



International Journal of Current Research Vol. 10, Issue, 01, pp.64547-64552, January, 2018

RESEARCH ARTICLE

THE EFFECT OF ACTIVITY-BASED SELF-CARE EDUCATION ON PRE-SCHOOL CHILDREN'S SELF-CARE SKILLS

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ARTICLE INFO

Article History:

Received 29th October, 2017 Received in revised form 06th November, 2017 Accepted 22nd December, 2017 Published online 31st January, 2018

Key words:

Activity, Pre-school period, Self care, Skill.

ABSTRACT

This research was conducted to analyze the effect of activity-based self-care education on pre-school children's self-care skills. It was conducted with 56 children aged 5 or 6 (27 of them in the experimental group, 27 of them in the control group) in the city of Malatya. The Self-care Skills Evaluation Form developed by the researchers was used to collect data. The evaluation form consists of two parts including one for personal information and one for children's self-care skills. An experiment was implemented using a pretest and posttest control group model. SPSS 22 software package was used to analyze the data. Data were analyzed using descriptive statistical methods. Since the data did not have a normal distribution, the Mann-Whitney U Test was used for the inter-group comparison of variables, and the Wilcoxon Signed Rank Test was used for in-group comparisons of variables. The research determined that there was a significant difference between the experimental and control groups' average pretest and posttest scores on self-care skills. This difference (p<0.05) was in favor of the experimental group.

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Citation: Emriye Hilal YAYAN, Serpil PEKDOĞAN and Ayşegül ULUTAŞ, 2017. "The effect of activity-based self-care education on pre-school children's self-care skills", *International Journal of Current Research*, 10, (11), 64547-64552.

INTRODUCTION

Child development refers to the growth and transformation of children throughout their lives. Understanding child development requires a holistic perspective. When the various aspects of children are considered independently, they will be perceived not exactly like a human, but as a creature consisting of a number of features. On the other hand, focusing on any area in children's development is useful to provide special assistance to them. As a matter of fact, when one views even only one aspect of child development, this means that human beings are being viewed (Meggitt, 2012). One of the most important aspects of child development is self-care skills. Selfcare skills are the skills that children use to meet their own basic needs (eating, dressing, personal care, toilet training, etc.) without adult support. They are all the skills that are necessary to maintain personal care and appearance independently at school or in other environments. The preschool period is critical for the development of self-care skills. Pre-school education has become even more important with the transition from the modern to the post-modern family. All the development areas of the child are supported in a planned way during this period (Unal 2013, Varol, 2005). It is possible to define self-care skills gained during the transition from infancy to childhood as skills of nutrition, cleanliness,

dressed. Eating is one of the most important self-care skills that a child needs to acquire because the foundations of lifelong eating habits are laid during the pre-school period (Eugster, 2007). These basic habits have serious importance for individuals to take their positions in society. The acquisition of behaviors indicates that individuals can make use of these behaviors in daily life (Katz, 1999). The acquisition of eating habits is important for children's healthy growth and development. The attitudes and behaviors of families play a key role in ensuring that pre-school children acquire the right nutritional habits. Leaving the children free to choose their food, feeding children considering their growth and their hunger and avoiding insistence about food bear special importance for children to acquire healthy nutrition habits. In addition, discipline at the family dining table, which means eating meals together in a certain style, affects the children's eating habits and serves as a model for them (Holtmei, 1995). Another skill required by children for independent living is cleanliness. For parents, cleanliness is one of the most time and effort consuming skills to be taught to children (Yavuz, 2004). Experts agree that the most appropriate time to start training children for cleanliness is by age two. Putting pressure on children for cleanliness, or treating them insensitively may hamper children's self-care skills in cleanliness (Largo et al., 1996). Cleanliness education is one of the issues families should pay attention to in daily

