

Supporting the selective eater 1-7 year olds

Paediatric Dietitians



Introduction:

- Selective eating is common in young children
- Sometimes a certain type or texture of food is avoided or you may feel as if your child hardly wants to eat at all
- With the right strategies most children will be able to improve the variety of foods that they are able to eat

Content:

- What is normal growth?
- What does 'normal eating' look like?
- Identifying nutrients of concern
- Improving the balance of the diet for optimal health
- Developmental stages of eating
- Supportive strategies to promote change – sensory desensitisation, food chaining
- Questions

Growth

- Each child's growth is different and will follow their own trajectory
- Growth can be affected by many different factors – genetics, age, oral intake and health
- Ideally we would like to see weight and height on the same centile or within one centile difference.
- If there is a 2 centile difference or more between weight and height this may indicate that your child is either overweight or underweight.
- If your child is underweight, weight static or losing weight this needs to be flagged to dietitian/GP.

What does 'Normal eating' look like:



Food group	Examples of food included	Main nutrients provided	Recommended serving
Fruit and vegetables	Fresh, frozen, canned, and dried fruit, vegetables, and pulses	Carotenes (a form of vitamin A), vitamin C, zinc, iron, and fibre	At least 5 portions each day Provide a portion as part of each main meal (breakfast, lunch and tea) and with some snacks
Potatoes, bread, rice, pasta and other starchy carbohydrates	Bread, potatoes and sweet potatoes, starchy root vegetables, pasta, noodles, rice, other grains, breakfast cereals	Carbohydrate, fibre, B vitamins and iron	4 portions each day Provide a portion as part of each meal (breakfast, lunch and tea) and provide as part of at least one snack each day
Dairy and alternatives	Milk, cheese, yoghurt, fromage frais	Protein, calcium, and vitamin A	3 portions each day Provided as part of meals, snacks and drink
Beans, pulses, fish, eggs, meat and other proteins	Meat, poultry, fish, shellfish, eggs, beans, pulses, nuts	Protein, iron, zinc, omega 3 fatty acids, vitamins A and D	2 portions each day Provide a portion as part of lunch and tea (two to three portions for vegetarian children)



In an ideal world

- Regular meals and snacks (3 meals and 2-3 snacks)
- Child is able to identify hunger and fullness
- Drinking plenty of water throughout the day
- Eating appropriate portion sizes
- Sitting down at the table without distractions at the meal time
- Meal times last less than 20 minutes

Age appropriate portion sizes

- Fist size for carbohydrates (pasta, rice, potato, bread)
 - Offer at each meal and some snacks
- Palm size for proteins (meat, fish, beans, vegetarian alternatives)
 - 2-3 portions daily
- The amount their cupped hand can hold for fruits and vegetables
 - 1-2 servings at each meal and at some snacks
- The size of 2 thumbs for dairy products
 - 3 portions daily



Further information regarding portion sizes for different ages:

- Infant and toddler forum (1-4 year olds): www.infantandtoddlerforum.org
- The Caroline Walker Trust (7-18 years): <https://www.cwt.org.uk/publications/>

Identifying Nutrients of concern



- There is greater risk of nutritional deficiency if a whole food group is excluded
- Keep a food diary for 3-5 days and think about the diet compares to the information above.
 - If the diet does not include fresh fruit, raw vegetables or fruit juice it may be lacking in vitamin C
 - If the diet does not include red meat or dark green vegetables it may be lacking in iron
 - If the diet does not include dairy products such as milk, yogurt and cheese it may be lacking in calcium

Improving the balance of the diet to optimise health

- Aiming to ensure foods from all the food groups will help to ensure an intake of all nutrients – if a whole food group is excluded focus on this first
- Fortified foods can be beneficial, for example:
 - Fortified breakfast cereals can be a good source of iron and B vitamins and even calcium
 - Bread can be a good source of calcium
 - Fortified plant based milks, yogurts and pudding can be an alternative calcium source if cow's milk is disliked
 - Fortified breakfast biscuits can provide calcium and iron



