

Toilet Training

One skill children need to learn is when and how to use the toilet. Here are general toilet training tips from the American Academy of Pediatrics to help parents and children begin the process. If your children have special health care needs, some tips may need to be modified. Contact your children's doctor if you need specific guidance. Also, in this publication, urine may be called pee, and bowel movements may be called poop or stools.

Learning to Use the Toilet

Toilet training is a process that involves the body and the mind.

- First, children need to be aware of their own bladder and bowel signals. They need to learn when their bodies are signaling them that it's time to urinate or have a movement. In general, children show signs of bladder and bowel control between 18 and 24 months of age.
- Second, children need to learn how to use the toilet. Children must be able to understand instructions and follow them. For instance, they have to be able to sit or stand comfortably. They have to be able to pull down their pants and underpants, as well as pull them back up.
- Third, once children have bladder and bowel control and they know how to use the toilet, they need to be willing to use it. Toilet training struggles happen when children choose not to use the toilet. It's important to remember that children can succeed at using the toilet but in their own time.

When to Start Toilet Training

Toilet training may come up during children's 18-month, 2-year, 2½-year, and 3-year well-child visits. The average age toilet training begins in the United States is between 2 and 3 years of age. Most children in the United States are bowel and bladder trained by 4 years of age. However, toilet training can begin as soon as parents and children want to start.

In general, here are signs a child may be developmentally ready to begin the toilet training process. If you have any questions or concerns, talk with your child's doctor.

- Is dry at least 2 hours at a time during the day or is dry after naps
- Shows signs they are about to pee or poop, like grunting, freezing, or squatting
- Can follow simple instructions

- Can walk to and from the bathroom and help undress themselves
- Does not like to be in wet diapers and wants to be changed
- Asks to use the toilet or potty-chair
- Asks to wear "big-kid" underwear

Toilet Training Tips

Here are toilet training tips to help start the process. Parents can help empower their children to be in control of their own toilet training.

- 1. **Keep the process positive.** Choose the words your family will use to describe body parts, urine, and bowel movements. Avoid words that are negative, like dirty, naughty, or stinky.
- 2. **Pick a potty-chair.** A potty-chair is a child-sized seat with an opening in the seat and a removable container underneath to collect pee and poop. Children'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 children see you use the toilet and wash your hands afterward.
- 4. **Know the signs.** When your children feel the urge to poop, you might notice grunting, squatting, or freezing. Children's faces may turn red while pooping. Explain briefly to your children that these signs mean a poop is about to come. If your children tell you about a wet diaper, praise them for "using their words." It may take longer for children to notice the need to pee than the need to poop.

© 2022 American Academy of Pediatrics. All rights reserved.

- 5. **Think of toilet training as toilet mastery.** Invite your child to take over their toileting. Talk with them about how they will now be in charge of their pee and poop. Read children's books about using the toilet to help the process make sense and seem inviting and exciting. When you start the process, try to turn as much of the care of toileting as possible over to your child. Remember, if parents are in charge, there is less room for children to step in and take charge.
- 6. **Make trips to the potty-chair a routine.** Routines are important, and practicing the steps is helpful. Make a habit of seating your children onto the potty-chair first thing in the morning. Boys can urinate by sitting down first and can stand up to urinate when better at it.
- 7. **Expect hesitancy.** Taking over toileting is a big step. Many children want their parents to take care of their pee and poop and may seek ways to keep parents involved, such as peeing and pooping into their pants. Gently help them overcome their hesitation. Then help them stay in charge by having them be in charge of the cleanup.
- 8. When toilet training starts, switch to big-kid underwear. Talk with your children about taking control and toileting into the toilet and not their underwear. Some parents may use cloth training pants, which are a little thicker, to protect children's clothing. (Diapers and disposable training pants send a message to children that they are not taking over and do not need to learn to use the toilet.)
- 9. **Teach your children proper hygiene habits.** Show your children 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 their rectum to their vagina or bladder. Make sure both boys and girls learn to wash their hands well after using the toilet.
- 10. **A word on praise.** Taking over toileting is something all healthy children do. Achieving mastery is the best reward for toilet training success. Avoid treats and punishments. Because this is an adventure for your children—a reach for new responsibility—treats and punishments distract rather than encourage. When your children succeed, be specific about why you are proud—"I am so proud you are able to use the toilet so well," for example.
- 11. **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 so by holding back bowel movements. Try to stay calm about toilet training. Remember that children control when and where they pee and poop. So power struggles, begging, pleading, rewarding, and punishing keep children from managing their own toileting.
- 12. **Understand their fear.** Some children believe that their pee and poop are part of their bodies. They may be scared the toilet will flush parts of them away. Some may also fear they will be sucked into the toilet if it is flushed while they are sitting on it. To give your children a feeling of control, let them flush the toilet.
- 13. **Watch for a desire to move up.** Most of the time, your children will let you know when they are ready to move from the pottychair to the "big toilet." Provide a stool to brace their 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 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. 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. If your child needs additional care, your child's doctor may suggest another pediatric health care specialist who can address the specific pediatric needs of your child.

