



Commercial Baby Food **A NUTRITION IN-SERVICE FOR STAFF**

“What is patriotism but the love of the
food one ate as a child?”
~ Lin Yutang



This institution is an equal opportunity provider.
Washington WIC does not discriminate.

For persons with disabilities this publication is available on request in other formats. To submit a request, please call 1-800-841-1410.



A lesson on commercial baby food and providing information to WIC caregivers about infant feeding.

- Who:** Participants: WIC staff, range of 2-15 participants with varying degrees of maternal, infant and child nutrition knowledge and WIC experience.
Leader: WIC RD/Nutritionist
- Why:** By understanding more about available commercial baby foods, WIC staff can confidently discuss infant feeding with caregivers throughout the first year.
- When:** A monthly in-service that is designed to be 30 to 60 minutes - depending on the discussion and the number of staff attending.
- Where:** The session was designed for a WIC classroom, meeting room or large office depending on the size of the group.
- What:** By the end of this session staff will have:
- Identified developmental cues to indicate readiness for solid foods.
 - Compared commercial baby food “stages.”
 - Compared single item baby foods to infant “dinners.”
 - Brainstormed ways to foster acceptance of commercial baby food meat by caregivers and babies.
 - Identified food safety issues in preparation, feeding and storage of baby foods.
 - Practiced using Ask, Provide, Ask when working with WIC caregivers about infant baby foods.
- Materials Needed:** Flip chart or white board
Copies of:
- In-service *Participant Copy*
 - In-service *Feedback Form*
 - Baby food samples (see page 4 of this in-service for details)

Background For Further review and consult:

**Reading for
Leaders:**

- Special Supplemental Nutrition Program for Women, Infants, and Children: Revisions in the WIC Food Packages; Interim Rule <http://www.fns.usda.gov/wic/regspublished/wicfoodpkginterimrulepdf.pdf>
- Infant Nutrition and Feeding: A Guide for Use in the WIC and CSF Programs http://www.nal.usda.gov/wicworks/Topics/Infant_Feeding_Guide.html
- Excerpts from Food for Tots Third Edition, Dr. Janice Woolley, Pediatrician & Jennifer Pugmire, Mom, 2009 pp. 4-9

How:

- Schedule in-service.
- Review background information.
- Review in-service *Leader Copy* (*italicized print indicates leader speaking*).
- Prepare materials needed.
- Have fun!

Introduction / Warm-Up**1 minute**

Welcome! I will be the leader for this month's nutrition training. I encourage all of you to participate. Together we can explore our topic and discover strategies to support our WIC clients.

By the end of this session you will have:

- *Identified developmental cues to indicate readiness for introduction to solids.*
- *Compared commercial baby food "stages."*
- *Compared single item baby foods to infant "dinners."*
- *Brainstormed ways to foster acceptance of commercial baby food meat by caregivers and babies.*
- *Identified food safety issues in preparation, feeding and storage of baby foods.*
- *Practiced using Ask, Provide, Ask when working with WIC caregivers about infant baby foods.*

Part 1**5 minutes****Developmental cues**

Caregivers start feeding their infants solids for many different reasons. Pair up and share reasons you have heard about why caregivers start solids. We will hear some of your thoughts.

Who would like to share?

Make a T-chart on a flip chart or white board. Label one side of the T "Not ready for solids," label the other side of the T "Ready for Solids."

Let's think about the developmental cues of infants who are ready to start solids. Look at the list of developmental cues. Together, let's decide whether they are a cue that indicates readiness for solids or not.

- *Up-and-down munching movement*
- *Transfers food from front to back of mouth*
- *Tongue thrust reflex*
- *Draws in upper or lower lip as spoon is removed*
- *Sits with support*
- *Needs head support*
- *Strong gag reflex*
- *Keeps tongue flat and low for the spoon*
- *Holds head steady*

Summarize the completed T-chart which should look like this:

Not Ready for Solids	Ready for Solids
Tongue thrust reflex Needs head support	Up-and-down munching movement Transfers food from front to back of mouth
Strong gag reflex	Draws in upper or lower lip as spoon is removed
	Sits with support
	Keeps tongue flat and low
	Holds head steady

How can we discuss with caregivers these readiness-for-solids indicators?

Part 2	5 minutes
---------------	------------------

Comparing commercial baby foods

Preparation:

- Purchase 3 jars of baby food fruit and 3 jars of baby food vegetable: Stage 1, Stage 2, and Stage 3.
- Purchase 1 jar of a baby food “dinner” and 1 jar of baby food meat.
- You will need three large paper plates.
- Take the first paper plate and mark it so you will have three sections.
 - Label each section (Fruit A, Fruit B, Fruit C).
 - Place a few spoonfuls of each baby food on one separate section.
 - Attach a list of ingredients to each section.
- Take the second paper plate and mark it with three sections.
 - Label each section (Vegetable A, Vegetable B and Vegetable C).
 - Place a few spoonfuls of each baby food on one separate section.
 - Attach a list of ingredients to each section.
- Take the third plate and mark it so you will have two sections.
 - Place a commercial baby food “dinner” in one section and in the other *combine* a baby food vegetable and a baby food meat.
 - Attach a list of ingredients to each section.

