Paediatric Obesity Management Tool Kit

Dietetics and Food Service Department, Lady Cilento Children’s Hospital
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Acknowledgments

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Paediatric Obesity Management Toolkit

Translating clinical guidelines and education resources into practise to promote an effective, family-centred approach to childhood obesity management.

This toolkit provides a systematic collation of clinical guidelines and education resources, providing clinicians and Dietitians with efficient access to standardised protocols and resources for use within consultations.

Paediatric obesity management is a priority concern amongst health care providers as 1 in 14 children are estimated to be obese as of 2016, compared with about 1 in 50 some 30 years ago. Extrapolating from current rates, it is estimated that by 2026 there will be 250,000 overweight and obese children. Additionally, 1 in 4 children are reported to be inactive on more days of the week than they are active, increasing the risks of chronic disease development, unhealthy weight gain and continuing sedentary behaviours into adulthood (Report of the chief health officer Queensland, 2016).

This toolkit aims to support clinicians to:

- Accurately Identify children at risk of childhood obesity and additional adverse health problems
- Determine an appropriate, individualised and patient/family-centred nutritional care plan to promote healthy behaviours
- Discuss strategies and goals effectively with patients and families to support sustainable behavioural changes for healthy eating, physical activity and sleeping habits.
# TABLE OF CONTENTS

Acknowledgements................................................................. 5  
Background .............................................................................. 5  
Aims ....................................................................................... 5  
SECTION 1 – Clinical Recommendations and Guidelines............. 5  
Clinician Resource Package - Table of Contents........................ 5  
Additional online resources available for clinicians .................... 5  
SECTION 2 - Patient Education Resource Package ..................... 5  
Patient Education Resource Package - Table of Contents .......... 5  
Additional online resources available for patients ...................... 5
Acknowledgements

Background

Aims

SECTION 1 – Clinical Recommendations and Guidelines

Clinician Resource Package - Table of Contents

Additional online resources available for clinicians

SECTION 2 - Patient Education Resource Package

Patient Education Resource Package - Table of Contents

Additional online resources available for patients
SECTION 1
Clinical Recommendations & Guidelines
Discussing weight with children, adolescents and parents

Weight may be a sensitive topic for children and adolescents, particularly if they have experienced weight-related teasing or bullying. Parents may not have an accurate understanding of what is considered overweight or obese, or may be reluctant to raise the topic with healthcare professionals. Communication should focus on the benefits of healthy lifestyle behaviours for the whole family rather than on the weight of the child or adolescent.

**TIPS FOR DISCUSSING WEIGHT ASSESSMENT WITH PARENTS AND CHILDREN**

- Ask permission from the parent or carer to discuss and assess the child’s weight
- Explain that assessing weight is standard practice in primary health care, and involves measuring weight, height and waist circumference
- Explain how overweight and obesity are classified, and that if these are identified, changes to family health behaviours are the main goal
- Avoid language that is discriminatory or stigmatising
- Consider involvement of other professionals (e.g. Aboriginal health worker, multicultural health worker, interpreter) to facilitate communication

**TIPS FOR FOSTERING ENGAGEMENT WITH ADOLESCENTS**

- Speak to the adolescent with and without his or her parent or carer
- Treat him or her as responsible and capable of contributing to decision-making
- Use language that is clear and easily understood, and avoid jargon
- Check regularly that what you are saying has been understood
- Avoid being judgemental by showing empathy and tolerance while still expressing concern for the young person’s wellbeing
- Engagement might wax and wane, and requires attention throughout care

Nutritional Assessment

Anthropometric Measurements
- **Length**
- **Weight**
- **Weight change**
- **Growth Pattern Indices and percentiles**

Assess height, weight, calculate BMI and plot the measurements on the gender appropriate height/length-for-age, weight-for-age and BMI-for-age growth charts. Identify major shifts in growth patterns by examining previous centile ranks, when an increase in weight for age and BMI-for-age has occurred, and potential causative factors during that time.

