

Nutrition Education in Young Children

April Powell: Welcome, everyone. And thank you for standing by. My name is April Powell. And I am the resource program manager for the National Center on Early Childhood Health and Wellness. And I'm pleased to welcome you to today's webinar. Before we begin, I have just a few announcements.

First, all participants will be muted throughout the entire presentation portion of the webinar. There's a slide presentation being shown through the webinar system. But only the presenters will be able to change their slides. If you have any questions, please type them in the Q&A box in the bottom left corner of your screen. There's a lot that we'll be covering within the next hour. But you can submit your questions at any time using the chat box in the bottom left. Only the webinar staff will be able to see your questions. Some questions we'll answer right away. But for those we don't have time to cover, we'll email you back with the answer, or, we'll carry this conversation over to MyPeers.

Immediately following the webinar, you'll be prompted to take an evaluation. Only those who take the evaluation will have access to the certificate. The last question on the evaluation will lead you to your certificate. You can fill out your name and print your certificate immediately today, for your records. So, now I'll turn it over to our expert speaker, Brianna Holmes.

Brianna Holmes: Thanks, April. Hi, everyone. My name is Brianna Holmes. And I am with the National Center on Early Childhood Health and Wellness. I do welcome you, again, to our webinar today, Nutrition Education in Young Children. I'm going to be covering a lot of content, like April said. But I want to try to make it a little bit interactive. So, there are some opportunities for you to input some responses in our chat box, as well as completing a poll of some different questions. So, I look forward to hearing everyone's different responses and different answers to poll questions. And we will go ahead and get started.

So, as we look at nutrition, we think about it more than just being healthy eating. We look at it more of a foundation that impacts child development. During this session, we want to not only learn about nutrition development, but how you can take your knowledge and build it into everyday practice when you're working with children. So, we really want you to help understand the needs of children, developing a plan, discover the relationship, and have the skills to create healthy eating.

So, our first question that I ask everyone, if you can respond -- and we'll try to get to -- I'll try to name as many responses or talk about as many responses as I can. But what are your common nutrition challenges or concerns in your program? I'll give everyone just a little bit of time to respond. And then I'll kind of read off some of the answers that I am seeing. Couple of them I see are picky eaters -- big ones -- parents sending healthy choices for lunches, staff, food allergies. Food allergies and picky eaters is -- must be a big, common one, and then parents. So, these are really awesome responses.

And I see a lot of the common themes, which is really good because we do want to try to incorporate a lot of nutrition education to help alleviate those issues with children who are picky eaters, as well as allergies, because they are very common. It's hard to build in a lot of different nutritional activities with children of that nature. So, thank you.

Like I said, I'm sorry I can't get everybody's. But I do see a lot of them. So, we'll keep going. And hopefully, when we get to different sections, I've answered a couple of your questions or addressed a couple of your concerns and challenges.

So, when we're looking at the critical period of children, we know that the critical period typically encompasses a narrow time frame for which the particular region of the brain develops or which a specific experience may occur. So, we know that zero to five is such a critical window when we're shaping healthy habits. So, when we think about nutrition in the brain, a proper balance of nutrients in the first year of life is critical for normal brain development.

We want to try to avoid shortages of nutrients that can decrease cognition, motor skills, language, attention, and behavior problems throughout the school years, and even into adulthood. When you think of some nutrients, such as folic acid, iodine, iron, and DHA, just to name a few, they have been specifically linked to early brain functions. For example, iron has been shown to affect the development of the hippocampus, the structure that underlies learning and memory. B vitamins are important for brain development and function through many mechanisms, including their role in the brain's energy supply, carbohydrates. So, the effect of nutrition inadequacies are often irreversible.

And there was a study in Barbados that showed adults who suffered from an episode of moderate to severe malnutrition in the first year of life -- and they showed more attention problems and lower social status and standard of living than matched controls. This was even after 37 to 43 years. A lot of longitudinal studies have followed children from infancy through childhood have also consistently shown children who became stunted -- height, for instance -- before two years of age continued to show deficits in cognition and school achievement from the age of five to adolescent.

So, thinking about what do we know about eating activity in young children, approximately 30 percent of children consumed no vegetables on the survey a day. And 20 percent to 30 percent children consumed no fruit. Approximately 30 percent of children are consuming pre-sweetened cereals. High calorie density foods are frequently consumed as snacks. 27 percent of 12- to 23-month-old children consumed a sugary drink daily. And sedentary activity for young children has been shown to range from 32.8 to 56.3 minutes per hour.

