

## Food and Your Neurodivergent Child

### Information for Parents



Supported by



Department  
for Education



# Disclaimer

This resource provides information that is believed to be accurate and has been fact-checked in good faith. However, health-related information is constantly evolving, so it is essential to stay informed and review the latest guidance.

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## Section 1:

### Eating and Neurodivergence

The numbers of children who are believed to have eating difficulties have risen in the past few years. This number includes neurodivergent children - those who are autistic, those with ADHD and those with anxiety, depression and other differences - as well as those who are neurotypical (NHS).

The percentage of neurodivergent children who have eating difficulties, however, is much higher in total than the percentage of neurotypical children with similar eating challenges.

A range of different percentages have been suggested, but it is believed that around 80% of neurodivergent children may find eating problematic.

**80% of  
neurodivergent  
children are  
believed to have  
eating difficulties**



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## Section 2:

### Difficulties With Eating

Having difficulties with eating does not necessarily mean a child has an eating disorder, although some eating disorders are more common in neurodivergent people. It is best to seek medical advice if you notice your child is finding eating a challenge.

**Eating difficulties often experienced by neurodivergent children can include:**

**Not knowing how full they are**

This can lead to over and under eating

**Selective eating**

They may only eat food presented in a particular way. Or they may only eat food that is a particular colour, shape or texture

**Food refusal or food neophobia**

They may refuse foods they dislike or foods that are new or unfamiliar

**Pica**

This is the eating of non-food items

**Avoidant and Restrictive Food Intake Disorder (ARFID)**

They may refuse or restrict the intake of food, for reasons that are nothing to do with body image

**Bingeing / Over Eating / Food Impulsivity**

They may eat a large amount of food in a short space of time



**Parent Resources**



## Section 2:

### Rumination

They may bring up undigested foods, rechew it and reswallow it

### Food rituals

They may only eat food if it isn't touching other food or only eat a specific number of food items, or eat foods in a specific order. They may repeatedly wash their hands before eating or may experience repeated cycles of over or under eating

### Food fears

They may avoid eating because of fears around hygiene, choking, the anxiety of trying different foods or the anxiety of eating in new or different places

### Anxiety around where they eat

They may find it difficult to eat in places or spaces that are unacceptable to them due to sensory differences - if there are unacceptable smells, it is too noisy, they find the temperature or appearance unacceptable, for example

### Social Anxieties

They may not like to be looked at when they are eating. They may also find the social aspects of eating - such as conversation - difficult, which may in turn impact on their eating

### Spitting or vomiting

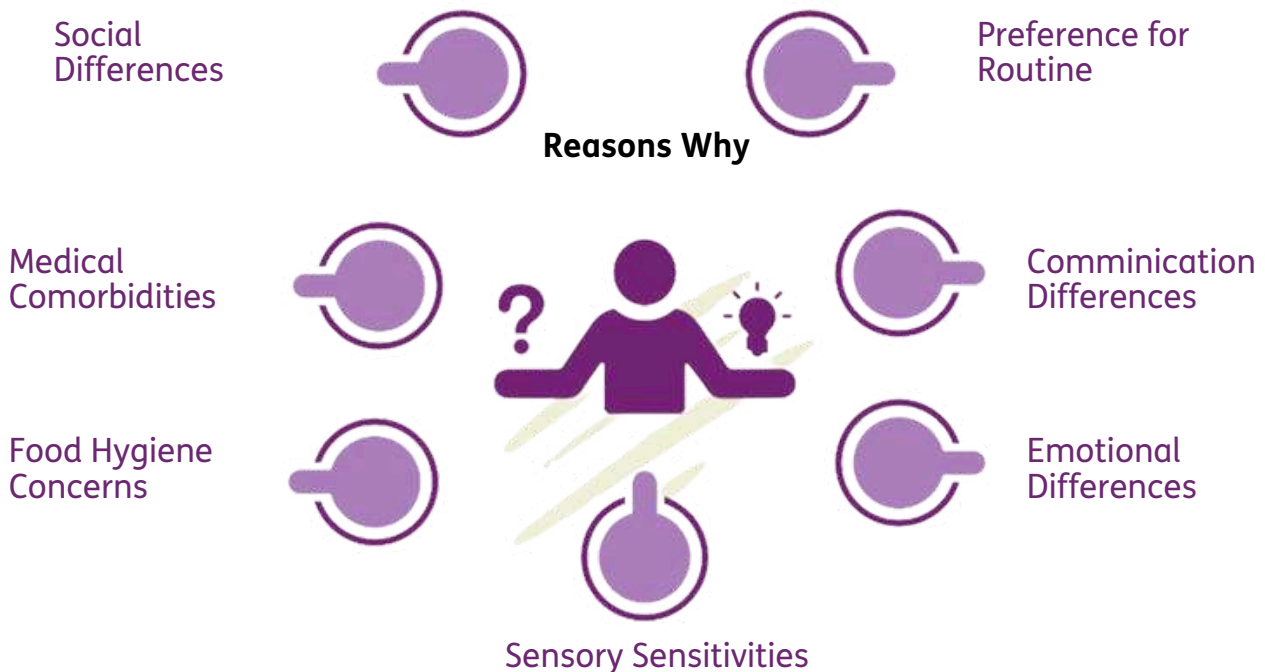
They may spit or vomit food because they dislike the taste, texture, are fearful they may choke or as a result of any other anxiety around food



