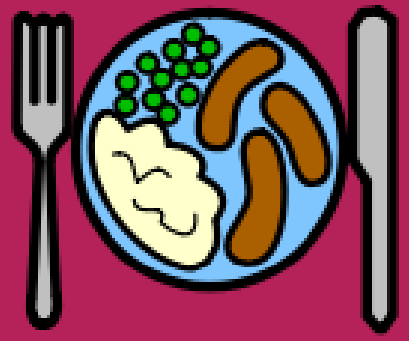
hcrg Care Group

Eating and Neurodivergence (ND)- support tips for lunchtimes



(Covering- Common ND differences which may impact eating and coping with lunchtimes)

September 2025

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Plan

1. Introductions

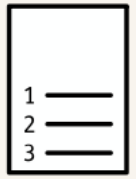
2. Eating & ND – possible challenges

3. Top tips- parents and schools

4. Other information

5. Action Plan

6. Feedback & questions

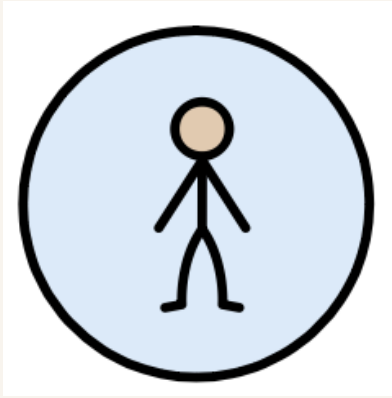


1. Introductions

What is PINS?

Partnership for Inclusion of Neurodiversity in Schools

- PINS provides a unique opportunity to work in partnership between health, education, children and their families to develop different aspects of school life to support neurodiversity
- We know that meeting needs of ND children will be of benefit to all children
- Meeting needs of children with SEND in mainstream schools is the cornerstone to improving outcomes (attainment, attendance and wellbeing), parental confidence and delivery financially sustainable SEND system.



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Who are we?

HCRG Care Group are the current Community Provider of Children's Service in B&NES and Wiltshire. We are working to deliver additional training to schools as part of the PINS project.

Within our organisation we have a skill mix specialist clinical workforce who are helping provide consultation and expertise to this partnership programme.

Professionals include:

- Learning Disability Nurses
- Clinical Psychologists
- Paediatricians
- Occupational Therapists
- Speech and Language Therapists
- Physiotherapists
- Teachers

2. Eating and ND

Possible challenges

Eating and Neurodivergence:
Common ND differences which may impact eating and coping with lunchtime

- We are going to look at common neurodivergent differences which may impact eating and coping and how you can support these children.

- In terms of Neurodivergence we are including Autism Spectrum Disorder, Attention Deficit Hyperactivity Disorder, Dyslexia, Developmental Co-ordination Disorder (also known as Dyspraxia), Developmental Language Disorder and Sensory Processing differences.

Activity

Think about challenges around eating and mealtimes for children who:

- Are autistic
- Have ADHD
- Have a language disorder
- Have sensory processing difficulties
- Have coordination difficulties

Eating and food

It's good to encourage a healthy, balanced diet for children.

- To give nutrients needed for growth and health

Eating and drinking can be challenging for many ND children and their families.

This can be because they do not understand the signals their bodies sends them like when they are hungry, thirsty or full.

Pica

Pica is a medical term for when children eat non-edible items. Common items that children with pica eat can include sand, chalk, playdough, clothing, faeces, hair and paper.

Pica is more common in certain groups of the population and occurs more frequently in children with learning difficulties. It is associated with autism.

It may also be caused by a child getting a pleasurable feeling or sensory stimulation from eating non-food items.

ARFID

Avoidant/restrictive food intake disorder (ARFID)

ARFID is characterised by a pattern of eating that avoids certain foods or food groups entirely and/or is restricted in quantity (eating small amounts).

ARFID is different to other restrictive eating disorders in that:

- ARFID isn't affected by a person's beliefs about the size and shape of their body.
- Someone with ARFID doesn't restrict their food intake for the specific purpose of losing weight.
- ARFID doesn't feature some of the other behaviours that can be associated with anorexia, bulimia, or other specified feeding or eating disorder (OSFED), such as over-exercising.

