

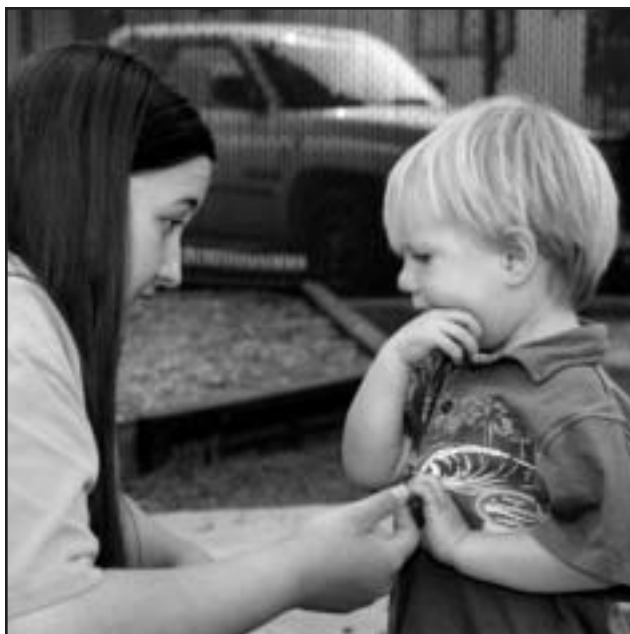
Ouch!

Biting hurts

Ask any group of toddler teachers about the most difficult, most emotional, and most frustrating issues in a typical day. The nearly universal, emphatic response is biting.

Biting inspires a dramatic response from parents, classroom caregivers, and the children in a group—the biter, the bitten, and the observers. Though common—and some would say typical—biting is a behavior for which there is little tolerance.

To effectively address biting, teachers of young children need to understand why children bite, how to prevent biting, how to intervene quickly and calmly when biting occurs, and how to share information about biting with parents.



Why do young children bite?

Biting is generally recognized as a normal developmental phase for infants and toddlers. Experts also agree that biting behavior is not something to blame on children, parents, or teachers (Greenman and Stonehouse 1994).

In infants, biting is a form of exploration. The mouth is a hypersensitive area of the face (making kissing a more intense sign of affection than a pat on the back). Research suggests that infants bite because they learn through their senses. Every discovery involves exploration with the eyes, hands, and mouth. This is as true with a new squeeze toy, unfamiliar food, and blanket edge as it is with an adult's smooth shoulder or a group mate's nearby forearm.

In some cases, infants bite to relieve the pressure of teething pain. There is no evidence that infants understand that their biting causes pain in another person.

Toddlers, on the other hand, usually bite as an effective, forceful means of communication—generally without malice (McKay 1994). Biting is a reaction to frustration or a reliable and quick way of getting attention. Toddlers seldom plan ahead. They don't have the language skills to control a situation. They have limited ability to wait, share, or understand cause and effect. They tend to operate in the here and now: Their attention span is unpredictable and inconsistent (Oesterreich 1995).

Most toddlers don't understand that touch can hurt—and biting is a painful touch. They sometimes bite as a self-defense strategy.

Or they may simply be joining a biting epidemic—imitating and testing the instant reward system biting provokes. The toddler bites, another child screams, and the teacher or parent jumps into attentive reaction.

In child care programs, inadequate adult interaction may be a cause of biting behaviors in toddlers. According to Claffey, Kucharski, and Gratz (1994), toddlers may be more apt to bite if they have not interacted with adults for more than five minutes.

Typically, preschoolers have developed the verbal skills to communicate the need for attention,

extreme frustration, or rage. Occasionally they may use biting to communicate, but frequent biting in a child older than 3 may indicate the need to intervene or modify the environment. Sometimes 3- and 4-year-olds have experienced or observed the attention biting provokes and want to try out the biting themselves.

Can we prevent biting?

Children need safety, security, and independence. Environments or expectations that are not respectful of or sensitive to these needs can result in biting.

Common reasons—and solutions—for biting

Identifying the reason a child bites gives great clues to prevention and behavior change.

The experimental biter: Infants and toddlers explore the world with all their senses—including their mouths. Help the experimental biter learn that some things belong in the mouth (like food) and some things don't (like another person's arm or a puppy's ear).

The social biter: Children with limited verbal communication skills sometimes try more primitive means of interaction with others. For these children, who don't yet understand that biting hurts, a bite is intended as a friendly "Hello." Help children develop social skills by modeling words and behaviors, offering plentiful opportunities for side-by-side play, and providing duplicate toys so sharing does not become an impediment to cooperative, interactive play.