**Accurately measuring growth**
1. Utilise accurate and consistent equipment (stadiometer, lengthboard)
2. Use appropriate measures according to age
   a. Supine length <2 years
   b. Lying or standing measure 24-36 months
   c. Standing height >36 months
3. Child is bare up until 1 year, then measurements taken with minimal clothing
4. Take an average of three measurements
   a. Serial measurements are required to establish a growth pattern over time

**Anthropometric Comparative Standards**

**Birth to 24 months**

*Length-for-age*
Girls, 0-2 years: [http://www.who.int/childgrowth/standards/cht_lfa_girls_p_0_2.pdf](http://www.who.int/childgrowth/standards/cht_lfa_girls_p_0_2.pdf)
Boys, 0-2 years: [http://www.who.int/childgrowth/standards/cht_lfa_boys_p_0_2.pdf](http://www.who.int/childgrowth/standards/cht_lfa_boys_p_0_2.pdf)

*Weight-for-age*
Girls, 0-2 years: [http://www.who.int/childgrowth/standards/cht_wfa_girls_p_0_2.pdf](http://www.who.int/childgrowth/standards/cht_wfa_girls_p_0_2.pdf)
Boys, 0-2 years: [http://www.who.int/childgrowth/standards/cht_wfa_boys_p_0_2.pdf](http://www.who.int/childgrowth/standards/cht_wfa_boys_p_0_2.pdf)

*Weight-for-length*
Girls, 0-2 years: [http://www.who.int/childgrowth/standards/cht_wfl_girls_p_0_2.pdf?ua=1](http://www.who.int/childgrowth/standards/cht_wfl_girls_p_0_2.pdf?ua=1)
Boys, 0-2 years: [http://www.who.int/childgrowth/standards/cht_wfl_boys_p_0_2.pdf?ua=1](http://www.who.int/childgrowth/standards/cht_wfl_boys_p_0_2.pdf?ua=1)

*Head Circumference*
Girls, 0-2 years: [http://www.who.int/childgrowth/standards/second_set/cht_hcfa_girls_p_0_2.pdf](http://www.who.int/childgrowth/standards/second_set/cht_hcfa_girls_p_0_2.pdf)
Boys, 0-2 years: [http://www.who.int/childgrowth/standards/second_set/cht_hcfa_boys_p_0_2.pdf](http://www.who.int/childgrowth/standards/second_set/cht_hcfa_boys_p_0_2.pdf)

**BMI (z-scores)**

Girls, 0-2 years: [http://www.who.int/childgrowth/standards/cht_bfa_girls_z_0_2.pdf?ua=1](http://www.who.int/childgrowth/standards/cht_bfa_girls_z_0_2.pdf?ua=1)

Boys, 0-2 years: [http://www.who.int/childgrowth/standards/cht_bfa_boys_z_0_2.pdf?ua=1](http://www.who.int/childgrowth/standards/cht_bfa_boys_z_0_2.pdf?ua=1)

**2 to 19 years of age**

*Height-for-age & weight-for-age*

Girls, 2-19 years: [https://www.cdc.gov/growthcharts/data/set2clinical/cj41c072.pdf](https://www.cdc.gov/growthcharts/data/set2clinical/cj41c072.pdf)

Boys, 2-19 years: [https://www.cdc.gov/growthcharts/data/set2clinical/cj41c074.pdf](https://www.cdc.gov/growthcharts/data/set2clinical/cj41c074.pdf)

**BMI-for-age**

Girls, 2-19 years: [https://www.cdc.gov/growthcharts/data/set2clinical/cj41c074.pdf](https://www.cdc.gov/growthcharts/data/set2clinical/cj41c074.pdf)

Boys, 2-19 years: [https://www.cdc.gov/growthcharts/data/set2clinical/cj41c073.pdf](https://www.cdc.gov/growthcharts/data/set2clinical/cj41c073.pdf)

**Interpreting Percentiles**

1. Calculate BMI

Body Mass Index (BMI) is weight (kg)/ height (m)²

2. Determine BMI percentiles
   a. For girls aged 2 to 20 go to the Girls Body mass index-for-age percentiles chart and plot the BMI value and age of child to determine the percentiles.
   b. For boys aged 2 to 20 go to the Boys Body mass index-for-age percentiles chart and plot the BMI value and age of child to determine the percentiles.

