Children who have experienced trauma, abuse and neglect in their early lives sometimes show difficulties or 'odd' behaviour in relation to food and eating.

What might you see?

- A child gorging themselves on lots of food, not recognising if they are full
- A child eating very quickly or incredibly slowly
- A child insisting on a very limited/restricted diet
- A child not recognising feelings of hunger, eating too little
- A child stealing food or taking it without asking
- A child hoarding or hiding food
- A child showing strange behaviour in relation to food e.g. eating raw bacon, or eating from the dog's bowl
- A child not knowing how to use a knife and fork
- A child making a mess when eating that does not reflect their chronological age

How it can feel?

- Very frustrating!
- Worrying that the eating behaviours may affect the child's health
- Distressing that the child feels the need to take food when you feel that you provide everything that they need
- Out of control
- Embarrassing if you are out in public or visiting relatives or friends
- Like this is a reflection in some way on your ability to care for their basic needs

Why do these children have eating difficulties?

- May relate to past family experiences
- Eating may be an arena for playing out old power struggles from earlier relationships
- Eating behaviour can become a way of a child asserting their control. What they eat and don’t eat may feel like the only aspect of their life they can control
- Neglect of basic sustenance needs being met in the past can lead children to feel that they have to ‘go underground’ to meet their own needs (i.e. hoarding, stealing, gorging)
- Eating too much or too little can be associated with emotional disturbance (anxiety or depression)
- Children who have not had their basic attachment needs met, particularly when very small, may not develop the ability to recognise bodily signals i.e. hunger, cold, feeling full, feeling tired
- A child may have been used to a very limited diet at home and eating those few foods may be a comfort to them

A number of these reasons may apply to the child for whom you are caring or there could be other reasons more specific to them not mentioned here.
Some suggestions of what you can do to help the child overcome eating difficulties

- Avoid confrontation/getting into battles over food or mealtimes
- Stick to a routine with regular mealtimes
- If the child is anxious about having access to food when you are out, pack a snack and tell the child you have done this
- Try to show you are not bothered if it feels like the eating difficulties are about control
- Model good practices in relation to eating i.e. have a balanced diet yourself
- Help the child recognise their bodily signals by commenting when you feel hungry or full
- Guess when the child might have these feelings and comment at these times
- Clearly explain rules around food, eating, times of meals, whatallowed to eat etc.
- Teach child how to get needs met i.e. asking appropriately
- Use distraction during mealtimes so that food is not the focus e.g. talking about the day, what you will do tomorrow
- Make a game of it - make mealtimes fun and enjoyable e.g. counting how many peas you can get on one fork, dipping fruit in chocolate sauce
- Remain calm and give lots of empathy when a child steals or hoards food, whilst explaining that this is not necessary e.g. say 'maybe when you were at home you didn’t know when you would get food, now you want to make sure you can get it when you need it' or 'it might feel difficult getting used to the mealtimes here'
- You may wish to gradually increase the variety of a child's diet, if this is limited, but try to do this in collaboration with the child rather than getting into power struggles

It will take time for your child to change some behaviours in relation to food and eating. In the meantime, make sure that they are physically healthy and are getting any food supplements i.e. vitamins that are necessary. Seek medical advice if you are concerned about their nutrition. It is important that you and the child's co-carer/parent agree and maintain consistent responses to eating difficulties.