

COMPASS Information Series:

Toilet Training

Parents look forward to the time their young child is toilet trained. Parents expect their child to learn to use the toilet as part of the growing up process. When children are difficult to train, control problems between the child and parents can arise making toilet training harder. Learning to use the toilet is part of socialization. Children become trained when they become aware that other children and people use the toilet and that using the toilet is part of being considered a “big boy or girl.” Most children like the recognition and pleasure from adults that using the toilet brings as well as the rewards that come their way. However, young children with autism have trouble applying the same social interaction reasons to toileting. They also are being asked to change set routines and habits and they may not be yet aware of or able to control their bodies.

When to start toilet training a child with autism:

- Many children with autism train later than the average age. Many succeed at urine training before bowel training. Many take longer to train, some reports suggest up to a year to become dry and two years to become clean.
- Start training when you can be positive and the child is able to: sit comfortably on a potty chair or toilet for a couple of minutes, stay dry for at least 60 minutes, is aware of being wet or dirty, is showing interest in other people going to the toilet, showing some signs of cause and effect, and is willing to cooperate. Be prepared that it may be a long process.

Some special consideration for children with autism:

- A child with autism may not be able to communicate a need to go to the bathroom, therefore body signals from the child, routines, and visuals might be significant aides.
- The child with autism may learn to use the toilet at home and be unable to adapt to a new situation easily.
- A child with autism may have sensory difficulties like not liking the hard toilet seat, being afraid of water splashing, or want to play in or watch the swirling toilet water.
- In public bathrooms children with autism sometimes fear the hand dryers, have problems with the doors, the way the toilet flushes, or any number of challenges.
- Having a bowel movement is often harder and occurs less often. Some children go off alone and squat, some insist on wearing the pull-up or diaper to have a BM, some fear that it hurts, some smear feces, and others want to be clean so much that they react to getting anything dirty on them.
- Rule out any medical problems and account for fears that may have developed due to pain from constipation or urinary tract infections in the past.

Ideas for Training

Environment: Decide where your child will learn to sit. Will a stool be helpful for your child’s feet or to help get on the toilet? Your child’s feet need to be supported and your child needs to feel comfortable. Keep distractions to a minimum. Keep the door closed or open depending on how your child is most comfortable. If you are using a potty chair, let your child enjoy the chair and sit on it with clothes on at first so it becomes familiar and part of his world. If toilet paper is difficult to leave out, fold up several squares and have them in place or use tissues. It is usually easier for males to learn to sit for all toileting at first, rather than having to decide whether to sit or stand. Your son will be able to change and stand to urinate once he is toilet trained.

Clothing: Consider whether it will help your child understand what to do by using training pants for at least part of the day. Many children become comfortable with pull-ups and don't really feel that wet, so when a pull-up is on they are free to go in it. Some parents have used pull-ups over underpants so the child feels the wet but the furniture stays dry. Use clothing that is easy to get on and off and pull up and down. Dresses and pants with snaps and zippers are hard to manage when learning to use the toilet. Teach your child to help with pulling pants up and down as part of toilet training.

Routines and Schedules: Establish a schedule that works for you and your child. It is more difficult to use a routine that adheres to the clock and it may not be clear to your child. Instead, use a schedule that naturally fits into the routine of the day before or after activities. For instance, always go to the bathroom upon awakening, after breakfast, after snack, before lunch, before and after nap, before going in the car, and other times that correspond with the rhythms of the day. One suggestion is to concentrate on one time of day when you and your child have time to pay attention to learning this new skill. If possible, choose a time when you know your child usually goes. Give your child plenty of liquids about half an hour before this time; then put on underpants and stay attentive and near the bathroom. Even if you feel you can only give an hour to this activity, it may be well worth it until your child gets in the habit of being able to go to the bathroom while sitting on a potty chair or toilet.

