

Practices of Early Childhood's Mothers Regarding Toilet Training at Primary Health Care Centers in Al-Rusafa District in Baghdad City

ممارسات أمهات الطفولة المبكرة المتعلقة بالتدريب على استخدام دورة المياه في مراكز الرعاية الصحية الأولية في قطاع الرصافة في مدينة بغداد

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المستخلص

الأهداف: تقييم ممارسات أمهات الطفولة المبكرة المتعلقة بالتدريب على استخدام دورة المياه ومعرفة العلاقة بين ممارسات أمهات الأطفال في الطفولة المبكرة وخصائصهم الديموغرافية-الإجتماعية وخصائص أطفالهم الديموغرافية.

منهجية البحث: أجريت دراسة وصفية في مراكز الرعاية الصحية الأولية في قطاع الرصافة في مدينة بغداد للفترة من ١٩ أيلول ٢٠٢٠ إلى ١٦ آذار ٢٠٢١. أختيرت عينة غير احتمالية (متوفرة) من (٢٢٥) من أمهات الأطفال في الطفولة المبكرة، صممت استبانة وتألفت من جزئين: الجزء الأول يتضمن البيانات الديموغرافية للأمهات والأطفال بالإضافة إلى مقياس الحالة الاقتصادية والإجتماعية، أما الجزء الثاني فيشمل أسئلة متعددة الاختيارات لتقييم ممارسات الأمهات المتعلقة بالتدريب على استخدام دورة المياه. حدد ثبات الاستبانة من خلال إجراء الدراسة الإستدلالية وحددت مصداقيتها من خلال مجموعة خبراء مكونة من (١٥) خبيراً، وجمعت البيانات من خلال استخدام الاستبانة، وحللت البيانات باستخدام أسلوب الإحصاء الوصفي والإستنتاجي.

النتائج: أشارت نتائج الدراسة الحالية إلى أن ممارسات الأمهات كانت متوسطة المستوى بالنسبة للتدريب على استخدام دورة المياه، وفيما يتعلق بالعلاقة ذات الدلالة الإحصائية بين الخصائص الديموغرافية-الإجتماعية للأمهات والأطفال فقد كانت هناك علاقة بين المستوى التعليمي والحالة الزوجية مع ممارسات الأمهات.

التوصيات: تطبيق برنامج تثقيفي صحي واسع النطاق من قبل وزارة الصحة العراقية لتحسين وتطوير ممارسات أمهات الأطفال في الطفولة المبكرة فيما يتعلق بالتدريب على استخدام دورة المياه، يمكن تنفيذه من خلال وسائل الإعلام والندوات التدريبية والمصنقات والكتيبات ومقدمي الرعاية الصحية الأولية في مراكز الرعاية الصحية الأولية.

الكلمات المفتاحية: ممارسات، أمهات الأطفال في الطفولة المبكرة، التدريب على استخدام دورة المياه

Abstract

Objective(s): To assess the practices of early childhood's mothers regarding toilet training and to find out the relationship between mothers' practices and their socio-demographic characteristics and their children's demographic characteristics.

Methodology: A descriptive study is conducted at primary health care centers in Al-Rusafa District in Baghdad City for the period of September 19th 2020 to March 16th 2021. Non probability "convenient" sample of (225) early childhood's mothers is selected. A questionnaire format is designed and composed of two parts: the first part includes mothers' socio-demographic characteristics and their children and the second part includes structured close-ended questions to assess the practices of the early childhood's mothers regarding toilet training. The reliability of the questionnaire is determined through a pilot study and the content validity is obtained through a panel of (15) experts. The data are collected through the use of the questionnaire and analyzed through the use of the descriptive and inferential statistical data analysis approaches.

Results: The study findings indicate that mothers' practices are moderate toward toilet training and there are significant relationship between mothers' practices and their socio-demographic characteristics of their education and marital status.

Recommendations: Extensive health education program should be applied by the Ministry of Health and Environment to enhance and develop early childhood's mother practices regarding toilet training. Such program can be delivered through mass media, posters, booklets, and primary health care centers staff.