Working in pairs, examine the samples of baby foods fruit and vegetables that I have set out. Compare the texture and ingredients. Compile a list of the similarities and differences that you notice between the samples. Decide what “stage” each sample is. We will share your observations.

Wait 3-5 minutes.

Who would like to share their observations?

Identify Stages. Compile comprehensive list of similarities and differences on white board or flip chart.

Note: Washington WIC will provide baby food fruits and vegetables in 4 oz. jars, Stage 2 or 2nd Foods only.

Show the jars of baby food so participants can compare sizes. (Optional: share comparison of cost per ounce).

What observations would you share with a caregiver who is concerned about starting a baby on Stage 2 versus Stage 1 foods?

Consider compiling a list of factors for staff to use as a reference when discussing the difference between baby food Stages with caregivers.

Compare the mixture of baby food meat and baby food vegetables to a commercial baby food “dinner.” Take three minutes to discuss what similarities and what differences you notice and answer the following questions. We will share your responses to the questions.

- *What might influence a caregiver to choose a commercial baby food “dinner” instead of combining a single vegetable and a single meat?*
- *What information would be helpful for a caregiver to know, to make an informed decision when choosing baby foods?*
- *What observations would you share with a caregiver who is concerned about using Stage 2 foods for their older infant?*
- *What suggestions would you share about ways to use Stage 2 foods with an older infant?*

Part 3	5 minutes
---------------	------------------

Commercial baby food meats

Who will read the following information?

The Institute of Medicine identifies iron and zinc as nutrients of importance for all healthy, full-term infants. Formula fed infants receive these nutrients through infant formula.

At six months of age, the fully breastfeeding infant will receive baby food meats from WIC to provide a source of iron and zinc. Baby food meats are very easy for the baby to digest. This

makes baby food meat an excellent first food for fully breastfed infants. Fully breastfed babies will receive thirty-one, 2.5 oz. jars of baby food meats.

Infant cereal is a good first food for all infants because it has a low risk of causing allergic reactions. It provides some iron but is not as well absorbed as the iron in meat and contains very small amounts of zinc.

In groups of two or three, brainstorm ways caregivers might use baby food meats when feeding their breastfed baby. We will share your ideas.

Ideas might include:

- Mixing baby food meat with breast milk until reaching a desired consistency and to increase taste acceptance.
- Mixing baby food meat with baby cereal, baby food vegetables, or fruits. (Follow guidelines for initial introduction to new foods to avoid/identify allergic reaction.)
- Mixing baby food meat with soft table foods, like mashed potatoes, rice, noodles, etc...

Part 4**5 minutes****Food safety in the preparation, feeding and storage of baby foods**

Read the following information about the preparation, feeding and storage of baby foods adapted from: USDA Infant Nutrition and Feeding: A guide for use in WIC and CSF programs. Underline any information that is new to you.

Preparation:

- ✓ *Wash hands before preparing or serving infant food.*
- ✓ *Wash baby's hands before serving.*
- ✓ *Position the infant, so they sitting up and secured in a high chair.*
- ✓ *Do not microwave containers of infant food. The food may be heated unevenly and some parts of the food may burn the infant's mouth.*

Feeding:

- ✓ *Serve food from a bowl.*
- ✓ *Do not feed infant food directly from jars or containers. Enzymes from the baby's mouth can cause germs to grow in the food remaining in the jar.*
- ✓ *Feed the infant using a small spoon.*
- ✓ *Do not feed solids by bottle or infant feeder.*
- ✓ *Introduce "single-ingredient" foods initially.*
- ✓ *Introduce new foods one at a time. Wait several days between the introduction of each new food. Observe the infant closely for adverse reactions.*

Storage:

- ✓ *Discard leftover food. Always discard any leftover food that has been contaminated with the feeding spoon.*
- ✓ *Cap the jar tightly and refrigerate any opened jars of unused food. Use foods within 48 hours, except baby food meats, which should be used within 24 hours.*

Who would like to share what they underlined?

Who would like to share any baby food preparation or storage mistakes that you have heard?

Part 4**12 minutes****Using Ask, Provide, Ask**

Divide up into pairs. Using Ask, Provide, Ask take seven minutes to play out the following scenarios. We will share your thoughts and questions at the end of the time.

- *Scenario 1: Mom and her 6 month old fully breastfeeding son: Wrinkling her nose Mom says “Baby food meat, what do I do with that?!”*
- *Scenario 2: Mom and her 10 month old twins: “More baby food? I still have lots of jars in my cupboard from last month!”*
- *Scenario 3: Mom and 11 month old daughter: “She’s 11 months old now, why am I still getting Stage 2 baby foods?”*

Closing**1 minute**

Thanks for participating today. We heard some great discussion and ideas that will help us to better serve our WIC clients.

Please fill out a Feed Back Form – your input is greatly appreciated.

Collect Feedback Forms.

Make any notes you have as a leader.

Review participants’ Feedback Forms.

Document this training.

A lesson on commercial baby food and providing information to WIC caregivers about infant feeding.

