



T O I L E T

TRAINING

**for children with deafblindness and
multi sensory impairments**



sense
International
(India)

Resource and Information Unit

Working with deafblind people throughout India

TOILET TRAINING FOR CHILDREN WITH DEAFBLINDNESS AND MULTISENSORY IMPAIRMENT



Resource and Information Unit
Sense International (India)
E.mail: info@senseintindia.org
www.senseintindia.org
Deafblind Helpline: 1800 233 7913

Acknowledgement

Parents often find that toilet training their child can be a frustrating process. Some children may train quickly & easily, but for many children especially with disabilities, it can take time. Toilet training is very important area for a child to develop his independence and dignity and this will teach the child about the importance of staying hygienic, clean and dry. Toilet training approaches for children with disabilities often differ drastically from those used with nondisabled children. Over the years of working with deafblind children and adults, Sense International (India) has found that this is one important area in which parents, teachers and other professionals dealing with children/ adults with deafblindness need assistance and help. This booklet has been written to enable families, professionals and non-professionals to understand, how they can help their deafblind child in toilet training.

We are indebted to all deafblind children; their educators and parents for putting forth the need for this information material.

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Preface

Deafblindness is a combination in which the child has varying degrees of both vision and hearing loss. The child faces difficulties in communication (exchanging thoughts), social interaction, anticipating the events, visualizing, self images, recognizing people, places, objects, activities, mobility and orientation. There are very few deafblind children who are totally deaf and totally blind. Most deafblind children have some amount of vision and/or hearing that they can use in their day to day life. It is important to know how much residual vision and hearing they have and encourage them to use it optimally.

This booklet is specially designed for teachers, who are giving services to deafblind and MSI children, their parents and caregivers, whose children are not getting any kind of special services and remain at home because of the lack of opportunity for formal training.

Toilet training is very important area for a child to develop his independence and dignity and this will teach the child about the importance of staying hygienic, clean and dry. Toilet training requires intensive commitment of time and attention from those working with a child.

Efforts have been put forward to make this booklet informative and useful. We hope that this booklet will be very useful to all parents and care takers who want to toilet train their children.

Though utmost efforts are being made to ensure that the information in this booklet is complete and accurate as possible. This text should be used only as a general guide and not as the ultimate source of writing and publishing information. The purpose of this book is to educate the reader and can in no way be taken to reflect the views of the European Union.

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Toilet Training of Deafblind/Multi Sensory Impaired children

Having a child learn to be hygienic, clean and dry is one of the most important things for the family. Children with deafblindness may have additional difficulties in learning this because of their limited ability to understand things. He/she may not be able to anticipate and relate the events. Even if they are able to anticipate, they will not be able to express the same due to lack of communication. Deafblind children get little warning of what is about to happen. Personal care routines may be confusing or frightening for them. They may resist or withdraw from the situation.

A child is toilet trained when he/she understands his/her need to urinate or defecate. He/she should be able to indicate or inform others of his/ or her need, if he/she cannot go to the toilet by self. Or if the child is physically able to reach the toilet by walking or crawling or through other means, then he/she should be able to go to the toilet by self.

TYPICAL DEVELOPMENTAL SEQUENCE OF TOILETING SKILLS

Approximate age	Toileting Skill
10 months	Child indicates when wet or soiled
12 months	Regularity of bowel movements
15 months	Child sits on toilet when placed there and supervised (short time)
18 – 21 months	Regularity of urination
24 months	Indicates the need to go to the toilet Daytime control with occasional accidents
30 months	Child tells someone he or she needs to go to the bathroom Child seats self on toilet
34 months	Child goes to the bathroom independently
3 years	Child may need help with clothing Attempts to wash after toileting
4- 5 years	Completely independent

Toilet training should be done according to the age and developmental stage of the child. Usually, we can commence toilet training for a child with disability, when the child is 18 months of age. There are parents and educators who start training much earlier also. Through continuous and systematic training, we can toilet train older children as well.

