

# CONTINENCE IN CHILDREN ON THE AUTISM SPECTRUM



## A RESOURCE PACK

SWALE SPECIALIST TEACHING & LEARNING  
SERVICE

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## Frequently Asked Questions

Children on the autism spectrum often become clean and dry later than their neuro-typical peers. Understanding and supportive adults can do a lot to alleviate the children's anxieties and to help them along the road to being continent. Difficulty with sensory processing, communication, flexibility of thought and the ability to get organised are all features of autism and can impact on continence.

Is there something we can refer to for the relevant law, policy and care plan?

Yes. Please see the accompanying document Managing Bladder and Bowel Issues in Nurseries, Schools and Colleges produced by Eric (The Children's Bladder & Bowel Charity).

How can we manage our staffing so that we can provide two people for when a child needs to go to the toilet/be changed?

Two adults are not necessary. One adult is fine as long as they let another adult know that they are supporting a child with their toileting.

A child is withholding whilst at school. Is this damaging? What can we do about it?

Anxiety prevents some children with autism from going to the toilet/toileting whilst they are at school. This needs to be carefully monitored. In the long term it can cause damage. A child who is withholding is likely to be experiencing a level of pain or discomfort that will affect their ability to learn as it will seriously impact on their wellbeing.

A positive first step is to ensure that the child is drinking plenty (7 drinks a day) of clear fluid. Anxiety may relate specifically to toileting or may be more general. Monitor the child's overall wellbeing and draw up a plan if it is poor. If overall wellbeing is good and anxiety relates specifically to toileting, consider whether sensory sensitivities may be the cause. Make sure that you have discussed with parents/carers and any relevant professionals what sensitivities this child may have. Changes may need to be made to the environment to accommodate sensory sensitivities – the sound of hand dryers and the cleanliness and smell of the toilet area are common culprits. Flexibility may be the issue – discuss with parents/carers any ways in which you can make the process and area more similar to how it is at home.

### A child has accidents as they can't or won't ask to go to the toilet. How can we help?

Some children with autism find it hard to put themselves forward to ask for what they need. Others may have communication difficulties.

Use visuals, both Makaton symbols and picture symbols. Use the Makaton sign for 'toilet' with the child. Depending on your individual situation you may want to have a picture of a toilet which appears at regular intervals on the child's individual visual timetable. Alternatively, you may have two symbols for "toilet" – one somewhere in the toilet area and one where the child can reach it in the classroom/setting. Initially, teach the child with your hand over theirs to pick up the classroom/setting picture, take it to the toilet and match it to the picture there. This is the first step towards the child independently bringing the picture symbol to you to show you that they need to go.

They seem to forget what to do next when they go to the toilet, no matter how many times we tell them. Why is this?

People on the autistic spectrum often have difficulty with executive functioning. This is the ability to plan and organise, to do things sequentially and in a timely manner. It will help if you have symbols for self-help routines displayed in your classroom/setting and toilet area – particularly dressing, using the toilet and hand washing. See the accompanying picture sequences in this pack. Point the pictures out to the child and teach them to refer to the visual sequence rather than constantly giving them verbal prompts. This will support their independence.

A child seems to have permanent diarrhoea or constipation. Why is this? How can we help?

A limited diet is often the cause. Ensuring that the child is drinking enough will support both diarrhoea and constipation. If a child persistently seems to leak soft faeces it may be that they are constipated and that this is seepage around hard faecal matter. Discuss with parents/carers. A referral to the GP could be appropriate.

A child goes to the toilet and then comes straight back into the classroom/setting and wets! What is going on?

The cause is likely to be constipation. This can prevent the bladder from ever really becoming full or empty. Again, discuss with parents/carers as they may want to visit their GP.

A child's continence problems are continuing despite careful support beyond the end of the EYFS

At this point there should be a clear plan for supporting continence. The child will likely move from nappies/pull ups to proper continence products and school nursing and other relevant professionals should be involved.

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