



TOOLBOX FOR PARENTS

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Myth or reality: My child's food selectivity is due to his sensory specificities

Parents often consult seeking to address their child's food selectivity, convinced that their child's sensory needs are the sole cause for their child accepting only a limited number of foods. This belief is not accurate, and here is why.

What is food selectivity?

There is presently no consensus in the literature for a definition of food selectivity. However, we consider in our practice that a child displays selectivity if one or more of the following criteria applies to them: the child (1) eats less than 15 different foods, (2) refuses one or several food groups, (3) will have a tantrum when new foods are presented, and (4) requests for certain foods to always be presented the same way, often during most meals.¹ These difficulties significantly interfere with daily routines and impact the child (e.g. weight issues, anemia), the parents (e.g., stress during meal times) and the parent-child relationship.

It is important to note that transitional food selectivity is also observed in typically developing children between the ages of 2 and 4. Studies have shown that food difficulties are present in 25% of typically developing children, and up to 89% of autistic children.²

Sensory specificities may contribute to food difficulties in your child, but other factors must also be considered.

The link between sensory specificities and food selectivity

Many factors can influence whether a child accepts or refuses certain foods, and sensory specificities are indeed one of them. For example, a child may demonstrate preference or aversion to certain foods depending on their texture, smell or even their temperature. Your child's chewing abilities, and how able they are to move food between their teeth may also influence which food textures they accept. Your child can also develop preferences in food presentation (shapes, separated on the plate, asks for specific cutlery) and may refuse to eat dishes that do not conform to these criteria. Furthermore, certain medical conditions (e.g. constipation, acid reflux) may also impact your child's willingness to eat. We must also consider what we call environmental factors, such as the climate around mealtimes, food preferences in the family, or a lack of meal routine. Therefore, several reasons may explain why your child refuses certain foods. It is important to carefully analyze them in order to properly intervene.

The solution? Expose, expose and expose again

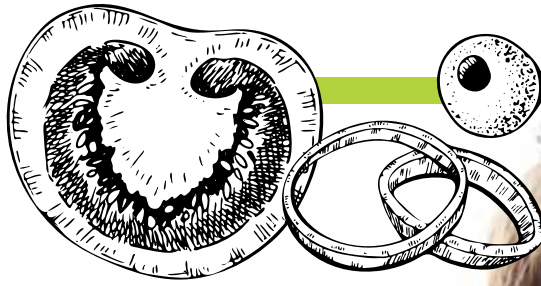
Indeed, it is recommended that you frequently present your child new foods, even if they refuse them the first,



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¹ Ernsperger, L., and Stegen-Hanson, T., (2004). *Just take a bite: easy, effective answers to food aversions and eating challenges!* Arlington: Future horizons.

² Marshall, J., Ware, R., Ziviani, J., and al. (2014). Efficacy of interventions to improve feeding difficulties in children with autism spectrum disorders: a systematic review and meta-analysis. *Child: care, health and development.* 41 (2), 278-302.



A child must be exposed to a certain food many times and in the same way (at least 20 times) before concluding that they do not like this food.

Main references

Cermak, S. A., Curtin, C., et Bandini, L. G. (2010). Food selectivity and sensory sensitivity in children with autism spectrum disorders. *J am diet assoc*, 110 (2), 238-246.
 Gagnier, N. et Gehami, M. (2015). J'aime pas ça! J'en veux encore!: astuces et solutions pour des comportements alimentaires sains. Montréal: Les Éditions la Presse.
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second or umpteenth time. It is important however, to ensure that the texture of the foods you present is adapted to your child's oral motor skills. A more thorough assessment will provide specific recommendations depending on your child's profile.

Supplementary toolkit

- A child must be exposed to a certain food many times and in the same way (at least 20 times) before concluding that they do not like this food. Your child may go through several stages before accepting the

food. For example, your child may accept to touch the food, will imitate you and bring the food to touch their mouth, etc.

- Meal and snack schedules are also important. If your child snacks before meal times, he will not be hungry.
- When you present a new or lesser preferred food to your child, it is important to present it alongside a preferred food.

If your child's eating is cause for concern, do not hesitate to speak to your doctor or a healthcare professional. ❄️



Sylvie Lauzon
 Chief Executive Officer

Dear Readers,

The Fondation les petits trésors is extremely pleased with our partnership with Sur Le Spectre magazine, brought to you twice yearly by the Montreal Cognitive Neuroscience and Autism Research Group. Having just reached our 6th issue, we extend our congratulations to all!

This magazine is a real gem for its ability to summarize autism research and raise awareness on key issues. May I remind you that all content is prepared on a volunteer basis by students, and revised by members of the research group. Valerie Courschesne, our editor and herself a researcher, has carried this project from its inception. This is no minor feat given the extraordinarily high demands of a research career.

This magazine speaks directly to parents, and indeed to anyone who interacts with autistic children, teenagers and adults on a day-to-day basis. The Montreal Cognitive Neuroscience and Autism Research Group would like us to consider and understand all aspects of autism. We as a society have the duty to adapt to autistic intelligence in order to benefit from their exceptional abilities.

Striving to better understand others is an important step towards building a more inclusive society which channels the strengths of all individuals, even if they may at first seem atypical.

Thank you to the entire team of Sur le Spectre, and to many more issues!