ON BEDWETTING by Violet Oaklander, PH. D

Did you know that children who wet the bed are actually trying to take care of themselves? When they were very young something was happening that made them anxious and they had no way of expressing themselves or finding some way to relieve the anxiety, so they wet the bed as a release. Notice the next time you go to the bathroom, how relaxed you feel after you urinate. When these children feel tense and anxious, bedwetting is a way to relieve the tension in the body. Unfortunately, the bedwetting becomes the body’s way of handling tension, anxiety, fear, anger and other feelings, as the child grows, even against the child’s will.

There are several steps I follow when I work with bedwetters. For one, I want the parents—and sometimes the whole family—to share their feelings about the situation with each other. Sharing feelings is important. Everyone has lots of feelings about the bedwetter that may or may not have anything to do with the bedwetting itself. It is necessary that these feelings come out and be shared. Most parents have run the gamut in trying to solve the bedwetting dilemma, from being kind and understanding to yelling and screaming, from making the child wash his or her own sheets to ignoring the whole thing. There are many, many feelings churning around in everyone—worry, shame, guilt, anxiety, resentment, fear, anger, sadness. Many of these feelings are not shared directly; they come out in many other ways. It is no wonder that the child who generally cannot express feelings directly anyway, has to keep on wetting the bed. Sometimes parents actually imagine that the child purposely wants to wake up in a wet, cold, smelly uncomfortable bed to get back at them.

The next step in the therapeutic process is to attempt to give the responsibility of bedwetting back to its owner: the child is responsible for the bedwetting. This is an important pre-requisite to stopping. I tell the child that he is doing this to take care of himself: HE is doing it, not anyone else. It can then become openly clear that he does not want to continue, even if he has yelled defiantly, “I don’t care!” or has taken on a casually unconcerned stance. Furthermore, it is important for the parents to understand that it is the child who is responsible, not they. He wakes up in the wet bed; they do not. He can learn to change his own bed, wash his own sheets. If they want to do this for him, they must take responsibility for that choice. The parents must learn that bedwetting is not an area for reward or punishment, approval or disapproval. Praise is not helpful if he does not wet his bed; nor are recriminations if he does. We don’t praise a headache-prone child for not having a headache, nor do we call him a stupid idiot if he does.

I want to help the child connect once more to her body, for as the bedwetting continues through the years, she seems to become more and more disconnected from her own body. First I work toward helping the child EXPERIENCE her body and her bedwetting. I give the child a notebook to record her bedwetting. This helps the child to become more conscious and aware of what she is doing. If she is adept at writing, I may ask her to record in her notebook words and phrases that describe the feeling of waking up in her wet bed. I often ask children to paint the feeling of being in a wet bed. Helping the child become more aware of her body is an important part of the therapeutic procedure. We do many kinds of body exercises including breathing and relaxation exercises, movement games, creative dramatics (pantomime is an excellent tool for becoming aware of one’s senses, body and feelings.) Knowing the body and learning mastery and control of the body, is satisfying, exciting, and essential.

An important step in this therapeutic journey is to help the child express his feelings about the bedwetting as well as about all the other aspects of his life. It is interesting to note that the child often continues the bedwetting behavior even if the original event or events, real or imagined, that led to bedwetting are no longer present. The body once received a message to wet the bed, and since then the right circuits have not been located for receiving a new message. The child’s bedwetting will stop as he begins to feel more self-support, that is, feel more strength and power within himself, and as he begins to find new ways of expressing his feelings.

The final most important step is to help the child love and accept the very young child inside her who originally began to wet the bed. If she continues to be self-critical, she will continue to wet the bed. I ask the child to bring in a favorite toy animal from home to represent herself as her bedwetting part. In my office she practices taking to this part of herself, giving herself permission to wet the bed. (that’s right!) Then each night she is instructed to tell the animal-self, “It’s O.K. if you wet the bed tonight. I love you even if you do.” This helps the child release some of the anxiety about bedwetting that only serves to further it. If the child tries to use will power and says to herself, “I WON’T wet the bed tonight,” she will immediately become anxious and probably wet the bed.

Patience, acceptance and nurturing of the child to HERSELF or HIMSELF is the key.