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## RESEARCH ARTICLE

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## The Effect of Potty Chair Training on Family Empowerment in Toilet Training for Toddler in Early Childhood Education

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### ABSTRACT

**Background:** According to Wong (2013), in 5 million children in the United States the prevalence of enuresis in children aged 5 years is 7% for men and 3% for girls, in children aged 10 years the prevalence is 3% for boys and 2% for girls, in children aged 18 years the prevalence is 1% for boys and is very rare for girls. The role of nurses as educators is to assist clients in increasing the level of health knowledge, symptoms of illness and even actions given, so that behavior changes occur from clients after health education is done. One effort that can be done as a function of nurses is to educate children how to deal with enuresis by providing toilet training. Based on a preliminary study conducted, the data showed that the number of toddlers (1-3 years) in early childhood education in Yogyakarta was 100 people consisting of 55 men and 45 women. . From the results of observations and information from Early Childhood Education teachers obtained data from 100 toddlers aged 1-3 years, there were 90 toddlers aged 1-3 years (90%) who were in Early Childhood Education were still using posters. **Purpose:** The influence of potty chair training on family empowerment in toilet training toddler (1-3 years) in early childhood education. **Methods:** Type of research quasi experiment with pre test post test with control group design. This design had a comparison group (control), observations were made twice. The first observation was to find out family empowerment in toilet training for toddlers (1-3 years) in early childhood education before being given training using a potty chair and a second observation after being given training using a potty chair. Sampling was done by purposive sampling with the criteria of mothers who have toddlers (1-3 years) in early childhood education. Data from the examination results were analyzed analytically using the t-test and Wilcoxon test. **Results:** Family empowerment in toilet training for toddlers in the experimental group or pre-test and post-test treatment with  $p = 0,00$  and in the control group with  $p = 0,00$ . **Conclusion:** There is an effect of potty chair training on family empowerment in toilet toddler training (1-3 years) Early Childhood Education.

**Keywords:** potty chair training; family empowerment; toilet training; early childhood education

### INTRODUCTION

#### Background

Children experience growth and development from birth to adulthood. In toddlerhood, the growth and development of children occurs very quickly. Times like this are basic and will not be repeated in the next life. The attention given to toddlers will greatly determine the quality of human life in the future. Humans develop from one period of development to another, they experience different changes in behavior resulting from the problems or tasks that are required and arise in each period of development that is different as well. One of the

developmental tasks is to form independence, discipline, and emotional sensitivity in children. To achieve these developmental tasks, one of them can be done through toilet training from an early age. <sup>(1)</sup>

Knowledge of toilet training is very important for a mother to have. This will affect the application of toilet training in children. Mothers who have a good level of knowledge have a good understanding of the benefits and impacts of toilet training. Knowledge of parents, especially mothers, plays a very important role in children's behavior and forms optimal growth and development, because the attention and observation of children cannot be separated from the attitudes and behavior of parents. Mothers can act as trainers for children in defecating or urinating in a clean and regular manner, setting the right example for children, giving motivation and praise to children, giving gifts if the child's behavior is good and not yelling when an accident occurs, teach words for the action. <sup>(2)</sup>

According to research by the American Psychiatric Association, 10-20% of children aged 5 years, 5% of children aged 10 years, almost 2% of children aged 12-14 years, and 1% of children aged 18 years still wet the bed (nocturnal enuresis), boy who wet the bed more than girls. It is estimated that the number of children under five in Indonesia reaches 30% of the 250 million population of Indonesia, and according to the National Household Health Survey (SKRT), it is estimated that the number of children under five who have difficulty controlling bowel and bladder (wetting the bed) at preschool age reaches 75 million children. This phenomenon is triggered by many things, the mother's lack of knowledge about how to practice defecation and urination, the use of disposable diapers, the presence of new siblings and many others. <sup>(2)</sup>

According to Wong's <sup>(3)</sup> in 5 million children in the United States the prevalence of enuresis in children aged 5 years is 7% for boys and 3% for girls, in children aged 10 years the prevalence is 3% for boys and 2% for girls, at the age of 18 years the prevalence is 1% for boys and very rarely for girls. In the majority of cases, enuresis in children can indeed heal by itself when the child is 10-15 years old. In addition, if an 8-year-old child who is still frequently experiencing enuresis is not treated, it only has a 50% chance of recovering at the age of 12.

Continuous use of presses in children will result in the child not being able to recognize the urge to urinate and defecate, so that the child will wet the bed or urinate in the pants (functional enuresis) and defecate in the pants (functional enuresis), so that children aged 3 years who should be able to recognize the urge to urinate and defecate, are physically, mentally and psychosocially ready for toilet training but children are not yet able and most (75%) do not understand the importance of training children in toilet training. This habit makes mothers perceive this as a normal thing and this habit can cause problems for children in the next phase. In the anal phase, one of the important problems that occurs is urination and defecation (toilet training).