Parent Resources

## Section 3:

### Why do Some Neurodivergent Children Have Difficulties with Eating?



#### FOR EXAMPLE:

- Social differences may mean some neurodivergent children do not want to eat in the presence of others because they do not want to be watched when they eat and don't want to have to make conversation.
- A child may avoid lumpy foods because of sensory sensitivities.
- A child may not eat because they have food fears around the possibility of choking.
- A child may not eat because the school is having Christmas lunch and it is earlier and different to normal.



**Parent Resources**

## Section 4:

### Supportive Strategies

**What will work in supporting your child will very much depend on the reasons behind their difficulties with food. It may be helpful to:**

- Understand your child's difficulties. It may be useful to keep a food diary and where possible communicate with your child to try and unpack the root causes of their eating difficulties. They can draw, take photos or use picture cards to communicate their thoughts and feelings about food - communication does not have to be verbal.
- Adapt and accommodate your child's food preferences to reduce their anxiety around food.
- Introduce foods slowly. Let children look at, smell, handle and try very small amounts at first.



- Introduce foods with a similar appearance, taste or texture to other food they will eat or like.
- Provide a variety of acceptable foods to give your child choices. This will give them some control over what they eat. For example, you might ask "Do you want apples or carrots?"
- Create visual schedules or picture menus to help your child understand meal times and food options.



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## Section 4:

### Supportive Strategies



- Eat a variety of foods in front of your child to normalise trying new things without pressure.
- Maintain regular mealtimes and structure to provide a sense of security and predictability.
- Respect your child's hunger and fullness signals. Forcing them to eat when they are not hungry can lead to resistance.



- Only introduce new foods one at a time.
- Consider plates that keep food separate so foods don't touch.
- Take food out with you rather than relying on being able to buy food if you are away from home.
- Think about where you eat meals and whether the environment is comfortable for your child.
- Involve your child in food preparation and even in growing food so it becomes more familiar to them and they view it more positively and as less anxiety inducing.



- Turn meals into a playful experience with creative presentations, like cutting food into fun shapes or making it colorful.



- Never label foods as “bad” or associate eating with punishment. Keep the focus positive or neutral.
- Understand that progress may be slow, and it is okay to take small steps. Focus on supporting your child to develop a positive relationship with food.

**By adapting your approach to your child's unique support needs, you can help ensure that eating is a more positive and less stressful experience.**



**Parent Resources**



## Section 5:

# How Can You Work With Your Child's School?

## Develop Positive Relationships

Work closely with teachers, cafeteria staff, and other relevant personnel to ensure they understand your child's needs and preferences around food and eating. Discuss making a plan together that can be supported at both home and school to create consistency and familiarity. Discuss how this will be shared with other staff, including lunch time supervisors. Involve your child in discussions and planning wherever possible.

