

Role of OT in Feeding Difficulties: Provider Guide

Occupational therapists are equipped to address feeding difficulties in children due to their understanding of the physiological factors as well as an understanding of child development, sensory processing, and behavior management. This knowledge enables them to assess and intervene in feeding challenges that stem from a variety of sources, including motor skills, sensory sensitivities, and behavioral or emotional struggles (Boop & Smith, 2017).

The Role of Interdisciplinary Care

Occupational Therapists recognize that interdisciplinary collaboration in the management of feeding difficulties improves patient outcomes (Sharp et al., 2017). Advocating for referrals across various specialties helps guarantee that all facets of a child's feeding challenges are thoroughly addressed. Some providers that OTs may partner with include:

- Speech-language pathologists
- Dietitians or Nutritionists
- Pediatricians
- Psychologists
- Gastroenterologists
- Early Intervention Specialists

When to Refer to OT

Referral to an OT is recommended when a child exhibits persistent challenges that impact their nutritional intake or mealtime behaviors. Signs that may indicate the need for OT intervention include:

- Difficulty with chewing or swallowing
- A limited diet due to sensory aversions
- Difficulties with using utensils
- Negative behaviors or anxiety around mealtimes

The OT Process for Feeding Difficulties

Assessment: The OT assessment process is comprehensive, focusing on the child's current feeding abilities, sensory responses, motor skills, and environmental interactions. Assessments also consider the child's developmental stage, nutritional status, and family mealtime dynamics to form a holistic view of the feeding difficulties.

Intervention: OTs develop personalized intervention strategies aimed at addressing the identified feeding challenges. Interventions are designed to be flexible and adaptable, changing as the child's needs evolve and as progress is made. These interventions may include:

- Sensory integration techniques to address aversions
- Oral-motor exercises to strengthen muscles involved in chewing and swallowing
- Behavioral strategies to encourage positive mealtime behaviors
- Activities that enhance fine motor and hand-eye coordination to facilitate independence in self-feeding
- Environmental modifications to create a supportive feeding environment

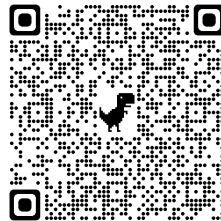
- Introduction and education regarding adaptive feeding utensils/tools, seating and positioning, and use of visual aids
- Education and training for caregivers on strategies to support feeding at home

Outcomes: Obtaining meaningful outcomes not only enhances the well-being of the child but also positively impacts the entire family dynamic. Achievable outcomes include:

- Improved nutritional intake
- Greater independence with eating
- Increased variety of accepted foods
- Parental empowerment & education
- Improved mealtime behaviors
- Strengthened family relationships

Additional Resources:

This peer-reviewed article, published by the American Occupational Therapy Association, aims to define the unique role and specialized viewpoint that occupational therapy practitioners bring when providing services for individuals with difficulties in feeding, eating, swallowing, and related performance challenges (Boop & Smith, 2017).



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“OT & Feeding Difficulties:
Caregiver Guide”
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Sources

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