



## Feeding Challenges

Children with autism spectrum disorder (ASD) often have difficulty with feeding as it relates to rigid behaviors, particularly the inability to change routines and foods. They may exhibit sensory challenges or have gastrointestinal issues, as well.

- In order to help the child ASD be able to sit at a table and participate in mealtime activities, parents and caregivers should develop a consistent mealtime schedule. When children eat little bits “on the go” throughout the day, they are often not hungry at mealtime. Parents should provide structured meals/snacks every one-and-a-half to two hours, offering only water between meals and snacks. This helps to establish a hunger cycle, and increases the likelihood that the child will be more interested in exploring and trying new foods.
- Many times children with ASD want to eat the same foods, in the same way, all the time. To make sure children eat a varied diet, families are encouraged to present foods not in the original containers – in bowls or plates – so that the child doesn’t get used to seeing specific packaging. Use different cups, plates, and utensils so that the child becomes less rigid and more likely to use a variety.
- Present foods even if the child is unlikely to eat it. It may take up to twenty presentations of a new food before a child will accept it. It is encouraged for children with ASD who have difficulties trying new foods to play with various foods. This type of engagement helps to explore the sensory properties of foods – the look, taste, touch, and smell. Touching food is often less challenging than eating it. Place foods on fingers and hands in fun ways, then gradually progress toward the face and mouth. Include other families in these play experiences to reassure the child that eating is pleasurable.
- Sometimes children can have sensory responses to food, such as gagging or vomiting. Try not to over-react to those vomiting behaviors as sometimes it is purposeful as a method to avoid eating. If the food is withdrawn when the child vomits, the child will learn that he or she can get out of the feeding activity and demands by exhibiting that behavior. Gagging is typical for all children as it is a protective way to make sure what is swallowed is safe. Positively reinforce anything that the child does to try a new food. Try to ignore negative behaviors that may be exhibited.
- Parents can seek out comprehensive evaluations for their child who has feeding difficulties. Many hospitals and other healthcare providers have feeding teams who can assess various issues related to feeding problems. These evaluations may include a physician, occupational therapist, speech therapist, nutritionist, and/or mental health professional, in order to assess the whole child and determine if there are medical, sensory, behavioral, nutritional issues affecting the child.
- If the child exhibits frequent episodes of constipation or diarrhea, or you suspect reflux or food allergies, discuss with the child’s pediatrician or a pediatric gastrointestinal specialist who is familiar with children with special needs.

