How Do I Know if I Would Benefit From The FOCUS Program?

You may benefit from the FOCUS Program if 3 or more of the following apply to your current eating and mealtime status.

___ 1. Limited repertoire of foods are eaten on a regular basis

___ 2. Inadequate nutrition and/or intake for energy

___ 3. Gagging and/or choking on foods

___ 4. Limited ability to chew or swallow foods

___ 5. Difficulty being near less familiar foods (i.e. food being prepared, on table)

___ 6. Difficulty eating foods of varying flavors, textures, and smells

___ 7. You are highly specific about foods you will eat – for example, needing a food prepared a certain way or only accepting a certain brand of a food

___ 8. Experience difficulty using a straw, utensil, and/or cup

___ 9. Experience fatigue with eating (i.e. eats only small portion, has a tendency to graze rather than eat larger meals)

___ 10. Would describe the pace of my eating as too slow or too fast as compared to others

___ 11. Feel like I have sloppy eating habits

___ 12. Have a tendency to overstuff my mouth when eating

___ 13. Difficulty eating in different environments or with different people (i.e. restaurants, friend's homes)

___ 14. You experience heightened levels of stress around mealtime

___ 15. You exhibit challenges during mealtime that impact your enjoyment of mealtime

___ 16. You exhibit challenges during mealtime that impact the enjoyment of mealtime for others (i.e. friends, family members).