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| **Feeding Your 8- to 12-Month-Old**  By about 8 months old, most babies are pros at handling the iron-fortified infant cereals and the pureed foods that have been introduced as part of their diet along with breast milk or formula.  Over the next few months, they start to explore table foods.  **Changing Eating Habits**  As you expand your baby's palate, continue to give new foods a trial run (a few days to a week) to look for any allergic reactions. Do not give honey until after a baby's first birthday. Honey may contain certain spores that, while harmless to adults, can cause botulism in babies. And do not give regular cow's milk until your baby is older than 12 months because it does not have the nutrition that infants need.  During this transition, you may want to offer your child new, coarser textures that require a little more chewing.  You can buy baby foods that offer new tastes and textures or you can fork-mash, cut up, or grind whatever foods the rest of the family eats. You should cook it a little longer, until it's very soft, and cut it into small pieces that your baby can handle to decrease the risk of choking.  By the time babies are around 9 months old, they usually have the dexterity and coordination to take food between forefinger and thumb so that they can try feeding themselves with their fingers. (You may want to provide a safe baby spoon as well, though it may be some time before your baby gets the hang of it.)  If you haven't already, have your baby join the rest of the family at meals. At this age, they enjoy being at the table.  By the first birthday, babies usually are ready to go from formula to cow's milk. If you're breastfeeding, you can continue or you may decide to stop now.  You've probably already introduced your baby to a sippy cup, so let him or her keep working on it. (Juice should always be given in a cup, not a bottle.) After 12 months, you can serve whole milk in a cup, which will help with the transition from the bottle.  **Feeding Safety**  Never leave your baby unattended while eating in case he or she chokes. Avoid foods that could present a choking hazard such as whole grapes, raw vegetables, hard fruits, raisins, white bread, pieces of hard cheese, hot dogs, popcorn, and hard candies.  If you're unsure about whether a finger food is safe, ask yourself:   * Does it melt in the mouth? Some dry cereals will melt in the mouth, and so will light and flaky crackers. * Is it cooked enough so that it mashes easily? Well-cooked vegetables and fruits will mash easily. So will canned fruits and vegetables. (Make sure to choose canned foods that don't have added sugar or salt.) * Is it naturally soft? Cottage cheese, shredded cheese, and small pieces of tofu are soft. * Can it be gummed? Pieces of ripe banana and well-cooked pasta can be gummed.   **Making Meals Work**  Keep your baby's temperament in mind when introducing new foods. If your baby balks at new textures, serve them in small portions and mix them with food you know your child likes.  A child who likes a lot of stimulation may enjoy it when you "play airplane" with the spoon to get the food into his or her mouth. A more sensitive tot, however, may need the focus kept on eating with minimum distractions.  **How Much Should My Baby Eat?**  Infant formula and breast milk continue to provide important nutrients for growing infants, but babies will start to drink less as they approach the first birthday. They're getting more nutrients now from the variety of foods they've learned to eat and enjoy.  You may be concerned that you're feeding your child too much or not enough. Pay attention to your child's cues of hunger and fullness. A child who is full may suck with less enthusiasm, stop, or turn away from the breast or the bottle. With solid foods, your baby may turn away, refuse to open his or her mouth, or spit the food out.  Let your baby finger feed or hold a spoon while you do the actual feeding. This is good preparation for the toddler years when kids take charge of self-feeding. And if you haven't already, consider establishing more regular mealtimes.  Reviewed by: Mary L. Gavin, MD Date reviewed: September 2011 |  |
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