



# Mealtimes Matter: The development of a pilot program for families of children with complex sensory-based feeding problems

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## Background and Objective:

The prevalence of feeding difficulties among typically developing children is 26.9%<sup>(1)</sup>, and is more common in children with developmental issues<sup>(2-7)</sup>. Feeding difficulties are often classified as 'mild or high selectivity'. Children with highly selective eating behaviours have a very limited food range of between 10-15 acceptable foods, and often their food preferences have a sensory basis, related to texture, smell or appearance<sup>(8-12)</sup>.

Parents of children with mealtime difficulties report feeling frustrated, angry, anxious, confused and defeated. These feelings adversely affect their relationship with their child, partner and other family members<sup>(13, 14)</sup>.

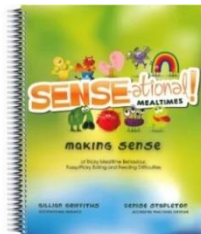
Currently, the Australian Capital Territory Child Development Service (CDS) offers speech and occupational therapy assessments, referrals and linkages for children aged 6 years and younger. No dietetic services are provided through the CDS. Children requiring dietetic support are referred to Canberra Health Services (CHS) without the benefit of an interdisciplinary approach, thereby limiting the effectiveness of the nutrition support since these feeding difficulties frequently result from complex sensory processing issues. Our objective is to determine an evidenced-based interprofessional approach to assisting families living with complex sensory-based feeding problems.

## Methods:

A series of meetings were held between dietitians from acute and community care at CHS. These meetings informed the development of a gap analysis and project brief outlining options for evidenced-based programs. The *Mealtimes Matter* approach was chosen due to its focus on capacity building and empowering parents to become their child's 'therapist' within a supportive group setting. The companion handbook (*Senseational Mealtimes*)<sup>(15)</sup> was provided to participating families. Parents have found it to be a useful and helpful guide to understanding their child's feeding difficulties<sup>(16)</sup>.

A collaborative interprofessional partnership was formed between the Women, Youth & Children's Community Nutrition team and the CDS occupational therapists to pilot the program.

This project was funded through an Allied Health Research Support Grant and the Canberra Hospital Foundation. Implementation of the *Mealtimes Matter* program is currently underway, with two workshops completed to date.



## Practice Implications:

Preliminary evaluation suggests that the *Mealtimes Matter* program is beneficial and well received, with 100% of parents reporting the workshops as helpful, practical (95%) and 90% said that the workshops helped to increase their empathy towards their child.

1 Benjasuwantep B et al. *Pediatr Rep* 2013;5:38-42.  
 2 Sullivan PB et al. *Developmental 3 Williams PG et al. *Pediatric Nursing* 2000;26.  
 4 Reilly S et al. *Journal of Pediatrics* 1996;129:877-82.  
 5 Martins Y et al. *J Autism Dev Disord* 2009;39:1878-87.  
 6 Cermak SA, Curtin C, Bandini LG *J Am Diet Assoc* 2010;238-46.  
 7 Sharp WG et al. *J Autism Dev Disord* 2013;43:2159-73.  
 8 Kerzner B et al. *Pediatrics* 2015;135:344-53.  
 9 Coulthard et al. *J Appetite* 2009;52:410-5.  
 10 Farrow CV et al. *Appetite* 2012;58:842-6.  
 11 Nekitsing C et al. *Curr Obes Rep* 2018;7:60-67.  
 12 Coulthard H et al. *Appetite* 2016;97:155-9.  
 13 Stapleton D et al. *Journal of Community Nursing* 2012;29-32.  
 14 Goh D et al. *Asia Pacific Family Medicine* 2012;11.  
 15 Griffiths G, Stapleton D 2016  
 16 Stapleton D et al. *International Journal of Health Promotion and Education* 2013;3:323-38.*