Learning Objectives

By the end of this session you will have:

- Identified developmental cues to indicate readiness for introduction to solids.
- Compared commercial baby food “stages.”
- Compared single item baby foods to infant “dinners.”
- Brainstormed ways to foster acceptance of commercial baby food meat by caregivers and babies.
- Identified food safety issues in preparation, feeding and storage of baby foods.
- Practiced using Ask, Provide, Ask when working with WIC clients about infant baby foods.

Part 1

Developmental cues

Caregivers start feeding their infants solids for many different reasons. Pair up and share reasons you have heard about why caregivers start solids. We will hear some of your thoughts.

Who would like to share?

Let’s think about the developmental cues that infants who are ready to start solids. Look at the list of developmental cues. Together, let’s decide whether they are a cue that indicates readiness for solids or not.

- Up-and-down munching movement
- Transfers food from front to back of mouth
- Tongue thrust reflex
- Draws in upper or lower lip as spoon is removed
- Sits with support
- Needs head support
- Strong gag reflex
- Keeps tongue flat and low for the spoon
- Holds head steady

How can we discuss with caregivers these readiness-for-solids indicators?

Part 2

Comparing commercial baby foods

Working in pairs, examine the samples of baby foods fruit and vegetables that I have set out. Compare the texture and ingredients. Compile a list of the similarities and differences that you notice between the samples. Decide what “stage” each sample is. We will share your observations.

What observations would you share with a caregiver who is concerned about starting a baby on Stage 2 versus Stage 1 foods?

Compare the mixture of baby food meat and baby food vegetables to a commercial baby food “dinner.” Take three minutes to discuss what similarities and what differences you notice and answer the following questions. We will share your responses to the questions.

- What might influence a caregiver to choose a commercial baby food “dinner” instead of combining a single vegetable and a single meat?
- What information would be helpful for a caregiver to know, to make an informed decision when choosing baby foods?
- What observations would you share with a caregiver who is concerned about using Stage 2 foods for their older infant?
- What suggestions would you share about ways to use Stage 2 foods with an older infant?

Part 3

Commercial baby food meats

Who will read the following information about baby food meats?

The Institute of Medicine identifies iron and zinc as nutrients of importance for all healthy, full-term infants. Formula fed infants receive these nutrients through infant formula.

At six months of age, the fully breastfeeding infant will receive baby food meats to provide a source of iron and zinc. Baby food meats are very easy for the baby to digest. This makes baby food meat an excellent first food for fully breastfed infants. Fully breastfed babies receive thirty-one, 2.5 oz jars of baby food meats.

Infant cereal is a good first food for all infants because it has a low risk of causing allergic reactions. It provides some iron but is not as well absorbed as the iron in meat and contains very small amounts of zinc.

In groups of two or three, brainstorm ways caregivers might use baby food meats when feeding their breastfed baby. We will share your ideas.

Part 4

Food safety in the preparation, feeding and storage of baby foods

Read the following information about the preparation, feeding and storage of baby foods adapted from the USDA Infant Nutrition and Feeding: A guide for use in WIC and CSF programs. Underline any information that is new to you.

Preparation:

- ✓ Wash hands before preparing or serving infant food.
- ✓ Wash baby's hands before serving.
- ✓ Position the infant, so they sitting up and secured in a high chair.
- ✓ Do not microwave containers of infant food. The food may be heated unevenly and some parts of the food may burn the infant's mouth.

Feeding:

- ✓ Serve food from a bowl.
- ✓ Do not feed infant food directly from jars or containers. Enzymes from the baby's mouth can cause germs to grow in the food remaining in the jar.
- ✓ Feed the infant using a small spoon.
- ✓ Do not feed solids by bottle or infant feeder.
- ✓ Introduce "single-ingredient" foods initially.
- ✓ Introduce new foods one at a time. Wait several days between the introduction of each new food. Observe the infant closely for adverse reactions.

Storage:

- ✓ Discard leftover food. Always discard any leftover food that has been contaminated with the feeding spoon.
- ✓ Cap the jar tightly and refrigerate any opened jars of unused food. Use foods within 48 hours, except baby food meats, which should be used within 24 hours.

Who would like to share what they underlined?

Who would like to share any baby food preparation or storage mistakes that you have heard?

Part 5

Using Ask, Provide, Ask

Divide up into pairs. Using Ask, Provide, Ask take seven minutes to play out the following scenarios. We will share your thoughts and questions at the end of the time.

- Scenario 1: Mom and her 6 month old fully breastfeeding son: Wrinkling her nose Mom says “Baby food meat, what do I do with that?!”
- Scenario 2: Mom and her 10 month old twins: “More baby food? I still have lots of jars in my cupboard from last month!”
- Scenario 3: Mom and 11 month old daughter: “She’s 11 months old now, why am I still getting Stage 2 baby foods?”

Closing

Thank you for participating today.

Please fill out a Feedback Form – your input is greatly appreciated.

To learn more about infant feeding, please visit:

The USDA Infant Nutrition and Feeding Guide can be found at

<http://www.nal.usda.gov/wicworks/index.html> “Topics,” “Infant Feeding and Nutrition.”

