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Anxious Eaters and Anxious Mealtimes Recorded October 10, 2019

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- [Fawn] Today's topic is Anxious Eaters and Anxious Mealtimes. Our presenter today is Marsha Dunn Klein. She is a pediatric occupational therapist who has spent a career specializing in pediatric feeding challenges. She received her bachelor's degree in Occupational Therapy from Sargent College of Boston University in 1971. She received a master's degree in Education with an emphasis on Special Education in 1975 from the University of Arizona. She has co-authored "Prefeeding Skills, Editions 1 and 2," and "Mealtime," excuse me, "Mealtime Participation Guide: "Homemade Blended Formula Guidebook" with Suzanne Evans Morris, and "Feeding and Nutrition for the Child with Special Needs" with Tracy Delaney. Her newest book is entitled "Anxious Mealtimes: Practical and Compassionate Strategies "for Mealtime Peace." She lives in Tucson, Arizona, and travels to present locally, nationally, and internationally on pediatric topics. Welcome back, Marsha. So glad to have you.

- Thank you, thank you. Are we ready? So I would like to share some ideas with you about anxious eaters and anxious mealtimes. This topic is very exciting to me. As Fawn just said, I just finished a book on the topic, so it's pretty exciting. Today, in our hour, we're gonna identify who are anxious eaters, we're gonna look at systematic desensitization as an underlying strategy for the Circle of Sensitivity strategies that I'm going to present to you. We're gonna define rehearsals, new food trying techniques, we're gonna redefine try it, and we're gonna look at those as supports for mealtime success. Let's get the hang of this, there we go. So let's think about, first, who are those picky eaters? Some of you think of them as extremely picky eaters, picky eaters, chronic food refusers, they may have a sensory food aversion, maybe they're called behavioral eaters, anxious eaters, problem eaters, food neophobic, restrictive eating, ARFID, which is Avoidant Restrictive Food Intake Disorder. Some of them are called highly selective, some might have dysphagia. So there can be a lot of different terms that are used to support these children, but for the purpose of this talk and this day, we're gonna talk about these kiddos as anxious eaters, and look at the worry aspect of what's going on with their eating. We're gonna talk about children who are worried

about a very specific look, a very specific sound, smell, texture or taste for foods. Changing from any of those sensory variables is very worrisome for this crowd, and we're gonna look at the big concepts of worry and change, when those are difficult for these kiddos. Some of these kids actually have a diagnosis of food neophobia, and it's a term that was coined awhile back, Leanne Birch popularized it, and they talked about fear of new food introduction. I like that term a lot for these kiddos, because many of the kiddos that I will be talking about today are actually fearful and very, very worried, overly worried, about new food presentation.

However, when Leanne Birch described it, and others, they talked about this being a kind of a typical stage in toddler development, and I think the kiddos that we're talking about for today are not typically developing toddlers that just get a little bit picky for awhile, and then, outgrow it. These are kiddos where food worry is really real. Some of these kiddos have sensory processing disorders, as diagnoses, but we have many children with sensory processing disorder diagnoses who don't have any eating issues, so that term doesn't work that well. Autism, yes, many children with a diagnosis of autism do have picky eating and anxious eating issues, however, not all children with feeding challenges have autism. Some of these kiddos have obsessive compulsive or anxiety disorders that are diagnosed or undiagnosed. The Avoidant Restrictive Food Intake Disorder crowd, it fits, but there's a lot of controversy and discussion about whether that term fits all these kiddos, and who should treat these kiddos. So for the purpose of this talk, let's just talk about the kiddos that have eating challenges where worry is the biggest deal.

So I like to think of these kiddos as having a parentheses diet. So the kiddos that we're talking about would be those, for example, who, if we asked the parent, what foods does your child eat on a regular basis? They would say, oh, there's four. Oh, there's seven. So what I ask them to do is tell me the food, and they might say yogurt. And then I'll say, so then, I'm gonna write in parentheses, what is it I need to know about

yogurt? If I were babysitting for your child, on a Friday night, and I needed to have it be a successful meal, what do I have to know about that yogurt? And the parent would go, oh, well, it must be blueberry yogurt whipped, certain brand, in the container, opened right in front of the child. The next food might be chicken. Okay, tell me about the chicken in the parentheses. And they'll say, well, it must be chicken nuggets, it must be from McDonald's, it can't be broken, and it can't be any other shape like a dinosaur or any other brand. They might say pancakes, then the parentheses would be, oh, but my child will only eat the dollar sized Eggo brand, or the round sized Eggo waffles, or crackers, but the parentheses is only Ritz, or only yellow Goldfish.

So what parents describe when they describe the child's list of favorite, favorite foods. We used to call them safe foods, but I like to call them favorite foods now, because I think safe implies, the opposite of safe is unsafe, so I think we're trying to get away from that term. Anyway, I think these children have what I would describe as a parentheses diet, and the parentheses is what tells you about the worry. They like yogurt, they have the oral/motor skills to eat yogurt, they can eat smooth purees, but it must be one brand, one color, one shape, on a certain plate, so it's the various specificity of what they like about that yogurt that makes the parentheses diet and can create worry if it's not the proper yogurt, the proper color, opened in the proper way with the proper feeder. If it's a peanut butter sandwich, it's not the proper shape, if it's cut in squares and they want triangles.

So that's the specificity that sort of outlines worry. Parents will describe these kiddos as seemingly terrified of new foods, or hating mealtimes. A parent might say, "I can't change a thing about the mealtime, the child falls apart." Or, "He's anxious, he's worried, he is so stressed." And those are phrases that we hear over and over again, for this particular crowd of really worried eaters. So the way I've learned about feeding, and I'm almost been doing feeding five decades, and the way I've learned about it always has been a certain part about trying it myself. So imagining that a giant, grown

up person wants you to try a food that, for some reason, worries you immensely. So you've got somebody that wants you to take that food, and maybe you hate the look of it. I hate the look of octopus tentacles on my plate, but I don't mind octopus if it's cut in small pieces. Maybe the smell made you nauseous. Why would you put that in your mouth? Maybe the sound of somebody else crunching it is particularly worrisome to you. Maybe that texture made you gag in the past, and there's no way you wanna put it in your mouth. Maybe the taste just isn't right, so it's a food that in some country, is fermented, and perfectly normal, but in your mouth, it's not a usual experience. So the idea is, if any aspect of the food were particularly difficult for you, would you want somebody else to make you eat it?

