

Toilet Training



One important skill that you will need to teach your child is how to use the toilet. But teaching your child this skill takes time, understanding, and patience. The important thing to remember is that you cannot rush your child; each child learns to use the toilet in his or her own time. The American Academy of Pediatrics has written this publication to help guide you and your child through this important stage.

When is a child ready?

There is no set age at which toilet training should begin. Before children are 12 months of age, they have no control over bladder or bowel movements. While many children start to show signs of being ready between 18 and 24 months of age, some children may not be ready until 30 months or older. This is normal.

Most children achieve bowel control and daytime urine control by 3 to 4 years of age. However, even after your child is able to stay dry during the day, it may take months or years before he achieves the same success at night. Most children are able to stay dry at night after 5 years of age.

Is your child ready?

Signs that your child may be ready include the following:

- Your child stays dry at least 2 hours at a time during the day or is dry after naps.
- Bowel movements become regular and predictable.
- You can tell when your child is about to urinate or have a bowel movement.
- Your child can follow simple instructions.
- Your child can walk to and from the bathroom and help undress.
- Your child seems uncomfortable with soiled diapers and wants to be changed.
- Your child asks to use the toilet or potty chair.
- Your child asks to wear “big-kid” underwear.

Note: Some child care programs require children to be toilet trained as a requirement for enrollment. Don't let this be a threat to your child; it may be an incentive for her to cooperate in the toilet training process.

Toilet training tips

1. **Decide which words to use.** Choose the words your family will use to describe body parts, urine, and bowel movements. Remember that other people will hear these words too, so pick words that will not offend, confuse, or embarrass anyone. Avoid negative words like “dirty,” “naughty,” or “stinky.” They can make your child feel ashamed and embarrassed. Talk about bowel movements and urination in a simple, matter-of-fact manner.

2. **Pick a potty chair.** A potty chair is easier for a small child to use because there is no problem getting onto it and a child's feet can reach the floor. Special books or toys for “potty time” may help make this more enjoyable for your child.
3. **Be a role model.** Children are often interested in their family's bathroom activities. It is sometimes helpful to let children watch parents when they go to the bathroom. Seeing grown-ups use the toilet (and wash their hands afterward) makes children want to do the same. If possible, mothers should show the correct skills to their daughters, and fathers to their sons. Children can also learn these skills from older brothers and sisters.
4. **Know the signs.** Before having a bowel movement, your child may grunt or make other straining noises, squat, or stop playing for a moment. When pushing, his face may turn red. Explain to your child that these signs mean that a bowel movement is about to come. Your child may wait until after the fact to tell you about a wet diaper or a bowel movement. This is actually a good sign that your child is starting to recognize these body functions. Praise your child for telling you, and suggest that “next time” he let you know in advance. Keep in mind that it often takes longer for a child to recognize the need to urinate than the need to move bowels.
5. **Make trips to the potty routine.** When your child seems ready to urinate or have a bowel movement, go to the potty. It may also be helpful to make trips to the potty a regular part of your child's daily routine, such as first thing in the morning, after meals, or before naps.

Keep your child seated on the potty for only a few minutes at a time. (It is better for boys to learn to urinate sitting down first, and then change to standing up when they are better at it.) Explain what you want to happen.

In the beginning, many children have bowel movements or urinate right after getting off the toilet. It takes time for children to learn how to relax the muscles that control the bowel and bladder. If this happens a lot, it may mean your child is not really ready for training.

Keep in mind

Major changes in the home may make toilet training more difficult. Sometimes it is a good idea to delay toilet training if

- Your family has just moved or will move in the near future.
- You are expecting a baby or you have recently had a new baby.
- There is a major illness, a recent death, or some other family crisis.

However, if your child is learning how to use the toilet without problems, there is no need to stop because of these situations.

6. **Teach your child proper hygiene habits.** Show your child how to wipe carefully. (Girls should wipe thoroughly from front to back to prevent bringing germs from the rectum to the vagina or bladder.) Make sure both boys and girls learn to wash their hands well after urinating or after a bowel movement.
7. **Praise your child.** Encourage your child with a lot of hugs and praise when success occurs. When a mistake happens, treat it lightly. Punishment and scolding will often make children feel bad and may make toilet training take longer.
8. **Try training pants.** Once your child starts using the potty with some success, training pants can be used. This moment will be special. Your child will feel proud of this sign of growing up. However, be prepared for "accidents." It may take weeks, even months, before toilet training is completed. Continue to have your child sit on the potty several times during the day. If your child uses the potty successfully, it is an opportunity for praise. If not, it is still good practice. Some children who are not ready for training pants will still feel that they are more "grown up" if they wear disposable training pants (Pull-ups is one brand name) as a step forward in the training process.

Some children will want to go back to diapers, especially for bowel movements. Instead of looking at this as a failure, praise your child for knowing when he needs to go. Suggest that he have the bowel movement in the bathroom while wearing a diaper. Encourage improvements, and work toward sitting on the potty without the diaper.

9. **Avoid a power struggle.** Children at toilet training ages are becoming aware of their individuality. They look for ways to test their limits. Some children may do this by holding back bowel movements. Try to stay relaxed about toilet training. Remember that no one can control when and where a child urinates or has a bowel movement except the child.
10. **Understand their fear.** Some children believe that their wastes are part of their bodies, and seeing their stools flushed away may be scary and hard to understand. Some also fear they will be sucked into the toilet if it is flushed while they are sitting on it. To give your child a feeling of control, let her flush the toilet. This will lessen the fear of the sound of rushing water and the sight of things disappearing.
11. **Moving up.** Most of the time, your child will let you know when he is ready to move from the potty chair to the "big toilet." Make sure your child is tall enough, and practice the actual steps with him. Provide a stool to brace his feet.

Your pediatrician can help

If any concerns come up before, during, or after toilet training, talk with your pediatrician. Often the problem is minor and can be resolved quickly, but sometimes physical or emotional causes will require treatment. Your pediatrician's help, advice, and encouragement can help make toilet training easier. Also, your pediatrician is trained to identify and manage problems that are more serious.

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The information contained in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.

From your doctor

