

# **Eating Issues**



**Gerald T. Guild, Ph.D., NCSP**

**Licensed Psychologist**

**Behavior Specialist**

**Preschool Learning Center**

# Prevalent Eating Issues



⌘ Food selectivity

☑ eating only a few preferred foods

⌘ Not sitting for meals

# Food Selectivity



- ⌘ This problem can simply be addressed by allowing the child to eat preferred foods
- ⌘ This may be fine
- ⌘ However, it may lead to nutritional concerns
- ⌘ This is a deeply personal parental decision
  - ☑ physician consultation is advised

# Food Selectivity Program



## ⌘ Caution!

⏏ Before considering intervention:

- ⊗ Working on toilet training?
- ⊗ Are other behavioral issues more pressing?
- ⊗ Is there a skill deficit?

# If yes to any of the above



⌘ It is recommended that you postpone a selectivity program

⌘ Why?

☑ Such a program can be emotionally demanding

☑ combining such a program with other programs may overwhelm the child

☒ undermining each or all programs

# If going ahead



## ⌘ Keep a *Dietary Log*

- ☑ a running record of the child's food/beverage intake
- ☑ do so for one week to one month

## ⌘ Include

- ☑ what is eaten (including amount)
- ☑ foods consistency & texture

# What you will learn



- ⌘ What foods are needed to supplement your child's diet
- ⌘ Textures preferred/avoided
- ⌘ Color preferences/exclusions
- ⌘ Taste preferences/exclusions
  - ⌘ sweet
  - ⌘ sour
  - ⌘ mild
  - ⌘ spicy

# Also attend to:



- ⌘ Allergies
  - ⌘ dental problems
  - ⌘ sores or injuries in the mouth
  - ⌘ oral-motor problems
- 
- ⌘ How much structure and routine is present around meal times

# Structure & Routine



- ⌘ Build dinner into the daily routine and schedule - include menu on the daily calendar
- ⌘ Make the dinner routine predictable and consistent
- ⌘ Establish clear expectations
  - ☑ reward compliance
  - ☑ obtain compliance through prompting

# Food Selectivity Program



⌘ First establish clearly defined goals

- ☑ this is accomplished by reviewing the log and assessing the child's nutritional, medical, behavioral, and adaptive needs
- ☑ make sure the goals are attainable
- ☑ one or two goals are enough

# Food Selectivity Program



## ⌘ Limit Access to Food

- ☑ This is done to establish the child's hunger at specific times during the day.
- ☑ Provide food only at major meals and limit the child to one snack a day.

# List preferred foods



- ⌘ Limit intake of these preferred foods
- ⌘ Here we are increasing the child's level of hunger and increasing the reinforcing properties of the desired food

# At Meal Time



- ☒ Have food prepared
  - ☒ preferred food
  - ☒ goal food (the food you want to introduce)
- ☒ Serve a **small portion** (no larger than a 1/4 teaspoon) of the goal food
- ☒ hold preferred food contingent on eating the goal food
- ☒ make the contingency very clear using the best communication system established for your child -  
“Eat <carrot> first, then you can have your <spaghetti>”.

# Be consistent - Be strong



- ⌘ If your child refuses the Goal Food be firm and hold to the contingency
- ⌘ Refrain from supplementing with other desired foods or snacks between now and the next meal
- ⌘ The increased hunger will increase motivation and the likelihood of compliance at the next meal

# Slowly increase the portion of the Goal Food



- ⌘ Your child may learn to find the Goal Food less aversive because of its pairing with the desired food
- ⌘ Praise Goal Food eating behavior
- ⌘ Do not move too fast
- ⌘ Do not give the Goal Food at other times during the day

# Caution!



- ⌘ If your child goes several meals without eating and is losing nutrition this approach may not be advised
- ⌘ consult a physician

# Sitting for a Meal



- ⌘ Many children with Autism have difficulty sitting through meal time.
- ⌘ Parents often resort to:
  - ☑ mini-meals, or
  - ☑ Letting their children eat on the run
- ⌘ This may work at home but at other's homes or in the community it may cause disruption



**Or perhaps you just may  
want to have a family  
meal!**

# Build Structure & Routine



- ⌘ Build dinner into the daily routine and schedule
- ⌘ Make the dinner routine predictable and consistent
- ⌘ Establish clear expectations
  - ☑ reward compliance
  - ☑ obtain compliance through prompting

# Sitting at the Table



- ⌘ Often the first step in achieving meal time sitting is to first teach the ability to sit still.
- ⌘ Depending on your child's skill set, this may require:
  - ☑ a specific ABA plan,
  - ☑ changing the eating time so you can prompt, enforce, and reward sitting behavior, or

# Gradually Increasing Sit Time



- ⌘ Limit all eating to sitting at the table
- ⌘ Use preferred foods (to increase motivation and make sitting more tolerable)
- ⌘ Start small and gradually increase the duration of and/or the number of bites required before leaving the table
- ⌘ Slowly generalize to other foods

# Caution!



- ⌘ If your child goes several meals without eating and is losing nutrition this approach may not be advised
- ⌘ consult a physician

# Sometimes



- ⌘ The problem is not significant enough to warrant intervention
- ⌘ you may add dietary supplements
- ⌘ you may restrict eating to one room
- ⌘ you may let it go

# Always



⌘ BE CONSISTENT

⌘ emphasize positives

⌘ pick your battles carefully

⌘ be reasonable about what you can do and  
about what you can expect

⌘ Remember that it can be done!

# Resources



- ☒ Fouse, Beth, & Wheeler, Maria, (1997). ***A Treasure Chest of Behavioral Strategies for Individuals with Autism.*** Future Horizons, Inc. Arlington, TX.
- ☒ Powers, Michael, D, (1989). ***Children with Autism: a Parents' Guide.*** Woodbine House. Bethesda, MD.
- ☒ Richman, S. (2001). ***Raising a Child with Autism: A Guide to Applied Behavior Analysis for Parents.*** Jessica Kingsley Publishers, Philadelphia, PA.