And so, I'm not saying it's logical why these kiddos don't particularly like the foods, but to them, it's personal and real. For children, we end up with children that have poor nutrition, and that certainly can affect their health. When you have five or six or eight foods, or four foods, and there's not a fruit or vegetable in sight, and maybe a lot of carbohydrates and brown foods, that's gonna narrow their nutritional content. For a lot of these kiddos, it's a very narrow color range. Maybe the beiges, the whites, the browns, maybe a little yellowish orange, like in a macaroni and cheese from Kraft. These kiddos often are very sensitive to a particular smell, look, texture, taste or sound. When children are really worried about change, what ends up happening is they can become hypervigilant visually.

So they will scan the mealtime, and notice, you've changed something. There's brown flecks on my pizza crust, the pancake isn't quite the right color, or oh, there's something in my pancake that might be a blueberry, I don't want it. They are spending a lot of time, hypervigilantly worrying about the visual, the look of their mealtime. So when you have to spend your time worrying about defending yourself against a change at mealtime, it makes mealtime less and less enjoyable. Mealtime has become highly stressed, these children have difficult transitioning to their meals. Why would you

wanna go to a mealtime when you've been playing on your computer and playing a game that you liked, and now, somebody wants you to come to a mealtime where you don't like any of the sensory aspects of that meal? These kiddos become really suspicious of change, and that's partly because it's our fault. As the grownups who care about these kiddos, we've probably tried to sneak in something new, in the past, just to see if they would notice, and for those kiddos that really did notice it, they're gonna be suspicious that we might sneak in a change, and so, they're gonna be hypervigilantly watching for those sensory surprises.

And, of course, there's not gonna be mealtime enjoyment when there's this much worry about mealtime, and limited motivation to try new things. Parents have challenges. When children are picky eaters, it's hard to understand why the heck you don't like that food. The choices aren't logical. You like yogurt, why don't you like this yogurt? They're just the same texture. Or it's the same smoothie, it's also pink, but it happens to be a different flavor, right? So it's not a logical choice from our perspective, but from their perspective, it's real, and we need to believe these kiddos. Kids have a poorly balanced diet, which worries parents. Parents can't change the diet, the presentation, the brand, the environment, and maybe not even the feeder. It can be hard for families to eat together. This has a huge emotional impact on both children and families. Doctors often aren't concerned, because a lot of these kiddos are growing just fine, and when they're growing fine, but the parent says, yeah, they're the right weight, but look at them. They eat four foods.

So parents can feel dismissed by their medical support. Families and friends don't get it. I mean, how many parents have said to me, my friends just said, you know, if you wouldn't just give him snack food all the time, he'd probably eat other things, as if these parents haven't already tried lots and lots of different foods. So eating out can be very stressful. So we could focus our support on a lot of different things. I tend not to call these kiddos behavioral problems, because I like to think of the behavior, the

resistance the child is showing us, is the child's ways of communicating to us that there is a problem, so instead of being a behavior problem, they're communicating hey, there's a problem here, and are we listening? So Ellyn Satter, dietician and leading expert on feeding throughout the country, talks about when children are resisting us, when they're resisting our offer, then we oughta look at what kind of pressure we're providing because pressure can really cause children to have more resistance, and then, you could call it a behavior problem, but I'd personally rather say they are trying to communicate something with us, and we should be listening, and adapting our offer. Diet, dieticians will tell these parents all the time, wait, wait, we need to add fruits and vegetables, other food groups, and parents go, great idea, but how can I get it in my child? Sensory, you know, one of the things we have to be aware of is if we offer too much sensory change too fast, for these worried eaters, they can fall apart, and so, I like to focus on tiny steps in supporting the fear and worry and helping them get to a new place with tiny, tiny, incremental bits of change, and I have found my support in the literature on phobia.

So let's continue here. So the literature on phobia talks about the development of a classical conditioning called Systematic Desensitization. So this is actually a process that uses principles of classical conditioning to replace a person's phobia or fear response with a new response. It creates a hierarchy of situations that elicit a fearful response starting with the most comfortable starting place and working towards the most fearful. So what we're gonna do when we look at systematic desensitization throughout this talk, we're gonna talk about it as if a child likes this food, and we wanna help them like that food, we're gonna start with where they're comfortable, and we're gonna systematically make tiny, tiny, incremental steps of change in our offer, so that we can help them stretch towards that new direction but without going right to the worry. We're gonna start with what's really safe and comfortable, what's familiar, we're gonna tiptoe towards change, we're gonna build on each change, and the main thing about systematic desensitization is each time there's a change, you've gotta get

perfectly comfortable at that level before we offer another level of change towards the goal. This will be more clear as we move along here. So I like to think of this terrific analogy. So if you imagine that the child is at the first floor of a big, tall skyscraper, and you wanna get to the top, you could take the elevator, you could go fast. But if you have a fear of heights, it's gonna push you right into your worry to go right to the top of that elevator, right to the top of that building.

So how about thinking about it as one step long, one floor at a time, get comfortable there, and then, go up one more floor, get comfortable there, and then, so on and so on and so on. These are systematic, careful changes, without pushing the person, or, in our case, the child, directly into their worry. So the purpose, for the purposes of this talk and in my book, and in my two day courses, I talk about systematic desensitization in a practical term of continuum. That is, how can we help a child get from here to here, from here to there? So we're gonna start where the child's comfortable, tiptoe, and we're diluting the worry. That's a really important part, diluting the worry. There it is. So we're gonna get from here to here, but each little step, we're gonna offer a little bit of change, and help the child get comfortable right there before we go to the next one. Okay. Another thing that we think about as a principle when we're working with these kiddos, and when I'm working with any kiddos with feeding challenges is I wanna talk about the ideas of an offer versus a demand. I like to think that what we, as grownups do with children, when we're trying to find what foods do you love, sweetheart, I wanna figure that we're offering, we're asking, we're presenting an offer. Inherent in the term offer is the opportunity and the possibility of saying no.

