Promoting Positive Food Experiences for Your Selective Eater

A Sensory Based Approach

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Feeding Problems and ASD

- One of the signs for developmental disorders is a feeding problem early in life (Emond et. al. (2010))
 - Slow feeding, later introduction to solids, "choosy"
- In one study (Sieverling et. al. (2018)), 60% of autistic children had at least one feeding problem.

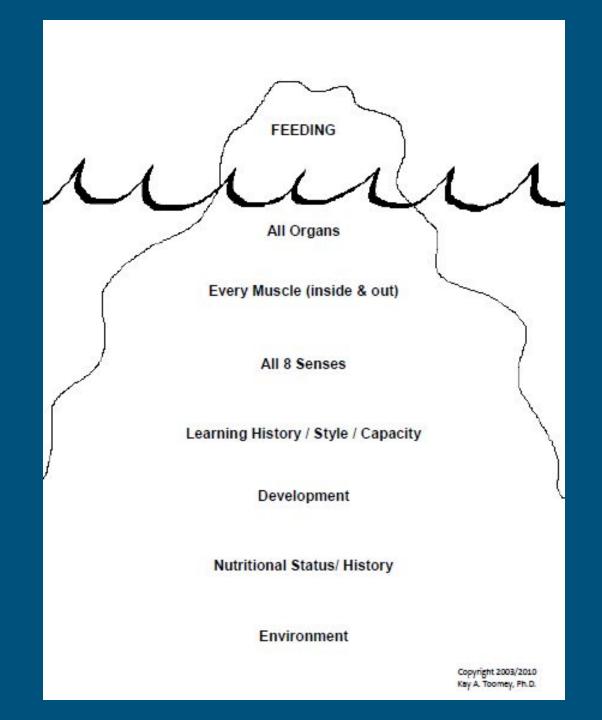


Parent Interaction

- Feeding problems impact the way a parent interacts with their child during mealtimes
 - If a child who isn't gaining weight refuses to eat during a meal, the parent will likely exhibit stress responses potentially making the meal more stressful overall
- Parent actions DON'T cause feeding problems
 - Your child's feeding problem is NOT your fault!

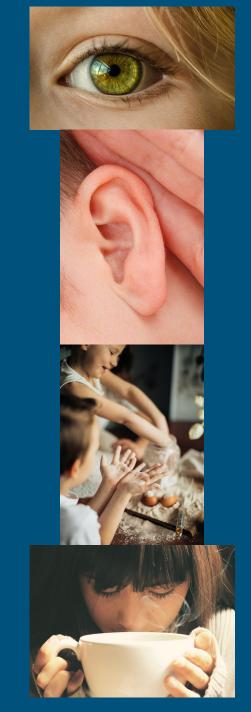


"If I didn't cause the problem, what did?"



Eating is a multi-sensory experience!

- Children with feeding difficulties are more likely to experience sensory processing difficulties than their peers
- Children can experience feeding related sensory difficulties because they are:
 - Over-responsive (Sensitive and/or avoidant)
 - Under-responsive (Low registration)
 - Cravers (Rare)
 - Experiencing a sensory motor disorder
- Children can experience multiple patterns of sensory processing simultaneously



Visual

- These children may:
 - Close their eyes or fix gaze away from food
 - Move away from the table
 - Swipe foods off the table
 - Vomit
- How to help:
 - Allow covering food with napkin
 - Present just one piece of food or the food as a whole
 - Use plain, consistent plate and placemat
 - Move food to center of table and out of personal space
 - Present foods in a "fun" shape





Sound

- These children may:
 - Cover their ears
 - Startle to noises
 - Avoid loud, crunchy foods or foods that make a unique sound
 - Struggle to eat in loud environments (restaurants, cafeteria, at home when tablet is on)
- How to help:
 - Avoid using electronics at the table
 - Turn off the TV
 - Establish a calm, conversational environment at mealtimes