3-Day Food Diary Example

	Breakfast	Mid-morning snack	Lunch	Afternoon Snack	Dinner	Evening snack	Fluids
Day 1 (school day)	Bowl of dry cereal	Fruit pouch	Jacket potato with butter and cheese	Biscuits	Chicken nuggets and potato waffles	Kinder bar	Diluted squash
Day 2 (school day)	Refused	Biscuits	Jacket potato with butter and cheese	Refused	Cheese and tomato pizza	Petis filous yoghurt	Diluted squash + glass of apple juice
Day 3 (weekend day)	Toast and butter	Breadsticks	Ham sandwich and packet of crisps	Fruit pouch	Roast dinner – roast potatoes + Yorkshire pudding + peas	Chocolate ice-cream	Diluted squash + glass of whole milk

Practical Exercise: Food Groups

- Using the Eatwell Guide, group the foods listed in the food diary into the main food groups.
- Can you identify which food groups and nutrients may be lacking?

Carbohydrates	Protein Foods	Dairy Foods	Fruits and Vegetables	Fats/sugars
Cereals Bread Breadsticks Potatoes Yorkshire puddings	Ham Chicken nuggets	Milk Cheese Yoghurt	Fruit pouch Peas Apple juice	Biscuits Milk chocolate Crisps Butter Ice-cream

Practical Exercise: Fortified Foods

- Which foods could be swapped for fortified alternatives?

	Breakfast	Mid-morning snack	Lunch	Afternoon Snack	Dinner	Evening snack	Fluids
Day 1 (school day)	Bowl of dry cereal	Fruit pouch	Jacket potato with butter and cheese	Biscuits	Chicken nuggets and potato waffles	Kinder bar	Diluted squash
Day 2 (school day)	Refused	Biscuits	Jacket potato with butter and cheese	Refused	Cheese and tomato pizza	Petis filous yoghurt	Diluted squash + glass of apple juice
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Multivitamin & mineral supplements

An over the counter multivitamin and mineral supplements is an important addition to optimise nutrition for selective eaters.



- Choose an age-appropriate variety with a good nutritional content
- Different varieties and flavours may need to be explored, acknowledging your child's sensory preferences. Involve your child in this choice if you can.
- Start with a small amount and gradually build up as your child becomes more familiar and confident with taking the supplement
- Establish a routine – offer consistently (even if not initially taken) so your child becomes familiar with the look, smell and then taste of the supplement.
- Avoid hiding in food or drinks without your child knowing - this may cause distrust and risk losing an accepted food

- Some examples include:
 - Liquid varieties for those under 3 years - WellBaby
 - Liquid varieties for those over 3/ 4 years - WellKid
 - Chewable varieties for those over 3/ 4 years – WellKid, Boots children's Own chewable A-Z
 - Nutrigen Vitamixin Sprinkles



Developmental stages of feeding:

- **0-6 months:** milk feeds (breast or bottle feeding)
- **6-12 months:** Complementary feeding – the introduction of food alongside milk feeds
- **1-2 years:** Progressing towards normal family meals and ensuring a routine of eating
- **2 -6 years:** Neophobia



Neophobia

- This is a normal stage of development. Previously a way of protecting ourselves from eating poisonous foods as our independence increases.
- During this stage, children are more caution of new foods – even the same foods presented differently (e.g. cut into a different shape) can be rejected
- This stage can pass unnoticed or it can be difficult to manage
- Ensuring as many foods as possible remain familiar is really important
- This means continuing to offer foods even if they are not eaten

Establishing change:

Parent/ carer led change:

- Change can take time
- Support change strategies that are implemented need to take place on a regular basis (often daily or even multiple times a day)
- Parents and carers are in an ideal position to support this change
- Eating together as a family, meal time environment and being a role model is important

Support at school:

- Eating with peers
- Messy food play with friends



Supportive strategies to promote change



- Sensory desensitisation is a way of decreasing or normalising a response to a sensation, in this case the sensation is a new food
- It is important that someone is comfortable with the look, smell and feel of a food before they are expected to taste it
- To begin with choose a new food similar to a food that is well tolerated
- Do this away from a mealtime
- You know your child best
 - Start at 'their' beginning - if they are unable to be in the same room as a particularly smelly food, they will need to work on gradually being able to move closer to it initially
 - Have realistic expectations – something that seems small may actually be a big deal to your child, it may have needed a lot of effort.

