All children have behaviours that soothe and comfort them. Sometimes these develop into habits that can worry, annoy or embarrass parents. Habits can start when a child is tired, stressed or bored. They can continue after the reason has gone.

Most habits are not a cause for concern. They usually go away by themselves as children mature.

What causes habits?
A habit is a pattern of behaviour that happens often, and sometimes without thinking. Habits form when a certain behaviour makes us feel good in some way. We keep doing it to get those good feelings. A habit can help us cope, but sometimes it can also cause problems.

When young children develop habits they are usually normal behaviours for their age that help them feel calm and relaxed. They give children a sense of control and safety, and help them to cope:

- when they are worried or stressed
- when they are tired or bored
- at times of change
- in new situations
- when a parent is not there.

Habits help children feel comfortable until they learn other ways to feel OK.

Sometimes habits have other causes, e.g. a child eating dirt after the age of two may be a sign of developmental delay. Habits can also be learned from parents or others in the family, e.g. nail-biting can often be seen in more than one family member.

Most children grow out of a habit without parents doing anything. If you ignore it, it often goes away by itself. But if a habit gets in the way of everyday activities, or causes harm or embarrassment, there are things you can do to help children stop the habit.

As children feel safer and more secure they have less need of a comforting habit. Warm, affectionate care and consistent family routines can help children feel more secure.

Most habits go away by themselves. If you are helping a child give up a habit, gentle reminders and praise for small changes work best.

Dummies, thumbs and other comforters
Sucking is a baby's first instinct. It's healthy and normal and linked to their need for food. It is also a way they explore their world. The need to suck usually gets less with age. Many young children suck on a dummy, their thumb, a soft toy or special piece of blanket. It can help them feel safe and secure, e.g. at bedtime or when in the care of others.

It's best if children give up their dummy or other comforter when they are ready, rather than when others think they should. They can become more anxious or upset if a comforter is taken away when they still need it, especially younger children.

When you see your child has less need of a comforter you can help them give it up. Choose a time when your child is not stressed, lonely or bored. You could:

- suggest they put their dummy or other comforter in a safe place while they play. Let them know they can get it without asking you
- pin the dummy or other comforter inside their pocket so they can hold it when needed. Some children feel embarrassed about taking their comforter to preschool, but still need it in this new situation.

If your child still needs a comforter a lot after 5 or 6 years of age, it is important to try to work out what is happening in their life, and to deal with any issues.
Nail biting

Many children bite their nails. They may be anxious about something, shy, still teething, or it may have just become a habit. Many children bite their nails when watching TV or when they have nothing to do with their hands. It can continue into adolescence and adult life. It doesn’t cause any health problems but may cause some bleeding and infection.

What parents can do

It can be very hard to stop nail biting. It might help to:

• give your child something to do with their hands when relaxing or watching TV
• give older children special nail care. Manicured nails and nail polish may motivate them to stop biting
• praise them for small gains in changing the habit.

Some parents use bitter paint on nails but this can be very unpleasant and often doesn’t work.

Nose picking

Most children pick their nose. They might start if their nose is irritated when they have a cold or hay fever, but it can become a habit. It doesn’t cause health problems, except sometimes nose bleeds. Most children stop doing it in public when they learn it isn’t OK in front of others.

What parents can do

It can help to:

• teach your child to use a tissue to clean their nose. Make sure there is always one handy
• interrupt the behaviour by quickly asking them to do something, e.g. to hold something for you
• ask them to rub rather than pick their nose
• have a ‘secret signal’ you use with an older child as a reminder to not pick.

Try not to focus on a child’s habit too much. It could increase their stress and ‘reward’ the behaviour by giving them more attention when they do it.

Pulling out hair

Many children twirl or stroke their hair. They often do it along with thumb sucking for comfort when tired or anxious, but some can pull their hair out. It can cause obvious bald spots.

What parents can do

You might:

• try to ignore it. Most children will stop pulling out their hair in time. Drawing attention to it can make them embarrassed without helping them to stop
• try a gentle scalp massage to help your child relax
• provide special hair care for older children and think about hair styles, e.g. short hair is harder to pull out than long hair.

