

Help for children who are extremely fussy eaters



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1: Introduction

In this information sheet we will give you some tips to help you understand and manage your child's eating. This information is about children over a year old and is not aimed at young babies.

How to use this information booklet

Work through each section in order:

- In section 1, learn more about the differences between common and extreme fussy eating, and when and where to get more help
- In section 2 there are some practical strategies:
 - 2a is a checklist to see if there are any strategies you haven't tried to deal with your child's fussy eating
 - 2b covers some more ideas to help with extreme fussy eaters
 - 2c looks at what to do if your child constantly demands food
 - 2d introduces visual supports that are often really useful in helping a child learn about routines, behaviours and situations
 - 2e covers ideas for introducing new foods to reluctant eaters
 - 2f provides a list of ideas for play with food
 - 2g looks at ideas for rewards and motivators for your child, to help them change their eating behaviours.
- In section 3 you can self-evaluate your child's current diet:
 - 3.1 will help you look for patterns in your child's eating to help you come up with the best ideas for new foods to try
 - 3.2 will help you compare your child's diet with the government healthy eating guidelines to see if there are any big gaps.

1.1 Introduction to fussy eating

Many children go through phases of refusing to eat certain foods; this is particularly common in young children but can occur at any time. It is often a child's way of exerting their independence and testing the boundaries, and is a normal part of growing up. This 'common fussy eating' is often frustrating and stressful for you as a parent, but rarely causes any serious nutritional, medical or growth problems, and is a phase that is grown out of.

Some children have eating habits that are much more entrenched than common fussy eating. In this leaflet we will call this "extreme fussy eating". Professionals may also call these eating habits feeding disorders, selective eating, perseverant eating, restrictive eating, or avoidant restrictive food intake disorder (ARFID).

Extreme fussy eating can continue for much longer than common fussy eating – sometimes even into adulthood. It is common in children with social communication disorders such as autism, but also occurs in children with no other developmental problems.

Many children with extreme fussy eating suffer no ill-effects from it; however, some children experience some more serious problems such as growth problems, nutritional deficiencies, severe dental decay, dehydration or severe constipation.

Some children with extreme fussy eating grow out of it over the course of months or years; however, you may need to help this process along if your child's eating is affecting their health, or is particularly stressful for you or them.

1.2 Comparing common and extreme fussy eating

What is the difference between common and extreme fussy eating? There are no universal definitions but the table below highlights the generally accepted differences.

Common fussy eating	Extreme fussy eating
Very common – affects about a third of typically developing 1-5 year olds	Less common in typically developing children –quite common in children with Autism Spectrum Disorder
Usually no or only minor growth or health consequences	Can have moderate or severe growth and health consequences (but not always)
Can be very stressful for parents	Usually very stressful for parents
Children usually grow out of it over weeks to months when the first line help (see 2.1) is followed and persevered with	Children can take a long time to make even small changes to their eating – even when the first line help (see 2.1) is followed. Extra strategies are often needed (section 2.2 to 2.7)
Eat a range of foods including some from each food group (see 3.2) although some days may only eat very little or have preferences for a narrow range of foods	Eats a limited range of foods – often less than 20 different ones. Often has some food groups they eat nothing from (see 3.2)
Can be upset by new foods or changes in favourite foods or foods touching each other	Can be upset by new foods or changes in favourite foods or foods touching each other – this may be more extreme and seem like a phobia
Hiding foods in other foods sometimes works, eg vegetables puréed in sauces	Hiding foods in other foods can sometimes easily be detected and cause a child to become fearful of that food and others and therefore isn't recommended for extremely fussy eaters
Won't 'starve themselves' if you just offer usual family foods and ignore the tantrums	At risk of becoming ill from not eating or drinking if it is insisted that they just eat what is in front of them
Will sometimes respond to 'heavy handed' tactics like demanding they eat usual family foods but this is not recommended as increased anxiety at food times is counterproductive in the long run	Will sometimes respond to 'heavy handed' tactics like demanding they eat usual family foods but this is not recommended as it can trigger extreme anxiety and may cause a child to stop eating and drinking altogether for a period of time

1.3 When to get more help

Most children who are fussy eaters remain healthy and their eating improves as they get older. If their eating isn't affecting your child's health or growth there is often no need to see any specialist health professionals. If their eating is affecting their health or growth or is causing you or your family health problems from stress then you should seek help.