3. Interpretation of weight category by percentiles

Use the following charts to determine the weight category for the child:

<table>
<thead>
<tr>
<th>Percentile</th>
<th>Weight Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than the 5th percentile</td>
<td>Underweight</td>
</tr>
<tr>
<td>5th percentile to less than the 85th percentile</td>
<td>Healthy Weight</td>
</tr>
<tr>
<td>85th percentile to less than the 95th percentile</td>
<td>Overweight</td>
</tr>
<tr>
<td>Equal to or greater than the 95th percentile</td>
<td>Obese</td>
</tr>
</tbody>
</table>


For children <2 years: Overweight and obesity is not well defined within this age group. Clinicians should monitor for rapid growth to assess health risks.

**Food/Nutrition History**

<table>
<thead>
<tr>
<th>Food and Nutrient Intake</th>
<th>Knowledge/Attitudes</th>
<th>Behavioural Information</th>
<th>Physical Activity Habits</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Energy intake</td>
<td>• Food and nutrition knowledge/skill</td>
<td>• Avoidance/disordered eating patterns and emotional</td>
<td>o History</td>
</tr>
<tr>
<td>• Food and beverage intake</td>
<td>• Beliefs and attitudes</td>
<td>eating behaviours</td>
<td>o Consistency</td>
</tr>
<tr>
<td>o Fluid/beverage intake</td>
<td>o Distorted body image</td>
<td>o Restrictive eating</td>
<td>o Frequency</td>
</tr>
<tr>
<td>o Food intake</td>
<td>o Preoccupation with weight</td>
<td>o Fasting</td>
<td>o Duration</td>
</tr>
<tr>
<td>• Amount of food/portions</td>
<td>o Readiness to</td>
<td>o Stress and causes</td>
<td>o Intensity</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Type of physical activity (organised, unstructured play)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Types of food/meals</th>
<th>change nutrition-related behaviours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meal/snack pattern</td>
<td>Self-efficacy</td>
</tr>
<tr>
<td>Inclusion of breakfast, frequency and volume</td>
<td>Food preferences</td>
</tr>
<tr>
<td>Food variety</td>
<td>Emotions (psychological distress, low self-esteem, isolation, teasing, bullying)</td>
</tr>
</tbody>
</table>

- Binging and purging behaviour
- Mealtime behaviour
  - Willingness to try new foods
  - Limited number of accepted foods
  - Skipping meals
  - Using a food substitute, diet pills, smoking
  - Eating times and place of meals

### Dietary Intake assessment should focus on:

- Intakes high in sugar-sweetened beverages
- Intakes low in vegetables and fruit
- Excessive consumption of juice and foods high in energy density
- Frequency of eating outside the home at restaurants or fast food establishments
- Frequency and quality of breakfast consumption
- Meal frequency and snacking patterns (including quality)
- Consumption of excessive portion size for age.

The parental role of where food and beverages are eaten should also include whether children are eating in front of the television, and the frequency of eating together as a family.

A child’s hunger and satiety signals, rate of eating (and how this may influence eating volumes) and non-hunger eating including factors that contribute to it such as emotional triggers, boredom, and visual/habitual triggers, would also be beneficial to assess.

### Food/Nutrition Comparative Standards

Determine energy, macronutrient, micronutrient requirements as per Nutrient Reference Values for Australia and New Zealand.


### Nutrition Focused Physical Findings

- Overall Appearance (overweight/obesity)
- Vital Signs (blood pressure)
- Digestive System (problems chewing or swallowing, digestive or bowel problems)

### Biochemical Data, Medical Tests

- Lipid Profile
- Glucose/Endocrine Profile

Identify obesity-related health risks and complications. Underlying causes of overweight and obesity (e.g. hypothyroidism, Cushing syndrome, growth hormone deficiency, Prader–Willi syndrome) should also be considered.

