

# Top ten tips for children with Down Syndrome or learning disabilities



## 1. How will I know when my child is ready to toilet train?

Many families delay starting toilet training as they have been told or they believe their child is not ready, although there is no agreement as to what 'readiness' means. Children need to develop a set of skills for them to be toilet trained. Many of those skills do not come naturally, so must be taught.

Toilet training should never be delayed because a child does not appear to have all the skills needed. Instead, a step by step programme should be put in place to help the child learn the skills. By putting skill development programmes in place as early as possible, we can make sure all children are 'ready' to be toilet trained.

## 2. When and how should I start potty training my child who has learning disabilities?

- Start as early as you can. If possible, introduce sitting on the potty when your child is about 9 months old, or as soon as you can if they are older than this. By 9 months old weaning should be well established and poos may be more predictable. If your child has poor balance, they may need the support of a potty chair. If this is the case, speak to their OT.
- Always change your child's nappy in the bathroom, if possible. This helps your child understand that this is where wees and poos should happen.
- Tip any solid poo into the toilet. This will help your child learn that poos should go in the toilet.
- Change your child's nappy with them standing up when they are steady on their feet. This allows your child to get more involved with the process.

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- Get your child used to sit on different potties and toilets. This helps your child understand that they can use different toilets/potties and prevents problems with them not wanting to use somewhere different when you are out.
- If your child is reluctant to sit on/use the potty put an open nappy over it. Your child is used to using a nappy so they may not recognise that the potty is where they should now do a wee/poo. A nappy over the potty is familiar and makes them feel safe.
- Use a timer, such as one on your phone, to slowly increase the time your child spends sitting on the potty or toilet. You can set the timer for a very short time to start with (e.g. 10 seconds) and show your child that they can get off the potty or toilet when the bell rings. Slowly increase the time they sit.
- Use praise and rewards to help your child want to work with you on toilet training. Lots of praise or a very small reward for using the potty will encourage your child to want to sit the next time you take them to the potty or toilet.
- Use cotton pants when you start formal toilet training. These allow your child to feel wet if they have an accident. This is part of the learning process. Disposable nappy pants feel the same as nappies and may not help them to understand that they should now go on the potty or toilet when they want a wee or poo.
- Be consistent: Once you have started don't give up. It is important that the toilet training is done the same way at home, nursery/school, with family or in respite. Everyone needs to approach it the same way, or your child might get confused.

## 3. How often should my child sit on the potty or toilet?

The bladder is like a balloon. It stretches to allow it to hold a good amount of urine (wee). It does not fully mature until your child is about 5 years old, and even after that it needs to be used to holding a good amount of wee to work well. Therefore, it is important not to encourage your child to wee too often.

As your child matures and begins potty training the bladder needs to experience getting fuller. It needs to be stretched and reach its full size

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It is only when the bladder is being stretched that signals are sent to the brain to say, 'you need a wee'. The fuller the bladder the stronger the signals. So it's really important that your child experiences a full bladder.

When your child is wearing nappies, and not being taken to sit on the potty or toilet, the bladder fills regularly and empties when it becomes full. If children are taken to the toilet/potty too often they may be encouraged to empty their bladder before it is full.

Some children can do a small wee every time they are taken, but this does not allow the bladder to stretch. Therefore it does not send the 'you need to wee' signal to your child's brain. As a result, your child will not learn to recognise those signals, realise they need a wee and learn to self-initiate (take themselves to the potty or toilet). Also, if they empty their bladders too often, the bladder becomes smaller and less able to hold a good amount of wee.

When introducing regular or timed toileting it is a good idea to do a baseline assessment (keep a record of when your child is having a wee – see step three of the toilet skill development programme) to see what your child's bladder filling and emptying cycle is. This can then help you know how often your child should be taken to the potty or toilet.

## 4. When should I take my child to the potty or toilet?

You need to aim to gradually increase the time between your child's potty visits.

From conducting the baseline assessment, you should have an idea about how long your child can go between wees. Use this to know how often to take them. If they can hold a wee for 1 hour, then gradually extend the time between potty visits to 1 hour 15 mins, then to 1 hour 45 minutes etc. All the time the bladder is maturing/stretching which will start to send the 'I need to wee' signal to the brain.

You are aiming for little one to be able to recognise a full bladder and then empty it completely. If taken too often, before their bladder is full, they will not learn to recognise that signal.

They will need your help to increase times in between wees to make sure the bladder is stretched to full capacity. We all know the 'I'm bursting feeling' – encourage visit just before that.

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## 5. Once toilet training is established how often should my child have a wee?

As your child grows, so does their bladder. It will get gradually bigger until it reaches its full adult size when they are about 14 years old.

To work out how much your child's bladder should hold, (their expected bladder capacity or EBC) you can use the following equation: Your child's age in years x 30 + 30 = EBC. E.g. if they are five years old this will be:  $5 \times 30 + 30 = 180\text{mls}$ .

Most children wee 4-7 times each day. If children are weeing more or less than this, speak to their healthcare professional. They may need an assessment to make sure there are no underlying problems such as constipation.

However, how often children wee is affected by how much they drink.

Toddlers should be drinking about 1000 – 1200mls per day, pre-school and primary aged children should drink around 1,200 -1,500mls per day and older children need to drink more. All children should have about 6 – 8 drinks each day but some children need to build up to that. Encourage full drinks at set times during the day, not just little sips, as this helps to increase bladder capacity and helps you predict when your child is likely to need a wee (children tend to wee around 15-20 mins after a drink). For further information about drinks see top tip 8– Encouraging drinks.

