



Feeding Behavior Disorders

Fact Sheet

Summer 2009

Condition Description

Feeding Behavior Disorders are formal mental health diagnoses given to an infant or toddler by a licensed mental health professional using the Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood: Revised Edition (DC:0-3R). There are six specific diagnoses within this category, which must be considered when an infant or toddler does not regulate his/her eating when hungry or full. These diagnoses should not be given if the feeding issues are due to Disorders of Affect, Adjustment Disorder, Posttraumatic Stress Disorder, Deprivation/Maltreatment Disorder or a Relationship Disorder. These diagnoses should also not be given as a primary diagnosis if the child has an organic/structural condition such as cleft palate or reflux. ¹

Impact on Learning and Development

If untreated, young children with Feeding Behavior Disorders may experience delays in development including failure to thrive and demonstrate difficulties in their relationships with others. They may also demonstrate difficulties in later school achievement and develop behaviors that require juvenile corrections interventions. ^{2,3,4}

Treatment Options

While the empirical evidence surrounding treatment is minimal, experts in the field recommend combinations of medical treatment, parent-child interventions and parent education, depending on the presenting issues and their causes. ² Additionally, as with all interventions targeted toward young

children, consistent and frequent communication across all of the systems working with the child (the child's primary care givers, child care providers, primary health care providers, mental health providers, etc.), is essential for optimal success in treatment. ⁵

References

- ¹ Zero to Three (2005). *Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood: Revised Edition*. Washington: ZERO TO THREE Press.
- ² Chatoor, I. (2009). *Diagnosis and Treatment of Feeding Disorders in Infants, Toddlers and Young Children*. Washington D.C.: ZERO TO THREE.
- ³ President's New Freedom Commission on Mental Health. (2003). Goal 4: Early mental health screening, assessment and referral to services are common practice. *Achieving the Promise: Transforming Mental Health Care in America*. 57-66.
- ⁴ Zigler, E., Taussig, C., & Black, K. (1992). Early childhood intervention: A promising preventative for juvenile delinquency. *American Psychologist*, 47(8), 997-1006.
- ⁵ Parlakian, P. and Seibel, N.L. (2002). *Building Strong Foundations, Practical Guidance for Promoting the Social-Emotional Development of Infants and Toddlers*. Washington, D.C.: ZERO TO THREE Press.