**MAIN POINTS IN ASSESSING CHILDREN AND ADOLESCENTS WHO ARE OVERWEIGHT OR OBESE**

- Pubertal stage (e.g. using Tanner staging)
- Acne and hirsutism
- Blood pressure (with appropriate cuff size)
- Morning headache and visual disturbance (potential benign intracranial hypertension)
- Abnormal gait, problems with feet, hips and knees, difficulties with balance and coordination
- Gastrointestinal symptoms (vomiting, abdominal pain, constipation, gastrointestinal reflux)
- Nocturnal enuresis and daytime dribbling
- Hip and knee joint pain
- Presence of intertrigo
- Presence of hepatomegaly
- Signs of dysmorphism
- Thyroid function (e.g. presence of goitre)
- Acanthosis nigricans (velvety, light brown-to-black markings usually on the neck, under the arms or in the groin), which suggests significant insulin resistance
- Short stature, a low growth velocity, or bruising or purple striae (may indicate an endocrine cause for weight gain)
- Dental health

**Client History**

- Personal History
  - Personal data
    - Age
- Patient/Client/Family Medical/Health History
  - Patient/client or family nutrition-oriented medical/health history
- Social History (socioeconomic factors including social and environmental barriers and facilitators of diet, living/housing situation, domestic issues)

Evaluate family environment, including language use in the house around food, weight, dieting and physical activity.

**Nutritional Diagnosis**

**Determine Individualised PESS (problem, etiology, signs and symptoms using some NCP terminology)**

Sample weight management PESS:

- Excessive oral food and beverage intake related to the consumption of excess portions (e.g. high calorie, high fat, high salt, extra servings) as evidenced by food frequency questionnaire and/or 24-hour diet history, BMI >99% and client statement (information obtained from an interview with a client).
• Physical inactivity related to high amounts of screen time, lack of active family role models, lack of time and/or lack of knowledge of affordable activity options, as evidenced by physical activity records, BMI >99% and client statement (information obtained from an interview with a client).
• Inadequate oral food beverage intake related to inadequate consumption of vegetables and fruit, and milk and alternatives as evidenced by diet history, and food frequency questionnaire.

**Nutritional Intervention**

**Determine Nutrition Prescription**

The purpose of the nutrition prescription is to communicate the recommendations that the dietitian and the patient/client develop, based on the nutrition assessment and the nutrition diagnosis/es.

The nutrition prescription is often developed at the beginning of the nutrition intervention step, and consists of individualized recommended dietary intake of energy and/or specific foods or nutrients, based on current reference standards, dietary guidelines, the patient/client’s health condition, and the nutrition diagnosis/es.

**Recommendations:**
• Modified diet
  • energy/nutrient modification
• Calorie modification.

**Nutrition Interventions**

Nutrition interventions are likely to be in the area of nutrition education and nutrition counselling.

**Nutrition Education**
• Content
  • Purpose of the nutrition education
  • Nutrition relationship to health/disease
  • Recommendations (e.g. to modify food intake, increase vegetables and fruit, increase physical activity, follow healthy eating guidelines)

**Nutrition Counselling**
1. Strategies
  • Motivational interviewing
  • Goal setting

**Goal Setting**

• To achieve and maintain permanent lifestyle changes that result in the prevention of excessive weight gain and the promotion of healthy growth.
• In children without obesity-related complications, a goal of weight maintenance should be set, until a BMI-for-age of <85th percentile is achieved. If weight loss occurs through the implementation of a healthy lifestyle, height growth should be maintained, and the rate of weight loss should be slow.
• In obese adolescents and obese children with obesity-related co-morbidities, a goal of gradual weight loss should be set. If weight loss occurs at a faster rate, the reasons should be investigated.

Families should understand the goals for their child's weight, and how they can best support their child.

Counselling Strategies

Behaviour counselling techniques are recommended as an adjunct to other interventions to support the development of adaptive behaviours around diet and physical activity and to facilitate the maintenance of such changes.

Nutritional Monitoring

Structured physical activity and dietary guidance should be provided to families for a minimum of 3 months as directed by their health professional. At the commencement of treatment, a plan for lifestyle and weight maintenance should be developed in order to promote the sustainability of healthy behaviours.