Some of the professionals you could seek help from first are your GP, health visitor, school nurse or practice nurse. These professionals should be able to check your child's growth and either reassure you or make a referral to specialist services.

The different specialists who may be able to help with fussy eating include:

- Paediatricians (children's doctors) – can help to rule out and treat any medical reasons that could underlie eating problems
- Speech and language therapists (if they specialise in eating problems) – can assess and treat children for physical and sensory swallowing and chewing difficulties as well as fussy eating
- Occupational therapists – can help with managing physical-and sensory-related eating problems (if they specialise in sensory integration problems).
- Clinical psychologists – can help with changing eating behaviours
- Dietitians – can assess your child's diet and advise on changing eating patterns and behaviours. They can recommend nutritional supplements where necessary.

Ask your GP to refer your child to one or more of the above specialists if you feel their eating problems need more investigation or you need more support.

2: Strategies to help you

2.1 First line help

Try looking at the five areas below to help your child to move on with their eating.

Look though and tick the strategies you currently have in place. Then work towards introducing the other measures for your child. Pick one or two to start with and persevere with the change until it is part of your usual routine, then pick one or two more.

A: Establish an eating routine

- Offer 3 small meals a day – breakfast, lunch and dinner, plus two or three snacks
- Try to eat at similar times each day to help your child regulate their appetite, eg breakfast at about 8am, a snack at about 10am, lunch at about 12 midday, and so on
- Keep mealtimes short but not rushed – roughly twenty to thirty minutes at the most
- Have a routine at the beginning and end of eating times that involves your child, eg. washing hands and laying out the cutlery and then helping clear up and washing hands at the end.

B: Limit drinks

- Drinks can fill up your child's small stomach – so don't offer them for about thirty minutes before a

meal or snack time. Try giving a drink towards the end of a meal or snack time instead

- Formula or breast milk is the main source of nutrition up till your child is a year old. After that it is important for your child to have three portions a day of dairy foods (a portion is 200ml full fat milk to drink, a 125ml yogurt or fromage frais, or a matchbox size piece of cheese). Try to see milk as a food to be had with meals rather than a drink throughout the day, as it may fill your child up, and reduce their appetite for other foods. Limit milk as a drink to a pint, 20oz or 600ml a day, or less
- Encourage your child to have all their drinks from a cup or beaker rather than from a bottle – you can offer drinks from a cup from as young as six months old.

C: Foster a healthy attitude towards eating

- Eat with your child to help them learn by copying you
- Give your child gentle encouragement to eat, but not too much, and never force feed
- Keep meal and snack times calm and relaxed
- Eat sitting down – at a table or in a comfortable area
- Avoid distractions such as television or toys – see mealtimes as a chance for your child to learn about and explore food – which means they need to pay attention to the food!
- Encourage your child to learn to eat to their appetite – try not to insist on them clearing their plate, and let them have second helpings if they are still hungry
- If your child refuses to eat, or lets you know they've finished, take it away without comment and then wait until the next planned meal or snack time to offer food again
- Offer a dessert such as fruit or yoghurt as the second course of a meal (or even before or as part of their main course) whether or not your child has eaten their main course – try to avoid using it as a reward or bribe for eating other foods

- Involve your children in lots of things involving food outside mealtimes – shopping, food preparation, laying the table and food play (see 2.6)
- Try to notice all the behaviours that you want at mealtimes, such as sitting still, trying something new, and encourage this behaviour through praise, star charts, outings and other non-food rewards. Ignore any behaviours you don't want them to repeat, such as throwing food, refusing foods or whinging.

Try not to encourage your child's fussy eating unwittingly by giving into their requests for favourite foods, letting them graze on snacks or drinks throughout the day, or giving them lots of attention (positive or negative) when they refuse to eat. This can encourage the very behaviour you are trying to move away from.

