

Hi, Stacy from Semi-Crunchy Mama here. In this section we'll talk about:

- signs that your baby is ready to start solids
- what people mean when they say "Food before one is just for fun"
- What's normal for how fast babies start eating versus signs you might actually worry about
- and some myths about starting solids

When to start:

You've probably heard from friends, family, or a pediatrician to start offering solids between 4-6 months. The American Association of Pediatrics and the World Health Organization both recommend exclusively feeding your baby breastmilk and/or formula until 6 months, then introducing complementary foods after that.

A large study in 2013 showed that over 40% of parents across demographics started feeding their babies solid foods before they were even 4 months old, some as early as just a few weeks!

Waiting to introduce solids reduces choking risks, ensures baby is physically ready to eat, preserves baby's immunity by maintaining a virgin gut, and helps maintain breastfeeding mothers' milk supply.

That said, babies can't read calendars. Eating food requires several separate physical milestones to be met. The basic process of eating includes picking up food, bringing it to your mouth, chewing it, rolling it into a bolus, and swallowing. If your baby was premature, or if your baby has a tongue tie, it may take him or her a bit longer. With premature babies it's an adjusted age issue, so it's even more important to watch for readiness signs versus dates. Tongue tied babies have restricted oral tissue that makes it harder to move food around effectively and swallow as easily.

Historically, food was more expensive than free breastmilk, so to feed your children early was actually a status symbol that you could afford it. Now it's a little more complicated, so--

Let's talk about the signs of readiness.

These are all in your handout, but here's a bit of background on why they're important.

The first sign most parents see is baby bringing toys to his or her mouth. Baby must be willing and ready to chew. If they can't get it there, they can't eat it! Wait until this involves any piece of grit and fluff on your floor. Yuck.

Another early sign is that baby is eager to participate in meal time. Many parents will take this as the only necessary sign, but I like the saying, "Just because he reaches for my car keys doesn't mean he's ready to drive." Babies are interested in everything we do because it's still new to them and it's how they learn. They also learn the social aspects of mealtime from you, so simply putting baby in a high chair with an empty bowl and spoon can make them perfectly happy for weeks! The more they observe what you do (putting food in your mouth, chewing, and swallowing), the faster they'll catch on.

Baby needs to lose the tongue thrust reflex. This reflex was the bane of your existence if you tried to introduce a bottle or pacifier after about 6 weeks, and a smart evolutionary trait if you're a baby. Babies aren't ready to eat right away, so they automatically push anything that isn't a boob or bottle out of their mouth to prevent choking. This is also what causes them to push purees out of their mouth - because they're not ready to eat. Spoon goes in, mush comes out, scrape it up, repeat, right? By waiting until that reflex is gone, baby can place food in his or her own mouth since they are developmentally ready to chew and swallow.

Babies who start with purees have fewer choking incidents at 6 months since there isn't much to choke on, but they have more at 8 months since they have to learn to navigate lumpy food. Babies who began by self-feeding have fewer incidents by 8 months, and the majority were due to parents giving their babies choking hazards.

Baby should be picking things up and starting to develop a pincer grasp where the thumb and forefinger can be used to pick up smaller items. As you begin feeding

your baby, you'll start by offering things that are easier to pick up, then move to foods requiring more fine motor skills as they emerge.

The most important sign for me is that your baby can sit up unassisted. This is the same age you can start safely wearing your baby in a back carry for baby wearers out there. Sitting unassisted means your baby can pull up into a seated position, not just tripod sit or sit when you prop him or her up. It's hard to be patient when they're so close, but that trunk control is an important sign. The owner of Wonderful and Wild, the store where I teach my classes here in San Diego, has 3 kids. Her oldest started solids at 5.5 months, her youngest at 11 months, simply based on the age they could sit up.

Is waiting longer better?

Food Before One is Just for fun!

You've probably heard the phrase "food before one is just for fun!" This does NOT mean that your baby should only be on breastmilk or formula for a whole year. This simply means that breastmilk or formula is your baby's main source of nutrition for at least the first year of life. Introducing solids is important as it gives your baby the sensory experience of touching, tasting, and playing with food, helps develop hand-eye coordination and other motor skills, and allows for early intervention in case of any challenges. It DOES mean that it's not important how MUCH your baby eats or how fast he or she catches on. We'll talk about that in another module.