Smell

- These children may:
 - Cover their noses
 - Make faces
 - Cough or gag
 - Turn head or move away from food
- How to help:
 - Put the food in a ziploc bag or clear container so they can still see it but the smell is decreased
 - Teach kids to move food away from themselves that are hard to handle (rather than moving themselves away from the food)
 - Smell a preferred food to minimize feeling overwhelmed by new/strong smells



Touch

- These children may:
 - Wipe their hands often
 - Use utensils meticulously
 - Touch food with least possible surface area
 - Splay fingers or lips
 - Grimace when touching food
 - Scrape teeth on utensil rather than lips

- Always have a cloth readily available and within child's reach so they can wipe their hands/face if they need to
- Allow use of a tool for accessing food initially
- Avoid cleaning child in chair (being washed up includes intense tactile stimulation and may build a negative association surrounding mealtimes



Taste

- These children may:
 - Gag
 - Vomit
 - Shudder
 - Grimace
 - If the response is immediate, the aversion is more likely texture related. If delayed, it may be more flavor related.

- Follow novel tastes with a preferred taste to lessen impact
- Allow spitting out into a designated container
- Allow wiping tongue off with washcloth
- Take a drink to wash the taste away
- Try to end on a positive note with a preferred food



Movement

These children may:

- Get upset when moved (being picked up and set in chair or when chair is moved up to table)
- Avoid highly chewy foods or drinking from an open cup (requires more movement)
- Take a bottle for longer (Positioning is familiar and comfortable)

- Provide warnings when movement is about to occur
- Go slow and provide ample support when moving child
- Have chair mostly adjusted prior to seating the child



Under-responders

- These children may:
 - Overstuff their mouths
 - Swallow food without chewing
 - Not react to spicy or sour food
 - Lose or pocket food in their mouths
 - Not realize when they are hungry, thirsty, or full
 - Show slow or flat responses when eating
- How to help:
 - Over-exaggerate when modeling eating foods
 - Provide big flavors or highly chewy foods
 - Prepare for mealtimes with oral input activities (i.e. bubbles)



Sensory Based Motor Disorders

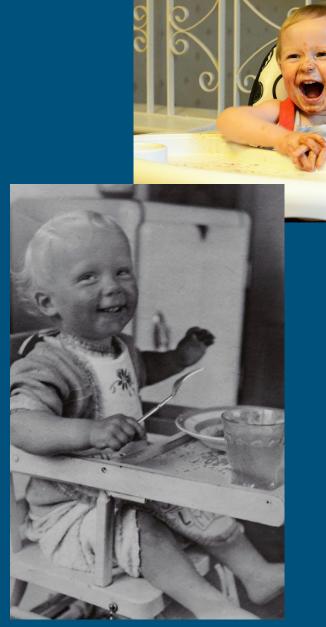
These children may:

- Fatigue quickly during mealtimes
- Constantly move in their chair or prefer walking or standing while eating
- Prefer to be fed so they can use effort to stabilize themselves
- Choose easy to eat foods
- Struggle to imitate others' actions
- Struggle to use utensils
- Have a hard time coming up with ideas for how to play/interact with food
- Prefer foods to be prepared/presented in the exact same way every time

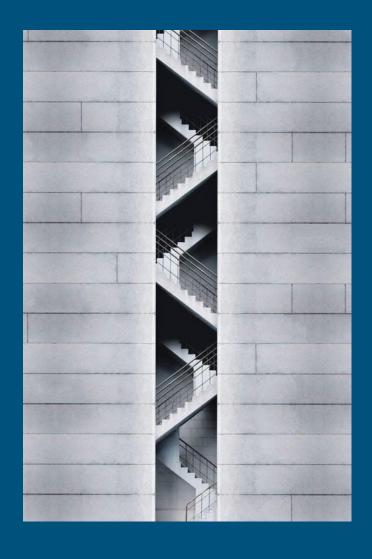
- Check posture and be sure they are supported
- Present food with small, manageable changes each time (allowing food to be the same every time leads to food jags, ultimately dropping foods, and not challenging the sensory brain).
- Use repetition within food play/interaction so children learn how to imitate

Posture

- Appropriate posture when eating is critical
 - Provides proper breathing support
 - Provides stability and balance
- A child should be seated using the 90-90-90 rule
 - Hips, knees, ankles
 - Tray/table surface should also hit between breast and belly button
- You don't need a new seat for feeding
 - Be creative!