Not eating enough food

Some neurodivergent children and young people can find it difficult to eat enough food. This is common in ADHD children and young people on stimulant medications.

Discuss with parents about monitoring weight gain and growth. This is the best way to see if the child is obtaining enough energy and nutrients from the food they eat.

Common food concerns

- Chewing things that aren't food
- Using food to help them focus
- Only eating foods with specific textures or tastes
- Fixed patterns of food
- Requiring the food must be presented in a specific way like peas not touching carrots
- Preferring foods to be 'wet' or 'dry'
- Preferring a specific brand of food
- Eating non-food items

3. Top Tips

Parents and schools

Top Tips for Parents

- Serve smaller meal portions
- Focus on foods with lots of nutrients in
- Use full-fat foods
- Give high calorie foods
- Make breakfast the most important meal
- Don’t worry about school lunches, focus on breakfast and dinner
- Keep lots of nutritious snacks available
- Don’t argue about food

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Top Tips from Parents

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Top Tips for parents and lunchtime staff

Do:

- Talk about food positively
- Create a calm and low-pressure atmosphere at mealtimes
- Talk about the different sensory elements like colour, feel and smell
- Consider seating plan and peers around them
- Explain 'you don't have to eat it but just tasting, chewing and licking counts.'

Don't:

- Put too much pressure on the child or young person
- Use judgemental language when talking about food; avoid using terms like 'good' or 'bad' food
- Comment on how much the child or is eating as this can be discouraging
- Wipe or clean your child's mouth when they are eating
- Offer food as a reward for tasting

Top tips for Schools

- Communicate with the child – use story or visual boards. Don't assume the child knows the expectations of what happens at a school meal time- use a social story or make a video to share with them
- Stay consistent (times, seating, offer what has been promised where possible)
- Keep the surroundings organised – so they know where to find everything
- Adjust mealtime expectations
- Practice going into the hall at quieter times and sitting at the table
- Get to know what the child likes and can manage
- Encourage them to have a drink between mouthfuls
- Provide a napkin or wipe at the table
- Ask them to help design menus
- Consider movement opportunities before meals

Think about

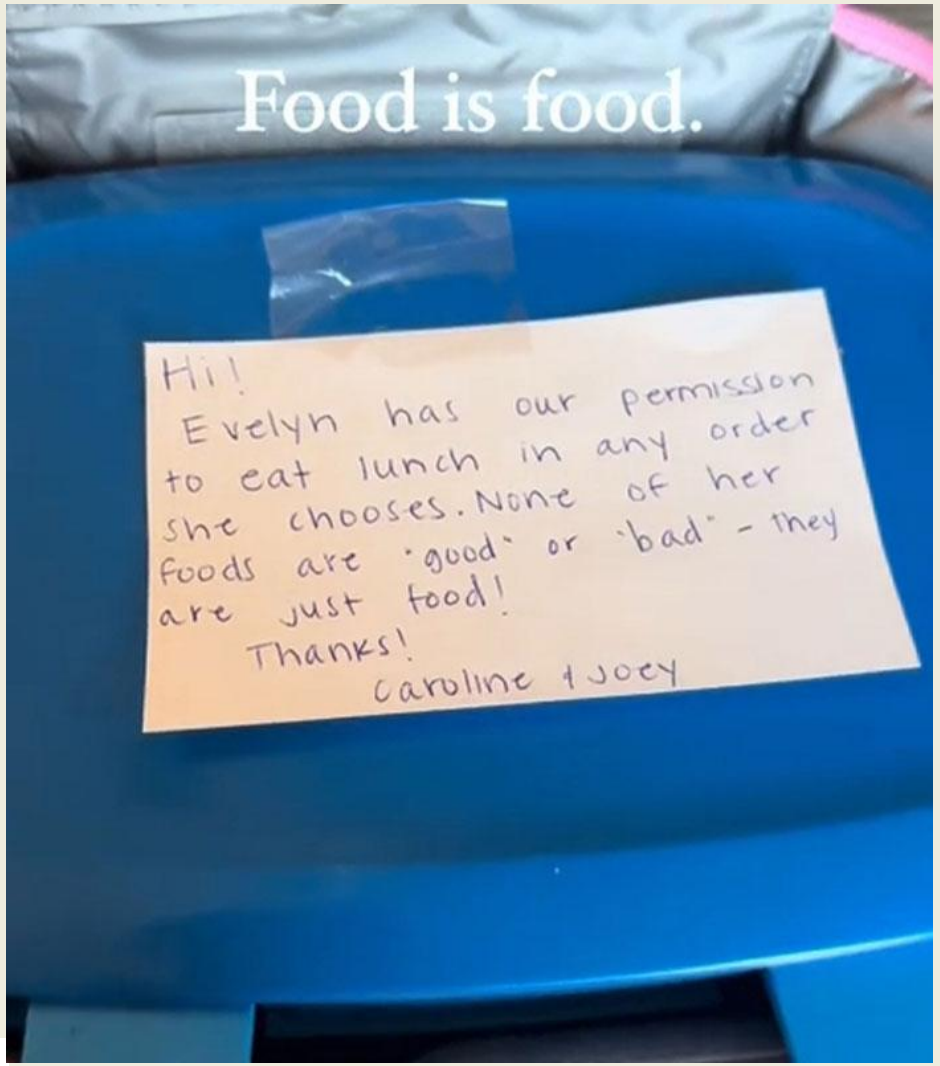
- Quiet room or other space for eating
- How to support choosing from the menu at mealtimes
- How to manage changes from the expected menu
- Who a child prefers to sit with
- What is the queuing system? Can this be better organised?
- Do midday supervisors know how to support ND needs?

