Slide Deck Overview

This presentation on the Dietary Guidelines for Americans, 2020-2025 is intended for use and adaptation by nutrition and health professionals to communicate about the Dietary Guidelines. This life stage presentation contains slides specific to the life stage downloaded and is designed to be used as a stand-alone presentation or can be combined with any slides from the full presentation. Professionals are encouraged to download and edit the presentation(s) to best suit their intended use and audience. Learn more about using the content within these slides by reviewing the permission to use statement below.

Permission to Use

The content within these presentations and any Graphs, Figures, and Tables within the Dietary Guidelines for Americans, 2020-2025 are in the public domain and may be used without permission. Most Photos and Illustrations included in these presentations are NOT in the public domain, thus permission cannot be granted for their use or reproduction for other purposes. However, Photos used in Figures 1-8 and 1-9 are in the public domain and may be used without permission. We ask, however, that if you reproduce this content, either electronically or in print, that you use content as originally designed; that it not be altered or modified; and that it be sourced to the Dietary Guidelines for Americans, 2020-2025. If content is altered or modified, do not source the Dietary Guidelines. Please contact us at dietaryguidelines@usda.gov for further questions.

Suggested citation


USDA is an equal opportunity provider, employer, and lender.

November 2021
Infants & Toddlers
Key Recommendations

• For about the first 6 months of life, exclusively feed infants human milk. Continue to feed infants human milk through at least the first year of life, and longer if desired. Feed infants iron-fortified infant formula during the first year of life when human milk is unavailable.

• Provide infants with supplemental vitamin D beginning soon after birth.

• At about 6 months, introduce infants to nutrient-dense complementary foods.

• Introduce infants to potentially allergenic foods along with other complementary foods.
Key Recommendations (cont’d)

- Encourage infants and toddlers to consume a variety of foods from all food groups. Include foods rich in iron and zinc, particularly for infants fed human milk.
- Avoid foods and beverages with added sugars.
- Limit foods and beverages higher in sodium.
- As infants wean from human milk or infant formula, transition to a healthy dietary pattern.
Putting the Key Recommendations Into Action

Birth Through 23 Months
Feed Infants Human Milk for the First 6 Months, If Possible

• Human milk can support an infant’s nutrient needs for about the first 6 months of life, with the exception of vitamin D and possibly iron.
  » Human milk provides nutrients, bioactive substances, and immunologic properties that support infant health, growth, and development.

• If human milk is unavailable, feed infants iron-fortified commercial infant formula regulated by the FDA. Homemade infant formulas and those that are improperly and illegally imported without mandated FDA review should not be used.

• Take precautions to ensure that expressed human milk and infant formula are handled and stored safely.

• Donor human milk should only be obtained from a source that has screened its donors and taken appropriate safety precautions.
Supplemental Vitamin D

- All infants who are fed human milk exclusively or who receive both human milk and infant formula (mixed fed) will need a vitamin D supplement of 400 IU per day beginning soon after birth.

- Infant formula is fortified with vitamin D, thus, when an infant is receiving full feeds of infant formula, vitamin D supplementation is not needed.

- Young children may need to continue taking a vitamin D supplement after age 12 months. Consult with a healthcare professional to determine how long to supplement.
Introduce Nutrient-Dense Complementary Foods at About 6 Months

• Complementary foods, as a supplement to human milk or infant formula feedings, are necessary to ensure adequate nutrition and exposure to flavors, textures, and different types of foods.

• Some infants may show developmental signs of readiness before age 6 months, but introducing complementary foods before age 4 months – or waiting until after 6 months - is not recommended.

• For infants fed human milk, it is particularly important to include complementary foods that are rich in iron and zinc.

