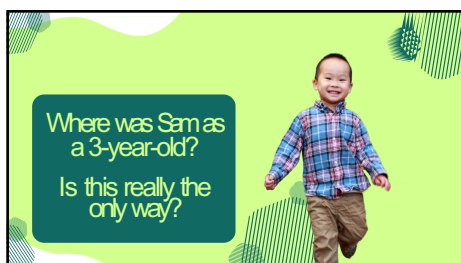




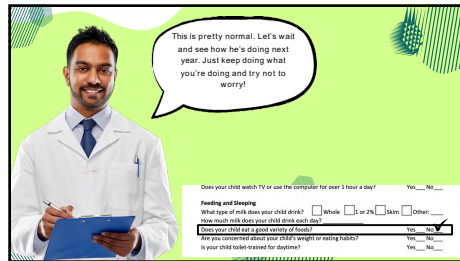
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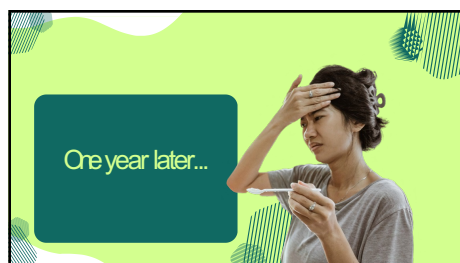
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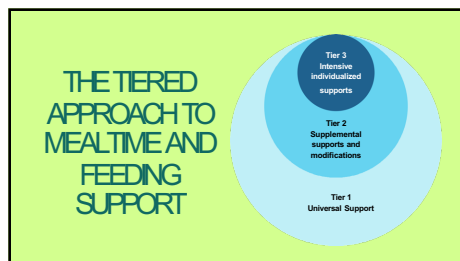
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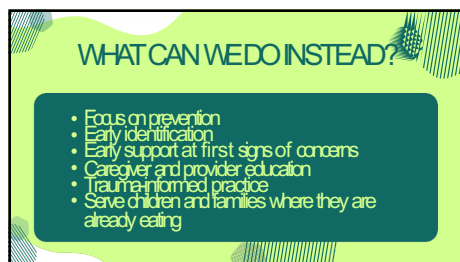
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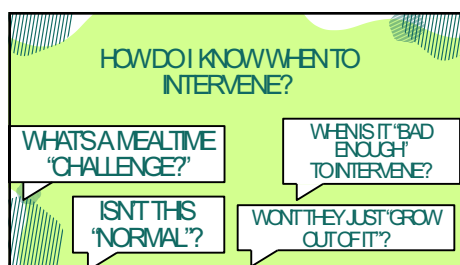
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DEFINING MEALTIME CHALLENGES




Clinical Diagnoses

- Pediatric Feeding Disorder (PFD)
- Avoidant Restrictive Food Intake Disorder (ARFID)
- Resources: Feeding Matters www.feedingmatters.org

Subclinical Challenges are Also Valid!

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WHAT IF MEALTIME ISN'T EASY?



- 1 Impacts physical health
- 2 Impacts emotional well-being
- 3 Impacts social opportunities
- 4 Increases family stress
- 5 Can create long-term challenging relationships with food

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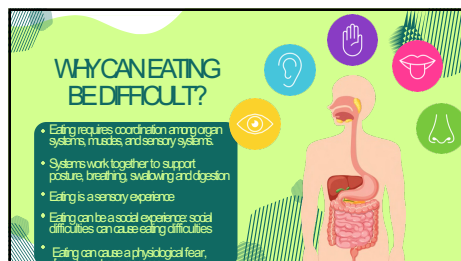
A MEALTIME CHALLENGE IS...



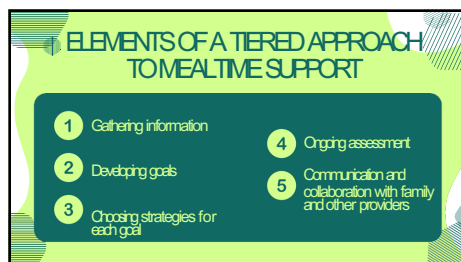
A behavior or set of behaviors that cause:

- Any impact on physical or emotional health
- Increased stress
- Undiminished felt sense of safety
- Keeps individual from participating in social routines or community activities
- Disrupts child/caregiver or family relationships

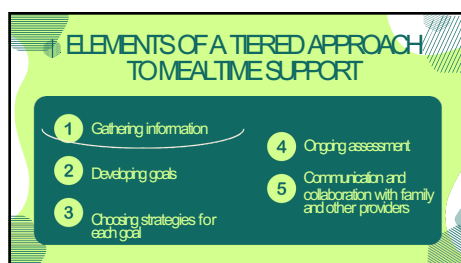
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GATHER INFORMATION

- About yourself
- About the child
- About the systems the child is part of: family, community, school, etc.



