Module 3: Understanding Sensory Processing in Mealtime, Feeding, and Oral Motor Skills



Carlee Leatherman

OCCUPATIONAL THERAPY STUDENT AT THE UNIVERSITY OF ALABAMA AT BIRMINGHAM



Introduction

Sensory Processing

Sensory Processing: The ability to register and organize sensory information from the environment and adapt our behaviors and responses accordingly

Sensory properties of food is always changing (during chewing and swallowing)

Food and meals are rooted in cultural identities, traditions, and societal norms

Trauma can disrupt a child's relationship with food, leading to:

- aversions
- anxieties
- and challenges associated with eating and mealtimes

Mealtime is a complex process that goes beyond putting food on the plate and eating it. It is the most sensory involved practice we engage in daily

Mealtimes involves sensory experience in many areas:

- positioning and how we perceive our body in space
- smelling
- tasting
- seeing food
- hearing it inside and outside of our mouth
- and interoceptive awareness of feeling hunger and fullness



Feeding vs Eating

Feeding: the setting up, arranging, and bringing food to the mouth through manipulating utensils, pouring, and scooping/cutting food

Eating: keeping and manipulating food or fluid in the mouth and swallowing it



Motor Skills Required

- **Gross Motor Skills**: allow us to sit, maintain posture, position ourselves at the table and feel comfortable/stable, and enable us to reach for utensils, pick up a spoon, or bring a cup to our lips
- Fine Motor Skills: involve the precise and controlled movements of our hands and fingers. These skills allow us to manipulate utensils, grasp small food items, and engage in activities like cutting or scooping
- **Oral Motor Skills**: involve the coordination of various muscles in our mouth including the tongue, jaw, lips, and cheeks and are important for chewing, swallowing, and managing food in the mouth safely and efficiently

Reasons for Feeding Impairments

Feeding challenges include any difficulty with feeding that prevents a person from accepting food, or receiving proper nutritional intake, as well as any difficulties with interacting with others at meals and disruptions to typical family routines. The environment in which the child lives can lead to or worsen feeding difficulties

Children may experience delays in feeding for many reasons

- overall weakness
- gross or fine motor delays
- cognitive delays
- visual impairments
- sensory processing difficulties
- behavioral refusal
- poor motivation to eat
- delayed oral motor skills

- underlying medical conditions such as impairments in structure or function of the GI, cardiorespiratory, and neurological systems such as cleft palate, reflux, or exposure to drugs in utero
- neurodevelopmental disorders such as autism, ADHD, cerebral palsy
- environmental factors such as unsupportive caregivers, lack of proper nutrition or late introduction of solid foods

Caregivers Role

As caregivers you are the primary providers of food for your children and play an important role in shaping a child's attitudes, behaviors, and relationship with food through...

- modeling eating behaviors
- regulating nutritional intake
- and establishing a nurturing mealtime routine and environment



Image from <u>Unsplash</u>

Children with histories of trauma often face additional hurdles such as having a disorganized attachment with primary caregiver which may impact eating and mealtime behaviors, a history of food insecurity which may develop into a fear of not having enough food, or history of abuse leading to fear and anxiety which can impact all areas of daily activities



The goal of this module is to help caregivers of children with histories of trauma understand how trauma can impact nutrition, sensory processing, and oral motor skills as well as gain understanding of strategies to support mealtime success

Nutritional information for children in care and general mealtime strategies

Sensory processing difficulties and strategies 3

Oral motor skills and strategies

Signs of Sensory and Oral Motor Difficulties

- Consistent Poor Eating
- Limited Food Variety
- Difficulty swallowing or ongoing choking, gagging (over 15 months of age), or coughing
- Taking excessively long to eat (over 30- 45 minutes)
- Fatigues with eating (e.g., requires breaks, eats
 very small portions)
- Difficulty transitioning to solid foods/prefers
 purees or liquids

- Difficulty eating in different environments or with different people (i.e. restaurants, school)
- Frequent mealtime tantrums or behavioral issues
- □ Failure to Thrive or weight loss
 - Food aversions or fear of foods
- Sensory sensitivities
 - Family/parent stress at mealtime



