

Eating well: the first year

A guide to introducing solids and eating well up to baby's first birthday





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This resource is provided for information only and individual advice on diet and health should always be sought from appropriate health professionals.

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Photo resources

For more information about photo resources to support good nutrition from pre-conception to five years, see the website www.firststepsnutrition.org

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Contents

Introduction	5
The first 6 months of life	8
Eating well for infants from 6 months	14
Introducing foods to infants at about 6 months	22
General tips for eating well in the first year of life	40
Eating well for 7-9 month olds	49
Example meals for 7-9 month olds	53
Eating well for 10-12 month olds	81
Example meals for 10-12 month olds	85
Additional information	119
Plates and bowls used in this resource	120
Good sources of vitamins and minerals	122
Resources	124
Index	127



Introduction

This resource provides some key information about feeding in the first 6 months of life, and shows the sorts of foods to introduce to infants at around 6 months of age, and the amounts of different foods that, alongside breastmilk or infant formula, will meet the nutritional needs of infants aged up to 12 months.

Why have we produced this resource?

This visual resource illustrates how the dietary needs of infants from 6 months to 1 year can be met. Infants need enough energy (calories) to grow and be active, and enough nutrients (protein, fat, carbohydrate, vitamins and minerals) to ensure that they remain healthy, fight infections and learn effectively. Experts have calculated the amount of energy and the amounts of individual nutrients that they think infants need. These are known as 'dietary reference values'. This resource gives information on how the dietary reference values for infants can be met in practice as babies have food, alongside breastmilk or formula milk, in the first year of life. At this age it's important to introduce a range of tastes and textures, and allow infants the opportunity to feel, taste and recognise foods and flavours and to move towards eating patterns that will ensure they enjoy a healthy second year of life and beyond.

What does this resource contain?

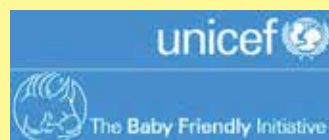
The resource contains:

- Information about how eating is part of an infant's developmental journey
- a summary of the key principles of eating well for infants up to the age of 12 months, and
- some example meals and finger foods to show how the dietary needs of infants can be met.

Who is it for?

This resource has been designed for all those who support infants to eat well. This includes midwives, health visitors, child carers, family and children's centre workers, nursery nurses, dietitians, registered public health nutritionists, public health teams, community food workers, GPs and paediatricians, dentists and oral health teams as well as parents and families themselves.

The UNICEF UK Baby Friendly Initiative is designed to support breastfeeding and parent infant relationships by working with public services to improve standards of care. This resource can be used by health workers in any setting that has been accredited as Baby Friendly.



The first 1000 days

The first 1,000 days – that is, the nine months of pregnancy and the first two years of the baby's life – are seen as a critical window of opportunity to get food and nutrition right for every individual around the world. The nutrition of women and children in developed countries is as important as anywhere else and many parents appreciate this period as one where they can make the most important contribution to their child's healthy future. The concept of the first 1,000 days – along with clear information about how good nutrition can be provided during this time – is useful for those supporting families.

Healthy Start

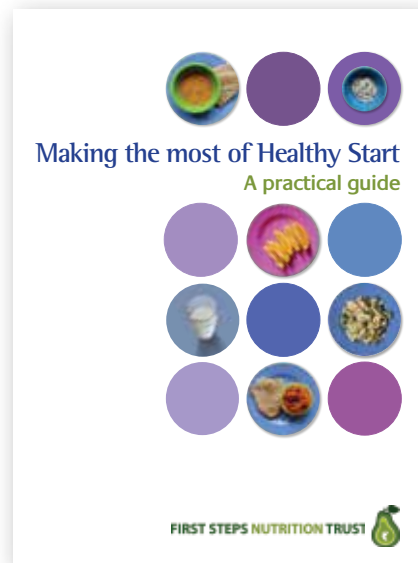
Healthy Start is the name for the UK welfare food scheme that aims to improve the health of pregnant women, young mums and mums-to-be, and families on benefits or low incomes.

All pregnant women and new mothers on the Healthy Start scheme are given free Healthy Start vitamins which contain folic acid and vitamin D to help prevent spina bifida and rickets in babies, and vitamin C for general good health. Women who are supported by the Healthy Start programme are eligible to receive free Healthy Start vitamin tablets during pregnancy and until their child is one year old. These are designed to be suitable for breastfeeding women.

Currently, children aged from 6 months to 4 years in families eligible for Healthy Start can also get free vitamin drops. Breastfed babies should be given vitamin drops from 6 months of age, or in some areas they can be recommended from 1 month of age. In some parts of the UK, Healthy Start vitamins are free to all pregnant women, breastfeeding women and young children.

Healthy Start also provides food vouchers which can be used to buy plain milk, and fresh and frozen fruit and vegetables. For a guide on *Making the most of Healthy Start*, see www.firststepsnutrition.org

For more information about Healthy Start, see www.healthystart.nhs.uk or www.healthystartalliance.org



The first year: a simple guide to eating well

0-6 months

Babies just need breastmilk (or an appropriate first infant formula). If you are concerned your baby may be hungry or starts to wake more often, talk to your health visitor or a breastfeeding counsellor who can give you support on how to maximise your breastmilk or look at the milk feeds you give. Changes in a baby's sleeping patterns before 6 months of age do not mean they are hungry or need solids, and are a normal part of development. Evidence shows that a baby's waking and sleeping patterns are not related to whether they have breastmilk or infant formula, but to their own unique development pattern. It is normal for breastfeeding to continue at night during the first year of life.

Around 6 months

Babies are likely to show the signs of readiness for the introduction of solids alongside breastmilk (or first infant formula) at about 6 months. Babies should be able to sit up and hold their head steady, pick up food and move it to their mouth, and swallow food. Every baby is different, and some may be slower than others to learn to handle food in the mouth, but a range of smooth foods and soft finger foods can be offered.

6-7 months

This period is all about introducing tastes and textures, learning to have confidence in your baby and the food they can manage, and gradually increasing the amount of solids you offer alongside breastmilk or first infant formula. You can include baby in mealtimes with others as soon as you start to introduce solids, and babies will learn from watching others eat and mimic their behaviour. You can introduce a small cup with water in at mealtimes. Encourage your baby to get involved in eating from the start. It can be a messy time, so be prepared!

7-9 months

Baby will be able to eat three meals a day alongside breastmilk or first infant formula. Meals can be mashed or with soft lumps and babies will enjoy having finger foods with meals, holding a spoon even though they cannot yet feed themselves, and being included at mealtimes with other people.

10-12 months

Baby will be enjoying meals which are chopped with bigger soft lumps, can manage a wider range of finger foods, and will become increasingly dextrous in their ability to pick up small pieces of food and move them to their mouth. They will use a cup with more confidence.

12+ months

By 1 year of age, breastmilk or infant formula will provide less energy and nutrients than the food your baby eats, and babies will move on to three meals and two nutritious snacks a day in the second year. Breastmilk still provides energy, nutrients and protection from infection to babies for as long as they are breastfed. Babies should be eating a wide range of foods at meals, show increasing independence in eating, and use a cup for any drinks other than breastmilk.

