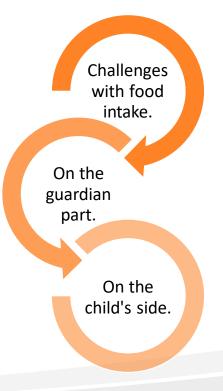
# Expanding home menu as part of the quality food in a facility.

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"Feeding is the initial task in which a parent and child collaborate together to achieve a common goal.".





## What factors can influence the chosen dietary model at home??

- Believes
- Impact of adverts and social media.
- Experience, including multi-generational experiences.
- Customs and standards.
- Dietary culture within the family in the environment.
- Experience



**The introduction** of a baby's diet should commence after reaching the 17th week of life (4 months old), but no later than the 26th week of life (6 months old).

During this particular time, most children develop the ability to consume solid foods.

During the **first year of life**, a baby learns to bite and chew food, with the greatest potential for learning these skills observed between the 6th and 10th months of life. (*http://www.imid.med.pl*)



The period of introducing complementary foods into a baby's diet is crucial for the child's development and the formation of dietary habits.

(Kamińska D. SM/Pediatria/2017/T.14/231-233)

The period of introducing additional foods into a baby's diet is significant due to rapid growth and progressive development. It is a critical phase in learning new flavours, food textures, and dietary habits.

Signs that may indicate a child's readiness to start eating include:

Around 6 months of age

-The ability to maintain a stable, sitting position with or without back support

-The disappearance of the tongue-thrust reflex (when food is introduced to the mouth)

- Steady head control and control of head movements while sitting

-The child reaches out and attempts to grasp objects they see.

This is a critical time for a child's development regarding food exploration an establishing eating habits.



Let's pause for a moment at this point. Let's take a moment to consider our readiness for this stage. We need time, trust, and... grocery shopping to create opportunities for positive exposure to food preparation at home for the child.

#### Recommendations regarding the quantity of other meals:

Between 6-8 months, introduce 2-3 meals.

Between 9 and 24 months, offer 3-4 meals and 1-2 snacks.

#### "Every bite has meaning."

**Energy density** refers to how many nutrients are present in a specific portion (WHO) 100g = 70 kcal (equivalent to breast milk or formula).

A house filled with the smell of delicious food..

#### TALERZ NIEMOWLAKA



JAK MOGĄ WYGLĄDAĆ PIERWSZE DNI ROZSZERZANIA DIETY



Grafika Talerza pochodzi z książki Małgorzaty Jackowskiej "Spokojnie, to tylko rozszerzanie diety"





- " Introducing solid foods is a journey, a path of discovery, a change, a shared adventure, and an opportunity to build a positive relationship with food.
- Learning about colours, textures, cross-sections, what's wet, what's dry, and what leaves little marks.
- It is a journey of discovering how it feels in the mouth: cold, warm, smooth, rough, noisy.
- **Change** the feeling that I am able to be full (not just with milk), that sometimes dad, mum, nanny, aunt, brother, anyone who wants to be with me during the mealtime
- An adventure of understanding how mom will react when I spit it out, why she doesn't eat the same, why dad eats something different...
- Introducing solid foods is a process that will span many months, during which you will also learn a lot about yourself. The child needs a guide, be ready.



#### General guidelines regarding products included in the diet.

- Include a variety of vegetables and fruits, even the bitter flavors of green vegetables.
- Breastfeeding/formula feeding should continue after introducing solid foods.
- Cow's milk should not be introduced before 12 months of age, but small amounts may be part of solid foods.
- Potentially allergenic foods can be introduced after 4 months of age.
- For children at risk of peanut allergy (eczema, allergy to eggs), peanut-based products should be introduced after consultation with a doctor between 4-11 months of age.
- Introduce gluten between 4-12 months (flexible timing), but avoid giving large amounts during infancy, especially in the first few weeks after the first exposure. Safe amounts are not specified.
- It doesn't matter whether gluten is introduced alongside milk/formula the risk of celiac disease is the same.
- All infants should receive iron-rich foods.
- Avoid adding salt and sugar to the diet it is advisable to avoid fruit juices and sweetened beverages.

