Feeding and Mealtimes

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Fact: kids have 2 stomachs. One is the meal stomach. It's about the size of a pea. This is why children cannot consume a full breakfast, lunch, dinner.

The second stomach is the snack stomach. This stomach stretches and has infinite amount of space.





Outline

- Introduction
 - Common Myths of Mealtimes
 - Types of Eating Concerns
- Model for Why Picky Eating Develops
 - 1. Physiology
 - 2. Motor Skills
 - 3. Mealtime Behaviours
- General Strategies

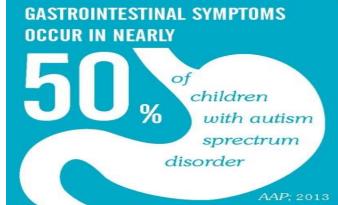




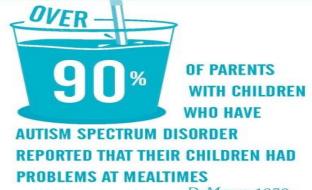
Statistics



-Williams, Dalrymple, Neal; 2000



FEEDING STRUGGLES ARE OFTEN UNDERLYING SYMPTOMS FOR OVER FOUR **DIAGNOSES**



-DeMeyer, 1979



PICKY EATING INCLUDES FOOD REFUSAL, LIMITIED VARIETY, SPECIFICITY IN PRESENTATION. **DISRUPTIVE MEALTIME BEHAVIORS,** AND TEXTURE SPECIFICITY



OF 18-24 MONTH OLDS ARE DESCRIBED AS PICKY **EATERS BY THEIR MOTHERS**



10 Myths of Mealtime

- 1. Eating is the body's #1 priority
- 2. Eating is instinctive
- 3. Eating is easy
- 4. Eating is a two-step process
- 5. It is not appropriate to touch or play with food





10 Myths of Mealtime

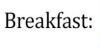
- 6. If a child is hungry, they will eat. They will not starve themselves
- 7. Children only need to eat 3 times a day
- 8. If a child won't eat, they either have a behavioural or biomedical problem.
- 9. Certain foods are only to be eaten at certain times of the day.
- 10. Children need to "mind their manners" at meals.





Eating Concerns

Picky eater phase toddler to 5 year old starter pack:





This every day only butter on white bread



Snacks:

or



or



or



Lunch:



or



<= Grape Jelly and smooth PB only

or



<= Only American cheese

Dinner:



T PAMEN

Plain with no meat or seasoning.









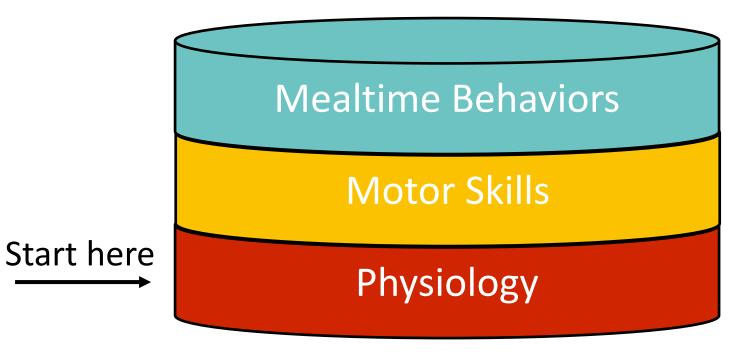


Model for Why Picky Eating May Develop





3 Key Pillars





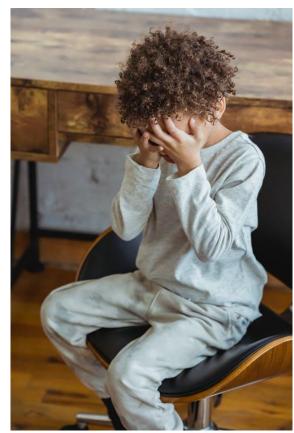


Physiology

Physiology

- Allergies/Food Intolerances
- Genetics
- Difficulty swallowing
- Glissues
 - Constipation
 - Reflex
 - Poor Motility
- Medication
- Taste Aversion
- Sensory Processing

