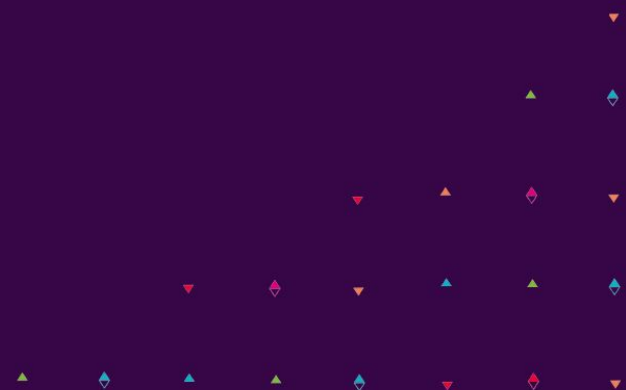




# Toilet Training

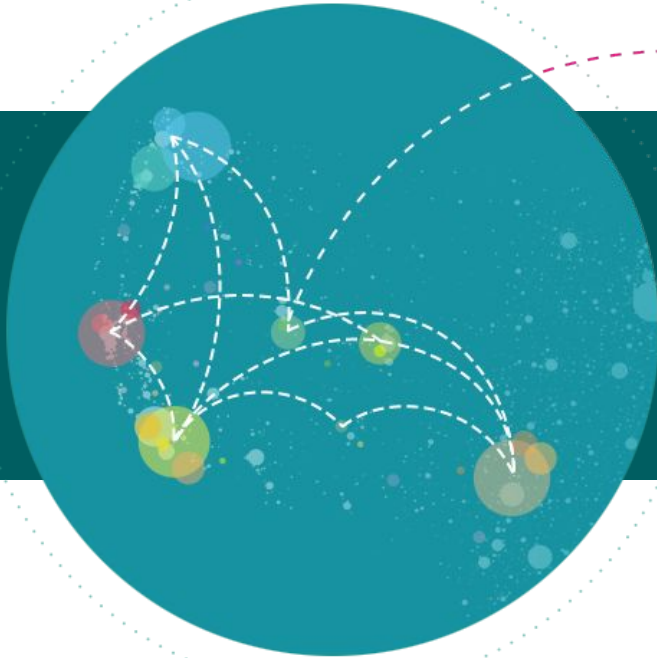
A Path to Success



# Kyo: Who We Are and What We Do

- Team of 800+ professionals in behavioral health
  - Behavior Analysts
  - Program Supervisors
  - Behavior Therapists
  - Admin
- Services we provide
  - ABA Therapy: In-home, center and telehealth
  - Parent Training
  - Behavior Consultation
  - School and Community Shadow Support

# Where We Serve



Currently serving major metro areas  
in 10+ states across the U.S.

View the full list of locations we serve:  
[kyocare.com/locations](https://www.kyocare.com/locations)

# Agenda

- 1 Are You Ready? Is Your Child Ready?
- 2 Rapid-Toilet Training Procedure
- 3 Bowel Training
- 4 Night-time Training
- 5 Q&A, Tips

# Are You Ready? Is Your Child Ready?

# Materials Needed to Prepare

- Potty seat/ring or potty chair
- Several pairs of underwear
- Several options of preferred drinks and salty snacks
- Toys/activities that can be done while sitting on the potty
- Paper towels, soap, step stool for hand-washing
- Wastebasket with plastic liner for wet underwear
- Special reinforcer that is saved ONLY for successful voids in the potty (this should be something that can be enjoyed in less than 2 minutes)
- Chair/stool where adult can sit
- Clipboard with several copies of potty data sheet(s) and a pen
- Timer

# Potty Chair or Big Toilet?

Potty Chair



- Pros: Small, moveable
- Cons: Generalization/rigidity

Big Toilet



- Pros: No need for generalization
- Cons: Big, scary

# When is Your Child Ready? (Prerequisites)

- Can sit on the toilet for 15 minutes without complaining
- Can pull pants up and down
- Can get on and off the toilet
- Follows directions most of time
- Awareness of soiled diaper/clothes





