1.1 1

1. 研究の目的と方法


文献には、様々なテーマが取り上げられています。これらのテーマは、過去の研究の成果を反映し、新たな洞察を提供するために重要です。文献は、研究者たちが過去の研究結果を基に、新しいアイデアを生み出すために必要不可欠です。

文献の情報源は、過去の研究を基にした新しい研究の発展を促進するために重要です。研究者は、過去の研究結果を基に、新たな洞察を得ることを目指しています。文献は、研究者たちが過去の研究結果を基に、新しいアイデアを生み出すために必要不可缺です。

参考文献


*注1: 本文文は、過去の研究を基にした新しい洞察を得ることを目指しています。
**注2: 本文文は、過去の研究を基にした新しい洞察を得ることを目指しています。

II. 연구

1. 연구 방법

본 연구는 MIPIS와 MIPIS·대조군을 이용한 5개의 연구를 살펴보았다. 특히 MIPIS의 측정에 대한 논문의 한 가지는 박영자 등(1999)의 연구로, MIPIS를 이용하여 어머니-아동 간의 상호작용을 측정하였다.

2. 연구 결과

1) MIPIS: MIPIS와 MIPIS·대조군을 이용한 5개의 연구를 살펴보았다. 특히 MIPIS의 측정에 대한 논문의 한 가지는 박영자 등(1999)의 연구로, MIPIS를 이용하여 어머니-아동 간의 상호작용을 측정하였다.

3. 논의

1) 논의

본 연구는 MIPIS와 MIPIS·대조군을 이용한 5개의 연구를 살펴보았다. 특히 MIPIS의 측정에 대한 논문의 한 가지는 박영자 등(1999)의 연구로, MIPIS를 이용하여 어머니-아동 간의 상호작용을 측정하였다.
2) More detailed analysis for the

Thompson, Jody Baird, Sara Goodman, Susan Bryant (1982) and the Mother-Infant

Play Interaction Scale (Mother-Infant Play Interaction Scale; MIPIS)

Ha (1987) are the same.

50-70% of the total variance. In the

Field (1986) are all those three factors.

2.15

2) Slightly more detailed analysis for

1) Methods for analyzing the data

The initial data are analyzed by the

Jody Baird, Sara Goodman

Field, (1986)

2000 ± 4

2.76

2.78

.71

.75

\( \text{Field, (1986)} \) are all those three factors.

10-11

4.6.7

\begin{table}
\centering
\begin{tabular}{|c|c|}
\hline
\textbf{Factor} & \textbf{Alpha} \\
\hline
1 & .76 \\
2 & .78 \\
3 & .75 \\
\hline
\end{tabular}
\end{table}
<Table 1> Test of homogeneity of general characteristics (N = 49)

<table>
<thead>
<tr>
<th>General characteristics</th>
<th>Category</th>
<th>experiment n(%)</th>
<th>control n(%)</th>
<th>χ²</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>20-24</td>
<td>5(20)</td>
<td>9(37.50)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>25-29</td>
<td>17(68)</td>
<td>13(54.10)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>30</td>
<td>3(12)</td>
<td>2(08.34)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mean (SD)</td>
<td>27.76±2.35</td>
<td>26.71±3.28</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Job</td>
<td>no</td>
<td>14(56)</td>
<td>12(50.00)</td>
<td>.177</td>
<td>.674</td>
</tr>
<tr>
<td></td>
<td>yes</td>
<td>11(44)</td>
<td>12(50.00)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Income</td>
<td>≤150</td>
<td>8(32)</td>
<td>11(45.83)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>151-200</td>
<td>8(32)</td>
<td>8(33.30)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>201-250</td>
<td>2(8)</td>
<td>3(12.50)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>≥251</td>
<td>7(28)</td>
<td>2(08.30)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mean (SD)</td>
<td>219.20±20.5</td>
<td>166.96±59.72</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Type of Delivery</td>
<td>c/sec</td>
<td>3(12)</td>
<td>2(08.33)</td>
<td>.180</td>
<td>.670</td>
</tr>
<tr>
<td></td>
<td>normal</td>
<td>22(88)</td>
<td>22(91.67)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Feeding</td>
<td>breast feeding</td>
<td>5(20)</td>
<td>4(16.80)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>milk feeding</td>
<td>10(40)</td>
<td>13(54.20)</td>
<td>1.61</td>
<td>.600</td>
</tr>
<tr>
<td></td>
<td>mixed feeding</td>
<td>10(40)</td>
<td>7(29.20)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Infant sex</td>
<td>male</td>
<td>11(44)</td>
<td>10(41.70)</td>
<td>.027</td>
<td>.870</td>
</tr>
<tr>
<td></td>
<td>female</td>
<td>14(56)</td>
<td>14(58.30)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Infant body weight (Kg)</td>
<td>2.5-3.0</td>
<td>8(32)</td>
<td>7(29.17)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>3.1-3.5</td>
<td>14(56)</td>
<td>11(45.83)</td>
<td>3.410</td>
<td>.330</td>
</tr>
<tr>
<td></td>
<td>≥3.6</td>
<td>3(12)</td>
<td>6(25.00)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mean (SD)</td>
<td>3.18±.40</td>
<td>3.22±.42</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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<Table 2 > Mother feeling of infant