STEPS INVOLVED IN TOILET TRAINING

- Step 1:** Collecting the baseline data
- Step 2:** Following a toilet schedule
- Step 3:** Identifying the natural indicators by the child and indication
- Step 4:** Identifying the toilet and sitting on the toilet
- Step 5:** Taking care of clothing
- Step 6:** Cleaning self after voiding
- Step 7:** Keeping the toilet clean

Step- I – Collecting the base line data

First step to begin toilet training is collection of baseline data. Notice at what time of the day the child defecates and urinates. Usually, there will be a certain times when the child does so, for example, soon after the meal, or at different specific times of the day. Therefore it is always necessary to note down the intake of water and food.

Find out when your child is wet (check wetting every half an hour)

Change wet clothes as soon as possible to make him understand the stage of being wet and dry. Make sure that you change his clothes only in the toilet so that the child develops an association with the toilet and toileting

[Note- Keeping regular mealtimes will help you to establish a pattern of elimination. Many people defecate after a meal usually breakfast or dinner.]

To find the baseline data the following table can be used

	Time	Time	Time	Time	Time	Time	Time	Time	Time
Sunday									
Monday									
Tuesday									
Wednesday									
Thursday									
Friday									
Saturday									

Example for a baseline data for urination

	Time	Time	Time	Time	Time	Time	Time	Time	Time
Sunday	6.00	6.30	7.15	7.45	8.30	9.00	11.00	11.30	12.15
Monday	6.15	6.45	8.00	8.30	8.45	9.15			
Tuesday									
Wednesday									
Thursday									
Friday									
Saturday									

Step – II: Following toilet schedule

Calculate the shortest, most frequent time interval. In the above example it will be 30 minutes.

Formulate a schedule with the selected time interval. Mark the schedule as follows

- ✓ : passes urine in the toilet
- : does not pass urine
- x : accident, i.e. wets pants

Time	Date	17	18	19	20	21	22
7.00		✓	x	✓	✓	✓	✓
7.30		-	✓	✓	✓	✓	✓
8.00		X	x	x	-	x	✓
8.30		X	✓	✓	x	✓	-
9.00		X	-	✓	x	✓	✓
9.30		-	x	x	-	✓	✓

Take the child to the toilet at the prescribed time.

If the child does not pass urine, when taken to the toilet, try the following

- Leave the tap open
- Massage lower abdomen
- Pour water over lower abdomen and legs

If the child still does not pass urine, take him to the toilet after 5 minutes.

If the child has accidentally or unknowingly made himself wet, always take him to the toilet before changing his clothes. This will help them to associate toilet with passing urine and changing.

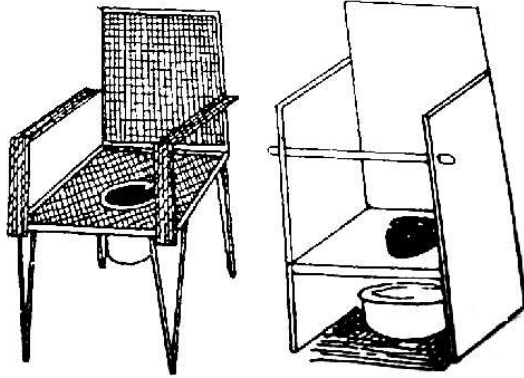
Reward the child for dry periods and also for urinating in the toilet. Reward can be something the child loves to do like playing in the water for some time after toileting. Once the child is accident free for a week, gradually increase the time period to up to 2 hours.

When formulating a toileting sequence for your child, consistency is essential and important. Plan with your child's safety, security, self-respect and eventual independence as overall goals.

Be prepared to give immediate reward and praise successful toileting. Select a reinforcement that is truly rewarding yet can be gradually faded over time. One child might enjoy flushing the toilet while another one may enjoy a flashing light toy being given to him. Do not punish for accidents, though participation in cleaning up is fine.

As with all children, start toilet training when your child is dry for longer periods and seems more aware of what is happening. It is important to follow a routine in order to identify the adaptations that will be needed to support your child's completion of steps in the sequence more independently, such as a calendar system to schedule and communicate toileting time, or pants with an elastic waistband for an older student who cannot zip.





