". She also said that the diary form had made her more aware of what the baby was doing, and she was pleased she had been "pushed" into the charting of the baby's behaviour. It had been possible to locate aspects that showed a routine.

Susan said she had also made a decision to see to the baby "her way", and not listen to her mother-in-law's advice about not picking the baby up. As well, a friend had arrived from Australia and she had been able to talk to her.

Of the Sunday that previous week she said "I just couldn't get out of the chair, I felt sorry for myself because I couldn't do what I wanted to do. I couldn't organise my day because things wouldn't happen when I wanted them to. I knew it would be tough having a baby, but I had no idea how I'd be."

In response to what she had expected having a baby to be like, Susan replied "I assumed the baby would sleep more. I've been more amazed by the hours the baby is awake than

anything else. I knew he would be time consuming, but I thought he would sleep more."

Susan said she had also found that the interviews for the profiles were drawing things out, that no-one else had drawn these things out, and that had helped her. She went on to say that she had been to a meeting of mothers one night that week, and that she had been a little "put out" when the baby hadn't needed her.

Interview Three

Researcher's impressions. The baby was playing on a rug on the floor when the interview took place, and Susan seemed to be enjoying his company in a very relaxed manner.

Susan's comments. The baby had a cold, and Susan was taking him to the doctor and the paramedical in the afternoon. She also had a dentist appointment later in the week and was finding the lack of private transport a nuisance. She said she would like to have a car of her own and was working on convincing her husband that it would be a good idea. Her husband had been busy over the week-end working on the house and hadn't had time to take the baby to give her a spell, which she would like to have sometimes.

Susan had gone out during the week with a friend who also had a baby. When Susan had compared her own baby with her friend's, she realised that her baby was "really quite a good baby". he hadn't cried at all while he was in the car. The baby smiled a lot during his play time on the floor, and Susan commented on how much she enjoyed that and that it made her feel "good".

Interview Four

Researcher's comments. Although Susan looks a lot better than at her first interview, she still looks very tired. The difference between Susan's personal profile for the previous week, where the item 'screaming at night' had been rated negatively, and the information recorded on the diary chart which showed no crying, were discussed.

Susan's comments. Susan said that she didn't realise the changes that were taking place as shown in the profiles

and charts were actually taking place until we talked about them in the clusters, and then they seemed to fit together. She also said she had decided that she had quite a contented baby after all, that he likes to look at and play with his mobiles above his cot when he wakes up. She knows he's awake sometimes, but he doesn't let her know.

Middle of the night feeds had stopped, and the baby was sleeping right through. Susan said she was feeling very differently about the baby now that he was responding to her, and she has made a priority decision to put him first. If she is feeding when the 'phone rings, she doesn't answer it.

Susan also wished her husband would help more. When he comes home from work he likes to play with the baby, but the baby is tired then and doesn't want to be boisterous. Her husband gets annoyed with her when she points this out to him. Susan feels that he really gets annoyed because he feels a bit inadequate with the baby and doesn't like to be told so and responds with anger.

Interview Five

Researcher's comments. The baby was looking very contented, playing in his pram while the talking took place. The baby has lots of mobiles, they are above his cot and his pram, and also inside the cupboard door, Susan said, so that the baby can see them while she is changing him on the table.

Susan's comments. Susan said that she could tell what the baby's cries meant now.

During the first few months of life it was just crying and then going into a scream. You think something is wrong then because you can't tell what the cry is going into. In the first stage it's just an awful cry that you can't tell what it is, and at that stage there's no difference at all, looking back over the first two months, there was no

difference at all in the cries.

I think the baby is settling down a lot, the cry-time is getting into a routine. You can't make someone of that age conform. People tell you to expect to, and so you think you can't manage when it doesn't happen. The baby didn't do what people said he ought to. It's wrong to say that. He's his own little person and can't be forced into patterns. I'm learning to get into his pattern, he's not getting into mine.

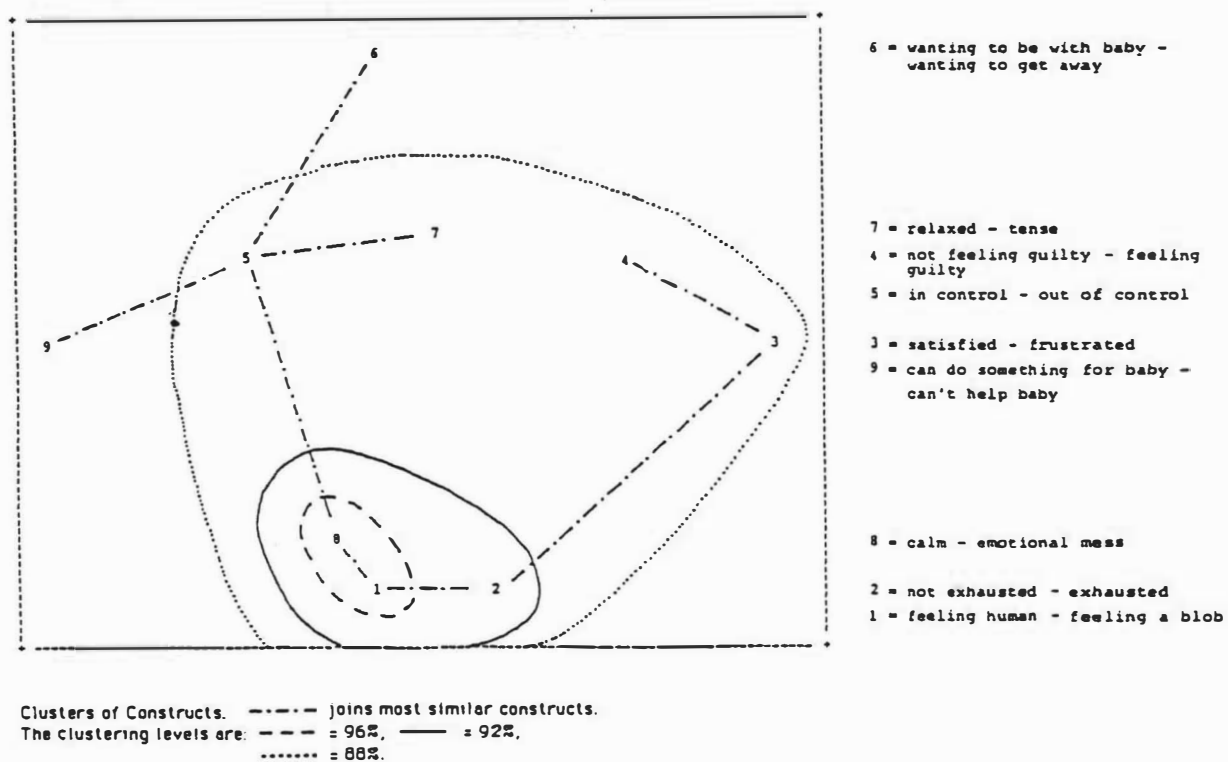
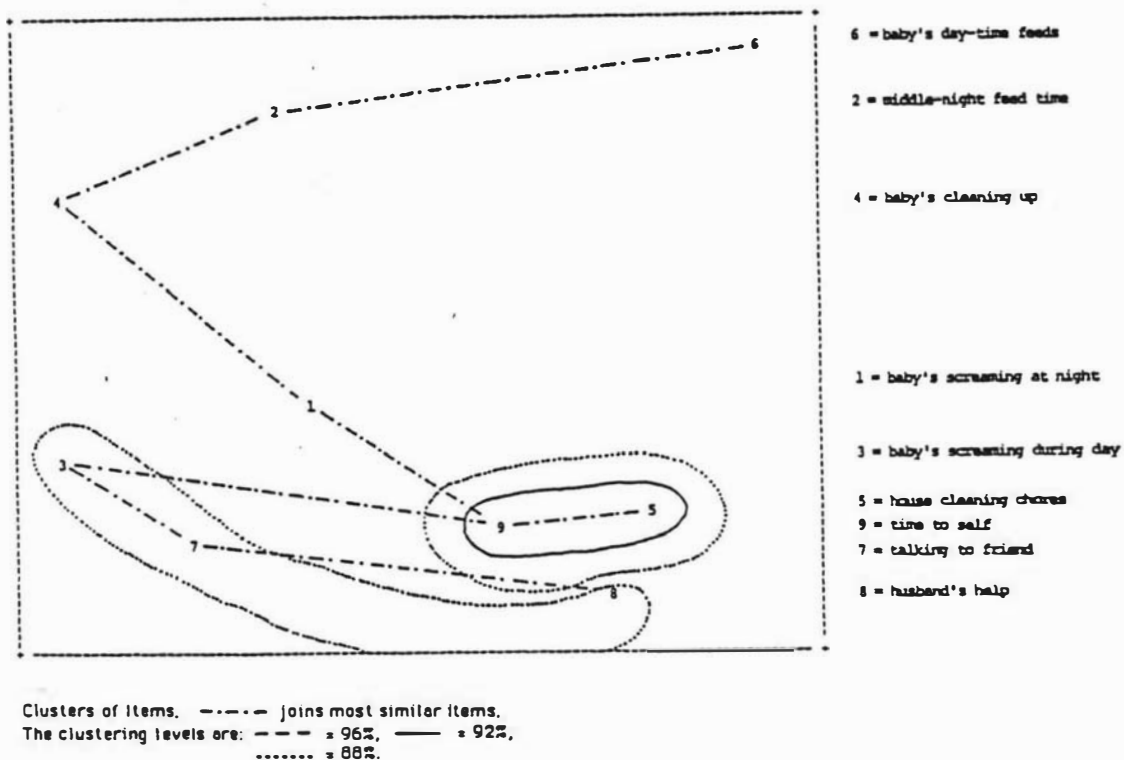
With a second child you would have a better idea. Everyone talks a heap of rubbish who mentions what to expect. If my mother were here she wouldn't say what I was doing wrong, just offer helpful ideas. I rang her in England at the New Year and had a wee sob about how things were going, and she just said that yes it's hard, but you've just got to get on and cope the best you can.

In the weekend when my husband's home there are more demands on me. With just the baby at home in the week I can fit in with him. I am putting him to bed up the stairs now, and instead of just creeping out in a hurry as I used to, I quietly take a few things in the room first and then quietly withdraw. The baby accepts this.

Susan said again how rewarding it is when the baby responds so much to her now, not at all like the first couple of months when she was just seeing to him and putting him down without any response from him other than crying. Susan said she had decided that she had a contented baby.

Appendix H -continued

First Clustered Personal Profile



First Personal Profile: Explanatory Comments

Items

Two items are clustered at 92%, item 5 'house-cleaning chores', and item 9 'time to self'. The items in this cluster have been rated negatively. The ratings are recorded in the profile matrix. Three other items rated negatively form a further cluster at 88%. These are items 8 'husband's help', 7 'talking to friend', and 3 'baby screaming during the day'. The most negatively rated item in the profile is husband's help, item 8

Item 1 'baby screaming at night', remains unclustered at 88% with any of the other negative items.

The items in the cluster at the top of the profile are clustered at 88%.

These are: 6 'baby's day time feeds'

2 'middle of the night feeds'

4 'baby's cleaning up'.

These items form a positive cluster.

Feelings (Constructs)

Two constructs cluster at 96%, construct 8 'calm-emotional mess', and 1 'feeling human-feeling a blob'. Two constructs remain unclustered at 88%, 6 'wanting to be with baby-wanting to get away', and 9 'doing something for the baby-can't help'.

Appendix H -continued

Personal Profile Ratings for Participant A; weeks 2 to 5.

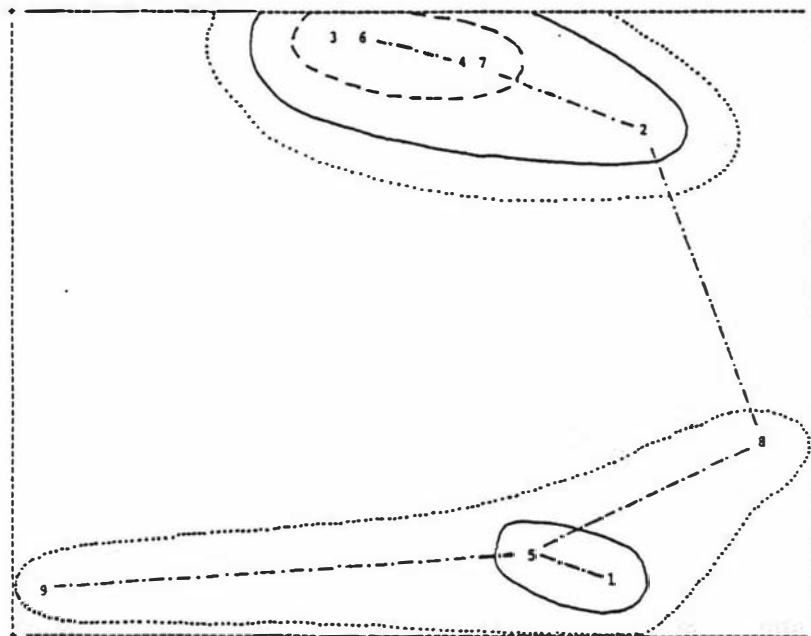
Profile 2	Profile 3	Profile 4	Profile 5
*		**	
332232234	222242244	2-2231244	2-2231244
432232234	222242244	2-1241244	2-2231244
322232234	222242244	2-2241244	2-2231244
321241234	122424441	2-2241244	2-2231244
422242233	212242244	2-2241244	2-2231244
422242234	121242244	2-2241244	2-2231244
422242234	222242244	3-2241244	2-2231244
422232233	222242244	3-2241244	2-2231244
321232233	222242244	2-2241244	2-2231244

* Columns correspond to ratings for an item. rows correspond to ratings for a construct.

** The symbol '-' indicates that the mother deleted this item from the profile.

Appendix H -continued

Second Clustered Personal Profile



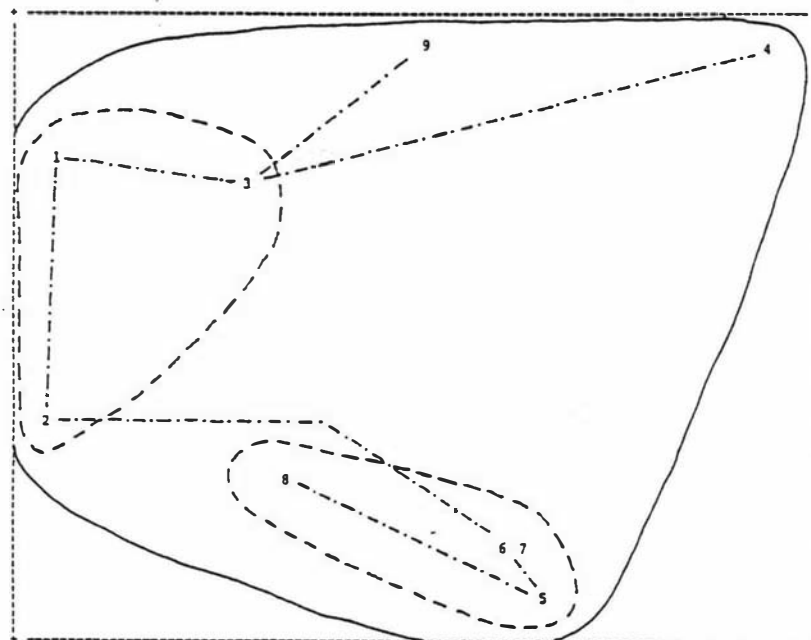
3 = baby screaming during day
6 = baby's day-time feeds
7 = talking to friend

2 = middle-night feed time
4 = baby's cleaning up

8 = husband's help

5 = house cleaning chores
1 = baby screaming at night
9 = time to self

Clusters of Items --- joins most similar items.
The clustering levels are: --- = 96%, — = 92%,
..... = 88%.



4 = not feeling guilty -
feeling guilty
9 = can do something for baby -
can't help baby

1 = feeling human - feeling a blob
3 = satisfied - frustrated

2 = not exhausted - exhausted

8 = calm - emotional mess

6 = wanting to be with baby -
wanting to get away

7 = relaxed - tense

5 = in control - out of control

Clusters of Constructs --- joins most similar constructs.
The clustering levels are: --- = 96%, — = 92%,
..... = 88%.

Second Personal Profile: Explanatory Comments

Items

The cluster at the top of the profile consists of items:

- 2 'middle-night time feed'
- 3 'baby screaming during the day'
- 6 'baby's day time feeds'
- 4 'baby's cleaning up'
- 7 'talking friend'.

These items cluster at 92%. The ratings indicate that these items are regarded positively.

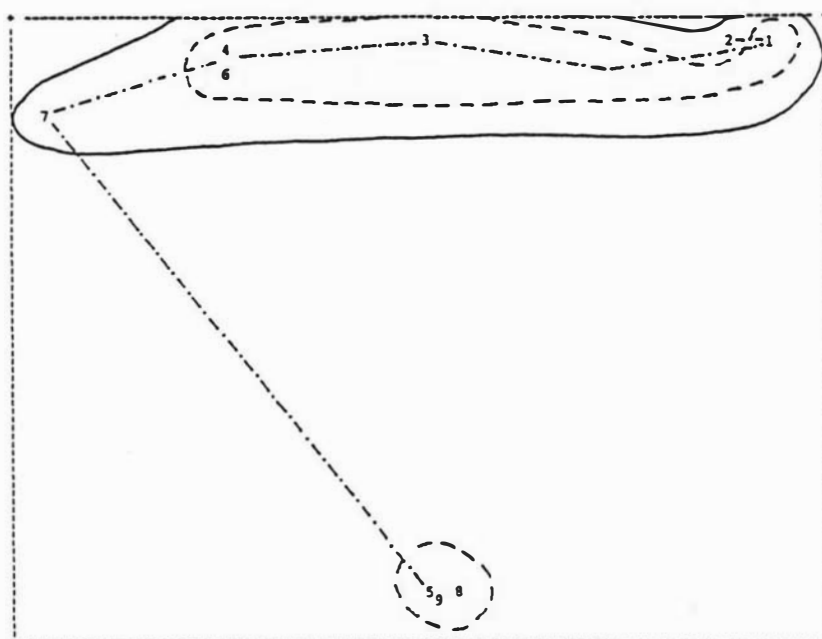
A cluster is formed at 92% with item 5 'house cleaning chores', and item 1 'baby screaming at night'. Item 8 'husband's help' clusters with these other two items at 88%, as does item 9 'time to self'. The differentiation between the positive and negative items is clear in the profile.

Feelings (Constructs)

All of the constructs cluster at 92%, while there are two clusters at the 96% level.

Appendix H -continued

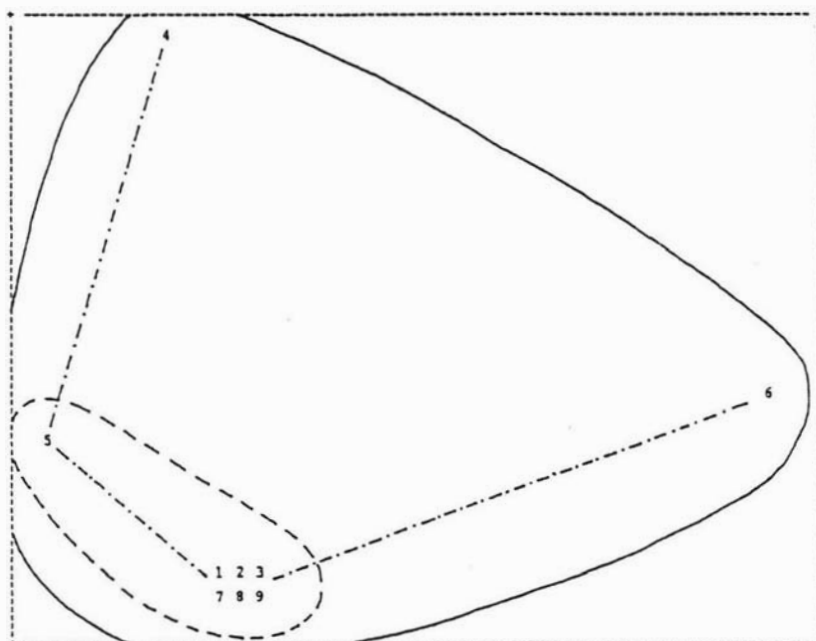
Third Clustered Personal Profile



- 1 = baby screaming at night
- 2 = middle-night feed time
- 3 = baby screaming during day
- 4 = baby's cleaning up
- 6 = baby's day-time feeds
- 7 = talking to friends

- 5 = house cleaning chores
- 8 = husband's help
- 9 = time to self

Clusters of Items. - - - - - joins most similar items.
 The clustering levels are: - - - - - = 96%, — = 92%,
 = 88%



- 4 = not feeling guilty - feeling guilty

- 6 = wanting to be with baby - wanting to get away
- 5 = in control - out of control
- 1 = feeling human - feeling a blob
- 2 = not exhausted - exhausted
- 3 = satisfied - frustrated
- 7 = relaxed - tense
- 8 = calm - emotional mess
- 9 = can do something for baby - can't help baby

Clusters of Constructs. - - - - - joins most similar constructs.
 The clustering levels are: - - - - - = 96%, — = 92%,
 = 88%

Third Personal Profile: Explanatory CommentsItems

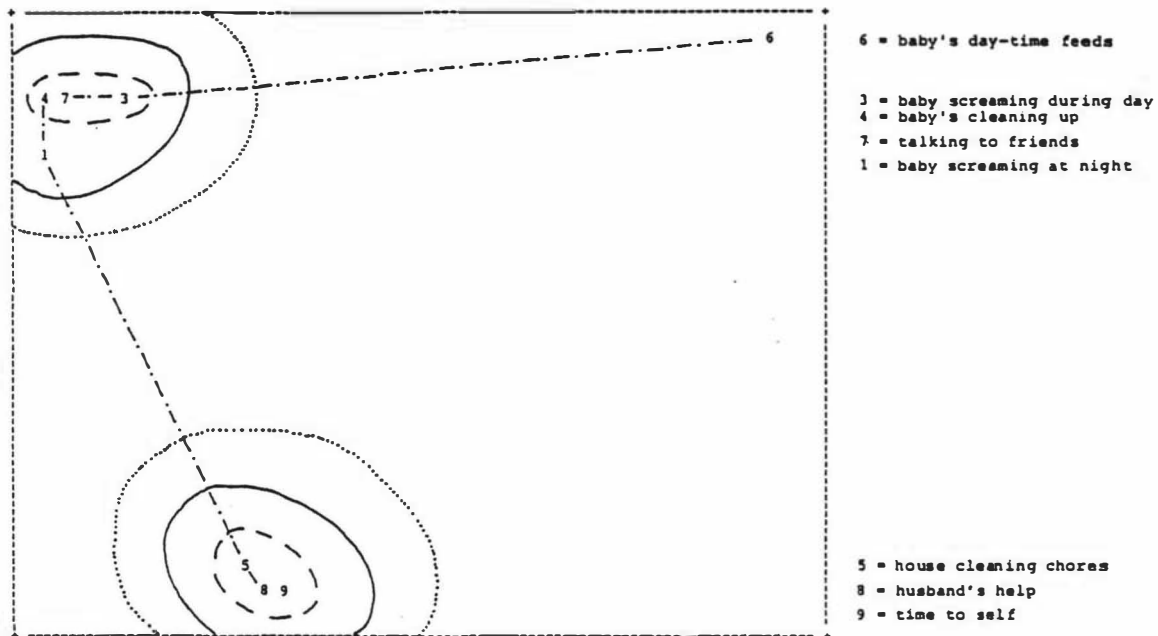
There are two clusters of items in the profile. The clustering is at 96% and 92%, and is similar to that in the previous profile. However, item 1 'baby screaming at night', has moved from the lower to the upper cluster, indicating a more positive perception.

Feelings (Constructs)

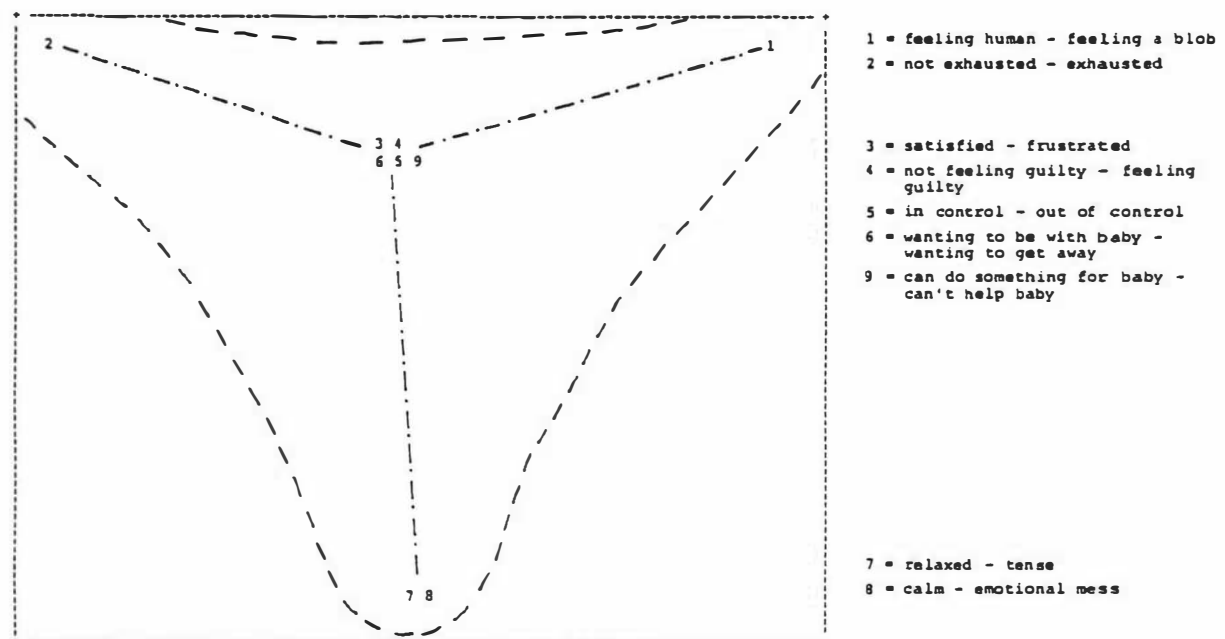
All of the constructs cluster at 92%

Appendix H -continued

Fourth Clustered Personal Profile



Clusters of Items. - - - - joins most similar items.
 The clustering levels are: - - - = 96%, — = 92%,
 = 88%.



Clusters of Constructs. - - - - joins most similar constructs
 The clustering levels are: - - - = 96%, — = 92%,
 = 88%.

Fourth Personal Profile: Explanatory Comments

Items

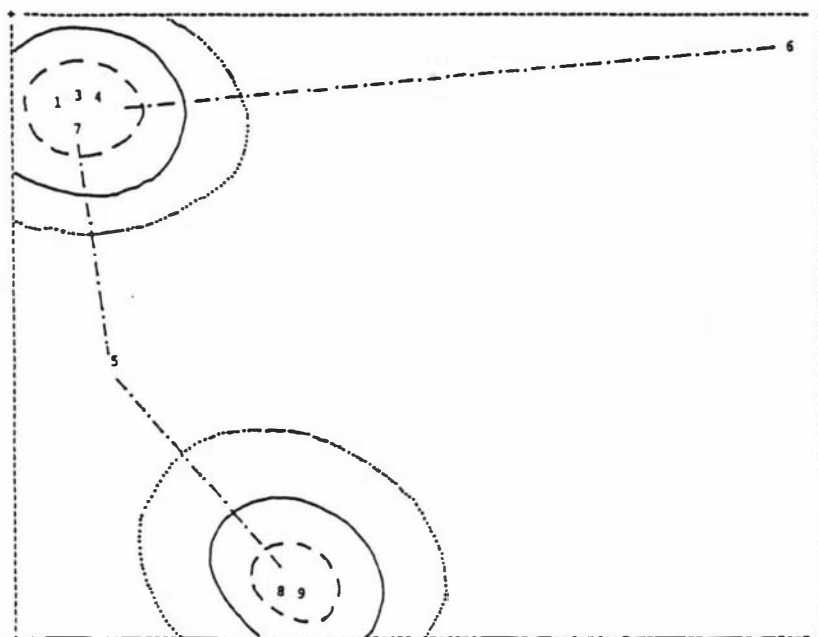
The clustering remains similar to that in the two previous profiles. The cluster of the most negatively rated items at the base of the profile has the same items as the previous profile. Item 6 'baby's day-time feeds', is not clustered at criterion level (88%) with the other items, and holds the most positive position on the profile.

Feelings (Constructs)

All of the constructs are clustered at 96%.

Appendix H -continued

Fifth Clustered Personal Profile



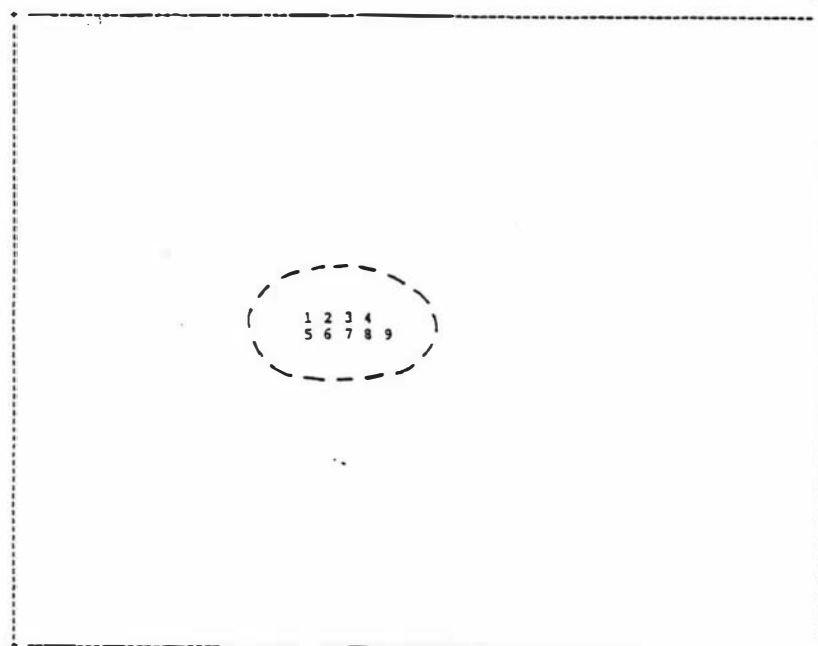
6 = baby's day-time feeds

1 = baby screaming at night
 3 = baby screaming during day
 4 = baby's cleaning up
 7 = talking to friends

5 = house cleaning chores

8 = husband's help
 9 = time to self

Clusters of Items. - - - - joins most similar items.
 The clustering levels are: - - - = 96%, — = 92%,
 = 88%



1 = feeling human - feeling a blob
 2 = not exhausted - exhausted
 3 = satisfied - frustrated
 4 = not feeling guilty - feeling guilty
 5 = in control - out of control
 6 = wanting to be with baby - wanting to get away
 7 = relaxed - tense
 8 = calm - emotional mess
 9 = can do something for baby - can't help baby

Clusters of Constructs. - - - - joins most similar constructs.
 The clustering levels are: - - - = 96%, — = 92%,
 = 88%

Fifth Personal Profile: Explanatory CommentsItems

The item 'house cleaning chores', has moved from the cluster with the negative items to a more central position, so that house cleaning is now viewed differently from 'husband's help' and 'time to self'. Two items remain unclustered at 88%. 'house-cleaning chores', and 'baby's day-time feeds'.

Feelings (Constructs)

All of the constructs cluster at 96%.

Appendix H -continued

Infant Profile Ratings for Participant A; weeks 1 to 5.

Profile 1	Profile 2
*	
141142444422534224445242	242224224422243242424222
141143444422534224445222	242224224422243242424222
441313244422524223335323	441113444422524224435224
441113444422524224435224	343224224422343342423223
441113444432524233335223	343224224422343342423223
343313345533534233435323	343324224422343342423223

Profile 3	Profile 4
	**
142122224422422232424222	22--522224---22222422222
132122223422422232424222	22--222224---22222422222
443222223322422232324223	22--222224---22222422224
442122223322422232424223	22--222224---22222422224
442122223322422232423223	22--222224--22222422224
332222223422422232424223	22--222224---22222422223

Profile 5

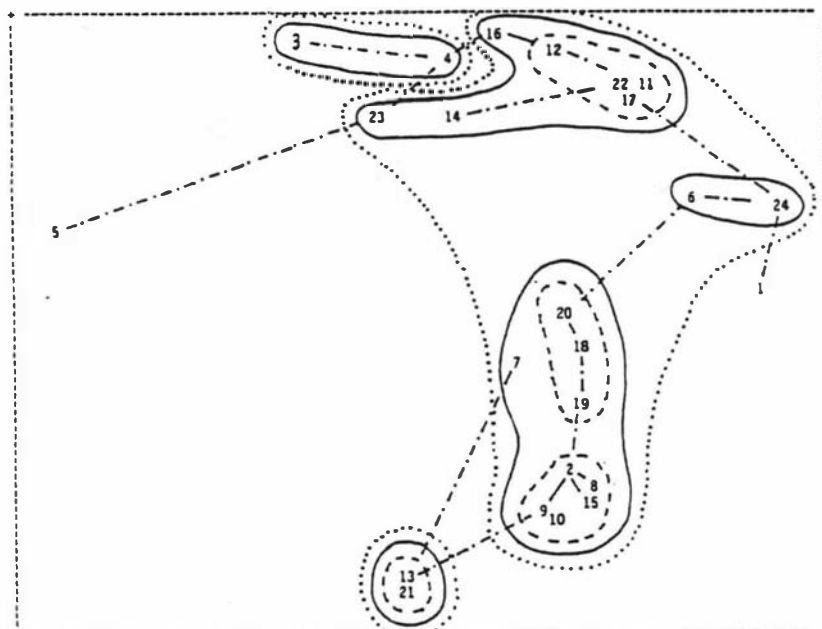
22--22222222-22222224224
 22--22222222-22222224222
 44--22222222-22222224224
 44--22222222-22222224224
 44--22222222-22222224224
 33--22222222-22222224223

* Columns correspond to ratings for a situation, rows correspond to ratings for a attribute.

** The symbol '-' indicates that the mother deleted this situation from the profile.

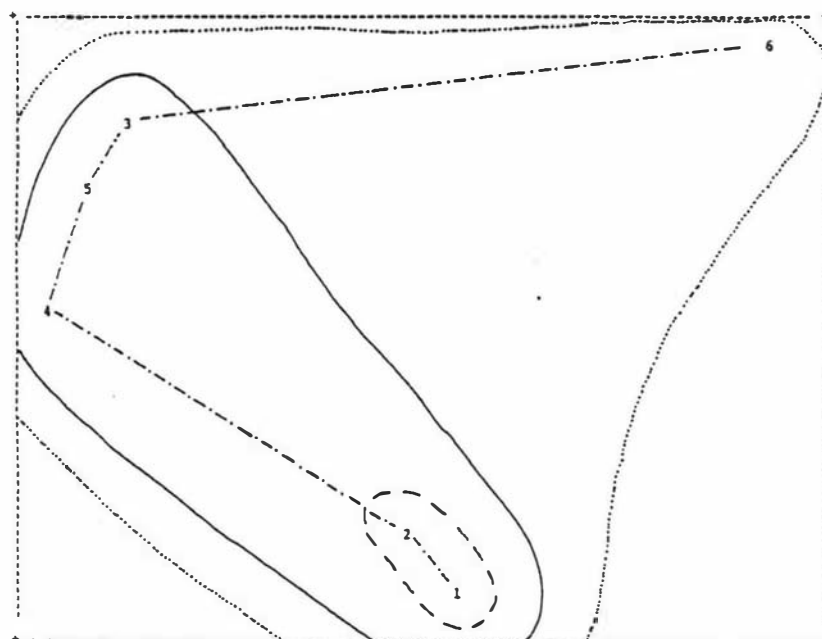
Appendix H -continued

First Clustered Infant Profile



- 1 - when having a bath
- 2 - after having a bath (drying, dressing, etc.)
- 3 - middle of night feeding
- 4 - after middle of night feeding
- 5 - "breakfast" feeding
- 6 - after "breakfast" feeding
- 7 - mid-day feeding
- 8 - after mid-day feeding
- 9 - early-evening feeding
- 10 - after early-evening feeding
- 11 - late-evening feeding
- 12 - after late-evening feeding
- 13 - new food offered
- 14 - having nappies changed
- 15 - having nappies changed (morning)
- 16 - when waking at beginning of the day
- 17 - when put down for morning nap
- 18 - when waking from morning nap
- 19 - when put down for afternoon nap
- 20 - when waking from afternoon nap
- 21 - when put to bed early-evening
- 22 - when put down late-evening
- 23 - when playing with toys alone
- 24 - immediate reaction to strangers

Clusters of Situations. - - - - joins most similar situations.
 The clustering levels are: - - - = 96%, — = 92%,
 = 88%.



- 6 - happy - grizzly
- 3 - comes toward - turns from
- 5 - relaxed - rigid
- 4 - adjusts easily - adjusts slowly
- 2 - quiet - loud
- 1 - moves little - moves much

Clusters of Attributes. - - - - joins most similar Attributes.
 The clustering levels are: - - - = 96%, — = 92%,
 = 88%.

First Infant Profile: Explanatory Comments

Situations

There are four groups of situations that cluster at 96%, and there are five clusters at 92%. The cluster at the top of the profile, consisting of numbers 3 'middle of night feeding', and 4 'after middle of night feeding', has been rated, in the main, with 1s.

The cluster at the base of the profile that is made up of situations 13 'having nappies changed early evening', and 21 'new food offered', has been rated with 5s. Two situations unclustered at this level are numbers 1 'when having a bath', and 5 'breakfast feeding'.

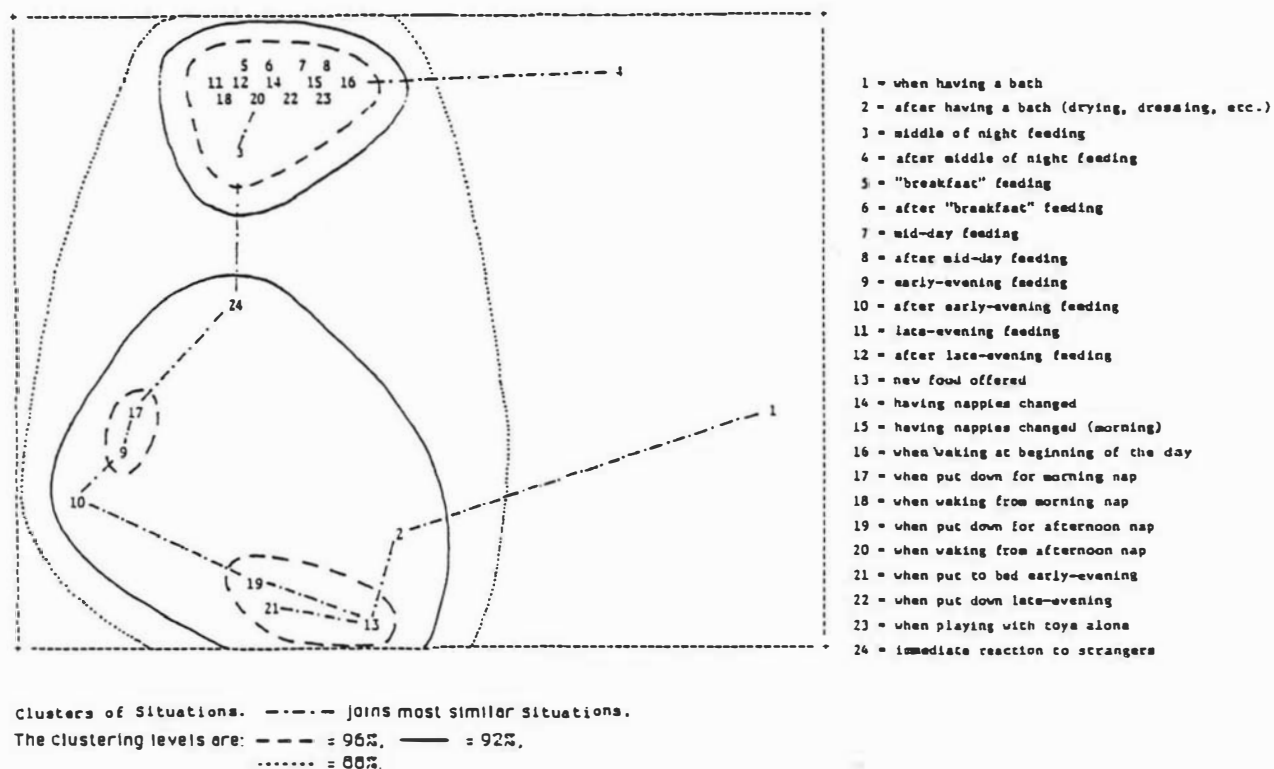
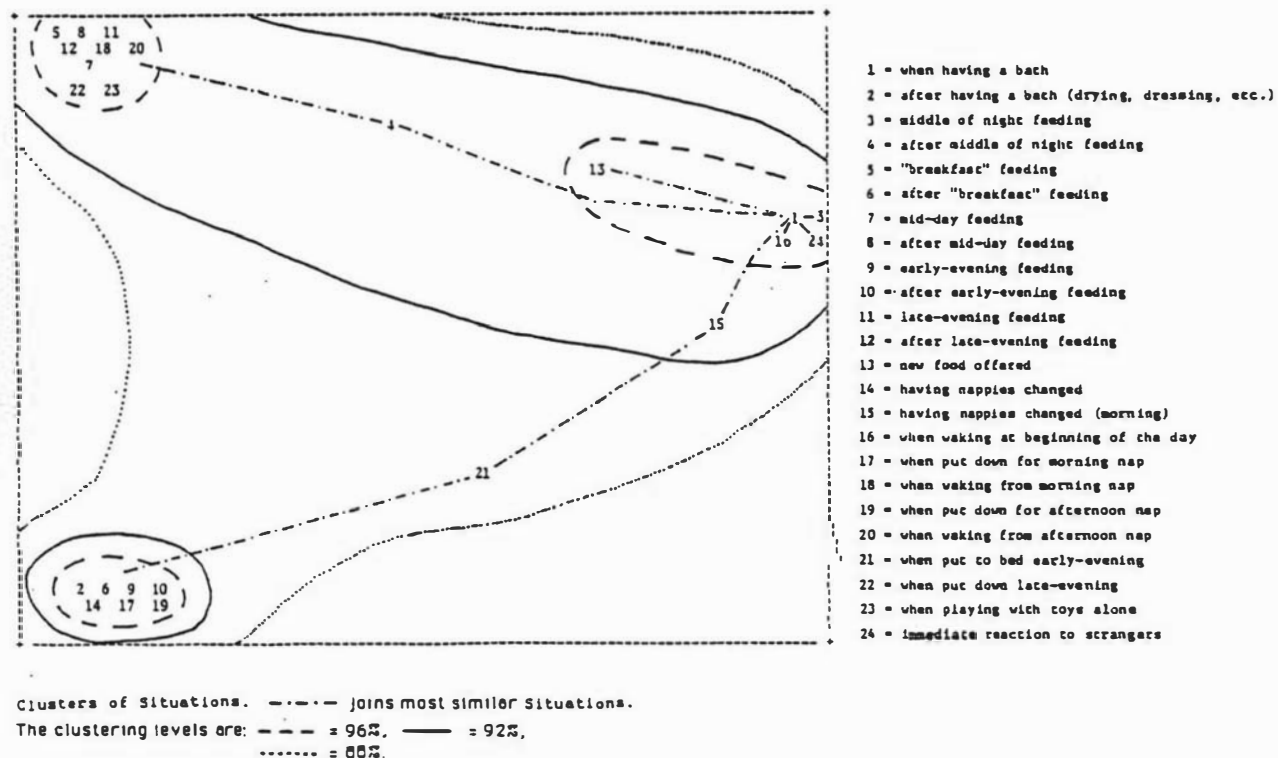
Attributes

Two of the attributes cluster at 96%; number 1 'moves little-moves much', and number 2 'quiet-loud'. All of the attributes cluster 92%, except for attribute 6 'happy-grumpy, grizzly, crying'. All of the attributes are in the same cluster at 88%.

The spread of the attributes in the profile, in spite of the high clustering level, is because the clustering programme finds the greatest differentiation between the attributes regardless of clustering levels. Because all of the attributes in the subsequent profiles cluster at 92% in a manner similar to this profile, the visual displays for these are not included.

Appendix H -continued

Second and Third Clustered Infant Profiles



Second Infant Profile: Explanatory Comments

Situations

There are three main clusters at 96%. The situations in the cluster at the top of the profile have been rated with 2s and 3s. The clusters move into two groups at 92%, and these become one main cluster at 88%. Thus the differentiation between the situations is less than that of the previous week.

