

TOILET TRAINING IN DAY-CARE CENTRES: WHAT IS THEIR ROLE AND HOW IS IT DONE.

Hypothesis / aims of study

Surprisingly little research has focused on toilet training (TT) in day-care, despite its social role and potential importance in the TT process. This study is the first to evaluate the way TT is taken care of in day-care centres in Flanders, Belgium.

Study design, materials and methods

Using an electronic questionnaire, we studied different aspects of TT in day-care. The questionnaire was sent to 1500 Flemish day-care centres, of which 429 replied with a filled-in questionnaire (response rate of 28,6%). The data were entered in and analysed with SPSS.

Results

1. *Start and method of TT.* 50,8% of the childcare workers base the decision to start TT on readiness signs. 4,7% of the respondents use age as only criterion. The combination of age and readiness signs is used by 44,5% of the respondents. Table1 presents the readiness signs used to decide on starting TT and Table2 shows the used TT methods. 81,8% of the respondents spend more than one hour per day on TT the children under their care.

2. *The relation between day-care and parents related to TT.* Most respondents (79,8%) are of opinion that day-care and parents should play an equal role in TT. Most of the time day-care and parents decide together when to start TT (76,7%) and which TT methods will be used (68,1%). Moreover, 84,3% did not agree that TT is an activity that belongs only at home. Yet, 33,5% of the respondents are of opinion that parents pass the responsibility of TT their children on to the day-care staff. 33,4% of the childcare workers state that there is not enough attention for the TT process in the family. 90,7% of the respondents highlighted that they always emphasize to the parents that the TT has to be continued at home.

3. *Problems with TT.* The majority of the respondents state that no other tasks or activities are hampered by problems concerning TT (81,3%). Furthermore, 73,9% of the respondents say that no conflicts arise between themselves and the parents as a consequence of TT. 74,2% of the respondents state that the parents never refuse that their child starts with the TT. On the contrary, 60,4% of the caretakers already experienced pressure from the parents to get the children toilet trained faster than the normal pace of the children. 92,2% of these caretakers state that this pressure is negative for the TT process and 79,4% does not comply with these demands.

4. *Facilities, means and hygiene.* 88,5% of the childcare workers state that the day-care centre provides enough facilities and means to be able to give the children a proper TT. 91,6% of the childcare workers are satisfied with the hygiene in the day-care centre and find that no additional measures are necessary to improve the hygiene.

Interpretation of results

Our results show that the majority of the respondents agree on the importance of waiting for readiness signs before starting the TT, which is in line with the current recommendations. Besides that, 80% of the respondents spend more than one hour per day on TT, of which 67,6% spends between one and three hours on TT per day. A possible explanation can be that 94,6% puts the children on regular times on the potty, which is a time consuming method. Moreover, the childcare providers often have many children to look after. When looking at the other used TT methods, we see that only 0,5% uses punishment and only 1% lets the child push. These are positive findings.

According to the childcare workers, there is a good cooperation and communication between them and the parents and efforts are made to provide the child with a consistent TT.

Opinions are divided concerning the feeling that the parents pass on their responsibility to toilet train their child to the day-care personnel and related to the attention for TT in the family. These findings indicate that there could be a changed attitude of the parents regarding TT, that they rely more on day-care to get their child toilet trained. Previous research showed already that parents' attitude towards TT has changed, contributing to a postponement of the TT. Further study of this (changed) attitude and the influence on how TT is taken care of in day-care and on the TT of the child is being done.

Concluding message

We can conclude that the results, in general, reflect a positive image of how TT is taken care of in day-care centres in Flanders. This is a good signal, given the increased number of children attending day-care and seen the importance of TT for the acceptance of the child in society and for the development of self-esteem, confidence and autonomy. Given the current problems concerning TT, like the postponing of the TT age and its negative consequences, and the uncertainty and stress faced by parents, further research on this topic is needed.

Table1. Which readiness signs are used to decide when to start the toilet training? (*)

Readiness sign	N=370	
	n	%
The child is motivated and shows interest in toilet training	290	78,4%
The child can express the need to evacuate (by words, mimicry and/or gestures)	269	72,7%
The child indicates by himself/herself that he/she has a wet / dirty pants	264	71,4%
The child is capable of staying dry for 2 hours (Sign of bladder control)	240	64,9%
The child controls bladder, sphincter and bowel movements	223	60,3%
The child can express when it has evacuated (by words and/or gestures)	194	52,4%

The child understands and uses potty related words	167	45,1%
The child is able to walk and sit	128	34,6%
The child realizes that the urge to go potty has priority to all other activities	120	32,4%
The child is dry after the midday nap	118	31,9%
The child asks to wear normal underpants	118	31,9%
The child understands and can respond to simple commands	99	26,8%
The child is able to pull clothes up and down	53	14,3%
The child can say no as sign of independence	50	13,5%
The child likes to imitate behavior and actions of parents or caregivers	43	11,6%
The child can imitate behavior and actions of parents or caregivers	28	7,6%
The child has the desire to please parents or caregivers	28	7,6%
The child begins to put things where they belong	15	4,1%
The child can independently open and close doors, wipe himself/herself, flush the toilet and was hand dry his/her hands	14	3,8%

(*) More than one answer could be indicated

Table2. Which methods do the childcare workers use to potty train the children? (*)

Toilet training method	N=407	
	n	%
Put the child on the potty on regular time points	385	94,6%
Reward the children when they cooperate well with the TT	322-383	79,1-94,1%
Remove the diaper during the day or during parts of the day	305-366	74,9-89,9%
Regularly ask the children whether they have to go to the potty	286	70,3%
Read books to the children on the use of the toilet and the TT process	238	58,5%
The applied method differs from child to child	142	34,9%
Give a demonstration (show how the children should use the toilet)	67	16,5%
Give many drinks to the child	12	2,9%
Letting the child press	4	1%
Punish the child	2	0,5%

(*) More than one answer could be given

<i>Specify source of funding or grant</i>	This study was funded by urological funds from the University of Antwerp.
<i>Is this a clinical trial?</i>	No
<i>What were the subjects in the study?</i>	HUMAN
<i>Was this study approved by an ethics committee?</i>	No
<i>This study did not require ethics committee approval because</i>	The study used an electronic questionnaire to study different aspects of toilet training in day-care. The day-care staff filled in the questionnaires. No intervention was done.
<i>Was the Declaration of Helsinki followed?</i>	Yes
<i>Was informed consent obtained from the patients?</i>	No