## "Before tasting, proudly embarks on the journey of discovery."



## Difficulties when expanding the diet (not medical).

- Expecting that during the process of introducing solid foods, the child will quickly become proficient at eating them rather than viewing it as a cognitive learning phase.
- Prolonging the period of offering excessively finely pureed foods.
- No daily routine.
- Overfeeding
- Feeding with distractions around.
- Too low a variety of meals with vegetables in pieces.
- Inadequate supply of grains and low-fiber cereal products.
- Excessive consumption of functional foods such as pouches, ready-made fruit yogurts, and juices.
- Insufficient positive exposure.
- Lack of family policy regarding nutrition quality (grandparents, nannies).
- Lack of child's participation in the cognitive process food play.
- Failure to recognise hunger and satiety cues lack of self-regulation learning.
- Quick discouragement after an unsuccessful attempt at feeding.

#### Shared goals in the realm of preparing and serving meals for children:

- Exploring flavours by incorporating diverse ingredients, including vegetables and fruits as meal accompaniments - 'children don't have to eat salads, children should eat vegetables'.
- Sensory exploration: using smell, touch, and sound to identify vegetables and fruits according to the seasons.
- Exploring food processing from seed to loaf, from fruits to jam.
- Responsiveness and following a child's readiness to explore flavours and textures by incorporating modern elements of nutritional education in educational facilities.
- facilities offer meals where portions can be served on separate plates.
- Classes with elements of culinary education tailored to a child's perception in every facility.

How can I encourage my child's readiness to share meals in a childcare setting?

- I display an interest in the menu forms of communication: guess what it will be, it's been a while, I wonder what colour the soup will be.....
- I avoid using phrases that encourage food refusal: oh, meatballs again, oh, for dinner, it's the soup you don't like... we'll eat after preschool.
- Attractive ways to ask about lunch: who did you sit with at the table? what colour was the soup? did the soup have pasta or potatoes in it? (avoiding phrasing like was it all eaten?
- Cooking together at home whenever there's an opportunity. Family stories about culinary customs.
- An interesting shopping list for a child (sticking fruits and vegetables on the sheet, colouring books for older ones, writing down quantities to buy).
- Home food experiments fun: what's the taste, what's the shape?
- Sharing your ideas, successes, and observations with the childcare facility.

## I recommend publications that expand knowledge.





Bezpłatny webinar O MNIE BLOG OFERTA PRZEPISY ZALOGUJ SKLEP 📜

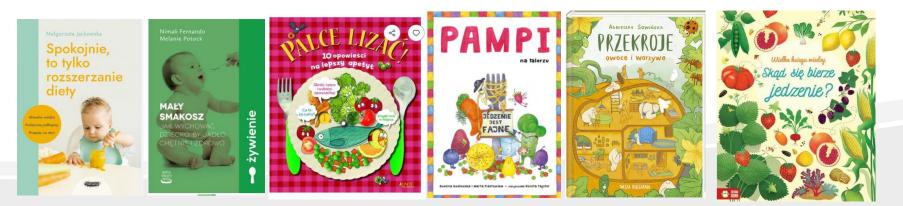
## Magdalena Ciężkowska

DIETETYCZKA DZIECIĘCA I TERAPEUTKA KARMIENIA



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Thank you for your attention and the time you've dedicated.



I invite you to our next meeting, during which I will introduce you to:

- What characterises meal planning in childcare facilities – what are the current standards, guidelines, and regulations for the quantity and types of meals;

- How we can collaborate to increase children's readiness to try new flavours;

- Discussing the eating difficulties that may arise between 1-3 years and 4-6 years, as well as reviewing different approaches."

See you soon

Agnieszka Danielewicz