Third Infant Profile: Explanatory Comments

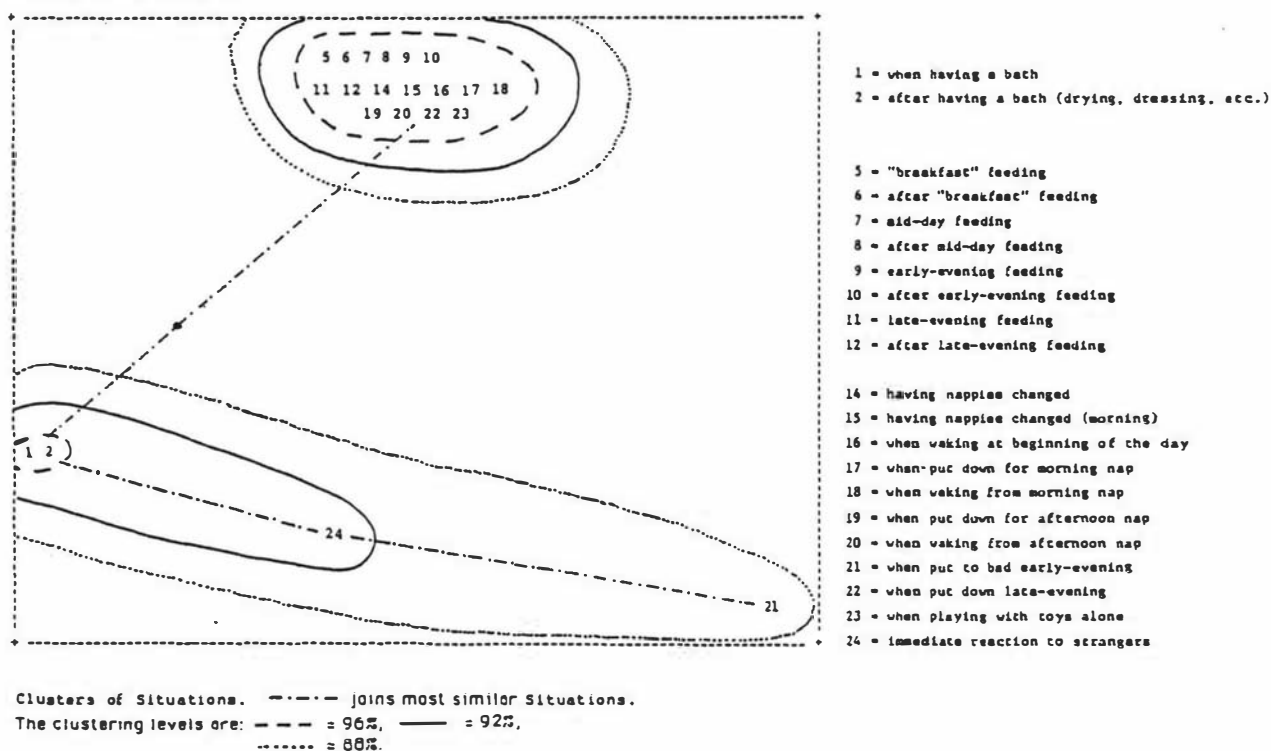
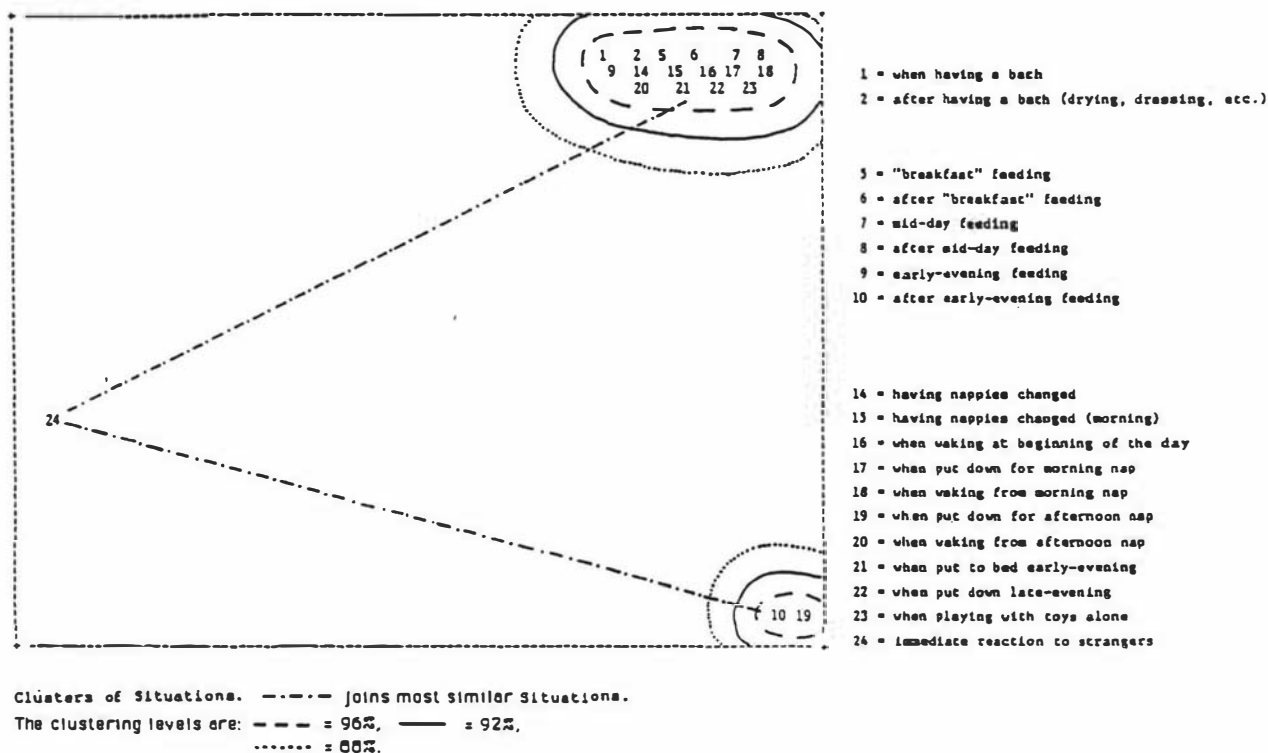
Situations

There are three clusters at 96%. The situations in the cluster at the top of the profile have been rated in the main with 2s, and in the bottom cluster, situations 13, 19, and 21, are rated with 4s. These clusters form one group at 88%.

The unclustered situations at this level are numbers 1 'when having a bath', and 4 'after middle of night feeding'. Thus each of these situations is viewed differently from the others in the clusters.

Appendix H -continued

Fourth and Fifth Clustered Infant Profiles



Fourth Infant Profile: Explanatory Comments

Situations

Two main clusters remain constant from 96% to 88%. The cluster at the base of the profile (situations 10 & 19) is rated with 4s and the other larger cluster is rated with 2s. Situation 24 'immediate reaction to strangers' is unclustered.

Fifth Infant Profile: Explanatory Comments

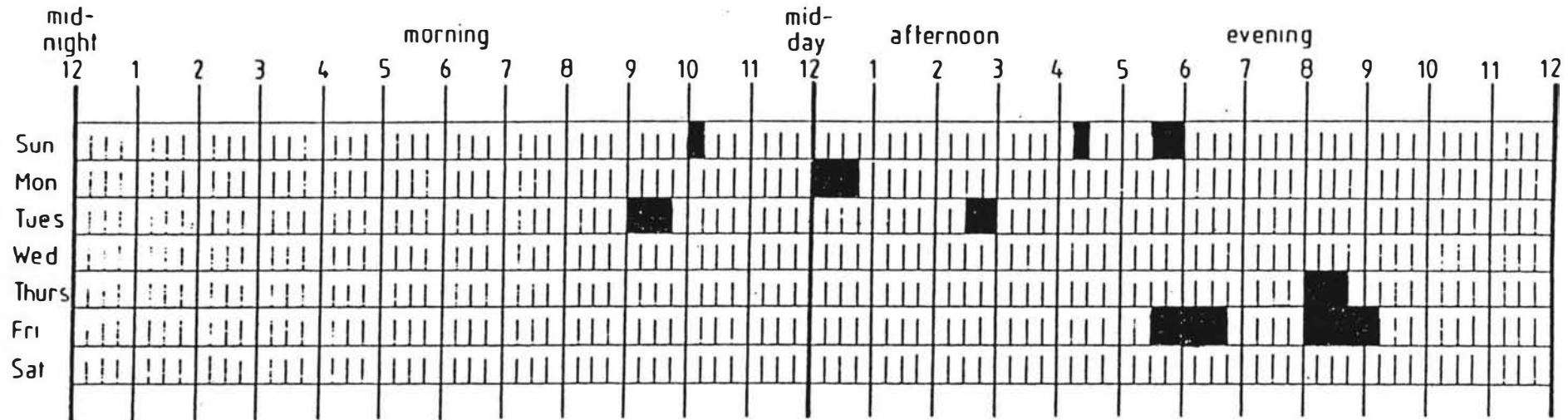
Situations

There are two main clusters at 96%. Most of the situations are in the cluster at the top of the profile. Although the clustering groups are similar to those in the previous profile, the situations in the bottom cluster differ from those that made up the bottom cluster in that profile. In the profile under review, these situations are numbers 1,2, 21, and 24. All of the situations cluster at 88% within these two groups.

Diary form Parent name: _____ baby's name: _____ Start date: _____

Each of the little boxes stands for 15 minutes. When you have completed this sheet go onto another diary form.

For the present form: _____



Comments:

Sunday:

Monday:

Tuesday:

Wednesday:

Thursday:

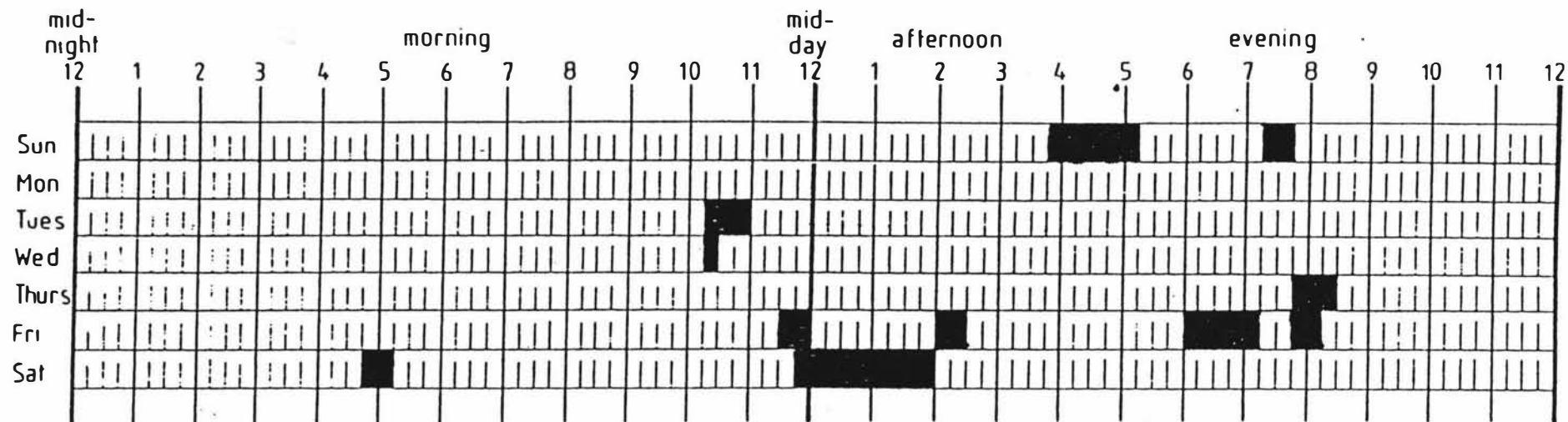
Friday:

Saturday:

Diary form Parent name: _____ baby's name: _____ Start date: _____

Each of the little boxes stands for 15 minutes. When you have completed this sheet go onto another diary form.

For the present form: _____



Comments:

Sunday:

Monday:

Tuesday:

Wednesday:

Thursday:

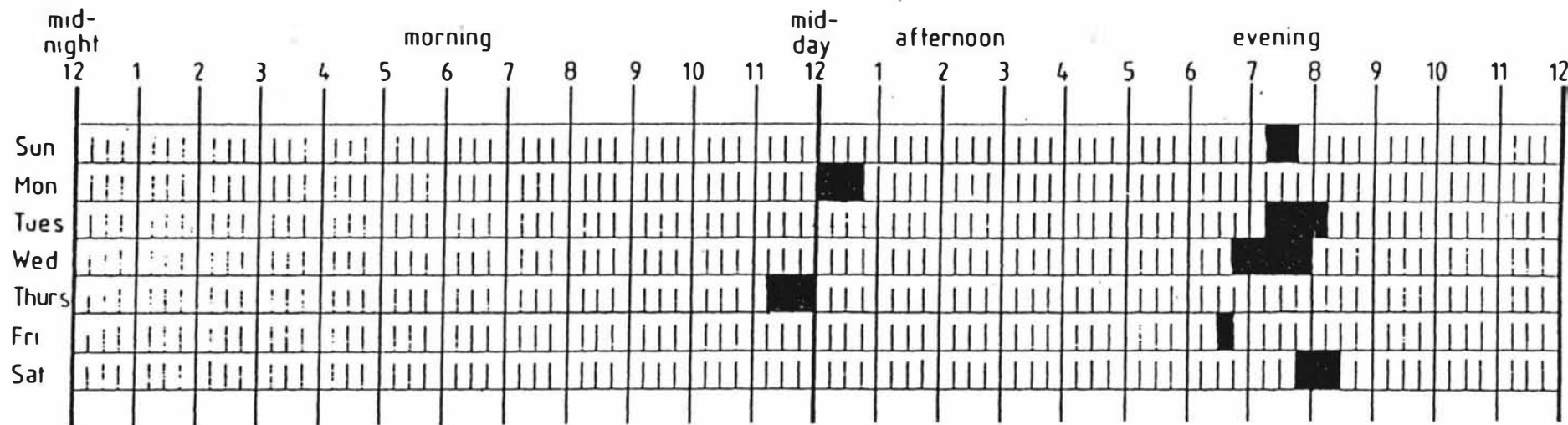
Friday:

Saturday:

Diary form Parent name: _____ baby's name: _____ Start date: _____

Each of the little boxes stands for 15 minutes. When you have completed this sheet go onto another diary form.

For the present form: _____



Comments:

Sunday:

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

Saturday:

Diary form Parent name: _____ baby's name: _____ Start date: _____

Each of the little boxes stands for 15 minutes. When you have completed this sheet go onto another diary form.

For the present form: _____

	mid- night 12	1	2	3	4	5	morning				8	9	10	11	mid- day 12	afternoon				4	5	6	evening		8	9	10	11	12	
Sun																														
Mon																														
Tues																														
Wed																														
Thurs																														
Fri																														
Sat																														

Comments:

Sunday:

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

Saturday:

Appendix H -continued

Evaluation of Methods Used in the Study

Name: Participant A

Indicate the category a, b, or c which describes best how you found each method used in the research.

Personal Profile

a. very useful b. useful c. not very useful

Comments: It was good, you tend to look at things. I thought that I was disoriented not coping with the baby, but I found it was other things I wasn't coping with. You worry about yourself and how you feel, so it's very useful at that critical time. You feel you're not a dead loss all the way around. It became clear on the printout. I wouldn't have picked it up from the ratings. the plotting picked it up. No one else draws these things out, it was helpful.

Infant Profile

a. very useful b. useful c. not very useful

Comments: It was not as helpful as the diary form. You look at it and question, and think how does he react? You do see when things are getting better. It stops you thinking things are so negative. When you think about it, it's not as bad as you imagined it. You think, Oh well,

some things are getting better. The bad things are uppermost in your mind before then.

Diary Form

a. very useful b. useful c. not very useful

Comments: I found it quite good to record exactly what the baby was doing. I filled one in at hospital and thought about it after then. It was easy to do with the form being set out.

Appendix I

Case-Study Notes: Participant B

CONTENTS	page
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Interview NotesParticipant B

Jane (28 years) had been married for 2 years and had worked for the same firm during that time. She was a computer supervisor who had several people under her supervision. Jane's husband (29 years) was a foreman with a shipping agency. She had worked until 5 days prior to her baby's birth, her first child. The baby was male and had been breastfed initially, but was bottlefed after a spell in hospital in the first week after going home. The baby was 7.6 weeks old at the time of the first interview.

Jane described her pregnancy as being "good". She did not know she was pregnant until 7 months. She had not menstruated for 3 years and had gone to the doctor for a check-up at which time she was told of the pregnancy. The labour before delivery was described by Jane as being "hard, and I don't want to go through that again in a hurry". She had been vomiting very badly the day before the birth, and didn't know whether or not she was in labour.

She had an epidural about 3p.m. the next day, and the baby's birth had been delayed for 2 hours. Jane's blood pressure had been up and down during the labour. The delivery was with the aid of forceps, and Jane had a fairly extensive episiotomy. Jane did not push during the labour, she said that she hadn't wanted to, and didn't want to hold the baby when he was born, but felt as though she had to.

Her husband had been present and he was pleased about the baby, but she had been in a lot of pain and would have preferred that he was not there. Jane said she was glad her husband had seen what she had been through, though, and he had said he wouldn't put her through that again. He had wanted children for quite a long time. Jane had been told by her doctor three and a half years ago that she wouldn't be able to have children, so the pregnancy was unexpected even though the couple had wanted children.

The baby had roomed-in with Jane in hospital. He had high blood pressure for 24 hours and Jane had been on a drip. She said it was fantastic to be in hospital with a

baby. They left hospital after one week.

First Interview Notes (2 hours)

Researcher's impressions. Jane is a slim red-haired person who, it seems from her comments, enjoys doing things. She talked about her house and the work she and her husband had done on it to make it nice. Making a financial contribution to the situation seemed to be important to Jane.

The baby was in his pram in the bed-room, but when he started to cry Jane brought him out to the lounge. He was restless during the interview. Jane wheeled the pram at first, and then took him out to hold. Although he had a problem with projectile vomiting during the first week at home, this was no longer occurring.

Jane's description of being at home with the baby.

It all started when I came home from the hospital. The baby started to cry when we left hospital, and I thought he was just adjusting. The first week was hectic, and the baby ended up in hospital again on the Friday of that week with projectile vomiting. I had a lot of milk and had been feeding him every two hours, but after his stay in hospital my milk dried up. When he came home from being sick in hospital he was on 4 hourly feeds, but then went on to every 2 hours.

I was very sore from the stitches, I was very tired and couldn't sit down because of them. I did feel good enough to come home from the hospital when I did, but I should have stayed longer. I felt the baby was a responsibility and as though I should have felt much more for him. I have been quick to fly off

the handle with the baby because I felt he caused me so much pain.

When the baby went back into hospital a week later, I felt there was something wrong, that it was my fault he was sick. But when he came back later I felt nothing for him. Love for him came later, gradually, when he started to smile at me. I felt before that I had gone through this for nothing.

I expected it to be great to have a baby in the house, that he would be happier, and I expected to have more sleep myself. I didn't get any sleep for 48 hours at one stage. I expected more help from my husband at night, but he didn't realise he should have helped more than he did. He didn't realise I was still in pain, and I didn't realise he didn't realise. I had to scream at him before he did realise. I felt as though I was going mad, the slightest thing upset me, and I started to take it out on the baby, to shake him. I threw him on the bed and walked out. My husband took over then. I didn't think I would ever hit the baby and I felt then I could if he pushed me too far.

The last three weeks the baby has started to sleep more. When the baby screamed from 4a.m. to 10a.m. I couldn't handle it, and then from 6p.m. to 9p.m. or so. I have been to a paediatrician who said the baby had picked the time at which labour occurred to scream.

Soya bean milk was recommended by the paediatrician. The baby was settled at first and then got constipation,

colic, and was crying all night and all day. I got microlax for the baby's constipation and felt awful about doing that.

The plunket nurse has been really helpful, and I got Karitane help for nearly 2 weeks from 8.30p.m. to 4.30p.m., and the baby would start to cry after that from feed to feed without stopping. After that I went to the Family Unit about every second day. I felt it was wrong leaving the baby to the Karitane nurse.

I have come out of it gradually, and sometimes resent the baby for not being better. I like to be told what is wrong. I feel I can cope with older children better. At about 4 weeks I started to stop and think. I was given all sorts of information and I've taken bits from all of it and worked out what to do. I took the baby off soya bean milk and on to one that is the same as breast milk. The baby loves it.

Note: The constructs 'satisfaction-frustration' and 'dependent-independent' were elicited during the compiling of the matrix. The feeling of frustration was associated with 'having gone through this for nothing'. The 'independent-dependent' construct was from the husband taking over the care of the baby during the shaking exercise.

Interview Two

Researcher's impressions. Jane seemed bright today and was interested in the profiles. Jane's husband came home early from work and Jane was pleased to be able to show them to him. She was also pleased that she could show him how she rated his help on the personal profile.

Jane's comments.

The baby has been a lot better, but he is with a sitter around the road when I go to work. I feel that going to work has saved me, I can cope with anything now. I don't mind what time of the day I have to work to after I come home, or if the baby is crying. I can take him and see to him without being hassled about it and work into the night. I'm not worried about leaving the baby with the sitter, although my mother doesn't like it, and says I should stay at home and look after the baby. If I wanted to go back to work why did I have the baby, she asks.

I am pleased to be going back to work for the money as well as getting out of the house. I don't like being dependent on my husband for money, we are still trying to get the house paid off.

The baby has grizzled a bit for the sitter, but not too much. When they rang and asked me if I wanted to go back to work, I jumped at the chance. I don't like mixing with other mothers who talk about their problems. I have enough of my own. The baby didn't respond well to my husband on Saturday, and he had got upset and started shouting at him.

Note: Jane made the following changes in the items in her profiles: deleted items were 'baby's screaming at 4a.m.', 'shaking the baby', and the paediatrician/doctor. Added items were 'being demanded on', 'going to work', and 'mother's help'.

Interview Three

Researcher's comments. The baby was asleep at first, but woke later in the interview. Jane was relaxed while she was dealing with him and explained to me about the formula he was on. The baby had some diarrhoea this week.

Jane's comments. Jane said the baby was smiling a bit and was also interested in looking at things.

He watched a nappy flap in the wind for about an hour earlier in the week. I take him for walks, and he has been responding to his dad during the week, and he (the father) was pleased about it.

If my husband has to go and get the baby after work sometimes before I am finished work, he doesn't cope very well, but I don't mind taking over. I am so pleased to be back at work. I feel I can handle anything at home now that I am able to go out.

I went to ante-natal classes, but they weren't any help really. There were mothers who were having their second pregnancy, and they mostly talked about things from a 'knowing' angle. You really need to be more with mothers who are having first babies. The only thing that would prepare one for a crying baby is to be around other small babies.

Jane said she could now distinguish two kinds of cries, but couldn't before the last 2 weeks. She could tell a pain cry and a tired cry, but couldn't pick out a hungry cry.

The baby has been really different from the end of last week, he has been watching things and you can now do

things with him. He is smiling and chuckling to tell you things. Before you only knew things through his cry. Now he's in a regular pattern, and if he cries within a 4 hour period he's not hungry because you've just fed him. He's got his own personality now at 10 weeks. Before he was just fed, washed, winded, and put down, he was just a bundle.

Before when I was looking after my sister's baby, the baby could go back if he was difficult. When it's yours, you're stuck with it. The only help to prepare you for how it has been might have been to be with other small babies. It's only since I've been back to work I've been able to tell which cries are which. I am not going to devote my whole time to the baby.

Interview Four

At this interview, some of the earlier points Jane had made were discussed and clarified by her. She said that when the baby had gone to hospital for the vomiting, she had stayed one night with him in the children's ward, but hadn't wanted to. Her husband had persuaded her stay. She had not felt maternal to the baby at all until she went back to work.

She said that the paediatrician had been reassuring in that he had told her there was nothing wrong with the baby. She would just have to grin and bear it.

He said if ever I felt I was going to hit the baby, to ring at him at any time, day or night. If I told him I felt I might, chances were I wouldn't do it. I felt awful and guilty, and always felt how could I do it?

Jane was still in some pain with the sutures, and they had to be resutured at 6 weeks postdelivery. Jane didn't know how many sutures she had, and didn't want to know. She didn't know why the baby's birth had been delayed during labour.

Jane said her job has been important to her. She has had to do it well and be competent because she hasn't got an "education". She left school at the end of her second year at secondary school. She has on the job experience now, and has had job training with management and special supervisor courses. She now has 16 people who she supervises, 8 day staff and 8 night staff.

Jane said she feels like a mother now, and likes being called "mother". When she was taking her nieces and nephews out it made her feel like a mother. She said that she loves to be needed.

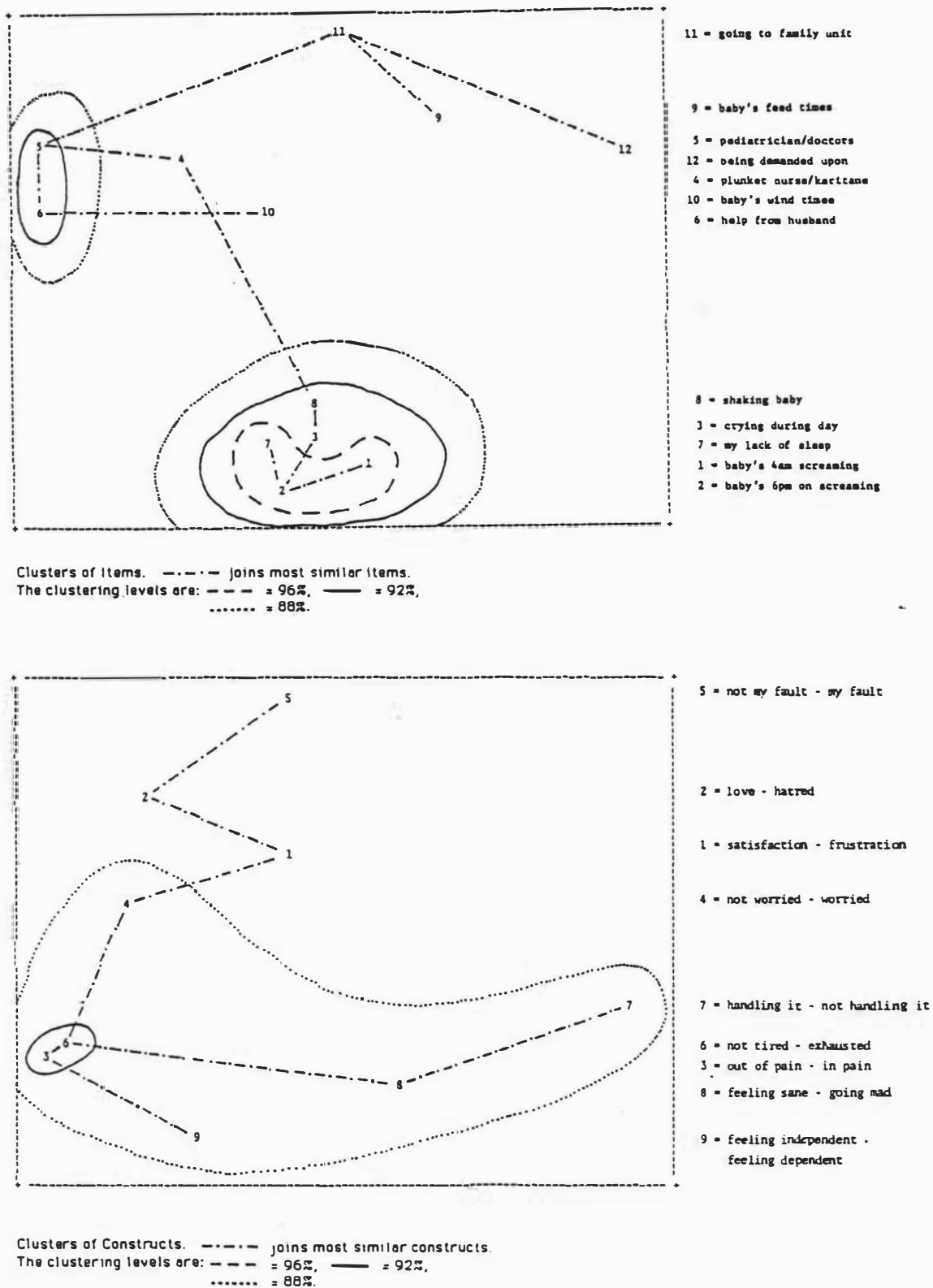
Appendix I -continued

First Personal Profile Matrix

feelings constructs	Items											
	baby's screaming 4 a.m.	baby's screaming 6 p.m.	baby crying during day	plunket/karitane nurses	paediatrician/ doctor	help from husband	my lack of sleep	shaking baby	baby's feedtimes	baby's windtimes	going to family unit	being demanded on
satisfaction-												
frustration	5	5	5	2	1	4	5	5	2	4	1	5
love-												
hatred	5	5	4	2	2	1	5	5	3	4	2	3
out of pain-												
in pain	5	5	5	5	4	4	4	5	4	4	4	2
not worried-												
worried	5	5	5	3	4	4	5	5	2	4	2	2
not my fault-												
it's my fault	5	5	4	2	1	1	5	2	2	2	2	2
not tired-												
exhausted	5	5	5	4	4	4	5	5	5	4	4	3
handling it-												
not handling it	4	5	5	5	5	5	5	5	2	3	3	4
sane-												
going mad	5	5	5	5	5	5	5	5	5	5	4	4
independent-												
dependent	4	4	5	5	4	4	4	5	5	4	4	4

Appendix I -continued

First Clustered Personal Profile



First Personal Profile: Explanatory Comments

Items

There are two groups of items that cluster at 92%. The negative cluster, at the base of the profile, consists of the following items:

- 1 'baby's 4 am screaming'
- 2 'baby's 6 pm screaming'
- 3 'crying during the day'
- 7 'my lack of sleep'
- 8 'shaking the baby'.

A more positive cluster is formed with item 5 'paediatrician/doctor', and item 6 'help from husband'. Items that remain unclustered at 88% are:

- 4 'plunket nurse/karitane'
- 9 'baby's feed times'
- 10 'baby's wind times'
- 11 'going to the family unit'
- 12 'being demanded on'.

Feelings (Constructs)

Two constructs cluster at 92%, construct 3 'out of pain-in pain', and construct 6 'not tired-exhausted'. Negative ratings have been used over these constructs.

Three constructs remain unclustered at 88%, and are in a more positive position in the profile. These are:

- 1 'satisfaction-frustration'
- 2 'love-hatred'
- 3 'not my fault-my fault'.

Appendix I -continued

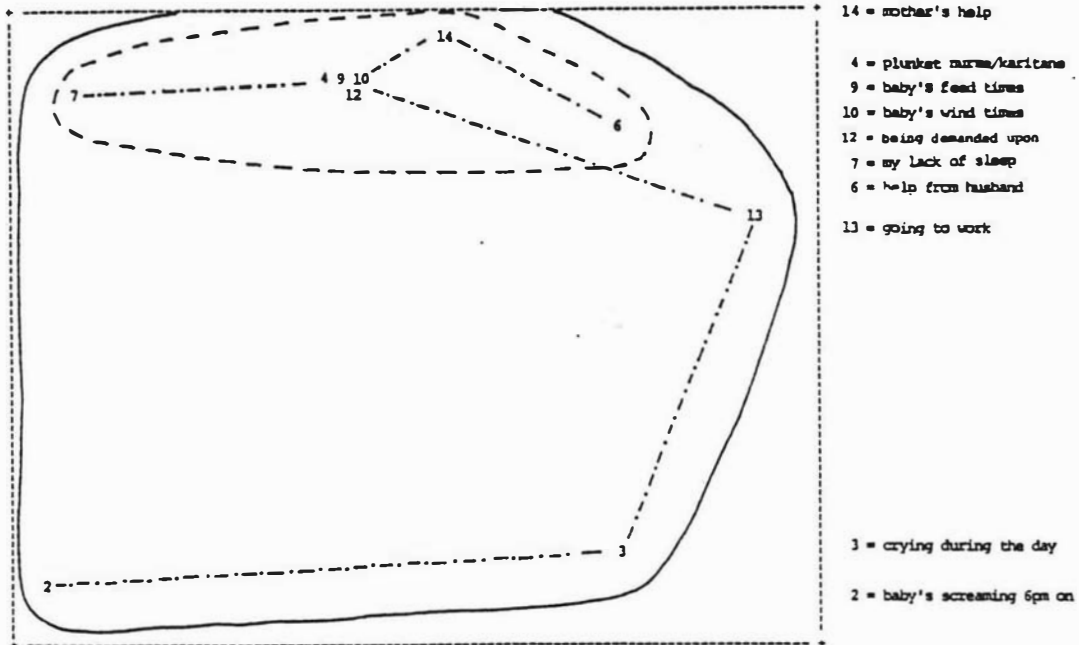
Personal Profile Ratings for Participant B; weeks 2 to 4

Profile 2	Profile 3	Profile 4
*		
1121222121	2211111111	4222222211
1111111111	2111111111	3211111111
2211111111	1111111111	1111111111
2222222222	2222222222	2222222222
2211111111	1111111111	1111111111
4222322222	2222221111	4111433222
2221222221	1111111111	2111111111
2211111111	1111111111	1111111111
1211111121	1111111111	1111111111

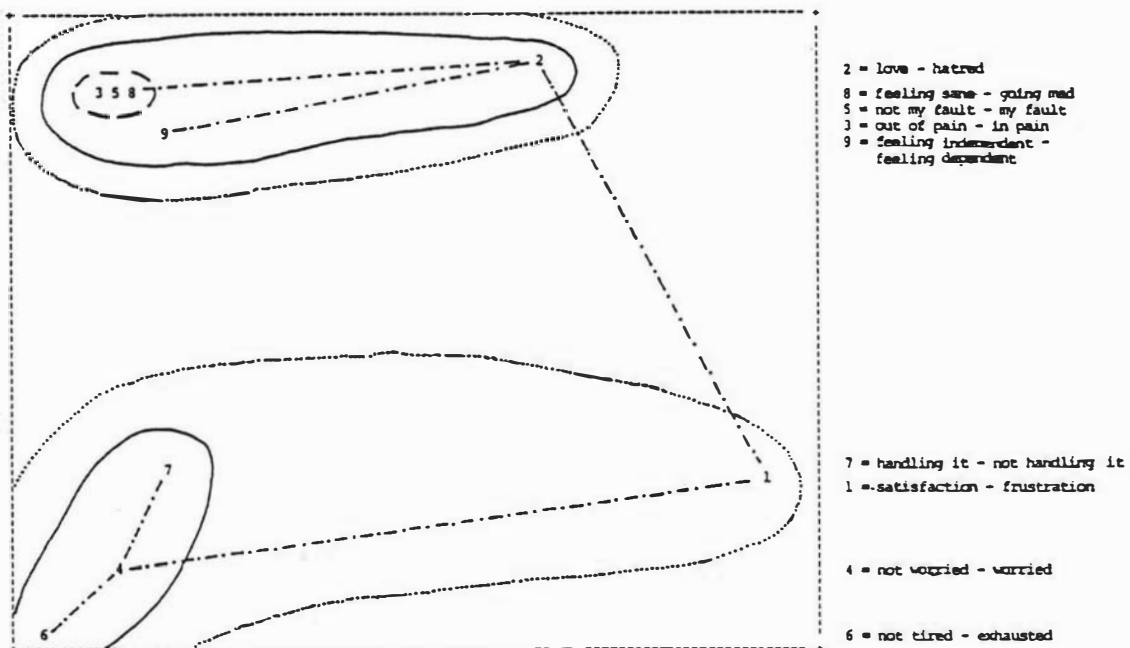
* Columns correspond to ratings for an item. rows correspond to ratings for a construct.

Appendix I -continued

Second Clustered Personal Profile



Clusters of Items. - - - - joins most similar items.
 The clustering levels are: - - - = 96%, — = 92%,
 = 88%.



Clusters of Constructs. - - - - joins most similar constructs.
 The clustering levels are: - - - = 96%, — = 92%,
 = 88%.

Second Personal Profile: Explanatory Comments

Items

All of the items cluster at 92%, and the ratings are positive (see the previous page for the ratings). Item 9 'going to work', and item 10 'mother's help', are new to this profile. Items that have been deleted since the first profile are:

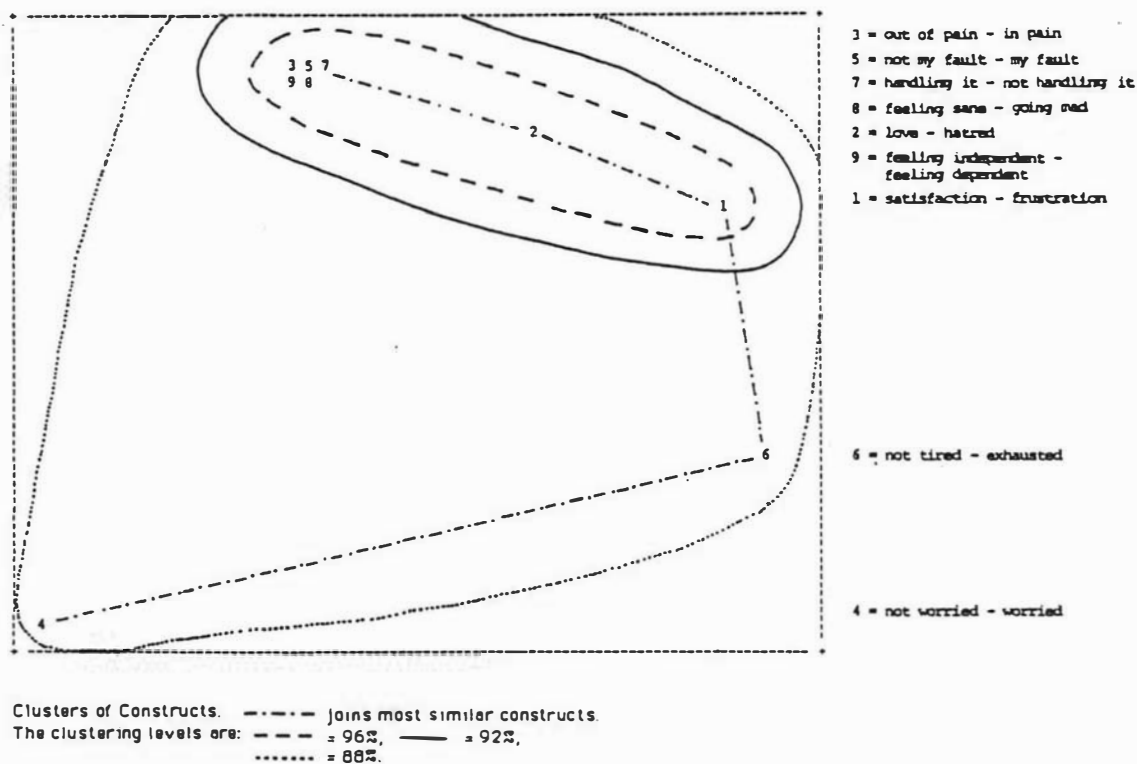
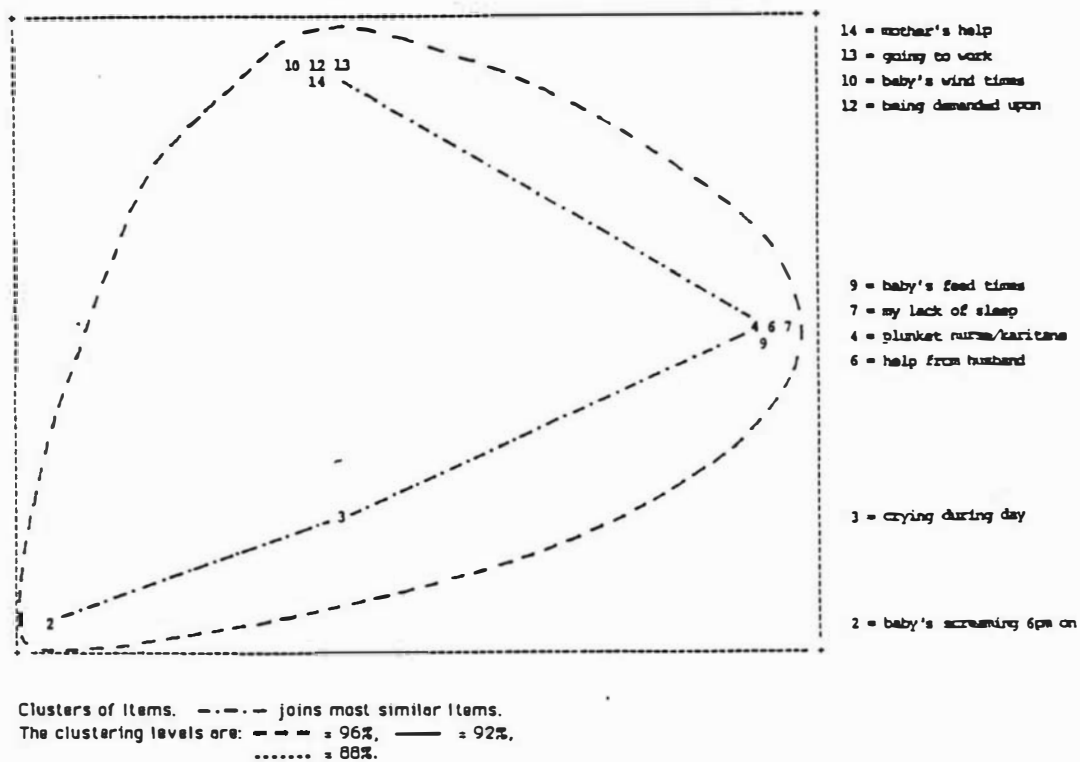
- 'baby's 4 am screaming'
- 'paediatrician/doctors'
- 'shaking baby'
- 'going to the family unit'.

Feelings (Constructs)

The constructs are clustered in two groups at 88%. The items rated over these constructs have been allocated positive ratings. The differentiation between the two groups in the profile is on the basis of ratings allocated between 1 and 3 only.

Appendix I -continued

Third Clustered Personal Profile



Third Personal Profile: Explanatory Comments

Items

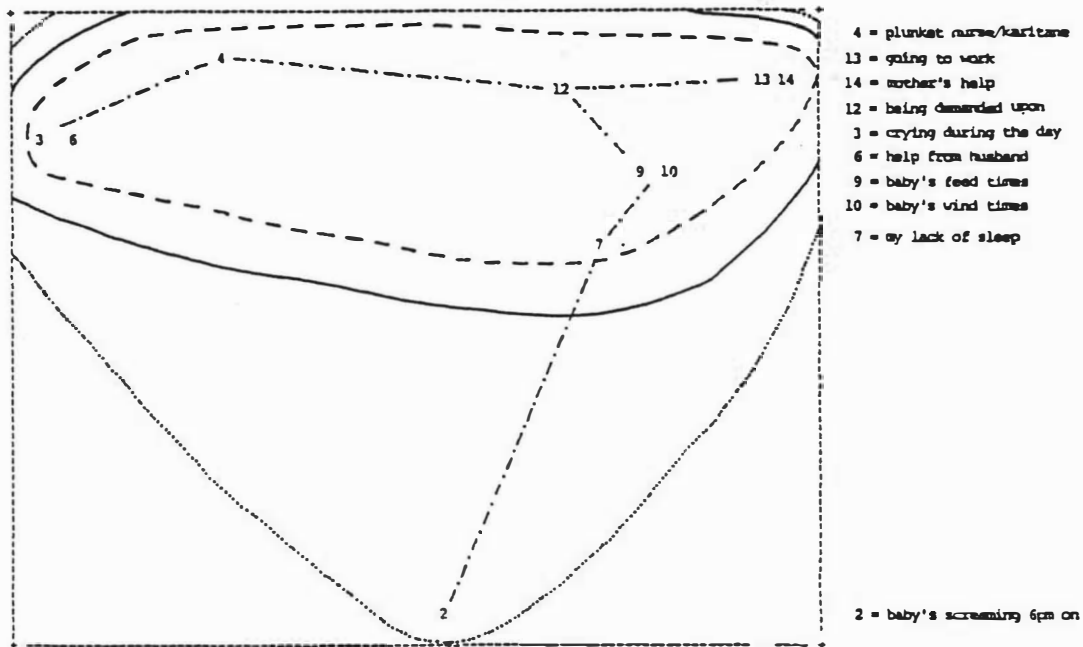
All of the items cluster at 96%. The ratings indicate that the cluster is a positive one. The spread of the items in the profile reflects the greatest differentiation possible where all of the items have been rated with 1s and 2s.

Feelings (Constructs)

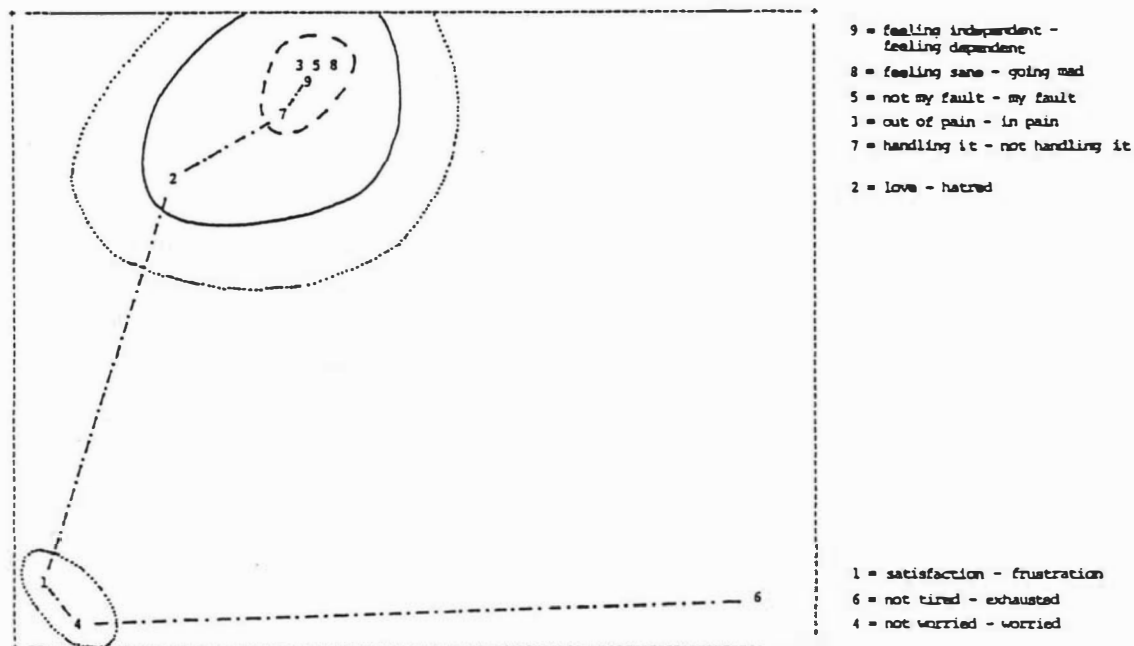
Two constructs do not cluster at 96% with the main group. These are construct 6 'not tired-exhausted', and 4 'not worried-worried'. All of the constructs cluster at 88%.

Appendix I -continued

Fourth Clustered Personal Profile



Clusters of Items. - - - - joins most similar items.
 The clustering levels are: - - - - = 96%, — = 92%,
 = 88%.



Clusters of Constructs. - - - - joins most similar constructs.
 The clustering levels are: - - - - = 96%, — = 92%,
 = 88%.

Fourth Personal Profile: Explanatory CommentsItems

One item, 'baby's 6 pm on screaming', is unclustered at 92% with all of the other items, but is included in the cluster at 88%.

Feelings (Constructs)

Constructs 1 and 4 form a cluster at 88%. The following constructs form a cluster at 92%:

- 2 'love-hatred'
- 3 'out of pain-in pain'
- 5 'not my fault-my fault'
- 7 'handling it-not handling it'
- 8 'feeling sane-going mad'
- 9 'feeling independent-feeling dependent'.

Construct 6 'not tired-tired', remains unclustered at 88%.

Appendix I -continued

Infant Profile Ratings for Participant B; weeks 1 to 4

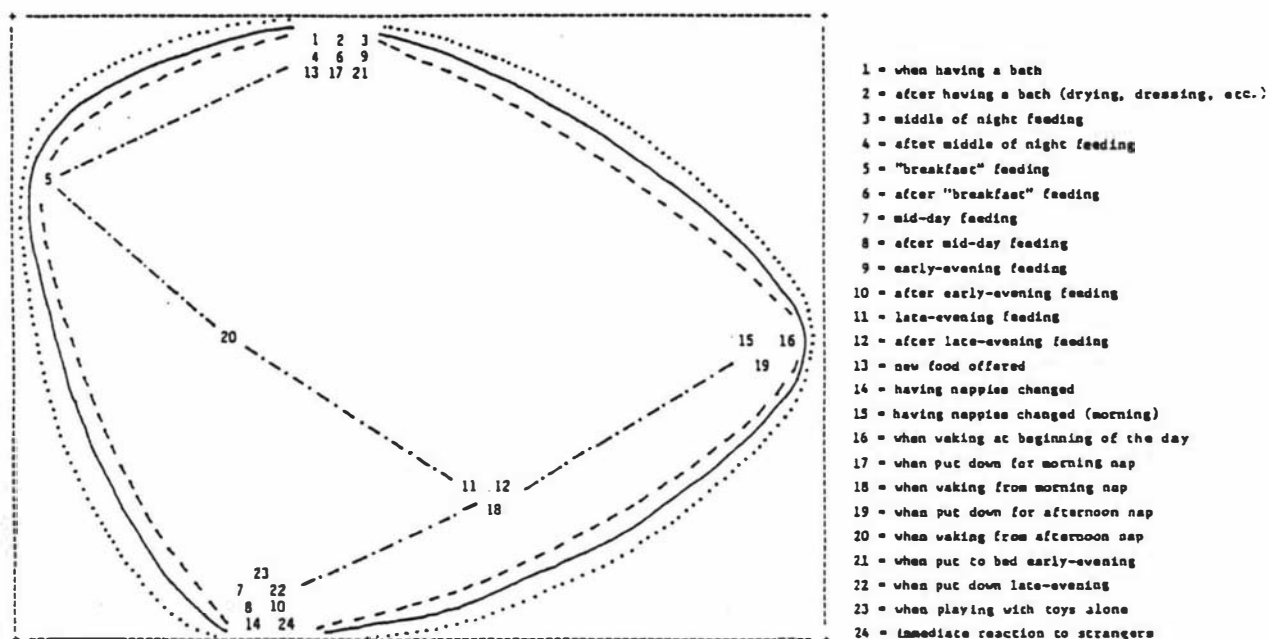
Profile 1	Profile 2
*	
555545445444545554545444	4321322241-1244342424322
5555544545554555555444	5331323242-1244343434332
55555445444544454455444	5312222242-124432222322
55555445444544454445444	3312222242-2334342424332
5555555555555555555555	342223242-2245441424322
5555555555555555555555	442222243-2345444444322
Profile 3	Profile 4
44--422443222444---4-42	24--422244214422----422
44--323443222233---4-42	34--322242213223----422
34--234322232222---4-22	44--222242213222----422
44--224322232222---4-22	44--232242212222----422
44--324444243333---4-41	44--222242212322----422
44--444444243234---4-41	34--422242212222----422

* Columns correspond to ratings for a situation, rows correspond to ratings for an attribute.

