Methods for toilet training vary. Parents may depend on their child care provider to guide the training process or read popular books for accomplishing the process in only one day. Whatever approach is used, the process should be approached with calmness and patience.

Toilet training is a developmental milestone. It cannot be rushed. Adopting an attitude that “it will eventually happen” will ease parents’ frustration and protect the child’s sense of esteem.

Readiness

In many areas of child development, children must reach a certain age or be in the proper setting or situation before they are ready to learn. Children are ready to learn when they are healthy, well nourished, and not pressured to achieve at a level above their capability.

Children often are pushed to grow up long before they are ready, as noted by child development expert David Elkind. “Growing up emotionally is complicated and difficult under any circumstances, but especially so when children’s behavior and appearance speak ‘adult’ while their feelings cry ‘child’ (p. 12, 1988).”

Early childhood is a challenging period. Children are exploring their growing sense of independence. There is a sensitive balance between how this search for independence is accepted by others and the child’s developing sense of shame and doubt.

If children are given encouragement, then they are able to provide parents with clues and cues of readiness. If children are pressured to feed, dress themselves, or be readily toilet trained before they are physically or intellectually capable, then there will be unavoidable accidents and embarrassment. Embarrassment combined with parental disapproval increases the child’s sense of doubt and shame.

A word of caution to parents and caregivers in this stage: Proceed slowly, taking signals from the child.

Lessons from research

- In general, bowel training occurs before urine training. This is because children can control the sphincter muscle at an earlier age than they are able to recognize and control muscles controlling urination. In addition, parents often can more easily recognize behavior that suggests a child needs to have a bowel movement.
- Daytime training occurs before nighttime training.
- Girls usually are toilet trained before boys. For girls, successful training starts around 18 months or later, for boys around 22 months or later.
- Toilet training problems often can be traced to other struggles between parent and child (discipline, authority acceptance, etc.).
- Before toilet training is started, the child needs to be old enough to have biological control of elimination.

Fears

Most young children may be frightened by or curious about toilets. The size, noise and rapid water movement could be alarming to them. It is important to have a child-sized toilet for them to use. You will also need to help a child watch a toilet function and allow them to ask questions. “Where does it go?” and “Will I fall in?” (and disappear) are common concerns. Be patient and give honest, simple explanations.

Some parents find children will play in the water or clog plumbing by throwing objects in the toilet to see what
happens. Adults may have to be very clear about why nothing else can be put in the toilet. Make sure you know where the valve is located to turn off the water to the toilet — just in case! A word of caution to parents and caregivers — attempt to separate the behavior from the child's sense of self. Otherwise, the process may be delayed if the child feels shame and doubt instead of a sense of independence.

How to begin

To start toilet training your child, first figure out his/her readiness by asking questions like:

- Does the child urinate much at one time as opposed to dribbling throughout the day?
- Does the child stay dry for several hours?
- Does the child seem to realize that he/she is about to urinate based on particular posture, gestures, verbal or facial expressions?
- Can the child understand and use words for elimination?
- Does the child show an interest and is motivated by wearing “real” underwear?
- Can the child walk steadily from room to room? Does the child have the coordination needed to stoop and pick up in order to complete task?
- Can the child partially pull training pants down and up?

After figuring out the child's readiness, take a look at your readiness to begin toilet training your child:

1) Honestly decide what signs of readiness your child shows. Enough to start the process?
2) When will you actually begin toilet training?
   a. Is your daughter at least 18 months old, son at least 22 months old?
   b. If both parents work, do you need to start the process on the weekend?
3) Have you talked about and agreed on training techniques with child care providers, family members, and friends?
4) Buy appropriate supplies: training underwear, clean-up supplies, child-sized toilet or training chair.

Bowel training

Since bowel training usually occurs first, begin when you see a consistent pattern in your child's bowel movements. As soon as you see signs of concentration and pushing, take the child to the bathroom and help him or her finish in the toilet. The next day, take the child to the toilet to “try” at the predicted regular time. Be consistent and supportive until they recognize the need and take themselves.