So, when we're thinking about common nutritional concerns, every child is different. And the role of food will vary by family and culture. However, there are some common concerns that tend to surface in this age group. And a lot of the common challenges that you've mentioned are also common nutritional concerns. It is important to point out that these approaches are general. You may need to work with programs to tailor a response or approach that best works in their community.

Childhood obesity is a common concern in these young ages. It is important to start healthy habits now that set children on a healthy course into adulthood. Over-consumption of milk or juice -- and I'm sure many of you staff have heard, my child only wants to play. He never wants to eat. My child only drinks juice. They don't drink milk or water. So, a good place to start with avoiding some of these nutritional concerns is doing an assessment of the children's nutrition.

So, thinking about when -- early toddler years, when children are transitioning from breast milk or formula to older child eating patterns. Juice consumption is often seen through childhood. And families should be encouraged to limit juice. You, as program staff, can also eliminate juice from your own menu. And use the change as an opportunity to encourage families to limit juice at home.

It's important that families and children are offering food from all food groups, even if the children do not eat every food they are served. A child should obtain all the needed nutrients from a variety of healthy foods representing all of the food groups. Children often develop food jags or test their independence at meal time, especially during the early years, which is why it is so important programs and families create a culture of healthy eating in both settings. We want to make sure that we're not forcing children to eat, but that the normal meal includes a variety of healthy foods.

As they age, then children will come to expect this during meal time. Iron deficiency -- discussed earlier, but is linked to serving foods from all food groups. However, it is important to note that the relationship between consumption of too much milk and iron levels. Children who consume more than 24 ounces of milk a day might experience difficulty absorbing iron from food and supplement sources. Therefore, it is important to recommend parents provide three four ounce for toddlers and eight ounce for preschoolers -- glasses of milk or dairy products a day and serve water in between meals.

And children with special health care needs who use medications that interfere with iron absorption or those with chronic infection -- these children may actually benefit from additional support from a registered dietitian or a medical provider. These needs should be reflected in their IFSPs to ensure that programs and families receive the needed support.

So, what is your role, the role of teachers and caregivers, and the role of health managers? One method of delivering nutrition education programming is that the teacher is actually the nutrition expert. You're a familiar -- an adult for the children. And you spend a significant amount of time with the children and have the potential to positively influence expected outcomes of nutrition intervention.

So, both physical activity and nutrition research has demonstrated that when teachers model positive behaviors, such as participating in physical activity, eating healthy foods with the children, children are more likely to perform those same behaviors. Most young children spend time in care outside of their home. This makes your program one of the best places to reach young children with obesity prevention efforts.

The use of child care centers, family child care, Head Start, have now become the norm. With 60 percent of preschool children in care in a ECE facility, it is important that we as providers ensure that we are maintaining healthy practices in our program. So, improving the environment of child care in early care education facilities will directly impact what children consume and how active they are as well as helping them to develop the foundation that they need for building healthy habits. So, children who are overweight or obese as preschoolers are five times more likely as normal weight children to be overweight or obese as adults. This seems like an astronomical amount -- a figure.

And children enrolled in Head Start are more likely to be overweight or obese compared to the total population of preschool-age children. A recent study suggested that 25 percent of preschoolers who attend Head Start are actually obese, compared with only 9 percent of 2- to 5-year-olds nationally. So, using meal time is really important to help children build these healthy eating habits now, which will drastically affect their lifelong eating habits and overall health.

Through a collaboration with the United States Department of Agriculture, the Center for Disease Control examined trends in obesity prevalence from young children in low-income families from 2000 to 2014 among -- with participants age two to four years. Although from 2010 to 2014, the prevalence of obesity decreased from 15.9 percent in 2010 to 14.5 percent in 2014, it still remains high compared with the national prevalence of 8.9 percent among children two to five years from 2011 to 2014. So, when we're thinking about working with parents and local community holders, we really want to make sure that we're promoting quality nutrition and physical activity for young children in multiple settings to make sure that we're ensuring healthy child development.

Now, most of you may have worked with infants at some point. And if you don't, then you may understand that feeding infants can be very challenging, especially for the first time. It is important to work with families to ensure that you're meeting the needs of their child. So, it's important to understand and be aware of infants rapidly developing mouth patterns and hand and body control so that you know what foods and textures to serve them, and the appropriate style.