D: You decide what to offer

- Offer two courses at each main meal: a savoury main course and a sweet dessert
- Offer your usual family food if possible. It may be mashed, chopped or modified if necessary
- Serve up small, manageable portions so that your child is not overwhelmed

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- Young children often don't cope well with lots of options. If you want to let them choose, give them only two options: "Do you want spaghetti Bolognese and salad or pizza and salad?"
 - Young children usually enjoy eating more when they feed themselves. If they can't manage cutlery well, modify your family meals and snacks so they can feed themselves with finger foods. Finger food could be fruit dipped into yogurt, bread and hummus, raw vegetable sticks, roasted vegetable strips, strips of meat, fish and cheese, fish or lentil and rice cakes, home-made burgers or sandwiches
 - If your child isn't gaining weight well, make sure you are offering full-fat foods and snacks (milk, yoghurts, cheese, butter or margarine on bread), plus a pudding at each meal. If they are only eating small portions, you can add extra grated cheese, butter or cream to their food to maximise the calories they need to grow well
 - For some children, you can incorporate refused foods into other foods such as mashed vegetables in mashed potatoes, pureeing meat and vegetables into pasta sauces, pizza toppings and gravies, or adding vegetables and fruit into cake, muffin and

biscuit mixes. For others, this is best avoided as they easily detect these changes and reject the food as they feel it is 'contaminated'

- Vitamin A, C and D supplements are recommended for all children under the age of five, and vitamin D for all over 5. See 3.1 for more information on supplements.

E: Persevere

Many children go through phases of fussy eating. For the majority of children, these phases are short-lived and cause no harm to their health. Your job as a parent or carer is to do your best to ride out these phases. Often the less fuss you make about your child's eating, the quicker this phase will pass.

Many children are naturally nervous of new things and may need to taste a new food more than 10 or even 20 times before they start to like the taste, so keep offering those vegetables with gentle encouragement to first touch, then sniff, then lick and then taste them.

What will you work on first?

Which of the above haven't you tried? Which ones will you try?
When will you start and how will you start? Who will help you with it?

Try writing yourself a plan like the one below.

The first change I am going to make

When I am going to start making this change

**How I am going to make this change? (do you need to buy anything else?
Or prepare anything?)**

The people I will ask for help are (if anyone!)

**How long I will keep trying this for? (Aim for at least a month to see a
sustained change)**

2.2 Extra strategies for extremely fussy eaters

Parents of children who are extreme fussy eaters and especially those with other challenges that make them particularly rigid around change, such as autism spectrum disorder, often find that some of the first line help is not useful. Here are some modifications to the 5 areas covered in the section on first line help (2.1) that might help:

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A: Establish an eating routine

Most children prefer structured and predictable routines. This is even more important for extremely fussy eaters and children with autism spectrum disorder, autistic traits, Down's syndrome, and/or other learning disabilities. If a child is anxious about eating then having the reassurance of knowing when the next food time is, what they are going to be offered, and what will happen before and after the meal can work wonders for lowering their anxiety enough to help them explore new foods.

For all children and particularly those with any extra communication needs, verbal instructions and communication can be confusing. Adding visual cues and supports can really help a child to understand what you're telling them, especially when they are anxious. See 2.4 for an introduction to visual supports that can be used to help.

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B: Limit drinks

This is equally important in extremely fussy eaters. However if your child's main source of nutrition is what they drink, such as fortified milk, then try to work on widening their accepted range of other foods before reducing their intake of their favoured drink. Visual supports (2.4) might help with this.

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C: Foster a healthy attitude towards eating

You know your child best. If they are an anxious eater then aim to reduce their anxiety by adapting your child's eating environment to make them comfortable. Use whatever works for them. This could include:

- Using their favourite plate, cutlery and/or chair
- Adjusting the lighting
- Providing a quiet place to eat with no distractions. This may even be in a separate room from the rest of the family if necessary, but do ensure you

supervise your child eating for safety reasons. Removing children with sensory aversions or social communication problems from other people eating may help. Otherwise, they may be distracted by the smell of other food and the social pressure of mealtimes

- Playing relaxing music or their favourite video, reading a book to them or just talking calmly to them. You may allow them to bring their favourite toy to the table (please note this is the opposite to the advice usually given for common fussy eaters to avoid distractions. Importantly the aim here is to reduce anxiety rather than to distract them from eating).

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D: You decide what to offer

For extremely fussy eaters start off by offering their favoured foods without modification and working on the other aspects, such as developing a routine and looking at support. Aim first to reduce stress around mealtimes and make them pleasurable for your child.

Encourage your child to choose their food from two choices, but start with at least one that they will happily eat. For children with communication difficulties, visual supports such as a choice board with pictures of the food can be used.

Alternatively, you can serve up all family foods in the middle of the table so that your child can help themselves to the food they want. For this to work, start by always having food your child will accept and establish this as a usual routine before starting to modify what's offered.

You may decide not to try to get your child to change their eating preferences at mealtimes, particularly if you have tried this and it causes extreme anxiety. Instead, you might have a set time away from a mealtime that you try different food play (see 2.6) or strategies for trying new food (see 2.5). Then, when your child is comfortable with a new food you can start to introduce it into their meals.

To try to stop your child becoming too rigid around their food choices, you could start to make changes to their favourite foods very gradually by changing the shape or presentation very slightly each time. The idea is to encourage your child to become less rigid about their food choices while not making them anxious. Some examples are in the table overleaf. Visual and obvious changes may be tolerated better than surprise hidden ones. Try making the change with them to help them to understand that changes are okay.

Favourite food	Small changes
Toast/bread	Cutting a small corner off Cutting it in two Cutting into different shapes using biscuit cutters Buying a different brand that is very similar Toasting it a little bit more or less
Yoghurt	Serving it in a bowl rather than from the carton Adding a tiny bit of fruit purée or food colouring to it Buying different brands that are very similar Freezing it to make a lollipop
Cereal	Serving it from a plain container rather than the packet Crunching some of it up Buying a different brand that is very similar and adding a few pieces into your usual product
Chips	Under or overcook them a little Cut some into smaller bits Mash some Serve with different sauces on the side or a different plate Try sweet potato chips

E: Persevere

Most children with extreme fussy eating will improve their food range with time. It will take a lot of patience, so do persevere and ask for help when needed. Your child's school, pre-school or other key staff may be able to help too. While

a typical fussy eater might start to readily accept a new food after tasting it 10 to 20 times, it may take longer for a child who is particularly anxious around food.

2.3 Managing food demands

Some children express a need to eat constantly or constantly demand their favourite foods such as sugary fizzy drinks, sweets or crisps.

Remember that they are unlikely to be physically in need of food if they have eaten in the last couple of hours. If they refused their last meal or snack, giving in to their demands in-between scheduled eating times is not going to help to establish a routine in the long-term.

Giving in to demands for fatty or sugary foods between scheduled meal and snack times can also increase the risk of dental problems and excessive weight gain.

This can be a particular issue for some children with autism spectrum disorder, Down's syndrome and other learning disabilities, and can be exacerbated by some medicines that increase appetite. Having consistent rules can often really help, as the unpredictability of sometimes being allowed some foods and sometimes not, can be confusing and cause anxiety. Setting strict rules and limits and sticking to them can really help many children with this problem to relax and accept the foods aren't available. Involving the whole family in sticking to the same schedules and rules can also really help.

Try some of the following:

- Stick to set regular mealtimes and snack times and back this up with visual supports (see 2.4). Refer to these if your child demands foods at other times
- Keep undesirable favourite foods out of sight and out of reach (or out of the house)
- Don't let your child help themselves to food or drinks. Make sure they have to ask you for it first
- Some parents find it necessary to fit locks onto the kitchen cupboards and the fridge, or on the kitchen door, or to use burglar alarm sensors to alert them to their child trying to enter the kitchen at night (eg with discrete secure magnetic cupboard locks)
- Instead of allowing a favourite undesirable food at a meal or snack time, try encouraging your child to choose from two or three foods you would like them to eat, using a picture choice board.

