Feeding your baby and young child

519-575-4400, TTY: 519-575-4608
www.regionofwaterloo.ca/ph
The First Five Years Matter the Most
A good start helps your baby later in school and in life

Actions to Support Your Baby’s Growth and Development

- **Newborn and older**
  Breastfeed your baby. For free breastfeeding support call Public Health at 519-575-4400.

- **Meet with your health care provider for check-ups at:**
  - 48 hours after hospital discharge
  - 1 and 2 weeks
  - 1, 2, 4, 6, 9, 12, 15, 18 and 24 months; and then once a year
  Have your child immunized on time everytime. Visit www.regionofwaterloo.ca/ImmunizationSchedule

- **Newborn and older**
  Make your home a safe place for your child. Complete a home safety checklist at www.regionofwaterloo.ca/childhomesafety

- **Newborn to 12 weeks**
  Get to know more about your baby’s sleep cycle and how to respond. Reserve a free spot at www.earlyyearsinfo.ca/sleep-sessions

- **Newborn and older**
  Start thinking about your child care needs. Register for licensed child care near you at www.onelistwaterlooregion.ca

- **One month and older**
  Check your baby’s growth with the Looksee checklist at www.lookseechecklist.com

- **One month and older**
  Read, Sing, Play, Talk with your baby every day. Visit https://playandlearn.healthhq.ca

- **Six months and then once a year**
  Visit the eye doctor to have your baby’s eyes checked; free if you have an Ontario Health Insurance Plan. Visit collegeoptom.on.ca

- **12 months and older**
  Visit the dentist to have your child’s teeth checked. Call 519-575-4400 for information about financial assistance for dental care.

- **18 months to five years**
  Find out if your child is a healthy eater using Nutri-eSTEP at www.nutritionscreen.ca

- **Three to five years**
  Register your child for kindergarten.

- **Junior Kindergarten**
  If your child is in JK they could be eligible to participate in the Eye See...Eye Learn® program. Visit www.optom.on.ca

519-575-4400
(TTY: 519-575-4608)
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This resource gives general information for feeding healthy full-term babies and young children from six months of age. For more information, go to [www.unlockfood.ca](http://www.unlockfood.ca) or contact Telehealth Ontario at 1-866-797-0000 (TTY: 1-866-797-0007) to talk to a Registered Dietitian.
Feeding your baby at six months – when to start solid foods

For the first six months of life, breast milk is the only food your baby needs. At six months, breast milk is still the most important food for your baby, but your baby also needs the extra nutrients solid foods provide.

Talk to your health care provider before starting solid foods when:

- your baby has eczema or a diagnosed allergy
- if there is a parent or sibling with an allergic condition such as food allergy, eczema, asthma or hay fever
- if you have any concerns about starting solids

**TIP:** In the first six months of life babies go through times when they are growing more quickly and may be hungrier than usual; breastfeed your baby more often at these times. Wait until your baby shows signs of readiness before offering solid food.

**Signs that your baby is ready to try solid foods include when your baby:**

- Sits in a high chair and controls their head well
- Shows interest in food when others are eating
- Watches the spoon and opens their mouth when the spoon comes close
- Closes their lips over the spoon and swallows food in their mouth

If solid foods are started too soon or too late, there is a greater chance of problems.

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<thead>
<tr>
<th>If solid foods started too early</th>
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<tr>
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<td>• Hard on baby’s kidneys and digestive system</td>
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**TIP:** Starting solids before six months will **not** help a baby sleep through the night. Every baby is different; it may be many months before your baby sleeps through nights.

Health Canada recommends a daily vitamin D supplement of 400 IU (10 µg) for babies and young children up to two years of age receiving any breast milk.
How do I start feeding solids?

Continue to breastfeed before or after feeding solid foods, according to baby’s hunger cues and your conveniencea. See page 6 for baby’s hunger and fullness cues.

- Foods that are sources of iron should be the first foods offered to your baby, as your baby’s body needs more iron at this stage (see chart below).
- Offer your baby a variety of soft textures by spoon (see chart below).

See pages 8 to 13 for information about how to introduce new foods and how to prepare food safely for baby.

Choosing foods and textures at six months

This is only a guide; all babies are different and develop at their own pace.

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<td>• Finely minced</td>
<td>Start with iron-rich foods:</td>
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<tr>
<td>• Controls head well</td>
<td>• Ground</td>
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<td>• Opens mouth when offered food</td>
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<td>• Moves food to back of mouth with tongue and swallows food</td>
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<td>• Drinks from a cup with help</td>
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<tr>
<td></td>
<td></td>
<td>• Single grain iron-fortified infant cereal such as barley, oat, wheat, rice</td>
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<tr>
<td></td>
<td></td>
<td>• Mixed grain iron-fortified infant cereals (after baby has tried single grains)</td>
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a Continue to breastfeed or offer expressed breast milk up to two years and longer. If baby is not fed breast milk, artificial baby milk (formula) may be offered according to baby’s appetite.

Iron-rich foods at six months

Between six and 12 months of age offer a variety of iron-rich foods two or more times a day. Start by offering iron-rich food once a day for a few days, then increase to twice a day (see chart above).

- Iron from meat sources is better absorbed than from other sources.
- Avoid offering processed luncheon meats, wieners (hot dogs), sausages, bacon and packaged meats; they are high in unhealthy fat and salt.

**TIP:** Store-bought baby food “dinners” are low in iron. It is better to buy meats and vegetables separately or make your own baby food (see page 11).
Offer a variety of single grain infant cereals with added iron such as barley, oatmeal, wheat, or rice. Use mixed grain cereals after your baby has tried the single grain cereals on their own.

- Choose plain infant cereals with no added sugar.
- Avoid cereals with added fruit; they have extra sugar.
- Mix dry infant cereal with breast milk or water (see package).
- Add the amount of liquid to the dry cereal to make the thickness that is right for your baby; add less liquid to make the cereal thicker as your baby gets better at eating.

**TIP:** Give infant cereal to your baby on a small spoon; never add cereal to something they will drink.

**Textures**

Offer textures appropriate for your baby’s stage of development. Change to lumpy textures as soon as your baby can manage.

- Many babies can handle lumpy textures at six months.
- If your baby is not eating lumpy textures by nine months of age, talk to your health care provider. See pages 16 to 18 for suggested textures and foods to offer.