What can you do to help?

- Keep a record of what the child eats if there are concerns
- Keep track of how often the child shows pica behaviour- this can help understand the need that it may be meeting
- If there is Pica- use ‘blocking’ – put your hand in front of their mouth to stop them
- Teach the child how to identify food from non-food items
- Snack schedule needs to be regular and visual
- Try teaching the child to pick up pica items and throw them away or return them to their place
- Sensory help – give them an item to replace the sensation they may be trying to achieve

How to communicate difficulties between home and school?

- Create an “About me” letter
- Visual cards
- Stickers



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Drinking and hydration

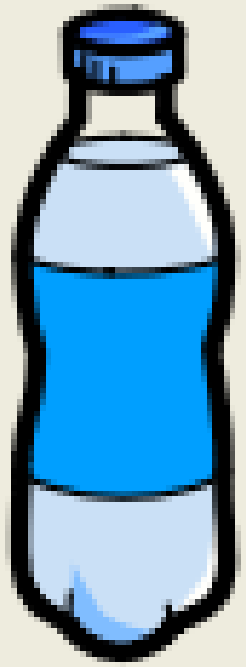
Some children or young people can find it hard to stay hydrated.

This is not because they're lazy, careless or don't care about their health. They may struggle to drink regularly for a variety of reasons like:

- forgetting to bring their water bottle
- forgetting they have a water bottle
- being distracted by a task or activity

Tips for staying hydrated

- Did you know, the school aged health service/ school nurse may be able to give information to the children about hydration?
- Try water at different temperatures
- Try still or sparkling water
- Try flavouring the water
- Try different cups or beakers
- Try food with high water content
- Try ice and frozen food