protecting oneself against accidents or dangers and getting

life. Haarer (1961) notes that mothers should be patient, demonstrate consistent behavior and carry out cleaning activities (such as washing hands before and after meals, and brushing teeth when going to bed and waking up in the morning) regularly and at the same times to achieve success in hygiene education. These routines in daily life play an important role in children's acquisition of cleanliness. Another self-care skill acquired by children in their process of development is getting dressed. Children start trying to put on their clothes on their own at an early age. For children, it is more difficult to acquire the skill to get undressed than the skill to get dressed, and it takes a long time for this skill to be acquired (Varol, 2005). It becomes more difficult for children to gain experience for the dressing skill when parents do not allow their children to get dressed on their own due to limits of time and patience even though they do not do this with malicious intentions (Grass and Hovermann, 2013). It is therefore important that parents leave it up to their children to choose the clothing they will wear and patiently allocate enough time for the children to be able to get dressed on their own (Müller and Heinz, 2008). Children should be given the opportunity to try to learn as many times as they need so that they acquire the dressing skill (Pauer, 2011). Another self-care skill is safety and threat avoidance. Children want to practice and improve their skills and learn new things in all areas. It takes a while for children to develop a skill to recognize the possible dangers around themselves and to take precautions against them.

Therefore, in child education, it is very crucial to point out possible risks of accidents and sensitize children about accidents (Kindersicherheitstag, 2002). There are certain selfcare skills that children at the age of 5 or 6 need to practice without depending on adults. Among them are washing and drying their hands, getting dressed and undressed, tying shoe laces getting dressed in accordance with weather conditions, combing and brushing their hair appropriately, brushing their teeth, cutting soft food (meatballs, baked potatoes, etc.), getting food onto their plate from the serving dish, preparing sandwiches, taking responsibility for daily chores (such as helping to prepare meals), walking to school, to the grocery store, to a nearby playground and wearing safety belts (Darica, 2002). The relevant literature shows that studies of self-care skills have been carried out (Akşin and Tunçeli, 2015; Gerarts, 2015; Şahin and Dostoğlu, 2014; Aytekin, Arslan and Küçükoğlu, 2014; Yalçın, Başar and Çetinkaya, 2013; Holmes, 2005; Clark, 2010; Alderson, 2004; Oğuz and Önay Derin, 2013; Gibson et al., 2010; Demiriz and Dinçer, 2000; Zinnecker and Silbereisen, 1996). Analysis of these studies revealed that there are no studies about the effects of activitybased self-care education on the self-care skills of children of pre-school education at the age of 5 or 6. When the acquirements and indicators about self-care skills in the preschool education program implemented in Turkey (2013) are analyzed, it can be seen that children at the age of 5 or 6 do not have sufficient skills.

The limited number of studies conducted on this issue in our country causes difficulty in underlining the importance of the issue. In addition, this research is significant because it prepares an activity-based training program to develop self-care skills, develops criteria for future evaluations and makes contributions to the field. Therefore, the goal of this research is to investigate the effects of an activity-based self-care skills training program on the self-care skills of children at the age of 5 or 6.

MATERIALS AND MATHODS

This section includes information about the research model, the study groups, data collection tools, data collection and data analysis.

Research Model

The research used a pretest-posttest experimental design. The experimental and control were randomly assigned. For both groups, pretest and posttest dependent variables were measured (Karas, 2012). Among kinds of scientific researches, experimental research obtains the most accurate results and is expected to provide researchers with the most the definitive results (Büyüköztürk, 2011). This research's independent variable was activity-based self-care skills training, and its dependent variable was the self-care skills of pre-school children.

Study Group

To test the effects of activity-based self-care skills training, 54 children (27 in the experimental group and 27 in the control group) from two randomly assigned kindergartens in the city of Malatya were included in the study. To eradicate factors that would negatively affect the internal validity of the research, it was ensured that children with similar backgrounds and socioeconomic levels were selected. Errors that might appear during the random assignment of children into experimental and control groups were minimized. Demographic information about the children who participated in the research is shown in Table 1.