**INDICATORS TO MONITOR**

**Changes in body weight and growth patterns according to comparative standards of anthropometric measures (Growth Charts, Height, Length, Body weight)**

Changes in dietary intake and physical activity

- Increased physical activity participation (sports, family activities)
- Improvements in exercise capacity and endurance
- Reduction in sedentary activities (leisure time TV, video games)
- Improved perception of quality of life, body image and self-esteem
- Improved family dynamics, parental lifestyle behaviours

Changes in goals and lifestyle modifications

- Changes in perceived knowledge, beliefs and values (body image, quality of life)
- Changes in behaviours (self-monitoring and sustaining health habits, changes in eating behaviours)

Changes in metabolic risk factors (cholesterol, insulin, glucose and blood pressure)

Diet and Activity Risk Questionnaire

**Diet and Activity Risk**

1. **Dieting History:** Past dieting or weight management efforts? ○ No ○ Yes

2. **Food Choices:** High fat/high sugar foods or beverages? ________________
   - Food at school? ________________
   - Snacks/meals eaten out? ________________
   - Nutritional adequacy issues: 3 servings daily? ________________
   - 5 servings fruits and vegetables? ________________

3. **Food Pattern:** 
   - Meals and snacks/day: ________________
   - Meal skipping: ________________
   - Dieting, fasting, or diet pill use: ________________
   - Family meals: ________________

4. **Hunger and Satiety Cues:** Normal hunger and fullness sensations? ________________
   - Eating when not hungry: ________________

5. **Physical Activity:** 
   - # days/week: ________________
   - Type of sports or activities: ________________
   - Family exercise: ________________
   - If no, reasons: ________________

6. **Sedentary Activity:** 
   - # hours/day of TV, computer and video games: ________________
   - Limits on TV/computer time: ________________

**Diet and Activity Risk?** ○ Low ○ Medium ○ High

NOTES ________________________________

Additional Online Resources Available for Clinicians

Clinical Resources for Management of Childhood Obesity

1. Growth Charts (CDC)

2. Growth Charts (WHO)
   http://www.who.int/childgrowth/standards/en/

3. Nutrient reference values for Australia and New Zealand

4. Australian Dietary Guidelines

5. Educator Guide – Eat for Health

6. Australian dietary guidelines and related companion resources

7. Guidelines for healthy foods and drinks supplied in school canteens

8. Get up and Grow

   http://daa.asn.au

    http://www.nutritionaustralia.org
   http://www.weightcouncil.org

12. National Heart Foundation of Australia  
   https://heartfoundation.org.au/healthy-eating

13. Department of Health, Healthy Living Network  

Clinical Practise Guidelines

1. NHMRC (2013), Clinical practice guidelines for the management of overweight and obesity in adults, adolescents and children in Australia.  
### TABLE OF CONTENTS

**Clinician Resource Package**

<table>
<thead>
<tr>
<th>Resource Number</th>
<th>Title</th>
<th>Page Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>#2</td>
<td>Length-for-age WHO chart, Girls, 0-2 years.</td>
<td></td>
</tr>
<tr>
<td>#3</td>
<td>Length-for-age WHO chart, Boys, 0-2 years.</td>
<td></td>
</tr>
<tr>
<td>#4</td>
<td>Weight-for-age WHO chart, Girls, 0-2 years.</td>
<td></td>
</tr>
<tr>
<td>#5</td>
<td>Weight-for-age WHO chart, Boys, 0-2 years.</td>
<td></td>
</tr>
<tr>
<td>#6</td>
<td>Weight-for-length WHO chart, Girls, 0-2 years.</td>
<td></td>
</tr>
<tr>
<td>#7</td>
<td>Weight-for-Length WHO chart, Boys, 0-2 years.</td>
<td></td>
</tr>
<tr>
<td>#8</td>
<td>BMI (z-scores), WHO Chart, Girls, 0-2 years.</td>
<td></td>
</tr>
<tr>
<td>#9</td>
<td>BMI (z-scores), WHO Chart, Boys, 0-2 years.</td>
<td></td>
</tr>
<tr>
<td>#10</td>
<td>BMI-for-age, CDC Chart, Girls, 2-19 years</td>
<td></td>
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<tr>
<td>#11</td>
<td>BMI-for-age, CDC Chart, Boys, 2-19 years</td>
<td></td>
</tr>
<tr>
<td>#12</td>
<td>Diet and Activity Risk Questionnaire California Medical Association Foundation (2011-2012)</td>
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<tr>
<td>#13</td>
<td>Discussing weight with children, adolescents and parents, NHMRC</td>
<td></td>
</tr>
<tr>
<td>#14</td>
<td><strong>Goal Setting</strong></td>
<td>TBC</td>
</tr>
<tr>
<td>#15</td>
<td><strong>Counselling Strategies</strong></td>
<td>TBC</td>
</tr>
</tbody>
</table>
SECTION 2
Patient Education Resource Package
### Australian Dietary Guidelines – Recommended Serves

