

LOVE AT FIRST BITE: THE PROBLEM OF BITING IN YOUNG CHILDREN

Lorna Aaronson
City of Madison Office of Community Services
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Biting is perhaps one of the most distressing behaviors that parents and caregivers confront. At the same time, it is a normal behavior for older infants and toddlers. In this article we look at some ways to approach this predictable but troublesome behavior.

WHY DO CHILDREN BITE?

The answer to this question has to start with a question: How old is the child? Reasons for biting are much different for infants and toddlers than for preschool children. For infants and toddlers, some of the reasons are:

- **Exploration:** A toddler doesn't make a distinction between a cigarette butt found in a park, a rubber toy, or a person's body. All are fair game for this natural form of exploration.
- **Teething:** This could be a cause for periodic biting, as the pressure on the mouth and gums relieves the pain and discomfort of teething.
- **Affection:** The toddler also hasn't learned to distinguish between her feelings and those of others. She experiences relief from her discomfort, and she isn't able to understand that this experience isn't as pleasant for others as it is for her.
- **Lack of skills for expressing needs:** Young children don't have words to express feelings of frustration and anger. They may use physical actions (biting, hitting, grabbing) if they want a toy, if they are angry, or if another child takes something from them.
- **Experimenting for cause and effect:** Lots of interesting things happen when a child bites. The other child gets upset, and the caregiver often responds very strongly. There may be an internal rush of adrenaline that comes as a result of the fear, anger, or excitement that follows the biting.
- **Attention:** Biting often results in lots of attention! The more powerful the attention (even if it's negative) the more likely the child is to continue biting.
- **Overstimulation:** The child may respond to noise and confusion by feeling frustrated and tense.

Some of these same reasons apply to older children who bite. Between the ages of two and three, new skills are emerging:

- The ability to use words to get what they want.
- The ability to understand the feelings and needs of others
- The ability to control their actions

When a child is past the age of 2 ½ or 3, biting is more likely to be an act of aggression. The child may use biting to get what he needs, or to threaten other children. This puts biting more in the category of hitting, pushing, and other forms of physically asserting power and influence. Older children who bite probably haven't learned more effective ways to express anger.

RESPONDING TO BITING: SOME LESS EFFECTIVE METHODS

Some ways of dealing with biting are more effective than others. In fact, some of the things you do could actually make biting continue. Less effective responses include:

- Time outs given in an angry and punishing way
- Spanking
- Yelling
- Biting back, or encouraging a bitten child to bite back
- Telling the child he is mean, naughty, not a good friend
- Sending him to be by himself until he can "be nice"
- Making him eat or taste something unpleasant

These approaches are ineffective because:

You are teaching the wrong thing: Children learn from the important adults in their lives. If you hit a child for hitting, he will learn that hitting is the way to solve problems. If you use biting, spanking, or other forms of physical punishment, the child is more likely to use these methods also.

You are not teaching good alternatives: Punishment may let the child know what you don't him to do, but it doesn't teach him more acceptable ways to express frustration, anger, and exploration.

You are rewarding a behavior you DON'T want with lots of attention. What is rewarding to an adult is much different from what is rewarding to a child. If someone yelled at me, hit me, or washed my mouth out with soap, I'd probably stop. Young children may not distinguish between positive and negative attention. They'll take any attention they can get!

Most of these strategies are prohibited in child care settings! Family child care providers and child care teachers are prohibited from using physical punishment or methods that humiliate or frighten children.

SO WHAT SHOULD YOU DO?

First, let's look at a few of the facts of life that come with working and living with older infants and toddlers:

- You can't completely prevent biting. It happens in the best of families, in the best of settings, and with the most careful and attentive caregivers.
- Biting rarely happens just once.
- It is the rare child who reaches the age of 3 without biting.

While you can't truly "control" a child, you can significantly affect what a child learns and does by looking at two very important influences in the child's life: Yourself and your environment.

OBSERVING AND EVALUATING: TAKE A LOOK AT YOURSELF

- Do I understand the normal developmental needs and behaviors of children this age?
- Am I able to give the child positive individual attention, or does he only get attention when things go wrong?
- Am I modeling the behavior that I want? Kindness, gentleness, non-aggressive ways to solve problems.
- Am I easily frustrated and angry when children misbehave?
- Am I relaxed about things that may put pressure on a child? Toilet training, mealtime, napping, saying hello and goodbye.
- Do I have people I can talk to for ideas and help? Friends, co-workers, supervisor, or other professionals.

OBSERVING AND EVALUATING: TAKE A LOOK AT THE ENVIRONMENT

- Are there enough toys so that children don't feel frustrated over sharing?
- Is there enough space for children to be together without crowding?
- Does the child have things it's ok to chew (teethers, chewy foods)?
- Does the day go smoothly? Or is it often rushed, chaotic?

