



THE INCLUSIVE LINK

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TOILET TRAINING

Toilet or potty training should generally take place between the ages of 2 to 4 years. The child's chronological age is an important consideration when deciding readiness for toilet training. Boys often start later and take longer to learn compared to girls. For children with special needs, it is important to consider their developmental age when deciding if toilet training is appropriate. For example, a 4-year-old child may not be ready for toilet training if his/her developmental age is lower than 2 years.



Signs to look out for when determining a child's readiness for toilet training:

- Stays dry for 2 hours or more during the day
- Wakes up dry in the morning or after naps
- Shows regular bowel movements
- Able to follow instructions
- Able to balance self and sit on potty/toilet
- Able to pull down pants/diapers
- Shows discomfort over soiled diapers or pants and wants to be changed
- Facial expressions, body language or words shows that child is about to urinate or have a bowel movement
- Recognises sensation of a full bladder
- Shows interest in using the potty/toilet or wearing underpants



For effective training, develop and consistently follow regularly scheduled times for using the potty/toilet. Carefully observe when the child urinates or has a bowel movement in order to develop an appropriate schedule. Start with a daytime schedule. Nighttime training can start when the child has been fully trained during the day.

You can increase a child's success with urinating on a regular and predictable basis by increasing and monitoring their fluid intake during training periods. Let the child have additional fluids about 10 – 15 minutes before scheduled toileting times. Adjust the times and amount of fluid intake so the learner is most likely to urinate in the potty/toilet during scheduled toilet breaks.



Did you know?

Many children with autism have unusual reactions to various sensory stimuli (i.e. sight, smell, tactile, sound) that can hinder their toilet training. A child may dislike being confined in a small toilet with dim or bright lighting. He may react negatively to the smell of disinfectant or the feel of cold tiles. He may also fear the sound of toilet flushing and noisy pipes. Watch out for these signs to help prepare the child with autism for what to expect. You may need to make changes to the toilet environment to make it more conducive for him.

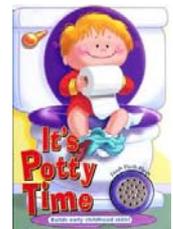


TIPS FOR TOILET TRAINING

1. Never pressure the child to potty train, just offer exposure and experience. Inquire if the child would like going to the potty to “pee pee”. If the child declines, ask them if they would like to join the other children while they use the potty/toilet.
2. Peer pressure and role modeling help promotes toilet training. Children tend to model their behavior on what they see as being appropriate and conform. Asking older peers to show the child how they go to the toilet may make the whole process easier.
3. When children show readiness, let them go diaperless. Children need to feel wet to get the concept of toilet training. Take them to the toilet every hour on the minimum. For children who need more motivation, set a timer to go off every hour or help them set the timer.
4. It is often recommended that boys start training by learning to sit down to pee. Once he can comfortably pee and poop while sitting down he can be taught to pee while standing.
5. Use simple words, particularly for children with special needs, when directing them or talking about using the toilet such as “go wee wee”, or “poo poo”. As children grow older or become more verbal, use proper sentences and give them proper names for their body parts.



6. Teach “going to the toilet/potty” by using books, props and playacting. Use a doll, teddy bear, potty, diapers, artificial poop etc. to help children understand better. Get them to participate by taking off the doll’s diapers, sitting it on the potty or cleaning up with toilet paper etc. Such learning is fun and effective especially when conducted in a group setting.



7. For children who are non-verbal, they can be taught to indicate their toileting needs by using gestures, signs or picture symbols.



8. Visuals help in children’s grasp of the toilet training concept. For children with special needs, a sequence of visual cues can be used to prompt them on “what to do” when using the toilet.



9. It is important that parents and teachers/child care providers discuss their approaches to the toilet/potty training process and be entirely consistent in their approach.

(References: www.suite101.com; www.ileadchildrenshealth.com; www.suelarkey.com.au; www.wonderbaby.org; www.autism.com; *Toilet Training for Individuals with Autism or Other Developmental Issues* by Wheeler, M. (2007))

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