Many children who are deafblind feel insecure in space and may not like sitting on a potty chair or commode or toilet. Make sure that your child's feet are supported on the floor or a step, and that s/he has something (initially an adult) to hold on to. For example, a toilet stool with foot rest and handrests can be used to provide the child postural security.



Step – III: Identifying Natural Indicators

Young children usually express their need for toileting through various gestures or body language. It can be through crying, pulling down the pants, squatting, stopping the activity and remaining silent, stiffening the body etc. They will also indicate their need verbally through the use of jargons like 'su su' or 'chi chi'

A deafblind child can also indicate the need for toileting through gestures

- Raising his lower portion of body up again and again
- Touching his pant or hip portion
- Squatting
- Pulling down his pants
- Pulling mother/teacher/caregiver towards himself
- Standing near the toilet area
- Standing up from his seat or bed
- Not concentrating on any work
- Remaining silent for sometime
- Leaving the work area or room

Remember that it is not necessary that these behaviours may only indicate a need for toileting alone. The child may be trying to express various other feelings through these behaviours. Observation of the child's responses over time will help you to pin point the behaviours which specifically indicate a need for toileting or discomfort.

Sometimes children give these indications right after he urinates or defecates.

[Note- when a child defecates or urinates in lap of parents, usually parents unconsciously push the child away from their body. In the long term such kind of behaviour affects a child's confidence negatively.]

By above mentioned things you may be able to predict when your child is going to urinate or defecate.

Once you have identified a gesture or sound as indication, use it before taking the child to the toilet to urinate, based on the schedule.

Ask the child, “What are you going to do?” You will have to give the answer initially, and then encourage the child to answer you back using the indication

Reward your child for indication as well as for urinating in the toilet.

INFORMAL TRAINING

4- 18 Months: Informal toilet training can be given to a child from 4 months onwards by following the given steps

1. Mother should position the child on her legs to urinate every half-hour.
2. Touch the lower abdomen of the child consistently before urinating and defecating. After sometime, child will be able to anticipate voiding
3. Encourage the child by talking gently and stroking the cheeks while they are voiding.

18 months – 2 years: If the child is between 18 months and two years he/ she can be taken to the toilet for voiding. If the child can see and is mobile, encourage the child to go to the toilet by self.



1. Before taking the child to the toilet, touch his lower abdomen to indicate that you are taking him/her to the toilet
2. Place the child on the potty or between your feet. Provide support if necessary
3. Before placing the child on the potty or commode let him touch and explore the potty
4. Talk to the child while he/she is on the potty or commode. Single words can also be used as an indication
5. Before taking the child away from the potty, make him touch the potty again or a dry panty. This can be used as a sign to indicate that he has finished voiding.

Step IV: Identifying the toilet and going to toilet by self

2 to 5 years

If the age of deafblind child is between 2 to 5 years and if he is mobile, then this child should be able to go to the toilet by self

1. Ask the child to go toilet.
2. Teach the child to go to the toilet by self
3. Educate the child about the importance of voiding in the toilet
4. Take the child to the toilet according to the toilet schedule based on the baseline data
5. Whenever you take your child to the toilet touch the lower abdomen so that he can anticipate what is going to happen
6. If the child is able to anticipate toileting when you touch his lower abdomen, take him to the second step by making him touch and feel the mug or tub. This is another cue through which you can communicate about toileting.
7. When the child is able to understand the above given cues, teach him the sign for toilet.

NOTE: If the child is totally deafblind, use hand over hand technique to teach him/her the signs for an appropriate task.

Going to toilet:-

If the deafblind child is mobile, use destination markers or distant symbols so that he can go to the toilet by self.

For example if the child has to go the toilet from the classroom or any other room, use tiles or anything else associated with the toilet on the walls. This will let them know and understand the way to the toilet. Even if the child goes to the toilet with assistance, let him touch and feel these symbols so that he'll know the way to the toilet.