2.4 Using visual supports

Supporting spoken instructions with visual supports can really help some children, especially those who have social communication difficulties such as autism spectrum disorder, Down's syndrome or learning disabilities.

Examples of visual supports:

- Timetables that show the sequence of daily routine such as line symbol pictures to show: get out of bed → breakfast → brush teeth → catch bus
- Schedules that break down activities into steps: line-drawing steps for hand washing put next to the bathroom sink or instructions for the steps for tasting a new food
- The Picture Exchange Communication System (PECS) uses cards with simple line drawing pictures of objects with its name written underneath. This is used in many special education settings and is a useful way of teaching children how to communicate around food – eg how to request an activity or food,
- Choice boards – a board with a number of picture symbols attached by Velcro for a child to choose a food or activity
- Social stories – stories written to specific guidelines devised by an education specialist to describe to a child how to react to an event or situation. Books of standard stories are available covering areas such as eating at the table, eating out, cleaning teeth and many aspects of daily routine. Trained special needs teachers, speech and language therapists, or other professionals may also be able to construct individual social stories for a child. The story may be read to the child on a daily basis for one to two weeks, with the child following the words and pictures.

For more information on visual supports:

- **National Autistic Society** (www.autism.org.uk)
- **Pyramid Education Consultants** (www.pecs.org.uk): training, consultation and support to parents, caregivers and professionals in the field of autism and developmental disabilities
- **Do to learn:** (www.do2learn.com): ready-to-print free picture cards and tips for creating schedules
- **Carol Gray Social Stories** (www.carolgraysocialstories.com): books of stories.

2.5 Introducing new food to extremely fussy eaters

It may take months of offering a new food before a child with extreme fussy eating will readily accept it, so be prepared to persevere.

You know your child best. Consider whether it is best to encourage trying new foods during mealtimes, snacktimes or at a separate time altogether (such as having a set food at play time each day). Keep times for trying new foods short, low stress and consider using visual supports alongside a timetable letting the child know when food play time is, along with having a reward chart with the picture of the food that you are working on.

Introduce only one new food at a time, setting small goals in stages to allow your child to move step by step. At first, you may encourage them to accept a small piece of a new food on their plate or on a small plate next to theirs. This could mean starting out with one pea for example, before moving onto two or three. Next, encourage your child to touch it, then sniff it, then lick it, then put it in their mouth but spit it out, etc. Expect the process to take days, weeks or even months.

- When choosing a new food to try, use findings from section 3 to decide what to start with. Start with foods that you think your child might find easiest, such as a slightly different type of bread, or a food that is similar in colour, texture and taste to your child's preferred foods
- Offer your child choice but not absolute control - ie say "Which of these two foods will you try this week?" instead of "Will you try a new food this week?"
- Try creating visual supports to encourage your child to try new foods:
 - A menu sheet stuck on the wall or fridge, saying in words or pictures which foods your child will have at each meal today. Each meal could include their preferred food plus a section to put a picture or to write "Today I'm going to try..."
 - A "My food" or "Eat it up" book – a scrapbook in which you or your child can stick pictures of, draw or write all the foods they like at the front and foods that you would like them to try at the back. Your child can help choose which ones to move forward to a "foods to try" section.

2.6 Food play

Playing with food can help children get over their fear of trying new foods. First, make sure your child is comfortable having the food in the same room as them; then try different activities to encourage them to interact with the food.

Some rules for food play sessions

- Keep sessions calm and relaxed, brief and fun
- Keep them separate from meal and snack times
- Play alongside your child rather than coaxing them to try things: “Look I’m squeezing the jelly” rather than “You squeeze the jelly”
- Remember food safety and hygiene. Wash any toys and hands well before and after a session.