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UNDERSTAND YOUR BIASES

What do you bring to mealtime?

- What is your background?
- What were expectations around food?
- How does that influence your work?



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GATHERING INFORMATION ABOUT THE CHILD

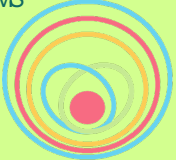
- Mealtime feeding history
- Current mealtime behaviors
- Current challenges and successes
- What do challenges look like? (what, when, where, with whom)
- Strengths, skills, interests
- Culture and values



18

GATHER INFORMATION ABOUT ENVIRONMENTS AND SYSTEMS

- Caregiver and provider perceptions and values about mealtime/feeding
- Physical mealtime environment
- Mealtime routines and schedules
- Social dynamics
- Institutional practices and policies



19

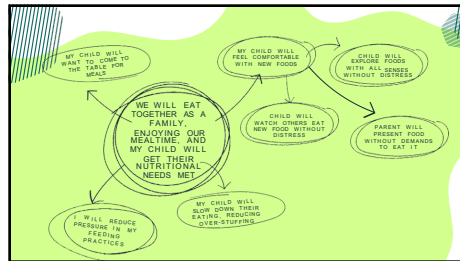
ELEMENTS OF A TIERED APPROACH TO MEALTIME SUPPORT

- 1 Gathering information
- 2 Developing goals
- 3 Choosing strategies for each goal
- 4 Ongoing assessment
- 5 Communication and collaboration with family and other providers

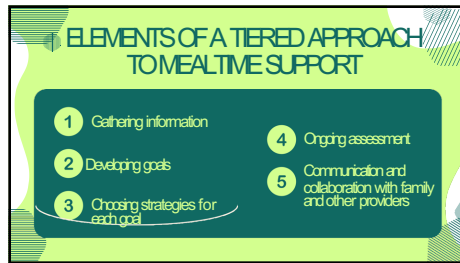
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"IF I HAD A MAGIC WAND AND TOLD YOU YOUR NEXT MEALTIME WOULD BE YOUR IDEAL MEALTIME, WHAT WOULD THAT LOOK LIKE?"

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24

CREATE AND PROMOTE LOW PRESSURE ENVIRONMENTS

Instead of...	Say...
"It's just one little bite!"	"What do you feel you need right now?"
"Mmmm this soup is so good! Just try a little!"	"It's ok if you're not ready to try it!"
"You need to eat 2 bites of broccoli before you have dessert. The broccoli is really healthy for you."	"Let's take a moment together to see if your body is telling you it is full."
"I'm so worried that you aren't getting the nutrition you need. Please do this for me."	"It looks like you're not ready for a bite. Would you like to smell it today?"

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REPEATED EXPOSURE



- A powerful tool in overcoming fear and hesitancy around new foods
- Continue to expose children even after a refusal
- Don't force, simply expose

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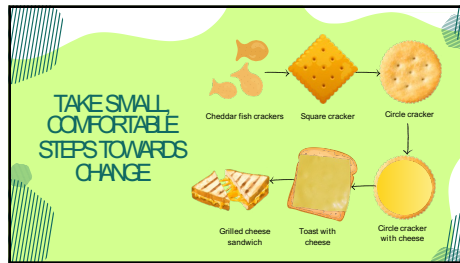
"JUST TRY IT"



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30

FADING BY TEXTURE

- Start small and familiar and slowly take steps towards a different consistency
- Make sure to rule out any medical/swallowing issues!



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ELEMENTS OF A TIERED APPROACH TO MEALTIME SUPPORT

- 1 Gathering information
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- 5 Communication and collaboration with family and other providers

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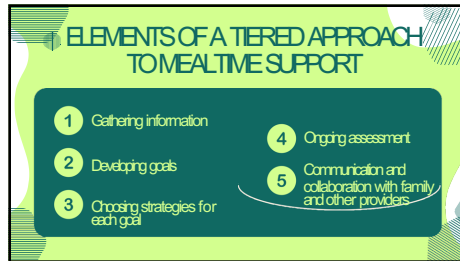
ONGOING ASSESSMENT

Data will drive your decisions: Do I continue a strategy or try something new?

Quantitative AND qualitative measures are both important!



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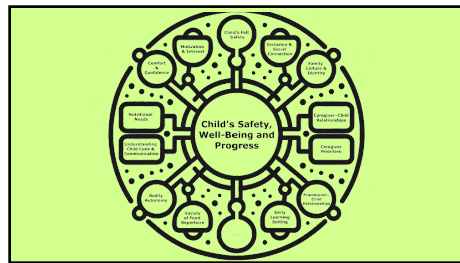
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Provider	Role

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