Establish a routine that everyone who interacts with your child will use. Small changes often upset a child with autism at first. It may help to have something the child likes to hold, to feel, or to look at while sitting and this is the only time it is available. This may be an audiotape or even videotape, books, talking telephones or other devices that hold the child's attention and encourage sitting. Visual timers might be used as a reminder of how long to sit. It helps to picture or write the steps of the routine so everyone knows about wiping, flushing, washing hands, and key words that are used. This visual chart can become a reminder for the child as well.

Reinforcement: Reinforcement should be strong, immediate, and individualized. Use reinforcement every time at first for successive steps (from sitting, to self-initiating toileting from cues). Reinforcement for dry pants between sits may provide extra incentive and information to your child.

Data Keeping: Even before starting toilet training it helps to chart your child's rhythms to know when your child urinates and has bowel movements and if there are times most likely such as 40 minutes after lunch or within 30 minutes of drinking a cup of something. Then, it helps to keep track of when your child sits and whether your child successfully goes on the toilet and whether his/her pants are wet or dry. You might even check pants between sits and record dryness. This will help you know how often to have your child sit to gain optimum success.

Plan for Mistakes: Carry extra clothing and clean-up supplies. Reassure your child that you know that he can try again to stay dry or clean. Children with autism sometimes have a very difficult time initiating toileting and the need to toilet if they are out of their routine. Their communication problems and social interaction problems created additional challenges.. Adults have to be on the alert for signs of needing to use the toilet especially in situations where the child can not easily access the bathroom himself. Provide information about the location of bathrooms in all environments and when it is time to go.

Some Specifics Based on a Number of Programs and Ideas:

1. Before starting, keep data for a few days, charting every 20 – 30 minutes whether your child is dry, wet, or dirty. Some diapers have a strip that changes color to make this easier. Chart periodically, maybe once a day each week after starting training to keep track of progress, problems, and trends.

2. When you start training, prepare the environment with the needed equipment and remove extra detractions.
3. Plan a schedule that will match the data you initially gathered. If your child usually stays dry for an hour, plan to take him to the bathroom about 10 minutes ahead of that time. Try to match the schedule to the natural rhythm of the day.
4. Plan the routine that you will have your child follow and make a picture chart of that routine so that your child and everyone who helps him can follow it. Change the cue level by fading cues as the child succeeds. An example:
 - Give a visual and verbal cue – perhaps an auditory such as a buzzer or bell too. Decide what verbal cue you will use such as go potty, go pee, or go to the bathroom. If you use a sign, pair it with the verbal cue.
 - Enter the bathroom with whatever cue level is needed (verbal, light touches, taking child's hand, or more physical assist).
 - Pull pants down to ankles with whatever cue level is needed.
 - Sit with whatever cue level is needed.
 - Pee or poop or both with whatever cue level is needed.
 - Get toilet tissue and wipe with whatever cue level is needed.
 - Stand up with whatever cue level is needed.
 - Wipe, if needed, and throw tissue in toilet with cue level required.
 - Pull up pants with cue level required.
 - Flush toilet with cue level required
 - Turn on water and wash hands with cue level required.
 - Turn off water and dry hands with cue level required.
5. Watch for signs of readiness such as when your charting shows being dry for an hour, your child indicates in some way that she is wetting or soiling diapers, indicates in some way that she has soiled or is wet, regular bowel movements, or interest in others going toilet.
6. Keep positive, praise attempts, praise being dry and clean, use reinforcement and give your child time.
7. When your child has some success help him learn to indicate that he is going to the toilet with a sign, word, or picture or several of these. Children today often use pee and poop, but signing toilet may work or a picture of the toilet may work. If you have used one of these as part of your routine start making it part of the routine for your child to tell you or show you.