The success of toilet training depends on the readiness that exists in the child and family, such as physical readiness, where the child's ability is physically strong and capable. This can be shown by the child being able to sit and stand making it easier for the child to be trained to defecate and urinate. If the child understands the meaning of defecation and urination, it greatly facilitates the process in controlling the child, and can know when it is time to urinate and when it is time to defecate, this readiness will make the child always have independence in controlling especially urination and defecation. The implementation of toilet training can be started early to train the response to the ability to urinate and defecate. <sup>(1)</sup>

Mothers play an important role in toilet training, therefore mothers are required to have knowledge about child growth, one of which is teaching children to defecate and urinate. This can be started by giving instructions to the child with the words before and after urinating and defecating. Another way is that mothers can provide examples of defecation and urination in children correctly. The risk of this method if the example given is wrong so that it will be shown when the child also has the wrong habit. When parents are relaxed in giving rules in toilet training, children will be able to experience an expressive personality where children are more willing, tend to be careless, like to make fuss, emotional and arbitrarily in carrying out daily activities. <sup>(1)</sup>

Based on the preliminary study that has been carried out, data shows that the number of toddlers (1-3 years) in early childhood education in Yogyakarta Indonesia is 100 people consisting of 55 men and 45 women. From the results of observations and information from teachers, data was obtained from 100 toddlers aged 1-3 years, there were 90 toddlers aged 1-3 years (90%) in early childhood education still using pampers and still incontinent, unable to do toilet training and most mothers who have toddlers (1-3 years) do not know about toilet training and are not ready to train toilet training for toddlers.

Based on the description above, it is necessary to conduct research on "The effect of potty chair training on family empowerment in toilet training for toddlers (1 - 3 years) in Early Childhood Education".

## METHODS

This type of research was a quasi-experimental study with a pretest-posttest with control group design. The research design can be described as follows:

Pre test	Intervention	Post Test
O <sub>1</sub>	X <sub>1</sub>	O <sub>2</sub>
O <sub>3</sub>	X <sub>2</sub>	O <sub>4</sub>

- X1 : Treatment with potty chair training in the treatment group with a pocket book  
 X2 : Giving Leaflets to the control group  
 O1 : Family empowerment in toilet training for toddlers (1-3 years) in Early Childhood Education before being given potty chair training in the treatment group  
 O2 : Family empowerment in toilet training for toddlers (1-3 years) in Early Childhood Education after being given potty chair training in the treatment group  
 O3 : Family empowerment in toilet training for toddlers (1-3 years) in Early Childhood Education before being given leaflets to the control group  
 O4 : Family empowerment in toilet training for toddlers (1-3 years) in Early Childhood Education after being given leaflets to the control group

The study was conducted in 4 Early Childhood Education in Gamping Sleman Yogyakarta Cahaya Pelangi Banyumeneng, Anggrek Sukunan, Mutiara Hati Somodaran, Sehat Ceria Turusan), from July to September 2018 (intervention duration is 3 months).

The population was all mothers who care for toddlers (1-3 years) in Early Childhood Education in Yogyakarta as many as 100 toddlers. The sample were some mothers who took care of toddlers (1-3 years) Early Childhood Education Cahaya Pelangi Banyumeneng (31 toddlers), Anggrek Sukunan (19 toddlers), Mutiara Hati Somodaran (30 toddlers) and Sehat Ceria Turusan (20 toddlers), taken by random sampling technique with criteria for mothers who care for toddlers (1-3 years) in Early Childhood Education. The respondents were two groups of mothers with toddlers aged 1-3 years in Early Childhood Education Yogyakarta, as many as 37 in each intervention group and control group. Determine the group that was given potty chair training (treatment group) and leaflets about potty chair (control group) in Early Childhood Education Cahaya Pelangi Banyumeneng, Anggrek Sukunan, Mutiara Hati Somodaran, Sehat Ceria Turusan). Determine the treatment group as many as 37 mothers who care for toddlers then a pre-test (O1) was carried out using questionnaires and observation sheets. Determining the control group (leaflets) as many as 37 mothers care for toddlers then do a pre-test (O3) using questionnaires and observation sheets. The intervention or treatment of potty chair training (X1) in the treatment group was 12 times, followed by the provision of leaflets (X2) in the control group. Conducting a post test (O2) in the treatment group after 12 times for 3 months was given potty chair training using a questionnaire and observation sheet. Conducted a post test (O4) in the control group after being given a potty chair leaflet using a questionnaire and an observation sheet. Comparing family empowerment in toilet training for toddlers (1-3 years) before and after being given training using a potty chair in the treatment group and the control group. Performing data analysis begins with normality test using Shapiro-Wilk in the treatment and control groups between pre-test and post-test.