**An Individual Support Plan Template, Home-School Food Tracker and Lunchtime Supervisor Handout Tool has been included in the back of this guide to support with this.**



**INDIVIDUAL FOOD SUPPORT PLAN**

**Individual Plan**

Autism Education Trust logo at the top right.

Name:

Class:

Teacher:

Key Contact:

Foods I like:

Foods I do not like:

You can support me by:

If I become anxious/distressed, I would like you to:

Name of staff contact:

Autism Education Trust logo at the bottom right.



## Parent Resources

## Section 5:

### How Can You Work With Your Child's School?

#### Familiar Foods, Sensory Safe

Pack lunches that include foods you know your child is more likely to eat. Keeping at least some of the contents of your child's lunch consistent may provide comfort and predictability. Consider any sensory sensitivities your child may have. For example, use containers that are easy to open and made of material that won't make unwanted sounds. Think also about food colour, shape and texture preferences. Communicate such preferences with your child's school so that they also make these adjustments.



#### Ask them to Make it Visual:

If your child has a preference for routine, it may be helpful to request that schools create a visual schedule showing the lead up to eating lunch and the steps involved. This may help to reduce anxiety by making the lunch time sequence visible.

**There is an example Visual Schedule Tool in the back of this guide.**



Parent Resources

## Section 5:

### How Can You Work With Your Child's School?

#### Plan and Prepare:

If your child benefits from knowing what to expect, ask school if it would be possible to see the menu and make choices in advance. It would be helpful if choices are presented using the child's communication preferences.



#### Support Self-Advocacy

If they are comfortable, help your child learn how to express their needs (e.g., "I need a quiet space to eat" or encourage them to use pictures or symbols - whatever suits their communication preferences) so they feel more in control of their environment and food experiences. Ensure staff understand your child's communication preferences, as this will help to ensure their needs are being met appropriately.



#### Flexible Eating:

If your child finds routine difficult and finds eating to be a pressured activity, discuss whether grazing (where they can eat small amounts across the day) would be possible.



Parent Resources

## Section 5:

### How Can You Work With Your Child's School?

#### Agree Calm Spaces and Places

If it would be helpful, work with the school to allow for short sensory breaks before or after lunch to help your child feel calm and ready to eat. If the dining hall environment is overwhelming your child, ask the school if there is a quieter space for them to eat, such as a classroom or sensory-friendly area.



#### Specialist Support

If your child has more significant feeding challenges, then a doctor, occupational therapist, speech therapist or other clinician can collaborate with the school, yourself and your child to best support their eating. This type of support will normally be accessed by referral via your GP.

**See our Tools to help you support your child's eating in the back of this guide - choose the ones that you and your child agree will be the most helpful**



**Parent Resources**



## Section 7:

### Top Tips

- ✓ Keep a food diary
- ✓ Communicate with your child to understand their eating challenges
- ✓ Figure out with your child what will work best to support them
- ✓ Stay positive and start small - look, smell, taste, lick
- ✓ Develop positive relationships with school and work as a team with your child at the centre to support them with eating
- ✓ Seek medical advice



Parent Resources



# **Tools to Support Your Child with Eating, at Home and School**



**Autism  
Education  
Trust**

# Food Chaining Example





# Home-School Food Tracker



MON

TUE

WED

THU

FRI

SAT

SUN

Breakfast

Lunch

Dinner

Activities

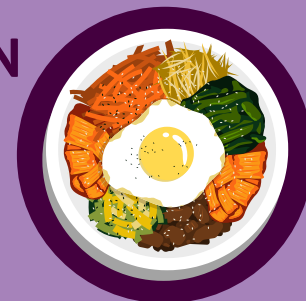
Thoughts

Other





## DINNER SUPERVISOR INFORMATION



# How to help

### Create Calm Predictable Spaces

Keep dining areas calm and predictable. Stick to routines around lining up, taking turns and serving the food. Have quieter areas for child to eat and reduce sensory overload. Allow children to sit in the same familiar space if they choose to. Let them bring a familiar object to the dining room. Give extra time to eat and give general time reminders. Allow flexibility