<table>
<thead>
<tr>
<th>Core Food Groups</th>
<th>1-2 yr</th>
<th>2-3 yr</th>
<th>4-8 yr</th>
<th>9-11 yr</th>
<th>12-13 yr</th>
<th>14-18 yr</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Breads and Cereals</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 slice bread (40g)</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>4 F</td>
<td>5 F</td>
<td>7</td>
</tr>
<tr>
<td>½ med bread roll</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>5 M</td>
<td>6 M</td>
<td></td>
</tr>
<tr>
<td>½ cup cooked</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>rice/pasta/noodles</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>½ cup cooked porridge,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2/3 cup flakes</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>¼ cup muesli</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>¼ cup flour</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Fruit</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 medium piece (150g)</td>
<td>½</td>
<td>1</td>
<td>1½</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>e.g. apple, banana, orange</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 small pieces</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.g. kiwi fruit, plums, apricots</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 cup diced or canned</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>½ cup juice (100%)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30g dried fruit</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Vegetables</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>75g or ¼ cup cooked</td>
<td>2-3</td>
<td>2½</td>
<td>4½</td>
<td>5</td>
<td>5 F</td>
<td>5 F</td>
</tr>
<tr>
<td>vegetables</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>5½ M</td>
<td>5½ M</td>
</tr>
<tr>
<td>75g or ¼ cup cooked</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>dried beans, peas, lentils</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 cup salad vegetables</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 potato</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Dairy</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>250ml (1 cup) fresh, UHT,</td>
<td>1-1½</td>
<td>1½</td>
<td>1½ F</td>
<td>3 F</td>
<td>3½</td>
<td>3½</td>
</tr>
<tr>
<td>Ca2+ fort soy milk</td>
<td></td>
<td></td>
<td>2 M</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>½ cup evaporated milk</td>
<td></td>
<td></td>
<td>2½ M</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>40g cheese (2 slices)</td>
<td></td>
<td></td>
<td>2 M</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

Dietitian: Phone: 3068 474
### Core Food Groups

<table>
<thead>
<tr>
<th></th>
<th>1-2 yr</th>
<th>2-3 yr</th>
<th>4-8 yr</th>
<th>9-11 yr</th>
<th>12-13 yr</th>
<th>14-18 yr</th>
</tr>
</thead>
<tbody>
<tr>
<td>200g carton of yoghurt</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>40g cheddar cheese</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>120g ricotta</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Meat/Alternatives

<table>
<thead>
<tr>
<th></th>
<th>1-2 yr</th>
<th>2-3 yr</th>
<th>4-8 yr</th>
<th>9-11 yr</th>
<th>12-13 yr</th>
<th>14-18 yr</th>
</tr>
</thead>
<tbody>
<tr>
<td>65g cooked lean meat ½ cup</td>
<td>1</td>
<td>1</td>
<td>1½</td>
<td>2½</td>
<td>2½</td>
<td>2½</td>
</tr>
<tr>
<td>lean mince, 2 slices roast meat</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>80g cooked poultry 100g cooked fish</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 large eggs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 cup cooked beans, lentils,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>chickpeas, split peas or</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>canned beans</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>170g tofu</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30g nuts or seeds/paste</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Oils

<table>
<thead>
<tr>
<th></th>
<th>1-2 yr</th>
<th>2-3 yr</th>
<th>4-8 yr</th>
<th>9-11 yr</th>
<th>12-13 yr</th>
<th>14-18 yr</th>
</tr>
</thead>
<tbody>
<tr>
<td>10g poly/mono spreads</td>
<td>1</td>
<td>½</td>
<td>1</td>
<td>1</td>
<td>1½</td>
<td>2</td>
</tr>
<tr>
<td>7g poly / mono oils 10g tree nuts</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>peanuts or nut pastes / butters</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

