

After Year One: Food for Children



All you need to know about feeding your
children aged 1 to 6 and more...

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children aged 1 to 6 and more ...**

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Revised 2003, 2004, 2005.

This book was prepared by the Nova Scotia Department of Health, Public Health/ Health Promotion Division, and published through Communications Nova Scotia.

The Nova Scotia Department of Health gratefully acknowledges the significant contribution of parents and health professionals in the development of this book.

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Illustration: Bonnie Ross. Cover photo: Doug Ives.

Canadian Cataloguing in Publication Data

Main entry under title:

After year one: food for children

2nd ed.

ISBN 0-88871-331-2

1. Children - Nutrition. I. Nova Scotia. Dept. of Health

RJ206.A37 1995 613.2'083'3 C95-966007-0

Public Health Services



www.gov.ns.ca/health/PublicHealth



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Introduction

Congratulations! Your baby is one year old! During the first year your baby grew very quickly and changed before your eyes into an active, curious child with a special personality.

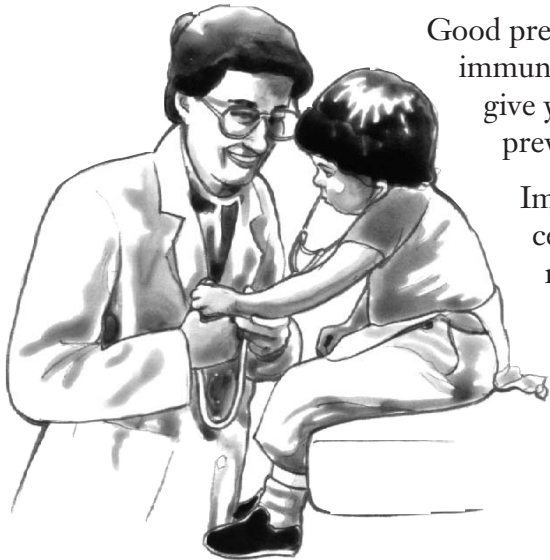
As your baby continues on his journey of growth and discovery, many more wonderful experiences and challenges are ahead. We have put this booklet together to help you with feeding your child from ages 1 through 6. This booklet contains information on

- immunization
- growth and development
- the way children aged 1 through 6 eat
- Canada's Food Guide to Healthy Eating for Kids (as well as details on serving sizes, information on the label, and snacking)
- normal ups and downs at mealtimes
- learning about foods
- feeding challenges
- recipes to tempt even picky appetites

During the years 1 through 6, your child will begin to establish lifelong eating patterns. With your help, your child can develop food habits that will help him form a strong and healthy body, while enjoying tasty, healthy foods.



Immunization



Good preventive health practices include regular check-ups and immunizations for your child. Your doctor or public health nurse will give your child immunizations to protect against vaccine preventable diseases.

Immunizations are the very best way to protect your child from certain diseases. During the first year of life, your child will receive a combined vaccine that contains DaPTP and Haemophilus Influenza vaccines to provide protection against diphtheria, polio, tetanus, pertussis, and Haemophilus Influenza Type b (Hib). During their first year, they will also receive pneumococcal conjugate vaccine for protection against pneumococcus bacteria that can cause meningitis, bacteremia and pneumonia. Varicella (chickenpox), MMR (a combined vaccine for measles, mumps, and rubella), and meningococcal group C conjugate will be given to your child at one year of age. MMR and DaPTP will be repeated between 4–6 years. Your child will be given influenza vaccine if they are between 6 months and 23 months of age during the flu season (October to February each year). Read on to understand how these vaccines will protect your child.

What should you immunize against?

DaPTP

Diphtheria

Diphtheria is caused by a bacteria. The disease can vary from mild to severe. Diphtheria causes an infection of the nose, throat, or skin. It may cause serious problems with breathing. It may also cause heart failure or paralysis. About one out of every ten who get diphtheria die from it. Diphtheria is preventable through immunization.

Polio

Polio is caused by a virus. The infection can also vary from mild to severe. Polio may cause permanent paralysis of the arms and legs or the muscles used for breathing or it may even cause death. Polio continues to be a major public health problem in many parts of the world. Immunization is the best protection against this disease.

Tetanus

Tetanus is caused by a bacteria. It results in painful, severe muscle spasms. It is a very serious illness. Tetanus bacteria are found in the soil and can enter the body through a cut or wound. Since soil is everywhere around us, it is important that all Nova Scotians receive tetanus protection through immunization.

Pertussis (Whooping cough)

Pertussis is caused by a bacteria. It may cause severe coughing spells which can affect breathing and last for weeks or months. Pertussis usually lasts 6–12 weeks. It may cause pneumonia or convulsions and even death in some cases. Pertussis is preventable through immunization.

Hib

Hib (Haemophilus Influenzae type b) is caused by a bacteria which usually attacks children under age five. It causes meningitis (infection of the membranes that cover the brain and spine) and epiglottitis (swelling of the tissue that covers the windpipe). It is a life-threatening disease that may also cause pneumonia, infection of the joints or bone and other serious illnesses. Hib is preventable through immunization.

MMR

Measles

Measles is a serious common childhood disease caused by a virus. It causes a rash, high fever, cough, runny nose, and watery eyes lasting 1 to 2 weeks. Measles may cause encephalitis (inflammation of the brain) which occurs about one case in 1000 people. It may result in convulsions, mental retardation, deafness, or even death. Measles is preventable through immunization.

Mumps

Mumps is a common childhood disease caused by a virus. It causes fever, headache and inflammation of the salivary glands which causes cheeks to swell. It may cause meningitis, encephalitis and deafness. Mumps can be prevented through immunization.

Rubella (German measles)

Rubella is caused by a virus. This disease is generally mild and may have symptoms that include a rash, low fever, and enlarged lymph nodes. It can be prevented by immunization. A pregnant woman who comes in contact with German measles and has not been vaccinated against it can infect her baby. This contact can have serious results for the baby. Early protection is very important.

Varicella

Chickenpox

Chickenpox is a common disease of childhood caused by the varicella virus. Chickenpox causes an itchy rash, which looks like small water blisters. Chickenpox is highly contagious. Up to 95% of children will get chickenpox before the age of 15. Chickenpox can be very severe or even life-threatening to newborn babies, infants, adults, and those who have weak immune systems. Chickenpox can cause severe pneumonia or

problems with other organs such as the brain, the liver and the heart. If the chickenpox blisters get infected, they can leave disfiguring scars. Pregnant women who get chickenpox may give birth to babies with birth defects, such as skin scars, eye problems, or incompletely formed arms or legs. Chickenpox can be prevented through immunization.

Pneumococcal disease

Pneumococcal disease is caused by bacteria (*Streptococcus pneumoniae*) known as pneumococcus. On rare occasions, these bacteria can overcome the body's natural defenses and cause serious, or life threatening, diseases. This includes infection of the lining of the brain, a widespread infection involving the blood and multiple organs, and/or infection of the lungs. Pneumococcal bacteria are also an important cause of middle ear infections. Pneumococcal disease is preventable through immunization.

Meningococcal Group C disease

Meningococcal Group C disease is caused by a bacteria (*Neisseria meningitidis*) known as meningococcus. This bacteria sometimes overcomes the body's natural defenses and causes serious, or life threatening diseases. This includes infection of the lining of the brain and/or a widespread infection involving the blood and multiple organs. Some children can become deaf or suffer from kidney damage, amputations, hearing loss or skin scars. Meningococcal Group C disease is preventable through immunization.

Influenza

The flu vaccine protects against influenza. The flu vaccine is particularly important for babies between 6 months and 23 months of age and those who have a health condition. The flu will be more severe for them, and can lead to death. Because the flu can be dangerous for infants and people with a health condition, it is important that their caregivers and health care workers get an influenza vaccination. Children under age 9 who have never had a flu shot need two flu shots, four weeks apart.

If you have more questions, talk to your doctor or Public Health Nurse.

Keep up those immunizations!

Remember, immunizations do not stop at one year of age. The following table will help to remind you when your child should be receiving his next immunizations. Your child must have all his immunizations before he starts school. If you have more questions about immunizations, talk to your doctor or public health nurse.

Nova Scotia Immunization Schedule

AGE	VACCINE	PROTECTS AGAINST
2 months	1 dose DaPTP, Hib	Diphtheria, Pertussis (Whooping Cough), Tetanus, Poliomyelitis (Polio), and Haemophilus Influenzae type b
	1 dose Pneumococcal conjugate (For babies born January 2005 and after)	Bacterial meningitis, pneumonia, otitis media
4 months	1 dose DaPTP, Hib	Diphtheria, Pertussis (Whooping Cough), Tetanus, Poliomyelitis (Polio), and Haemophilus Influenzae type b
	1 dose Pneumococcal conjugate (For babies born January 2005 and after)	Bacterial meningitis, pneumonia, otitis media
6 months	1 dose DaPTP, Hib	Diphtheria, Pertussis (Whooping Cough), Tetanus, Poliomyelitis (Polio), and Haemophilus Influenzae type b
	1 dose Pneumococcal conjugate (For babies born January 2005 and after)	Bacterial meningitis, pneumonia, otitis media
12 months	1 dose MMR	Measles, Mumps and Rubella (German Measles)
	1 dose Varicella	Varicella (Chickenpox)
	1 dose Meningococcal Group C conjugate (For babies born January 2004 and after)	Meningococcal Group C disease
18 months	1 dose DaPTP, Hib	Diphtheria, Pertussis (Whooping Cough), Tetanus, Poliomyelitis (Polio), and Haemophilus Influenzae type b
	1 dose Pneumococcal conjugate (For babies born January 2005 and after)	Bacterial meningitis, pneumonia, otitis media
4 to 6 years	1 dose DaPTP	Diphtheria, Pertussis (Whooping Cough), Tetanus and Poliomyelitis (Polio)
	1 dose MMR	Measles, Mumps and Rubella (German Measles)
	1 dose Varicella, if not immune	Varicella (Chickenpox)
Grade 4	3 doses Hep B	Hepatitis B
	1 dose Meningococcal Group C conjugate (Starting September, 2005)	Meningococcal Group C disease
14 to 16 years	1 dose dTap	Tetanus, Diphtheria, Pertussis
	1 dose Meningococcal Group C conjugate	Meningococcal Group C disease
Adults every 10 years	1 dose Td	Tetanus, Diphtheria
Annually for Children 6-23 months and adults & children at high risk, healthcare workers, students in a healthcare program, firefighters and police officers	1 dose Influenza (2 doses for children < 9 years NOT immunized before)	Various strains of Influenza (Flu)
Adults & Children Two years or older at high risk	1 dose Pneumococcal Polysaccharide	Pneumococcal pneumonia, bacteraemia and meningitis

Growth and development

Remember how quickly your baby grew during her first year of life? From age 1 onward, her growth rate will slow down. She will not gain weight as fast as she did in the first year, but she will grow taller. Each day she will get more control over her body and will use it in many new ways—of which she will be very proud!

“Growth” is when your child is getting bigger and taller. “Development” is when your child gets more control over her body. Growth and development are very important. Every child grows and develops differently. Just as there are big and small adults, so there are big and small children. Changes in your child’s own growth and development tell you more than you can learn by comparing your child’s body size and eating habits to those of other children.

Read on to understand some of the growth and development milestones that your child will be reaching as she grows through the special ages of 1 to 6.

12 to 24 months — the year of continued change

As your baby reaches her first birthday she will seem to be more like a young child than a baby. By now, she may be joining you at the family table to eat. She will be starting to learn how to feed herself. She will also be curious about everything around her and may try to put everything in her mouth. Now is the time to watch her carefully: anything that she can put her hands on will probably end up in her mouth!

You may find her appetite starts to change. She may not be as hungry as she was as a baby and you may worry about this change. A change in appetite is normal at this age as her body is no longer growing as fast as when she was a baby. It is also normal that your child continues to breastfeed. In fact, many mothers around the world continue to breastfeed their children until they are 4 years old.



Your child may or may not have all her baby teeth by the end of her second year. Even without teeth, if she has been introduced to many different foods and food textures, she will be able to chew with her gums and swallow the food easily. Some meats, like red meats, are harder to chew without teeth and may need to be used less often until she can chew them well. Using her gums to chew foods can also help new teeth to come through.

Usual food skills during the 12 to 24 month period

Age	Food Skills
12 to 24 Months	<ul style="list-style-type: none"> • grabs, holds, and lets go with fingers • can hold spoon and cup but is not really able to use them well • eats with fingers • may sip through a straw

Between the ages of 2 and 4 your child should have all his baby teeth. During these years trying a variety of foods with different textures is a good idea. Many children will continue to breastfeed at this age. Your child will still most likely eat less food than when he was a baby. He will be more active. He will also tell you in some way what foods he likes best.