Identifying hunger cues allows you to understand how an infant mouth pattern, hand and body movement. They can alert you to know when to feed the infant. Hunger cues include sucking, brooding, your gag reflex, as well as your tongue thrust. And as you feed infants, it's important that you are responsive to the infants' needs. Being aware of these hunger cues allows you to care for the infants in a manner that builds trust and stability.

Discuss a feeding schedule with the family, so that you ensure that the infant is not hungry and fed at a time consistent with the schedule at home. We want to make sure that we're also supporting mothers who choose to feed their infant by encouraging them to supply breast milk while their infant is in care and offer a quiet, private area that is comfortable and sanitary when they breastfeed on site.

Some mothers may serve breast milk to their infant after 12 months of age. So, continue to serve the infants their mothers' milk as long as they wish. And then when an infant is developmentally ready to consume solid foods, work with the parents and guardians to choose and decide what foods to serve.

An infant is usually developmentally ready to eat solid food around six months of age. But infants develop at different rates. So, some may be ready to eat solid foods later. The toddler stage is when many children develop a sense of independence. This is why you will often see food jags, where children only want to eat the same food over and over for several days, or refusal to eat certain foods that they used to eat.

In addition, they're still developing those fine motor skills. So, meal times can be very messy at times. However, they can recognize internal cues of hunger. So, child care staff and family should encourage and support the toddlers to recognize these cues. A child's birth weight quadruples at age 2. Between ages 2 and 5, children gain an average of 4.5 to 6.5 pounds per year and grow on average 2.5 to 3.5 inches per year.

So, establishing healthy meal routines is an important step in healthy toddler development. Ideally, meal time should take place at regular times, at the table with limited distractions, and children should be encouraged to feed themselves with, of course, adult support as needed. Children ages 2 to 5 generally need between 1,000 and 1,600 calories, depending on their size, gender, and activity level. It also shows that four ounces of milk as a serving, which is half of a milk carton -- remember, they may need to be offered a new food 10 to 15 times before they will actually try it.

After age 2, children should gradually reduce the number of calories they consume from high-fat foods, so that by the time they are 5, they're eating between 25 percent and 35 percent of their total daily calories as fat. As they consume fewer calories, they need to eat more whole grain products, fruit, vegetables, low-fat milk products, beans, lean meat such as poultry and fish. Preschoolers should be much more skilled at using utensils, passing food, and understanding those meal time routines.

Their serving size are still smaller than adults. And the picture here demonstrates a four-ounce glass of milk, or a half-carton, a half a cup of fruit shown in the bowl of peaches. And then when you think about it, when you're going to add other things, you usually add some veggies or two ounces of meat. Remember, the serving size of toddlers for meat or other protein source was one ounce. But when they are preschoolers, it increases to two ounces. Nutrition feeds our brains, but can also be used to learn.

So, what should quality in nutrition services in childcare look like? And why is it important? There are many people involved in the child's first years. However, your childcare environment often develops a strong and trusting relationship with both the family and their child. But you are positioned to support healthy development, identify nutrition concerns, and of course, engage families to build those healthy habits at home. In your program, you have the opportunity to create healthy eating environments, assess a child's nutritional needs and how well they're met, and assess their growth and development, and, of course, offer healthy foods.

So, how do we do this? We want to make sure that we're creating a positive eating environment, healthy eating environment, creating a positive eating environment. Adults are responsible for planning and preparing healthy meals and snacks for children. We want to make sure and encourage children to be responsible for deciding which of the foods they would like to eat and deciding how much they would like to eat. Children often need to hear this information several times before they can understand the new routine.

Other strategies can include offering foods again later in the meal to children who may -- did not want it or wanted a very small portion. Do not enforce a child to eat any food or eat more food than they want to. Make sure children are offered each menu time. And help children with servings as needed.

A warm give-and-take conversation style should be initiated by you and other staff members. And teachers should follow the child's lead. Allow second servings after everyone has been served. And make positive comments. Many of us grew up with the "clean your plate" mentality that we need to finish all the food on our plate or we are wasteful. However, as we have discussed, children learn how much food to choose by listening to their own hunger. This is a learning process, and some ways, is to be expected as they build these skills.

Remember to encourage one serving at a time with appropriate measuring spoons to encourage children serving themselves appropriate amounts and listening to their hunger cues. Controlling what and how much a child eats may affect a child's food preference and ability to regulate their energy intake. And we also want to make sure that we're not impacting the child's ability to listen to their own hunger cues and the amount of food that they are consuming. Children can learn to associate foods with aspects of positive or negative social contexts. So, repeatedly presenting a food in a positive context results in increased liking for that food. In contrast, presenting foods in a social context that generates more negative emotions -- for example, coercing a child to consume a food by offering a reward -- can cause a decreased liking of that food.