The testing biter: Learning about cause and effect is essential to cognitive and social development. The testing biter wonders what will happen when "I tip this full cup," "I jump into the puddle," or "I bite Maria's arm." Help the tester learn about cause and effect through more appropriate opportunities for discovery and experimentation.

The teething biter: Teething is painful. A natural response is to apply pressure on the gums to relieve the pain. Help children cope by offering frozen teething rings, teething biscuits, or clean, frozen cloths to bite on.

The frustrated biter: Patience, consistency, and self-control are not in the skill set of infants and toddlers. They are usually unable to express frustration in acceptable ways. They also lack the cognitive and social skills to communicate feelings. Biting is a powerful and immediate communicator—a tool that is impossible to ignore. Supervise toddlers carefully and watch for boredom and frustration. Work to make sure learning materials, activities, and adult expectations match children's abilities, learning styles, and temperaments. Offer alternative activities, substitute toys, and help children use emerging language skills to express themselves.

The threatened biter: Biting is sometimes a tool for self-defense, a way to respond to people or an environment that is overwhelming and threatening. Crowded, noisy, and overstimulating environments can confuse and frighten children. Help children recognize that in your care they, and their possessions, are safe and protected. Work to make your classroom a peaceful, secure place to play and learn.

The imitative biter: Modeling or copying someone's behavior is a powerful learning tool. Sometimes, however, the behavior children copy is not desirable. It's not unusual for a young child to observe and then try out new, attention-getting behaviors like hitting and even biting. Help children imitate socially constructive behaviors by modeling kindness and compassion. Never model a destructive behavior like biting a child to "show how it feels."

The attention-seeking biter: Attention from adults frequently dictates children's behavior, both positive and negative. Biting is guaranteed to get the attention of both adults and children. Offer children positive attention throughout the day. Try to minimize the negative attention you give to biters.

The power biter: Toddlers struggle with the developmental need for independence. They seek control and autonomy. Some children bite to satisfy their quest for control and power over the environment and the people in it. Offer toddlers opportunities to make simple choices throughout the day. Reinforce all their attempts at positive social interactions. Ensure child-staff ratios that allow close supervision and productive, positive interactions.

—Adapted from Oklahoma State Department of Health, 2000.

Adults, therefore, need to build environments (indoors and outside) and support interactions that ensure safety while encouraging self-discipline and self-reliance.

- **Provide adequate space.** Too little space for children to move through and explore can invite aggression. Arrange furniture to create movement corridors. Divide the space so all the children aren't forced to be together in one area. Set up a few learning centers with enough supplies and equipment that children aren't forced to share or wait for a turn. Make equipment accessible on low sturdy shelves or in baskets to encourage self-help skills, discovery, and control.
- **Minimize excessive noise.** Noise—loud teacher voices, music that plays incessantly, and even mechanical humming—adds to everyone's stress level and often disrupts children's ability to stay calm. Sound-absorbing textures like rugs, curtains, and cushions contribute to calmer, quieter places for children and adults to work.
- **Maintain consistent but flexible schedules and routines.** Ensure a safe, stable environment for learning. Help children learn the order of the day. For example, "We change diapers and wash hands before we have snack." Announce activities ahead of time; work toward smooth transitions that minimize waiting time. Offer cues to help children prepare for changes. Unexpected schedule changes, inconsistent routines, and staff changes can be stressful and overwhelming—invitations for aggression.



- **Offer appropriate and adequate equipment choices.** Provide equipment that allows children to explore with all their senses. Use equipment to support developmental goals like self-regulation and autonomy. Ensure multiples of favorite toys to minimize children's frustration. Provide quiet, calming areas and include a rocking chair for adults to use when soothing upset children.
- **Stay responsive.** Recognize interactions that children aren't able to handle on their own and intervene calmly. When you correctly interpret children's behavior (and emerging language), you can minimize biting behavior. Acknowledge frustration: "I know you're angry because you want to play with that doll." Model acceptable behavior options: "Say to Jessie, 'Can I play with the doll now?'" Or "I see another doll over in that corner. Let's see if it needs someone to wrap it in a blanket and rock it to sleep." Offer teething toys to relieve mouth pain. Adjust meal and nap times to children's needs. Allow enough time for finishing an activity. Take notes on the frequency and triggers of biting behavior. Determine if the child is hungry, sad, or in need of attention, for example. Responding quickly to triggers can prevent biting behavior.
- **Use the principles of positive guidance to help children build social skills.** Separate children who are hurting each other. Use positive words to explain rules or limits. Rely on your tone of voice and facial expression. Use "No" only when there is danger. Anticipate problems and be ready to redirect children to acceptable activities. Help children understand and express their feelings in acceptable ways. Offer frequent opportunities for acceptable decision-making and choices.