Teeth grinding

Many people grind their teeth at night. Sometimes it happens when they are stressed, but often there is no obvious reason. Many babies grind their teeth when they are teething. When children grind their teeth they clench their jaw tightly. For some children this causes headaches or their jaw to ache. If it goes on for a long time or is very severe it can also damage the teeth.

Teeth grinding happens during sleep so it’s important to remember:

• it can’t be changed by rewards or punishments
• it isn’t helpful to wake them to stop the grinding. This is likely to make it worse.

Talk with your dentist if it continues.

Head banging

Head banging is common in toddlers. It usually begins at about 9 months and stops before 4 years. Some children bang their head for only a few minutes, while others can go on for several hours. Boys are three times more likely to do this than girls.

There can be many reasons why children bang their head:

• the rhythm comforts and soothes them as they fall asleep
• it helps distract them from the pain of teething or an ear infection
• occasionally it’s a way to get your attention.
It’s rarely a sign of anything serious, but sometimes head banging is part of a developmental problem. When this is the case there are usually other things you notice. While the banging may worry you, children don’t usually harm themselves. If it happens so often that their play or sleep is disturbed, talk with your doctor.

What parents can do

Children usually stop banging their head on their own without parents’ help.

- Even when a child bangs their head quite hard, they don’t seem to hurt themselves or get upset by any pain. Padding or bumpers in cots are not advised. Babies can get trapped and not be able to breathe. Removing hard bed heads, and/or shifting the bed away from the wall, might help prevent injuries.
- As head banging is usually about soothing as they fall asleep, gently stroking their head while they fall asleep may comfort them instead.
- Encourage them to express their love of rhythm in different ways, such as dancing, marching or clapping hands to music.

Try not to put your child down to sleep until they’re really ready to sleep.

Body rocking and head rolling are similar to head banging and will usually go away in time.

**Breath-holding**

Breath-holding can be frightening to watch but will not hurt your child. It is very common in toddlers but can sometimes occur in babies. Most children stop doing it by about 6 years.

Breath-holding may happen when children are crying, frightened, angry or upset, or have hurt themselves. Sometimes the child may become unconscious. When this happens, their body relaxes and they will automatically start to breathe again.

What parents can do

- If your child passes out during a breath-holding spell, keep them lying down until they recover. You don’t have to shake or slap them to get them to ‘come out of it’.
- Reassure others that your child is OK and not in danger.
- If it happens when you’re driving, stop the car to ensure you’re both safe.
- It’s important not to punish or reward the behaviour and to treat children normally after the event.
- If you learn what triggers the breath-holding you can take steps to avoid it. You may not be able to prevent it every time.

A habit might return during a time of change or stress. Let your child know this is OK, praise their efforts to stop and help them try again.

**Coughing**

Coughing that goes on for many weeks may be due to a physical problem such as asthma or hay fever. Sometimes a cough that starts with a cold or another physical cause can turn into a habit. Habit coughs that are due to stress are usually different from other coughs. They may be louder and more obvious. Or the cough could be quiet, or very brief – often just a single cough repeated a few minutes later.

What parents can do

Get your child checked by a doctor to make sure there is no physical cause for the cough. If they are old enough, encourage them to talk about any worries. Just having someone listen and understand often helps.

**Touching genitals**

It is natural for children to be curious about their body. Touching their genitals is part of learning about their body. By early school years, children have usually learnt it is something done in private.

What parents can do

- Understand that it’s normal for children to be curious about their body. It is not usually a sign of a problem.
• Respond calmly. Choose to either ignore the behaviour or divert their attention to something else.
• Talk with them about bodies and privacy.
• Talk and/or read a book with them to help them learn more about their body.

If your child is engaging in any sexual behaviour that worries you, talk with your doctor, counsellor or child health nurse.

Seek help if you are worried about your child’s habits. Talking with your doctor is a good place to start. If your child has a disability, you may want to seek support from a relevant professional.