The social environment in which children eat can also have a dramatic effect on their eating behaviors. If meal time is used as a time of conflict or discipline, children may associate eating with those same feelings. So, family-style meals -- they provide a lot of health benefits as well. Earlier, I mentioned our eating habits are established early in life. But during this time, children are also learning how nutrition, meal time habits, and understanding their own food intake -- and how to know when they're full or hungry. So, you can use family-style meals to introduce and encourage children to try new foods.

Research has shown that continued exposure to food will increase the likelihood the child will eventually consume it. And then we also know that when preschool children were given opportunities to eat meals, to observe other children choosing and eating vegetables that the observing child did not like -- so if a child is sitting at a table, a lot of times, we see them eating something because their friends are eating it.

Encourage teachers to model healthy eating by eating the healthy foods served to the children in your program. You may, in turn, create healthier eating habits for yourself. So, experimental studies have provided evidence that both adult and peer models are effective in promoting children's acceptance of and preferences for novel foods. So, teachers modeling healthy eating increases the likelihood a child will try a healthy food.

Unfortunately, the reverse is also true. If a child sees adults modeling unhealthy eating habits, they are more likely to adapt these unhealthy habits as well. Provide opportunities for nutrition education. Talk about healthy foods at the table and food groups. Kids at this age love to group or categorize things. So, you can teach -- use this as a teaching opportunity to teach them about the food groups from resources such as MyPlate or ask them to group food according to shape, colors, et cetera. Teacher serving sizes -- this can be very difficult at times because we're asking the child to serve themselves.

So, how can we do this? Try using measuring spoons and cups that provide one serving at a time. Then you can encourage children to try one scoop of food and then come back for seconds if they're still hungry. Offer a variety of healthy foods. Unfortunately, the diets of most children are poor or need improvement. Children's diets typically mirror the deficiencies of their parents' diet, which could be including high in fat, sodium, sugar, and very low in fiber.

In a Nutrition Insights report in 2001, only 36 percent of 2- to 3-year-olds were noted as having a good diet. And this percentage decreased with increasing age. Much of the decline in the diet quality for children occurred between 2- to 3-year-old ages and 4- to 6-year-old groups, falling from 36 percent to 17 percent, which makes -- and which means that family-style meals are a great opportunity with a family service worker or health manager to encourage family-style meals at home. And remember, family-style meals also teaches about food safety. We want to encourage children not to mix serving utensils or eat from serving bowls and remember the most important thing: washing their hands.

Healthy menus -- so good planning can make a huge difference. The menu influences almost every aspect of your food service operation, from which foods are purchased and how they are prepared to whether or not meals are actually popular with the children. When planning menus, think about a couple of things. Think about a healthy balance of food and flavors, variety of types of food, forms and ways that you prepare the food, textures, and foods that are appealing to the children. When you have foods of different colors on the meal -- can also serve as a great teaching opportunity and learning opportunity for the children. And try to avoid having the same type of food at -- in the same meal.

Adding a fruit and vegetable to a meal with too many starches will help balance and create a healthier meal. Also, when you're thinking about creating your menus, keep in mind food preferences, special occasions and holidays, as well as food availability based on the season. All right.

So, we have our first poll. Where we're thinking about nutrition, what do we want children to learn? Think about from introducing nutrition in your program, are there some things that you specifically want to focus on based on the needs of your program and community? So, I ask that everyone click either the importance of healthy eating to their health, trying a variety of food, new foods, becoming comfortable with healthy foods, social norms during meal time, and healthy eating habits. All right.

We have a lot. Healthy eating habits is taking the lead. All right. Let's look. Healthy eating habits -- we want children to learn the importance of nutrition through healthy eating habits. And we have a close second with trying new foods and the importance of healthy eating. So, this is awesome. Thank you, everyone, for participating.

So, when we think about nutrition education, specific outcomes from interventions have included increased fruit and vegetable intake, behavioral intentions for healthy eating, physical activity, nutrition knowledge, and efficacy expectations regarding healthy eating as well as decreased sedentary activities and consumption of sweets. Teachers are encouraged to use meal time as a nutrition educational opportunity. But think about some opportunities to enhance nutrition education in the classroom and during meal time.

So, when we think about meal time, teachers, you have the opportunity to reinforce other activities, such as sharing, colors, shapes, grouping, or pass nutrition-related lessons from the day's curriculum as well as the majority of the teacher nutrition-related discussions focus on naming foods. Although naming foods help to familiarize children with different items, stopping the discussion that naming food falls short of challenging the preschoolers' cognitive skills.

So, preschoolers enjoy sorting and classifying things. So, try sorting foods into different food groups. Use meal times as learning time to practice conversation and social skills. Talk about nutrition. And reinforce your basic concepts, such as your colors of foods, shapes of plates, food groups, et cetera. And ask questions about taste, smell, and color.

Remember, meal time is not something separate from your daily curriculum. The same skills that children develop during free play and group time are utilized and practiced during meal time. Other nutrition education opportunities can include practicing cooking and meal time routines with play such as food, shapes, and grouping. Introduce food with a curriculum activity. You can introduce food with books. There are many options. But my favorite is actually The Very Hungry Caterpillar. And it's a common example. You can start a program garden to learn about where food comes from and encouraging trying new foods. Allow children to help prepare some snacks. Preschoolers should be able to mix, roll, or they can pass or count snacks.

So, thinking about -- as making part of nutrition your daily routine, we encourage you to post your daily routine and refer to it throughout the day. So, this provides a sense of order and time for children. These are just some examples of different components that you may post each day. If your daily routine is posted, don't let it go unnoticed by families. We want to encourage families to ask their child specific questions about the day. What did you do during circle time this morning, or even just, what did you have for snack today? Look for ways to include nutrition into the routines of the day. All right.

Our next poll -- now we're going to talk some more about barriers that you have regarding planning nutrition education activities. So, I do ask that everyone complete the poll. But when we're thinking about nutrition education activities, think about those things that you're doing in the classroom. What challenges are you facing when you're actually implementing it? All right. I'm going to give just a couple more minutes or a couple more seconds. And then I'm going to go ahead and close the poll so we can look at everyone's results. All right.

Making time to do the activity -- all of you are very busy, I understand. So, trying to figure out how do we incorporate nutrition education activities into your day is very challenging. Looking at not sure what to do -- is also a common one -- not sure how to do it, and following up after the activity.

So, as we move forward over the next couple slides, we will look at how can we do all these things and be able to overcome these barriers that you're facing when you're implementing the activities. So, how to plan a nutrition education activity -- nutrition education is learning about foods and how foods are important to health. So, of course, we want to make sure they're age-appropriate. And most of all, we want to make them fun. Children will stay engaged a lot longer if they're having fun.

So, we want to think about planning activities that match the children's interests and abilities. Children develop rapidly from 2 to 4 years of age. So, your activities should take into consideration the child's developmental readiness. Younger children are not able to perform the same tasks as older children. So, when planning a nutrition education activity, think about the age of the children. Almost any activity can be changed to fit the abilities and interests of the children being taught. Plan simple activities before harder ones.

Children, like adults, want to be successful in what they do. You can help children be successful by first planning activities that are simple, and then progressing into harder ones. For example, to involve children in food preparation, start by introducing them to some very simple cooking activities. Once children learn the basic rules of cooking, they will be ready for more challenging activities. Build on what the children already know. Children learn new things by building on things that they already know. When you introduce a new topic about food and eating, connect it to something that's already familiar to them. And be ready to use these teachable moments to help children learn about food and eating. A teachable moment is a time when children are ready to learn something new or to make connections with something that you've already discussed or done.

So, nutrition education fits well within classroom curricula -- for example, the early learning framework, as we see on the slide. So, create nutritional learning goals that fit within each learning framework, thinking about reasoning and problem-solving, number concepts and quantities, patterns, shapes, comparisons, knowledge of the natural world, fine motor skills, language development are all just a couple of examples of different ways that you can introduce and integrate your nutrition education into the early learning framework. All right.

So, now let's get the steps to planning the actual nutrition activity. So, the first thing we do -- and we had a discussion on, well, how do we plan or what are the challenges that you find with planning an activity? So, let's start with the first one, why. When we plan activities, we should have a goal in mind. This goal will guide your thinking as to why we are doing this activity. Is it because we want the children to learn a specific developmental skill? Do we want children to increase their knowledge of gardening skills? And why is this activity important?

So, why are we doing this activity is very important. It should be the first step of your nutrition education planning. What -- this seems like the easy part. Well, sometimes, coming up with the activity can be the most challenging piece. We want to make sure that children are learning based on our goal. But what is it that will help us reach our goal? Think about what resources you already have that provide activities to support your goal and children's learning. Also, think about those around you. Many times, those around us are the most valuable resources. We can learn and get ideas from one another.

