



Development of Recreational Barriers Scale of Mothers with Child Between 0-2 Years Old and Making Its Validity and Reliability for Turkish Population*

Faik ARDAHAN¹ Belgin YAKUT TEKMEÜRAY²

Akdeniz University, Sports Science Faculty, Recreation Department,

Akdeniz University, Institute of Social Sciences, Department of Recreation, Non-Thesis Master Student

Abstract

This study aims to develop the Recreational Barriers Scale of Mothers with a child between 0-2 Years Old (RBSM-02) and make its validity and reliability for the Turkish population. The study is descriptive and is limited to mothers with a child aged 0-2. The random sampling method was used in this study, and the sample group consisted of 213 mothers ($X_{age} = 29.33 \pm 4.78$). Explanatory factor analysis (EFA) was applied to the data set. Ten items with variance value less than 0.5 and factored in factors other than the expected factor were removed from a total of 64 item lists. EFA was reapplied to the remaining 54 items, and the result of KMO was 0.841 and Bartlett's Test of Sphericity was $X^2 = 10279.568$, $SD = 1431$, $p = 0.000$, and a total of 54 items, and 13 factors were obtained. The item-Total correlation was used as a result of factor analysis. In order to evaluate the internal consistency of the scale, the Cronbach's alpha coefficients of the sub-dimensions formed as a result of EFA examined, and the Pearson correlation coefficients were examined to look at the relationship between the factors of the scale obtained, and the results were questioned at the significance level of 0.01 and 0.05. Factors obtained as a result of EFA was named as; Physical Perception and Health, Perception of Ability, Lack of Facility-Service, Insufficient Budget/Finding Expensive, Pressure from Family and Others, Child-related Barriers, Not Designing Facilities for Mothers with Infants, Indifference, Caregiver-related Barriers, Lack of Friends, Transportation, Family Reasons and Lack of Information. According to the research results, the Cronbach's Alpha coefficient of the RBSM-02 scale was 0.935, and the variance explained by the scale was 78.919%. As a result, it has been concluded that the RBSM-02 has validity and reliability, and the scale is sufficient for the Turkish population.

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0-2 Yaş Çocuk Sahibi Olan Annelerin Rekreatyonel Engelleri Ölçeğinin Geliştirilmesi Türk Popülasyonu İçin Geçerlilik Güvenirliliğinin Yapılması

Öz

Bu çalışmanın amacı, 0-2 Yaş Çocuk Sahibi Olan Annelerin Rekreatyonel Engelleri Ölçeği'ni (ÇAREÖ-02) geliştirmek ve Türk popülasyonu için geçerlilik güvenilirliğini yapmaktır. Araştırma tanımlayıcı bir çalışmadır ve 0-2 yaş çocuklu anneler ile sınırlıdır. Bu çalışmada tesadüfî örneklem metodu kullanılmıştır ve örneklem grubu 213 anneden ($X_{yaş}=29.33 \pm 4.78$) oluşmaktadır. Veri setine Açıklayıcı faktör analizi (AFA) uygulanmış, toplam 64 madde listesinden varyans değerleri 0.5 den küçük olan ve olması gereken faktör dışında faktörleşen 10 madde çıkarılmış ve geri kalan 54 maddeye yeniden AFA uygulanmış ve KMO (0.841) ve Bartlett küresellik testlerinin sonuçları ($X^2=10279.568$, $SD=1431$, $p=0,000$) olarak bulunmuş, toplam 54 madde ve 13 faktörden oluşan ÇAREÖ elde edilmiştir. Faktör analizi sonucunda madde-toplam korelasyonu uygulanmıştır. Ölçeğin iç tutarlılığını değerlendirmek için AFA sonucu oluşan alt boyutların Cronbach's Alpha katsayılarına, elde edilen ölçeğin faktörleri arasındaki ilişkiye bakmak için Pearson korelasyon katsayılarına bakılmış, sonuçlar 0.01 ve 0.05 anlamlılık düzeyinde sorgulanmıştır. Çalışmada Varimax döndürme yöntemi kullanılmıştır. Yapılan AFA sonucunda elde edilen faktörler; Fiziksel Algı ve Sağlık, Yetenek Algısı, Tesis-Hizmet Eksikliği, Bütçe Yetersizliği/Pahalı Bulma, Aile ve Başkalarının Baskısı, Çocuktan Kaynaklı Engeller, Tesislerin Çocuklu Annelere Göre Tasarlanmaması, İlgisizlik, Bakıcı Kaynaklı Engeller, Arkadaş Eksikliği, Ulaşım, Ailevi Nedenler ve Bilgi Eksikliği olarak isimlendirilmiştir. Araştırma sonucuna göre, ÇAREÖ ölçeğinin Cronbach's Alpha katsayısı 0.935 ve ölçeğin açıkladığı varyans %78.919 olarak bulunmuştur. Veri setine Doğrulamalı Faktör Analizi de uygulanmış olup tüm uyum indekslerinde istatistiki olarak yeterli uyum sonuçlarına ulaşılmıştır. Sonuç olarak, geliştirilen Çocuklu Annelerin Rekreatyonel Engelleri Ölçeği'nin geçerlilik ve güvenirliliğinin yapıldığı, ölçeğin Türk popülasyonu için yeterli oldukları sonucuna varılmıştır.

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INTRODUCTION

WOMAN, MOTHER, MOTHERHOOD

The women are milestones of a society and a nation as a daughter, a sister, an elder sister, an aunt, a mother-in-law, a daughter-in-law, a wife, and a mother. They bear traces of a life bringing up the rear of thousands of years in the society she belongs to. They also construct the future. Civilization levels of societies are proportional to the value they give to women.

In Turkish society, where the primary meanings of the word woman are based on the roles of motherhood and being a wife, the concept of woman are in an institution and a part of a role rather than an individual, both as a wife and mother, who carries out housework, caring for their children and raising them and socializing them according to their roles, adulthood, and social values (Yılmaz et al., 2018). The woman was oppressed, interpreted as victims, had a secondary status in many areas of society, was oppressed explicitly or implicitly, had to cook when she came home even if she was working in a family environment, and she was in constant struggle with men and patriarchal society because of the roles she assumed (Elçi, 2011).

Being a woman brings along many roles in society. These roles are, being a housewife, an employee, a wife, a mother. These roles are attributed to the woman by her family, relatives, and society without choosing. Moreover, women are expected to do successfully fulfill any given role. Roles generally have normative features. Roles are expressed as rules and social norms that continue as a habit where human movements are organized according to the person. When society assigns a role to a person, it expects the person to behave accordingly. These expectations turn into society's expectations, leaving people obliged to act by the expectations (Ertürk, 2003).

Roles in society are made according to sexist discrimination and separate roles assigned to men and women. Women's most important social role is being a mother and being compassionate, affectionate, altruistic, and silent requested from women. The roles assigned to men are cultural and biological roles that have high mental creativity, be realistic, see polygamy positively and state that they can be aggressive. In this context, the most sacred duty of women, in addition to the motherhood role, leads to the emergence of factors such as imprisoning women in the irrational and emotional sphere, causing gender inequality in society, seeing women more insulting and restricting their freedom. Since ancient times, it has been seen that the male gender is considered superior to the female gender, and the roles attributed to the women, such as cooking, taking care of their children, and cleaning the house, have been trying to be accepted by the society (Bora and Üstün, 2008).