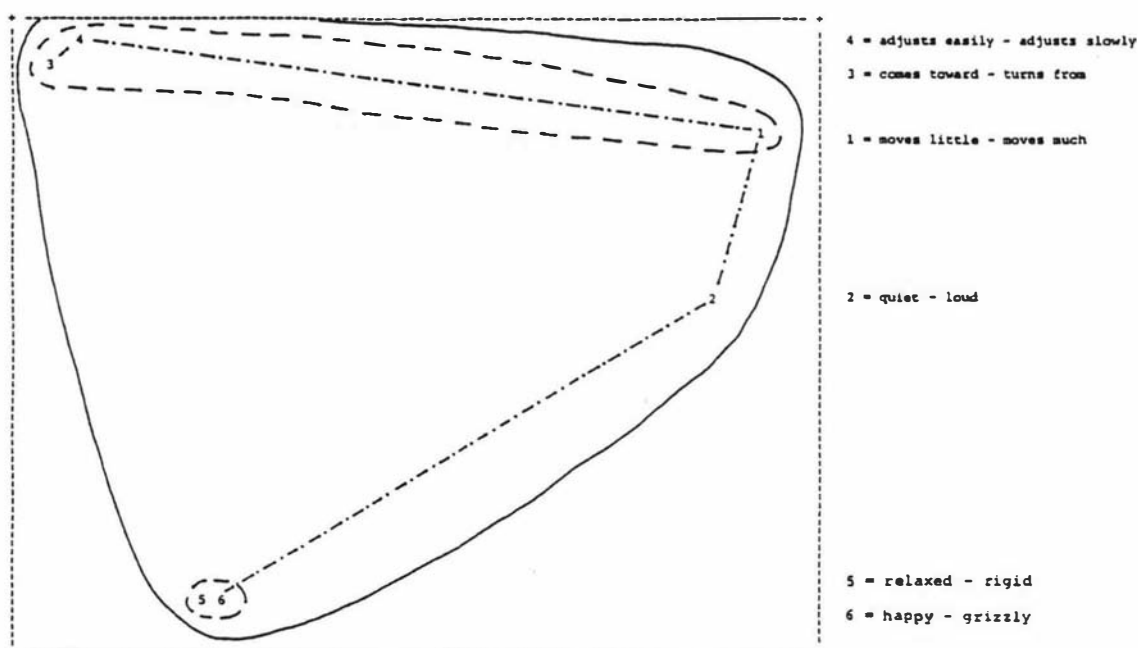
** The symbol '-' indicates that the mother deleted this situation from the profile.

Appendix I -continued

First Clustered Infant Profile



Clusters of Situations. - - - - joins most similar situations.
 The clustering levels are: - - - = 96%, — = 92%,
 = 88%.



Clusters of Attributes. - - - - joins most similar Attributes.
 The clustering levels are: - - - = 96%, — = 92%,
 = 88%.

First Infant Profile: Explanatory Comments

Situations

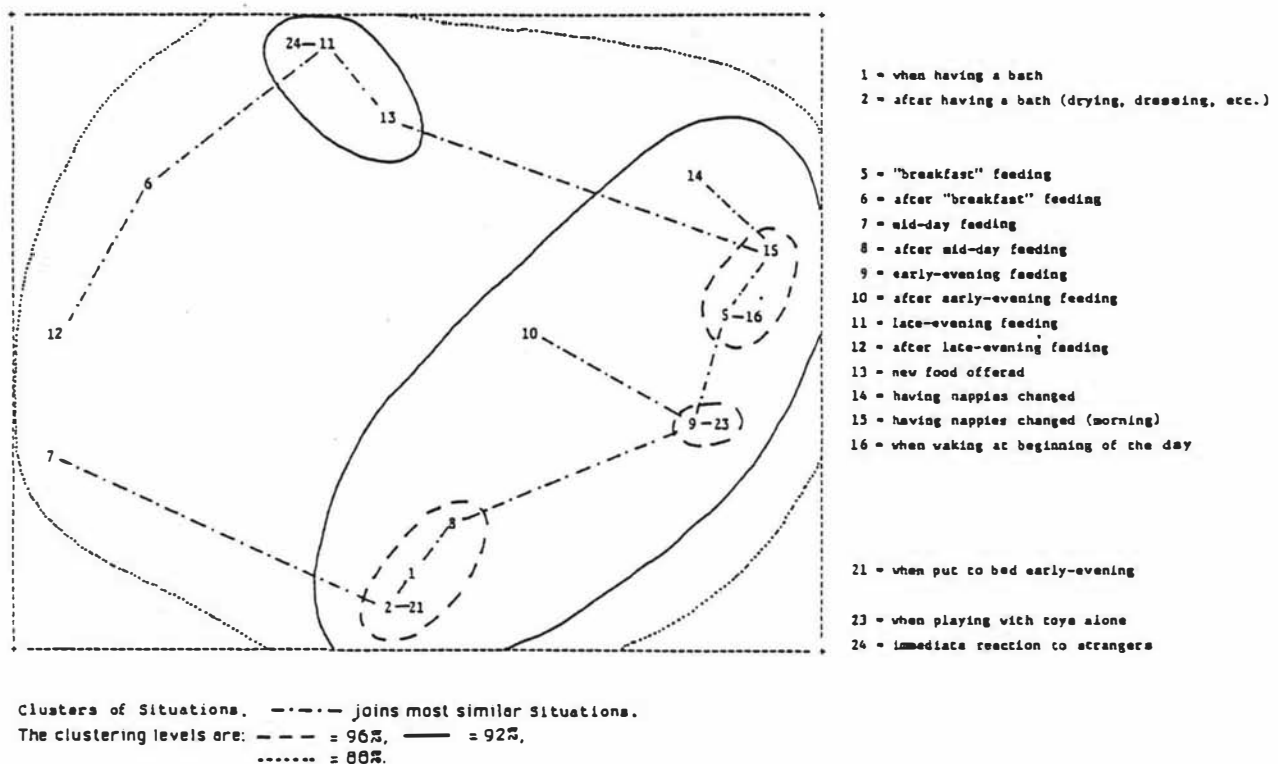
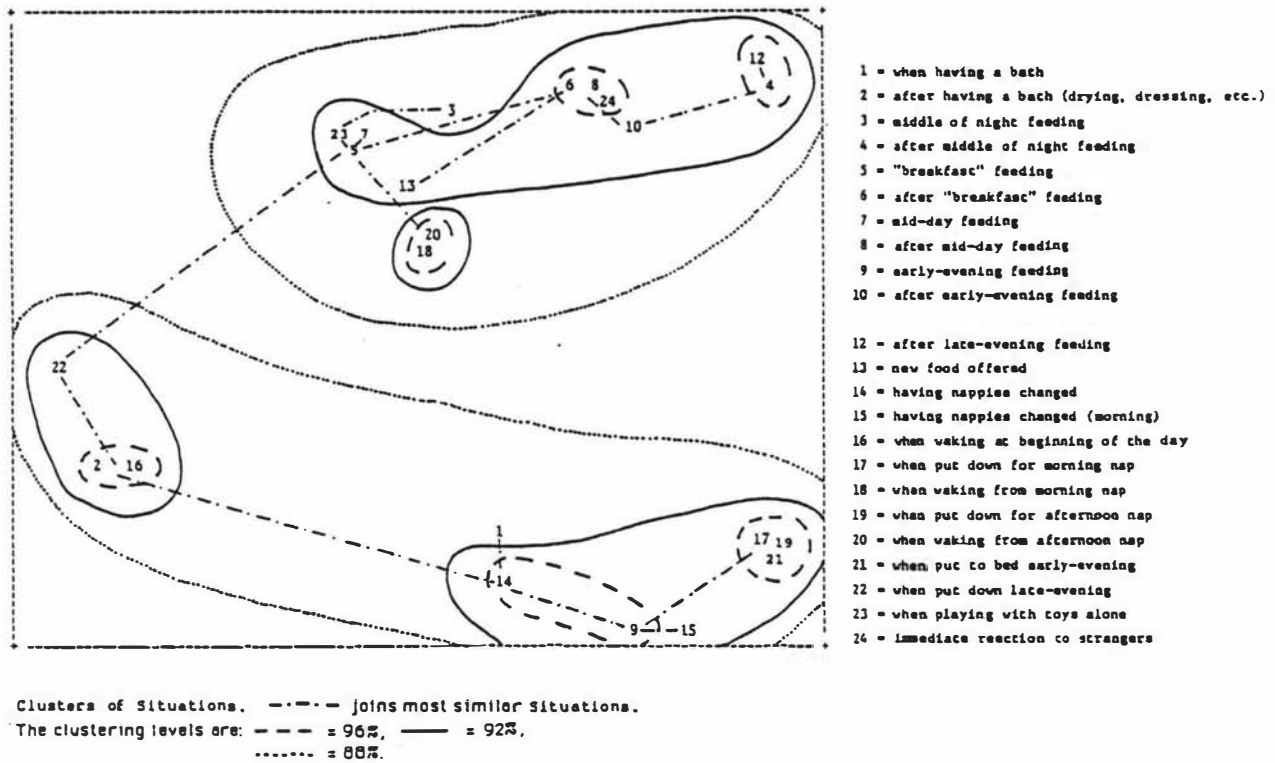
All of the situations in the first profile cluster at 96%. The ratings have all been made with 5s and 4s.

Attributes

There are two clusters of attributes at 96%, and these become one cluster at 92%. Because all of the attributes in the subsequent profiles cluster at 88% or above, the visual displays for these have not been included.

Appendix I -continued

Second and Third Clustered Infant Profiles



Second Infant Profile: Explanatory Comments

Situations

There are six clusters at 96%. The cluster at the base of the profile consists of situations 9 'early-evening feeding', and 14 'having nappies changed (morning)'. These situations have been rated with mainly 4s.

These six clusters become four clusters at 92%, and situations 1 'when having a bath', and 3 'middle of the night feeding', are unclustered. However, all of the situations cluster in two groups at 88%.

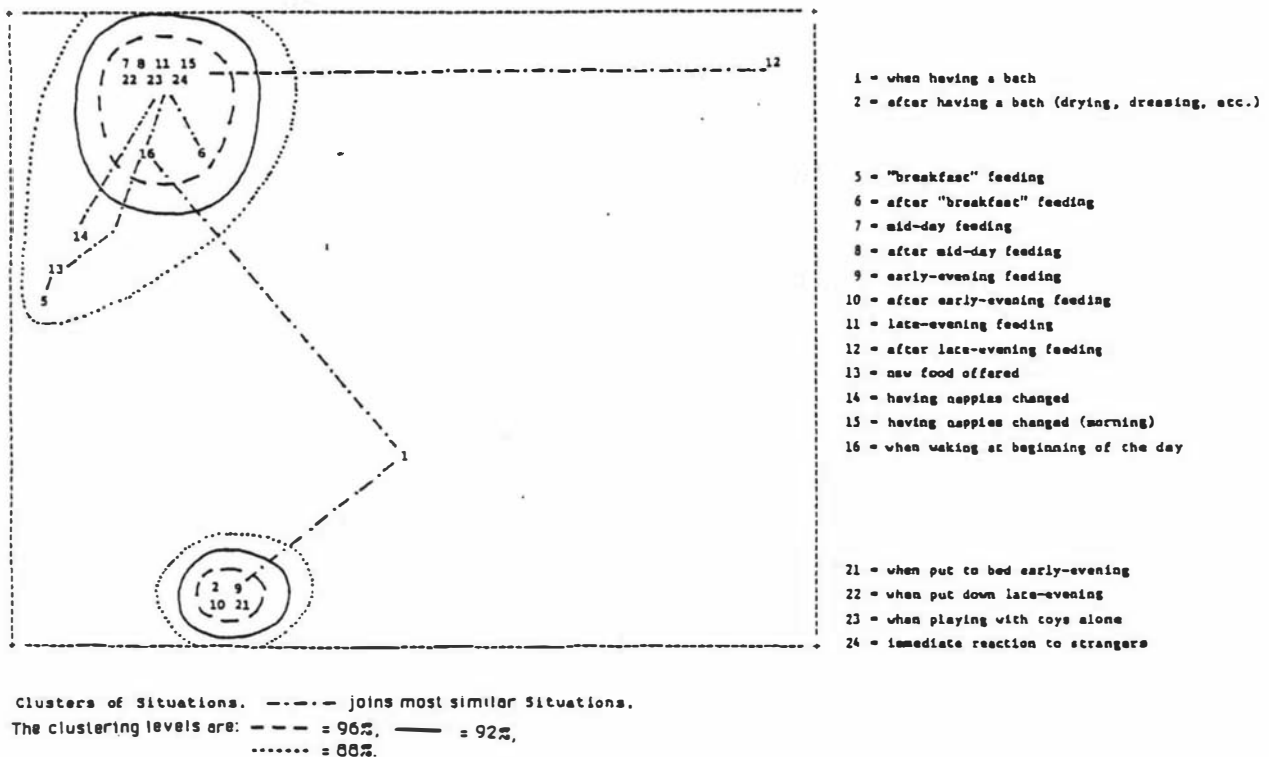
Third Infant Profile: Explanatory Comments

Situations

The three clusters evident at 96% become less differentiated at 92% to make two clusters. All of the situations form one cluster at 88%.

Appendix I -continued

Fourth Clustered Infant Profile



Fourth Infant Profile: Explanatory Comments

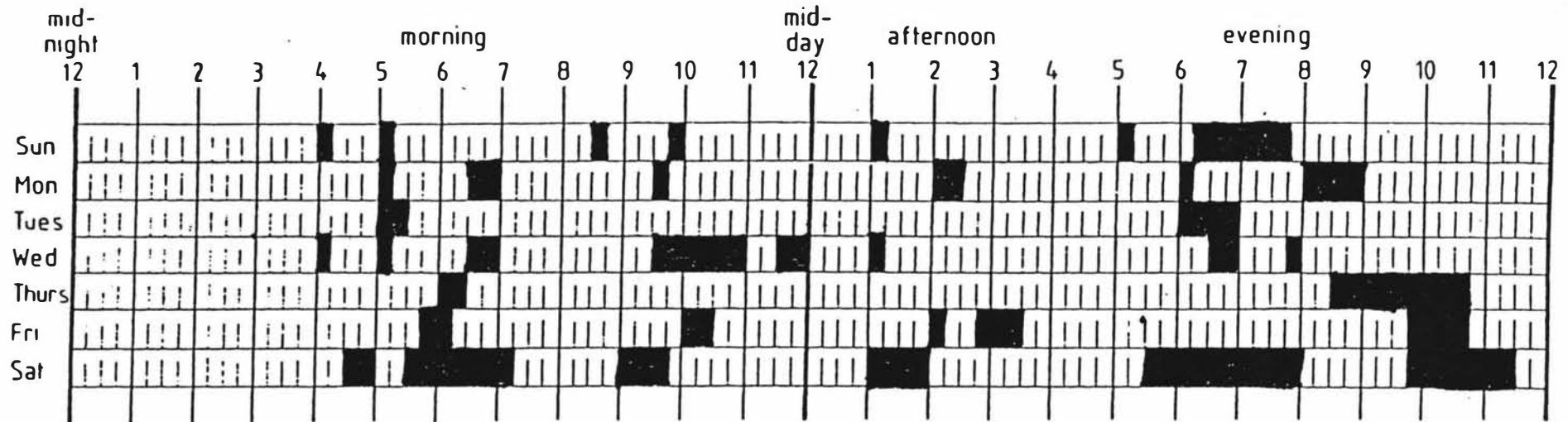
Situations

Two clusters of situations remain constant from 96% to 88%. The differentiation remains because the situations in the bottom cluster, numbers 2,7,8, and 15, have been rated with 4s, while those in the top cluster have been rated with mainly 2s.

Diary form Parent name: _____ baby's name: _____ Start date: _____

Each of the little boxes stands for 15 minutes. When you have completed this sheet go onto another diary form.

For the present form: _____



Comments:

Sunday:

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

Saturday:

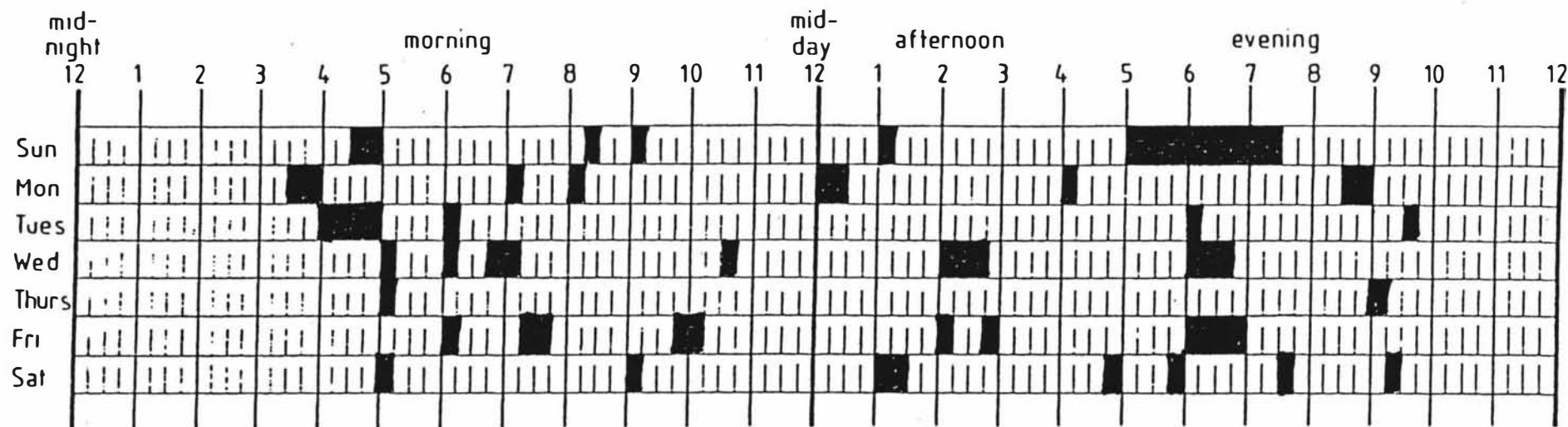
Diary form

Parent name: _____

baby's name: _____ Start date: _____

Each of the little boxes stands for 15 minutes. When you have completed this sheet go onto another diary form.

For the present form: _____



Comments:

Sunday:

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

Saturday:

Diary form Parent name: _____ baby's name: _____ Start date: _____

Each of the little boxes stands for 15 minutes. When you have completed this sheet go onto another diary form.

For the present form: _____

	mid- night 12	1	2	3	4	5	6	7	8	9	10	11	mid- day 12	1	2	3	4	5	6	7	8	9	10	11	12
	morning												afternoon			evening									
Sun																									
Mon																									
Tues																									
Wed																									
Thurs																									
Fri																									
Sat																									

Comments:

Sunday:

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

Saturday:

Appendix I -continued

Evaluation of Methods Used in the Study

Name: Participant B

Indicate the category a, b, or c which describes best how you found each method used in the research.

Personal Profile

a. very useful b. useful c. not very useful

Comments: It made me see things I didn't see, that I was blinded from seeing. In the first one, even though everything was bad, you said affection was coming through when we looked at the printout. When you are doing the ratings you , you ask how was this week, and then look back and think it was better this week. I like seeing the printout, you learn more from it.

Infant Profile

a. very useful b. useful c. not very useful

Comments: I felt a lot of the situations should be for an older baby, you go from feed to sleep. From now on I will be going into those other situations. It could have been more relevant to a baby of his age.

Dairy Form

a. very useful b. useful c. not very useful

Comments: It gave the crying patterns. I figured out from week to week when he was going to be a handful at certain times and prepared for it. I hated him for it because I knew I had to expect it. I had his bottles ready.

Appendix J

Case-Study Notes: Participant C

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Interview Notes

Participant C

Gay (23 years) was a trained kindergarten teacher who had been working in an office before the baby was born. The baby was a girl, and Gay's first child. The child's father (in midtwenties) was an accountant. The baby was being breastfed, and was still slightly jaundiced, needing a lot of little feeds. The paramedical reported that the baby had been drowsy at birth and that the weight gain was not as good as she would have liked.

Gay reported that her pregnancy has been "good" healthwise, she had a few migraines in the first 4 months, but no sickness. She had worked until 4 weeks before the baby was born. The pregnancy had caused some stress because it was unplanned for just now, they had been saving for a house. (At the time of the interviews the family was living in a small front flat of Gay's parents' house).

The baby was 10 days overdue and the labour had lasted 2 days. Gay had contractions for two nights, then all the final day, with the baby being born 2.37a.m. of the following day. The father had been present, and they had held the baby straight away and been left with the baby for an hour.

The baby was in Gay's room during the day time in hospital, and went to the nursery at night, except for night feed-times. On the third day the baby had a drain through her nose to take away mucous. She didn't suck the nipple properly for the first 2 days, and was bottlefed during this time. They left the hospital on the 6th day.

First Interview Notes (1 3/4 hours)

Researcher's impressions. Gay was finishing feeding the baby when the interview began. The baby is small, with a lot of dark hair. Gay seems to be proud of her and plays with the baby's hands a lot. The flat is very small, and has quite a lot of furniture. Gay is not a small person, although not large either, but there is a sense of being cramped. The baby shares a small bedroom with the parents

right next door to the lounge/dining room. The baby settled there after her feed.

Gay's description of being at home with the baby.

On looking back, I should have stayed in the hospital for another 2 or 3 days. My confidence was only just beginning when I left the hospital, and it took another 10 days to gain more after I came home. My husband is at work during the day, but my mother is at home 3 days a week, and she helps me.

I have found looking after the baby a shock, I am on 24 hour call. The demands of the baby, and all the things I want to do like the vacuuming, work and so on... I've had to make adjustments. I realise now that the baby comes first, daddy second, and mum third. I didn't feel maternal, and I didn't feel hostile either, but I wondered where the mother-infant bond was. I just felt like I was functioning.

I am used to the baby having short sleeps now. It seemed that the baby cried a lot, she's still scratchy and I rang my mother to help with the crying, and think I know the things to do to help to settle her. She likes being rocked over my shoulder and having me pat her back, and she loves her time with her nappies off. She likes to kick then and I talk to her to soothe her. These things have dawned on me slowly.

My second week with the baby has been a time of getting to know her and getting her used to her pram. I make

sure the baby has what she needs now, whether she's dry, needs changing. She sleeps for half an hour after being settled, and then wakes crying.

I never expected it to be a full-time job. I didn't realise babys' took 100% of your time. I thought they slept and drank. I have to rush to get other things done, the problem is where to get the time, and then to prepare dinner. The baby is always crying when my husband comes home. Dinner time is revolting, I have to shove it down because the baby is always crying.

Gay commented that she doesn't know what happens to one's sex life with a baby, "How on earth is there time to fit it in?"

Note: Items 'me in the morning' and 'me in the afternoons' were differentiated by Gay when the matrix was being compiled. The construct 'feeling a person-not a person' was associated with those items while the concept of being on 24 hour call was being described in more detail by Gay.

Interview Two

Researcher's comments. The baby was asleep during the interview. Gay looked well, she was cheerful, and welcoming. She was interested to see the infant profile especially, and had already completed the second infant profile form. The baby's first profile did not show any high clustering, and the personal profile followed that same lack of clustering.

Gay's comments. She said that the baby was unpredictable with her feed and sleep times, so that there didn't really seem to be any pattern to her routine yet.

The baby had two bad days earlier in the week, but I didn't get hassled, my

mother was there to help, and we took half hour turns in soothing the baby. I feel I have adjusted more to having the baby, I want to be with her, and I don't enjoy the weekends too much when my husband is home. During the week I can just be with the baby and see to her and sort it out quietly. Over the weekend I have to handle the role of wife as well as mother. There are the meals, and John (husband) wants to do the same things as before the baby arrived. I just say to him that he can go, but I have to do what the baby wants.

John is going on a cruise on Wednesday night, and I don't want to stop him, but I feel jealous of his freedom. It will be another 4 months before I have that. I have 6 months maternity leave, and I plan to return to my job then because we really do need the money for the house. I don't really want to leave the baby with anyone else, but it will be for her because she has to have a nice place to live in, with a room of her own. It was my plan to have 2 children in 5 years or so. We were going overseas... until the baby came, but I don't ever look at the baby and wish she wasn't there, or feel resentful to her for interrupting our plans.

Using the personal profile has helped me to be aware of my own feelings. For example, I had got resentful with John on Saturday, but had been aware of what it was and had coped with the feeling. I didn't share that with John. I felt I had been able to put a label on things after doing the

profile, whereas prior to that it had only been all feelings.

It has been really good to have someone to talk to about all the feelings of being a mother and having a new baby. The nurse is just clinical, and my mother is family. Men don't understand the change in your life having a baby makes, it doesn't really affect them, they are away for 8 hours at the job, and just go on as before really. I feel as though there's nothing to say to John after work and I have just been with the baby all day. I miss having people to talk to, I enjoyed that about work.

I am pleased to have my mother's help, but sometimes she does things I don't really want her to do. She might pat the baby when I just want her left alone, but I wouldn't ever tell her because she's such a help.

Interview Three

Researcher's comments. Gay was playing with the baby on the bed on my arrival. The baby was alert, laughing and gurgling, and weighed approximately 4.8 kilos, a weight gain of 184grms in one week. Gay's interest in the profiles, personal and infant, was not as high as it been previously.

Gay's comments.

I think the baby and myself have been able to get into a routine. The baby hasn't been crying much at all now. The nurse said today that she was very impressed with the baby's progress, and I am really pleased about that.

I just didn't expect the baby to be so demanding when I first came home with

her. I can leave her now to amuse herself in the pram with her bits and pieces. When the baby does cry, I pick whether she's hungry, tired, has wet nappies, or is in pain. I have been able to do this a bit this week, but haven't been able to do it before that. I can anticipate the baby's needs now.

Interview Four

Researcher's comments. This was the final interview with Gay, and we went over some of the points that Gay had made in the earlier sessions.

Gay's comments.

Nobody really tells you what it's really like having a baby. A man can decide how a woman feels about these things. John doesn't have to have anything to do with the baby, she hasn't changed his life at all. Women have to cope with the issue, and do, but men don't.

Looking back, ante-natal classes could have dealt more with child care, they don't prepare you for your feelings. I did feel it was the baby's fault because she wasn't planned, and sometimes I still have 'funny' thoughts, but I don't dwell on things.

I never thought I might hit the baby or be capable of hitting her. A couple of times in the night John has been very supportive and patient. I haven't any basis for comparison, so I didn't know how much a baby should cry. I am adjusting to the baby and attend to her. I believe she's telling me something and I shouldn't let her cry. I want her to grow up to trust us, and

know that we care about her as parents.

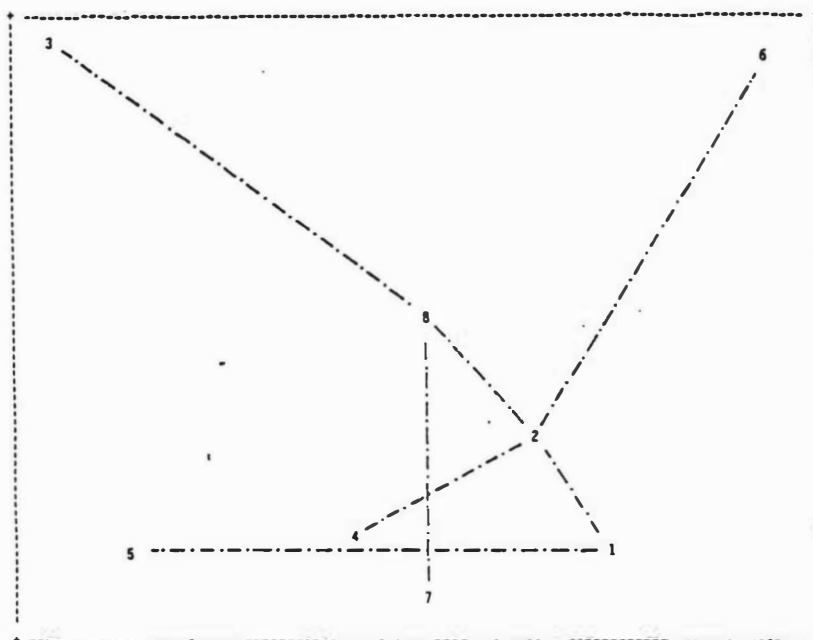
Appendix J -continued

First Personal Profile Matrix

	Items							
feelings constructs	baby's feedtime	baby's crytime	time for housework	dinner time	time with husband	me in morning	me in afternoon	settling baby for sleep
feeling a person- a machine	4	2	1	2	4	2	3	2
not concerned- worried	4	3	3	4	4	2	4	3
knowing what to do- not knowing	3	4	1	3	4	2	4	4
confidence- no confidence	3	3	1	3	2	2	4	4
feeling O.K.- demands as mother	3	3	3	4	3	2	4	4
feeling O.K.- demands as wife	4	4	2	5	4	2	4	2
maternal- not maternal	4	3	2	3	2	4	2	2
not guilty- guilty	2	2	4	5	5	1	1	3

Appendix J -continued

First Clustered Personal Profile



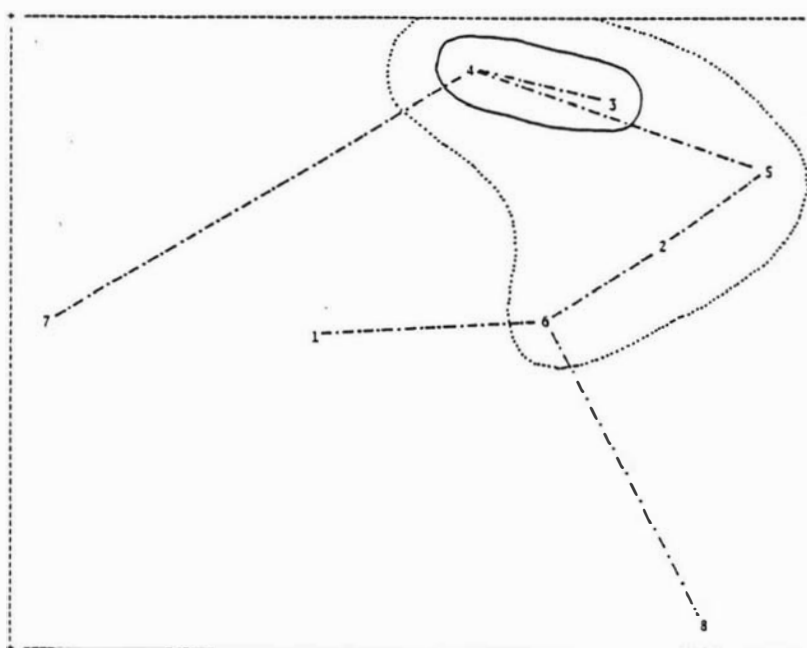
3 = time for housework
6 = me in morning

8 = settling baby for sleep

2 = baby's cry time

4 = dinner time
1 = baby's feed time
5 = time with husband
7 = me in afternoon

Clusters of Items. - - - - joins most similar items.
The clustering levels are: - - - = 96%, — = 92%,
..... = 88%.



4 = confidence - no confidence
3 = knowing what to do - not knowing

5 = feeling ok - demands as a mother

2 = not concerned - worried

7 = feeling maternal - not maternal

6 = feeling ok - demands as a wife

1 = feeling a person - feeling a machine

8 = not feeling guilty - feeling guilty

Clusters of Constructs. - - - - joins most similar constructs.
The clustering levels are: - - - = 96%, — = 92%,
..... = 88%.

First Personal Profile: Explanatory Comments

Items

There is no clustering of the items at 88% or above. The items at the top of the profile have the more positive ratings. The profile ratings are shown on the profile matrix.

Feelings (Constructs)

Two of the eight constructs cluster at 92%, and five cluster at 88%. The constructs unclustered at 88% are;

- 1 'feeling a person-not a person'
- 7 'feeling maternal-not maternal'
- 8 'not feeling guilty-feeling guilty.'

Appendix J -continued

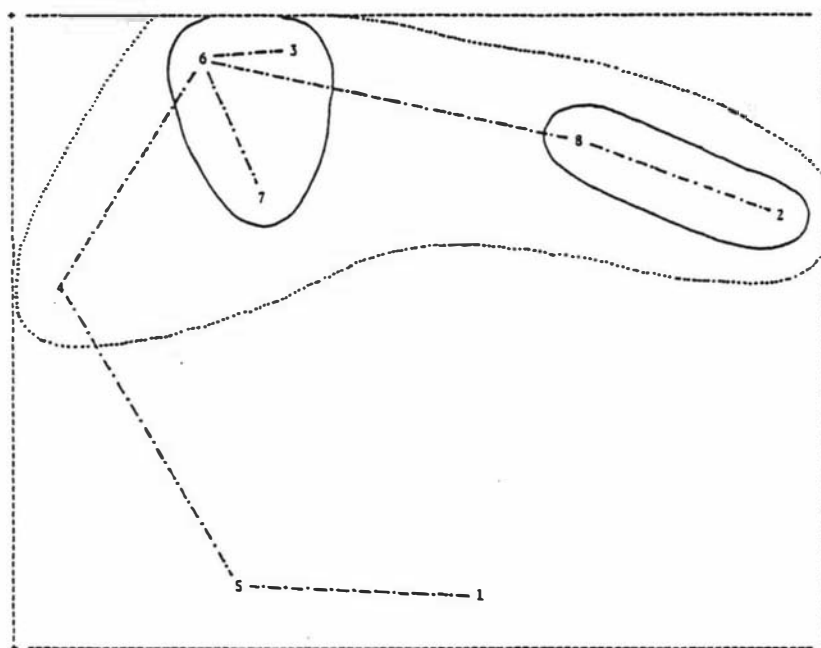
Personal Profile Ratings for Participant C; weeks 2 to 4

Profile 2	Profile 3	Profile 4
*		
32223232	22222132	12323123
33223232	22123121	12123112
32123112	22113111	12212123
32112112	21112111	12312113
21223221	11112111	13221133
32133222	22123222	13232232
32211111	11111111	11111112
21133111	11133111	11122111

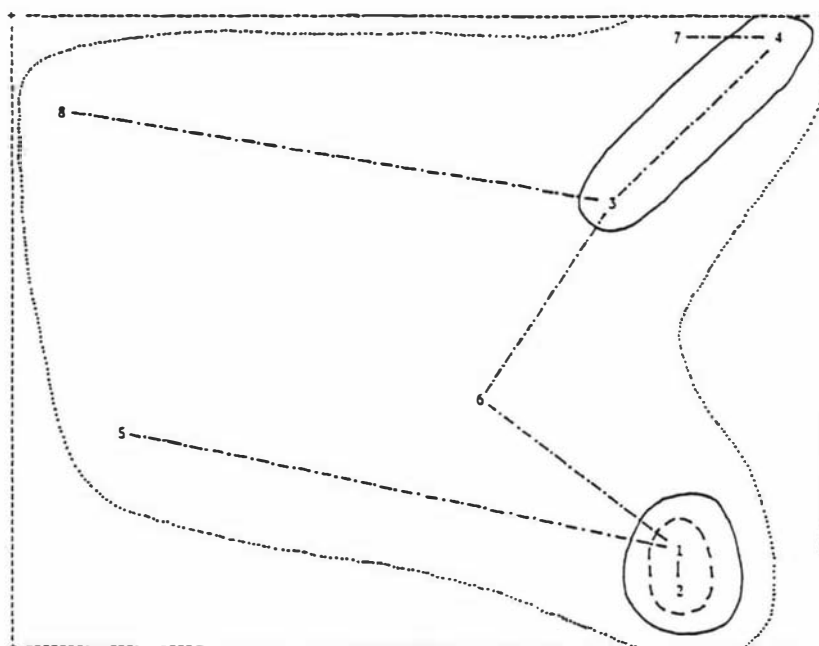
* Columns correspond to ratings for an item, rows correspond to ratings for a construct.

Appendix J -continued

Second Clustered Personal Profile



Clusters of Items. - - - - joins most similar items.
The clustering levels are: - - - = 96%, — = 92%,
..... = 88%.



Clusters of Constructs. - - - - joins most similar constructs.
The clustering levels are: - - - = 96%, — = 92%,
..... = 88%.

Second Personal Profile: Explanatory Comments

Items

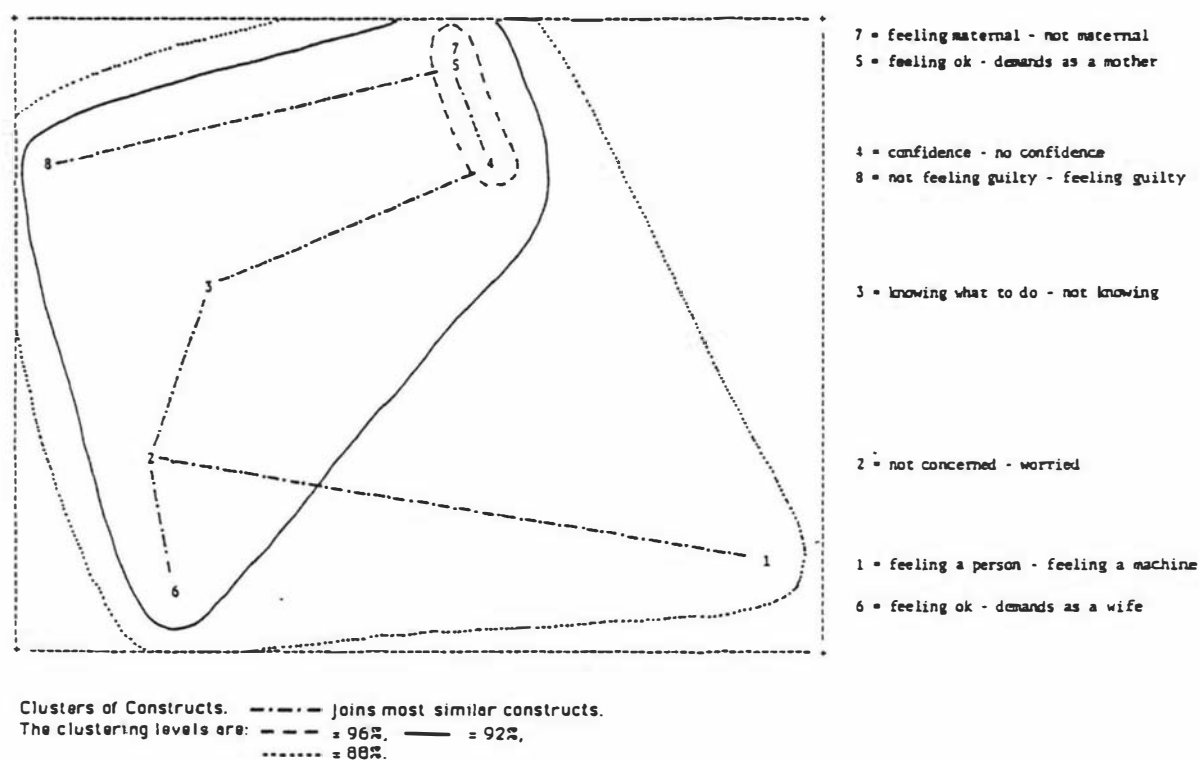
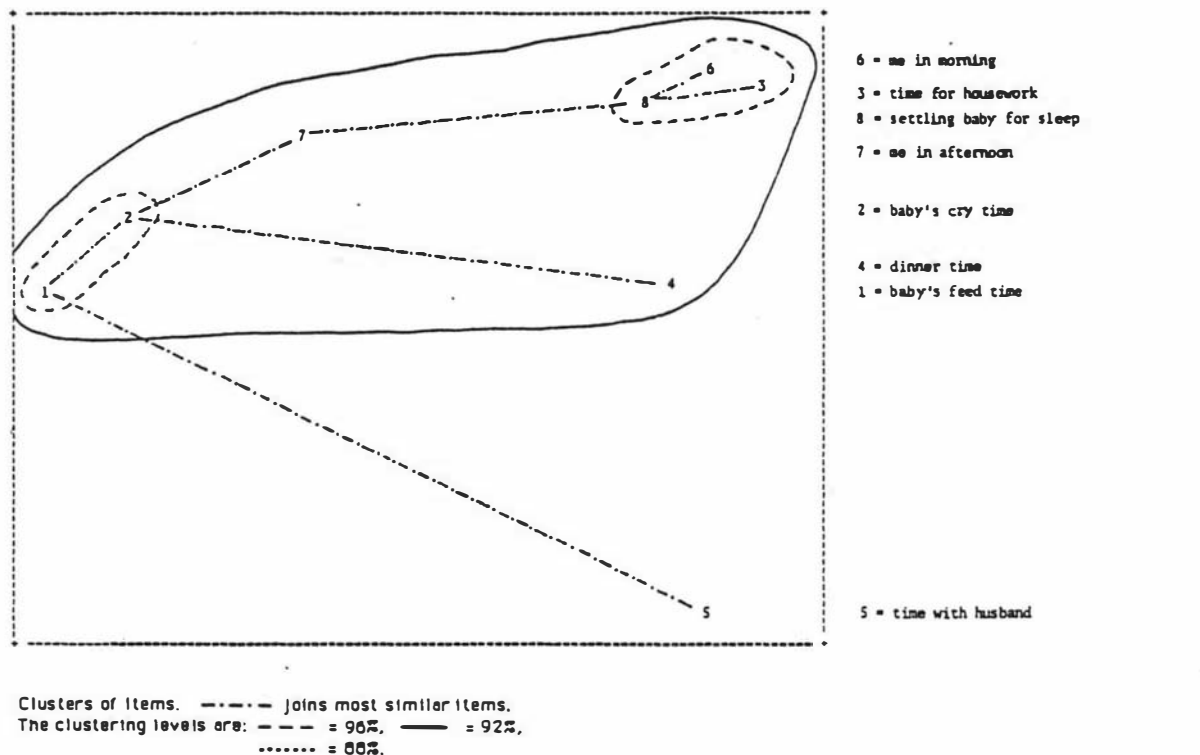
The items all cluster at 88%, except for item 5 'time with husband', and item 1 'baby's feedtimes'. None of the ratings for this profile are in the negative range, that is with 4s or 5s, so the differentiation in the items shown by the spread in the profile is between the least positive and most positive ratings.

Feelings (Constructs)

There are two clusters of constructs at 92%, but all of the constructs cluster at 88%.

Appendix J -continued

Third Clustered Personal Profile



Third Personal Profile: Explanatory CommentsItems

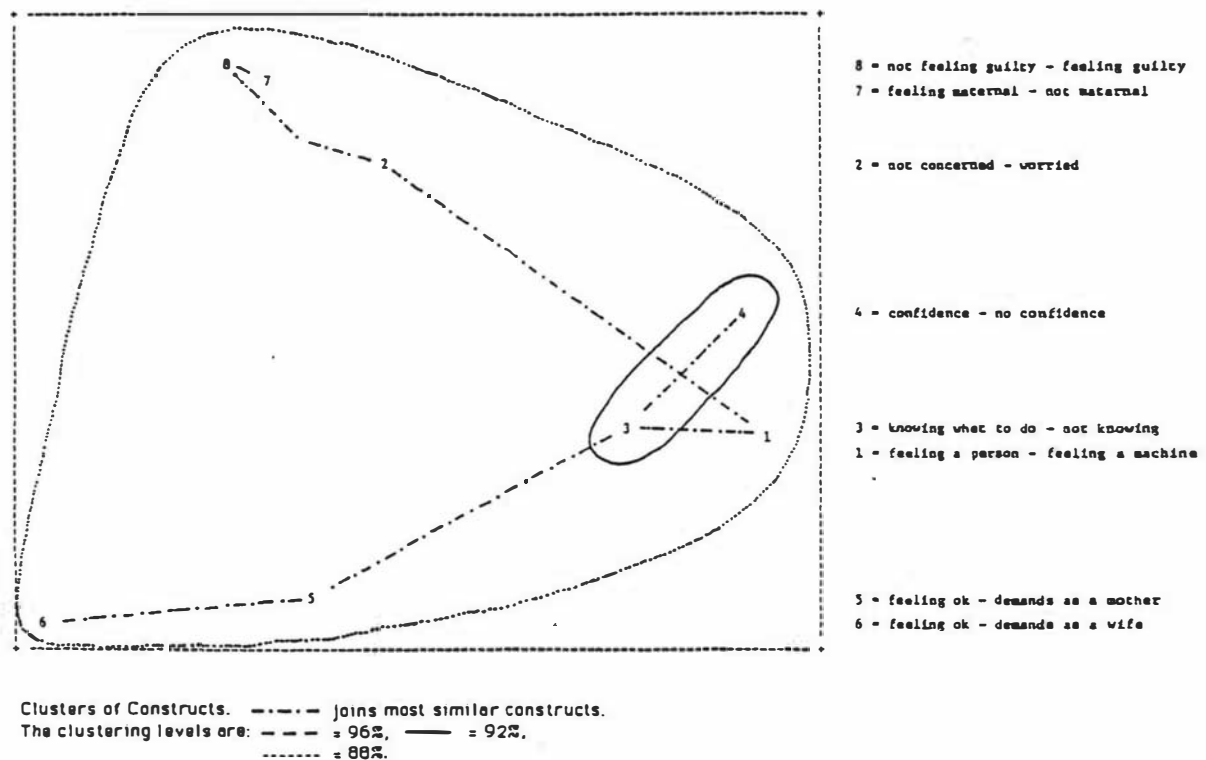
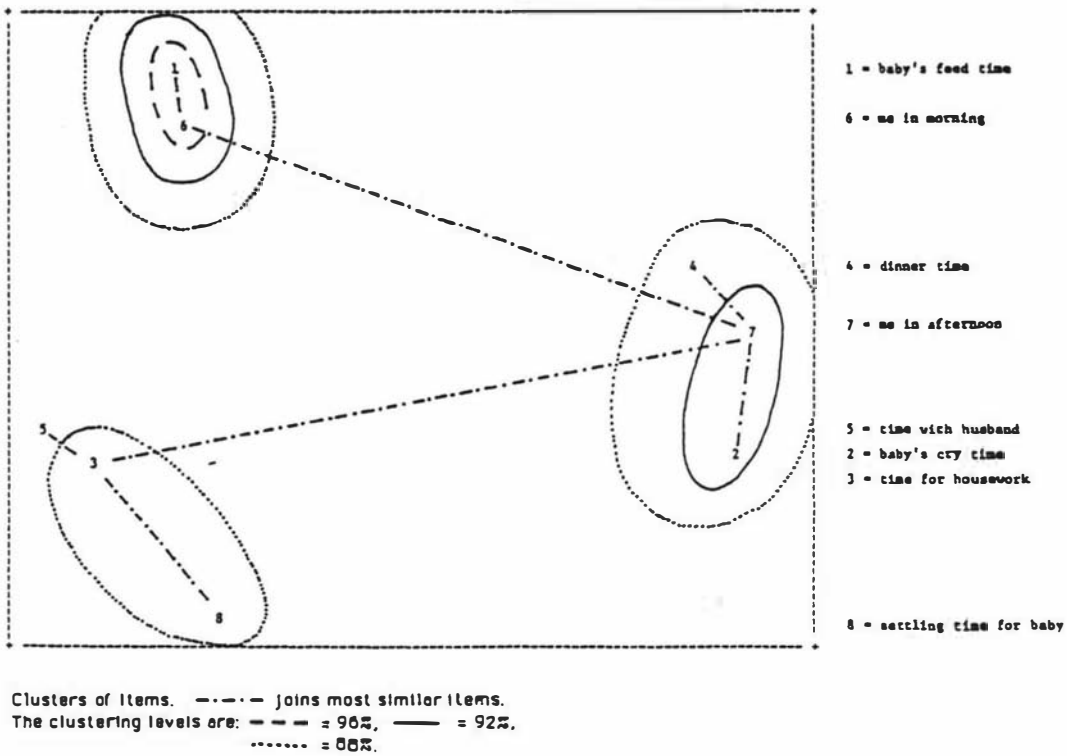
All of the items cluster at 88%, except for item 5
'time with husband'.

