



CULTURAL EATING DIFFERENCES: **ADDRESSING FEEDING CHALLENGES IN** **MULTI-CULTURAL FAMILIES**

IECC - MAY 6, 2024 - SARINA MURRELL

Main Goals

- Explore cultural beliefs and practices related to food and feeding
- Learn to identify and address feeding challenges in multicultural families
- Create mealtime routines that respect cultural backgrounds and support successful feeding for children

Breakout Room 1: Culture

Introduce yourselves and discuss the following questions:

1. What are some key values or principles that define your culture?
2. Can you describe any traditional foods or dishes that are significant in your culture?
How are they prepared and enjoyed?
3. Can you share any proverbs, sayings, or folk tales that are meaningful in your culture?
4. How has globalization or modernization influenced your culture in recent years?

Culture is

Food is more than just sustenance for children; it's a gateway to cultural exploration, family bonding, and cherished memories.

"Cultural" Food Dishes

tacos	curry	pho	_____	_____
spaghetti	gyros	hummus	_____	_____
sushi	pad thai	kimchi	_____	_____



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Food is Culture

- COUSINE _____
- MEALS _____
- HEALTH/NUTRITION _____
- ETIQUETTE _____

Breakout Room 2: Etiquette

Look over and discuss your comfort level around these different cultural food considerations:

	FOOD HABIT	0 UNCOMFORTABLE----NEUTRAL---- COMFORTABLE 10
1	Blowing nose at the table	
2	Elbows on the table	
3	Slurping your food/drink	
4	Eating with your hands	
5	Sopping up leftover liquid/sauce with bread/wrap/tortilla	
6	Picking up your bowl/plate while eating	
7	Eating with hands from a communal dish	
8	Burping at the table	
9	Eating with fork and knife in each hand throughout the meal	
10	Refusing food that is offered before accepting it	
11	Finishing your drink when toasted	
12	Touching glasses when toasting	
13	Waiting for the eldest to start eating before eating	
14	Eating only with the right hand	
15	Finishing all of the food on your plate	
16	Leaving some food on your plate	
17	Asking for salt/pepper	
18	Pointing your feet towards someone while eating	
19	Eating with your mouth open when chewing	
20	Eating with your mouth closed when chewing	
21	Sharing a pear with someone else	
22	Cutting noodles with scissors	
23	Passing food from one person's chopsticks to another's	
24	Placing an empty bottle back on the table	
25	Eating the last of a food on a shared plate	
26	Stirring coffee after its been served	
27	Covering baby/breast when breastfeeding	
28	Having baby/child wear a bib/smock when eating	
29	Encouraging children to feed themselves from an early age	
30	Feeding a child until school age or beyond	
31	Not allowing children to eat cold or frozen foods	
32	Not allowing children to eat sugar or processed foods	
33	Eating snacks in between meals	
34	Eating cereal for breakfast	
35	Parents decide all food that a child is served	
36	Child drinks from a bottle past one year (age 2, 3, 4)	
37	Child breast feeds past one year (age 2, 3, 4)	



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Feeding Disorders

Pediatric feeding disorders (PFDs) lack a universally accepted definition. Feeding disorders require comprehensive assessment and treatment of 4 closely related, complementary domains (medical, psychosocial, and feeding skill-based systems and associated nutritional complications).

What can we do to support

1. Ask, not Assume _____
2. Ask, don't Tell _____
3. Avoid stereotypes _____
4. Build TRUST _____

ESTABLISHING TRUST AND CONFIDENCE

- Explain _____
- Show _____
- Ask _____
- Use _____

VALIDATE AND AMPLIFY STRENGTHS

VALIDATION = heard, accepted

VALIDATION = more likely to communicate openly and honestly

VALIDATION = better equipped to manage challenges

VALIDATION = builds trust and connection in relationships

AMPLIFY STRENGTHS = Optimizes performance

AMPLIFY STRENGTHS = Cultivates a growth mindset (overcome challenges)

AMPLIFY STRENGTHS = Enhances self-confidence, greater motivation

AMPLIFY STRENGTHS = Improved relationships and collaboration

NOTES:

PLEASE COMPLETE 3 DAYS OF TRACKING YOUR CHILD'S EATING. THIS INFORMATION WILL HELP US TO LEARN YOUR CHILD'S STRENGTHS AND ADD IN SUPPORT

MEAL TRACKER

DAY 1: _____

MEAL	FOOD/DRINK	QUANTITY	DURATION / LOCATION	HOW DID IT GO?
BREAKFAST				
SNACK				
LUNCH				
SNACK				
DINNER				
SNACK				
OTHER / DRINKS				

FAMILY FOOD PROFILE

Every family has different foods they enjoy in their home. Please list some of your family's favorite or commonly prepared foods here

COMMON FOODS WE EAT FOR BREAKFAST:

COMMON FOODS WE EAT FOR LUNCH:

COMMON FOODS WE EAT FOR DINNER:

COMMON SNACKS WE HAVE AVAILABLE AT HOME:

FOODS WISH LIST

**FOODS MY CHILD USED TO EAT
(BUT DOESN'T ANYMORE)**

**FIRST 3-5 NEW FOODS I WOULD LIKE MY
CHILD TO EAT**

**NEXT FOODS I WOULD LIKE MY CHILD TO
EAT (EVENTUALLY)**

**ANY FOODS I WOULD LIKE MY CHILD TO
NOT EAT (OR EAT LESS)**

Caregiver Rating Form

This form is for all caregivers (parents, grandparents, nannies, teachers, etc.) that are supporting in the child's eating development. Please print out as many as needed for everyone involved to fill out their own form.

Name: _____ **Relation:** _____

Check off any boxes that you feel stress/worry about:

<input type="checkbox"/>	Child not eating enough (hungry)
<input type="checkbox"/>	Child not using utensils (spoon/fork)
<input type="checkbox"/>	Child cries/upset with food
<input type="checkbox"/>	Not sure how to help child eat
<input type="checkbox"/>	Child eating limited variety
<input type="checkbox"/>	Child makes mess/throws food

Please rate on a scale of 1-10 how you feel on a daily basis:

Overall worry about child's eating: _____
My anxiety level when it is time to eat: _____
My child's enjoyment of eating _____

Please explain in more details your worries/stress related to the child's eating:

Please write out the things that you and the child do well with eating and mealtimes - what are the strengths and skills?

Any Additional Notes/Comments: