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FUSSY WITH FOOD

Does your child have limited food items that he/she prefers to eat? Do you have to always prepare a meal specific to his/her liking which is different from what the rest of the family eats? Is the mealtime generally associated with a meltdown? If yes, then you've got yourself a picky eater.

Feeding problems in infants and young children are common. In healthy children who are developing and growing normally, feeding problems are usually not serious and can be managed conservatively by reassuring the family and providing them with anticipatory guidance and follow-up. A majority of serious childhood feeding problems occur in children who have other medical, developmental, or behavioral problems. These are best evaluated and treated by an inter-professional team who can identify and address issues in the medical and/or developmental history, problems with oral motor control and function, problems with swallowing, and behavioral and/or sensory issues that may interfere with normal feeding ([Borowitz KC¹](#), [Borowitz SM²](#), 2017).

We all may know at least one child around us who is a picky eater. This is typically a child who often refuses to eat, avoids trying new foods, or may have a reduced appetite for a prolonged period of time.

Eating is something we all indulge in. It is a part of our day-to-day life. It is not just a means of survival for good health and nourishment, but also an opportunity for social engagement with family, friends and society. Parents may possibly be able to manage a picky eater at home by accommodating the child's dietary needs, but in social settings like a family dinner, picnic, birthday party the child's difficult eating habits come to the forefront, making it



cumbersome for the child and the parent to participate and engage in that social setting. This child may also feel weak due to lack of nutrition, have poor endurance, and will be cranky and wound up because he/she may be hungry but can't eat. This tells you they need help.

We must understand that each child is unique, having unique difficulties and needs to be assessed individually. First and foremost, we must look closely for medical reasons for a child refusing food. This might include a number of conditions like gastroesophageal reflux, constipation, food intolerance, increased work of breathing, respiratory problems, dysphagia, or poor appetite. Consider working closely with a primary care physician, developmental paediatrician or gastroenterologist to obtain further assessment and some medical management strategies (supplement nutrients, vitamins etc.).

However, sometimes a child may also have sensory motor difficulties leading to eating challenges.

In this case the child can be more of a problem eater than a picky eater. How do you differentiate a problem eater from a picky eater? Problem eating occurs because some children are sensitive to certain tastes, smell and textures of foods. They struggle with processing and responding to the oral sensory information they encounter in everyday life.

- They may have a heightened sensitivity (hypersensitivity or defensiveness) to oral input, causing them to be resistant to oral sensory experiences like trying new foods or brushing their teeth
- They gag at the sight, smell, touch, or taste of foods. Gagging can also be a learned behavior that may have started from either sensitivity to sensory input, difficulty chewing, or swallowing food at some point



- Problem eaters eat only specific type of textures. Most of the time they prefer crunchy foods, but sometimes they may prefer soft foods/ semi solid food, which is easier to gulp down.
- They generally have associated tactile defensiveness i.e they avoid or dislike their hands getting messy, and not just during meals. You will often see your child get uncomfortable with crafts or digging in dirt/sand, etc.
- There may be some who overstuff or pocket food excessively and/or frequently
- They Have chewing/biting difficulties
- Problem eaters have reduced exploration of objects in the form of mouthing or chewing on toys and other objects as a baby/toddler
- Excessively mouth and chew on various toys past the age of 18 months
- Their resistance towards eating may be accompanied with emotional responses (such as meltdowns, fear, running away etc.)

If you see any of the above symptoms in your child consulting an Occupational therapist (OT) can be helpful. An OT uses sensory integration therapy to aide your child overcome these sensitivities as well as accompanying behavioural difficulties. Treatment plans are always individualized and focus on multisensory activities and strategies designed to help children cope where they struggle and get used to foods and textures.

Here are a few simple strategies that can be very

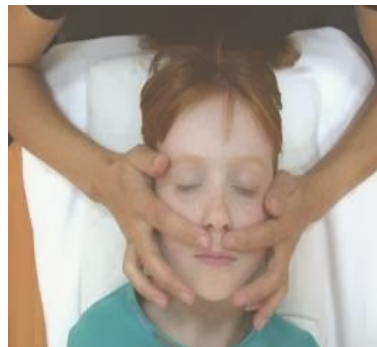
powerful when used appropriately and consistently.

- Encourage them to interact with the food in some way. They may need to spend some time just touching the food to get used to the texture



- Cook together: This is a no-pressure time that allows kids to explore new foods. They will often feel brave enough to try something new in the fun and relaxed nature of the moment. Again, the key here is breaking down some of that sensitivity through the exploration of food
- Play in a variety of sensory bins to explore different textures
- Structured routines, eating at the same times and locations and with the same utensils can help create comfort and a primer for mealtime
- To desensitize your child start with deep pressure massages over the head, face and progress to oral massages on the outer surface of the mouth
- Engage your child in peri-oral play like blowing whistles, bubbles, and messy play etc.
- Replace your regular toothbrush with a vibrating one and use it twice a day

“Treatment plans are individualized and focus on multisensory activities and strategies designed to help children cope where they struggle and get used to foods and textures”