# Pre-Training Shaping Procedure

- Use if your child resists sitting on the toilet:
  - *Systematically introduce and reinforce these steps:*
    - Walks near the potty
    - Touches the potty
    - Sits on potty with clothes on
    - Sits on potty with underwear on
    - Sits on potty with underwear for 1 minute
    - Pulls down underwear and sits on potty
  - *Extend time comfortable sitting on potty to 10-15 minutes*

# Rapid Toilet Training

# Rapid Toilet Training vs. Scheduled

- Rapid Toilet Training (RTT)

- *With this method, the majority of the day is spent in the bathroom (1 day to a week)*
- *Your child generally sits on the toilet until they void*
- *The interval of when your child is taken to the potty is systematically increased*

- Scheduled

- *With this method, data is collected regarding how frequently your child is voiding in a diaper throughout the day*
- *Your child is then taken to use the toilet at regular intervals throughout the day, sitting for a predetermined duration*

# RTT Procedure - Fluid Consumption

- Your child should drink extra fluids (e.g., lemonade and orange juice) prior to and during implementation of rapid toilet-training procedures
- Keep a drink close by at all times and your child should have free access (i.e., does not need to request the drink)
- Increased fluid intake results in frequent urination and more opportunities to practice bladder control
- Your child should also be provided with salty snacks (e.g., pretzels) during these times to increase the desire to drink



# Identify Reinforcers/Rewards

- What is a reinforcer?
- Popular suggestions:
  - *Special treat (e.g., jellybean, Hershey's kiss, a couple M&Ms)*
  - *Short YouTube video (with preferred characters, favorite song, etc.)*
  - *Favorite iPad app (limited to a few minutes)*
  - *Favorite toys (several minutes access to favorite sensory toy)*



# RTT Procedure - Beginning

- Your child should sit on the potty as much as possible during the hours that have been designated to follow this protocol
- Keep this fun by allowing your child to watch favorite DVDs and play with preferred toys (but not the designated reinforcer) while seated on the potty



# RTT Procedure - Beginning

- Your child may sit on the potty for up to a few hours before voiding during the first day or two
- Ideally, they should sit on the potty continuously until they void
- We want this to be a positive experience for your child, so if they need a break, allow them to come off the potty



# RTT Procedure - Reinforcement Tips

- Immediately after your child is done voiding in the potty, deliver lavish/exaggerated praise along with the designated reinforcer (e.g., a few M&M's)
- It's important not to give a praise statement while your child is voiding because it may startle them and interrupt the “flow”
- It is very important for the reinforcer to be delivered immediately after your child voids, meaning within ½ second
  - *Verbally label WHY the child is being given the reinforcer (e.g., “YAY! You went pee-pee in the potty!”)*



# RTT Procedure - Reinforcement Tips

- It is very important that for the days leading up to and during the toilet training protocol your child not be given access to the designated reinforcer
- We will quickly fade-out this reinforcer
  - *It will just be used initially, until your child begins to void consistently immediately upon being taken to the potty*
- In case your child becomes bored with the reinforcer, have a backup reinforcer on hand



# RTT Procedure - Reinforcement Tips

- The reinforcers should be kept out of your child's reach, but all adults implementing this protocol need to know where they are being stored
- Ideally, everything should be kept in one location so that everyone can go into the bathroom with a bag that has all of the goodies
- It's often helpful to store the reinforcer on a shelf in the bathroom to ensure that the item is quickly accessible
  - *This also allows the preferred item to serve as a visual “reminder” to your child as to what they will earn when they void*



