



Why Do Children Bite?

For parents and teachers, biting can be a challenging and emotional issue. While biting is acknowledged to be a phase of normal development for many young children, it is difficult to reconcile the normalcy of an act which carries not only the stigma of being a social taboo, but concerns for psychological security and possibilities of physical injury.

For anyone who has observed an infant or toddler, it is obvious that they experience (learn) about the world around them by means of oral stimulation. From birth, they are compelled to suck, gum and mouth objects - both for the purpose of eating as well as exploration. First with gums, tongue, lips, and taste buds, and later with the addition of teeth, each infant receives information by way of reoccurring and new sensations as they mouth or bite down on familiar objects. The human infant's mouth is a veritable bundle of nerve endings, sending information to the brain to process (*soft, hard, chewy, comforting, disagreeable*). Initially, experimentation typically occurs with items which are provided for the child and approved of by an adult, such as food, toys or their own hand and toes. Later, as children become increasingly mobile and can seek out or discover objects, they may begin to orally explore items we would prefer they not - including furniture, plants, and sometimes people.

We anticipate that some children will experiment with mouthing or biting children or adults. We employ a multitude of strategies and actions to reduce the number of incidents and reinforce healthy alternatives.

Children ranging from six months to three years bite for a variety of reasons. For infants and young toddlers, biting is primarily a sensory experience. Older toddlers and young two year olds may bite seeking oral gratification or release of frustration because they are not yet able to effectively articulate their desires for space or a toy. Young preschoolers may bite when intensely angry or frustrated. Understanding these motives for biting gives the parent or caregiver the opportunity to assist the child through this process by conveying to the child in a calm and loving way that biting people is not okay, and then re-directing the child's energy to an appropriate one. Proactive intervention is another strategy for reducing incidents of biting by intervening in a potential biting situation before it can occur. This strategy includes providing children with something appropriate to bite and on which to expend oral energy. The combination of maturation, proactive intervention and redirection typically reduces the incidents of biting in a group environment or at home.

The following pages are adapted from an article by Karen Miller entitled *Some Toddlers Bite When They are Frustrated*. The article defines a variety of reasons why children may bite, and provides possible solutions for each situation. We would like to take this opportunity to stress that in any biting situation, it is important for the parent or caregiver to address the issue in a loving and supportive manner. It is important that both the child who bit and the child who was bitten receive positive intervention which promotes and preserves positive self concept while addressing each one's individual needs for love, limits and reassurance.

We appreciate your patience and partnership as we work diligently to support all parents and children in the program. For some families, individual conferencing when biting occurs is helpful. For others, attending Parent Meetings or Discussion Groups also provides information and support. We share with you a mutual goal of loving and guiding children toward a healthy and wonderful future. Please let a Lead Teacher or Director know if you have any questions or concerns.

WHY CHILDREN BITE OTHERS	POSSIBLE SOLUTIONS
<p>A. "Holding On & Letting Go</p> <p>As children's muscles mature, toddlers experiment with two simultaneous ways of handling experiences: <u>holding on</u> and <u>letting go</u>. Toddlers are learning to both hold and let go of (1) parents and other adults, (2) toys, (3) bowel movements, etc. Thus, they are also learning to hang on/let go with their mouths. Often young children are not fully in <u>control</u> of their walking, running, handling small objects, bowel movements, urine or speech. Sometimes the skin of the other child can "just happen" to get between the child's teeth.</p>	<p>Help ease infant/toddler separations (letting go) from their parents. If baby cries when the parent leaves, say to baby, "You're feeling very sad that Mommy/Daddy has to leave. It's hard to say goodbye. Mommy/Daddy will come back after lunch/nap" (some concrete event).</p> <p>Give toys to baby for hanging on/letting go, such as blocks to put into containers.</p> <p>Don't pressure toilet training. Wait until child shows he/she can "let go" in other areas of life.</p> <p>Study your environment carefully to ensure opportunities for the infant/toddlers to practice blossoming motor skills.</p>
<p>B. Autonomy</p> <p>Toddlers are developing "autonomy"; doing things for themselves, making <u>choices</u>, needing to <u>control</u>, making demands of adults and the environment, wanting power, moving out and away from adults. Biting can be an expression of a toddlers separation from the adult; infants/toddlers are no longer one with adults if they can bite the adult. Infants/toddlers are showing control of the other person and the situation when they bite. Biting may give children power over others. Toddlers may be allowed to get "out of control" by loving adults who are hesitant to set limits for toddlers.</p>	<p>Toddlers must be helped to achieve a balance between their need for control and their need for loving, firm limits to be placed on their often uncontrollable urges. Because there are so many situation in which the adult must control the toddler, allow and provide as many situations as possible when the toddler can <u>choose</u> and have <u>power</u>; "the red marker or the blue marker", "the cheerios or the rice krispies", whether to have "milk or not to have milk on their cereal." Set up the environment so that the infant/toddler can have long stretches of time to explore and learn in a relaxed manner.</p>
<p>C. Exploration</p> <p>Biting is a part of sensory/motor exploration. Toys, food, and people must be touched, smelled, and of course, tasted if the toddler is to learn. Babies are sensuous creatures who learn through the use of their senses and the motoric actions on things and around things.</p>	<p>Provide a variety of sensory/motor experiences in the center. Infants and toddlers should experience closely supervised play with water, paints, playdough, and sand. Infants/toddlers can crawl and tumble over a variety of hard, soft, rough, and smooth surfaces. A colorful array of toys that can be mouthed and easily washed should be available.</p>
<p>D. Teething</p> <p>Teething can cause an infant/toddlers mouth to hurt. Babies often need something or someone to gnaw on to comfort them.</p>	<p>Provide the infant/toddler with teething toys, frozen bagels, and chewy foods that disintegrate in the mouth and won't cause choking. The older toddler can be <u>encouraged</u> to bite on apples, carrots, and firm teething toys. Clean frozen cloths can be kept on hand to provide cooling relief for the teething toddler (and for the child who has been bitten).</p>