Offer finger foods. Even if your baby does not have teeth, they can mash foods with their gums and learn how to chew.

- At first, finger food is food that is cut into pieces big enough for your baby to hold in their fist with the top sticking up, such as bread crusts, dry toast, soft cooked vegetables and fruit, and soft ripe fruit such as banana.
- When your baby is able to pick up food with their fingers and thumb, they may also eat cooked ground meat/poultry, fish (flaked), diced cooked vegetables, soft ripe fruit, cooked pasta and grated cheese.

**TIPS:**

- Prepare food with little or no added salt, seasonings, sugar or other sweeteners, so your baby learns the natural taste of food.

- Offer healthy foods high in fat such as yogurt with more than 2 per cent MF, hard cheese, avocado, nut butters spread thinly and fatty fish; they provide energy and are important for brain development.
Feeding your baby

- Clean your baby’s hands before offering food.
- Feed your baby in a sitting position facing you, such as in a high chair with safety straps.
- Put a small amount of food on the tip of a small spoon and hold it so your baby can see it.
- Wait for your baby to open their mouth before trying to feed them.
- Wait until your baby swallows before offering more; feed as quickly or as slowly as your baby wants.
- Stop feeding when your baby turns their head away, pushes the food away or closes their lips.
- If your baby does not want to eat a food, try again on another day. It may take several tries before your baby accepts a new food. Never pressure or force your baby to eat.

As a parent it is your job to offer nutritious foods that your child can safely eat. Trust your child to decide what and how much to eat from the food you offer.

Tips for feeding solid foods

- Always stay with your baby and watch them when they are eating.
- Start a new food when your child is happy and hungry, such as at morning or mid-day meals. For information about introducing new foods, see page 8.
- Be a good role model and eat with your baby.
- Put the high chair close to the family table during family meal times.
- Offer food with no distractions. Turn off the TV and don’t allow toys at the table.
- Make meal times enjoyable and talk to your baby.
- Let your baby touch the food – it is how they learn about food and how to eat.
- Give your baby a small spoon to hold if they reach for yours.
- Be prepared for a mess. Put a bib on baby and a cloth under the chair to catch food.
- After every feeding, use a clean cloth to wipe baby’s gums. See page 25 for information about caring for your baby’s gums and teeth.

For more information about how to introduce solid foods safely, call Region of Waterloo Public Health and Emergency Services at 519-575-4400 (TTY: 519-575-4608) and ask to speak to a Public Health Nurse.
How much do I feed my baby?

Your baby will be your guide for how much to feed. Some days your baby will eat more than other days. At first your baby may take only a small amount of food. Start by offering 5 to 10 mL (one to two teaspoons) of each food. Gradually increase the amount according to your baby’s hunger. This amount will increase as your baby grows.

Responsive feeding – feeding baby according to hunger and fullness cues

Continue to breastfeed according to your baby’s hunger and fullness cues while gradually introducing solid foods.

Signs baby is hungry

- Your baby will show they are hungry by:
  - Reaching for the food or spoon
  - Leaning forward
  - Opening their mouth for food

Signs baby has had enough to eat

- Babies lose interest in eating when they have had enough to eat.
- Your baby will let you know they have had enough by:
  - Turning their head away
  - Pushing the food away
  - Closing their lips together
  - Covering their mouth with their hand
- Do not try to get your baby to eat by coaxing them or playing games and never force your baby to eat.

Trust that your baby will eat the right amount of food.

TIP: Your child’s growth is a good sign that your child is getting enough to eat. Talk to your health care provider if you are concerned about your child’s growth.
Next foods- After iron-rich foods

Once your baby is eating iron-rich foods, offer other foods such as vegetables, fruits, breads, cereals, pasta, cheese and yogurt, in no special order. See pages 16 to 18 for suggested foods and textures to offer according to what baby can do.

**TIP:** Do not give your baby honey until after one year of age due to risk of infant botulism (see page 10).

Vegetables and fruit are good sources of vitamins, minerals and fibre. They add colour, variety and texture to the diet. Babies and young children who are offered a wide variety of vegetables and fruit are more likely to eat them when they are older.

- The vitamin C in vegetables and fruit help your baby to absorb the iron in foods. Offer vegetables and fruit with sources of iron such as meat, poultry, legumes, egg, tofu and infant cereal.
- Avoid offering juice; it is not needed. It is better to offer fruit for fibre and sips of water for thirst (see page 15).

**TIP:** Store-bought baby fruit desserts have added sugar; offer soft ripe or soft cooked fruit instead.

Offer a variety of whole grain products such as breads, pastas, cereals and grains such as quinoa and rice.

- Continue to offer a variety of iron-fortified infant cereals up to and beyond 12 months of age as a source of iron.

**TIP:** Babies and young children have small stomachs and fill up quickly. Avoid offering baked goods such as cakes, pastries and cookies, which are high in sugar and low in nutrients.

Offer milk products such as yogurt, kefir, and cottage cheese with 2 per cent MF or higher. The fat is needed for proper growth and brain development.
Introducing new foods and food allergies

Talk to your health care provider before starting solid foods when:

- your baby has eczema or a diagnosed allergy
- if there is a parent or sibling with an allergic condition such as food allergy, eczema, asthma or hay fever
- if you have any concerns about starting solids

Introduce new foods one at a time and watch for signs of food allergy.

Signs of food allergy can include:

- Hives or skin rash
- Diarrhea
- Swelling of mouth and face
- Stomach pain
- Vomiting
- Blood in stool
- Runny nose
- Sneezing
- Itchy eyes

If your child shows signs of food allergy, stop feeding the food immediately and talk to your health care provider. It is important to get a proper diagnosis of a food allergy. **If your child has trouble breathing, call 911.**

Some foods are more likely to cause a food allergy than others.

**When offering a new food that is a common food allergen such as egg, milk, mustard, peanut,* seafood (fish and shellfish), sesame, soy, sulphites, tree nuts* and wheat:**

- Offer one at a time and wait two days before introducing another new food.
- During the two day waiting period, watch for signs of food allergy (see above).
- Once safely introduced, offer the food regularly so your child will keep tolerating it.

*Whole peanuts and tree nuts are a choking risk for babies and young children; see page 9 for how to prepare them safely.
Consider offering thinly spread nut butters.

**When offering new foods that are NOT common food allergens:**

- Offer one at a time and watch for signs of food allergy (see above).
- New foods may be introduced without the two day waiting period.