Toddlers often find it hard to pay attention. They want to look at and touch new things. Toddlers like to make many of their own decisions about their lives. Your toddler will like to decide which foods he will and will not eat. Offering too many new foods at a time at this age may not work. Your toddler may favour the security of familiar things, like eating the same foods every day. If you are concerned about the way your toddler is eating, check out the next section on “The Way Children Eat” for more information.

2 to 4 years — the toddler years

Usual food skills of the 2 to 4 year-old

Age	Food Skills
2 to 3 Years	<ul style="list-style-type: none"> • is better at using a spoon and a cup but still can make a mess! • can chew much better but still needs most foods cut up
3 to 4 Years	<ul style="list-style-type: none"> • becomes a less messy eater as he learns to eat better with a spoon and holds a cup well • starts to use a fork to eat • can chew most foods very well if he takes his time • can pour fluids from a pitcher if the handle is small and it is not too heavy



4 to 6 years — the preschool years

Your preschooler now has even more control over her body. She will be very keen on practising new talking skills. In fact, she may be more interested in talking than eating. Eating often takes second place to the fun social event of mealtime.

Toward the end of her preschool years she will probably begin to eat more food, and she may want regular meal times. She will begin to be more open about trying new foods, even ones she refused a few months ago.

She will still have a need for her favourite foods and familiar routine for eating. The key to trying new foods is to not to try too many new foods at once. Try to get her to help and be part of making meals and snacks. This may encourage her to try the food she has helped to prepare. See page 11 for other tips on introducing new foods.

Usual food skills of the 4 to 6 year-old

Age	Food Skills
4 to 5	<ul style="list-style-type: none">• uses a fork and spoon well, starts to be able to cut soft food with a knife• can use a cup well• can pour drinks into a cup
5 to 6	<ul style="list-style-type: none">• may still need help in cutting up tough meat or hard food• eats well without help from others• can help to make some foods like sandwiches or other easy snacks



The way children eat

The following section outlines some usual eating patterns of children in the age groups of 12–24 months, 2–4 years, and 4–6 years. Refer to it only as a guide, keeping in mind that your child will develop her own food behaviours and responses to different eating situations. Many of these behaviours can be seen throughout the younger years as children grow and develop at their own pace.

How infants eat during 12 to 24 months

- either continues to breastfeed and or drinks lots of milk
- appetite changes from day to day
- shows likes and dislikes for certain foods
- can drink from a cup (but may need help)
- may refuse a bottle or may refuse a cup
- enjoys finger foods (foods that are easy to pick up and handle)
- may have enough teeth to chew a variety of foods (or, if not, may “gum” the food)
- may begin to show less interest in food
- holds a spoon but cannot easily eat with it
- likes to play with food and make a mess!



Infants

How toddlers eat during years 2 to 4

- either continues to breastfeed and or drinks lots of milk
- may have even less interest in eating food but has definite favourite foods
- appetite changes from day to day
- prefers 2–3 small meals and 2–3 snacks instead of 3 large meals
- begins “no” stage and may refuse favourite foods to show his independence
- may dawdle at mealtimes
- may from time to time go on food “jags” (see Normal Ups and Downs at Mealtime, page 27, for further explanation)

Toddlers

- may not want one food touching another on his plate
- can eat well with a spoon and will start to want to use other utensils
- can drink from a cup but it may have to be the same glass every time
- may still be having some problems with teething
- imitates behaviours of friends and adults
- can understand what “hungry” means
- likes regular mealtimes in familiar surroundings
- may reject food for reasons that don’t make sense (“the cracker is broken”)
- prefers food that is easy to handle
- wants food cut up into easy-to-eat pieces

Preschoolers

How preschoolers eat during years 4 to 6

- appetite begins to improve
- has regular eating pattern much like your own
- likes to make own food choices
- likes colourful, attractive foods
- may resist authority of the parent
- may go on “hunger strike”
- uses knife but has some difficulty spreading and cutting
- starts to be very influenced by others, and his food likes and dislikes will start to reflect those of people around him
- wants to be part of the preparation of the food and has an interest in where food comes from
- accepts new situations more easily



How to introduce new foods

Eating a variety of foods every day is a healthy behaviour that is learned throughout childhood and adolescence to become part of an adult lifestyle. Learning is a lifelong process. As a parent or caregiver, you can help your child to understand the need for healthy eating behaviours but try to have the patience to let her develop the behaviours at her own pace.

Here are some suggestions that may help you help your child eat a variety of foods.

- Be a role model. Children are sometimes more eager to eat foods that they see family and friends enjoying.
- Present food in appealing ways by combining different colours, textures, and shapes of food.
- Offer small quantities of a new food alongside a familiar one; don't pressure the child to eat the new food.
- Serve a new food when children are with their peers.
- Encourage them to become familiar with different foods by helping to grow, buy, prepare, or serve them.
- Be patient: if an unfamiliar food is not accepted the first time, it can be offered again later. The more often children are exposed to new foods, the more likely they will taste them and learn to accept them.
- Do not use foods as a reward. Withholding a sweet dessert until all the vegetables are eaten may establish a preference for the dessert and a dislike for the vegetables.
- Respect individual food preferences. Every child has different likes and dislikes.

Vitality for children

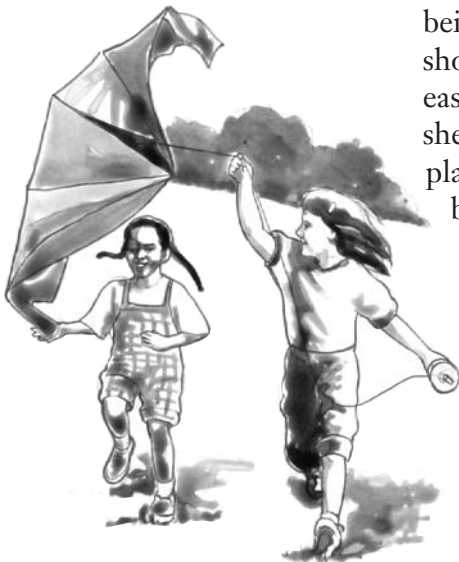
Vitality is about “enjoying eating well, being active and feeling good about yourself.” Vitality is important for children. It is during the childhood years when habits are developed that carry into the adult years. If children enjoy vitality when they are young, they will probably continue to enjoy it as they get older.

Eating well

Eating is a very important part of our lives. Eating often goes hand in hand with the many important events that leave lasting memories. Think of your own childhood. No doubt some of the fond memories you have include events with special food. The favourite kind of cake you wanted for your birthday. Christmas dinner shared with family and friends. A summertime barbecue where you discovered watermelon and corn on the cob. Enjoying food is one of life’s greatest pleasures, and this starts in childhood.

All foods can be part of a healthy way of eating. It is day-after-day eating habits over time that are important for health, not eating one particular food or meal. Sometimes adults have come to think about foods in ways that can take some of the fun out of eating. Children enjoy eating and you can re-discover the enjoyment of food by watching your child discover the taste, smell, and feel of new foods. Variety is the spice of life! *Canada’s Food Guide to Healthy Eating*, in the next section, can help you plan to eat well.

Being active



Everyone, including children, benefits from being active every day. Children really enjoy activity; it is natural for them. Playing and being active with you, other family members, and their friends should be encouraged. Activities for children should be fun and easy for them to do. If you ask your toddler or preschooler, she is probably more than able to tell you what is fun. Walking, playing tag, riding a bike, building a snowman, or catching bugs are just some of the things that might be suggested.

Activities that do not involve active participation or that do not allow your child to use her imagination, such as watching television, should not be the only pastimes that she has. Even if the weather isn’t nice, indoor activities, such as dancing to music or marching to follow the leader, can be fun things for your child to do.

Feeling good about yourself

Have you ever noticed that when you feel good, everything else seems good? The little things that might normally annoy and frustrate you don't seem to be that important. At those times, life is just too good to let anything spoil it. Positive attitudes about yourself are very important, because how you feel about yourself is reflected in almost everything that you do.

Children learn how they should feel about themselves by the way in which others react to them. As a parent you can help your child build positive self-esteem from birth by providing affection, attention, and positive encouragement. Your child will look to you first, especially in these early years, as a role model.

The following are some things that you can do to help your child feel good about himself. Even a 1-year-old can benefit from these suggestions. By the way, try these things yourself. It is important that you feel good about yourself too!

- With your child, look in the mirror. Tell him 5 things that make him a special person.
- Encourage your child to be active and to try new things.
- Encourage him to talk about himself and his feelings. Really listen!
- Tell him you know that he has feelings and can get mad and frustrated just as you sometimes do.
- Help him plan a list of things he can do each day that make him feel good.



Canada's Food Guide to Healthy Eating for Kids

Canada's Food Guide to Healthy Eating is a guide to choosing foods to satisfy nutrient and energy needs. One key message of the Food Guide is to “enjoy a variety of foods from each food group every day.” Variety, which means eating many different foods, is important for children, because it helps to make sure that they are getting enough of the nutrients they need each day. Nutrients are needed for growth and development.

Helping your child to eat a variety of foods may not always be easy. The usual eating behaviours of young children, discussed in the section “The Way Children Eat” (page 9), are some reasons it may be a problem to have a variety of foods in her diet. A section of this book also offers information to help you introduce variety into your child's diet.

Even if your child is 12 to 24 months old, you can still follow the food groups that make up the Food Guide. Most serving sizes will be smaller, because milk may still form a main part of your child's diet or you may also still be breastfeeding your child.

This is the period we have called the “year of continued change” because children are still progressing, at their own pace, to eating the foods that older children and adults eat.

Your feeding goal for your child in the 12 to 24 month period is to continue the step-by-step change so that your child is eating all of the foods that the rest of your family is eating.

Canada's Guidelines for Healthy Eating are also part of the Food Guide. They too can help you to make healthy food choices for you, your child, and the rest of your family. These guidelines are:

- Enjoy a VARIETY of foods.
- Emphasize cereals, breads, other grain products, vegetables, and fruit.
- For adults and children over 2 years of age choose lower-fat dairy products, leaner meats, and foods prepared with little or no fat. Around 2 to 3 years of age you may choose to switch to 2% milk fat if your child is eating many foods from all food groups in *Canada's Food Guide*. Also see “Nutritious Higher-fat Foods” on page 18.
- Achieve and maintain a healthy body weight by enjoying regular physical activity and healthy eating.
- Limit salt, alcohol, and caffeine. (Caffeine is found in coffee, tea, chocolate and many colas and soft drinks.)

“Choose whole grain and enriched products more often”

Grain products, like breads, crackers, and cereals, especially whole grain and enriched products, are important sources of carbohydrates, B vitamins, iron, and fibre.

Whole grain cereals contain more nutrients and less sugar than overly refined, artificially coloured, pre-sweetened cereals. They also often cost less. Look for words on the package labels that mean whole grain, such as “bran,” “fibre,” “whole wheat,” “oatmeal,” “grain.” Bite-size cereals like Cheerios® and Corn Bran® are often favourite finger foods.

Whole-grain cereals can be dressed up for your child by adding slices of a favourite fruit or a yogurt topping or by serving them in a special bowl. For a great taste, try serving cooked cereals with bits of dried fruit, applesauce, or a dash of nutmeg or cinnamon, instead of adding sugar.

Spaghetti, noodles, macaroni, and rice are favourites among most little ones. Try to buy whole grain or enriched pasta products and rice. Enriched products have more nutrients added back into the product than those that are not enriched. See the recipe section at the back of this book for recipes using whole grain products.



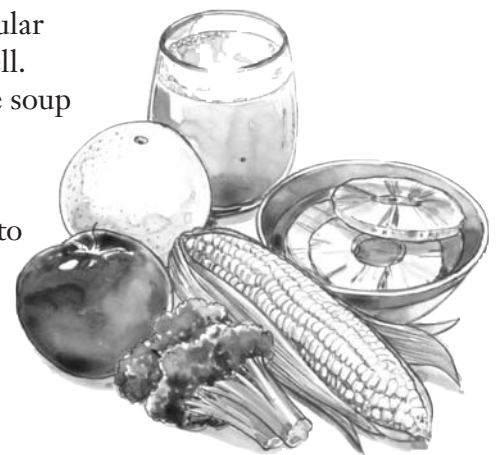
Grain products

“Choose dark green and orange vegetables and fruit more often”

Fruits and vegetables have vitamins and minerals along with carbohydrates and fibre. It is important for your child to often eat dark green and orange vegetables and fruit such as oranges, tomatoes, broccoli, squash, sweet potato, apricots, and kiwi. These vegetables and fruit have many of the vitamins and minerals, such as vitamins A and C, folacin, and iron, that are important for growth and development and health.