The first 6 months of life

Breastmilk

Breastmilk meets all the nutritional needs for infants in the first 6 months of life and protects both mum's and baby's health.

Breastmilk is uniquely suited to a human baby. Its nutritional composition and the many special 'bioactive' factors it contains have allowed human populations to survive and develop for many generations.

It is impossible to make a substitute for breastmilk as its composition is dynamic – that means it is a living substance that changes in composition during feeds and as babies grow and develop. It is unique to each mum for her baby and for the environment in which they live. There are many hundreds of bioactive molecules in human milk that cannot be reproduced. Most of these protect babies from infections and help them develop a strong immune system for the future.

Breastmilk contains all the fluid, energy and nutrients a baby needs, as well as many important factors that are unique to human milk. These include:

- immunoglobulins and anti-infective agents that protect the infant from infections
- lactoferrin – a protein that helps babies absorb nutrients and has strong anti-bacterial properties
- special fatty acids which promote growth and development, and
- anti-viral factors, anti-bacterial substances and living white blood cells to offer protection against disease.

Breastfeeding is... good for baby

Breastmilk is the natural food for a baby and provides the baby with complete nutrition. The composition of breastmilk alters to meet the changing needs of babies, whether that be during the day or over a period of time. Breastmilk has the unique capacity to respond to an infant's immediate environment, providing active immunity from micro-organisms and pathogens, and this is enhanced by mothers and babies keeping in close contact with one another during breastfeeds. Women report that breastfeeding can help build a strong bond between a mother and her baby, and many take immense satisfaction from seeing their baby grow and develop, knowing that they have been personally responsible.

Breastfeeding has many advantages for babies:

- Breastfed babies are less likely to get gastrointestinal infections leading to diarrhoea and potentially to dehydration. This is one of the most common reasons a baby may visit hospital in the first year of life.
- Other infections – such as respiratory infections, ear infections and urinary tract infections – are all less common in breastfed babies.
- Long-term conditions such as overweight and obesity, coeliac disease, cardiovascular disease and type 1 diabetes are less common in later life in babies who were breastfed.
- Many other conditions have also been shown to be less common in breastfed babies, such as: sudden infant death syndrome (SIDS); allergic diseases such as asthma and eczema; leukaemia; and constipation.

Good for mum

Breastfeeding also benefits a mother's health.

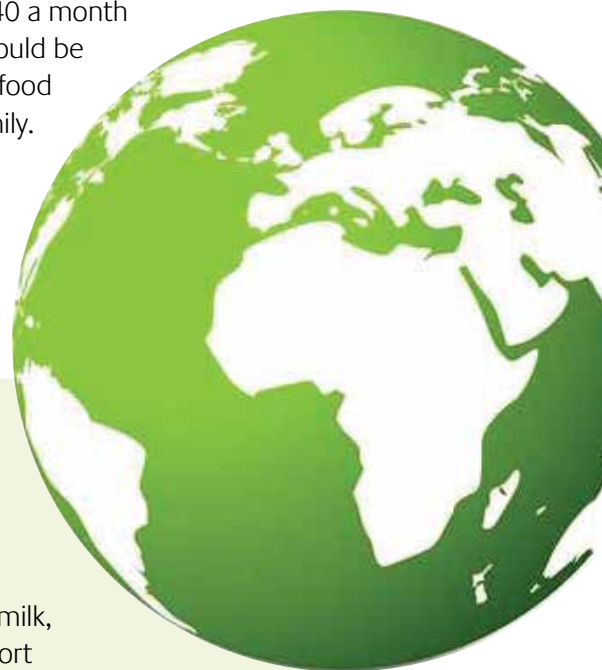
- Breastfeeding mothers have a lower risk of:
 - breast cancer
 - ovarian cancer and
 - hip fractures.
- Mothers who breastfeed have better bone mineral density in later life.
- Mums are also more likely to get back to their pre-pregnancy weight if they exclusively breastfeed for 3-4 months and more.



Good for everyone

There are also financial benefits to the family, as well as benefits to the environment, when a woman chooses to breastfeed.

- The dairy industry which supplies the cows' milk protein and lactose used in most infant formula is a major contributor to greenhouse gas emissions, and climate change, worldwide.
- Making infant formula in factories requires a considerable use of natural resources and energy. Energy is also needed to transport the infant formula to retail outlets.
- Breastmilk needs no packaging.
- Breastfeeding requires no bottles or teats.
- No heat energy is needed to make up breastmilk or wash feeding equipment.
- Breastmilk leaves no waste.
- Infant formula in a baby's first year is likely to cost at least £40 a month
 - money which could be spent on healthy food for the whole family.



Women should be encouraged to continue breastfeeding throughout the first year of their baby's life, and for as long after that as they choose to. Continued breastfeeding has health advantages for both mums and babies.



To find out more about breastfeeding and breastmilk, and for details of helplines and resources to support breastfeeding mothers – including our resource *Breastmilk and breastfeeding: A simple guide* – see www.firststepsnutrition.org

Vitamins for breastfeeding mothers

All breastfeeding women should take a vitamin D supplement every day throughout the period during which they are breastfeeding. Healthy Start vitamins, which include vitamin D, are suitable for most women including vegetarians and are halal, but are not suitable for vegan women.

The Vegan Society produces a supplement called Veg1 – which contains riboflavin, vitamin B6, folic acid (200 micrograms), vitamin B12, vitamin D (10 micrograms), iodine and selenium – and which is suitable for breastfeeding women. (See page 126 for contact details for the Vegan Society.) The vitamin D supplement Vitashine is also suitable for breastfeeding vegan women and can be ordered through pharmacies.

Storing expressed breastmilk safely

Mothers who wish to provide expressed breastmilk for their babies and children in early years or other settings should be encouraged to do so. It is important that milk is stored safely and clearly labelled. Up-to-date information on how to store breastmilk safely can be found at www.nhs.uk

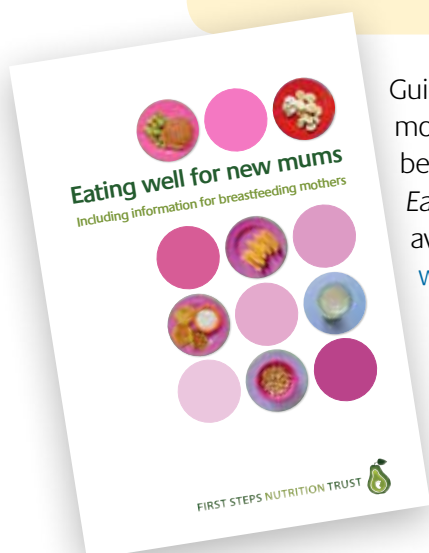
Breastmilk must always be stored in a sterilised container. It can be stored:

- for up to five days in the back of the fridge at 4°C or lower
- for up to two weeks in the ice compartment of a fridge, or
- for up to six months in a freezer.

If the milk has been frozen, defrost it in the fridge first. Once it's defrosted, use it straight away. Do not re-freeze milk once it has been thawed.