In primitive societies, women's roles were seen as precisely a commodity. While cooking, the food that the man hunted and putting it on the table was loaded on the woman. It could also see as the object of the woman could be hunted. Men were seen as independent and free to get sexual experience with any woman, while women were not allowed to be given any right to

speak. In these societies considering women only as a symbol of fertility, it is seen that women have lived in contrast to their free and independent life. With the introduction of settled life, women's roles changed and began to take a more active role in production. In addition to the roles attributed to women in the settled period, the most significant change is abolishing free sexual life in men. This development has been significant for women, and the value given to women has begun to show itself. One of the main reasons that change women's roles in society is the increasing complexity of social and social structuring and changing roles within the family (Çelebi, 1990).

Women's roles in feudal society have gained a different dimension with the start of settled agricultural production. The use of concepts such as religion, mosque, and church by feudal lords caused differentiation in the social freedom of women. Women's roles were isolated from society, and women were seen as only "childbearing." Every woman in society has always been married, regardless of whether she is old or young. Unmarried women have not found a place in society. As a result, women were assigned to the secondary plan in this period compared to men, as in previous periods (Berktaş, 1998).

Since the 18th century, with the transition of societies to capitalist society, radical changes have been experienced, and women's roles have also been changed. The new conditions brought about by industrialization have started to attract women to business life. With this change arising from economic factors, a new one has been added to the existing roles of women. The woman, who is now in a productive position, believes that a life of her own could be established by gaining her economic independence. The woman, who has been seen as an unnecessary entity for years, has been taken to public spaces and included in business life. This transition has led to a significant evolutionary change in the social life of women. Although the female's role has progressed to a great extent, it has always been in the lower stage than the male (Berktaş, 2010).

With modernization, the traditional lifestyle has reset, and a new era has emerged. Changes and modernizations that will make a sound in every field in society have started. In the modernization process, women and women's roles are also affected by this process. Not only the housewife life expected of women was changed, but also their external experience was changed. In return for these developments imposed on women, they have asked only to receive an education. It has been argued that this education could only end ignorance and slavery. The idea of childcare and home service at home, which has been made to be adopted by women for years, has been demolished, and the groundwork has been laid for the formation of a different identity. Women's roles, women's status have been formalized with legal rights, and the concepts of women's rights have emerged (Kaymaz, 2010).

There are many examples today that women can be successful when given opportunities and support in many areas. The position of women in Turkey, especially with the proclamation of the Republic with the Community unaltered and altered women's status in society, has become more critical. In today's society, women maintain their maternal role protectively and have a great voice in business and production. To be CEO of any company, female tradesman,

an academician at universities, teacher at schools, a good mother to her child are among the woman's roles. The multiplicity of these roles assigned to women in society are still not absorbed by some segments of society, and genderism continues (Berktaş, 2010; Çelebi, 1990).

A mother is defined as a woman who gives birth to a child, takes care of it, or adopts and cares for a child that she did not give birth to herself. The mother whose egg cell is used in the birth of a child and usually gives birth to the child is the natural mother and, medically, the physiological mother. A person who does not provide the egg cell and gives birth to another mother's child is called a surrogate mother. Surrogate mothers often renounce their maternity rights and use this process to help a relative who cannot have children or gain financial gain. Stepmothers are women who adopt a child or are mothers to children of their spouse who are not themselves. In this case, the person concerned called the mother, whether she was a stepmother or not (Akşit, 2017).

The motherhood period is called the learning process of a woman's maternal behavior. During this period, the maternal identity is shaped by retaking a role, and the act of becoming a mother with all emotions takes place by gaining the role of the mother. The motherhood period is the totality of social roles and behaviors starting from prenatal and continuing after birth (Koç et al., 2016).

The first seed is formed when the mother's womb is, and a special bond between mother and child begins to show itself from this period. The feeling of motherhood settled in the mother by taking the form of her body system with compassion and sacrifice even before the child is born. The motherhood period starts with the baby's knowledge, integrates with the first hug, and continues for a lifetime. During the 40-week pregnancy process, which changes all the body systems, the mother tries to prepare herself for the phenomenon of motherhood by taking a different structure. For mothers who protect their health and their baby's health and try to preserve the adaptation process during pregnancy, they have entered a different maternity period after overcoming the difficult moment of birth. In this period, when the maternity period begins to take shape, it is expected that the mother and the baby would adapt to each other to a great extent within two to three days after the birth and feel pleasure in their partnership. With the baby's birth, a different and versatile bond begins to establish between mother and baby. As the mother is closer to her baby during the breastfeeding period, emotional attachment increases, and the baby's need for the mother reaches the satisfaction point. During the breastfeeding period, which is a crucial period in the healthy growth and development of the baby, the mother feels the need for her baby and not only assumes the role of eating but also undertakes the role of care, clothing, love, and attention. In this period, the purpose of the role of the mother is not only to provide the care and needs of the baby but also to determine behaviors that will help the mother's anxiety and increase the attachment with the child (Koç et al., 2016).

The mother's role is significant in the child's early development period. Especially during the puerperium period, the mother tries to meet her baby's needs, has to undertake the housework,

and has to cope with her emotional intensity. During these first months, when the mother is with her baby, holding on to life with the support of someone considered important for both mother and child. Getting help from her husband, mother, or any adult alleviates the mother's burden to some extent and helps her to overcome this period efficiently. Any fear, sadness, anxiety, or excitement of the mother is affected by this situation in the child (Karamustafalıoğlu and Tomruk, 2000).

The most basic need of a child at the age of 0-2 is the feeling of trust. During this period, the mother has to meet this essential need of the child. Touching the child, talking with him/her, meeting his / her needs lovingly on time is essential for the mother to integrate with the child and gain the child's trust (Yenibaş, 2007). While this period is a process in which the child must experience a sense of belonging, the mother can fear that the child will never be detached from him. Because when the child's attachment to the mother is high, the mother should know that the child raised in confidence will be more enthusiastic and self-confident to get to know the world (Gazioğlu, 2012).

Mothers feel intense from birth during the breastfeeding period due to the extraordinary changes in their bodies, emotions, and lifestyles. Therefore, mothers are faced with an important problem during their maternity period. After the age of 0-2, especially when the child begins to walk around, grasp objects, and perceive the world, spouses play a significant role. Spending enough time with their children saves the mother from personal depression (Güven et al., 2005).

Changes occur over time in the development period of the child. The child coming out of infancy increases the desire to know the environment, research, and mobility. During this period, mothers may not show the necessary patience for their children's mobility. During this period, the mother should try to use appropriate means of communication with the child and should not resort to the punishment method. Otherwise, both mother and child will see the consequences of the punishment method in a hard way in the following years. Raising a child is a very demanding and challenging process. The mother has to show much patience during this period. Being constantly responsible for the child overwhelms the mother. The mother is taking a short time for herself when her power is exhausted, which prevents her from falling into an emotional void. As long as the mother, whose strength is exhausted, does not devote this time to herself, she can act and make discourses that harm her child (Gazioğlu, 2012).