## 6. How long should my child sit on the potty for?

Your child should sit on the potty or toilet for about one minute for each year of their age. For example, a 2-year-old should be able to sit on the potty for up to 2 minutes. They should be able to sit for long enough to do a wee and a poo.

Don't leave your child sitting on the potty or toilet for extended periods (15-20 minutes).

Do not force your child to sit if they are reluctant. Instead, you could introduce sitting with their clothes on first, then with just their nappy on, then without their nappy. Every time you sit your child on the potty, do a play activity with them that they enjoy, such as singing songs or looking at a favourite book.

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If your child will sit, but wants to get off straight away encourage them to sit for very short periods e.g. 30 seconds, and gradually increase the sitting time.

Children like things they can see or hear, so try using a timer can , such as a kitchen timer or timer on your iPad/phone and encourage your child to sit until the timer goes off.

It is better to have frequent short potty sits rather than one or two long potty sits. So, if there is no success when your child has been sitting for the suggested time, even if you know that a wee is due, then take them off the potty or toilet and say, 'we'll try again later'. You could then put them back on 5-10 minutes later to try to catch a wee. Keeping a record will help adjust any timings if necessary.

If your child will not wee or poo when they are sitting on the potty or toilet, this may be because they do not recognise this as the place here the wee or poo should go. Putting an open nappy on the potty or toilet and then sitting your child on the nappy can help them get used to going on the potty or toilet. Trickling warm water between their legs, while they are sitting on the potty or toilet can also sometimes help them to start weeing.

## 7. What should I do if my child starts/stop wees when I take their nappy off?

When you remove your child's nappy may find that they start to have lots of accidents and frequent little wees. This can happen even if they were able to previously stay dry for more than an hour while they were wearing nappies.

This is totally normal. While they are wearing disposable nappies the super absorbency contained within it absorbs the wee as soon as your child passes it. This means that they never feel really wet and are not fully aware of the sensation of needing to go to the potty or toilet.

So, when the nappy comes off and your child starts to do a wee, they suddenly become more aware of the sensation of weeing and of the feeling of being wet. This is something they may not have experienced before and often results in them stopping the flow of wee before they have emptied their bladder.

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Because your child hasn't fully emptied their bladder it quickly fills up again and they start to do another wee a short time later and this 'start/stop' cycle continues.

Do not worry. Over time you will find that the number of wees (and wet pants) will gradually reduce as your child becomes more aware of the sensations and the bladder capacity (how much wee their bladder can hold) increases.

However, if your child continues to wee more than 7 times a day, even after they seem to have developed bladder control, then ask their healthcare professional for advice.

## 8. Encouraging drinks

Getting children to drink enough can be difficult. Below are some tips that parents have used to encourage their child to drink more.

- Sugar free squash added to water, so it is very diluted
- Fresh fruit juice diluted with water
- Ice lollies
- Ice in the drink so they think it is 'grown-up'
- Sparkling water
- Jellies, preferably sugar-free
- Soup – hot and cold
- Smoothies

Try to include drinking into your child's daily routine

- Say when you have finished your drink you can ... (think of an enjoyable activity)
- Include your child when the rest of family are having drinks
- Only allow your child to watch a favourite TV programme if they are having a drink. If they stop drinking before they have finished their drink, then the TV programme is stopped
- Saying 'cheers'
- Put stickers on your child's cups and encourage them to drink down to the next sticker
- Ask nursery or school to encourage drinks at regular times during the day
- Have tea parties with your child's toys
- Offer your child a small drink every hour, if they are reluctant to have big drinks every two hours
- Counting sips
- Offer them a drink of 'mummy's drink'

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Try offering your child different cups and straws to encourage them to drink more

- Use novelty cups and straws, including cups with your child's favourite character on it and let them chose which one they will use for their drink
- Tommy tippee cup
- Fruit shoot bottle re-filled
- Lidded cup with straw
- Free flow straw bottles
- Munchkin 360 cup
- Munchkin weighted straw cup
- Doidy cup

Always follow any advice from your child's speech and language therapist, if they have one, about what type of cup they should use for drinking.

## **How much should my child be drinking?**

The British Nutrition Foundation has guidelines about how much children of different ages should be drinking available at:

<https://www.nutrition.org.uk/healthy-sustainable-diets/hydration/?level=Health%20professional#children>

If your child is drinking less than recommended by the guidelines try to gradually increase what they are having. If your child is on a special diet or is tube fed, then discuss their fluid requirements with their dietician and always follow their advice.

## **9. My child is not staying clean and dry - is it because they are not ready? Should I stop trying for a while?**

There are several reasons why children may continue to have wetting and soiling problems. These can happen for any child, and it should not be assumed that it is just a problem with toilet training, or it is because they are not ready to toilet train. If your child continues to have problems, then do ask their doctor or nurse for advice. Your child may have a problem with their bladder and/or bowel that may be able to be or that should be treated. For example, constipation can cause difficulties with ongoing wetting and soiling, but can and should be treated.

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## 10. My child is now dry in the day. When should I expect them to be dry at night?

Most children will become dry at night by the time they reach 5 years of age. Becoming dry at night is the result of a natural process that cannot be taught. It usually happens within 6 months of the child becoming dry in the day. Any child who is dry in the day and is over the age of 5 years old but is still wet at night has enuresis (bedwetting). Enuresis is a recognised medical condition that can and should be treated. Ask your child's doctor or nurse to refer them to a local clinic for assessment and treatment.

### Further information

Find more information about child bladder and bowel health in our information library at [www.bbuk.org.uk](http://www.bbuk.org.uk). You can also contact the [Bladder & Bowel UK confidential helpline](tel:01612144591) (0161 214 4591).

For further advice on bladder and bowel problems speak to your GP or other healthcare professional.

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