



# Vietnamese mothers' experiences with potty training procedure for children from birth to 2 years of age



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#### **KEYWORDS**

Potty training; Children; Development; Signs; Communication; Content analysis **Abstract** Objective: This study addresses mothers' experiences with potty training in a Vietnamese population.

Subjects and methods: Forty-seven mothers were interviewed and followed from the time that their children were newborns until they were 24-months old. The interviews were analyzed using qualitative content analysis.

Results: According to tradition, diapers were used only rarely. The mothers used a whistling sound at certain times to remind their children to eliminate and frequently checked for signs of need. With this process, all children used the potty by the age of 9 months. At the age of 24 months the potty training was completed, and most of the children managed the whole process independent of help.

Conclusion: This study shows that it is possible to start potty training with good outcomes very early in life. The process described can be achieved through an ongoing communication between parent and child.

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#### Introduction

The potty training advice given to parents is controversial, and a child-led approach to potty training has been favored in Western countries over the last several decades. However, few if any studies have evaluated the risks and benefits of this approach. Because of the availability of high-quality diapers, lifestyle needs or for the avoidance of toileting accidents, clinicians generally do not advocate early potty training. Avoiding urine and stools in the clothing or surroundings is important in all settings, and most families use diapers until potty training can take place. Nevertheless, many factors influence when this procedure starts, such as traditions, culture and expectations from parents and the surrounding community [1-5]. Diaper use habits and socioeconomic factors may also affect the decision about when to begin potty training [6]. Furthermore, children's ability to avoid wetting clothes and bedding depends on their maturity.

In a Swedish study describing parents' experiences with helping their children achieve bladder control, parents reported that they decided to start the procedure when the right time had come. This often meant starting potty training when they had the time to help their child, e.g., during summer vacation. Parents checked with daycare providers to determine what would be expected of their child in this setting and compared experiences, wanting their child to be like his or her peers [3]. Nevertheless, accidents are stressful for both the child and the parents and can affect the child's self-esteem [7–15].

Previous studies have shown that physiological conditions change when bladder control is achieved. Voided volumes increase, the interrupted voiding often seen in early infancy disappears, and the bladder empties completely [16]. A study of Vietnamese children found that they started potty training during infancy and were able to empty their bladders completely at the age of 9 months [17]. This finding may have implications regarding children's health; residual urine is a known risk factor for urinary tract infections [18]. Children in Western countries usually start potty training later today than they did in the past, and families may wait until around the age of 3 years to begin the process [16,19–23].

Different potty training methods have been published [24–26], and there is a lot of advice available on how to encourage children to use the toilet. However, health care professionals need updated knowledge about different potty training methods and their benefits and drawbacks in order to guide parents in the process. In many developing countries, tradition dictates that potty training occurs early [1,17]. The aim of this study was to describe mothers' experiences with the potty training process in a population that usually potty trains early, and how children communicate their needs.

#### Subjects and methods

Children included in the project were consecutively selected by asking all parents coming to the hospital for health check-ups. The inclusion criterion was that the children had to be healthy, meaning no history of urinary

tract infection and no malformation of the urinary tract that could affect urinary tract function. After informed consent was obtained, each mother was interviewed seven times: at newborn age, 3, 6, 9, 12, 18 months and 2 years. All interviews were performed at the hospital.

Qualitative interviews were conducted. The goal was to conduct interviews in an open and narrative manner, similar to a conversation. The interviewee was encouraged to speak freely without interruption [27]. The interviews started with single open questions: "Can you tell me how you manage your child's pee and poo? How does your child manage that?" Supportive questions included "Tell me more about this; can you explain further?" Additional open questions were formulated and were used if the mother had trouble speaking freely, for example, "How do you know when it is time for your child to pee but also when the voiding is completed?" and "Does your child often wet the bed and clothes?" At the end of the interviews, informative questions were asked, such as "If using diapers, how and when?" and "How do you manage your child's need to pee overnight?" All interviews were conducted by the first author (THD).

All interviews were recorded using written notes during the interviews, except for the 2-year interviews, which were tape-recorded and transcribed verbatim.

#### **Analysis**

The interviews were compiled into a single text, arranged by age. A qualitative content analysis was conducted using a technique supported by Krippendorff [28]. Following the prescribed steps, the text was read and reread to get a sense of its entirety. Meaning units, according to the aim of the study, were extracted from the text and then condensed. The meaning units were sorted and coded. Preliminary subcategories were identified from the codes and were then clustered into categories corresponding to specific meanings. The text was independently analyzed by all authors to increase the credibility of the analysis. If agreement was not possible to achieve, a further analysis was performed until consensus was reached.

#### Significance

This is the first longitudinal study following the process of potty training in practice, and it may contribute knowledge about the development of bladder control. Findings from the study may serve as a guide for health care professionals and parents on how potty training can be achieved and when this may be beneficial, particularly in order to decrease the period of bladder—sphincter dyscoordination.

#### Ethical considerations

Participation was voluntary, informed consents were obtained and confidentiality was guaranteed. The ethics committee at the National Hospital of Pediatrics in Hanoi, Vietnam granted permission for the study.

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