



Weaning SUPPORT

Grub4Life's **Nigel Denby** presents a practical guide to moving children on from milk to solids...

Confusion and contention are never far away when it comes to weaning. The process traditionally unfolds in stages, occurring over a period of months, where the amount, range and textures of foods are introduced and increased gradually, but at what point it should start, and when each stage should happen, causes headaches to parents, childcare providers and health professionals alike.

The Department of Health recommends that babies should not be given any solid foods until they are six months of age; however, many parents will wish to wean earlier than this. Four months or 17 weeks is the earliest age at which solids should be introduced, as weaning before this point increases the risk of food allergies. The digestive system is simply not ready for anything other than breast or formula milk. There are nutritional and developmental reasons why infants need solid foods from six months at the latest. At this age babies need more iron, vitamins and other nutrients than can be provided by milk alone. Iron is particularly important – babies

are born with a store of iron provided by the mother, but after six months these stores have been used up and it needs to be supplied from food to prevent anaemia. Over-dependence on milk and feeding issues may also occur when weaning starts late.

Key points to remember include...

- Foods high in iron, including meat, oily fish and pulses, should be introduced at or around six months, depending on when the baby was first weaned.
- It's important to introduce babies to the taste and textures of different foods.
- Infants who are weaned at or around six months are likely to accept a greater variety of foods and changes in food textures more quickly than those weaned later.
- Chewing, biting and moving food around the mouth using the tongue, are important for early oro-motor skills for speech development.

Stages of weaning

In order to follow the oral development of infants and their ability to 'eat' a variety of foods, weaning is often divided into different stages. Although these stages are often

linked to certain ages, the weaning process should be a natural flow and should be adapted to each baby. Babies often show signals and these are easily recognised.

It's sensible to begin with 1-2 tsp of solids and increase the amount according to the baby's appetite. First solids should be introduced at any suitable mealtime, when the baby is not too hungry or overtired – halfway through a milk feed is a good time to try the first few times. If the baby refuses the solids, the attempt should be stopped and offered again at a later stage. If this stage is started before 26 weeks, the baby may take a little longer to successfully master swallowing

Smooth purées

The main aim of the first stage is for the baby to coordinate the purée around the mouth, it's not always swallowed. The main nutritional source for the infant remains breast/formula milk. Once the baby has mastered handling smooth textures, you can move on.



find out more

For more information and support with weaning, visit grub4life.org.uk or contact Head of Nutrition, Nigel Denby on feedback@grub4life.com. You can read more about weaning on the Teach Nursery website: ow.ly/oIJ04

*Cubes of cheese
Rice cakes, bread sticks, toast fingers.
Cooked pasta shapes
Slices of raw apple, dried fruit
Raw vegetables.*

Family meals

From as early as nine months, and usually by 11-12 months, most babies should be enjoying family meals and eating the same food as the rest of the family. Breast/formula feeding should continue until at least 12 months. After 12 months, a combination of milk and other dairy foods should be given daily to achieve calcium requirements.

Suitable foods for stage 1

- Baby rice/mashed potatoes/baby cereal mixed with breast milk or formula milk.
- Baby cereal should be gluten-free, especially if offered to infants before 26 weeks.
- Mix the food with milk to form a slightly thicker than milk texture, like a runny yoghurt; this can be thickened to suit the baby.
- Vegetable or fruit purées could also be used, e.g. root vegetables such as potato, yam, carrot, parsnip, sweet potato, broccoli, cooked apple, ripe pear, peach, banana
- Start with fruit/vegetable purées, e.g. sweet potato and broccoli, then you can include protein foods (meat, fish, poultry and pulses), e.g. sweet potato, broccoli and chicken.

Thicker textures

The second skill that babies have to master is how to get the food from the spoon to the back of their mouth. Normal sucking involves pushing the tongue forwards. It usually takes a few attempts before the baby masters how to coordinate the food to the back of the mouth to be swallowed.

Lumpy foods

A lot of babies are ready to learn to chew at 6-7 months when they can sit upright by themselves and have good head control. It's important to give babies the opportunity to learn to chew at this age. Initial refusal of lumps and lumpy food is common, so don't be disheartened.

- Start with soft lumps by mashing soft, ripe fruit or cooked vegetables with pasta and grated cheese, fish or chicken, rather than puréeing it down as in previous stages.
- Other examples of meals may be: scrambled egg with fingers of toast, flaked fish with mashed potato and vegetables

sticks, chapati with vegetable curry.

- Other soft finger foods can also be introduced, such as soft cooked vegetable sticks, soft peeled fruits.
- Never leave the baby alone in case of choking.
- Involve babies with feeding, and encourage making mealtimes a pleasant experience by giving them their own spoon to try with... and expect a mess!

Commercial baby foods

In the long term it's easier for babies to be weaned onto the foods the family eat. Children who only eat commercial baby foods may struggle to move over to family foods once they're offered. Commercial foods don't always provide the same range of textures that family foods can provide.

Grub4life recommends weaning foods should be prepared from the normal menu in a childcare setting; however, some commercial baby foods can be incorporated into the weaning diet at home, and many parents find them convenient.

Finger foods

Finger foods encourage fine finger control development - this usually starts at around seven months, when babies can hold objects in their hands. It is not necessary to wait until a baby has teeth. Finger foods should initially be soft or melt in the mouth foods to avoid choking. Aim to include or offer some finger foods at each meal:

- Start with softer foods such as ripe fruit, e.g. pears, bananas, melon, avocado, halved seedless grapes, mango, papaya, and kiwi fruit.
- Lightly cooked vegetables such as sticks of carrot, potato or parsnip, baby sweetcorn, florets of cauliflower/broccoli.
- As a baby becomes more competent at chewing, the variety of snacks can be increased. Try...

*Cooked pieces of chicken or turkey
Quarters of hard boiled egg*

DID YOU KNOW?

Salt

Babies and toddlers cannot process high levels of salt, and too much can lay the foundations for high blood pressure in adulthood. A one-year-old should consume no more than 1g per day - that's one-sixth of the allowance for an adult or less than a few crisps, a quarter of a ready-made sandwich or a teaspoon of ketchup.

There is some salt naturally occurring in many 'healthy' foods. Providing salt is not added during cooking or at the table, and very salty foods, like bacon or cheese, are limited, it's perfectly easy to keep salt levels within recommendations. Care does need to be taken with some processed foods, e.g. stock cubes, cereals and sauces, which can contain significant levels of added salt. Look for low-salt and very low-salt ranges.

Baby Led Weaning

Baby Led Weaning (BLW) is becoming increasingly popular. It allows a baby to control their own food intake by self-feeding from the very beginning of the weaning process, and dispenses with the need for purées and weaning spoons, as the baby feeds themselves. BLW requires a lot of supervision to reduce the risk of choking and should only ever be started with babies who can sit up. It is not generally recommended for use in a childcare environment.