Introduction

People who do not work with toddlers in groups might ask, "How can there be enough to say about biting to fill a book?" "Why would anyone need an entire book devoted to biting in toddler programs?" People who do work with toddlers in groups, and in all kinds of early childhood programs, however, never ask these questions. They know without a doubt that biting is a serious, complicated issue. They know because they struggle with it on a regular basis.

This was the opening paragraph of the first edition of *No Biting*. In the years since it was published in 2002, I have presented many workshops and some keynote addresses on biting. I have found that more and more people outside our field know that child care centers struggle with biting. They may not know exactly what the issues are, but they recognize biting as a problem. At a conference on biting held in New York, a local politician, Westchester County Executive Andrew J. Spano, was being honored for his support of infant and toddler care. After looking over the conference agenda, which included my keynote, he told me that he hadn't known biting was such a serious issue. He had an interesting question: "What do I need to know about biting as the county executive? It must be pretty important if there is a whole conference about it." He wasn't a parent of a toddler, nor did he work in a child care program as a caregiver or an administrator, but as the county executive, he knew he should be concerned.

The answer to his question was that toddler biting is quite common in child care programs, yet even experienced caregivers often find it difficult to deal with. Both parents and caregivers can become frustrated and angry, sometimes to the point that when they can't come up with a solution, a toddler may be expelled from child care. Parents who are embroiled in difficult biting situations at a center or child care home are likely to miss work—especially those who must find new child care. That means there are not

only unhappy parents but also unhappy employers. Helping caregivers and administrators address biting more effectively with toddlers and their parents is important not just to child care programs and the families they serve but to the whole community.

At Child Care Solutions we have long been aware that biting is an ongoing and difficult issue in child care programs. We know this because we have more calls from programs, providers, and parents about biting than about any other issue. In our experience, no other single issue in programs for toddlers inflames parents and frustrates staff the way biting does. Of course parents don't want their children to be injured in any way by another toddler, but they are usually understanding and supportive of caregivers while they work to resolve problems like pinching, hitting, or even kicking. The reaction to biting, however, is usually different. Flesh torn by teeth seems so primal, so animalistic, and so frightening that it evokes very strong feelings in adults. There's still a little distance when children hit each other, but biting is up close and personal. We have seen adults completely lose control over biting—crying, cursing, even threatening staff or other parents. The most understanding and supportive parents can become exasperated when biting continues and nothing works to stop it.

Describing Biting

The members of the original task force found that the words they used to describe the problem of biting among toddlers shaped the way they thought about the issue. They needed to have a common understanding of biting and a common language to discuss the problem of biting in order to choose responses and develop policies. As a result, the task force struggled with how to describe or label biting. It certainly qualifies as a behavior problem, but it's different from many other common behavior problems. While many toddlers bite, the causes vary, so many traditional discipline techniques do not work. Since biting is often associated with the toddler stage and many toddlers bite, task force members considered referring to biting as "normal" or "typical." They felt that both of these words implied something that all children would do, something providers should be looking for as an indication that a child's development was proceeding as it should. Logically, then, a child who didn't bite would be seen as a child who was not on target developmentally. Since that obviously isn't true, the task force decided not to use "normal" or "typical" to describe biting.

Task force members then tried thinking of biting from the providers' point of view and found that many of them considered it an "expected" behavior. Using the word "expected," however, didn't seem to be a very good way to talk with parents about biting. Most parents do not expect toddlers

to bite, and it seemed unlikely that parents would want their children in a program that expected biting to occur. Calling biting "expected" seemed to portray it as unavoidable, which might imply to parents that it would be taken too lightly. It might even conjure up images of caregivers eagerly awaiting the "expected" biting.

The task force finally settled on describing biting as a toddler behavior that is "unfortunately not unexpected." This conveys the understanding that while biting is not something providers or administrators want for the children in their programs and not something they look forward to, the staff in good programs are not surprised by biting among toddlers and are prepared to address it.

However you refer to biting in your program, this experience taught us that it is necessary to talk about biting among staff members until you find words that make sense to everyone. In the process, you may uncover differences in your assumptions about biting that can make it difficult to reach consensus on a plan to address it.

