Family Style Dining: Supporting Children of All Abilities During Mealtime

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Learning Objectives

- Understand the benefits of Family Style Dining
- Review what Family Style Dining looks like in the classroom
- Look at feeding through a sensory lens
- Review the Steps to Eating
- How language can support mealtime experiences
- Supporting children with special healthcare needs during mealtimes
- How to determine if it’s Picky Eating or Problem Feeding
What is Family Style Dining?

Family-style dining is an opportunity in your classroom to support healthy relationships with food, teach independent self-help skills, promote social inclusion, and engage in meaningful conversations.

We want to encourage happy and healthy relationships with food!
Role of the Child and Teacher

**Child’s Role**
- Setting the table
- Serving themselves food/pouring milk
- Passing food to peers
- Eating or engaging with food
- Conversations
- Cleaning up

**Teacher’s Role**
- Sits and eats with the children
- Supports children
- Modeling
- Facilitate conversations
- Creating a positive atmosphere

Adapted from *Family Style Meals: 101*
Mealtime Supplies - General
Mealtime Supplies - Adaptive
Engage with foods using ALL our senses
Practice, repetition
Learn to eat a variety of foods
Sensory Experiences
Barriers

- Cultural/Family Preferences
- Clean-up
- Child Preference
Steps to Eating

1. Tolerates
   1. Being in the same room
   2. Being at the table with food on the other side of the table
   3. Being at the table with food half way across the table
   4. Being at the table with food approximately in front of the child
   5. Looks at food when directly in front of child

2. Interacts with
   1. Helps with making or set up of food
   2. Uses utensils or a container to stir or pour food or drink
   3. Uses utensils or container to serve self

3. Smells
   1. Odor in room
   2. Odor at table
   3. Odor directly in front of child
   4. Learns down or picks up to smell

4. Touches
   1. With finger tips or pads
   2. Whole hand
   3. Chest, shoulder
   4. Top of head
   5. Chin, cheek
   6. Nose
   7. Lips
   8. Teeth
   9. Tip of tongue, full tongue

5. Eats
   1. Licks lips, tongue licks food
   2. Bites off piece and spits out
   3. Bites pieces, holds in mouth for a few seconds and spits out
   4. Bites, chews a few times and spits out
   5. Chews and partially swallows
   6. Chews, swallows with drink
   7. Chews and swallows independently

Figure 1. Seattle Children’s. Link
Mix It Up At Mealtime

Different textures can support sensory needs and chewing abilities.

Adding flavor can be alerting to the mouth and help with management of the food (chewing and swallowing).
Video Activity

Watch the video

Think about where the child is on "Steps to Eating"

What else do you notice?
### Phrases that **HELP** and **HINDER**

As the caregiver, you play the biggest role in your child’s eating behavior.
What you say has an impact on developing healthy eating habits.
Negative phrases can easily be changed into positive, helpful ones!

<table>
<thead>
<tr>
<th>Phrases that <strong>HINDER</strong></th>
<th>Phrases that <strong>HELP</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>INSTEAD OF ...</strong></td>
<td><strong>TRY ...</strong></td>
</tr>
<tr>
<td>Eat that for me.</td>
<td>This is kiwi fruit; it’s sweet like a strawberry.</td>
</tr>
<tr>
<td>If you do not eat one more bite, I will be mad.</td>
<td>These radishes are very crunchy!</td>
</tr>
<tr>
<td>Phrases like these teach your child to eat for your approval and love. This can lead</td>
<td>Phrases like these help to point out the sensory qualities of food. They encourage</td>
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<tr>
<td>your child to have unhealthy behaviors, attitudes, and beliefs about food and about</td>
<td>your child to try new foods.</td>
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<tr>
<td>themselves.</td>
<td></td>
</tr>
<tr>
<td><strong>INSTEAD OF ...</strong></td>
<td><strong>TRY ...</strong></td>
</tr>
<tr>
<td>You’re such a big girl; you finished all your peas.</td>
<td>Is your stomach telling you that you’re full?</td>
</tr>
<tr>
<td>Jenny, look at your sister. She ate all of her bananas.</td>
<td>Is your stomach still making its hungry growling noise?</td>
</tr>
<tr>
<td>You have to take one more bite before you leave the table.</td>
<td>Has your tummy had enough?</td>
</tr>
<tr>
<td>Phrases like these teach your child to ignore fullness. It is better for kids to stop</td>
<td>Phrases like these help your child to recognize when he or she is full. This can</td>
</tr>
<tr>
<td>eating when full or satisfied than when all of the food has been eaten.</td>
<td>prevent overeating.</td>
</tr>
<tr>
<td><strong>INSTEAD OF ...</strong></td>
<td><strong>TRY ...</strong></td>
</tr>
<tr>
<td>See, that didn’t taste so bad, did it?</td>
<td>Do you like that?</td>
</tr>
<tr>
<td>This implies to your child that he or she was wrong to refuse the food. This can lead</td>
<td>Which one is your favorite?</td>
</tr>
<tr>
<td>to unhealthy attitudes about food or self.</td>
<td>Everybody likes different foods, don’t they?</td>
</tr>
<tr>
<td>Phrases like these make your child feel like he or she is making the choices.</td>
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</tr>
<tr>
<td>It also shifts the focus toward the taste of food rather than who was right.</td>
<td></td>
</tr>
<tr>
<td><strong>INSTEAD OF ...</strong></td>
<td><strong>TRY ...</strong></td>
</tr>
<tr>
<td>No dessert until you eat your vegetables.</td>
<td>We can try these vegetables again another time. Next time would you like to try</td>
</tr>
<tr>
<td>Stop crying and I will give you a cookie.</td>
<td>them raw instead of cooked?</td>
</tr>
<tr>
<td>Offering some foods, like dessert, in reward for finishing others, like vegetables,</td>
<td>I am sorry you are sad. Come here and let me give you a big hug.</td>
</tr>
<tr>
<td>makes some foods seem better than others. Getting a food treat when upset teaches your</td>
<td>Reward your child with attention and kind words. Comfort him or her with hugs and</td>
</tr>
<tr>
<td>child to eat to feel better. This can lead to overeating.</td>
<td>talks. Show love by spending time and having fun together.</td>
</tr>
</tbody>
</table>