Nutritional Information

Nutritional Information

Children in foster care are at an increased risk of experiencing malnutrition, nutritional issues, and deficiencies such as:

• Iron deficiency

- iron-rich foods like beef, spinach, pumpkin and sesame seeds, beans, and fortified cereals
- Symptoms: anemia, fatigue, weakness, impaired difficulty thinking, and nightmares/night terrors

• Zinc deficiency

- meat, dairy, nuts
- *Symptoms*: impaired growth and immune functioning
- Protein deficiency
 - meat, dairy, eggs, and legumes
 - *Symptoms:* poor growth, muscle wasting, and weakened immune function

• Vitamin A deficiency

- eggs, milk, butter, pumpkin, broccoli, sweet potato, carrots, cantaloupe, or other dark green, orange or yellow fruits and vegetables
- Symptoms: vision difficulties, decreased immunity, and dry skin, hair, eyes

• Vitamin D deficiency

- egg yolk, milk, yogurt, cheese, and fish.
- Symptoms: poor growth and dental problems

Nutrition and Portion Sizes



Image from Unsplash

General Rules

- 1. Provide food and drink ever 2-3 hours
- 2. Avoid letting your child graze
- 3. For each meal provide:
 - a. One protein (eggs, nut butter, chicken, turkey, beef, yogurt, or cheese)
 - b. One starch (such as potatoes, bread, rice, pasta or cereal)
 - c. One fruit or vegetable
- Providing enough protein, fiber, and water throughout the day can help prevent overeating and can help your child feel full for longer

Resources for Nutritional

Information and Portion Control

1. <u>Dietary Guidelines for</u>

<u>Americans, 2020-2025</u>

- 2. Infant Nutrition and Feeding
- 3. <u>MyPlate Plan</u>

<u>Today</u>

roster the

4. <u>Start Simple With MyPlate</u>

Age	Fruit	Vegetables	Grains	Protein foods	Dairy/Calcium- rich foods	Oils Allowance
4- 8 yrs	1 1.5 cups	1.5 cups	5 oz. equivalents*	4 oz. equivalents**	2.5 cups	4 teaspoons
9-13 yrs girls	1.5 cups	2 cups	5 oz. equivalents*	5 oz. equivalents**	3 cups	5 teaspoons
9-13 yrs, boys	1.5 cups	2.5 cups	6 oz. equivalents*	5 oz. equivalents**	3 cups	5 teaspoons
14- 18 yrs, girls	1.5 cups	2.5 cups	6 oz. equivalents*	5 oz. equivalents**	3 cups	5 teaspoons
14- 18 yrs, boys	2 cups	3 cups	8 oz. equivalents*	6.5 oz. equivalents**	3 cups	6 teaspoons

High vs Low Nutrient Dense Foods

There are no "good" or "bad" foods. Just lower and higher nutrient dense foods

<u>Nutrient dense foods</u> are rich in vitamins, minerals and other nutrients important for health, without too much saturated fat, added sugars and sodium

Nutrient dense snack options:

- ★ Banana or apple and nut butter
- ★ Yogurt parfait
- \star Sliced cucumber, celery or carrots with hummus
- \star Turkey slices and bell pepper and cheese
- \star Grapes and cheese
- ★ Apple sauce, fruit cups, and canned fruit without added sugar
- \star Hard boiled eggs and almonds
- \star Air popped popcorn
- \star Celery and nut butter
- \star Whole grain chips or pretzels with cheese



Image from <u>Unsplash</u>

When to serve low nutrient dense snacks/foods:

- ★ Offer a serving of chips or fries at mealtime
- ★ Offer a serving of dessert with the rest of the meal and let them eat when the want(before, during, or after the meal) but don't offer seconds on dessert
- ★ Offer everyone dessert on the weekend regardless if they eat their meal or not
- \star Or save sweets for bedtime snack

General Mealtime Strategies



Foster the Future

- Sit down together for family meals
- Develop a consistent routine for mealtimes and limit meals to no more than 30 minutes



Create a routine for before, during, and after meals



Establish a pleasant and enjoyable environment around meals



- Get everyone involved
- Give choices



- Limit distractions
- Match food to child's skill levels

- \star Expose child to non-preferred food options daily
- ★ Avoid serving the same food more than once each day to prevent burnout



General Mealtime Strategies Cont.

