Solihull Approach Fostering and Adoption: Handout

Handout for carers and adoptive parents Toilet training: a child's perspective

Look, I can pull my pants up and down myself.

The toilet is scary; it's a big hole and makes a noise.

I've only just started walking. I find it hard to squat.

If my poo's horrible, am I horrible?

Why don't they understand what I'm saying? Ooh too late!

I don't want to use a potty. I'm a big girl – I want to use the toilet like Mummy and Daddy.

The toilet/potty is too far away; I'll never get there in time.

It's dark in here – I can't reach the light.

Everyone is clapping – aren't I clever?

Don't take my nappy off; it's soft and warm and it catches everything that's mine.

My Mummy/Daddy looks upset, but at least they are with me now.

My poo will get lost down there – I'll hold on!

I'd rather carry on playing than bother with the toilet.

I like my potty. I helped to choose it.

It hurt last time I went; I'll hold on to it.

Why are they all watching me? I want some privacy behind the settee.

You said these are pants. They feel like nappies.



Handout for carers and adoptive parents Toilet training: a carer's perspective

My mum had us all potty-trained at 18 months. What's wrong with my child? He must be naughty.

He's doing it to get at me.

I can't wash one more pair of pants.

She's asking for a nappy like the baby.

My friend's child can do it and she's 6 months younger.

If he can use the toilet once he can do it again. He must be doing it deliberately.

He just stood there and pooed his pants in the supermarket. It was so embarrassing.

I get so angry when she does. I know it doesn't help.



Handout for carers and adoptive parents Toilet training – Wetting and soiling

When using this handout it may be helpful to consider the following questions:

- 1 What is the exact age and stage of development of the child or young person?
- 2 What changes have taken place in your lives recently?
- 3 How well can the child or young person communicate their needs to you?
- 4 Is there anything in the child's background that would influence their behaviour?
- 5 Is there anything in your background that would influence their behaviour?
- 6 What do you think the child's expectations are of you?

When thinking about the child's wetting and soiling it is important to think through any number of the possible underlying reasons.

A child comes to you with a history that is likely to have been difficult for them to manage. We can never be sure that a passing comment, something visual, a smell, a touch or a sound has not triggered memories from the past. We need to remember that early pre-verbal experiences affect us. We store emotional experiences in the brain even when we have no conscious memory in the first months of life.

Is the child feeling anxious? It may not be obvious, anxiety presents itself in many different forms and this may be the child's external way of expressing how they are not managing their anxiety.

Has the child had a recent move? It may feel like they have been living with you forever. A child who has experienced any move of main carer may not settle in what we as adults see as an adequate time frame. It is quite likely that a child may regress at any stage of placement.

Have there been any changes for the child at home, in school or change of routine?

Has the child experienced any loss because this will trigger any previous loss the child has experienced before coming to live in your family?

Have you experienced any loss or changes in your life? You may think that you have concealed this from the child. It is likely that the child will have picked up on something. Children who have experienced trauma in their life are very perceptive to any physical and emotional changes no matter how small or insignificant you think they are.

Think about all of the child's experiences. Imagine how hard it is for them to cope on a day-to-day basis fitting into a new family and new way of life.

There may be times when you think that you child is not doing so well but the reality may be very different.

The child may be managing their toileting the majority of the time and this is taking a lot of physical and emotional effort. The times when they lapse are possibly the times when their body is relaxed e.g. night-time or when they have no more physical/emotional energy to manage the situation.

Have there been difficulties with toileting in the child's past?

Has the child experienced neglect or chaotic parenting? This can have an impact upon the body's routines.

Children are inclined to wet themselves when feeling anxious or angry but they won't usually be able to tell you what is the matter. Talking to the child gently about their day may give you a clue as to what is upsetting them. Be mindful that a child may try to avoid talking about something if this is causing them to feel anxious. They could then display distress or anger.