Table 1 shows that the mothers of 30.2% of the children (n=19) and fathers of 20.6% (n=13) had high-school diplomas. Of the children, 34.9% (n=22) had two siblings and 61.2% (n=33) had nuclear families. Of them, 61.2% (n=33) were female, and 38.8% (n=21) were male.

Data Collection Tools and Data Collection

The Self-care Skills Evaluation Form developed by researchers was used to gather information. It consists of two parts, including general information and children's self-care skills. The first part includes questions about the educational status of the parents, number of siblings, family type and gender. The second part includes 24 questions about preschool children's self-care skills. The evaluation form includes a pool of 39 items related to self-care skills formed after a review of the literature. The 2013 Pre-school Education Program and the opinions and expectations of teachers and parents were also taken into consideration. Content validity was assessed to determine whether the items on the form represented self-care skills. Content validity includes an evaluation based on expert opinion. Data about content validity serves as evidence for construct validity as well(Messick, 1995; Büyüköztürk, 2011). The content and construct validity of the items were presented to seven experts in pre-school education and child development. They were asked to evaluate the items on the form as suitable, partially suitable or suitable. The Lawshe technique, the most widely used technique, was used to determine the content validity ratio (CVR) and indexes of the survey form. Items with negative or zero CVR values are eliminated, which caused 15 items to be eliminated from the form.

Total Experimental Group Control Group (n=27) (n=54)(n=27)n (%) n (%) n (%) 10 (15.9) 7 (25.9) Mother's educational Literate 3 (11.1) status Primary School 11 (17.5) 4 (14.8) 7 (25.9) High School 19 (30.2) 9 (33.5) 10 (37.1) Two-year degree 5 (7.9) 2 (7.4) 3(11.1)9 (14.3) 4 (14.8) Bachelor's Degree 5 (18.5) Father's educational Literate 9 (14.3) 3(11.2)6 (22.2) Primary School 11 (17.5) 8 (29.6) 3 (11.1) 7 (25.9) High School 13 (20.6) 6(22.2)Two-year degree 8 (12.7) 4 (14.8) 4(14.8)Bachelor's Degree 13 (20.6) 5 (18.5) 8 (29.6) Number of siblings 20 (31.7) 13 (48.1) 7 (25.9) 2 22 (34.9) 14 (51.8) 8 (29.6) 3 or more 12 (19.0) 7 (25.9) 5 (18.5) Family type 33 (61.2) 20 (74.0) Nuclear Family 13 (48.1) Extended Family 17 (31.4) 6 (22.2) 11(40.7) 2 (7.4) 2 (7.4) Single-Parent Family 4 (7.4) Gender Female 33 (61.2) 12 (44.4) 21 (77.7) 21 (38.8) 10 (37.0) 11 (40.7)

Table 1. Distribution of the experimental and control groups by demographic characteristics

*p<0.05

For positive values, the significance of the CVR is tested (Şencan, 2005). To facilitate the calculation, the minimum values of CVR were converted into a table by Veneziano and Hooper (1997) with a threshold of p=0.05. The minimum value of content validity ratio for the seven experts was determined to be 0.99 (Yurdugül, 2005; Şencan, 2005). The Cronbach's alpha value of the survey was 0.76, and the Spearman-Brown two half-test correlation was 0.88. The evaluation form was administered to the children individually. Items were evaluated as yes and no. Each item was given one point, and items that were not evaluated were given no points.

The Development of the Activity-based Self-care Skills Training Program (ABSCSTP)

The activity-based self-care skills training program was prepared in several stages to improve pre-school children's self-care skills. The deficiencies in children's self-care skills were determined after studies conducted with parents and teachers, which generated the content of the training program. Appropriate methods and techniques determined and integrated into self-care skills activities. They included hygiene, nutrition, clothing, relaxation, order and security. Child-centered activities were arranged from simple to difficult, near to far and abstract to concrete. The 27 children in the experimental group were administered a training program of 16 sessions and 48 activities in 2 sessions per week for two months. Seven experts were asked for their opinions on the development of the program. The experts were asked to evaluate the usefulness of the activities, the effectiveness of the session content and the clarity and intelligibility of the instructions as suitable, partially suitable or unsuitable and to explain their opinions. The program was revised in accordance with expert opinion, materials were prepared, and the activity-based self-care skills training program was made ready for implementation. Learning acquisitions and indicators about children in the program were prepared on the basis of the Pre-School Education Program (MNE, 2013). In the first session of the training program, the children were greeted and the program was introduced.