<table>
<thead>
<tr>
<th>Category (score)</th>
<th>experiment (n = 25)</th>
<th>control (n = 24)</th>
<th>t</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infant response (40)</td>
<td>27.20(3.52)</td>
<td>25.80 (5.44)</td>
<td>-1.110</td>
<td>.270</td>
</tr>
<tr>
<td>Infant unsettled (75)</td>
<td>37.20 (7.65)</td>
<td>36.30(10.20)</td>
<td>-0.330</td>
<td>.730</td>
</tr>
<tr>
<td>Lack of confidence in caretaking (65)</td>
<td>28.21(6.50)</td>
<td>29.50 (5.46)</td>
<td>-1.10</td>
<td>.460</td>
</tr>
</tbody>
</table>
### Table 3: Mother-Infant interaction scores between group after treatment

<table>
<thead>
<tr>
<th></th>
<th>Experiment M(SD)</th>
<th>Control M(SD)</th>
<th>t</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mother Response</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Holding type</td>
<td>4.20(1.04)</td>
<td>3.29(1.04)</td>
<td>-3.05</td>
<td>.003</td>
</tr>
<tr>
<td>2. Express of affect</td>
<td>4.44(0.77)</td>
<td>3.53(0.93)</td>
<td>-3.51</td>
<td>.001</td>
</tr>
<tr>
<td>3. Expression of affect</td>
<td>4.32(0.63)</td>
<td>3.58(1.02)</td>
<td>-3.03</td>
<td>.004</td>
</tr>
<tr>
<td>4. Care giving style</td>
<td>4.24(0.88)</td>
<td>3.41(0.97)</td>
<td>-3.10</td>
<td>.003</td>
</tr>
<tr>
<td>5. Visual interaction</td>
<td>4.52(0.71)</td>
<td>3.67(0.92)</td>
<td>-3.62</td>
<td>.000</td>
</tr>
<tr>
<td>6. Style of play</td>
<td>2.96(0.88)</td>
<td>2.79(1.06)</td>
<td>-0.60</td>
<td>.551</td>
</tr>
<tr>
<td>7. Vocalization style</td>
<td>4.48(0.78)</td>
<td>3.13(0.99)</td>
<td>-5.32</td>
<td>.000</td>
</tr>
<tr>
<td>8. Vocalization style</td>
<td>4.28(0.89)</td>
<td>3.33(1.09)</td>
<td>-3.32</td>
<td>.002</td>
</tr>
<tr>
<td>9. Attempts at smile elicitation</td>
<td>4.32(0.85)</td>
<td>2.95(1.27)</td>
<td>-4.39</td>
<td>.000</td>
</tr>
<tr>
<td>10. Kinesthetic quality of interaction</td>
<td>3.80(0.82)</td>
<td>3.08(0.88)</td>
<td>-2.96</td>
<td>.005</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td>41.56(5.47)</td>
<td>32.83(6.74)</td>
<td>-4.96</td>
<td>.000</td>
</tr>
<tr>
<td><strong>Infant Response</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Predominant response level</td>
<td>3.60(1.08)</td>
<td>4.04(1.20)</td>
<td>1.35</td>
<td>.180</td>
</tr>
<tr>
<td>2. Predominant mood/affect</td>
<td>3.80(0.71)</td>
<td>3.38(1.01)</td>
<td>-1.70</td>
<td>.009</td>
</tr>
<tr>
<td>3. Visual interaction</td>
<td>3.70(1.13)</td>
<td>3.33(1.01)</td>
<td>-1.25</td>
<td>.210</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td>11.00(0.48)</td>
<td>10.75(2.44)</td>
<td>-0.36</td>
<td>.710</td>
</tr>
<tr>
<td><strong>Mother-Interaction Synchrony</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Over-all dyadic quality inter.</td>
<td>3.84(1.03)</td>
<td>2.87(1.08)</td>
<td>-3.21</td>
<td>.002</td>
</tr>
<tr>
<td><strong>Response</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Synchrony of affect</td>
<td>3.44(0.77)</td>
<td>3.25(0.84)</td>
<td>-0.82</td>
<td>.410</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td>7.28(1.43)</td>
<td>6.16(1.62)</td>
<td>-2.64</td>
<td>.010</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>59.96(8.04)</td>
<td>49.70(8.74)</td>
<td>-4.27</td>
<td>.000</td>
</tr>
</tbody>
</table>