The American Academy of Pediatrics (AAP) is an organization of 67,000 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists dedicated to the health, safety, and well-being of all infants, children, adolescents, and young adults.

In all aspects of its publishing program (writing, review, and production), the AAP is committed to promoting principles of equity, diversity, and inclusion.

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.





© 2022 American Academy of Pediatrics. All rights reserved.

Healthy Minds:

Nurturing Your Child's Development from **24 to 36 Months**

What do we really know about how a young child develops? What can parents do to best support their child's healthy development and growing brain? Some of the answers are in this series of *Healthy Minds* handouts. Each handout is based on findings from a report* from the National Academy of Sciences that examined the research on child and brain development to establish what is known about the early years. The information we offer is age-specific, summarizes key findings from the report and suggests how you might be able to use these key findings to nurture your own child's healthy development.

These handouts are brought to you by ZERO TO THREE, the nation's leading resource on the first 3 years of life, and the American Academy of Pediatrics, dedicated to the health of all children.



Key findings

from the report include:

- Your relationship with your child is the foundation of his or her healthy development.
- Your child's development depends on both the traits he or she was born with (nature), and what he or she experiences (nurture).
- All areas of development (social/emotional/intellectual/language/motor) are linked. Each depends on, and influences, the others.
- What children experience, including how their parents respond to them, shapes their development as they adapt to the world.

How it looks in everyday family life:

Thirty-month-old Anthony wants to build a castle with his mom, Lena. They are almost done when Anthony begins to take it apart, block by block, and arrange the blocks in a straight line.

Annoyed, Lena starts to pick up the blocks and put them back on the castle. Anthony starts to cry and tell his mom that she is not doing it right. Lena stops and asks Anthony what he is doing. Surprised that his mom isn't "getting it," he explains that he is building the path so the dragons can find their way to the castle. Lena smiles and watches as he completes his "dragon path."

This shows how all areas of Anthony's development are linked and how his mother's response encourages his healthy development. Anthony's ability to play cooperatively with his mom, not just side by side, demonstrates his **social and**

emotional development. His intellectual **ability** now enables him to pretend as he uses his imagination to play "castle." Using blocks in new ways, such as building a path for his dragons, shows creativity and good problem-solving skills. He uses his **language skills** to clearly let Mom know what he's thinking and planning. He uses his fine motor skills (his fingers and hands) to build the structure that he's picturing in his mind. When Lena happily joins in Anthony's pretend play, she makes him feel important and loved. She is flexible as she is able to put aside her annoyance and try to understand what Anthony wants to do. This lets Anthony know that he is appreciated and respected. It also leads to Lena letting Anthony direct the play, which encourages his creativity and imagination, 2 very important aspects of overall healthy development.

Relationships are the foundation of a child's healthy development.





Charting Your Child's Healthy Development: **24 to 36 months**

The following chart describes many of the things your baby is learning between 24 and 36 months and what you can do to support your child in all areas of his development. As you read, remember that children develop at their own pace and in their own way. Understanding who your child is, what his strengths are and where he needs more support, is essential for promoting his healthy development. If you have questions regarding your child's development, ask your pediatrician.

