Relationship between Parenting Style and Maternal Personal Hygiene with Children's Personal Hygiene in North Jakarta, Indonesia

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Abstract

Background: Personal hygiene habits need to be practiced since early childhood because they are essential mechanisms in breaking the chain of transmission of various diseases. Important factors that affect children's personal hygiene are parenting style and maternal personal hygiene. This study aimed to determine the relationship between parenting style and maternal personal hygiene with their children's personal hygiene.

Methods: This study was an analytic observational study with a cross-sectional method conducted in July–December 2019. Parenting style and personal hygiene questionnaires were completed by students' mothers from four primary schools in North Jakarta (n=327). The study used the total sampling method. Data collection was analyzed using Chi-square and Fisher exact test.

Results: The study showed that 98.5% of students were raised with a non-exposure or authoritative parenting style, of which 57.5% of mothers had poor personal hygiene. Moreover, 61.8% of students had poor personal hygiene. Interestingly, there was a significant relationship between maternal personal hygiene and children's personal hygiene (p=0.023). However, there was no significant relation between parenting style and children's personal hygiene (p=0.065).

Conclusions: The maternal and children's personal hygiene are related, but not the parenting style Therefore, parents need to apply proper parenting style supported by other factors, such as good maternal personal hygiene, to encourage and educate children in achieving good personal hygiene.

Keywords: Maternal, parenting style, personal hygiene, primary school students

Introduction

Since early childhood, personal hygiene needs practicing because it is an essential mechanism in breaking the chain of infection of various diseases, such as diarrhea, worm infection, and dental caries.[1,2] In primary school age, children start to understand and learn the behavior to maintain their health status. Perceptions and habits acquired at this stage are the basis of personal hygiene practices that may be performed for the rest of an individual's life.[3]

Factors affecting a person's personal hygiene are social practices, personal preferences, body image, socioeconomic status, knowledge, health motivation, cultural variables, and physical condition. Essential factors affecting children's personal hygiene are parenting style and maternal personal hygiene.[3–7] Parenting styles are divided into exposure (authoritative) and non-exposure (authoritarian, permissive, mixed, or inconsistent).[8] The best parenting style parents should apply is non-exposure or democratic because it will encourage children to have more independent characteristics.[9–12] Children with authoritative parents have exhibited more independent behavior in maintaining personal hygiene.[13] Studies on the relationship between parents' hygiene and children's hygiene have not been conducted until now, although a study has shown that parents' handwashing habits might affect their children's handwashing habits,[3] whereas parents' dental health habits influence their children's oral health.[14,15]

This study aimed to explore the relationship between parenting style and maternal personal hygiene with their children's personal

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hygiene. Those variables were chosen due to the importance of learning personal hygiene from an early age.

Methods

This study was an analytic observational study with a cross-sectional method. The samples included 327 students in fourth, fifth, and sixth-grade and their mothers from four primary schools in Penjaringan, North Jakarta. The selection criteria for inclusion were students who were present when data collection was carried out and were willing to participate in the study, as well as parents who were willing to participate and filled out every question in the questionnaire. The exclusion criteria were students with physical or mental disabilities. This sampling technique was a total sampling. A total of 327 respondents met the inclusion criteria. All the selected students from the four schools completed the questionnaire. The ethical clearance was obtained from the ethical committee of the School of Medicine and Health Sciences at the Atma Jaya Catholic University of Indonesia, with the number 04/07/KEP-FKIKUAJ/2020.

Data collection was carried out at four primary schools in July–December 2019. These schools were selected from 418 schools in North Jakarta with a convenience sampling method based on their locations and accessibility. Data were collected from students by interviews based on the questionnaires. Parallelly, data from mothers were collected by distributing questionnaires via the students to be filled out by their mothers at home and the students submitted the completed questionnaires at school the following day.

Research instruments used in this study were parenting style questionnaire and personal hygiene questionnaire. The parenting style questionnaire consisted of 26 questions about the parent-child relationship. Each question had a choice of A, B, C answers which were scored as A=1; B=2; C=3. The scores were summed up with the cut-off value of 52. A total score of less than 52 was categorized as a non-exposure or authoritative parenting style. A total score of more than or equal to 52 was categorized as an exposure parenting style consisting of authoritarian, permissive, and mixed or inconsistent parenting styles.[9]

The personal hygiene questionnaire consisted of 10 questions about personal hygiene aspects. A score of one was given to each answer if the answer was a good personal hygiene habit and a score of 0 if the answer was a poor personal hygiene habit. Respondents were categorized as having good personal hygiene if the total score was more than eight and washed their hands before eating and after defecating. Respondents were categorized as having poor personal hygiene if the total value was less than or equal to eight or do not wash their hands before eating and

