



Pressure to toilet train unnecessary

by Nancy Holroyd

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Getting rid of diapers, wet clothes, wet beds and spots on the rug is like a dream come true for most parents. For those of us with a developmentally delayed child it can seem like the impossible dream.

When can we expect our child to stay dry?

If our child has significant motor delays do we have to wait until they can open the bathroom door and push their own pants down before we start the training? Does the child need to be able to walk?

The number of skills that need to be in place to have a completely toilet trained child can seem daunting. These include the ability to dress and undress, open and close the bathroom door, balance on the toilet or potty chair. The child also needs to be able to stay dry for several hours at a time, recognize the need to empty the bowel or bladder and hold off emptying until sitting on the toilet. Another useful skill is the ability to communicate needs to an adult.

Is toilet training a stage of development, or is it something adults impose on children?

The name "toilet training" suggests that this is a task we impose on our children. I was determined to let my children lead the way.

My first daughter had no desire to stay dry and by the time she reached two-and-a-half years old, I heard frequent comments from parents and others about the subject. I had a six-month-old baby with Down syndrome needing open heart surgery, and this older child wanting the attention diaper changes gave her.

There were several well meaning people giving me advice on how to proceed with the task, and questioning why I didn't get the job done. It was then I found a book about training a child in one day. Desperation being the motivation, I decided to try this method on child number one. I felt like quite a failure when 24 hours later she still wasn't staying dry. It was time to adapt a new approach to the child and I started thinking about this process as a toilet awareness program. The biggest change was probably in me. I rediscovered the need for the child to lead the way tempered by some guidance from me.

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We can read to and talk to our children about toileting habits. Younger children can model their older siblings. First borns can model their same sex parent. We can be alert to signs that the child needs to go. Talk with them about feeling wet or dry. I feel at this point cloth diapers have the edge over disposable ones. I would have my kids touch the wet diaper and ask them if it was wet or dry. When they were dry, I would draw their attention to how it felt to be dry. In the beginning of the process, I would ask, "Doesn't it feel nice to stay dry?" Or, I would make statements like, "You're dry like a big girl. You can feel proud of yourself." A quiet subdued approach helps the child learn without making a big deal of the whole process. The parent guides the child to taking and keeping control of their own bodily processes. I first drew their attention to their diaper every half hour and decreased the frequency when they were consistently dry and getting themselves to the bathroom.

This method worked well for Andrea, my oldest, and so when it came to start talking about training Sheila I decided to try this approach first. I had no expectations of having Sheila trained by the time she was three or four years old, and I believe this lack of expectation allowed me to remain more relaxed about the whole process.

Sheila had a medication related diaper rash when she was nearly two years old. Since she could already stay dry for three to four hours I was letting her go around the house without a diaper. (She crept on hands and knees at this time.) One day I noticed she was starting to strain. Since she was right outside the bathroom door I scooped her up and placed her on the toilet. By the third day, she would lead me to the bathroom making grunting noises to get my attention. I got out her little sister's retired potty chair and told my husband that this was a toilet awareness program. I didn't want to become attached to the idea of toilet training Sheila at such a young age.

Four months later Sheila was walking and staying dry most of the time during waking hours. When I realized this I had some cautious thinking about how to proceed, since she had also had one bout of diarrhea in which she lost bowel control for three days.

Do I leave her in cloth diapers, or replace them with training pants?

Most conventional information regarding toileting tells parents, "never put a diaper on a child once you start the venture." Some reasons stated are: you will give the child a wrong or conflicting message, you will humiliate or sadden the child, or you are showing them a lack of confidence. Sheila had awareness of her bladder and bowel needs, and she was aware of the social expectations. Her lacks were in communication, gross motor, and fine motor skills. Conventional wisdom implicitly assumes the child will be ready in all skill areas spontaneously. What if your child isn't? How would we compensate for Sheila's lacks without discouraging her?

Sheila attended a pre-school program and they were willing to follow through without requests regarding toileting. Sometimes a child will work better with someone other than mother (Andrea started staying dry the week I was away during Sheila's open heart surgery). If your child is involved with a special pre-school program, try talking with the teachers and asking them for suggestions.

One significant barrier we have had to overcome is her lack of verbal expression. She communicates with signs, gestures and facial expressions. She wasn't always with people who understood her means of saying, "I've got to go!" Or her gesture could be missed in the confusion of many things going on at once. This led to scheduling Sheila's toileting times by the clock, rather than personal awareness of need. I believe this happened out of a desire to support her in her effort to stay dry, but it hampered her developing a sense of personal responsibility.