How -- now, this is the planning piece. How will we do the activity? Preparation, preparation, preparation. This is very helpful for success. It can be very challenging to prepare an activity in the middle of circle time or during transition. So, gather materials and have them ready before the activity.

This can make it a little easier when you're implementing the activity. Try to find some downtime during the day to prepare for the next day. And I understand, believe me, it's hard. And the question comes up as to when do we ever have downtime. But you are able to try to prepare stuff a little bit at a time to gather things for the activity for the next day or for later on in the day. So, when -- once you have thought about children and prepared your activity, it's time to think about when is the best time to do it.

Think about your daily schedule, the classroom dynamics, and times when you may have the most assistance. Remember, children who are hungry and tired tend to have a lot of trouble paying attention. And then, of course, do the activity. This seems simple enough, of course. We want to make sure children are engaged and having fun. But we want to make sure that we're introducing the activity before so the children can connect concepts and be familiar with what they are about to do. When you think about those children in mixed age groups, try to have the older children help the younger children complete the activity. The older children love to teach. And it also becomes a way of learning for them.

And the last step -- follow up after the activity. Think about how you can use the activity to continue to make connections based on the original goal, or the "why." When you refer back to the activity at different times, it will help children link the activity and concepts together. And remember, repetition is key. So, listed on the slides are just some nutrition activities that you can do with children. And a lot of them actually have to do with food. If you are not able to use actual foods in your program, think about how you can implement the same activity, but in a different way.

For example, with the show-and-tell salad, you could have children cut out pictures of fruit from a magazine and glue them onto a plate or bowl. You can still create a fruit salad with less mess and still the same concept. You can create a salad of the whole classroom, or you can do it for each individual child. When you're introducing apples, children can use plastic apples and have them imagine or guess what they think it would taste like. Get families involved by asking them to have their child try a different color apple at home. And when they return the next day, create a fun graph to show what their food preference is.

Expanding a book into a lesson -- a lot of times, we love to use books. And they can be a lot of fun to expand lessons. Think about how you can incorporate books into free play as well. Let's say you are discussing fruits or vegetables. You can place books around -- books about fruits and vegetables in the different exploratory centers. You could place a story that has a picture of a grocery store or garden in the block area and encourage the children to look at the book and create the buildings or the structures that they see. Children at this point are learning and connecting concepts on their own.

Also, have the children make their own books. Include things such as their art work, photos of meals from home, food magazines, gardening catalogs, and leaf drawing from different foods. These are great ways children can learn. And it also shows their creative side. Garden-based nutrition education programs can increase fruit and vegetable exposure and improve predictors of fruit and vegetable intake through experiential learning activities.

Participation in the seed-to-table experience of eating may help promote healthful eating behaviors among children. Food and nutrition professionals should consider garden-based nutrition education programs that connect children with healthy foods through fun, hands-on activities. Farm to Preschool is a great resource, website, and organization to help think of different activities and try to connect children with gardening. Health educators could also benefit their population by facilitating communication between teachers and parents.

So, here are some pictures. I just posted some pictures of different nutrition activities that you can do with children. You can practice cooking and meal skills, introduce food with fun activities, introduce food with books, and teach children how to plant a garden are all ways that children can get involved.

Now, this was some of the concerns that rose that -- challenges that came up earlier -- was your food allergies. So, when you're looking at infants, every infant should have a parent-approved food plan. New foods should be introduced one at a time. One ingredient food should be introduced at a time, and within three to five days in between new foods, to observe the infant for food allergies. Iron-fortified instant rice cereal appears to be one of the solid foods least likely to cause an allergic reaction. Infants at high risk, have a high risk of developing food allergies, are those with at least first-degree relative, parent or sibling with allergies as well.

Common allergens are milk, eggs, soy, and wheat. However, most children become tolerant to these foods by school age or late childhood. Quality of life for family with a child with food allergy is affected in a variety of ways. There are a lot of health and nutrition concerns, emotional issues. Children may have those anxiety about reactions and dealing with others in the community, or just even the reaction from their friends. And worrying about the child's food allergies will be lifelong.