Adaptations in the toilet

The toilet needs to be modified according to the individual needs of the deafblind child. If the child is not able to sit on the toilet properly the toilet seat also should be modified.

1. If the child is not able to squat on the toilet properly or if he loses balance, use railings or hang ropes from the ceiling. Child can hold on to it and balance himself.
2. If the child indicates his need to go to the toilet, take him to the toilet immediately. Do not delay, regardless of how inconvenient it is for you.
3. Make the child sit on the toilet seat for only a few minutes. If you keep the child in the toilet for a longer period of time, he/she will not understand the concept of toileting. Moreover, he will find activities to do while in the toilet like playing with water, removing hearing aids etc. Child will think that the toilet is a place to play.
4. Never leave the child alone in the toilet. This may cause fear to the point that they may refuse to go to the toilet.

Always reassure the child. Remaining in the toilet with the child will also help you to know exactly when she/he has finished using the toilet successfully. If you remain in the toilet, you can also clean the child immediately, and afterwards you could also reward him also for voiding in the toilet.

5. Once the child is completely independent in toileting, cleaning and managing his clothes, gradually reduce your support and move out of the toilet.
6. If the child needs support to walk, you can give him a cane or rollator.



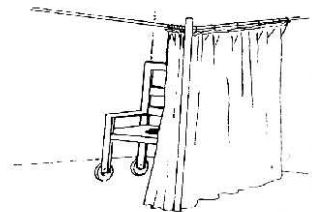
7. Child can also walk holding ropes and railings attached to the wall
8. If a child with deafblindness or multiple disability has difficulties in squatting or if he walks with the support of orthosis, use toilet stool



9. If you are using symbols or object cues, make sure that the child understands it and that it is easily reachable
10. If the child is on wheel chair, the toilet and the way to the toilet must be wheel chair accessible. Child should also be taught to go to the toilet on a wheel chair.



11. If a deafblind/multiple disabled child cannot reach the toilet then, when the child is being trained, privacy should be maintained using curtains or screens.



12. Besides this wheel chair or C.P. chair can be adapted by having a potty under the seat with removable seat cushions. However, this is not very hygienic.



Step V: Taking care of clothing

6 to 10 years: By this age normally the children learn to button and unbutton their knickers and learn to clean themselves after voiding with minimum help. Learning this skill is very important for a deafblind child.

- If a deafblind child is not able button or unbutton or use a zipper, elastic pants can be used
- Velcro can also be used instead of buttons. However, the educator can side by side include buttoning and unbuttoning activity in the objective on toilet training.
- If the child is not able to wear and take off his inners then some adaptations can be made in pant like, having a front opening with zipper.
- Use task analysis to teach removing and wearing clothes

⊗ **Removing pants**

- ❖ Holding the two sides of pants
- ❖ Removing buttons
- ❖ Pulling down till thigh level
- ❖ Pulling down from thigh to knee level
- ❖ Pulling down from knee to ankle level
- ❖ Removing right foot
- ❖ Removing left foot
- ❖ Taking the pant form the floor and keeping it away
- ❖ Things needed: pant, a chair to sit and learn
- ❖ Technique: Use hand over hand technique (When a child's hand is on teacher's hand and first the teacher

makes the child explore things by her hand) to teach the child to remove and wear the pant should be used with child.

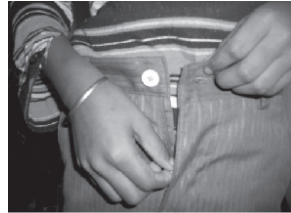
- ❖ Reward the child once he finishes each step



(1)



(2)



(3)



(4)



(5)



(6)

⚙ **Putting on pants**

- ❖ Taking the pants
- ❖ Holding it right
- ❖ Inserting right leg
- ❖ Inserting left leg
- ❖ Holding the pants to pull it up
- ❖ Pull it up till knees
- ❖ Pull it up from knees to thighs
- ❖ Pull it up from thigh to the hip level
- ❖ Correcting the front and back side properly

- ❖ Putting the zipper
 - ❖ Putting on the belt and putting the knuckles of the belt
- Time and patience are necessary to develop these skills in a child with deafblindness. Child can sometimes get irritated with these things. However, using a consistent schedule and rewarding, you will be able to train the child.



