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Toilet Training: The Benefits of a Passive-Permissive Approach



By John Richardson

Abstract

Toilet training is a process that every child must go through, but there is often confusion among parents and caregivers about which training method is best to use. Toilet training methods can usually be divided into two categories: systematic control and passive-permissiveness. Systematic control is a method based on operant conditioning and is intended to train children faster. Passive-permissive training is a child-centered approach that focuses on training at children's natural pace. This article is a review of the academic research associated with the two methods, and is a summary of the risks and benefits involved with each. Findings suggest that passive-permissive training is a better method than systematic control due to the risks associated with the latter. These risks include parental stress, child distress, and potential child abuse. Such risks are inadequately counterbalanced by the sole benefit of a slightly earlier training age. These conclusions provide

support for the use of passive-permissive training methods over systematic control methods.

Keywords: toilet training, child development, parenting style

In 2011, a mother—frustrated with her two-year-old daughter’s failures at toilet training—glued the daughter’s hands to the wall and severely beat her (Curry, 2012). This story is an extreme example of a parent who allowed her child’s resistance to toilet training to push her beyond proper parenting. Although this example goes far beyond what most parents would do, there is still tension in many homes over children resisting toilet training or not training as quickly as expected. This tension is often caused by parents using a systematic control method to train their children. The use of a passive-permissive training method helps to avoid this tension and provides a better model for healthy training. In this article, I discuss some of the issues caused by the tension of systematic control training and how parents can avoid these issues by switching to a passive-permissive training method.

Toilet Training

Toilet training is the process of learning to control one’s bowel and bladder movements and learning to use a toilet or potty chair. In this section, I discuss why we toilet train children and when children are capable of being toilet trained.

Why Toilet Training is Important

Developing bowel and bladder control are important factors necessary to function in society. Part of developing this control is toilet training. Toilet training is beneficial to a home in many ways. First, it reduces necessary care time for the parents, in which they are required to clean up their child’s waste; this allows time for parents to focus on more direct bonding and care of their child. Second, it reduces costs. Paper diapers are expensive, and the cost can be disabling to low-income families. Cloth diapers are difficult to maintain, and many families don’t have convenient access to washing machines to clean cloth diapers. Third, toilet training can benefit children by providing them with an added sense of independence, causing many children to feel proud of themselves once they have learned to control their bladder and bowel movements. Fourth, toilet training leads to an increase in sanitation by reducing exposure to waste-borne bacteria. Overall, toilet training is something that people in every society view as an important part of life and development.

When are Children Ready to Toilet Train?

Although toilet training is an important step in child development, it cannot be achieved until the child is developmentally capable. There are numerous factors

involved in a child's development towards toilet training. While much about these factors remains unknown, two major divisions of development have been found: physical readiness and cultural readiness.

Physical readiness. Brazelton (1962) proposed a model to explain child readiness in terms of ability to control the rectal sphincter and psychological ability to control impulses. Brazelton estimated that voluntary sphincter control usually developed between 12 and 15 months old, with psychological control starting around 18 months and peaking at 30 months old. Although there is some evidence to suggest that environmental factors may have a stronger influence on toileting readiness than physical development alone (Luxem & Christophersen, 1994), Brazelton's model has still retained popular acceptance in the scientific community as an appropriate guideline.

Cultural readiness. Although physical readiness to begin toilet training may happen at a somewhat pre-determined age, the age at which a child is culturally considered ready to toilet train can vary from household to household. Choby and George (2008) found that there is a marked disparity between cultural groups concerning when children are considered ready for toilet training. In their review, Choby and George state that cross-sectional studies

revealed that, on average, white families believed that training should start at 25.4 months old. Results from the same studies showed that the average parents of other races believed it should start at 19.4 months. A difference was also found between higher- and lower-income families, with the majority of higher-income families claiming 24 months to be the most appropriate age, and lower-income families claiming 18 months. Why such differences exist is not clear, but they may be a result of different economic and cultural requirements. Some cultural groups may focus more on early training based on practices handed down to them by parents, grandparents, and so forth. Lower income families may choose to toilet train their children earlier to alleviate the cost of diapers, or because they lack convenient facilities that are available to higher income families.

Methods for Toilet Training

Beyond the broader cultural views on toilet training, there is still variability between individuals. Most parents or caretakers choose a specific training method to use according to what they think is best. There are numerous toilet training models available with varying degrees of complexity and control, but most could be divided into one of the two different models suggested by Luxem &

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Christophersen (1994): systematic control and passive-permissiveness.

Systematic Control

Systematic control is a method of toilet training in which parents usually begin training their children early (often as soon as the child can sit upright without support). Once training begins, it follows a rigorous routine of punishment or reward. A few of the punishments commonly used are forcing children to clean up their own "accidents," forcing them to remain on the toilet until they defecate or urinate, and expressing disappointment to the children for lack of progress. The only benefit found to this method of training is that children do toilet train somewhat earlier than those who are trained with a passive-permissive style (Luxem & Christophersen, 1994).

