





- Many parents of children with ASD tell me that when their children were younger, they ate a broad range of baby and toddler foods.
- But as they got older, they become more and more picky (aka, "Extreme Food Selectivity"*)
- They started eliminating vegetables because they were not as tasty as other foods, then cereals that were not sweet, etc.
- Then they tasted sugary, salty, and fattier foods so they narrowed their diets even more.
- Until they were eating chips, fries, nuggets, and pizza. The tastiest foods our culture has to offer.

*Fifty to 90% percent of children with autism have some level of food selectivity! (Ledford & Gast, 2006).



O O O P

Do you know what Martian children with autism eat?

Martian food!





Overview Why do children with ASD have eating issues?

- Medical considerations
- Family and Parenting: PEP on the POP
- Sensory Causes of Poor Eating
- Developmental and Behavioral Considerations
- Practical Tips for Helping the Picky Eater

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ASD & Eating

Medical/Physical considerations



- True medical/physical causes of eating issues in children with ASD are uncommon but potentially serious. . .
- Main symptoms: pain and weight loss, maybe consistent/chronic choking, vomiting, and/or coughing after meals with or without cyanosis (turning blue)
- The most common physical causes:
 - Constipation and/or soiling
 - Dental problems
 - Occult and chronic Otitis Media (ear infections)
 - GERD: Gastroesophageal Reflux Disorder
 - Hx of burping, excessive swallowing, acute episodes of pain, food avoidance
 - Treatment: A trial of antacids—Tums, Zantac
 - Gastritis, esophagitis

ASD & Eating

Medical considerations: Allergies and Pica



- Food allergies or intolerance (gassiness, cramping, diarrhea, rashes)
 - Less common than parents think.
 - Food elimination and re-introduction is the best way, not blood tests.
 - Common culprits:
 - · Milk, peanuts, eggs
 - Then corn, soy, and wheat
 - Research does not support the value of GF/CF diets,
 - Further narrows diets unnecessarily but. . .
 - Can change the tastiest foods since most have gluten and/or casein!
 - Go to a real pediatric allergist
- Pica—eating non-food items (dirt, lint, etc)
 - · Check for iron, lead
 - · May be due to lack of ability to discriminate food from non-food

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ASD & Eating

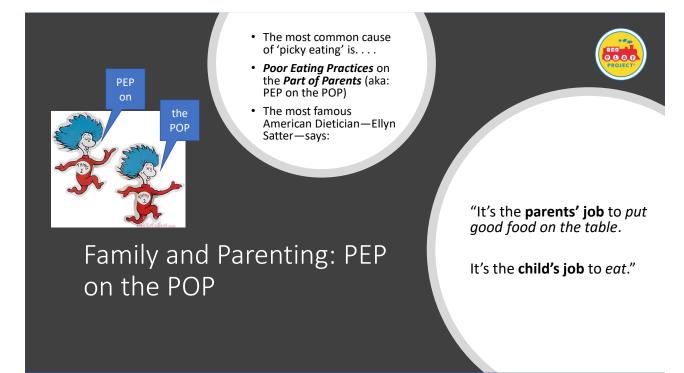
Uncommon Medical Conditions



- · Extreme prematurity
 - Feeding tubes and long periods of non-nutritive sucking
- Inflammatory bowel disease
 - · Ulcerative colitis
 - Crohn's
- Persistent Vomiting
 - Rumination—throwing up and swallowing down
 - · Cyclic vomiting
 - · Obstruction (Very serious!)
- Tracheo-esophageal fistula (coughing, weight loss)
- Hirschsprung's—inherited intestinal bowel denervation of the colon
 - · Usually presents as severe constipation early in life
- Achalasia—trouble swallowing due to narrowing of the esophagus



For all suspected medical conditions refer to the child's physician!