If you give an offer, you're giving the child a possibility of saying yes, but the possibility of saying no if they need to. In a demand, we're not giving the choice of saying no, and a demand is, I'm bigger than you are, you will eat this. So I like to sort of frame our thinking about helping these kiddos in the terminology of offer. And this terminology is actually supported very well in the responsive feeding literature, and by the way, all of

the references I refer to in my slides are in the back of your slide presentation in references. So we also know that children consume more food if they're not pressured to eat, that the authoritarian approach to feeding actually can backfire and children actually can end up eating less of those foods that you're pushing. So in terms of helping children learn to be internally motivated eaters, children who eat because they want to, and they're motivated to do so, authoritarian approaches aren't as good for that, authoritarian approaches provide external motivation, that is, you will eat because I said so, you'll eat because I'm praising you, you'll eat because you're gonna get the toy. I'd rather that we work on ways for children to eat because they intrinsically want to. Pressure feeding has little impact on changing picky eating. So there's a number of different articles that support this. External rewards may negatively affect the child's intrinsic motivation to eat.

So there's lots of literature, and these are only a few, but there's lots of literature out there that is really supporting this thesis. So I like to think, when supporting these families about a circle of sensitivity. So we want the child to eat, in the center, to enjoy foods, to try those new foods, but what happens is children have layers and layers and layers around themselves of protection. They have a layer of worry that says, wait, wait, I'm kinda worried about that kinda change, I don't like the look of that, I don't like the smell of that. So what happens is they are protecting themselves from that food, so if we're pushing right into, you will try this new food, we're ignoring all of those layers they've built up. So I believe, and in my experience, we do better by helping that child get from here to there, by tiptoeing along the continuum, little tiny steps from here to there, with the child and the parent both being successful all along the way. I want the child to think about the circle of sensitivity and their grownups as the grownups as their huggers. The grownups are the encouragers, hey, sweetheart, I know this is hard for you, but I'll help, we can do it together, instead of somebody that's gonna push right into their worry. When I think about anxious eating, it's very important to me that we all think about a number of layers. In order to have, let's see if we can find this here, in

order to have improved nutrition, here we go, in order to have improved nutrition, and in order to teach children new food trying techniques, we wanna make sure that first off, that they're feeling well. We wanna make sure that they don't have allergies, they're not constipated up to their ears, that their system is working well. We'll talk about some of these later. We wanna make sure we start from a place of mealtime peace, we wanna help them understand, sweetheart, you know, change could happen at mealtime, and you're gonna be okay. We wanna give them lots of exposures, or what I'm gonna call rehearsals to new foods, so that they understand, you know, other people eat foods, sweetheart, that you don't, and we can help you learn how to eat those. We wanna help children start from something that's really safe, and tiptoe or stretch along the continuum towards new foods, and we're gonna sort of rethink about what we mean by try it.

In the big picture of this, we're really gonna be looking at what are the lifelong skills the child needs. What I think about in therapy is we could spend four months and teach the child to like a brussel sprout, just for an example, but really, if we're gonna have three months of their life, I would rather make sure that we're teaching them the lifelong skills of learning how to eat in a world where they're picky, and the world eats things they don't. What are lifelong skills? Maybe they are sweetheart, you need to learn to eat at a table where other people are eating foods that you're not eating, that you can be around those kind of foods. Then it's okay to say no thank you when it's not a food you can eat, that you can say no thank you politely. You don't get to call food yucky and run away from the table flapping your hands. You can stay there and say, no thank you, and your grownups will listen. You can spit out a food politely, on a napkin, if you need to.

So we can, and another lifelong skill is teaching ways to try new foods, because it's gonna be pretty clear in a minute that a lot of the kiddos that we talk to, and a lot of the parents that we talk to, and maybe even some of your friends, don't actually know how

to try new foods in a very careful way. We'll get to that in a minute. So in the hierarchy that I think about, the first foundation is gonna be mealtime peace. If we're gonna help children make, and families, make any change at their mealtimes, there's gotta be a peaceful mealtime to start with. It cannot be a mealtime that's starting with have a bite, have a bite, have a bite, eat some more, eat some more, eat that one, don't spit it out, you can't leave the table, you need seven bites of this new food before you get to have the familiar food. There is a lot of angst that's happening at mealtimes for children and families.

We've gotta find a way to start at a peaceful place, to build change from there. We need to then build change happens, we wanna give children rehearsals, we wanna choose those new foods wisely, we're gonna practice ways to try new foods, and we're gonna go at the child's pace. Once a child find some new foods, we're gonna help establish that food. It's not gonna do any good that the child has learned how to eat that new food, at your one hour clinic in therapy. We don't celebrate that as a goal fully until the parent and child can eat that food together at home. So let's look at mealtime peace, as a starting point, and this is a guideline that you might be able to use to have conversations with parents about mealtime peace.

So there's, in the mealtime peace pie, there are six different sections. In the preparation section, so in order to have a peaceful mealtime, we wanna give children the privilege of being hungry at a meal. So that means we're not gonna have them nibble all morning, drink juice half an hour before the meal, and do things that interfere with the possibility they could be motivated enough to be hungry and try a new food at the mealtime. We wanna provide some kind of a meal/snack sort of schedule, whatever works for that family, but something that has a routine, so that your stomach is kind of expecting food at about the same time. We wanna make sure that we're providing successful seating, so the child's not dangling on the chair, they feel grounded and supported posturally, so that they can be at the table. We wanna make

sure that we give utensils that provide success. So for example, if the child's a two year old, we don't wanna have a really long spoon. We wanna have a little two year old sized spoon, and we wanna make sure their cups and spoons and plates all work for kids. We wanna help the child transition to the mealtime. So if a child is on their computer, and doesn't wanna come to the mealtime, because it hasn't been all that motivating in the past, we wanna make sure that we have, maybe, some kind of a step down activity.

So for example, if the child's at the, I'm just saying, at the computer, because that's a common place where kids are, maybe, instead of going right to the table to eat, when the child doesn't know what the menu is, and what the smells are gonna be like, and maybe is already worried, how about having the child do a transition activity such as helping to do a mealtime job? Could they bring napkins to the table? Could they give everybody a spoon? Could they help make the salad? Could they pass out the plates? So something that brings the child into the environment of eating but there's not any food on their plate just to start with, it's a transition towards the mealtime, but a step down activity, and sometimes, in the beginning, food interactions, new food trying kinds of interactions need to be taught away from the meal, so that when the family's together at a mealtime, it can be peaceful and calm, and the new food trying skills can happen in quieter, small, little snack times, away from the table, and once the child knows some techniques to trying new food, they can then bring those skills to the table.