The data from the examination were analyzed descriptively and analytically. Starting with the normality test using Shapiro-Wilk in the treatment and control groups between pre-test and post-test. The difference between treatment and control group were analyzed using paired sample t-test, Wilcoxon test, and Mann-Whitney U test.

## RESULT

There were 74 respondents divided into 37 respondents in the treatment (experimental) group and 37 respondents in the control group.

Table 1. The location of the study and the number of respondents in Early Childhood Education

NO	Location Research	Group			
		Experiment		Control	
		Frequency	Percentage	Frequency	Percentage
1	Anggrek	19	51.35	0	0
2	Cahaya Pelangi	18	48.65	0	0
3	Mutiara Hati	0	0	19	51.35
4	Sehat Ceria 2	0	0	18	48.65

Table 2. Characteristics of children by age and gender

Characteristics of respondents	Group			
	Experiment		Control	
	Frequency	Percentage	Frequency	Percentage
Age				
a. 1 year	10	27.0	9	24.3
b. 2 year	15	40.5	17	45.9
c. 3 year	12	32.5	11	29.8
Gender				
a. Male	17	45.9	20	54.1
b. Female	20	54.1	17	45.9

Table 3. Characteristics of mothers based on age, education and occupation

Characteristics of respondents	Group			
	Experiment		Control	
	Frequency	Percentage	Frequency	Percentage
Age				
a. 20-30 year	23	62.2	20	54.1
b. 31-40 year	10	27.0	15	40.5
c. $\geq 41$ year	4	10.8	2	5.4
Education				
a. Primary school	4	10.8	3	8.1
b. Junior high school	10	27.0	12	32.4
c. Senior high school	21	56.8	20	54.1
d. College	2	5.4	2	5.4
Profession				
a. Government employees	3	8.1	2	5.4
b. Private	14	37.8	17	46.0
c. Housewife	20	54.1	18	48.6

Table 4. Mother's knowledge about toilet training for toddlers in treatment group

Knowledge about toilet training	Treatment			
	Pre test		Post test	
	Frequency	Percentage	Frequency	Percentage
Good	1	2.7	20	54.1
Enough	16	43.2	16	43.2
Not enough	20	54.1	1	2.7

Table 5. Mother's knowledge about toilet training for toddlers in the control group

Knowledge about toilet training	Control			
	Pre test		Post test	
	Frequency	Percentage	Frequency	Percentage
Good	0	0	0	0
Enough	9	24.3	14	37.8
Not enough	28	75.7	23	62.2

Table 6. Implementation of the potty chair for toddlers in the treatment group

Category	Treatment			
	Pre test		Post test	
	Frequency	Percentage	Frequency	Percentage
Good	4	10.8	17	45.9
Enough	13	35.1	20	54.1
Not Enough	20	54.1	0	0

Table 7. Implementation of the potty chair for toddlers in the control group

Category	Control			
	Pre test		Post test	
	Frequency	Percentage	Frequency	Percentage
Good	0	0	3	8.1
Enough	14	37.8	28	75.7
Not Enough	23	62.2	6	16.2

Table 8. Test the normality of the experimental group pre test and post test

Variable	Group	p
Knowledge about toilet training	Experiment	Pre test
		0.080
	Control	Post test
		0.001
Implementation Potty Chair in toilet training	Experiment	Pre test
		0.001
	Control	Post test
		0.000

Table 9. The results of the difference test

Variable	Group	p
Knowledge about toilet training	Experiment	Pre test
		0.000
	Control	Post test
		0.000
Implementation Potty Chair in toilet training	Experiment	Pre test
		0.000
	Control	Post test
		0.000

Table 10. The test results of difference test between treatment and control group

Variable	Group	p
Knowledge about toilet training	Experimental	0,000
	Control	
Implementation Potty Chair in toilet training	Experimental	0,000
	Control	

## DISCUSSION

The success of children in toilet training is a factor that influences the success of the toilet training program, including the motivation of parents, the readiness of children physically, psychologically and intellectually. <sup>(1)</sup> Children are ready to be trained in toilet training at the age of 18 months, both physiologically and psychologically. Training a child to go to the toilet does not only pay attention to the readiness of the child, but also the readiness of parents, one of which is emotional and knowledge readiness. Parents must have experience and knowledge in toilet training. <sup>(4)</sup>

