



Dietary management for children and adolescents with Autism.

Some people with an Autism Spectrum Disorder (ASD) can have difficulties relating to feeding and diet. Here are a few insights into the possible reasons for a restricted diet and strategies you can use to try and overcome this problem.

This information is aimed at parents and carers - and so refers to 'your child' throughout – but it is also relevant to adults with ASD.

PLEASE NOTE: All the following points are general - we always advise you to speak to your GP/Primary Carer, or another medical professional, if your child has dietary issues.

“I had a big problem with food. I liked to eat things that were bland and uncomplicated. My favourite foods were dry cereal with no milk, bread, pancakes, macaroni/spaghetti, potatoes and milk. Because these were the foods I ate early in life, I found them comforting and soothing. I didn't want to try anything new”.

“I was supersensitive to the texture of food, and I had to touch everything with my fingers to see how it felt before I could put it in my mouth. I really hated it when food had things with it like noodles with vegetables or bread with fillings to make sandwiches. I would never, ever put any of it into my mouth. I knew if I did I would get violently sick.”.....

First steps: create a food diary

If you are concerned about your child's restricted diet, it would be a good idea to create a food diary. By regularly recording your child's eating habits, you will get some useful information about their eating patterns - and also about what's going on while your child is eating. You may also start to see some possible reasons for the restricted/rigid diet.

Also, a food diary can be reassuring - you may in fact see that your child has a better and more stable diet than you originally thought.

Here are some questions that could be used in a food diary.

- What time of the day did my child eat? (11.05am)
- What did they eat? (Salt and vinegar crisps/chips)
- Where did they eat? (In the living room)
- How much did they eat? (Half a bag of crisps/chips)
- Who was there? (Mum and brother)
- Were there any environmental factors? (The radio was on in the background)

There are many reasons why people with an ASD may have a restricted/rigid diet, and several ways you might address any difficulties....

Physical/Health

A loss or change in appetite is quite a common indicator of feeling unwell. So, is your child unwell?

Some (NOT all!) people with an ASD will also have gastrointestinal problems, so they may experience discomfort during or after eating, such as wind or constipation.

Does your child associate eating with a pain?

Full motor development in the jaw is necessary before we can chew and digest certain textured foods.

Does your child have any problems with the actual function of eating?

Do they have any difficulties with chewing, swallowing or jaw function?

Some medication can have an effect on appetite, for example Ritalin. Antibiotics can also cause extensive yeast growth, which in turn could damage the lining of the intestine. A bloated intestine could mean your child feels full when in reality they aren't.

Is your child taking any medication?

Communication

Expression

We can have a huge variety and range of foods presented to us every day, and we all like and dislike different foods. However, all children - and particularly those with an ASD - may not be able to express these likes and dislikes.

Could your child's refusal to eat a particular food simply mean that they don't like it, but can't tell you this?

Understanding

People with an ASD can have difficulties understanding and processing language. Consider how you ask your child about food and what they want to eat. Do you get a better reaction if you phrase things in a certain way? For example:

You normally say "Would you like fish fingers, chips and beans?" Next time you say, "Would you like beans, chips and fish fingers?" and your child might seem to find it easier to answer.

Dislike of change

Routine

Many people with an ASD like, and rely upon, routine and sameness. This may well affect their eating patterns, so your child may want to have meals at the same time every day, be seated in the same position at the table, or always use the same plate or cutlery. This need for routine may also extend to the food that they eat.

Appearance

Attention to detail is also a characteristic of ASD. This can result in issues with eating. For your child, the way the food is presented or positioned on the plate may dictate whether it is eaten or not. If individual items of food are different in any way, your child may not eat them.

- Has the positioning of the food on the plate been altered?
- Is the food over- or undercooked?
- Are there 'bits' on the food?

Familiar packaging

Following on from the above, some people with an ASD who have an acute eye for detail or are uncomfortable with change may not like it if food packaging is different in some way. Ask yourself:

Has the packaging changed? Is the logo a different colour? Is the box damaged? Have I bought a different brand?

Sensory difficulties

Many people with an ASD have sensory sensitivity and may be over or under-sensitive to tastes, textures and smells. This is likely to have a direct influence on whether they enjoy certain foods or not.

People who are very sensitive to smells and taste may prefer to eat quite bland food. On the other hand, those who are under-sensitive and find it more difficult to taste or smell things may crave stronger, spicy food.

Is the food uncomfortable to eat or is the taste overpowering?

Texture

Does your child prefer a particular type of food, for example crunchy or sloppy?

Taste

Is your child over or under-sensitive to particular flavours (such as dry/bland or hot/spicy)? The former is the most common.

Smell

Is the smell of the food too intense?

The physical environment

Where does your child eat and does this have any effect on them? For example, are they trying to eat in a noisy area which, because of sensory issues, is very distracting? Are they sitting on a hard chair and feeling uncomfortable?

The social element

Mealtimes are, generally, social occasions and require a degree of social interaction. Many people with an ASD find social interaction difficult to some extent, so it is understandable that they might feel anxious about mealtimes (and by association - eating) and thus try to avoid them.

What level of social interaction is required at mealtimes? If your child finds social interaction difficult, could this be taken into account?

