HEALTH BASICS

# Children's healthy eating

Children's healthy eating is an age-appropriate pattern of foods and drinks that supports growth and development.

**WHAT IT IS**
Age-appropriate eating that supports growth and development

**WHERE IT COMES UP**
Meals, snacks, growth checks, school, and food labels

**WHY IT MATTERS**
Supports growth, learning, teeth, bones, and long-term health

**WHAT IT IS NOT**
Not a disease or diagnosis

**WHO TO ASK**
Pediatrician, family clinician, registered dietitian, or health visitor

**HOW IT IS CHECKED**
Diet history and growth measurements when concerns arise

## Overview

Children's healthy eating means offering a range of foods and drinks that meet a child's changing needs. It is not a disease, diagnosis, strict diet, or single meal plan.

Children need energy and nutrients for growth, movement, learning, and development. Their needs change with age, body size, activity, health, and stage of development. Appetite can also change from one day to the next, especially during growth spurts or periods of slower growth.

A healthy pattern usually includes vegetables, fruit, grains, protein foods, and dairy or suitable alternatives. Variety over time matters more than making every meal perfect.

Eating is also a skill. Babies learn to manage different textures. Young children learn to use cups and utensils. Older children become more involved in choosing and preparing food. Calm, repeated practice can help these skills develop.

Culture, family routines, budget, food access, disability, allergies, and sensory needs all shape what healthy eating looks like. Familiar cultural foods can be part of a balanced pattern.

## How it works

Food provides energy and nutrients. Protein supports growth and tissue repair. Carbohydrates and fats provide energy. Iron helps red blood cells carry oxygen. Calcium and vitamin D support bones. Fiber helps bowel movements, while vitamins and minerals support many body processes.

During roughly the first six months, breast milk or iron-fortified infant formula is usually the main food. Complementary foods are introduced when a baby is developmentally ready, generally at about six months. Signs of readiness include being able to sit with support, control the head and neck, and swallow food rather than push it out.

Textures should progress as the child develops. Soft mashed or finger foods can help a baby practise chewing and hand-to-mouth skills. Food must be prepared in shapes and textures that reduce choking risk.

After infancy, regular meals and planned snacks can provide structure. Adults generally decide what food is offered, when it is offered, and where eating happens. The child can decide whether to eat and how much. Pressuring, bribing, or forcing a child to finish can make it harder for them to respond to hunger and fullness.

Water and plain milk are the main everyday drinks for most children after infancy. Whole fruit offers fiber and is usually a better everyday choice than juice. Sugary drinks can add substantial sugar without helping a child feel full.

Children may need many calm exposures before accepting an unfamiliar food. Looking at, touching, smelling, or tasting a small amount can all be part of learning. Refusing a food once does not mean it must be removed permanently.

## Why it matters for your health

A varied eating pattern helps provide the nutrients needed for physical growth and brain development. Iron-rich foods are especially important in infancy and early childhood, when iron needs are high. Examples include meat, fish, eggs, beans, lentils, tofu, and iron-fortified cereals.

Calcium and vitamin D help build bones. Dairy foods can provide both, although vitamin D content differs between products. If a child does not have dairy, check whether an alternative is fortified and nutritionally suitable. Plant-based drinks are not all equivalent to cow's milk or infant formula.

Food choices also affect teeth. Frequent sugary foods and drinks expose teeth to sugar repeatedly, increasing the risk of tooth decay. Water between meals and regular dental care can help protect teeth.

Fiber and fluid support comfortable bowel movements. Fiber comes from foods such as vegetables, fruit, beans, whole grains, nuts, and seeds. Nuts and some seeds must be prepared safely for younger children because whole nuts can cause choking.

Healthy eating does not require banning treats or labeling foods as "good" and "bad." A flexible approach can help children enjoy food while learning that some foods are everyday choices and others are eaten less often.

## What can go wrong

A very limited diet can sometimes lead to a nutrient deficiency. Iron-deficiency anemia , meaning too few healthy red blood cells because of low iron, is one example. Risk may be higher when a child eats few iron-rich foods or drinks so much milk that it replaces meals.

Low fiber, limited fluid, painful toileting, or other health issues can contribute to constipation . Frequent exposure to sugary foods or drinks can contribute to dental caries , also called tooth decay.