Assumptions about Biting

Most people (certainly most parents) see biting as a behavior problem that must be punished. Some adults believe that biting is a "crime" that calls for "justice." According to this way of thinking, if there is no punishment, then the biter has "gotten away with it," and this cannot be allowed. Parents are often infuriated when they see their own child bruised by a bite mark and no evidence of anyone "serving time" for the "crime." They may express shock and disbelief when they ask what happened to the child who bit and learn that the child was told, "We don't bite," and then redirected to another area of the room. Many parents, and a number of providers, may want the child who bit to have to pay a price for biting. Punishment makes them feel that in at least some small way, justice has been served. This places tremendous pressure on administrators and programs to punish biting to the satisfaction of adults, both providers and parents. Programs focused on the needs of children, however, do not use techniques simply to satisfy the adults involved when those techniques are, in fact, inappropriate or ineffective with children. And there's a lot of research showing that punishment is not an effective response to any kind of behavior problem.

While the task force took the position that biting is never justified, they also recognized that most of the many reasons toddlers bite do not fall into traditional "crime and punishment" or even "problem behavior and consequences" models of addressing challenging behaviors. While everyone's goal is to help toddlers stop biting and learn other behavior, punishing the child who is biting does not help anyone—the child, the provider, or the

parent—reach that goal. It's that simple. What *is* effective at helping toddlers stop biting? To answer that question, it's necessary to understand why toddlers bite and then find strategies and techniques that match the child's reason or reasons for biting. Only then will the biting stop.

The real challenge for programs is to address biting effectively with children and explain it effectively to adults. In this book you will find information, strategies, techniques, and suggestions to do just that.

Program Perspectives on Biting

Whatever a program ultimately does about biting will be the result of the program staff's perspective on biting. Our perspectives reflect our beliefs, our attitudes, and our values. Our perspectives shape our goals, and our actions always flow from our goals.

Programs and providers who view biting only as a behavior problem will probably respond by disciplining the child. Their actions are likely to be punishments, which, as mentioned earlier, have been shown to be ineffective in stopping biting. Similarly, programs and providers who believe that toddlers bear all the responsibility for biting will respond by trying to fix the child. They will focus on getting the child to change and will not consider that their environment or practices may be a factor in the biting. On the other hand, programs and providers who believe that biting is "inevitable" will respond by "waiting out" the biting or hoping it won't get too bad. They may not take any action because they don't think they can do anything about it, since they believe biting is inevitable. Meanwhile, toddlers are injured, frightened, and confused, and parents are upset because biting continues and no one seems to know how to help or what to do.

If programs and providers want to be successful in dealing with biting, they must approach it in ways that are appropriate for children, families, and staff members. This is most likely to happen when they operate from a multi-dimensional perspective like this one:

- We understand and accept that when toddlers are in groups, biting is unfortunately not unexpected.
- We know and accept that toddlers bite for many reasons.
- We believe that biting is never the right thing to do.
- We want to help children who are bitten feel better by giving them care, support, and advice.
- We want children who bite to learn different, more appropriate behaviors.
- We understand that our caregiving environment and practices can influence biting, and we take responsibility for ensuring they are appropriate for toddlers.

• We understand that biting is very difficult for parents, and we communicate with them thoughtfully and frankly.

This perspective leads to two very worthwhile goals: to support toddlers whether they bite or are bitten and to support parents when biting occurs. With these goals in mind, you'll be less likely to look for the one perfect technique to implement, the one-size-fits-all plan for whenever biting occurs. Instead, as a professional you will approach each instance of biting from a problem-solving perspective. You will take into account developmental factors, treat each toddler as a unique individual, and look critically at the role of your caregiving environment in supporting or discouraging biting. That way, you'll always have alternatives, unlike the people locked into their one "perfect" technique, who inevitably find themselves not knowing what to do when it doesn't work. You will be like a master craftsperson who designs a plan for each specific situation and carefully carries out that plan.

This book is based on that perspective, and we recommend it to you as you work to address the biting dilemmas in your program appropriately and effectively.

How to Use This Book

The book is organized into three main sections. Chapters 1, 2, and 3 address the problem itself: why toddlers bite, how to respond when they do, how to help both the child who is biting and the child who is being bitten, and how to develop a plan to deal with repeated biting. This part of the book will help you handle your foremost concern—the children.

Perhaps just as important in controlling biting is how you talk with parents and other caregivers. The second section, chapters 4 and 5, contains information on how parents see biting, how to talk with them about it, and how to respond to their suggestions and demands. It also addresses how biting affects adults other than parents—other staff members, even members of the larger community.

The final section, chapter 6, focuses on creating policies about biting. We know that programs and providers need to have policies in place *before* biting becomes a problem. To do this, policymakers need the information, experiences, and suggestions presented in the first two sections of the book to create policies that will work well for their program as well as for children, staff, and parents.