



Getting Enough Physical Exercise

Physical activity provides benefits for healthy brain, muscle and bone development, as well as opportunities for continuous fine and gross motor development along with social skills.

For infants who are not yet walking:

- Encouragement of floor-based play (e.g., tummy-time from birth when awake, consistently supervised and for progressively extended periods). According to the developmental stage, infants may sit unaided, crawl, play, and roll on the floor.
- Water-based activities (e.g., swimming, bath time).
- Limit restrictions on infant's movement only for necessary activities or travel (e.g., the infant is confined in a pushchair/car seat).
- Maintain safety and supervision in activities, positioning and play environments.
- Avoid screen time (TV, phone, tablets). Such are not recommended for children under two yr. olds and should be limited among above two years of age. The NHS GG&C recommends, children younger than 18 months, avoid use of screen media other than video-chatting.

For children who are capable of walking unaided:

- Should be physically active for at least three hours/180 minutes a day, broken up into shorter sessions throughout the day
- Light (moving around) and more energetic activities may include active play, messy play, walking, running, jumping, dancing. This is to be encouraged – the more activity, the better!
- Minimise sedentary time (i.e., sitting). Avoid using a buggy if child capable of walking. See this as an opportunity to encourage child to be active.
- Avoid screen time, especially during family meals.

For further advice on how to keep your child active, visit the '[Born to move](#)' App, or the provided Error! Hyperlink reference not valid.



RECOMMENDED INFANT FEEDING AND CARE PRACTICES

Play and Stimulation

Play is critical for a child's healthy brain development, movement skills, and their emotional wellbeing. Variation of play is important.

- **Physical play:** including turn taking – e.g., interactive games with the parent: running, chasing, rolling, throwing and kicking ball.
- **Play with objects:** Learning cause and effect – e.g., building blocks, learning to build, balance, knock/fall and start again.
- **Symbolic play:** Laying down foundations and neural pathways to support later learning – e.g., painting, drawing, reading, numbers.
- **Pretend play:** Developing concepts and ability to imagine – e.g., imaginative, pretend toy is real.
- **Games with rules:** Understanding boundaries and sets of conditions, social constructs – e.g., playing catch and chasing.
- **One to one time:** Essential to develop and promote attachment, bonding, and begin development of resilience. The 'Five to Thrive' approach recommends five simple activities for carer and infant to support a strong bond and promotes brain development: **Respond** to infant, **cuddle** infant, **relax** with infant, **play** with infant, and **talk** to infant.

Infants up to Four Months:

- Floor-based play (e.g., tummy time).
- Water-based play (e.g., pour-play with water)
- Give oil massages to infants from birth

Infants up to Four Months and Above:

- Shaking a rattle. (Rattles can be constructed using a screw-top bottle and filling it with rice/lentils).
- Pushing a ball towards them.
- Playing with food (from six months). Messy eating is play

Infants up to Four Months and Above:

- Using plasticine or Play-Doh under adult supervision.
- Engaging in role play activities with the air of puppets.
 - Sock puppets: can be made by drawing faces on socks and pretending to have socks talk to each other.
- Rough and tumble play, running and jumping.

For more information on play resources, and inexpensive ways to make toys yourself: [15 DIY Non-Toys for Toddlers](#)



RECOMMENDED INFANT FEEDING AND CARE PRACTICES

Timing of Introduction of Foods and Drinks

From 6 months:

- **Baby-led weaning is recommended:** Allow your infant to feed themselves with soft finger food, as soon as they show interest.
- Softer foods can be offered by spoon, but your infant should open their mouth first. Offer your infant the chance to hold the spoon.
- Avoid adding sugar/salt/stock cubes to baby's food or cooking water.
- **First foods:** offer mashed or soft, cooked sticks of fruits and vegetables (e.g., baby rice, parsnip, potato, sweet potato, carrot, apple or pear).
- **Next foods:** offer soft, cooked meat such as chicken/mashed fish (check for bones), lentils and rice e.g., khichri; pieces of chapatti; full fat (no sugar) dairy products e.g. pasteurised yoghurt/cheese.
- **Recommended drinks:** breast milk, formula and tap water.

