CHANGING THE SENSORY ENVIRONMENT

The sensory environment plays a major role at mealtime. Sensory input is part of every meal. It includes the room in which we feed a child, the reactions of others who share the room, and the sensations of taste, texture, and temperature in the feeding utensils and the food. The following ideas or tips can help you make useful changes in the sensory environment.

Changes in the Overall Sensory Environment

- Find ways to reduce the noise level in the dining room. Noise makes a pleasant meal more difficult for everyone. What changes could you make to reduce the noise level? In a family mealtime setting, younger children can increase the noise level by crying or demanding attention from the feeder. In a group mealtime setting at school or in a residential facility, the noise level can be increased by other students who are experiencing sensory problems. Sometimes the noise level is increased by feeders communicating with each other.
- If you are feeding a child in a group setting, find ways to reduce the number of children who are being fed at one time. When there are more people in the room, there is usually more noise and visual distraction. Remember, this makes it harder for children who have sensory problems.
- Is there a small room that could be used as a quiet dining room for children who are very distractible or who have problems with sensory overload?
- Provide containers at the table with herbs and spices. Salt, pepper, cinnamon, oregano, or catsup can add to the taste pleasure of meals that must be prepared for large groups in a school or residential environment. Many children dislike food or are indifferent to meals because of poor taste abilities. When herbs and spices are added to the meal, taste sensations are improved and the meal becomes more pleasurable. The presence of these condiments offers choices for communication that are meaningful.
- Music that has a regular rhythm and a slow tempo (speed) often calms children who have trouble with sensory information when it is used in the background. Other music that is soft and calming can be used. Music can help create an environment where people are more relaxed and happy. This can reduce stress and noise for everyone in the room.
- Prepare the child for the meal. Check for soiled diapers or pants. Change these so that the smells in the room will be more pleasant. Do you have the bib, towels, spoon, cup, or other feeding utensils you will

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need? Do you have any pillows or other equipment adaptations that you use to help position the child for feeding? Do you have the equipment you want to use for your own physical comfort during feeding? If you have this ahead of time, both you and the child will be more relaxed, and the meal won't seem so rushed. Rushing is an inner sensory perception that makes the meal more difficult for everyone.

Relationship Between Physical Positioning and Sensory Information

- When the muscle tone and movement in a child's body is more normal, there is usually less of a problem with sensory information. The child may be less distractible, or less over stimulated with excitement or anticipation of the meal.
- Hyper-reaction to the touch of the spoon in the mouth often causes a child to bite down and have trouble letting go. There will be less biting if the head is in the middle and if it is not pushing back. When the head is too far forward, or too far back, this bite reflex is usually stronger.

Changes In the Personal Use of Sensation

- Observe the child's reaction to your voice. Discover whether a softer voice or less talking improves the response to the meal. Is the child's attention improved if you use a different tone of voice?
- Use a touch that is very firm, but also very gentle. Light, stroking touch is often very overstimulating and may create problems for the child. A firm touch can also be gentle and carry a message of calmness and support. This loving touch is needed by most children, but particularly those who are "touchy" about sensations in the world.
- If the child tends to become very excited or overreacts when you pick up the spoon or cup, give some warning for the change. You can say, "I'm going to get the spoon now; your body will be quiet and ready."
- If the child is blind or has a visual problem, develop a feeding routine that can be relied upon. For example, the following sequence might be used:

The child is seated and encouraged to touch the food or utensils (if this is possible). Then the feeder touches the lips or face to indicate that the food is on the way. A cue such as squeezing the hand, or saying "here's another bite", could be given before each spoonful. As the meal continues, a regular rhythm of food presentation may provide the necessary cues. If the routine is followed at each meal, the child can anticipate the arrival of the food and is not startled when it reaches the mouth.

• Keep tastes separate as much as possible so that the child learns the taste and smell of different foods. When foods are mixed together, this valuable learning is lost. Children with sensory difficulties often prefer to eat one food at a time. They will eat all of the mashed potatoes and then eat the peas. They may have more difficulty if these two foods are alternated.

Changes In the Food and Equipment Used for Feeding

- Use a spoon that is coated with rubber or vinyl if the child tends to bite on the spoon or has problems with taste or temperature. The coating protects the teeth and reduces the intensity of taste and temperature sensations.
- Use a cup that allows you to see how much liquid you are tipping or pouring into the child's mouth. This gives you more control, and it will be easier for both you and the child. When you pour too much in the mouth, it overstimulates the child. Sometimes the child will become more tense and have more difficulty swallowing because of fear of choking on the liquid.
- Use fruit, mashed potatoes, dehydrated cereal, fruit or vegetable flakes, gelatin, arrow root powder, or a commercial thickener to thicken liquid if the child has trouble drinking. When the liquid is thicker (milkshake consistency), you have better control of a small amount. The liquid doesn't move as quickly so the child has better control. Thin liquid (like milk and juice) often splashes into the airway if the child has swallowing problems.

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