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Young children can be fussy about food, but early years practitioners can do much to encourage good habits, says **Nigel Denby...**

> R roblem or faddy eating affects around 75 per cent of all toddlers; it's often a normal part of development as a child becomes more aware of foods and how their refusal to eat can affect others around them. However, it can be distressing for parents, who sometimes see this normal behavioural stage as evidence of food allergies or intolerance. Their anxiety can make the problem worse.

For childcare providers there is huge scope to help children overcome food aversions and develop a relaxed approach to mealtimes, as well to support and reassure parents and establish the nursery as the expert resource for guidance and help with children's eating habits.



Key factors

Most toddlers have good and bad days when it comes to food, but the way in which the bad days are handled can have an enormous impact on whether they become the norm. Successful handling of eating behaviour needs a number of skills, and parents may need guidance on developing them. The following factors should all be considered:

When a child has had enough

Recognising when a child has simply had enough to eat is key. Toddlers are saying they do not want any more food when they: say no

- keep their mouth shut when food is offered
- turn their head away from food
- push away the spoon, bowl or plate
 hold food in their mouth and refuse to swallow
- repeatedly spit food out
- cry, shout or scream
- gag or retch.
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A child may have had enough if the portion of food they are being expected to eat is too big, or if they are still being spoon-fed when they should be moving on to feeding themselves. Asking open questions about home mealtimes may give practitioners clues about what's happening at home, and offers opportunities to reassure parents that the child is eating enough and growing well, and that they are moving on to feeding themselves in nursery which they might want to try at home.

Drinking too much

Toddlers may have a poor appetite because they are consuming too many calories from drinks. About six to eight drinks a day is usually enough: a drink of around 120mls should be offered with every meal and snack, in a cup or beaker (not a bottle). Feeding bottles should be phased out by 12 months.

1. Too much milk?

It's easy to reduce milk consumption from a cup, but it can be trickier if a toddler is still drinking from a bottle.

Daytime bottles are the easiest to remove, especially if the toddler attends nursery. They should be reduced gradually and replaced with food and cup of milk or water. Evening and bedtime bottles can be more difficult – for parents, this task will almost certainly involve some tears and tantrums, but will ultimately improve the child's appetite. Again, gradual reduction is the way to go, reducing the volume of milk given, diluting it with water until appetite improves during the day, and then gradually phasing the night-time feeding out altogether.

2. Too many sweet drinks?

Research has shown that too much fluid from sweet drinks like fruit juice, squash and fizzy drinks can suppress appetite. The only drink, other than milk or water, recommended for use in nursery is diluted fruit juice in a juice/water ratio of 1:10. However, many toddlers will be given other drinks outside of nursery, so it's useful to ask parents whether their child drinks before a meal or snack; you can then go on to ask about what sort of drinks they are having.

Self-feeding

Toddlers usually want to self-feed by the time they are two. They want to take control of their fingers or the spoon and this allows the child to learn chewing and hand-eye coordination, as well as developing muscles in preparation for speech.

How to help

Parental anxiety has a huge impact over mealtimes, and practitioners may need to offer simple guidance to help manage it...

It's unhelpful to talk about a child's eating in front of them Emphasis should not be placed on the

quantity of food eaten A calm atmosphere is likely to result in improved eating from toddlers The meal needs to feel social with parents talking to the child, smiling and generally making the child feel confident and relaxed; if a child only gains attention when they don't eat, a pattern soon begins to form.

Rewarding the eating of one food by promising another isn't helpful – the reward food always becomes more desirable than the food the parent is trying to encourage the child to eat.

An unstructured eating plan often means a child can be consuming high calories by grazing between meals. Two toddler-sized meals with two or three planned snacks is an ideal routine for toddlers.



Parents, however, may be concerned about moving their child on too quickly, and may be anxious that the child will choke or fail to eat enough. It should be said that self-feeding can be messy, and this in itself can be enough to put parents off!

Practitioners need to help parents understand the developmental importance of self-feeding and try to encourage even one meal a day being self-fed to start with. It can be helpful to offer group workshops for parents on managing feeding problems. These sessions allow parents to see that their problems are not isolated to their family.

Force feeding anf rewards

Parental anxiety over mealtimes can result in some children being force-fed or rewarded for eating food they didn't want. This can exacerbate the problem and leave children frightened. Other parents bribe and plead, and mealtimes can go on for far too long. Most toddlers eat what they want in around 20 minutes, so meals that go on longer are unlikely to result in more food being consumed.