Briefly, the maternity period, starting with the child's birth, is a time of ongoing life. Although mothers expected to fulfill their duties fully, it was observed that mothers also get tired physically and emotionally from time to time. Although motherhood has the basic instinct of teaching and looking after the child, it is when the mother's knowledge and skills are needed in every period of life.

DIFFICULTIES and RECREATIONAL BARRIERS of MOTHERS FACED

There is an extraordinary relationship between mother and child. While the mother protects, nurtures, and matures her child, she is a being that acts with the instinct of love in her nature. In reality, the child cannot distinguish himself from the outer world. Nevertheless, it said that child contacts only his/her mother and takes part in existing of her/his mother. Mother learns to provide kid's needs by obtaining some experiences and knowledge. However, in this process, the mother also tries to cope with some problems brought about by motherhood (Aktaş, 2004).

The motherhood problem starts when the baby falls into the mother's womb and causes many physical and emotional changes. Pregnancy and birth events are stated as the period in which some problems are experienced in the mother. It has been observed that women have some psychological disorders in the postpartum period (Karamustafalıoğlu and Tomruk, 2000). The postnatal period begins with the birth of the baby and lasts up to about six weeks. During this period, physical checks should have been done, and psychological supports should have been provided. The mother's mood should have been evaluated socially and psychologically. In this process, mothers should not leave their wives and mothers alone, and necessary advice and support should be provided. It was observed that the mother experiences a high rate of suicide attempts during pregnancy and the postpartum period. Depression and suicidal ideation in mothers are pretty high due to the inadequacy experienced by mothers after birth (Lindahl et al., 2005).

After the infancy period, other emotional developments occur for children entering a new period. Especially for children emotionally and physically dependent on their mothers, the feeling of love, protection, admiration, and approval from their mothers is invaluable. For these reasons, the mother's ability to express her affection towards her child after these periods will make it easier for the mother to know the child structure shaped in the coming years and cope with the problems (Razon, 2006).

When the kids grow up and their dependence on the mother decreases, the mother's responsibility is eased, and the mother's struggle with her problems is more accessible. Children's assistance in the distribution of household chores reduces the conflict experienced by the mother. However, the child's increasing responsibilities as the child grow up cause the mother to spend more time with her child and causes the mother to face a different problem. The mother who wants to reach specific goals in terms of her child's development cannot spare enough time for herself due to time constraints and is left alone with the phenomenon of stress (Kim and Choo, 2001).

Mothers' working is seen as one of the problems faced by mothers. It was observed that the psychiatric symptoms of working mothers increased and changed depending on the number of children. Although having a child brings serious responsibilities to mothers, it makes mothers happier. However, this concern has doubled in working mothers and has caused work-mother-family conflict, also brought about by working life. Although motherhood presents a valuable paradox to the individual, it can also cause psychological disorders. The guilt felt by the

mother failed to balance her approach to her child (McLanahan and Adams, 1987). The participation of women in the working life brought along many new roles in social life. The mother, who leaves her child to go to work, thinks that her child is in danger, that she cannot protect her because she cannot realize the danger and that she will lose her child. The mother, who is not satisfied with the time spent with the child, may not make very healthy decisions in terms of spirit (Keskin, 2007).

The return of mothers to working life shortly after the birth of their children caused work-family conflict. Mothers who experience this feeling more intensely than male employees experience various depression and tension due to physiological and biological differences, norms and behaviors. Some oppressed mothers under this conflict may leave their work-life in time and choose to take care of their baby. However, women can get rid of these qualities called competitiveness, rationality, and masculine characteristics in this case. They can be included in features such as emotional, talkative, feeling the need for security, and acting in a planned manner (Broverman et al., 1972).

The most challenging part for women in business life is the motherhood aspect. The mother who participates in the working life is faced with work and family conflicts such as lack of emotional support, spending little time with children, and dissatisfaction with the children. The mother, who has to work, also feels guilty. It is inevitable for a mother who cannot spare enough time for her home, family, children, and herself to experience this feeling (Açıkgöz, 2014).

One of the most challenging periods of the motherhood period, when the children are between the ages of 0-2, the mother's work causes the mother to experience a feeling of guilt, making the mother fail. She is more tolerant towards her baby, as she cannot fulfill her baby's care and needs as she wishes. This process leads to a painful process for the mother and harms the mother-child relationship. Guilt causes the mother-child relationship to deteriorate and causes problems such as increased depression in the mother, problems in the marital relationship, and decreased parental satisfaction (Higgins, 1994).

The physical contact of the mother with her child in the 0-2 age group and the emotional connection she provides to her child has a significant impact on the future personality life of the child. The importance of children to attract the attention of the people around them, contact them and fulfill the role of the mother factor cannot be denied. In this context, if the mother diverts her attention from her child, the infidelity of the child towards her mother emerges (Yavuzer, 2010).

Giving the mother love to the child in a balanced, continuous, and consistent way is as important as the child's physiological needs. However, considering that the mother, like any living creature, experienced some mental and emotional ups and downs during this period, it is thought that the child was affected by this situation (Arı et al., 1995). In the context of all these, the duties and roles assigned to women have been continuing for a long time, and today, due to the conditions, the mother is under pressure. It places excellent duties on

everyone in the society in order for the mother to cope with these problems. In addition, the mother must act in a coordinated manner.

The concept of "recreational barrier" in free time literature; is described as "the reasons faced by the individual that limit the participation of the individual in recreational activities in his free time" (Alexandris and Carroll, 1997). Putting it in more general terms, recreational barriers can define as "factors that prevent the formation of leisure time preferences perceived by individuals and prevent or prevent leisure time participation." Many researchers have defined the term recreational barriers. It has revealed that all definitions share the same opinion: Barriers; has been defined as "factors that are assumed by researchers and perceived or accepted by individuals who have impeded or restricted participation and pleasure in leisure time." In the literature, barriers are divided into two-dimension dimensions as internal and external. Barriers; reasons such as "lack of time," "lack of material," "distance to activity areas over geographical location," "insufficient opportunities" are external obstacles, "perceived capacity," "ability," "ignorance," and "interests" can be listed as internal obstacles (Çakır et al., 2016).

According to many empirical studies, we can say that recreational activities positively affect social, physical, and emotional health. Despite the positive effects of recreational activities, we can say that people prefer not to participate in activities that are very beneficial for them for various reasons or that various obstacles prevent their participation. (Gürbüz and Karaküçük, 2007).

According to the results of empirical studies, the main factors affecting the individual's participation in recreational activities, in order of importance; "money," "time," "lack of friends," "transportation" and "facility" (Koçak, 2005; Shinew et al. 2004). The scientific study of Alexandris and Carroll stated that gender has a positive effect on participation in recreational activities (Alexandris and Carroll, 1997). Culp said that gender is an essential part of social impact, and it is an essential factor limiting the leisure time activities of individuals (Culp, 1998).