For more information on food allergy, see the [Health Canada website](https://www.canada.ca/en/health-canada/services/health-and-safety-food-safety.html).

**TIP:** If your child is allergic to a food, do not feed that food. You may want to talk to a Registered Dietitian to help you choose foods to replace the nutrients in the missing food.
Foods with high risk of choking

Children under four years of age are at high risk of choking. Foods that increase risk of choking are hard, small and round, or smooth and sticky. Large cheese cubes, hard pieces of raw vegetables and some dry cereals may also cause problems for babies and young children.

Do not give foods that may cause choking to children less than four years of age. This includes foods such as: popcorn, hard candies, raisins, chewing gum, whole peanuts, whole nuts, whole seeds, meat and fish with bones and snacks using toothpicks or skewers.

Suggestions for preparing food safely for babies and young children:

<table>
<thead>
<tr>
<th>Foods that may cause choking:</th>
<th>How to make food safer:</th>
</tr>
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| Vegetables and fruit         | • Wash and cook hard vegetables and fruit.  
                              | • Remove skin/peel, seeds and pits.  
                              | • Cut round smooth foods such as grapes, cherry/grape tomatoes and cherries into quarters or small pieces.  
                              | • Grate hard vegetables and fruit such as raw carrots and apples or cook to soften and then cut into small pieces.  
                              | • Mince stringy foods such as celery and pineapple, or cut into small pieces. |
| Meat and poultry             | • Serve tender, moist meat and poultry that is ground, finely minced or cut in small pieces. Remove all bones before serving. |
| Round or cylinder shaped food such as wiener and sausages. | • Cut lengthwise and then into small pieces (avoid offering wiener and weiners to babies and young children; they are high in unhealthy fats and sodium). |
| Fish                         | • Remove bones from fish, or mash bones finely. |
| Peanut/nut/soy butters and other sticky spreads | • Spread thinly, such as on toast or crackers; never serve on a spoon. |
| Peanuts, nuts and seeds      | • Crush or chop finely. |

TIP: When offering vegetables for dipping, cook hard vegetables such as carrots, green beans, and cauliflower until soft but not mushy and then chill. Then cut into thin strips for dipping.

To lower your child’s risk of choking:

• Make sure your child is always sitting while eating and drinking and there are no distractions.
• Do not let your child eat while walking, running, lying down or while in a moving car.
• Keep meal and snack times calm and relaxed.
• Offer food at a size and texture your child can manage.
• Encourage your child to chew their food well and give them enough time to eat.

Always watch babies and young children when they are eating and drinking.
How to avoid food poisoning

- Do not give honey to your child until after they are one year old to prevent botulism, a form of food poisoning. This includes pasteurized honey and foods with honey in them, even if they are cooked.
- Do not give unpasteurized milk, cheese or other dairy products.
- Do not give unpasteurized juice or cider.
- Avoid foods that contain raw or undercooked meat, poultry or fish.
- Make sure eggs are fully cooked and do not use foods that contain raw eggs to avoid salmonella food poisoning.
- Do not feed your child fish high in mercury such as fresh or frozen tuna steaks, swordfish, shark, marlin, pickerel, tilefish, barracuda, orange roughy, escolar or walleye. For more information see: A Guide to Eating Fish for Women, Children and Families at the Public Health website or call Public Health at 519-575-4400 for a copy.

Food safety

- Wash hands before preparing food or feeding your child.
- Get into the habit early of cleaning your child’s hands before and after they eat.
- Thoroughly wash all bowls, spoons and other utensils in hot soapy water, rinse well and air dry; or use a dishwasher.
- When preparing food, always follow safe food handling practices. For information go to the Public Health website or call Public Health at 519-575-4400.
Store-bought baby food

If you are buying and feeding store-bought baby food:

- Check the “best before” date; do not use if past that date.
- Make sure the safety seal has not been broken.
- Listen for a ‘popping’ sound when opening a jar for the first time; do not give food if it does not make this sound.
- Cover opened containers of food and store in the refrigerator.
- Mark the date the container was opened to keep track of when to throw it out:
  - Covered containers of vegetables and fruit will keep for up to two days in the refrigerator.
  - Covered containers of meat, poultry and mixed foods containing meat or poultry may be refrigerated for up to 24 hours.
- Do not feed your child directly from a jar; bacteria from your baby’s mouth will get into food left in the jar. Spoon some into a bowl and feed from the bowl. If your baby is still hungry, add more to the bowl with a spoon that has not been in your baby’s mouth. Throw away any food left in the bowl when your baby is done eating.
- Avoid letting your child eat directly from a pouch of food. Put food from the pouch in a bowl and feed your child with a spoon so that your child can learn how to eat from a spoon.

Making your own baby food

You don’t need to use store-bought baby food. You can make your own baby food from the same nutritious foods you feed the rest of the family. Some babies like the taste of homemade food better than store-bought food. Making your own baby food can save you money, give your baby a wider variety of foods and allow you to have more control over the texture.

Follow safe food handling practices and cook and store food properly. For more information, call Public Health at 519-575-4400 or go to the Public Health website and search “food safety”.

Suggested equipment:

- Pots or microwave-safe dishes for cooking foods
- Blender, food processor or food mill (hand grinder), or wire sieve and spoon for blending/puréeing
- Fork or potato masher for mashing lumpy foods
- Ice cube trays or cookie sheets for freezing portions
- Plastic freezer bags or containers to store frozen food
Preparing food for spoon feeding

Before starting, wash your hands with soap and warm water and dry with a clean towel. Wash and rinse utensils and all equipment. Wash and sanitize counters and cutting boards.

- Wash vegetables and fruit. Remove seeds, pits and tough skin. Cook in a small amount of boiling water or steam until tender.
- Thoroughly cook meat, poultry and fish. Use a food thermometer to make sure it reaches a safe internal cooking temperature. For safe internal temperatures go to the Public Health website and search “food safety.”
- Rinse canned foods with water to remove salt before cooking.
- Blend, mix, mash or chop the cooked food with some liquid such as breast milk or water. Start with a small amount of liquid at first and slowly add more until the desired texture/thickness is reached.

Change the amount of liquid to make the appropriate texture for your baby. To make food thinner, add more liquid; to make food thicker, use less liquid.

Move to thicker, lumpy textures as soon as your baby can manage. Many babies can handle lumpy textures at six months.