### Optional Extras

<table>
<thead>
<tr>
<th></th>
<th>0</th>
<th>0-1</th>
<th>0-1 F</th>
<th>0-3</th>
<th>0 -2.5 F</th>
<th>0 -2.5 F</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 sly cake/small muffin</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2-3 sweet biscuits</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 doughnut</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25g chocolate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5-6 lollies</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 tbsp jam/ honey</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30g crisps</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 hot chips</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 can soft drink</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 glasses cordial</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 scoops ice-cream</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 sly processed meats</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 thin sausages</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>½ slice pizza</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>½ meat pie / pasties</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 tbsp. butter</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 tbsp. cream</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Updated using 2013 Eat for Health Educator Guide on March 2017*
## Example Serving Sizes

<table>
<thead>
<tr>
<th>Breads and Cereals</th>
<th>Free Vegetables</th>
<th>Starchy Vegetables</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 slice bread (40g)</td>
<td>75g or ½ cup cooked vegetables</td>
<td>1 potato</td>
</tr>
<tr>
<td>½ med bread roll</td>
<td>75g or ½ cup cooked dried beans, peas, lentils</td>
<td></td>
</tr>
<tr>
<td>½ cup cooked rice/pasta/noodles</td>
<td>1 cup salad vegetables</td>
<td></td>
</tr>
<tr>
<td>½ cup cooked porridge, 2/3 cup flakes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>¼ cup muesli</td>
<td></td>
<td></td>
</tr>
<tr>
<td>¼ cup flour</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fruit</td>
<td>Meat/Alternatives</td>
<td></td>
</tr>
<tr>
<td>1 medium piece (150g) e.g. apple, banana, orange</td>
<td>65g cooked lean meat ¾ cup lean mince, 2 slices roast meat</td>
<td></td>
</tr>
<tr>
<td>2 small pieces</td>
<td>80g cooked poultry 100g cooked fish</td>
<td></td>
</tr>
<tr>
<td>e.g. kiwi fruit, plums, apricots</td>
<td>2 large eggs</td>
<td></td>
</tr>
<tr>
<td>1 cup diced or canned</td>
<td>1 cup cooked beans, lentils, chickpeas, split peas or canned beans</td>
<td></td>
</tr>
<tr>
<td>½ cup juice (100%)</td>
<td>170g tofu</td>
<td></td>
</tr>
<tr>
<td>30g dried fruit</td>
<td>30g nuts or seeds/paste</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dairy</td>
<td>Optional Extras</td>
<td></td>
</tr>
<tr>
<td>250ml (1 cup) fresh, UHT, Ca2+ fort soy milk</td>
<td>1 sly cake/small muffin, 2-3 sweet biscuits, 1 doughnut, 25g chocolate, 5-6 lollies, 1 tbsp jam/ honey, 30g crisps, 12 hot chips</td>
<td></td>
</tr>
<tr>
<td>½ cup evaporated milk</td>
<td>1 can soft drink, 2 glasses cordial, 2 scoops ice-cream</td>
<td></td>
</tr>
<tr>
<td>40g cheese (2 slices)</td>
<td>2 sly processed meats, 2 thin sausages, ½ slice pizza</td>
<td></td>
</tr>
<tr>
<td>200g carton of yoghurt</td>
<td>¼ meat pie / pasties, 1 tbsp. butter, 2 tbsp. cream</td>
<td></td>
</tr>
<tr>
<td>40g cheddar cheese</td>
<td></td>
<td></td>
</tr>
<tr>
<td>120g ricotta</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Example Meal Plan

