Supporting Healthy Eating at Home: A Training Module for Home Visitors

Narrator: Welcome to the National Center on Early Childhood Health and Wellness Training Module for Home Visitors. This module is aimed specifically at supporting the home visitor to engage families in a discussion about healthy habits and routines at home. Home-based services create the opportunity to support families often and on an individual level. It primes the home visitor to build a lasting and trusting relationship with family optimal for creating family-driven solutions to feeding challenges. The home visitor may be our best asset to understanding barriers and opportunities to building healthier feeding practices with families of young children. This is the third module in our three-part series.

We encourage you to review all three modules for a complete picture of the role of mealtime in early learning and how home visitor can support families. Caregivers are responsible for offering healthy meals and snacks to children. Children are responsible for deciding which and how much of the healthy foods offered they would like to eat. This is referred to as parent provides, child decides. Mealtime is an important opportunity to support child development and to build healthy habits together as a family. As we discussed in module two, eating and mealtimes are more than just food or nourishing our bodies. While important, food means much more to us than that. It is how we celebrate joy or even offer comfort to friends and loved ones in times of need.

Think back on a time when you celebrated a life event or family milestone. What food was served? How did you feel? What are your favorite memories?

So much about who we are, where we come from, and what we share with our children is centered around food. It is helpful to remember that food means much more to us than nutrition when talking with families about healthy habits, especially with their young children. Science shows us that by age two, children have assumed the eating habits of their family. Additionally, we are seeing vegetable consumption plummet to be replaced with starchy vegetables, such as potatoes, namely french fries, as early as 9 months of age. This means our EHS services and particularly home-based and family engagement services are vital to help parents build healthy habits for their families. It is truly never too early to start. In general, we know that children are not eating enough fruits and vegetables. The ones they are eating tend to be starchy vegetables, such as potatoes in the form of french fries. We know children are consuming too many sugary drinks with almost 30 percent of 12 to 24-month-olds reported consuming a sugary drink every day. We also know our young children are spending too much time in front of a screen and not getting enough sleep. We also know that screen time can affect the way we eat, what food we want to eat, how we sleep, and even how we learn.

Mealtimes provide opportunities to build healthy habits. In the previous slides, we established our eating habits begin early in life. But during this time, children are also learning about nutrition, meal time habits, and understanding their own food intake, how to know when they are full or hungry. Please refer to module one for a discussion on responsive feeding and fullness cues. Families should use mealtime as an opportunity. They can introduce and encourage their child to try new foods. Research has shown continued exposure to a food will increase the likelihood the child will eventually consume it. Some research has shown when preschool children were given opportunities during meals to observe other children choosing and eating vegetables that the observing child did not like, preferences for and intake of the disliked vegetable increased. This applies to parents, as well. Role modeling new and healthy foods is an important part of building healthy habits. Unfortunately, the reverse is also true. If a child sees adults modeling unhealthy eating habits, they are more likely to adopt these unhealthy habits themselves.

Mealtimes also provide opportunities for nutrition education, such as talking about healthy foods and food groups. Kids at this age love to group or categorize things, so you can teach them the food groups

for MyPlate or ask them to group food according to shape, colors, texture, and more. Mealtime is an opportunity to teach the family about serving sizes.

This can be difficult for families as we are often tempted to consider serving sizes for a child comparable to an adult. This alone could be a drastic improvement in eating habits. For that reason, we will shortly look at the appropriate serving sizes for infants, toddlers, and preschoolers. And mealtimes are an opportunity to offer a variety of healthy foods. Unfortunately, the diets of most young children need improvement. Children's diets typically mirror the deficiencies of their parents' diet -- high in fat, sodium, and sugar, and low in fiber. In a Nutrition Insight report from 2001, only 36 percent of 2- to 3-year-olds were noted as having a good diet. And this percentage decreased as the children got older. Much of the decline in diet quality for children occurred between the 2- to 3-year-old age group and the 4- to 6-year-old group, falling from 36 percent to 17 percent. You can approach healthy meal habits in multiple ways - the goals of the family, exposing their child to common meal habits in school, or as a support for learning and healthy development. Please see module two for more information on using mealtime within the early learning framework and family engagement framework.