# RTT Procedure - After Voiding

- Once your child has flushed the toilet, allow them to spend the next 5 minutes off the potty, bare-bottomed, in the playroom playing with you
- If possible, your child should continue to drink some fluids during this time
- After 5 minutes, return to the potty to try for another void
  - *Note: we sometimes recommend different length breaks from the potty instead of 5 minutes*
  - *This is dependent upon a child's responses and affect during the first few hours of RTT*

# RTT Procedure - Breaks

- You will need to watch your child very closely during the times when they are off the potty
- If they start to do the "pee-pee" dance or other antecedent behaviors, ask them, "Do you need to go potty?" and rush them into the bathroom
- If they have already started to pee, say, "Wait, we go pee-pee in the potty," then quickly prompt them to the bathroom
- If your child is able to stop themselves and complete the void on the toilet, you may deliver praise and the designated reinforcer (because finishing the process successfully negates the initial accident)



# RTT – Moving On

- After your child is successful with self-initiating several times, you can move on to a less-intensive procedure:
  - *There is no need to push extra fluids*
  - *Take your child on a set interval and have them sit on the potty for 5-7 minutes*
  - *If they don't void, they can get up for another 30 minutes (or other chosen interval)*
  - *Continue to increase the interval as long as your child is not having accidents*

# RTT - Sample Data Sheet

	4/9/15	4/9/15	4/9/15	4/9/15	4/9/15	4/9/15	4/9/15	4/9/15
Accident before trial?	n/a	Yes	No	No	No			
Self-initiated	No	No	No	No	No			
Time child begins to sit on potty	9:00	9:18	9:23	9:38	9:45			
Duration of sitting prior to voiding	15 m	2 s	10 m	2 m	2 m			
Time of void	n/a	9:18	9:33	9:40	9:47			
Target duration of break	5 m	5 m	5 m	5 m	10 m			

# Scheduled Procedure

- After collecting baseline data, determine about how often your child is voiding
- Begin to take your child to the potty slightly before this interval
- Ideally, your child should sit on the potty until voiding (avoid a situation where your child gets up from the potty and immediately has an accident)
- However, you can also have your child sit for 5-7 minutes and get up if they did not void



# Accidents

- Any time you notice your child starting to have an accident:
  - *Rush child back onto the toilet*
  - *Use a verbal statement such as, “Pee/poo in the toilet”*
  - *Follow any completion on toilet with positive reinforcement*
- Following an accident, child may stay off toilet until next scheduled time





# Scheduled Procedure - Data Sheet

- Collect baseline data for a few days

<b>Date:</b>					
<b>TOILET TRAINING: BASELINE DATA</b>					
<b>Food/Liquid Intake</b>					
Time of Day					
Type/Amount Consumed					
<b>Pants Check</b>					
Time of Day					
Wet or Dry?					
Time of Day					
Wet or Dry?					
Time of Day					
Wet or Dry?					
Time of Day					
Wet or Dry?					

# Scheduled Procedure - Data Sheet

Date:

--	--	--	--	--

TOILET TRAINING					
Time of Day					
Wet or Dry Pants?					
Urinate					
Bowel Movement					
# Mins Seated on Toilet					

# Increasing Independence - Data Sheet

- Variation of a task analysis

Date:					
TOILET TRAINING					
Time of Day					
Walks to Toilet					
Pulls Down Pants					
Wet or Dry Pants?					
Urinate					
Bowel Movement					
Pulls Up Pants					
Washes Hands					
# Mins Seated on Toilet					
Affect While Seated					

