

“What do you mean, he won't eat?”

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Parents with children who have significant food refusals or an inability to eat a wide range of foods hear responses like this a great deal. Many people have never heard of children with serious food aversions, extreme selective eating, or of those who are dependent on tube feedings to get their nutritional needs met.

Many children, particularly toddlers, are picky eaters. It is expected that children go through what would be considered “food jags” or times when they will only eat a number of foods and then suddenly reject that specific food and move on to another favorite. Some children will completely refuse to eat at a meal and most toddlers and young children avoid vegetables. Many of these behaviors are developmentally normal, as long as the child “makes up” for his/her nutritional needs during other meals and snacks throughout the week, is willing to eat a number of staple foods from most of the food groups, and is growing at a healthy rate.

What is a “feeding disorder?”

There are a number of reasons why children may have difficulty developing the skills, motivation, and ability to eat the range of foods they need to become independent feeders. Many reasons are medical, such as having serious gastrointestinal reflux that causes pain to be associated with eating, stomach capacity or mobility problems, extreme allergies, or a metabolic disorder that interferes with the body's ability to use nutrients. Some children have developmental delays that interfere with them being able to manage the oral motor skills associated with eating. Other children may have diagnoses such as a pervasive developmental disorder or sensory processing difficulties that result in them being more hesitant to try new foods and restricted in the type, texture, and amount of food they are willing to eat.

Other children may have had a traumatic event associated with eating. Early childhood feeding and eating becomes disordered when children are not able to acquire the typical developmental tasks associated with independent eating that allow them to eat a wide range of foods that their body needs. Feeding can also be considered disordered when mealtime and the efforts required to insure that a child eats is significantly stressful for the family and takes a tremendous amount of time and energy.



Identifying the barriers to the acquisition of independent feeding is complex and requires the assessment of an interdisciplinary team to evaluate the behavioral/relational/developmental, functional/oral motor/sensory, and nutritional contributors related to feeding and design a treatment plan that targets the primary barrier to healthy eating. The Children's Health Council provides this type of team approach to the evaluation and treatment of pediatric feeding disorders with the goal of helping children eat and grow optimally and giving families support and guidance throughout the process.