Feelings (Constructs)

The constructs cluster in one group at 88%.

Appendix J -continued

Fourth Clustered Personal Profile



Fourth Personal Profile: Explanatory CommentsItems

There are three groups which cluster at 88%, while item 5 'time with husband'. remains unclustered at this level. The most positive cluster is at the top of the profile and is made up of item 1 'baby's feedtimes'. and item 6 'me in the mornings'.

Feelings (Constructs)

All of the constructs cluster at 88%.

Appendix J -continued

Infant Profile Ratings for Participant C: weeks 1 to 4.

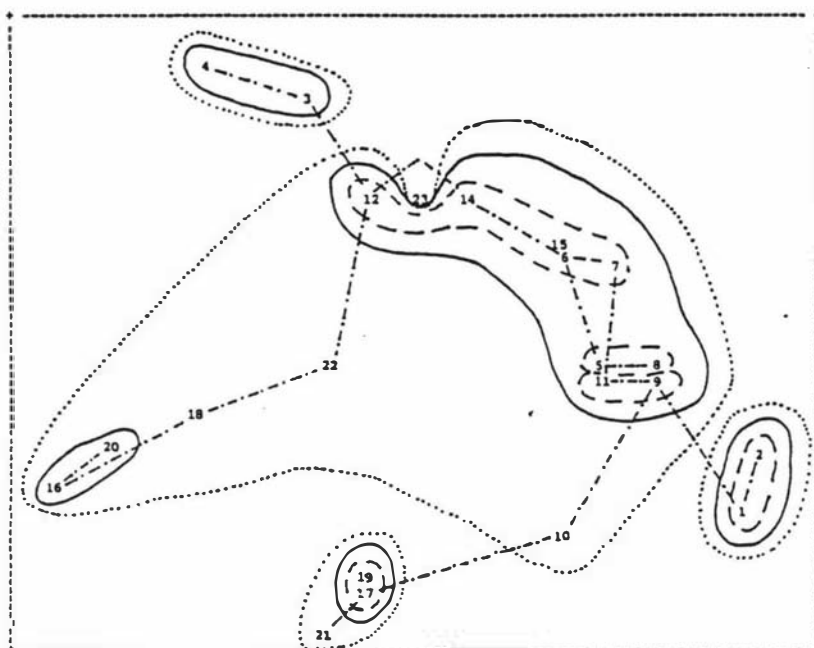
Profile 1		Profile 2	
*	**		
441133344432-	3323232224-	342132223332-	432323232-1
551133434442-	2323232421-	442122224322-	232434242-1
332122222222-	2244244421-	441122222222-	232433232-3
22212222422-	2244444433-	34122222322-	332424342-3
441132232322-	2213232432-	441222324322-	332423232-3
431132234442-	22444443432-	441232224322-	242423244-2
Profile 3		Profile 4	
33212233232-	133132333331	121132333311-	31132313242
34213213222-	223132333311	121132323311-	13133313232
34212213121-	222122323212	121111222211-	32132313113
33112112111-	122122334415	121111221211-	12132312114
33111113111-	122132333313	121111211211-	13132313112
34111112311-	122133434413	221121213211-	13131314212

* Columns correspond to ratings for a situation. rows correspond to ratings for an attribute.

** The symbol '-' indicates that the mother deleted this situation from the profile.

Appendix J -continued

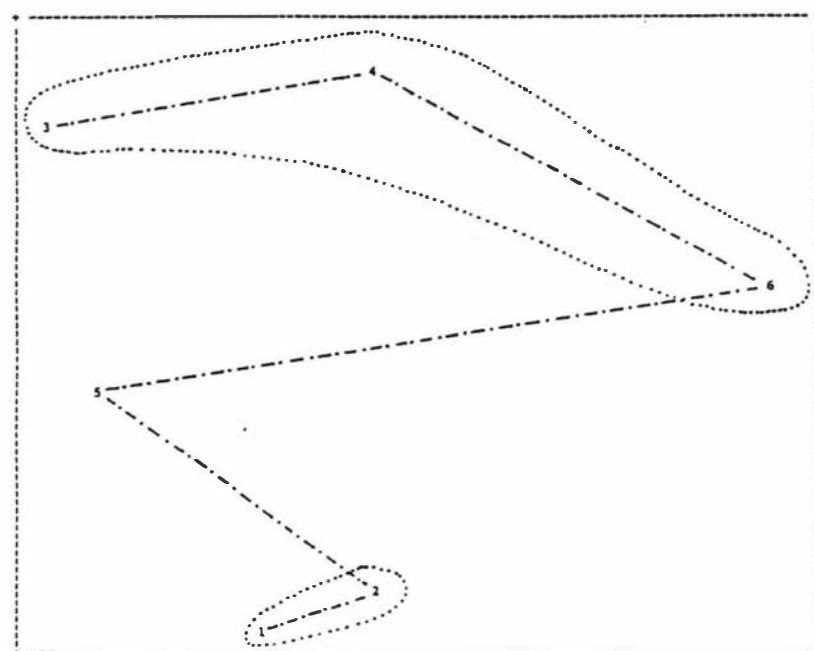
First Clustered Infant Profile



- 1 = when having a bath
- 2 = after having a bath (drying, dressing, etc.)
- 3 = middle of night feeding
- 4 = after middle of night feeding
- 5 = "breakfast" feeding
- 6 = after "breakfast" feeding
- 7 = mid-day feeding
- 8 = after mid-day feeding
- 9 = early-evening feeding
- 10 = after early-evening feeding
- 11 = late-evening feeding
- 12 = after late-evening feeding

- 14 = having nappies changed
- 15 = having nappies changed (morning)
- 16 = when waking at beginning of the day
- 17 = when put down for morning nap
- 18 = when waking from morning nap
- 19 = when put down for afternoon nap
- 20 = when waking from afternoon nap
- 21 = when put to bed early-evening
- 22 = when put down late-evening
- 23 = when playing with toys alone

Clusters of Situations. - - - - joins most similar Situations.
 The clustering levels are: - - - = 96%, — = 92%,
 = 88%.



- 4 = adjusts easily - adjusts slowly

- 3 = comes toward - turns from

- 6 = happy - grizzly/crying

- 5 = relaxed - tense

- 2 = quiet - loud

- 1 = moves little - moves much

Clusters of Attributes. - - - - joins most similar Attributes.
 The clustering levels are: - - - = 96%, — = 92%,
 = 88%.

First Infant Profile; Explanatory Comments

Situations

There are four clusters of situations at 96%. The cluster at the base of the page, situations 10 'after early-evening feeding' and 21 'when put to bed early-evening', have been rated with 5s. The situations in the cluster at the top of the profile have ratings of 2s and 1s.

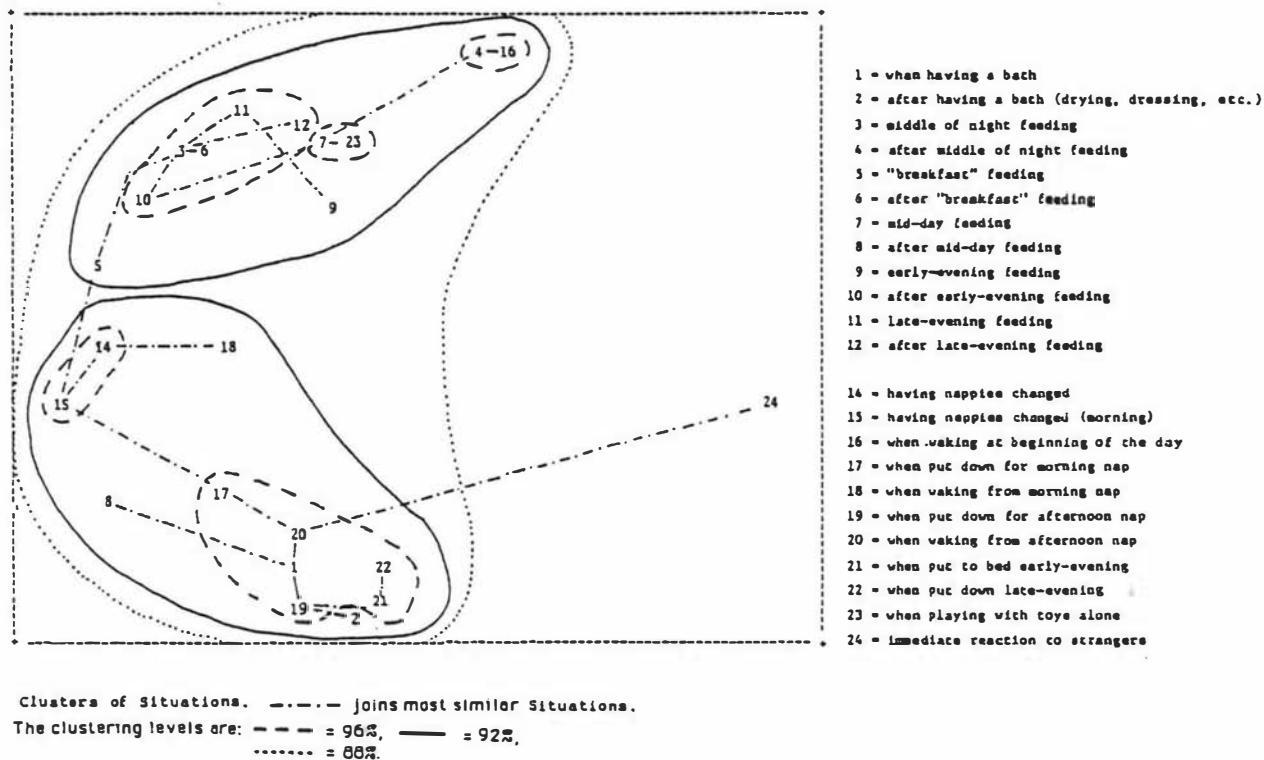
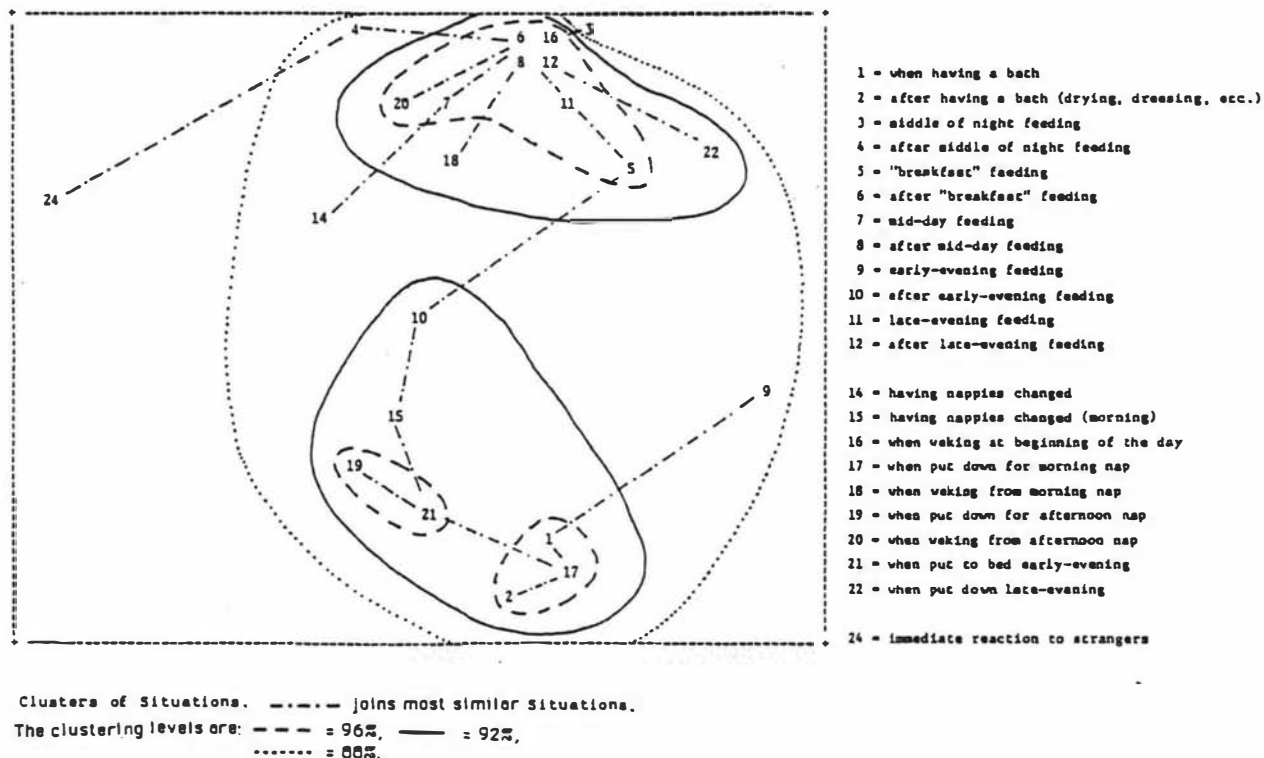
There are five clusters at 92%, and these become two only at 88%.

Attributes

Attributes 1 'moves little-moves much', and 2 'quiet-loud', cluster at 92%, and all of the attributes form one cluster at 88%. Because the attributes in the subsequent profiles for this participant cluster at 88% or above in a manner similar to the first profile, the visual displays are not included.

Appendix J -continued

Second and Third Clustered Infant Profiles



Second Infant Profile: Explanatory Comments

Situations

There are four clusters at 96%. Ungrouped situations are:

- 1 'when having bath',
- 11 'late-evening feeding',
- 14 'having nappies changed (morning)',
- 24 'immediate reaction to strangers'.

These ungrouped situations become clustered at 92% with the cluster at the base of the profile.

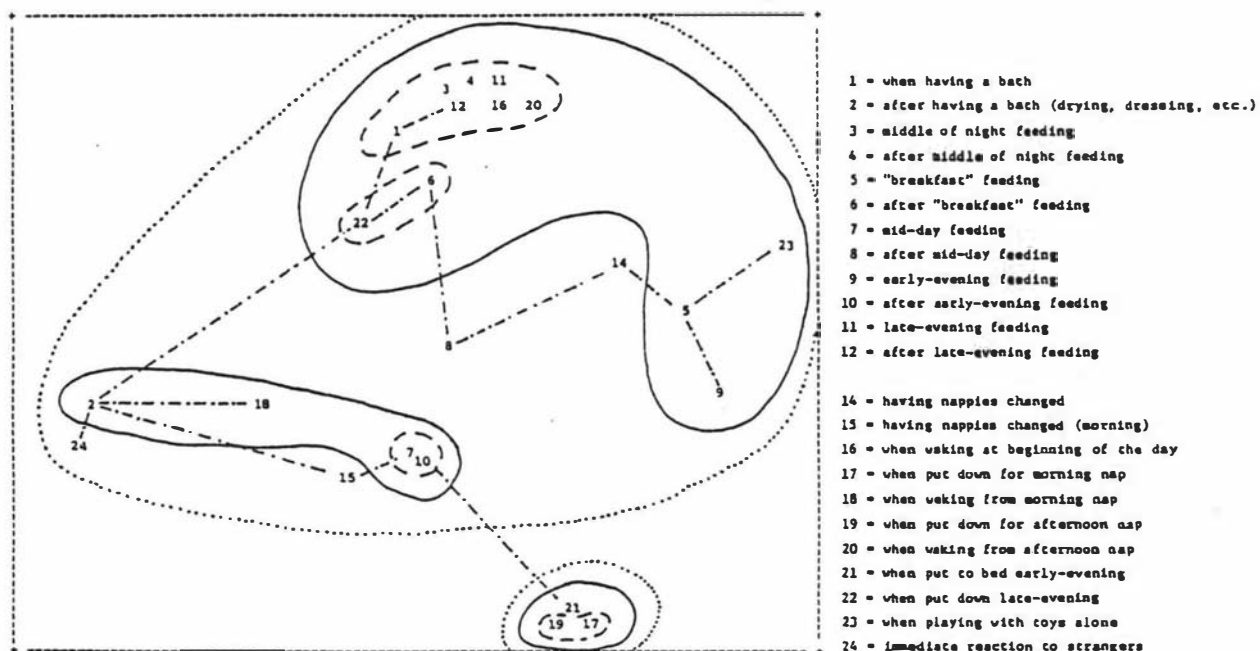
Third Infant Profile: Explanatory Comments

Situations

All of the situations become one cluster at 88%, and the ratings at this level tend to be 3s.

Appendix J -continued

Fourth Clustered Infant Profile



Clusters of situations. - - - - joins most similar situations.
 The clustering levels are: - - - = 96%, — = 92%,
 = 88%.

Fourth Infant Profile: Explanatory Comments

Situations

Four clusters are evident at 96%, with situations 12 'after late evening feeding', and 20 'waking from afternoon nap', being positioned at the base of the profile. The situations that formed the bottom cluster in the previous profile were numbers 19 and 10.

Two clusters only are present at 92%, and these become one cluster at 88%.

Appendix J.-continued

Evaluation of Methods Used in the Study

Name: Participant C

Indicate the category a, b, or c which best describes how you found each method used in the research.

Personal Profile

a. very useful b. useful c. not very useful

Comments: It was good to see things getting better. I made a clean sheet while rating. It made me more aware of my feelings. Since I did the profiles, I try not to let things make me anxious. Once a feeling is dealt with, it doesn't need to be redealt with.

Infant Profile

a. very useful b. useful c. not very useful

Comments: I could see the patterns. It was difficult to do because the pages were all on top of one another, but I did a comparison thing while I was filling it in. It was good if things had improved, it was another hurdle over. The clusters were useful for the patterns. I'd think 'you're fighting it. (the baby) it's not my fault'.

Diary Form

a. very useful b. useful c. not very useful

Comments: Not used.

Appendix K

Case-Study Notes: Participant D

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Interview Notes

Participant D

Liz (30 years) had been married 18 months when the baby, her first, was born. The baby was male, and 2 weeks premature. Her husband (35 years) was an insurance underwriter. Liz holds a bachelor's degree in geography, but worked for the last 8 years in business. She was an executive secretary directly responsible to 6 executives, and had worked until 4 weeks before the baby's birth. The baby was 11 weeks old at the first interview, and was breastfed.

Describing her pregnancy, Liz said it had been "O.K." and that she had not been sick at all. She said that her labour period had also gone "O.K.", but it was quite long, 16 hours. The contractions had stopped during labour and she had to force the baby down herself. She was relieved that this had saved having a forceps delivery, but there was a small episiotomy. Her husband had been present during the delivery and they had held the baby afterward. Liz stayed in hospital 9 days, and the baby roomed-in with her.

First Interview Notes (2 1/4 hours)

Researcher's impressions. The baby was asleep at the beginning of the interview, but woke crying during that time. Liz took me through to the baby's cot while she picked him up, and she talked about the ways she has dealt with the crying over the last 2 1/2 months. She appeared concerned about the crying. The overall impression was that Liz was a competent person who was, perhaps, feeling less so with her baby than she felt she should have.

Liz's description of being at home with the baby.

I wish I stayed in hospital longer. I was just beginning to get some confidence, but lost it all when I came home. I had no experience of looking after babies. I thought they just slept and had no idea of the demands a baby

would make. I felt I knew nothing of what to do for a baby. I expected to learn in hospital, and I didn't.

I worked until 4 weeks before he was born, but had no time to do anything like getting the room ready, and so on. I was pretty tired despite afternoon rests. When I first came home I had a funny feeling of being out of touch with everything, my mind wasn't with what my body was doing. I used to go and lie down then, and not try to do anything. My mother had said she felt like that when she was younger and had two children before she had a nervous breakdown. I felt better then, and stopped worrying.

I was used to being in control at work and knowing what was going to happen. There is no way of telling with the baby, and I worry about whether I'm being a good mother. The baby spills a lot after feeds, but I don't worry about it, I wonder more about the crying times.

The baby has just started to smile and I feel this is really good because I feel as though he appreciates me. I'm not just doing things for him and getting nowhere. I told Gary (the husband) I'm used to being told when things are well done at work, and there's no-one to say it at home. I asked him to please tell me when I've done a good meal or something. He's doing it now, and even though I've told him to say it, it's still good, and he's getting the hang of it now.

We wanted a baby before we got too much older. I've been a single girl, and don't really know too much about small babies. I want to spend a lot of time with him. I hadn't really thought about him as a little baby, I had only thought of him more when he's older and I can read to him and do homework together. I miss my dinner times with Gary because the baby cries then. The times for talking to Gary have also gone.

Note: When the matrix was being completed, Liz became really involved and wanted to differentiate specifically the following baby times; 'baby sleeping', 'baby crying when waking', and 'taking baby out'. The following items were differentiated about herself; 'working when the baby is sleeping', 'time with other mothers', and 'no thinking time'.

The constructs elicited for these items were; 'delight-baby frustration', 'delight-domestic frustration', 'happy-depressed', 'not crying-feeling like crying', 'feeling the baby doesn't fit in with me-fitting in with me'.

The exercise of compiling the matrix appeared to be a time of categorisation for Liz. She was able to sort out those items she wanted fairly quickly once she saw the purpose of the matrix. The age of the baby (11 weeks) may have made a contribution to Liz's being able to categorise these items so clearly.

Interview Two

Researcher's comments. Liz was interested in the profile results, but was also keen to talk about what was happening with the baby and his crying. She feels she has done a lot of sorting out now, and that things are starting to 'gel' for her.

Liz's comments.

I'm trying this week to leave the baby for 10 minutes after putting him down, to cry for that time, and then he does seem to drop off to sleep. I heard about the idea from the Parents' Association and LaLeche. I usually pick him up when I've had enough crying after each feed. I entertain him between his 4 hourly feeds, and put him on the breast, which is time consuming. I tried having him up for 2 hours and then putting him down, but I stopped that because it didn't make any difference. I have him up for about 1 and a half hours now.

I am trying to make him suit me, trying to ascertain when he's tired. I feel bad about putting him to bed when he's crying, and feel he ought to be quiet when he does go to bed. It's not fair because he only sleeps for 1 1/2 to 1/2 an hour for the last 2 months. Then every now and then he has a big sleep - why? He has probably had a bad night before then. I decided. When he has a good day I think the next day might be better. I don't expect too much.

I read now while I'm feeding the baby. I got the idea from the hospital that you must feed prem. babies straight away. I did this for the first 11 weeks and now I don't. I might have got off to a better start with the baby if I'd done it differently. The hospital is too businesslike, they are running it like a business, which I was used to, but it doesn't work.

New mothers need care. The more I think about hospital, the more I think it's worse. Nurses rushing around all over the place and I didn't like to interrupt. The head nurse wasn't aware of where I was at. They should be more gentle. When they haven't been through the labour with you, they don't seem to know what kind of labour you've had. I was 16 hours in labour, and the length of time must make a difference. It doesn't make the baby a crying baby, but it does affect his mother.

Both the birth experience and coming home with a new baby are more traumatic than people think. It's considered normal in our society to cover up feelings. I talk more about how I feel than most people do. I'm looking forward to when the baby can sit up and amuse himself.

My concept of time is different now. Being at home every day is different from working. At home I don't care whether it's March or January. Every day is the same. watching the baby grow, looking ahead 6 months to when he can do more for himself. Now is very easy... every day I do the same thing. By the time I do all the chores, and then work out how to fit in the warrant of fitness and grocery shopping, little ordinary things make the day not so boring. I'm wondering how I'm going to fit it all in. I can't plan any more. I was frustrated earlier because I couldn't plan, now I accept that and just find a way.

Interview Three

Researcher's comments. Again, Liz wanted to talk about the baby's crying. She was interested in the profiles, but finally decided that she would not fill in the diary forms. (These weren't completed in full over the last 2 weeks).

Liz's comments.

I don't like to complete the diary forms, because if the baby cries it's my decision that he cries. I might say 'oh blow you' and let him have a cry. Sometimes I let him sit in the bounsinette and he yells for about 20 minutes and then stops and relaxes for a while. It's happened twice now, and it's my decision to let him yell.

When the baby cries I go through an analysis process of why. He has different cries but I don't really know what they are. I've only been able to discriminate in the last week or so. There are three categories, some pain cries, when I give him mebentyl, an ordinary baby cry, where he goes wa,wa,wa, and a frustrated cry when he goes hoarse, a 'come and get me or else' cry. My husband says he's being naughty then. Sometimes I let him cry and do it, and sometimes I don't. I pick him up. There weren't too many changes in the sounds of the cry earlier, but he's not crying as much as he was.

The frustrated cry tends to be after his feed, particularly late in the afternoon. He's an enigma. Some days

he sleeps and other days he doesn't. He seems to get bored now, but I don't recognize a bored cry, it just seems to fit in with the baby cry.

Don (the baby) is a crying baby and I just have to accept that. The evening times are better with the bottle being offered with water or expressed milk. But I feel I've made all the changes. I accept Don as he is now, and expect evening times not to be so good, so I cope. Don hasn't made any changes at all. I've changed my attitude. If I'd been around little babies before it might have been different, but I hadn't.

When I'm completing the profiles, I have in mind to show things are more positive this week than last week. I can handle the cry times, I've accepted all the things about Don. It's a learning process to get to at this point. For a reflection of where things are at, I compare this week with the week before and ask 'How is it this week?', and do this on a weekly basis now. The baby is a bit better now, but not highly improved. I definitely feel as though I'm the one who has come to grips with the situation. There was no way around sorting it out, it just had to happen that way. The only way to overcome this is to hang around babies from the start. Sometimes I feel resentful that I'm the one who has had to do all the adjusting.

Liz also said that the baby's profile would be the same as last week, because she's making an effort to portray that Don is an average baby, and she uses ratings to illustrate

this point. She also wants to portray that things are improving with the profiles.

Interview Four

Researcher's comments. This was Liz's final interview, and a number of the points she had made in the earlier interviews were discussed again.

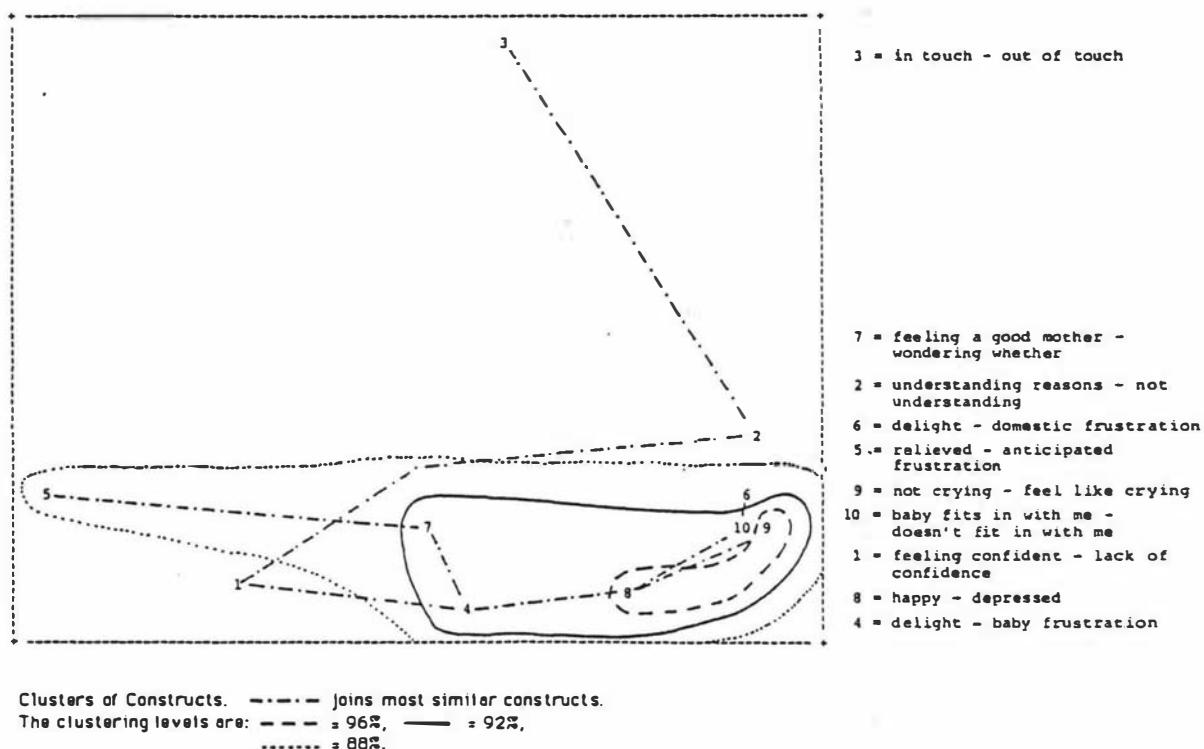
Liz's comments. Liz said she had felt like a bad mother when Don arrived because she didn't feel maternal, that she didn't feel like a mother. She still felt like her same old self, still young and the go off to work type. She said she couldn't feel efficient with a baby, "you can't get a job finished with a baby". She said she would never blame the baby because it was her decision to have him, but she still feels that she's the one who has had to shift.

She had learnt to control her temper when she was young because she had a father who couldn't control his. She had shaken Don twice when she was alone with him after just 6 weeks, but it was easier to control herself when others were around.

Appendix K -continued

First Personal Profile Matrix

feelings constructs	Items												
	baby crying when waking	baby sleeping	feedtimes	spilling after feed	baby crying after feed (wind)	baby smiling	taking baby out	baby crying instead of sleeping	dinner time with husband	no talking time with husband	no thinking time	time with other mothers	working when baby sleeping
confident-													
lack of confidence	2	2	3	4	4	2	4	5	4	3	3	3	3
understanding reasons-													
not understanding reasons for crying	1	1	1	4	4	2	3	5	3	4	3	2	3
in touch-													
out of touch	1	4	1	1	1	1	1	3	1	2	4	2	4
delight-													
baby frustration	2	1	2	4	4	1	3	4	4	3	3	3	1
relieved-													
anticipated agitation	2	3	2	4	3	1	4	4	4	3	4	4	2
delight-													
domestic frustration	4	1	3	4	4	1	3	4	4	4	4	2	4
a good mother-													
wondering whether I'm a good mother	2	1	2	4	4	1	3	4	3	3	4	3	2
happy-													
depressed	2	1	2	3	4	1	3	4	4	4	3	3	2
not crying-													
like crying	2	1	2	2	4	1	3	4	4	4	3	2	2
baby fitting in with me-													
baby not fitting in	2	1	2	3	4	1	3	4	4	4	4	2	1



First Personal Profile; Explanatory Comments

Items

There are three groups of items which cluster at 92%. Item 5 'baby crying after feed', and item 9 'dinner time with husband', form a cluster which is at the base of the profile, and so is the most negative.

Item 1 'baby crying when waking', and item 3 'feed-times', form a less negative cluster. The most positive items are item 6 'baby smiling', and item 2 'baby sleeping', which cluster at 88%.

Other items which cluster with 6 and 2 at 88% are:

- 10 'no talking time with husband'
- 8 'baby crying instead of sleeping'
- 7 'taking baby out'
- 4 'spilling after feeding'

Items which are unclustered at 88% are:

- 11 'no thinking time'
- 12 'time with other mothers'
- 13 'working when the baby is asleep'.

Feelings (Constructs)

Three constructs remain unclustered at 88%. These are:

- 1 'feeling confident-lack of confidence'
- 2 'understanding-not understanding'
- 3 'in touch-out of touch'.

Appendix K -continued

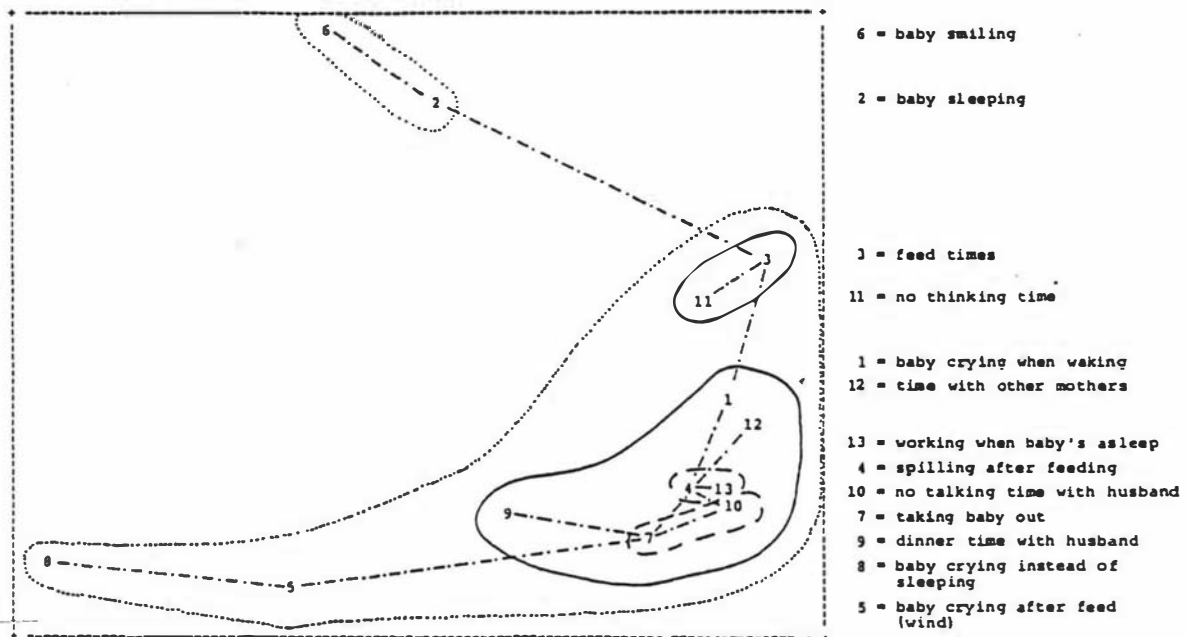
Personal Profile ratings for Participant D: weeks 2 to 4

Profile 2	Profile 3	Profile 4
*		
2223413223233	1222213321132	1111212221121
2223412433233	1223213421122	1112212211121
1111111111111	1111111111111	1111111111111
3123313433233	2223312331132	2112312321121
3333414443243	3323323331132	2122212221121
3134413433334	4333323431122	2122211221121
3123313333224	2222212231132	1111112221121
3123313433223	2322312231122	1111211221111
1111212332211	1111111111111	1111111111111
3123413433333	3333312433332	1112211321121

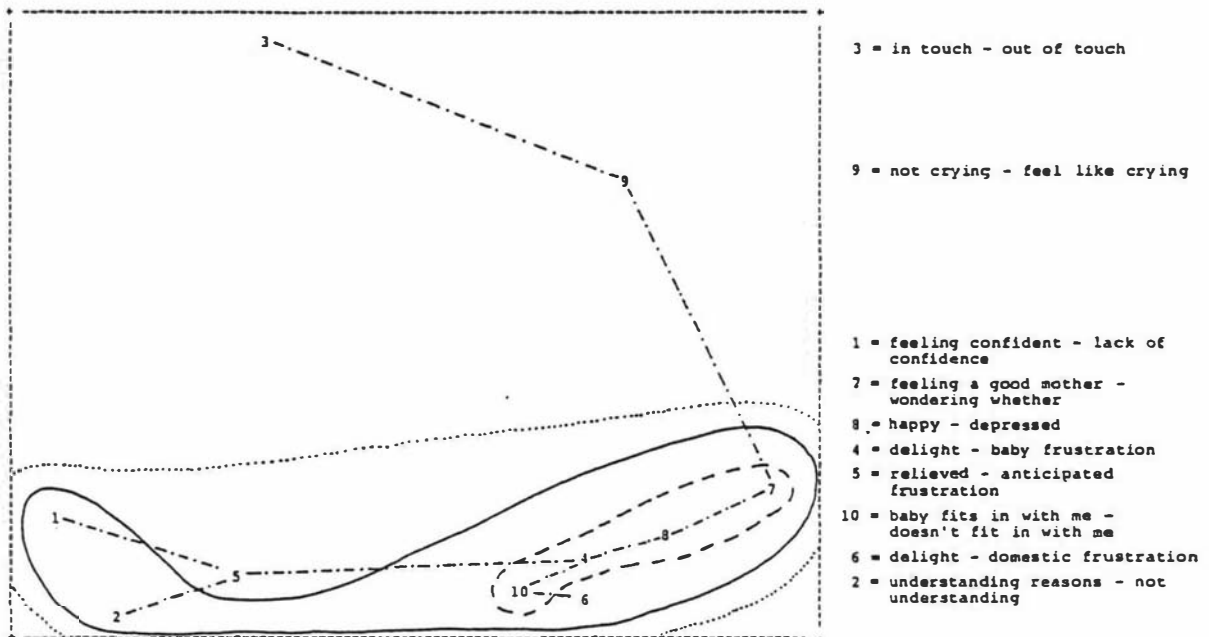
*Columns correspond to ratings for an item, rows correspond to ratings for a construct.

Appendix K -continued

Second Clustered Personal Profile



Clusters of Items. - - - - joins most similar items.
The clustering levels are: - - - = 96%, — = 92%,
..... = 88%.



Clusters of Constructs. - - - - joins most similar constructs.
The clustering levels are: - - - = 96%, — = 92%,
..... = 88%.

Second Personal Profile: Explanatory Comments

Items

All of the items cluster at 88% in two groups. Item 2 'baby sleeping', and item 6 'baby smiling', form the most positive cluster. The second cluster, which is made up of the other eleven items, is also a positive cluster.

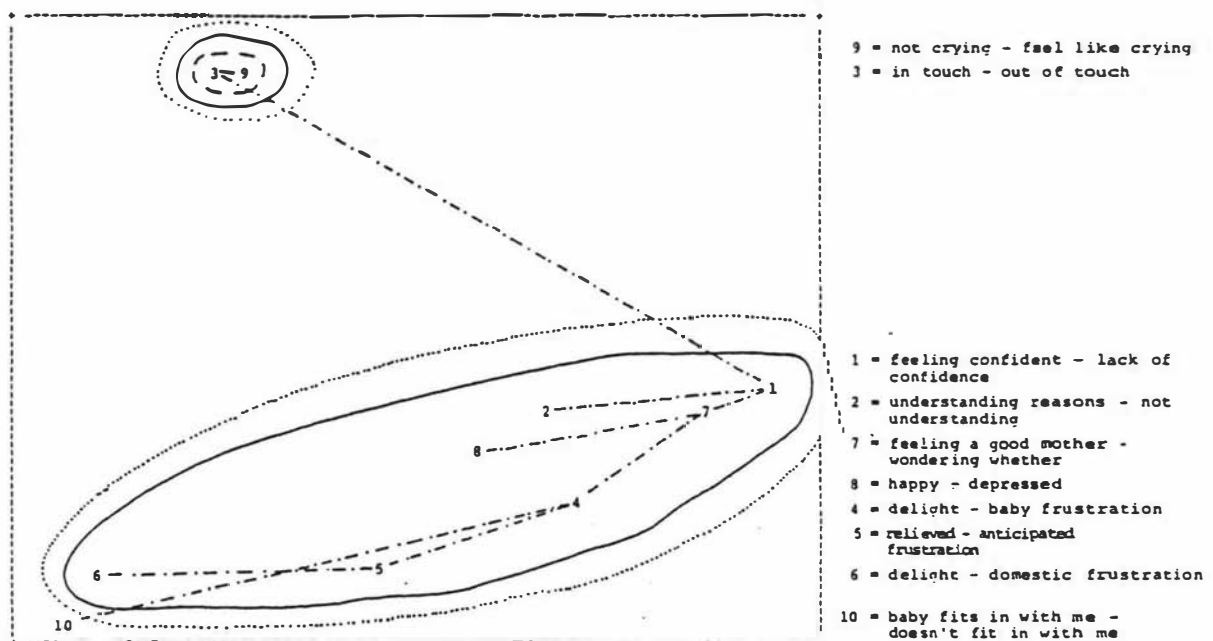
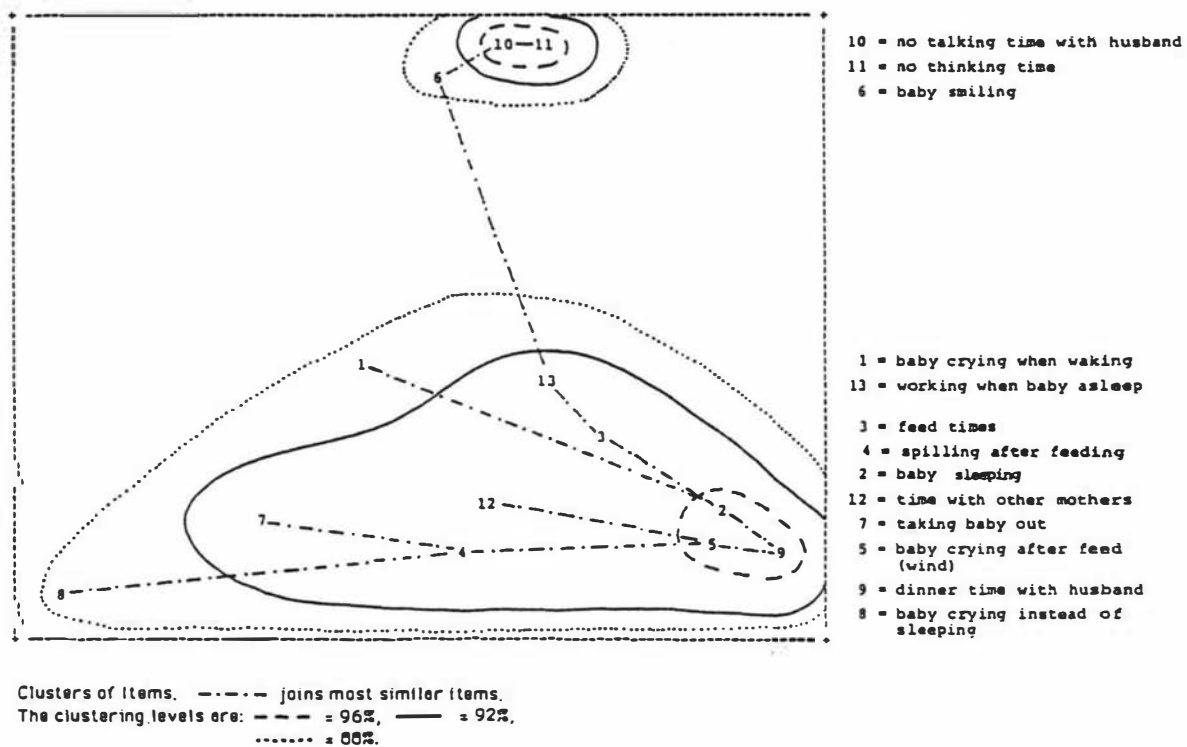
The differentiation between the clusters themselves, and the items in the clusters, is on the basis of the greatest spread possible between the 1s and 3s used for the ratings.

Feelings (Constructs)

Two constructs only are unclustered at 88%. These are construct 9 'not crying-feeling like crying', and construct 3 'in touch-out of touch'.

Appendix K -continued

Third Clustered Personal Profile



Third Personal Profile: Explanatory CommentsItems

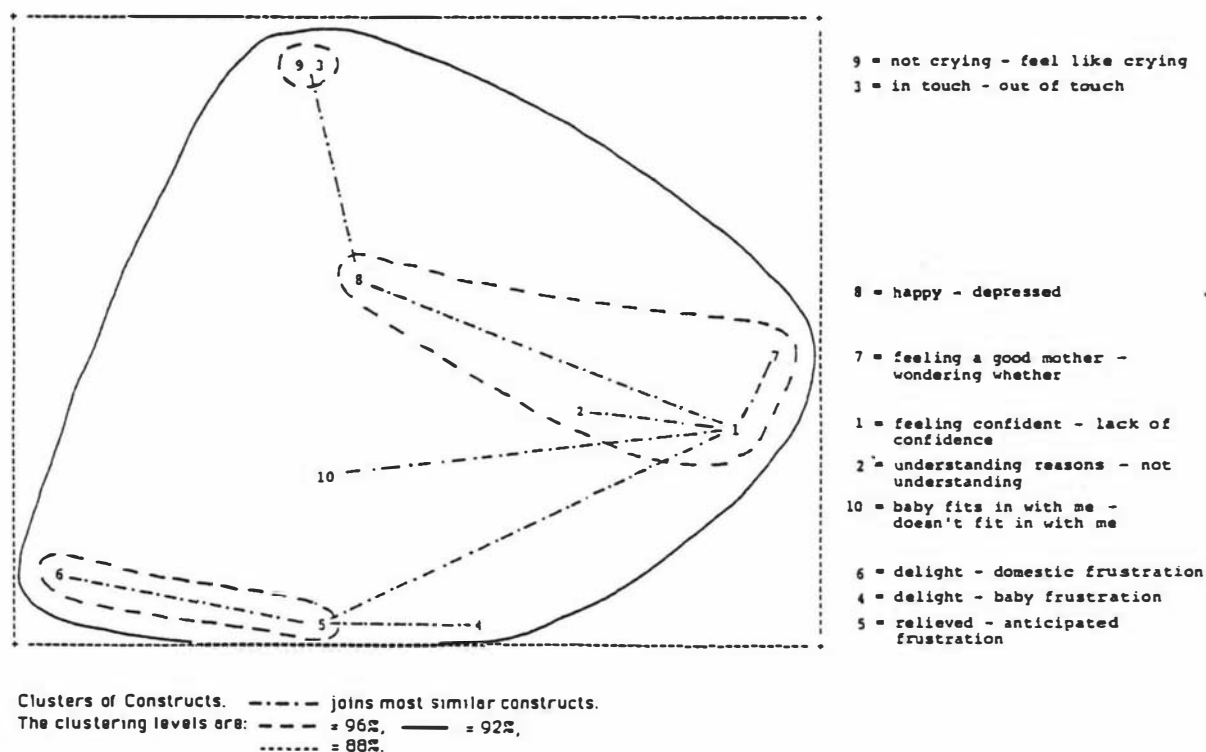
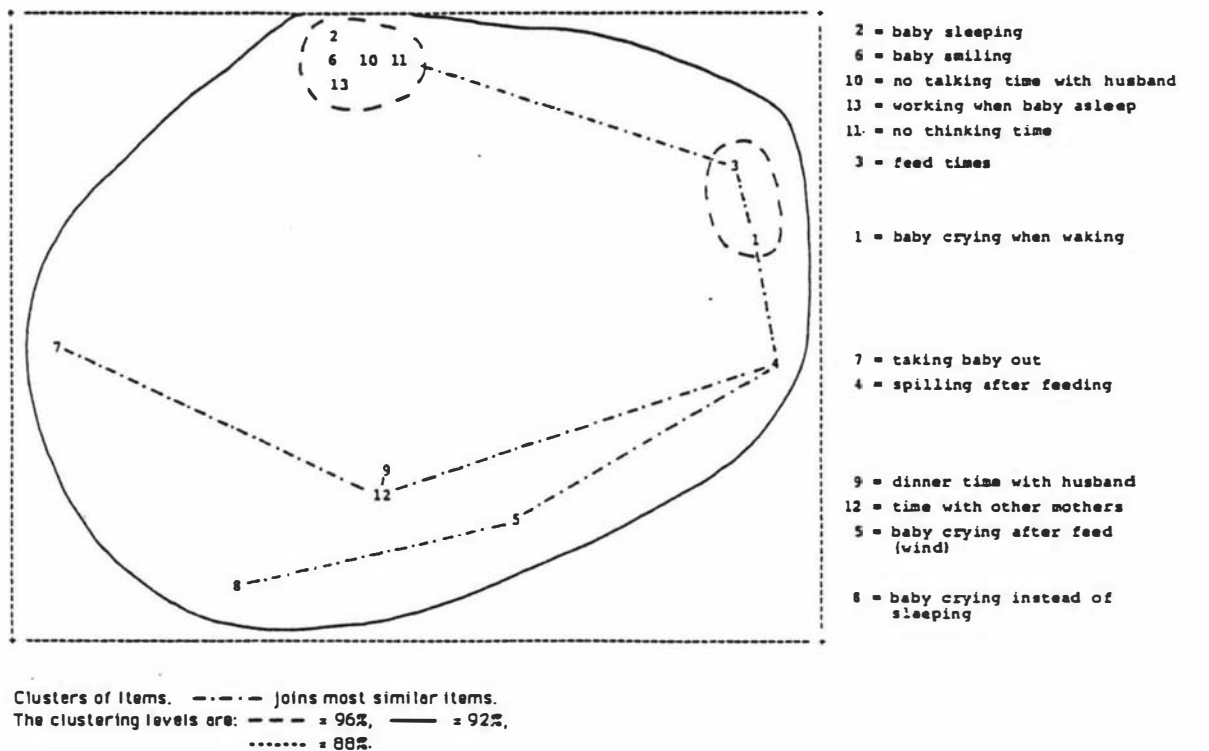
Two groups of items cluster at 88%. Item 6 'baby smiling', item 10 'no talking time with husband', and item 11 'no thinking time', form the most positive cluster.