Second part of mealtime peace is having, is creating a mealtime that has a no pressure zone. So in a no pressure zone, there are no tears. There's no anger, there's no arguments about food. There's no force, there's no, you must eat that. The child must have something on the table with the food that's offered, that's familiar, because can you imagine if you're a worried eater, and you sit down at the table, and all the foods your parents would like you to eat are there but nothing is familiar to you? So you've

gotta give them something that's familiar. We wanna dilute the worry in trying new foods, and sometimes, for example, that may mean masking off some foods that have particularly strong smells, maybe putting lids on cups so that the smell of the new drink would be masked by a lid when the child's tried to drink it. We wanna consider praise versus encouragement.

So praise is adult-driven. You made me so happy, thanks for doing it for me. Here's the toy because you ate that. You're such a good boy. I don't want the child to think they're not a good boy if they didn't try it, if they just couldn't try it that day. I don't want them to learn to only eat for toys, praises, time on the computer. They, we wanna teach them to be, we want to encourage them to eat because they're internally motivated to do so, so an encouragement and if you look up praise versus encouragement, there's some great articles online, but encouragement looks at, you tried that new food. How was it? Was it interesting to your tongue? What did you think? You must be proud of yourself that you have a new food that you like. I mean, those kinds of phrases that give encouragement without the child having done it for you. They need to learn to do it for themselves.

So we're not judging, well, you only ate this amount. We want children to feel celebrated as little, small, human beings, no matter how they can interact with food, because I would venture to say, the kiddos I know don't wanna be like this. This was not their choice. They are, many of these kiddos are just wired differently. They have different sensitivities and different level of worry about foods, and we wanna redefine what we mean by try it. We'll go over that a little more in a few minutes. So in the no pressure zone, I often will say to parents, you know, what would it take to remove the pressure at mealtimes? And help the parent sort of identify where they might be pressuring the child, so they can recalibrate their interactions, and we therapists need to rethink our goals, and how much we might be pressuring towards meeting those goals, too. Are we breaking our goals into small enough steps so that they are

absolutely achievable without pressure? The third part for mealtime peace is clear expectations. We wanna know that the child, the child needs to know what the expectations are at the mealtime, that there's a routine, we all come to the table, maybe we say a prayer, maybe we pass foods around. They need to understand that certain table manners are expected and that they need to be nice to the chef, and not say, "No, no, yucky." They understand that they're being offered food, but it's not a demand, that they can eat what they can, and they can stop when they're full, and they can leave the table when they're done, or when the family's done, or whatever the family rule is, that the kitchen is closed until the next meal, so you don't get to come up to the table, and then, somebody will give you a new meal in 10 minutes. No, it's okay, we'll have a meal, we'll eat again at the snack time, but the kitchen's closed. And they need to be clearly knowing and trusting that there will not be sensory surprises.

In other words, nobody's gonna tell them, it's just your juice, and sneak in another juice in their glass. It's just your macaroni, and then they get a different brand, so. Another part of mealtime peace pie is togetherness with success. So we want children to be successful, and we want the family to be together as much as possible, as many meals as possible during the week, knowing full well that that's not gonna be easy for lots of family routines, but can they have conversations with the family? Can we think about conversation starters, like hey, what happened in school today? Or you know, what's your favorite color food? Or what kind effort did you see done today at school? Who did a kind act? What did you do for somebody else today? How were you nice to somebody? You know, those kinds of starter questions, so the child is being celebrated for being a part of a meal, but it's not all about have a bite, have a bite, try another piece of food. We wanna remember that kids are listening, and not talk about Mom and Dad not saying, "Well, he never eats that. "I'm so frustrated he won't eat that." We don't talk about this in front of kids. They're listening. And we wanna make sure the conversation is about something besides the child's eating. We wanna make sure, another part of the pie is that there are food opportunities and rehearsals. So

these children, at the meal with everybody else, get to see other people eating, they get to have mealtime jobs that relate to mealtime. I like to have kids pass foods, because it goes right by their nose and their eyes, onto somebody else, they can serve others, they could plate food for others, and I love garnishes.

So in a garnish, I often ask my anxious eater friends to be the garnish putter outer, to put a little slice of an orange on everybody's plate, or a piece of parsley, or a radish or a little tomato, but whatever it is as a garnish, it's not required to be eaten. It's a decoration on the plate, because later on, we may need those kiddos to have their own food in front of them, and have a garnish that just helps them get exposed to a new food without the pressure to try it. Okay, and trust. The bottom line is that children need to trust that there will be no pressure, that they do understand the expectations, that they were prepared for their meal, and the needed supports were there, there were opportunities, offers, and not demands, that there's a non-judgmental togetherness, and that they can trust their grownups.

So when I think about this first ring is gonna be the mealtime peace, the purple one, there we go, is gonna be the mealtime peace one, and then, inside that is once the child is really comfortable, that mealtime is comfortable, that the children begins to rethink the expectations and what's expected from them at a mealtime. Then, we can start helping children understand about change happens. Some kids need this as a separate step, and other kids can jump right by this, to other parts of this plan. So in change happens, there can be change around the edges, there we go, oops. Here we go, yeah. So there can be change right around the edges. That would be, could we change the tablecloth, and it's still a pleasant meal? Could we change the cup, could we change music, could we change, have candles on, could we change the napkins, could everybody's else cup be a different color? You know, so that those are changes around the edge that don't affect the child's actual meal. So can the child get comfortable with change around the edges, and then, can the child get comfortable

with change up close? So if they like a peanut butter sandwich in squares, could we make it in triangles? Okay, maybe not triangles. Could we make it in rectangles? So could we tiptoe towards some changes, it's still your food, but we're making little changes? Could we put a sticker on your cup to change it a little bit without changing the inside of the juice of the cup, for example? So we wanna make change, help them handle change up close. Sometimes, it's too stressful for kiddos to change their place setting and their area, so we wanna make sure we change the person's plate nearby, or their cup, or their shape of their pancakes, so the child gets to see it, and that's kind of a rehearsal for that change in the future. And I often, I mean, you just ask parents, hey, what would happen if we made a change in the child's cup? Oh, I don't think they'd mind, 'cause I just give them the same cup everyday, 'cause it's the one I'm used to. Oh, okay, so if they wouldn't mind, could we change the cup frequently? Could we change the plate frequently, if the parent doesn't think the child would mind, so that the child does, in fact, get the experience of change happening on a pretty regular basis?