Some Ideas for Specific Problems That May Be Encountered:

1. **Resists sitting or doesn't sit and relax long enough:** Encourage your child to sit with her clothes on. Make sure the seat of the potty chair or the toilet is comfortable to your child, maybe it needs to be softer, maybe lined with a diaper, maybe warmer, or maybe your child's feet need to be more stable. Some children may need to have the hole on the toilet smaller and experimenting with various sizes of seats or even covering the toilet with a towel or cardboard may help. Give your child a reason to sit such as his special reinforcer that he gets while sitting. Use modeling by sitting together or having a doll or favorite stuffed animal sit. Give the child a visual or auditory cue about how long to sit by a visual timer or the length of a song. Help your child relax while sitting by providing support for feet and body where needed and rubbing your child's legs. Sometimes children are so tense that they can't relax and go.

2. **Afraid of flushing or excessively interested in flushing:** Encourage your child to play in water that swirls in other places than the bathroom and at appropriate times. There also are play toilets that make flushing sounds to practice with at other times and places. Always let your child know when you are going to flush the toilet when she is in the bathroom. Gradually you're your child be closer to the toilet by providing a place for her to stand while you are flushing. When your child is ready allow her to flush and either run or watch. Establish a rule that you only flush once then you are all done.
3. **Afraid of public bathrooms – stalls, hand dryers, different sinks, toilets that flush automatically:** At first, it may be necessary to be aware of the public bathrooms you may frequent to know what is likely to cause your child problems. Some of these can be avoided like being far away from the dryer and not walking under it and practicing with soap dispensers and sinks that go on by themselves in a fun way. Protect your child from toilets that automatically flush since some splash a lot. The more you know about the quirks of the public restroom the more you can prepare your child. Luckily there are more places with family restrooms that are easier to use.
4. **Playing in water or with toilet paper:** Take the toilet paper off the roll and put it up until your child can master the use of it. Put safety catches on toilets until your child can understand that toilets are not places to play. Allow lots of water play in appropriate places and even swirling water to watch such as in “tornado bottles”. Lower water toilets aren’t as much of a temptation while sitting. Use of tissues that are folded or pre-measured, folded toilet paper is helpful. Teach your child how to hold and tear a set amount of paper through visual means such as the length of a line on the wall or a mark on the paper when he is ready.
5. **Resists being cleaned or not wanting to be dirty:** Sometimes smearing of feces begins by the child trying to clean himself. He may try to clean up then make a mess. For whatever reasons your child may be having trouble in this area it is wise to stay as calm as you can. Establish a clean up routine that is not especially rewarding, but is comfortable and as quick as you can make it. Make sure the wipes are big enough and comfortable enough for your child including temperature and texture. If your child gets some feces on his hand and is distraught help him wipe it as soon as possible. If he doesn’t like to be dirty or be cleaned you can reassure him that putting it in the potty or toilet will keep him clean. Sometimes as children with autism grow older they become upset when something happens like a toilet overflowing or they get their hands dirty and react out of proportion, so we want to assure them early on that this can be fixed quite easily.
6. **Fear of having bowel movements or constipation:** This is a common problem for many children with autism at some time in their childhood. It may be contributed to by diet, not sitting long enough, not being able to relax, their activity level, or various other factors. It is helpful to help a child recognize that the grunting and squatting he is doing helps him have a bowel movement and that is good. Many children go and hide in a corner to do their poop and resist a change. Help them move closer to the bathroom and perhaps identify where to squat by using a plastic mat as the spot. Gradually shape the action to the potty or toilet over time recognizing for the child the grunts and pushes as signals. A child may have to go in the diaper even while sitting for a while then gradually shape this to a diaper-lined toilet seat. If a child experiences constipation on a regular basis bowel movements may be uncomfortable and you may need to seek advice from your doctor. (See STAR information sheet on constipation.)
7. **Bad aim when standing to urinate:** When your son is sitting to urinate and completely toilet trained or when he shows an interest in standing he might need help to pay attention in aiming. Sometimes boys do not want to touch their penis because they may have been told not to touch at some times. Some males in the family may need to demonstrate how to point and aim. Something may be used for a target like a floating paper, a Cheerio, or colored toilet water.