Ideas for playing with dry foods

- Put some dry food in a tray with a rim and then encourage your child to pick up and squeeze the food, to post it through food shapes, to fill and empty containers, to find hidden toys in it and to make hand prints. Some foods you could use are breakfast cereal, sultanas, raisins, sugar, biscuits, rice, rice cakes, cheese cubes, cheese biscuits or vegetables
- Build towers to a counting song with cheese cubes, rice cakes or biscuits
- Encourage your child to post food pieces through different shape sorter holes. Try using cheese cubes, vegetable cubes, fruit cubes, biscuit pieces or crisps
- Make a food picture by sticking pieces of food onto paper using toothpaste, jam or honey. Try using pasta shapes, dry fruit, biscuits, rice cakes or vegetable slices
- Cut food into shapes with pastry cutters – try using different breads, cheese slices, or thin meat slices.

Ideas for playing with soft, wet foods

- Squeeze fruit into containers
- Stir wet food – custard, cake mix, Angel Delight™, porridge – with utensils, hands and fingers
- Paint and draw with food or make handprint pictures with ketchup, mayonnaise, jam or spread
- Post fruit and vegetables through shape sorters
- Set a toy in jelly and encourage your child to get it out
- Use smooth cheese, cake icing or marzipan as play dough.

Other food play ideas

- Potato printing
- Tea parties with your child's favourite toys and dolls
- Helping you cook and prepare foods - baking biscuits, cakes, muffins, bread, making sandwiches, peppermint creams, pitta bread pizzas, fruit salads, fruit smoothies.

2.7 Motivating your child to make changes

Children learn their eating behaviours from watching and copying the people around them. This means that consistently setting a good example is the first step to put in place. If you want your child to sit at the table, ensure that you and the rest of the family do the same – as many times a week as possible!

Some children – for example children with social communication difficulties such as autism spectrum disorder – need additional motivators to change their behaviours.

'Good' mealtime behaviour consists of lots of different behaviours: sitting still at a table; holding cutlery; not eating off others' plates; trying a piece of each food on

their plates; staying at the table until everyone's finished, etc. Focus on trying to change one thing at a time. For example, if your main aim is to get your child to try new foods, focus on one food at a time and ignore other behaviours such as 'poor table manners'.

To help your child to change their behaviour, you need to find something to motivate them. The two ways of doing this are through consistent rewards or consistent penalties. These motivators must be consistently applied for even the smallest steps towards the desirable change, such as touching a new food or even allowing it on or next to their plate.

Rewards are obviously preferable to penalties, and non-food related rewards are best. Simple rewards such as praise, clapping, ticks on a reward chart or stickers are effective for lots of children. Ideas for bigger rewards for consistent progress include giving the child their favourite comic, allowing them to watch a favourite TV programme or to stay up later. For some children, a small amount of their favourite food as a reward is ok, but only if there is nothing else that can be used as a motivator. This really should only be a last resort!

There are lots of different websites that can help with creating your own printable reward charts, and others that sell glossy professional charts:

- www.dltk-cards.com
- www.activityvillage.co.uk

Some children who don't seem to be motivated by rewards can sometimes respond well to 'penalties' such as withholding activities they particularly enjoy. If your child likes to watch their favourite cartoon while eating, turn it off for a timed period such as a minute (try using a digital kitchen timer to make this visual and clear).

Other creative ways parents have found to motivate their child with extreme fussy eating include:

- Counting mouthfuls eaten
- Giving food new names like "Tubby Custard" or "Yummy Soup"
- Cutting food into shapes such as dinosaurs using biscuit or pastry cutters
- Making up songs or stories while eating

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- Using story telling or reading a favourite book where characters are eating. e.g. The Very Hungry Caterpillar book
 - Using favourite characters – feeding one for Thomas, one for James, "...is eating a banana, let's take a picture of/ cut out a picture of ... for your scrapbook/ copy ... doing this." Or saying that "I think...will have just eaten a banana before going on the computer / watching TV".
 - If your child finds it hard to sit still for eating, set realistic goals such as sitting for five minutes, using a timer and praising them for good sitting. If your child sits still for other activities but not for eating, try removing their plate from them calmly if they try to leave the table, and praise them for returning to the table and sitting and eating well; don't chase your child around the room.

3: Evaluating your child's diet

3.1 Looking for patterns in your child's eating

Understanding your child's preferences for foods and eating environments can help you to choose the best times, places and ways to offer foods and determine which new foods your child might be most willing to try. Consider the points below.