***Note:** Teething may affect your baby's eating habits. This is normal behaviour.

6-12 months:

- Continue with breast feeding or Stage 1 formula feed.
- Offer a diverse mixture of finger foods, mashed and chopped foods from all four food groups

**See card on nutrient diverse and rich diet for more details.*

Note: Solid feeding should be introduced around six months. An infant is ready for solid foods when they can:

- Stay in a sitting position and hold their head steady.
- Safely swallow food. Babies who are not ready, will push it back out.
- Show interest in food eaten by the parents.
- Coordinate eyes, hand and mouth, to pick up food and put it in their mouth

12+ months:

- Child should be eating three meals and two snacks a day, inclusive of all four food groups.
- Consuming same healthy foods as the family, chopped if needed.
- Stop formula feeding, although breast feeding may continue.
- Infants can consume cow's milk as of 12 months. Should not take place any time before.
- **Recommended drinks:** breast milk, water from tap and full fat cow's milk.



RECOMMENDED INFANT FEEDING AND CARE PRACTICES

Age-Appropriate Portion Sizes

A child's appetite can vary meal-to-meal, day-to-day, by activity level and rate of growth. Notice and respond to these presented changes.

Responsive Feeding:

- To avoid overfeeding, caregivers should practice responsive feeding when providing breast, bottle or solids. Respond to their child's needs by recognising:
 - **Hunger Cues:** Rooting, sucking on fists, looking for bottle, curiosity in food, tired, pointing to fridge.
 - **Full Cues:** Clamping mouth down, turning head away from breast or bottle, falling asleep
- Responsive breastfeeding may result in feeding for comfort and love. Comforting child through food is not recommended. Offer your child lots of attention and cuddles instead.

Infants 6-12 months:

- Portion sizes are not relevant at this stage. Do not worry about how much your baby is eating. Breast milk/stage 1 formula is providing adequate amount of nutrients.
- Introduction to solids and solid food intake is all about trying different tastes/textures.
- Do not worry if food is rejected at first, or no solid foods are eaten at times. Attempt again another time.

Six months: Offer one solid food meal a day inclusive of soft 'first foods'. Progressively introduce 'next foods'.

Seven months: Include your infant at family meals, offering three solid food meals a day inclusive of finger/soft/mashed food from the 4 food groups - fruit & vegetable, protein, starchy and dairy. Gradually, the infant will move to eating 3 meals a day.

** For more information visit: [Infants & new mums — First Steps Nutrition](#)

12+ months:

- Child should be eating three meals and two mini meals from four main food groups.
- Visit [First Step Nutrition](#) for recipes and images of recommended portion sizes.

Other tips to help with feeding the right amount:

- Toddlers' stomachs are approximately the size of a clenched fist.
- Monitor food an infant consumes, especially when multiple carers feed.
- Don't worry about weighing infant.
- Plates and tablespoons are useful for portion control. Portion control guidance are maximums, not minimums.

Nutrient Diverse and Rich Diets

Infants 6 to 12 months: Should be offered a range of foods inclusive of all four food groups, at every mealtime. Children should be encouraged to try new foods, while portion sizes remain within recommended guidelines.

Proteins: Two portions a day

- Inclusive of chicken, meat, fish, eggs, beans and pulses. Three portions are requested for individuals requiring vegetarian alternatives.
- Two portions of fish per week, one of which should be oily, providing Omega-3. Important to note that overconsumption of fish can lead to a build-up of pollutant. Boys may have up to four portions a week, as compared to two for girls.

Starchy foods (breads and cereals): Five portions a day, within meals and snacks/mini meals.

- Children under two should be provided a mix of wholegrain and white starchy foods, as they do not require as much fibre in their diet.

Vegetables & Fruits: Five portions a day, with every meal and as mini meals.

- Can be fresh, frozen, canned or dried.

Dairy Products:

- **Under Five:** 350ml or three portions of dairy or calcium fortified alternatives a day (e.g., soya). Avoid rice milk due to arsenic content.
- Full fat dairy products for infants above one, but under the age of two should never be skimmed or 1% milk. Semi skimmed milk is suitable for individuals over two.
- **Cows' milk** can be used in cooking or mixed with food from around **six months** of age but should not be given as a drink until baby is one.

Supplements: All children from six months to five years are recommended to take a daily supplement of vitamins A, C and D. Infants taking more than 500ml of formula per day **should not** take additional vitamin supplements.

In Tower Hamlets all children are entitled to free vitamins – speak to health visitor to access.



