Evaluating the Foxx and Azrin Toilet Training Procedure for Retarded Children in a Day Training Center

Foxx and Azrin (1971, 1973) have developed a successful procedure for toilet training the severely retarded which utilizes overcorrection and repeated positive practice. We compared the Foxx and Azrin method (FA) with a no-training group (NT) and a scheduling method (SCH), which requires the trainees to be taken to the toilet four times a day. We also examined the degree of preference the staff had for each procedure, the amount of time required to carry out each procedure, and the degree of generalization of toilet training from the training center to the home without explicit parental involvement.

Fourteen severely and profoundly retarded children aged 7 to 12 were used as trainees. All but three were boys and none had had previous toilet training. Children were randomly assigned to each procedure.

The number of accidental urine-dampened pants (wets) per child per day was the primary measure. An initial 2-week baseline was taken during which children were periodically checked and, if wet, were changed without comment.

Phase I of the training was conducted over a total of 4 months with a week-long assessment (wets) taking place at Post-Test 1 (3 months) and at Post-test 2 (4 months).

During Phase II a randomly selected one-half of the NT group (NT–FA) and all of the SCH group (SCH–FA) were trained with the FA method. The other one-half of the NT group (NT–CONT) continued with no training. Two carefully matched children who had been on a scheduling procedure for 6 months became the continued scheduled group (SCH–CONT) group. The original FA group (FA–CONT) continued with its program. After 2 months of Phase II, a final “natural” period similar to the original baseline was instituted and assessed. During this week parents were asked to record number of wets per day at home as a measure of generalization.

As a measure of staff time required, the period of FA training and 2 months of maintenance was used as an appropriate interval. Staff-trainee contact involving training, toileting, and changing was accumulated for each procedure during Phase I.

Separate repeated measures analyses of variance were conducted for Phases I and II. There were significant main effects for method and time, $F(2, 9) = 11.3$ and $F(2, 18) = 7.9, p < .01$, for Phase I. At Phase II there was a significant method by time interaction, $F(4, 10) = 4.61, p < .02$. Additional a priori analyses were conducted. The baseline of mean number of wets for the three groups were NT = 1.0, SCH = .95, FA = .88. The differences among