What time of day and in what situations does your child eat best?

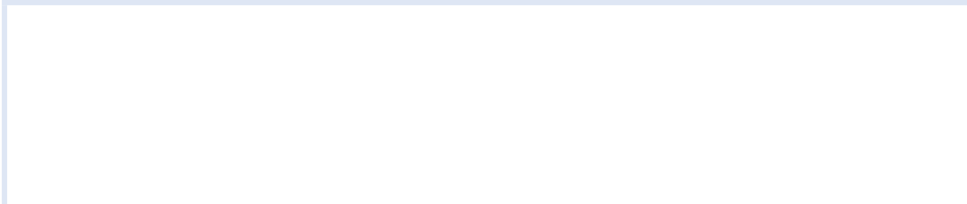
- Some children eat better at school or at other people's houses while some eat better at home
- Some children are really distracted by bright lighting, loud noises, other people eating or other people's food smells
- Some prefer to be distracted by music or videos while eating
- Some eat best with certain cutlery or with their hands.

Does your child prefer foods of certain colours, textures, smells, tastes or shapes?

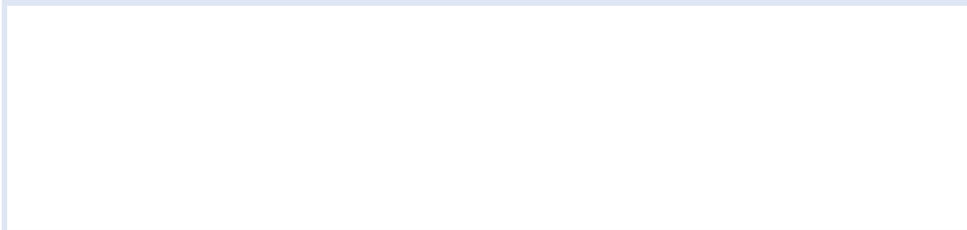
- Some children prefer bland food, whereas some others prefer foods with strong tastes
- Some prefer food in symmetrical shapes
- Some prefer foods of particular colours
- Some will only eat food from particular plates or cups
- Some hate bits and lumps
- Some hate sloppy foods
- Some love dry, crunchy food
- Some prefer sloppy foods with uniform textures
- Some will only choose foods of certain brands or with certain types of packaging.

Try writing down your child's preferences

Mealtime environment (seating arrangements, plates and cutlery, distractions, any routine preferred before meals)



Types of food (texture, taste, smell, appearance, arrangement of food on plate)



Notes:

Further information

If you need further information, please speak to your GP, hospital doctor or dietitian.

Nurition & Dietetics

University Hospital Lewisham

Lewisham High Street
London,
SE13 6LH
Tel: 020 8333 3314

Queen Elizabeth Hospital

Stadium Road
Woolwich
London,
SE18 4QH
Tel: 020 8836 5062

3.2 Comparing your child's diet to the government's healthy eating guidelines

Eatwell C

Use the Eatwell Guide to help you get a balance o
shows how much of what you eat overall should o

Check the label on
packaged foods

Each serving (150g) contains

Energy 1046kJ 250kcal	Fat 3.0g LOW	Saturates 1.3g LOW	Sugars 34g HIGH	Salt 0.9g MED
13%	4%	7%	38%	15%

of an adult's reference intake
Typical values (as sold) per 100g: 697kJ/ 167kcal

Choose foods lower
in fat, salt and sugars

The energy (kcal)
amounts on the
Eatwell Plate
are for adults,
please ask your
dietitian for your
child's nutritional
requirements.

Eat at least 5 portions of a variety of fruit and vegetables every day
Fruit and vegetables



Eat less often and
in small amounts

Beans, pulses, fish, eggs, meat and other protein
Eat more beans and pulses, 2 portions of soy
sourced fish per week, one of which is oily. Eat
red and processed meat

Use the table overleaf to evaluate your child’s diet against the government’s healthy eating guidance (the EatWell Plate below), and see if there are any big gaps. Aim for what is “good enough” if your child’s diet is far from the recommended ideal. If you have concerns speak to your GP or a dietitian.