Eating more or less energy than the body needs over time may affect growth. Clinicians assess this using a pattern of height, weight, and, for younger children, head measurements. One measurement alone usually does not explain whether there is a concern. Growth faltering means a child is not gaining weight or growing as expected. Overweight and obesity are clinical terms based partly on age-adjusted growth measurements, not appearance alone.

Some children have food allergies , in which the immune system reacts to a food. An allergy is different from an intolerance, which does not involve the same immune response. Children with severe eczema or a known food allergy may need individual advice before certain allergenic foods are introduced.

Choking happens when food blocks the airway. Whole grapes, whole nuts, popcorn, hard sweets, chunks of meat or cheese, and spoonfuls of nut butter can be hazardous for young children. Children should sit upright and be supervised while eating.

Some children have strong sensory reactions, fear of eating, swallowing difficulties, or an extremely restricted range of foods. These situations may relate to developmental differences, a medical condition, or avoidant/restrictive food intake disorder , known as ARFID. Routine assessment is appropriate if eating limits growth, nutrition, family life, or participation at school.

Call emergency services if a child cannot breathe, speak, cry, or cough effectively during a suspected choking episode. Emergency help is also needed for signs of a severe allergic reaction, such as breathing difficulty, collapse, or sudden swelling of the tongue or throat.

## What you can do

Offer regular meals and snacks without requiring a clean plate. Include at least one familiar food when introducing something new. Keep portions modest at first; a child can ask for more.

Useful actions include:

Ask a pediatrician, family clinician, health visitor, or registered dietitian about growth concerns, persistent feeding difficulty, suspected allergy, a vegan diet, or a diet that excludes several food groups. Bring the food record and any growth measurements you have.

Routine follow-up is appropriate if a child regularly struggles to chew or swallow, has ongoing constipation, eats very few foods, appears to lose weight, or is not following their expected growth pattern. These concerns need assessment, but they are not usually emergencies unless breathing, consciousness, or severe dehydration is affected.

- Offer foods from several food groups across the day
- Provide water regularly and limit sugary drinks
- Eat together when practical and model the foods you offer
- Keep mealtimes calm and avoid using food as punishment or reward
- Prepare food in an age-appropriate shape and texture
- Check labels for added sugars, sodium, allergens, and fortification
- Keep a short food record if you are concerned about variety or intake

## Common questions

Does every meal need to be balanced?

No. Look at the overall pattern across several meals and days. Appetite and food choices often fluctuate.

Should children take a multivitamin?

Not every child needs one. Supplement needs differ by age, diet, health, and local guidance. Ask a clinician or pharmacist before giving a supplement, because excessive amounts of some vitamins and minerals can be harmful.

Is fruit juice healthy?

Juice can contain vitamins, but it has less fiber than whole fruit and delivers sugar quickly. It is not needed for infants under 12 months unless used for a specific clinical reason. For older

children, whole fruit and water are better everyday choices.

What if my child dislikes vegetables?

Continue offering small amounts without pressure. Try different textures, cooking methods, or familiar dishes. Acceptance may take repeated exposure.

Are vegetarian and vegan diets suitable for children?

They can be, but careful planning is important. Protein, iron, vitamin B12, calcium, vitamin D, iodine, zinc, and omega-3 fats may need particular attention. A registered dietitian can review whether the diet meets the child's needs.

When can allergenic foods be introduced?

Foods such as cooked egg and age-appropriate peanut products can generally be introduced with other complementary foods once a baby is developmentally ready. Do not give whole peanuts. Ask a clinician first if the baby has severe eczema or an existing food allergy.

## Sources

- U.S. Department of Agriculture and U.S. Department of Health and Human Services. Dietary Guidelines for Americans, 2020-2025, 9th edition . December 2020.
- Centers for Disease Control and Prevention. Infant and Toddler Nutrition . Guidance on complementary foods, drinks, food safety, and feeding.
- U.S. Department of Agriculture. MyPlate: Healthy Eating for Kids . Practical information on food groups and family meals.
- Heyman MB, Abrams SA, American Academy of Pediatrics Committee on Nutrition. Fruit Juice in Infants, Children, and Adolescents: Current Recommendations . Pediatrics . 2017;139(6):e20170967.
- Togias A, Cooper SF, Acebal ML, et al. Addendum Guidelines for the Prevention of Peanut Allergy in the United States . National Institute of Allergy and Infectious Diseases; 2017.
- U.S. Food and Drug Administration and U.S. Environmental Protection Agency. Advice About Eating Fish . Guidance for children and people who are or might become pregnant.