• Provide age and developmentally appropriate foods to help prevent choking.
Readiness for Beginning Solid Foods

• Signs of readiness:
  » Able to control head and neck
  » Sitting up alone or w/ support
  » Bringing objects to the mouth
  » Trying to grasp small objects
  » Swallowing food rather than pushing it back out

• Developmentally appropriate foods prevent choking risk:
  » Offer foods in the appropriate size, consistency, and shape
  » Feed in a high chair or other safe, supervised place
  » Ensure adult supervision
  » Do not put infant cereal of solid foods in a bottle

*More information on foods that can present choking hazards is available from USDA at wicworks.fns.usda.gov/resources/reducing-risk-choking-youngchildren-mealtimes
Introduce Potentially Allergenic Foods When Other Complementary Foods are Introduced

• There is no evidence that delaying introduction of allergenic foods, beyond when other complementary foods are introduced, helps to prevent food allergy.

• Foods like peanuts, egg, cow milk products, tree nuts, wheat, crustacean shellfish, fish, and soy should be introduced when other complementary foods are introduced.

  » Introducing peanut-containing foods in the first year reduces the risk that an infant will develop a food allergy to peanuts.

  » Cow milk, as a beverage, should be introduced at age 12 months or later.
Infants at High Risk for Peanut Allergy

- If an infant has severe eczema, egg allergy, or both, age-appropriate, peanut-containing foods should be introduced into the diet as early as age 4 to 6 months – this helps reduce the risk of developing a peanut allergy.
- Caregivers of infants at high risk should check with the infant’s healthcare provider before feeding the infant peanut-containing foods.
Encourage Consumption of a Variety of Complementary Foods and Beverages

• Complementary foods and beverages should be rich in nutrients, meet calorie and nutrient requirements, and stay within limits of dietary components such as added sugars and sodium.

• At about 6 months old introduce:
  » Iron-rich foods (meats and seafood rich in heme iron, iron-fortified cereals)
  » Zinc-rich foods (meats, beans, fortified cereals)
  » A variety of foods from all food groups, knowing it may take up to 8 to 10 exposures for an infant to accept a new food
A nutrient-dense, diverse diet from age 6 through 23 months includes a variety of food sources from each food group.

- Protein foods, including meats, poultry, eggs, seafood, nuts, seeds, and soy products, are important sources of iron, zinc, protein, choline, and long chain polyunsaturated fatty acids.
- Offer vegetables and fruits, especially those rich in potassium, vitamin A, and vitamin C. Beans, peas, and lentils provide a good source of protein and dietary fiber.
- Introduce yogurt and cheese, including soy-based yogurt, before 12 months; do not offer cow milk, as a beverage, or fortified soy beverage, before age 12 months.
- Grains, including iron-fortified infant cereal, play an important role in meeting nutrient needs during this life stage.
Dietary Components to Limit

• Avoid added sugars
  » Young children have virtually no room in their diet for added sugars.

• Avoid foods higher in sodium
  » Taste preferences for salty food may be established early in life.

• Avoid honey and unpasteurized foods and beverages
  » Raw and cooked honey can contain the *Clostridium botulinum* organism and cause serious illness or death among infants.
Establish a Healthy Beverage Pattern

- Small amounts of plain, fluoridated water can be given with the introduction of complementary foods, not before.

- Do not provide cow milk or fortified soy beverages before 12 months to replace human milk or infant formula. Plain cow milk (whole milk) as a beverage can be offered beginning around 12 months to help meet calcium, potassium, vitamin D, and protein needs.

- Plant-based milk alternatives (e.g., rice, oat, coconut, almond) should not be used in the first year of life.

- 100% fruit or vegetable juices should not be given to infants. In the second year of life, fruit juice is not necessary; if provided, limit intake to 4 ounces per day.
Establish a Healthy Beverage Pattern (cont’d)

• Sugar-sweetened beverages should not be given to children younger than age 2.

• Toddler milk and toddler drinks (i.e., beverages supplemented with nutrients) are not needed. These beverages often contain added sugars.