Step VI: Cleaning after voiding

- Initially teach the child to pour water while mother cleans
- Then, teach the child to clean self while the mother pours water
- Finally, teach the child to do both steps together.
- Use physical prompts initially and slowly fade it off.
- If it is a western style toilet then keep the bucket of water on stool.
- Join the pipe to tap
- Jet pipe can also be used
- Alternately, child can wash himself by sitting on knees/crawling position under a tap
- Using telephone shower or bottom washer
- If the child is not able to reach back and clean, use a sponge/soft cloth attached on a long stick (long handled brush)

Washing hands after using toilet

Washing hands after urination and defecation is also necessary and important for child.

If it is a village setting then use soap to clean hands but don't use soil or soot because this may increase chances for a child to get ill.

Objects needed: soap, water, mug, and towel

- To wet the hands with water
- Take soap

- Apply soap on the right hand
- Apply soap on the left hand
- Keeping back the soap
- Rubbing both hands properly Rubbing hand on lower and upper side
- Washing hands with water
- Drying hands with cloth or towelposition under a tap

Teaching strategies:

- Giving physical and verbal help.
- Praise and give rewards for each step
- Using hand over hand and hand under hand technique
- Use clues, touch cues, objects of references, symbols and signs wherever necessary.
- Once the task is finished than do child's favourite activity as a reward
- Giving the child soap and let her/him touch it so that he can understand that hands are to be washed.

Key communication:

- Toilet, dirty, hand, soap, water, washing, clean, towel, wipe, finished,
- The things and signs should be used according to the level of deafblind child
- And during training it is important to talk to the child.

Step VII: Keeping the toilet clean

It is not necessary that all deafblind or multiple sensory impaired children will be able to do this but from the beginning itself using hand under hand technique, efforts should be taken to teach it.

- Flushing the toilet after passing urine
- In village if a child goes in an open area than teach him to put soil over the place where he urinated or defecated.
- Keeping the potty seat clean
- Using plastic pipe on tap important for child.

Management of Bedwetting

Deafblind children often have bed wetting. This is sometimes because of deafblindness and multisensory impairment; it is difficult for the child to understand the difference between the day and night. The following steps can be used to manage bedwetting.

- Giving more water during daytime and avoid giving any fluids after 8.00 pm in the night
- Increasing the frequency, taking the child three times instead of two times in an hour and making him sit on potty seat
- Giving different types of object cues and touch cues so that the child can understand what to do and what is going to happen.
- Taking the child to the toilet before putting him to sleep
- Ensure that the area near the toilet is well lit to eliminate any fear the child may have of accessing a dark place
- Waking up the child in the middle of the night and taking him to the toilet.
- Remember that those method or phases which are used during day time should be used during night time also.

POINTS TO REMEMBER

- A designated place (toilet) is necessary for toilet training. Do not allow the child to do toileting anywhere else. Whenever a child has an urge to urinate or defecate take him to the designated place.
- A child with deafblindness finds it difficult to follow the learned skill at the new place/at other places. So the last step involves generalizing the skills in a new environment

- Always remember to praise or reward the child after a successful attempt
- Remember to have small goals and move step by step
- Think of necessary adaptations which may be required
- Take the help of siblings and other family members to ensure consistency
- After following the above mentioned steps if the child is still not toilet trained, consult to a Doctor.

Toilet training is likely to take longer for children who are deafblind and for some children with additional disabilities, bowel and bladder control may not occur or are not regular. Most children can, however, learn to co-operate in these routines. This becomes increasingly important for the carer as the child become older and heavier.

Many children are interested in their own bodily fluids and faeces. For deafblind children, this interest may last much longer and present a problem. Therefore, it is always recommended that the child should be monitored, kept hygienic and the process of toileting should be done under the observation of parents or teachers, till the child is well trained or is able to carry out the task individually and independently.