The trauma of transitioning from different homes can reduce appetite, allow your foster child to eat favorite and familiar foods in the beginning and gradually add one new item per meal

Try adding foods that are familiar in taste, texture, and color to the foods they prefer

- If they like pancakes, try banana pancakes: Mash ripe bananas and mix them with eggs and a bit of flour to make pancakes that are naturally sweet and nutritious
- If they enjoy macaroni and cheese, try butternut squash mac 'n' cheese: Blend butternut squash into the cheese sauce for added nutrients and a slightly sweet flavor
- If they like a grilled cheese sandwiches, try quesadillas with melted cheese you can also introduce a small amount of mild veggies inside the quesadilla
- If they like sweet potatoes, next try introducing pumpkin, carrot, or squash



Image from Unsplash

Pair unfamiliar foods with familiar foods (broccoli and cheese)



Sensory Processing

Sensory Processing

Sensory Processing: the ability to register and organize sensory information from the environment and adapt our behaviors/responses accordingly

In children who have undergone traumatic experiences: 41.9% had differences in tactile sensitivity, 18.9% of may develop heightened sensitivities to taste and smell, 32.5% had differences in movement sensitivity, and 24.4 had differences in visual or auditory sensitivity.



Image from Learn Sensory Integration Basics

(Lynch, A., Ashcraft, R., & Tekell, L. (2021). Trauma, occupation, and participation: Foundations and population considerations in occupational therapy. AOTA Press.)

<u>Hypersensitivity</u> A child may experience strong, overpowering sensations from even mildly spicy or strongly flavored food, may gag when new textures are introduced, and may have higher levels of food refusal and eating a narrower range of food including fewer fruits and vegetables

<u>Hyposensitivity</u> Can lead to strong preference for more strongly flavored food (spicy, minty), disinterest in eating, decreased sensations of hunger and fullness, and decreased awareness of food in mouth

Be mindful of taste, smell, visual, auditory triggers from past experiences

Sector the Impaired Sensory Processing Signs (Hypersensitivities)

Auditory/Hearing

- Dislikes loud sounds
- Easily startled by noise
- Tends to chew to minimize exposure to loud noises
- Feels anxious in anticipation of loud noises (e.g., school bell, toilet flushing)
- Speaks loudly

Visual

- Dislikes bright lights
- Prefers dimly lit environments
- Easily distracted by visual stimuli

Taste/Smell

- Dislikes strong tastes
- Prefers bland tastes
- Prefers single textures of foods

- □ Tastes or smells objects/clothes
- Prefers consistent food temperature (very hot or cold)
- Strong reactions to new smells
- Prone to gagging

Touch

- Has strong preferences for either enjoying or disliking hugs
- Mouths objects/clothing
- □ Specific texture preferences for clothing
- Strong preference for or against messy play (may avoid touching food)

Movement

- Dislikes spinning and jumping; avoids activities that involve feet off the ground
- These kids can also be on the go and seeking lots of movement like jumping on and off things

Statute Impaired Sensory Processing Signs (Hyposensitivities)

Hearing

- Enjoys loud noises
- □ Fails to pick up expected cues

Vision

- Takes more visual information to react
- Likes bright environments

Taste/Smell

- Eats non-food items
- Enjoys hard, crunchy foods

- Craves strong tastes
- Under reacts to strong smells

Touch

- Takes firm touch to respond to stimulus
- Has difficulty responding to pain or

temperature

Movement

- Is always on the go
- Has difficulty sitting still
- These kids can be quite lethargic and need

more input to be aroused for play

Sensory Processing Strategies Future

For more ideas: Coping Skills Ideas and Watch Module 2: Interoception

*Remember if your child is in a state of dysregulation or is having a melt down it is too late to tell them to use a calming strategy

- Deep pressure such as wearing a weighted vest (no more than \star \star 10% of body weight +/- 1 pound)
- Asking for a bear hug \star
- Lie under a heavy blanket *
- Tucking legs and squeezing \star
- \star Deep breathing exercises (blowing bubbles; blowing paper; blowing pinwheels)
- \star Dim or turn off lights
- Listen to music *
- \star Dance

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Do animal walks (frog, snake, bear, crab, caterpillar, kangaroo, \star

Swing

- Sing the ABC's or count to 10 and back
- Squeezing/relaxing fidget toy \star
- * Walks after school with backpack on
- Press ups or chair press ups before school lunch \star after school
- * Help with heavy manual tasks like gardening and carrying shopping bags which can have a calming and organizing effect
- Swimming ★
- Sensory corner with activities that you know make your child feel calm and safe (Not a time out corner)

etc.)

Animal Walk Ideas



Frog

Squat down like a frog and leap as high as you can



Bear

Walk on your hands and feet, trying to use your left arm and leg at the same time, then your right arm and leg at the same time



Crab

Sit on the floor with your feet flat on the ground. Place your hands on the floor behind you and lift your bottom off the floor. Now try and move around!



Snake

Lie on your tummy with your arms at your sides and legs straight. Slither like a snake!



Donkey

Crouch with your hands and feet on the floor. Kick your legs back like a donkey. Be careful!



Elephant

Bend over with your arms long like a trunk and stomp your feet as you walk



Image from Animal Friends - Fitness365

Sensory Strategies

- Children under 6-10 years old engage live in a fantasy world. Typical reasoning isn't effective until your child is 10 years or older
- If your child doesn't like getting their hands messy, provide multiple opportunities to play with various textures (e.g., dry beans, rice, sand, water, grass, playdough, shaving cream)
- For children who get very distracted by certain sensory information, try reducing that sensation (offer noise cancelling headphones, dim the lights, clear clutter)
- If your child has high sensitivity to sensations try increasing that sensation (eg. a child with hyposensitivity may not feel bodily sensations from general movement like walking so provide various opportunities to intensify these movements like running, sliding, jumping, crawling, and doing animal walks)

Children learn best through play

Be creative and make it FUN especially when working on overcoming sensory sensitivities



Image from Unsplash

Mealtime Sensory Processing Strategies

- Engage child in vestibular and proprioceptive activities prior to mealtime
 - Jumping
 - Running
 - Swinging
 - Rocking in a chair
 - Pushing or pulling a heavy object
 - Bouncing on a ball
- Alter the environment
- Make small changes overtime
- Frequently offer new kinds of foods
- Create appropriate place to discard food



Image from <u>Unsplash</u>

Strategies for Hypersensitivity

These strategies should focus on gradual exposure and repetitive experiences to

develop tolerance and skills

- Don't overreact when child gags on food
- Add one new food or texture each time alongside a preferred and familiar food
- Change the format of their preferred food so that they can explore new textures and shapes while still enjoying the same flavors
- Any sensory based strategy should be fun and playful. Allow child to play with their food





Image from <u>Unsplash</u>

Strategies for Hypersensitivity cont.

Touch

- Create a "sensory painting" activity using various food substances like sauces, whipped cream, pudding, yogurt, or squirt cheese. Allow the child to use their fingers to paint and explore these textures.
- Use condiments like ketchup, mustard, or yogurt as body or face paint, making it a playful and interactive experience.

Vision

- Arrange a sensory exploration activity by creating an underwater scene using blue gelatin. This can be visually stimulating and engaging for the child, providing a themed approach to sensory exploration.
- Set up a sorting activity where the child groups foods of the same color into bowls, this is great for their visual perception and color recognition skills.

Sound

- Use pretzel rods as makeshift drumsticks to create different sounds and rhythms, allowing the child to explore auditory sensations while also engaging in a playful activity.
- Craft shakers using beans, dry cereal, or crackers, letting the child experiment with the sounds they produce through shaking and moving these items.

Smell

- Encourage the child to participate in a guessing game by sniffing different foods with their eyes closed and trying to identify them based on their scent. This game can make smelling foods an enjoyable experience.
- Create scent jars with strong smells such as lemon, vanilla, vinegar, or coffee beans. Experiment with how far away the child can be from the jars and still detect the scents.

Taste

- Extend the finger painting activity to include tasting, allowing the child to explore different food flavors by licking their fingers.
- Organize a taste test with known and unknown foods, letting the child choose at least half of the items. Involve parents, siblings, or other family members in the taste test, making it a social and interactive experience

Pretend Play

Integrate food items into pretend play scenarios, such as using a banana as a telephone, feeding a doll with spoonfuls of pretend food, or filling a toy dump truck with cereal or beans. This fosters imagination and creativity while incorporating the sensory aspect of touch and interaction.

Strategies for Hyposensitivity

Children with hyposensitivity often have decreased sensitivity or diminished responses to sensory input

Strategies should aim to help the child achieve optimal arousal to prepare the child for the meal

Arousal strategies

- Have the child wash their face and engage in a series of facial movements and stretches
- Use deep pressure in the mouth
- Try a series of gross motor activities like pushing and pulling heavy objects, jumping, running, or bouncing on a ball
- Before eating, first engage in exploring the food, talking about its smell, texture, color, and what it sounds when it's stirred or bitten

Strategies to prevent overstuffing

- Have them eat in front of a mirror
- Alternate bites of different foods to change the texture and taste
- Provide small portions on their plate and offer more servings as needed
- Use a drink to help clear the mouth
- Pacing activities: different utensils or visual mealtime timers apps (FIST-food ingestion timer, slow eats, 20 minute eating, eating slower, 80 bites, or time your bites)

Strategies for Hyposensitivity cont.

Specific food items can have a calming or alerting effect on behavior

Chewy: can help organize and calm the sensory system

- cheese, cereal bars, dried fruit or chewing gum **Crunchy:** can help alert the mouth and increase the child's arousal levels improving attention and focus to different sensations
 - raw vegetables, apples, bread sticks, dry cereal, and popcorn

Cold: can help alert the mouth and bring awareness to how the mouth feels

• Icecream, popsicles, frozen grapes

Explore different spices and sauces that increase flavors of foods (ketchup, marinara sauce, salt, onion, garlic, etc.)

Strategies that do not involve actively eating Sucking

- Using a long curly straw or bundles of straws
- Using straw to drink yogurt, fruit puree, smoothies (easy to grade consistency)

Blowing

- Blowing bubbles using a straw in cup or bowl
- Blowing bubbles
- Using straw or mouth blow pom poms, feathers, paper, or cotton balls across table in a race

Tugging/Pulling

Chewy toys designed to improve jaw strength

Use descriptive language when your child is exploring new foods such as describing the colors, sounds, and textures



Oral Motor Skills

Oral Motor Skills

Early childhood traumatic experiences such as neglect, abuse, malnutrition, or lack of appropriate developmental stimulation can impact oral motor skill development



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Image from Unsplash

Oral motor challenges can include difficulty with strength, coordination, control, or endurance of the lips, tongue, cheeks, or jaw muscles

This can impair skills needed to

- effectively bite and break through foods
- manipulate food from side to side in your mouth
- chew and swallow effectively
- and/or maintain liquid in the mouth

Can be caused by:

- early weaning
- inappropriate nipple for bottle feeding which can lead to improper suck

• or limited or lack of introduction to solid food Children who have limited oral sensory experiences often have oral hypersensitivity and a strong gag reflex Foster the

Signs of Impaired Oral Motor Skills

Difficulty with Feeding and Eating

- ★ Difficulty coordinating movements for sucking, swallowing, or chewing, leading to messy eating or prolonged mealtimes
- ★ Gagging, choking, or coughing frequently during meals.
- ★ Overstuffing the mouth, drooling, and gagging, pocketing

Fatigue When Eating

- \star Difficulty or tiring easily from chewing
- ★ Some children may graze, or eating small amounts of foods throughout the day due to fatigue from chewing during meals
- \star Preferences for purees food and liquids

Limited Oral Movements

- ★ Limited range of motion of the tongue, lips, and jaw, affecting the ability to make various oral movements required for speech and eating
- ★ Open mouth posture, drooling, limited tongue movements/protruding tongue

Oral Sensitivity

- ★ Hypersensitivity or hyposensitivity in the mouth, leading to aversion or heightened sensitivity to certain textures, temperatures, or tastes
- ★ Overstuffing mouth due to impaired awareness of food in mouth
- ★ Avoidance of chewy foods or hard foods such as meats, fresh fruits, and vegetable