• Avoid beverages with caffeine. No safe limits of caffeine have been established for infants and toddlers.
Healthy Dietary Pattern During the Toddler’s Second Year of Life
Healthy U.S. Style Dietary Pattern: Toddlers Ages 12 Through 23 Months Who Are No Longer Receiving Human Milk or Infant Formula

<table>
<thead>
<tr>
<th>FOOD GROUP OR SUBGROUP</th>
<th>700</th>
<th>800</th>
<th>900</th>
<th>1000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vegetables (cup eq/day)</td>
<td>1/3</td>
<td>1/4</td>
<td>1</td>
<td>1/2</td>
</tr>
<tr>
<td>Dark-Green Vegetables</td>
<td>1</td>
<td>1/3</td>
<td>1/2</td>
<td>1</td>
</tr>
<tr>
<td>Red and Orange Vegetables</td>
<td>1</td>
<td>1/4</td>
<td>2</td>
<td>1/2</td>
</tr>
<tr>
<td>Beans, Peas, Lentils</td>
<td>3/4</td>
<td>1/3</td>
<td>1/2</td>
<td>1</td>
</tr>
<tr>
<td>Starchy Vegetables</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Other Vegetables</td>
<td>3/4</td>
<td>1</td>
<td>1/2</td>
<td>1/2</td>
</tr>
<tr>
<td>Fruits (cup eq/day)</td>
<td>1/2</td>
<td>1/4</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Grains (ounce eq/day)</td>
<td>1 3/4</td>
<td>2 1/4</td>
<td>2 1/2</td>
<td>3</td>
</tr>
<tr>
<td>Whole Grains (ounce eq/day)</td>
<td>1 1/2</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Refined Grains (ounce eq/day)</td>
<td>1/4</td>
<td>1 1/4</td>
<td>1 1/4</td>
<td>1</td>
</tr>
<tr>
<td>Dairy (cup eq/day)</td>
<td>1 3/4</td>
<td>1 3/4</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Protein Foods (ounce eq/day)</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
</tbody>
</table>

Protein Foods Subgroups in Weekly Amounts

| Meats, Poultry (ounce eq/wk) | 8 3/4 | 7 | 7 | 7 3/4 |
| Eggs (ounce eq/wk)           | 2    | 2 3/4 | 2 1/4 | 2 1/4 |
| Seafood (ounce eq/wk)*       | 2-3  | 2-3 | 2-3 | 2-3  |
| Nuts, Seeds, Soy Products (ounce eq/wk) | 1 | 1 | 1 1/4 | 1 1/4 |
| Oils (grams/day)              | 9    | 9 | 8 | 13   |
• Science shows that early food preferences influence later food choices.
• Make the first choice the healthiest choices that set toddlers on a path of making nutrient-dense choices for years to come.
Current Intakes: 12 Through 23 Months

Average Daily Food Group Intakes Compared to Recommended Intake Ranges

- **Added Sugars**
  - Limit: Avoid
  - Average Intakes: 104 kcals

- **Saturated Fat**
  - Limit: N/A
  - Average Intakes: 167 kcals

- **Sodium**
  - Limit: 1,200 mg
  - Average Intakes: 1,586 mg

*Data Source: Average Intakes Analysis of What We Eat in America, NHANES 2002-2016, day 1 dietary intake data, weighted. Recommended Intake Ranges: Healthy U.S. Style Dietary Patterns.*
Average Intakes of Subgroups Compared to Recommended Intake Ranges: 12 Through 23 Months

Data Source: Average Intakes Analysis of What We Eat in America, NHANES 2007-2016, day 1 dietary intake data, weighted. Recommended Intake Ranges: Healthy U.S.-Style Dietary Patterns.
Supporting Healthy Eating

• Parents, guardians, and caregivers play an important role in nutrition during this life stage because infants and toddlers are fully reliant on them for their needs.

• In addition to “what” to feed children, “how” to feed young children is critical.

Signs a Child is Hungry or Full*

## Resources

### Federal Programs

<table>
<thead>
<tr>
<th>Program</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>WIC</td>
<td>Special Supplemental Nutrition Program for Women, Infants, and Children</td>
</tr>
<tr>
<td>CACFP</td>
<td>Child and Adult Care Food Program</td>
</tr>
<tr>
<td>SNAP</td>
<td>Supplemental Nutrition Assistance Program</td>
</tr>
<tr>
<td></td>
<td>Head Start</td>
</tr>
</tbody>
</table>