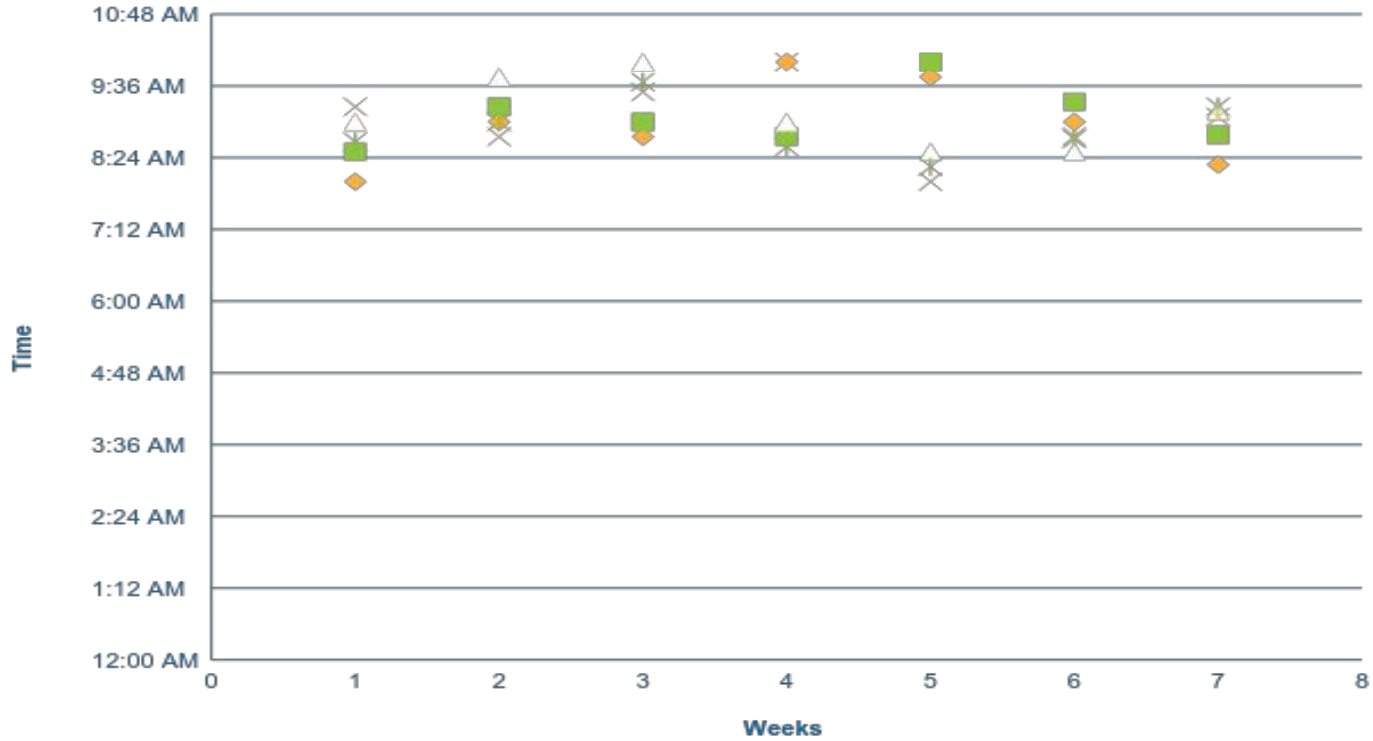
# Bowel Training

# Bowel Training

- Collect data
  - *Time(s) of day bowel movements are most likely to occur*
- Data collection can occur over several weeks
  - *Identify temporal patterns*
    - Scatter plot