Messy food play

- This is the first stage of food desensitisation
- Allow your child to use food in play e.g. feed toys/ post toys/ use food as paths/ ground for toys to walk/ride through/ bath toys
- Start with dry foods
- Gradually move onto to foods of different textures and smells
- This could be helping with the shopping, putting the food away, helping with food preparation and serving

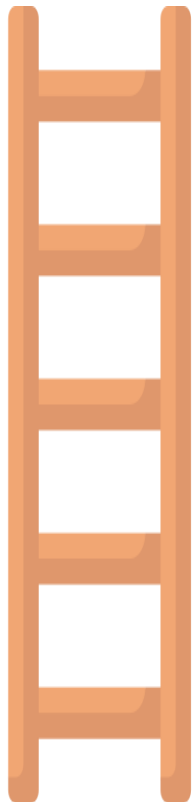


Messy Food Play Ideas

- Filling up plastic cups with dry cereal, porridge oats, and breadcrumbs, and pouring from one cup to another
- Pushing toys around in dry foodstuffs such as tractors or dinosaurs in cereal, and then gradually introducing wetter textures
- Finger painting with different sauces, ice-cream or cheese spread on a wipeable mat or mirror.
- Playing in a bowl of wet noodles/rice/pasta, placing pieces of cooked vegetables and encouraging your child to pick out as many as they can find. You could start with toy vegetables/fruit initially.
- Mashing down cooked vegetables and fruit on a tray, and making handprints on paper.
- Making fruit and vegetable faces
- Have a 'tea party' - feeding new foods, bite and dissolve snacks or cereals to dolly, teddy, daddy, mummy etc.



Sensory Desensitisation ladder



Step 6: with time they may attempt to chew and swallow the food, but don't put any pressure on your child to do so

Step 5: invite them to bite a small piece of the food (it's ok if they spit it out)

Step 4: gently encourage them to put the food to their mouth e.g. kiss it or lick it

Step 3: gently encourage them to touch the food

Step 2: invite them to smell the food

Step 1: allow them to get used to looking at the food



Have a think – what sensory characteristics of food does my child like or dislike?

- Start with a new food with the sensory characteristics that your child prefers

For example:

- If your child likes crispy and beige foods such as chicken nuggets, start with a battered/breaded fish finger
- If your child has a preference for strong flavours try garlic or herby cheeses and spreads

Texture	Crunchy
	Melting
	Slimy/ gooey
	Hard
	Chewy
Flavours	Sour
	Spicy/ chilli
	Herby
	Sweet
	Salty
Colour	Green
	Beige
	Red
Temperature	Hot
	Frozen
	Cold (fridge)

Food chaining

- This is a way of moving from an accepted food to a new food by making subtle changes
- These small steps can make trying new foods less daunting
- There should never be pressure to try new foods
- This should always happen with your child's knowledge and consent
- A food chain is not linear – at any point you can branch off towards a different food
- If a child is really struggling – start at a different beginning:
 - Change how the accepted food is presented – different shape, different plate
 - Change the temperature of the food
 - Place a sticker on the favourite cup/ plate



Fast food French fries

Shop brought French fries

Shop brought chips

Shop brought steak cut chips

Potato shapes (faces/letters/ waffles)



