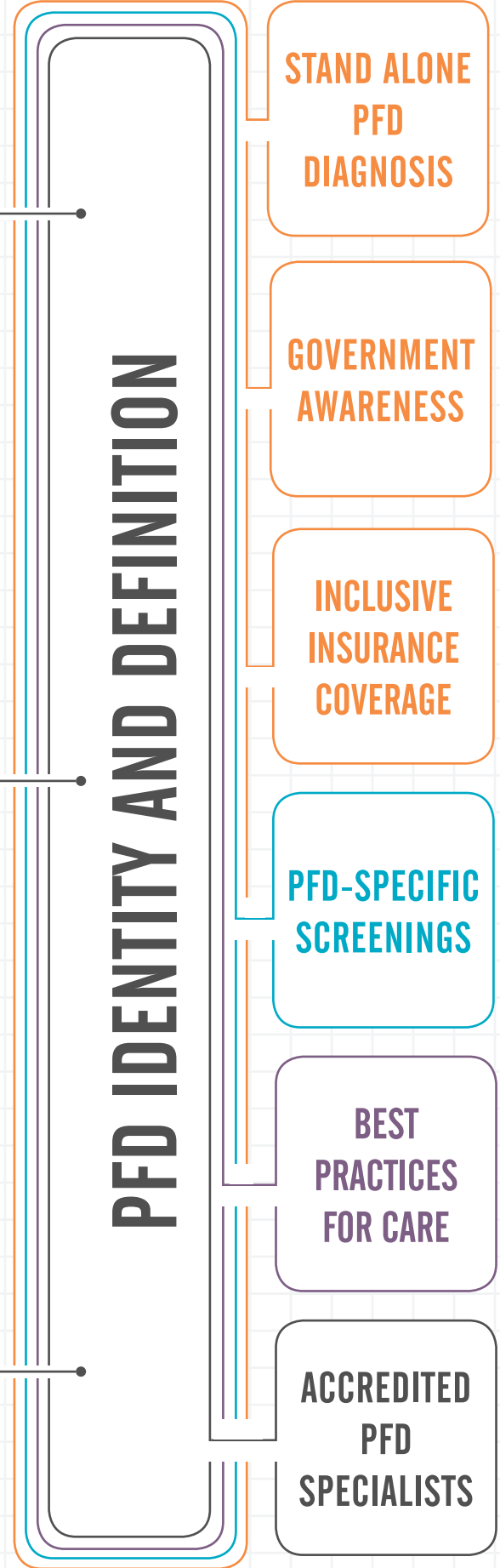
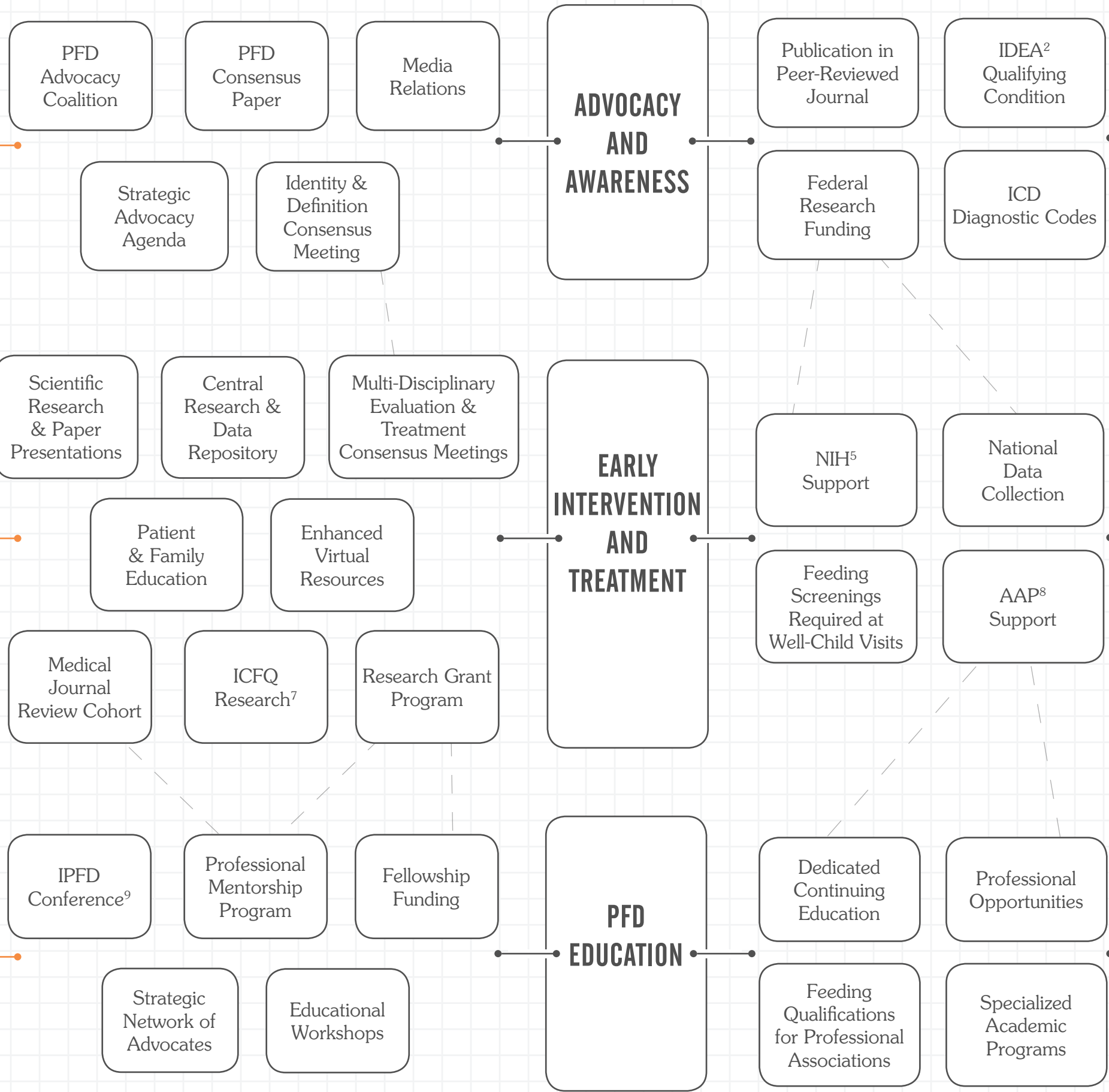