This method of training is theoretically supported by behavioral models of learning, which assert that people learn through methods of reinforcing (rewarding) desirable behavior and punishing undesirable behavior. Systematic control methods of training try to use these behavioral models by providing controlled situations, wherein using the toilet is reinforced and "accidents" are punished. Systematic control was the most popular method of training in the early-

to mid-1900s, when behaviorism was the most popular psychological model (Luxem & Christophersen, 1994).

Although this model of training has slowly faded in popularity, replaced by passive-permissive models, there are still many parents today who practice these types of methods. Many who do try a systematic control method do so because of claims made in certain toilet training books, promising fast, easy results. One popular example is Arzin's *Toilet Training in Less than a Day* (Arzin, 1976), which teaches a systematic control method of toilet training designed to work within only a few hours of training. More will be discussed on the results of this training method later in this paper.

Passive-Permissiveness

Passive-permissiveness is a method of toilet training in which the parents commence training at the child's pace. Usually training does not begin until the child first shows an interest in the toilet (Brazelton, 1962). Such interest is usually characterized by the child talking about the toilet or noticing that mom, dad, or others use it. When training does begin, it is based on a process of gradually introducing the child to using the toilet. Rewards such as praise, increased privileges, or candy are often employed in this method of training, but rarely does it include punishments for a child's

“accidents.” One benefit of this training method—over that of systematic control—is that it is a less stressful process for both the parents and the children because of its less demanding nature. Another benefit is that false expectations are less likely, due to the focus on the child’s rate of development rather than on a schedule.

Passive-permissiveness was largely supported in the 1940s by psychodynamic theory. This theory claims that toilet training is a major part of a child’s personality development, determining much of their adult personality. According to this theory, it is healthiest to allow children to develop at their own pace. Although psychodynamic theory has passed out of general popularity and there has been no evidence to show any major psychological consequences of hastening children’s toilet training, the passive-permissive style has continued in popularity. Much of this popularity can be attributed to men like Spock or Brazelton, who wrote articles and books claiming the benefits of child-centered approaches to toilet training (Luxem & Christophersen, 1994).

Because of these various factors, the general trend since the 1940s has been a movement toward the passive-permissive method, with 72% of pediatricians supporting this type of training (Polaha, Warzak, & Dittmer-McMahon,

2002). Even though the current majority focuses on passive-permissive toilet training methods, there is some evidence to suggest that there may be many parents who will switch to methods of systematic control as cultural requirements change. One specific aspect of culture that may push parents towards this change is the increase in daycare usage. Many daycares require children to be toilet trained before admittance, based on principles of public sanitation. This places pressure on many working parents to attempt to toilet train their children as quickly as possible because of their need to leave their children in a daycare while they are away at work. Because systematic control methods promise faster training, many parents may try them as an alternative to passive-permissive methods.

Risks of Systematic Control

There is a variety of research available on various parenting styles and their effects on children, but there is a general lack of empirical research studying the psychological risks or benefits of one toilet training method versus another. Due to this lack of research, little can be said about the direct consequences of one training method over another, but there may be indirect consequences caused by the difficulties associated with systematic control methods.

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Emotional Distress

One specific consequence of systematic control training methods could be parental stress. The method taught in the book *Toilet Training in Less than a Day* (mentioned above) was originally designed and tested by Foxx and Arzin (1973). In their study of this fast-paced training method, they concluded that children could be trained within an average of four hours and with relatively little difficulty. Unfortunately, these results failed to be entirely representative of real-life issues. Although some do have success in training with this method, there are others who have experienced problems with it. Matson (1975), in a case study, found that several mothers who tried applying this technique were met with resistance from their children. Such resistance included crying, screaming, hitting, running away, and other forms of tantrums. Matson also reported that there were “negative emotional outbreaks” from mothers as well as children. Another study found that only one in five mothers was able to successfully train their children with this method. Not only were they unsuccessful, but all of the mothers in the study reported child resistance to the training method and reported their own discomfort caused by this resistance (Luxem & Christophersen, 1994). These findings suggest that, despite the success initially reported by this

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training method, in real-life settings such training can lead to resistance and emotional distress.

Stress and Parenting Styles

The fits, tantrums, and negative emotions associated with resistance to systematic control toilet training often lead to a build-up of stress for the parent providing the training. Dunning and Giallo (2012), while controlling for gender, socio-economic status, and other demographics, found that parenting stress mediated the effects of fatigue on their parenting self-efficacy. This means that when parents are stressed and fatigued in parenting, their belief in their own ability as parents diminishes. As parents’ self-efficacy diminishes, they may seek harsher styles of parenting to make up for their perceived ineffectiveness or they may give up trying and instead switch to a neglectful or overly passive parenting style.