Data Analysis

SPSS 22 software was used to analyze the data. The suitability of the data for distribution was analyzed using the Shapiro-

Wilk test. It was concluded after a normality test that the data did not have normal distribution, and the statistical methods to be used were determined. Nonparametric Mann-Whitney U and Wilcoxon Signed Rank Test were used to analyze the data. The threshold for significance was 0.05. Information on the content of the program is shown in Table 2.

Findings and Interpretation

In this section, findings about the effects of activity-based self-care skills training program on children's self-care skills are shown in tables and interpreted. Table 3 shows that the children scored an average of 12.85 on the Self-care Skills Evaluation Form before the activity-based self-care skills training program, and that this value increased to 15.59 afterwards. The Wilcoxon signed rank test indicated that this increase was significant (p <0.05). Thus, the 16 sessions of ABSCSTP had a positive effect on the children's self-care skills.

Table 4 shows that children in control group scored an average of 13.48 on the Self-care Skills Evaluation Form before activity-based self-care skills training Program. After the training program received by the children in the experimental group, the average score of children in the control group rose to 20.44. Although no training program was administered by the researcher to the control group, the Wilcoxon signed rank test indicated that this increase was statistically significant (p <0.05). Table 5 shows the results of the Mann-Whitney U test of whether there was a significant difference between the experimental and control groups' posttest scores on the Selfcare Skills Evaluation Form. Analyses indicate that the rank average of children's scores in the experimental group was significantly higher than the rank average of children's scores in the control group (p <0.05). The ABSCSTP thus had an effect on the dramatically high points of children in the experimental group. Table 6 shows the results of the Mann-Whitney U Test of whether there was a significant difference in the pretest and posttest scores of Self-care Skills Evaluation Form of the children in the experimental and control group. Analyses indicate that the rank average of differential points of children in the experimental group was significantly higher than the rank average of differential points of children in the control group (p < 0.05).

Table 2. Information about the content of the ABSCSTP

ABSCSTP Activities	1.Session	2. Session	3. Session	4. Session	5. Session	6. Session	7.Session	8.Session	9.Session	10.Session	11.Session	12.Session	13.Session	14.Session	15.Session	16.Session	f
Hygiene	-	-	1	-	1	-	1	-	1	1	1	1	-	-	1	-	8
Nutrition	1	1	-	-	1	-	1	-	-	1	1	1	-	1	-	-	8
Dressing	1	-	1	-	-	1	1	-	1	-	1	-	1	1	-	-	8
Relaxation	1	-	-	1	1	-	-	1	-	1	1	1	-	1	-	1	8
Order	-	1	-	1	-	1	-	-	1	-	-	-	1	-	1	1	8
Security	1	1	1	1	-	-	-	1	-	-	-	1	1	-	1	1	8

^{*}p<0.05

Table 3. Wilcoxon Signed Rank Test Results for the Pretest and Posttest Scores of Experimental Group Children on the Self-care Skills Evaluation Form

	n	Avg.	Min	Max	SS	Z	p
Pretest	27	12.85	4.0	22.0	4.84	-4.49	0.00*
Posttest	27	15.59	8.0	23.0	4.17		

^{*}p<0.05

Table 4. Wilcoxon Signed Rank Test Results for the Pretest and Posttest Scores of Control Group
Children on the Self-care Skills Evaluation Form

	n	Avg	Min	Max	SS	Z	p	
Pretest	27	13.48	5.0	23.0	4.74	-4.46	0.00*	
Posttest	27	20.44	15.0	24.0	2.51			