**TIP:** Avoid adding salt, sugar and other sweeteners to foods so your baby can learn the natural taste of food. Once your baby has experienced the natural taste, you can begin to add the same mild flavorings your family enjoys.

Storing prepared food

Prepared food should not be left at room temperature for more than two hours. Refrigerate or freeze prepared food that is not going to be eaten right away.

- Refrigerate prepared food for up to two days (at 4°C or colder); throw out what is not used.
  - Store meat, poultry, fish and eggs for up to 24 hours.
- For freezer storage, freeze food in small portions for up to two months (at -18°C):
  - Place food in ice cube trays or drop spoonfuls on a cookie sheet and freeze.
  - Once frozen, put in freezer bags and label for storage with the name of the food and date.

**TIP:** Avoid storing large amounts of puréed food in the freezer, as it is important to give your baby lumpy foods as soon as they can handle them. A baby may only need puréed food for a short time, or as one of a variety of textures being offered.
**Thawing and warming prepared food**

Thaw only the amount of food needed for one meal at a time in the refrigerator, under cold running water or as part of the heating process.

- Heat food until steaming hot, and let it cool before serving to your baby.
- Check the temperature of the food before feeding it. Stir the food well and test it on the back of your hand to make sure the food is warm, but not hot.

**For the safest way to warm food:**

- Place the food in a heat-safe dish and set the dish over a small pan of very hot water.
- Stir the food often so that it heats evenly.
- Always check the temperature before serving it to your baby.

Never refreeze thawed food. Once food has been warmed, throw away any food that is not eaten; do not refrigerate for later.

**Warming food in the microwave**

Be very careful if you choose to warm food in the microwave. Microwaves heat food and liquids unevenly and can create hot spots that can burn your child.

If using a microwave:

- Put food into a microwave-safe dish and heat on low to medium setting until steaming hot.
- Stir the food and let it cool.

**Test the temperature in different spots of the food before feeding it to your child.**

- Different foods heat at different rates. If heating more than one type of food in a dish, test the temperature of each food separately.
Milk and weaning your growing child

Continue to breastfeed or give expressed breast milk in addition to solid foods up to two years of age and beyond. There is no best age to stop breastfeeding; it is different for every mother and child. When you and your baby are ready, wean gradually to allow your milk supply to decrease slowly, without discomfort.

See the Public Health website for breastfeeding information.

- If your baby is not receiving breast milk and is younger than nine months of age, you will need to feed artificial baby milk (formula). For information about how to sterilize equipment and prepare artificial baby milk safely, call Public Health at 519-575-4400 and ask to speak to a Public Health Nurse.
- When your baby is between nine and 12 months of age and eating a variety of foods, including iron-rich foods twice a day, you may choose to start offering pasteurized homogenized (3.25 per cent MF) cow’s milk in a cup in addition to breast milk.
  - If it is a child’s main milk source, offer 500 mL a day.
  - Pasteurized full fat goat milk with added folic acid and vitamin D may be offered instead of cow’s milk.
- Offer homogenized (3.25 per cent MF) milk until your child is two years old; after that lower fat milk (skim, 1 per cent or 2 per cent MF) may be offered.
- Fortified soy beverage may be given as a main beverage after 24 months of age.
- Rice, almond, or other plant-based beverages such as coconut ‘milk’ are not suitable as a baby’s or young child’s main milk source.
- Toddler artificial baby milk (formula) marketed for children as an alternative to cow’s milk is not necessary.
- Limit your child’s main milk source to no more than 750 mL a day so they don’t fill up on milk and not have room for nutrient-rich foods.

Vitamin D supplementation

Health Canada recommends a daily vitamin D supplement of 400 IU (10 µg) from birth up to two years of age for children drinking any breast milk.

Young children may need a daily vitamin D supplement of 400 IU if they do not drink at least 500 mL (two cups) of cow or fortified goat milk each day, as it may be difficult for them to get enough vitamin D from food sources. Talk to your health care provider if you have any questions.
Other beverages

Babies and young children can fill up on beverages leaving little room for healthy foods that provide important nutrients they need. Make sure other beverages do not replace your child’s main milk source (see page 14).

- Offer sips of water from an open cup for thirst.
- Avoid offering juice; it is not needed. Juice is high in sugar and can cause tooth decay (see page 26). Offer fruit instead.
- If you choose to offer juice, offer pasteurized 100 per cent juice (with no sugar added) in an open cup at a meal or snack and limit to 125 mL (half a cup) a day.
- Babies and young children should not be given beverages with added sugar, artificial sweeteners or caffeine. Do not offer fruit beverages, punches, cocktails, crystals, pop, diet pop, sports drinks, tea, herbal teas or coffee.

Avoid using sippy cups. Using an open cup helps your baby to develop their drinking skills. At first your baby will need your help and may only take small amounts, but they will get better with practice.

TIP: If your drinking water comes from a private well, test water at least three times a year (spring, fall, winter) for bacteria such as E. Coli and Coliforms, and once a year for nitrates and fluoride. For more information, go to www.regionofwaterloo.ca/ph.
Choosing foods based on what baby can do:

**Six to eight months**

This is only a guide; all babies are different and develop at their own pace. At six months when baby is eating iron-rich foods twice a day, gradually add other foods and increase the number of times foods are offered, until offering three meals and one to two snacks a day according to baby’s appetite. Feed baby from a spoon and offer finger foods. Continue to breastfeed when baby shows signs of being hungry (see page 6).\(^a\)

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</tr>
<tr>
<td>Takes food from hand into mouth</td>
<td>Minced</td>
<td>Soft cooked vegetables such as carrots, broccoli, green beans, squash, peas, sweet potato, cauliflower, asparagus</td>
</tr>
<tr>
<td>Drinks from open cup with spills</td>
<td>Puréed</td>
<td>Soft ripe or soft cooked fruit such as pear, peach, avocado, mango, melon</td>
</tr>
<tr>
<td>Lumpy mashed</td>
<td>Grated</td>
<td>Full fat (2% MF or higher) plain yogurt, cottage cheese, kefir; hard cheese</td>
</tr>
<tr>
<td>Shredded</td>
<td>Soft diced</td>
<td>Soft cooked pasta; cooked quinoa, couscous, sticky rice</td>
</tr>
<tr>
<td>Offer family foods prepared to prevent risk of choking (see page 9).</td>
<td></td>
<td>Finger foods such as dry toast cut into strips; soft ripe fruit such as banana, pieces of soft-cooked vegetables and fruit</td>
</tr>
</tbody>
</table>