8. **Regression in toileting:** Sometimes a child who is fully toilet trained will begin to have many accidents. Evaluate changes that have occurred and what information or additional supports may help your child feel comfortable again. Some reasons regression may occur are after an illness, after a parent has been away, after a move, after starting school, after a baby has been born, or when going to the bathroom has been painful. Your child may be in a situation where he doesn't have the skills to tell someone he needs to go and holds it too long. His supports may not be in place. Sometimes at school there is something about the environment or the schedule that is causing problems for your child. Go back to all the original supports that worked and put them back into your child's life while reassuring him that he can and will succeed.

More Teaching Tips:

Use visuals: For many children, having a picture of a toilet or potty chair as a cue to go helps. You might also make a picture schedule to sequence the major activities of the day adding the toilet pictures before or after these. Children have learned to go on their own in this way. The pictures can be laminated and put on with Velcro or inserted in plastic sleeves so you or your child can take them off or change the order. There are also videotapes about using the potty that some children with autism have reacted well to. Other parents have made videos for their child to watch, some have paired music with the pictures. Model for your child, use books and pictures sequences about going to the toilet. Visuals help your child know what to do, remember what to do, and learn from the sequence.

Establish routines that can be generalized: When establishing the toilet routine try to consider a routine that can be used in a number of different bathrooms and restrooms. You might want to use both a potty chair and the toilet with a seat and without if your child can tolerate this. Or after your child is comfortable and trained introduce varied toilets purposefully. You also might want to consider different soaps, sinks, and towels as well. But the primary sequence that you use for training should be able to be used in many situations

Use imitation: Imitation is a type of visual. Many children with autism are delayed in their imitation abilities, but many do watch carefully what is going on around them even if they don't seem to immediately imitate. Watching someone use the potty who is close to their size may be useful, but it is helpful for them to see that going to the bathroom is something everyone does. Some children might respond to the use of a doll to go through the steps.

Teach privacy and modesty: Most young children undress anywhere and don't care who sees them go potty. However, as they are approaching four years of age, they often begin to want more privacy. Children's needs must be considered and children have to be taught what society expects. Consider teaching your child to undo and pull down pants only in the bathroom as well as pulling up and fastening pants before leaving the bathroom. Once your child is toilet trained teach him to close the door. Also you might want to consider teaching your child when and where he must be clothed or covered and not naked. You might as he gets older want to begin to teach him who to ask for help when toileting or bathing.

Use words that are appropriate: Some children with autism get stuck with the words they heard when very young and don't change to more appropriate words later. However, if you are aware of the need to be age appropriate it usually works to use the words that everyone else of the child's age is using.

Summary

Your child can be toilet trained. However, training your child with autism will likely take more planning, attention to detail, and consistency than training many other children. (Remember that all children with autism are different and some are easy to train.) Your child wants to do what you want him to do. It is hard for your child to put the pieces together to be successful. You have to organize the sequence and provide the schedule and consistency until your child understands how all this relates to his body functions. Keep your expectations realistic and reinforce your child for trying as well as for success, always reassuring him that he will succeed and there are plenty of times to try again.

Primary Sources: *Toileting* by Dalrymple and Boarman; *Toilet Training for Young Children with Autism* by Dalrymple; *Applying Structured Teaching Principles to Toilet Training*, TEACCH.

Some Books About Toilet Training That Might Be Useful:

Allison, The Toddler's Potty Book
Borgardt, What Do You Do With a Potty?
Cole and Miller, Your New Potty
Dorman, No More Diapers
Frankel, Once Upon a Potty – boy and girl editions
Gomi, Everyone Poops
Miller, On Your Potty
Patterson, Potty Time
Rogers, Going to the Potty
Ross, Have to Go
Weiss, Bye Bye Diapers

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