THE POWER OF A NAME: THEORY OF CHANGE

how Feeding Matters is impacting the future of pediatric feeding disorders (PFD)

considerations:

- lacks name & definition
- seen as a symptom
- ambiguous diagnostic codes
- PFD impacts 3-20% of infants & children in the US¹
- no legislative/regulatory qualifications for PFD
- not recognized by IDEA²
- heterogeneous in nature³
- underresearched
- lack of longitudinal data⁴
- increased demand for research & data sharing
- difficulties coordinating & managing care
- focus on growth charts
- physicians short on time
- no identification standards for PFD
- feeding not in developmental screenings (0-30 mos.)⁶
- scarcity in academic and/or medical curriculum
- professionals must self-educate
- low awareness with professional associations





POWER OF A NAME: THE THEORY OF CHANGE

further explanation of terms

1. PFD impacts 3-20% of infants & children in the US

Applying the US Census Bureau's 2017 population estimates, pediatric feeding disorders (PFD) impact 2.3 million infants & children under the age of five in the United States.

2. IDEA

The Individuals with Disabilities Education Act (IDEA) is a law that governs how states and public agencies provide early intervention, special education, and related services to more than 6.5 million eligible infants, toddlers, children, and youth with disabilities.

3. Heterogeneous in nature

Pediatric feeding disorders are a heterogeneous group of problems, diverse in character and content, that may present in various ways. More than 300 other conditions put children at an even higher risk, including autism, congenital heart defects, food allergies, prematurity, genetic disorders, and gastrointestinal conditions. These problems can lead to delayed diagnoses and inappropriate interventions.

4. Longitudinal data

Longitudinal data is multi-dimensional data involving measurements over time.

5. NIH

The National Institutes of Health (NIH), a part of the U.S. Department of Health and Human Services, is the nation's medical research agency — making important discoveries that improve health and save lives.

6. Feeding not in developmental screenings (0-30 mos.)

The AAP recommends conducting developmental surveillance at every health supervision visit and conducting general developmental screening using evidence-based tools at 9, 18, and 30 months, or whenever a concern is expressed. In addition, autism-specific screening is recommended at ages 18 and 24 months, and social-emotional screening is recommended at regular intervals..

7. ICFQ

Feeding Matters' Infant and Child Feeding Questionnaire (ICFQ) was authored in partnership with internationally renowned thought leaders representing multiple disciplines related to feeding. Designed to identify potential feeding concerns, the ICFQ is an age-specific tool based upon the birth date of the child, and includes adjusted ages for children born prematurely.

8. AAP

The American Academy of Pediatrics (AAP) is a professional organization of 66,000 pediatricians committed to the optimal physical, mental, and social health and well-being for all infants, children, adolescents, and young adults

9. IPFD Conference

Endorsed by the North American Society for Pediatric Gastroenterology, Hepatology and Nutrition (NASPGHAN), the International Pediatric Feeding Disorders Conference is Feeding Matters' biennial, two-day event uniting medical professionals and allied healthcare providers from around the world with the leading experts in the field to advance their knowledge on pediatric feeding disorders.