Biting - Causes and Responses

Causes

What might help?

TEETHING: If the child has teeth coming through then they may be in pain and applying pressure to the gums (through biting) may be soothing. Teething may cause the mouth to hurt.

Provide something to bite on to comfort the child, e.g. teething toys, folded cold face washer. Consider the child's age. Older toddlers may be able to bite on harder foods such as apples. Some parents may provide gels, but only use these with parents' approval. Be aware of your policy on administering medication if pain relief is required.

ORAL MUSCLE DEVELOPMENT: As children's muscles develop, they experiment with two opposite ways of dealing with things – holding on and letting go. This theme is repeated in such things as separating from parents, toilet training, learning to share. They do the same "hold on/let go" with their oral or mouth muscles. Biting is an example of "holding on". It is developmentally part of gaining control of a muscle group or cognitive activity.

Help toddlers learn to hold on/let gos. Demonstrate and explore holding on/letting go with activities, e.g. blocks in containers, nesting cups. Structure the environment to ensure opportunities to practice fine and gross motor skills. Structure activities and games to hold on/let go, e.g. holding onto a ball or parcel then letting go (modified pass the parcel), holding hands and letting go, physical freeze and move games (statues)

DEVELOPING INDEPENDENCE: Toddlers are gaining a sense of autonomy – doing things for themselves, making choices, trying to control their world and making demands on adults (and other children). Biting is an excellent way of demonstrating independence or getting control and power over others.

Toddlers must be allowed independence and also need entail consistent, loving and firm limits. Allow children to make choices (for very young children restrict to choice between two items) and express preferences. Have clear limits but set up the environment to support exploration and learning. Set achievable tasks – allow children to succeed and use lots of verbal encouragement.

LANGUAGE/COMMUNICATION: Toddlers are in the early stages of language development. For children who cannot yet talk, biting is a great alternative. It is often a "physical" rather than expressive communication, a language alternative.

Encourage children to develop language skills. Use routine times such as nappy change for 1:1 exchanges. Teach words or sounds/ signals. Gain eye contact and use non-verbal communication, body language and signs/signals to re-enforce your words. Plan activities with a verbal component such as stories, finger plays, and songs. Encourage all attempts at expressive language. Be aware of the sounds they use to name objects.

LEARNING CAUSE AND EFFECT: Toddlers begin to explore and learn the relationship between cause and effect from the time they are about 12 months old. Biting is a great cause and effect demonstration. A bite reliably elicits a loud scream or reaction from another child and a reaction from an educator.

Provide alternative ways for the child to observe and explore cause and effect relationships. Use toys that require action to cause a reaction e.g. figures that pop up, cash register, pull along toys. Provide open ended activities such as sand, water, painting, blocks and crayons so the child can "make something happen". Acknowledge and describe this process.

EXCITEMENT/ OVERSTIMULATION: Children can have such a great time running around and enjoying the environment that they become over-excited and overstimulated. Overstimulation can also occur if the visual environment is too colourful or "overloaded". Biting seems to be a form of tension release in such instances.

Plan a balanced day with some quiet time/privacy/space as well as outdoor play times. Help children with the transition from physical play to quieter activities. Use routine and repetition to have a calming effect. Try smaller groups. Consider soothing and relaxing music. Incorporate relaxation with older children.

UNDERSTIMULATION/BOREDOM: If the curriculum is inadequate or insufficiently stimulating, or doesn't reflect their interests, children may bite due to boredom. (Anything to get a reaction and break the monotony!)

Reflect on your curriculum and your environment. Make it balanced, interesting and build on the strengths and interests of each child. Ensure the physical environment is engaging and that all toys and equipment (particularly favourites) are available to children for use (i.e. not put away and unavailable to them). Eliminate waiting and queuing where possible.

FRUSTRATION: The child may be frustrated for a multitude of reasons even in a quality setting e.g. too many challenges, too many children, too little or too much room, not enough 1:1 attention, too many competing demands. Frustration may result from unmet needs, inability to communicate or inconsistent or unclear limits. Children may bite through frustration when their more legitimate/positive attempts to alleviate their frustrations have been unsuccessful.

