**POINTS TO REMEMBER**

**Baby-led Feeding Solids**

- Baby can sit in your lap or in a high chair with back support
- Allow your baby to explore the food (by touching, smearing, smelling)
- Remember at first your baby needs to learn about how to chew, use her tongue and swallow;
- Don’t expect your baby to swallow new foods at first (or even second or third try); s/he may only take a few spoonfuls in the beginning
- Allow your baby some independence such as holding her spoon, or tippy cup, or feeding herself.
- Show your baby that you like the food. Make sounds like “Uhmm” and “Ahh” when she eats; model appropriate eating behaviors yourself (let your baby feed you)
- Speak “parentese” to your baby during feeding and name the foods your baby is eating
- Show a joyful face and take turns feeding and talking
- Praise social behaviors and model them (say thank you for sharing)
- Respond to your baby’s cues. Follow your babies lead and let her set the pace, choose foods to try and decide when she is done
- Combine nonverbal signals to help your baby communicate “all done” or “more”
- Don’t get into food fights by forcing your baby to eat
- Make eating an enjoyable family time: have your baby take part in your own meals so s/he can copy your eating behaviors and always stay with your baby while s/he is eating
- Put an underlay of plastic under the chair of your baby – so it does not matter if your baby spills.

---

**Baby Alert**

Breast milk or first infant formula will still be your baby’s primary source of nutrition for several more months, so don’t worry if your baby does not eat very much. At this stage he is just learning how to chew, what foods feel like, how they taste, and how to swallow.

---

**Baby Alert**

Avoid offering highly processed foods and foods with added salt or sugar, but check the most recent guidelines or with your health visitor or primary care provider for the latest research on what foods you should avoid in the first year of life.
Points to Remember

Baby-Led Introduction of Solid Foods (6 months)

- Right from the beginning at 6 months you can start by introducing a variety of savory foods representing a range of textures. Follow your baby’s cues as to what she wants to eat and let her explore different tastes. Continuing to breast feed will increase your baby’s immunity for a year.

- Your child is ready for solid food when he has head control, can sit upright, and when the tongue is no longer used to shove the food out of the way. Moreover, your child looks curiously at the food and opens her mouth when she sees the spoon.

- Let your baby eat in the high chair with your family whenever you can— not in front of the television or on the run. Be sure to do up the baby chair safety straps.

- Introduce solids at 6 month starting with a small amount of food once a day. Until then, breast milk or formula is all your baby needs. Waiting for solids until 6 months has been shown to reduce the risk of your baby getting allergies and, if you are breastfeeding, it will also increase your baby’s immunity for the rest of the first year.

- Feed your baby in a high chair or let your baby sit in your lap – not in front of the television or while moving about. Be sure to do up the baby chair safety straps.

- Check out the latest guidance on introducing solids from your health visitor, Ministry or World Health Organization web sites.

- Begin once a day feeding at a time where your baby is comfortable and not too hungry

- Do not worry if your baby does not seem interested in eating off the spoon. Let him smell and taste and touch the food, and eat with his fingers.

- Let your baby have his own spoon and model feeding yourself with a spoon.

- If your baby leans back or turns his head away from food he has probably had enough or is bored with the food game.

- Remember, babies first need to learn how to chew and swallow and your baby’s nutrition is still mostly from milk. This will gradually change by 1 year, when your baby will now be getting most of their nutrition from solid foods. You can think of the offering of first solid foods as play time and practice for learning how to eat. By 7-9 months babies manage to eat very well and you will be offering 3 meals a day.

- Start with food that is finger-shaped so your baby can hold it and always try to stay with your child, when s/he eats, so you can take action if necessary.
POINTS TO REMEMBER

Baby-led Introduction of Solid Foods (9-12 months)

• Continue to offer a variety of flavors and textures in food choices.
• Let your baby choose what foods he wants to try to eat. Allow for choice.
• Be prepared for messes by putting a plastic sheet or clean cloth under his high chair and dress him a short sleeve shirt. Remember food tastes, smells, and texture is all part of the learning process.
• Offer chunky, stick-shaped pieces of healthy food (vegetables, fruits, chicken) that your baby can hold on to. Soft, somewhat firm, lightly cooked vegetables are great for baby munching and tasting. Toast is easier to eat than soft bread and bread sticks are great for dipping.
• Stay with your baby whenever he is eating. Preferably, have your family meal at the same time to promote modeling eating behaviors.
• Most of all be baby-directed with feeding and let your child be in control of his own eating. Make this a time for fun, good exploration, and discovery. This will prevent many future problems over food.