^{*}p<0.05

Table 5. Mann-Whitney U Test Results for the Posttest Scores of Experimental and Control Group Children on the Self-care Skills Evaluation Form

	n	Rank Average	Rank Total	U	p	
Experimental Group	27	36.57	987.5	119.5	0.00*	
Control Group	27	18.43	497.5			

^{*}p<0.05

Table 6. Mann-Whitney U Test Results of the Differences in the Pretest and Posttest Scores of Experimental and Control Group Children on the Self-care Skills Evaluation Form

	n	Rank Average	Rank Total	U	p	
Experimental Group	27	10.86	71.20	-2.071	0.00*	
Control Group	27	7.14	46.18			

^{*}p<0.05

This result obtained can be explained by the significant increase in the children's self-care skills thanks to the ABSCSTP.

DISCUSSION

Children develop physically, mentally, psychologically and socially. However, children first need to be able to meet their basic needs, which means they need to acquire some self-care skills so that they can be successful in these realms of development. There are certain basic habits that need to be acquired by children in the pre-school period. These are the habits and skills of relaxation, eating, dressing-undressing, personal care (toilet training, cleaning, dental care, hair care, nail care, etc.). These habits, which are important for children's lives, create the foundation on which children can acquire new types of behavior with development (Oktay, 2004). Since selfcare skills are so highly important, they were, integrated with different types of activities in this study, and the effect of selfcare skills training program on 5 or 6 year-old children's selfcare skills was analyzed with an experimental research design. As a result of the program, the children in the experimental group improved their self-care skills more than the children in the control group. Children who are given systematic training by continuing pre-school education learn self-care skills by repeating these behaviors (Demiriz and Dincer, 2001). In this study, children routinely performed activities that would contribute to the development of their self-care skills, and this influenced their skills in a positive way.

In order to grow to adulthood, pre-school children need to be able to meet their basic needs. Children who receive pre-school education can easily learn to do so. A positive contribution can be made to the overall physical health of children by self-care skills training during pre-school. These skills will help children to meet their basic needs. Children who acquire self-care skills also acquire independence. Since these skills facilitate children's making decisions on their own, they also contribute to development of their personalities (Leader, 2003). Confident individuals who can make their own decisions have the attributes of modern individuals. In this respect, it is very important for children to acquire self-care skills during preschool. In similar studies, Demiriz and Dincer (2001) and Konya (2007) concluded that children who attended pre-school education and received self-care skills training often had better skills than children who did not. Kingston (1995) did an experimental study of the self-care skills of toilet training and cleanliness. Geiger, Artz et al. (2000) investigated the relation between infectious diseases and hand washing. Both studies obtained positive results. These findings also support this study.

As noted above, the literature contains a limited number of studies about the improvement of children's self-care skills. There are more studies about the improvement of the self-care skills among disadvantaged individuals. Kırşehirli (2011), Çakmak (2011), Brown (2012), Shenai and Wadia and many researchers have conducted research on the development of self-care skills by individuals with special needs. However, studies concerning the development of self-care skills during pre-school need to be further developed and expanded. Preschool educators, child psychologists and many researchers have indicated that children with improved self-care skills lead more healthy lives. It is highly important that children can perform the skills they learn between the age 3 and 6 without

depending on an adult because children will make use of these skills throughout their lives. For this reason, children need to learn and practice self-care skills willingly and correctly. However, in its pre-school program, the Ministry of Education (2013) has included improving self-care skills in routine activities. Therefore, new methods and practices need to be investigated and included in the literature of this field. These interpretations prompt the following suggestions:

- A similar study can be carried out with different samples, and the similarities and differences between their learning acquisitions can be compared.
- Digital applications for the development of self-care skills among children can be developed and their effects on children can be analyzed.
- The relationship between children's self-care skills and different variables can be examined.
- Qualitative studies about the improvement of children's self-care skills can be conducted with the help of views from educators and families.
- Written and published materials prepared for children to acquire self-care skills can be analyzed in terms of their quality.

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