



Berkshire Healthcare NHS Foundation Trust
Royal Berkshire NHS Foundation Trust



Helping your child
accept new foods into
their diet

Royal Berkshire Hospital
Joint Feeding Clinic

This leaflet aims to support parents and carers in helping their children overcome behavioural or emotional problems around eating.

Normal fussy eating in young children

During the early years, picky or fussy eating is extremely common and is considered a normal stage of a child's development. From around age 1 year through to school age, young children become much more aware of how their food looks, smells and tastes and can become suspicious of foods that are different in some way to what they expect. This can lead them to reject unfamiliar foods or even stop eating foods they used to enjoy. A child may also reject foods that they associate with unpleasant experiences such as gagging, choking or being sick. This fussy eating phase is usually temporary and can be overcome by keeping mealtimes calm and sociable and continuing to offer your child a variety of foods, even if they do not always eat them. Eating together as a family will also help, because children learn appropriate mealtime behaviours by imitating the adults they eat with.

Why do some children become severe and persistent restrictive eaters?

In some cases, toddlers and young children show high levels of anxiety when presented with new or unfamiliar foods and can have very rigid preferences for certain foods based on their taste, texture or appearance. If the range of foods a child is willing to eat becomes very limited, then this can affect their ability to meet their nutritional requirements for healthy growth and development. The causes of severe and persistent restricted eating are varied and complex. The weaning period, between age 6 months and 1 year, is a key developmental stage when infants learn the necessary skills for

biting, chewing and swallowing solid foods and progress on to feeding themselves. Delays or interruptions to the weaning process can hold back these skills and result in problems such as gagging and retching on lumps, sensory issues and aversions to spoon feeding or the touch of food to the lips or facial area.

These are some of the factors that can impact on the development of key feeding skills in early life:

- Neuro-disability or developmental delay
- Weaning delayed beyond 6 months of age
- Gastro-oesophageal reflux
- Constipation and other digestive disorders
- Severe or multiple food allergies
- Surgery or medical problems that impact on feeding, including the requirement for tube feeding.

Restricted eating can also develop in older children for a variety of reasons. There is a high prevalence of avoidant or restricted eating amongst children diagnosed with autistic spectrum disorder (ASD). This is understood to be due to differences in the way their senses process information about how a food looks, tastes, smells or feels.

Overcoming restrictive eating – what can help?

Remember the 3 Ps:

Be PATIENT

Be POSITIVE

Be PERSISTENT

No two children are the same, so no single approach works for every child. However, in nearly all cases it pays to:

Be PATIENT – if restricted eating has become an entrenched



behaviour, it will not be possible to change it overnight and you may need to try several strategies before finding those that work best for you and your child. There is reason to be hopeful that your child will grow out of their restricted eating habits, but evidence suggests that this may not start to occur until after they reach primary school age.

Be POSITIVE – if your child senses that you are stressed or unhappy around their eating habits then this can reinforce their food related anxieties and turn mealtimes into a battle of wills. Stay calm and try to keep meal times sociable and fun. Give praise for appropriate mealtime behaviours such as sitting at table and using cutlery, rather than just focusing attention how much they have eaten.

Be PERSISTENT – children will often require up to 20 goes at trying a new food before they come to accept it. Often there will be a process of checking it out in stages such as touching, sniffing and licking the food - before they feel comfortable with taking their first bite. For older children and children who are on this autistic spectrum, this process of gradual familiarisation is likely to take much longer.

Getting started...

Building familiarity with new foods

Children can need time to become familiar with the look and feel of new foods, before they are prepared to try them. This especially applies to children whose restricted eating is related to anxiety, oral aversion, disordered sensory processing or autistic spectrum disorder. The following strategies can help your child to gradually feel more comfortable around new foods, although you may need to try each technique many times.

Exploring food – include foods in play activities away from mealtimes. For example, look at pictures of foods together in books or on a tablet / computer; make a collage or scrap-book with pictures of foods your child has tried or would like to try; make a game out of

guessing what fruit or vegetable is in a bag by feeling it.

Messy play – this can help if your child is hyper-sensitive or averse to the touch or texture of certain foods. Allow your child to explore moist, sticky, squashy, slimy or lumpy textures in a fun way. Use both food and non-food materials such as paints with vegetables for printing, clay, sand, dry pasta, dough or pastry

Shopping – involve your child in selecting and handling foods while out shopping. If your child doesn't cope well in the supermarket, keep the trip short and targeted – for example, just to get the ingredients for a specific dish or recipe.

Cooking – ask your child to help you prepare a recipe and encourage them to smell or taste the dish along the way. Make it fun and involve them by asking questions such as “does it smell nice?”, “is it sweet enough?” or “does it need more...”.