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<p>E. Peer Interaction</p> <p>Infants/toddler are just beginning to learn how to engage peers in positive ways. Infants do not understand they are hurting others when they bite them (older toddlers may). Infant/toddlers do not know how to approach their peers in acceptable ways. They often express their interest in others by biting, pulling hair, pushing, etc.</p>	<p>Children need lots of social experiences in order to learn how to interact with others. Take the child's hand as they reach out to others roughly and say "touch gently, that makes her feel so happy." Acknowledge a child's interest in other children by saying, "I know you like Darin, but I can't let you chew on him. You can give him a toy." Provide enough material so children can play beside each other (parallel play) with age appropriate materials and equipment. Notice positive peer interactions such as one child hugging another, giving a toy to another, smiling to another.</p>
<p>F. Cause and Effect</p> <p>Infant/toddlers truly investigate cause/effect relationships beginning at approximately 12 months. It is as if they are saying, "What will happen if I bite Susie" What reaction will I get?" Biting gets a reaction, and usually a very strong one! Baby often receives a loud scream from the other baby, and a yell of protest from an adult.</p>	<p>Provide toys that "do something" when the child acts on the toy. For example, when a button is pushed, a figure pops up, or when a knob is turned, music plays. Sand, dirt, water, paints, blocks and crayons allow for creative, open-ended experiences that offer many opportunities for the child to make something happen. Help them notice the positive reaction they get when they part, hug, or give a toy to another child.</p>
<p>G. Imitation</p> <p>Babies learn by imitating others and biting is one behavior that is often learned from other young persons. After 18 months babies can observe a behavior (such as biting), store it in their memory, and perform the act later when conditions are right for it (this is called deferred imitation). Research has shown that children who are physically punished are much more likely than their peers to be aggressive with both adults and peers -- especially younger, smaller peers. They learn that hitting and biting others is an acceptable way of handling their anger if they see adults responding in that way.</p>	<p>Model loving, nurturing, sharing, polite, positive behavior for young children to imitate. Develop a repertoire of behaviors for handling children's negative behavior. This repertoire can include: redirecting to a positive activity, giving "I" messages such as "I feel very upset when you hit Johnny because it really hurts him," actively listening to a child who is angry by saying "You are feeling very angry at Sarah. She took your toy and that made you feel angry," or using a brief time-out period for the biting child. Positive techniques do work! Children comply more readily and they learn positive ways of interacting with others.</p>
<p>H. Attention</p> <p>The young child may bite others to get attention from others; it is true that "negative attention seems to be better than no attention at all." Everyone hates to be ignored and the under threes are not exception. Some children may actually be receiving more negative attention from teachers and peers than positive attention, thus continuing the cycle of negative behaviors.</p>	<p>Blitz the child who has bitten with positive, warm, nurturing attention. This can be difficult for caregivers, especially when they are feeling exceedingly frustrated when a child bites. Remember, however, that when children's positive, busy, curious, helpful, productive behaviors are noticed and rewarded, the children are much more likely to continue those behaviors and behave that way more often. Break into that negative cycle of child behavior with adult positive comments and hugs for desirable infant/toddler behavior.</p>

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<p>I. Frustration</p> <p>The young child may bite others due to feelings of anger and frustration at adults and peers. A child may feel angry and frustrated because of unmet needs or because of harsh discipline techniques. A child whose cries or more positive bids for attention go unheard, or a child who is hit, slapped, yelled at, or bitten by adults may become an angry, biting child. Too many children, too high adult to child ratios, or not enough space, can lead to frustrated, biting children.</p>	<p>Help the young child to also develop a repertoire of behaviors for handling frustrations and angry feelings. Help the child learn to say, "NO!" to another child who grabs a toy. Teach the child to say, "I feel angry" (sad, happy, etc.) to adults and peers. This is not "smarting off" to adults, it is a healthy sharing of feelings, techniques, these adults need opportunities to <u>learn</u> about the effects of positive versus negative discipline techniques with young children. They can <u>model</u> positive techniques; <u>talk</u> about how they were disciplined as young children and how they felt about those techniques; and they can be encouraged to <u>feel</u> how a child must feel when scolded, criticized, restrained, or physically punished.</p> <p>The environment for the young child may need to be changed before biting will be decreased. Smaller numbers of children can make a big difference in a classroom. Use the finding of the Abt Associates (that children thrive when in smaller groups) to argue for smaller classes.</p>
<p>J. Anxiety</p> <p>A young child may be experiencing a "generalized anxiety" about events happening to him/her or around him/her (such as parents' divorcing or fighting, the loss of or separation from loved ones, etc.) Anxiety may lead to the toddler biting others to relieve tension (just as adults smoke cigarettes, chew gum or bat a ball around).</p>	<p>Work with parents to determine the source of a child's anxiety. Provide calming activities such as water or sand play. Allow the young children to such a thumb and/or hold transitional objects (such as blankets or stuffed animals). Provide time for one on one with a special adult. Pat backs and sing songs at nap-time to quiet toddlers into sleep. Play soothing lullabies. Stay close to nurture the child and explain and help the child through transition times. Provide a predictable environment with a predictable routine and secure staff.</p>