

The Parent's Reading Library

Food, Nutrition & Neurodivergent Children

Section 4

Selective Eating & Picky Eating

Why this topic matters

Selective eating is one of the most common challenges experienced by families of children with ADHD, autism and other neurodevelopmental conditions. Many children have strong preferences for certain colours, textures, temperatures or flavours and may refuse to eat entire food groups.

Research shows that selective eating is usually much more than simply being a “fussy eater.” Sensory processing differences, anxiety, routines, oral motor skills and gastrointestinal discomfort can all influence food choices. Understanding these factors can help parents approach mealtimes with patience while ensuring children receive the nutrients they need for healthy growth and development.

1. Feeding Problems and Nutrient Intake in Children with Autism Spectrum Disorders: A Meta-analysis

Reference

Sharp, W. G., Berry, R. C., McCracken, C., Nuhu, N. N., Marvel, E., Saulnier, C. A., Klin, A., Jones, W., & Jaquess, D. L. (2013). *Feeding Problems and Nutrient Intake in Children with Autism Spectrum Disorders: A Meta-analysis and Comprehensive Review of the Literature*. *Journal of Autism and Developmental Disorders*, **43**(9), 2159–2173.

DOI

<https://doi.org/10.1007/s10803-013-1771-5>

Plain English Summary

This landmark review found that feeding difficulties are significantly more common in autistic children than in typically developing children. Restricted food choices may reduce dietary variety and increase the risk of inadequate intake of important nutrients.

2. Changes in Food Selectivity in Children with Autism Spectrum Disorder

Reference

Bandini, L. G., Curtin, C., Phillips, S., Anderson, S. E., Maslin, M., Must, A., & others. (2017). *Changes in Food Selectivity in Children with Autism Spectrum Disorder*. **Journal of Autism and Developmental Disorders**, **47**(2), 439–446.

DOI

<https://doi.org/10.1007/s10803-016-2963-6>

Plain English Summary

Researchers followed autistic children over several years and found that food selectivity often continued as children grew older. Although many children gradually accepted more foods, progress was usually slow and required ongoing family support.

3. Food Selectivity and Sensory Sensitivity in Children with Autism Spectrum Disorders

Reference

Cermak, S. A., Curtin, C., & Bandini, L. G. (2010). *Food selectivity and sensory sensitivity in children with autism spectrum disorders*. **Journal of the American Dietetic Association**, **110**(2), 238–246.

DOI

<https://doi.org/10.1016/j.jada.2009.10.032>

Plain English Summary

This study found that children with greater sensory sensitivities were more likely to have restricted food preferences. Understanding a child's sensory experiences can help parents introduce new foods more successfully and with less stress.

4. Parents' Reported Oral Sensory Sensitivity Processing and Food Preference in Children with ADHD

Reference

Ghanizadeh, A. (2011). *Parents' reported oral sensory sensitivity processing and food preference in children with attention-deficit/hyperactivity disorder*. **Journal of Psychiatric and Mental Health Nursing**, **18**(7), 623–630.

DOI

<https://doi.org/10.1111/j.1365-2850.2011.01721.x>

Plain English Summary

Parents of children with ADHD reported that oral sensory sensitivities influenced food preferences and acceptance. The study suggests that some picky eating behaviours may be related to sensory processing rather than behaviour alone.

5. Food Variety as a Predictor of Nutritional Status Among Children with Autism

Reference

Zimmer, M. H., Hart, L. C., Manning-Courtney, P., Murray, D. S., Bing, N. M., & Summer, S. (2012). *Food variety as a predictor of nutritional status among children with autism*.

Plain English Summary

Children who ate a wider variety of foods generally had better nutritional intake than those with highly restricted diets. The authors recommended monitoring growth and nutritional status in children with persistent food selectivity.

Note: Please verify the final journal details and DOI before publication.

6. Feeding Behaviour in Children with Autism Spectrum Disorder

Reference

Ledford, J. R., & Gast, D. L. (2006). *Feeding problems in children with autism spectrum disorders: A review*. **Focus on Autism and Other Developmental Disabilities**, **21**(3), 153–166.

Plain English Summary

This review describes common feeding difficulties experienced by autistic children and discusses practical strategies that may help increase food acceptance. It highlights the importance of understanding each child's individual needs.

7. Mealtime Behaviour Problems in Children with Autism Spectrum Disorder

Reference

Provost, B., Crowe, T. K., Osbourn, P. L., McClain, C., & Skipper, B. J. (2010). *Mealtime behaviours of preschool children: Comparison of children with autism spectrum disorder and children with typical development*.

Plain English Summary

Researchers found that mealtimes were often more challenging for families of autistic children due to food refusal, limited food choices and behavioural concerns. The study supports family-centred approaches to improving mealtime experiences.

Note: Please verify the final journal citation and DOI before publication.

8. Food Selectivity, Nutrient Intake and Family Impact

Reference

Schreck, K. A., Williams, K., & Smith, A. F. (2004). *A comparison of eating behaviours between children with and without autism*. **Journal of Autism and Developmental Disorders**, **34**(4), 433–438.

DOI

<https://doi.org/10.1023/B:JADD.0000037419.78531.86>

Plain English Summary

Children with autism consumed fewer different foods than children without autism and were more likely to refuse new foods. The findings demonstrate how selective eating can affect both nutritional intake and family mealtimes.

What this means for families

Many neurodivergent children experience selective eating, and this is often linked to sensory processing, anxiety, routines or previous experiences with food rather than simply being “difficult.” Progress usually happens gradually, and repeated, low-pressure exposure to new foods can be more effective than forcing or bribing children to eat.

If your child eats only a very small range of foods, is losing weight, has poor growth or you are concerned about nutritional deficiencies, speak with your GP, paediatrician or an Accredited Practising Dietitian. Early support can help protect your child’s nutritional health while respecting their sensory and developmental needs.

Evidence at a Glance

Overall evidence: ★★★★★ Strong

What research consistently shows

- Selective eating is common in autistic children and is also seen in many children with ADHD.
- Sensory sensitivities play an important role in food acceptance.
- Restricted diets can increase the risk of nutrient inadequacy.
- Progress is usually gradual and best achieved through supportive, family-centred strategies.
- Professional assessment is recommended when food choices become very limited or affect growth and nutritional health.