Window of Opportunity: Role of WIC Nutritionist in supporting developmental feeding

Cheryl Alto, MS RD
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Objectives

- Assess recent infant FVV food package change
- Understand the infant feeding techniques: “Baby-led Weaning, Baby-led Feeding”
- Discuss typical infant behaviors and how they support developmental readiness for progression of textures
- Explore how the WIC Nutritionist can support developmental feeding for families and staff
- Identify early signs of feeding problems
Infants can get fresh fruits and vegetables starting at 9 months of age.

Implemented October 1, 2014.
Offering the Infant FVV

* Optional
* 16 jars= $4 FVV
* Food package is available for 9-12 month infants but anticipatory guidance can begin earlier
* Required components
  * Diet assessment
  * Documented NE
* Logical time to assess & assign is at the mid-cert health assessment
Oregon WIC NE materials

* For participants: It’s time to eat! Food for your baby (57-709 ENGL or SPAN)

* For staff training materials:
  * Powerpoint, training guide and staff handouts

* [http://public.health.oregon.gov/HealthyPeopleFamilies/wic/Pages/freshchoices.aspx](http://public.health.oregon.gov/HealthyPeopleFamilies/wic/Pages/freshchoices.aspx)
What have you noticed?

* How is this implementation going in your clinic?
* When talking with families about introducing solids, what have you heard?
Weaning = feeding food other than mother’s milk

Prospective population based study of feeding and growth in NE England

N=1029 Mothers in 1999-2000
Gateshead Millennium study: Reasons for starting solids

* My baby seemed hungry
* I thought it was the right time
* My family and friends told me to
* A book or leaflet suggested I should
* Home visitor or doctor advised me
Infant feeding is a balancing act
Possible consequences of feeding too early

- Gut and kidneys are not mature
- Lack neurodevelopmental skills
- Solids are displacing breastmilk needed for immune protection
- Sense of trust is tested when infant cues not responded to

Charlotte Wright
U of Minn course 2014
Possible consequences of waiting too late

- Micronutrient deficiency: iron, vitamin D
- Reduced fat stores
- Slow growth
- Missed opportunity to develop tastes and feeding skills

Charlotte Wright
U of Minn course 2014
Timely topic: Baby-led weaning

- Introduced by Rapley and Murkett in 2008
- Website includes baby-led parenting, baby-led breastfeeding and a baby-led cookbook
Principles of Baby-led Weaning

* A way of introducing solid foods that allows babies to feed themselves
* No spoon feeding
* No purees
* Encourages exploration
* [Http://www.babyledweaning.com/](http://www.babyledweaning.com/)
Pros and Cons of Baby-led Weaning

**Pros**

- Puts emphasis on introducing solids when infant is interested, ready
- Promotes exploration, touching of food, messiness
- Avoids intrusive tactics of spoon feeding can potentially cause

**Cons**

- Choking risk
- Not all foods are designed for self feeding
- Lends itself to leaving baby alone with food, lost opportunity for parent-child interaction
- Does not take into account sensory variation of infants
What do you think?

- For the WIC Nutritionists who watched the U of Minnesota session by Charlotte Wright on baby-led feeding, what additional comments do you have?
- How does the information you learned fit with what WIC is offering?
- What questions have come up for you and your staff?
What does WIC recommend?

* The WIC food package includes jarred baby foods
* The infant fruit and veggie voucher is an opportunity to progress textures and move to table food
* WIC supports developmentally appropriate feeding practices
What does WIC recommend?

- WIC supports feeding as an opportunity for promoting parent-child interaction, attachment
- WIC supports the use of spoons, utensils and finger feeding
- WIC counsels on food safety and risks associated with offering foods that are potentially choking hazards
First foods

* Meats
* Cereal
* Vegetables
* Fruits
* Eggs

* Waiting 2-3 days between new foods
* Progressing from:
  Pureed---Mashed---Ground---Diced

* Avoid:
  * Honey
  * Raw or undercooked meats
  * Uncooked, raw tofu
  * Raw sprouts
  * Unpasteurized dairy products and soft cheeses
  * Deli meats, hot dogs, processed meats
  * Choking hazards
What have you heard?