We wanna grade our ask. There's a safety ask. Are we asking the child to do something that is safe enough for them, that they're not gonna choke or aspirate? Is it the right developmental ask? Are we asking something that's too high? Make sure we're asking at the right developmental level. Are we asking the right sensory ask? Is the look, sound, smell, texture and taste, starting enough with familiar, and making a tiny change, or it is a huge change? Is it the right motor ask? Does the child have the motor skills to organize that food in chewing? Are we asking a small enough ask that we can help stretch the child to their next motor coordination? Is it the right emotional ask? So children bring their past experiences with mealtime to the table with them, and all of their worries, so are we asking the right level of worry, is it diluted enough? And are we asking the right independence ask? If the child is perfectly capable of feeding themselves, are we feeding them, and I wonder why, and I wonder how we could get from that place. So then, the whole next layer is rehearsals, and that's, well, we've

begun talking about at the table, where we're providing children with previews about what to expect. They're getting to see other people eating this food. If I wanna give children experience with crumbs, for example, they could help make crumbs, they could help feel the crumbs. These are a rehearsal for crumbiness. We wanna be able to smell it, and feel it, and look at it and interact with it, so they know what's coming before some grownup person says, "Here, put this in your mouth." We know children learn from watching others. We learn they eat more when those around them are eating. We know that they try more when they get to interact with the look and smell of foods. We know, when they have a chance to touch it, and explore it, they try food more.

So there's a lot of research that's coming out that's really supporting the concept of rehearsals at mealtimes. The rehearsals can be distant or up close. So in a distant rehearsal, you could look, and that has a distant characteristic in the sense of vision. So you could look from far away, and then, that change can get closer and closer. We know smell is a distant rehearsal. Smell is, the airwaves of smell come to the nose, but come from a distance. So actually, I think of smell as taste from a distance. So a smell is actually a taste rehearsal before it has to be on your tongue, and you're also feeling a texture change. Sound, you can hear people eating, and then, know if it's a noisy kind of food or not. And then, touching food can be a distant rehearsal, because touching food in your hand, especially in your palm, gives you a sense of what that food texture's gonna be like, those scattered crumbs, that fibrous orange slice. You get a preview of what the texture might be like in your mouth before it even gets close. And then, there are up close sensory rehearsals, which are closer smelling, which comes from the interaction of the air in your mouth coming up to your nose from in your mouth, there's closer sound, which is when you have food in your mouth, the sound of chewing celery goes right to your ear through bone conduction, and up close sensory is also, it's gonna be tasting with your mouth and with mouth texture, but you could also taste things from your lips before it has to even go in your mouth, and how many

times do we actually think about, hmm, let's let this child touch it, and bring it near their lips and play with it a little before it actually gets on their tongue? We often just plop it, and I'm suggesting that we should try it a different way. So mealtime peace, oops, here we go. Mealtime peace is the foundation, then change happens, and then, we're gonna look at ways to do new food trying, and to prepare for the new food trying, we're gonna use those rehearsals. So in new food trying, some of you who've been to my courses before know that I talk about the Grasshopper Story, and I don't have time in this webinar to do that, but you could look at the Grasshopper Story at www.getpermissionapproach.com, that's my new website, and there's a video about my family and I trying grasshoppers in Oaxaca, Mexico, and sort of feeling what it's like to be a picky eater in trying those grasshoppers. It's a great video, and you are welcome to show it to families and share it with people, because I think it's helpful.

One kind of new food trying that I like to talk about to dilute the worry and dilute the ask is a story that I call the Sandwich Try, and it's Marta's story. Marta is an adult friend who I met at an event, and she said, "You know, I have trouble trying new foods. 'I'm a picky eater,'" and she did describe four or five foods that she likes, and they were all white. And she said to me, "I wanna try new foods, 'because my new husband loves to try new foods, 'and I'm just trying to figure out a way to try it,'" and I said to her, "Well, how did you try new foods? 'What have you done in the past to try,'" and she said, "Well, I plug my nose, 'I take a bite of the food, I put it in my mouth 'really quick, and then, I chug some water.'" And she has this kind of worried look on her face as she's describing this story, and I realized wow, you are a very smart adult, and you think trying new foods means plopping a big mouthful of it on your tongue, and washing it down with water. And I said to her, "Have you found many new foods 'you liked that way?'" And she said, "No, I never do." And we understand why, right? She was asking too big of an ask of her system. So I said, "What would happen if you took 'a little piece of bread, well, 'first of all, tell me what you wanna try,'" and she said, salmon, 'cause that's something that her husband liked, it's a big ask. There's a lot of

smell to salmon, but it's something she wanted to try, so we took, I said, "What would you be having with the salmon?" She said, "Bread," so okay, so could you take a little piece of bread and put a tiny, tiny, little piece of salmon on it, and another little piece of bread, and make a sandwich? And could you try it that way? Her eyes got big and she said, "Well, yeah, I could." I said, "You could make the bread as big as you want, "and the salmon as small as you want. "You start where you're comfortable, "and then, if that was okay, you could add "a little more salmon, and a little more salmon, "and a little more salmon, and you could eventually take "the top piece of bread off, "until your mouth sort of experienced salmon, "and you could work towards the tiniest piece of bread, "and the bigger piece of salmon, 'til you like salmon."

So two weeks later, she said to me, "You know, I found eight new foods I liked," and it was because we diluted it. We took that food she wanted to try, and we paired it with something she already knew, and that's what I did when I was trying grasshoppers, by hiding the grasshoppers in tortilla and guacamole. So that's a sandwich try. And then, there's a finger try, where we have children just rub their finger on the food, and then, put it on their lips, or then, on their tongue if it's okay. The bottom line here is that we start with dry foods, and when I'm teaching children how to do a finger try, I always teach them how to do that on a food they know already, and preferably something dry, so they're not having to deal with a wet texture in the middle of the whole thing, and so, and then, they can go to their lips, and then, they can go to their tongue.