### Support Sensory Differences

Learn about each child's unique sensory needs and food sensitivities such as aversions to specific textures, smells or temperatures. Offer support if they need accommodations like seating away from strong food smells or different textures

### Accommodate Food Preferences

If a child is particular about food presentation or prefers familiar foods, work to accommodate this where possible. Letting children bring food from home or serve themselves familiar items can provide a sense of routine. Respect food choices even if they seem limited. Eating is better than not eating. Support them bringing food from home that they enjoy

### Avoid Pressure and Create Non-judgemental Spaces

Do not try to pressure or persuade children to 'go on try some' or 'try a little'. It is likely to increase anxiety and make the problem worse. Praise other behaviours-not eating such as sitting nicely or interacting with others. Normalise difference if peers point it out 'everyone likes different foods and that's OK. Have a no share policy so children don't feel pressured to try food

### Make Communications Clear

Plans should be communicated to lunch staff. Lunch staff should communicate with key staff contacts. Menus should be available to children in advance. Visuals should be provided around eating and dining routines. Support children's communication methods and encourage children to communicate their preferences and self-advocate. Be patient and empathetic

Name of staff contact:



## INDIVIDUAL FOOD SUPPORT PLAN

Add Image

# Individual Plan

Name :

Class:

Teacher:

Key Contact:

Foods I like:

Foods I do not like:

You can support me by:

If I become anxious/ distressed, I would like you to:

Name of staff contact:






## EXAMPLE VISUAL SCHEDULE

# At Lunch Time We:



## Useful Links:

### Other Useful Contacts Include:

-  Your GP, who can provide initial support and advice and provide onward referrals if needed.
  
-  Local health authorities and the NHS often provide specialised services for children with eating and feeding difficulties, including occupational therapy and dietary support. Check with your GP or local council for available services.
  
-  **Sheffield Children's Hospital:**  
<https://library.sheffieldchildrens.nhs.uk/children-with-neurodevelopmental-difficulties-who-avoid-or-refuse-food/>
  
-  **ARFID Awareness:**  
Provides information on Avoidant/Restrictive Food Intake Disorder (ARFID) and offers support resources for families dealing with extreme picky eating and food aversions common in neurodivergent children.
  
-  **Eating Disorders Information:**  
<https://www.nhs.uk/mental-health/feelings-symptoms-behaviours/behaviours/eating-disorders/advice-for-parents/>



### Parent Resources



## The author wishes to thank:

Sam Clark-Stone, Registered Mental Health Nurse

Clare Feeney

Pediatric Nurse and Health Visitor

for reviewing the information in this resource.

*Thank  
you!*



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## Autism Education Trust

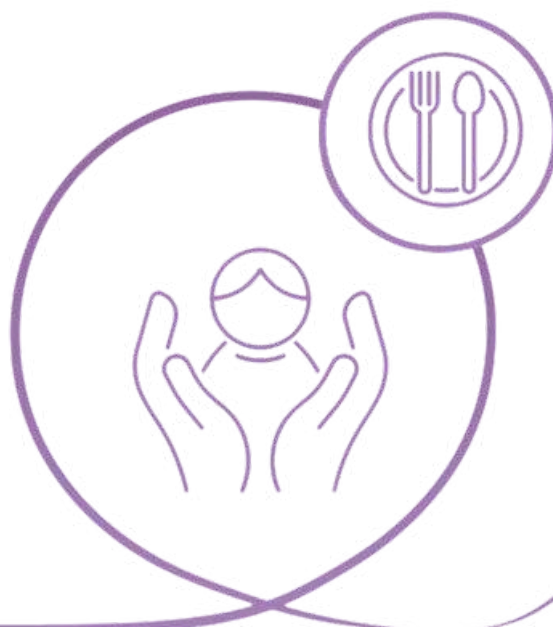
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