Researches for determining the motivating and limiting factors of participation in leisure activities began in the mid-1980s. As stated before, these studies were collected in two groups. These can be divided into studies that try to identify factors that increase and decrease participation. After this, Crawford and Godbey (1987) grouped constraints into three groups. These are;

- a) **Internal constraints** affected by the psychological state and attitude of the individual,
- b) **Interpersonal constraints** due to conflict of individuals with different personality traits and paradigms,
- c) **Structural constraints** result from individuals' demands for leisure time and the incompatibility/insufficiency of the fields.

In addition to these studies, the "will-power" sub-dimension was added to the sub-dimensions in the Öcal's (2012) Leisure Time Physical Activity Restrictors (SZFA-K) study and the scale developed by Crawford and Godbey (1987). Another study included in the literature is the Recreation Barriers Scale in the village, where Deniz Öz and Ardahan (2019) work. In this scale, "Family Causes" and "Family Pressure" factors are not found in others and added to the list of obstacles as recreational barriers in a recent study. Items in the "Time" sub-dimension in the short form of the Leisure Time Barriers Scale developed by Gürbüz et al. (2020) were added to the obstacle list.

These obstacles start from the pregnancy period increase with the presence of a baby. Other obstacles to the recreational lives of mothers with children; breastfeeding the baby, childcaring, not being able to get on public transportation with a pram, the environmental pressure caused by a child crying in open/closed social areas, the fact that recreational spaces cannot be designed for the mothers with children, not able to find a caregiver or not able to find a caregiver with the desired quality and time. The mother with children will develop coping strategies for the obstacles mentioned above and combat the obstacles arising from motherhood.

Of course, these barriers bring about in their coping strategies. For instance, a working mother during and after pregnancy can legally take time off from work after birth. This situation is to continue for up to two years free/unpaid form. Of course, to do this, the family income must be sufficient, and the mother must want it. In addition, motherhood is legally supported. Acting under Article 74 of Labour Law 4857, breastfeeding leave one and half hours in a day is provided for woman laborers in case that they can breastfeed their infants under one age. The laborer decides on the frequency of using this time by herself. This time is included in daily working times. Acting under Law 657 conditions for civil servants is that woman civil servants are permitted for breastfeeding leave 3 hours in a day along the first six months, one and half hours in a day along second 6 months since the date of the end of maternity leave after birth. Woman civil servant's decision constitutes the basis on the frequency of using breastfeeding leave.

In daily life, it is also seen that some mothers whose role in motherhood is dominant and, before other roles, quit working. Furthermore, women can be helped by family members during pregnancy and postpartum. In cases where both spouses work, spouses assume childcare together, and the father supports the mother at every stage, which is a common situation recently, especially in couples with a developed understanding of marriage. It is pretty common to see fathers walking around with their children, especially on Saturdays.

In cases where the family income is sufficient, the mother can use legal maternity leave. When she cannot take leave, caregivers can obtain professional support by paying a professional fee. Of course, the biggest problem is where the caregiver will take care of the child, whether the caregiver is close to the home with children, and whether the caregiver is competent. Finding a caregiver is a situation that is applied in two different ways. In the first case, the caregiver comes to the family's house. In the second case, the child leaves the

caregiver and produces services for a fee on agreed periods and days. Some mothers receive full-time caregiver support, while others receive support on certain days or hours. Caring is a profession that is difficult to control in society and has many negative examples. Families who are satisfied with a caregiver in a child in good conditions do not even want to move elsewhere to receive support from the same caregiver for the second child.

In addition to these problems, being a mother brings many other problems. For example, urban design is not designed for pregnant women and mothers with children in many cities and towns. It is fraught with many physical obstacles. Sidewalks are not at all suitable for transporting children with prams and for walking in regular shoes. It is impossible to let the child sleep in the car, on the sidewalk in situations such as jolts or lowers. On the other hand, mothers with children cannot use public transport with prams, and the car occupies much space in the vehicle, especially if there is heavy traffic and passengers.

Despite all these problems, women's risking many negativities in becoming a mother, postponing their recreational life until the child grows up, and then returning to their pre-pregnancy recreational life depends mainly on the positive support of the mother, spouse, caregiver status, family, and workplace. If the mother does not have an active recreational life before pregnancy, it can be said that the mother returns to a more permanent passive life when the child-related obstacles are added to it.

METHOD

This study aims to develop the Recreational Barriers Scales of Mothers with Child between 0-2 Years Old (RBSM-02) and make its validity and reliability for the Turkish population.

The study is descriptive and is limited to mothers with a child aged 0-2. The random sampling method was used in this study, and the sample group consisted of 213 mothers ($X_{age} = 29.33 \pm 4.78$). In this study, a questionnaire form with a list of questions indicating the recreational barriers of mothers with children aged 0-2 was used as a data collection tool. The questionnaire was applied in baby/child supplies stores, family medicine clinics, and pediatric polyclinics of hospitals. In the research five-point, Likert Type Scale (1-It does not definitely refer to me 2- It does not refer to me, 3- It refers to me partially, 4- It refers to me, 5- It refers to me definitely) was used.

The following scales were used in creating the substance list specific to this study;

- Leisure Barriers Scale developed by Alexandris and Carrol (1997) and adapted into Turkish by Karakküçük and Gürbüz (2006),
- Leisure Barriers Scale developed by Gürbüz and Karakküçük (2007),
- Leisure Time Physical Activity Restrictors Scale developed by Öcal (2012),
- Deniz Öz and Ardahan (2019). Recreation Barriers Scale in the village,
- Gürbüz et al. (2020) Leisure Barriers Scale: Testing the Building Validity of Short Form,

The questionnaire was applied to mothers waiting at the stores selling baby/child supplies in Antalya city center, family medicine clinics, Akdeniz University, Faculty of Medicine, and Antalya Training and Research Hospital pediatric outpatient clinics.

Kaiser Mayer Olkin (KMO) and Bartlett's test of sphericity applied for the suitability of the obtained data for factor analysis. A value between 0.50-0.59 was poor, 0.60-0.69 was weak, 0.70-0.79 was medium, 0.80-0.89 was good, 0.90 and above was excellent. When the literature was examined for the KMO test, a value less than 0.50 would not be suitable for analysis. (Deniz Öz and Ardahan, 2019).

According to obtained findings, it is seen that the KMO sample adequacy value is suitable for analysis. This showed that the data are suitable for factor extraction. EFA applied to the data set consisting of 64 items in total, 10 items with variance values less than 0.5, and factoring in factors other than the required factor removed, and EFA reapplied to the remaining 54 items. The results of KMO (0.841) and Bartlett's sphericity tests ($X^2 = 10279.568$, $SD = 1431$, $p = 0.000$) were found, and the RBSM-02 consisting of 54 items and 13 factors was obtained.

After the factor analysis, Pearson correlation coefficients were used for item-factor correlation. In order to evaluate the internal consistency of the scale, the Cronbach's alpha coefficients of the sub-dimensions were formed. In addition to EFA, Confirmatory Factor Analysis was also applied to the data set, and statistically, good fit results were obtained in all fit indices. The results were questioned at the significance level of 0.01 and 0.05. Varimax rotation method was used in the study.