What are the best responses to biting?

Sound guidance practices—like anticipating this typical behavior—can help minimize the frequency of biting. But when a child does bite, respond using the following guidelines.

Respond immediately

Infants might not understand the difference between biting a toy and biting a person. Infants can, however, learn to understand a response—tone of voice and facial expression—that conveys pain. "Ouch, that hurts" helps babies as young as 4

months begin to differentiate between biting a person and biting an object that can't feel pain (Marlowe 1999).

Toddlers invoke stronger responses from adults who want to think that the behavior is deliberate and should be punished. Research suggests, and effective practice reinforces, approaches other than punishment.

CHILDREN NEED SAFETY, SECURITY, AND INDEPENDENCE.

After a biting incident, first focus on the victim. Greenman and Stonehouse (1995) suggest that biters older than 2 years benefit from being involved in the consolation process. Help the biter soothe the bitten child with "gentle touches," the application of a cool cloth or ice to the bite site, and offering tissue to wipe tears.

If it's necessary to remove the biter from the interaction, do so without high drama. Calling attention to the event is likely to reinforce the negative behavior. Make direct eye contact and tell the biter, "Biting is not OK" in a firm, strong, but not overly loud voice. Make sure the biter is calm and redirected to a new activity.

Reinforce communication skills

Evolving language and other communication skills is the developmental milestone that lessens a toddler's



need to bite. Make it a high priority for toddlers to develop expressive communication skills. Offer positive reinforcement, such as smiles and other quiet recognition, to children who say "mine" rather than hit or bite.

Be prepared to interpret the body language of children who still have limited language skills. "You look angry, Marie. Let's tell Jamie that you don't like it when he pulls your hair." Be specific with your redirection. Rather than using words like *mean*, *nasty*, or *frustrated*, use complete sentences to describe behaviors. "Kendra is angry because you're pulling on the trike she's riding. Let's go and find another wheel toy."

Build positive environments

When biting occurs more than once a day for several consecutive days, it may be time to evaluate and modify the schedule or environment. Keep a record of biting occurrences: what time it happens, what the child is doing, who the child is interacting with, and what provoked the event. You may see a pattern that suggests the need for change. One change, for example, might be an earlier snack or lunch time. Another change might be to add equipment so toddlers aren't forced to wait or share, or to remove equipment to allow more activity space. Or you might consider dividing the group into smaller clusters to reduce congestion. You might also increase the amount of time adults spend in direct interaction with children.

Claffey, Kucharski, and Gratz (1994) suggest maintaining a balance between open and closed spaces so children can move about freely while they feel protected. Additionally they recommend:

- low counters and shelving so all children can be seen from every area of the room,
- wall color that isn't too stimulating,
- open-ended materials, like blocks and pull toys, that satisfy different children's learning needs, and
- soft, noise-absorbing equipment that promotes security and warmth.

The goal is a positive environment. According to most experts, that means a consistent routine, rituals to guide transitions, stable and consistent staffing, and soothing, quieting techniques that are effective with a particular group of children.

Plan how to handle a biting epidemic

Greenman (1995) and Hewitt (1995) recommend taking specific steps when it's clear that biting is getting out of control. In addition to tracking the behavior and modifying the classroom, evaluate teacher responses. Are they appropriate?

Shadow children who tend to bite. Anticipate when they might bite, and respond immediately to prevent them from biting. Shadow children who tend to get bitten. Reinforce behaviors that help them prevent biting rather than falling into the role of a victim.

Decide what to tell parents

Help parents understand that biting is a normal occurrence for many children in group care. Respect confidentiality and avoid identifying which child is a biter. Instead, assure parents that you are actively seeking solutions.

Apologizing to a family for a biting incident is not always an effective strategy (Legg 1993). An apology implies that harmful behavior is a program deficiency or that you guarantee biting won't happen again. Instead, share important details and focus on what teachers are doing to minimize repeats.

When communicating with the parents of a biter, ask whether the behavior is occurring at home. Make sure teachers and parents approach the problem identically. A united front is reassuring to the child. Inconsistent responses to a behavior are confusing and invite testing the resolve of all adults.

Guidelines for effective guidance

Remember these tips for guiding all toddlers—even those who don't bite.

- Expect the expectable. Learn, understand, and plan for developmental sequence and milestones for individual children and the group.
- Offer choices.
- Be consistent.
- Build self-esteem by helping children learn their own limits and celebrate their own increasing competence.
- Stay confident. You are the professional and the adult.

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AFTER A BITING INCIDENT, FIRST FOCUS ON THE VICTIM.

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