INFORMATION SHEET

Spitting
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Introduction
Spitting is something that many people find disgusting or at least deeply disrespectful: look at the abuse that footballers get when they’re caught spitting on camera!

This extreme dislike of spitting in our society may be because it used to be associated with deadly diseases such as Tuberculosis: people would cough up phlegm and/or blood as one of the symptoms. This was so common that places such as pubs would have containers (‘spittoons’) on the floor for people to spit into, rather than simply spitting on the floor!

So, at a deep level we probably worry that spitting may pass on deadly diseases. With the appearance of coronavirus, that worry is even greater – and people have been prosecuted recently for spitting deliberately at other people.

This makes it even more important than it used to be that we support people with learning disabilities to avoid spitting except in socially acceptable ways – and particularly to avoid spitting at other people.

Why might people spit?
There are two main types of spitting: spitting saliva and spitting phlegm. Leaving aside specific medical conditions, there’s no physical reason why most of us need to spit saliva: we simply swallow it (or dribble) if we’ve produced too much.

Most of us were taught as children, though, that it’s unhealthy to swallow phlegm. Whether or not that’s the case, many people find it unpleasant to swallow phlegm and so prefer to spit it out. In our society, it’s no longer acceptable to spit it onto the floor or into a spittoon, although it’s okay to do it into a tissue.

So, if your family member is spitting in a way that’s socially unacceptable, the first thing to decide is: (1) Is it saliva or is it phlegm?
If it’s saliva:

1) Does s/he have a medical condition that means that s/he produces too much saliva?
2) If not, do you think that s/he’s doing it ‘on purpose’?

For the person doing the spitting, spitting saliva on purpose has several advantages:

1) It’s quite easy for most people to produce enough saliva for spitting;
2) Saliva doesn’t taste nasty;
3) Spitting saliva can be done again and again without hurting the person or tiring them out;
4) Spitting saliva onto one’s chin or fingers can feel quite nice to some people.

If the person’s spitting phlegm:

1) Does s/he have a (short-term or long-term) medical condition to account for this?
2) If not, do you think that s/he’s doing it ‘on purpose’?

Spitting phlegm isn’t usually as easy or ‘convenient’ (for the person doing the spitting) as spitting saliva. However, it may have more of an impact if the person’s doing it on purpose, as many people dislike someone spitting phlegm more than they dislike someone spitting saliva.

**What to do about it?**

If you think that there may be a medical reason why your relative’s producing (too much) saliva or phlegm, seek medical advice about how to reduce it.

If this is the case, unless/until the excess saliva or phlegm can be reduced or eliminated by medical reasons, see if you can get your family member to spit into a disposable tissue. To begin with, you may need to carry the tissue yourself and be ready to spring into action as soon as you suspect that your family member’s about to spit. Give him/her lots of praise for spitting into the tissue!

At the same time, pay as little attention as possible when your family member spits elsewhere other than into the tissue. Avoid saying things such as, “That’s dirty”. Whether or not your family member understands or cares that spitting is dirty doesn’t really matter: what matters is that s/he follows the rule that s/he has to spit into a tissue. People (especially people with learning disabilities) learn much quicker and more easily from being praised for doing the right thing than from their attention being drawn to the wrong thing.
However, what if you think that your family member’s spitting ‘on purpose’? There are several possible general reasons why someone with a learning disability might spit on purpose:

1) To get your attention;
2) To avoid doing an activity;
3) To end an activity;
4) To amuse themselves (if they tend to play with the saliva or phlegm after they’ve spat);
5) To annoy you!

Given what we’ve said above about how convenient spitting saliva is, the spitting may be ‘multifunctional’: it’s used for different reasons (including possibly all of the above reasons) at different times. This may particularly be the case with someone who has little or no speech, when spitting may be a convenient but not very specific form of communication – just like a baby crying for several different reasons.

Ideally, a specialist clinician such as a Clinical Psychologist or a Behaviour Support Therapist will help you work out in detail why your family member is spitting. However, you may not be able to wait until such a person’s available. In any case, the more ‘detective’ work that you can do yourself, the easier it will be for clinicians to help when they do become involved.

So, ask yourself these questions:

1) When does the spitting happen most often?
2) When does it happen least often?
3) Where does it happen most and least often?
4) With whom does it happen most and least?
5) Does it happen more or less when the person’s doing certain activities?
6) Does it happen more or less when the person’s left by him/herself?
7) How do you (and other people) react when the person’s spitting?

Paying attention to these questions over the course of a week or so hopefully will start to give you some clues as to why your family member’s spitting. Then, you can think about how best to respond:

1) If they’re doing it to get your attention, find an alternative (more socially acceptable) way for them to get your attention. Remember: this new way must be quick and convenient, or the person simply won’t bother, if spitting works
well for them. Shouting or screaming may not be ideal but they’re okay: they’re better than spitting!

2) If they’re doing it to avoid doing an activity or to end an activity, give them another way to signal that they don’t want to do the activity or that they want it to end. Again, shouting or screaming’s okay! Ideally, see if you can shorten activities or make them less unpleasant for your family member, if you think this is why they’re spitting. In any case, you need to ‘listen’ to the alternative methods that you’re giving your family member or s/he’ll just carry on using spitting if it works for him/her.

3) If you think they’re doing it to amuse themselves, give them other similar activities (ideally water play) instead.

4) If you think they’re doing it to annoy you, give them as little attention as possible when they spit. Don’t bother ‘telling them off’: if you’ve read this far then the spitting’s been going on too long to be affected by you telling them off! However, do immediately praise and cuddle them as soon as they’ve stopped spitting and started approaching you in a more acceptable manner.

A few words about ‘ignoring’: sometimes people are advised to ignore their family member’s spitting. However, there are several problems with this:

1) We don’t want people with learning disabilities spitting, as it’s socially unacceptable and will get them into trouble or at least harm their reputation;

2) Ignoring means that we’re not paying attention to why your family member’s feeling the need to spit and so we may be ignoring something important that s/he’s trying to communicate;

3) If you’ve read this far, you’ll know that ignoring hasn’t worked for you!

4) Even if we’re successful at ignoring ‘low level’ spitting, we may simply teach the person to focus on more ‘extreme’ spitting instead. That is, we’re ‘shaping up’ the spitting to become more problematic.

So, the aim needs to be to pay the spitting as little attention as possible (whilst giving lots of praise and attention for more socially acceptable behaviours), rather than trying to ignore it completely. We’re aiming to ‘re-direct’ the person towards more socially acceptable behaviours. Telling your family member off will probably make things worse rather than better.
Conclusions

Many people find spitting very hard to cope with and it’s probably less acceptable socially now in our society than it’s ever been. So, you’re right to think about how to reduce the amount of spitting that your family member does.

Firstly, is there a medical reason for your family member spitting (more than usual)? If so, what advice can you get about that?

If you think that your family member’s spitting ‘on purpose’, though, why does s/he seem to be doing it? If you can address the reason(s) (the ‘function(s)’) for the spitting, hopefully it will start to reduce.

Ignoring spitting that’s been going on for a long time is unlikely to work and may make things worse. So, instead, pay the spitting as little attention as possible, whilst giving your relative lots of attention and praise for more appropriate ways of behaving – even shouting and screaming!

Finally, many people feel very stressed by their family member’s spitting. That’s okay – and it’s also okay to feel disgusted by it. We don’t like to see people spitting because spitting has in the past been a way that deadly diseases have spread. You may want to ‘let off steam’ to someone (such as the Challenging Behaviour Foundation’s Family Support helpline), so that you can put those feelings to one side when you’re with your family member.

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