FINDINGS

EFA applied to the item list consisting of 64 items for the development, validity, and reliability of the Recreational Barriers Scales of Mothers with Child between 0-2 Years Old (RBSM-02) and eight items with variance values less than 0.5 and factoring in unexpected factor than the required one were removed and then EFA was reapplied to the remaining 54 items. Since the results of KMO (0.841) and Bartlett's sphericity tests were found as ($X^2 = 10279.568$, $SD = 1431$, $p = 0.000$), EFA was applied again to 54 items, and the results of RARE-02 consisting of 54 items and 13 factors are given in Table-1. It can be seen from the table that the Kaiser-Meyer-Olkin value for RBSM-02 is above (0.60) as predicted by Kaiser (1974) and Bartlett's Test of Sphericity ($p < 0.05$), Chi-square = 10279.568, $SD = 1431$, $p = 0.000$ and Keiser-Meyer-Olkin sampling adequacy measure (0.841) was calculated.

Total of Cronbach's alpha value of RBSM-02 is 0,935 on also Table-1. Obtained factors, items in factors, Cronbach's alpha value and converted eigenvalues (DD) were calculated as; DD=4,718 and Cronbach's alpha value=0,924 for Factor-1(F1), DD=4,541 and Cronbach's alpha value=0, 909 for Factor-2 (F2), DD=4,230 and Cronbach's alpha value=0, 928 for Factor-3 (F3), DD=4,224 and Cronbach's alpha value=0, 930 for Factor-4 (F4), DD=3,733 and Cronbach's alpha value=0, 950 for Factor-5 (F5), DD=3,338 and Cronbach's alpha

value=0, 861 for Factor-6 (F6), DD=3,263 and Cronbach's alpha value=0, 891 for Factor-7 (F7), DD=3,012 and Cronbach's alpha value=0, 863 for Factor-8 (F8), DD=2,697 and Cronbach's alpha value=0, 923 for Factor-9 (F9), DD=2,659 and Cronbach's alpha value=0, 906 for Factor-10 (F10), DD=2,230 and Cronbach's alpha value=0, 804 for Factor-11 (F11), DD=2,015 and Cronbach's alpha value=0, 778 for Factor-12 (F12), DD=1,958 and Cronbach's alpha value=0, 960 for Factor-13 (F13).

Correlation values of Items and Factors are given in Table-2. As can be seen from the table, although each item has correlation values with other factors, the highest correlation value is realized with the factor it is factoring in. This shows that factoring is correct.

Factors obtained by EFA of RBSM-02 are given in Table-3. As seen from the table, factors, names, and contents are as given in the following form.

F01: This factor, called "**Perception of Ability**" refers to the mother's inability to participate because her own ability to participate in recreational activities is not appropriate, does not have the will to continue participating in these activities even if she participates, is not ready to participate in the activities, and she will be bored with participation.

F02: This factor, called "**Physical Perception and Health**" refers to the fact that the mother does not consider herself sufficient in terms of physical health in participating in recreational activities, that she is anxious that something will happen when she participates in the activity and that she is unable to participate due to the presence of various health problems.

F03: This factor, called "**Facility-Service Lack**" refers to the mother's inability to participate due to the lack of or inadequacy of the facilities where these activities are performed even if they are willing to participate in recreational activities.

F04: This factor, called "**Family and Others' Pressure**" refers to the mother's willingness to participate in recreational activities, even if the family members do not allow or support the participation and do not participate in the thought that others will talk about it.

F05: This factor, called "**Insufficient Budget / Finding Expensive**" refers to mothers who do not have enough budget or find participation as expensive thus, they cannot participate even if they want.

F06: This factor, called "**Child-Originated Barriers**" refers to the mother's inability to participate due to reasons such as the pressures that the individual will experience if they go out with the child, even if they are willing to participate in recreational activities, putting the child to sleep and breastfeeding difficulties.

F07: This factor, called "**Not Designed Facilities for the Mother with Children**" refers to the situation of not being able to participate due to the difficulties arising from the fact that the facilities they will go with their children are not designed for mothers with children, even if mothers are willing to participate in recreational activities.

Table 1: Factor loadings, common variance values, total variance explained

Items	Factors													Mean+SD	Variance
	F01	F02	F03	F04	F05	F06	F07	F08	F09	F10	F11	F12	F13		
YAL01	,832													1,86+1,04	,825
YAL02	,817													1,96+1,06	,806
YAL03	,808													2,05+1,11	,787
YAL04	,782													2,18+1,14	,798
YAL05	,777													2,20+1,11	,789
YAL06	,595													1,74+1,03	,677
FAS01		,843												1,63+0,92	,839
FAS02		,814												1,62+0,85	,812
FAS03		,813												1,78+1,01	,731
FAS04		,679												2,04+1,19	,688
FAS05		,660												1,73+0,91	,742
FAS06		,640												1,68+0,92	,748
FAS07		,616												1,52+0,81	,780
TESH01			,869											3,02+1,34	,852
TESH02			,864											3,16+1,34	,825
TESH03			,821											2,98+1,36	,797
TESH04			,801											3,02+1,31	,796
TESH05			,796											3,14+1,27	,748
ABAS01				,846										1,64+0,96	,863
ABAS02				,800										1,72+1,08	,853
ABAS03				,799										1,61+1,01	,821
ABAS04				,769										1,56+0,95	,832
ABAS05				,645										1,77+1,05	,684
BYPB01					,918									2,99+1,30	,911
BYPB02					,917									3,03+1,28	,910
BYPB03					,878									2,92+1,32	,867
BYPB04					,861									2,85+1,30	,829

Table 1: Factor loadings, common variance values, total variance explained (continuation)

Items	Factors													Mean+SD	Variance
	F01	F02	F03	F04	F05	F06	F07	F08	F09	F10	F11	F12	F13		
BEKE01						,799								3,19+1,44	,732
BEKE02						,787								2,72+1,47	,717
BEKE03						,734								3,24+1,45	,670
BEKE04						,723								2,70+1,45	,666
BEKE05						,697								3,24+1,45	,681
TESTS01							,860							3,22+1,45	,849
TESTS02							,849							3,30+1,47	,812
TESTS03							,793							2,77+1,41	,707
TESTS04							,762							3,35+1,40	,689
ILGSZ01								,862						2,06+1,10	,872
ILGSZ02								,841						2,08+1,10	,827
ILGSZ03								,774						2,25+1,15	,707
ILGSZ04								,704						2,53+1,29	,748
BAKEN01									,946					2,08+1,38	,932
BAKEN02									,914					2,22+1,46	,863
BAKEN03									,878					2,19+1,49	,823
AREKS01										,845				2,74+1,35	,902
AREKS02										,816				2,79+1,38	,859
AREKS03										,770				2,48+1,27	,777
ULAS01											,804			2,46+1,44	,738
ULAS02											,748			3,02+1,39	,781
ULAS03											,739			2,54+1,36	,737
ANED01												,678		3,37+1,47	,728
ANED02												,636		3,23+1,48	,652
ANED03												,624		2,54+1,38	,647
BLEK01													,899	2,43+1,32	,948
BLEK02													,886	2,46+1,35	,945
Cronbach's Alpha	0.924	0.909	0.928	0.930	0.950	0.861	0.891	0.863	0.923	0.906	0.804	0.778	0.960	Total Cronbach's Alpha Value of Scale 0.935	
Converted Eigenvalues	4.718	4.541	4.230	4.224	3.733	3.338	3.263	3.012	2.697	2.659	2.230	2.015	1.958		
Converted % of Variance	8.736	8.41	7.832	7.823	6.912	6.181	6.043	5.578	4.994	4.924	4.129	3.731	3.625		
Converted Cumulative %	8.736	17.146	24.978	32.801	39.713	45.895	51.938	57.516	62.51	67.434	71.563	75.294	78.919		