- Does the child have opportunity to decide some things for himself (choosing which clothes to put on, which toys to play with, for example)?
- Do you have a “yes” environment? Can children explore freely and safely, without a lot of “no’s” and frustrations?
- Are there patterns?
 - °Does it happen at a particular time of day?
 - °Does it happen in a particular area of the home or classroom?
 - °Does it happen more when the child is likely to be tired or hungry?
 - °Does she bite just one person, or is the biting more random?
- Can it be explained by things that are happening in the child’s life?
 - °The child’s first experience in group child care?
 - °Major changes in the family (illness, divorce, a move, a new baby)?

WHEN BITING HAPPENS: THE IMMEDIATE RESPONSE

≅ Take a breath

≅ Approach calmly

Sometimes we need to respond urgently to prevent a child from being hurt. However, if the biting has already happened, a yell, an angry response, or abrupt treatment of the child come too late to prevent the problem. So a suggestion: Take a breath. Approach calmly. Trust me: It will only take a second, and will help you enter the scene prepared to handle the situation more effectively.

In responding after the biting incident has occurred, be calm, firm, simple, and direct. Teachable moments don’t happen when emotions are high! During periods of peak emotion, the brain is flooded with biochemicals that short-circuit “rational” thought. Young children don’t benefit from stern lectures, and especially won’t hear them when they are upset.

- Keep your voice quiet. Children will often listen to a quiet voice, while a loud and angry voice simply brings more tears, more anxiety, or more aggressive behavior.
- Keep your words clear and simple. Even children who don’t yet talk can understand your tone of voice and many of your words.
- Make a firm and clear statement: “You hurt Joey.”
- Respect the child’s ability to understand by stating the reason: “I can’t let you bite, because it hurts people.”

- If the child is relatively calm, it is sometimes effective to do on-the-spot problem-solving, especially with an older child. For example, ask: “If you get angry, what are some different things you could do?”
- Avoid labeling. Labels communicate how we expect someone to act: Calling a child a biter, a hitter, or a troublemaker communicates to the child that you expect her to act like that. Describe the behavior (“Sarah has bitten children twice today”) rather than labeling the child (“Sarah is a biter.”)
- What about the child who was bitten? While it is certainly appropriate to give attention to the child who was bitten, don’t overdramatize this. The child who did the biting may be jealous and resentful, increasing the likelihood that the biting will happen again. The victim may learn that the way to get attention is by being a victim, and could even do things that will get him bitten so that he gets the attention.
- If possible (and if it seems appropriate), involve the child who bit in the care and comfort of the child who was bitten. The child may hold a cold cloth against the bite, or offer a gentle touch to the child who was bitten. BUT:
 - This should not be forced. Forced apologies are not honest reflections of feelings. Consider saying: You hurt Joey. How can you help him feel better?”
 - It should be done in a calm, matter-of-fact way. If either child resists, don’t insist.
 - This is not a punishment! It is a way of showing caring for someone you’ve hurt.

RESPONDING TO BITING: CREATING OPPORTUNITIES FOR LEARNING

Many everyday activities are especially helpful if you are experiencing episodes of biting, hitting, pinching, and other developmentally predictable but troublesome toddler behaviors.

- Loving attention: Let her know that you notice when she shares, or when she uses words to solve problems, or when she accomplishes something that makes her feel good inside. Be sure she knows that she is likable, useful, and nice to have around.
- Encourage children to care for each other: If a child falls, is sad because mom or dad just left, or is tired or upset, notice and name the feelings, and encourage children to comfort each other. (“Tonia is feeling really sad. How can we help her feel better?”)

- For older toddlers and young preschoolers, have play dough, finger paints, and clay available. These give children the opportunity to use their hands vigorously in appropriate ways, and may release energy and angry feelings.
- Provide purses and buckets to fill, empty, and carry, with things that toddlers can pick up with their fingers. This provides a safe activity for the skills of grasping and letting go, filling and emptying. And hands that are busy with those activities are less likely to feel the need to grasp and pull on living things! Toddlers haven't perfected the fine art of sharing, so be sure that you have plenty for everyone.
- Have a large supply of teethers in the freezer. They are safe, easy, and inexpensive. Don't reserve them for after biting has happened. Bring them out when you notice that a child is having a hard day, during transitions, or if the group seems to be having more conflicts than usual. Keep plenty of them on hand so that you can put them away for sanitizing as children lose interest.
- Have unbreakable mirrors at children's eye level, and do finger plays, music, and movement activities. These help children develop an awareness of their own bodies, and understanding of the boundaries between their bodies and those of others.
- In the child care setting, have ample space in each area, with at least a few low dividers that provide children with less stimulating "getaway" spaces. Toddlers love to be together, so providing lots of space in each area will give everyone space to spread out.
- Perhaps the single most effective approach is challenging but often leads to the best results: Shadowing. Shadowing involves staying near the child throughout the day, and for several days if necessary. This allows you to be on-the-spot as things happen, to help the child learn more effective ways to express his needs.