Expressed breastmilk provided for babies in childcare should be clearly labelled with the child's name and the date, stored in a refrigerator and be used only for that child. Any expressed milk left over at the end of the day should be returned to the parent or guardian.

Parents can be recommended to seek further advice on expressing and storing breastmilk from a health visitor or breastfeeding counsellor.



Guidance on how all new mothers can eat well can be found in our resource *Eating well for new mums*, available at www.firststepsnutrition.org

Supporting women to breastfeed

Childcare settings and carers should support breastfeeding mothers and encourage them to continue providing breastmilk. Guidance from the UNICEF UK Baby Friendly Initiative (see page 5) suggests that staff in children's centres and all those working towards Baby Friendly status in the community should ensure that parents' experiences in early years settings include:

- support to pregnant women to recognise the importance of early relationships to the health and wellbeing of their baby
- protection and support of breastfeeding in all areas of the service, and
- being supported to have a close and loving relationship with their baby.



Vitamin supplements for breastfed infants

Currently the advice is that all breastfed infants should receive vitamin drops from 6 months of age. Healthy Start vitamins, which contain vitamins A, C and D, are recommended. Healthy Start vitamins are suitable for vegetarians, and are halal.

If a mum is breastfeeding but might be at risk of low vitamin D status (either because she didn't take vitamin D in pregnancy, because she is known to have low vitamin D status, because she rarely exposes her skin to sunshine or because she is considered at clinical risk for other reasons), then Healthy Start vitamin drops (which contain vitamin D) are likely to be recommended for the baby from 1 month of age.

For information on how vegan families can support infants and children in the early years, see the resource *Eating well: vegan infants and under-5s*.

Recommendations for all breastfed babies to receive Healthy Start vitamin drops (or another source of vitamin D) in the first 6 months of life are currently being considered. Check what the local recommendations are in your area.



Infant formula and other milks

For up-to-date information on infant milks, see our resource *Infant milks: A simple guide to infant formula, follow-on formula and other infant milks*, available at www.firststepsnutrition.org.

This includes lots of frequently asked questions about different infant milks and whether they are useful.



A simple guide to choosing milks for infants

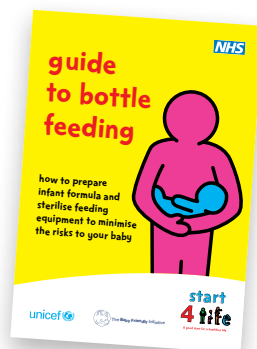
✓ = Safe to give. ✗ = Do not give this milk.

	Infants 0-6 months	Infants 6 months – 1 year
Breastmilk	✓	✓
Full-fat cows' milk (or goats' milk, sheep's milk or unsweetened fortified soya milk, oat milk or coconut milk) as main milk drink	✗	✗
Infant formula suitable from birth (first milk) (cows' or goats' milk based)	✓	✓
Infant formula marketed for hungrier babies, (cows' milk based)	Not recommended	Not recommended
Specialist formula available over the counter: anti-reflux, lactose-free, partially hydrolysed, and comfort milks	Only use under medical supervision	Only use under medical supervision
Soya protein based infant formula	Only use under medical supervision	Only use under medical supervision
Follow-on formula (cows' or goats' milk based)	✗	Not recommended
Goodnight milk	✗	Not recommended
Growing-up milks and toddler milks (cows' milk, goats' milk or soya milk based)	✗	✗
PaediaSure Shake for fussy eaters	✗	✗
Rice milk – Do not give to any children under 5 years of age.	✗	✗

Making up infant milks safely

It is essential to follow the manufacturer's instructions carefully when making up infant formula, as milks that are too concentrated can provide too much energy (calories) and too little fluid, and milks that are too dilute may not provide enough energy (calories) and nutrients. If milks are made up to be more concentrated than they should be, this can lead to overweight or potentially dangerous dehydration.

Powdered milks are not sterile. There are clear guidelines for parents and carers on how to make up infant formula safely, using water at a temperature of at least 70°C to kill any bacteria, in *Bottle feeding advice* on the NHS Choices website at www.nhs.uk. Or you can download a copy of the booklet *Guide to bottle feeding* from www.gov.uk/government/publications



Vitamins for formula-fed babies

Babies who are formula-fed and who have less than 500ml of formula a day should have vitamin drops. Healthy Start vitamins containing vitamins A, C and D are those recommended. These are available in pharmacies at a very reasonable cost, or free of charge through the Healthy Start scheme for eligible families. In some areas they are free to all.

Foods that should not be given in the first 6 months

If introducing solid foods before 6 months of age, there are some particular foods that must be avoided.

As well as all the other foods and drinks not recommended in the first year of life (see page 18), infants under 6 months should not be given any of the following foods:

- foods containing gluten – such as bread, pasta or chapattis
- nuts and seeds – including peanuts, peanut butter and other nut spreads
- fish and shellfish
- eggs
- liver
- cows' milk
- soft and unpasteurised cheese.

These are all good foods to introduce after 6 months, but there is some concern that early introduction may be unwise when the gut is still developing.

Eating well for infants from 6 months

Introducing foods to complement breastmilk or infant formula from 6 months

Complementary feeding is the term given to the introduction of foods other than breastmilk (or infant formula) to an infant. We also call it 'introducing solids'. In the UK it is recommended that the addition of foods other than milk start at about 6 months of age. In the first six months of life, infants can get all the fluid and nutrients they need from breastmilk (or from correctly made up infant formula), and there is no need to introduce other foods before an infant's gut and swallow reflexes are fully ready. If parents or carers think an infant needs complementary foods before 6 months (26 weeks) of age, they should talk to a health visitor or other qualified health professional.

What is the aim of introducing foods other than milk?

We know that early experience with a variety of flavours leads to more ready acceptance of new foods later in life. We know that the transition from a single foodstuff to a wide variety of foods in the first year requires a baby to associate food flavours with the experience of meals and eating, and that babies will often reject a new flavour but then learn to accept it after repeated exposures.

The eating patterns and food choices within a family will shape children's preferences and food acceptance patterns. Overweight tracks in families from parents to children, and it is thought that this may be partly due to early patterns of exposure to foods and eating patterns. The social context of how children eat as an infant is also important, because the eating behaviour of people around them serves as a model for a developing child, and we know role models can have powerful effects on food selection.



Infant development and readiness for foods other than milk

Every baby is different, but there are three clear signs which, together, show that a baby is ready for some solid foods alongside breastmilk or infant formula. It is very rare for these signs to appear together before 6 months of age.

- Baby can stay in a sitting position and hold their head steady.
- Baby can co-ordinate their eyes, hand and mouth so that they can look at the food, pick it up and put it in their mouth all by themselves.
- Baby can swallow food. Babies who are not ready will push food back out of their mouth. However, if a baby is given a smooth, purée-type food, it is difficult to spit this out once in the mouth, so people may mistake involuntary swallowing of these foods with the ability to swallow food by choice.

For simple information on introducing solid foods at around 6 months of age see the booklet *Introducing solid foods: Giving your baby a better start in life*, available at www.nhs.uk/start4life/documents/pdfs/introducing_solid_foods.pdf



Signs that might be mistaken for a baby needing solid foods

People may mistake other signs that a baby needs solid foods. Research suggests that families often mistake the following as signs of readiness for solids:

- baby waking in the night when they have previously slept through
- the need for extra milk feeds; or
- signs such as chewing on their fist.