Toddlers need to be given control over their mealtimes and their intake, and must be allowed to handle food and sometimes make a mess. They are often happier with finger foods, and may want just a little help with runny foods.

There can, of course, be more serious underlying problems causing a poor appetite in toddlers. The most common is constipation, which can be a result of not drinking enough. Check toddlers are having six to eight 120ml drinks per day. Constipation needs to be relieved before trying to change eating behaviours.

In a minority of toddlers, problems persist and can result in affected growth and development. If no medical cause for the problem can be found, it is likely the child is strongly neophobic about food, and has an extreme sensory sensitivity. In these cases, referral to a clinical child psychologist, specialist feeding team or paediatric dietitian may be appropriate.

www.grub4life.org.uk run specialist Early Years nutrition and feeding training courses for cooks, early years practitioners and managers. These courses help to support children and parents to overcome common feeding problems. For more information contact nigel@grub4life.org.uk

The Denby Report

ING! Two healthy recipes to try with your children...

Houmous, Pita and Crudités

Ingredients (serves 10) 600g chick peas, canned in water; drained and rinsed Juice of 1 lemon (20ml) 4 cloves (24g) garlic, peeled

1 tsp (6g) ground cumin 4 tbsp (60ml) sunflower or olive oil 20g chopped fresh parsley 10 pita breads (wholemeal or white) 20 (300g) cherry tomatoes 2 (320g) peppers, deseeded and cut into strips

2 (200g) carrots, peeled and cut into batons

Place the chickpeas, lemon juice, garlic and cumin into a blender and blend into a thick paste. Gradually add the oil a little at a time until you have a dipping consistency.
Prepare the tomatoes, peppers and carrots for crudités and toast the pita breads.
Serve 60g houmous with one pita bread cut into strips and a mixture of the crudités.

cook's tip...

Prepare extra carrots and one additional vegetable to make a puree for weaning diets.

For wheat-free diets, omit pita and serve wheat-free bread

Nutrition analysis per serving Energy (kcals) 271, Protein (g) 10, Fat (g) 8, Carbohydrate (g) 42, Sugar (g) 0.03, Salt (mg) 0.6, Iron (mg) 2.6, Calcium (mg) 88

Cheese Mushroom and Bean Slice

a unique child

Ingredients (makes 10 portions) Shortcrust Pastry

200g plain flour 100g margarine Water to make dough Filling 60g Onions, finely chopped 30g Celery, chopped 75g Leeks, sliced 80g Carrots, peeled and diced 60g Potatoes, peeled and diced 70g Sliced mushrooms 220g Cannellini beans (canned in water) Pinch of fresh or dried mixed herbs (Thyme/Rosemary) 50g margarine 50g plain flour 175ml milk 75g grated cheddar cheese

Pre-heat the oven to 180C/350F, Gas4.
First make the pastry by rubbing the margarine into the flour and adding enough water to make a dough. Leave to rest in the fridge whilst making the filling.
Peel and boil the potatoes.

Put the finely chopped onion, celery, leek, carrot and mushrooms, mixed herbs and margarine into a thick-bottomed saucepan.
 When margarine has melted and the vegetables are soft add the cannellini beans then flour and cook for one minute.

Gradually add the milk to make a thick sauce. Add the grated cheese. Stir in the cooked potato, to complete your filling. Allow to cool a little.

Roll out half the pastry into large rectangles that will fit on your baking trays, then lay them on baking parchment on your trays.

Put the filling down the middle, brush the edges with egg or water.

Make into large sausage roll shapes. Score the top of the pastry and egg, wash if required.

Bake until the bottom of the pastry is cooked – approximately 30 minutes.

Slice into portions and serve warm.

cook's tip...

This can be made the day before, or you can make the filling and pastry, and freeze until required. Prepare extra vegetables to make a puree for weaning babies. The slice can also be served with home-made tomato sauce.

For wheat-free diets, use wheat-free flour to make pastry and in filling For dairy-free diets, use dairy-free spread to make the pastry and soya milk, and dairy-free cheese for the filling

Nutrition analysis per serving Energy (kcals) 274, Protein (g) 7.3, Fat (g) 16, Carbohydrate (g) 27, Sugar (g) 0, Salt (g) 0.4, Iron (mg) 1.1, Calcium (mg) 124