

# FEEDING BABY: Six to 12 Months

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By six months, children begin to eat a variety of foods and also become very interested in watching others eat. In fact, the infant loves to participate at meal time by sitting in a high chair at the table and tasting some good old fashion home cooking.

Around six months of age, parents may begin a three-meal-a-day schedule. My Plate.gov should be used as a guide for the portions and servings. The Food Plate suggests a specific number of servings and portion size from a variety of food groups. See the web site for more information: [myplate.gov](http://myplate.gov).

During this time, a parent may advance from pureed foods to foods with more texture (for example, switching from baby applesauce to regular applesauce). Finger foods may also be started. Cheerios (plain), vegetable/fruit puffs, whole wheat crackers, teething biscuits (not Zwieback, since it may cause choking), soft foods such as ripe bananas, pears, peaches, avocado, soft, steamed vegetables, hummus, egg yolks (no more than 2 per week), toast (whole wheat) and liverwurst morsels are just a few ideas. All meals should be offered while the child is sitting securely in the high chair at the table and this includes snack time. Children should not eat while playing and running around or in a car seat. These measures help prevent choking. Small amounts from the recommended portions are suggested if the child enjoys finger foods. Limiting the selection to one or two items on the high chair tray seems to work best. Finger foods may produce some gagging initially. The baby is learning how to chew new foods and this reflex should diminish as the child becomes proficient at gumming or chewing (with any teeth that have erupted). We recommend that all parents learn CPR for their own peace of mind as well as the safety of their child.

The cup should also be introduced at meal time. Offering a small amount breast milk or formula with meals is suggested. TIP: offering the cup at the end of the meal may encourage more intake of food instead of filling up on fluids. We do not recommend juice at this age. Depending on the baby,

the type of cup is an individual preference. Most children do best with a Sippy cup. This can be a messy experience — but practice makes perfect.

The baby should sit in a sturdy wide based high chair that has a tray and safety belt to secure the baby. The high chair should be made of an easily washable surface such as plastic. NEVER leave the baby unattended in the high chair! Be prepared for another messy experience! The family dog loves the baby's feeding time since a good meal is always guaranteed. A drop cloth on the floor may help in the clean up. And don't forget the bib! Mealtime messes will seem as if they will never end — and they won't for a long time.

As your baby establishes a three meal a day routine, the amount of breast milk or formula may decrease. This is to be expected. It is usually best to feed the baby solids before breast or formula so the infant does not fill up on milk. If your baby needs to nurse before solids are offered, then offer the breast or bottle then offer solid foods. If this does not work, offer solid foods about two hours after nursing or bottle feeding. The Academy of Pediatrics Council on Nutrition has recommended that all infants have breast milk or iron-fortified formula until one year of age. When the baby is 12 months old, breast or whole milk should be offered. After two years of age, the milk can be whole, 2%, 1%, or skim.

The usual menu for children six to twelve months old may include selections from each food category from the Food Plate. One year old children need between 900-1,000 calories a day. This is not as much food as you might expect. If in doubt, keep a log of how much your child is eating, check a calorie chart and don't forget to consider the child's milk intake. If you are still concerned about your child's eating habits, please bring it to our attention. However, we do recommend that you not focus entirely on these numbers. If your child is simply offered a wide variety of foods, they will eat a variety of foods. Don't forget to offer spicy foods. We will follow your child's growth with you to ensure adequate growth and development.

**BREAKFAST IDEAS:** Cereals (baby, cream of wheat, oatmeal, Maypo, plain cheerios (or other dry, nutritious, whole grain, no sugar, fiber cereals), fruits such as bananas, pears, egg yolks prepared as you like (scrambled, hard boiled, French toast), pancakes, waffles, whole wheat toast, and breast milk or whole milk top off the ideal breakfast.

**LUNCH IDEAS:** Soups, cottage cheese, fruits, vegetables, yogurt, and sandwiches using whole grain breads with tuna fish, grilled cheese, egg yolk, liverwurst, turkey breast, and any other soft filling. The sandwiches should be cut up in very small pieces (1/8 inch squares) and fed only a few pieces at a time.

**DINNER IDEAS:** The family menu at dinner is appropriate as long as the choices reflect the recommendations from Food Plate. The food should be mechanically safe (pureed, mashed, soft in texture to prevent choking). It can include spaghetti and meatballs, chili, or turkey with all the trimmings. Children can have spices and tomato products but we recommend not adding any salt or sugar to your preparation or at the table. Children will not know the difference.

**Avoid the following foods that are known to cause choking:** Hot dogs (no matter if they are peeled, sliced, diced, minced or cooked, they swell in the esophagus), potato chips and other chips, coconut, nuts of all kinds, popcorn, seeds of any kind, whole kernel corn, candy, grapes, raisins, raw carrots, peas, gumdrops, jelly beans and peanut butter on a spoon.

A parent's attitude towards a particular food can influence the child. Smile even if you dislike the food, your child might just love liver or brussel sprouts!

Serve small portions on a non-breakable dish and a Sippy cup. Do not scold a child if he/she does not finish a meal. Limit meal time to 15 minutes (if it lasts five minutes, you're lucky). If the child does not want to eat, take the meal away and offer it later. An ill child usually does not have an appetite for solid foods and prefers to drink. This is just fine. Try to keep mealtime enjoyable and pleasant. Talking about your day's activities and happenings sets the stage for future mealtime in which the child will contribute later. At this time, allow the baby to feed him/her self if they so desire. Fingers are the usual utensil at this time. It's ok.

Most children this age are quite ready to begin new foods. However, if your child shows signs of frustration during meals (crying, pushing food away) he/she may not be ready to expand their diet. If you have any questions or concerns about feeding your child, please call the office during

regular office hours. The pediatricians, PNP's and RN's are always willing to answer your questions.