

Eating Challenges

Introduction

Many children with autism have difficulty with eating, and these challenges range from being very restricted about the foods that they want to eat, to having physical problems with chewing and digesting a variety of foods. The sensory processing issues that are associated with autism also affect how a child eats, because the smell, sight and feel of food can bother them. This is a brief overview of some common eating challenges that you may face, and reviews ideas on what you can do to make meal times easier. Please be aware, however, that these suggestions are not meant to replace medical advice, and that any eating challenges need to be evaluated and treated by a qualified medical professional.

Eating is a process that involves many complex steps. Eating begins with seeing and smelling a food, and includes using utensils and cutlery to eat independently. It also requires the physical process of tasting, chewing and swallowing and finally the process of digestion and elimination. Except for digestion, a child needs to learn what to do at each stage. There are also several factors that can impact how a child relates to the idea of eating, including a family's culture and nutritional preferences.

Why Children Have Difficulty with Food

First, let us explore some possible reasons why children with autism have difficulty with eating.

- 1) **Motor-skills** – Underdeveloped motor skills can contribute to eating challenges in children with autism. Some children may not have the muscle control to chew food effectively in their mouth, and this can lead them to strongly prefer foods with certain consistencies and textures. Reduced fine motor skills can also reduce a child's interest in eat certain foods, since it may just be too frustrating for them to feed themselves.
- 2) **Sensory Processing Challenges** – The way food looks, feels and smells can all be overwhelming for a child with autism. In the process of eating, the way a food looks, feels and tastes changes from when it starts on the plate until it's prepared for swallowing. The frequently changing sensory quality of a food may lead a child to have a strong aversion to foods such as fruits or vegetables and prefer bland foods such as carbohydrates. They may also limit food choices to foods with familiar sensory changes. Children can also have a reduced awareness of food. In certain cases, they

may be unable to sense where the food is in their mouth, which creates a safety and choking hazard.

- 3) **Medical Conditions** – Some children with autism may suffer from gastrointestinal medical conditions such as chronic constipation, food intolerances, or low muscle tone. Identifying these underlying medical issues is very important, as your child may not be able to tell you about the discomfort that they may be feeling. Your child's primary care physician should be your first point of contact for identifying underlying medical issues.
- 4) **Learned Behaviors** - Some children may exhibit avoidance behaviors around certain foods such as spitting out food, throwing tantrums, and pushing food away that they do not want. Parents' behavior of removing non-preferred foods and only presenting foods that they know their child will eat tend to maintain these learned behaviors at mealtimes, resulting in restricted diets. Often a child's medical condition can progress to behavioral issues when these behaviors are reinforced. A child's BCBA and trained feeding therapist can work with you to help identify underlying feeding issues and develop new positive behaviors around eating.

What You Can Do

First things first, a child with autism is not just a "picky eater". There are both physical and psychological reasons for restrictive behaviors around food, and identifying and addressing these issues can help with eating. There is often a sense of guilt that caregivers feel because it is upsetting when a child is not getting proper nutrition. However, a child with autism will not simply eat if they are hungry. As a caregiver, you may need professional help for your child. A great place to begin is with your child's physician.

- 1) **Medical evaluation** – Talk to your child's physician about eating issues. They may want to run some tests to determine if there is a medical condition that is causing problems with eating. For example, if your child has acid reflux, this may not be apparent to you, yet it can cause severe discomfort for a child and impact what and how much they eat. Other common causes for eating difficulties include motor development delays, dysphasia, digestive issues such as a food intolerance or allergy and constipation.

- 2) **Setting your child up for success** – Changing up the way you present food to your child, and presenting it without packaging can reduce their dependency on specific dishes or packaging. You can also use positive words to describe food, and redirect negative words such as “Yuck” or “I don’t like this”. You can say something like, “This food is green. It is crunchy.” to help them learn about textures and colors that they may not like. You should also allow your child to decline some foods if they are really bothered by them.
- 3) **Addressing behavioral issues** – If your child has behavioral challenges during mealtime, such as tantrums, crying, hiding, or other such behaviors, you should talk with your child’s therapist for ideas on how to manage these behaviors. Often, parents give in to tantrums to avoid having a child miss a meal, but this could be reinforcing the behaviors you don’t want to see. Speech and Language Pathologists, as well as some Occupational Therapists are trained in the area of eating challenges, and can outline a number of ways in which you can work with your child to reduce undesirable behaviors.
- 4) **Identifying preferred flavors, colors and textures** – You can take notes during mealtime to see what kinds of flavors, textures and colors your child prefers. You can then search for recipes that can use new fruits and vegetables in a way that your child may like to eat them. For example, if your child likes muffins, you could add greens or other vegetables to a muffin recipe, and boost the nutritional value of the muffins. Many books are available with healthy and nutritious recipes focused on getting children to eat more nutritiously.
- 5) **Making meal time predictable** – Children with autism often prefer predictable schedules during their day. Making meal time predictable, by sitting down for a meal at approximately the same time with the family, can make mealtimes less stressful for a child. You can also have fixed snack times, and limit the amount of snacks a child can eat to ensure that they are hungry by meal time.
- 6) **Mixing** – A common technique to get a child to eat a new food is mixing a preferred food with a non-preferred food in changing increments. For example, if your child likes banana milkshakes, but you would like them to try blueberries, you can begin by creating a milkshake with 90% bananas and 10% blueberries. You can offer this to your child for 3-4 days until they are comfortable with it. Slowly, reduce the percentage of banana in the food, and increase the amount of blueberries, until they are able to drink a milkshake with at least 50% blueberries. This entire process could take up to two weeks or more depending on your child.
- 7) **Supplemental nutrition** – You could also talk to your child’s physician about supplemental nutrition, such as nutritional shakes if your child only eats a limited selection of foods. This will help them to maintain good nutrition.

Conclusion

Even though eating can be challenging for children with autism, we hope you have found these tips useful, and will be able to try some of them with your child. Do remember that **your child’s doctor should be your first point of contact for eating issues**, as you do want to ensure that your child is getting adequate nutrition and that medical issues are addressed.

Implement changes slowly, and give your child a chance to adjust to these changes. If you are trying to change behaviors, you may actually see things get a little worse before they get better, but this is to be expected and should improve with time. The Porchlight Education Series website also has additional resources on other aspects of eating. www.porchlighteducation.org