Advice for carers – daytime wetting

Most children are ready to gain control of their bladder during the day somewhere between the ages of 2 and 3 years although this can vary in individual children. It is a big step in a child's life – toilet training is most likely to be successful when a child is emotionally and physically ready.

Although some children may go through the process of being toilet trained there may be times that they continue to wet during the day. This can happen for a variety of reasons either physical or emotional. If a child is unwell or has a urine infection you may find they are more likely to wet themselves. If you think that the reason may be physical it is advisable to seek medical advice.

Other reasons that children may wet themselves during the day are that they are worried or upset. It may be that the wetting is a sign that something, possibly an event or a change in their life is affecting them. You may take some time to work out what is worrying them but in that time they will be less stressed if you are able to be calm and relaxed about the wetting.

Here are some helpful tips if a child is wetting in the day

• A child may worry how other adults or children will react to their wetting. It can be helpful to explain to the child that you will talk with a trusted adult and identify someone they can go to if they are wet or upset.

- Encourage the child to use the toilet at regular times although this does not mean they should sit on the toilet every hour. It can be helpful to suggest they sit on the toilet after main meals or after a snack.
- Daytime wetting can be a worrying time for a child and they may fear that they will be told off. You can help reduce their worry by being calm and explain that they are not 'in trouble' because of what has happened.
- Think about how much the child is drinking. In the day children need to drink a reasonable amount of fluid for their age so that their bladder recognises when it is full and needs emptying. It can seem like cutting down the fluid will stop the wetting but this is not helpful.
- Alongside going to the toilet it is helpful to check if the child understands the best way to wipe themselves, shake their penis or wash their hands. If the child has not been taught how to do it they may need you to teach them.
- Children may put off going to the toilet if using the toilet is not comfortable. So it can be useful to check they are able to sit on the toilet easily. Do they need a footrest or support seat. This will include toilets they may use regularly outside of the home.
- If the child is at school, nursery or childminder you may need to think about the type of clothes they are wearing. Are they easy to take off? Avoid dungarees and belts. You may need to send extra clothes and tell the child that you have done this, so they feel secure telling an adult who will help change their clothes.
- Becoming dry can take time and there may be times when it seems as though the wetting has stopped. If the child starts to wet again these are the times when you can remind them that you understand and that it will improve with time.
- Some children find it helpful to receive praise, along with a reward of some kind, such as a star on a chart or spending time with you reading a book. These may help the child make sense of the small steps they are achieving. It is important not to let the rewards become a punishment if they are unable to meet their goal. So you should never take stars away or refuse to read a book if it has already been promised.
- If you are able to remain consistent most of the time the child will be able to start to settle in to a pattern and will know what to expect. This can be helpful, for example if they go to the toilet regularly after a meal they are more likely to remember this as time goes by.
- Eating a healthy diet can also help the child in their general health.

If you think that the child's wetting is because of a physical reason such as an infection it is always best to seek medical advice before trying other approaches.

If you think that the reason for the wetting may be for another reason you may find the following helpful to think about.

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Handout for carers and adoptive parents Toilet training - What to do about bedwetting

When using this handout it may be helpful to consider the following questions:

- 1 What is the exact age and stage of development of the child or young person?
- 2 What changes have taken place in your lives recently?
- 3 How well can the child or young person communicate their needs to you?
- 4 Is there anything in the child's background that would influence their behaviour?
- 5 Is there anything in your background that would influence their behaviour?
- 6 What do you think the child's expectations are of you?

Bedwetting is more common than many people think and a lot more is known about it now than in the past. The majority of children will have become 'dry' at night by the age of 5 years however, there are some children who continue to wet the bed after this age and a few that will continue to wet into their teenage years.

What is wetting?

It is a lack of bladder control.

What causes it?

There can be a number of causes.

Can my child help wetting the bed?

No! Children who wet do not do it on purpose and are not naughty or lazy. It may be that something is worrying them or they could have a urine infection.