Feelings (Constructs)

There are two clusters of constructs. The constructs over which the items have been rated most negatively are construct 3 'in touch-out of touch', and construct 9 'not crying-feeling like crying'.

Appendix K -continued

Fourth Clustered Personal Profile



Fourth Personal Profile: Explanatory CommentsItems

All of the items cluster together at 92%.

Feelings (Constructs)

Three groups of constructs cluster at 96%, and these three groups form one cluster at 92%.

Appendix K -continued

Infant Profile Ratings for Participant D: weeks 1 to 4.

Profile 1

*

342224444544344333445442
 242223344543344333445343
 441214242523223233435443
 332224242623223432445343
 242223342533224424444343
 342223343524214433445443

Profile 2

**

42--23232432233333444-43
 23--23232434233333444-32
 33--23232424233233444-33
 23--23233424223333444-33
 23--23233424333434444-32
 23--23233424323434444-32

Profile 3

44--34344433-2333243-243
 23--33233433-23343433-32
 33--23232423-33243433-43
 23--23232333-23343433-33
 23--34334434-24333433-33
 22--24324433-24433443-33

Profile 4

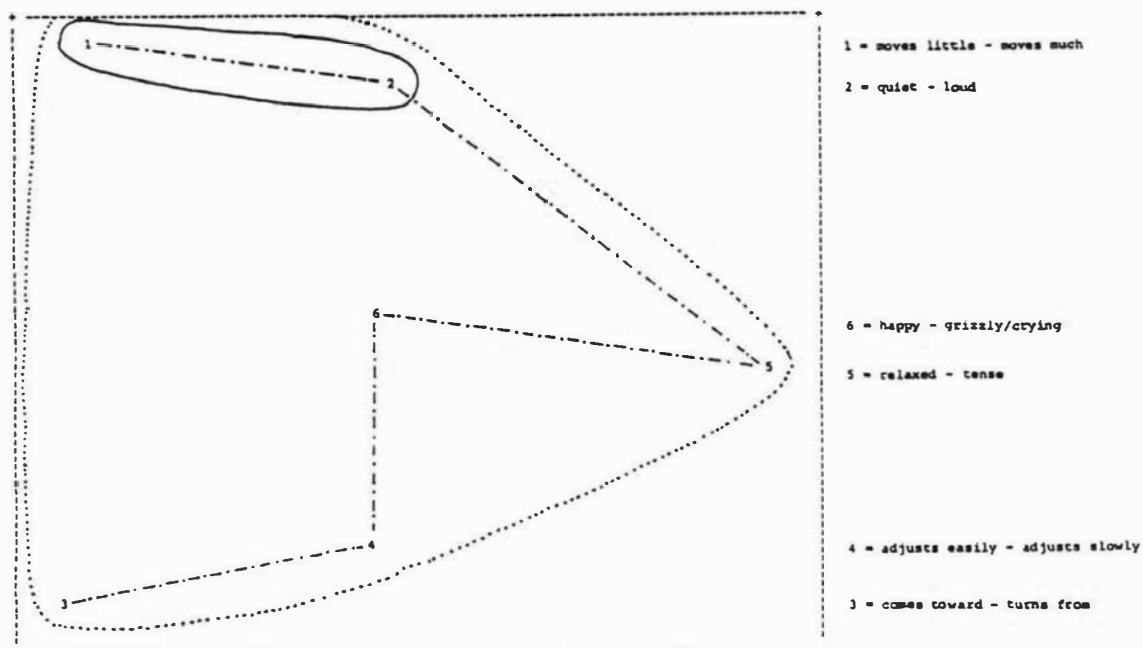
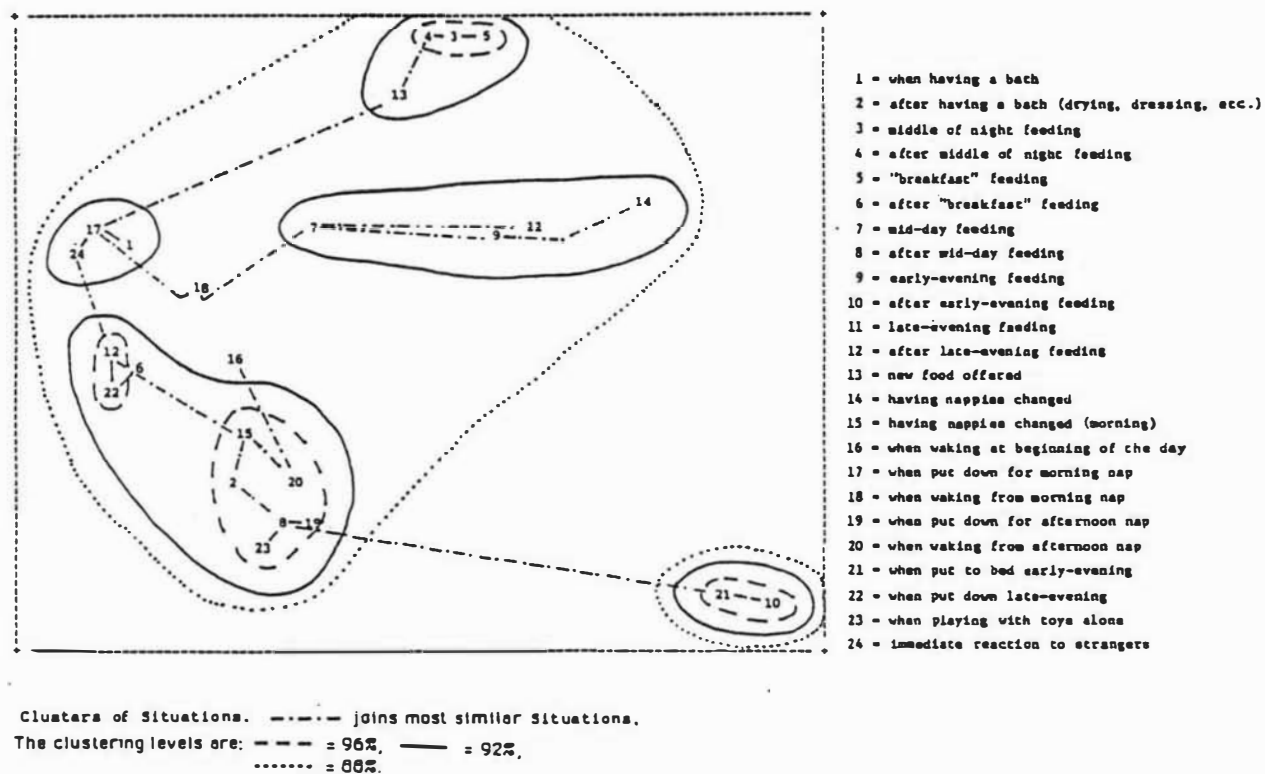
33--33433434-33334444-33
 33--23333344-33334343-22
 32--23242324-33223443-33
 22--23232334-33223433-33
 22--22343334-23333343-33
 22--22243444-23333343-33

* Columns correspond to ratings for a situation, rows correspond to ratings for an attribute.

** The symbol '-' indicates that the mother deleted this situation from the profile.

Appendix K -continued

First Clustered Infant Profile



First Infant Profile Summary: Explanatory Comments

Situations

There are five clusters at 96%, and nine situations are unclustered. These are situations 3,4,10,16,18,20,21,22, and 23. Of these, numbers 3, 4, 16, and 20 are clustered at 92%, and at 88% only number 23 remains unclustered.

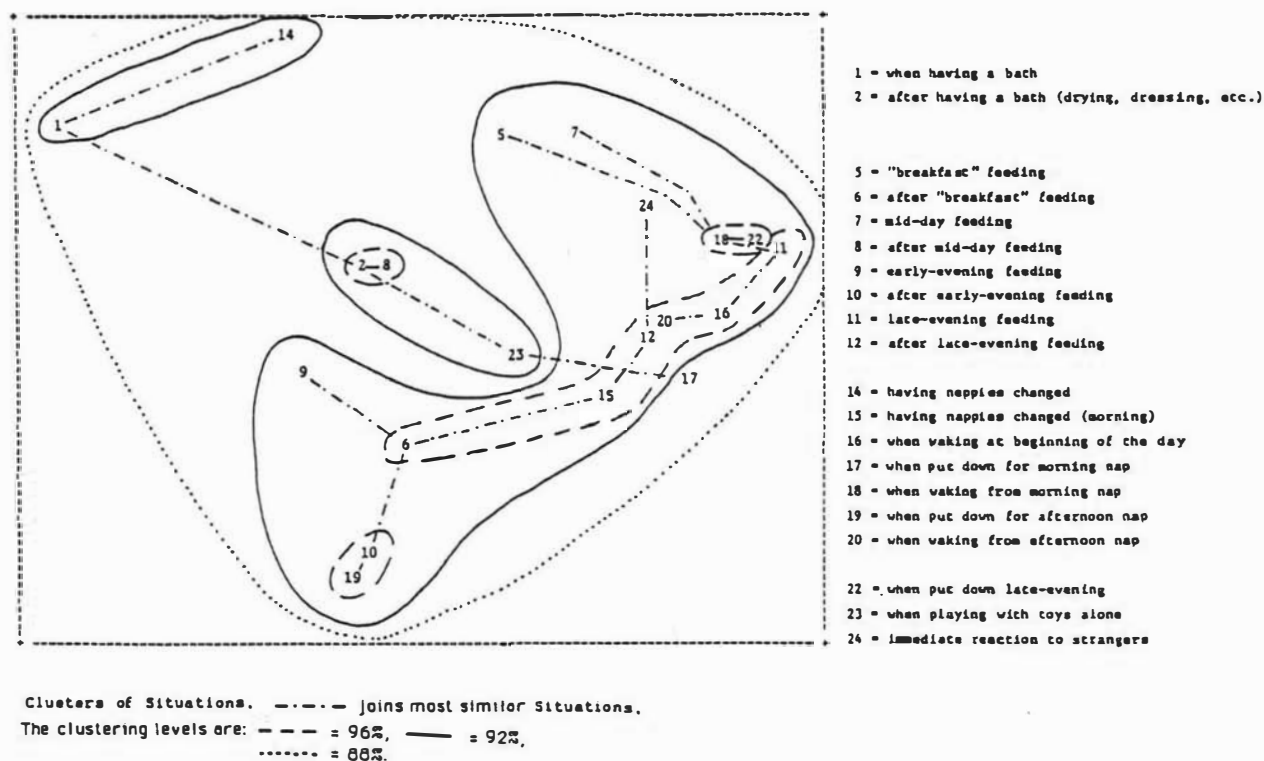
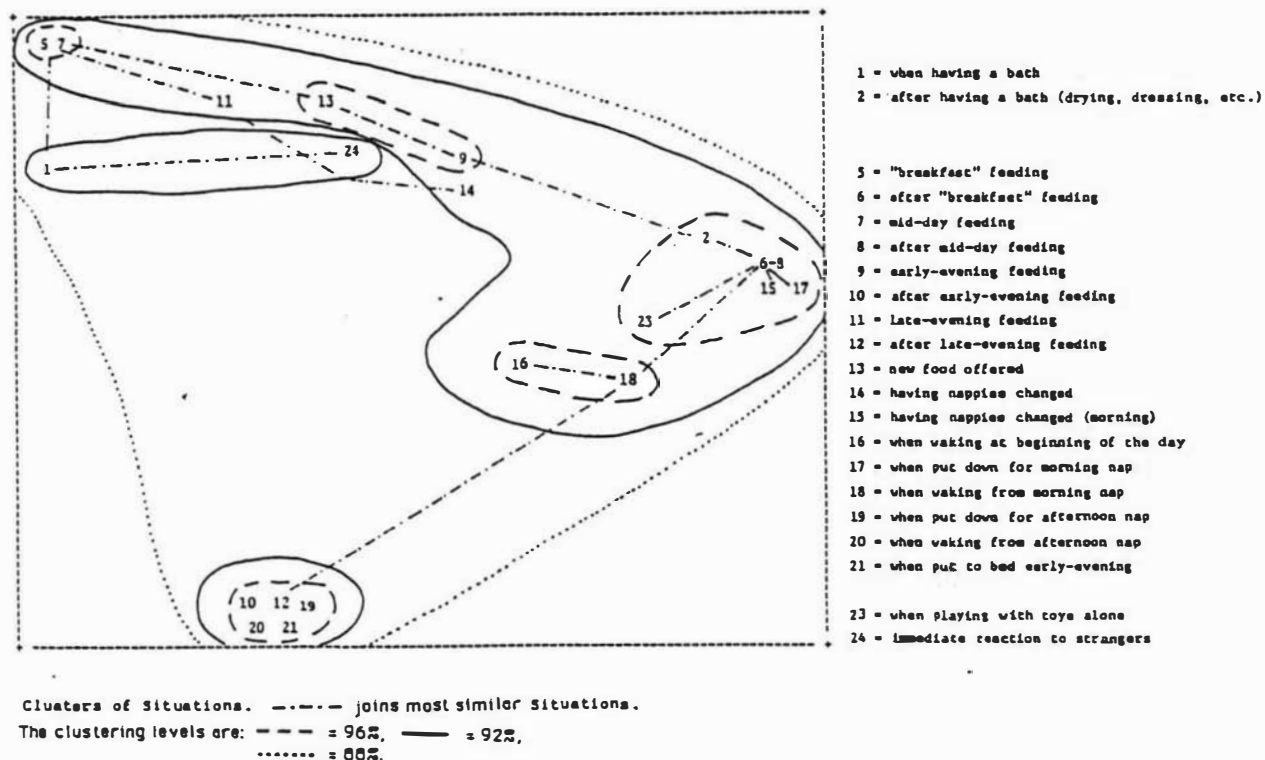
Four clusters are evident at 88%.

Attributes

None of the attributes cluster above 88%. Two clusters are present at 88%, while attribute 5 'relaxed-tense' is unclustered at this level. The attributes in the subsequent infant profiles all clustered at 88% or above, and the visual displays for these have not been included.

Appendix K -continued

Second and Third Clustered Infant Profiles



Second Infant Profile Summary: Explanatory CommentsSituations

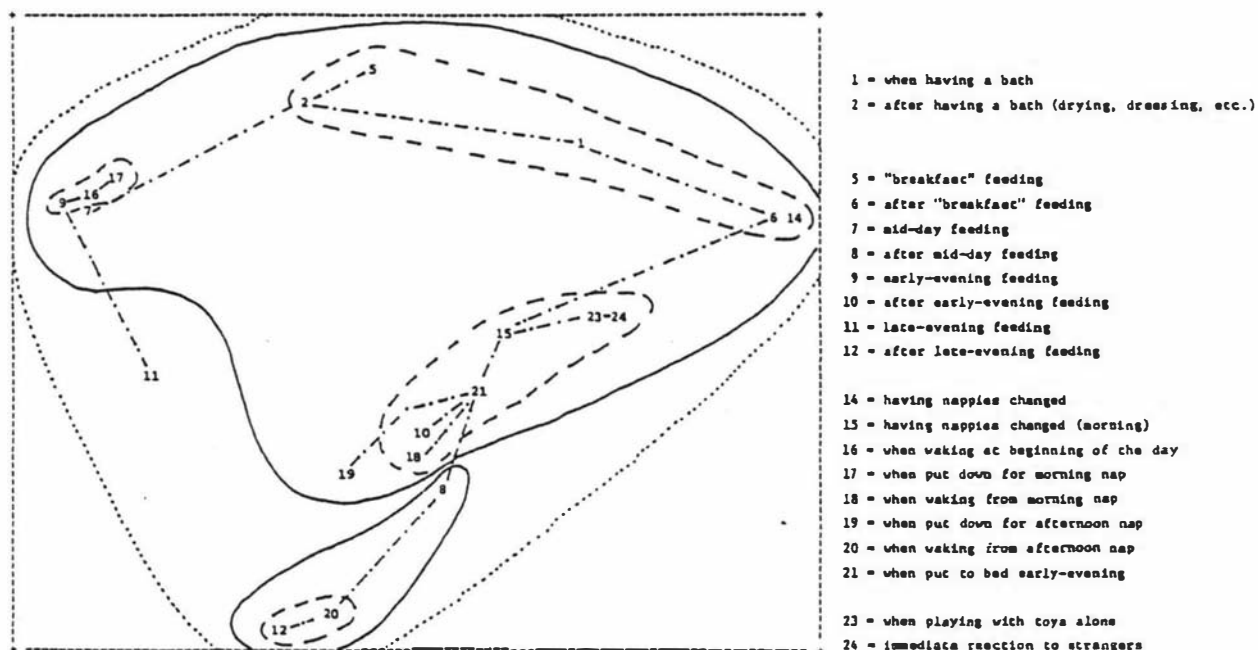
Three clusters are present at 96%, and these become two clusters at 92%. One main cluster only is present at 88%. Two situations are unclustered at this level. These are situations 3 'middle of the night feeding', and 24 'immediate reaction to strangers'.

Third Infant Profile Summary: Explanatory CommentsSituations

All of the situations form one main cluster at 88%, except for situation 24 'immediate reaction to strangers'.

Appendix K -continued

Fourth Clustered Infant Profile



Clusters of Situations. - - - - joins most similar situations.
The clustering levels are: - - - = 96%, — = 92%,
..... = 88%.

Fourth Infant Profile Summary: Explanatory CommentsSituations

There are two main clusters at 88%, and one situation 15 'nappy change early evening', is unclustered. The differentiation in the clustering is made from ratings of 1s and 3s.

Appendix K -continued

Evaluation of Methods Used in the Study

Name: Participant D

Indicate the category a, b, or c which best describes how you found each method used in the research.

Personal Profile

a. very useful b. useful c. not very useful

Comments: The profile was really concerned with feelings, you don't talk with other people about what a mother feels. The most interesting thing was sorting out categories, that really did make me think. I got them clear. I thought about things I hadn't differentiated. I hadn't realised things were getting more positive, but it was with the ratings. It was good to have someone to talk to who will listen.

Infant Profile

a. very useful b. useful c. not very useful

Comments: The categories weren't close enough to what was happening. I feel I already knew what was going on, although anything that makes you think about what is going on is helpful.

Diary Form

a. very useful b. useful c. not very useful

Comments: Not used.

Appendix L

Case-Study Notes: Participant E

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Interview NotesParticipant E

Anne (23 years) had been married for two years when her first baby, Beth, was born. Anne had worked as a retailer's assistant with a large retailing firm. She held a Diploma in Retailing. Beth's father (27 years) was a naval officer, and the family had transferred to another major city as soon as Beth and Anne were able to travel, which was 2 weeks after leaving the hospital. The baby was breastfed and was 7.5 weeks old at the first interview.

Anne had a "normal" pregnancy, and had worked until the end of the 7th month. The labour had been 4 1/2 hours, with no mishaps during the delivery other than a small episiotomy for Anne. The first night after delivery the baby did not room-in, but did so for the rest of the hospital stay. Anne said she had postnatal depression while she was in hospital and that she had cried a lot. She reported being very tired and got upset over nothing in hospital. She had enjoyed rooming-in with the baby, and they went home on the 7th day.

First Interview Notes (2 hours)

Researcher's impressions. Anne seemed a little tense at the beginning of the interview. She had, perhaps, been rushing a bit to be ready for the interview. The baby was asleep in her room and didn't wake during the interview.

Anne's description of being at home with Beth.

At the beginning when I came home with Beth every thing was fine. I was relaxed and Beth was feeding well, she didn't cry. When she started crying, I thought I'd done something wrong, that I might have hurt her. That was at about 2 1/2 weeks. I had a normal labour, and there was nothing wrong with what I had done, but I felt very upset about her crying after about 10 minutes of it. There was no reason for her crying. I'm

impatient and that didn't help. Other people cope better than I do.

When she carries on her crying, I shout at her, it stops me hitting her, but my shouting frightens her. The crying started late afternoon and early evening, then gradually got better. Now it starts on Tuesday, and Wednesday is terrible. Wednesday is a bad day. I give Beth mebentyl before feeding.

When I'm on my own it's worse. When my husband is home he takes her for walks, and the motion stops her crying. Last Wednesday I wanted to go to someone, and no-one was there. I was walking around the house crying, we (Beth & Anne) were both crying, and then I left her to sleep.

When I hear her I want to pick her up, but then get angrier as it goes on because she won't stop crying. I can't do anything about it, and I wish I could do something. I went to the Family Unit twice a week, I thought there it was wind, I can cope better knowing what it was. When I'm with people I can cope better. When I'm on my own, there's no-one to give her to. I needed to get away, to take myself away from her when she cries for three hours intermittently. She's crying and there's no apparent reason.

She never cries during the late feed, it's always during the day, tending toward late evening. The doctor has been helpful, and I feel better when I'm talking about it.

Note: The following constructs and their contrasts were

elicited during the compiling of the matrix: 'feeling guilty', with item 'leaving the baby to cry', 'feeling supported' with the item 'when husband is home'.

Interview Two

Researcher's comments. Anne had rung to say that Beth had been sick, she had come out in a rash and so Anne was taking Beth to the doctor. She thought that may have been the reason for Beth's crying. The interview went ahead anyway. Beth was asleep and had been given antihistomine. The doctor thought the rash was due to an allergy from a mosquito bite.

Anne's comments. Anne said she felt other mothers would be pleased to do the infant profile as it had given her an idea of Beth's patterns. She said that she was more aware of Beth now and more aware of whether Beth is enjoying herself. Anne said, too, that she feels better about things this week, and that she is seeing Beth differently. As well, she was feeling better in herself.

Anne was keen to compare the ratings she completed on this week's infant profile with the ones from the week before. During this activity, a friend arrived. Anne introduced the researcher as "the lady who is finding the patterns".

Interview Three

Researcher's comments. Anne had slept in because the baby had been restless during the night, so she was still in the process of dressing. However, she was quite relaxed about it. This was the first time the baby had been awake during the interviews. She was a pretty baby with dark hair. She settled about half an hour after being picked up, and slept for the rest of the interview.

Anne's comments.

The week hasn't been too bad, but Beth cried a lot when we took her out on Sunday. I have been taking her for walks during the week to stop the crying and it seemed to work for a couple of

days. Today is Wednesday and I hope it will be a grotty day so that Ben (husband) will have to stay at home instead of going hang-gliding. He still has all the fun, and I can't go horse-riding with him anymore.

I don't feel guilty now because I'm not shouting or crying so often, except I did one day this week, I had an exceptionally busy day on Thursday, but there are no more of my crying times. I don't go to the unit any more, I only went a couple of times, really, when I didn't know anyone else.

When she looked at the personal and infant profiles, Anne said she thought they made sense in terms of the clusters. The shouting situation was unclustered and on its own. Anne said she hadn't been shouting so much over the last couple of weeks, that she hadn't shouted since the last interview. She said her own crying times were also a lot less, that she hadn't really been crying this week at all.

Anne said she felt she understood a lot more what Beth needed, but that she still didn't always know why she was crying. Her Grandmother had sent her a recipe to soothe crying babies, and had said that her father had been a 'crier' too.

Anne also commented on the the disruption in the routine when Ben was home at the weekends. She said she finds herself getting annoyed with the way he rocks the pram and handles the crying and so on. "Ben can't switch off to the crying and rocks the pram because of this".

Interview Four

Researcher's comments. Anne wanted to compare the profiles completed over the four weeks. Anne also seemed a little agitated because Beth had had a change in routine this week, she was awake more in the mornings.

Anne's comments.

Ben has been on duty over-night and it went much better than I expected. I don't think it's the mother's fault that the baby cries, so there's no use feeling guilty. Beth has changed her routine again, she likes to be up a lot more now in the mornings and needs more entertaining. I can also tell the difference between the cries now. A hungry cry is more persistent, so you pick it up more. When it's a hunger cry I try feeding her but sometimes she might be overtired. A bored cry has just started this last week. There is a tired cry and also a smaller angry cry with colic.

Beth is still feeding every four hours, and I try to keep to this. I use some expressed milk for a bottle to get Beth used to it, but I wouldn't leave Beth with anyone else, she might cry at them. I did expect the baby to sleep more at first, and not to cry.

Note: When Anne was rating her personal profile for the week she said she was surprised at how the ratings were so good now, that she realises she can cope with the evenings now. Beth still seems to need that period to cry, but Anne says she can cope. Anne also said that she was the one who had changed, that it wasn't Beth. One of Anne's friends arrived during the interview and Anne commented to her that the profiles had helped her as well as her helping with the profile methods.

Interview Five

Researcher's comments. The final interview was spent going over the profiles and checking the information that had been obtained over the interview weeks.

Anne's comments.

I didn't expect there to be any crying. I expected to put the baby to sleep and it would be fine. I am tied down more than I expected, it's hard to get used to, that I still can't get up and go. The things I can do still revolve around Beth.

I imagined that babies are all fun. I had no other experience with babies at all other than with Beth. I feel maternal, but I still don't feel like a mother. I attended ante-natal classes, and they were helpful, but more information immediately after the birth would be good, for example information about lactation and the time consuming aspect.

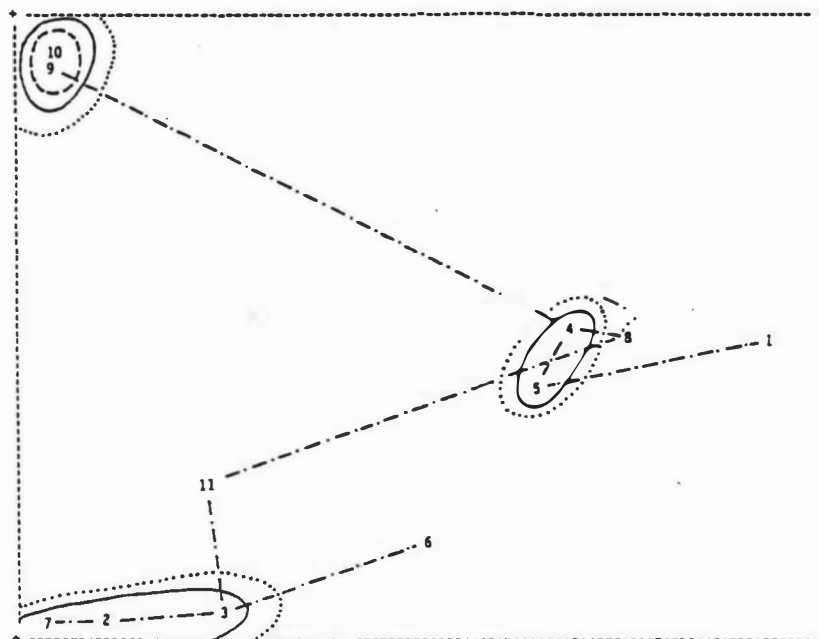
Appendix L -continued

First Personal Profile Matrix

feelings constructs	Items										
	when baby begin's to cry	baby continues to cry	no-one to talk to at home	when husband is home	at other people's places	early evening feedtimes	my shouting times	my crying times	when baby is good	when baby is asleep	leaving baby crying
patient-											
impatient	2	4	4	2	2	4	5	2	1	1	4
coping-											
not coping	2	4	4	2	2	4	5	2	1	1	4
calm-											
angry	2	5	4	2	2	4	5	3	1	1	4
content-											
upset	4	5	4	4	4	4	5	4	1	1	4
supported-											
lack of support	3	4	4	2	2	2	5	4	1	1	4
able to help baby-											
unable to help	2	5	5	4	4	4	5	4	1	1	4
better-											
worse	4	5	5	2	5	4	5	2	1	1	2
knowing reasons-											
no reasons for baby's crying	2	5	5	5	5	4	5	2	5	5	5
not guilty-											
guilty	2	2	2	2	2	2	2	4	4	4	4

Appendix L -continued

First Clustered Personal Profile



10 = when Baby is asleep
9 = when Baby is good

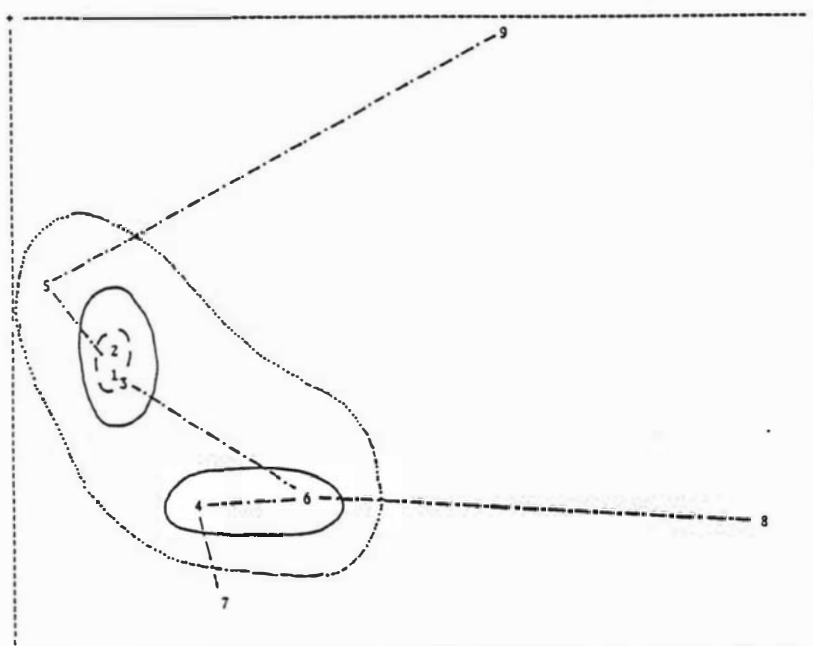
4 = when husband is home
8 = my crying times
1 = when baby begins to cry
5 = at other peoples' places

11 = leaving baby crying

6 = early evening feed time

3 = no-one to talk to at home
7 = shouting times
2 = baby continues to cry

Clusters of Items. - - - - joins most similar items.
The clustering levels are: - - - = 96%, — = 92%,
..... = 88%.



9 = not feeling guilty - feeling guilty

5 = supported - lack of support

1 = patient - impatient
2 = coping - not coping
3 = calm - angry

6 = able to help - unable to help
4 = content - upset

8 = a reason for baby crying -
no reason

7 = feeling better - feeling worse

Clusters of Constructs. - - - - joins most similar constructs.
The clustering levels are: - - - = 96%, — = 92%,
..... = 88%.

First Personal Profile; Explanatory Comments

Items

- There are three groups of items that cluster at 92%;
- The most positive cluster, illustrated at the top of the page, consists of item 9 'when the baby is good', and item 10 'when the baby is asleep'.
 - Item 4 'when husband is home', and item 5 'at other peoples' places' form a second positive cluster.
 - Three items form a negative cluster at the base of the page: item 2 'when the baby continues to cry', item 3 'no-one to talk to at home', item 7 'my shouting times'.

Four items are unclustered at 88%:

- 1 'when the baby begins to cry'
- 6 'early-evening feed time'
- 8 'my crying times'
- 1 'leaving the baby to cry'.

Where these unclustered items become clustered at a lower percentage level with those items that have already been clustered, the effect is to reduce the level of negativeness or positiveness.

Feeling. (Constructs).

There are two main clusters of feelings which match at 92%: construct 4 'content-upset', and construct 6 'able to help-unable to help' form one cluster. A second cluster is made up of constructs 1 'patient-impatient', 2 'coping-not coping', and 3 'calm-angry'.

These two groups become undifferentiated at 88%, but three constructs remain unclustered at this level:

- 7 'feeling better-feeling worse',
- 8 'reason for her crying-no reason',
- 9 'not feeling guilty-feeling guilty'.

Appendix L -continued

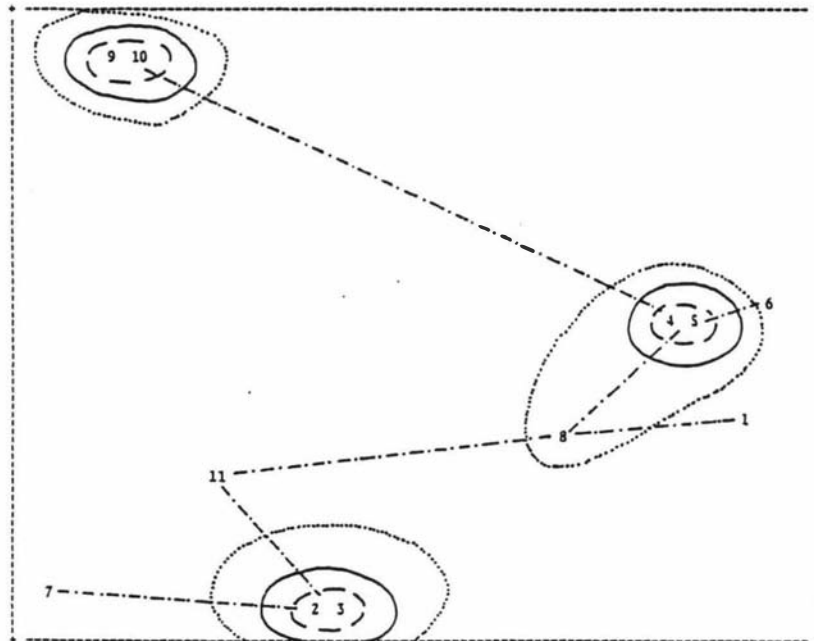
Personal Profile Ratings for Participant E: weeks 2 to 5.

Profile 2	Profile 3	Profile 4	Profile 5
*			
24422452114	24422442224	24422443224	24222233224
24422252114	24422442224	24422423222	24222233222
24422252112	24422442224	24422443222	24422233222
44422254114	44444444224	24444333224	24422233224
44422254114	24422244224	44422443224	24422233224
24444254114	24444444224	24444443224	24222233222
44422222112	44422442222	44422423224	24422233222
24444254444	24444444444	24444443224	22222233222
22222222444	22222222444	24444443224	22222233222

* Columns correspond to ratings for an item, rows correspond to ratings for a construct.

Appendix L -continued

Second Clustered Personal Profile



10 = when baby is asleep
9 = when baby is good

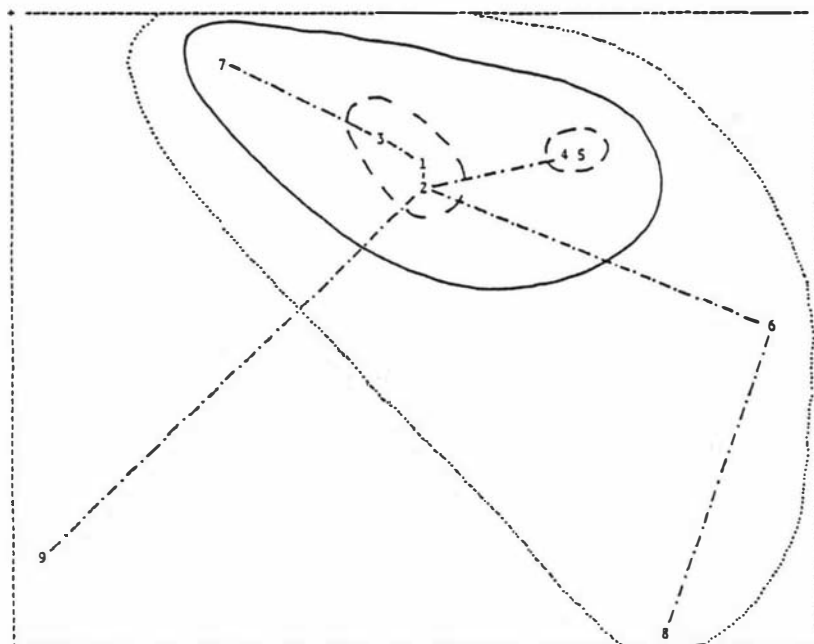
6 = early evening feed time
5 = at other peoples' places
4 = when husband is home

1 = when baby begins to cry
8 = my crying times

11 = leaving baby crying

7 = shouting times
3 = no-one to talk to at home
2 = baby continues to cry

Clusters of Items. - - - - joins most similar items.
The clustering levels are: - - - = 96%, — = 92%,
..... = 88%.



7 = feeling better - feeling worse

3 = calm - angry
5 = supported - lack of support
4 = content - upset
1 = patient - impatient
2 = coping - not coping

6 = able to help - unable to help

9 = not feeling guilty - feeling guilty

8 = a reason for baby crying -
no reason

Clusters of Constructs. - - - - joins most similar constructs.
The clustering levels are: - - - = 96%, — = 92%,
..... = 88%.

Second Personal Profile: Explanatory Comments

Items

There are three main clusters at 92%. The most positive cluster is at the top of the page and the most negative cluster is at the bottom. The items in these clusters are similar to those in the first personal profile, but there is one difference in the negative cluster. Item 7 'shouting times', is not included in the negative cluster at a high level of clustering, that is at 88% or above. This item is being viewed more positively than in the previous profile.

Item 6 'early-evening feed time', is not matched with any other item. This item was not matched with any other in the previous profile, but the position in the second profile is more positive.

Feelings. (Constructs)

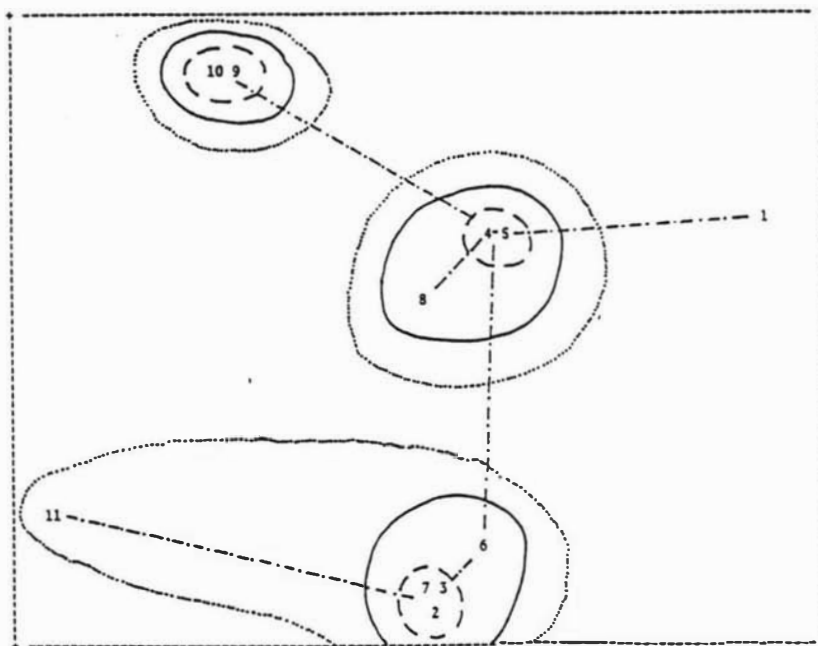
More of the feelings are clustered at a high level than there was the case in the previous profile. Eight of the feelings are clustered at 88%. These are;

- 1 'patient-impatient',
- 2 'coping-not coping',
- 3 'calm-angry',
- 4 'content-upset',
- 5 'supported-lack of support',
- 7 'feeling better-feeling worse',
- 8 'a reason for her crying-no reason'.

Construct 9 'feeling guilty-not guilty' remains unclustered in this profile, and has more positive ratings than the other feelings in the profile. Even though the feelings are spread in their positions in the profile, the differentiation between the way the items have been rated is not great.

Appendix L -continued

Third Clustered Personal Profile

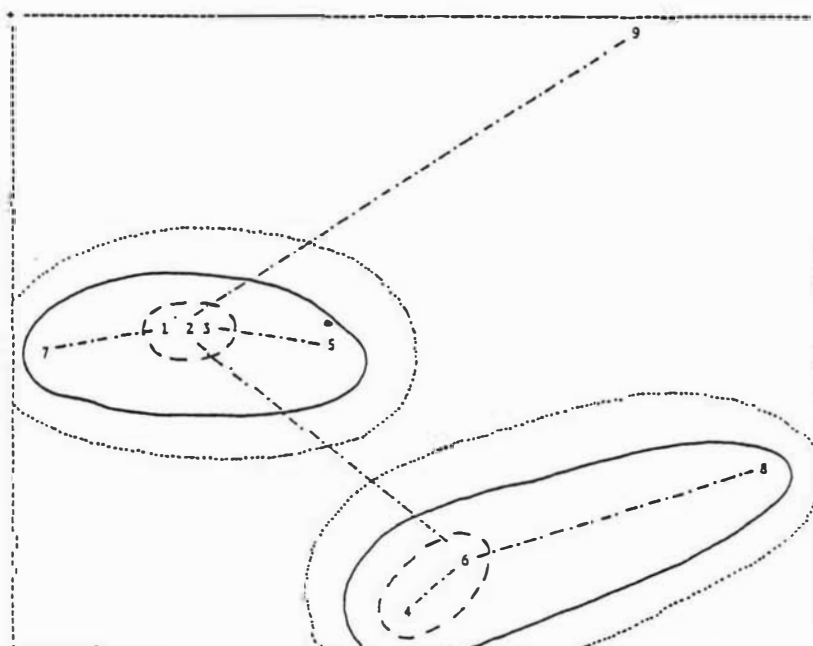


10 = when baby is asleep
9 = when baby is good

1 = when baby begins to cry
5 = at other peoples' places
4 = when husband is home
8 = my crying times

11 = leaving baby crying
6 = early evening feed time
7 = shouting times
3 = no-one to talk to at home
2 = baby continues to cry

Clusters of Items. - - - - joins most similar items.
The clustering levels are: - - - - = 96%, — = 92%,
..... = 88%.



9 = not feeling guilty - feeling guilty

1 = patient - impatient
2 = coping - not coping
3 = calm - angry
5 = supported - lack of support
7 = feeling better - feeling worse

8 = a reason for baby crying -
no reason

6 = able to help - unable to help

4 = content - upset

Clusters of Constructs. - - - - joins most similar constructs.
The clustering levels are: - - - - = 96%, — = 92%,
..... = 88%.

Third Personal Profile: Explanatory Comments

Items

There are three main clusters in this profile that are similar to those in the previous profiles. There is, though, some movement in the unclustered items that differs from the first two profiles. Only one item, 'when the baby begins to cry' remains unclustered.

Item 8 'my crying times', is now clustered with item 4 'husband at home', and item 5 'at other peoples' places'. This cluster has been rated positively. Items which were unclustered in the previous week, and which are now clustered at 88% are:

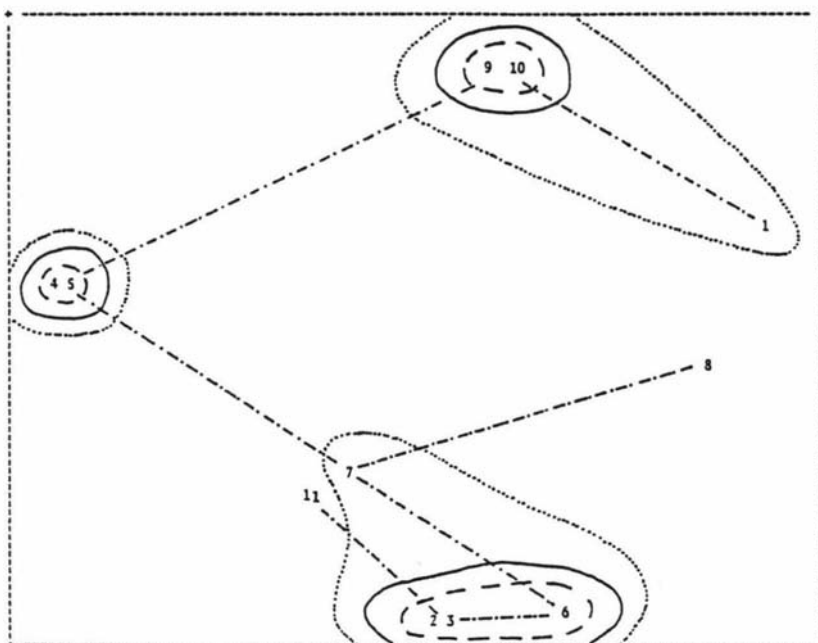
- 11 'leaving the baby to cry',
- 6 'early-evening feed time'.
- 7 'shouting times'.

Feelings (Constructs)

The feelings are clustered in the same way as in the previous profile. Only one construct, 'not feeling guilty-feeling guilty', is unclustered at 88%.

Appendix L -continued

Fourth Clustered Personal Profile



10 = when baby is asleep

9 = when baby is good

1 = when baby begins to cry

5 = at other peoples' places

4 = when husband is home

8 = my crying times

7 = shouting times

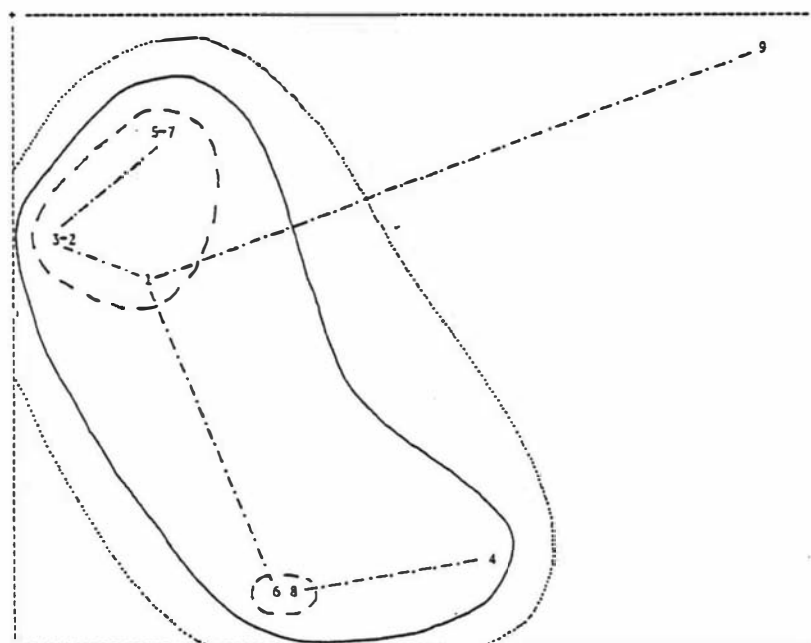
11 = leaving baby crying

6 = early evening feed time

3 = no-one to talk to at home

2 = baby continues to cry

Clusters of Items. - - - - joins most similar items.
 The clustering levels are: - - - = 96%, — = 92%,
 = 88%.



