

Supporting the selective eater 7 years and over

Paediatric Dietitians



Introduction:

- Selective eating can occur at any age
- •Sometimes a certain type or texture of food is avoided or whole food groups are excluded
- •With the right strategies and support most children and young people will be able to improve the variety of foods that they are able to eat

Reasons for selective eating



Content:

- What does 'normal eating' look like?
- What is normal growth?
- Identifying nutrients of concern
- Improving the balance of the diet to optimise health
- Establishing motivation for change
- Meal time experience
- Supportive strategies to promote change sensory desensitisation, food chaining
- Summary
- 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

Dealing with the current situation

- Try to support 'good enough' eating aim for some foods from all food groups
- We would rather they eat something than nothing at all
- Encourage a relaxed environment at meal times
- Try to take the focus/pressure of the child at meal times
- Consider adaptations required for the optimal eating environment e.g., distractions if child is over stimulated to help calm. Be aware that this will be individual to the child
- Lead by example try to sit together as a family at meal times
- Children respond well to routine and consistency. Try establish a routine of 3 regular meals each day:
 - peer support (school dinners/ friends over for tea/ dinning out with mates)
 - setting reminders on a phone to prompt eating

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
- Think about how the diet recorded compares to the Eatwell Guide (do this with your child if possible)
 - If the diet does not include fresh fruit, raw vegetables or fruit juice it may be lacking in vitamins
 - If the diet does not include red meat or dark green vegetables it may be lacking in iron
 - If the diet does not include diary 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 (weeken d day)	Toast and butter	Breadstick s	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 chocoloate Crisps Butter Ice-cream

Practical Exercise: Fortified Foods

Which foods could be swapped for fortified alternatives?

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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. These are available as chewable, liquids, sprinkles and sprays. >12 years old come in tablet forms

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:

- Vitabiotics WellKid chewable and liquid
- Boots own children's chewable A-Z (can be chewed or crushed)
- Nutrigen Vitamixin Sprinkles
- Better you sprays







wellkid

cognitive development

MULTI-VITAMIN





BetterYou 3



Establishing motivation for change

- Cognitive development means that from around 8 years of age some children are able to take on more responsibility and tend have a better understanding of the world around them
- Motivation to try new foods can increase with age
- Help your child to understand why they need to eat a variety if you can
- If communication is difficult try social stories many free online
- Dinner winner plates
- Goal and reward charts rewards should be not food related

I like book



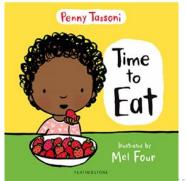


Dinner winner plate





Books

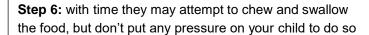


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Supportive strategies to promote change

- 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
- 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.

Sensory desensitisation ladder



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 your child like or dislike?

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

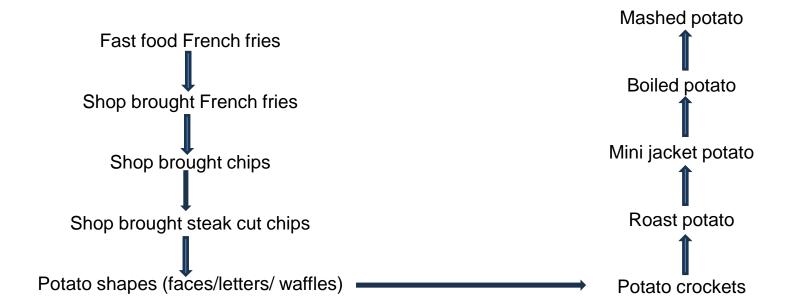
For example:

- If your child likes crispy and beige foods such as chicken nuggets, start with a battered/breaded fish finger
- If you 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)
F 1	14. 1

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
- Try changing the presentation of the food (e.g. shape, colour and texture) to improve the sensory experience
- There should never be pressure to try new foods
- This should be 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



This table is for reference purposes only. It aims to provide food ideas for children based on colour selection. As an example, if you notice that you child has strong preferences towards white foods, then to expand the diet variety of your child, you could try to slowly introduce alternative white foods. To start with, try other white foods that have similar smells and tastes to his/her current food liking, such as replacing plain popcorn with ric cake. Increased food exposure might help to expand the familiarity of 'new' foods for your child. However, never give up on introducing new foods