<table>
<thead>
<tr>
<th>Feeding occasion</th>
<th>Sample feeding plan - examples of food to offer(^b)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early morning</td>
<td>• Breastfeeding(^a)</td>
</tr>
<tr>
<td>Morning (Breakfast)</td>
<td>• Breastfeeding(^a)</td>
</tr>
<tr>
<td></td>
<td>• Iron-fortified infant cereal</td>
</tr>
<tr>
<td></td>
<td>• Mashed strawberry or other soft fruit</td>
</tr>
<tr>
<td>Snack</td>
<td>• Whole grain toast cut into small pieces or strips</td>
</tr>
<tr>
<td>Midday (Lunch)</td>
<td>• Breastfeeding(^a)</td>
</tr>
<tr>
<td></td>
<td>• Iron-fortified infant cereal</td>
</tr>
<tr>
<td></td>
<td>• Hard boiled egg, mashed, minced or grated</td>
</tr>
<tr>
<td></td>
<td>• Cooked and mashed sweet potato or other vegetable</td>
</tr>
<tr>
<td>Snack</td>
<td>• Puréed, unsweetened stewed prunes</td>
</tr>
<tr>
<td>Evening (Dinner)</td>
<td>• Breastfeeding(^a)</td>
</tr>
<tr>
<td></td>
<td>• Ground or finely minced plain, cooked chicken or other meat</td>
</tr>
<tr>
<td></td>
<td>• Cooked and mashed broccoli or other vegetable</td>
</tr>
<tr>
<td>Evening snack</td>
<td>• Breastfeeding(^a)</td>
</tr>
</tbody>
</table>

\(^a\) Breastfeed or offer expressed breast milk up to two years and longer. If baby is not fed breast milk, artificial baby milk (formula) may be offered according to baby’s appetite. \(^b\) From Nutrition for Healthy Term Infants: Recommendations from six to 24 months (Health Canada, 2014).
Eight to 10 months

This is only a guide; all babies are different and develop at their own pace. Offer three meals and one to two snacks a day, according to baby’s appetite. Offer iron-rich foods at least twice a day. Give baby a spoon to hold while spoon feeding and offer finger foods. Continue to breastfeed your baby when showing signs of hunger (see page 6).a

<table>
<thead>
<tr>
<th>What baby can do</th>
<th>Textures</th>
<th>Suggested foods</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Bites off food</td>
<td>• Grated</td>
<td>• Offer family foods prepared to prevent risk of choking (see page 9).</td>
</tr>
<tr>
<td>• Picks up food with thumb and forefinger</td>
<td>• Shredded</td>
<td>• Iron-rich foods (see page 3)</td>
</tr>
<tr>
<td>• Chews with circular movement</td>
<td>• Ground</td>
<td>• Cooked soft vegetables or soft, ripe raw fruit</td>
</tr>
<tr>
<td>• Curves lips around open cup</td>
<td>• Lumpy mashed</td>
<td>• Grated raw vegetables and fruit like carrot and apple</td>
</tr>
<tr>
<td>• Drinks from open cup with few spills</td>
<td>• Minced</td>
<td>• Full fat cheese, yogurt, kefir, cottage cheese</td>
</tr>
<tr>
<td>• Tries to use spoon</td>
<td>• Puréed</td>
<td>• Soft cooked pasta, quinoa, rice</td>
</tr>
<tr>
<td></td>
<td>• Soft diced</td>
<td>• Whole wheat bagel, bread, roti, flat bread; unsalted crackers; homemade whole grain muffin</td>
</tr>
<tr>
<td></td>
<td>• Soft chopped</td>
<td>• Casseroles and mixed dishes</td>
</tr>
<tr>
<td></td>
<td>• Foods that soften or dissolve in the mouth</td>
<td></td>
</tr>
</tbody>
</table>


<table>
<thead>
<tr>
<th>Feeding occasion</th>
<th>Sample feeding plan - examples of food to offer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early morning</td>
<td>• Breastfeedinga (if needed)</td>
</tr>
<tr>
<td>Morning (Breakfast)</td>
<td>• Breastfeedinga</td>
</tr>
<tr>
<td></td>
<td>• Iron-fortified infant cereal or scrambled egg or other iron-rich food</td>
</tr>
<tr>
<td></td>
<td>• Soft ripe pear</td>
</tr>
<tr>
<td>Snack</td>
<td>• Unsweetened full fat plain yogurt or grated cheese</td>
</tr>
<tr>
<td>Midday (Lunch)</td>
<td>• Breastfeedinga</td>
</tr>
<tr>
<td></td>
<td>• Cooked carrots or other vegetable</td>
</tr>
<tr>
<td></td>
<td>• Cooked turkey or other iron-rich food</td>
</tr>
<tr>
<td></td>
<td>• Soft ripe banana or other fruit as a finger food</td>
</tr>
<tr>
<td>Snack</td>
<td>• Whole wheat pita or other grain product</td>
</tr>
<tr>
<td></td>
<td>• Applesauce or other fruit</td>
</tr>
<tr>
<td>Evening (Dinner)</td>
<td>• Breastfeedinga</td>
</tr>
<tr>
<td></td>
<td>• Cooked lean beef finely minced or other iron-rich food</td>
</tr>
<tr>
<td></td>
<td>• Cooked cauliflower or other vegetable</td>
</tr>
<tr>
<td></td>
<td>• Cooked macaroni or other pasta or grain product</td>
</tr>
<tr>
<td>Evening snack</td>
<td>• Breastfeedinga</td>
</tr>
</tbody>
</table>

a Continue to breastfeed or offer expressed breast milk up to two years and longer. If baby is not fed breast milk, artificial baby milk (formula) should be offered until baby is nine to 12 months of age and eating a variety of foods, including iron-rich foods twice a day (see page 14).
Ten to 12 months

This is only a guide; all babies are different and develop at their own pace. Offer three meals and one to two snacks a day, according to baby’s appetite. Offer iron-rich foods two or more times a day; at 12 months offer iron rich food at each meal. Give baby a spoon to use and continue to offer finger foods. Continue to breastfeed.  