Education affects the learning process, the higher the education, the easier it is for the person to receive information. The education that a person undergoes has an influence on increasing thinking skills, in other words, someone with higher education will be able to make more rational decisions, generally open to accepting changes or new things compared to individuals with lower education

Family empowerment (knowledge) in toilet training in toddlers on average experienced an increase in the treatment group after being given potty chair training because it was influenced by fast grasping power where researchers provided interventions according to the needs of respondents. When given the potty chair training using a pocket book, the mother listened and observed carefully when the material was given, so that the material was well received and understood by the respondents. In addition, the majority of the mother's last education was

high school so that the material provided was faster and easier to understand with pocket book media that supported the training, pocket book media equipped with interesting pictures so that respondents could more easily understand and apply at home in training their children to toilet. Meanwhile, most of the respondents experienced an increase in family empowerment (knowledge) in toilet training during the post test. In the results of post-test research in the experimental group, there were no respondents in the less category.

The results shows the characteristics of the first respondent, namely the age of the respondent. The age factor is closely related to readiness to become a parent, the younger and older the age of becoming a parent, it is feared that they cannot carry out their role optimally because physical and psychosocial strength is needed. Therefore, the age of parents greatly affects the optimality in carrying out their roles. While the second is about the respondent's last education. According to Kholifah <sup>(4)</sup> that parental education is one of the important factors in growth and development, because the better the parental education, the better the parents in receiving information from outside about good parenting, especially in providing stimulation, maintaining children's health, education and so. Therefore, the level of education of parents affects the mindset and orientation of children's education. So that the higher the education, it is hoped that the better in providing stimulation to their children and is expected to be able to complete the mindset in educating children

The readiness of parents to teach children in toilet training and parenting is also important <sup>(2)</sup>. Seeing the many factors that influence the success of toilet training, if children are not taught toilet training from an early age, it will be difficult to change patterns that have become behavior and children cannot immediately become independent. According to Soetjiningsih <sup>(5)</sup> toilet training can be done by all family members, but mother's stimulation is very influential on the growth and development of children.

According to Notoatmodjo <sup>(6)</sup>, after the information stimulus, behavior changes occur because of awareness within the individual. The stages of change start from self-awareness and then a certain attitude emerges. After forming an attitude about toilet training, it is realized from awareness and attitude is a behavior that can be seen by humans. The increase in respondent's behavior was due to the information conveyed regarding toilet training by the researcher

According to Hidayat <sup>(1)</sup> there are 2 ways to train children, namely verbally and modeling or demonstration, verbal technique is an effort to train toilet training by delivering words directly to mothers, while training to use a potty chair by giving examples is included in the technique category. modeling or demonstration. According to Warner <sup>(7)</sup>, education is obtained from learning both formally and informally, with the learning process with potty chair training delivered to respondents, it is expected to increase knowledge and good information so that they can carry out health care and can influence changes in family empowerment in toilet training, in toddlers is increasing.

Namely according to Wong <sup>(3)</sup>, the developmental tasks of children at the age of toddlers include self-differentiation from others, controlling body functions, communicating verbally and interacting with others. The second characteristic of the child respondents is the gender of the child. According to The American Academy of Pediatrics <sup>(8)</sup>, girls are more responsive to urination exercises.

The more information the respondent has, the better his knowledge will be, but if the sources of information are limited then his knowledge is also limited in this case family empowerment in toilet training. According to Notoatmodjo <sup>(9)</sup>, one of the factors that influence a person's level of knowledge is information, the more information a person has, the better his knowledge will be and the less information he has, the less knowledge he will have.

High knowledge can influence attitude and behavior change. Mothers must have proper and correct knowledge about toilet training, so that mothers can prepare and provide toilet training to their children properly. Failure in toilet training can affect a child's development at a later age. Someone with secondary education already has sufficient basic knowledge so that he is able to absorb and understand knowledge compared to basic education. Knowledge of toilet training is very important for a mother to have. This will affect the application of toilet training in children. Mothers who have a good level of knowledge have a good understanding of the benefits and impacts of toilet training.

Toilet training for toddlers depends on the child's physical readiness, the child's mental readiness, the child's psychological readiness and the readiness of parents, especially mothers, in training to use toilet training for toddlers. Giving leaflets to mothers can contribute to toilet training for toddlers. According to Soetjiningsih <sup>(10)</sup> exercises can be done by all family members, but the exercises carried out by mothers greatly affect the growth and development of children. One of the factors that influence knowledge is age. The more mature age will affect the level of knowledge possessed and how to get that information. The younger (productive) age will be easier to accept knowledge than the adult (unproductive), because adults already have their own mindset that is difficult to change.