Taking the first steps...

Working towards trying something new

Choose a food that you would like to try and introduce into your child's diet. It could be something from a group of foods that your child currently does not eat at all (for example vegetables or meats) or a food that you eat often as a family.

It can be easier to introduce a food that is similar in appearance and taste, to a food your child already eats. For example, if your child already eats breaded chicken nuggets you could try breaded chicken fillets or breaded fish fingers.

The process of trying a new food can be made easier for your child by breaking it down into a series of smaller steps that are easier to achieve. It will help to build your child's confidence around food if they are in control of the process and only progress through the steps at a pace they are comfortable with.

Step 1: Put a tiny amount (teaspoonful or less) of the new food onto your child's plate, ensuring that it does not touch any of their accepted foods. If this upsets your child, try putting the new food in a side dish as near to them on the table as they will tolerate.

Step 2: Encourage your child to pick up the new food with a fork or a spoon and put some on to their own plate. If you put some on your plate first, then your child may copy.

Step 3: If your child is comfortable with the smell of the food in their space, suggest they lean forward to smell the new food.

Step 4: Encourage your child to touch the new food with their fingers or cutlery if it is not a finger food.

Step 5: Next see if they are willing to pick up the new food.

Step 6: Encourage your child to bring the new food near to their face and then to their lips. If they are comfortable, try asking your child to touch the food to lips, teeth and eventually the tip of their tongue.

Step 7: The next step is for your child to lick the new food and then when they are ready, to put a small amount into their mouth. Reassure them that they can take the food out of their mouth and put it back on the plate if they want to.

Step 8: Encourage your child to bite, chew and swallow a very small amount of the food. Again, tell them it is ok to spit it out if they want to.

Step 9: Keep going and gradually increase the serving size of the new food each time - but to no more than a normal portion size.

Step 10: Start the process all over again with another food!

A child can only come to accept and like a food after being exposed to it many times.

By seeing a food being bought and prepared and regularly seeing family members eating and enjoying that food, your child will gradually learn that the food is safe and appropriate to eat.

Other tips that may help...

- Keep to a regular mealtime routine of breakfast, lunch and dinner and avoid long gaps between meals.
- Don't let meal times go on too long; a toddler is unlikely to remain engaged in eating a meal for more than 20 minutes.
- Clear away uneaten foods without fuss or comment – but give your child praise for good mealtime behavior instead.
- Avoid introducing new foods at times when your child is very tired or hungry as this can result in frustration and distress.
- Always offer your child foods that you know they will be happy to eat at each mealtime and only put a small amount of any new or unfamiliar food on your child's plate, once you know they are comfortable with this. Some children may only accept being exposed to new foods away from their regular mealtimes.
- Avoid hiding new or unfamiliar foods within a child's accepted food – unpleasant surprises may cause the child to become even more suspicious of foods and stop eating a food they were previously happy with.
- Try to eat together as a family as often as possible and regularly eat the foods that you would like your child to eat so that they can observe you eating and enjoying them.
- From nursery age, arrange for your child to eat socially with other young children, but avoid making comparisons with how much others are eating.
- If your child has a small appetite, offer only small portions so that they can experience the success of finishing the serving. Second helpings can then be offered and portion sizes increased gradually over time. Discuss with your dietitian whether extra snacks between meals would be helpful for your child.
- Never force or coerce your child to eat anything and avoid resorting to bribery as this is unlikely to work more than a few times. If your

child's experience of exploring new foods is reinforced with positive attention, then they will find it rewarding experience that they will want to repeat.



Further information

Further advice and information in feeding infants and young children and overcoming food refusal can be found on line via:

- Healthy Start : www.healthystart.nhs.uk
- The Infant and Toddler Forum : www.infantandtoddlerforum.org
- The British Dietetic Association Food Fact Sheets : www.bda.com/foodfacts/index/html
- NHS Website – Fussy Eaters : www.nhs.uk/conditions/pregnancy-and-baby/pages/fussy-eaters.aspx

Contact us

Department of Paediatric Psychology
Dingley Specialist Centre, 3-5 Craven Road, Reading RG1 5LF
Tel: 0118 322 7531

Paediatric Dietetic Department
Royal Berkshire Hospital, Princes House, 73A London Road
Reading RG1 5UZ
Tel: 0118 322 7116 Email: paeds.dietitian@royalberkshire.nhs.uk

Produced for the Joint Feeding Clinic at the Royal Berkshire Hospital by:
Dani Barker, Senior Paediatric Dietitian & Dr Inés Baños, Consultant Clinical Psychologist: May 2017.

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