<table>
<thead>
<tr>
<th>What baby can do</th>
<th>Suggested foods</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Gets better at picking up food with fingers and thumb</td>
<td>• Offer family foods prepared to prevent risk of choking (see page 9).</td>
</tr>
<tr>
<td>• Improves chewing</td>
<td>• Offer a variety of textures, including small pieces of soft food baby can pick up with fingers.</td>
</tr>
<tr>
<td>• Improves drinking from open cup</td>
<td>• Offer a variety of foods including vegetables, fruits, whole grain products, cheese, yogurt, kefir, cottage cheese, iron-fortified infant cereal and cooked meat, poultry, fish, legumes, eggs and tofu.</td>
</tr>
<tr>
<td>• Gets better at using a spoon</td>
<td></td>
</tr>
</tbody>
</table>


<table>
<thead>
<tr>
<th>Feeding occasion</th>
<th>Sample feeding plan - examples of food to offer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early morning</td>
<td>• Breastfeeding(^a) (if needed)</td>
</tr>
</tbody>
</table>
| Morning (Breakfast) | • Breastfeeding\(^a\)  
|                  | • Iron-fortified infant cereal or other iron-rich food  
|                  | • Strawberries or other fruit or vegetable  
|                  | • Whole wheat toast with nut butter spread thinly |
| Snack            | • Unsweetened ‘o’-shaped oat cereal or other grain product  
|                  | • Grapes (seedless) cut into small pieces or other fruit or vegetable |
| Midday (Lunch)   | • Breastfeeding\(^a\)  
|                  | • Cooked chicken or other iron-rich food  
|                  | • Whole wheat pasta or other whole grain  
|                  | • Cooked carrots or other vegetable |
| Snack            | • Hard boiled egg, cut in bite-sized pieces  
|                  | • Whole wheat unsalted crackers |
| Evening (Dinner) | • Breastfeeding\(^a\)  
|                  | • Canned or cooked salmon (bones removed or crushed)  
|                  | • Cooked squash or other vegetable  
|                  | • Cooked quinoa or other whole grain  
|                  | • Soft ripe peach or other fruit |
| Evening snack    | • Breastfeeding\(^a\) |

\(^a\) Continue to breastfeed or offer expressed breast milk up to two years and longer. Pasteurized cow’s milk (3.25% MF) may be offered when child is eating a variety of foods, including iron-rich foods twice a day (see page 14).
Feeding your child from 12 months

Children learn eating habits early in life. Parents and caregivers play an important part in helping children eat nutritious foods and develop healthy eating habits.

For toddlers between one and two years of age, food becomes the main source of nutrients. By 12 months of age, most children can eat small pieces of soft foods with their fingers and hold a spoon. Encourage young children to feed themselves; the more times they try, the better they will get.

A healthy feeding relationship develops when parents and caregivers do their job in feeding and trust children to do their job in eating. By following Ellyn Satter’s Division of Responsibility in Feeding method, children are more likely to:

• Eat according to their appetite and grow to be the size that is right for them.
• Develop a healthy attitude towards food and learn healthy eating habits.

As an adult, your job is to decide:
• What foods to offer
• When to offer food
• Where to offer food

Your child’s job is to decide:
• Whether or not to eat a food
• How much to eat

What foods and beverages to offer

At regularly planned meals and snacks offer a variety of foods from Canada’s food guide including vegetables, fruits, whole grains and protein-rich foods (visit Health Canada).

• Continue to breastfeed for up to two years of age and beyond (see page 14).

• Include at least one vegetable or fruit at every meal and snack.

• Offer plant-based protein-rich foods often, such as legumes.

• Avoid offering processed luncheon meats, wieners (hot dogs), sausages, bacon and packaged meats; they are high in unhealthy fat and salt.

• Avoid offering foods that may cause food poisoning (see page 10).

• Avoid offering fruit juice and drinks with added sugar, caffeine and artificial sweeteners (see page 15).

• Offer your child the same nutritious food as the family, with changes if needed, to make it safer for a young child to eat. See page 9 for safe preparation tips.

• Offer new foods regularly along with foods your child is familiar with. Watch for signs of allergy when offering a new food (see page 8).
When to offer food
Young children have small stomachs and need to eat small amounts at regularly scheduled meals and snacks during the day.

Provide three planned meals and two to three planned snacks at about the same time each day.

• Try to have two and a half to three hours between each meal and snack so that your child will be hungry and ready to eat.
• Do not let your child eat between planned meals and snacks.
• Offer water for thirst between meals and snacks.

Where to offer meals and snacks
Children eat best sitting down at a table with an adult present and no distractions.

• Sit and eat with your child. This lets you watch your child for choking and signs of allergy, and your child can see you eating and enjoying the same food. You are an important role model.
• Turn off the TV and put away phones, books, toys and other distractions.
• Do not let your child eat or drink while walking, running or while in a moving car.

Your child decides whether to eat and how much to eat
It isn’t always easy letting your child decide if they are going to eat or how much to eat, but by doing this you help your child learn to eat when hungry and to stop eating when they have had enough (feel satisfied).

• At around 12 months of age it is normal for your child’s growth to slow down and they may not eat as much as before. Don’t worry; your child will eat more as they grow.
• Sometimes a child will eat a lot and at other times very little or even nothing at all. A child’s appetite may increase when they are growing more quickly and at times when they are more active. When a child is over-excited or feeling tired, they may not feel hungry.

Trust your child to know how much to eat.
Allow your child to eat according to their appetite, just as when they were an infant. A relaxed approach to food is best.

• Let your child choose what and how much to eat from the food offered.
• Offer small portions at first; offer more if your child is still hungry.
  ○ For toddlers (one to two years of age), a portion is about one quarter to one half of an adult-sized portion depending on a child’s appetite.
  ○ For preschoolers (three to five years of age), a portion can be from one half to one adult-sized portion depending on a child’s appetite.
• If your child does not want to eat a new food, try again at another time. It is normal for children to need to see a food many times before tasting it.
• Do not coax, pressure or bribe your child to eat; do not have a ‘one bite’ rule. 
• Never use food as a reward or withhold food as a punishment.
• Let your child leave food on their plate. By offering small portions, less food is wasted if your child is not hungry.
• Never force your child to eat. There will be another chance for your child to eat at the next planned meal or snack.

**TIP:** Encourage your child to be physically active during the day to help them be hungry and ready to eat at meal and snack times.

---

### Snacks for young children

Snacks are important to help young children get all the nutrients they need.