The success of children in toilet training is a factor that influences the success of the toilet training program, including the motivation of parents, the readiness of children physically, psychologically and intellectually <sup>(1)</sup>. Training a child to go to the toilet does not only pay attention to the readiness of the child, but also the readiness of parents, one of which is emotional and knowledge readiness. Parents must have experience and knowledge in

toilet training. Children often see and imitate the activities of those closest to them, including the parent's habit of going to the bathroom, but sometimes parents don't have time to teach toilet training to their children, as a result, children don't want to go to the bathroom

Mothers act as the main educators in the family, so mothers need to be equipped with knowledge and skills in parenting so that mothers can be positive in guiding children according to their growth and development, among others, in this case training toddlers (1-3 years) in toilet training using potty chairs. The level of parental education greatly influences the upbringing of children and the higher the level of parental education, the better in toilet training. In addition to knowledge, environment and interests are factors that affect a child's readiness to do toilet training. The environment is a factor that influences the formation and development of individual behavior.

A good and healthy environment really supports the success of toilet training, where children will be comfortable for toilet training if the bathroom or toilet used for toilet training is clean and the lighting inside is good, on the other hand, children will be lazy if the bathroom is for toilet training, unattractive and comfortable for him <sup>(11)</sup>.

There is a difference between pre-test and post-test. knowledge test and potty chair implementation in the experimental group and the control group. The increase in family empowerment in toilet training for toddlers after being given potty chair training is due to the fast catching power and according to the needs of the respondents. The intervention was carried out by researchers using pocket books about toilet training and leaflets so that they could be accepted and understood by respondents. In addition, most of the targets in this study have a high school education background, where at this level of education the ability of participants to accept the explanations given by the researcher is a little easier to understand so it doesn't take too long to master the material given. The method used is the lecture and demonstration method because with this method respondents can ask questions or exchange ideas if there is a lack of understanding of the material presented. According to Freud <sup>(12)</sup>, the higher a person's level of knowledge, the person will position himself and carry out his duties as a parent in educating his child well.

These results are in accordance with Musfiroh <sup>(13)</sup> which states that counseling and training actions can provide mothers with additional information, knowledge and influence mothers to have a better attitude in providing toilet training to toddlers. Mother is also able to combine oral and modeling techniques and be cooperative. In addition, according to Musfiroh that the act of providing counseling and training to mothers provides additional information and knowledge that can influence mothers to behave well when providing toilet training to toddlers

That there is a difference in knowledge and implementation of potty chair in toilet training in the experimental group and the control group. One of the factors forming one's knowledge is the social environment, including the work environment. However, along with the development of information and communication technology, especially those based on the internet, it is easier for someone to obtain up to date information and knowledge sources anytime and anywhere without having to be limited by space and time, so even mothers who do not work can obtain information to increase knowledge. Knowledge is one of the drivers of a person to change behavior or adopt new behavior. Knowledge can be obtained through experience and learning processes both formal and informal education. Someone who is highly knowledgeable / adequate in health problems, is expected to be able to behave in a healthy life. This is in accordance with the theory.

Notoatmodjo <sup>(6)</sup> that before a person adopts a new behavior (behavior), one must first know what the meaning or benefits of the behavior are for the individual and his family. If the knowledge possessed by the individual is also followed by a sequence of behavior changes, the individual can apply healthy living behaviors, including training to use a potty chair in toilet training. Knowledge is a predisposing factor for the formation of behavior, with knowledge it will raise awareness and eventually will cause people to behave in accordance with the knowledge they have. Knowledge obtained well will form good behavior as well.

According to Notoatmodjo <sup>(6)</sup>, knowledge is an important factor for the formation of a person's behavior, because from experience and research it is proven that behavior based on knowledge will be more lasting than behavior that is not based on knowledge. The impact of parents not applying toilet training properly to their children is that the child will become stubborn and difficult to manage. In addition, children are not independent and carry the habit of bedwetting until they grow up. The social and psychological impact caused by bed-wetting habits can interfere with a child's life. Parents should always guide or teach toilet training as early as possible, for example, children are always trained to defecate before going to bed, so that children who are trained will not wet the bed every night <sup>(1)</sup>. There are several factors that can affect the failure of toilet training, including: lack of knowledge of the mother, as well as from an economic perspective that is less supportive, the tension between the mother and child in the readiness of the child itself is lacking. <sup>(1)</sup>

## CONCLUSION

There is difference in potty chair training on family empowerment in toilet training for toddlers between treatment and the control group and there is an effect of potty chair training on family empowerment in toilet training for toddlers (1-3 years) in early childhood education.

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