9 91 1		
What's going on:	What you can do:	Questions to ask yourself:
Two-year-olds typically can speak between 200 and 250 words. By the age of 3 years, their vocabulary is much larger still and they are able to put together 3- and 4-word sentences. Despite all this word power, 2-year-olds often lack the verbal skill to describe their emotions. This can leave them feeling powerless and frustrated.	 Have lots of conversations with your child. This will boost his language skills, introduce him to the pleasure of conversation and make him feel important. Also, read with your child as often as you can. Let your 2-year-old know that you understand what he's experiencing by saying, for example, "I know you are upset that you can't find your magic cape." Acknowledging his feelings will help calm him and make it easier for him to tackle the challenge. 	 What does your child like to talk about? How do you and your toddler enjoy conversations together? How does your child manage difficult feelings and situations? What helps him cope?
Play is essential for the 2-year-old. It builds all areas of his development. Through play, he interacts more with friends, uses pretend play to understand things in more complex ways and learns important concepts such as big and small and up and down.	 ◆ Encourage pretend play and get involved. This will build a strong connection between you and your child, and can help encourage creativity. You can do this in many ways. For example, ask what will happen next in the story he is acting out. If he is "cooking," you might say, "What are you cooking? It smells good. Can I have some?" ◆ Make plans for your child to spend time with other children. He will learn about the pleasure of making friends. And the more opportunity he has to interact with peers, the more he will learn about how to get along well with others. 	 What kind of play does your child most enjoy? How do you know? What does this tell you about him? ◆ How does your child use his imagination? What do you think he is learning through his pretend play?
Two-year olds are very active. Their motor development allows them the freedom to explore in new ways as they run, jump and climb.	 Spend time outside, where there is plenty of room to safely run, jump and climb. Visit a neighborhood park where there are other children to play with. Include your child in family sports, like swimming together or kickball. Create a safe place in your home where your child can actively explore. Take walks with your child and use them as opportunities to teach him important concepts such as big and small as you compare the houses on your block or the leaves on the ground. 	 How active is your child? Does he seem to be in constant motion or is he happy to sit and play quietly for long periods, or somewhere in between? What do you think your child is learning when he is playing actively? How do you know?

*The report, From Neurons to Neighborhoods: The Science of Early Childhood Development, was a 2½-year effort by a group of 17 leading professionals with backgrounds in neuroscience, psychology, child development, economics, education, pediatrics, psychiatry and public policy. They reviewed what was known about the nature of early child development and the influence of early experiences on children's health and well-being. The study was sponsored by a number of federal agencies and private foundations.





DISCIPLINE IS HOW PARENTS TEACH THEIR CHILDREN

- Praise success and good tries.
- Be clear and consistent about what you expect.
- Listening is important; let your child finish the story before helping to solve the problem.
- Praising your child for good behavior works most of the time, but you will still need to set limits.
- Sometimes a time-out is needed for either you or your child.

Il children want to be good and please their parents, but they need to learn how. Young children view the world as "good and bad" or "right and wrong"—nothing in between.

Teach your child right from wrong with words and actions. Children need to know when they do something bad and when they do something good.

Praising your child will encourage good behavior and reduce bad behavior, but part of a parent's job is to correct bad behavior.

TEACH ALL THE STEPS

What seems simple, like getting dressed in the morning, has many steps for children. If your child "can't" or "won't" do something, it may be that your child still needs to learn the steps.

Explain the steps one at a time and then offer praise.

For example,

- 1. "Please get your clothes. They are on the bed."
- 2. "OK, now take off your pajamas."
- 3. "Now, put on your shirt."
- 4. "You look very nice today. You did a good job getting dressed."

Take time to remind your child about each step rather than doing it yourself or getting upset. It will take longer at first, but it is well worth it! Learning new skills makes your child more confident.

C/BE

CATCH YOUR CHILD BEING GOOD

Watch for good behavior like listening to you, being polite, and helping others. Praise good behavior as often as possible. You can even praise a good try!

- "Nice tower. Look how high you built it!"
- "Good sharing. I love it when you play so nicely with your sister."

Your love and attention are what your child needs and wants. But sometimes children learn that the way to get attention is to misbehave. Teach your child that being good is the best way to get your attention. Praise with words, but remember that a hug or a smile is often just right!

Children love to help. A good way for your child to get your attention is by helping with chores like folding laundry, setting the table, or assisting with simple repairs. Smile and say, "Thanks for your help!"



