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Head Banging Advice

The information below has been compiled from various sources listed at the bottom of this document.

What is it?

Head banging is a rhythmic, repetitive stereotypical movement. It is reported to be a common behaviour for pre-schoolers, up to 20% of pre-schoolers bang their head on purpose, with boys more likely to do it than girls. Although more common in children with autism, developmental delay or children who have suffered abuse or neglect, head banging on its own can be part of normal development.

Head banging can start at 6 months and may peak at 18 to 24 months. Most children outgrow it by 5 years, however if the child has any additional needs, it may continue longer than this. Head banging is typically seen at naptime or bedtime, although some children may also head bang throughout the day, particularly when bored or upset. The child may lie face down and head bang into a pillow or mattress, or they may bang their head against the wall or hard surface repeatedly.

Possible reasons for head banging

- For comfort: some experts think that the rhythmical movement of head banging is a self-soothing habit and can help them to fall asleep.
- Pain relief: some children may use head banging to distract them from other pain such as an ear infection or teething.
- Frustration: head banging as part of a tantrum may be a way to express emotions through physical action.
- Attention seeking: caregivers may fuss over a child who is head banging which can then become rewarding for the child as they get more attention.
- Developmental delays or disorders: head banging can be associated with autism and other developmental disorders but on its own is not an indicator.

How to respond to head banging

- Try not to worry - head banging is usually a "self-regulating" behaviour which means the child is unlikely to hit their head hard enough to seriously injure themselves. It typically goes away without any intervention being required.
- Protect the child from injury – make sure your child is in a safe environment, check bed screws and bolts to make sure they are not loose or sticking out, try hanging a

soft fabric or quilt between the bed and wall to reduce noise. If the child is in a bed try moving it away from the wall to reduce access to hard surfaces.

- Try not to make a big fuss about the head banging as you may inadvertently reinforce the behaviour. Even if you can't completely disregard the behaviour, don't scold or punish them for it. Your disapproval may only make matters worse.
- Positive attention - give the child lots of positive attention when they are not head banging.
- Reward good behaviours with specific praise to make clear what is appropriate behaviour.
- Provide other sources of rhythmic activity – marching, clapping, stamping to music. Try a metronome or ticking clock in the child's room to provide the comfort of a steady rhythm. Some baby toys provide rhythmical sounds that can be soothing.
- Try to incorporate similar movements as part of the child's daily routine. Access to a swing or a rocking chair may help the child seek this movement, but be careful it does not become too frequent.
- Make sure the child gets lots of physical exercise during the day to help burn off some of the energy that may feed head banging.
- Bedtime routine – a consistent bedtime routine is comforting for children and can help prepare them for sleep. Try a warm bath, calmly rocking on your lap, a backrub and a quiet story or song before lights out.
- Some children may find soft music or white noise in the bedroom soothing, try using a fan or looking for apps that can be downloaded.
- Provide comfort – try offering an alternative comfort object such as a cuddly toy.
- Be consistent and do not give up – children respond well to consistency. It can be confusing for children if caregivers respond in different ways to the same behaviour. It is important that everyone close to the child responds in the same way to the behaviour. Also remember that solutions take time so do not give up.

Seek advice from your health visitor, school nurse or GP if:

- The head banging continues past four years of age and you have not spoken to a professional about it.
- You are concerned that the child is hurting themselves.
- The child's head banging is disrupting the home environment and others in the house.
- You feel your child may have other sleep issues such as snoring or sleep apnoea.
- You worry your child may be having seizures.
- You are concerned about the development of your child.

They may be able to offer further information or advice as to whether a helmet is required to protect the child from hurting themselves.

Extra help with difficult behaviour

Don't feel you have to cope alone. If you're struggling with your child's behaviour:

- Talk to your health visitor, school nurse or GP – they may be able to suggest some new strategies to try
- Visit the Family Lives website for parenting advice and support, or phone their free parents' helpline on 0808 800 2222
- Download the NSPCC's guide to positive parenting or call their free helpline on 0808 800 5000

References and useful websites:

- www.nhs.uk/conditions/pregnancy-and-baby/dealing-with-difficult-behaviour/
- sunderlandccg.nhs.uk/wp-content/uploads/2016/01/Sunderland-CCG-Common-Childhood-Illnesses-web-version.pdf
- [AAP. Undated. Common childhood habits. American Academy of Pediatrics.](http://AAP.Undated.Common%20childhood%20habits.American%20Academy%20of%20Pediatrics.)
- www.babycenter.com/0_head-banging-why-it-happens-and-what-to-do-about-it_63575.bc
- www.drgreene.com/articles/head-banging/
- www.verywellfamily.com/head-banging-2634696
- my.clevelandclinic.org/health/articles/14305-head-banging-and-body-rocking
- patient.info/doctor/common-behavioural-problems-in-children
- www.kidsbehaviour.co.uk/childrenandheadbanging.html
- [American Academy of Sleep Medicine. Undated. Rhythmic movement. www.sleepeducation.com/Disorder.aspx?id=18](http://American%20Academy%20of%20Sleep%20Medicine.Undated.Rhythmic%20movement.www.sleepeducation.com/Disorder.aspx?id=18)
- [Medscape. Undated. Childhood habit behaviors and stereotypic movement disorder. www.emedicine.com/ped/topic909.htm](http://Medscape.Undated.Childhood%20habit%20behaviors%20and%20stereotypic%20movement%20disorder.www.emedicine.com/ped/topic909.htm)
- [University of Michigan Health System. Undated. Bad habits/annoying behaviors. www.med.umich.edu/1libr/yourchild/badhabit.htm](http://University%20of%20Michigan%20Health%20System.Undated.Bad%20habits/annoying%20behaviors.www.med.umich.edu/1libr/yourchild/badhabit.htm)