

FEEDING AND EATING

Eating and mealtimes

A guide to early eating experiences



Speech Pathology



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When to start solids

Babies are often ready to start solids by around 6 months of age. Your child's healthcare professional might recommend that your child starts solids at a different age.

Generally babies are ready to start puréed solids when they:

- Can sit up on your lap with support.
- Want to put toys and other things in their mouth.
- Show an interest in food (e.g. watches you eat, reaches for your foods).
- Open their mouth when food is presented on a spoon.

IMPORTANT

At 6 months of age, some children might be ready for puréed solids even though they are not doing the things listed above.

When first trying foods, babies will usually move their tongue in and out. This is an expected part of feeding development, not a sign of food refusal. It is usually a response to a hard object (e.g. a spoon) being in their mouth.

For more information about **when** to introduce solids, speak to your maternal and child health nurse or visit the Raising Children Network website.

Some gagging is expected when children are learning how to eat. A child might gag just because there's too much food in their mouth, or when they are getting used to different sensations or textures in their mouth. Frequency of gagging should reduce once a child is happier and had practice with the new food/food texture.

IMPORTANT

Never force or push a child to eat. This can create negative experiences and memories around eating that can lead to refusing foods.

Position is important

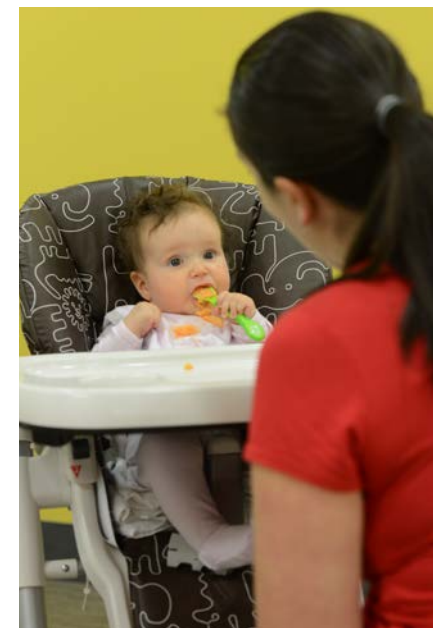
Eating and drinking are easier when we are seated and positioned well. Children can become tired or less focused on eating if they have to think too much about supporting themselves for eating.

Good positioning includes:

- Upright, straight head and body in the middle.
- Hips and knees bent at about a 90 degree angle.
- Some children might benefit from positioning the high-chair to about a 30 degree recline whilst keeping a 90 degree angle at the hips, knees and head.

If sitting in a highchair or at a small table:

- Encourage feet to be flat on a stable surface.
- The tray or table should be at a level that allows your child to reach for things easily.
- Place firmly rolled-up towels to provide your child with additional support in her high chair. Consider whether your child needs extra support under her bottom, to lift her up or, at her side to help her stay in the middle.



If a child is not upright, stable and supported, swallowing and independent feeding can be difficult and unsafe. If your child is too small for a high chair or not yet sitting by themselves, try feeding on your lap or in a rocker that does not move.

More than swallowing

We use our mind, all of our senses and different parts of our bodies for eating. Eating is more than just tasting and swallowing.

There are many steps taken before a child is happy to eat something new. This might happen quickly or slowly.

Here are some of the steps that lead up to eating:

- We think about and learn about eating using our minds (e.g. learning how to feed ourselves). Our brains need to be ready for change when introducing new foods.
- We can be emotional about food—we love some foods and don't like others.
- We like to share food with others—eating is a social experience.
- We learn about our culture through eating.
- We feel hungry or full with our stomach and brain.
- We use our bodies, legs and arms to sit and be physically comfortable and safe to swallow.



- We see food colours, shapes, sizes and textures with our eyes. We also see things in our eating environment.
- We smell food with our nose. Smells also help us remember foods and experiences.
- We touch and feel food with our hands and mouth (and sometimes the rest of our body!).
- We taste food with our tongue.
- We hear biting and crunching sounds with our ears. We also listen to people and sounds around us when eating.
- We swallow food with our mouth, throat and food pipe (oesophagus).

IMPORTANT

Some children might be particularly sensitive to one or more of these senses. This can be for a number of different reasons, such as upsetting eating experiences.

A social relationship

Eating is a social and cultural relationship. It is a time for learning and part of growing up! A child and the person feeding her form a relationship in the moment and over time. Babies and children learn and remember a lot about mealtime experiences.