• Offer a vegetable or fruit at each snack along with one or two other healthy foods.
• Avoid offering sweet and sticky foods. If offering a treat sometimes, offer a vegetable or fruit with it and brush your child’s teeth after eating (see pages 25 and 26).

**The following are some snack ideas; prepare food in a way that lowers risk of choking.**

• Cottage cheese or plain yogurt with fruit
• Egg salad on an English muffin with raw or steamed broccoli
• Fruit smoothie made with milk, yogurt and fruit
• Hard boiled egg and avocado slices
• Hummus (or other legume-based dip) and assorted vegetables to dip (see tip on page 9)
• Mini salmon/tuna patties with raw or steamed carrots
• Quinoa salad with fruit
• Three bean salad served with apple slices
• Tofu sticks (slice tofu and bake) served with vegetables or fruit
• Whole grain crackers with cheese and apple slices
• Yogurt dip with broccoli or other vegetable or fruit for dipping
• Pita wedges with homemade salsa or spinach dip with orange slices
• Whole wheat tortilla with grated cheese melted; serve with chopped tomato and cucumber
• Watermelon (seeds removed) or other fruit served with cheese cubes

**TIP:** Children may or may not need an evening snack depending on when they had their evening meal and when they go to bed at night. If offering an evening snack, offer a small portion before starting your child’s bedtime routine. Remember to brush your child’s teeth after eating, before going to bed (see pages 25 and 26).
Sample feeding plan for young children (one to five years)

Offer three meals and two to three snacks each day. Offer a variety of foods each day including vegetables and fruit; meat, poultry, fish, legumes, eggs and tofu; whole grain products; and milk products such as cheese and yogurt. Try to offer at least one vegetable or fruit at each meal and snack.

<table>
<thead>
<tr>
<th>Feeding occasion</th>
<th>Examples of foods to offer</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Offer the same foods as the rest of the family, prepared safely to prevent choking (see page 9)</td>
</tr>
<tr>
<td>Morning (Breakfast)</td>
<td>Whole grain toast&lt;br&gt;Nut butter (spread thinly on toast)&lt;br&gt;Banana (choose soft, ripe; offer whole, cut in half, or cut in slices)&lt;br&gt;Milk*</td>
</tr>
<tr>
<td>Snack</td>
<td>Hummus&lt;br&gt;Vegetables for dipping such as green/red peppers cut in strips and cucumber slices&lt;br&gt;Milk*</td>
</tr>
<tr>
<td>Midday (Lunch)</td>
<td>Carrot strips (steam until soft for toddlers)&lt;br&gt;Chicken sandwich (on whole wheat bread)&lt;br&gt;Milk*</td>
</tr>
<tr>
<td>Snack</td>
<td>Plain unsweetened yogurt&lt;br&gt;Strawberries, sliced&lt;br&gt;Milk*</td>
</tr>
<tr>
<td>Evening (Dinner)</td>
<td>Cooked asparagus&lt;br&gt;Cooked squash&lt;br&gt;Whole wheat pasta with homemade tomato sauce&lt;br&gt;Meatballs made with lean ground beef&lt;br&gt;Pear slices (choose soft ripe pears or canned pears packed in own juice or water, rinsed)&lt;br&gt;Milk*</td>
</tr>
<tr>
<td>Evening snack</td>
<td>Cheese cubes and sliced apple (see tip on the bottom of page 21)</td>
</tr>
</tbody>
</table>

*Continue to breastfeed or offer expressed breast milk up to two years of age and longer. You may choose to offer cow’s milk in addition to breast milk (see page 14). Offer water for thirst throughout the day.

A young child’s appetite will change from day to day and meal to meal. Start by offering small portions. For example, start by offering a 12 month old one to two tablespoons of each food and provide more food if the child is still hungry. Always have enough of at least one food available to give more, in case your child is really hungry.

For more information about planning meals and snacks for young children, go to [www.unlockfood.ca](http://www.unlockfood.ca).
Do you want to know if your child is a healthy eater?

NutriSTEP® name and logo are Registered trademarks of Sudbury & District Health Unit.

Nutri-eSTEP is an online questionnaire that parents of toddlers (18 to 35 months) and preschoolers (three to five years) can answer about their child’s eating habits. By going online and completing the age-appropriate survey, you will find out what is ‘going well’ and ‘what to work on’ in relation to your child’s eating. You will also get links to tools and resources. For more information, go to the NutriSTEP® website.

Common eating concerns

Parents of young children sometimes have concerns about their child’s eating. Toddlers and preschoolers are often labeled as being picky eaters because they can be fussy about what they eat. Refusing food is a way for children to show their independence and it is normal for young children to not want to try new foods. The following are some common concerns of parents around their child’s eating:

• My child does not want to eat a snack or a meal
• My child wants to eat the same food all the time
• My child does not want to eat a certain food
• My child does not want to try any new foods

The Division of Responsibility in Feeding method helps to avoid these issues and can be used to deal with them. It can also take away stress around eating for both parent and child. The following tips will help you feed a fussy eater:

• Offer the same food choices as the rest of the family and let your child decide whether or not to eat the food. Do not make special food or meal for a child.
• Always have at least one food your child is familiar with at every meal and snack.
• Do not comment or make a fuss if your child does not want to eat a food. Be a role model. Eat together as a family and let your child see you eating and enjoying the food. Let your child decide when they are ready to follow your example.
• When there is a food your child wants to eat all the time, offer the favourite food once a day at a meal or snack along with the same variety of choices as the rest of the family.
• Provide lots of opportunities for your child to try a new food. Your child may need to see a food many times before they will taste it.
The following are other concerns a parent may have about their young child’s eating:

**My child eats too much:** Trust your child to eat according to their appetite. Do not restrict food; it can cause them to stop following their signs of hunger and fullness. Have enough of at least one food available at meals and snacks for when a child is really hungry. Restricting food often results in children over-eating when they get the chance.

**My child needs a vitamin and mineral supplement:** Your child is likely getting all the vitamins and minerals they need if eating a variety of foods at most meals and snacks including vegetables, fruits, whole grain products, meats, poultry, fish, legumes, tofu, eggs, milk, and milk products. Before giving your child a supplement, talk to your health care provider. All vitamin and mineral supplements in the home should be locked up out of reach of children.

If a feeding issue continues, or you are concerned about your child’s eating, talk to your health care provider, or call Telehealth Ontario at 1-866-797-0000 to talk to a Registered Dietitian.