- Make brushing fun by using a song or pretend play (e.g. brushing his/her favorite doll/dinosaur and progressing to brushing child's own teeth), when brushing teeth encourage your child to allow you to help, and brush the sides of the tongue, top of the tongue and inside the cheeks as well
- As a parent track your child's food sensitivities and keep them in mind when preparing meals
- Build off of textures that your child prefers. Does your child have trouble with "mushy" foods? Then offer apple slices instead of applesauce, or a baked potato instead of mashed
- Think about making small changes to the foods they already like by changing up the brand, flavor, etc. you can also team up preferred with non-preferred food. If you'd like your child to try a "mushy" food, combine it with a crunchy food that he/she likes. Give him/her a biscuit/cracker to dip in the applesauce. This will help build bridge to new foods in a way that is comfortable
- If your child falls into the over-stuffing/seeking texture category you will want to alternate crunchy bites of food with soft food. You can also give the cheeks a firm, but gentle squeeze if the stuffing or spitting out starts, or briskly stroke from the ears to the mouth a few times. This is not meant as a punishment, but to give input to help them process the sensation of the food better

“Exercising patience and persistence without being forceful is the key.”



Remember to start where they are and advance slowly. Clinical experience and research both confirm that oral sensory processing challenges do come around, and your child will definitely try a variety of foods over a period of time if intervened rightly. Exercising patience and persistence without being forceful is the key. Eating should be enjoyable for the child! It is best that we as parents and professionals work towards this goal and make it a fun as possible for our child so that he associates joy with eating.



IMPORTANCE OF A VISUAL SCHEDULE

My brain is like Google images. – Temple Grandin

Children on the spectrum are visual thinkers. These children also have challenges with sensory processing and have difficulty comprehending too much information, especially when given verbally. When activities are described using visuals, it provides the child with clarity on what is expected from him/her. In a way, it is also a demonstration of the process involved in performing the activity.

A sudden change or something unexpected in their day-to-day tasks can cause difficulties with emotional regulation. Transitioning from one activity/setting to another becomes challenging for them, as they have an innate need to follow fixed routines. Therefore they prefer sameness and predictability. Research has shown that children with emotional regulation challenges work very well with structure and preparation. The visual schedule provides them with structure. It prepares them for what is coming next and makes them aware of what is expected of them, aiding their overall participation and smoother transitions.

Using a visual schedule with them can work wonders as it capitalizes on the child's visual strength and helps;

- Form a receptive communication system
- Lessen anxiety
- Promote emotional regulation
- Appropriately deal with challenging behaviors
- Improve the child's flexibility
- Increase their areas of interest
- Provide opportunities for exploration of skills
- Build your child's independence in activities resulting in improved self-esteem
- Enhance their overall engagement throughout the day

Visual schedules can be of different types such as; object schedules, first-then boards, picture/photograph schedule, stick figure/drawn schedule, or a written schedule. It can be used in different ways such as to depict just the sequence of activities, or the number of rounds a particular activity needs to be performed and first then board to help engage the child in a non-preferred task followed by preferred task. The child is taught to follow the order or sequence of activities on the schedule. On finishing an activity the child must remove the picture from the schedule and place it in

the finish box or cancel/tick the particular activity in a drawn/written schedule, only after doing so can he/she proceed to the next scheduled activity.



Often parents get started using the visual schedule, but cannot consistently follow through with it. This is because it can be time consuming and tiresome for some, while even effortful or monotonous for others. Although, it may take some time in the beginning, it will definitely get easier in the days to come as it becomes part of you and your child's routine.

Let's look at ways to make this task easy for you;

Use de-cluttered images: Make sure that the photograph you use to depict the activity is very clear and specific to the expected/ set activity. As this will help your child, focus his/her attention to the given task.



Keep it organized: If your child requires laminated images make sure to print and laminate them all together. Segregate them according to different parts of the day together, and keep them in an organized manner; for e.g. all visuals for morning routine in one box, school routine in another, sensory diet visuals together in a third, etc.

Utilize a similar looking box as finish box for each set: Once the activity is over the child removes that particular visual from the board and places it back in the designated box kept next to the visual board.

Try variations, once a pattern is set: Using the schedule for daily tasks will teach your child to look and check for information on what to do next. After consistent use of the visual schedule, your child will demonstrate smoother transitions and improved emotional regulation. This may be a good time to try introducing minor changes in the sequence of activities, progress to introducing surprise games; (use the same symbol to denote your surprise game every time) this will in turn improve their flexibility.

Involve your child in preparing the schedule: Provide them with not more than 2/3 appropriate and feasible choices while preparing the schedule. This will help personalize the schedule and also inculcate a sense of responsibility and independence in them.

Visual schedules have many advantages, both to individuals with ASD and to their families. Time spent making visual schedules now will not only save your time in the future but can increase your son or daughter's skills and independent functioning while decreasing their anxiety and difficult behaviors.



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For any question or concerns regarding the newsletter please write to us on: reachtherapycenterforchildren@gmail.com

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