Weaning ways: How to give families the best possible advice and support around complementary feeding

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Promoting excellence in Early Years Nutrition at local level

- Since 2009 our approach has been to develop a Children’s workforce who have the knowledge, confidence and skills to support families around healthy nutrition.

- As new evidence and insights emerge, it is essential that practitioners are kept up to date and provided with guidance to help them translate evidence into practice.

- This talk will focus on how the Nutrition team have supported Health Visiting to promote Healthy Nutrition.
The role of the Health Visitor in healthy nutrition

• Health visitors deliver the Healthy Child Programme.

• They need to be experts in evidence based nutrition as parents are exposed to so many conflicting nutrition messages.

• Working with health visitors, using a capacity building approach, is a cost effective way to support obesity prevention.
Background information

- Nottingham ranks 8th in the index of multiple deprivation*
- 42% of children are from BME groups
- 39% of children are classed as living in poverty
- Fewer than 50% of mothers are breastfeeding at 6 weeks
- Childhood obesity levels are above the national average

* IMD District results average score measure. Nottingham Insight 2015
A focus on complementary feeding (weaning)

- Weaning is an ideal time to influence food preferences and promote healthier eating habits for life.
- Health visitors are an influential source of advice for first-time mothers (Moore et al. 2012).
- Local concerns were identified around infants and toddlers eating high sugar / salt / fat foods, having low vegetable intakes, excessive milk intakes after 1 year, poor feeding routines, iron deficiency.
Complementary feeding – what do we want to achieve?

• To increase the number of babies being given a varied and nutritious diet during weaning (with the emphasis on home-made family foods)

• To improve knowledge, confidence and skills around choosing a healthy family diet

• To promote vegetables and fruits as ideal weaning foods (with age appropriate textures)

• To increase parents’ awareness of responsive feeding
How did we approach this?

- Identifying local good practice and developing this further to produce a city wide approach to weaning education for parents.
- Work with partners (health visiting, Children’s Centres, food workers) around development of resources.
- Involvement of parents.
- Staff training.
- Provision of practical food/cooking skills sessions.
- Evaluate, revise, review, update.
What do parents want?

In 2015, 15 local mums took part in focus groups to discuss weaning. Themes were identified around:

- Lack of confidence
- Individuality of babies
- Use of multiple information sources

Parents wanted more of the following:

- Suggestions for new foods to try
- Recipes
- Practical support around how to prepare and cook new foods
- Opportunities for discussion at different ages and stages
Parents views on existing weaning groups

• The non-judgmental approach of service providers was highly valued.

• Training for health visiting staff on guidelines was felt to be essential to ensure consistency.

• Despite the acceptance of the service, parents felt the need for additional support during the weaning process.

• The social benefits of group sessions were seen as important by parents.
Recent evidence around weaning

- Early repeated exposure to vegetables during complementary feeding (Fildes et al, 2015, Maier-Nöth et al, 2016)
- Baby led weaning research (Brown et al 2013, Morison et al, 2016)
- ‘Communicating hunger and satiation in the first 2 years of life’ (McNally et al, 2016)
- Interventions that reduce the risk of obesity in early childhood (Redsell et al 2016)
- **Healthy Weight Healthy Nutrition** – high impact area for health visiting

*CityCare*

*Building Healthier Communities*
How did we build this into group sessions?

• **First Foods Groups** - for new parents with babies 12-16 weeks old, delivered by trained workers, in baby friendly venues.

• **Content** – this was updated to focus on facilitated discussion tailored to the needs of the group. It includes a demonstration of how to manage choking and baby food tasting (in some areas).

• **Supporting resources** – First Foods booklet, facilitator guides for staff, signposting into practical food based sessions.
First Foods groups evaluate well:

- Really great session, very interactive and relaxed. I felt able to ask questions.
- I enjoyed learning about the variety of foods that baby can try.
- It was very important for me to learn about feeding baby because I am a new mum so I am very happy!
Practical support is important too....

- We can’t assume that everyone knows how to prepare vegetables
- Cost is a key factor for many families
- Many parents don’t eat a variety of vegetables or fruit
- It’s confusing when there is so much marketing of baby foods
How have we supported health visiting?

Provision of a Nutrition Training Programme:

- AFN accredited Eatwell training
- Weaning /toddler nutrition training
- Delivery of First Foods Groups training (including group facilitation skills)

**Nutrition Champions** in each team who are responsible for disseminating new information and supporting others around nutrition.

**Resource provision** e.g. our weaning package includes best practice guidance around First Foods groups, Facilitator notes, Competencies and Quality assurance.
What do our health visitors say?

‘Staff have reported that this shared specialist knowledge and the comprehensive resources provided by the nutrition team have enabled them to interpret the evidence and confidently convey it to families’. Selina Thomas, Children’s Services Manager.

‘The weaning training was excellent and the resources provided for the First Foods groups help to get the discussion going. Parents really value the chance to discuss weaning with other parents as well as their health visitor’. Alison, Children’s Nurse.
Our vision for healthy nutrition through the Healthy Child Programme

- Maximising all opportunities for health visiting to improve healthy lifestyles in pregnancy and early years e.g. one to one contacts, baby clinics, group sessions, use of social media

- A ‘flow’ of parents from health team led antenatal groups into baby groups and then toddler groups

- Parents taking the lead on keeping social groups going e.g. Ready Steady Mums, and being involved in service design
For the future: Responsive Feeding

- Parents are not always aware of baby ‘hunger and fullness cues’
- Brown and Lee (2013) found that ‘baby led weaning’ babies showed greater satiety response but also that ‘low levels of maternal anxiety’ around feeding are important
- There is currently insufficient evidence to say that baby led weaning is the best approach.
For the future : working with parents to make more of a difference

- Nottingham is a Better Start area – Small Steps, Big Changes is a 10 year funded local programme. Nutrition is one of three themes.
- Parents are at the heart of the programme

It’s not just about weaning – the first 1000 days from conception to second birthday are key for establishing healthy eating habits.
To summarise...

- The current financial climate is challenging.
- Capacity building is necessary.
- Registered Dietitians and Nutritionists are the experts in interpreting evidence into practice and have a key role to play in public health.
References


Acknowledgements
• Food photo resources: First Steps Nutrition Trust www.firststepsnutrition.org

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