Steps to Eating



- Following the steps to eating will help children develop multi-sensory tolerance of foods and feeding experiences
- Some children may skip some steps and some may need them broken down further
- The specific foods you use do not matter
- The goal is to move up the steps over time

- 32. chews and swallows whole bolus independently
- 31. bites & chews, swallows some and spits some

EATING

- 30. bites piece, chews "x" times & spits out
- 29. bites piece, holds in mouth for "x" seconds & spits out
- 28. bites off piece & spits out immediately
- 27. full tongue lick
- 26. licks lips or teeth, tongue tip taste

TASTE

- 25. tip of tongue, top of tongue
- 24. teeth
- 23. lips
- 22. nose, underneath nose
- 21. chin, cheek
- 20. top of head
- 19. shoulder, neck
- 18. arm, trunk/chest
- 17. whole hand
- 16. fingertips, fingerpads
- 15. one finger tip

TOUCH

- 14. leans down or picks up to smell
- 13. odor in child's forward space
- 12. odor at table
- 11. odor in room

SMELLS

- 10. uses another food to interact with the food
- 9. uses utensils/napkin/tool to manipulate food in own space
- 8. uses utensils or container to serve self onto own plate/space
- 7. uses utensils or a container to stir or pour food/drink for others
- 6. assists in preparation/set up with food

INTERACTS WITH

- 5. looks at food when directly in child's space
- 4. being at the table with the food just outside of child's space

STEPS TO EATING

- 3. being at the table with the food ½ way across the table
- 2. being at the table with the food on the other side of the table
- 1. being in the same room

TOLERATES

Family Meals

- Eating a meal together as a family
- Child is exposed to many different foods look and smell, even if they don't eat them
- Parent and siblings serve as eating role models
- Meal can be family style* or pre-plated as long as children are getting exposed to all foods
- Encourage children to help with preparation and serving to increase exposure to foods
- Make sure there is 1-2 "safe" foods at every meal



^{*}family style meals are recommended for children who are not yet okay with new foods on their plate

Family Meals Look Different for Families



None of them are "wrong". The important thing is exposure and positive role models.





Scheduled Meal and Snack Times

- Keep food to meal and snack times.
- 2-3 hours apart
- Time Limit of 20-30 minutes each
- The timing of meals should be consistent from day to day
- This allows the body to become "conditioned" to feel hunger
- High calorie drinks (e.g. milk, juice) should also be limited to meal and snack times



Meal schedule vs Grazing

Meal schedule

- Meals and snacks happen 2-3 hours apart with no food in between
- Body learns to feel hungry at mealtimes
- Leads to eating more foods presented meals
- Higher intake of calories from nutritious sources
- Healthy weight gain

Grazing

- Eating or drinking small amounts frequently during unplanned times in the day
- Eating just enough to no longer feel hungry
- Less motivation to eat during scheduled mealtimes
- Intake of mostly empty calories

Example Meal Schedule

Toddler/Preschooler	Toddle	r/Presc	hooler
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7am Breakfast

9:30 Morning Snack

12:00 Lunch

2:30 Afternoon Snack

5:00 Dinner

7:00 Bedtime Snack (optional)