However, these are just normal infant behaviours as babies grow and develop.

Families often perceive baby boys to be 'hungrier' earlier than girls and may mistake a baby that is bigger than its peers as needing food at a younger age.

Starting solid foods won't make a baby any more likely to sleep through the night, and extra feeds of milk are usually enough until the baby is developmentally ready for other foods.

Frequently asked questions about introducing solid foods

My mum says I was given food when I was 3 months old and was fine. When did the advice change to not offering food until about 6 months of age?

For a number of years parents and carers were advised to introduce foods at about 4 months of age, and it was quite common for people to introduce foods even earlier, as people thought this would help babies sleep better or grow faster. Recommendations to offer food from about 6 months of age have been in place for over ten years in the UK as we now know that this will give a baby the best chance of good health throughout their life. It can be confusing, as manufacturers still market some foods as being suitable from 4 months. However, the World Health Organization and the Departments of Health in the UK are clear that everyone should recommend introducing food from about 6 months.

My baby was born prematurely. How do I know when he will be ready for solids?

Readiness for solids should be the key sign of when any baby is ready for solid foods. Babies should be able to sit up and hold their head steady, pick up food and move it to their mouth, and swallow food. If a baby is born weeks or months before their due date, they may not show the signs of readiness as soon as babies who are born full-term. Your health visitor will support you to make sure solids are not introduced too early, or too late. Premature babies may take longer to get used to foods, and meals may be longer and more messy to start with as their feeding skills may be slightly less well developed.

Why has the advice on the best age to offer babies solid food changed?

The recommendation to offer food at around 6 months of age is based on research about how a baby grows and develops, as well as what we know about the best thing for digestive health and babies' kidneys. Introducing food too early has no advantages and may increase the risk of infection and illness.

My baby is on the 95th percentile for weight and height, so will he need to start on solids earlier?

It doesn't matter how big your baby is, the development of his digestive system and kidneys will be at the same rate as for smaller babies. Wait for the signs of readiness for solid foods at about 6 months of age.

My 5 month old baby has started waking at night. Does this mean she needs solids now?

Babies have several growth spurts in the first few months and waking in the night may mean that they need more energy and nutrients at this time, but they can get those from breastmilk or infant formula feeds. Talk to your health visitor about maximising your breastmilk if you are breastfeeding. Growth spurts don't usually last very long and babies can soon settle down again. Research has shown that introducing solids has no impact on how long a baby sleeps for. That is down to each unique baby and his or her development and personality.

I have heard that, if I give foods earlier, my baby will have fewer allergies and be a less fussy eater. Is this true?

Breastfeeding protects babies from developing allergies. All the current evidence we have has led to recommendations that babies should be exclusively breastfed (or given a first infant milk) for about six months, and then solids should be introduced in line with baby's signs of readiness for solid foods. There is no evidence that early introduction of foods before 6 months of age is beneficial in preventing the development of allergies.

What is 'baby-led weaning'?

Most infants are introduced to complementary foods both by being offered small tastes of new foods on a spoon, and by being encouraged to hold foods that they can taste themselves. In 'baby-led weaning', food is not given to the baby on a spoon at all. Instead, babies are encouraged to explore for themselves all the food on offer to them and to eat whatever they can get into their mouths independently. It is suggested that: babies who are spoon-fed may be given more to eat than they would choose; that spoon-feeding purées delays the experience of chewing; that babies fed food they dislike on a spoon may become fussy eaters; and that allowing full independence in eating encourages the development of a range of motor skills.

Encouraging babies to be involved in mealtimes, to eat similar foods to those enjoyed by others at the table, to hold finger foods and spoons and to try to feed themselves are all recommended practices. Offering babies tastes of first foods on a spoon is, however, a good way for many babies to experience a wide range of tastes. Babies may spit food out when they first try it as the taste and texture may be unfamiliar, but trying a whole range of tastes and textures during the second six months of life is important if we want children to eat a range of different foods as toddlers. Few people would disagree with many of the principles of baby-led weaning, but if babies are less independent in their eating, offering foods on a spoon at mealtimes as well can be encouraged during the first year of life to ensure that they eat well and get all the nutrients they need. There is no greater risk of choking when babies feed themselves than when they are fed by spoon.

Introducing first foods: a simple guide

What to eat

Suitable foods

First foods for babies over 6 months of age can include a wide range of unprocessed foods: vegetables, potatoes, cereal foods (such as rice, oats, polenta, semolina, pearl barley), pulses (peas, beans and lentils), meat, fish, eggs, tofu, ground nuts and seeds, and fruits. See pages 24-39 for examples of suitable first foods to give.

- Never add salt, sugar or artificial sweeteners to foods for infants.
- Naturally sweet fruits (such as apples or bananas) or vegetables (such as carrots, sweet potatoes or butternut squash) should be used to sweeten foods rather than adding sugar.
- If using commercial foods, follow the manufacturer's instructions carefully. However, these foods are usually expensive, less nutritious, sweet and bland in taste and too smooth compared to foods you can easily make yourself.

Suitable drinks

- The only drinks that are recommended for infants in the first year are breastmilk or an appropriate infant formula, and water (see page 12).
- Whole animal milk or calcium-fortified unsweetened milk alternatives (but not rice milk) can be used in cooking for children from 6 months, but should not be used as the main drink until after 1 year of age.

Foods and drinks that are not suitable in the first year of life

Foods that are not suitable

- Ready meals or take-away foods
- Processed meat or fish dishes (for example, ones covered in breadcrumbs or batter, canned meats, smoked or cured meat and fish) that may be high in salt
- Savoury or salty snacks
- Very high-fibre foods (such as high-bran-type cereals)
- Any foods with special ingredients, designed for adults – for example, low-fat or low-sugar products, or fortified products
- Artificially sweetened foods
- Foods with the additives E102, E110, E122, E124 and E211
- Honey
- In addition, avoid whole nuts or chunks of food such as apple that might be a choking risk. (For more on food safety, see page 46.)

Drinks that are not suitable

- Soft drinks, squashes, fruit juices or cordials, either with or without added sugar
- Drinks with added caffeine or stimulants
- Artificially sweetened drinks
- Drinks with the additives E102, E110, E122, E124 and E211
- Rice milk or rice drinks
- Any types of tea or coffee
- Alcohol

See also the list of foods that should not be given before 6 months, on page 13.



How to eat

How much food to offer

The aim of first foods is to get infants used to new tastes and textures. Every baby will be different, and some will enjoy food from the beginning, some may help themselves to food straight away and be independent eaters quite quickly, and some may manage several spoons of newly introduced foods, while others will take longer to get used to new tastes.

Milk will provide the majority of energy (calories) and nutrients when complementary foods are first introduced. The amount of food can be gradually increased over the first few weeks until babies are managing to eat in a pattern similar to that shown for infants aged 7-9 months on page 50. Babies will automatically drink less milk as their food intake increases.

