

ABSTRACT

The theoretical part of the thesis contains terminology and therapeutic approaches to the treatment of problematic eating in children. The research part aimed for what problems parents understand by terms such as picky eating and food refusal. Whether under these terms all parents perceive the same manifestations, or whether there are differences. Furthermore how parents experience the problem of food refusal in their child and how they try to solve the situation. Then the results of the work are related to the possibilities of psychological intervention. Forty families' anamnesis were obtained by semi-structured interviews and subsequent qualitative analysis in the form of grounded theory and axial coding showed how parents experienced this condition. Mothers described a total of 41 different manifestations, which can be further divided into actions and reactions. The actions were further divided into 4 categories (quantity, quality, appetite and environmental manifestations). Reactions show the forms by which mothers try to solve the situation and which they also experience as a part of the problem. These are various forms of coercion when eating, using of nasogastric tube or the need to significantly adapt to the child's eating and feeding. The results show a considerable variability of problems between individual families, as well as a different degree of severity from prosperous children to children not prosperous at all and fed by alternative ways. The parents described equally great psychological struggles of food refusal. From the results, the theory of mutual relationship was raised. It shows the individual categories interact and influence each other. At the same time it makes it impossible to determine the causal issue but points out the reciprocal nature of the manifestations of food refusal. The work outlines the use of the mutual relationship theory to select the appropriate procedure, targeting care and selection of therapeutic methods. Methods are presented in the theoretical part of this diploma.

KEYWORDS: ARFID (Avoidant and restrictive food intake disorder), picky eating, eating disorder, FTT (failure to thrive), food refusal