Adapted from “What You Say Really Matters?” in *Feeding Young Children in Group Settings*, Dr. Janice Fletcher and Dr. Laurel Brenner, University of Idaho.
Language Strategies

- Baby signs (more, all done)
- Gestures (reaching, pointing)
- Offering choices of food
- Providing visuals for food choices or for conversation topics.
- Modify your language to allow everyone to be a part of the conversation.
Mealtimes with Children with Health Care Plans

- Allergy Plans
  - Food substitutions - medical plan required
  - Placemats
  - Colored cup
  - Table placement
- G-tube feedings
  - During mealtimes
  - Exploration of food as sensory play
- Individual Care Plans
Getting Started: Waddlers!

- It won’t look perfect at this age!
- First steps:
  - High chairs -> chairs
  - Transitions
  - Teachers Role
  - Make small changes
  - Hand over hand support to get started with self-serving, open cups
  - Practice motor skills during free play or sensory play (tongs, scooping)
Group Activity - Common Challenge

- Work with a small group at your table.
- Each table is getting assigned a Common Mealtime Challenge.
- As a group, brainstorm and think about each problem. Try to come up with some potential solutions to try.
- You’ll have 5 minutes.
- Share with the group.
Common Challenge: Only Eating One Easy Food

- Example: canned peaches
- Encourage explorations of other foods without pressure of having to eat it
  - Positive reinforcement for exploring other foods via smell, touch
- Mix it up with new presentations (real peaches)
- Talk about servings
- Check-in on your language
  - Be aware if highlighting the food positively or negatively (“you were only eating the peaches today”)
- Peer modeling
  - Notice/talk about a peer who is enjoying the food
Common Challenge: Playing with or Dumping Food

- Is it age-appropriate?
  - Babies don’t have motor coordination, can use suction cups/plates
- Proactive, positive reinforcement of appropriate behavior
- More engaging conversation
- Is mealtime interactive enough?
  - Make the food interesting: ants on a log, trail mix
- Guide to go scrape plate
  - “It looks like you’re all done”
- Involve child in clean-up
Common Challenge: Getting Up

» Why am I at the table?
  » To learn about food
  » To talk with my friends about non-food things

» Extend time casually
  » Ask engaging questions about non-food things

» Include kid-friendly activities
  » Scooping and pouring independently
  » Helper jobs increase involvement
  » Set out placemats, bring in cart, take wrap off bowls, put in serving utensils
<table>
<thead>
<tr>
<th>PICKY EATERS</th>
<th>PROBLEM FEEDERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>decreased range or variety of foods; will eat at least 30 different foods</td>
<td>restricted range or variety of foods, usually less than 20 different foods</td>
</tr>
<tr>
<td>foods lost due to “burn out” because of a food jag are usually re-gained after a 2 week break</td>
<td>foods lost due to food jags are NOT re-acquired after taking a break, often resulting in a decreasing number of foods in a child’s repertoire</td>
</tr>
<tr>
<td>able to tolerate new foods on plate; usually can touch or taste a new food (even if reluctantly)</td>
<td>cries and “falls apart” when presented with new foods; complete refusal</td>
</tr>
<tr>
<td>eats at least one food from most food texture or nutrition groups (e.g. purees, meltables, proteins, fruits)</td>
<td>refuses entire categories of food texture or nutrition groups (e.g. hard mechanical, meats, vegetables, soft cubes)</td>
</tr>
<tr>
<td>frequently eats a different set of foods at a meal than the rest of the family (typically eats with the family)</td>
<td>almost always eats different foods at a meal than the rest of the family (often doesn’t eat with the family)</td>
</tr>
<tr>
<td>will add new foods to repertoire in 20-25 steps on Steps to Eating Hierarchy</td>
<td>adds new foods in more than 25 steps on the Steps to Eating Hierarchy</td>
</tr>
<tr>
<td>sometimes reported by parent as a “picky eater” at well-child check-ups</td>
<td>persistently reported by parent as a “picky eater” across multiple well-child check-ups</td>
</tr>
</tbody>
</table>

Figure 3. Pick Eating Versus Problem Feeding. [Link](#)
If it is problem feeding, what do you do next?