Visit [Ellyn Satter’s website](#) for information about the Division of Responsibility in Feeding method.

**Constipation**

Every child has different bowel habits. Some children have more than one bowel movement a day and others may have a bowel movement once every two to three days, or more. Your child’s bowel movement pattern may change when solid foods or cow’s milk is introduced, however, it is not a sign of constipation if stools are soft and passed on a regular basis. If your child has painful bowel movements that are hard, dry, pebble-like and difficult to pass, your child may be constipated. What you can do:

- If your child is younger than six months of age, call your health care provider.
- If your child is over six months of age you can:
  - Offer more fluids in the day such as breast milk and water.
  - Offer high fibre foods such as whole grain products, vegetables, fruits, and cooked legumes such as beans, chickpeas and lentils.
  - Give your child lots of chances to be physically active each day.
  - Relax and be patient when your child is learning to use the toilet.

If you have concerns about your child’s bowel habits, talk to your health care provider. Do not give laxatives, enemas, suppositories or medications without talking to your health care provider first. For more information about constipation, go to [www.caringforkids.cps.ca](http://www.caringforkids.cps.ca).
Your child’s teeth

The first teeth usually appear between six to 10 months of age, with the last tooth usually appearing between a child’s second and third birthday. Each child is different.

Teething is the process of teeth working their way through the gums. Signs your baby is teething include: drooling; fussiness and irritability; red, swollen gums and red cheeks; and needing to chew on things, such as fingers and toys. Teething should not be confused with illness; it does not cause fever, stuffiness, runny nose or diarrhea.

How to help your baby with teething

• Gently rub the gums with a finger or cold wet cloth.
• Give your baby a teething ring or wet cloth that has been refrigerated to chew on.

**TIP:** Avoid giving hard foods such as raw vegetables that could cause choking. Do not give “teething biscuits” as they contain sugar and could be a choking hazard. **Do not use over-the-counter teething gels.**

It is important to keep the first set of teeth healthy, as they allow your child to eat, drink and speak properly. They also keep a place and guide the way for adult teeth to come in, which usually starts around six years of age. Your child’s last baby tooth will not get loose and fall out until they are around 12 years of age, so it is important to take care of this first set of teeth.

Dental care for infants and toddlers

• From birth, wipe your baby’s gums with a soft clean, warm, damp cloth after each feeding.
• As soon as teeth appear, brush them twice a day using a soft baby toothbrush and water – no toothpaste.
• The most important time to brush teeth is before your child goes to sleep at night.
• **Children should be seen by a dentist or dental hygienist by their first birthday.**
**Dental care for preschoolers:**

- At three years of age and when your child can spit when told, begin to brush with a children’s toothpaste with fluoride. Use a pea size amount of toothpaste. Rinse the toothpaste from your child’s mouth; do not let them swallow it.
- It is important to teach your child to brush their own teeth, but until seven or eight years of age they cannot do a very good job. Until then, they will need you to brush their teeth after they brush.
- Be patient and make it fun; it is an important habit for your child to develop.

**Tips to keep teeth healthy:**

- Stop breastfeeding when your child falls asleep.
- Never put your baby or child to bed with a beverage other than water.
- Avoid using a sippy cup. Do not let your child drink all day from a sippy cup with a beverage other than water (see page 15).
- Avoid giving your child sticky and sweet snacks that can cause cavities. Offer healthy choices such as vegetables, fruit, cheese and yogurt instead.
- Avoid offering juice and sugar sweetened beverages. If offering, do not give in a bottle or sippy cup (see page 15). Sucking on these over time, increases exposure of the teeth to sugar in the beverage and can lead to tooth decay/cavities.

**Early childhood tooth decay**

If teeth are not cleaned properly, the sugar in food and drinks can cause tooth decay/cavities, even in very young children. **Check for tooth decay at least once a month by lifting the upper lip to see up to the gum line.** If teeth look chalky, have brown or white spots or are chipped, take your child to a dental professional. For more information on this topic, visit [www.regionofwaterloo.ca/dentalhealth](http://www.regionofwaterloo.ca/dentalhealth).

**Three stages of tooth decay**

<table>
<thead>
<tr>
<th>Stage</th>
<th>Very Early Decay</th>
<th>Decay</th>
<th>Severe Decay</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>White chalky areas around the gumline. <em>It can be reversed, if found early.</em></td>
<td>Brown areas or decayed spots along gumline.</td>
<td>Spots continue to expand and tooth structure can be lost. <em>Can result in tooth loss.</em></td>
</tr>
</tbody>
</table>

Call Public Health at 519-575-4400 ext. 5010 to get information about financial assistance programs for dental treatment for children, or to book a free appointment for your child’s first birthday visit.
Where to go for feeding help

**Telehealth Ontario**
1-866-797-0000 (TTY: 1-866-797-0007)
- Breastfeeding support 24 hours a day, seven days a week.
- Talk to a Registered Dietitian, Monday to Friday during business hours.

**Region of Waterloo Public Health and Emergency Services**
519-575-4400 (TTY: 519-575-4608)
[www.regionofwaterloo.ca/ph](http://www.regionofwaterloo.ca/ph)

**Websites for more information:**
Canadian Paediatric Society: [www.caringforkids.cps.ca](http://www.caringforkids.cps.ca)
Dietitians of Canada: [www.dietitians.ca](http://www.dietitians.ca)
Food Allergy Canada: [www.foodallergycanada.ca](http://www.foodallergycanada.ca)
Health Canada: [www.hc-sc.gc.ca](http://www.hc-sc.gc.ca)
Unlock Food: [www.unlockfood.ca](http://www.unlockfood.ca)

**References:**
Health Canada, Canadian Paediatric Society, Dietitians of Canada, and Breastfeeding Committee for Canada (2014). *Nutrition for healthy term infants: Recommendations from six to 24 months.*

Family Compass Waterloo Region is a quick, easy and interactive website for parents, professionals and youth who are looking for local health, social and recreational services.

**Search for Services:**
A self-search database of local services

**I Have a Concern:**
A tool to connect to a local organization to address concerns about child/youth development

**Resources for Parents:**
A link to Parenting Now to access resources for parents

[www.FamilyCompassWR.ca](http://www.FamilyCompassWR.ca)
Check out the other resources in this series!

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The above booklets and alternate formats of this document are available upon request.