
Clean and dry

Toileting and young children.

This article is based on the notes taken at the Emmi Pikler Institute in their level one Summer School 2004. This session was led by the paediatrician Dr Judit Falk (who headed the Institute after Dr Pikler herself), in the presence of child psychologist Anna Tardos, daughter of Dr Pikler and current director of the Emmi Pikler Institute.

Putting 'clean and dry into an historical and world context:

Comparative studies of cultures and toilet training show that all cultures do not toilet in the living area. Although this seems self evident, it isn't. Many people set up the potty in the living area.

In Western society up to 1900 there was a permissiveness around children's toileting at all societal levels. That changed to rigid 'performance orientated' practices, based on behavioural conditioning (and conditioning of the sphincter muscle) in the 1920's - 1930's. Toileting then became one of the biggest areas of conflict between adults and infants-toddlers, and for many parents, it remains so to this day.

In the middle of the 20th century there was a relaxing, with a more permissive approach to children becoming clean and dry. This was due to developmental theories. Independent toileting depends on *maturation*, and is best delayed until there is voluntary control of the *neuro-muscular system*.*

When adults end up in therapy, at the root of the disturbance most often there will be forced feeding and forced pottyng. These are two fundamental assaults on the child's being. The choices for parents are rigid or permissive, earlier or later, imposed or voluntary, and forced feeding and toileting is rigid, earlier and imposed. That combination will lead to psychological distortion. Citing research out of the States: 80% of children are placed on the pot two years before they achieve control. [Think of the time taken from normal child development, time sitting on the pot instead of doing other things.] Most babies achieve voluntary control between 24 and 36 months, 98% by 36 months.

The research by the Emmi Pikler Institute research shows that the closer the beginning of the training is to the physical-psychological maturation of the child, the less upset for the child, the less time to achieve 'clean and dry', and the less need for severity. Because the adult has waited for the cues from the child, the training is another step towards independence.

Looking for the signs that lead to voluntary, successful toileting:

You are looking for signs of neuro-muscular maturation and psychological maturation, signs that tell you the child is ready to achieve voluntary toileting - quickly, without trauma, and even enthusiastically. The signs you are looking for for successful toileting-without-trauma are every bit as much to do with the unfolding of autonomy and ego function as they are to do with physical maturation. That is why 98% of children have achieved 'clean and dry' by 36 months, 36 months technically marks the end of infancy.

- The child will be able to refer to herself in the first person singular. She will talk about herself as "I", "I am going to the kitchen." "I want to climb up there." When a child can stand firmly in the "I" she can undertake to make decisions from that place, voluntarily. ("I do it" - not in the third person as in "Rachel do it.")
- The child himself has three signs that he learns to recognise, signs that signal his progression towards voluntary

* [Elimination Communication:

*This is different from the parents who are 'doing' elimination communication. In many cases when parents say they are doing elimination communication with their child, they aren't. They tune-in from the head - conscious and cognitive. Indigenous Mothers, however, tune in with their intuitive senses; they themselves can **feel** when the baby wants a pee, and hold them out, with 100% accuracy. No holding out in vain. Many people practising elimination communication are actually 'potty training by another name'. The result of their practice is conditioning, and not voluntary control.]*

toileting:

1. First he has to realise that he *has done* a pee or a poo. This is the first step, becoming aware of the end step in the bodily function of toileting.
2. Next, he becomes aware *as he is doing it*. This is a big step in maturation, to be aware of the bodily function as it is happening. Not understanding this some adults get very annoyed at this stage instead of seeing it as the progress it is.
3. Lastly, the child has to become aware of the feeling of *wanting to do it*. This is a much more subtle sensation, and when children reach this stage, they are ready to decide for voluntary toileting.

Guidelines for successful voluntary toileting

If toileting is going to be voluntary, then there are some pointers and behaviours on our part that lead to success.

I decide when

- If nappy changing has always been a pleasurable experience for the child** (and it is for every nappy change for every child at the Pikler Institute), then the child needs to **decide to give up the comfort of the nappy**. Maturation dictates that he *will* give up the comfort of the nappy and decide, in his own timing; in much the same way that you decide when you are ready to leave the comfort of the familiar to try something new.
- When he decides, he has decided for the more difficult behaviour and he needs your support in gaining mastery.
- When the *child* decides, they know how. They don't decide until they know how, therefore it is unnecessary for you to teach, practise or train. It is your support they require.
- To support, your child needs to feel your security (not your anxiety, and certainly not your frustration) while they undertake to gain mastery in their chosen pursuit of becoming clean and dry.
- Becoming clean and dry is another milestone in development, and like every other milestone, it doesn't need to be rushed.

Pointers to keep in mind...

- The potty is not a duty, it is a *right* and the child decides when she is ready. Children have to **want** to move to the next stage. It is that internal motivation that brings success.
- Focus **not** on the potty, but **on the need to pee**.
- **Never** place the child on the potty, or tell them to get on it.
- Offer the potty with the invitation, "Do you need to have a pee?"
- Offer the potty when **they** show an interest, **not** when you think they should.
- The potty is **not** for sitting on, it is not a comfy seat. It is **only** for going on.
- Watch how you speak about toileting:
 1. Speak about "clean and dry" not toilet training
 2. Do not shame children: "You're a big boy now." "Jane is out of nappies already." "Look at John, he can already go all by himself." This is the most corrosive of behaviours from adults, one that damages the child's sense of self and leads to held trauma.
- Nearly every child will experience the "poo poo shock" when they first become aware of having done their 'first' poo. For some that can mean they go back to the nappy for some time - it can be weeks - and then the desire for independence asserts itself again and they go on to mastery of their toileting.



** Go on line and look for "Rethinking the Nappy" by Miriam McCaleb. Her article looks at the nappy and nappy changing in an entirely different way.