

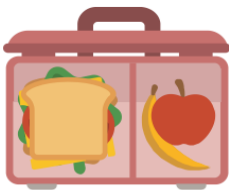
# PICKY EATING AND AUTISM

## EARLY SIGNS, PREVENTION, AND STRATEGIES

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### **Selective feeding is common in children with autism spectrum disorders (ASD).**

Children with ASD eat significantly fewer foods from all food groups than their same-age peers without ASD, which puts them at a heightened risk for nutrient deficiency (15,18). Poor nutrition can lead to other difficulties, like learning and behavioural problems (17).



## **1 WHAT IS PICKY EATING?**

Picky Eaters will eat 30 or more foods - they may drop some during a "food jag" (period in which the child will only eat one food, every meal of every day), but these usually come back after 1-2 weeks.

1 in 3 parents identify their child as a picky eater (14).

Problem Eaters will eat 20 or fewer foods. They avoid entire food groups & will become upset when presented with new foods.

Avoidant/Restrictive Food Intake Disorder is more severe; this is when the child is not taking in enough nutrients to support proper development.

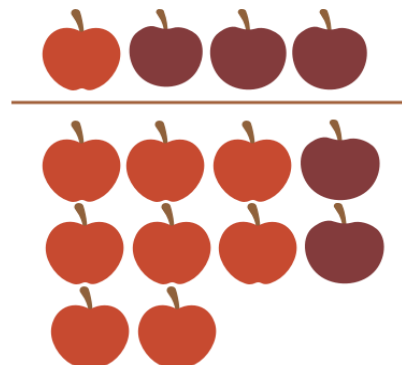
This can lead to failure to thrive (5, 14).

## **2 IS THIS NORMAL?**

Studies report that selective eating occurs in about 1 in 4 typically developing children. For children with ASD, this can be higher than 8 in 10. (9)

Many aspects of feeding are challenging for children with ASD, including communication, behavioural flexibility, and sensation.

For these children, pickiness often extends beyond the food itself, to the way the food is made and how it looks (including food colour, and the plate or cutlery on which it is served). (7)



### 3

## PRECURSORS TO PICKY EATING



Decreased sucking and feeding time, or swallowing difficulties, in infancy (7).



Gastrointestinal problems and/or conditions when very young (4,7).



Medical conditions or developmental delays (4).



Parent pickiness: shown to be correlated with picky eating in kids with ASD. (10)



Noticeable difficulty transitioning from purees to solids, weaning off the bottle, and a drop in foods around 32 months (3,11).



### OTHER FACTORS...

These things may affect a child's food preferences later in life:



Family behaviour: repeated exposure & praise for trying new foods can increase food acceptance (2,7,12).



Studies show that neophobia (fear of new things) is more common in ASD overall, and in boys more so than girls (6).



Babies that were breastfed tend to accept new foods more readily than formula-fed babies (16).



Mealtime culture: essential to be consistent with time and place. Kids with ASD have trouble changing routines once established, and watching siblings can increase food acceptance (1,11).



Expectations: kids with ASD can fall into a routine with processed foods, refusing a type of food unless it is a particular brand (3).

## 4 PREVENTING PICKINESS



### ESTABLISH A ROUTINE

Have regular "eating opportunities" that fit naturally into your day for snacks and meals.

Try to eliminate grazing and limit fluids (except for water) between meals.

Plan meals out at the beginning of the week.



### NO PRESSURE

Aim for an enjoyable meal! Pressure can increase anxiety and decrease appetite.

Avoid making eating the forefront of interactions and assure your child that they do not have to eat.

Include a preferred food item at each meal.



### INVOLVE YOUR CHILD

Have them help in a variety of ways:

- Menu planner
- Grocery shopper
- Food prepper
- Table setter
- Dish washer

Encourage internal motivation ("I do it!").



### MODEL BEHAVIOUR

Demonstrate the behaviour you want your child to do:

Talk positively or neutrally about food.

Model the manners you expect them to use.

Eat where, when, and how you want them to!



### MAKE FOOD FUN

Go beyond the table! Read book & watch TV with food themes.

Include sensory play with food products (dried beans, macaroni art).

Make crafts with different kinds of food.

Engage in pretend play with toy foods, and more!



### KEEP IT WHOLESOME

Feed your child homemade, whole foods as much as possible.

Avoid using processed, pre-packaged foods as a quick fix.

Fruits and veggies are always better than processed sugars, like granola bars.

Remember: fresh is best!

# 5

## STRATEGIES TO EXPAND FOOD PREFERENCES

The success of these strategies will vary based on each child's needs; use at your own discretion, and always supervise.



### PHYSICAL STRATEGIES

Encourage activities that involve movement of oral-motor structures, like blowing up balloons or sucking on candy.

Try to exaggerate your movements while eating as a demonstration, or have your child eat in front of a mirror to see their own.

Use materials that help your child: suction bowls, utensils with thick handles, and divided plates.

### OPTIMIZE YOUR ENVIRONMENT

Set mealtimes up for success: try to stick to a schedule and keep a time limit of 30-40 min.

Limit distractions: turn off any music, TV, tablets, or smartphones that may distract your child.

Give them an "out" - if they don't want to eat something, provide a napkin or discard bowl to avoid throwing or spitting.

### DIVISION OF RESPONSIBILITY

This means dividing the decision-making between the parent and the child:

- > The parent is responsible for what, where, and when the child & family eat.
- > The child is responsible for whether and how much they eat.

Outcomes are better for children who are praised for acceptance of new foods, and negative behaviours are ignored. (2,8,13)

### EXPANDING THEIR REPERTOIRE

For kids with ASD, "trying" actually requires 32 different steps (5). Start slow - having them just tolerate it on their plate or skin, then using "mouse bites" or cutting new foods into matchstick pieces.

Re-introduce previously rejected foods. This will take 10-15 times for the average child, and longer for children with ASD - up to weeks or months (13).

Use their strengths - expand from things they like, changing one aspect at a time. For example, tater tots to french fries to potato wedges. Remember to let them move between challenge and comfort within a meal.






Pick your battles: only change one thing at a time, stick to that one strategy for 6 weeks, and look for change.



## SEEK SUPPORT

Eating is a complex task, and is affected by a host of factors. While you are the expert on your child, you are not alone in facing feeding challenges.

## EXAMPLES OF RESOURCES:

-  Deceptively Delicious: Simple Secrets to Get Your Kids Eating Good Food. Jessica Seinfeld, Harper-Collins, 2008.
-  Eat Right Ontario: [www.eatrightontario.ca](http://www.eatrightontario.ca)
-  Ellyn Satter's Division of Responsibility: <http://ellynsatterinstitute.org/dor/divisionofresponsibilityinfeeding.php>
-  Feeding Matters: <http://www.feedingmatters.org/recipes>
-  Just Take a Bite: Easy, Effective Answers to Food Aversions and Eating Challenges. By Ernsparger and Stegen-Hanson (Future Horizons Inc, USA, 2014).



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