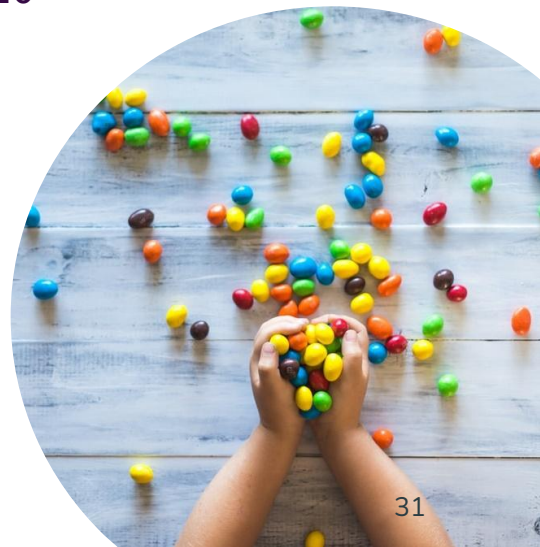


# Scatter Plot



# Bowel Training

- Similar to urination training, identify ONE STRONG reinforcer
- Prompt/take your child to the toilet 20 minutes prior to the time interval they are likely to have a bowel movement
- Have child sit on toilet and take breaks for alternating 10 minute periods
- If 10 minutes is not doable for the child, aim for at least 5 minutes
- Verbal interactions on toilet consist of:
  - *Friendly reminders*
  - *“Go poo poo in the toilet”*



# Bowel Training



- If a bowel movement occurs:
  - *Reinforcer should be delivered accompanied by behavior-specific praise such as, “Wow!! You pooped in the toilet!”*
  
- If a bowel movement does not occur:
  - *Prompt child to stand and look in the toilet*
  - *Say a phrase such as, “No poo, okay”*
  - *Child should be prompted out of the bathroom*



# Diet to Promote Bowel Training Success

- Foods that are rich in fiber help control constipation by retaining fluids in the stools, keeping them soft and easily passable
- Choose high fiber foods such as cereals, broccoli, sweet potatoes, spinach, cabbage, yogurt, apples, pears, prunes and apricots
- Fiber-rich meals will make potty training your child easier for both of you, but it's also a great way to introduce healthy foods into your child's nutrition



# Medication Information to Consider

- Consider any medications or supplements your child is already taking that may cause constipation
  - *If bowel movements continue to be infrequent or unsuccessful on the toilet, talk to your doctor about laxatives or other over-the-counter options*



# Night-time Training

# Night-time Training

- Is your child staying dry throughout the day with ease?
- Is your child waking up with a dry diaper the majority of the time?

✓ **Then they're probably ready!**

The physical ability to hold urine for long periods of time and the bladder-to-brain nerve signal strength that alerts a child to wake up to pee are both age dependent:

**66%** of kids under **three** years old have nighttime control

almost **75%** have it under the age of **four** years

# Night-time Training

- Accidents are going to happen and you're going to want to protect the mattress
  - *A few hours before bedtime, start limiting fluid intake*
  - *Usually this means no drink after dinner time*
  - *Absolutely have the child use the potty right before bedtime*



# Generalizations

- It's always best to toilet train in the bathroom they're going to use during their day
- Encourage day care providers/school to help generalize the toileting skills
- If accidents occur in community settings, consider using a positive reinforcement system (token system)
- Once accidents drop near to zero consistently (e.g., 1 or less accidents per week for 3 consecutive weeks) AND your child is on an appropriate schedule, they can return to their normal routine

# Summary

- ● ✓ Toilet training is not easy
- ● ✓ It takes time, effort, and consistency
- ● ✓ Remember to be patient!
- ● ✓ Do not be afraid to get help
- ● ✓ It doesn't just happen, it's a learning process!
- ●
- ●
- ●
- ●



# Resources

- [www.projectpottytraining.com](http://www.projectpottytraining.com)

- [www.autismspeaks.org](http://www.autismspeaks.org)

- ◦ *Phat, A. & Cicero, F. (2002). Reinforcement-based toilet training, ABA convention workshop.*

- [Brazelton, T.B., Christopherson, E.R., Frauman, A.C., Gorski, P.A., Poole, J.M., Stadtler, A.C., Wright, C.L. \(1999\). Instruction, timeliness, and medical influences affecting toilet training. \*Pediatrics\*, 103, 1353-1358.](#)

- [Coyne, P. Toilet training children with special needs. Coyne & Associates Group, a Psychology Group](#)



# Review Questions / Comments

Schedule an  
**ABA Therapy Enrollment Appointment** at:  
[kyocare.com/enroll](https://kyocare.com/enroll)

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