9 = not feeling guilty - feeling guilty

7 = feeling better - feeling worse

2 = coping - not coping

3 = calm - angry

5 = supported - lack of support

1 = patient - impatient

4 = content - upset

6 = able to help - unable to help

8 = a reason for baby crying -
no reason

Clusters of Constructs. - - - - joins most similar constructs.
 The clustering levels are: - - - = 96%, — = 92%,
 = 88%.

Fourth Personal Profile: Explanatory Comments

Items

There are three clusters in the fourth profile. There is some movement in the items within these clusters that differs from the previous profiles. Item 8 'my crying times', is not clustered with any other item at 88% or above, and neither is item 11 'leaving the baby to cry'.

Item 1 'when the baby begins to cry', is now clustered in the positive group at the top of the page with the items 'when baby is good', and 'when the baby is asleep'.

Feelings (Constructs)

The clustering pattern of the feelings remains very similar to those in the previous profile.

9 = when baby is good
 6 = early evening feed time
 5 = at other peoples' places
 4 = when husband is home
 1 = when baby begins to cry
 10 = when baby is asleep

11 = leaving baby crying

3 = no-one to talk to at home

8 = my crying times
 7 = shouting times

2 = baby continues to cry

9 = not feeling guilty - feeling guilty
 8 = a reason for baby crying - no reason

6 = able to help - unable to help
 2 = coping not coping

1 = patient - impatient
 7 = feeling better - feeling worse
 3 = calm - angry

5 = supported - lack of support
 4 = content - upset

Clusters of Constructs: --- joins most similar constructs.
The clustering levels are: --- = 96%, --- = 92%,
----- = 88%.

Fifth Personal Profile: Explanatory Comments

Items

There are two main clusters in this profile. The items in the cluster at the top of the page form a positive cluster. These items are;

- 1 'when baby begins to cry',
- 4 'when husband is home',
- 5 'at other peoples' places',
- 6 'early-evening feed time',
- 9 'when baby is good',
- 10 'when the baby is asleep'.

The second cluster is also a more positive cluster, but the ratings are not as positive overall as those in the first group. The items in this cluster have been rated with 3's. These are items 7 'shouting times', and 8 'my crying times'.

The items that are unclustered at 88% or above are positioned between these two positive clusters. These are items;

- 2 'when the baby continues to cry',
- 3 'no-one to talk to at home',
- 11 'leaving the baby to cry'.

Feelings (Constructs)

All of the feelings are clustered in one group at 96%.

Appendix L -continued

Infant Profile Ratings for Participant E; weeks 1 to 5.

Profile 1

Profile 2

* **

44-242424422-2422222422-
34-242424422-2422222422-
34-223222422-3424222423-
24-222444422-3422222422-
23-222344422-2422222422-
24-322324422-2423222422-

242222224422-242222242-2
242222224422-242222242-2
242222222333-342222242-2
232222223422-222222242-2
242222224422-242222242-2
242222224422-242222242-2

Profile 3

Profile 4

242222-24422-242222242-2
242222-244222-42222242-2
242222-224222-42222242-2
222222-224222-42222242-2
222222-244222-42222242-2
242222-244422242222242-2

2222222244222-2222224222
2222222244222-4222224222
2422222244222-4222224222
2222222244222-4222224222
2222222244222-4222224222
2222222244222-4222224222

Profile 5

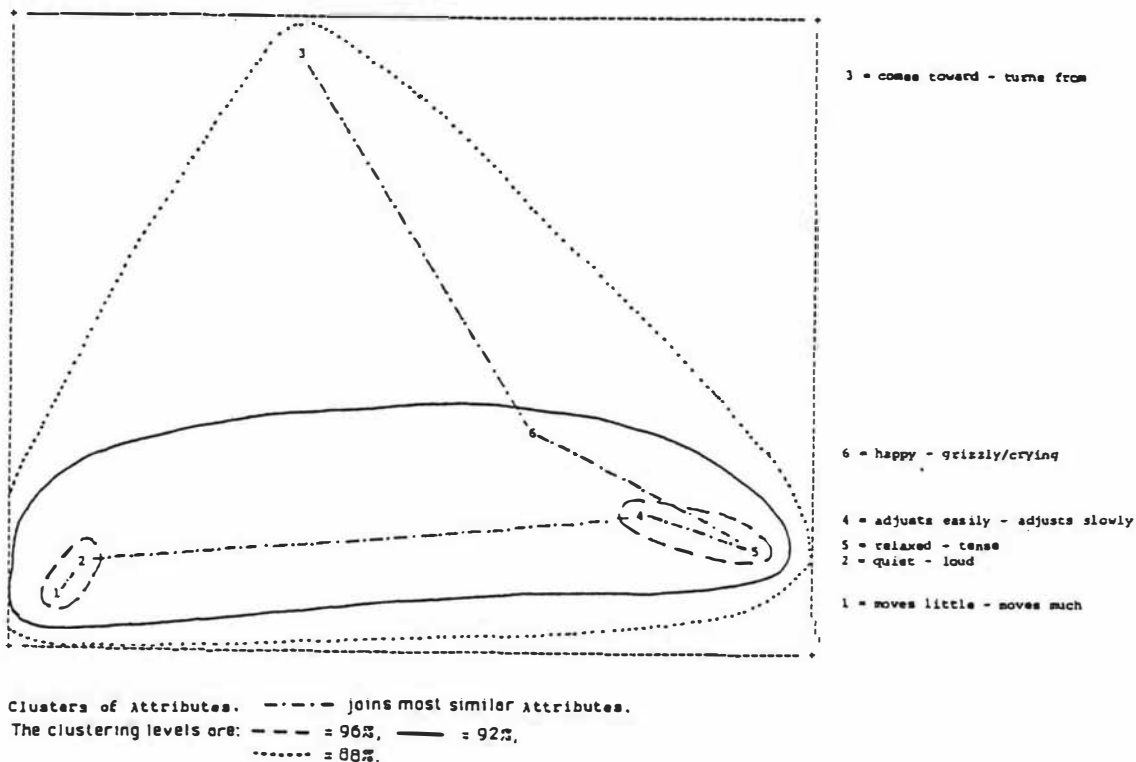
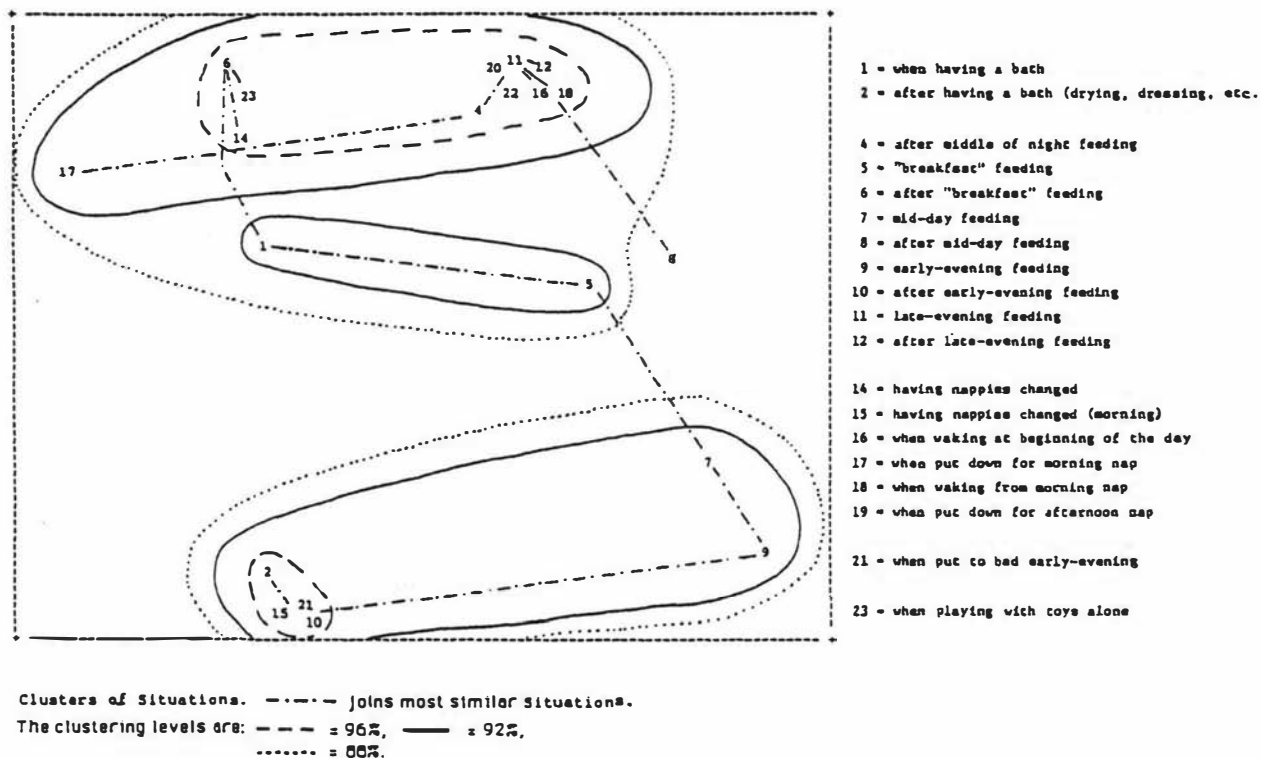
2222222222222222222422-2
2222222224422222222422-2
2222222224222222222422-2
2222222224222222222222-2
2222222224222222222422-2
2322222224422222222422-2

* Columns correspond to ratings for a situation, rows correspond to ratings for an attribute.

** The symbol '-' indicates that the mother deleted this situation from the profile.

Appendix L -continued

First Clustered Infant Profile



First Infant Profile Summary: Explanatory Comments

Situations

There are two clusters at 96%. Situations 2, 10, 15, and 21 form a cluster at the base of the profile, and these situations have been rated with 4s.

These two main clusters remain at 88%, and the items which were unclustered at 96% become clustered, except for situation 8 'after mid-day feeding'.

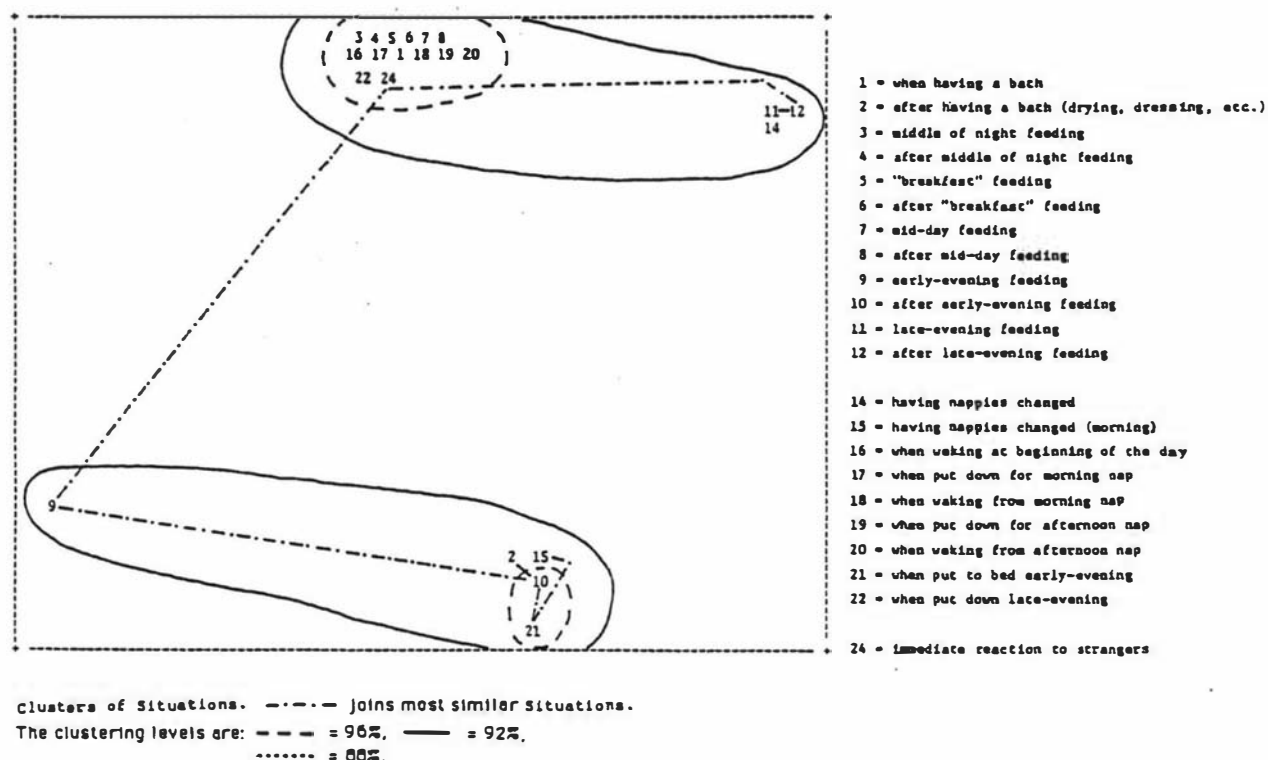
Attributes

Attributes 3 'comes toward-turns from', and 6 'happy-grumpy, grizzly, crying' are unclustered with the other attributes at 96%. Attribute 3 remains unclustered at 92%, but joins the others in one cluster at 88%.

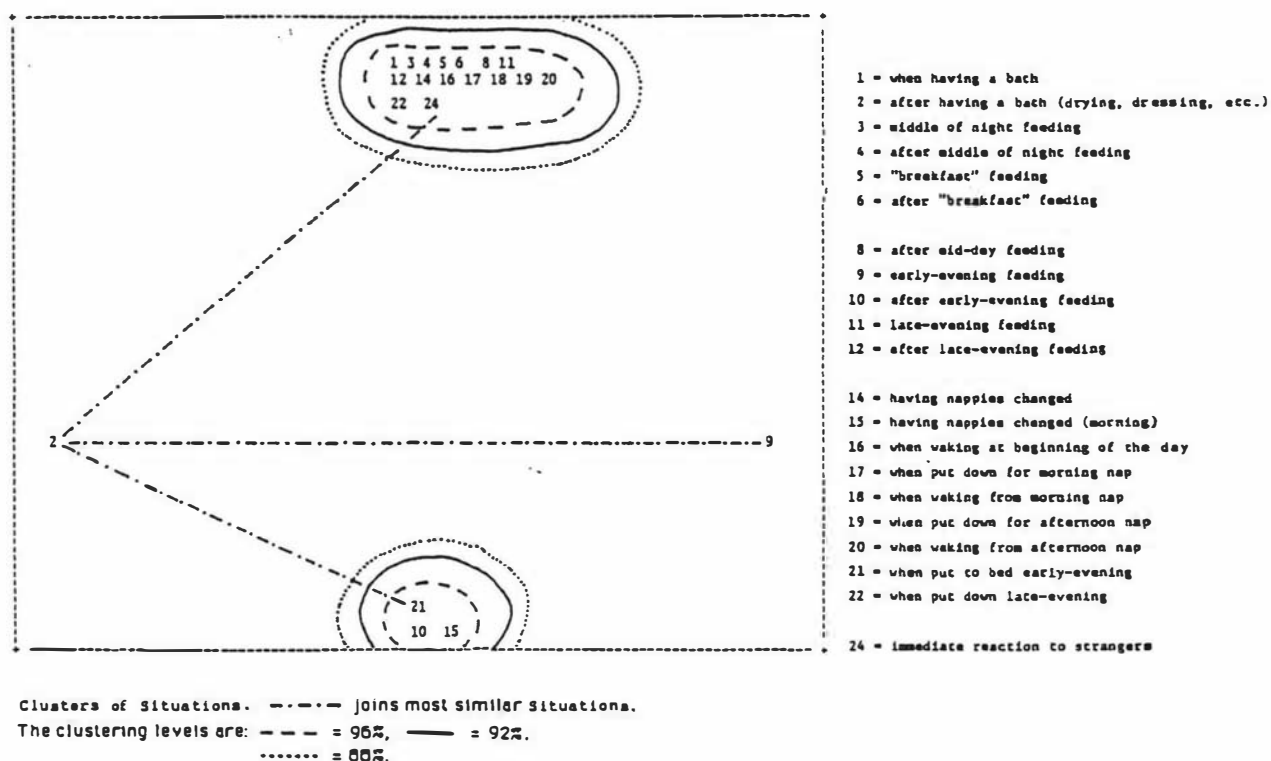
Because the attributes for the remaining infant profiles for this participant cluster at 92% in profile 2, and 96% for profiles 3, 4, and 5, the visual displays for these are not included.

Appendix L -continued

Second and Third Clustered Infant Profiles



- 1 = when having a bath
- 2 = after having a bath (drying, dressing, etc.)
- 3 = middle of night feeding
- 4 = after middle of night feeding
- 5 = "breakfast" feeding
- 6 = after "breakfast" feeding
- 7 = mid-day feeding
- 8 = after mid-day feeding
- 9 = early-evening feeding
- 10 = after early-evening feeding
- 11 = late-evening feeding
- 12 = after late-evening feeding
- 14 = having nappies changed
- 15 = having nappies changed (morning)
- 16 = when waking at beginning of the day
- 17 = when put down for morning nap
- 18 = when waking from morning nap
- 19 = when put down for afternoon nap
- 20 = when waking from afternoon nap
- 21 = when put to bed early-evening
- 22 = when put down late-evening
- 24 = immediate reaction to strangers



- 1 = when having a bath
- 2 = after having a bath (drying, dressing, etc.)
- 3 = middle of night feeding
- 4 = after middle of night feeding
- 5 = "breakfast" feeding
- 6 = after "breakfast" feeding
- 8 = after mid-day feeding
- 9 = early-evening feeding
- 10 = after early-evening feeding
- 11 = late-evening feeding
- 12 = after late-evening feeding
- 14 = having nappies changed
- 15 = having nappies changed (morning)
- 16 = when waking at beginning of the day
- 17 = when put down for morning nap
- 18 = when waking from morning nap
- 19 = when put down for afternoon nap
- 20 = when waking from afternoon nap
- 21 = when put to bed early-evening
- 22 = when put down late-evening
- 24 = immediate reaction to strangers

Second Infant Profile Summary: Explanatory CommentsSituations

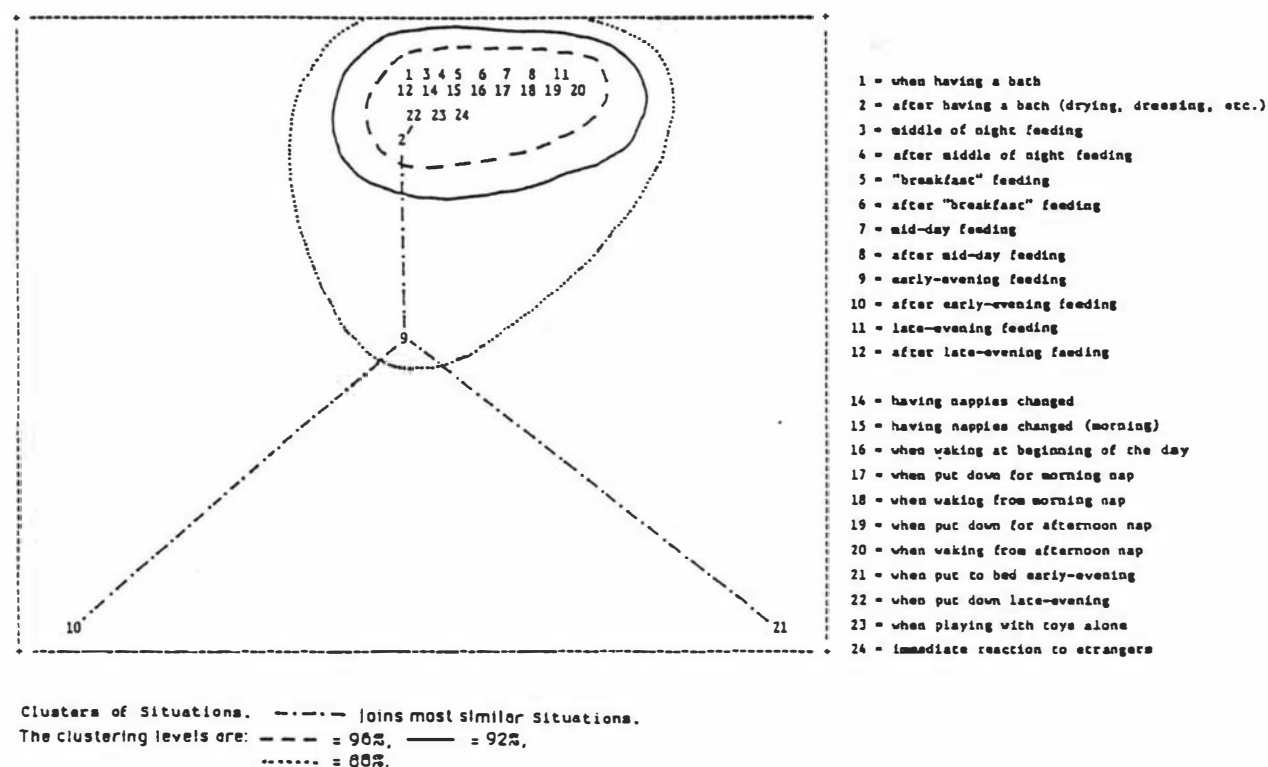
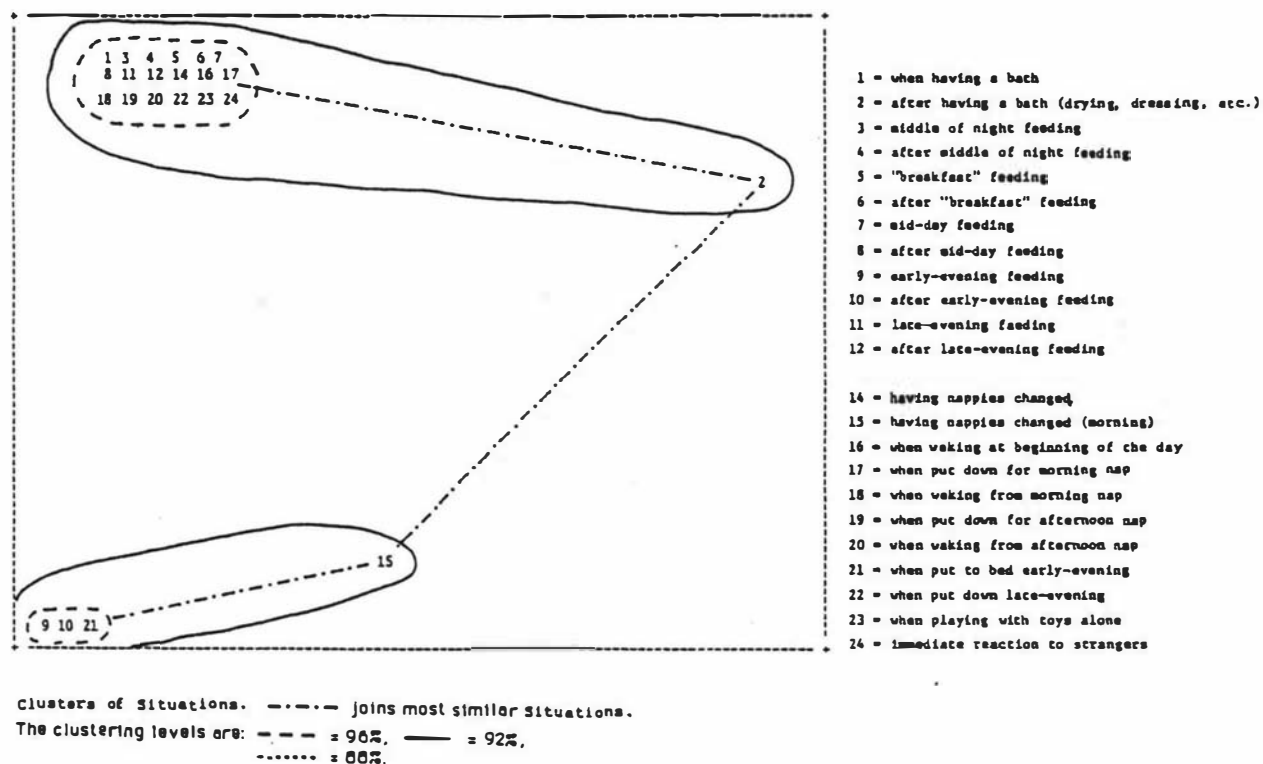
All of the situations are clustered in two main groups at 92%. The ratings for the top cluster are mainly 2s, and the bottom cluster is rated mainly with 4s.

Third Infant Profile Summary: Explanatory CommentsSituations

The clusters in this profile are very similar to those in the previous week's profile. However, there is a difference in that situations 2 'after having a bath', and 9 'early-evening feed time', remain unclustered at 88%. These two situations were included in the bottom cluster in the previous week's profile.

Appendix L -continued

Fourth and Fifth Clustered Infant Profiles



Fourth Infant Profile Summary: Explanatory CommentsSituations

The clustering tends to be very similar to the previous two profiles.

Fifth Infant Profile Summary: Explanatory CommentsSituations

One main cluster is present at 96%. Only three situations are not in this cluster:

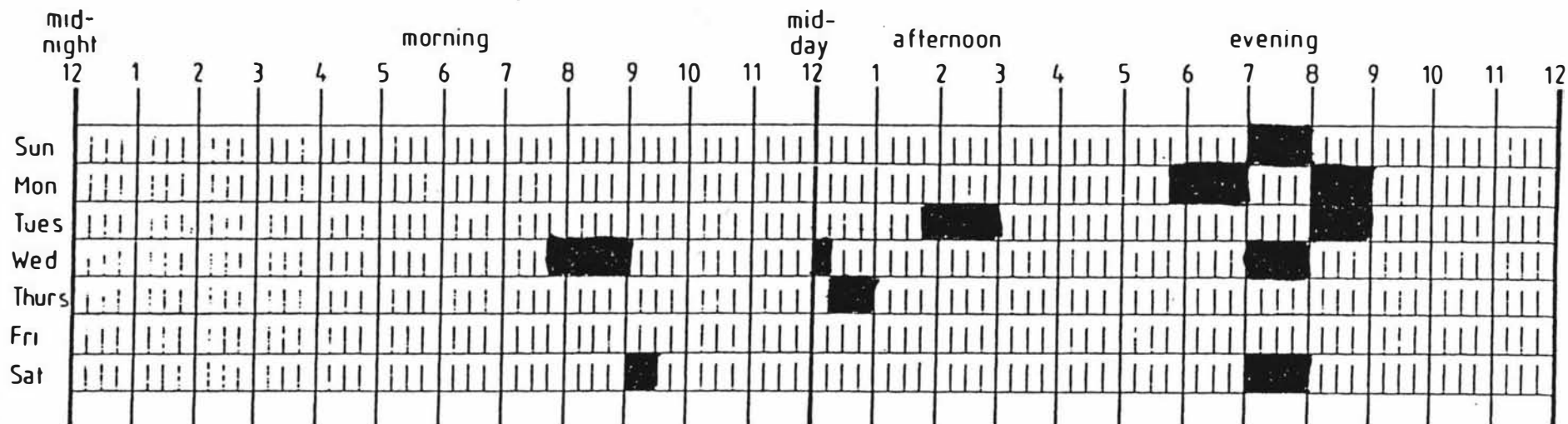
- 9 'early-evening feeding'.
- 10 'after early-evening feeding'.
- 21 'put to bed early-evening'.

Situation 9 is clustered at 88%, while 10 and 21 remain unclustered.

Diary form Parent name: _____ baby's name: _____ Start date: _____

Each of the little boxes stands for 15 minutes. When you have completed this sheet go onto another diary form.

For the present form: _____



Comments:

Sunday:

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

Saturday:

Diary form Parent name: _____ baby's name: _____ Start date: _____

Each of the little boxes stands for 15 minutes. When you have completed this sheet go onto another diary form.

For the present form: _____

	mid-night			morning								mid-day			afternoon				evening						
	12	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12
Sun																									
Mon																									
Tues																									
Wed																									
Thurs																									
Fri																									
Sat																									

Comments:

Sunday:

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

Saturday:

Each of the little boxes stands for 15 minutes. When you have completed this sheet go onto another diary form.

For the present form: _____

The chart displays the distribution of 1000 telephone calls across a 24-hour period for each day of the week. The x-axis represents the time of day, from midnight (12) to 11 PM (11), and then 12 PM (12) to 11 PM (11). The y-axis represents the days of the week: Sun, Mon, Tues, Wed, Thurs, Fri, and Sat. The chart shows that the highest number of calls occur during the evening hours (7-9 PM) on Monday, Tuesday, and Thursday, and during the afternoon hours (4-6 PM) on Friday and Saturday. The lowest number of calls occur during the early morning hours (12-4 AM) on all days.

Sunday:

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

Saturday:

Diary form Parent name: _____ baby's name: _____ Start date: _____

Each of the little boxes stands for 15 minutes. When you have completed this sheet go onto another diary form.

For the present form: _____

	mid- night	morning					mid- day	afternoon				evening													
	12	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12
Sun																									
Mon																									
Tues																									
Wed																									
Thurs																									
Fri																									
Sat																									

Comments:

Sunday:

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

Saturday:

Appendix L -continued

Evaluation of Methods Used in the Study

Name: Participant E

Indicate the category a, b, or c which best describes how you found each method used in the research.

Personal Profile

a. very useful b. useful c. not very useful

Comments: The personal profile was useful but time consuming. It was useful because I found out when I was in control and in what sort of situation I lacked control. I also discovered that after I started to prepare myself for the baby's crying times that the out of control situations became easier to deal with. I don't think that in the first couple of months the baby became less cryful. it was my attitude toward the situation that changed.

Infant Profile

a. very useful b. useful c. not very useful

Comments: This method was useful because it made me more aware of the baby's reactions to different situations. This also helped me to establish a pattern in her crying times, but I didn't find this as useful as the diary form as it was on a weekly basis and sometimes I found it difficult to

remember how she reacted.

Diary Form

a. very useful b. useful c. not very useful

Comments: I have found this method the most useful because it was the least time consuming of the three and it was the easiest to see results from. After completing the form for a few days I could see a pattern emerging around a certain time. I was able to prepare myself mentally for the ordeal.

Appendix M

Case-Study Notes: Participant F

CONTENTS	page
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Interview Notes

Participant F

Cathy (31 years) was a trained teacher who had worked with an airline as a clerk over the last three years. She had worked until 5 weeks prior to the baby's birth, but there were intermittent periods in hospital during the pregnancy. Seth was her first child, and he was a planned baby. He was breastfed, and 6.2 weeks old at the first interview. Her husband was a surveyor.

Cathy described her pregnancy as "awful" . She had haemorrhaged badly within the first few months, and thought she had miscarried at first. After 4 months she was in hospital for a short period with undiagnosed kidney stones. At 8 months she was in hospital again for 5 days when the stones were passed. At this time the fluid level surrounding the baby was low. Cathy knew what the details were, and was very worried about it.

The baby did not move until the last week of the pregnancy, when Cathy went to hospital for an induced delivery. The baby's heart beat dropped, and so the delivery was caesarian. The baby had a skin infection during the hospital stay and was given anti-biotic injections for 5 days from day 4 to day 9. Seth had slept a lot in hospital but had some crying days when the nurses would push him around. They were in hospital for 12 days, and Seth roomed-in with Cathy.

First Interview Notes (1 1/2 hours)

Researcher's impressions. Cathy appeared to be an anxious person who was, perhaps, a little bewildered by what was going on. She seemed, though, to have common sense.

Cathy's description of being at home with Seth.

I was very tired after I came home from the hospital. Three days later I had a high temperature and it was diagnosed as appendicitis. However, the temperature came down and it wasn't appendicitis.

There was no follow-up treatment.

I had a Karitane nurse for that week, and she looked after Seth during the day when he was still pretty good. He's got horrible since I've had him to look after. I might have been someone else looking after him, not his mother.

He's happy while he's feeding, but after his feed it's pretty rare that he's not actually crying. He cries when he's left, but when he's picked up he cries again. He doesn't seem to think it's very nice. I've been overwhelmed with Seth crying the last few days, it's been awful and I've been quite miserable.

He wasn't too bad after the first few weeks when the Karitane left, it was very busy and Seth seemed to sleep more. He's having lots of awake periods in between. I'm wondering what to do about it and why he should be like that. It must be his personality.

We go for walks most evenings. we put him in the front pack. Last night I was so exhausted I couldn't go for a walk. It seems much easier when my husband is home to help, he takes Seth if I ask. I have no family here to help me.

Note: The items 'when baby grizzles', and 'when baby roars' were differentiated by Cathy from the item 'when baby cries' while she was working on the matrix. The items 'when we have visitors' and 'when at home alone with the baby' were also differentiated at this time from the item 'when husband is at home'.

The construct 'feeling like wanting to get away from baby' was elicited from the item 'when baby roars':

'feeling bad' was elicited with 'when baby cries', and 'feeling relaxed' with the item 'when husband is home', and 'when we have visitors'.

Interview Two

Researcher's comments. Cathy's father was sick and she had to go and see him in another city. The new forms for the infant profile and the diary form were posted to Cathy, together with an unrated personal profile matrix.

Interview Three

Researcher's comments. Seth had cried a lot while Cathy was away with him. He had been taken to the Doctor, and an ear infection had been diagnosed, and he is still on anti-biotics. Seth had cried loudly and persistently late one afternoon, during the evening, and the late night. He was taken to the Doctor the next morning. When they returned home he was taken to the Doctor for another examination, but all trace of the infection had gone. Seth continued on anti-biotics for another 4 days.

Cathy's comments.

I can tell what the cries mean now, and I couldn't before. Seth has a grizzly cry, it's not urgent when he's put down, so I can do something else. He has a 'come back I'm bored' sound, a hungry cry when he just wakes up, and a loud persistent cry when something is wrong physically. It was about 2 weeks ago when I started picking up the cries.

There's been a lot more awful crying than before, but overall there's been less, or because now I'm recognising them I'm not so worried. The whole context of the cry is important, other things come into it.

The infant profile has helped, and the personal profile has been

particularly helpful for comparing weeks. It becomes apparent when you're actually doing the profile. I think how bad the really bad times were, and how much better they are now.

The whole thing of parenthood is the most demanding thing that's ever happened to me. I have always been able to cope before. It's been a real shock, the huge responsibility, and the effort, and then having a baby who didn't seem to respond in any way. Such a lot of the crying rebounds on you, and you lose confidence. I was looking forward to getting home from hospital, that things must pick up from now on, but they didn't quite.

Some of the infant profile situations are getting better now, I know the crying is related to something wrong, not nappies, wind etc. I did expect Seth to sleep much more than he did.

Interview Four

Researcher's comments. Seth was playing on the floor on a sheepskin rug, smiling. His father was home with a sore back or virus. The interview was short because of this, but the profile ratings for the week indicated that things are settling down for everyone now. Cathy seemed a lot brighter and less tired. Because her husband was home, Cathy just filled in the forms, and didn't make any effort to involve her husband in the exercise.

Interview Five

Researcher's comments. This was the last interview. A number of points were clarified with Cathy, and her comments are recorded below. She appears to have regained her confidence and feels that she can handle Seth now.

Cathy's comments.

There was nothing that could have helped in retrospect unless you had direct contact with little babies, and had to help with them. I had friends with babies, but had no real time with the babies other than when we would see them.

I used to blame myself with Seth at first, and when it got really terrible I thought it must be his personality. I was looking on the black side of things, and I remember saying to Tim (her husband) that Seth and I just didn't get on. I had quite a responsible job and had to learn a lot of procedures, it took a while to feel in control, about 6 months. and that surprised me. At times I felt out of control with Seth. I usually waited until Tim came home and then I would burst into tears and talk it over with him. He has been marvellous.

There was a 2 month period that was the worst for sleeping, I expected Seth to sleep more. Perhaps I should have put him down to sleep more often, and I do that now. It's much easier now to watch him for signs. I think I know what he wants and what I should be doing. I have found it a fairly shattering

experience, there wasn't really anyone to talk to. Now I find that talking to other mothers is really useful in other groups. Looking back on having the caesarian, I would have liked a brief talk on emergencies or problems, things that are out of the ordinary.

I expected feeling like a mother to take a while and it did. I feel more like a mother now, but I can't define it, perhaps caring for a little baby and having it respond to you. When Seth smiles I feel like a mother.

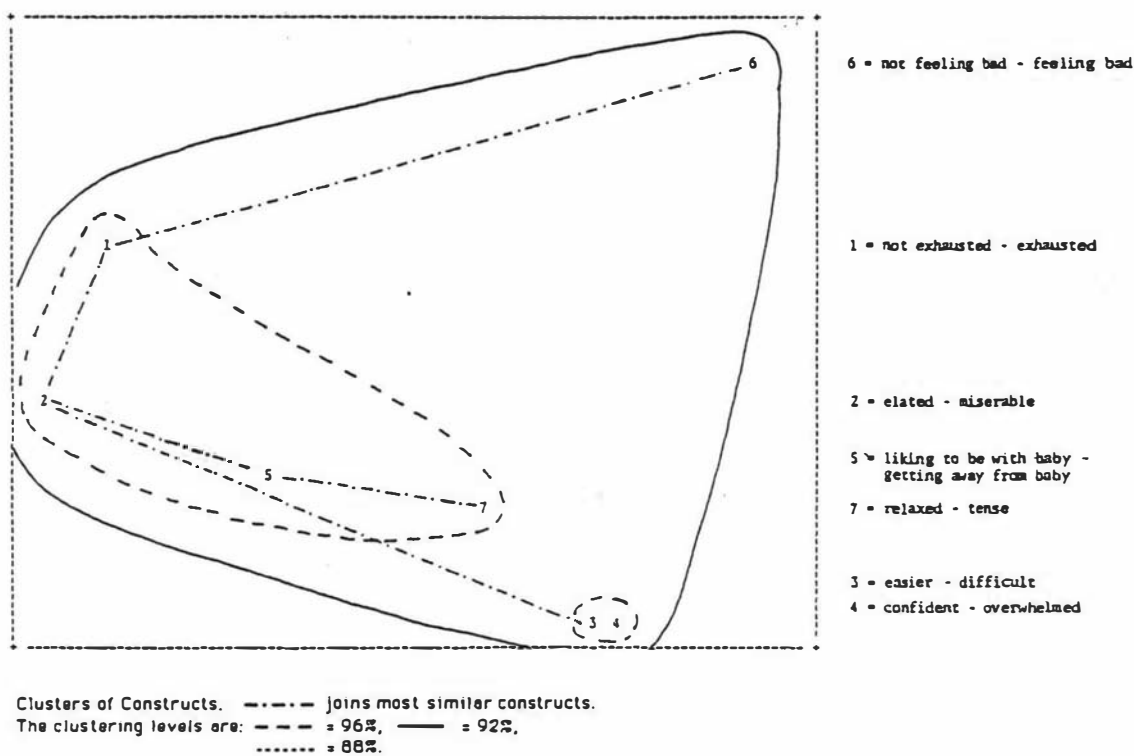
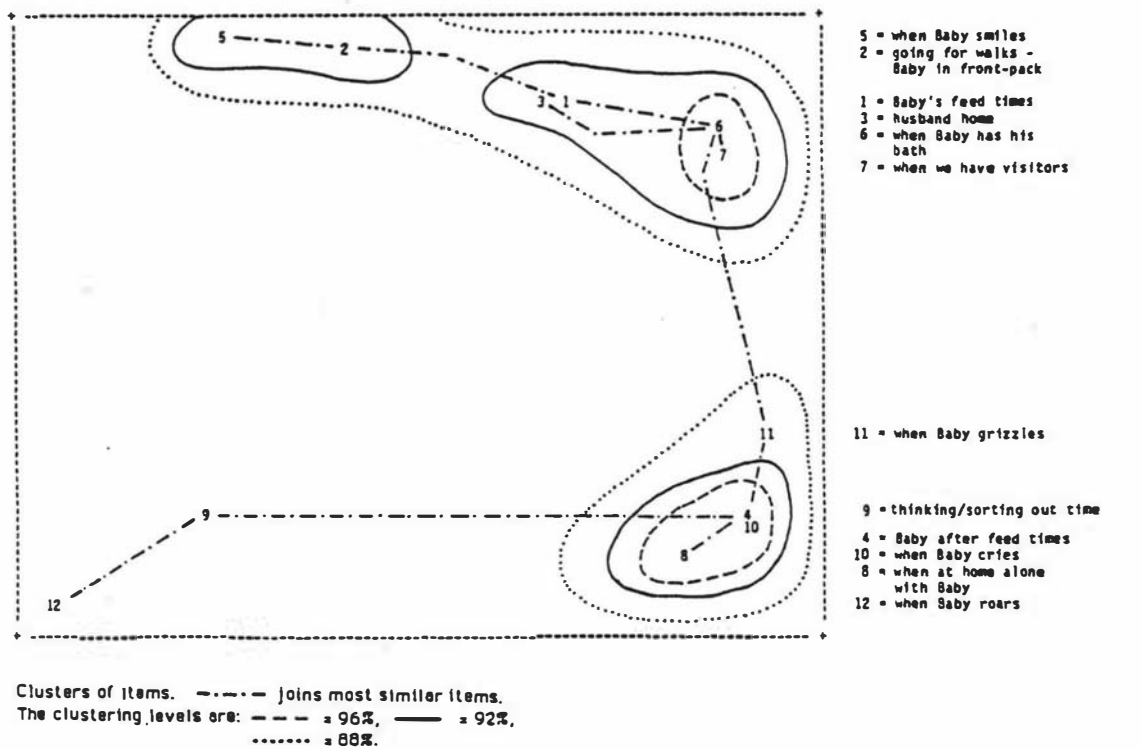
Appendix M -continued

First Personal Profile Matrix

feelings constructs	Items											
	baby's feedtimes	going for walks baby in front pack	when husband home	baby after feedtimes	when baby smiles	when baby has bath	when we have visitors	when at home alone with baby	thinking/sorting out times about baby/me	when baby cries	when baby grizzles	when baby roars
not exhausted-												
exhausted	2	2	2	4	1	2	2	4	3	4	3	5
elated-												
miserable	2	2	2	4	1	2	2	4	5	4	3	5
it is easier-												
it is difficult	2	1	1	4	1	2	2	4	5	4	4	5
confident-												
overwhelmed	2	1	1	4	1	2	2	4	5	4	4	5
liking to be with baby-												
getting away from baby	1	1	2	4	1	2	2	4	5	4	3	5
not feeling bad-												
bad	2	1	2	3	1	2	2	4	3	3	3	4
relaxed-												
tense	1	1	2	4	1	2	2	4	4	4	4	5

Appendix M -continued

First Clustered Personal Profile



First Personal Profile: Explanatory Comments

Items

There are two groups of items that cluster at 96%.
These are items:

- 4 'baby after feed time',
- 8 'when at home alone with baby'.
- 10 'when the baby cries'.

These items are at the base of the profile. and form the most negative cluster. Item 6 'when the baby has his bath', and item 7 'when we have visitors', form the most positive cluster.

There are three clusters at 92%. The additional cluster consists of item 2 'going for walks front-pack', and item 5 'when the baby smiles', which is situated in the positive area of the profile.

Feelings (Constructs)

Two clusters of constructs are present at 96%, but these become one cluster at 92%.

Appendix M -continued

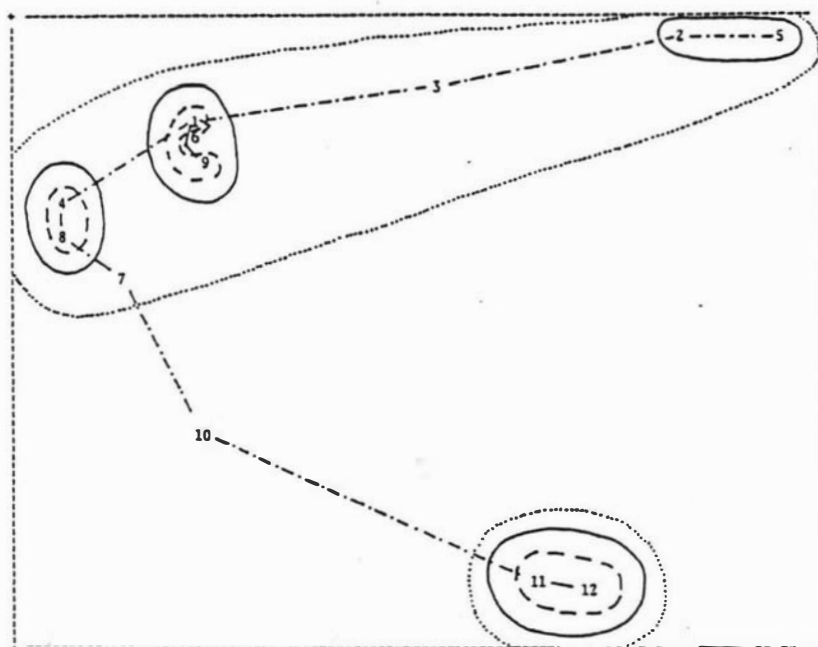
Personal Profile Ratings for Participant F: weeks 2 to 5.

Profile 2	Profile 3	Profile 4	Profile 5
*			
222313442455	222313242445	222212333334	222212222324
322312233455	221313232435	211213332424	212213232434
211312332455	211212242532	211212232424	111212222434
212212323445	211212342535	211211222325	111211221223
212212222355	111211222545	111211222334	111211221334
212212322344	111111242435	211212222223	111211221434
211312332455	111212242535	212212333435	211212331435

* Columns correspond to ratings for an item, rows correspond to ratings for a construct.

Appendix M -continued

Second Clustered Personal Profile

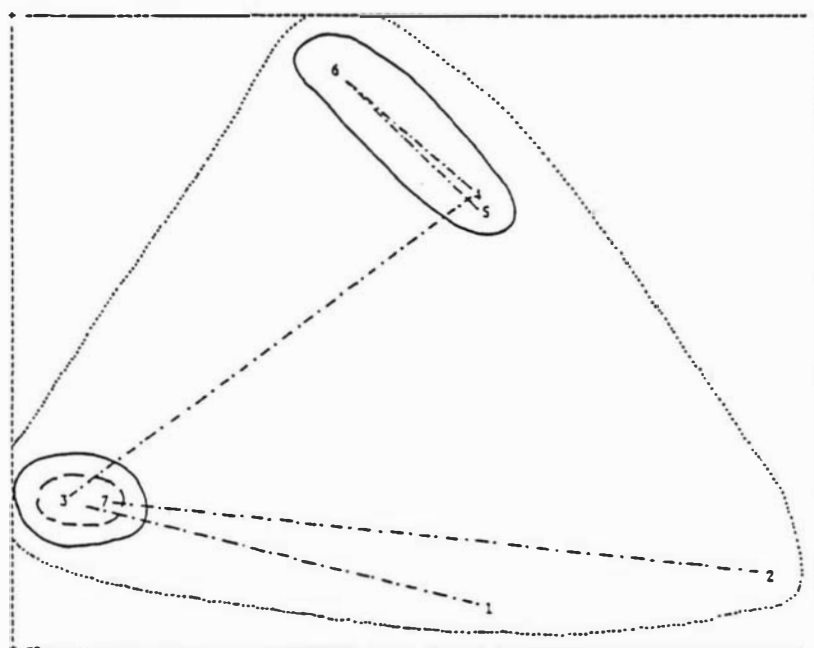


- 5 = when baby smiles
- 2 = going for walks - baby in front pack
- 3 = husband home
- 1 = baby's feed times
- 6 = when baby has his bath
- 9 = thinking/sorting out time
- 4 = baby after feed times
- 8 = when at home alone with baby
- 7 = when we have visitors

10 = when baby cries

11 = when baby grizzles
12 = when baby roars

Clusters of Items. --- joins most similar items.
The clustering levels are: --- = 96%, — = 92%,
..... = 88%.