Parents often complain that their children dislike vegetables. Think about the way they are prepared. Children may prefer crunchy vegetables rather than soft, overcooked ones. Raw vegetable finger foods are often popular and can be given to children as soon as they can chew and swallow well. This reduces the risk of choking. They may also like a thick vegetable soup or crisp salad.

The attitudes of others at the table can influence the acceptance of foods. “If Dad doesn’t like cabbage, why do I have to eat it?” Try not to show a strong dislike for certain foods. Try starting a new house rule that “everyone must try at least one bite.”



Vegetables and fruit

Offer your child new vegetables and fruit along with familiar foods when you feel he might be open-minded to them. Helping to prepare the vegetable or fruit may also encourage him to try them. Presentation is also important. Children love fruit and vegetables arranged into different shapes and faces.

Young children are often thirsty and love to drink fruit or vegetable juice. Try to make sure that the drink that you give is actually juice and not a beverage with “drink,” “ade,” or “punch” in its name. These types of beverages are mostly water and sugar, often with added vitamin C, but they do not provide all the other nutrients that pure juice has. Fruit “drinks,” “ades,” or “punches” belong in the “Other Foods” category of *Canada’s Food Guide to Healthy Eating*. See page 17 for more information on “Other Foods.”

Milk products

“Choose lower-fat milk products more often”

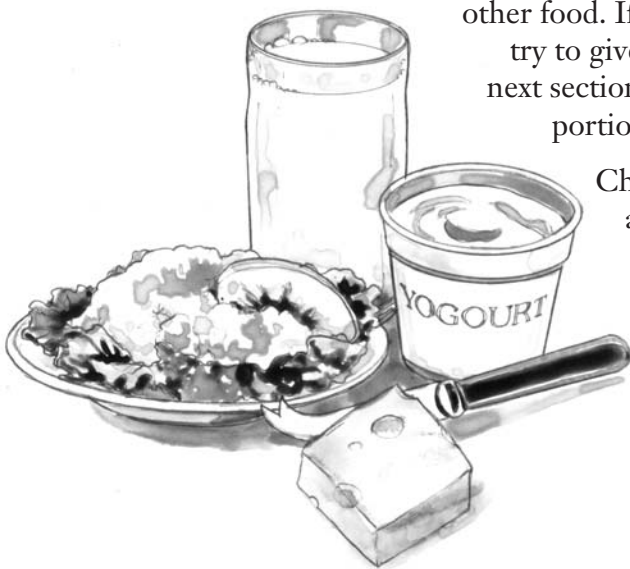
Milk and milk products provide protein, calcium, riboflavin, as well as many other vitamins and minerals.

Remember ... skim, 1%, or 2% milk should not be given to your child until she is at least 2 years old. Breastfeeding your toddler is also a very healthy choice.

Children under 2 years of age should not have these lower-fat milks, because they need the extra energy that the higher-fat milk provides. If your family uses lower-fat milks such as skim, 1%, or 2%, older children can have these milks. If your child is a poor eater you may want to give her a higher-fat milk with her regular meals and snacks as one way to ensure that her energy needs are being met.

Skim, 1%, 2%, or whole milk, milk powder, or buttermilk can be used as a beverage or added to other foods. Large amounts of milk given at the beginning of a meal may fill your child’s tummy before she has eaten any other food. If you feel that your child should be eating more of her meals, try to give her milk only after she has started eating off her plate. The next section on serving sizes for kids has more information about milk portions.

Cheese, plain yogurt (add your own fruit), and cottage cheese are popular with children whether they are served alone or used in recipes. Ice cream, rich custards, and milk puddings contain milk but are often high in sugar and/or fat, so they should not be given all the time. A balance of all foods is what is important to healthy eating.



Meat and alternatives

“Choose leaner meats, poultry and fish, as well as dried peas, beans and lentils more often.”

Chicken, fish, pork, beef, and alternatives, such as nuts, seeds, peas, beans, and lentils, supply iron and B vitamins and are a major source of protein. Again, be careful of younger children eating nuts and seeds before they can chew and swallow easily, as they may be more likely to choke on them. Meat alternatives may also contain vitamin A, fibre, and little fat. Legumes, such as peas, beans, and lentils, are also high in fibre. As an added bonus, they are often cheaper than meats and taste great! Look in the recipe section at the back of this book for some recipes that use legumes. If you are not familiar with cooking with legumes and lentils, the cookbook section at your local library may be helpful. Tofu is another meat alternative that is also less expensive.

Tender, juicy meat is more easily chewed and swallowed by youngsters. Be sure to cut meats into bite-size pieces for your young one. Lean beef, chicken, and pork have less fat and salt than canned meats, hot dogs, and other highly processed meats like bologna and salami. Legumes and fish are usually the lowest in fat.

Hot dogs, chunky nut spreads, and other nuts and seeds are just the right shape and size to get stuck in your child’s throat. Until your child is eating a wide variety of foods, and chewing and swallowing them well, it may be best to cut hot dogs in half length-wise and to use smooth peanut butter spreads. Another good idea is to try to make sure your child is always sitting down when eating. Children are more likely to choke when walking or running with food in their mouths.



Canada’s Food Guide to Healthy Eating now has a category called “Other Foods,” which covers foods that add flavour and enjoyment to meals and snacks but that do not fit into any of the four food groups. Foods found in the “Other Foods” category should be used only in moderation; just sometimes. Although they provide energy, they provide fewer of the nutrients needed for growth and development.

Other foods

The “Other Foods” category includes:

- foods that are mostly fats and oils, such as butter, margarine, salad and cooking oils, gravy, and regular salad dressings
- foods that are mostly sugar, such as candy, jello, popsicles, suckers, and many store-bought cookies, which are high in fat and sugar. Sugar cookies, cookies filled with icing, or ones that have chocolate chips tend to be higher in fat and sugar.

- high-fat and/or salty snack foods, such as potato chips, corn chips, cheesies
- non-milk or fruit drink beverages, such as pop, fruit punches and lemonade, mini sips
- herbs, spices, and condiments, such as, pickles, ketchup, mustard, mayonnaise, relish

The pattern of eating over time is what is important to health. Healthier eating can include eating “Other Foods” in moderation. No one food is bad or harmful to health. Healthy eating habits are created by eating a variety, which means many different foods.

Nutritious higher-fat foods

Higher fat foods can be part of a healthy eating pattern when eaten in moderation, which means eating these foods some of the time.

Young children’s fat needs are a little different than adults. Children are growing and developing more quickly and need a lot of extra energy that comes from calories in the food they eat. Fat supplies the extra calories to give young children the energy they need. Choose to give your child **nutritious higher fat** foods like homogenized milk (3.25 % milk fat), peanut butter, eggs, and cheese to fuel their high energy needs for growth and development.

There are many types of fat in packaged foods. Not all fats found in packaged foods are necessarily healthy. When you are reading food labels try to choose foods that have lower or no ‘saturated’ and ‘trans’ fats for (you and) your child. Your child’s heart will thank you. These fats are **non-nutritious fats**. (See the section on reading food labels on pages 25-26.) Try to limit non-nutritious higher fat foods like cookies, cake, potato chips, and fried foods common in fast food restaurants. Teach your children that it is okay to have ‘birthday party food’ once in a while or at special times.

A word about daycares

Licensed daycares in Nova Scotia are required to serve healthy meals and snacks that are based on the food groups of *Canada’s Food Guide to Healthy Eating*.

Take an interest if your child is going to a daycare. Ask to see the daycare menus or ask your child what she has had to eat. If you are not satisfied with the food choices, talk to the people running the daycare and other parents of children at your daycare. If you want more information on the foods choices at your daycare, contact your local public health nutritionist.

CANADA'S
Food Guide
TO HEALTHY EATING

Enjoy a variety of foods from each food group every day.

Choose lower-fat foods more often.



Grain Products
Choose whole grain and enriched products more often.

Vegetables & Fruit
Choose dark green and orange vegetables and orange fruit more often.

Milk Products
Choose lower-fat milk more often.

Meat & Alternatives
Choose leaner meats, poultry and fish, as well as dried peas, beans and lentils more often.

CANADA'S
Food Guide
TO HEALTHY EATING
FOR PEOPLE FOUR YEARS AND OVER

Different People Need Different Amounts of Food
The amount of food you need every day from the 4 food groups and other foods depends on your age, body size, activity level, whether you are male or female and if you are pregnant or breast-feeding. That's why the Food Guide gives a lower and higher number of servings for each food group. For example, young children can choose the lower number of servings, while male teenagers can go to the higher number. Most other people can choose servings somewhere in between.

Grain Products
5-12
SERVINGS PER DAY

1 Serving

- 1 Slice
- 30 g
- Hot Cereal 175 mL 3/4 cup
- Cold Cereal 30 g
- 1 Bagel, Pita or Bun
- Pasta or Rice 250 mL 1 cup

Vegetables & Fruit
5-10
SERVINGS PER DAY

1 Serving

- 1 Medium Size Vegetable or Fruit
- Fresh, Frozen or Canned Vegetables or Fruit 125 mL 1/2 cup
- Juice 125 mL 1/2 cup
- Salad 250 mL 1 cup

Milk Products
2-3
SERVINGS PER DAY
Children 4-9 years 2-3
Adult 10-19 years 3-4
Pregnant & Breast-feeding Women 3-4

1 Serving

- 250 mL 1 cup
- 3% Milk 250 mL 1 cup
- 2 Slices 50 g
- 175 g 3/4 cup
- 3"x1"x1" 50 g
- Cheese 175 g 3/4 cup

Meat & Alternatives
2-3
SERVINGS PER DAY

1 Serving

- Meat, Poultry or Fish 50-100 g
- 1/3-2/3 Can 50-100 g
- 125-250 mL 1/2-1 cup
- 100 g 1/3 cup
- 30 mL 2 tbsp
- 1-2 Eggs
- 100 g 1/3 cup
- 30 mL 2 tbsp

Other Foods
Taste and enjoyment can also come from other foods and beverages that are not part of the 4 food groups. Some of these foods are higher in fat or Calories, so use these foods in moderation.



Enjoy eating well, being active and feeling good about yourself. That's VITALITY.

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ISBN 0-662-19616-1

How much should your child be eating?

The amount of food your child should be eating depends on his

- age
- size
- level of activity
- hunger
- growth rate

Every day children should be eating at least

- 2 to 3 child-sized servings of milk and milk products. Liquid milk should be the main milk product, because it is the major source of vitamin D. Your child needs vitamin D to help make strong bones and teeth.
- 2 to 3 child-sized servings of meat and alternatives
- 5 to 10 child-sized servings of vegetables and fruit
- 5 to 12 child-sized servings of grain products

Children aged 1 to 6 will usually need only the lower number of food servings for each of the food groups. Remember, these foods should also be served in child-sized portions.

What is a child-sized serving?

There is a wide variation in portions of foods consumed by children.

That's why **one child-sized serving is anywhere from one-half to the full size for foods in each food group**, as indicated in *Canada's Food Guide to Healthy Eating*. Generally the size of portion increases with age. For example, a 2-year-old may eat a half slice of bread, while a 4-year-old is more likely to eat a whole slice. Both of these can be counted as one child-sized serving of Grain Products.

Servings in *Canada's Food Guide to Healthy Eating*

Examples of One Child-Sized Serving

Examples of one child-sized serving

Grain Products

5 to 12 servings per day



- 1/2 to 1 slice bread
- 1/2 to 1 oz. (15 to 30g) cold cereal*
- 1/3 to 3/4 cup (75 to 175 mL) hot cereal
- 1/4 to 1/2 cup (50 to 125 mL) pasta or rice
- 1/4 to 1/2 bagel, pita or bun
- 1/2 to 1 muffin
- 4 to 8 soda crackers

Vegetables and Fruit

5 to 10 servings per day

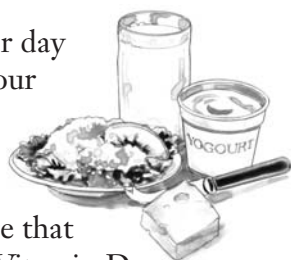


- 1/2 to 1 medium size vegetable or fruit
- 1/4 to 1/2 (50 to 125 mL) fresh, frozen or canned vegetables or fruit
- 1/2 to 1 cup (125 to 250 mL) salad
- 1/4 to 1/2 cup (50 to 125 mL) juice

Milk Products

2 to 3 servings per day

Make sure that your child drinks at least 500 mL (2 cups) of milk each day to ensure that they get enough Vitamin D



- 1/2 to 1 cup (125 to 250 mL) milk
- 1 to 2 oz. (25 to 50 g) cheese
- 1 3 to 3/4 cup (75 to 175 g) yogurt

Meat and Alternatives

2 to 3 servings per day



- 1 to 2 oz. (25 to 50 g) meat, chicken, turkey, or fish (such as salmon or tuna, avoid shellfish)
- 1 egg
- 1/4 to 1/2 cup (50 to 125 mL) beans
- 1/4 to 1/3 cup (50 to 100 g) tofu
- 1 to 2 Tbsp. (15 to 30 mL) peanut butter

* Approximate volumes for one serving of cold cereal:
 flaked cereal 1/2 to 1 cup (125 to 250 mL)
 puffed cereal 1 to 2 cups (250 to 500 mL)
 granola or dense-type cereal 2 Tablespoons to 1/3 cup (30 to 75 mL)

Young children can be allergic to foods like wheat, milk products, shellfish, eggs, nuts, and or peanuts. Watch for signs of allergic reaction when introducing these foods to your child for the first time. See page 40 for more information on food allergies.