- Talk to parents about concerns and what you are experiencing with the child at mealtime.
- Refer to pediatrician and/or a feeding therapist.
- 0-3 years, Within Reach
- 3-5 years
  - Private therapy
  - Seattle Children’s resources
  - Pediatrician/primary care provider
What's happening now in your classroom?

**What's happening at mealtime now?**

**Inclusive family style dining**

- Children involved in mealtime
- Mealtime supplies
- Accommodations for the individual child's needs
- Adjusting level of support to help them serve themselves, pour drink, set table and scrape plate.
- Consideration of texture, flavor and presentation of food
- Sensory experiences with food
- Language around mealtime
- Considerations for allergies and medical needs
- Using mealtime as an opportunity for learning
- Sit with children and eat what they eat!
Serving Sizes at Mealtime

**Meal size:**
8 up to 12 months

- Bread, rice, potatoes, pasta and other starchy foods—offer a serving at each meal and at some snacks.
- Milk, cheese, yogurt—serve about 3 times each day
- Meat, fish, eggs, nuts and beans—serve 2–3 times per day (twice for young children eating meat and fish and 3 times a day for vegetarians).
- Foods high in fat and sugar—include once a day.
- Drinks—offer toddlers a drink with each meal and snack.

**Healthy Portion Serving Tips:**
- A cup of your child’s favorite foods rather than just serving more.
- Put less amount on your plate and add water.

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**Meal size:**
1 up to 3 years

- Develop consistent guidelines regarding serving sizes within meals.
- For example, each child gets to take a maximum of two scoops of each food per meal, then pass it to a friend.
- Offer each food at least twice, but it is okay if a child does not take a food at that meal.

**Healthy Portion Serving Tips:**
- Less total meal; juice is a plus to your meal from 1 cup per day.

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https://www.infantandtoddlerforum.org/media/upload/pdf-downloads/1_3___Portion_Sizes_for_Children_1-4_Years.pdf
https://medicine.yale.edu/boostchildcare/healthresources/PortionSizePictures_000212_281_37726_v1.pdf

Images 8-10. Link. Adapted from Link.
Feeding Skills Progression

ACCEPTANCE AND REJECTION

Before birth
Some infants will inherit a strong dislike of bitter tastes and cannot handle certain foods; some will be more nurturant than others and reject more foods when older. All infants are born with a sweet taste preference.

Birth
Preference for strong tastes such as garlic and spicy flavors is learned from exposure to amniotic fluid. Preference for energy dense sweet and fat foods continues through childhood.

4-6 months
Introduction of complementary foods. Taste preferences rapidly learned and infant competence at new foods is better to introduce a wide range of tastes in this period.

Birth-6 months
Some strong tastes preferred from the taste of milk-fed.

14 months
Rejection of food begins.

20 months-8 years
Neophobia response.

2 years
Preference new foods and foods from the mouth.

6-11 months
Begins to use some support and their hands.

9-18 months
Says first words, content words, might say words for known foods.

12 months
Recognition food by sight, smell and taste. Communicates using words to ask for favorite foods that they might want.

2 months
Solid objects.

4 months
Holds, stretches, and shows visual exploration of objects.

6 months
More grasp of fingers and hands. Use without support.

9 months
More grasp of fingers and hands. Use without support.

12 months and beyond
Visually groups foods into categories.

These boxes demonstrate the typical progression of skills in mealtime and feeding related areas.

If a child is plateuising at any skills OR has skipped skills, it is recommended that they be seen by a feeding therapist for assessment.

https://www.infantandtoddlerforum.org/media/upload/pdf-downloads/3.5_Developmental_Stages_in_Infant_and_Toddler_Feeding_NEW.pdf

1. Infant and Toddler Forum. Link
Questions?


Figure 1. Seattle Children's, Steps to Eating. Retrieved from https://www.seattlechildrens.org/pdf/PE2038.pdf

Figure 2. CACFP. Phrases that Help and HINDER. Retrieved from https://www.cacfp.org/files/9715/3140/6019/PhrasesThatHelpAndHinder.pdf


Figure 4. Infant and Toddler Forum, Developmental Stages in Infant and Toddler Feeding. Retrieved from https://www.infantandtoddlerforum.org/media/upload/pdf-downloads/3.5_Developmental_Stages_in_Infant_and_Toddler_Feeding_NEW.pdf