

WHY EVALUATE AND TREAT MILD FEEDING DELAYS AND LIMITATIONS

Children with mild sensorimotor problems may show delays or difficulties with feeding that do not limit their ability to eat in clearly observable ways. Thus, if a child is able to chew, eats a wide variety of foods, and does not choke on food, many parents and professionals think that there are no feeding problems. This is not always true. Why might we still evaluate feeding skills and include feeding goals in an educational or therapy program? In order to answer these questions, it is helpful to look at the connection between feeding and other areas of development.

- **Feeding movements are closely related to the oral movements that children use in early speech development.** Many believe that feeding movements provide the actual patterns which children learn and refine for speech sounds.

- **Feeding skills require a high level of sensory organization and integration.** When children have difficulties with sensory processing skills, feeding may become impaired in very subtle ways. This may be expressed in dislike of certain food textures or tastes and a reluctance to try new foods.

- **Feeding skills are used in social situations.** A child who drools during meals or in the classroom is often shunned by classmates or adults. Children who are messy eaters call attention to their disability in restaurants and in social situations with typically developing children. Thus, even a mild feeding problem can have consequences in daily social situations.

Children with sensorimotor difficulties tend to fall into two major categories of oral sensorimotor problems that will be identified during feeding.

- **Sensorimotor Control.** Some children have delays in feeding development (i.e. retained suckle, unstabilized up-down jaw movement exclusively during drinking, lack of cleaning the lips with the teeth or tongue), or deviant/limiting patterns during feeding (i.e. low tone in the cheeks which prevents active asymmetrical pull-in of the cheek on the side of the food, lip retraction, lack of central groove in the tongue). These children have difficulty controlling the movements used for feeding.

- **Sensorimotor Planning.** Other children have appropriate feeding movements but cannot make the same movements at a volitional level (i.e. the child is observed to use the tongue to clean pudding from the corner of the mouth but cannot lateralize the tongue in imitation). These children have difficulty with motor planning or apraxia.

Suzanne Evans Morris, Ph.D.
Speech-Language Pathologist
New Visions
1124 Roberts Mountain Road
Faber, Virginia 22938
(804) 361-2285, sem@new-vis.com

It is important to constantly ask ourselves why we are interested in feeding evaluation and intervention with these mildly involved children. When we ask that question, two further questions with answers emerge.

- Could the movement and coordination patterns observed in the mouth during feeding help us understand the movement and coordination patterns observed in the mouth during speech?
- Do the sensorimotor patterns observed with food reflect in any way the more general sensorimotor organization used by the child?

Both of these questions influence treatment decisions. For example, if we see low tone in the cheeks and/or in the tongue and the child has a “sloppy” /s/ sound, it lets us know that work to improve cheek and tongue function in feeding would assist getting better phonological production of these fricative sounds. Or, if we see a child who has many picky dislikes of food texture or taste, or stuffs and gulps everything, we may see this same type of sensory processing in the child’s whole learning style. Thus, work on the underlying sensory issues and focus of attention and slowing of feeding patterns may very well become a way of working on an underlying basic skill which will also generalize into the child’s ability to use language and learn more efficiently.

Work to improve feeding skills can be incorporated into both the individual therapy session and in the classroom. Feeding skills are sensorimotor skills, and like other sensorimotor skills such as sitting, and walking, and hopping, children may require special therapy assistance to learn a new or unfamiliar movement. Often new patterns of chewing or swallowing will be taught initially by a therapist or teacher with special skill or training in the learning of feeding skills.

As new skills develop, children need lots of opportunity to practice the new patterns. The classroom provides many opportunities for continued learning and change. Snack time occurs in every classroom. Often it is considered a time to physically refresh the children with food or an opportunity to work on language and social skills. When food is carefully selected, snack time can provide major opportunities to develop sensorimotor skills for feeding.

Food can be selected to meet specific goals for individual children and to provide opportunities for all children in the group to increase their experience with different kinds of food. Several types of food and utensils provide excellent opportunities for children with sensorimotor difficulties:

- **Foods with multiple textures.** Foods which consist of more than one texture are very challenging to children. Some foods have two or more textures which can be visibly observed; others tend to produce extra juice or saliva when they are chewed. The child must swallow the liquid and extra saliva produced by the food while continuing to chew the more solid parts. Often children with mild difficulties in oral-motor skill will drool or loose liquid when they eat combination foods. Foods which could be given at snack time include: unpeeled apple wedges ; orange wedges; raisins; jello with fruit chunks, non-mushy dry cereal such as Cheerios or small shredded wheat squares with milk; salad with pieces of different raw vegetables.

- **Foods which require extended chewing.** Foods which require extended chewing are often resisted by children with mild feeding problems. At home they are often given softer meats or no meats or raw vegetables at all because they refuse them. Foods which could be given at snack time to increase chewing skill include: raw carrots, raw celery, beef jerky, strips of rare roast beef, steak, or other firm meat. Although candy and other sweet foods should be discouraged as a regular snack, liquorice twists and sugar-free bubble gum are wonderful for encouraging extended chewing, and chewing without drooling.

- **Foods which can be served in many sensory variations.** Foods which can be served in many different taste and texture combinations lend themselves beautifully to work on sensory discrimination and language. They also provide ways of making smaller, more gradual changes for children who are resistant to eating new foods. Foods which could be given at snack time to focus on sensory changes in taste and texture include: crackers + peanut butter; crackers + Swiss cheese; crackers + cheddar cheese; crackers + cream cheese; crackers + cream cheese + jelly. Or one could take a theme of “cheese” and vary the type of cracker used (i.e. Ritz cracker, soda cracker, rice cake, rye krisp).

- **Foods which encourage playful exploration.** Exploration with food is a common activity with young children in the 18-36 month age range. Children enjoy hiding pieces of food in different parts of the mouth, feeling the mouth stuffed with food, playing with differing amounts of food in the mouth etc. Foods which encourage exploration include: raisins, cereal pieces such as Cheerios and Grape Nuts. Chewing sugar-free bubble gum also develops playful exploration.

Copyright © New Visions
This paper is a working draft and multiple copies may not be reproduced without prior written permission of the author.