Dr. Barton Schmitt’s Toilet Training Guidelines For Parents
Provided by McKenzie Pediatrics 2007

Dr. Barton Schmitt is a professor of pediatrics at the University of Colorado School of Medicine, and perhaps the most well-known living pediatrician. The following is adapted from his writings, with some of our own additions.

Toilet training is accomplished when a child uses a potty chair or toilet for bladder & bowel functions during waking hours. Nighttime bladder control usually occurs later, because it requires the ability to suppress the urge to urinate during sleep, or the advance skill of awakening from sleep to the signal of a full bladder. Even at 6 years of age, 10% of children still wet their bed.

Successful toilet training is good for both parents and children. Not having to change diapers and wash of a bottom frees up considerable parental time, and saves a significant amount of money. Once a child is toilet trained, the options for travel, babysitters, day care and preschool multiply. From the child’s standpoint, using the toilet can enhance the sense of mastery and self-esteem, as well as prevent the discomfort of a diaper rash.

Yet many parents postpone toilet training. The predominant reason seems to be the ease and availability of disposable diapers and pull-ups. Other factors are busy, dual-career families, and just plain procrastination.

To keep toilet training in perspective, remember that half of children around the world not having access to diapers are toilet trained between 12 and 18 months of age. Even here in the U.S., low income families tend to toilet train their children earlier to save money on diapers. For the same reason, single mothers also toilet train their children earlier.

The average American family begins toilet training their child around their third birthday (Note: We at Mckenzie Pediatrics have always advocated beginning the first steps of toilet training at 18 months). This is a far cry from bygone era before disposable diapers, when the average family began toilet training their child just after their first birthday. In those days, most children (though certainly not all) were trained by their second birthday. Today, only 2/3rds of children are even trained by their third birthday.

The time to start toilet training is after the child is ready to proceed with practice runs (potty sits). Five markers signal readiness for training:

- **Bladder Readiness**: The child recognizes the signal of a full bladder before urinating, can postpone the urge to urinate briefly, can stay dry for more than two hours (and is dry after many naps, for example), and doesn’t have a physical limitation.
- **Bowel Readiness**: The child recognizes the signal of a full rectum, and can postpone the urge to defecate briefly.
- **Cognitive Readiness**: The child understands what the potty and toilet are for, and is interested in using the potty. This interest can also be modeled and taught.
- **Motor Readiness**: The child can walk, sit, and get on and off the potty chair.
- **Psychological Readiness**: The child likes to sit on the potty chair, is cooperative and likes to please his parents, and can follow simple brief instructions.

Parents can help their child get ready for toilet training, much as they teach the child other skills such as playing with different toys, using new words, eating with a spoon, dressing, and reading. Why wait until two or three years of age to start the teaching? Learning normally occurs through repetition. Ways to help a child become ready include:

**At or By 18 Months:**
- Teach the vocabulary (pee, poop, potty, etc.)
- Make it clear to the child that everyone makes pee and poop
- Point out when dogs or other animals are doing pee or poop
- Clarify the body's signals when you observe them: “Your body wants to make some pee or poop.”
- Praise the child for passing poop in the diaper
- Don’t refer to poop as “caca”, “dirty”, or “yucky”
- Make diaper changes brief and boring. Making them prolonged and fun may delay toilet training.
- Change the child often so he will prefer to feel dry.
- Teach the child to come to the parent whenever he is wet or soiled.
- Older male children or male adults should always be seen as sitting on the toilet. No standing!
- Purchase panties or underwear, with favorite characters. Leave them in the package. Begin talking about underwear, and how mommies and daddies and big boys and girls wear them.
At or By 21 Months, Also:

- Teach the child what the toilet and potty chair are for (“pee and poop goes in this special place”)
- Demonstrate by dumping poop from diapers into the toilet
- Portray using the toilet and potty chair as a privilege
- Have the child observe toilet-trained siblings or friends using the toilet or potty chair
- Give the child a potty chair, and encourage her to sit there with clothes on for fun activities such as play, snacks, and television. Help the child develop a sense of ownership (“My chair”)
- Put the potty chair in the bathroom and have the child sit on it when the parent sits on the toilet
- Begin to generate curiosity about bathroom events.

At or By 24 Months, Also:

- Read toilet training books and watch toilet training videos.
- Help the child pretend she’s training a doll or stuffed animal on the potty chair.

The most common error parents make is doing nothing to prepare the child for toilet training, instead waiting for the child to indicate their desire to train, or for when the parents find time in their busy lives. Preparation must be ongoing for months before actually beginning to train the child. The other common error is forgetting to involve everyone else in the preparation and training of the child: older siblings, grandparents, day care providers.

With these steps of preparation, some children fulfill readiness criteria by 18 months, many by 2 years, most by 2 and ½ years, and almost all by 3 years. Never miss an opportunity to prepare a child, and never pick an arbitrary time to begin training. Whenever the signs of readiness begin to be noticed, ACT! Studies have shown that more than 90% of children show signs of readiness between 18 and 30 months of age.

Toilet training begins on the day the parent first encourages the child to sit on the potty chair without a diaper and try to pass urine or stool (practice runs, or potty sits). Toilet training consists of three parental actions: prompted practice runs, response to successes, and response to accidents. All of these need to be executed in a positive, loving, upbeat environment.

Potty sits should be brief, no longer than five minutes. As soon as the child seems restless, be should be allowed to get up. NEVER force them to stay seated on the toilet or chair. Unsuccessful potty sits deserve an encouraging comment: “Good try!”

Potty sits must be synchronized with body signals indicating that the child needs to pass urine or stool. Common signals of imminent urination include squirming, dancing, pacing, holding the genital area, pulling at the diaper, and sitting on the heels. Some children are silent voiders, giving no sign other than freezing (no movement) or some sudden change in facial expression. Common body signals for defecation include squatting, grunting, pushing on the posterior diaper, and passing gas. When any of these signals occur, the parent should initiate a potty sit by stating, “The poop (or pee) wants to come out. Let’s find the potty!”

Parents are very good at telling when a child needs to defecate, but not always so good at telling when they need to urinate. Which is why potty sits must also be based on probabilities. The most reliable ones are: 45 minutes after drinking a large amount of fluids, or 2 hours without urinating. Children who do not give a clear signal of an urge to defecate can be asked to sit on the potty after a large meal.

To keep the toilet training environment relaxed, initiate potty sits/practice runs only a few times a day at first. Too many potty sits can overwhelm the child, and cause them to become resistant.

If the child releases the urine or stool into the potty, the parent should praise or reward her. Verbal praise is essential, and a hug, but using small food treats or stickers can also be used for when a potty run is successful. If it is not, tell the child “good try”, but do not let them flush or use toilet paper, for they will see this as a reward (for doing nothing). If the child wets or soils himself soon after getting off the potty, respond encouragingly by saying “You wanted to pee or poop in the potty, but it came out in the diaper. That’s okay. You can do it. Keep trying!” Be careful not to demonstrate anger, for your child may be fearful of and avoid trying again knowing that you’ll be angry if they fail.

Potty sits can be discontinued when a child decides to use the potty three or more times spontaneously. Parents can shift from these practice runs to gentle reminders given when they notice the child is ignoring a strong body signal. Make certain the potty chair or toilet is easily accessible. Make certain the child is wearing convenient clothing, easily removed, including underwear (allow a child to wear them after a few successful spontaneous potties). Continue to provide incentives for a time, until it is clear none are needed. And don’t worry about the nights just yet...using diapers or pull-ups, but just for overnight, is still okay.