- What reasons have families given for starting solids or waiting to start solids?
- What resources, support have families shared for making the decision of what first foods to offer and how to introduce solids?
Responsive feeding: supporting developmental milestones
Sensory play supports feeding readiness
Signs of readiness

- Trunk and shoulder stability
- Allows for more skillful movements of hand and mouth
- Jaw is more skillful in opening and closing
- Tongue moves with greater freedom, moving side to side
- Lips act like pair of small hands feeling the surface of anything entering the mouth

Bring it on Mom!
Developmental signs of readiness for solid feeding (4-6 months of age)

* Sits with support
* Good head control
* Wholes whole hand to grasp objects (palmer grasp)
* Recognizes spoon and holds mouth open as spoon approaches
Developmental signs of readiness for solid feeding (5-9 months of age)

- Begins to sit alone unsupported
- Follows food with eyes
- Transfers foods from one hand to another
- Tries to grasp foods with all fingers and pulls them into the palm
Developmental signs of readiness for solid feeding (8-11 months of age)

- Sits along easily
- Transfers objects from hand to mouth
- Begins to use thumb and index to pick up food (pincer grasp)
- Self-feeds finger foods
- Plays with spoon at mealtimes
Leaning in and enjoying the feeding experience

* Readiness for eating will be reflected in a inward tilt between the caregiver and the infant
Pulling away

* When the infant is not ready, or not hungry for a feeding there will be a pulling away of the infant
* If the caregiver is not responsive to the cues, there will be a leaning in of the caregiver and spoon
Pulling away

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* If the caregiver is not responsive to the cues, there will be a leaning in of the caregiver and spoon
Pulling away and miserable

- If the caregiver is not responsive to the cues of the infant/child feeding can become miserable and establish negative feeding behaviors.
Red flags for feeding

- Sensory issues:
  - Distress with textures during play, clothing, touch
  - Distress with messiness, not tolerating textured foods
  - Pulling away, arching when spoon feeding is offered at developmentally appropriate stage
- GERD
- Food refusal and constipation
- Pocketing of food in the mouth
Mid-cert appointment: setting the stage for responsive feeding

Setting the stage:

“At this visit, we will explore growth, immunizations and find out what new behaviors, milestones you are seeing in your infant’s development that will help you and baby get ready for table foods”
Mid-cerr observations as a way to support developmental feeding

<table>
<thead>
<tr>
<th>Observations</th>
<th>How the behavior supports feeding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teething</td>
<td>Sensations from the gums draws the infant’s awareness to the mouth, increases interest in mouthing</td>
</tr>
<tr>
<td>Mouthing hands and toys</td>
<td>Mouthing helps with biting chewing and oral exploration and decreases gag reflex</td>
</tr>
<tr>
<td>Tongue moves side to side</td>
<td>Movement of the tongue is important for moving food from one side of the mouth to the other to prepare for chewing of food</td>
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### Mid-cert observations as a way to support developmental feeding

<table>
<thead>
<tr>
<th>Observations</th>
<th>Reflections for caregiver</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infant able to sit during weight check</td>
<td>What a nice job sitting up. That is an important step to get ready for solids.</td>
</tr>
<tr>
<td>Infant reaches for food in mom’s hand</td>
<td>Nice reach and use of the hands. Interest in what others are eating is a way infants tells us they are ready for solids.</td>
</tr>
<tr>
<td>Reaches for cup or spoon in your office</td>
<td>Your infant is exploring the world around him. I look forward to hearing about your plans for introducing solids.</td>
</tr>
</tbody>
</table>
What are your observations?
WIC staff resources
What resources would help You? Your WIC staff? Our WIC families?