6 = not feeling bad - feeling bad

4 = confident - overwhelmed
5 = liking to be with baby -
getting away from baby

7 = relaxed - tense
3 = easier - difficult

2 = elated - miserable

1 = not exhausted - exhausted

Clusters of Constructs. --- joins most similar constructs.
The clustering levels are: --- = 96%, — = 92%,
..... = 88%.

Second Personal Profile: Explanatory CommentsItems

The four groups of items that cluster at 92% become two clusters at 88%. Item 11 'when the baby cries', and item 12 'when the baby roars', are the most negative cluster, rated with 5s.

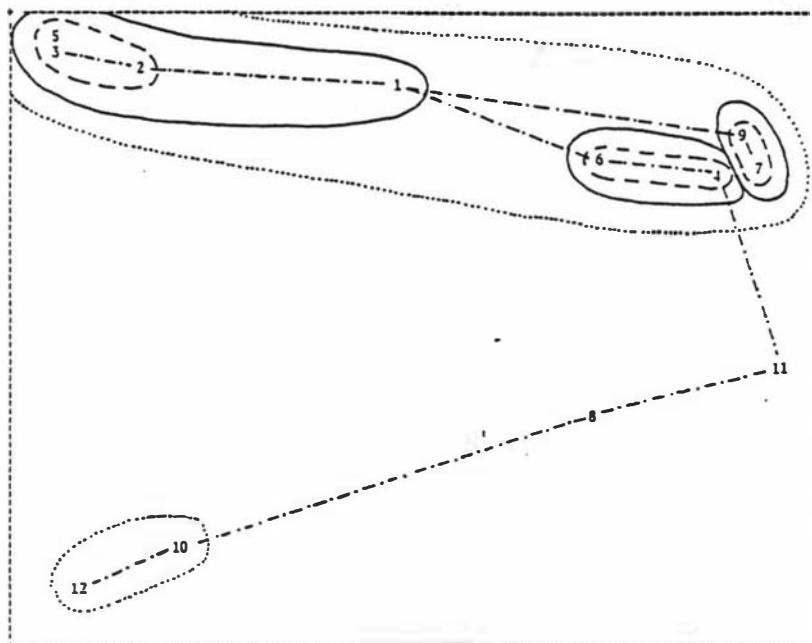
All of the other items are together in a positive cluster at 88%, except for item 10 'when the baby cries'.

Feelings (Constructs)

The two clusters of constructs present at 92% become one cluster at 88%.

Appendix M -continued

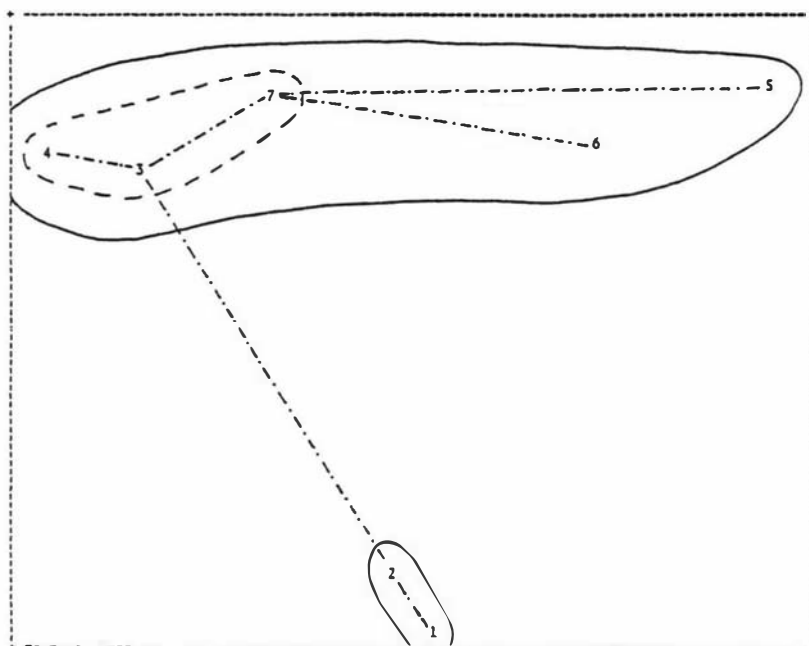
Third Clustered Personal Profile



- 5 = when baby smiles
- 3 = husband home
- 2 = going for walks - baby in front pack
- 1 = baby's feed times
- 9 = thinking/sorting out time
- 6 = when baby has his bath
- 7 = when we have visitors
- 4 = baby after feed times

- 11 = when baby grizzles
- 8 = when at home alone with baby
- 10 = when baby cries
- 12 = when baby roars

Clusters of Items. --- joins most similar items.
 The clustering levels are: --- = 96%, — = 92%,
 = 88%.



- 5 = liking to be with baby - getting away from baby
- 7 = relaxed - tense
- 4 = confident - overwhelmed
- 3 = easier - difficult
- 6 = not feeling bad - feeling bad

- 2 = elated - miserable
- 1 = not exhausted - exhausted

Clusters of Constructs. --- joins most similar constructs.
 The clustering levels are: --- = 96%, — = 92%,
 = 88%.

Third Personal Profile: Explanatory Comments

Items

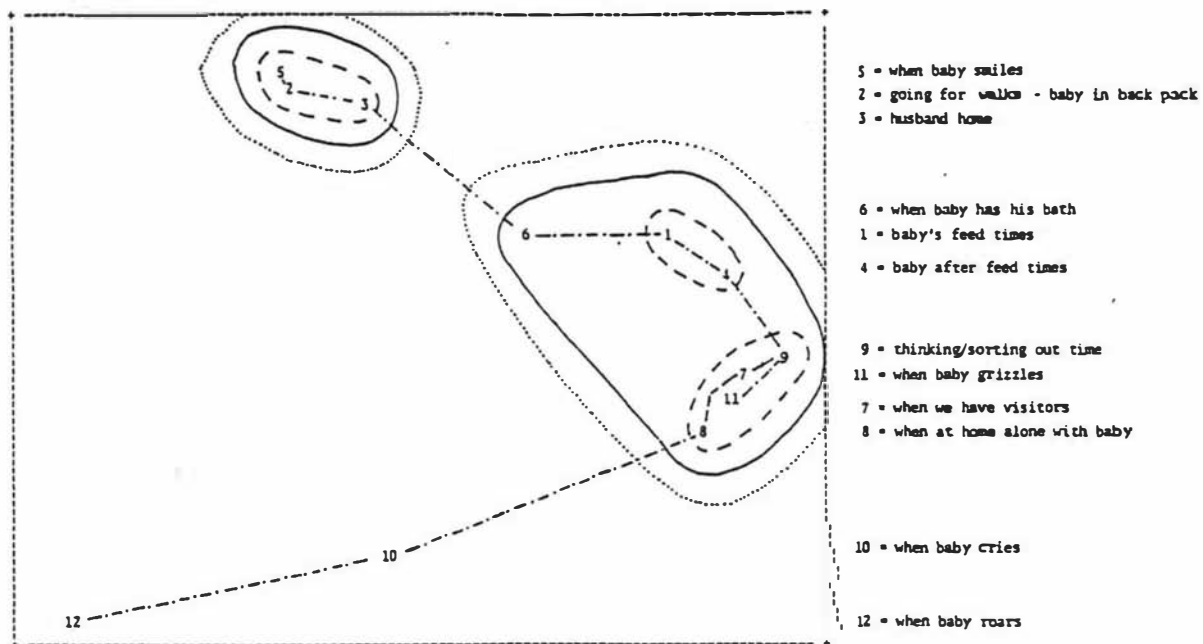
There are three clusters present at 96%, with items 8, 10, 11, and 12 remaining unclustered. The clustering of the items at 88% groups item 10 'when the baby cries', and item 12 'when the baby roars', as the most negative. Two items which are unclustered at 88% are item 8 'at home alone with the baby', and item 11 'when the baby grizzles'.

Feelings (Constructs)

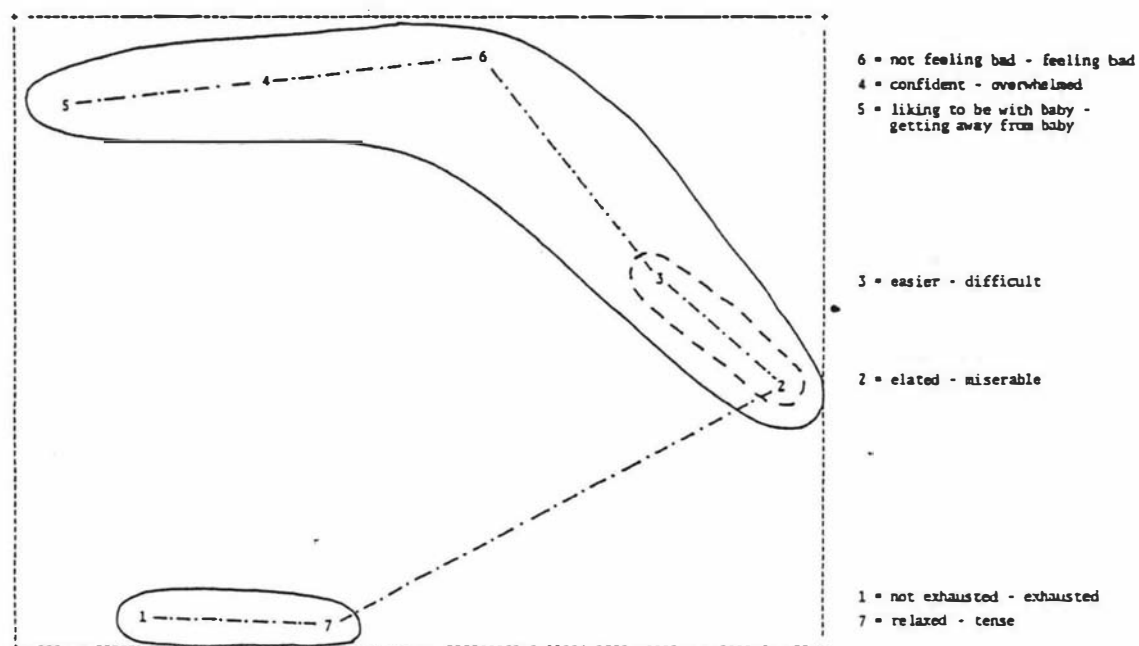
There are two groups of constructs which cluster at 92%. None of the constructs are unclustered at this level.

Appendix M -continued

Fourth Clustered Personal Profile



Clusters of Items. - - - - joins most similar items.
The clustering levels are: - - - - = 96%, — = 92%,
..... = 88%.



Clusters of Constructs. - - - - joins most similar constructs.
The clustering levels are: - - - - = 96%, — = 92%,
..... = 88%.

Fourth Personal Profile: Explanatory Comments

Items

The items are in three clusters at 96%, with three of the items remaining unclustered. These are:

6 'baby having bath',

10 'baby crying',

12 'baby roaring'.

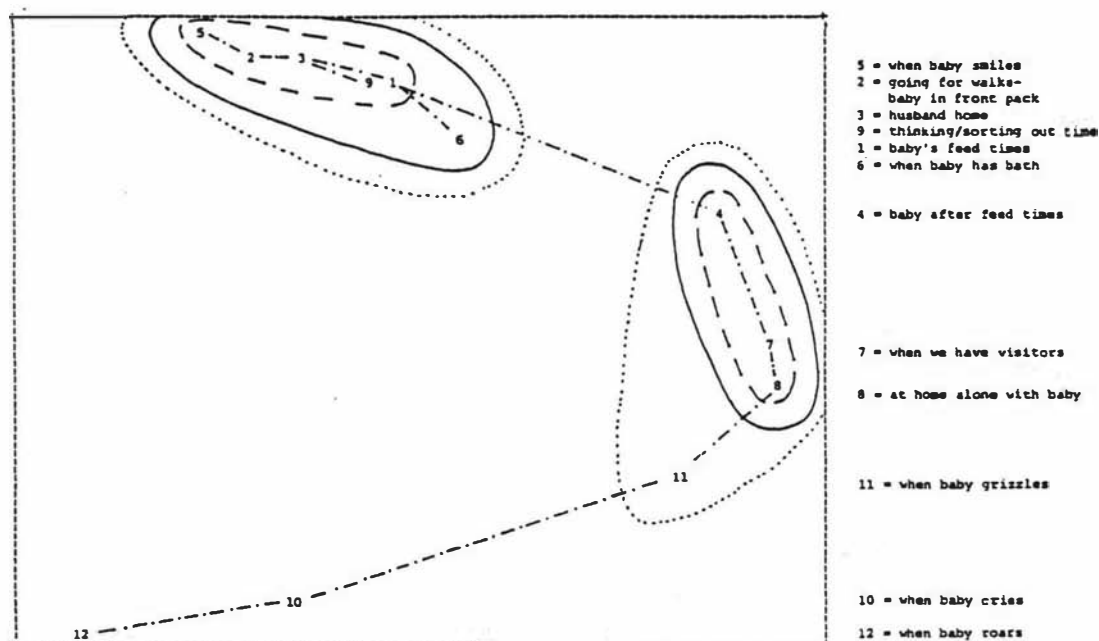
When the items are clustered at 92%, item 10 'when the baby cries', and item 12 'when the baby roars', remain unclustered. These are the most negatively rated items in the profile. The other clustered items have positive and neutral ratings.

Feelings (Constructs)

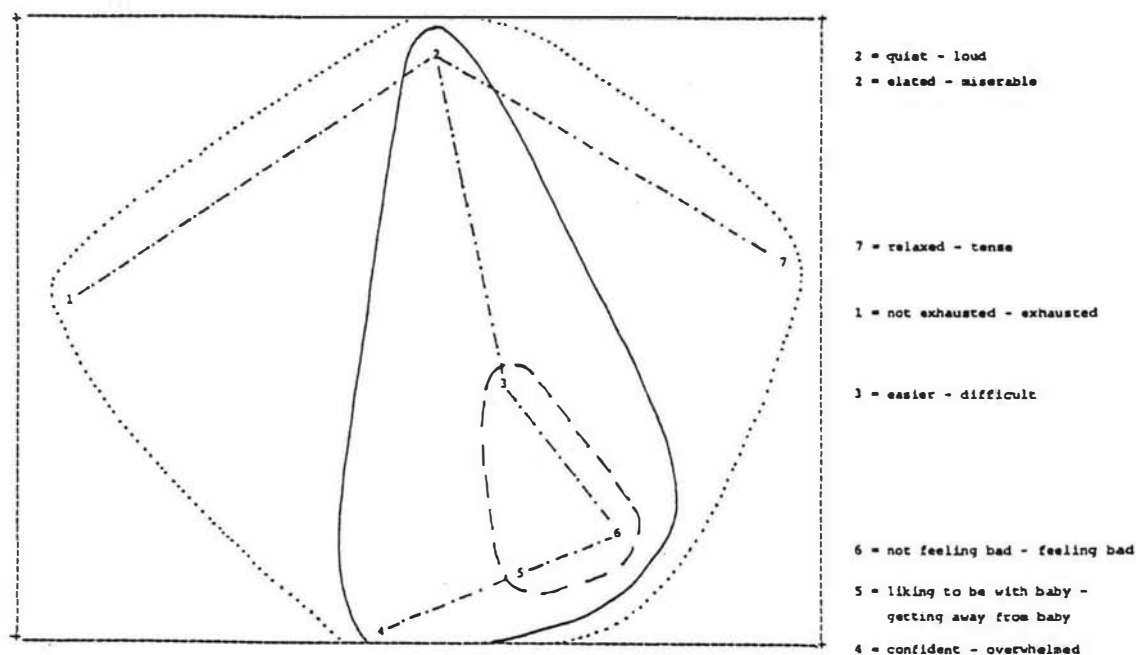
The clusters remain very similar to the previous profile.

Appendix M -continued

Fifth Clustered Personal Profile



Clusters of Items. - - - - joins most similar items.
 The clustering levels are: - - - = 96%, — = 92%,
 = 88%.



Clusters of Constructs. - - - - joins most similar constructs.
 The clustering levels are: - - - = 96%, — = 92%,
 = 88%.

Fifth Personal Profile; Explanatory CommentsItems

The arrangement of the items in the clusters is similar to that of the previous profile. Item 10 'when the baby cries', and item 12 'when the baby roars', remain unclustered at 88%.

Feelings (Constructs)

The clustering of the constructs remains similar to the previous profile.

Appendix M -continued

Infant Profile Ratings for Participant F; weeks 1 to 5.

Profile 1

* **
 2522342445--34434344545-
 2522443445--34425453542-
 4411242224--54425353542-
 1522243445--54425353542-
 2522343544--44425353532-
 2523343455--34425353542-

Profile 2

24-31224442--2222432524-
 14-44324442--2142432524-
 24-13311224--1212332521-
 23-12211434--1112242521-
 24-21211424--1122332422-
 24-333114231--212342531-

Profile 3

2222344444--244434442-43
 1222444444--144434441-43
 2243121323--224222421-42
 1212111323--224222421-32
 2222212323--224423321-32
 2222212433--224422421-32

Profile 4

4322241424--222432---122
 1412242424--122423---142
 2412124424--222232---123
 2412222244--122232---122
 2312223233--122332---123
 1322213223--222332---223

Profile 5

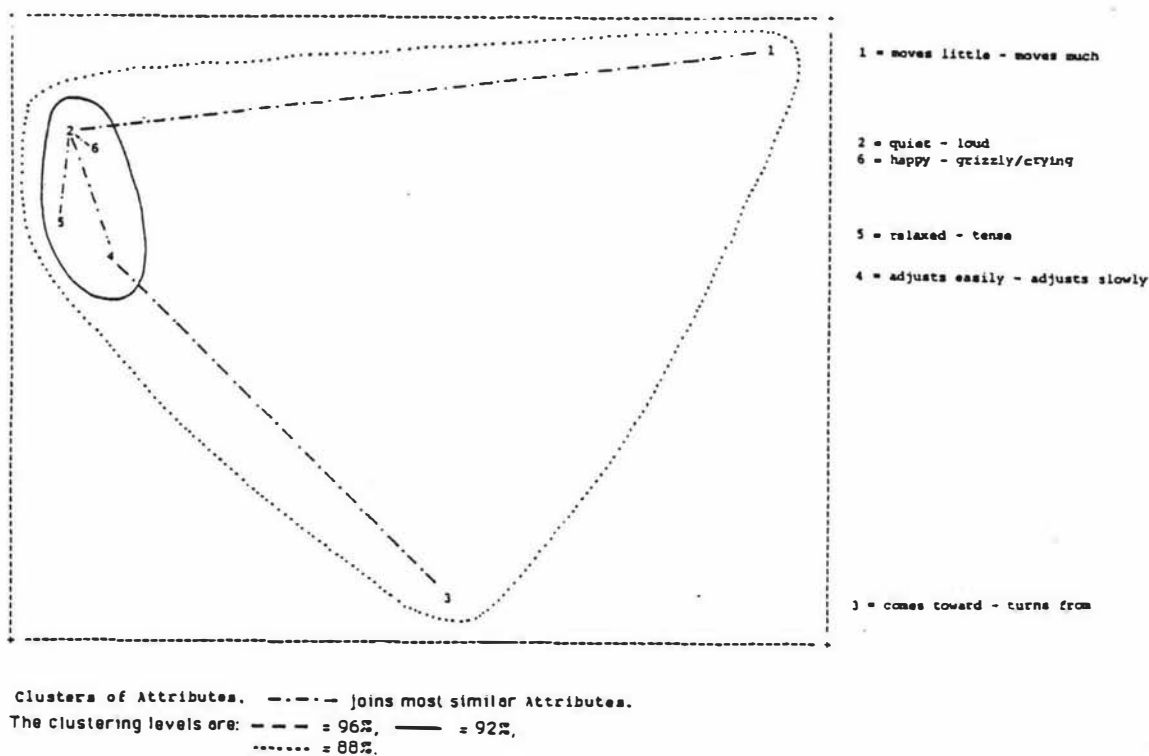
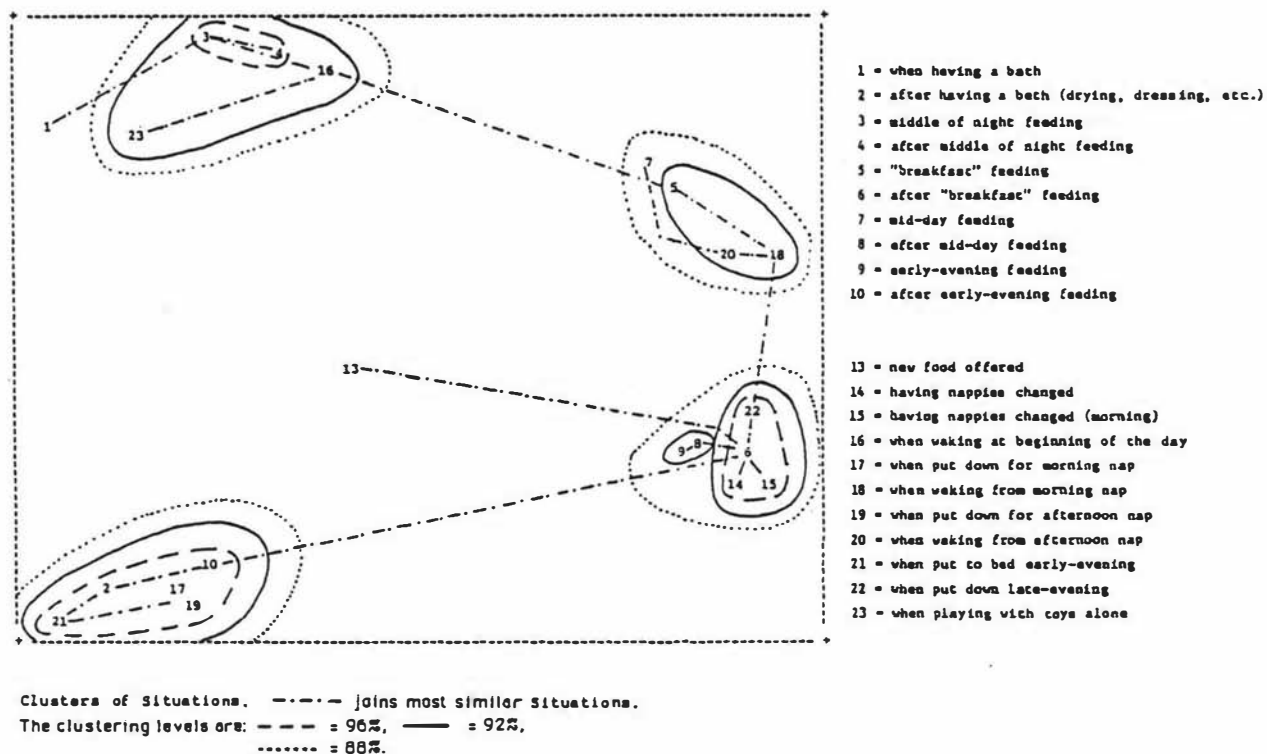
4422242454--22444454-243
 1312242443--22454454-243
 2412112233--22542353-243
 2412212242--22532352-242
 4422223243--22542353-132
 2422213233--22542353-242

* Columns correspond to ratings for a situation, rows correspond to ratings for an attribute.

** The symbol '-' indicates that the mother deleted this situation from the profile.

Appendix M -continued

First Clustered Infant Profile



First Infant Profile: Explanatory CommentsSituations

Three clusters are present at 96%. Situations 3 'middle of night feeding', and 4 'after middle of the night feeding', form the cluster at the top of the profile and have been rated with 1s and 2s. The cluster at the base of the profile has been rated with 5s.

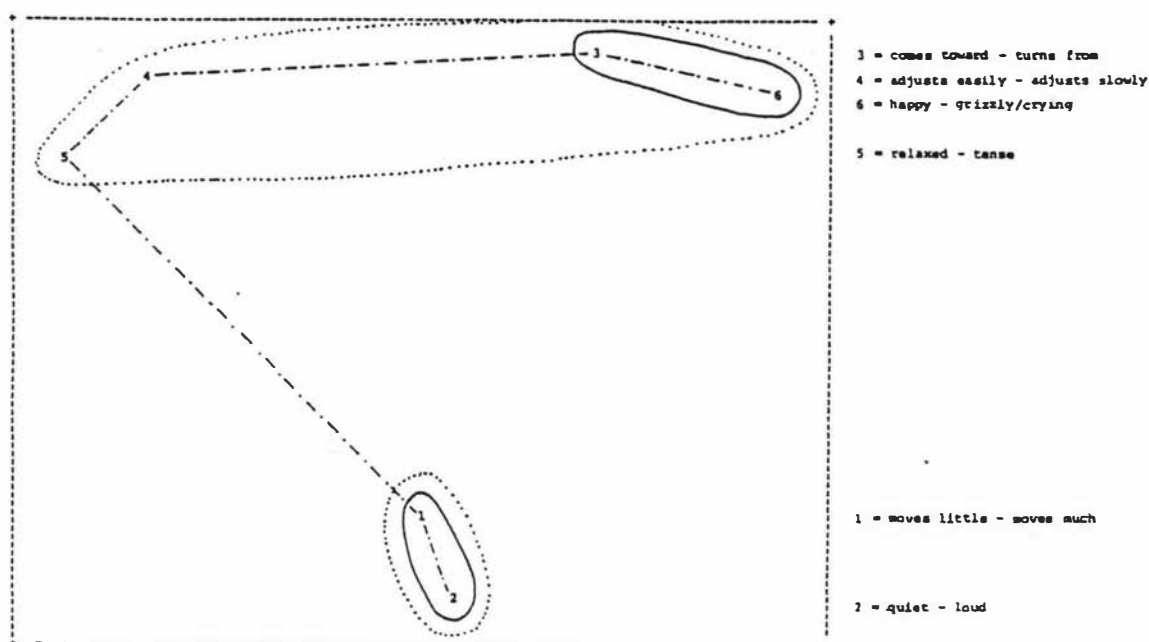
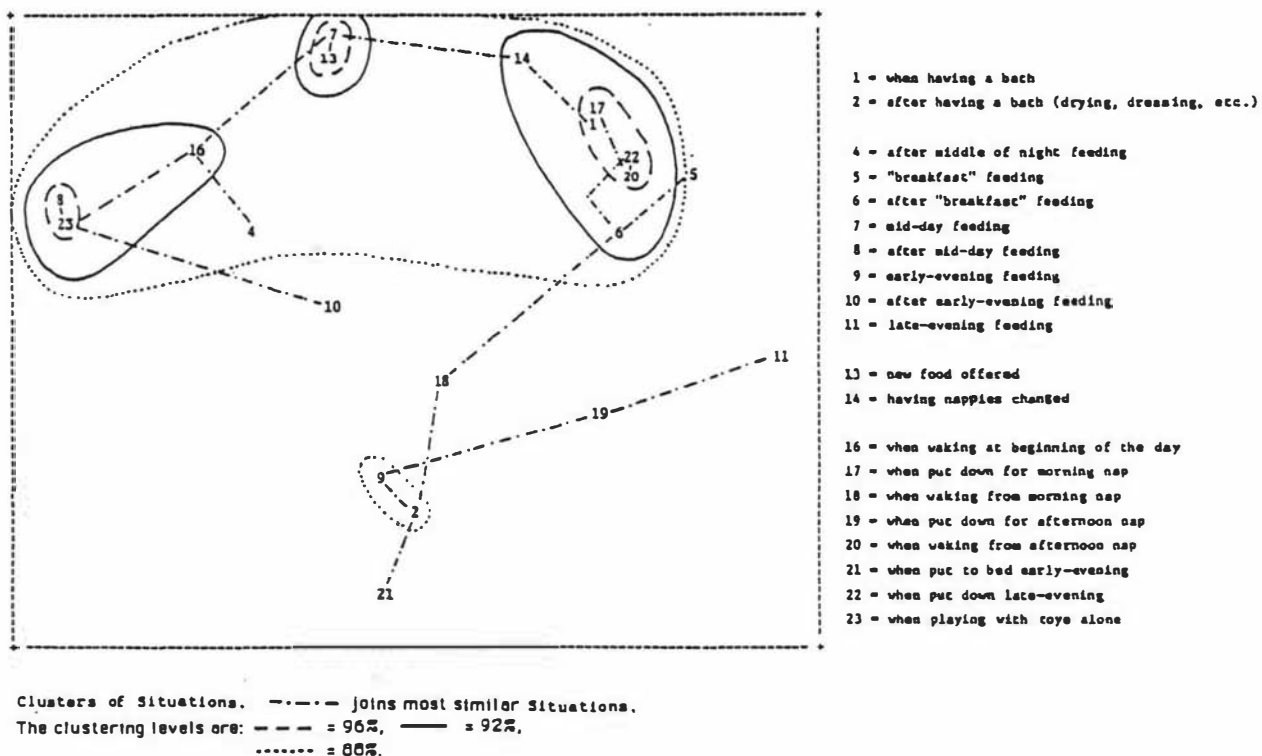
Ten situations are unclustered at 96%, three at 92%, and situations 1 'when having a bath', and 13 'when offered new food', remain unclustered at 88%.

Attributes

None of the attributes is clustered at 96%, four are clustered at 92%, and all become one cluster at 88%.

Appendix M -continued

Second Clustered Infant Profile



Second Infant Profile: Explanatory Comments

Situations

There are three clusters at 96% with twelve of the situations being unclustered. Nine of these remain unclustered at 92%, and six at 88%.

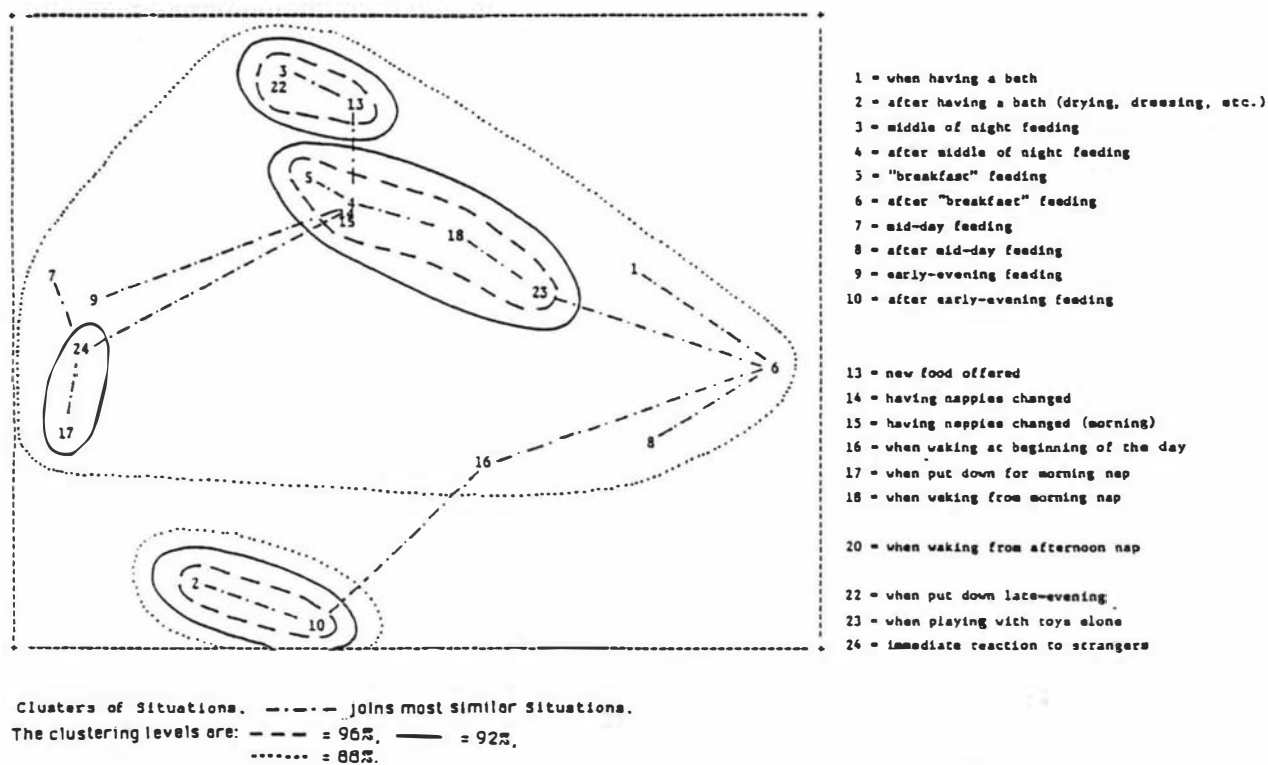
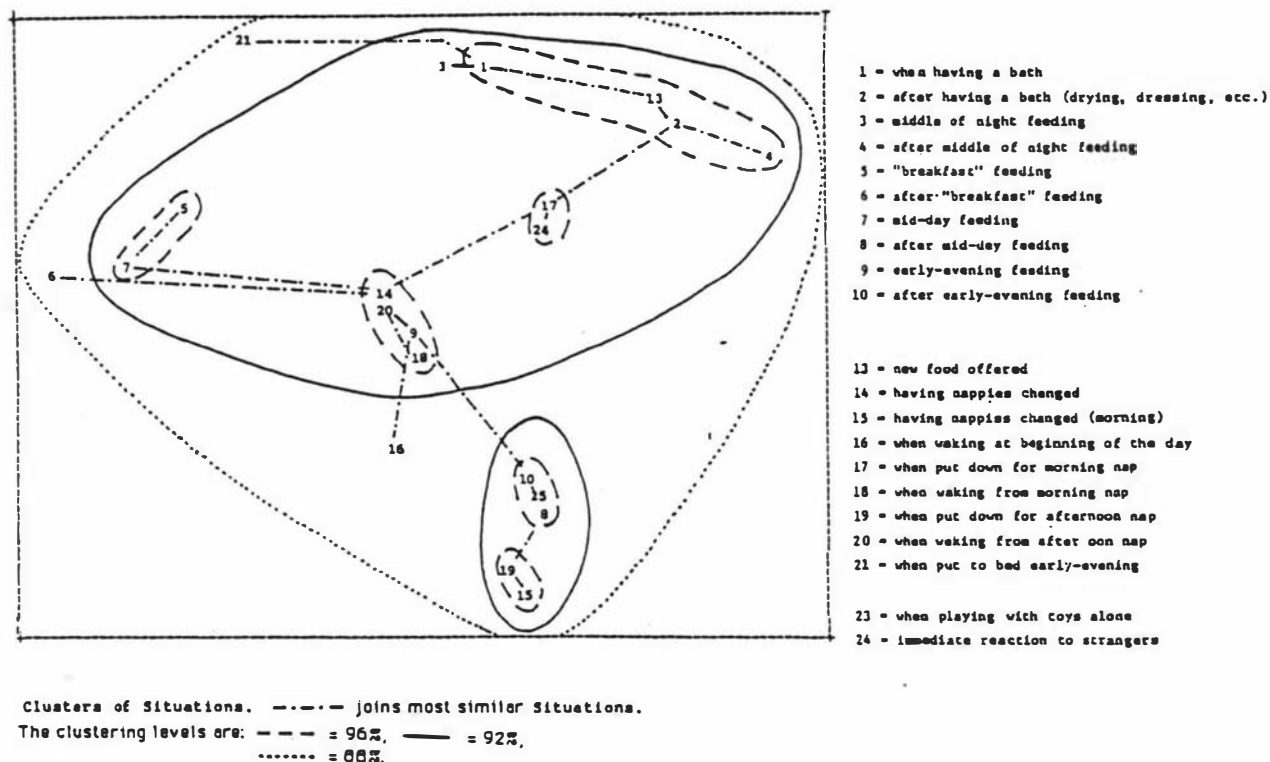
The cluster at the top of the profile is increased by the inclusion of these other situations. This cluster has been rated with 2s and 1s.

Attributes

The clustering of the attributes for this profile have been included because there are two separate clusters at 88%. Situation 1 'moves little-moves much' and 2 'quiet-loud', form a cluster separate from the others.

Appendix M -continued

Third and Fourth Clustered Infant Profiles



Third Infant Profile: Explanatory Comments

Situations

The six clusters that are present at 96% become two clusters at 92%, and one main cluster at 88%. None of the situations are unclustered at this level.

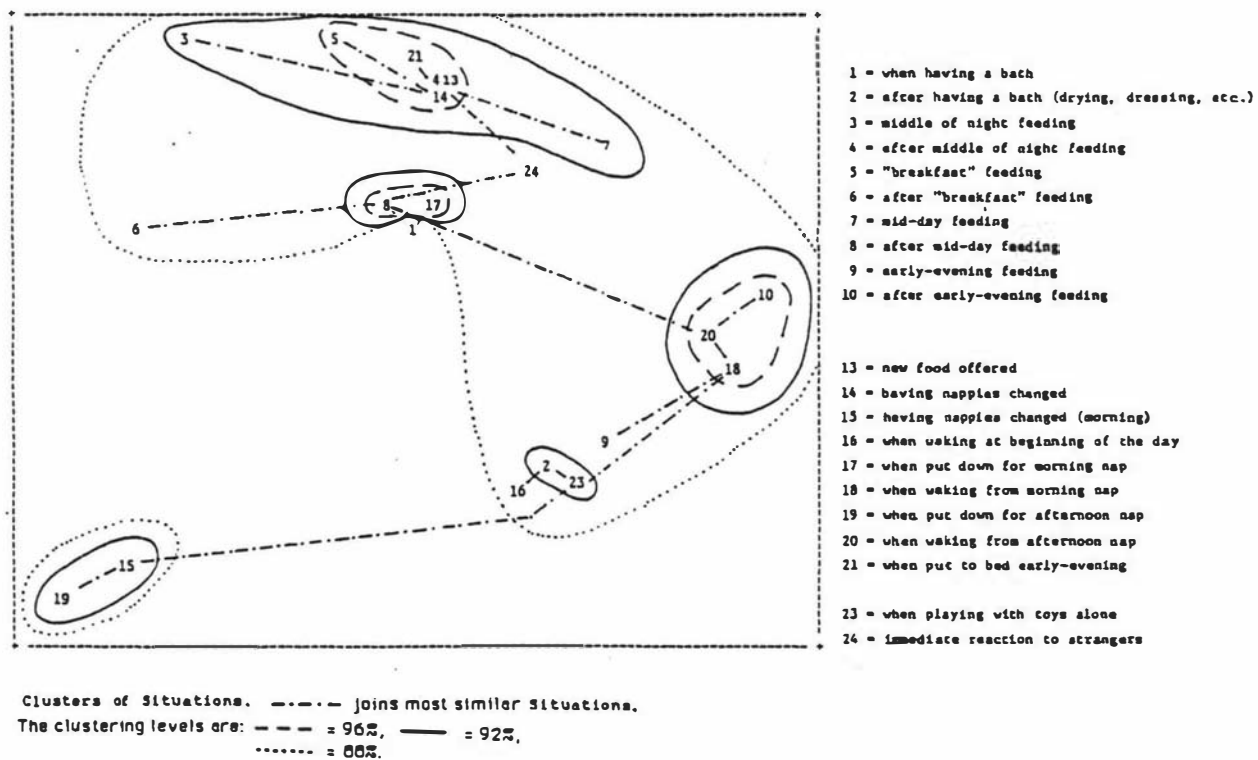
Fourth Infant Profile: Explanatory Comments

Situations

Although all of the situations are clustered at 88%, they do so in two clusters. The cluster at the base of the profile consists of situations 2 'after bath', and 10 'early evening feed time', and has been rated with 4s and 3s. The other larger cluster has been rated with 2s. All of the attributes clustered at 88%.

Appendix M -continued

Fifth Clustered Infant Profile



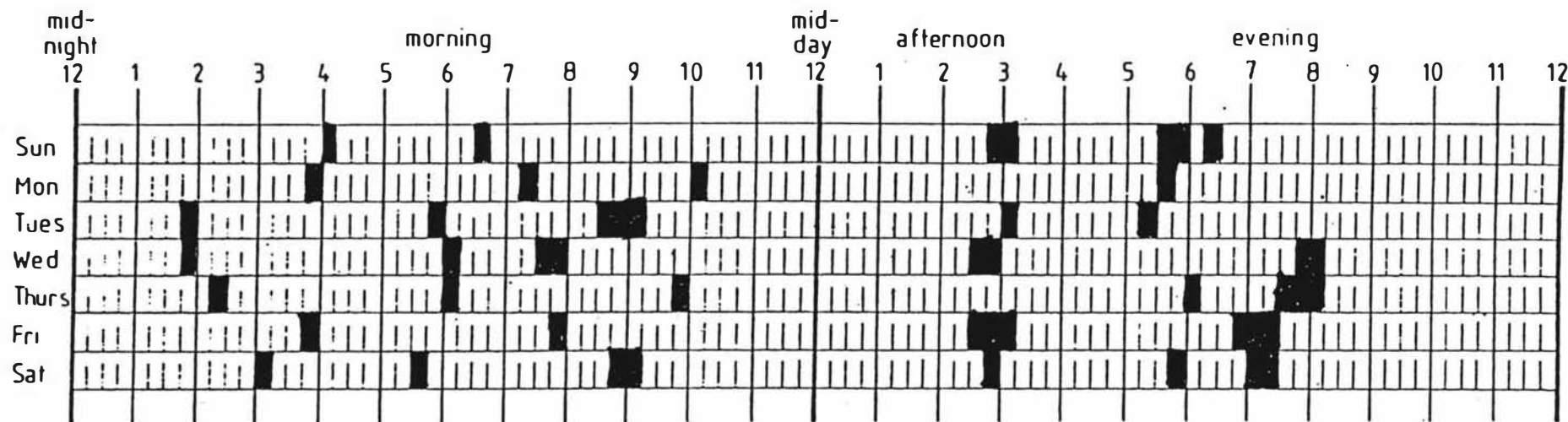
Fifth Infant Profile: Explanatory CommentsSituations

There are two main clusters at 88%, with situation 1 'having a bath', remaining unclustered. The cluster at the base of the profile consists of situations that differ from the previous profile. In the present profile they are situations 15 'nappy change early evening', and 19 'put down for afternoon nap'. The ratings for these situations have been with 5s.

Diary form Parent name: _____ baby's name: _____ Start date: _____

Each of the little boxes stands for 15 minutes. When you have completed this sheet go onto another diary form.

For the present form: _____



Comments:

Sunday:

Monday:

Tuesday:

Wednesday:

Thursday:

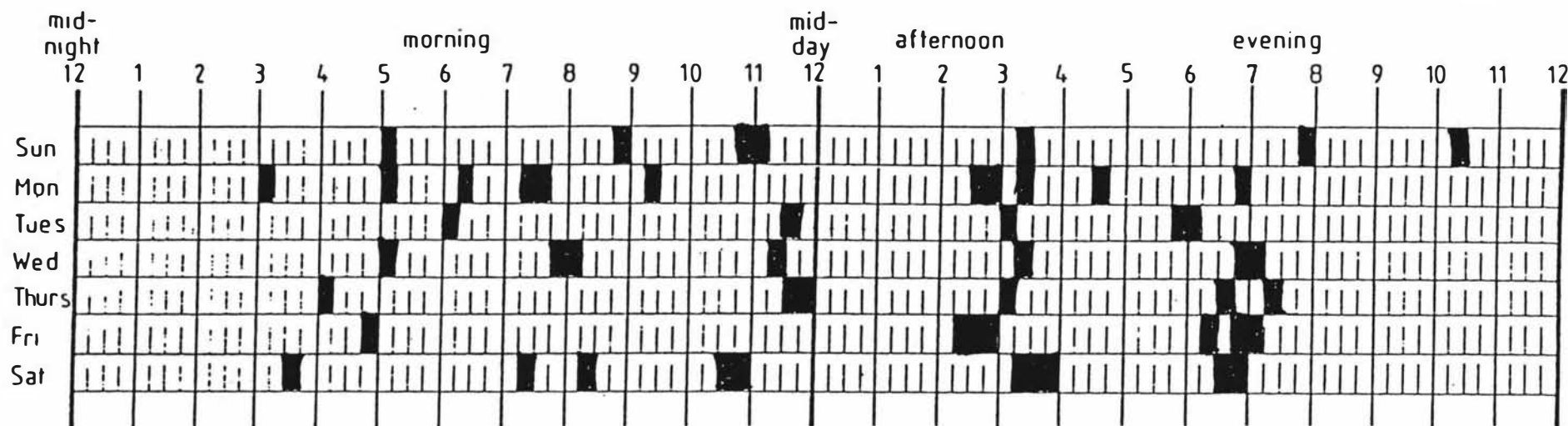
Friday:

Saturday:

Diary form Parent name: _____ baby's name: _____ Start date: _____

Each of the little boxes stands for 15 minutes. When you have completed this sheet go onto another diary form.

For the present form: _____



Comments:

Sunday:

Monday:

Tuesday:

Wednesday:

Thursday:

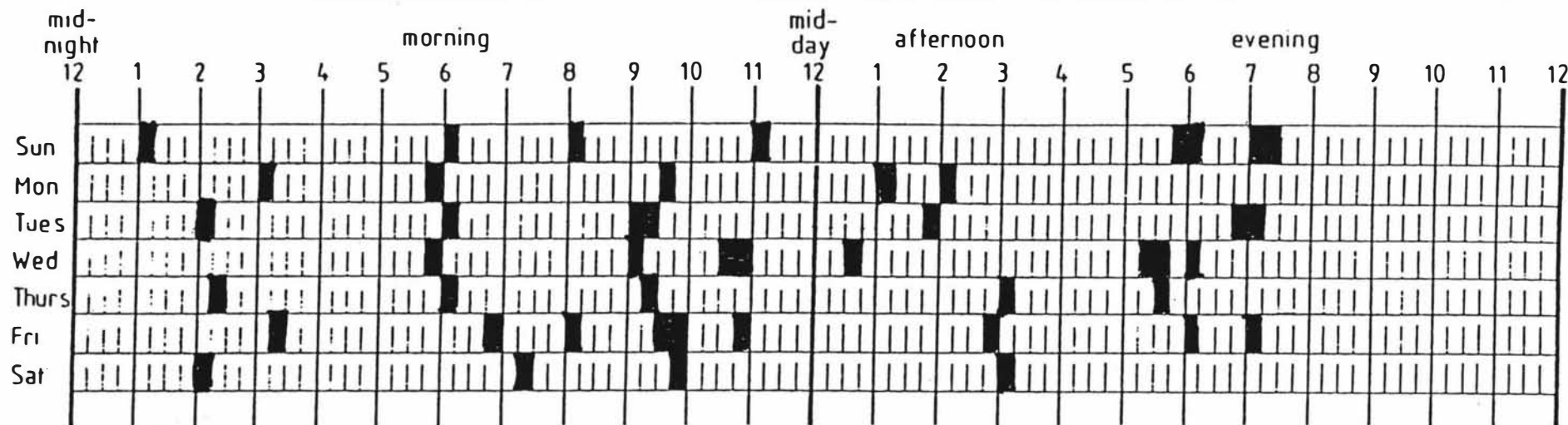
Friday:

Saturday:

Diary form Parent name: _____ baby's name: _____ Start date: _____

Each of the little boxes stands for 15 minutes. When you have completed this sheet go onto another diary form.