Texture and flavours

Some babies will be ready and eager to hold food, feed themselves and enjoy a variety of foods of different textures from 6 months of age. Some babies may need more encouragement to start on solid food, and offering smooth or mashed food on a spoon may be useful to get them accustomed to new textures and tastes. It can be useful to start new tastes with savoury vegetable flavours, as evidence suggests that babies introduced to single vegetable flavours over the first few days of complementary feeding are more accepting of vegetables in meals later on.

Avoid using pouches of ready-made puréed food, as these often mix up flavours and offer predominantly sweet tastes. They are often lower in nutrients than home-prepared foods and have a very smooth texture that most babies don't need if they start eating at 6 months. If using these foods, never let the baby feed directly from the pouch.

Never add any foods to a baby's bottle (such as cereal or rusks) as this can cause choking and confuse a baby's appetite.

Mealtimes

- At 6 months, babies should be able to sit up with some support and they should be in a sitting position when they are offered food.
- If you are offering a baby food on a spoon, sit opposite or close by and make eye contact as you do so. This means you can follow the baby's cues on when they are ready for the next spoonful.
- Avoid distractions at mealtimes, such as sitting a baby in front of a television, phone or tablet. Mealtimes are an ideal opportunity for interacting with baby and making conversation.
- Offer small amounts of food before milk feeds at mealtimes, and give individual tastes to start with, focusing on savoury foods.
- Don't be surprised if the baby initially spits the food out or appears to dislike it. New tastes take a little getting used to and you may have to offer a food between five and ten times before it becomes a favourite.
- Never force babies to eat. Allow them to go at their own pace, to handle food, and to start to feed themselves as soon as they wish.

Safety at mealtimes

- Always stay with babies during meals and keep an eye on what they are eating to make sure they don't choke.
- If using a highchair, make sure the baby is safely strapped in.

How to give drinks

From 6 months of age, infants should be introduced to drinking from a cup or beaker, and from the age of 12 months they should be discouraged from drinking from a bottle. It is best to use cups that are open-topped or which have a spout that is free-running, so that there is no need to 'suck'. Sucking drinks from a bottle teat or spout means the drink spends more time in contact with the teeth and this can lead to dental problems. Baby cups can be useful for introducing drinking from a cup as they can be held easily and offer a small volume of liquid.

Water given to children under 6 months should be boiled and cooled first, but tap water is fine for all infants over 6 months of age.

There is no need for drinks other than milk or water in the first year. Baby juices or baby herbal drinks are not necessary and they contain sugar so can damage baby teeth. For more on drinks, see page 18.



Baby teeth matter

It is important to protect a baby's teeth as soon as they start to have solid foods.

- Don't offer foods or drinks high in sugar.
- Never offer anything but milk or water in a bottle. Introduce a cup from 6 months.
- Never dip dummies in anything sweet, or pacify children with sweet foods.
- Begin to brush baby's teeth twice a day every day as soon as they appear. Use a small smear of fluoridated toothpaste.

Parents who have any questions about whether their baby may benefit from fluoride drops, can ask their dentist for advice, as the water may or may not be fluoridated in different areas.

Which milks are suitable from 6 months to 1 year of age?

The main milk drink throughout the first year of life should remain breastmilk or a first infant formula. It is important to dispel the myth that breastmilk is not important in the second six months of life. Both mum and baby will benefit from breastfeeding for as long as they both wish to do so.

Full-fat animal milk or an unsweetened, calcium-fortified milk alternative can be used in cooking for infants from 6 months of age, but are not suitable as the main milk drink as they do not have the right balance of nutrients a baby needs in this important phase of growth and development.

It is particularly important that rice milk is not given to children under the age of 5 years, as it has been shown to contain traces of arsenic and younger children may reach their acceptable daily intake of arsenic quickly as they drink relatively large amounts of milk for their body size.

Eating with others

Babies can be included in meals with others as soon as they start to eat solid foods. There is no need to make special foods for babies. The recipes in this book make good meals for people of all ages. The authors have made and tasted them all and can recommend them! More family recipes showing how meals can be adapted for mixed age groups, and suitable portion sizes for adults and children can be found in the *Eating well recipe book* available at

www.firststepsnutrition.org



Commercial baby foods

A range of products are marketed as baby foods suitable for infants in the first year of life. These may be soft, ready-prepared foods sold in jars and pouches, ready-to-mix packets of cereals and porridge powders, drinks, biscuits, snacks, yoghurts and fruit products. There is often confusion among parents and carers as to whether these products are necessary or beneficial for infants. Evidence suggests that many babyfood products are less nutrient-dense, are sweeter, and are of a different consistency to home-prepared equivalents. In the case of baby snacks and biscuits these are not needed in the diets of infants at all. Commercial baby foods are also very expensive and this is an important consideration when wastage may be high or where family budgets may be tight. We don't use any commercial baby foods in our examples of how infants can eat well.

Golden rules

The golden rules for introducing foods to babies, and for eating in the first year of life, are:

- **Offer simple and unprocessed foods** – Base meals and snacks around minimally processed and natural foods. Make sure children can see and touch the foods they are offered, and can connect food tastes to how things look and feel, so they can learn to choose foods for themselves.
- **Let baby get involved in the eating experience** – Take your time, and involve babies in meals as soon as they are ready for solids. Make eating a happy event. It is learning and play as well as a chance to provide energy and nutrients. Include baby in mealtimes with others whenever you can.
- **Avoid ultra-processed foods** – If there are more than a handful of ingredients on the label, put it back on the shelf.

Introducing foods to infants at about 6 months

Foods to introduce to infants from 6 months

At about 6 months of age, babies will be ready for solid foods alongside the breastmilk or infant formula that still provides most of their energy and nutrients. Some babies will happily eat finger foods and mashed foods, and may progress swiftly to a range of tastes and textures. Other babies may progress more slowly and start off on smooth foods given on a spoon alongside foods they can hold themselves, with the aim of moving on to mashed foods and other textures as they become more confident eaters.



Smooth foods can be prepared by cooking foods well, pushing them through a sieve, or blending them with a little breastmilk or infant formula – or with full-fat cows' milk if baby is over 6 months old. Some foods can be easily mashed to a smooth consistency. Smooth foods should have no big lumps, pips, seeds or skin.

Mashed foods are simply raw or cooked foods mashed to a smooth but slightly lumpy consistency. This can usually be achieved easily by mashing the food with a fork, using some breastmilk or infant formula – or some full-fat cows' milk if baby is over 6 months old – to aid the mash where needed.





Finger foods are pieces of food that babies can hold and use to feed themselves. Babies will often show their readiness to start having complementary food by showing an interest in holding foods and putting foods to their mouth, and it is important to encourage independence in eating. Babies are able to pick things up with their whole hand after 6 months and the best finger foods to offer are ones that are soft and easy to bite and chew. It can be useful to make the finger foods slightly bigger than a baby's hand, so that they can grip things in their fist. The size of an adult finger is a good guide.



Never leave babies alone when they are eating at any time, but pay particular attention when they are eating finger foods to make sure that they don't choke on any pieces that break off in their mouth as they develop their eating skills.