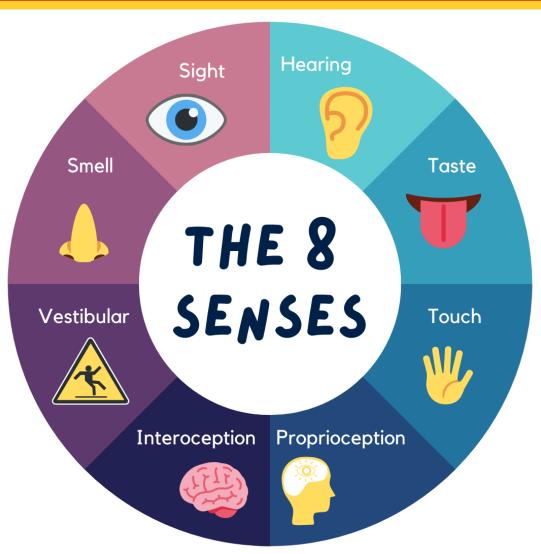






Sensory processing









Exploring foods through senses

Physiology









Case Study: Abdi

- Client: Abdi
- Age: 4.5 year old
- What we knew:
 - very sweet and engaging boy
 - Parents said he was very picky eater and mealtimes were lasting longer than an hour
 - Sometimes vomited after meals and had a lot of chest infections
 - The family said that there was also a lot of running away during meals.





Summary



- Eating is the most complex physical task humans engage in
- How we interact with food is affected by our physiology, our motor skills, and our learned behaviours
- We must address underlying physiological issues BEFORE (or concurrent to) engaging in other feeding interventions.





Motor Skills

- Fine Motor Skills
- Oral Motor Skills
- Gross Motor Skills

Motor Skills
Physiology





Taking a bite



Progression of skills from infancy to toddlers

Multi-step process

Why is this sometimes delayed?





Seating and Positioning











Case Study: Connor

- Client: Connor
- Age: 5 years 11 months
- Presenting Problem:
 - Limited food variety, however ate food from most food groups
 - All food was cooked till a porridge consistency
 - Would rub items on his lips, but would only open his mouth when eating
 - Anytime parents tried to change his food he would refuse to eat.



Summary



- Need a balance between rate of maturation and positive practice
- Increase textures of food to build oral skills
- Consider readiness for self-feeding
- Open cups or straw cups to build oral motor skills
- Gross motor skill development can affect ability to eat





Mealtime Behaviours

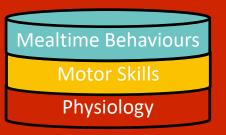


- The word "behaviour" gets a bad rap.
- Everything we do is behaviour.
- Not saying your child is "bad," "trying to be naughty," or wants your attention.





Mealtime Behaviours



- Common mealtime challenges:
 - Frequently leaving the table
 - Pushing food away
 - Throwing food
 - Pocketing food in their mouths/not swallowing
 - Gagging
 - Crying
 - ...etc.





Mealtime Behaviour



- Why do these challenges start and continue?
 - -Likely start because of one of the earlier domains
 - Physiological or motor challenge
 - Unclear mealtime routine
 - Unclear or inconsistent expectations or instructions
 - Caregiver concerns or stressors
 - Likely continue because your child, not necessarily on purpose, gets something they want or something they don't want is removed.





What should our goals be?

- Acceptance that people eat different things
- Be able to eat in the same room as others
- Have a balanced, nutritious diet
- Learn how to try new food
- Learn how to refuse food
- A peaceful meal





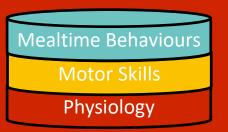
A note on dinners







General Strategies



- Creating peace
- Routine
 - Structured meal and snack times- 3 meals, 2-3 snacks, no eating in between, no milk or juice between meals
- Say what you mean and mean what you say
- Gradually increase expectations
- Rewards
- Modelling





