

# Emerge



## A Child's Place

June 7, 2007

Occupational Therapy  
Speech Therapy

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Serving children from birth  
to 14 years old

### Using therapy to improve conditions such as:

Delayed Speech  
Dyspraxia  
Speech Impairments  
Non-communicative Speech  
Oral/Verbal Apraxia  
Language Disorders  
Feeding Difficulties  
Autism/Asperger's/PDD  
Developmental Delay  
Cerebral Palsy  
Sensory Integration  
Disorders  
Sensory Modulation  
Disorders  
Handwriting Impairments  
Fine & Gross Motor Delays

A Private, Independent  
Provider

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Bonnie Hacker, OT  
Founder / Director

## When to get help for Picky Eaters

In surveys, parents identified their children as picky eaters 17% to 50% of the time.<sup>1-3</sup> Picky eating habits concern parents so much that parents present an estimated 10% to 25% of preschool children to physicians with complaints about dietary intake.<sup>3</sup> Some medical authors have described being a picky eater as a normal stage of development, but such a statement actually over-generalizes preschoolers. While some studies have shown that picky eaters get enough calories but eat less vegetables<sup>1</sup>, others have connected picky eating with decreased caloric intake<sup>4</sup>, delayed growth<sup>5</sup>, upper respiratory tract infections<sup>6</sup>, and susceptibility to chronic illness<sup>7</sup>. Some research suggests that picky eating is a consistent pattern evident even in infancy<sup>4</sup> and that some picky eaters do not improve with maturity.<sup>8</sup>

Picky eating has a prevalence of up to 80% among developmentally delayed children, but developmentally normal children are often picky eaters as well.<sup>7</sup> Picky eating can stem from a number of possible causes including sensory integration disorder, motor skill deficits, neophobia, digestive disorders, nutritional deficiencies, and drug side effects. Regardless of the original cause for picky eating, children learn behavioral patterns around the picky eating practices. Even when medical/organic causes have been addressed, unlearning unproductive behavioral patterns is recommended.<sup>7</sup> Most parents receive coaching on how to work with their picky eaters. Strategies include introducing new foods 12 to 15 times before giving up, not bribing, and being good parental role models for healthy eating. More help is available when it comes to teaching picky eaters better nutritional habits. The speech and occupational therapists at Emerge - A Child's Place can help picky eaters with their willingness to consume a healthy diet. Below are some indications that speech and occupational therapy from Emerge would be beneficial:



- Parents have tried suggested strategies and have still not achieved desired nutritional status.
- The child will only eat "soft" or pureed foods even after two years of age. This is a sign of sensory integration difficulties and hypersensitivity to certain textures.
- Sometimes gags with textured foods
- The child has difficulty with sucking, chewing, or swallowing. This sign may have been evident even in infancy. Passing a medical swallow study does not guarantee that a child can chew and swallow consistently and has the stamina to consume an entire meal. Difficulties with sucking, chewing, or swallowing suggest motor skills challenges. Lack of muscular development around the jaw is another sign. In these cases, children may have choked or had trouble eating and now have an aversion to eating or even a fear of food.
- May only eat hot or cold foods
- Complains vigorously about the taste of toothpaste and mouthwash
- Will only eat bland foods
- Shows strong preference for very spicy, sweet, sour, or salty foods. This suggests a different kind of sensory integration difficulty. Another sign is acting as if all foods taste the same.
- The child refuses to eat at other people's houses, doesn't like eating in new restaurants, or resists foods simply because they are new. These signs suggest neophobia.
- Slow growth: Between the ages of two and five years, most children gain between 2 lb 3 oz and 4 lb 6 oz per year.
- Conflict over eating results in stress between a parent and child.



Bonnie Hacker, OT brings nearly three decades of experience in pediatric therapy.

At Emerge, each child receives an individual, expert evaluation from a pediatric speech and/or occupational therapist. This enables Emerge to develop a plan of action that addresses each child's individual challenges correctly. Sessions may be individual or in carefully enrolled groups. Programs for children are fun, and children perceive them as play. Programs also include education for parents. The end result is a child with increased food acceptance, increased variety in diet, and improved nutrient intake.

**Please tell parents about Emerge - A Child's Place**  
**Believing in a Child's Potential to Flourish**

## References

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