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At one point she went through what looked to me like a need to take back control. If I suggested that it was time to go to the bathroom, or asked her if she needed to go, she would wet her pants. Since she was staying dry at school she continued to wear underpants there. At home I gave her a choice of wearing pants if she stayed dry, or wearing a diaper if she didn't want to stay dry. She chose the diaper for four days. We then began a busy weekend where we were scheduled to be out both days. She chose to wear pants, and she kept them dry the whole weekend.

As she approached her third birthday we saw progress, but there were setbacks as well. Nearly every time she had an illness accompanied by frequent loose bowel movements, she would have difficulty getting to the toilet in time. Sometimes we would go back to diapers, and sometimes we would not need to, but we always let her know why we were using the diapers. We also told her that she could keep her diapers clean and dry, and she could let us know when she needed to go. We chose to use diapers because she was upset about the messes when wearing pants. In her case, we felt going back to diapers was less upsetting to her. After all, the first five months of the "toilet awareness" program, she wore diapers and kept them dry.

We had a period of time when Sheila would wear diapers or pants interchangeably. The diapers were cloth, so the feeling was not very different from her training pants. She also wore diapers at night. I would not have felt as casual about switching back and forth, had Sheila been in disposable diapers. I also feel our use of cloth enhanced Sheila's awareness of dry and wet sensations. Once we embarked on the toileting program, we treated the diaper, as much as possible, like underpants. We pushed the diaper down when she was standing, instead of unpinning it while she was lying down.

We next encouraged her to help with pushing her pants down, pulling them up again, wiping her own bottom, and washing her hands after toileting. We did not worry about when she would do the whole job independently. However, we felt pleased with what

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she was able to do, and even more important she was proud of her accomplishments.

At the age of seven Sheila is dry both day and night. From the time of five on, the occasional accident was a rarity during the day, and as long as we took her to the bathroom between 11 pm and midnight, she was dry at night. But if she was sick it increased the night awakenings and occasional accidents. Sometime between her sixth and seventh birthday, the occasional accident tapered off to the almost non-existent. Shortly after her seventh birthday, she started sleeping through the night with no toilet break and no accidents.

We have a third child. When it came time to consider toilet training her, I decided to use the "toilet awareness" approach. Again, it took a while for her to decide to try this, and when two and a half rolled around a couple of the people who had wondered if I was ever going to train my oldest started dropping hints. I felt a little edgy. But I figured summer would be coming soon enough and I would put her into cotton training pants and she would figure out for herself that dry was more comfortable than wet.

Toilet training implies this is something you do to a child. Toilet awareness is giving the child guidance as the child is learning new skills. I believe toilet awareness takes the pressure off both mother and child. The child does not have to be dry in a day, a week, or a month as training seems to suggest. Instead the child will be dry when the child is truly ready, just as the child will walk when the internal clock says it is time to walk. This is really no more than any other phase in a child's development. We don't pressure our children to hurry up and cut their teeth, so why not relax and enjoy this new area of growth?

Toilet Awareness Program Tips

- ❖ You may be ready to get rid of diapers long before your child is.
- ❖ Physical and developmental maturity are a must before a child is ready to stay dry independently.
- ❖ Being able to recognize the need to empty the bowel or bladder is important.
- ❖ The ability to communicate need either through gesture, sign or words is necessary.
- ❖ Many children are visual learners. Being able to watch a same-sex sibling or parent may help them learn what you expect.
- ❖ Understanding what is expected must precede the process.
- ❖ Usually bowel control precedes bladder control.

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- ❖ Children with disabilities typically take longer to achieve both day and night control.
- ❖ Rushing the process causes delay in acquisition of skills.
- ❖ Seventy per cent of children with cognitive delays will have bladder control by age seven.
- ❖ Use of incentives and placing child on toilet at regular intervals are good techniques for teaching bowel control.
- ❖ Toileting after a meal takes advantage of normal reflex of the gastro-intestinal tract.
- ❖ Chronic constipation can impede bladder training.
- ❖ Overnight bladder control will come later, especially if the child is a sound sleeper.
- ❖ Let your child lead the way whenever possible. This will work better if they want to stay clean and dry.
- ❖ Consider the use of cotton diapers and pants since the child will feel the difference between wet and dry better.

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