



HEALTHY EATING HABITS FOR OUR CHILDREN

The toddler years are a joy and a challenge. Eating becomes a possible area of conflict without children as they have newly found **independence** and **decreased appetites** in comparison to the first year of life.

In the first few months of life 27% of food intake is for growth, the rest is for basic metabolic functions and physical activity. However, by the age of 12 months the amount of food needed for growth is only 3%, 50% is for physical activity and 47% for metabolic functions.

The first few months are not a reflection of what the child's true weight and height will be. Often after 6 months of age a very plump tall baby may start dropping percentiles, and if both parents are small, this is to be expected. Between 6 months and 2 years children go to their genetically prescribed percentiles.

How often should you feed your child?

We recommend that you feed your child three small meals, and two or three snack per day. These should be scheduled so that your child does not spend the day "grazing" which can develop an appetite. Remember that toddler's appetites are **unpredictable** and erratic. It is not unusual for them to eat a good breakfast one day, and then three gold fish crackers the rest of the day, or eat their favorite food for three days in a row, and then reject it entirely.

How do I get my child to eat?

As a general rule it **a mistake** to turn meal times into a sparring match to get him to eat a balanced diet. There is a division of responsibility. As a parent you can provide **nutritious meals** at scheduled times; it is your child's responsibility to choose what or whether he will eat.

To facilitate this at mealtimes, it is a good idea to put a **variety of foods** on the table and then offer your child small amounts of food that they choose from the table. By putting it on the table you are endorsing the food selection and the rest is up to your child.

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Don't take your child's **rejection** of food personally. Pressuring them to eat including elaborate rituals, distractions or bribery usually backfires. If your child refuses to eat a morsel ask them to keep you company at the table. If your child is very young, have a small toy available to play with; as you eat you should not be surprised if they want stuff off your plate.

Next level of responsibility the parents have.

Kids do what you do! Eating together as a family is also very important and eating nutritious food. If your child habitually refuses to eat his meal, but soon afterwards panhandles cookies or snacks because they are hungry, you need to be firm and stick to scheduled snack and meal times.

This will teach your child that begging for candy will not work, and hopefully they will be hungry for the more nutritious food served at meals.

DON'T USE DESSERT AS A REWARD, it elevates the importance of the dessert. It is okay to serve a cookie with their meal and it is also okay if they eat it first. In the toddler years, think of providing a **balanced diet** for their nutritional needs over 2-3 days instead of within 24 hours, as they may only eat one good meal in 2-3 days.

What kind of foods should you prepare?

Children can eat what adults eat, but *avoid very spicy* or seasoned dishes. Cut food into **small pieces** if your child is not adept with a knife. For infants and toddlers, avoid foods that they can **choke** on. Examples are hard candy, nuts, seeds of fruit, peanut butter off the spoon, whole hotdogs. Involve your kids in the preparation. It is important to **prepare meals that are nutritious**. If you are not a cook, buy foods at the supermarket that are step savers and learn a few easy recipes.

Milk is a food, not a beverage. After a year of age, they only need 16-20 oz. per day. We recommend weaning off the bottle at a year, and definitely by 18 months.

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Dietary supplements

If your child eats a varied diet and has a good appetite **supplements** are unnecessary. Vegans may need supplementation of B12, riboflavin, calcium, Vitamin D and iron. **Iron deficiency** is a concern especially in children that drink large amounts of cow's milk. Cow's milk can cause microscopic intestinal loss of blood, which over time can lead to **anemia** if sufficient iron is not added to the diet. Drinking too much milk, or juice, also decreases a child's appetite for other foods. After the infant years when most kids stop the infant formulas and infant cereals, the iron supply in their diet diminishes.

Good sources of iron include meats, poultry, fish, green vegetables, iron fortified grains and dried fruits. Vitamin C foods increase the absorption of iron in the diet. If your child is a picky eater a vitamin supplement with Iron is a good idea.

Calcium requirements and Vitamin D

- toddlers ages 1 to 2 years — 500 milligrams of calcium daily +400 IU Vit D
- kids ages 4 to 12 years — 800 milligrams + 400-800 IU Vit D
- older children ages 12 years and older— 1,300 milligrams + 1000 -2000 IU Vit D

What about the mess?

The toddler is a messy eater; the first reason is they **explore** their food with their hands so they can become accustomed to its texture its taste and color. The second reason is they don't have very adept **fine motor control**. We recommend feeding in a high chair or at the table for an older child. This helps contain the mess to one area and nurtures feeding as an activity not as a distraction. Do not load the high chair or plate with large amounts of food. Rather replenish as needed and this will hopefully avoid food missiles.

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Obesity

If your child is overweight do not be tempted to put a small child on diet. It is advisable instead to build a **positive feeding relationship** with your child. It is important to have **structured** mealtimes and snack times and as discussed before, the division of responsibility holds true. It is up to the parents to procure and provide nutritious food and up to the child to choose what and how much (or if at all) he eats.

The most tragic aspect of a child that may be obese is the erosion of their **self-esteem** through parental, peer and social attitudes. The most significant influence on your child's weight is genetic i.e. if both parents are obese the child has an 80% risk of obesity. If one parent is obese, the risk is 40%. If both parents are trim, the risk is 10%.

What do parents do to help foster a healthy positive relationship to food and high self-esteem?

- Maintain structure of meals and snacks
- Orderly and positive eating: eat with manners, slowly and with enjoyment
- Cut down on feeding cues
- Keep caloric density of food moderate
- Don't feed unnecessarily i.e. reward behavior without food. Don't reward soft drinks/juice for thirst - drink water
- Set feeding limits and be consistent with your partner. Do not be ambivalent
- Encourage exercise. Make family recreation an active one i.e. cycling, walking, swimming
- Help dress your child in a flattering way.
- Find the underlying cause in sudden gain in weight
- If your child has stopped growing and would like to diet, get help with a nutritional healthy plan.

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