Why are family meals important?

They are an opportunity to help build independence. It provides children with opportunities to make decisions and take responsibility. In our first module, we talked about parent provides, child decides, or allowing children to determine what they want to eat and how much, what contributes to preventing children's hunger and increasing their feelings of nutrition security at school. Family meals also provide structure and build expectations of what should occur at meal time. These expectations and structure will prepare the child for the expectations and structure in kindergarten. Family mealtime enhances development of fine and gross motor skills and hand-eye coordination by asking children to pour, pass, serve, and share food. Mealtime can allow children to learn the coordination of physically manipulating utensils. Families can also use clear pitchers and glasses to build logic and math skills. And family mealtime enhances development of language and social skills. You can ask your children to practice table manners, learn appropriate mealtime behavior, such as please, thank you, not eating from serving bowls.

And it also builds self-esteem as children learn new skills. For more information about the learning opportunities, specifically skills within the learning domain, please reference module two. Our previous slide discussed the benefits of family meals to children.

But what are the benefits to families?

Family mealtime promotes a more enjoyable meal atmosphere as caregivers are able to sit and interact with their child. It also provides opportunities to talk with children and reinforce skills such as taking turns. Family mealtime decreases food waste as children learn to speak about the amount of food they want. It may not happen right away, as children are learning serve themselves. Family meals also improve mealtime behavior by providing a consistent structure for children, which allows them to learn appropriate meal behavior. You can encourage trying new foods, especially if the caregiver models healthy eating habits. Food insecurity during a child's first year threatens brain development.

Children and food-insecure families are likely to have unhealthy diets and inconsistent eating habits, placing them at risk for cognitive impairment, obesity, and other long-term problems. Food insecurity is not the same as hunger. Food-insecure families are often able to avoid hunger by choosing cheaper, more filling types of food over more costly, nutritious foods. Food insecurity has been linked to nutrient deficiencies that lead to learning and development problems, especially among infants and toddlers. Long-term effects include low achievement in school, emotional problems, and poor health. For young children, the result is often a diet that provides inadequate nutrients for normal growth and development.

A family is considered food insecure if they frequently are unable to afford balanced meals, reduce the size of meals because of lack of money, and reduce the quality and variety of their normal diet due to lack of money. A recent study found that compared to their peers in food-secure families, food-insecure children under age 3 are 90 percent more likely to have fair or poor health rather than good or excellent health, 31 percent more likely to spend time in the hospital, and 76 percent more likely to have problems in cognitive, language, and behavioral development. Food insecurity is not restricted to families in poverty.

Nationally, about 40 percent of poor families are food insecure, but many poor families avoid food insecurity through the assistance of safety net programs, charitable organizations, and other resources not included in the federal poverty measure. At the same time, many food-insecure families have incomes well above the poverty line. Low income families, families with incomes above poverty but below 200 percent of the poverty line, face many of the same difficulties that poor families face, including food security. A substantial portion -- about 20 percent to 30 percent -- of low income families are food insecure. Moreover, their higher incomes may make them ineligible for many forms of assistance that are available to families living in poverty.

Here are some assessment questions to consider as a home visitor. How often do you not have enough money to afford the kind of food you and your family should have? In the past six months, did you go without food because you did not have the money to pay for it? As a home visitor, make sure families are connected with support, as food pantries, SNAP, WIC, and more. A home visitor has the unique opportunity to work closely with families to support healthy eating habits, mealtime routines, and role modeling.

If you are looking for additional support around healthy, active living, the behaviors we want families to adopt, and more strategies that may help your families, you may find the Growing Healthy suite of tools helpful. You can find these on ECLKC within the National Center on Early Childhood Health and Wellness, Healthy Active Living resources.