Keywords: Early Childhood's Mothers, Practices, Toilet Training

Introduction:

Toilet training is a process in which a child learns to manage their excretory functions independently ⁽¹⁾. And it is one of the most demanding developmental stages of the early childhood phase that all children must successfully achieve in order to conform to the standards of society ⁽²⁾.

Toilet training is very significant in developing the child's character and in establishing shared confidence in parent-child relationships; parents' readiness for toilet training is to understand the child's readiness for urination and defecation, the ability to devote the time needed for urination and defecation for their offspring ⁽³⁾.

Toilet training in general should be carried out in a child who has started to reach the process of independence in children, usually in children between the ages of 18 and 24 months, and children require physical, psychological and cognitive preparation to carry out the toilet training ⁽⁴⁾.

The role of a mother is very important in the success of toilet training because the mother has a responsibility in the formation of personality and education in children ⁽⁵⁾.

During the training period, the relationship between the mother or the trainer and the child and their behavior towards the child can have a positive or negative effect on that period ⁽⁶⁾.

Failure of toilet training may result in significant physical and psychological

consequences like a sense of failure through partial loss of autonomy ⁽⁷⁾.

Methodology:

Study Design: A descriptive study is conducted from the period of 19th September 19th 2020 to March 15th 2021. The study is carried out at the primary health care centers (PHCCs) in Al-Rusafa district in Baghdad city to assess the Practices of early childhood's mothers regarding toilet training.

Study Sample: Non probability (convenient sample) of (225) early childhood's mothers who attend the (PHCCs), where selected as (10%) from the average of a (3) previous monthly visits of mothers to the immunization units. The study includes two primary health care sectors (PHCSs) which is selected as (20%) from all (PHCSs), which accounts for (10) sectors in Al-Rusafa District. A total of (6 PHCCs) is selected as (20%) from each sectors "Al-Sadr Sector" (Third, Al-Shahid Kadeem Abdalnabi, Al-Shahid Ibrahim Al-Ashiqi, and Al-Shahid Jamal Al-Mousawi) PHCCs, and "Al-Baldiat second Sector" (Al-Jawadeen, and Al-Imam Mohammed Al-jawad) PHCCs for the purpose of the study.

Ethical Considerations: Scientific Research Ethical Committee at the University of Baghdad, College of Nursing has approved the study to be conducted. All mothers who have participated in the study

have signed consent form for the human subjects' rights.

The Study Instrument: A questionnaire is developed for the purpose of the study which is comprised of two parts; first part is concerned with the socio-demographic characteristic of early childhood's mothers of age, education, occupation and marital status, and the socioeconomic status scale which have items related to the child's Parent of occupational status, educational level, family type, crowding index, house ownership, house size, house expenses and possession of a car, and also include the child's demographic characteristic of age, gender, number of children, child's birth order, starting toilet training or not, age of starting, and information source about the toilet training. Whereas the second part is comprised of structured questions to assess the practices of early childhood's mothers regarding toilet training. It includes (20) questions with close ended, in which there is three options of always, sometimes and never that the mother should put a mark which represent her practices toward training of her child on toilet.

Validity of the Study: Content validity is determined through panel of (15) experts.

Reliability of the study: Internal consistency reliability is obtained for the

study questionnaire when Cronbach Alpha correlation coefficient is computed as (0.73).

Rating and Scoring: The responses for these questions are rated and scored on (3 level type Likert scale) as; Never =0, Always =2, Sometimes =1. Evaluation intervals of relative sufficiency: [L: Low (0.00 – 33.3)]; [M: Moderate (33.3 – 66.7)]; [H: High (66.7 – 100)].

Data collection: Data are gathered through observational technique and the use of the study questionnaire format as means of data collection.

Data Analysis: Descriptive and inferential statistical data analysis approaches are used to analyze the data of the study under application of the Statistical Package of Social Sciences (SPSS) version (22).