Adapted from Sudbury and District Health Unit, Ontario and Public Health Services, Colchester East Hants Health Authority, Nova Scotia

How to apply child-sized servings

An example with Jenny and Tommy

Jenny is 5 years old and her brother, Tommy, has just turned 3. This example of yesterday's dinner shows that Tommy tends to eat the same foods as Jenny but in smaller portions.

Dinner	Serving Size	Number of servings			
		Grain Products	Vegetables and Fruit	Milk Products	Meat and Alternatives
Jenny's Dinner Noodles	125 mL (1/2 cup)	1			
Tommy's Dinner Noodles	60 mL (1/4 cup)	1			
Braised Beef	50 g (2 oz)				1
Braised Beef	25 g (1 oz)				1
Carrot Coins	75 mL (1/3 cup)		1		
Carrot Coins	50 mL (1/4 cup)		1		
Fruit Salad	125 mL (1/2 cup)		1		
Fruit Salad	50 mL (1/4 cup)		1		
Yogurt	75 mL (1/3 cup)			1	
Yogurt	50 mL (1/4 cup)			1/2	
Oatmeal Cookie	1 cookie	1			
Oatmeal Cookie	1 cookie	1			
Milk	125 mL (1/2 cup)			1	
Milk	125 mL (1/2 cup)			1	

Jenny's Dinner

Tommy's Dinner

Often, it is hard to meet your child's needs with three meals a day. Smaller meals, together with mid-morning and mid-afternoon snacks, may be better. It is best to time snacks about 2 hours before meals and to keep them light, so she is ready to eat at meal time.

To help make sure snacks are healthy, combine foods from at least two of the four food groups from *Canada's Food Guide to Healthy Eating*. Your child should also get into the habit of brushing her teeth after snacks and meals.

The following are some super snack ideas:

- celery stuffed with cottage cheese or peanut butter and topped with raisins
- peanut butter spread on apple or banana slices
- fresh fruit and yogurt
- yogurt pops (frozen fruit juice and yogurt on a stick), see recipe on page 54
- chunks of cheese and pieces of apple (you may want to take the skin off for young children)
- peanut butter and crackers
- hard-boiled egg and a tomato wedge
- muffin and juice
- breadsticks with cheese
- hot or cold cereal with milk
- milk pudding with banana chunks
- tuna salad on a tomato slice
- egg salad on a slice of whole wheat bread
- plain yogurt with peach slices and a sprinkle of wheat germ
- an orange and graham crackers
- banana halves baked with unsweetened apple or orange juice
- health shake: apple juice, yogurt, strawberries, and wheat germ whirled in a blender and served with straws
- fresh fruit kabobs on toothpicks served with cheese or yogurt for a dip
- piece of toast with peanut butter and banana

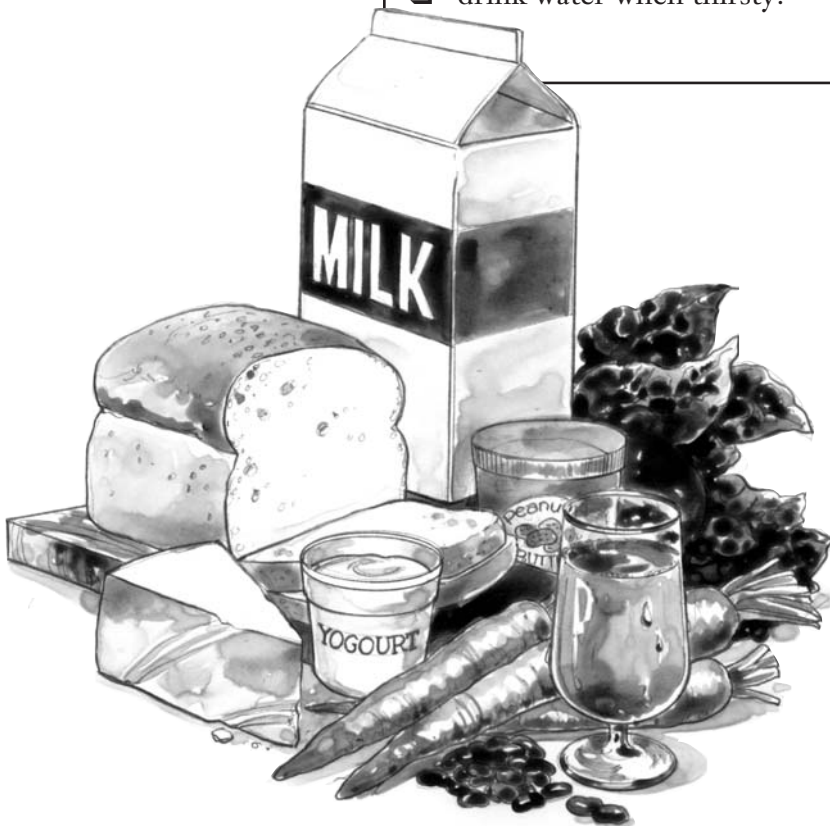
Snacks that include foods from the “Other Foods” category of *Canada's Food Guide* (page 19), such as chips, pop, and candies, should be given in moderation and not to replace healthier meals and snacks.

Eating checklist for a young child

The following is a good checklist to follow to see how your child's eating habits are coming along. If your child does not have all of these habits, don't worry. The checklist will give you ideas for areas to work on with your child.

On most days, does your child

- start the day with a breakfast that includes foods from at least three of the four food groups?
- enjoy eating cooked and/or raw vegetables?
- eat fruit or drink unsweetened fruit juice?
- like to try most new foods?
- eat whole grain products such as whole wheat bread, brown rice, muffins, or whole wheat crackers?
- eat foods rich in iron, such as iron-fortified cereal, meat, chicken, pork, liver, beans, or whole grain foods?
- eat snacks made from foods from the four food groups?
- eat or drink a good source of vitamin C, such as oranges, orange juice, grapefruit, tomatoes, or apple juice?
- eat "Other Foods" in moderation?
- drink at least 2 cups of milk per day?
- drink water when thirsty?



Look at the label

Nutrition information on food labels...

- Helps you make informed food choices
- Helps you follow Canada's Food Guide to Healthy Eating
- Is required on most packaged foods
- Is based on Health Canada's regulations



Nutrition claims

There are two types of nutrition claims:

- 1) Nutrient content claims** tell you about one nutrient such as sodium, fat or sugar.
- 2) Health claims** tell you how your diet can affect your health.



Nutrition Facts table

The Nutrition Facts table provides you with information on the Calories and 13 nutrients for the serving size shown.

Nutrition Facts	
Per 1/2 cup (125 mL)	
Amount	% Daily Value
Calories 70	
Fat 0 g	0 %
Saturated 0 g	0 %
+ Trans 0 g	
Cholesterol 0 mg	
Sodium 5 mg	0 %
Carbohydrate 17 g	6 %
Fibre 3 g	12 %
Sugars 14 g	
Protein 0 g	
Vitamin A 0 %	Vitamin C 4 %
Calcium 0 %	Iron 4 %

Ingredient list

The ingredient list tells you what ingredients are in a packaged food.



Healthy Eating is in Store for You
Faites provision de saine alimentation

Fact Sheet # 1

www.healthyeatingisinstore.ca



ADVISORY COMMITTEE:

- Canadian Council of Food & Nutrition
- Canadian Council of Grocery Distributors
- Canadian Home Economics Association
- Canadian Public Health Association
- Consumers' Association of Canada
- Food and Consumer Products of Canada
- Heart and Stroke Foundation of Canada - Health Check™ Program
- Kraft Canada Inc.
- Shop Smart Tours Inc.

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All about nutrients

Why are the nutrients on the Nutrition Facts table important for your health?

Fat

Fat provides energy and nutrients for your body. However, if you eat *too much* fat or *too much of certain kinds* of fat, such as saturated fat and trans fat, you could develop heart disease or type 2 diabetes.

Cholesterol

Your body makes *most* of its own cholesterol, but also gets *some* cholesterol from foods that you eat. Cholesterol builds the cells and hormones in your body. Too much cholesterol in your blood can lead to heart attacks or strokes.

Sodium

Sodium is another name for salt. Salt helps to balance the fluids in your body, but for some people, eating *too much* salt may be harmful.

Carbohydrate

Carbohydrate provides energy for your muscles and your brain. Sugar and fibre are two types of carbohydrate shown on the Nutrition Facts table.

If you have diabetes, you can help control your blood glucose by:

- Dividing carbohydrate evenly into meals and snacks throughout the day
- Eating foods high in fibre

Protein

Protein builds your muscles, bones and teeth.

Vitamins

Vitamin A keeps your skin and eyesight healthy. Vitamin C helps your body fight infections.

Minerals

Calcium gives you strong bones and teeth and may prevent osteoporosis. Iron helps your red blood cells carry oxygen throughout your body.

Eat a variety of foods to get the nutrients your body needs.



Fact Sheet # 2

www.healthyeatingisinstore.ca



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- Canadian Council of Food & Nutrition • Canadian Council of Grocery Distributors • Canadian Home Economics Association
- Canadian Public Health Association • Consumers' Association of Canada • Food and Consumer Products of Canada
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Normal ups and downs at mealtimes

Feeding children can be a wonderful, rewarding experience. From time to time you may find that mealtimes become a challenge. Read on to help you understand and cope with some of these normal ups and downs at mealtime.

Dawdling

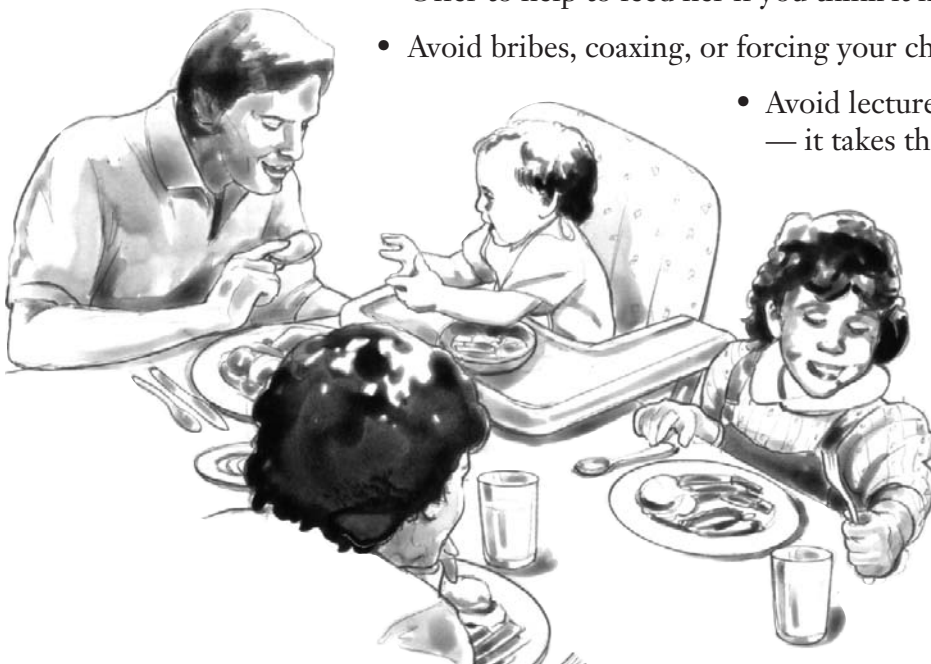
Most young children are slow eaters. This can become disruptive if your child takes much longer than the rest of your family to eat a meal. She may dawdle because she is not hungry, may want attention, is distracted by TV, radio, or pets, or may consider the food and utensils something new to explore. Your frustration may only make the problem worse.

Try some of these suggestions.

- Eat slowly yourself. Eating slowly is a skill that benefits all people. The more slowly you eat, the more in tune you become with your body's signals that you are full. Try not to encourage your children to eat too fast. If your child dawdles, this may be a good time to examine your own eating style. You might be surprised at the fun of re-discovering your body's signals.
- Prepare foods so they are easily handled by your child. For example, carrot sticks, chicken strips, potato wedges.
- Offer to help to feed her if you think it might be needed.
- Avoid bribes, coaxing, or forcing your child to eat.