Ideas to encourage your child to try new foods and vary their diet

NOTE!: All of the following ideas are simply suggestions. What works for one person with an ASD may not work for another (as we all know only too well).

As with all strategies, make sure that any instructions given to your child are clear, consistent and delivered in a calm manner. If your child refuses a food, don't give too much attention to this.

Food charts

Using visual supports to give your child information about the food they are eating could help to reduce anxiety. Your child can refer to a visual support, such as a food chart, so that they can see what they will be eating and when they might have a chance to try something new.

For example:

List the menu for the day/week ahead and have a section at the bottom stating 'This week or today I will try [name of food]'

Have a list of good and not so good foods and let your child pick one from each list.

Timetables

It may be important for your child to have regular, set mealtimes. If this is an issue then try to allow yourself a little flexibility while still giving your child the structure they need.

For example:

Lunch will be between 12.15-12.30. Say that you'll do another activity first (eg, colouring) then have dinner.

Disguise food

If your child is over or under-sensitive to certain food textures, smells, tastes or colours, think about how you can use this to introduce new foods.

For example:

- Puree foods (including new foods) if your child is very sensitive to textures, and try to progress slowly from there.
- Use food colouring if there is a certain colour your child likes, or is adverse to.

Small steps - gradual exposure

By breaking down the introduction of foods into manageable steps it can reassure your child and make them feel in control.

For example:

- Place a new item of food on the table
- Place a small piece on your child's plate
- Get them to touch it
- Get them to hold it to their mouth
- Get them to lick the new food
- Can put the food into their mouth, but not swallow
- Ask them to swallow.

Rewards

See if you can reward your child's successful attempts at trying new foods.

For example:

- Give your child a new food with a favourite food. With each small taste of a new food, your child gets some of their favourite food
- Create a behaviour chart. If your child eats a reasonable amount or, for example, three potatoes in a certain amount of time, they get a point on the chart. They could work towards a small reward.

Food books

Food books are sometimes used by professionals as diaries of achievement.

Pictures or drawings of foods that your child likes and dislikes are placed in the book - usually the food they like is at the front and the food they don't like at the back.

As your child tries new foods and expands their diet, the 'don't like' pictures are gradually moved forward in the book. This provides a nice record of progress that your child may like to look at and take encouragement from.

Encourage your child to handle and prepare food

Increasing your child's contact with food could encourage positive associations with it. Try making simple things such as sandwiches, fruit kebabs, little cakes or pizzas.

Environment

Look at the environment(s) where your child eats and see if you can make any changes if your child is experiencing sensory discomfort.

For example:

- At school, they may prefer a quiet room to a noisy canteen
- The chair on which they are sitting may be too hard - add a cushion
- Reduce background noise if it is distracting - turn off the radio or the washing machine.

Games

Sometimes mealtimes can be very stressful, pressurised occasions, but by introducing new foods during an enjoyable and hopefully relaxing activity your child may be more willing to try them.

For example:

Games based around food - use written instructions and visual clues, eg: if you land on a particular square you have to eat two segments of orange.

'Modelling'

Some children eat better in the company of adults or peers - your child may be more willing to try new foods if they see other people trying the same food and enjoying it.

Social stories

Social stories are short stories, often with pictures, that explain different situations to people with an ASD and give them an idea of what to expect. A social story might help your child to understand why we eat and the function of food.

Here is a very short example.

We all need to eat food.

This is because food is like fuel - it gives us energy.

If we have energy, we'll be able to do the activities we enjoy.

Distraction

Some parents have found that by having a child's favourite music or story tape playing in the background, the pressure of eating is removed. Their child is slightly distracted, feels more relaxed and may not find eating such a task.

Use special interest

If your child has a special interest, could you use this to encourage a more varied diet? For example, they might eat from a Thomas the Tank Engine plate, or having animal-shaped chicken pieces.

Motor development

Encourage activities that develop oral motor skills, including:

- Using straws
- Blowing a whistle
- Blowing bubbles
- Using a toothbrush.

Social interaction

If your child finds the social nature of mealtimes stressful, try giving them as much information as possible about the situation - especially if it's not your regular family meal at home.

- Who will be there?
- Who will they be sitting with or next to?
- What might people talk about?
- What could they say to start a conversation? Give them a few ideas.

Professionals who may be able to help

Both a poor and restricted diet can possibly lead to medical problems. If problems persist, speak to your GP/Primary Carer who may refer you to one or more of the following professionals or places:

Dentist - eating difficulties may result in poor dental hygiene management or toothache.

Dietician - they offer advice on healthy eating and produce programmes to help with both weight gain and loss.

Eating Disorder Clinic.

Clinical psychologist or psychiatrist - if the problem is thought to be psychological, these professionals can help to implement cognitive and behaviour strategies.

Paediatrician - experts in child health issues who can help provide solutions to dietary issues.

Occupational Therapist - may be able to offer advice on how you manage the situation at home and offer exercises that can help.

Speech and Language Therapist - will have a good working knowledge of how the mouth and jaw function and will be able to advise on feeding issues.

We hope that the above provides a brief introduction and insight into the complexities of eating when you also have Autism?!

It is in no way comprehensive or exhaustive and if your child (or you!) 'suffer' with eating disorders, then – as we said at the beginning – please seek professional assistance.