Guide

of healthier and more sustainable food. It
come from each food group.



sustainably
eat less

Per day



2000kcal



2500kcal = ALL FOOD + ALL DRINKS

Food Group	What's included	How much is recommended?
Fruit and vegetables	All fruit and vegetables including fresh, frozen, canned, dried and juiced varieties.	<p>Eat plenty of fruit and vegetables. Aim for at least five portions of a variety of fruit and vegetables every day.</p> <p>A portion = 80g of fruit or veg (about a handful), 30g dried fruit (a small box), 150ml fruit juice or smoothie (a small glass). Portion sizes for fruit and vegetables for under 5s are smaller – about the size of a handful for them.</p>
Potatoes, bread, rice, pasta and other starchy carbohydrates	Bread, rice, potatoes, breakfast cereals, oats, pasta, noodles, maize, cornmeal, couscous, bulgur, polenta, millet, spelt, wheat, pearl barley, yams and plantains.	Eat some at each meal, ideally wholegrains.
Dairy and dairy alternatives	Milk, cheese, yoghurt, fromage frais, quark, cream cheese. This also includes non-dairy alternatives to these foods.	<p>Aim for three portions a day.</p> <p>A portion = 200ml milk, a matchbox size piece of hard cheese (30g) or a small (125g) pot of yogurt.</p> <p>Choose full-fat versions for under 5s, then switch to lower fat versions.</p>
Beans, pulses, fish, eggs, meat and other proteins	Meat and poultry (includes bacon, sausages and burgers), fish, shellfish, nuts, eggs, beans and pulses such as lentils, chickpeas, baked beans, vegetarian meat alternatives eg tofu, Quorn TM .	<p>Eat some every day.</p> <p>Include two portions of fish a week including one of oily fish (mackerel, sardines, trout, salmon, whitebait, fresh tuna).</p>
Oils and spreads	Vegetable oil, rapeseed oil, olive oil, sunflower oil and spreads.	<p>Eat in moderation.</p> <p>Choose unsaturated oil.</p>
Foods to eat less often and in small amounts	Cakes, biscuits, chocolate, sweets, puddings, pastries, ice cream, jam, honey, crisps, sauces, butter, cream, mayonnaise.	Eat sparingly (one - two times a week).
Fluids	Water, milk, tea, coffee, all drinks count and we also get fluids from foods.	<p>Approximately six - eight glasses per day. Younger children need relatively smaller drinks (e.g. 120–150 ml) and older children need larger drinks (e.g. 250–300 ml).</p> <p>Tea and coffee are not recommended for young children.</p>

	What's 'good enough'?	What does my child eat?
	A portion a day.	
	Eat some every day.	
	A portion a day.	
	Eat some twice a week.	
	Not essential.	
	Not essential.	
	Enough so that your child is not dehydrated. Colour of urine is a good indicator of hydration – a light straw colour is ideal. The darker yellow the more likely they are to be a bit dehydrated.	

Supplements

The government recommends that all children from six months to five years old should take a supplement containing vitamins A, C and D (eg Healthy Start vitamins – available to some parents for free – ask your health visitor). This is especially the case for children not eating a varied diet, such as fussy eaters. The government recommends that everyone over 5 should consider taking a daily vitamin D supplement, particularly between October and March.

You could also consider giving your child a standard multivitamin and mineral and also fish oil supplements if there are large gaps in their diet - just check on the label that it is suitable for your child's age and you are not doubling up on nutrients by taking multiple products. Your GP or dietitian may also advise a specific supplement such as calcium or iron or a prescribed comprehensive multivitamin and mineral supplement if your child's diet has big gaps in it.

For reliable guidance on healthy eating and supplements see the NHS Choices website at www.nhs.uk.

This information has been given to you by:

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Contact number:

Acknowledgement

Leaflet adapted by permission from Lewisham and Greenwich NHS Trust
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Please email: alternativeformats@sth.nhs.uk**

Sheffield Teaching Hospitals NHS Foundation Trust 2019.