TIPS ON FINGER FOODS

- Make sure finger foods don't contain any pips, stones, tough skin or stringy bits.
- To start with, offer soft or cooked vegetables and fruit.
- Avoid whole grapes, chunks of apple or carrot, nuts and popcorn, as these are the foods babies are most likely to choke on. Also avoid small, hard foods and those that are in gelatinous pieces. Always stay with babies when they are eating.
- If you are offering raw food, make sure it is washed thoroughly.

Vegetables

Vegetables are good first tastes to introduce to infants. Try vegetables one at a time to start with, to introduce new flavours, and then try combinations. To thicken smooth or mashed vegetables, add potatoes or sweet potatoes. Make sure a wide variety of vegetable foods is offered and that foods from across the rainbow of vegetable colours are introduced into babies' diets. Brightly coloured foods will be attractive to infants, but there is no need to use expensive vegetables. Using vegetables in season and from local sources will be most cost-effective.

Never add salt or sugar to foods served to babies.

Smooth

Mashed

Finger food

AVOCADO



Smooth

Mashed

Finger food

BROCCOLI



Smooth

Mashed

Finger food

BUTTERNUT
SQUASH

Smooth

Mashed

Finger food



CARROT

Smooth

Mashed

Finger food



CAULI-FLOWER

Smooth

Mashed

Finger food



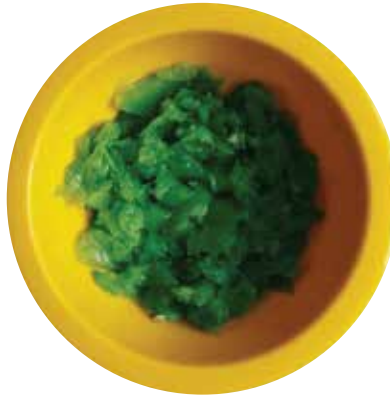
COURGETTE

GREEN BEANS

Smooth



Mashed



Finger food



MUSHROOM

Smooth



Mashed



Finger food



PARSNIP

Smooth



Mashed



Finger food



PEAS

Smooth



Mashed



Finger food



Smooth



Mashed



Finger food



RED PEPPER

Smooth



Mashed



Finger food



RUNNER BEANS

Smooth



Mashed



Finger food



SWEDE

Starchy foods

A range of starchy foods can be offered as first foods. These can be: starchy root vegetables such as potato, sweet potato, yam or manioc; rice; porridge made from oats; cereals such as pearl barley, semolina (ground wheat), or polenta (corn meal); or other cereals such as quinoa or millet. You can cook and mash rice, porridge and other cereals rather than buy expensive infant versions, and ground rice and semolina are smooth cereals when made up. Cereals can be mixed with breastmilk or infant formula – or with full-fat cows' milk if baby is over 6 months old.

Never add salt or sugar to food served to babies.



Smooth

Mashed

Finger food



POTATO

Smooth

Mashed

Finger food



SWEET POTATO

Smooth

Mashed

Finger food



MANIOC

SEMOLINA

POLENTA – Smooth

POLENTA – Finger food



Protein foods

These protein foods are also rich in other important nutrients.

Infants can be offered a good variety of protein foods such as meat, fish, eggs, beans, lentils and tofu.

Many of these foods are rich in iron and zinc, which are important nutrients for babies.

Well cooked eggs are an excellent first food as they are easy to prepare and easy to mash if that is needed. Tofu can be mixed with other foods as it mashes easily and has a smooth texture. Fish and meat can be introduced as first foods. Cook them well, check there are no bones or pieces of gristle, chop finely and then mix with breastmilk or infant formula – or with full-fat cows' milk (if baby is over 6 months old). Make them smooth through a sieve or in a mouli or mixer, or mash well. Pieces of well cooked meat and fish can also be offered as finger foods.

Never add salt or sugar to food served to babies.

Smooth

Mashed

Finger food

EGG



Smooth

Mashed

Finger food

CHICKEN



Smooth

Mashed

Finger food

LAMB



Smooth



Mashed



Finger food



PORK

Smooth



Mashed



Finger food



SALMON

Smooth



Mashed



Finger food



WHITE FISH

BUTTER BEANS

Smooth



Mashed



Finger food



RED LENTILS

Smooth



Mashed



Finger food



YELLOW LENTILS

Smooth



Mashed



Finger food



TOFU

Smooth



Mashed



Finger food



Dairy and dairy alternatives

Dairy foods, and calcium-fortified dairy alternatives, are good first foods to introduce to babies at about 6 months of age as they are naturally smooth, can be mixed with other tastes and textures, and don't require any preparation. Choose unsweetened full-fat milk yoghurt or milk alternative products, and avoid 'baby' yoghurts or fromage frais that are usually sweetened unnecessarily. For more information on vegan alternatives to dairy foods see the resource *Eating well: vegan infants and under 5s* at www.firststepsnutrition.org.

Plain full-fat milk yoghurt



Greek yoghurt



Cottage cheese



Plain soya yoghurt



Plain coconut yoghurt



Fruits

Once infants have accepted other savoury tastes, fruit can be introduced. Fruit will be accepted more readily than vegetables by most babies as it has a sweet taste. Cook fruits to soften them, or mash soft fruits. If making a smooth version, make sure the fruit is free of pips and skin. Any type of fruit can be used – canned in juice, frozen or fresh. If using canned fruit, avoid fruit canned in syrup. If fruits are naturally sour, add a sweeter fruit such as apple or banana to make it more palatable.

If serving fruit as finger foods, make sure the pieces are soft and manageable, and avoid chunks of apple or harder fruits.

Never add sugar or salt to foods served to babies.

Smooth

Mashed

Finger food

APPLE



Smooth/mashed

Finger food

BANANA



Smooth

Mashed

Finger food

CANNED PEACH



Smooth/mashed



Finger food



KIWI

Smooth



Mashed



Finger food



MANGO

Smooth



Mashed



Finger food



MELON

PEAR

Smooth



Mashed



Finger food



PINEAPPLE

Smooth



Mashed



Finger food



PLUM

Smooth



Mashed



Finger food



Smooth



Mashed



Finger food



RASPBERRIES

Smooth



Mashed



Finger food



STRAW-
BERRIES

Smooth/mashed



Finger food



WATER-
MELON

Finger foods for older babies

As babies learn to handle foods in their mouth, become more dextrous and learn to bite and chew, a range of finger foods can be offered. Some examples of finger foods for more confident eaters are shown here. Some babies will become confident eaters very quickly, while others might be developmentally slower, so follow each baby's cues. Always stay with babies and young children when they are eating and watch that they don't get into difficulty with any pieces of food they bite off.



Breadsticks



Toast



Macaroni



Carrots



Rice cakes



Cucumber



Green pepper



Sweetcorn



Okra



Tomatoes



Red pepper



Black grapes

General tips for eating well in the first year of life

Families can sometimes be anxious about introducing solid foods to babies. For example, they may worry about whether their baby can manage to swallow the food safely, whether they might have a reaction to a new food, whether they might like the food offered, or whether they will know how much food to offer.

Anxiety around introducing solids can mean that some families rely on soft foods for a longer period than needed, may offer a restricted range of foods, or may be unsure how to try new foods when a baby has initially shown disinterest.