- Avoid lectures on why she must eat all her food — it takes the joy out of eating.

- If your child is not finished eating after 30 to 45 minutes, but is still eating, try to be patient. If she seems to be finished eating, but is still playing with the food on her plate, remove the plate quietly.



Food as a reward or punishment

“Eat your peas and I’ll give you a big piece of chocolate cake.”

“If you don’t eat your chicken, you won’t get any pie.”

These are common ways of convincing a child to eat nutritious foods, but we don’t recommend them. Bribery is not a good way to encourage healthy eating habits. When more importance is placed on sweets than on other healthy foods in the diet, either by reward or punishment, sweets appear to be more desirable.



Children do need to have treats from time to time, but the treats don’t have to be sweets.

Try some of these suggestions.

- Serve a favourite fruit, muffin, or yogurt shake, which provide more nutrients than cake, pie, and other rich foods.
- Offer a treat that is not something to eat. Don’t forget the value of a hug, a favourite tape or CD, a story, or 10 minutes of special time with you.

Food jags

Many children, especially toddlers and preschoolers, may at times demand the same foods over and over. Their favourite foods may be the only foods that they will eat. Meals may be only one item, such as a peanut butter sandwich, tomato soup, or tuna fish in a bowl. This behaviour is called a food jag. A food jag can worry you if you think it will last forever. Don’t worry. It usually doesn’t last long, and it’s a normal part of many children’s food experiences.

Try some of these suggestions.

- Avoid showing anger or frustration.
- Don’t prepare different meals just for your child, as this may reinforce the food jag and make it last longer. Instead, offer him a compromise. He can have his tuna fish sandwich for lunch if he has cereal and juice for breakfast.
- Purposely plan to run out of your child’s favourite food for a day or two so you can try to get him to eat other things. Let your child know that you know that he prefers this loved food and assure him he will have it again soon.

Your child needs to experiment with handling food and utensils. Eating by herself will help her to use her utensils to become a skilled eater.

Try some of these suggestions.

- Encourage your child to feed herself and support her need for independence in eating. It takes longer for a child to feed herself and is certainly messier, but with practice, her skills will improve and she will become a neater eater.
- Give her lots of praise about this major step in her development.
- Help her in her efforts to feed herself. Gently guide her arm as she brings the spoon to her mouth, or help her stick food on her fork so she can do the rest herself.



***“I want to eat
it by myself”***

Everyone in the family will enjoy and look forward to eating meals together if the atmosphere is pleasant and relaxed. Try to use mealtimes to establish family sharing times and healthy food habits rather than to discipline or disagree with your child.

Try these suggestions.

- Give your child attention at times other than when he misbehaves or “shows off” at the dinner table.
- Save the discussion of mealtime mischief until after the meal is through. This may help stop confusion about the issues of misbehaving and not eating.
- Use mealtime to reinforce everyone’s healthy eating habits and get ideas and suggestions for foods they’d like to help prepare.

***Mealtime
battles***

When a child’s appetite is poor and she is eating very little, the foods you offer should be healthy and appealing. Choose foods from *Canada’s Food Guide to Healthy Eating* (page 19).

Try some of these suggestions.

- Give her quiet activities before a meal. It may help her learn to recognize her own body signals of hunger.
- Allow her to eat when she says that she is hungry. Do not make her wait for scheduled meal times.
- Try to provide a comfortable eating place.
- Try serving 5 small meals a day instead of 3 larger meals. Smaller servings may be better suited to your child’s small stomach.

Poor appetite

- Involve your child when possible in choosing and preparing food. If she feels that she has helped she may be more likely to eat.
- Write down all the child eats for a few days. Compare this amount to the suggested number and size of servings recommended in *Canada's Food Guide to Healthy Eating* on page 19. You may feel better about what she has eaten when you see it written down.

Consult your doctor, public health nutritionist, or public health nurse if your child's appetite continues to be poor, and you notice that she tires easily, has a long period without a weight gain, or often has infections or colds.

Refusal to eat

A child's refusal to eat causes many parents concern. If your child will not eat at a mealtime, remember that appetite does vary from day to day. His appetite may also be smaller than you think it should be if:

- snacks are too large or are too close to mealtime
- he did not do a lot of physical activity that day
- he is tired or too excited to eat
- he is battling the start of a cold or other sickness
- he is showing his need for independence or trying to get your attention or to test your patience

Children may sometimes reject food for reasons that do not make sense to you. Broken crackers, mixed foods, or one food touching another on a plate may be enough reason to push it away. A relaxed child who does not feel forced to eat will usually eat until full. A child who knows when he is hungry and knows when he is full does not often overeat. Bribing or coaxing a child to eat may upset this natural response to food.

Sometimes a child may seem to reject a whole food group, such as milk products or meat and alternatives. Each food group has a wide selection of different foods you could try. See the section on "Canada's Food Guide to Healthy Eating for Kids" (pages 14 to 19) for more ideas of foods in this group that you could try. If you still have problems getting your child to eat foods from a food group or have other questions, your local hospital dietitian or public health nutritionist may be able to help.

If your child refuses food often, try to encourage quiet activities such as colouring or looking at books before meals instead of trying to coax him at mealtimes. These quiet activities may help your child to become familiar with his body's feelings of hunger. This strategy may also work to calm a wound-up child who would rather play than eat. Evenly spaced meals and snacks are also important for your child to become familiar with hunger feelings. Most children seem to thrive on routine and structure in their daily eating patterns. Snacks are very important, but when they are too large or given too close to mealtimes they can spoil an appetite.

Try some of these suggestions.

- Relax, don't make a fuss, as this may only add to the problem.
- Remove uneaten food within a reasonable time, about 30 minutes without his touching the food.
- Offer a light healthy snack if he wants something to eat soon after the uneaten meal is taken away.
- See if he will talk about the mealtime event. Sometimes a child simply wants the extra attention which refusing to eat brings. After mealtime, maybe just before bed, may be a good time to find out if there is an explanation. If he does want more attention, try to give it to him between meals.
- Write down all that is eaten for a few days. Compare this amount to the suggested number and size of servings recommended in *Canada's Food Guide to Healthy Eating* on page 19. You may feel better about what he has eaten when you see it written down.
- Recognize that just as you have likes and dislikes, so will your child. Respect these and remember that your child will be influenced by your, your family's, and his friends' attitudes toward foods.

Special considerations

When thinking about feeding children, you should consider some special issues. The following section discusses some of these special decisions you may have to make about feeding your child.

Breakfast



You have heard it said before: “Breakfast is the most important meal of the day!” It is very important that children start each day with breakfast. Children, especially those 6 years and under, have small stomachs and normally need to eat food more often than adults do. It is good to get into the habit of eating breakfast.

Many teachers have observed that children who skip breakfast are less attentive in the classroom and seem not to do as well as those children who eat breakfast regularly. Try to serve foods from at least three of the food groups at the breakfast meal. Sometimes children like to eat foods in the morning that are not considered normal breakfast foods. You might want to consider them, as long as these foods are from the four food groups.

Calcium

Calcium is needed for good bone and teeth development. Most young children drink lots of milk daily, so calcium intake is usually not a problem. Calcium intake may be low when a child is allergic to all milk products, when she refuses to drink milk or eat milk products, or when milk products are not part of the family’s cultural habits.

If your child fits into any of these descriptions, or you feel that she just doesn’t drink enough milk, you may want to encourage her to eat other foods that have calcium. These include: legumes (peas and beans), nuts, seeds, dark green vegetables, and some grains. However, it does take a large amount of these foods to give the same amount of calcium as there is in one glass of milk.

If your child refuses to drink milk and is not allergic to milk, but will eat or drink other milk products, try these calcium-rich choices.

- Shake the milk. Make shakes with either yogurt or milk and add fruit juice or fruit for taste. Any fruit combination will do.
- Add power with powder. Add skim milk powder to recipes for milk puddings, cheese dishes, scrambled eggs, meat loaves, muffins, and bread. Add an extra 60 to 125 mL (1/4 to 1/2 cup) and eat the calcium! You can

save money with skim milk powder. Use it with water in any recipe that calls for milk—all the nutrition of fluid milk at half the cost.

- Say cheese please! Try cheese for a snack, grate it into salads, casseroles, and sandwiches, and make cheese sauces for vegetables.
- Yogurt is more than just another dessert. Plain yogurt can be used in cooking instead of sour cream, or replace some or all of the mayonnaise used in making salad dressings, dips, or sandwich fillings.
- Foods like milk puddings, chowders, and cream soups are good sources of calcium and are smart additions to menus.

If your child's calcium intake is still a concern, check with your local hospital dietitian or public health nutritionist for more information on sources of calcium or appropriate supplements and their use.

Iron

Iron is needed to make healthy blood. Iron intake is especially important for children at the infant and toddler ages, because they are growing and need to make lots of healthy blood. Iron is found in red meats, fish, poultry, whole grain breads and cereals, and enriched pastas. Dark green leafy vegetables and dried fruits such as raisins are also sources of iron, but be careful of giving your child dried fruits and raisins if you are fearful that she will choke.

These last two sources of iron, dark leafy greens and dried fruit, are best eaten with a food or drink that is high in vitamin C, such as orange juice. The iron will be better absorbed.

IMPORTANT TIP: Iron-fortified infant cereal is an excellent source of iron and can and should be used until your child is eating a large variety of foods containing iron. Iron-fortified cereal can be used instead of flour for thickening soups or casseroles. It can be added to all types of dishes.

The recipe “Mushaboom Iron Loaf” (page 53), in the recipe section of this book, is a recipe that is high in iron. Try it!

The best way to get all nutrients in the right amount is to eat a variety of foods as outlined in *Canada's Food Guide to Healthy Eating* (page 19). Making sure that your child is getting all of the vitamins and minerals that he needs for good health may not mean that a vitamin and mineral supplement is necessary.

No supplement can replace food nor can it make up for poor eating habits. Most multi-vitamin and mineral supplements provide only a few of the 50 nutrients your child needs every day.

Nutrient supplements

Supplements frequently contain more than the amount that your child needs. Too much can be dangerous. Vitamin and mineral supplements, like medication, should be taken with caution. Children sometimes view these pills in their fancy flavours and cartoon-character shapes as candy. Supplements should always be treated as medicine, never as treats. They should be kept well out of reach of children.

In most cases, nutrient supplements are an unnecessary expense. However, your child may need a supplement if:

- he is not drinking milk with added vitamin D and is exposed to very little sunlight. All cow's milk sold in stores in Nova Scotia contains vitamin D.
- because of allergies or for other health reasons, the child doesn't eat foods from an entire food group or eats them only in very small amounts
- certain eating behaviours, such as refusing to eat, which are normal for short periods of time during toddler and preschool years, last for extended periods of time

If you feel that your child may require some type of supplement to meet his nutrient needs, talk to your hospital dietitian, public health nutritionist, or doctor about the one that would be best for your child.

Healthy weights

Developing healthy lifestyle patterns that help contribute to achieving and maintaining a healthy weight really begins when we are children. Children should start to become familiar with the concept of a “healthy weight” before they are bombarded with all of the pressures society places on them. People come in many different shapes and sizes. Acceptance of a wide variety of healthy body types is important for all people.

A healthy weight is a weight that allows for the best growth and development possible and is a weight that, over time, is associated with the lowest health risks. There are many health risks associated with being underweight or overweight. Many parents or caregivers are often concerned about the amount of food that their child eats and how it affects weight. This concern may be that their child eats too little or their child eats too much.

Before becoming too concerned about the amount of food that your child eats or about his weight, think about the following important points.

- Are you or is your doctor keeping an eye on your child's growth? A growth chart is a good way to do this. Growth charts look at height and weight changes over time and tell you whether your child is growing and developing at a steady rate. Sometimes children gain a lot of weight rapidly in order to have enough energy for a rapid growth in height. A growth chart may help you feel more comfortable with your child's weight patterns.

- Putting your child on a diet if you think your child is overweight is not a good idea. It is unhealthy and just reinforces a negative self-image. Instead, simply try to encourage healthy eating and lots of activity until height catches up with weight.
- Respect your child's want and need to determine the amount of food that he eats. A child who is not pressured to eat or to cut back on his eating will more likely learn to respond to his own body cues for when he is hungry or full.
- Focus on activity and not weight.
- Teach your child good eating patterns when he is young. Make time for healthy meals and snacks and allow plenty of time for him to eat slowly and to enjoy the taste of the food that he is eating. Your attitude towards food and weight will have a major impact on your child.
- Regardless of your child's size, big or small, he should be encouraged to feel good about himself. A good body image can help contribute to a good self-esteem.