Table 2: Values of item, factor, correlation

Items	Factor Loadings and Correlation Values												
	F01	F02	F03	F04	F05	F06	F07	F08	F09	F10	F11	F12	F13
YAL01	,883**	,463**	,090	,549**	,117	,140*	,034	,342**	,070	,201**	,196**	,209**	,192**
YAL02	,878**	,489**	,117	,521**	,089	,156*	,054	,317**	-,032	,218**	,145*	,273**	,232**
YAL03	,872**	,428**	,079	,556**	,060	,187**	,163*	,324**	,095	,130	,205**	,264**	,237**
YAL04	,865**	,431**	,208**	,502**	,123	,245**	,098	,468**	,096	,109	,201**	,287**	,200**
YAL05	,878**	,442**	,111	,555**	,084	,223**	,109	,446**	,086	,189**	,193**	,274**	,189**
YAL06	,733**	,490**	,087	,587**	,077	,141*	,187**	,140*	-,016	,192**	,295**	,289**	,193**
FAS01	,381**	,877**	,092	,527**	,182**	,216**	,111	,205**	,087	,249**	,111	,270**	,252**
FAS02	,442**	,883**	,124	,538**	,224**	,200**	,110	,227**	,126	,324**	,120	,332**	,250**
FAS03	,358**	,788**	,138*	,358**	,166*	,174*	,062	,216**	,100	,190**	,185**	,247**	,139*
FAS04	,334**	,738**	,072	,345**	,172*	,240**	,134	,189**	,200**	,284**	,124	,354**	,175*
FAS05	,537**	,805**	,118	,543**	,153*	,163*	,068	,206**	,161*	,292**	,217**	,261**	,174*
FAS06	,491**	,826**	,010	,578**	,137*	,194**	,096	,141*	,200**	,347**	,118	,326**	,216**
FAS07	,546**	,784**	,022	,596**	,074	,122	,005	,187**	,113	,243**	,120	,138*	,229**
TESH01	,110	,040	,916**	,066	,253**	,308**	,315**	,271**	,009	,284**	,352**	,250**	,281**
TESH02	,100	,108	,895**	,083	,261**	,290**	,328**	,245**	,038	,290**	,338**	,266**	,269**
TESH03	,120	,035	,881**	,072	,284**	,286**	,268**	,309**	,006	,318**	,310**	,248**	,307**
TESH04	,138*	,136*	,873**	,153*	,270**	,302**	,248**	,303**	-,023	,390**	,421**	,349**	,286**
TESH05	,133	,137*	,841**	,114	,252**	,300**	,224**	,247**	-,006	,307**	,431**	,277**	,214**
ABAS01	,564**	,475**	,117	,907**	,181**	,144*	,095	,214**	-,014	,221**	,203**	,314**	,322**
ABAS02	,558**	,532**	,083	,900**	,207**	,243**	,205**	,204**	,071	,243**	,174*	,421**	,231**
ABAS03	,536**	,549**	,026	,900**	,198**	,180**	,091	,196**	,069	,185**	,266**	,298**	,262**
ABAS04	,610**	,580**	,098	,895**	,202**	,223**	,119	,170*	,002	,200**	,250**	,252**	,272**
ABAS05	,558**	,523**	,162*	,823**	,279**	,206**	,109	,303**	-,046	,185**	,261**	,281**	,307**
BYPB01	,085	,145*	,321**	,216**	,949**	,206**	,165*	,174*	,033	,324**	,286**	,370**	,225**
BYPB02	,054	,175*	,287**	,202**	,951**	,184**	,171*	,112	,040	,350**	,266**	,360**	,254**
BYPB03	,142*	,208**	,233**	,208**	,916**	,147*	,141*	,215**	,053	,356**	,277**	,446**	,271**
BYPB04	,119	,206**	,276**	,279**	,915**	,248**	,152*	,179**	,047	,319**	,305**	,343**	,242**
BEKE01	,139*	,157*	,267**	,147*	,168*	,836**	,377**	,120	,211**	,203**	,181**	,253**	,071
BEKE02	,199**	,255**	,258**	,193**	,104	,807**	,281**	,160*	,202**	,272**	,177**	,209**	,230**
BEKE03	,144*	,107	,339**	,180**	,195**	,801**	,389**	,180**	,201**	,186**	,277**	,207**	,179**
BEKE04	,232**	,297**	,252**	,301**	,155*	,775**	,309**	,297**	,124	,210**	,209**	,238**	,149*
BEKE05	,149*	,122	,236**	,085	,222**	,790**	,423**	,207**	,195**	,145*	,278**	,243**	,072
TESTS01	,134	,083	,304**	,151*	,136*	,411**	,922**	,132	,172*	,148*	,195**	,367**	,183**
TESTS02	,111	,060	,300**	,128	,158*	,345**	,897**	,132	,166*	,169*	,173*	,356**	,198**
TESTS03	,119	,137*	,220**	,099	,160*	,369**	,812**	,190**	,157*	,144*	,198**	,301**	,168*
TESTS04	,074	,094	,266**	,112	,131	,415**	,837**	,095	,193**	,164*	,197**	,295**	,099
ILGSZ01	,379**	,257**	,215**	,211**	,092	,116	,021	,890**	,116	-,048	,129	,111	,075
ILGSZ02	,378**	,232**	,211**	,226**	,088	,146*	,032	,870**	,125	-,036	,170*	,077	,068
ILGSZ03	,275**	,181**	,310**	,195**	,221**	,228**	,157*	,819**	,082	,138*	,263**	,207**	,225**
ILGSZ04	,330**	,154*	,308**	,204**	,204**	,302**	,295**	,804**	,112	,232**	,105	,322**	,108
BAKEN01	,066	,150*	,011	,020	,063	,221**	,173*	,172*	,960**	,108	,045	,122	,027
BAKEN02	,057	,180**	,011	,047	,062	,206**	,178**	,105	,928**	,105	,076	,139*	,043
BAKEN03	,046	,163*	-,005	-,012	,006	,223**	,201**	,086	,908**	,030	-,033	,098	-,003
AREKS01	,131	,280**	,364**	,176*	,349**	,267**	,186**	,058	,102	,951**	,326**	,458**	,429**
AREKS02	,149*	,296**	,303**	,188**	,382**	,219**	,167*	,067	,072	,931**	,291**	,411**	,477**
AREKS03	,284**	,360**	,326**	,286**	,259**	,211**	,143*	,135*	,063	,869**	,172*	,423**	,325**
ULAS01	,253**	,174*	,197**	,255**	,251**	,175*	,106	,196**	-,002	,216**	,817**	,250**	,212**
ULAS02	,201**	,145*	,434**	,208**	,274**	,330**	,258**	,175*	,089	,291**	,878**	,360**	,235**
ULAS03	,155*	,127	,441**	,197**	,247**	,209**	,198**	,125	-,009	,228**	,849**	,162*	,248**
ANED01	,186**	,210**	,302**	,224**	,389**	,252**	,385**	,250**	,153*	,404**	,252**	,863**	,356**
ANED02	,195**	,281**	,245**	,258**	,394**	,274**	,323**	,072	,087	,417**	,243**	,850**	,294**
ANED03	,409**	,378**	,238**	,415**	,227**	,187**	,238**	,229**	,079	,346**	,266**	,780**	,210**
BLEK01	,243**	,244**	,305**	,299**	,275**	,170*	,174*	,125	,011	,416**	,266**	,325**	,980**
BLEK02	,234**	,245**	,300**	,317**	,246**	,174*	,193**	,153*	,035	,464**	,269**	,355**	,981**