Refusal to Eat or Tantrums

★ Refusing food or excessive crying or tantrums during mealtimers

Weak Jaw Muscles and Lack of Lip Closure

- ★ Weakness in the muscles of the jaw, resulting in difficulty biting, chewing, or maintaining a closed mouth at rest
- ★ Food falling out of mouth while eating
- ★ Difficulty in achieving and maintaining lip closure during activities like drinking from a straw, blowing, or pursing the lips

Difficulty with Non-Speech Oral Activities

★ Challenges in activities like blowing bubbles, whistling, or licking, which require precise coordination and control of oral muscles

Oral Motor Strategies

For children who have restrictive food choices and weak oral motor skills start with preferred food choices that your child can easily chew without getting fatigued Practice <u>Oral Motor Activities</u> at snack time and between meals to prevent fatigue during meals



Chewy Tube and Exercises

Chewy Tubes Instructional Video

<u>Chewy Tubes</u>

Examples of oral motor activities:

Lip Exercises

- 1. Make a smile and then say "ooo" "eeee"
- 2. Lip pop: roll your lips over your teeth and seal your mouth closed then push your lips out fast to make them "pop". Start with 3-5 of these if challenging and then work up to 15-20

Cheek Exercises

- 1. Make silly faces in a mirror or take turns making a silly face and copying another person
- 2. Blow up a balloon
- 3. Blow a bubble with gum
- 4. Using a straw or your mouth: blow paper, a marble, or cotton balls across a table or through a maze

Tongue Exercises

- 1. Lick yogurt from sides of lips
- 2. Hold tongue to the roof of your mouth for 5 seconds

Jaw exercises

- Chew something very chewy or crunchy (i.e carrot, apple, raw vegetable, jerky, dried fruit, or taffy). Chew 3 times on the right, then 3 times on the left. Repeat until finished
- 2. Pick a chewy food and chew it as long as you can before it disappears and count how many bites you could take

Utensils and Positioning



Positioning

Make sure your child is seated properly in an upright position in their chair with their hips, knees, and ankles in 90 degrees <u>Seating Strategies</u>

Utensils can impact feeding skills

- Suction bowls and plates make it easier for your child to feed himself by holding dinnerware in place and preventing spills and messes
 - <u>Suction plates</u>
- A spoon with a shallow bowl
- Spoons with shorter, curved, or larger grip handles
- Spoons with ridges or chilled spoons

For more adapted utensils/equipment: Top 10 Adaptive Eating Utensils For Kids (Infant

to Teen). Amazon has a variety



Foster the Future Overstuffing

Children may over stuff food into their mouth to compensate for weak oral motor skills which can lead to spitting food out, gagging, and/or vomiting

Weakness in the mouth can also lead to increased drooling and dropping food out of the mouth

Strategies

- \star Choose appropriate foods for a child's oral motor skills
- \star Cut foods into small, soft cubes or long sticks
- ★ Present foods on a cocktail fork
- \star Use food choppers to help "pre-chew" foods
- ★ Practice <u>Oral Motor Activities</u>
- ★ If overstuffing due to hyposensitivity try increasing sensory input from the food such as providing very crunchy foods or adding spices, sauces, chilling the food to make it cold
- ★ Weakness in the mouth can also lead to increased drooling and dropping food out of the mouth



Image from Unsplash

Coughing and Prolonged Mealtimes

Frequent and consistent coughing on food and liquids puts your child at risk for aspiration which is when food, liquids, saliva, or vomit is breathed into the airways

It's important to have your child evaluated with a clinical feeding assessment if you are noticing these signs:

- Consistent or frequent coughing, gagging (over 15 months of age) or vomiting during eating and drinking
- Wet breath sounds
- Wet voice quality
- Coughing when drinking from an open cup

Choking is silent, if your child is unable to cough, breathe, cry, or speak and their skin is turning pale or blue-tinted call 911.