If you are having questions about your child's weight, you may want to contact your local hospital dietitian or doctor to discuss your concerns.

A vegetarian diet can simply be one that doesn't include the meat of animals. These diets would include milk and eggs and are called lacto-ovo vegetarian diets. Strict vegan diets are ones in which no foods from any animals are eaten. For young and growing children eating a vegan diet, it is very difficult to get enough nutrients for the best growth and development if you are unfamiliar with a vegan lifestyle.

If you are not familiar with a vegan diet and are planning to remove meat and other foods that come from animals from your child's diet, it is important to still include milk and milk products to provide needed calcium and vitamin D, as well as eggs, to provide other important vitamins and minerals. If you are interested in a vegetarian lifestyle, contact your local hospital dietitian or public health nutritionist for more information to help you plan your diet. You must plan carefully to make a vegetarian diet provide all the nutrients you and you family need for good health.

Fluoride supplements are not usually recommended before the first permanent tooth comes in (usually between five and seven years of age). If you have a family history of poor dental health or if you have questions about fluoride supplementation, please talk with your dentist or public health dental hygienist.

Vegetarianism

A word about fluoride

Learning about food

Food is an important part of your child's world. The more your child is able to see, touch, smell, sometimes hear, and taste food, the more likely it is that she will accept new foods.

If possible, let your child help you prepare meals — even if it means making a mess. Preparing fruit and vegetables, stirring batters, and kneading dough gives your child the chance to feel new textures, discover different food combinations, and enjoy new tastes. Children are proud to serve and eat foods they have helped to prepare.

Helping in the garden and visiting food and farmers' markets can also be fun and can provide your child with a chance to learn about different foods.

On rainy days try taste tests of different foods. This is a good way to learn about foods. You can draw pictures with your child and talk of her reactions to the new foods. Keep the pictures and post them on the fridge to remind everyone of how the taste tests went.

Influence of friends and family

Friends and family can have a great influence on a child, especially in the preschool years. Children learn very quickly and learn some behaviours from watching others and imitating them.

Children will have food likes and dislikes just as adults have. However, many children will learn to dislike foods just because of what family members and friends say and do. They may say they dislike foods without even trying them. This is a great time to try new and different foods together. Try to get your child to make up her own mind about food likes and dislikes.

Friends, brothers, and sisters can be another influence on your child's food preferences. To lessen this influence, you could try little rules in your house, such as "everybody has to at least take a bite." If the reaction is still a problem, get each child to try to explain why they don't like the food. This may lead to a discussion about the fact that everybody is different and will taste foods differently.



Influence of television on children's food choices

If you have ever watched the programs that your children enjoy watching, you have seen the types of advertisements that your children see. The most widely advertised foods are pre-sweetened cereals, candy, gum, pop, fruit-flavoured drinks, and other snack foods.

It is difficult for a child to make healthy food choices based on the foods advertised on television. Ready-to-eat cereals with the highest sugar content are the types of cereals that are most often shown during the times that your children watch television. You may be pressured by your child to choose these cereals over low-sugar, whole grain ones. To avoid these types of supermarket or mealtime battles, you should try to discuss these advertisements with your children when you both see them on television. These moments would be good times to talk about claims made about products and to teach your children about good nutrition and why it is important for growth and development.

Although food is the centre of most holiday celebrations, nutrition is often forgotten. Lack of sleep and poor eating habits during special occasions can make children overtired and cranky.

Try to maintain your child's eating routine during holidays. Work those special holiday foods into her regular meals and snacks. Use "Other Foods" in moderation (see page 17 for a discussion about Other Foods). A child who connects fun times only with "Other Foods" may learn to prefer and always expect them. It will be hard for her to return to the sensible eating habits you have been encouraging after the celebration is over.

Here are a few healthy ideas for celebrating special occasions.

Halloween

- Instead of door-to-door trick or treating, have a dress-up party. For party treats, serve pumpkin muffins or cookies, warm apple cider with cinnamon, open-faced sandwiches made with broiled cheese on an English muffin and with faces made of raisins, grated carrot for the hair, and cucumber and fruit slices for noses and mouths.
- Let preschoolers bob for apples. They think that it is great fun.
- Give out healthy snacks like raisins, apples, and sunflower seeds, or non-food items, like coloured stickers, crayons, coloring sheets, or toothbrushes to the ghosts and goblins who come to your door.

Special feast days

The endless supply of special treats such as candies, chocolates, cakes, and cookies available during the Christmas, Hanukkah, and other special feast days can easily overwhelm young ones. Try to monitor your child's intake of sweets and keep mealtime as normal as possible.



Food for special occasions

For example:

- A nutrition-conscious Santa can stuff stockings with oatmeal cookies, mandarin oranges, crisp apples, individually wrapped cheeses, fruit bread, nuts to crack for older children, or a kid's cookbook.
- Feast days are ideal times for children to learn about the food traditions of other cultures. You could even get a book about the foods eaten in these cultures from your local library and try some recipes out with your family.
- Festive baskets don't have to be filled with jelly beans and chocolate bunnies. Your child may just be as happy to find a new box of crayons, a skipping rope, a new bucket, fashionable shoe laces, brightly striped socks, or colourful hair ribbons.
- Young children love to hunt for hand-dyed eggs.
- For Easter breakfast serve boiled eggs in colourful shells and Peter Rabbit Muffins (for recipe see page 52).

Birthday parties

Children love something new and different at a birthday party. There are books at your local library that can help you when planning different themes and games.

- Try serving vegetables with a dip, bean sprout salad, mini pizzas, pancakes, sandwiches (square, triangles, and rounds made of wholegrain breads and various fillings), a fruit juice punch instead of pop, fresh fruit like watermelon slices, carrot cake, or an ice milk sundae with fresh fruit topping.

Food for kids on the move

Going on vacation or visiting relatives who live far away can be a real adventure, especially if it means a long drive in the car. If you don't want to be at the mercy of fast food restaurants or gas station vending machines, take your own snacks such as those suggested in the snacking section of this book (page 23).

Roadside picnics are fun in good weather. Not only can you bring along nutritious foods everyone likes, but children can run about, get some exercise, and release some of the boredom of a long car drive.

If you do stop at a fast food restaurant, try the salad bar, a hamburger, or a fish or chicken burger. Since some shakes don't contain milk, consider ordering plain milk or juice instead.

When travelling, children often want to eat when they become restless. Shouts of "I'm hungry!" can really mean "I'm bored!" These cries can often be sidetracked by playing road games or singing songs. A favourite story or cassette may also ease your child's boredom.

Feeding challenges for children

Feeding your child can be very rewarding. However, sometimes there are concerns or challenges that may arise. It is important that you know about these in case you have questions or concerns. The following are some suggestions on how to deal with common concerns.

If you have further questions, talk to your public health nutritionist, hospital dietitian, public health nurse, or your doctor. You may also find it comforting to talk with another parent or caregiver of a small child. All of these people may be able to help.



Allergies

What is it?

Allergies are sensitivities to foods, animals and birds, insects, medications and chemicals, and/or the environment. The most common foods that cause reactions are:

- eggs
- peanuts
- nuts
- shellfish
- milk
- wheat

The most common symptoms seen when allergic reactions occur are

- vomiting
- diarrhea
- blood in the stool
- swelling of the face, tongue, and/or throat
- wheezing
- hives
- difficulty breathing

Swelling in the throat is the most dangerous allergic reaction because it could cause death.

What causes it?

Eating a food or coming in contact with something else that your child may be allergic to will often result in an allergic reaction.

Be careful, because the first time the food is eaten, even if there is an allergy to this food, you won't always see a reaction. Sometimes it takes a little time to see a reaction to a food, so don't be surprised to get reactions even if you thought your child tolerated the food well the first time.

What can you do?

Most allergic reactions to foods are noticed within the first year of your child's life. The step-by-step plan you followed when introducing solid foods to your child was done partly because of the possibility of an allergic reaction. This slow introduction of new foods allowed you to identify the food and the reaction more easily.

However, as your child tries more foods in larger amounts, he may react to something. If you notice any of the above reactions, check with your doctor. Through tests, your doctor will be able to confirm allergies.

If you are caring for or feeding children other than your own, make sure you ask the child's parent or caregiver if the child has any food allergies. If your child has food allergies, make sure that you tell him so that he will know and can tell others who might be feeding him in case you are unavailable. Also, it might be a good idea to tell people like friends, daycare workers, and teachers the specific things your child is allergic to.

Reading the list of ingredients on food products is very useful if you have a child with allergies. The ingredient list will tell you what the food contains. Read the label each time you buy: often, ingredients are changed even though you are buying the same products. See page 25 about reading food labels for more information. Also, contact your local hospital dietitian or public health nutritionist for more information on reading a food label.

Choking

- What is it?** Although most children have a strong gag reflex that lets them cough up pieces of stuck food, choking can be scary for both the child and the family. Food pieces that are not chewed properly may become stuck in your child's throat or windpipe and cause choking.
- What causes it?** Food pieces that are small, thin, smooth, or slick (such as peanut butter spreads; fruit roll-ups) are sometimes swallowed before they are properly chewed. Also, hard or tough foods may be swallowed in large chunks because a child has trouble chewing them into smaller pieces. Foods that are round or cylinder-shaped, such as hot dogs, can easily plug the airway if swallowed without being well chewed.
- What can you do to prevent choking?**
- Teach your child to chew and swallow by showing her and watching what she is doing.
- Children under seven years may have difficulty with foods such as popcorn, gum, nuts and seeds, raw carrot rounds, and hard or sticky candies. Avoid feeding a child of 3 years or younger small whole pieces of food that she may not chew properly, such as grapes, gum, apple, wieners, or some cookies. If you give these foods to your child, make sure that they are cut up into manageable pieces.
- Learn to recognize your child's ability to chew and swallow various foods and be aware of potential hazards. Caution her about running or playing while eating. Children should not be lying down or running around when eating. This increases the risk of choking.
- Your doctor, your local St. John's Ambulance, or Red Cross First Aid can give you tips on how to dislodge food from your child's windpipe or throat. The Red Cross Society offers a first aid course called *Childsafe* for new parents and grandparents. Call 1-877-356-3226 for more information. St. John's Ambulance also offers a first aid course called *Emergency Child Care*. Call 1-800-565-5056 extension 1 for more information.

Diarrhea

What is it? Diarrhea is an increase in the number of bowel movements and a change in their colour and consistency. They become loose and watery. Cramps and gas often come with diarrhea.

What causes it? Infections, food poisoning, or food sensitivities are common causes of diarrhea.

What can you do? It is important to give your child fluids to prevent dehydration, especially in the first 10 to 12 hours. Some of the common fluids used for diarrhea are oral-rehydration solutions called Pedialyte, Gastrolyte, or Lytren. These can be purchased at your local drug-store. You can also make your own sugar-salt oral rehydration solution by using the recipe below.

Sugar-Salt Oral Rehydration Solution

30 mL	Sugar	2 Tbsp
1 mL	Salt	1/4 tsp
1L	Boiled, cooled water	4 cups
1 mL	Baking Soda	1/4 tsp

If you do not have baking soda you can use just salt and increase the amount to 2 mL (1/2 tsp).

Note: Try not to give your child fruit juice, fruit drinks, jello, popsicles, etc. These foods that have mostly sugar can increase diarrhea.

Contact your doctor if your child:

- has severe diarrhea for more than a few days (Severe diarrhea is the passage of watery stools more than 10 times a day)
- has less severe diarrhea, but it continues for more than 2 weeks
- shows signs of dehydration
- has rapid weight loss with diarrhea.

Your child may be dehydrated if his mouth and lips are excessively dry, if he doesn't urinate often or his urine has a very strong odour, or if his eyes are sunken or dry.

Constipation

- What is it?** Constipation is the difficult passage of dry, hard stools.
- What causes it?** For some people it is normal to have bowel movements each day, while for others only one movement, every few days is normal. There is a family tendency toward bowel movements, so your or your partner's tendencies can sometimes give you clues about what would be normal for your child. Your child's diet may not have enough fibre from foods like grains, fruit, and vegetables. Also, when your child begins to eat many different solid foods, they may cause constipation.
- What can you do?** Encourage your child to
- eat fibre-rich foods every day (see suggestions page 44)
 - eat regular meals at approximately the same time each day
 - drink lots of fluids; water is one of the best things to drink
 - play actively each day
 - eat the recommended number of servings of grains and fruit and vegetables daily
- Fibre acts as a natural laxative to help you and your child have regular bowel movements. Fibre is good for the whole family. Try adding natural bran, a little at a time, to breads, muffins, cereals, burgers, and casseroles. The following chart may also help to give you more suggestions on how to increase the fibre content in your family's diet.