4. Other Information

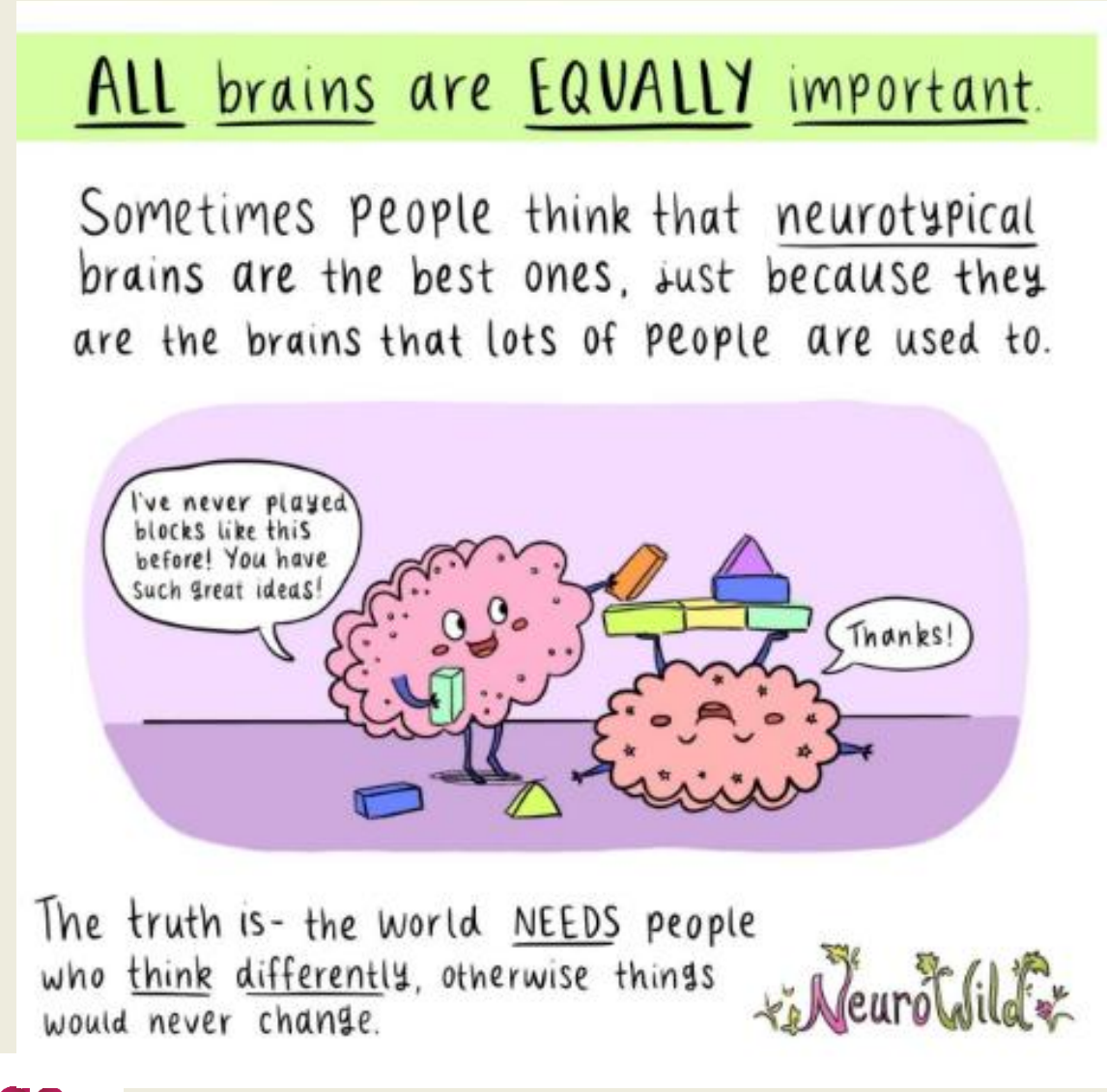
Parents and schools

Diets, supplements & ND

Diets that remove a type of food are known as exclusion diets. Current research shows that there are no long-term benefits of treating autism or ADHD with supplements or exclusion or elimination diets.

Neurodivergence cannot be treated with fatty acid, vitamin, mineral or dietary supplements like vitamin B6, omega 3 or iron supplements. We do not recommend using supplements to treat ADHD or autism.

The idea of searching for ‘treatment’ implies that there is something ‘wrong’ and is not neuroaffirmative.

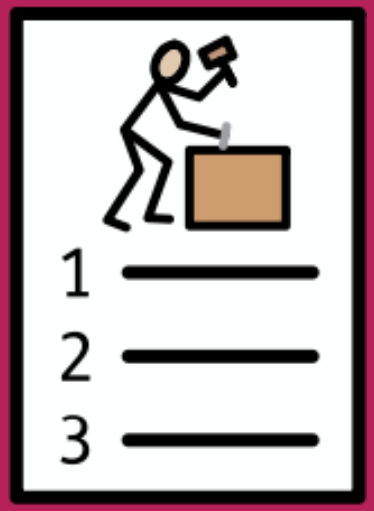


Further information

Eating - a guide for all audiences – National Autistic Society

Eating, drinking and diet for neurodivergent children and young people - NHS

Autism and eating – BeyondAutism – Beyond Autism



5. Action Plan

Consider your role within school, what three strategies will you use this term?

6. Feedback & questions