If you are struggling with prolonged mealtimes (over 30-45 minutes) try to offer the more challenging foods, such as crunchy and chewy foods at the beginning of the meal or at snack time to prevent fatigue



Next Module: Mealtime Behaviors and Strategies



Nutrition

- 1. <u>Resources for All Ages | Johns Hopkins Medicine</u>
- 2. <u>GO SLOW WHOA FOOD LISTS</u>
- 3. <u>Kids Food Critic Activity</u>
- 4. <u>Phrases that HELP and HINDER</u>
- 5. <u>Discover MyPlate: Look and Cook Recipes | Food</u> and Nutrition Service
- 6. <u>Discover MyPlate: Parent Handouts | Food and</u> <u>Nutrition Service</u>
- 7. Recipes (free) SOS Approach to Feeding
- 8. Infant Nutrition and Feeding
- 9. Dietary Guidelines for Americans, 2020-2025
- 10. <u>Toddler Serving Sizes [Visuals Included!] Mom to</u> <u>Mom Nutrition</u>
- 11. <u>12.5 Nutrition in the Toddler Years</u>.
- 12. <u>Academy of Nutrition and Dietetics</u>

Developmental Milestones and Tip Sheets:

- 1. <u>Teaching Your Child About Food</u>
- 2. <u>Helping Your Child Eat Healthy Foods</u> and Be Ready to Learn
- 3. <u>Helping Your Child Make Healthy Food</u> <u>Choices</u>
- 4. <u>Developmental Milestones SOS</u> <u>Approach to Feeding</u>

Positioning

1. <u>STRATEGIES TO ADDRESS</u> <u>POSITIONING CHALLENGES</u>



Feeding Myths

1. <u>Top 10 Myths - SOS Approach to</u> <u>Feeding</u>

Sensory

- 1. Making Sense of Sensory Behaviour
- 2. <u>Body Awareness Sensory Box | NHS</u> <u>GGC</u>
- 3. <u>Hearing Sensory Box | NHS GGC</u>
- 4. <u>ARK Therapeutic</u>
- 5. Tools for Calming & Organizing

Oral Motor

- 1. <u>Oral Motor Exercises The OT</u> <u>Toolbox</u>
- 2. <u>Oral Motor Activities</u>

Chewy Tubes

- 1. <u>Chewy Tubes</u>
- 2. <u>Chewy Tubes Instructional Video</u>

Fun plates/ Placemats/ Utensils to Encourage Mealtime Participation

- 1. <u>Constructive Eating</u>
- 2. <u>FOOD FACE Genuine Fred</u>
- 3. <u>Pick-Ease</u>
- 4. <u>Buy FunBites</u>
- 5. <u>Top 10 Adaptive Eating Utensils For</u> <u>Kids (Infant to Teen)</u>

Suction Plates/Bowls

6. <u>ezpz's products</u>

Protective Clothing

1. <u>Protective Clothing for Feeding</u> Information Sheet | NHS GGC



Food Assistance Programs

- 1. **WIC** Women, Infants and Children (WIC) is a supplemental nutrition program for pregnant women, breastfeeding women, women who had a baby within the last six months, infants, and children under the age of five. One must meet income requirements and have a nutritional risk that proper nutrition could help to improve.
 - a. WIC Program | Alabama Department of Public Health (ADPH)
- 2. **SNAP** the Food Assistance Program's purpose is to end hunger and improve nutrition by providing monthly benefits to eligible low income households to help them buy the food they need for good health.
 - a. <u>Alabama Food Assistance</u>
- 3. National School Lunch and National School Breakfast Programs- The National School Breakfast and Lunch Programs make nutritionally balanced, low-cost or free meals available to school children each school day
 - a. National School Breakfast and Lunch Program for Alabama | Benefits.gov
- 4. **Summer Food Service Program (SFSP)** The Summer Food Service Program (SFSP) is a federally funded, State-administered program that reimburses providers who serve free, nutritious meals and snacks to children and teens in low-income areas when school is not in session.
 - a. FNS-101: Summer Food Service Program
 - b. <u>Child Nutrition Programs</u>
- 5. Food Pantries and Soup Kitchens
 - a. <u>Agency Finder Tool</u>
 - b. Find Food Food Bank of North Alabama

Thanks

Please scan the QR code or return to the main module page to access the link to answer a few short questions. Please take a moment to complete the survey and share your insights. Your feedback will play a significant role in enhancing this education program. Thank you for your active participation!



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Sources

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