Most parenting styles can be divided into three main categories: permissive, authoritarian, and authoritative (Rinaldi & Howe, 2012). Permissive parenting styles are when parents are warm and responsive, but under-demanding. Authoritarian parenting is the opposite: distant and unresponsive, but also demanding. Authoritative parenting is a balance between the two, being both responsive and demanding to the children. Authoritative

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parenting styles are associated with better child outcomes. Conversely, both permissive and authoritarian parenting styles are associated with poorer child outcomes. Specifically, the negative effects of the over-controlling authoritarian parenting styles have been researched; these effects include higher child anxiety (Affrunti & Ginsburg, 2012), negative emotionality, and externalizing problems (Lipscomb et al., 2012). Although many parents may generally practice a balanced authoritative parenting style, the resistance and stress caused by systematic control training may force parents into more authoritarian parenting behaviors.

Abuse

Perhaps the most serious risk associated with systematic control training methods is that of abuse (Schmitt, 1987). The story in the introduction of this paper is one example of abuse triggered by a parent trying to control toilet training, but this was not an isolated incident. In Florida alone, four children were killed within a seven-month period because of toilet training issues (Quigley, 1999). Aside from these major incidents, abuse can also happen in cases that are never reported to the news. Such abuse can take physical forms such as beatings, or psychological forms such as yelling at or shaming children.

Because toilet training is an aspect of raising children that adds a particular risk for abuse, Schmitt (1987) recommended that parents who are at high risk for abusive behavior should avoid even initiating toilet training until their children are 2 ½ to 3 years old. When parents do initiate toilet training, Schmitt suggested that they should make training fun for their children, and that they should not practice behaviors such as forcing children to remain on the “potty.” Schmitt also cautioned that children should never be shamed or punished for “accidents”; such pressure on children can turn them against toilet training causing them to be even less cooperative and further increasing the risk of abuse. Essentially, Schmitt is recommending a passive-permissive training method to avoid potential abuse.

Alternative Perspectives

Although there are many potential benefits to toilet training with a passive-permissive method rather than a systematic control method, there are still many who support the latter as a better choice. The main argument against following a passive-permissive training method is that systematic control methods usually toilet-train children faster (Luxem & Christophersen, 1994). Because there is social pressure on parents to have their children trained at earlier ages, many may feel that the difficulties associated

with the more controlling training method may be worth the cost. However, Blum, Taubman, and Nemeth (2003) found evidence suggesting that systematic control methods may not train children any earlier. Specifically, these researchers found a significant negative correlation between the age of initiating toilet training and the time it takes for the child to complete training. This negative correlation showed that initiation of toilet training before the age of 27 months resulted in very little benefit to overall age of completion. With most children completing toilet training between the ages of 24-36 months old regardless of training method, the potential benefit of a systematic control training method would only amount to a matter of a few months difference. Because of the resistance and stress associated with this type of training, it may not be worth such a small gain.

Some may claim that the stress associated with changing diapers and cleaning a child after “accidents” for a few more months would be more stressful than a short period of resistance the child may show against training. Although there may be some validity to this argument, research conducted by Tervo (2012) found that motor deficits (the ability to control physical movements and bodily functions) in children caused less stress to mothers than did behavioral and social deficits. This suggests that the motor deficit of

delayed toilet training and the extra work associated with it may be outweighed by the potential behavioral issues caused by a systematic control training method.

Discussion

Many parents struggle with toilet training their children. Such difficulties may arise from parents using systematic control training methods. Child resistance—crying, disobeying, throwing tantrums—to this training method can cause emotional distress to parents and children, undue stress to parents, and potentially lead to child abuse. Such difficulties in training can be largely reduced by switching to a passive-permissive training method, which focuses on training at the child’s own pace. Findings suggest that not only are passive-permissive methods as effective in training children as systematic control methods are, but that they are also a healthier choice for both child and parent.

Implications and Conclusions

Many parents are left wondering how they should toilet train their children. The research findings suggest that the best course of action for parents could be one of a passive-permissive training method. If indeed this method of toilet training provides a healthier and safer environment for parents and children, then it would be a clear choice for parents who will soon begin toilet training a child. These

findings also suggest that parents who are already in the process of toilet training their children using a systematic control method may benefit from switching to a passive-permissive method.

There is much room for further research into this topic. One particular area of future research would be direct comparison between the two toilet training methods. Such research could measure the levels of resistance offered by children and the levels of stress reported by parents and compare them across the two training methods. Other research should also be done to study the changes in the general well-being of parents and children that occur during the toilet training experience and to compare these results between training methods to see if there are any lasting benefits to one or the other.

With so many varying methods available for toilet training children and so many books and physicians claiming the merits of one method or another, parents may find themselves at a loss as to what they should do. However, with the support of research found in this review, parents can use this as a simple guide for narrowing down the possibilities, which will hopefully lead them to a choice that is both effective in training and emotionally positive for them and their children.

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