

Understanding the Problem

The first step for making recommendations for change involves an assessment of all the issues. We have provided an example of a Feeding Behaviour Assessment (opposite), which you might find helpful to fill in to help you identify the key issues for your child.

Though this assessment might seem very detailed, it is helpful to review all these factors to see not only where things are going wrong, but also where things are going right. You might find that this assessment gives you an idea of where the difficulties are occurring and so where to focus your efforts.

Area for Assessment	Definition	Response
<p><i>Height/weight/growth pattern</i></p>	<p>Is your child following their predicted rate of growth? (You need to check this with your health visitor or medical team.)</p> <p>What are your and the healthcare team's expectations about what your child should weigh? Are there any differences between what you would like your child to weigh and what the healthcare team think?</p>	
<p><i>Feeding behaviour</i></p>	<p>What does your child do when presented with food?</p> <p>Are feeding skills age appropriate? e.g., by four years old most children can feed themselves, cope with most textures and participate in a family meal.</p> <p>Are textures and range of foods age-appropriate? e.g., is your child sticking to just one or two food types?</p> <p>Are they able to eat textures appropriate to their stage of development?</p> <p>Does your child sit still to finish a meal?</p> <p>Is your child hiding food or throwing it on the floor?</p> <p>Is the length of time taken to eat within reasonable limits? Most children eat as much as they are able to in about twenty minutes.</p>	

Area for Assessment	Definition	Response
<i>Medical complications</i>	Are there any medical reasons why eating and digestion may be difficult?	
<i>Feeding history</i>	<p>What has been your child's experience of feeding since birth?</p> <p>Has your child been weaned? Can they manage lumps and chew appropriately?</p> <p>Has your child had any unpleasant experiences associated with food; e.g., vomiting?</p>	
<i>Parental management techniques</i>	<p>How effective are you at ensuring your child sits to eat their food?</p> <p>What are the 'rules' around mealtimes?</p> <p>Do you feel comfortably in control at your child's mealtime?</p> <p>How are you at managing your child's behaviour generally?</p>	
<i>Medical team requirement</i>	<p>What are the prescribed calorie requirements?</p> <p>Do you think these are realistic and achievable?</p> <p>Do you feel pressurised or supported by the team around feeding your child?</p>	

	<p><i>Accuracy of child's calorie intake</i></p>	<p>Parents often underestimate the calorie intake of their child. How accurate are you being in measuring what your child has eaten? Are you assuming they have not eaten a lot of calories because they haven't finished everything you gave them? Be prepared to make a more accurate assessment of what your child has eaten.</p> <p>Are mealtime observations possible so the medical team/dieticians can see?</p>	
<p><i>Family relationships</i></p>	<p>Is there support or tension in any of your family relationships regarding feeding or the medical diagnosis?</p>		
<p><i>Demographic variables/lifestyle</i></p>	<p>Is your family home set up to make mealtimes clear? Do you announce mealtimes? Does everyone join in? Do you stop what you are doing to have a meal or does everyone snack whenever they are hungry? Is there a defined place to eat? Are you able to buy the sort of food that the medical team recommends?</p>		