How to increase fibre in your family's diet

* These foods may cause choking in young children. Do not use foods that have an asterisk (*) next to them until your child is chewing and swallowing well.

Instead of	choose
White bread, rolls.	whole wheat, rye, oatmeal, or cracked wheat bread, rolls
white macaroni, spaghetti.	whole wheat macaroni, spaghetti
white rice	brown or whole-grain rice
store-made french fries, mashed potatoes	baked or boiled potatoes (and eat the skins) or homemade french fries with the skins on, cooked in the oven
cooked fruit or juice	dried or raw fruit with skins that can be eaten* or prune juice
peeled vegetables	vegetables with skins*
sweet rolls or danishes	bran, oatmeal, or whole wheat muffins
cooked vegetables (soggy)	crisply cooked or raw vegetables
potato chips, salted snacks	nuts, seeds, dried fruit mixture*
meat dishes	dishes made with dried peas, beans, or lentils
sugary, refined cereals.	oatmeal, granola, and other whole-grain cereals
sugar cookies or other white flour-based recipes	oatmeal cookies, date squares, whole wheat recipes
sweet baked desserts.	carrot cake, stewed fruit

Be patient, sometimes these suggestions take a few days to have results. Also, these suggestions do not have to be followed just for constipation. They are all part of a healthy way of living every day.

Laxatives, mineral oil, and enemas should not be used without the advice of a doctor. If, after trying the above suggestions, you think your child may still be suffering from constipation, contact your doctor.

Your child can be cavity free for life!

Your child's primary teeth are more than "just baby teeth." They help maintain proper spacing until the permanent teeth come in. Primary teeth are also important for chewing, speaking, and appearance.

Children who learn good dental habits at an early age are more likely to keep their teeth healthy for a lifetime. Show your child that dental care is important. Set a good example and start dental care early.

- **Brush your child's teeth and gums at least twice a day with a soft-bristled toothbrush.** It takes 2 to 3 minutes to remove all the plaque from teeth and gums. Plaque is the sticky, colourless layer of bacteria that keeps forming on the teeth and gums. Children need help brushing their teeth every day, until they are able to do it well on their own (usually by age 8).
- **Brush your toddler's teeth, while your toddler is lying down.** This is a safe position, and it will get your toddler used to having someone working in his/her mouth while in a lying position—just like being at the dentist. However, use any position where you can support the head and see the teeth clearly.
- **Use only a tiny, pea-sized amount of fluoride toothpaste.** Toothpaste isn't necessary to remove plaque; however, the fluoride in toothpaste will help strengthen tooth enamel and prevent tooth decay. Try not to allow your child to swallow the toothpaste.
- **Floss your child's teeth daily after two teeth become close together or touch each other.** Flossing will remove plaque from between the teeth and under the gums. Starting to floss at an early age will help form good flossing habits. Children need you to floss their teeth every day until they are able to do it well on their own (usually by age 10).
- **Check your child's teeth often.** If at any time you notice brown or white spots on your child's teeth, call a dentist right away. This may be the first sign of early childhood tooth decay. Left untreated, these spots may lead to serious tooth decay, pain, and infection.
- **Begin dental visits 6 months after your child's first tooth appears or by 1 year of age, whichever comes first.** This will help form healthy habits, and you will receive information about how to prevent tooth decay. For children not covered by a private dental plan, MSI will cover the cost of most routine dental services up to the end of the month in which the child turns 10. For children covered by a co-pay dental plan, MSI will pay for the co-pay portion of your plan. For more information, talk to your dentist, or call QUIKCARD Solutions, toll-free, at 1-888-846-9199. In Halifax Regional Municipality, call 832-3253.

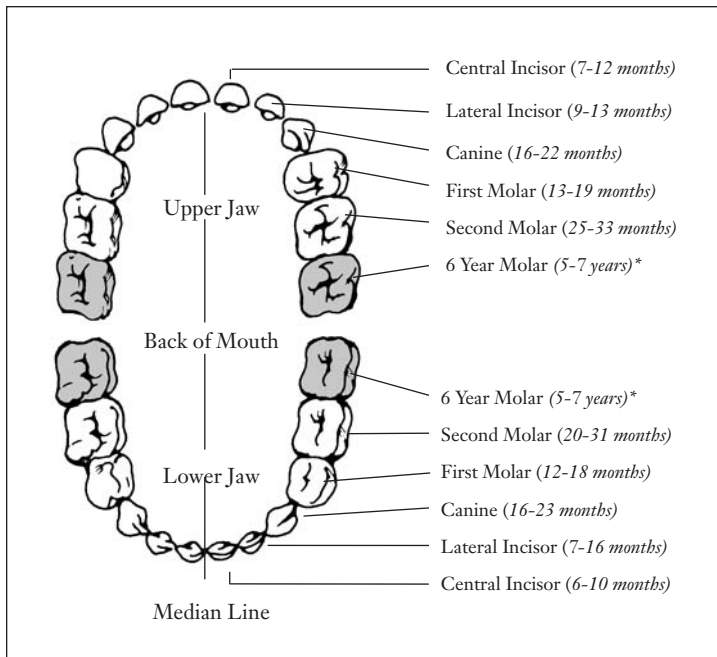
Mouth care for toddlers and preschoolers (12 months to 5 years)



- **Limit sugary snacks.** Frequent snacking throughout the day will put your child at risk of getting cavities when plaque is present. Sugar plus bacterial plaque in the mouth can lead to tooth decay. The longer sugar and plaque are left on your child's teeth, the greater the risk of decay. Choose between-meal snacks based on *Canada's Food Guide to Healthy Eating*. This book contains many healthy snack suggestions, see recipes on following pages.

Water is a good choice for children who like to sip on something through the day. However, water should not replace the other nutritious foods that your child needs to grow and to be healthy. Milk and unsweetened juices contain natural sugars. If milk and/or juice are sipped on all day long, they too can increase your child's risk of tooth decay if teeth are not properly cleaned.

- **Protect your child's teeth.** Teach your child not to chew on things such as pencils and to avoid rough play on swings, slides, and other playground equipment. When your child starts playing sports (e.g., street hockey) a mouthguard is recommended. If your child injures a tooth, call your dentist right away.
- **Discourage thumb sucking and the use of pacifiers by age 5.** Thumb sucking and pacifiers will likely not have any long-term effects on your child's teeth as long as they stop by the time the permanent teeth come in. If thumb sucking is a problem, talk to your dentist or physician, or contact your local Public Health Services office.
- Between the ages of 4 and 6, children begin to lose their primary teeth. At this time, watch for your child's 6-year molars (first permanent molars) to appear behind the last primary teeth. Check with your dentist to see if these teeth require sealants.



For further information on dental care for your toddler or preschooler, contact your local Public Health Services office. See page 55 for contact information.

Young kids cookbook

Beverages

Frosty Fruit Froths

8 x 125 mL (1/2 cup) servings

2	peeled oranges	2
2	peeled bananas	2
1	full tray of ice cubes	1
500 mL	apple juice	2 cups
1 mL	cinnamon	1/4 tsp

Blend in blender. Gradually add ice cubes until smooth. Sprinkle cinnamon on top

Peanut Butter and Banana Milk

8 x 125 mL (1/2 cup) servings

1 L	milk	32 oz
75 mL	smooth peanut butter	1/3 cup
2	bananas, mashed	2

Gradually add milk to peanut butter and bananas in bowl. Stir until smooth and thin. Mix well and chill. Stir before serving.

Party “Punch”

8 x 125 mL (1/2 cup) servings

250 mL (1 can)	frozen raspberry concentrate	8 fl oz
1.5 L (1 can)	apple juice	48 oz
1 L (1 bottle)	carbonated mineral or soda water	32 oz

Mix just before serving. Garnish with mint leaves, fruit slices, or berries.

Main dishes

Crispy Fish Sticks

8 x 2-fish-stick servings

500 g	filleted white fish, fresh or frozen (cod, sole, haddock)	1 lb
125 mL	wheat germ	1/2 cup
60 mL	sesame seeds	1/4 cup
5 mL	salt	1 tsp
2 mL	paprika	1/2 tsp
2	small eggs (or 1 large egg)	2
25 mL	corn oil	1 1/2 tsp

Grease a cookie sheet or other shallow oven-proof dish. Heat the oven to 180°C (350°F). Place the fish fillets on a chopping board and cut them into sticks 1 inch wide by 4 inches long.

Mix the wheat germ, sesame seeds, salt, and paprika in a bowl. Beat the eggs in another bowl, pour in the corn oil and whisk with a fork. Roll each piece of fish in the wheat germ mixture then soak it in the egg mixture. Roll it once more in the wheat germ mixture, then place on a greased pan. Bake in the oven for about 10–15 minutes.

Pancake Favourite

500 mL	whole wheat flour	2 cups
5 mL	baking soda	1 tsp
2 mL	salt	1/2 tsp
15 mL	sugar	1 Tbsp
1	egg, beaten	1
500 mL	buttermilk or sour milk	2 cups
25 mL	oil	1 1/2 Tbsp
250 mL	sliced fruit or berries	1 cup

Blend milk and oil with beaten egg. Mix with dry ingredients until batter is moistened.

Ladle batter onto hot lightly oiled pan. Drop pieces of fruit (sliced banana, apple, or peach, blueberries or raspberries) on each pancake. Flip when bubbles appear on the pancake surface and cook until nicely browned.

Delicious alone or topped with yogurt or fresh or stewed fruit.



Miss Muffet Squares

8 servings

250 mL	brown rice, cooked	1 cup
125 mL	dry pinto beans, cooked* (or substitute other beans)	1/2 cup
2	eggs	2
250 mL	low-fat milk (2%, 1%, or skim)	1 cup
500 mL	low-fat cottage cheese	2 cups
125 mL	minced onion	1/2 cup
2 mL	salt	1/2 tsp
50 mL	chopped fresh parsley (or 2 tsp dry parsley)	3 Tbsp
5 mL	dried rosemary	1 tsp
250 mL	grated raw carrot	1 cup
5 mL	oil	1 tsp

* To cook dry beans, always soak them well before cooking, usually overnight. For 250 mL (1 cup) of beans, use 675–750 mL (2 1/2–3 cups) water. If you don't have time to let them soak overnight, put the beans in water and bring them to a boil. Let them boil gently for 2–3 minutes. Remove from heat and let them stand in the water for 1 hour. Drain the beans and add back the same amount of fresh water that you had the beans soak in. Simmer the beans until they are soft and tender.

While beans are cooking, beat the eggs; beat in the milk, cottage cheese, salt, parsley, rosemary, and grated carrot. In a small frying pan, sauté the onion in oil until it is very soft, but not brown. Stir the onions into the cottage cheese and egg mixture. Drain the cooked beans and stir them into an oiled 8 1/2" x 11" pan.

Bake at 190°C (375°F) with a pan of hot water on the lower oven shelf for about 25 minutes. When it is done, a knife inserted in the centre will come out clean, and the top will have a thin light brown crust.

Cool the casserole for about 10 minutes, cut into squares, and serve. You can also chill it completely and serve cold.

Quiche for Kids

6–8 servings

Preheat oven to 220°C (425°F)

In 9" pie pan, stir together

50 mL	vegetable oil	3 Tbsp
750 mL	coarsely shredded raw potato	3 cups

Press evenly into pie crust shape.

Bake at 220°C (425°F) for 15 minutes until just beginning to brown. Remove from oven.

Layer on:

250 mL	grated Swiss or cheddar cheese	1 cup
180 mL	cooked, diced chicken or ham	3/4 cup
60 mL	chopped onion	1/4 cup

In a bowl, beat together:

250 mL	evaporated milk	1 cup
2	eggs	2
2 mL	salt	1/2 tsp
dash	pepper	

Sprinkle with:

15 mL	parsley flakes	1 Tbsp
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Return to oven and bake at 220°C (425°F) about 30 minutes or until lightly browned and knife inserted 1 inch from edge comes out clean. Allow to cool 5 minutes before cutting into wedges.

Salads

Cuke-A-Doodle-Do

4 servings

2	cucumbers, sliced very thin	2
25 mL	lemon juice	2 Tbsp
Dash	pepper	
15 mL	chives, chopped	1 Tbsp
250 mL	yogurt	1 cup
15 mL	finely chopped onion	1 Tbsp
15 mL	chopped parsley	1 Tbsp
	salt to taste (optional)	

Mix ingredients together. Chill 1 hour or more to blend the flavours.