Mashed potato



Boiled potato

Mini jacket potato

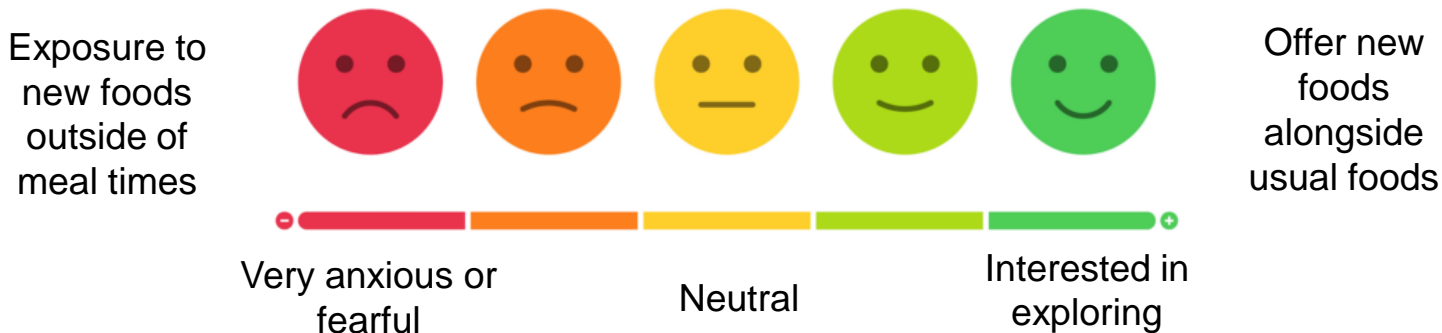
Roast potato

Potato crockets



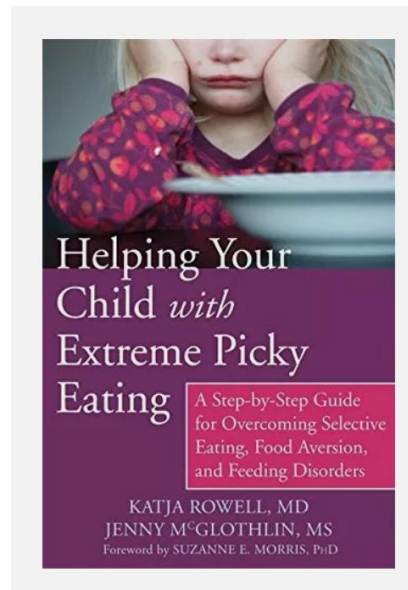
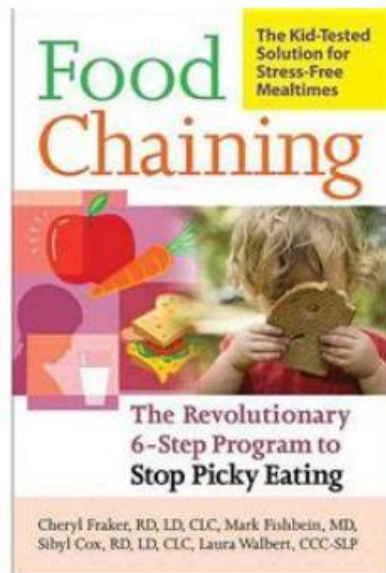
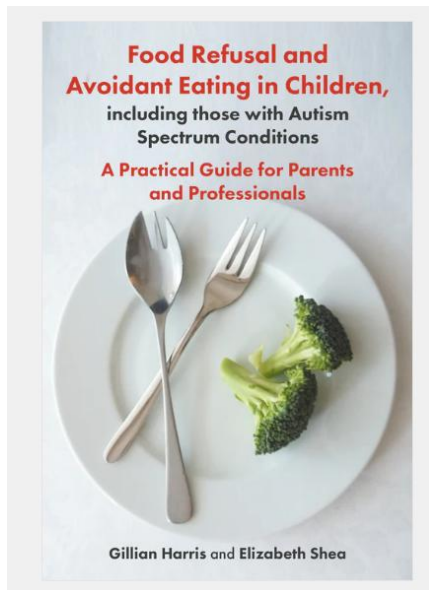
Additional considerations

How does the child respond when presented with a new food?



- Gradually increase the amount of the new food until a full portion is managed
- The new food should then regularly be included in the diet
- It may take 10-20 exposures to a new food before its accepted

Helpful books



Summary

- Try and keep mealtimes relaxed and stress free
- Establishing a multivitamin and mineral is a priority – this will reduce the risk of nutritional deficiency, keeping your child safe. If your child is symptomatic of a nutritional deficiency please speak to your GP.
- If a food is refused try not to comment or make a fuss – just offer it again another time
- Always physically present the food to your child, don't just verbally offer food
- Your job as parent/ carer is offer food (preferred and new) the child's job is to decide what they want to eat and how much
- Just keep going, never give up!

If you have any growth concerns, please call the Nutrition & Dietetics after this session on 0300 422 5506

If things have deteriorated, please see your GP.



Feedback

We would be grateful if you could give us some feedback on our group session by visiting the following link: <https://ex.civicamysay.co.uk/EjMj7CHB4H3>

OR scanning the QR code:



All responses will be completely anonymous.
Thank you for your time.



Thank you