Some of the questions and answers below may help families as they introduce solid food.

I have tried to offer my baby tastes of food on a spoon, but he just turns his head away.

If your baby is under 6 months of age, they might not be ready for solid foods yet. If they are about 6 months old and show the signs of readiness for solids (being able to sit up and hold their head steady, picking up food and moving it to their mouth, and swallowing food), keep offering tastes of foods at mealtimes on a spoon when they are alert and happy, but always wait for them to open their mouth. Give them finger food to hold as well, to get them interested in the tastes and smells of food. It takes a while for some babies to realise that food, as well as milk, can satisfy their hunger. Don't force a baby to eat. They will get the hang of it if you keep gently trying.

I have followed the advice on offering mashed vegetables as the first tastes but I am sure my baby just doesn't like things like broccoli as she makes a face and spits it out!

A baby will often grimace when trying a new food as it is unfamiliar, but that doesn't mean that they don't like it. Research suggests that it can take up to ten times of offering a food for a baby to accept it readily, but that if you do persevere with a range of flavours, starting with savoury tastes, this will make them a much better eater in the long run.

I am worried about my baby choking if the food is not very smooth.

Babies take different amounts of time to get used to lumps in food, but this is an important skill they need to learn. Try to offer a range of increasingly lumpy textures when they are 6 to 7 months old, and always stay with your baby so you can be sure they are not getting into difficulty. You may be surprised how well they manage to handle the food in their mouth and swallow it safely. There is no evidence babies choke more when feeding themselves, so let them get involved. For more information on avoiding choking, see page 46.

I get very anxious around feeding my baby at mealtimes, and am just not sure I'm doing it right.

If you feel anxious, talk to your health visitor or staff at your local children's centre, and they will give you tips for managing mealtimes and managing your own feelings. We know that when mums are stressed this can impact on how they feed their baby. So, if you feel you are not coping, that your baby is more difficult or fussy at mealtimes than other babies, or that you are not good at reading your baby's 'cues' around when they are hungry, ask for help.

Resources for helping and supporting families

The Institute of Health Visiting provides resources for both health professionals and for families, to support them around a range of parenting issues including eating well and dealing with emotional issues. See www.ihv.org.uk

In some areas, training in the HENRY programme will provide staff with skills to help parents to gain the confidence, knowledge and tools, as well the parenting skills, they need to adopt a healthy family lifestyle and support their infants and toddlers to eat well. See www.henry.org.uk

The Solihull Approach Training Programme can also empower health professionals in their work with families around emotional issues. See www.solihullapproachparenting.com



Food allergies

Food variety is important in a baby's diet but there is also a small chance that a baby may have one or more food allergies. Overall about 4% of children will have a true food allergy, but this will be higher in younger children. It is much more likely your baby will have a food or other allergy if they come from an 'atopic' family (a family where one or both parents have eczema, hayfever or asthma, or have food allergies themselves). Most children will grow out of food allergies, however, and it is important to seek advice if you suspect your baby has an allergy.

If babies are from atopic families, breastfeeding offers the greatest protection against allergy development.

There is no evidence to suggest that avoiding ingredients that either contain, or are themselves allergens during pregnancy, or giving these ingredients to infants before 6 months of age, or much later, will help prevent them developing a food allergy.

Introducing foods at 6 months to babies with a family history of allergies

Once infants reach 6 months of age, the following foods can be introduced carefully one at a time:

- cows' milk
- wheat
- nuts, ground nuts, or nut butters
- seeds, crushed seeds, or seed butters
- eggs
- fish and shellfish.

Initially give them to your baby in very small amounts and watch for any symptoms of an allergic reaction. This can be one or more of the following:

- diarrhoea or vomiting
- a cough
- wheezing or shortness of breath
- itchy skin or throat
- a rash
- swollen lips and throat
- runny or blocked nose, or
- sore, red and itchy eyes.

If you think a child is having an allergic reaction

If a parent thinks their child shows any symptoms that may be related to food allergy, suggest that they talk to their GP for advice, or call NHS Direct on 111 for non-urgent medical enquiries. In rare cases there can be a severe anaphylactic reaction that can be life-threatening. If you think a baby is suffering a severe allergic reaction, always call 999 and ask for a paramedic. You can find out more at www.nhs.uk/babyfoodallergy

Food for all

As populations become increasingly multicultural and multi-faith, some people's food choices for themselves, and their families, may lead to some foods and ingredients being avoided. Each individual will make their own choices regardless of common ideas about food restrictions and so it is important not to make assumptions about what people will, and won't eat. It is useful to remember that food suitable for vegetarians and vegans is suitable for most population groups. A guide to some of the food-related customs that may be commonly observed by different religious and cultural groups is shown below.

Food choices of different religious and cultural groups

	Jewish	Hindu*	Sikh*	Muslim	Buddhist	Rastafarian**
Eggs	No blood spots	Some	Yes	Yes	It varies	It varies
Milk/yoghurt	Not with meat	Yes	Yes	Yes	Yes	It varies
Cheese	Not with meat	It varies	It varies	Possibly	Yes	It varies
Chicken	Kosher	It varies	It varies	Halal	No	It varies
Mutton/lamb	Kosher	It varies	Yes	Halal	No	It varies
Beef and beef products	Kosher	No	No	Halal	No	It varies
Pork and pork products	No	Rarely	Rarely	No	No	No
Fish	With fins and scales	With fins and scales	It varies	It varies	Some	Yes
Shellfish	No	It varies	It varies	It varies	No	No
Butter/ghee	Kosher	It varies	It varies	It varies	No	It varies
Lard	No	No	No	No	No	No
Cereal foods	Yes	Yes	Yes	Yes	Yes	Yes
Nuts/pulses	Yes	Yes	Yes	Yes	Yes	Yes
Fruits/vegetables	Yes	Yes***	Yes	Yes	Yes	Yes
Fasting	Yes	Yes	Yes	Yes	Yes	Yes

* Strict Hindus and Sikhs will not eat eggs, meat, fish, and some fats.

** Some Rastafarians are vegan.

*** Jains have restrictions on some vegetable foods. Check with the individuals.

Vegetarian diets

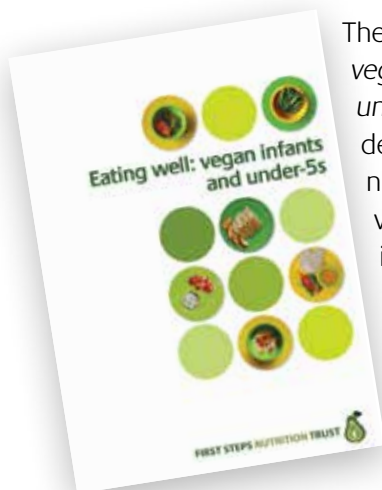
For families who choose to bring their infant up as a vegetarian, there are lots of ideas for vegetarian foods and meals in this resource. Vegetarians generally avoid meat and fish, but eat eggs and dairy products. It is perfectly possible for a vegetarian infant to obtain all the energy and nutrients they need, providing care is taken to:

- offer a good variety of foods
- offer a range of meat and fish alternatives such as eggs, pulses (peas, beans and lentils), ground nuts and seeds, cereal foods and soy products such as tofu, and
- follow any advice on vitamin supplements.