Results

Table (1): Distribution of the Parent's Socio-Demographical Characteristics Variables (SDCv.), and the Socio-Economic Status

Mothers' Characteristics	Groups	F	%
Age of mother in years	< 20	29	12.9
	20 _ 29	109	48.4
	30 _ 39	75	33.3
	40 _ above	12	5.3
	Mean ± SD	27.43 ± 6.79	
Marital status	Married	216	96
	Divorce	3	1.3
	Separate	5	2.2
	Widow	1	0.4
Type of family	Extended	107	47.6
	Nuclear	118	52.4
Educational level of (child's Father)	Illiterate	29	12.9
	Read & write	37	16.4
	Primary graduate	72	32
	Secondary graduate	47	20.9
	College graduate	32	14.2
	High Education	8	3.6
Educational level of (Mother)	Illiterate	31	13.8
	Read & write	36	16
	Primary graduate	68	30.2
	Secondary graduate	65	28.9
	College graduate	25	11.1
Occupational status (child's Father)	Employed	105	46.7
	Retired	5	2.2
	Free jobs	113	50.2
	Unemployed\ House wife	2	0.9
Occupational status (Mother)	Employed	23	10.2
	Without Work	3	1.3
	Unemployed\ House wife	199	88.4
Socio-Economic Status "SES"	(80 - 100) High	4	1.8
	(50 - 79) Middle	135	60.0
	(0 - 49) Low	86	38.2

No. =Number, % = percentages F: Frequency, %: Percentage

The results show that vast majority of mothers are accounted for the second and third age groups (20 – 29), (30– 39) yrs., which account 109(48.4%), 75(33.3%) respectively with mean and standard deviation (Mean ± SD27.43 ± 6.79) years respectively, most of mothers are married; "Nuclear" family type is recorded marginal increments than "Extended" type. Regarding Child's parent (Father and mother), the study shows that the majority of them 72(32%), 68(30.2%) respectively are primary graduate, more than half of child's fathers 113 (50.2%) are free jobs, and most 199(88.4%) of mothers are housewife, the majority of the studied sample are at middle level of socioeconomic status 135(60%).

Table (2): Distribution of Child's Demographic Characteristics and the Source of Information about Toilet Training

Child's Characteristics	Groups	F	%
Age of the child in years	1	42	18.7
	2	39	17.3
	3	53	23.6
	4	51	22.7
	5	40	17.8
	Mean \pm SD		3.04 \pm 1.37
Gender of child	Male	143	63.6
	Female	82	36.4
Number of children (brothers and sisters)	None	32	14.2
	1 _ 2	101	44.9
	3 _ 4	65	28.9
	5 _ 6	21	9.3
	\geq 7	6	2.7
Child's birth order	The First	77	34.2
	The Second	58	25.8
	The Third	40	17.8
	The Fourth	23	10.2
	The Fifth and above	27	12.0
Starting toilet training or not	NO	87	38.7
	Yes	138	61.3
Age of starting toilet training	None	87	38.7
	After age of one year	13	9.42
	After age of two years	87	63.04
	After age of three years	30	21.74
	After age of four years and above	8.0	5.80
Source of Information	Social media (TV, Net, Magazine)	47	20.9
	Household and relatives	113	50.2
	Primary health care centers	9	4.0
	Previous experience	56	24.9

F: Frequency, %: Percentages

The results reveal that highest percentages refer to three years old of child's age 53(23.6%), male child's account 143(63.6%), the study results have focused on the second group (one to two) number of children 101(44.9%) in the family, the first and the second child's birth order are the vast majority 77(34.2%), 58(25.8%) respectively, most of children 138(61.3%) start toilet training and 87(63.4%) of them have started training after the age of two years, "Household and relatives" group has formed the most 113(50.2%) sources of information for mothers about toilet training.

Table (3): Distribution of Main Domain of Practices Concerning Early Childhood's Mothers Regarding Toilet Training

Main Domain	Number	Min.	Max.	PGMS	PSD	Ev.
Main Domain: Practices	225	30.00	90.00	65.09	10.83	M

Ev. : Evaluation (0.00 – 33.33) Low (L) ; (33.34 – 66.66) Moderate (M) ; (66.67– 100) High (H)

This table shows that the responses of mothers accounted a moderate level border to high evaluation level are formed for practices.