RECOMMENDED INFANT FEEDING AND CARE PRACTICES

Balanced Diet

Recommendations and Tips:

- Water from the tap is recommended.
- Avoid using mashed fruit, or breast/formula milk to sweeten foods.
- Infants over the age of six months should be offered savoury foods to encourage range of tastes first and fruits should follow.
- Consider offering vegetables as snacks/mini meals.
- Encourage fruit-based dessert, and avoid sugar filled dairy dessert.
- Cook foods in the oven or grill, to avoid of frying them.
- Seek your health care professional's advice on presented lactose-intolerance and allergies.
- Child should be taken t see the dentist as soon as first tooth appears.
 - Child should learn appropriate dental hygiene practices
 - Soft toothbrush and pea sized toothpaste (containing at least 1000 ppm of fluoride) should be used
 - Brush twice a day, morning and last thing at night after the last feed.

Do's:

- Have a daily routine for both meals and snacks
- Eat together with your child, to act as a role model
- Praise infants for trying new foods
- Eat food in a calm, relaxed environment without the distractions of TV, phones, games or toys
- Try foods again which your infant has previously avoided.
- Maintain diversity in food introduction, being mindful of age appropriateness
- Stay calm during feeding time, this will help child feel calm
- Access support from your group in manage fussy eating.

Don'ts:

- Rush mealtime
- Praise them just for eating any food
- Insist your infant eat everything given to them, force feed or use distraction techniques to get more food into them
- Give snacks or large drinks just before a meal

For more information on Nutrition and Age-Appropriate Portion Sizes, please refer to:

https://www.firststepsnutrition.org/newpages/Early_Years/



RECOMMENDED INFANT FEEDING AND CARE PRACTICES

Bottle, Cup and Drink Practices

For infants six months and over:

- Begin to use open beaker or cup with free flow spout, avoiding bottle use.
- **Recommended drinks between meals:** breast milk, cooled boiled water from the tap, and stage 1 formula milk (must be offered responsively).

For infants 12 months plus:

- Infants should be able to drink from a cup by themselves by 12 months.
- A beaker with a free-flow lid (without a non-spill valve) is better than a teat. Drinking from an open cup takes time and practice. Start with small amounts so spills don't matter. Provide the opportunity to learn.
- Prolonged bottle feeding and lidded cups (beyond 12 months) place infants at increased risk of poor oral health, including dental carries, delayed speech development, and childhood obesity.
- Gradually remove formula milk from child's diet after 12 months.
- It can be hard to break the habit of bottle feeding after the 12th month, so attempt to stop using within a month post 1st birthday.
- **Recommended drinks between meals:** breast milk, water from the tap and full fat cow's milk.

For infants of any age:

- For infants with reflux, seek advice from health professional.
- There is no evidence that other formula milks (hungrier babies, follow-on milk, toddler milk) are any better than regular formulas.
 - Stage 1 is top recommended formula milk for babies aged from 0 to 12 months.
 - Always follow formula packaging instructions to make up milks safely. Before using, sterilised bottles and teats and cool previously boiled water to the correct temperature to ensure formula milk is sterile.



RECOMMENDED INFANT FEEDING AND CARE PRACTICES

Age-appropriate Oral Health & Dental Hygiene Practices

Breastfed babies experience less tooth decay, as compared to bottle-fed infants. Within the first few months of life, breastfeeding provides optimal nutrition for a baby's overall health, inclusive of both oral and dental health.

Sugar is the main cause of tooth decay, so give healthy, low-sugar snacks!

Some other tips for bottle-feeding and/or breastfeeding mothers include:

- Only breastmilk, formula or cooled boiled water should be given in a bottle.
- Introduce infants to drinking water from a free-flow cup from six months, with bottle feeding being discouraged by year one.
- Introduce solid foods of different textures and flavours around six months.
- Avoid adding sugar to food or drinks given to babies and toddlers. Use sugar-free versions of medicines when possible.

Once the baby's / infant's teeth have grown in:

- Parents / carers should brush their children's teeth *twice a day*
 - Brushing should occur first thing in the morning and last thing before bed
- Fluoride toothpaste (approximately a pea-sized portion) is recommended to keep child's teeth strong and healthy
- Minimise the consumption of sugary food and drinks, especially at bedtime/overnight and after brushing the child's teeth

Children require assistance and supervision brushing their teeth until they are about seven years old

For more advice on toothbrushing and oral health: [Information for parents and carers – Designed to Smile](#) and [Children's teeth - NHS](#)