My new Facebook page, Get Permission Approach, I'm putting up this next week a finger try video from a little friend of mine, so you might check that out. And then, be aware that there is flavor, I'm gonna talk about it as a flavor when it doesn't have a lot of texture to it, and we've talked about the taste as having, combining it with the texture. So we wanna give children the flavor first, like the flavor of a cracker, before they have to have the crumbs of the cracker on their mouth, so we're gonna separate out the flavor and the taste. We're gonna redefine what we mean by try it. So it may

mean that for some children, the, here we go, for some children, there we go, the food might just be able to be in the same room that they're in, or can it be at the same table that they're at, and maybe it's at the other end of the table, and getting closer and closer to them? Maybe they just can have rehearsals around that food, and be comfortable, but with no expectation that they have to try it to start with. Maybe they can just try tasting it a little, but those tastes could be finger tastes, lip tastes before they are mouth tastes, and we can separate out the flavor and the flavor with texture. And then, once they enjoy the food, once they enjoy the flavor, the little bits of texture, we can work with them on skill mastery, and liquids and solids, and from little bits of food to more food.

So I talk about redefining try it in little tiny steps from here to there, and quite frankly, if a child is only comfortable with that food at the other end of the table, without feeling like they have to run away from the table, then we have to hang there until it can get closer and closer and closer to them. So we're redefining what we mean by try it. We're gonna talk about stretches. So in a stretch, okay, in a stretch, we're gonna go from here to there, and we're gonna do little tiny steps along the way, and so, a stretch is when you take, it's a new food trying technique that helps a child learn to try a new food by, like if it's yogurt, we're gonna stretch to a new flavor of yogurt, by adding a little tiny bit of change at a time to that yogurt, so it's still a texture they like, but we're adding little bits of change, 'til you can get to a brand new flavor, for example. But if a child is a child that's not trusting, because people have snuck in surprises in the past, we wanna make absolutely certain that they know there's a change coming, so I like to help children dip, dip in some new yogurt, and stir it, and help create the minuscule little change of flavor, color or texture or taste, so they know it's coming, so it is not a sensory surprise, and you start with the tiniest, tiniest amount. But for children who don't like change, this is gonna be a tough place to start, so we're gonna have to make sure we know, can change happen, and it'll still be okay?

So, for example, if we wanna help a child get from water to a new drink, like a juice drink, we could have water, we could change the color first, and they could help us do that. We could put a dropper, and put one drop of a new flavor in there. We could put two drops of a new flavor, we could put three drops of a new flavor. You can see how you could tiptoe towards a new juice starting with something that they already know. So in this slide, so we can do, we might take their water that they know, and we might first help them drink the water they know out of a different cup, so they learn change happens. Then we might teach them that you could have a different color, and you could have it be tiptoeing towards flavor change until they get to a new drink. So you could stretch, for example, from one fruit pouch to another, from one flavor of a smoothie to another, from one kind of a juice to another, from one kind of crumb to another kind of a crumb.

So some of you have watched the crumb webinar that I did, also, with Occupational Therapy Library, and it's called "Crumbs as Tools," but I think there's gonna be a link to it at the end of the website, or at the end of the webinar. So if you wanna know more about how you can use crumbs as a tool in pediatric feeding, then check that one out. We use crumbs to help children make texture change, flavor change, we can help them with motor challenges such as chewing. We use it as a bridge for sensory and motor change, and there's a continuum from the tiniest crumbs to big pieces. Crumbs are small, and we can grade our ask. So we're gonna help stretch them visually, the size, the smell, the sound, the flavor, the texture, and the food group. So we can help kids get from crumbs to other crumbs, from crumbs of cereals to crumbs of freeze dried fruit, for example, so that we can make lots of little stretches. Crumbs are small, and we're diluting the ask in each of these sensory variables.

I wanna have a conversation about bringing food, bringing success to home, bridging success to home, because seriously, in my way of thinking, parents absolutely must be successful and they must be included. In our clinic, if a child's coming in for feeding

therapy, the parent is in the room, because we want the parent to understand how to try the different activities we're trying, we're gonna want the parent to be successful. So for example, if we are making some smoothie drink with a child in the clinic, we wanna make sure Mom or Dad or siblings are there, they're helping to interact, they're helping to hand a food off. If the child's taking a taste with me, for example, I wanna give the cup to Mom, and she could offer the child a taste, and Dad can offer the child a taste. I wanna make sure we're all participating and feeling successful.

One of the ways we bridge to home, a lot, is with the video, video technology. Everybody has a telephone these days, everybody can videotape what's going on, so oftentimes, if a parent, let's say a mom, is in a feeding session, and the child and the mom, and we are trying some new foods in some different kind of way, we're learning how to do finger taste, or sandwich taste, we're learning how to redefine try it, whatever we're doing, we might say, hey wait, could we take a picture of that, and we'll take a picture or a video, and then, right there, we'll press send, and parent, Mom will send it to Grandma or to Dad, to somebody else, so that A, it can be celebrated later with the child, because the child's used to not being celebrated at food, and used to sort of failing, 'cause they don't like food that much, so they can be celebrated later, but also, I use the technology to say to parents, hey, how 'bout this week, of all the things we did in therapy today, what things did you like, that you think you wanna try to do this week? And so, the parent'll say, oh, I wanna try making crumbs, for example, so I say, wait, could you take a picture or a video of making crumbs with Johnny, and bring it back when you come next time? So then, the minute they come back into therapy, we are celebrating. What did you do this week? Oh, wow, you made crumbs! What kind of fun was that? What kind of things did you make with crumbs? How did you make them? What did they feel like? What did they taste like?

So the parent is learning, I have expectation that they're gonna carry out these activities at home, they got to pick which ones they wanted to carry out, and they

know, I'm holding them accountable because when you come in next time, I'm gonna say, hey, did you bring pictures for me? I'm not gonna judge them if it was a tough week, and they couldn't get to it, but they're gonna understand that this is sort of the give and take of what I expect in therapy, and that they were partners in making the decisions about what to do at home, and they're partners in the decisions, in what they bring back to therapy, and inherent in sending things home, and bringing things back is celebration for the child, and success for the parent, because that if the parent says, "I did it this way, and it didn't work," then we have an opportunity in the next time we get together to talk about how could we make it work differently, so that you do feel successful in your home? We wanna choose foods wisely. Just, I'm shortly running out of time, but I had somebody call me recently, and say, "Hey, this child, my child doesn't like "the smell of bananas. "He gags whenever he smells bananas. "How can I get him to eat it?" And I'm thinking, hmm, maybe if he gags every time he smells bananas, maybe that's not the food to start new food trying with. Maybe that child just isn't ready. If I gagged when I smelled, I don't know, liver, I don't know if this food I want you to start practicing with me with new food trying. I want you to practice with me in new food trying techniques with foods that I'm actually going to be able to enjoy, not sort of gag down.