Mulgrave Oatmeal Cookies

36 cookies

125 mL	margarine	1/2 cup
180 mL	brown sugar	3/4 cup
1	egg, slightly beaten	1
7 mL	vanilla	1 1/2 tsp
2 mL	salt	1/2 tsp
125 mL	whole wheat flour	1/2 cup
4 mL	baking powder	3/4 tsp
250 mL	wheat germ	1 cup
375 mL	rolled oats	1 1/2 cups
180 mL	raisins	3/4 cup
125 mL	sunflower seeds, toasted	1/2 cup

Preheat oven to 325°F (165°C)

Cream together the margarine and sugar. Add the egg, vanilla, and salt, and beat well. Stir flour, baking powder, wheat germ, and rolled oats together with a fork. Blend well with other ingredients, adding a tablespoon or more of water if necessary to hold the mixture together. With hands well moistened with water, form dough into balls approximately 1 1/2 inches in diameter. Place 3 inches apart on a greased cookie sheet. Dip the bottom of a glass in cold water and flatten cookies to desired thickness. (Cookies spread very little on baking sheet.) Bake for 10–12 minutes.

Pita Chips

Serves 8.

6	medium pita bread	6
125 mL	soft-spread margarine	1/2 cup
10 mL	poppy seeds	2 tsp
5 mL	dried thyme	1 tsp
5 mL	dried basil	1 tsp

Separate each pita into single thickness. Cut into sixths. Place pita pieces on cookie sheets and bake at 180°C (350°F) for 7 minutes. Meanwhile mix rest of ingredients. Spread on pita chips and bake for another 4 minutes.

This is a good substitute for potato chips.

Peter Rabbit Muffins

18–24 servings

7 mL	baking soda	1 1/2 tsp
180 mL	all-purpose flour	3/4 cup
180 mL	whole wheat flour	3/4 cup
375 mL	bran	1 1/2 cups
5 mL	cinnamon	1 tsp
2 mL	nutmeg	1/2 tsp
2	eggs, beaten	2
375 mL	milk	1 1/2 cups
25 mL	vinegar	2 Tbsp
75 mL	honey	1/3 cup
60 mL	oil	1/4 cup
250 mL	grated raw carrot	1 cup
75 mL	chopped nuts	1/3 cup (optional)
45 mL	molasses	3 Tbsp

Stir together dry ingredients. Combine eggs, milk, vinegar, molasses, honey, and oil. Add to dry ingredients and stir just until the batter is moistened. Add grated carrots and nuts. Pour into paper-lined or lightly oiled muffin cups.

Bake at 190°C (375°F) for 20 minutes.

Petrified Fruit Juice

500 mL	any fruit juice (but not pineapple juice)	2 cups
7 g	unflavoured gelatin	2 envelopes

Pour fruit juice into microwaveable bowl and sprinkle gelatin over the top. Let stand for a few minutes to soften. Microwave the juice/gelatin mixture on high power for about 3 minutes, stirring once in a while until the gelatin is totally dissolved. The juice does not have to come to a boil.

Pour into a 9" (22 cm) square pan and refrigerate until set. Cut into cubes or shapes.

Mushaboom Iron Loaf

1 loaf/18 slices

250 mL	all-purpose flour	1 cup
250 mL	whole wheat flour	1 cup
30 mL	wheat germ	2 Tbsp
10 mL	baking powder	2 tsp
5 mL	baking soda	1 tsp
250 mL	quick oats	1 cup
125 mL	brown sugar	1/2 cup
1	egg, beaten	1/4 cup
125 mL	oil	1/2 cup
185 mL	table molasses	3/4 cup

or

60 mL	black strap molasses, plus	1/4 cup
60 mL	table molasses	1/4 cup
310 mL	buttermilk	1 1/4 cup
250 mL	raisins	1 cup

Combine flours, wheat germ, baking powder, baking soda. Stir in oats and brown sugar; mix thoroughly. Add raisins. Combine egg, oil, molasses, and buttermilk. Add to dry ingredients, stirring just until thoroughly blended. Turn into greased loaf pan. Let stand 20 minutes before baking.

Bake in 350°F (180°C) oven for 50 minutes, or until toothpick comes out clean. Turn out on rack and cool completely before slicing.

Best-EST Bean Dip

1x 540 mL	canned, chickpeas, drained	1x 19 oz
1	large clove garlic (minced)	1
60 mL	hot water	1/4 cup
30 mL	lemon juice	2 Tbsp
60 mL	peanut butter (smooth) or Tahini (sesame seed paste)	1/4 cup

Carrots, celery, broccoli, cauliflower, pita bread, melba toast, or crackers for dipping.

You will need a blender or food processor to make this dip.

In a small bowl, combine the peanut butter, hot water, lemon juice, and garlic. Purée the drained chickpeas in the blender or food processor until fairly smooth. Add the peanut butter mixture and blend again until smooth. Put into a bowl and dip away!

Oatcake Cut-Outs

48 small-sized cakes

500 mL	rolled oats	2 cups
500 mL	bran flakes	2 cups
250 mL	whole wheat flour	1 cup
250 mL	all-purpose flour	1 cup
5 mL	baking powder	1 tsp
5 mL	salt	1 tsp
250 mL	sugar	1 cup
350 mL	shortening	1 1/2 cups
2 mL	baking soda	1/2 tsp
125 mL	boiling water	1/2 cup

Add baking soda to hot water and let stand until cool. Mix together the first 7 ingredients. Cut in shortening. Add soda and water. Mix well until dough-like.

Roll dough out on a floured board and cut into shapes (squares, rounds, triangles, or use cookie cutters in animal shapes).

Place on a cookie sheet and bake at 180°C (350°F) until lightly browned (about 10 minutes).

These are great for preschoolers' tea parties.

Yogurt Pops

6–8 servings

500 mL	plain yogurt	2 cups
175 mL	unsweetened frozen juice concentrate, thawed	6 oz
15 mL	liquid honey	1 Tbsp
10 mL	vanilla	2 tsp

Mix yogurt, juice, honey, and vanilla. Ladle mixture into paper cups.

Fill paper cups half full. Put yogurt pops in the freezer. When mixture is almost frozen, insert a popsicle stick. Put back in the freezer until thoroughly frozen. To eat, peel off the paper

or try

500 mL	plain yogurt	2 cups
375 mL	mashed banana, raspberries, blueberries, or strawberries	1 1/2 cups

Mix and freeze as above.

For More Information

Fostering good eating habits in the 1- to 6-year-old is very rewarding for a parent, but it is often not easy.

We hope that the information provided in this booklet, along with confidence in yourself and a lot of patience, will help you guide your child toward healthy eating habits.

If you have concerns about feeding your child, your local public health nutritionist or nurse, or hospital dietitian will be pleased to discuss them with you.

Public Health Services

Amherst

18 South Albion Street
Phone: 667-3319
or 1-800-767-3319

Annapolis Royal

Annapolis Community Health Centre
St. George Street
Phone: 532-2381

Antigonish

23 Bay Street
Phone: 863-2743

Arichat

14 Bay Street
Phone: 226-2944

Baddeck

30 Old Margaree Road
Phone: 295-2178

Berwick

Western Kings Memorial Health Centre
Phone: 538-3700

Bridgewater

Suite 109, 215 Dominion Street
Phone: 543-0850

Canso

Eastern Memorial Hospital
Phone: 366-2925

Cheticamp

15102 Cabot Trail
Phone: 224-2410

Dartmouth

201 Brownlow Ave., Unit 4
Phone: 481-5800

Digby

Digby General Hospital
67 Warwick Street
Phone: 245-2557

Elmsdale

East Hants Resource Centre
15 Commerce Court, Suite 150
Phone: 883-3500

Glace Bay

633 Main Street
Phone: 842-4050

Guysborough

Guysborough Hospital
Phone: 533-3502

Halifax

(see Dartmouth)

Head of Jeddore

Forest Hills Shopping Centre
Phone: 889-2143

Inverness

26 Upper Railway Street
Phone: 258-1920

Liverpool

175 School Street
Phone: 354-5738

Lunenburg

14 High Street
Phone: 634-8730

Meteghan Centre

Clare Medical Centre
Phone: 645-2325

Middle Musquodoboit

492 Archibald Brook Road
Phone: 384-2370

Middleton

462 Main Street
Phone: 825-3385

Neil's Harbour

Buchanan Memorial Community
Health Centre
Phone: 336-2295

New Germany

#5246, Highway 10
Phone: 644-2710

New Glasgow

825 East River Road, 3rd Floor
Phone: 752-5151

New Waterford

New Waterford Hospital
Phone: 862-2204

Port Hawkesbury

708 Reeves Street
Phone: 625-1693

St Peter's

Phone: 1-888-272-0096
(Voice mail only)

Sheet Harbour

Eastern Shore Memorial Hospital
Phone: 885-2470

Shelburne

Roseway Hospital
Phone: 875-2623

Sherbrooke

St. Mary's Hospital
Phone: 522-2212

Sydney

235 Townsend Street
Phone: 563-2400

Sydney Mines

7 Fraser Avenue
Phone: 736-6245

Truro

201 Willow Street, 3rd Floor
Phone: 893-5820

Windsor

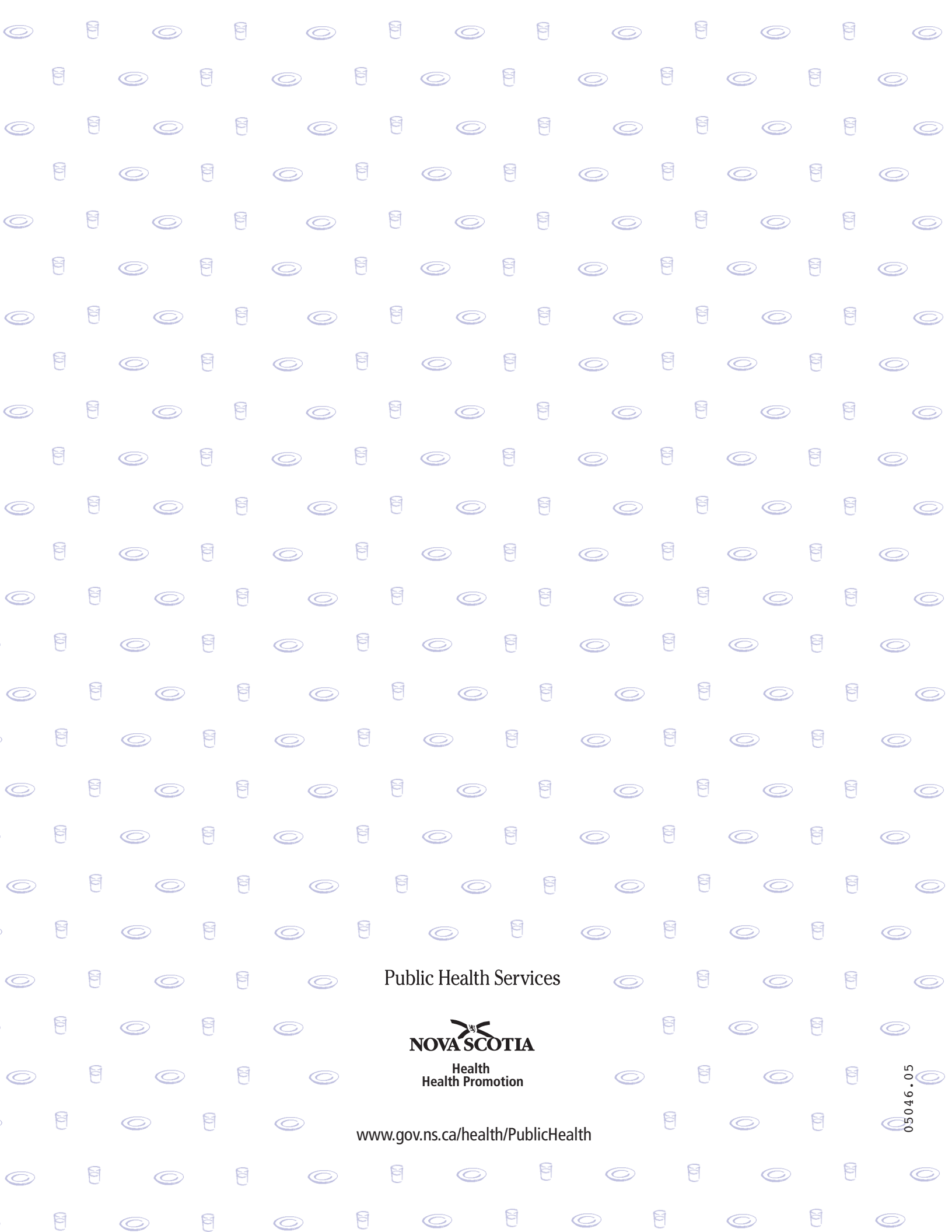
Windsor Mall
80 Water Street
Phone: 798-2264

Wolfville

23 Earnscliffe Avenue
Phone: 542-6310

Yarmouth

60 Vancouver Street
Phone: 742-7141



Public Health Services



www.gov.ns.ca/health/PublicHealth