Children think they are special, and they are! Self-respect is the first step toward learning how to respect others. Children who are loved feel that they are special and learn that other people are special too. It's okay to say,

"You're a great helper!"

■ "Good job!"

When children are doing "I like it when you...



Nobody is perfect; that's why patience is needed. When your child needs to be corrected,

- 1. Name the bad behavior.
- 2. Tell your child that the behavior needs to stop. "No hitting! That's not nice."

While children respond best to praise for good behavior, sometimes other types of discipline are needed.

TIME-OUT—Setting limits for 2- to 5-year-olds When saying "no" is not enough, try using a time-out. It teaches your child that misbehaving is not a good way to get your attention and it stops the bad behavior. When the time-out is over, you and your child can start all over again.

Steps for giving a time-out are:

- 1. Warn your child: "If you don't stop, you'll have a time-out."
- 2. If your child misbehaves again, briefly explain the reason. For a 2-year-old, simply say, "No hitting."
- 3. Have your child go to a quiet place, like the corner of a room.
- 4. Start the timer—1 minute for each year of age.
- 2 years old = 2 minutes
- 3 years old = 3 minutes
- 4 years old = 4 minutes
- 5 years old = 5 minutes

If your child leaves the time-out area,

- Have your child go back.
- Restart the timer.
- Explain the need to "stay put" until it's over.

Other adults caring for your child (grandparents, baby-sitters, aunts, and uncles) also need to know how a time-out works.

Other Ideas

Time-outs can be used too much. Other ways to correct your child's behavior include:

- Ignoring. When your child is doing something that is not dangerous to get your attention. try ignoring the behavior.
- Redirecting. Sometimes children misbehave because they are bored or don't know any better. Find something else for your child to do.

Correcting a child's behavior can be hard. Talk with your pediatrician for more ideas.



SET CLEAR **RULES**

Help your child learn the rules by making them plain. "It's time for bed sweetheart. Please get in your bed now. Then we can read a story. I'm glad you got ready for bed so quickly. I love reading to you at night."

Children will almost always test a new rule for the first few days. Hold fast; say it again and again and your child will learn the new rule. Be consistent, even when it seems like a lot of trouble!



LISTEN TO YOUR CHILD

Children are learning and experiencing many new things every day, and they want to share them. Spend time every day playing and talking with your child. Talk about the good and fun parts of the day as well as any bad or tough times.

If your child had a hard time,

- 1. Listen to the whole story. Without judging or talking about how to behave, let your child finish telling the entire story.
- 2. Find positive parts of the story to praise.
- 3. Teach better ways of behaving and responding.

Questions you can ask at dinner or bedtime include:

- "Tell me about what you did today."
- "What was your favorite thing that happened today?"
- "Was there anything that was hard or that you needed help with today?"

WHEN YOUR CHILD MAKES YOU ANGRY

Sooner or later, all parents get frustrated. Remember that no matter how difficult your child can be, you are the most important person in your child's life.

If you feel out of control, first make sure your child is in a safe place, like a playpen, crib, or bedroom. Then take a "time-out" for yourself.

Do something that you find relaxing to help you calm down.

- Have a cup of tea or coffee.
- Listen to music.
- Call a friend or spouse.
- Read.
- Meditate.



Feeling stressed out is natural and it will pass. When you are feeling better, go back to your child, hug each other, and start over again.

If your child is old enough, you can simply say, "I got really mad when you wouldn't listen. I'm feeling better now. I love you."

When you raise your child with praise, you will both be happier. But it takes a lot of patience and time!

Connected Kids are Safe, Strong, and Secure

Graphic design and illustrations by Artists For Humanity, a non profit arts and entrepreneurship program for Boston teens.

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.

The American Academy of Pediatrics 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.

This project was supported by Grant No. 2001-JN-FX-0011 awarded by the Office of Juvenile Justice and Delinquency Prevention, Office of Justice Programs, U.S. Department of Justice. Points of view or opinions in this document are those of the author and do not necessarily represent the official position or policies of the U.S. Department of Justice. Adapted with permission from the Massachusetts Medical Society's "Raise Your Child with Praise" Parent Education Card, Copyright 2000.