For the present form: _____



Comments:

Sunday:

Monday:

Tuesday:

Wednesday:

Thursday:

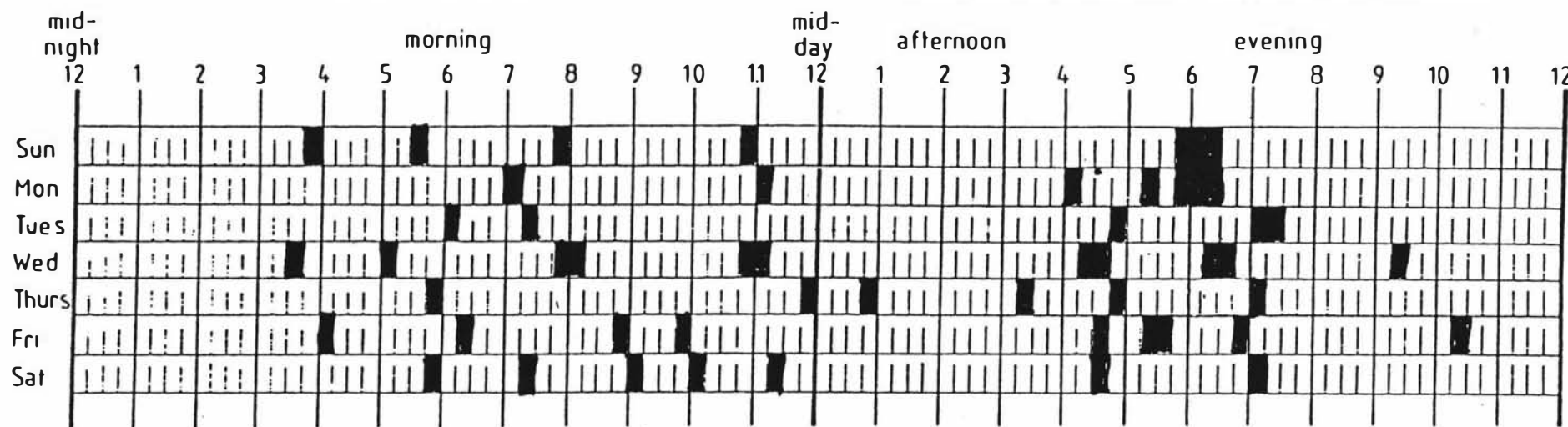
Friday:

Saturday:

Diary form Parent name: _____ baby's name: _____ Start date: _____

Each of the little boxes stands for 15 minutes. When you have completed this sheet go onto another diary form.

For the present form: _____



Comments:

Sunday:

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

Saturday:

Appendix M -continued

Evaluation of Methods Used in the Study

Name: Participant F

Indicate the category a, b, or c which best describes how you found each method used in the research.

Personal Profile

a. very useful b. useful c. not very useful

Comments: Putting down the situations and actual feelings, it was good to get them down on paper, and good when you could see things improving. The printouts were quite interesting, but the ratings were quite personal and you were realising that things were getting better.

Infant Profile

a. very useful b. useful c. not very useful

Comments: This was very useful, particularly as it went on. Not the first two, as you got into it. Doing the ratings, you were actually thinking about the situations. It didn't influence what I did, but it made me think about them.

Diary Form

a. very useful b. useful c. not very useful

Comments: It was useful looking back at the end of two or three days for sorting out. Sometimes the crying seems to be all days, but looking back you see it's not.

Appendix N

Case-Study Notes: Participant G

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Interview NotesParticipant G

Kate (24 years) had worked as a computer operator for 2 years before her first child, a daughter, was born. Her husband (31 years) was an auctioneer. The baby was 9.3 weeks at the first interview, and being breastfed.

Describing her pregnancy, Kate said it was normal. She had a 2 hour labour with no drugs, and a normal delivery. The baby was on the breast within 20 minutes, and she had about 3/4 of an hour with the baby. They had roomed-in for 11 days, but then there were complications. Kate developed a high temperature and was in isolation for 48 hours. The baby also had an eye infection on the third day, and was woken every hour for 3 days in a row for treatment to clear the eye. She was a bit grizzly at that time. After 8 days the baby's birth weight had dropped to 3.98 kgs from 4.34 kgs. The baby was chewing rather than sucking so she wasn't feeding properly, and they had to work to get her to feed properly.

First Interview Notes (1 1/2 hours)

Researcher's impressions. Kate seemed anxious to avoid any impression that she was unhappy with the baby or that she wasn't coping.

Kate's description of being at home with the baby.

Up to the last 3 weeks Sue has been putting on 198.4.gs. per week, but during the last 3 weeks she has dropped in weight and isn't sleeping much. She sleeps during the night for 10 - 12 hours at a time, but during the day she is fighting sleep and is very alert. I took her to the Doctor, but there isn't anything wrong.

I was trying the front pack when Sue would sleep for 2 or 3 hours, but the pack was too heavy. Sue won't sleep

lying down, and she screams in the car, in a bassinette, and with a dummy. She is happy upright over my shoulder. She dozes off after a feed like that and she likes to comfort suck. She takes an hour to feed. She sleeps well during the night, but during the day is a hassle.

I am getting sleep at night, her last feed is at 11p.m., and she wakes again at 5.30a.m. But when she's lying down after that she screams, and when I'm shopping too. Sue is getting bigger and I can't just put her down in the pram without her screaming. I feel terrible, but have to do normal things. I leave her to cry for up to 20 minutes, but don't like to leave her crying and hearing it, so I go outside.

I don't know what to do with Sue when she won't lie down and doesn't want to be held all the time. I am trying to make her more independent. When Sue is very tired and not sleeping, I'm not uptight, but I am worried. Then I try the front pack, but I am trying to break her of the habit. I never feel as though I can't cope, but I am worried about Sue's lack of sleep during the day.

Note: When the personal profile was being completed, the 'normal' things Kate wanted to do were expanded to include her hobbies and night school activities that she used to be able to do, as well as household and gardening (leisure) activities. She felt that the baby's awake times did not allow her to pursue some of the things she would have liked to do.

The only constructs elicited from the initial discussion were 'coping' and 'worried'. The other constructs were elicited while the matrix was compiled and they were all at the negative pole.

Interview Two

Researcher's comments. Kate was very bright and animated.

Kate's comments.

I have had a brilliant week. I have been anticipating what Sue would do during the day from using the descriptions in the infant profile. I have tried several things over the last three days with my mother's help, and Sue settles down now. In retrospect I feel guilty that I thought the baby was crying so much and that the situation seemed so terrible. When I look at it, Sue isn't crying that much, just doing what you'd expect a normal baby to do.

Interview Three

Researcher's note. It wasn't possible to arrange a mutually convenient interview time during this week. The only time it suited Kate was at an interview time already made with a new mother. We agreed that the diary forms and infant profile forms should be sent to Kate, together with a copy of her last personal profile matrix, minus the ratings.

Interview Four

Researcher's comments. Sue was asleep in her pram and Kate seemed to be in good spirits this week.

Kate's comments.

Sue is quite different now, and I feel that I could handle 100 babies as Sue is at the moment. I know now what the cries mean, when she's grizzling around

10 or 11a.m. I just know to put her down. I can definitely tell a hungry cry, especially at night. Other times she might lie in her cot for 20 minutes or so and shuffle around and grunt and is not so hungry.

Her over-tired cry is a screaming type of cry - she's not hungry. I definitely couldn't tell the cries at the beginning, it's only in the last three weeks I have been able to do so. I ask myself if it's something I've eaten. It's one of the first things I ask when she cries and I can't explain why.

Sue was 2 1/2 weeks overdue, and seems to be doing things, such as beginning to move, smile, and grasp up to two weeks earlier than you would expect. Her overdue arrival was definitely not a miscalculation of dates.

Interview Five

Researcher's comments. This was the last interview with Kate. She was satisfied that she was able to handle her situation with Sue and was pleased about where their relationship was going.

Kate's comments.

I didn't want to bottlefeed Sue. I had had no experience with babies before, and didn't know whether what I was doing with Sue was O.K. I would get mad with Sue because she couldn't sleep. I could see if it kept up and you didn't have support to go to how people could child bash without support. You think 'if she cries one more time...' when it goes on

and on. I would look out the window and see a mongoloid baby and then feel different.

When you've done everything and still there's crying, you have to go through a reasoning process. Even as mad as you get, you know you would never harm her. The worst I did was to leave her in her room to cry for 24 minutes when I went outside. I would rather leave the room than risk harming her. I was surprised I got so desperate, because I am usually not like that.

Appendix N -continued

First Personal Profile Matrix

feelings constructs	Items										
	baby in front pack	taking baby out shopping	household activities	gardening/leisure time	night school hobbies	baby comfort sucking	baby's daytime feeds	baby's day sleep bassinet	baby's night sleep bassinet	baby's floor time	baby crying at home
relaxed-											
tense	1	2	4	1	5	2	1	5	1	1	2
cop ing-											
not coping	1	2	4	5	5	2	1	5	1	1	2
understanding-											
not understanding reasons for crying	5	1	2	1	1	4	4	5	1	1	3
not exhausted-											
exhausted	4	2	2	2	2	1	1	3	1	1	3
fit-											
tired	4	1	2	2	2	1	1	4	1	1	4
not worried-											
worried	2	2	4	1	2	1	4	5	1	1	3
not concerned-											
concerned about others	1	5	4	4	4	1	2	5	1	1	4

First Personal Profile: Explanatory Comments

Items

Four items form two clusters at 88%. The most positive cluster consists of item 9 'baby's night sleep bassinette', and item 10 'baby's floor time'. The remaining seven items are unclustered at this level. These are:

- 1 'baby in front pack',
- 2 'taking baby out',
- 3 'household activities',
- 6 'baby comfort sucking',
- 7 'baby's day time feeds',
- 8 'baby's bassinette sleep',
- 11 'baby's crying at home'.

Item 8 is the most negative item in the profile.

Feelings (Constructs)

Two groups of constructs are present at 92%, and remain unchanged at 88%. The unclustered constructs at 88% are constructs 3, 6, and 7.

Appendix N -continued

Personal Profile ratings for Participant G: weeks 2 to 4

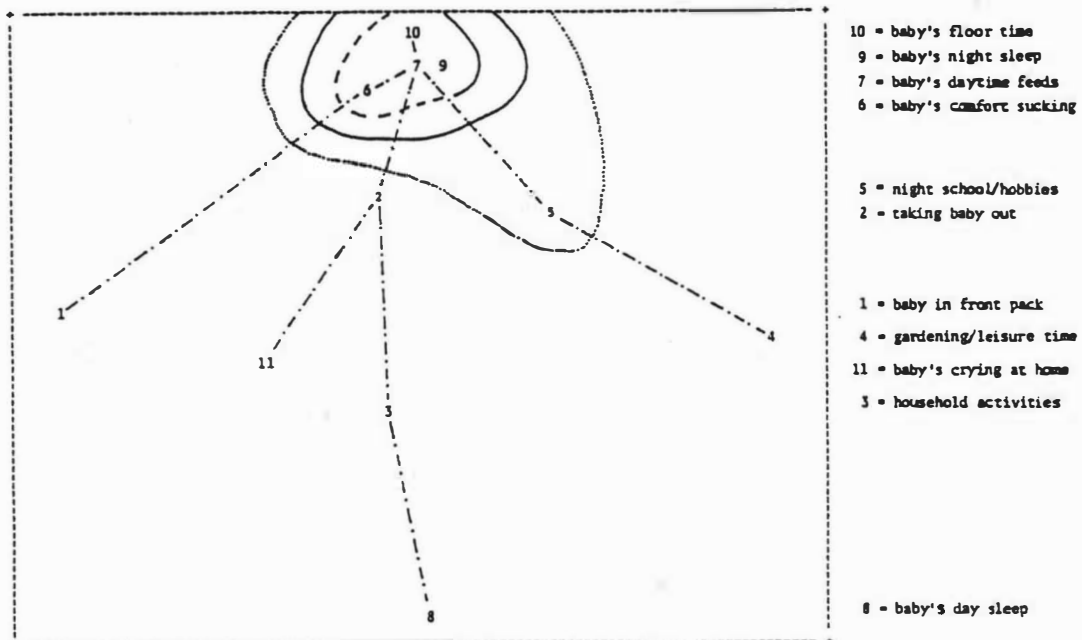
Profile 2	Profile 3	Profile 4
*	**	
11442114112	152221121122	142221122121
21255114112	142452121122	142251122111
51111214112	541112141121	541111122111
41211112112	222111122122	422111122111
42211114112	222111144122	422111122112
21242114112	241111222122	242221122112
14421114115	154552155255	154551141142

*Columns correspond to ratings for an item, rows correspond to ratings for a construct.

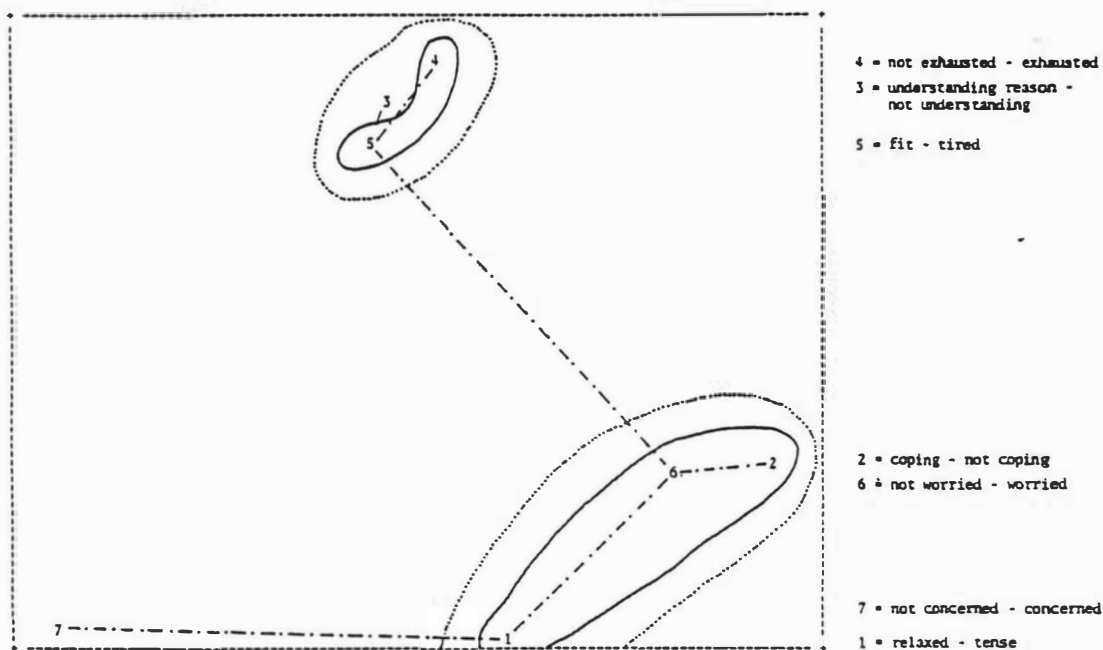
** One new item has been added to this profile; 'taking the baby visiting'.

Appendix N -continued

Second Clustered Personal Profile



Clusters of Items. - - - - joins most similar items.
 The clustering levels are: - - - = 96%, — = 92%,
 = 88%.



Clusters of Constructs. - - - - joins most similar constructs.
 The clustering levels are: - - - = 96%, — = 92%,
 = 88%.

Second Personal Profile: Explanatory Comments

Items

One cluster of items is present at 96%, 92%, and 88%.

Unclustered items are:

- 1 'baby in front pack',
- 3 'household activities',
- 4 'gardening time (leisure)',
- 5 'night school (hobbies)',
- 8 'baby's day sleep bassinette',
- 11 'baby's crying at home'.

The ratings for all of the items are predominantly positive.

Feelings (Constructs)

The constructs form two clusters at 88%. Construct 7 'not concerned-concerned', is unclustered at this level.

Clusters of Constructs. --- joins most similar constructs.
The clustering levels are: --- = 96%, — = 92%,
..... = 88%.

Third Personal Profile: Explanatory CommentsItems

There are three groups of items clustered at 88%.

Items that are unclustered at this level are:

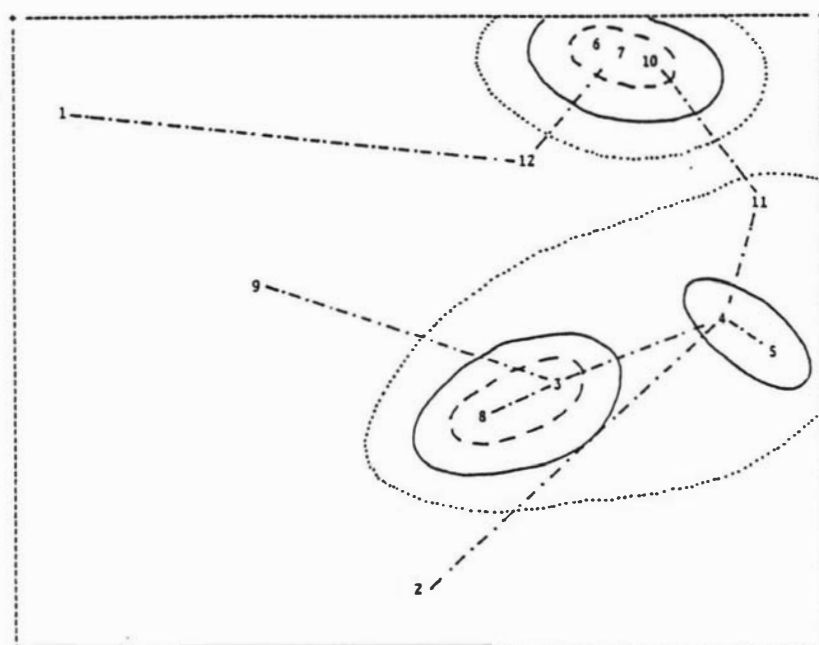
- 1 'baby in the front pack',
- 2 'taking the baby out',
- 9 'baby's night sleep bassinette'.

Feelings

Two constructs are unclustered at 88%, construct 3 'understanding reason-not understanding', and construct 7 'not concerned-concerned'.

Appendix N -continued

Fourth Clustered Personal Profile



6 = baby's comfort sucking
7 = baby's daytime feeds

1 = baby in front pack

12 = taking baby out visiting

11 = baby's crying at home

10 = baby's floor time

9 = baby's night feed

4 = gardening/leisure time

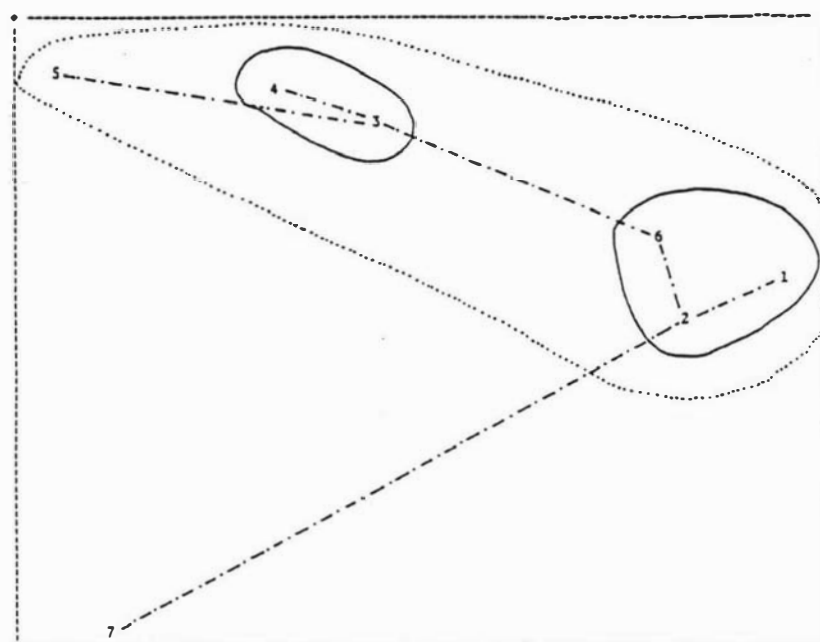
5 = night school/hobbies

3 = household activities

8 = baby's day sleep

2 = taking baby out

Clusters of Items. - - - - joins most similar items.
The clustering levels are: - - - - = 96%, — = 92%,
..... = 88%.



5 = fit - tired

4 = not exhausted - exhausted

3 = understanding reason -
not understanding

6 = not worried - worried

1 = relaxed - tense

2 = coping - not coping

7 = not concerned - concerned

Clusters of Constructs. - - - - joins most similar constructs.
The clustering levels are: - - - - = 96%, — = 92%,
..... = 88%.

Fourth Personal Profile: Explanatory Comments

Items

The items cluster at 88% except for items 1, 2, and 9. These are the same items that were unclustered in the previous profile.

Feelings (Constructs)

Construct 7 'not concerned-concerned', is unclustered at 88%. All of the other constructs cluster together at 88%.

Appendix N -continued

Infant Profile Ratings for Participant G; weeks 1 to 4.

Profile 1	Profile 2
* **	
55--2522252155555-55-252	55--24242511455555555152
45--2422242144555-55-222	24--14141411444454545142
13--1212111131115-42-111	14--12111111411151515111
13--1544141141115-44-111	14--12111111511151515111
13--1222121141115-34-111	14--12111111411151515111
11--1222131131115-44-111	14--12111111311151515111

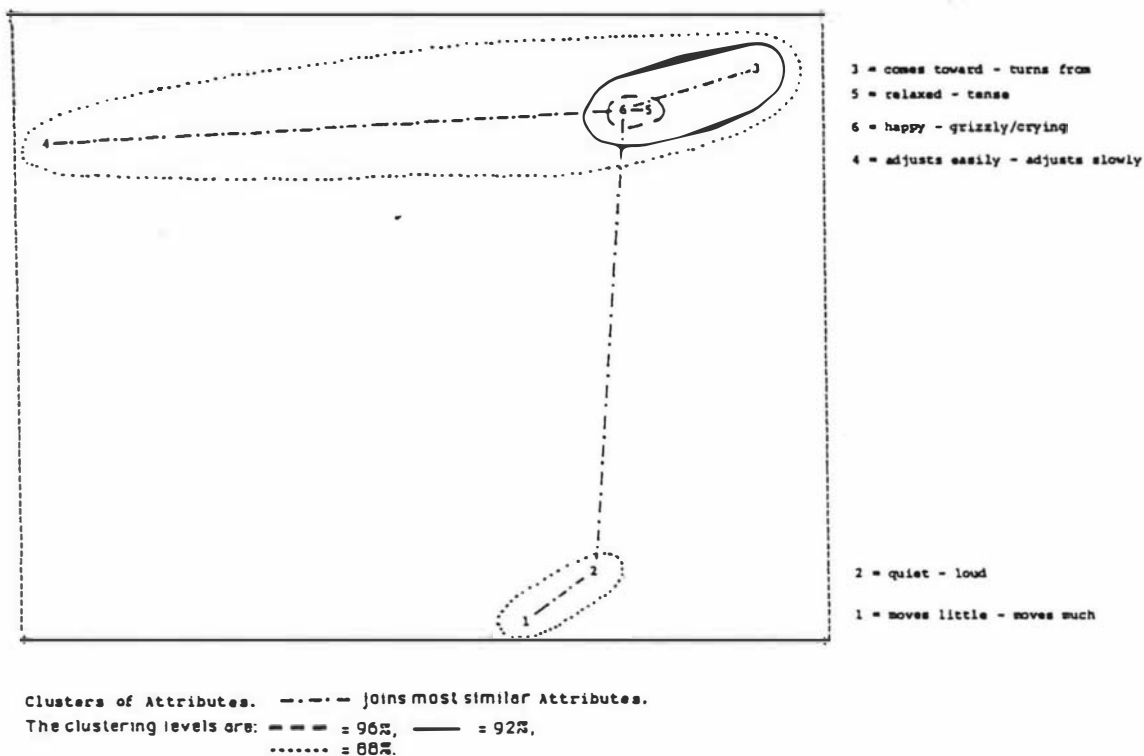
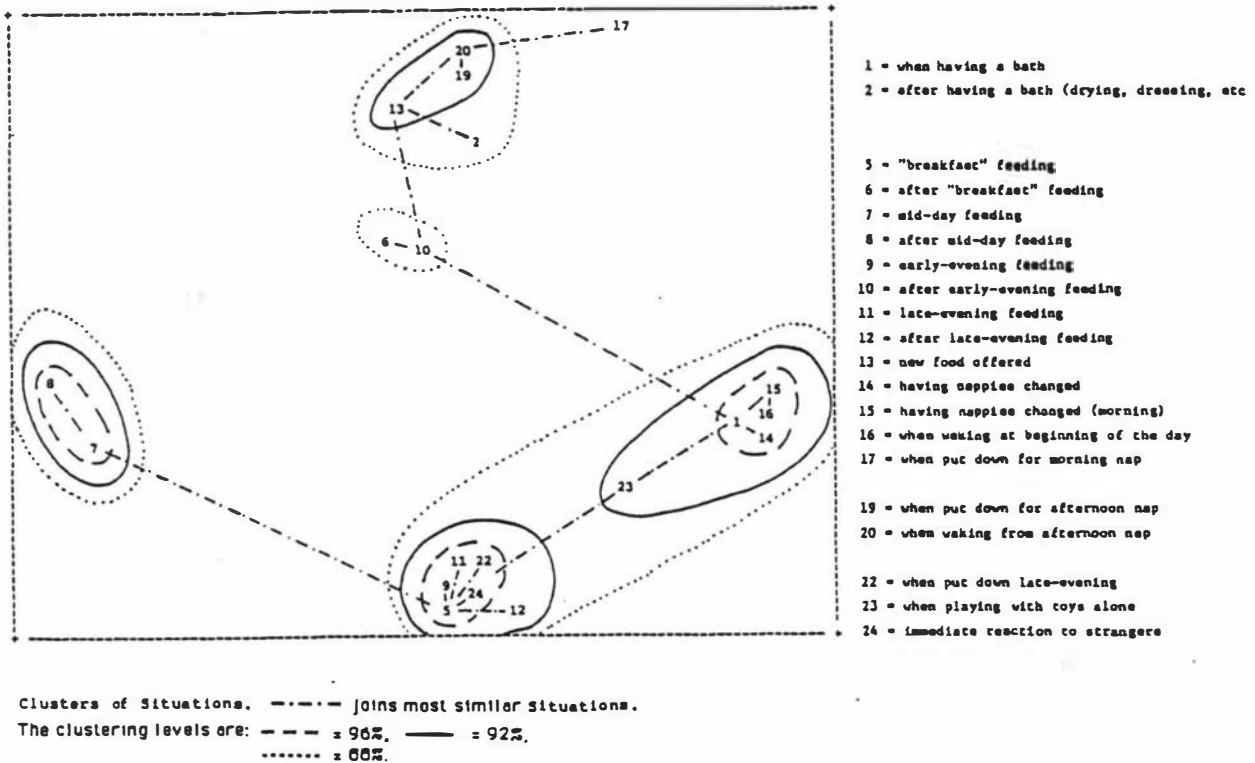
Profile 3	Profile 4
45111515151155555555152	54112515141155454555152-
441115151511544245455152	42111415141145544454141-
121111111111511122245111	12111111111141212222111-
121111111111411122235111	12111111111141212222111-
121111111111411141445111	12111111111141214242111-
131111111111411141445111	12111111111141214242111-

* Columns correspond to ratings for a situation, rows correspond to ratings for an attribute.

** The symbol '-' indicates that the mother deleted this situation from the profile.

Appendix N -continued

First Clustered Infant Profile



First Infant Profile: Explanatory CommentsSituations

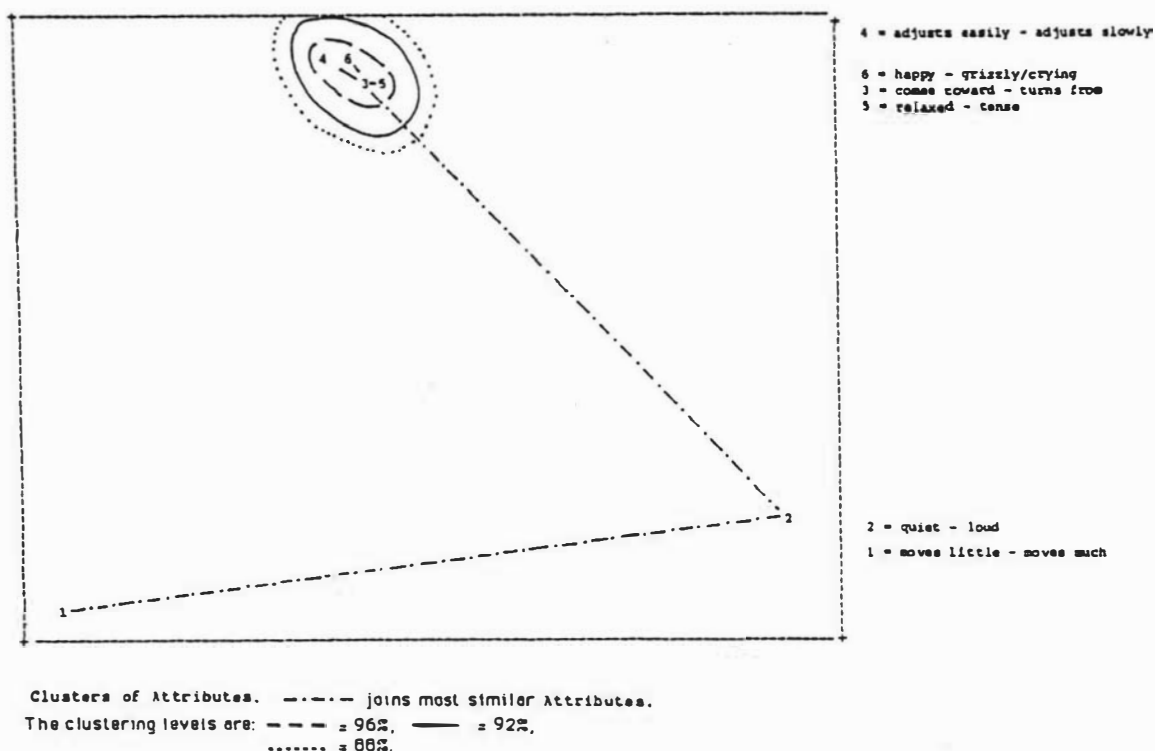
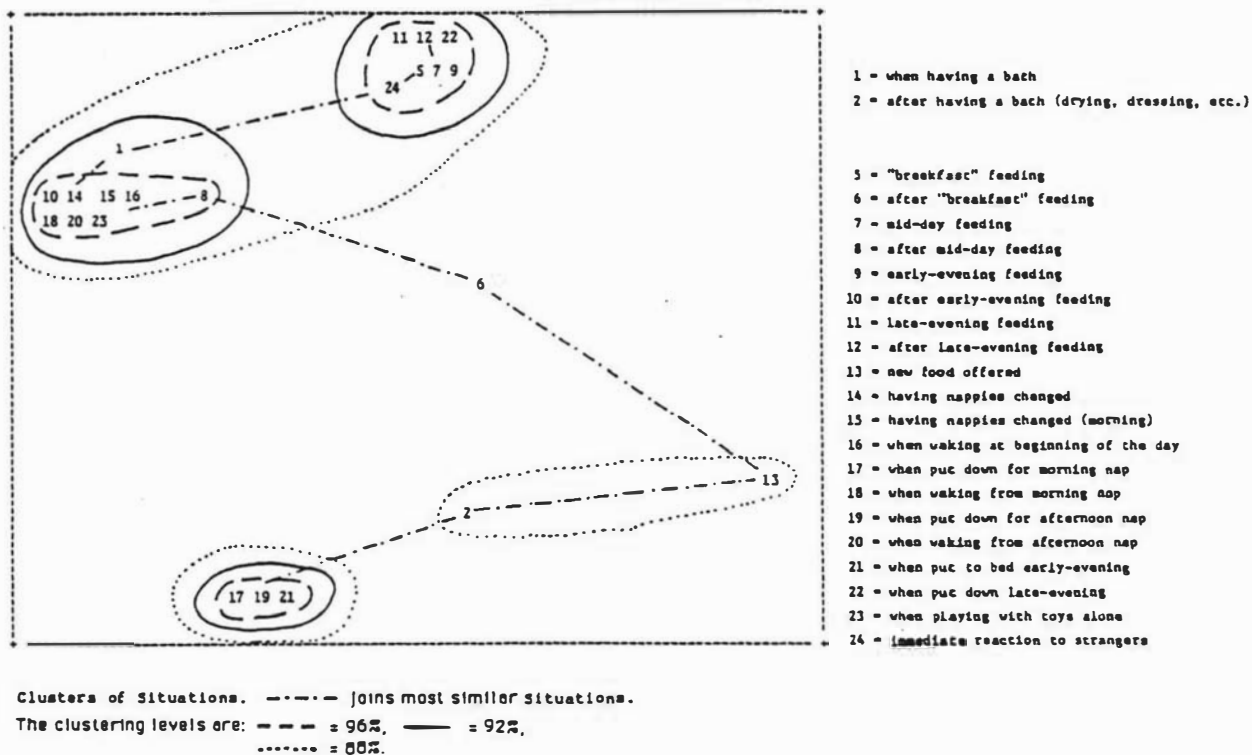
There are three clusters at 96%, and nine of the situations are unclustered. Four of these remain unclustered at 92%, and situation 17 'when put down for morning nap', remains unclustered at 88%.

Attributes

There are two clusters of attributes at 88%. Attributes 1 'moves little-moves much', and 2 'quiet-loud' form the cluster at the base of the profile.

Appendix N -continued

Second Clustered Infant Profile



Second Infant Profile: Explanatory CommentsSituations

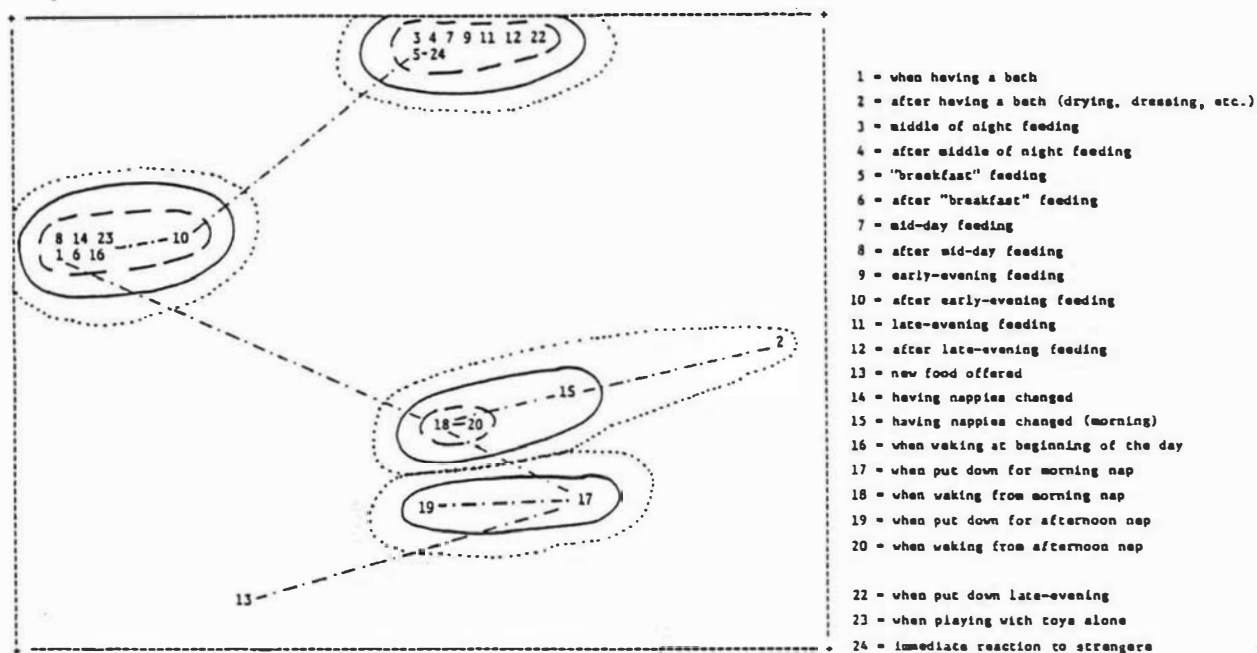
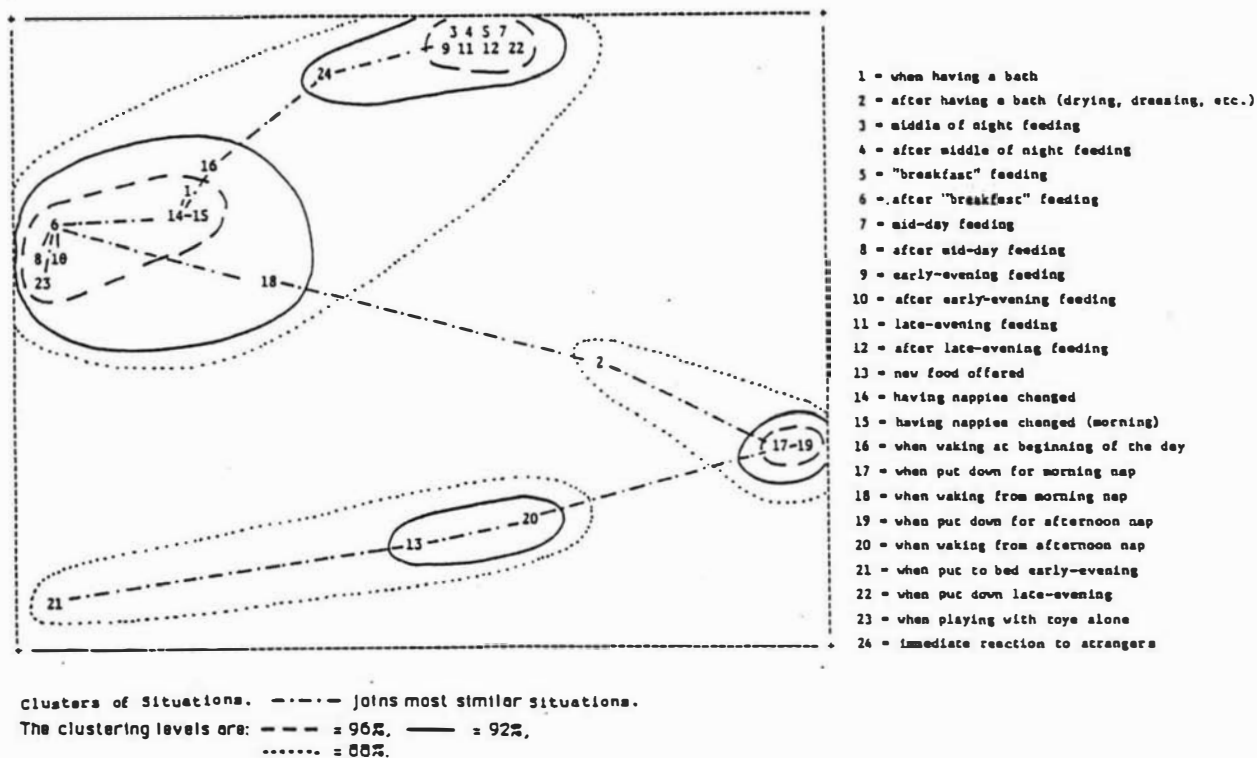
There are three main clusters at 96%, and four situations are unclustered. Three of these remain unclustered at 92% and situation 6 'after "breakfast" feeding', is unclustered at 88%.

Attributes

Attributes 3, 4, 5, and 6 form a cluster at 88%, but attributes 1 and 2 are unclustered at this level. In the third and fourth profiles, these two attributes form a separate cluster at 92% as in the first profile. For this reason, the visual displays for these have not been included.

Appendix N -continued

Third and Fourth Clustered Infant Profiles



Third Infant Profile: Explanatory Comments

Situations

All of the situations are clustered in three groups at 88%. The largest cluster consists of items rated with mainly 1s.

Fourth Infant Profile: Explanatory Comments

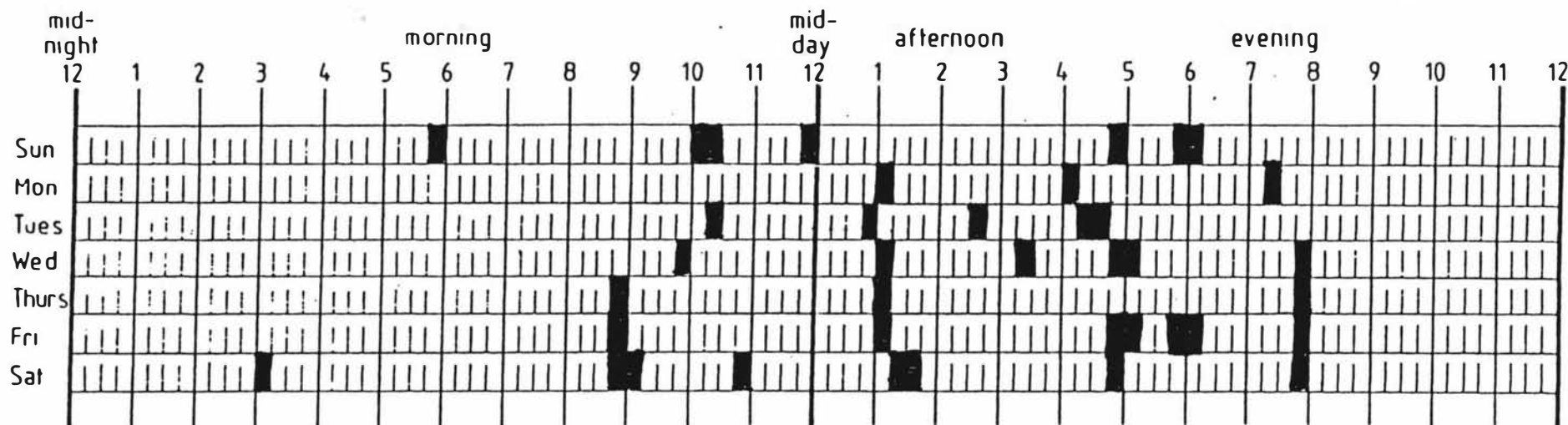
Situations

The three clusters that are present at 96% become four clusters at 92% and 88%. Four of the five situations that are unclustered at the 96% level become clustered at these lower levels. Situation 13 'when offered new food', remains unclustered.

Diary form Parent name: _____ baby's name: _____ Start date: _____

Each of the little boxes stands for 15 minutes. When you have completed this sheet go onto another diary form.

For the present form: _____



Comments:

Sunday: _____

Monday: _____

Tuesday: _____

Wednesday: _____

Thursday: _____

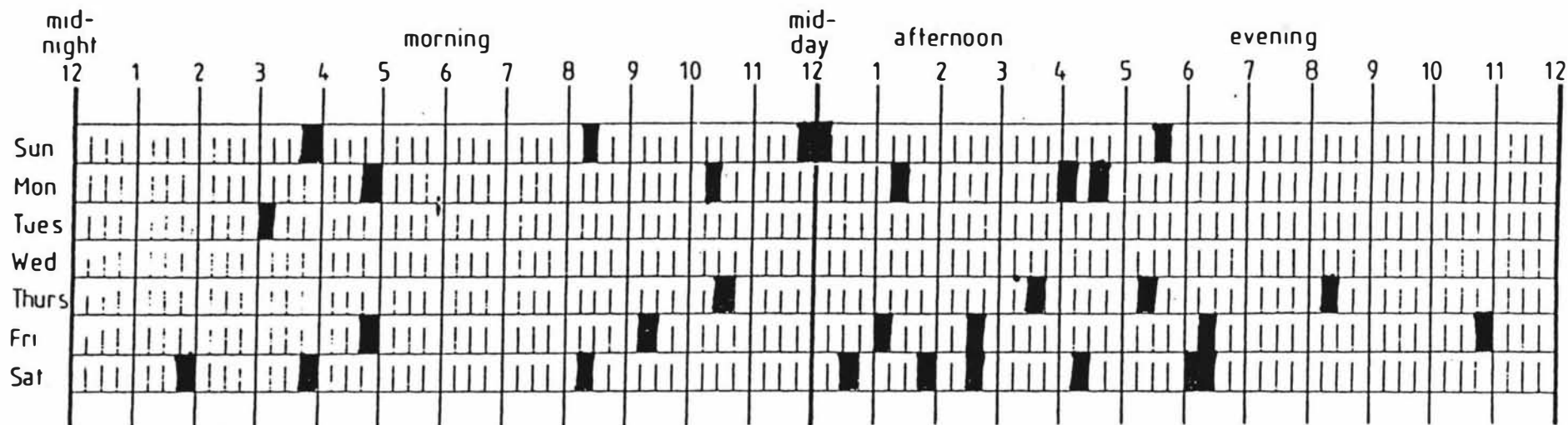
Friday: _____

Saturday: _____

Diary form Parent name: _____ baby's name: _____ Start date: _____

Each of the little boxes stands for 15 minutes. When you have completed this sheet go onto another diary form.

For the present form: _____



Comments:

Sunday:

Monday:

Tuesday:

Wednesday:

Thursday:

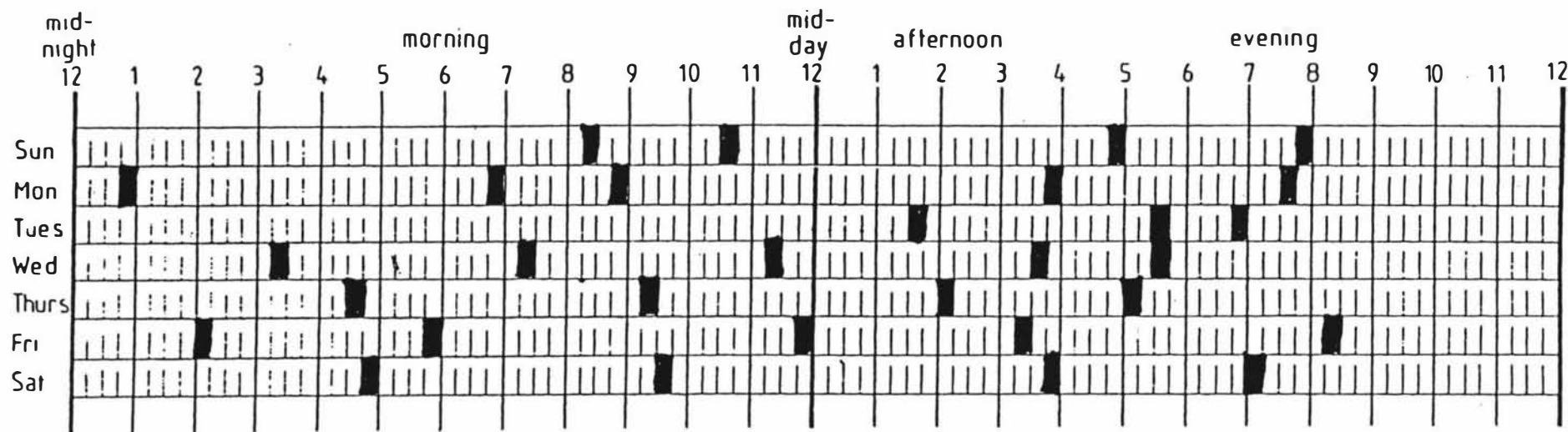
Friday:

Saturday:

Diary form Parent name: _____ baby's name: _____ Start date: _____

Each of the little boxes stands for 15 minutes. When you have completed this sheet go onto another diary form.

For the present form: _____



Comments:

Sunday:

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

Saturday:

Appendix N -continued

Evaluation of Methods Used in the Study

Name: Participant G

Indicate the category a, b, or c which best describes how you found each method used in the research.

Personal Profile

a. very useful b. useful c. not very useful

Comments: I could see definite improvements from not so good to very good. I could see things and my feelings improve in the way I reacted to different situations. The printout was the most useful part of the method.

Infant Profile

a. very useful b. useful c. not very useful

Comments: It could have been useful earlier, when the baby was younger, because I could have seen the improvements when they happened.

Diary Form

a. very useful b. useful c. not very useful

Comments: It could have been useful earlier when she was really going through the crying stage.