SOME COMMON QUESTIONS ABOUT BITING

The Madison Department of Public Health and Dr Bruce Edmonson from the University of Wisconsin Pediatric Clinic provided the following medical information:

Is biting a health problem? While penetrating bites to the hand, or deep puncture bites, may be cause for concern, most bites are simple lacerations or abrasions. The most effective response is prompt cleansing and thorough rinsing under running water. Avoid the use of anything that might irritate the tissues (including dilute bleach solution). Parents are encouraged to talk with their doctor to see if medical follow-up is needed.

What about biting and AIDS? Biting, even if the skin is broken, is not considered a potential transmission of AIDS/HIV, unless there is a great deal of blood in the saliva of the child who has bitten.

Should time outs to be used? In a word, NO! The question with any discipline technique is whether it is effective in changing the behavior and providing the child with the support and opportunity to learn. Requiring a protesting child to “sit in a time out” is not an effective response to biting:

- Like any discipline technique, a time out can be turned into a negative punishment if it is given by an adult in an angry and frustrated way.
- Removing a child without also working on more effective ways to solve problems deprives the child of the chance to learn different ways of expressing needs.
- Infants and toddlers exist in the here-and-now. A young child lacks true awareness of cause and effect, and so doesn’t understand the connection between what happened just now and what happens an hour from now.
- State licensing prohibits time outs for children under three.

On the other hand, a calm and peaceful minute or two away from other children may be helpful. It slows the child down, provides a change of scenery, and gives everyone time to recover from the incident. This is most likely to happen if you are able to remain calm, cool and collected!

POLICIES RELATED TO BITING IN CHILD CARE CENTERS AND HOMES

State licensing rules require that child care staff and providers maintain the confidentiality of each child and family. It isn’t appropriate to talk about the problems of one child with the parents of another child without specific written permission to do so. In a word, if a parent asks a caregiver for the name of the child who bit, the caregiver is encouraged to remain calm, respectful, professional, but firmly decline to give this confidential information.

Terminating enrollment is rarely an appropriate response to biting. A center or family child care provider should have policies that assure that the caregiver will make every effort to involve parents and attempt to resolve problems in other ways before terminating a child’s enrollment.

GETTING HELP

Talk with others who have young children, or who care for young children. Biting is a common problem. Talk with day care teachers and family child care providers for ideas. Child care professionals can attend professional conferences and look for workshops on the topic.

Pediatricians. Many clinics have staff who can help parents and caregivers develop improved skills in handling problems with children.

The county home economist, or the county public health nurse. These valuable resource people are available in every area of the state, and are knowledgeable about resources in your community.

A WORD TO THE CHILD CARE CENTER OR FAMILY CHILD CARE PROVIDER: WHEN ALL YOU'VE DONE ISN'T ENOUGH

Much of what has been presented so far is equally relevant to parents and to caregivers. There are special concerns and considerations in dealing with biting in group care settings.

First, check to see if you've completed all of the following steps:

- You've analyzed your program to see if there are things you could do to improve the situation.
- You have honestly assessed your own skills and techniques.
- You have evaluated your environment and your curriculum to provide a quality learning environment.
- You have reviewed and followed your policies on steps to take prior to considering terminating enrollment
- You have talked with the parents to try to solve the problem together.
- You have set a reasonable time limit for working on the biting, and it continues to be a problem.

Confident that you have done all that you can, you may need to decide that it is time to ask the family to find a different place for their child. To do this in a caring, professional manner:

- Give parents adequate notice to find other care.
- Avoid placing blame. It's not your fault, or the parents', or the child's. Emphasize to parents that this doesn't mean that the child is a "bad" child. A different setting may be more beneficial to the child.
- Suggest other alternatives that may be available in the community. If your community has a child care resource and referral agency, suggest that the parent call the agency for help in finding a different center or home.
- Affirm that parenting is often challenging. Suggest that their pediatrician or parenting skills classes may be helpful.
- Many parents will be grateful for your thoughtful approach. Some will be angry, and may blame you. This may test your professionalism, but do keep in mind that everyone – you, the parent, the child, and your center or family child care home – will be best served if you are able to remain respectful, honest, and clear when attempting to resolve such emotionally charged issues.

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