So, when we think about some food allergy symptoms, we think about those skin symptoms -- your itchiness, your flushing, your rash or your hives, red or watery eyes, and then you even have the nausea, the pain, cramping, and vomiting. So, staff should really be trained on these symptoms regularly, at least once a year, as well as be able to recognize symptoms of anaphylaxis. Staff should be comfortable recognizing those symptoms as well as being very comfortable for injecting an EpiPen and calling 911 when anaphylaxis symptoms are present.

Engaging parents about nutrition, food preparation, and meal time can help improve meal time at home. Parents become positive role models when talking to their children about healthy eating and providing healthy foods for meals and snacks. Nutrition awareness helps parents support the childcare program policy.

Now, as you incorporate nutrition education into your program, developing policies will help you maintain these activities. Here are some sample policies that you can use to help you continue to create a fun learning environment for the children. Listed on here are some training tools.

And the next slide also has some resources that we encourage you to use to think about how you can incorporate nutrition education activities into your program. These resources and tools will be available. And they will be sent via a link after the webinar.

So, that's the end of our webinar. I would like to thank everyone. Since we're done a little bit early, we're going to ask for some questions that we can answer. So, hopefully, if you do have any questions, please place them in the chat box. And we will try to answer those, as many of those as possible.

April: Thank you so much, Brianna. We've had quite a few questions come in. So, we'll go ahead and get started. Okay. The first one is, I work in a toddler classroom. Do you have ideas of safe nutrition education activities for 2-year-olds?

Brianna: So, with a lot of nutrition activities, and I think that we've talked about with 2-year-olds, it's really about making sure that we're understanding the children's abilities and interests. So, we're thinking and we have to take into consideration, because 2-year-olds develop so rapidly -- is taking into consideration where they are and the readiness of the children. So, making sure that we're adapting those activities to the ages of the children are most important. And then again, going back to planning those simple activities before you plan the harder ones and just thinking about, Okay, well, what activity is most beneficial to this child with this learning ability as well as this child with another type of learning ability -- so really making sure that we're thinking about those, and building also on what the children already know.

A lot of times, as program staff, you're already working with the children. So, you are probably the best resource of where the children are developmentally. So, think about what the children already know when you're trying to plan your activities so that you can make sure that they are successful for the children and they don't seem to get too overwhelmed with it or make it too challenging for them. I hope that answers your question.

April: I think so. Thank you. Let's see. Another question -- you talked about a positive eating environment. Can you talk about what a positive eating environment looks like for infants?

Brianna: Sure. So, when you're looking and you're thinking about infants, one of the main things is when you're feeding an infant -- is to hold him. You want to make sure that you're holding them in a -- more of an upright position so you can see those infant cues that we discussed earlier, looking at the fullness, the eye movement, the hand movement, things like that -- so really looking at their response to feeding. How are you looking into the eyes of an infant? Are you looking into the eyes of the infant while they're eating? Don't let infants fall asleep with the bottle. That's always a fear of mine.

And unfortunately, sometimes, if we're not paying attention, this could happen. And then infants are really distracted by lights and noise. So, you may need to try to turn off the lights and create an environment where you can really focus on feeding. So, having those calm approaches where you're rocking the infant, petting them, or feeding them in a room with less light and noise can be really helpful.

Talking to the infants is actually really helpful, as well, because when they develop, they will increasingly respond to those interactions. So, it all kind of ties back into the response to feeding. And then making sure that you're not forcing an infant to try new food -- we want to make sure that, one, that, of course, we're working with the families and making sure that this is something that has been tried before. But we also don't want to force it on the infant.

And as we know, it takes time for them to actually try in several occurrences. So, hopefully, that helps give you some idea of the healthy eating infant environment.

April: That was great. Thank you. And I think we've got some time -- so just a few more questions.

Brianna: Okay.

April: So, you talked about not using foods as a reward. And just to be clear, is it Okay to offer a reward if a child tries a new food?

Brianna: Well, we really want to try to stay away from that regardless of if they're trying a new food or if they are -- or as a punishment because we want them to try new foods. So, let's try to think about different praises or different activities or different things that we can do to encourage them.

A lot of times with the trying of a new food, making a big ordeal out of it -- oh my gosh, that's awesome, we're really -- I'm really happy that you tried it, things like that -- but we try to avoid it altogether just because we don't want children to get too consumed with one type of food. We don't want them to get -- have negative thoughts or feelings towards it. So, it's kind of a balance. But we don't -- we try not to promote it with food or punishment or try not to reward with food or food at all.

April: Great. That cleared that up. Thank you. Let's see -- just a couple more. So, you talked about hunger cues. How do you explain hunger cues to a 2-year-old?