So, and also, I think a lot of times, parents will come in and say, "Yay, my child learned to eat Cheetos this week." Well, I wanna celebrate with them, because they're enthusiastic, but in therapy, if we have a choice, if we're gonna do crumbs, for example, instead of going from Ritz crackers to Graham crackers, I might try to go to Rice Krispies. Why? Because it's a new food group, and it's a fortified cereal. So at the end of the day, we've got something bigger to celebrate, rather than just a new food, but it's a new food and it adds value to the daily nutrition. So anxious eaters and their families need our help, not our judgment. If a child is not succeeding, we need to look at what we can do differently to help them be successful. Did we need to grade our ask differently? Did we ask too much? Did we go right to the top of that building? And if a

parent is not succeeding, what could we do differently to help them be successful? And do we need to help support that parent in a different way? So as you go forward, thinking about working with anxious eaters, kids with lots of worry, we wanna help them be celebrated and successful, we wanna help parents be celebrated and successful, and we have it in our repertoire of skills to grade our asks so that all of that success can happen. So I'm happy to take your questions. I have a list of references here at the end, and I wanna make sure that I point out to you, just because, this is the new book that just came out within the last month and a half. So it's another resource on this exact topic.

So I'm happy to take questions, and I think, in the beginning, I might've put my, yes, here it is, I've got my email. That's my personal email, my website, Facebook, and Instagram. I'm still learning all of these fancy social media technologies, so bear with me with them. But I'm happy to chat with you if you have any of those kinds of questions. Let's see, I'm supposed to ask you about the course that I did give already for the OT group was on "Crumbs as a Tool," and so, you could look that up in the occupationaltherapy.com library. It's called, and I think there's a link to it over on the left of your screen, "Crumbs as a Tool in Pediatric Feeding Transitions." It was November 5th, 2018, and it's pretty practical, and it blends very well with this webinar. So if there are questions, I'm happy to take them, and if not, good luck with these kiddos. They are, they need our help.

I don't see questions. Have I ever run any groups? I do, I have done groups, certainly. I think groups can have the advantage of being a great rehearsal. So all the children in the group can see what we're doing, and so, they get to understand what's happening, as long as we allow each child to go at the pace that's comfortable for them. I worry about only doing groups for some kids that could use a little extra new food trying support, sort of privately and in less pressure. So for me, the issue is the degree of pressure. Can I keep the pressure down, and keep it fun and enjoyable and can we

help the child move forward, and not just get stuck making cloves on an orange as a Christmas decoration, and that's a great idea, but all we, but what, but why, but what's the parent doing at home? Personally, I feel like, if groups are gonna happen, parents should be included, and there should be something they could do at home that week and then, get feedback on those home activities when they come in next time to therapy. Let's see. What is the priority in feeding? Is it for the child, or the child and parent? Absolutely, I will tell you, I think it's the priority for the parent to be successful, because that way, the child is experiencing the change in the way that they need to, but the parent is able to do it 24/7. It's not about can I get the child to eat a new food, because I can do that, but then, how is it helping the family at home? I feel like it honestly is parent and children must both be successful. Sometimes, in a feeding therapy situation, children will try something for the therapist, because it's new, it's a different environment, they have different expectations of that person versus their parent at home. If that happens, and it does, then, our next goal is how can we bridge that to home, and we are actively working on that bridge, because I've heard so many parents say yeah, my child will eat anything for a parent. They'll eat anything for this other person, right, for the therapist, and that is really discouraging for parents, so we wanna make sure that that happens. Do you have an address, do you address, just a second here, I'm trying to read these.

- [Fawn] Marsha, I don't mind helping you read them, if that would be helpful.

- Oh, okay. All right, that would be great, 'cause I only had half of them on my screen. Okay, go ahead. Oh, what is ARFID?

- [Fawn] Let me go ahead and help you, then.

- Okay, so ARFID is Avoidant Restrictive Food Intake Disorder. It is a DSM-V eating disorder category that's relatively new. The children that have ARFID, I'm just gonna

give you some general ideas about it, but the children who have a diagnosis of ARFID, it's an eating disorder diagnosis, so it's in that category. It's not in feeding therapy as a diagnosis. It's in eating disorder diagnosis, but the children that are diagnosed with it may or may not have weight issues, but, or they may or may not have nutritional issues, but often, have nutritional issues, and often, there is some look, smell, taste, texture, sensory property of a food that requires them to be limited in their very, very narrow diets. I think that diagnosis describes many, many of the kiddos we've been talking about, however, there's discussion in the universe about whether these should be treated in eating disorder clinics with bulimia and anorexia, or whether they should be treated in pediatric feeding clinics with speech and occupational therapists that have an understanding of some of this whole sensory base. So that's still out for discussion, and it would take an entire session to go into that in more detail. But look it up and check it out. There's lots to be said about that these days. Go ahead, Fawn. Oh, okay. Do you address--

- One person mentioned, oh.

- Okay, go ahead.

- [Fawn] Okay, I was just gonna say, one person mentioned that they have several anxious eaters, and they were having difficulty getting them to sit at the table during mealtimes, that they tend to run away. I know you talked about having them set the table, having them being part of it. Do you have any other ideas?

- Lots of ideas. So remember when we were talking about mealtime peace, one of the things I ask parents is, what would it take at your house to have mealtime peace? And some parents say, in order to have mealtime peace, I feed my child only the foods they know, the brands they know, the texture they know, on the plate they know, on the cup they know, and I let them eat separately, or somebody else might say, I can get my

child to come to the table only if I have their iPad or their, a phone. You have to understand from knowing me that I'm not gonna judge either of those. That is the starting point. That's what has allowed that family to have a meal, without the child running away and flapping their hands, and tipping over the table and screaming, right? So if that's what it takes as a starting point, then that's the starting point. I'm not gonna recommend that starting point, usually, I'm gonna be supportive if that as the starting point and many, many families come to us with that starting point. But what we're gonna do is figure out how can we tiptoe back towards the table? How can we help the child get comfortable in a continuum, here to there approach? Can the table get closer and closer over time? Can we have the stronger smelling foods on the other end of the grownup table? Could the grownups eat chicken nuggets for a couple of meals so that the child can know that they can come to the table, and that we're all having the same food to start with, and then, branch out to something different? Can we teach new food trying and comfort through rehearsals? So sometimes, there are definitely kiddos that need to eat somewhere else, and I would like you each to think about if you had an anxious eater who had this narrow of a diet, who was this worried about, hypervigilant about sensory change, smells, and looks at mealtimes, and was so distressed at every mealtime, and a therapist said, "And you need to have the child sit at the table," that's miserable, they're not gonna wanna follow your recommendation, because it's gonna make everybody miserable. So I wanna start from that place that's peaceful, and then, incrementally, make the steps towards togetherness at the table. How do you address--

- Read some more for you?

