

Tips from the Special Education Division: Toilet Training and Incontinence Management in Schools

December 2024

Question: Can a Washington state preschool or K–12 public school refuse enrollment or attendance based on whether a child is toilet trained?

Answer:

No. A Washington state preschool or K–12 public school may not refuse enrollment or attendance based on whether a child is toilet trained. See [RCW 28A.150.220\(5\)\(a\)](#): school programs “shall be accessible to all students who are five years of age.” For preschool programs that fall under the authority of the Department of Children, Youth and Families (DCYF), see [WAC 110-300-0220](#), [WAC 110-300-0221](#) and [ECEAP Performance Standards](#).

It is not the responsibility of the child to be ready for school. It is the responsibility of adults, and schools, programs, and systems to be ready to support each child. Schools and educators should welcome all students in an inclusive, welcoming, and culturally responsive manner.

Most students have achieved voluntary urinary control before they begin school but up to 12% of children between the ages of 6–12 years and 1–3% of students between 15–17 years may experience daytime wetting (Rivers, 2010). Accidental wetting or soiling is a fact of life in early childhood settings. Some students with developmental delays may not be independent in toileting upon entering the K–12 school setting. Additionally, students without known disabilities may not have established independence in toileting by kindergarten or first grade.

Young children’s ability to control their bladders is impacted by their engagement in play or learning, anxiety, privacy concerns, and the familiarity, quality, and accessibility of the facilities. Some students ages three and up, when developmentally appropriate, may need support to recognize and act on the urge to void their bowel or bladder. Others may have successfully transitioned to using the toilet but may regress temporarily as a result of the disruption in their routine that occurs when they start or change schools, as well as when they are learning to navigate a new environment and new caregivers.



There are several disabilities and health conditions that may increase an individual's likelihood of experiencing delays in their ability to independently toilet. For example, one Center for Disease Control (CDC) study found that almost half of students with autism exhibit resistance to toileting. This resistance is associated with diarrhea, constipation, language delays, and difficulty with social motivation and cues. A child without a known disability who does not make progress with toilet training should be considered for evaluation of potential disability, particularly if other concerns such as learning or social difficulty are identified, and after medical issues are ruled out.

For more information on this topic, refer to the [Guidelines for Toilet Training and Incontinence Management in Schools](#) or the [Information from Our Partners](#) section of this month's update.