Vegan diets

Vegans usually avoid all animal products including meat, fish, dairy products and eggs, and any ingredient with an animal source. If children are brought up on a vegan diet, care has to be taken that they are introduced to a wide range of foods in the first year, and families are advised to talk through their choices with a health professional.

If a baby is being brought up as a vegan, it is particularly beneficial to continue breastfeeding throughout the first year (and beyond).



The guide *Eating well: vegan infants and under-5s* provides details of how to meet nutritional needs of vegan children, and information about nutrients that may need to be provided as supplements.

Gluten-free diets

There is no need to restrict gluten (the protein found in some cereals such as wheat, rye and barley) in the diet of babies over 6 months of age, even if there is a history of gluten intolerance in the family. Gluten has to be present in the diet for a diagnosis of gluten intolerance to be made. Advice on symptoms and diagnosis can be found at www.coeliac.org.uk. Gluten-free diets also restrict oats as some people with coeliac disease are also intolerant to oats. In this resource we have indicated which recipes are gluten-free because, although few babies will need to have gluten-free diets, other family members who may need to have a gluten-free diet may want to eat the same food.

Think global – Act local

When buying food, consider the environmental impact of your food and drink choices and where possible buy local food in season, and food from sustainable sources.

A guide to how those in early years settings can shop for, cook and manage food more sustainably – *Eating well sustainably: A guide for early years settings* – can be accessed at www.firststepsnutrition.org



For other information about sustainable food and educational resources related to food and the environment, see www.sustainweb.org.uk

Tips to encourage babies to eat well

- Make sure babies sit in the same place to eat, as often as possible, to help them feel comfortable and secure.
- Offer food when babies are most likely to be hungry.
- Present simple foods that they can easily see and distinguish.
- Offer colourful fruits and vegetables that will catch their attention.
- Give small portions, offer praise when it's finished, and then offer more.
- Give foods they have eaten before alongside anything that is new.
- Eat together. This makes mealtimes more enjoyable and sociable. Eat a spoonful of your child's food and show your enjoyment by saying 'yummy' and giving lots of smiles.
- Encourage children to feed themselves. They may well eat more if they have more control.
- Try to keep calm. If parents are anxious and tense, babies will pick up on this.
- Try not to worry if more food is eaten on some days than on others. Be guided by your baby and their appetite as they are growing and developing in the first year.

Fussy eating

If babies are introduced to new foods and flavours at about 6 months of age, are able to watch and mimic older children and adults eating the same foods, and are encouraged to be independent eaters, they are likely to accept a range of foods. If the introduction of foods is left until later in the first year, babies may be less keen to try new foods. So introducing foods at about 6 months of age is important. Most advice around fussy eating is aimed at toddlers who are more likely to go through a phase of food refusal, but some of the tips to encourage babies to eat well, above, may be useful if families are anxious about fussy eating in babies.

Breastfed babies are more likely to accept new food tastes because flavours from food that their mums eat will have passed into the breastmilk, preparing babies for a range of foods.

Active babies

Being physically active every day is important for the healthy growth and development of babies. Babies should be encouraged to be active throughout the day, every day. Before your baby begins to crawl, encourage them to be physically active by reaching and grasping, pulling and pushing, moving their head, body and limbs during daily routines, and during supervised floor play, including tummy time. Tummy time – when babies lie on their tummy or side while they're awake – is important for babies' healthy development. Babies can be put on the floor, on a safe firm surface, or on someone's lap

or chest – whatever works best. This supports development overall and will encourage muscle development in their neck, back and arms, which will help them learn to roll and crawl. Always supervise tummy time and remember all babies are different and some will take longer to learn or enjoy new skills and experiences.

Once babies can move around, encourage them to be as active as possible in a safe, supervised and nurturing play environment. For useful information on how to play actively with babies, see www.nhs.uk/start4life/get-going-every-day

Food safety at mealtimes

Avoiding choking

Choking can be a cause of injury and death in young children, mainly because their small airways are easily obstructed. It takes time for babies to master the ability to chew and swallow food, and babies might not be able to cough forcefully enough to dislodge an airway obstruction. As babies explore their environments, they also commonly put objects into their mouths — which can easily lead to infant choking.

Food is the most common cause of infant choking. However, small objects, small parts from toys and certain types of behaviour during eating — such as eating while distracted — can also lead to infant choking.

- Don't give babies pieces of sausage, chunks of meat or cheese, whole grapes or chunks of raw vegetables or fruit that can be swallowed and lodge in the airways.
- Don't give babies hard foods, such as whole nuts or hard sweets, or foods which may be sticky, like marshmallows.
- Always supervise a baby when eating.

To see a video and advice on how to cope with a choking baby, go to:

www.redcross.org.uk/What-we-do/First-aid/Baby-and-Child-First-Aid/Choking-baby

or see www.nhs.uk/choking-baby



Be safe in a highchair

- As soon as a baby can sit easily without support, use a highchair with a broad, stable base.
- Always buckle the safety straps when the baby is in the highchair. Falling out of highchairs is a surprisingly common reason for trips to A&E.
- Keep other children from climbing or hanging on to the highchair.



Food hygiene

Babies and young children are especially vulnerable to the bacteria that can cause food poisoning. Make sure your baby is not at risk as a result of food preparation and serving.

- Always wash your hands well before preparing food and after touching raw meat, fish and eggs.
- Keep surfaces clean and keep any pets away from food or surfaces where food is prepared.
- Thoroughly wash all bowls and spoons used for feeding in hot soapy water and keep chopping boards and utensils thoroughly clean.
- Keep raw meats covered and away from other foods in the fridge including cooked or ready-to-eat meats. It's best to store raw meats in clean covered containers at the bottom of the fridge to prevent any drips from falling on to other foods.
- Cook all food thoroughly and cool it until lukewarm before giving it to your baby.
- Don't save and reuse foods that your child has half eaten.
- Wash and peel fruit and vegetables such as apples and carrots.
- Avoid raw eggs, including uncooked cake mixture, homemade ice creams, mayonnaise or desserts that contain uncooked egg.
- Cook eggs until the yolk and the white are firm.
- Avoid eating raw or lightly cooked shellfish. Children should only eat shellfish that has been thoroughly cooked.
- Don't give children food or drink when they're sitting on the potty.

Storing and reheating food

- Cool food as quickly as possible (ideally within one to two hours) and put it in the fridge or freezer. Food placed in the fridge should be eaten within two days.
- Frozen food should be thoroughly defrosted before reheating. The safest way to do this is to leave it in the fridge overnight or use the defrost setting on a microwave.
- When reheating food, make sure it's steaming hot all the way through, and then let it cool down before giving it to your child. If you're using a microwave, always stir the food and check the temperature before feeding it to your child. Don't reheat cooked food more than once.
- To cool food quickly, put it in an airtight container and hold it under a cold running tap. Stir it from time to time so that it cools consistently all the way through.

Source: Information taken from the NHS Choices website.