Make Family Meal Time Fun









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- Pressuring and conflict
- Parents use media to distract their child while feeding them. Without the media, they won't eat
- Parents feed their child beyond the age necessary
 - Common in certain cultures
- Chasing the child around the house with food
- Too much milk or milk substitutes (e.g. Pediasure)
- Making multiple meals

Daily Diet Summary



- I always obtain a daily diet summary:
 - Breakfast, lunch, dinner, and snacks
 - Often the diet is not as bad as parents think (Pizza, nuggets, fries, bacon (an ASD favorite!), yogurt, chips, cookies is a pretty good diet in terms of basic nutrition)
 - When we get down to less than 5-7 foods I get worried
- I ask about conflict between parents (and grandparents) around meals
- I ask about types of food: sweet, salty, sour, bitter, crunchy, soft
- Still on the bottle? (Signs of 'permissiveness')
- Can they use utensils?
- More often than not what is driving the picky eating is 'fear' and 'guilt'. . .

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Fears leading to PEP on the POP



- My child will starve.
 - False.
 - I can count on one hand the children who lost weight from non-medical reasons. Usually these are older children who have had years of eating issues.
- He'll go hungry!
 - True and then he'll eat if you put good tasting and high quality food on his plate.
- I'll feel bad if he goes hungry.
 - True we all do. The question is: do you want your child to eat a broader array of healthy foods?

PEP on the POP: Parent Psychology



Beware the 'message of incompetence'.

"You poor child with ASD, you can't handle a little hunger."

Beware of guilt

"I'm a bad parent if my child doesn't eat."

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A Good Diet is Better Than a Bad Diet



- Fresh
- Local
- Whole (looks like food—not Fish Crackers)
- Not processed
- Not white (sugar, flour, salt)
- Organic







Remember what Ellyn Satter says:

"It's the parent's job to put good food on the table."

"It's the child's job to eat."

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Sensory causes of poor eating

- Overstimulating/Chaotic Environment
- Tastes, textures, temperature, & touch
- OCD

Overstimulating/Chaotic Environment



- Trouble with transitions
- Noisy chaotic dinner time
- No routines
 - Dinner at various times or no real dinner 'time'
- Disruptive siblings
- TV/Media on



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Taste, Textures, Temperature, & Touch

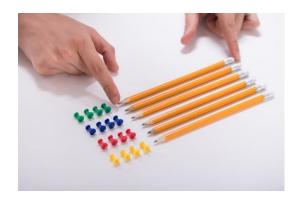


- Taste: Salty, sweet, sour, bitter, peppery, hot
- Smell: Bland vs strong
- Temperature: Hot, cold, warm
- Look: color, size, consistency, uniformity
- Amount: Don't overwhelm with too much on the plate
- Touch: Hard, gooey, soft, yucky
- Texture: Crunchy, smooth
- Sound: Loud, noisy, chaotic environments may hinder eating

OCD



- Stubborn & wrong
- Perfectionistic, rigid, & particular
- True OCD
- Start with very small changes
- Use the "Tussle" technique
- See 'desensitization' protocol below (10 tips)



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ASD & Eating

Behavioral & Developmental Considerations

Eating is largely a conditioned behavior and becomes developmental as the child ages



Trouble sitting

Problems with transitions

Oppositionality, defiance

Neophobia—Fear of anything new (anxiety)

ASD & Eating: Developmental Considerations



- Prevention: Since eating is a very conditioned behavioral activity, developmental considerations are not as important in the beginning
 - Children will eat what they are used to and what they are exposed to
 - Indian children eat Indian food—Pakora, papadam, raita, Chana masala
- As children age, they eat less. Parent should not fret. Growth curves flatten out and it is quite normal for appetite to diminish.
 - Leave their plate and let them come back to it later
- Developmentally, young children don't sit for long periods of time.

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"He/She won't sit at the dinner table."