- Unique eating? I've got, how do you address unique eating strategies like a child who removes the tips of french fries? So I try to think about picking our battles. So at this point, if a child is taking, tipping, taking the tips off of french fries, or I've known kiddos who eat Saltines, and take a bite out of every corner, and eat a whole entire pack of

Saltines that way, because there's a certain look. If it's got one bite out of it, it's my Saltine, and if it's got two bites out of it, it's something else, right? That's the same idea as it's my apple if it's a red apple, but if it's a green apple, it's not my apple, right? Some kids have such a need to have the visual of the food be so much the same that they have to create it that way. Kiddos that eat the french fry tip, some kids that take the french fry tip off, it could be a textural thing for them. So, I'm gonna ask myself, and I'm gonna ask the parent, of all the things we could work on, do we wanna spend time working on that right now? Or do we wanna help the child really understand and explore more sensory opportunities and interactions with food, helping to cut up french fries for other people and understand french fries can come in different textures? Maybe they can learn to like french fries that are frozen, as opposed to always McDonald's.

There are a lot of things to work on, and I might not pick the picking the tip off of the french fry as a starting point, because there's probably lots of other foods that child needs to learn to like, and lots of other stretches that we could make. So we could work on it, but I might not pick that as my priority. Does having a child participate in cooking to prepare their own food have any higher success in eating? Absolutely. I have a mom who helped write parent input in the "Anxious Eater, Anxious Mealtimes" book and she had a little guy that had no vegetables in his life. So one of his mealtime jobs, she had him be the salad maker. So every night, she'd put down a little, his sized table with little bowls of salad parts, and that she would decide what those parts were, and he would put them in the big bowl, and he would make the salad, and then, serve it. So he got celebrating from serving the salad, and without any expectation that he had to try it, but eventually, he thought that he could lick lettuce, and lick a tomato, and work towards trying those new foods. She said she had a spaghetti sculpture, and she had the kids make spaghetti together with their hands and play with it four or five times, and she said that one of her sons decided, finally, to try spaghetti, after he'd been interacting with it and playing with it. I always have kids interact with smoothies.

We have kids make the smoothies, and we start making smoothies with the juice they know, and just through the blender, and then, we pour it, and then, we start making change with that, but I find children are much more willing to make that smoothie when they've seen what was in it. If a child sees or tries a new food, and they describe it as yucky or nasty, what's the appropriate response?

So for me, the appropriate response is, oh, your tongue doesn't like that today. Can you smell it, and let's put it away? Can you give it to Mom to smell, and see what she thinks about it? Mom could lick it, and see what she thinks about it, and that's part of what I talk about in this rehearsal. So if I ask, and the child doesn't like it, first of all, I'm gonna celebrate that they tried it. And they're gonna know, I'm not gonna force them to try it again, or force it down their throat and swallow it when they're not comfortable yet. So I'm gonna say, wait, wait. I'm gonna, it's what I call wait, wait, pivot. So wait, wait, can you just take that same food, and could you hand it to Mom? Could you hand it to me? Can you give me a taste of that? So they're still interacting with it, I've ended the activity on my note, rather on, "It's yucky," and then, the game ends, right? "It's yucky," oh, okay, you don't like that. Your tongue doesn't like it today? Hey, but can you hand it to Dad, and then, we'll put it away? That's how I deal with that. And that could also be an entire hour talk.

How do you work with families who cannot apply principles and strategies at home? That's a really good question. So, and I think it's gonna have to be my last one, 'cause I think I'm running out of time. But first of all, I'm not gonna judge families. They are doing the best they can, and these kids can be overwhelming, number one. Number two, if they don't implement a strategy at home, I'm gonna look this way. Could I describe it differently? Have I had too big of an ask for them? Did they come up with 25 ideas, and really, they could only do one? Oh, I might ask them to videotape what they did, and then, we're gonna review it together, how did it work, or where were there roadblocks, what wasn't working? Hey, how did you try it, and let's look at how it

worked and how it didn't work, and how we could change it. Having said all that, I will work really hard to change my ask for children, and to change my ask for adults, and parents are successful. However, I also know some families that come in, and they wanna sit there on their phone, they wanna wait in the other room, they want, I'm at home in a home visit, and they wanna go in the other room and make a phone call. So we have that conversation from the beginning. I expect them to be a part of this, and I encourage and support their being a part of it, but there are some families that I will say, you know, we talked about trying that same juice at home, and I sent the juice home with you, and you weren't able to do it, and three weeks in a row, it just didn't work at home. Do we have to do something different so you can be, feel successful at home? Is there some roadblock to being successful at home that we can talk about? And also, sometimes, maybe it's just not the best time to do feeding therapy right now. And do we need to wait 'til another time, and do you wanna call me in a month, and think about the ideas we've talked about, and then, maybe we'll try again if it's a better time? So my support will be loving and non-judgemental, but I expect that we're gonna participate together, and I expect it's gonna be my job to do the best I can to make them success, have the tiniest little steps of success from here to there for themselves, too. So it looks like we're out of time. Thank you so much for your attention today. I appreciate there's more questions we didn't answer. You can email me if you'd like, and see you again next time.

- [Fawn] Thank you so much, Marsha. I want everyone to make sure you've jotted down the course she has in the library. It's on the left side, left hand side in that Notes pod, and then, also, we apologize if we did not get to your questions. They were very good questions coming in, but we just ran out of time. Many people were saying, thank you, Marsha, in the chat. So they really appreciate your time. Thank you so much. Hope everyone joins us again, on occupationaltherapy.com. Thanks so much, have a good day.