The Satter Division of Responsibility in Feeding in our experience

Your Job with Feeding

- What
- When
- Where

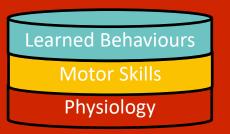
Your Child' Job with Feeding

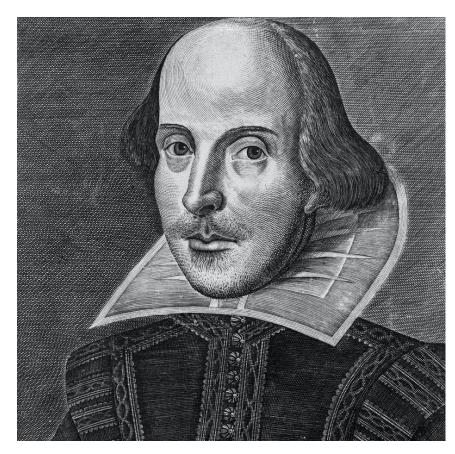
- How Much
- Whether





Reinforcement aka rewards





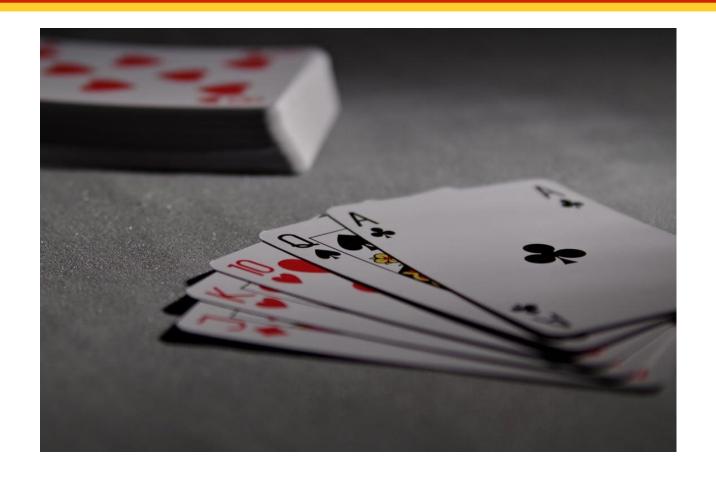
To reward or not to reward?

That is the question.





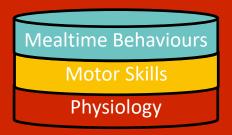
Stacking the Deck







When to celebrate?



- Depends on the child, but may include:
 - Remaining seated
 - Taking a bite
 - Chewing
 - Swallowing
 - Touching the food
 - Finishing the whole meal
 - ...etc.





Sitting at the Table



- Things to consider:
 - Why is your child not sitting at the table?
 - Has a mealtime routine been established?
 - What are your family goals around sitting?
 - Sitting is a skill that needs to be learned
 - Environment





Case Study: Able

- Client: Able
- Age: 6 years
- Presenting Problem:
 - Did not sit at the table to eat and couldn't feed himself.
 - Parents would follow him around the house to feed him or feed him while sitting on the couch.
 - Did not indicate when he was hungry or ask for snacks.







- The 3 Es
 - Exposure: present a variety of new foods
 - Explore: interact with foods without the expectation of eating
 - Expand: broaden opportunities beyond family meals





Learned Behaviours

Motor Skills

Physiology

- Hiding Foods
 - Not a great long-term strategy
 - Does not address the 3 Es (child doesn't know)
 - Doesn't build trust and comfort with the food







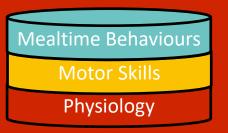


Stretching the Familiar

- Making small changes to a familiar food to help your child manage a comfortable level of change
- Building flexibility into the routine







Graduated Exposure or "Taste Sessions":

- Increasing interaction with new foods before eating the food
 - In personal space
 - Touch
 - Smell
 - Kiss
 - Lick
 - Take a bite and take out
 - Chew 2x and take out
 - Chew 5x and take out
 - Chew and swallow

These might change according to where your child is at (smaller or bigger steps)





Taste Sessions



- What should your child already be able to do?
- When and where to do a session?
- What food should we choose?
- How are we motivating them to work hard and be brave with food?





Taste Sessions



So he is eating a grape with you, in a snack, what's next?





Case study: Mohammed

- 8 years old
- Presenting concerns:
 - Very limited food repertoire (10 foods including: fries, pizza from Panago)
 - Ate in front of the tablet
 - Milk and juice between meals
 - Family did not eat together and he ate separately at school





Summary

- Rule out medical and motor skills before looking at behavioural strategies
- Make gradual changes to the foods they are already eating
- Increase your child's interaction with new foods before expecting them to eat the new foods





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