** .001; * .005

F08: This factor, called "**Indifference**" refers to the mothers' inability to participate, even if they are willing to participate in recreational activities because they are not willing enough to participate.

F09: This factor, called "**Caregiver-Originated Barriers**" expresses the mothers' inability to participate, even if they are willing to participate in recreational activities, due to not finding a caregiver for the child at an appropriate time, at appropriate quality, and with a budget.

F10: This factor, called "**Lack of Friends**" refers to the mothers not being able to participate, even if they are willing to participate in recreational activities because they do not have friends to participate with or are not willing to participate.

F11: This factor, called the "**Transportation Barrier**" refers to the mothers' inability to participate due to the transportation barrier even if they are willing to participate in recreational activities.

F12: This factor, called "**Family Reasons**" expresses mothers' inability to participate due to family reasons, even if they are willing to participate in recreational activities.

F13: This factor, called "**Lack of Information**" refers to mothers' inability to participate, even if they are willing to participate in recreational activities, due to lack of information about how to participate in activities and where and when the activities are held.

Table of Item-Factor Correlation indicated in Table-2. Even if all items have correlation values with other factors, it can get the highest correlation value with the factor they factor in. This is also an indicator of the validity of structure in factors. In addition to this, results of Confirmatory Factor Analysis (CFA) are given in Diagram-1. According to the diagram, RBSM-02 consisting of 13 factors, gives a suitable distribution relationship. This situation can be verified with $X^2 / \text{Degree of Freedom} = 2.08$ and $\text{RMSEA} = 0.071$ and is within the desired statistical limits.

Table 3: Explanations of factors and items

Factor Names	Codes and Explanations of Items
F01 Perception of Ability	YAL01- I do not think I am talented enough to do these activities YAL02- The features required by these activities do not match my skills YAL03- I do not have the will-power to continue these activities. YAL04- I am not ready to add these activities to my life. YAL05- I think I will get bored with these activities. YAL06- Not being happy with the environments that others join
F02 Physical Perception and Health	FAS01- I worry that something will happen to me while doing these activities. FAS02- I have problems with balance and coordination during these activities FAS03- I have health problems FAS04- The activities cause a feeling of tiredness FAS05- My physical form is not suitable for participating in such activities FAS06- My physical appearance prevents me from participating in physical activities FAS07- I cannot participate in such activities due to my physical disability
F03	TESH01- Lack of facilities for activities

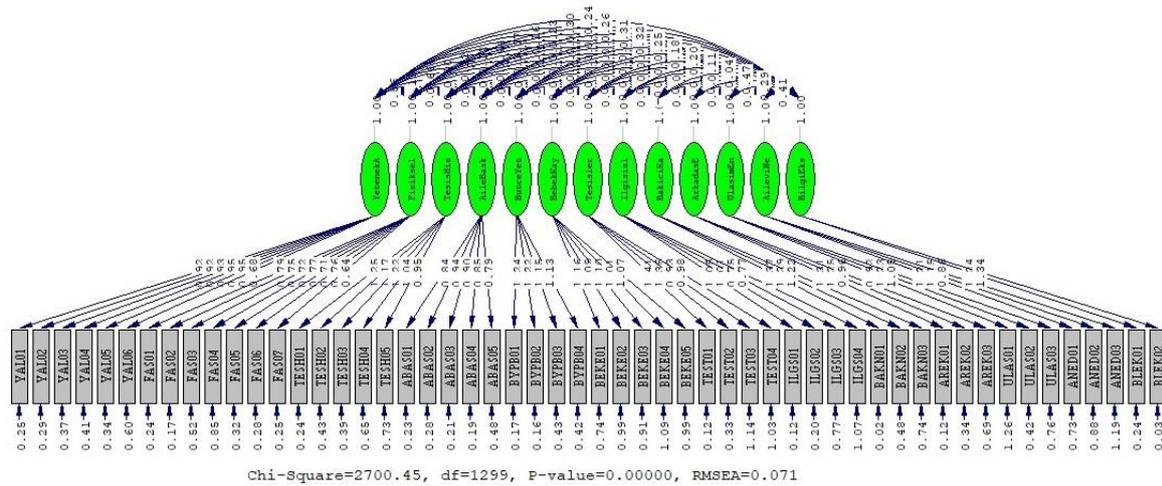
Facility-Service Lack	TESH02- Insufficient number of facilities where activities will be held TESH03- Lack of activities that I can participate in near me TESH04- Not having activities suitable for me where activities are held TESH05-The facilities where activities can be done are crowded
F04 Family and Others' Pressure	ABAS01- My family does not allow me to participate in these activities ABAS02- My family does not welcome participating in these activities ABAS03- My participation in these activities may put my family in a difficult situation with their social environment ABAS04- I am afraid/ashamed of my neighbors ABAS05- I am afraid/ashamed of family members
F05 Insufficient Budget / Finding Expensive	BYPB01- The materials used in these activities are expensive for me BYPB02- I find these activities expensive BYPB03- I do not have enough budget to allocate to such activities BYPB04- The transportation cost of regular participation in these activities is expensive for me
F06 Child-Originated Barriers	COKE01- I have trouble sleeping with the child when I am out COKE02- I am afraid to go out with the child without anyone COKE03- I have trouble feeding / feeding the child when I am out COKE04- I am afraid to go out with the child because he will get sick COKE05- My child is active, or crying creates pressure on me
F07 Not Designed Facilities for the Mother with Children	TESTS01-There isn't any space to leave child inactivity places during activity. TESTS02- The absence of a person to take care of the child during the activity TESTS03- Not being accepted with my child at the place where the activities are performed TESTS04- The place where the activities are performed is not suitable for feeding / breastfeeding the child
F08 Indifference	ILGSZ01- Not being interested in such activities ILGSZ02-Not enjoyed these activities in past. ILGSZ03- Not wanting to disrupt the flow of daily life ILGSZ04- Postponing starting such activities continuously
F09 Caregiver-Originated Barriers	BAKEN01- I cannot find a caregiver suitable for my working days and hours. BAKEN02- I cannot find a caregiver suitable for my days and hours when I need one. BAKEN03- I cannot find a caregiver that I am looking for.
F10 Lack of Friends	AREKS01- My friends with whom I will participate in the activities do not have time. AREKS02- There is no one with whom I will participate in the activities. AREKS03- My friends do not like to participate in such activities.
F11 Transportation Barrier	ULAS01-We don't have a vehicle. ULAS02-Transportation to activity places lasts long. ULAS03-There is not an opportunity for transportation to activity places.
F12 Family Reasons	ANED01-I can't allocate time cause of my responsibilities of family/work. ANED02- I cannot participate because I have a small child. ANED03-I have to allocate my free time to my family.
F13 Lack of Information	BLEK01- I don't know how and where I can participate in activities. BLEK02-There is nobody/nowhere which/whom I can learn activity places.