Any relationship has roles and responsibilities and the eating relationship is no exception. It is important to respect your child's role in eating by responding to their signals or cues. The table below shows the different responsibilities during mealtimes.

Although each culture and family is different, usually parents can control **what** a child has to eat but the child controls **how much** (and everything else!).

The table below is based on Ellyn Satter's 'Division of Responsibility in Feeding'. For more information about the feeding relationship, visit the Ellyn Satter Institute website.

As with any relationship, communication is important. See page 13 for resources about mealtime communication.

	Parent's responsibilities	Child's responsibilities
Infant	What food or drink is offered	How much and everything else
Older babies moving towards family foods	What food or drink is offered Moving towards responsibility of when and where child eats	How much and whether to eat
Toddlers through to adolescents	What, when, where	How much and whether to eat



New textures and foods

A NOTE ABOUT NUTRITION

Visit The Raising Children Network website for information about nutrition, and recommended foods for growth and well-being.

The information below is about the feel (texture) of the food only.

As your child seems ready for change, try new food textures. This can happen quite quickly! It is important to be aware of what your child is doing rather than focusing on her age.

There is no set order or timeline for introducing different textures. However we know that exposure to a variety of healthy foods and textures before 12 months of age can:

- Assist with skills for eating, drinking and talking.
- Promote long-term, healthy eating habits.

More textured (e.g. minced, chopped or 'lumpy' foods) should be introduced between 6-10 months of age. This may reduce the risk of feeding difficulties later.

The chart on the next page provides a **general** guide for introducing different food textures. The suggestion here is to move from a smooth purée, to a mash, progressing to lumpy mash/minced/chopped foods, to soft chewable foods. Other textures (e.g. finger foods) can be introduced along the way. You may prefer to introduce different textures at an earlier stage of development, depending on your child's interest, what they can manage and your preference.

Don't give small, hard foods to babies and children. This includes nuts, small pieces of hard uncooked vegetables, foods with skin (e.g. sausage, apple, grapes). These foods are difficult to chew and can cause choking if not chewed or controlled properly.

IMPORTANT

If you have medical advice regarding dietary restrictions, speak to your healthcare professional for ideas to ensure your child has experiences with different textures in a safe way. This may help her to accept different textures when she is older.

Table showing progression with different food textures through development. Note that the age for each stage is a guide only.