Table 1 Distribution of Primary School Students by Grade, Gender, Maternal Age, and Maternal Education Level

Variable	n	Percentage (%)
Grade		
4	105	32.1
5	114	34.9
6	108	33
Gender		
Male	167	51
Female	160	49
Maternal age (years old)		
17–25	1	0.3
26–35	78	23.9
36–45	186	56.9*
46–55	60	18.3
56–65	2	0.6
Maternal education level		
No formal education/did not graduate from primary school	10	3
Primary (Primary–Middle School)	139	42.5
Secondary (High School)	151	46.2
Tertiary (College or University)	27	8.3

Table 2 Distribution of Primary School Students by Parenting Style, Personal Hygiene, and Maternal Personal Hygiene

Variable	n	Percentage (%)
Parenting style		
Exposure	5	1.5
Authoritarian	1	0.3
Permissive	4	1.2
Mixed or inconsistent	0	0
Non-exposure (authoritative)	322	98.5
Student's personal hygiene		
Poor	202	61.8
Good	125	38.2
Maternal personal hygiene		
Poor	188	57.5
Good	139	42.5

after defecating.[16]

The data analysis was carried out with the SPSS statistical program. The relationship between the independent and dependent variables was analyzed using Chi-square and Fisher exact test.

Results

Out of 660 students from four primary schools in Penjaringan, 327 students and their mothers were included, with the most prevalent gender was males (51%). Most mothers in this study were in their late adulthood (56.9%) and had a secondary education level or high school (46.2%) (Table 1).

Most students had authoritative parents (98.5%) and had poor personal hygiene (61.8%). Most of their mothers also had poor personal hygiene (57.5%) (Table 2).

There was no relation between parenting style and children's personal hygiene (p=0.65) as shown in table 3. Interestingly, there was a relationship between maternal personal hygiene and children's personal hygiene (p= 0.023) as depicted in Table 4.

Discussions

Parenting style can affect the independence and level of children's personal hygiene.13 However, our study shows that there is no relationship between parenting style and children's personal hygiene. Other factors

Table 3 Relationship between Parenting Style and Children's Personal Hygiene

Parenting Style	Children's Personal Hygiene		Total n (%)	p-value
	Good n (%)	Poor n (%)		
Non-exposure	124 (38.5)	198 (60.5)	322 (98.5)	0.65
Exposure	1 (20)	4 (80)	5 (1.5)	
Total	125 (38.2)	202 (61.8)	327 (100)	

Table 4 Relationship between Maternal Personal Hygiene and Children's Personal Hygiene

Maternal Personal Hygiene	Children's Personal Hygiene		Total n (%)	p-value
	Good n (%)	Poor n (%)		
Good	63 (40)	76 (60)	139 (42.5)	0.023
Poor	62 (18.3)	126 (76.6)	188 (57.5)	
Total	125 (38.2)	202 (61.8)	327 (100)	

might also influence the children's personal hygiene, including social practices, personal preferences, body image, socioeconomic status, culture, knowledge, health motivation, and physical condition.[3–7] In our study, only the social practice has been explored, consisting of parenting style and maternal personal hygiene. If the parenting style is appropriate, children could independently maintain their personal hygiene; yet the example given by the mother is not proper, the child would not necessarily have good personal hygiene. Therefore, parents need to apply the proper parenting style supported by other factors, such as good maternal personal hygiene, to encourage and educate children in achieving good personal hygiene.[3,4,17]

Most parents in this study have a non-exposure or authoritative parenting style. Children with authoritative parents are more independent, responsible, and cooperative.[8,9] Authoritative parenting is the best parenting style to build children's independence in caring for their personal hygiene.[13]

Our study shows a relationship between maternal personal hygiene and children's personal hygiene, in line with other study showing a relationship between the parents' role and clean and healthy behavior of their children.[18] Similarly, parents' handwashing behavior may also affect their children's handwashing behavior.[3,19] Family is children's first environment to learn appropriate habits and behavior. Children learn a lot from parents and adults around them, especially from mothers who have an essential role in caring for and being role models for their children.[3,17,20]

This study has limitation that only maternal personal hygiene and parenting styles have been explored as variables affecting their children's personal hygiene. However, other factors might also influence personal hygiene, and all these factors need to complement each other to achieve good personal hygiene. Further study exploring other factors are encouraged.

To conclude, although no significant relationship between parenting style and children's personal hygiene, maternal personal hygiene has a significant relation to their children's personal hygiene. Therefore, parents need to apply the proper parenting style supported by other factors, such as good maternal personal hygiene, to encourage and educate children in achieving good personal hygiene.

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