Is it common?

Yes. One in every six children starting school wet the bed. For children who have experienced loss and trauma it is very common.

Is it my fault?

No! All children are individuals and develop at their own pace.

Can it be cured?

Yes. Most children can be helped by giving them support and encouragement.

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Helpful hints

Do not take wetting personally. Many looked-after and adopted children experience wetting. Family and friends mean well but speak with your social worker because of the complexity of the child's emotional needs.

- A child should drink at regular intervals during the day.
- Milk or water is recommended.

At all times avoid

- Tea
- Coffee
- Chocolate flavoured drinks
- Fizzy pop
- Encourage the child to use the toilet before bed and again before going to sleep
- Praise the child for any dry times and ignore wet times.

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Handout for carers and adoptive parents **Toilet training – Soiling**

When using this handout it may be helpful to consider the following questions:

- 1 What is the exact age and stage of development of the child or young person?
- 2 What changes have taken place in your lives recently?
- 3 How well can the child or young person communicate their needs to you?
- 4 Is there anything in the child's background that would influence their behaviour?
- 5 Is there anything in your background that would influence their behaviour?
- 6 What do you think the child's expectations are of you?

Introduction

Soiling can be a very difficult experience for families. It can trigger a number of different emotions within the adults. Every child is unique with his or her own set of experiences. We would advise families to speak with their social worker about soiling. Soiling can range from a child not wiping itself properly to smearing or concealing dirty underwear.

- 1 Use a record or diary sheet of:
 - any medication taken
 - going to the toilet and the results
 - food and fluid intake.
- 2 Try for regular toileting, at least once a day at the same time.
- 3 Ideally the child should go the toilet 20 minutes after a meal, as this is the time they are most likely to be successful.
- 4 It helps if there is warmth and comfort. Allow the child privacy if this is his wish or stay with him if he prefers.
- 5 Provide a step for the child to push against, if he cannot reach the floor.
- 6 Even if a small stool is passed she should be encouraged to keep trying.
- 7 A child's toilet seat should be provided if the usual seat is too big.

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- 8 It helps if there are comics, books, favourite toys or music available in the toilet.
- 9 Try a warm drink after breakfast every morning it helps to trigger bowel action.
- 10 Make sure the child is eating sufficient fibre, ideally one fibre-rich food should be eaten at every meal.
- 11 Ensure that the child has an adequate fluid intake. Seek advice from your health visitor or school nurse to ascertain how much the child should be drinking each day.
- 12 Encourage the rest of the family to praise the child appropriately and offer support and help with filling in the record sheet.
- 13 Regularly review progress with your health visitor.

Adapted from Herbert (1996)

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Handout for carers and adoptive parents **Toileting chart**

This chart can be used to check whether and when a child is using the toilet. This can give you a better idea of how to help a child. It can then be used to track progress. You can change the chart depending on what is useful to you. For example, you could put the times when the child goes to the toilet.

	-	•	he times wh		_		
Name:				Red	cord begi	nning:	
Toilet sits	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
After breakfast							
After lunch							
After dinner							
Toilet sits	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
After breakfast							
After lunch							
After dinner							
Toilet sits	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
After breakfast							
After lunch							
After dinner							
	1	1					1
Toilet sits	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
After breakfast							
After lunch							
After dinner							

Key: / Sat on toilet

^{*} Sat on toilet and emptied bowel

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Handout for carers and adoptive parents **Toilet training – Bedwetting**

• It is a common problem; one in every six children starting school still wets the bed

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- Children can be helped with support and encouragement
- Do not punish a child for wetting the bed
- Encourage plenty of drinks at regular intervals during the day. Avoid caffeineloaded drinks and fizzy pops
- Promote good toileting habits during the day (bowels and bladder)
- Promote use of the toilet before bed and again before going to sleep
- Praise any dry nights
- Use a reward system for small steps such as drinking better, bedtime toileting.

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