Table (4): Relationships among Mothers Responses Regarding Studied Main Domains of Practices with Parent's and Child's Socio-Demographic Characteristics

Mothers' Characteristics	Mothers' Practices			Child's Characteristics	Mothers' Practices		
	C.C.	Sig.	C.S. (*)		C.C.	Sig.	C.S. (*)
Age of mother in years	0.088	0.627	NS	Age of the child in years	0.055	0.955	NS
Marital status	0.213	0.014	S	Gender of child	0.082	0.218	NS
Type of family	0.074	0.263	NS	Number of children (brothers and sisters)	0.050	0.968	NS
Educational level of parent (Father)	0.088	0.882	NS	Child's birth order	0.052	0.962	NS
Educational level of parent (Mother)	0.225	0.017	S	Starting toilet training or not	0.021	0.749	NS
Occupational status (Father)	0.063	0.825	NS	Age of starting toilet training	0.110	0.639	NS
Occupational status (Mother)	0.046	0.785	NS	Sources of Information	0.171	0.079	NS
Socio-Economic Status	0.110	0.255	NS				

(*) S : Sig. at $P < 0.05$; Testing are based on a Contingency Coefficient test.

This table shows that weak relationships are accounted, since no significant level has been recorded at $P > 0.05$ among parent's (SDCv.) and studied mothers' practices, except between "Marital status" and mothers practices, and between "Educational level of parent (Mother)" and mothers practices, since significant levels were accounted at $P < 0.05$. No significant level has been at $P > 0.05$ among child's (SDCv.) and studied mothers' practices. Weak relationships are accounted between mother's practices and source of information about toilet training, since no significant level was recorded at $P > 0.05$.

Discussion

The responses of mothers regarding the practices of toilet training are accounted as moderate level border to high evaluation level. The practices of toilet training may be innate for mothers, but it may be affected by a set of factors, including the source and accuracy of the information that the mother gets, the mood of the mother and her way of rearing her children. So, it normally that they have moderate level of practice domain but border to high because it is the natural job of mother to care her child.

The present study findings are consistent with a study that has involved (100) mothers of toddlers that shows that (41%) of mothers had average practice regarding toilet training ⁽⁸⁾. Also consistent with a study reveals that nearly three quarters of the mothers (76%) were average in their practice ⁽⁹⁾ and another study that indicates that the mean of practices of toilet training is (53.4%), with mean of score (9.54) ⁽¹⁰⁾.

The study finds that there are weak relationships that are accounted for no significant level that has been recorded at $P>0.05$ among parent's and studied mothers' practices, except between marital status and mothers' practices, and between Mothers' education and their practices. No significant level has been reported at $P>0.05$ among child's characteristics and studied mothers' practices. Weak relationships are accounted between

mother's practices and source of information about toilet training, A mother who lives with her children "married" has a high practice regarding training her child to use the toilet, due to previous experience and the extent of her skill at training may be affected by her education level. This finding is consistent with a study that reports that there is a significance association between mothers' practice and study variable of education ⁽⁸⁾. The study finding is also consistent with a study that reveals that there is no significant association between mother's level of knowledge and practices and study variables of age, occupation, and family type ⁽¹⁰⁾. This finding is consistent with a study which is conducted in selected tertiary care hospitals, Bangalore that shows that there is no significance association between mother's practice with a study variables of age, gender, number of children, starting toilet training or not, age of starting toilet training ⁽¹¹⁾. Another study results are inconsistent with the present study findings in which there is a significant association between Practices domain and the source of information on toilet training ⁽⁸⁾.

Recommendations

1. Extensive health education program should be applied to enhance and develop early childhood's mother practice regarding toilet training; it can be delivered through mass media,

posters, booklets, and primary health care centers staff.

- An experimental study could be conducted to find out the effect of implemented education program for mothers on toilet training.

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