Food Colour	Food Group							
	Bread & Cereal	Vegetable	Fruit	Meat/Fish/Poultry/Legumes	Dairy			
White	Barley	White asparagus	Peeled banana	Butter beans	Milk			
	Quinoa	Peeled aubergines	Peeled lychee	Cannellini	Soy milk			
	Rice	(Eggplant)	Peeled longan	Large white kidney beans	Yoghurt			
	Rice paper	Bamboo shoots	Peeled rambutan	Macadamia nut	Vanilla ice-cream			
	Rice noodle	Bean sprouts	Peeled mangosteen	Raw/canned peanut	Milk pudding			
	Udon noodle	Cauliflowers	Peeled pomelo	Skinless brazil nuts	Feta cheese			
	Mung bean (glass)	Stem of Bok Choy	Peeled guava	Lotus seed	Mozzarella cheese			
	noodles	Stem of Chinese cabbage	White currants	Lily bulb				
	Oats	Tapioca	White mulberry	Octopus/ squid				
	Amaranth	Chicory	Nashi pear	Oyster				
	Rice cakes	White corn	White peach	Tofu				
	Plain popcorn	White button mushroom	White nectarine	Pork				
	Sago	Oyster mushroom (Grey	Water chestnut	White fish				
	Pearl couscous	white)		Chicken				
	White bread (crust left)	White potato		Quail				
	Flat bread	White radish		Turkey				
		White turnip		Egg white				
		Parsnip		Chicken/ Pork sausages				
		Lotus root						
		Taro						

Notes:

Food Colour	Food Group						
	Bread & Cereal	Vegetable	Fruit	Meat/Fish/Poultry/Legumes	Dairy		
Beige/ Brown	Buckwheat noodle Whole-wheat spaghetti Brown rice Pappadum Wholemeal bread Rye bread Whole-grain bread Pita bread Fruit loaf Carrot cake Melba toast Bran	Chestnut cap mushroom Brown mushroom	Brown pear	Chestnut Brown lentils Roasted cashew nuts Roasted peanuts Walnuts Almonds Hazelnuts	Chocolate flavoured dairy products		
Orange	Orange cake	Carrot Orange sweet potato Pumpkin Orange pepper Butternut squash	Papaya/ Papaw Orange Mandarin Rockmelon Persimmon	Cooked salmon	Cheshire cheese Swiss cheese		
Red	Beetroot Tagliatelle Thai red rice	Tomato Red capsicum Red pepper Red radishes	Cherry Strawberry Cranberry Raspberry Ruby/red grapefruit Watermelon Red Williams pear Red plum Red apple	Adzuki bean Red kidney bean Beef Veal Mutton Lamb Offal Game meat Red meat sausages	Berry flavoured dairy products		

Notes:

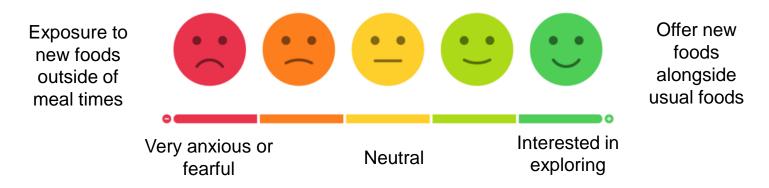
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Food colour	Food Group							
	Bread & Cereal	Vegetable	Fruit	Meat/Fish/Poultry/Legumes	Dairy			
Black/Purple	Squid ink taglioni Black glutinous rice Wild rice	Nori Wood ear (Judas's ear) Black truffle Shitake mushroom Black radish Black olives Beetroot Purple-tipped asparagus Purple cauliflower (Green after cooked) Red cabbage Red oak leaf Lollo rossa Purple sweet potato Purple/black pepper Yam	Blackberry Blackcurrant Black mulberry Dried prune Purple plum	Black pudding Black pea	Taro flavoured dairy products Violet/ Lavender flavoured dairy products			

Notes:

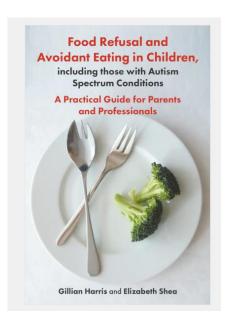
Additional considerations

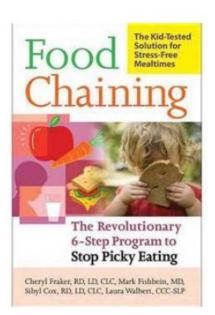
How does the child respond when presented with a new food?

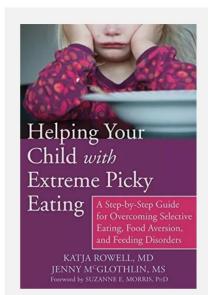


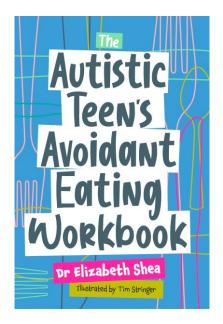
- Gradually increase the amount of the new food until a full portion is managed
- The new food should then regularly be included in the diet
- It may take 10-20 exposures to a new food before its accepted

Helpful books









Signposting



- Self help guide on the hospital website has some useful resources and webinars
- Patient webinars Very good
- https://www.autism.org.uk/ useful info on supporting eating difficulties
- Infant and toddler forum

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 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
- Mange expectations. Progress can be slow. 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.



Thank you