I: infant, inter: interaction
of the other family members or the peer group.

Of the family members involved in the caretaking
work, the mothers were the main contributors in 78%
and fathers in 15%. Other family members and peer
groups contributed in only 7% of the cases. The
caregiving work was delivered by the family
members, i.e. by the immediate family relatives,
slowly to other persons of different generations
and situations. Consequently, the psychosocial
development of the maltreated children was
influenced. The study was conducted among
Rabin, 1963; Bowlby, 1969)...

White-Traut Nelson (1988) investigated
the family setting. They found that the
mothers were mainly involved in the
caregiving work. They emphasize the
importance of the mother's role in the
child's development. Other family
members and peer groups also
contributed in only 7% of the cases.
The caregivers were mainly family
members, i.e. immediate family relatives,
slowly to other persons of different
generations and situations. Consequently,
the psychosocial development of the
maltreated children was influenced.

Goldberg (1977) investigated the
family setting. They found that the
mothers were mainly involved in the
caregiving work. They emphasize the
importance of the mother's role in the
child's development. Other family
members and peer groups also
contributed in only 7% of the cases.
The caregivers were mainly family
members, i.e. immediate family relatives,
slowly to other persons of different
generations and situations. Consequently,
the psychosocial development of the
maltreated children was influenced.

Sumner & Spietz (1994)...

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Sea t t le.


- Abstract -

**The Effect of Infant Massage on Mother-Infant Play Interaction**

Choi, So-Young * Kim, Young-Hae **

**Purpose:** This study is attempts to clarify the effect of infant massage for the promotion of primipara's mother-infant interaction

**Method:** The term for collecting data for experimental group ranged from April 25, 2001 to June 5, 2001. The infants for this group were sampled among normal mother-infant from one postpartum care center located in J city. The term for collecting data for control group ranged from June 10, 2001 to August 3, 2001. The infants for this group were sampled among normal mothers infant from 1 general hospital, 1 university hospital and 1 postpartum care center located in J city.

The experiment was implemented giving primipara education about massage based on protocol for infant massage provided by Johnson & Johnson Korea and they received 10 days of education, 10 minutes a day (from 10 to 11 a.m) In the post test, we videotaped both the control group and the experimental group visiting their homes 4 weeks after delivery to observe mother-infant play interaction.

Data analysis was done using SAS and the homogeneity between general properties owned by both control group and experimental group and mother’s perception scale for children was verified through χ²-test.

Mother-infant play interaction with both control group and experimental group was analyzed through t-test in the experiment. And analysis of mother-infant interaction points based on general properties was made using ANOVA and t-test.

**Result:** Hypothesis that mother-infant play interaction with primipara who gave her infant a massage will be more active than that of the primipara who didn’t was verified (t = -4.27, p = .0001).

And the points in each item, points in each item were estimated as follows.

Mother behavior item (t = -4.96, p = .0001), infant behavior item (t = -0.36, p = .71), mother-infant interaction reciprocity (t = -2.64, p = .01).

**Conclusion:** An infant massage program can contribute to promoting the Mother-Infant Play Interaction positively.

**Key words:** Infant massage, Mother-Infant play interaction

* Gyeongsang national university hospital
** Pusan national university

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