- Expand expected sit time *q-r-a-d-u-a-l-l-y* so success is built up slowly.
- Physical activity before they are asked to sit at a table might help.
- Set a timer to show more concretely that sitting is expected at mealtime, at least for a few minutes until the timer rings.
- Some children can sit and eat but can't wait for others
 - Special waiting toys or activities are okay (esp. at restaurants).
 - Something to read or a pocket-sized game or fidget to focus on

ASD & Eating: Developmental Considerations



- Transitions to the dinner table can be difficult.
 - Reference: 'Dr. Rick's 20 Transition Tricks'
- As functional development increases, oppositionality and neophobia (few of the new) are normal.
 - They have real preferences.
 - But don't concede food territory easily.
 - Explain why eating good food is important
 - Keep putting good food on the plate.
 - Use oppositionality: "Don't you eat my (strawberry) nose!"
- Give some control and choices but don't fight over food.
- Make eating fun by being creative.



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Fun Food Ideas





10 Practical Tips for Helping the Picky Eater



- 1. Parents job to put good food on the table and the child's job to eat
 - Keep the plate out and let them come back when they are hungry or. . .
 - If the child won't eat the good food, offer them 1 (just one boring) alternate good food option like PB&J (i.e. Don't cook multiple meals)
- 2. Prevention: 'Survival of the Tastiest'.
 - Don't narrow food choices easily!
 - But do give children several choices so they can feel in control of their meals
- PEP on the POP
 - If parents are fighting or anxious about eating, they are doing something wrong
 - Watch out for FEAR and GUILT. Help parents have faith in their children's hunger
 - · Behind every mother is a mother

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10 Practical Tips for Helping the Picky Eater



- 4. If children have narrowed their diets, try: Backward Chaining:
 - Reintroduce food they ate before
 - 'Keep the World the Same': Keep all new foods 'similar but different' to old foods (crackers that are similar, etc.)
 - Match foods by familiar color, texture & smell
 - Mix the new food with a familiar and preferred food (but watch out if the child finds out you were 'tricking' them.
- 5. Make dinner time a fun family time
 - If parents are fighting or anxious about eating, they are doing something wrong.
 - Visually: Use fun finger foods to entice children to eat veggies

10 Practical Tips for Helping the Picky Eater



6. Set up the sensory environment for success

- Visually: Use fun finger foods to entice children to eat veggies
- Desensitize (gradual and repeated <u>daily</u> exposures—it can take many exposures)
 - Simply look at the new food together
 - Smell it
 - Touch it / play with it (allowed!)
 - Lick it once
 - Then tasting, just a bite
 - Consider a separate plate
 - · Small amounts are best



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10 Practical Tips for Helping the Picky Eater







10 Practical Tips for Helping the Picky Eater



- 7. Talk to your child (if developmentally appropriate) about good food
 - Use a social story (Carol Gray)
 - Use a fable describing a favorite character like Barney or Spiderman eating this particular food
 - Use modeling ("Hey Mikey, he likes it!)
 - Take a video of daddy, mommy, or sibling eating and enjoying it
- 8. Use a 5 Star reward system for tasting new foods
 - · Just a tongue tip taste gets a star
 - 5 stars gets a prize
- 9. Use the food the child wants as a reward for trying something new
 - If you try this, then you can have that (if/then)
 - And you will make mommy so happy (NO! The child should not eat to make your happy—this was a trick tip!)

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10. Success!!





References & Resources



- Ellyn Satter, Secrets of Feeding a Healthy Family
- Ledford, J.R. & Gast, D.L. (2006). Feeding problems in children with autism spectrum disorders: A review. Focus on Autism and Other Developmental Disabilities, 21, 153-166.
- Children's Hospital of Philadelphia
 - https://www.autismspeaks.org/expert-opinion/encouraging-picky-eaters-autism-try-new-foods
- Autism Speaks
 - https://www.merakilane.com/autism-eating-8-tips-help-picky-eater-autism
- Indiana Resource Center for Autism
 - https://www.iidc.indiana.edu/irca/articles/mealtime-and-children-on-the-autism-spectrum-beyond-picky-fussy-and-fads

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Thank you!



This webinar will be posted to our website!

- Next webinar:
 - May 27
- Advanced Conference and Reunion Retreat
 - April 16 & 17 | Columbus, Ohio
- Upcoming workshops
 - February 28-29 | Dallas, Texas
 - March 26-27 | British Columbia, Canada
 - April 24 -25 | Williamsburg, Virginia