Brianna: Hunger cues -- those are fun. And a lot of times, children actually -- they know. It's just kind of bringing it out of them. So, sometimes you know when you're talking about hungry or I'm full, I'm full or you're still hungry, you can have children when you're talking about circle. Maybe pat your stomach if you are hungry or pat your stomach if you're full. Touch your head if you're still hungry -- trying to think of those things to have them know when they've ate too much. But talking to them, I think, is the most important piece of having them to understand and identify those hunger cues just because they actually learn it from the infancy stage.

And you'll be able to notice by certain movements of them. So, once you kind of notice how they respond to it, sometimes, it will allow you to individually talk to the children about their food things, their food preferences. And if you are too full, that means your stomach hurts or things like that, or your stomach may feel rumbly. So, then that means you're still a little bit hungry. So, sometimes, it starts at the infant stages when we think about it. But moving towards the two-year-olds, it really kind of adjusts. And they're able to identify certain things that they do.

April: Great. Thank you. So, another question -- we talk a lot about educating the children. But should we only be educating children, or should we educate parents too? So, children made hear the importance, but not understand it enough to relay it to their own parents.

Brianna: Absolutely wonderful question. Yes. Yes. Yes. We want to always try to engage and educate families, as well, because everything that we work with the children when we're in -- when they're in our care -- if it's not supported at home, it's very hard to keep that consistency. So, try to think of different ways that you can educate parents in ways that you're educating children because a lot of times, when the children are learning certain things, they go back and tell their parents. Ooh, I learned about green beans today. I really liked them. And sometimes, the parents think, my child never even liked green beans. But they tried them in your program.

So, trying to educate parents -- maybe it's doing something as simple as putting a quick tip on a index card because at the end of the day, it's hard to have full conversations with parents because a lot of them are moving around. They're trying to pick up the children. So, it's a lot of transitioning going on. But you could give quick tips to parents on just an index card of a different nutritional lesson that the children have learned or encouraging them to talk to their children about different foods.

So, you could put a talking point or something to discuss with the parents or with their children when they go home. You have your general things I think a lot of people do. Of course, you may have your newsletters. You may have bulletin boards. But it's also fun to send home pictures of just different nutrition education activities that they can do and that they have done so that the parents can see some things and get ideas of some tips that they can do even possibly at home. I hope that answered the question. I'm trying to keep thinking as we're moving. But I don't want to get caught up too much in time. I know we had some questions.

April: Yeah. I think that -- so we might have time for just one more. And then a lot of people are asking about getting the slides and recording. So, I want to make sure that we go over that. So, just one last question about a slide that you did about food sampling -- can you talk about how the art activities with food would encourage healthy eating habits?

Brianna: So, when you're looking at art -- oh, I'm sorry. Okay. One of the slides had, like you said, a picture of art sampling. When you're thinking about doing art activities with children, remember that it's not just about teaching children about foods and tasting them and eating healthy, but it's those healthy behaviors and activities that you're doing.

So, it could be something such -- as simple as -- I'm trying to even think of -- if you're taking a picture of a carrot or you're doing a picture of a carrot with the children, you can connect it to different things that they learn about with their bodies about being healthy. So, carrots may make -- provide them with helping their eyes, helping them see better, keeping their eyes better. But things like that you would connect it to as opposed to it just being an art project, thinking about how you can expand it to different levels.

So, of course, we think about your colors and shapes, but also what things keep us healthy and how do they keep us healthy -- so how could parents keep us healthy -- because of course, we also want to see. So, we want to have good vision. So, we want to try to eat carrots to help us have good vision, things like that.

April: Awesome. Thank you so much. So, we'll go ahead and if we didn't answer your question, because we had a lot of questions come in, we will continue this conversation on MyPeers. And some people will email them directly with an answer to their questions because they were very specific about a specific situation. So, I want to thank you so much, Brianna, for presenting. And thank you, everyone, for joining.

We'll go ahead and conclude the webinar. A lot of questions came in about the certificate. So, instructions for certificate -- immediately following the webinar, a survey will pop up on your screen. And when you take the survey, the last question will give you access to your certificate. There will be a link there that you click to download a PDF. And you'll be able to fill in your name right there on the PDF and print it for your records or for your supervisor's record. If you have any questions about the certificate, you can email health@ecetta.info. It's right there on your screen. But it should be pretty straightforward. The last question on the survey -- you'll click a link to get to the PDF of the certificate and put your name right there.