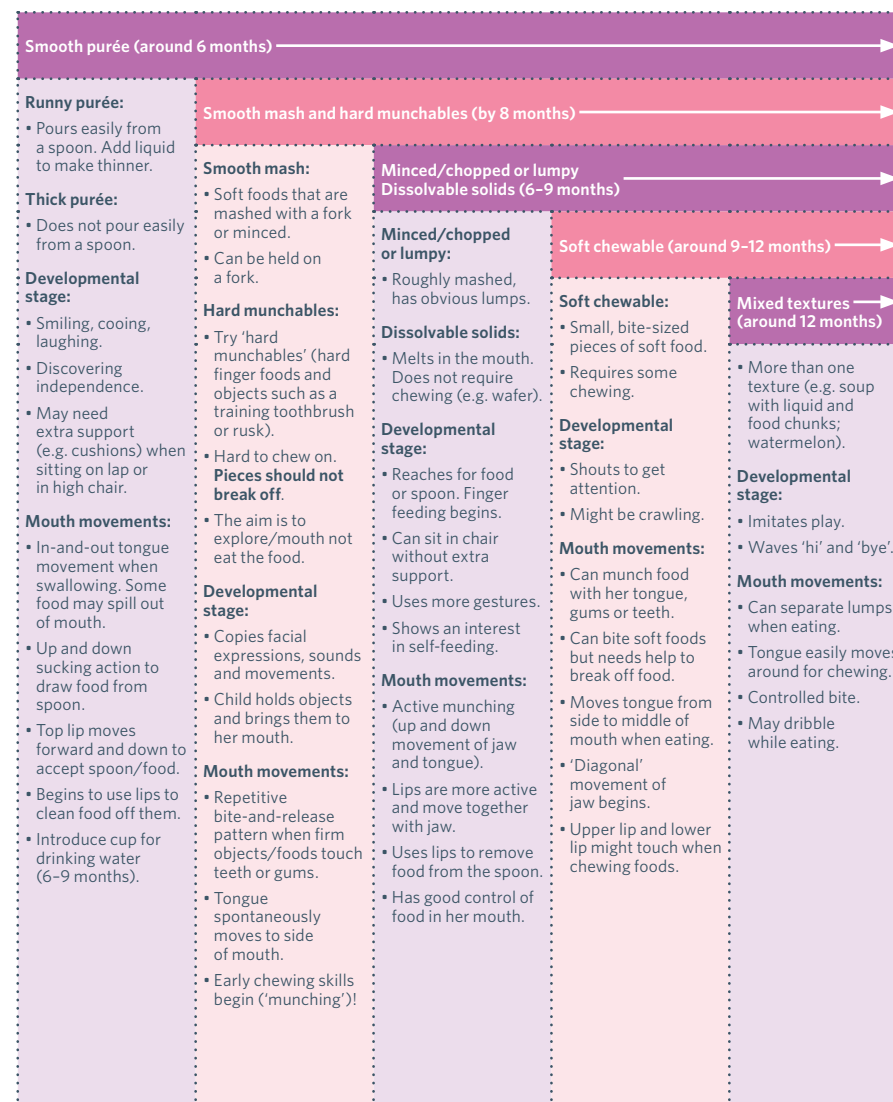


Diagram compiled using information from Evans Morris and Dunn Klein (2000) and Delaney and Arvedson (2008).



Introducing new textures — when, where, how?

When?

- Give your child food when she wants to eat.
- Choose a time when you and your child are happy and settled. If you are nervous, ask someone to be there for support.
- A child's appetite can be different each day. Offer new foods or textures as snacks. Or, offer a small amount at the beginning of a meal.
- Mealtimes should generally take around 30 minutes.
- Stop when your child tells you that they have had enough to eat.

Where?

- Limit the number of distractions for you and your child. Turn off the TV. Turn off your mobile phone. Children are very aware of things happening around them and remember, eating is a social activity!
- Position your child so that you can see each other and make eye contact.

How?

- Place some food in front of your child on a table or high chair tray.
- Let your child touch her food, spoons and forks. Let her hold her own spoon if she wants. Let her use her fingers to eat and give her a taste from your finger.
- Show your child how to dip training toothbrushes, spoons, fingers, teething rings or toys in food. Encourage her to dip as well.
- When offering food directly to your child, give her time to look at the food and wait until she has opened her mouth.
- Let your child decide how fast she wants to eat. When giving finger foods, just offer one piece at a time at first. This way your child will not try to overfill her mouth.
- Make sure you eat the food as well! Children learn a lot from watching others enjoy the food they are eating.
- Talk in a calm and encouraging way. Be patient. If you are calm, she may feel safer.
- Offer new textures to the side of her mouth on her back gums to encourage chewing.

- Avoid constant wiping and scraping with bibs and spoons. This can be frustrating for your child and interrupt her eating experience.
- Avoid using 'bribes' or distractions to encourage your child to eat.
- **Don't force or push your child to eat!** Children like to have control over what goes in their mouth. A child might gag and possibly vomit if something goes in their mouth before they are ready for it.

IMPORTANT

Always stay with your child when she is eating, especially when trying new foods and textures in case of choking.

A note about food refusal

- If your child refuses, don't worry! Try again in 2 or 3 days. Some children take 10–20 times of tasting the same food/texture before they will eat the new food happily.
- Food refusal is very common and does not necessarily mean they do not like the food. A child might refuse because they think that the reaction you give in response to their refusal is entertaining or interesting.

For more information about food refusal, see the 'fussy feeding' article on the Raising Children Network website.



Helpful resources

The Raising Children Network website has useful information and tips about feeding, including:

- **Independent feeding:**
http://raisingchildren.net.au/articles/towards_independent_eating.html/context/232
- **Messy eaters:**
http://raisingchildren.net.au/articles/messy_eaters.html
- **Fussy feeding:**
http://raisingchildren.net.au/articles/fussy_eating.html/context/729
- **Information about introducing solids and healthy food ideas:**
[http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/Eating_tips_for_children_\(1\)_babies?open](http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/Eating_tips_for_children_(1)_babies?open)
- **Ellyn Satter Institute:**
<http://www.ellynsatterinstitute.org/>
- **New Visions website, Suzanne Morris Evans:**
<http://www.new-vis.com/index.htm>
- **The Royal Children's Hospital, Speech Pathology:**
<http://www.rch.org.au/speech/>

Other resources

- Maternal and Child Health Line (24 hours)
Telephone 132 229
- Parentline (24 hours)
Telephone 132 289
- Dietitians Association of Australia
Telephone 1800 812 942

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