Note: there is no need to puree or mash the food, even for spoon feeding. Continue to offer a variety of flavors and textures. Self-feeding allows babies to explore, taste, texture, and smell and encourages hand-eye coordination.
POINTS TO REMEMBER

Paced, Baby-directed Bottle Feeding

• Feed your baby by following your baby’s hunger cues. Hold your baby in your arms and invite your baby to use the bottle rather than forcing the nipple/teat into your baby’s mouth.

• Make sure the milk is not too hot (37 degrees) by testing a bit of milk on your wrist.

• Make sure the teat/nipple hole isn’t too small or too big. The teat/nipple hole is the right size when the milk runs several drops per minute. A small hole will frustrate your baby and make her swallow air. A large hole will result in your baby gulping milk too quickly.

• Hold the bottle at a low angle so that the teat/nipple is partly full, and your baby can control the amount of milk taken in. The teat/nipple does not need to be full of milk or the flow will be too quick.

• Allow your baby to control the milk intake during feeding. Have natural pauses or breaks when your baby is restless so there is no pressure to finish the bottle, and there are opportunities for burping.

• Stop when your baby lets go of the teat/nipple and doesn’t want any more milk.

• Don’t worry if your baby doesn’t burp every time you pat her, she probably doesn’t need to burp.

• Be present and aware of your baby’s signals. Stay calm and minimize distractions during feeding. Be sure to turn the TV off.

• Keep your baby calm and up right for 20 minutes after feeding and avoid too much activity.

• Minimize the number of people feeding your baby to provide predictability to the feeding routine and enhance secure bonding.
POINTS TO REMEMBER

Social and Emotional Developmental Milestones 6-12 months

- Stranger anxiety starts (7–8 months, begins; peaks at 10-18 months)
- Waves good-bye (8 months)
- Begins to understand object permanence (7–8 months)
- Can say mama or dada indiscriminately (8 months)
- Begins to understand the meaning of words (9 months)
- Searches for hidden objects (8–9 months)
- Will reach out to objects and indicate wants with gesture (8–9 months)
- Jabbers (9 months)
- Plays patty-cake and peek-a-boo (10–11 months)
- Says mama and dada to correct parent (10–11 months)
- Understands about 50 words but cannot say them (at 12 months) (action verbs, eating, bath time etc.)
- Discovers self in mirror
POINTS TO REMEMBER

Physical Developmental Milestones
6-12 months

• Sits without support (7 months)
• Starts trying to crawl (7–8 months)
• Tries to stand up while holding onto something (8–9 months)
• Gestures and points at objects (8–9 months)
• Will reach out to objects and indicate wants with gesture (8–9 months)
• Pick up small object with thumb and forefinger and bring to mouth (9 months)
• Turns pages of book (9 months)
• Drinks from sippy cup and eats with fingers (9 months)
• Crawls well with belly off floor (10 months), but crawling is extremely variable and babies have a variety of ways of mastering this skill. Some drag one foot, some do a “commando” crawl, and some skip crawling and go straight to cruising. As long as your baby is meeting other developmental milestones, chances are that variations in your child’s crawling schedule and style are completely normal.
• Puts objects in container (11 months)
• Stands alone briefly (11 months)
• Cruises (12 months)
POINTS TO REMEMBER

Deciding About Weaning* Your Child

The World Health Organization (WHO), American Academy of Pediatrics and all 4 United Kingdom health departments, recommend exclusive breast feeding for the first 6 months of life, the introduction of solids at about 6 months and continued breast feeding with family foods through the first year and for as long as the mother and baby want to continue. The WHO recommends breast feeding for at least two years. The reason for this recommendation is the research showing the beneficial immunological, nutritional, and health benefits for the baby and the mother. In the first few months of introducing solid foods, our baby will still get most of his nutrition from breast milk or first infant formula. Remember, the introduction of solids from 6-12 months is more about the baby learning how to self-feed and swallow than his nutritional needs.