HE50385

American Academy of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN™





AGES 2-3

The following are guidelines for a 2 to 3 year old child. A child's calorie needs vary depending on activity level and appetite. For more specific nutrition information, talk with your physician or IHA Nutrition Specialist.



DAIRY

Amount per day:

4 SERVINGS

One serving looks like:

½ cup low fat or fat-free milk

½ cup low fat yogurt

½ cup soy milk

½ ounce cheese



GRAINS

Amount per day:

6 SERVINGS

One serving looks like:

 $\frac{1}{3}$ to $\frac{1}{2}$ cup dry cereal

1/4 to 1/2 cup cooked cereal

1/4 to 1/2 slice bread

1/4 to 1/2 bagel or roll

 $\frac{1}{4}$ to $\frac{1}{3}$ cup rice, pasta, potatoes

2 to 4 whole grain crackers



PROTEIN/ MEAT

Amount per day:

2 SERVINGS

One serving

One serving looks like:

I to 3 Tbsp meat, poultry, fish or tofu

1/4 cup cottage cheese

I egg

I Tbsp peanut butter

¼ cup cooked beans



FRUIT

Amount per day:

2-3 SERVINGS

One serving looks like:

½ small piece fresh fruit

2 Tbsp dried fruit

¼ to ⅓ cup canned, cooked or fresh chopped fruit

¼ to ⅓ cup juice



VEGETABLES

Amount per day:

2-3 SERVINGS

One serving

looks like:

1/4 to 1/3 cup cooked, canned or chopped fresh vegetables

1/4 cup raw, leafy vegetables

¼ to ⅓ cup juice



FATS

Amount per day:

3 SERVINGS

One serving looks like:

I tsp oil, margarine or butter

2 tsp salad dressing

 $\frac{1}{8}$ avocado

IHAcares.com

SAMPLE MEAL PLANS

AGES 2-3

These meal plans are designed as a guide for you in planning well-balanced meals. Well-balanced, nutritious meals include complex carbohydrates, lean protein, fruits, vegetables & healthy fats. Children this age should have two to three snacks between meals. See snack sheet for suggestions.

BREAKFAST	LUNCH	DINNER
½ pancake	¹/₃ cup macaroni and cheese	I – 2 Tbsp chopped chicken
I tsp margarine or butter	½ of a small piece of fruit	5 steak-type baked sweet potato fries
½ cup berries	½ cup chopped veggies	½ cup milk
½ cup milk	½ cup milk	½ cup canned, unsweetened fruit
'/3 cup cereal (4 grams of fiber or more per serving)'/4 medium banana'/2 cup milk	I-2 Tbsp mashed beans '4 cup cooked vegetables '4 cup sliced strawberries '2 slice bread '2 cup milk	I-2 Tbsp chopped chicken 1/3 cup mashed potatoes 1/2 cup steamed green beans 1 tsp olive oil 4 oz yogurt 1/2 cup milk
½ cup oatmeal ½ cup canned chopped peaches ½ cup milk	½ grilled cheese sandwich ½ cup milk ¼ banana	I to 2 Tbsp chopped beef 1/3 cup sweet potato with I tsp margarine 1/2 chopped fresh fruit
½ waffle with 1 tsp margarine ½ cup applesauce ½ cup milk	1/2 whole wheat english muffin 1/4 cup mozzarella cheese 2 Tbsp pizza sauce 1/2 of fresh orange (sections) 1/2 cup milk	Beef fajita (grilled peppers & onions, I to 2 Tbsp steak, I Tbsp light sour cream, 2 Tbsp salsa, ¼ cup shredded cheese, I whole wheat or whole grain tortilla) I kiwi cut into slices with ½ cup vanilla ice cream Water
4 oz low fat yogurt ½ slice whole wheat toast with I tsp margarine or butter ½ cup milk	½ nutbutter (peanut/sun/almond) and jelly sandwich ½ small apple, sliced and peeled ½ cup milk	I slice small cheese pizza I cup salad greens with I Tbsp salad dressing 1/4 cup dried cherries Water
I egg scrambled ½ piece whole wheat toast I tsp margarine or butter	½ turkey sandwich ½ cup steamed green beans ½ cup milk	1/3 cup spaghetti with sauce I small meatball 1/2 cup steamed broccoli and carrots
½ cup milk	1/4 small banana	½ cup milk