Summary

The entire task of toileting can be summarised as follows

Phase One

- Let the child touch the object/symbol
- To stand up/ getting up from chair/ bed and by touching or trailing the room wall
- Reach the door of room
- Touching the door
- Coming out of the door
- Touching the object of reference, for example, mug.
- Touching the object or marker coming in the way of room to toilet
- Touching the door of toilet
- Touching the symbol of the door
- Opening the door

Key Communication: While practicing first phase try to make him understand these words/sentences:-Stand up, toilet time, have to go, come, get up, touch the symbols, open the door, and go out.

Phase Two

- Pulling down the pant
- Putting your feet on foot board of toilet seat
- Facing to the front while sitting
- Voiding

Key communication: Shirt, pant, hold, pull down the pant, toilet pot, put the feet, front, back, put, stop, wash, wipe and finish.

Phase Three

- Pick up the mug or pipe with hand
- Taking the mug or pipe towards the back
- Washing with other hand

Key communication: Mug, pipe, back, hold up, wash, again, right, left and finish

Letters from Parents...1

Disability can be an obstacle to toilet train a child, but it does not make it impossible. My child, Shiva, cannot see nor hear. He is deafblind from birth. I came to know about his disability after 6 days of his birth. I have never heard of deafblindness before in my life.

One of the biggest fears I had was, what will happen when this child grows up? Now he is small and i can take care of him. But when he grows up and become big, I may not be able to do everything for him. So, i started toilet training Shiva, by the time he was 5-6 months old.

Every two hours, I would take him from his bed and kept him on the floor to void. If I forgot to take him to the toilet, he would urinate on the bed itself. By the time he was one and a half years old, I started taking him to the toilet. Whenever I took him to the toilet, I would tap his tummy few times. From his habit, I understood that Shiva would start crying if he wanted to go to the toilet. I would take him to the toilet and I still continued to tap his tummy as a sign for toileting. By the time Shiva was 3- 4 years old, he also started to tap his tummy as an indication for toileting.

When Shiva was 4- 5 years old, I started him to the National Association for the Blind, Delhi. As per the suggestions of the educator there, I started using object symbols at home. Whatever the educator asked me to do, I followed it at home. Now, Shiva is 10 years old and neither at home, nor at school I need to assist him with toileting. He is toilet trained like other children of his same age.

- Vimlesh Devi

Letters from Parents...2

Toilet training is necessary for every child. But when it comes to a girl, it becomes even more important. By the time my daughter, Shalini, was 5 months old I came to know that she could not see and is mentally retarded. I took it as a challenge and started toilet training her.

Till the time she was 2 years of age, I took her to the toilet every 30 minutes. Whenever I took her to the toilet, I touched her lower abdomen and said “su su”. That time Shalini used to like to play with the sounds of the key. So, if she remained dry for some time or cooperated with me for toileting, I would let her play with the key as a reward.

By the time, Shaalini was 4 years old she started indicating for toileting by saying “su su”. I was very happy to see this because it was one of the greatest accomplishments. But even when she was 5 years old, Shalini continued bed wetting. So, I started giving her food by 7.00 in the night. After 7.30 pm I did not give her any fluids. I would take her to the toilet before putting her on bed. I used to also mark on my calendar the days in which she wetted her bed. By this, I could understand that that particular day Shalini would wet the bed. So, I took extra care on those days.

Following consistent training, I started seeing improvements. By 6 years of age, Shalini would get up from her bed, and after telling me she would go to the toilet. I included Shalini's other brothers and sisters also in this training. So now, even if I am not at home, there is no problem regarding Shalini's toileting. She is completely independent in it.

- Shyama Mishra

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sense
International
(India)

Resource and Information Unit

Sense International (India)

2nd Floor, Administrative Block, Andhajan Mandal Campus,

Opp. IIM, Vastrapur, Ahmedabad- 380015.

Phone : +91-79-2630 1282, Fax : +91-79-2630 1590

Deafblind helpline

Toll free No.: 1800 233 7913