Deciding when to stop breastfeeding is a personal and individual decision. Some families will decide to stop at 6 months, while others may continue to breast feed beyond a child’s first birthday. The decision about when to stop breast feeding may be influenced by factors such as your personal preferences, work and travel schedule, your health, your child’s health, or by the cues your child gives you she is ready to be weaned.

Many mothers make the decision to stop breastfeeding with mixed emotions. On the one hand, it can mean more flexibility and freedom, but on the other hand it also can also represent a loss of intimacy with your child. Regardless of when you decide to stop breastfeeding your baby or toddler, the best approach is a gradual, gentle process that is flexible and pays attention to what both you and your baby need. When this is done, weaning can be a positive experience for both you and your baby.

Stopping breastfeeding does not have to be an all-or-nothing proposition. Some women choose to stop during the day and breast feed in the evening or morning. Weaning is easier if your child has taken milk from a bottle (or sippy cup if your child is older than 12 months) before stopping breast feeding. So it’s a good idea to give an occasional bottle of expressed breast milk to your child around 4-6 months. Even if you plan to continue breast feeding, giving the occasional bottle of expressed breast milk can make it possible for others to be involved in your baby’s feeding process and give yourself a little freedom from feeding.

*Regarding the term “wean” — this is meant in the American sense, not the British sense. In the US, “weaning” means “giving up breast feeding” where as in the UK it means “adding complementary foods.”
POINTS TO REMEMBER

Tips on Deciding When to Stop Breastfeeding

• Breast feeding should continue as long as mutually desired by mother and baby. You are the best judge of when to stop.
• Don’t set an arbitrary deadline on how long you will nurse; remember every baby weans at a different age and has different developmental readiness for weaning.
• Delay weaning if there are other stressful life changes in your baby or toddler’s life such as beginning child care, or a household move, or you have recently gone back to work, or your child has had an illness. Try again in another month.
• Remember evidence clearly supports the importance of exclusive breast feeding for the first 6 months and continued breast feeding with appropriate iron rich complimentary foods for at least one year. This has been shown to produce optimal health outcomes for babies as well as mothers.

Some Further Tips—Take a Gradual Baby-led Approach when Possible

• Take a gradual approach to stopping breast feeding; skip one breast feeding a day for several days to start with (e.g., midday feeding); reduce feedings one at a time over a period of weeks –perhaps eliminating the bedtime breast feeding last to prolong the special bonding experience.
• Avoid abrupt weaning, if possible as it can be stressful for your child and cause mood swings, breast engorgement, or infections for you.
• Gradually cut down on the breast feeding/nursing time and nurse after meals instead of before meals (if your baby is over 8 months and is eating solids).
• Don’t offer, but don’t refuse; nurse when your baby is adamant about it but don’t offer at other times.
• Postpone and Distract. Engage your child in a fun play activity during the time you would usually nurse; distract with a snack or walk outside.
• If breast feeding is strongly associated with a particular time or activity (bedtime, wake up time) have the other parent or another caregiver do this routine with the child for several days. This may help to break the pattern since the child doesn’t associate breast feeding with this parent.
• Avoid sitting with your child in places that are associated with breast feeding during the weaning process (e.g., nursing chair). Instead, cuddle or play with your child in a new location during the usual breast feeding time.
• Make sure you offer regular meals and drinks to minimize hunger and thirst.
• If your child begins to pick up a self-soothing habit such as becoming attached to security blanket or special stuff toy, don’t discourage it. You can even encourage this by providing a special object or “lovey” for your child to hold while breast feeding.
• Be flexible, gentle and patient. Watch your child’s reactions and respect them; if he is having a hard time giving up the morning breast feeding, you may want to continue for a while rather than force the issue.
• Be prepared to experience a range of emotions, these are completely normal.
• Remember there are still countless ways you can provide your child with affection, closeness and security; offer plenty of opportunities for extra cuddling while weaning. Weaning needn’t signal an end to intimacy.