Model appropriate ways of dealing with frustration. Intentionally teach children to use verbal skills and express feelings. Encourage all attempts to do so. Feelings faces can be useful. Maintain consistent known limits and use positive behaviour guidance. Teach turn taking (my turn your turn). Ensure daily 1:1 time with each child. Reflect on your curriculum and environment, opt for small groups where possible and break up the room into smaller spaces.

SEEKING ATTENTION: The young child may bite to get attention from parents or educators. Some children need more attention than others and don't care if this attention is positive or negative. Behaviours such as biting, scratching and hair pulling can be a great way to be noticed and get an immediate reaction from adults. Some children may receive more negative than positive attention thereby, albeit unintentionally, reinforcing their behaviour.

Ensure that children receive regular positive, warm, nurturing attention. Use routines and transitions. Don't provide undue attention to the child when he/she bites. Ensure all children have alternative ways of receiving attention. Give each child 1:1 time each day. Be aware of and verbally acknowledge positive, busy, curious, helpful, and productive behaviours. Encourage the intent of the behaviour; toddlers don't always get it right! Remember to notice the quiet child too.

Causes

LACK OF IMPULSE CONTROL: Generally toddlers lack the ability to evaluate the consequences of their actions and act on impulse. They can appear quite surprised at the result of their actions. Sometimes they bite just because there is something to bite.

EXPLORATION: Biting is a form of oral sensory-motor exploration. Biting can be part of a child's way of exploring the world in the same way that they may like to look, smell, touch and listen. It helps them learn about their world. Very young children go through a stage of exploring everything with their mouth.

SOCIAL INTERACTION: Toddlers are learning to interact with their peers and how to approach other children. They often show interest by biting, pulling hair or pushing. This physical communication is particularly common in low or pre-verbal children. Infants relating in this way usually don't understand that they are hurting others – although older toddlers may!

ANXIETY: Young children often use biting as a way to communicate or release feelings of anxiety, pent-up emotion, tension or insecurity. It may be in response to the stress around them, either at home or in the care environment. Ask parents if there have been any changes at home or in routines, e.g. recently weaned from the bottle, new baby at home.

IMITATION

Babies and toddlers learn by imitating others and biting is a behaviour often learned in this way. From around 18 months toddlers can observe behaviour, store it in their memory and perform the act at a later time. This is called deferred imitation.

HUNGER

A young child may bite simply because they are hungry.

What might help?

Ensure that all educator respond to biting in a consistent way that discourages the behaviour, yet is not punitive. E.g. "Don't bite. Biting hurts." Ensure your response doesn't give excessive attention to the biting child and unintentionally strengthen the behaviour. Model alternate behaviours. Teach children how to respond to a potential bite with a verbal and physical response. Say: "stop, that hurts" (and indicate stop with their hand).

Provide lots of sensory experiences with a variety of surface textures such as hard, soft, rough, and smooth. Have many oral activities – teething ring, soft toys, and blocks. Explore cooking – taste (sweet/sour/salt), texture, colour and temperature.

Model appropriate interaction. Teach children words to help them interact. Teach and model joining skills for older toddlers. Ensure sufficient material/equipment, including duplicates, to enable parallel play. Encourage and re-enforce parallel play. Introduce activities such as songs/games/finger-play with hand holding, buddy pairs and introductions/hellos. Encourage appropriate social interaction including sharing toys, hugging, smiling.

Ensure 1:1 time to determine the source of the anxiety. (Collaborate with parents). Allow comforter from home or create a comforter in your setting. Provide relaxing and soothing activities such as water/sand play, soft music, favourite lullabies and quiet songs. Provide calming contact with educators. Try massage or aromatherapy. Keep things predictable so the child feels safe and secure. Encourage attachment.

Model positive interactions with children and toddlers. Ensure that your verbal and non-verbal behaviour is consistent, loving, nurturing, respectful and appropriate for young children to copy. Use positive behaviour guidance, e.g. intervention and redirection, active listening and reflecting, regular but sincere encouragement. Notice and encourage pro-social behaviours.

Ensure that the menu provides adequate and nutritious meals consistent with NHMRC dietary recommendations for children. Check that the child actually eats at meal and snack times. Ask the family about home diet and breakfast consumption. Ensure that water is freely available. Provide additional portion at mealtimes if necessary.