Training for urination

1) Begin in the bathroom with a very simple explanation to your child like “Tomorrow, I am going to help you learn to use the toilet. Here is the toilet (or potty) you will use. I will help you by reminding you to go. We will do it together.” Use words that are simple but realistic, such as “Go potty” or “Go to the toilet.” Continue to provide liquids to the child on a regular basis.
2) The next day, start by taking your child to the toilet as soon as the child gets up. Be relaxed and supportive. Encourage your child to “try.” After a few minutes, even if they haven’t toileted, help them get dressed in simple, loosely fitting clothes. This may mean only underwear or loose pants or shorts with an elastic waist. Bare feet or rubber sandals also make life easier, depending on the weather.
3) If your child is urinating four to five times a day in the toilet, start lengthening the time between scheduled trips to the bathroom. On a two-hour schedule, if your child averages less than one accident a day, start giving the child more freedom to decide if they have to toilet.
4) Once a child has achieved bowel and daytime bladder training, do not worry about night-time training. Keep diapers on at night. Children may continue to wet at night until they are 4 or 5 years old.
How parents can help

- Teach the child words needed to talk about elimination.
- Provide a potty chair for training.
- Use praise (hand clapping, positive phrases) and incentives (books to read while sitting, playing potty with a doll) without allowing them to be too distracting.
- Begin toilet training only when the child seems interested and willing.
- Gently ask the child several times throughout the day and evening if they need to go to the bathroom.
- Establish a regular pattern of toileting; upon rising, before and after meals, before bed.
- Monitor fluid intake, particularly at bedtime.
- Postpone training if the child does not seem to catch on or does not seem interested.
- Remain calm and patient.
- Expect accidents. Do not harshly punish accidents.
- Do not blame, threaten or demoralize the child.
- Do not insist that a child remain on a potty seat longer than 5 to 7 minutes. They may build up an association of unpleasantness with the bathroom or potty seat.
- If the child seems more interested in the large toilet than the small potty chair, follow this cue.
- Use same sex adult modeling when possible.
- If the child has an accident, remain calm, saying “Sometimes accidents happen.” Let them take part in the clean up by placing soiled clothing in the sink, wiping the floor with a towel, or wiping with a washcloth.
- Some parents find it helpful in early training to try turning on the water faucet in the bathroom as a stimulus to urinate.
- Storing clean underwear near the toilet may be beneficial.
- Colorful underwear may be motivating and easy-to-remove clothing is recommended.

Toilet training for special needs children

The same training methods apply to special needs children as to other children. More record keeping may be necessary to find patterns such as in the time between eating and drinking and need to eliminate.

If advised by consulting physicians and specialists to toilet train the child, a great deal of patience and a longer time frame may be necessary. Many other skills accompany even simple routines for children with physical or mental impairments.

You need to do a clear task analysis of each process that trainers and parents often take for granted. This may involve actually writing down each and every step taken in order to go to the toilet. The tasks might include some of the following:

- Recognizing when she/he has to go to the bathroom
- Waiting to eliminate
- Entering the bathroom
- Manipulating clothing closures
- Pulling pants down
- Sitting on the toilet
- Eliminating in the toilet
- Using paper correctly
- Pulling pants up
- Flushing toilet
- Washing hands
- Drying hands

To see if your child is ready to learn toilet training, answer the following additional questions.

1. Can the child follow simple directions? (“Come here, Tracy.”)
2. Can the child sit in a chair for five minutes?
3. Can the child wait at least 1½ hours between elimination times?

Human sexuality implications

Toilet training is a part of a life-long process of learning about the body and its functioning. Adults’ attitudes toward genitals and the natural process of toilet training have an important influence on the child’s developing feelings about her or his body and taking responsibility for bodily needs.

Make certain the child has observed a parent or trusted adult using the toilet. Answer questions in a relaxed manner. Toilet training accomplished in a calm and positive way is an important support for life-long appreciation of human sexuality.

Young children feel pleasure when they urinate or have a bowel movement. They may want to play with their urine or feces. They also may want to examine their own or other children’s genitals when using the toilet. This is normal experimental behavior. It is a good time to teach correct names for body parts and body functions. The goal is to teach children that all parts of the body are good, and body functions are natural.
Sources