Your baby has been exposed to a variety of flavors as early as your pregnancy when your amniotic fluid changed based on what you ate. If you breastfed or are breastfeeding, your breastmilk also changes flavors from session to session and day to day. If you pump you can even see color differences. Babies will be more accepting of flavors they've been exposed to before, so foods you eat more often, they may like more. It can take around 20 exposures to a new food before a baby or toddler will eat it, so early exposure (called the flavor window) is really helpful. BLW is great for this since you're not limited to batches of homemade food, or store bought flavor combinations.

When can you worry?

What if your baby isn't eating much? Again, food before 1 is just for fun, so your baby playing with the food, having that sensory experience, being exposed to the texture and flavor, is all worthwhile even if he or she eats one tiny bite and throws it on the floor. It's annoying, but it's not a waste of your time. My oldest didn't ingest much at all until around 9 months, and didn't eat a significant amount until 15 months, and he's always been huge. My youngest ate like a third of a sweet potato on day one. Your job is to decide what to offer and when, your child's job is to decide if and how much to eat.

I joke that my parenting settings are "meh" and abject panic, but what are some actual red flags where you SHOULD worry? If your baby was full term and has a tongue thrust reflex after 6 months, you may want to mention that to your pediatrician as it could mean feeding therapy could help your baby. Refusal to put food or toys in their mouth, or refusal to even touch food could signal a problem. Gagging or vomiting when seeing or touching food, especially if it's almost always a specific flavor, texture, or color. And anxious behavior such as pushing or arching away from food. Disinterest is NOT really a problem, refusal is different. I always say if someone offers me a cookie and I say, "No thank you," that's disinterest. If I freak out and shove it away, that's refusal. Of course babies will often refuse food if they're full, tired of sitting, or sleepy, but without those circumstances, there may be a sensory issue at play.

Feeding myths

We talked about the signs I watch for to judge baby's readiness for food. Here are some that do not matter one bit, but I often hear from parents (or their pediatrician).

Baby "seems hungry"

If you actually have a baby who has ever had a growth spurt and have marveled that a tiny creature who JUST ATE 10 minutes ago is hungry AGAIN, you know that

babies "seem hungry" for a lot of reasons. This particular reasoning tends to undermine the confidence of breastfeeding mothers who are frequently told she's not enough for her child. It could be hot, your baby could be teething or sick, or there could be a full moon. That alone doesn't mean your baby needs solids.

Baby does or doesn't have teeth

Has your baby ever bitten you with just his or her gums? Is there any doubt in your mind that your child could destroy some soft foods with them? Right. Some babies are BORN with teeth; others don't get them until after a year. Averages are only useful with a small data spread, and this isn't one of those times.

Baby is a certain weight/large/small

"If your baby is 20 pounds/big/small, you need to offer solids." Both of my kids were 20 pounds before 3 months. If your baby is big, he or she didn't get that way eating solids, they got that way by drinking milk. If your baby is small, a spoonful of mashed carrots isn't going to pack on the pounds either.

Baby has low iron

Formula is fortified with synthetic iron, so formula-fed babies are considered fine, but breastfed babies are said to be at risk for low iron. Babies are born with adequate iron for the first 6 months, but it starts to deplete after that. Maternal iron stores don't make a difference, the biggest factor is your baby's birth and if he or she had delayed cord clamping. Your pediatrician will test your baby's iron levels at their 9 or 12 month visit. I don't recommend supplementing without seeing test results first, but I do recommend offering a variety of iron-rich foods just in case. There is a list in your handout and I'll talk about them later.

Baby isn't sleeping well at night

This is the worst one because it implies that you have control over your child sleeping, and thus you are to blame if your child doesn't sleep. Many people say that breastmilk is digested quickly, so to add rice cereal to baby's bottle will help "fill them up and help them sleep."

Or---it's a choking hazard to put rice cereal in a bottle, it's a binding food, and it can cause digestive issues that keep babies --and parents-- awake at night. There is no correlation between eating solids and better sleep. None.

So if any of those apply to you, don't worry.

Next up, how to prepare - physically, emotionally, and materially.

*If you liked that class I would be honored if you recommend it to friends and family.
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