School Age

7am Breakfast

9:30 Morning Snack *

11:30 Lunch *

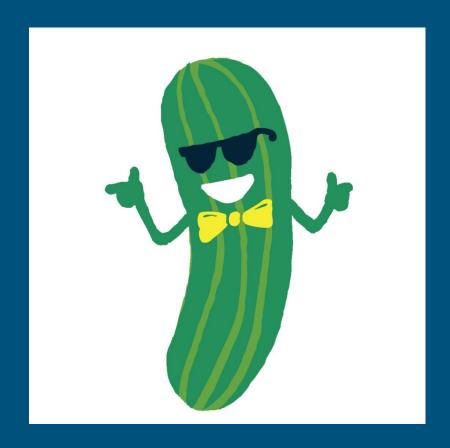
3:00 Afterschool Snack

6:00 Dinner

*Timing of morning snack and lunch as determined by school schedule

Play It Cool

- Studies show that pressure to eat can increase picky eating
- Praise is often see as a form pressure
- When your child is interacting with new foods, talk about one of their favorite interests
- You provide and the child decides
- Our role is to LET our children learn to eat rather than GET them to eat



Pressure Stop Light



Always Perceived as Pressure

o "You must eat your broccoli"



Sometimes Perceived as Pressure

o "Ohh, my broccoli is crunchy. Is your's crunchy?"



Rarely Perceived as Pressure

o "I made some broccoli. It looks like little trees. You can eat some if you want."

Mealtime Language

- Use empowering statements such as "You can" rather than "Don't" (i.e. "You can move to the middle of the table" rather than "Don't throw food on the floor.")
- Save "no" for dangerous situations
- Avoid labeling foods as "good" or "bad"
- Talk about the sensory properties of foods

Expose, Expose, Expose



- Children may need to be exposed to a food many times before they are willing to try it, and several more before they begin to "like" the food
- When starting with a new food keep amounts small to keep pressure low
- Encourage "Food Play" using the steps to eating as a way to interact with new foods
- Don't give up!

No Pressure Veggies

- Before mealtime when kids start to get "hangry"
- Offer 1-2 vegetables (or other less preferred foods) for them to eat before dinner
 - make your child has the chewing skills to manage safely
 - blanch/steam vegetables to make them easier to chew as needed
- Parent focuses on preparing the meal



Try a "Learning Plate"

- An extra plate on the table where children (or adults) can put foods they are not yet ready to have on their plates
- Children still get exposed to new foods by putting them on the plate
- Spend some time during the meal talking about the foods the on learning plate
 - O How do they look?
 - O How do they smell?
 - O What do they do for our body?



Rotate Foods to prevent "Food Jagging"

Food Jagging - When a child eats the same food over and over then drops the food entirely

- Try to avoid eating the same food more than once every other day
- For children with more limited diets try to change something about the food each time it is presented.
 - shape use cookie cutters, put in a different bowl or use a knife to cut shapes
 - color use food coloring
 - texture cook for more/less time, add more or less of an ingredient
 - o flavor use koolaid powder or spices to add flavors
 - Allow the child to be the one to make the change.

Learn that having fun with food is ok!

- The steps to eating include critical developmental steps that families sometimes avoid, but must learn to embrace:
 - Getting messy, touching food, and wearing it is GREAT!
 - This is not the end goal, kids will move past it
 - Spitting food out is important for learning
 - Kids won't get a food DOWN if they don't first feel safe in getting it OUT.

Learning to eat is the first priority,

Manners come later!

Resources

- Books
 - Raising a Happy Healthy Eater by Nimali Fernando MD MPH & Melanie Potock MA CCC-SLP
 - Adventures in Veggieland by Melanie Potock MA CCC-SLP
 - Anxious Eaters, Anxious Mealtimes by Marsha Dunn Klein
- Social Media
 - Feeding Littles Instagram
 - dietician and pediatric OT/Feeding therapist
 - Melanie Potock Facebook & Instagram
 - SLP/Feeding Therapist
- Websites
 - o Doctoryum.org
 - Family friendly recipes, cooking classes and more

