



Toilet Training

Each child learns to use the toilet in his or her own time.

Teaching your child how to use the toilet takes time and patience. Here is information from the American Academy of Pediatrics to help guide you and your child through the process.

When is a child ready?

Children have no control over bladder or bowel movements before age 12 months. Many children start to show signs of being ready between 18 and 24 months of age. Some children may not be ready until 36 months or older. Remember that it's normal for time frames to vary.

Most children can control their bowels and daytime urine by 3 to 4 years of age. Your child is able to stay dry during the day before being able to be dry at night. Most children are able to stay dry at night between 5 and 7 years of age.

Is your child ready?

Here are signs that your child may be ready.

- Your child is dry at least 2 hours at a time during the day or is dry after naps.
- 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 does not like wet diapers and wants to be changed.
- Your child asks to use the toilet or potty chair.
- Your child asks to wear "big-kid" underwear.

If your child has issues with constipation, talk with your child's doctor.

Toilet Training Tips

- 1. Decide which words to use.** Choose the words your family will use to describe body parts, urine, and bowel movements. Don't use the words *dirty*, *naughty*, or *stinky*.
- 2. Pick a potty chair.** A child's feet should be able to reach the floor. Books or toys for "potty time" may help make this time more fun.
- 3. Be a role model.** Let your child see you use the toilet and wash your hands afterward.
- 4. Know the signs.** Your child may grunt or make other noises, or squat, or stop playing for a moment. When pushing, his face may turn red. Explain briefly to your child that these signs mean a bowel movement is about to come. If your child waits to tell you about a wet diaper, praise him for telling you. Suggest that "next time" he let you know in advance. It may take longer for a child to notice the need to urinate than the need to move bowels.
- 5. Make trips to the potty a routine.** Take your child to the potty when you see him showing signs of readiness. Go at

other times, too, such as first thing in the morning. Boys can urinate sitting down first and can stand up to urinate when they are better at it.

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

- 6. Teach your child proper hygiene habits.** Show your child how to wipe carefully. Girls should spread their legs apart when wiping. They 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. Wait to try training pants.** Keep using diapers until your child is able to remain dry during the day for 2 weeks. 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 once during the day. If your child uses the potty, praise her. If not, it is still good practice. Some children who are not ready for cloth training pants will still feel that they are more "grown up" if they wear disposable training pants.

Some children will want to go back to diapers, especially for bowel movements. Do not look at this setback as a failure. Instead, praise your child for knowing when she needs to go.

- 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 calm 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 bowel movements and urine are part of their bodies. They may be scared of the toilet flushing parts of them away. 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 him flush the toilet.
- 11. Watch for a desire to move up.** Most of the time, your child will let you know when she is ready to move from the potty chair to the "big toilet." Provide a stool to brace her feet.

When Toilet Training Should Be Put on Hold

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 have recently had a new baby.
- There is a major illness, a recent death, or some other family crisis.

Remember

If any concern comes up before, during, or after toilet training, talk with your child's doctor or pediatric health care professional. Often the problem is minor and can be resolved quickly. Sometimes physical or emotional causes will require treatment. Getting professional help can make the process easier.

From Your Doctor



American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®



healthychildren.org

Powered by pediatricians. Trusted by parents.
from the American Academy of Pediatrics

The American Academy of Pediatrics (AAP) is an organization of 66,000 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists dedicated to the health, safety, and well-being of infants, children, adolescents, and young adults.

The persons whose photographs are depicted in this publication are professional models. They have no relation to the issues discussed. Any characters they are portraying are fictional. 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.

© 2017 American Academy of Pediatrics. All rights reserved.

2 of 2