Results of Confirmatory Factor Analysis of RBSM-02 are given in Table-4. As can be seen from the table, $X^2 / \text{Degree of Freedom}$ was calculated as 2.08, and this value calculated by Sümer (2000) and Schreiber et al. (2006) shows that it is a perfect fit. Apart from that, the absolute fit index scores Çokluk et al. (2010) and Marsh et al. (2006), good fit in GFI, AGFI, RMR, and SRMR, while good fit in RMSEA, while increasing fit indices have a good fit in CFI, NFI, NNFI, IFI and average fit scores in PGFI according to Sümer (2000).

Table 4: CFA fit indices values

X ² / Ser. Der	= 2700,45 / 1299: 2,08 (Perfect Fit)		
GFI	= 0.68 (Normal Fit)	CFI	= 0.93 (Good Fit)
AGFI	= 0.63 (Normal Fit)	NFI	= 0.88 (Good Fit)
RMSEA	= 0.071 (Good Fit)	NNFI	= 0.93 (Good Fit)
RMR	= 0,010 (Normal Fit)	PGFI	= 0.59 (Normal Fit)
SRMR	= 0,068 (Normal Fit)	IFI	= 0.93 (Good Fit)

Diagram 1: CFA analysis diagram



DISCUSSION AND CONCLUSION

This study aims to develop the Recreational Barriers Scales of Mothers with Child between 0-2 Years Old (RBSM-02) and make its validity and reliability for the Turkish population. The questionnaire was applied in baby/child supplies stores, family medicine clinics, and pediatric polyclinics of hospitals to 213 mothers ($X_{\text{age}} = 29.33 \pm 4.78$).

In creating the item list specific to this study, the items taken from the scales; Leisure Barriers Scale developed by Alexandris and Carrol (1997) and adapted into Turkish by Karakküçük and Gürbüz (2006), Leisure Barriers Scale developed by Gürbüz and Karakküçük (2007), Leisure Time Physical Activity Restrictors Scale developed by Öcal (2012), Deniz Öz and Ardahan (2019). Recreation Barriers Scale in the Village, and Gürbüz et al. (2020) Leisure Barriers Scale: Testing the Building Validity of Short Form, benefited.

In these studies, the recreation barriers of individuals in urban life or village life were studied. These three studies are not sufficient to measure the recreational barriers of mothers with children. The list of items obtained here consists of 64 items by adding items caused by the child they live in during pregnancy. After birth, that is caused by caregivers, and that includes the barriers caused by the fact that recreational areas are not designed for mothers with children. The item pool was obtained.

Kaiser Mayer Olkin (KMO) and Bartlett's test of sphericity applied for the suitability of the obtained data for factor analysis. A value between 0.50-0.59 was poor, 0.60-0.69 was weak,

0.70-0.79 was medium, 0.80-0.89 was good, 0.90 and above was excellent. When the literature was examined for the KMO test, a value less than 0.50 would not be suitable for analysis. (Deniz Öz and Ardahan, 2019).

According to obtained findings, it is seen that the KMO sample adequacy value is suitable for analysis. This showed that the data are suitable for factor extraction. EFA applied to the data set consisting of 64 items in total, 10 items with variance values less than 0.5, and factoring in factors other than the required factor removed. EFA reapplied to the remaining 54 items. The results of KMO (0.841) and Bartlett's sphericity tests ($X^2 = 10279.568$, $SD = 1431$, $p = 0.000$) were found, and the RBSM-02 consisting of 54 items and 13 factors was obtained.

Confirmatory Factor Analysis CFA was also applied to the data set of RBSM-02, and $X^2 /$ Degree of Freedom was calculated as 2.08. This value calculated by Sümer (2000) and Schreiber et al. (2006) shows a perfect fit. Apart from that, the absolute fit index scores Çokluk et al. (2010) and Marsh et al. (2006), normal fit in GFI, AGFI, RMR, and SRMR, while good fit in RMSEA, while increasing fit indices have a good fit in CFI, NFI, NNFI, IFI and normal fit scores in PGFI according to Sümer (2000). Through these findings, it is possible to say that the model is acceptable.

The sample, developed by Alexandris and Carrol (1997) and adapted into Turkish by Karak Küçük and Gürbüz (2006), used in the Leisure Time Barriers Scale, which consists of 6 factors and 27 items, is not suitable for mothers with children. In addition, in the Leisure Time Barriers Scale developed by Gürbüz and Karak Küçük (2007), the sample consists of lecturers and is not suitable for mothers with children. Sub-dimensions of "financial means," "lack of friends," and "social environment" added to the adaptation study of the same authors.

The item list in the current study and the items list of Gürbüz et al. 'study (2020) are largely similar. In the Leisure Time Physical Activity Restrictors Scale developed by Öcal (2012), the "Will-power" factor and item lists not available in other scales were included in the present study. In addition, the physical and social environmental conditions caused by the village itself from the studies of Deniz Öz and Ardahan (2019) Family and Environment pressure factor and item lists were included in the current study.

The item list in the current study and the items list of Gürbüz et al. (2020)' study are mainly similar. In the Leisure Time Physical Activity Restrictors Scale developed by Öcal (2012), the "factor, which is not available in other scales, was added. The Recreation Barriers in the Village Scale developed by Deniz Öz and Ardahan (2019), the physical and social environmental conditions caused by the village itself, Family and Environment pressure factors added to the current studies item list. These three studies are structured to determine recreation barriers through urban samples.

The scale items discussed in this study added to the present study as three different factors: Child Originated Barriers, Caregiver Originated Barriers, and **Not Designed Facilities for the Mother with Children**. Items and factors in the other four studies were included in the current study as they were and factored in the current study in the same way as those studies.

Another critical factor is that the sample of this study consists of mothers with children aged 0-2.

Considering the findings mentioned above and results, it is possible to say that the Recreational Barriers Scale of Mothers with Child Between 0-2 Years Old (RBSM-02) is a valid and reliable scale for the Turkish population in its current form.

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