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Meal Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>2-3 years (1,100kcal)</td>
<td><strong>Breakfast</strong>&lt;br&gt;½ - 1 Weet-bix + ½ cup reduced fat milk or soy milk alternative&lt;br&gt;1 slice wholegrain bread/1 wholemeal pikelet + thin spread of peanut butter/nut spread, vegemite or creamed corn&lt;br&gt;or 1 vegetable fritter (corn/carrot/zucchini/pumpkin)&lt;br&gt;+ ½ x Fruit (1 small apricot/plum/kiwi fruit or ½ medium banana or apple or ½ cup diced fruit salad or canned peaches/pears – drained, no added sugar)&lt;br&gt;<strong>DRINK:</strong> 250ml Water</td>
</tr>
<tr>
<td>4-8 years (1,200-1,500kcal)</td>
<td><strong>Breakfast</strong>&lt;br&gt;½ - 1 Weet-bix + ½ cup reduced fat milk or soy milk alternative&lt;br&gt;or ½ cup cooked porridge&lt;br&gt;or 1 slice multigrain bread/1 wholemeal pikelet + thin spread of peanut butter/nut spread, vegemite or creamed corn&lt;br&gt;or 1 vegetable fritter (corn/carrot/zucchini/pumpkin)&lt;br&gt;+ 1 x Fruit (2 small apricot/plum/kiwi fruit or 1 medium banana or apple or 1 cup diced fruit salad or canned peaches/pears – drained, no added sugar)&lt;br&gt;<strong>DRINK:</strong> 250ml Water</td>
</tr>
<tr>
<td>9-11 years (1,600-1,800kcal)</td>
<td><strong>Breakfast</strong>&lt;br&gt;½ - 1 Weet-bix + ½ cup reduced fat milk or soy milk alternative&lt;br&gt;or ½ cup cooked porridge&lt;br&gt;or 1 slice multigrain bread/1 wholemeal pikelet + thin spread of peanut butter/nut spread, vegemite or creamed corn&lt;br&gt;or 1 vegetable fritter (corn/carrot/zucchini/pumpkin)&lt;br&gt;+ 1x Fruit (2 small apricot/plum/kiwi fruit or 1 medium banana or apple or 1 cup diced fruit salad or canned peaches/pears – drained, no added sugar)&lt;br&gt;<strong>DRINK:</strong> 250ml Water</td>
</tr>
<tr>
<td>12-13 years (1,900-2,050kcal)</td>
<td><strong>Breakfast</strong>&lt;br&gt;½ - 1 Weet-bix + ½ cup reduced fat milk or soy milk alternative&lt;br&gt;or ½ cup cooked porridge&lt;br&gt;or 1 slice multigrain bread/1 wholemeal pikelet + thin spread of peanut butter/nut spread, vegemite or creamed corn&lt;br&gt;or 1 vegetable fritter (corn/carrot/zucchini/pumpkin)&lt;br&gt;+ 1x Fruit (+ 2 small apricot/plum/kiwi fruit or 1 medium banana or apple or 1 cup diced fruit salad or canned peaches/pears – drained, no added sugar)&lt;br&gt;<strong>DRINK:</strong> 250ml Water</td>
</tr>
<tr>
<td>14-16 years (2,200-2,400kcal)</td>
<td><strong>Breakfast</strong>&lt;br&gt;½ - 1 Weet-bix + ½ cup reduced fat milk or soy milk alternative&lt;br&gt;or ½ cup cooked porridge&lt;br&gt;or 2 slice multigrain bread/1 wholemeal pikelet + thin spread of peanut butter/nut spread, vegemite or creamed corn&lt;br&gt;or 1 vegetable fritter (corn/carrot/zucchini/pumpkin)&lt;br&gt;<strong>DRINK:</strong> 250ml Water</td>
</tr>
<tr>
<td><strong>Morning Tea</strong></td>
<td>100g low fat plain yoghurt&lt;br&gt;+ 1/4 cup cereal (Weet-bix) or 1 wholemeal pikelet + spread of ricotta cheese&lt;br&gt;<strong>DRINK:</strong> 250ml Water</td>
</tr>
<tr>
<td><strong>Lunch</strong></td>
<td>1 slice wholegrain toast or ½ wholemeal English muffin&lt;br&gt;+ 1/2 cup (75g) baked beans&lt;br&gt;+40g cucumber/carrot/capsicum sticks&lt;br&gt;<strong>DRINK:</strong> 250ml Water</td>
</tr>
<tr>
<td><strong>Lunch</strong></td>
<td>1 slice wholegrain toast or ½ wholemeal English muffin&lt;br&gt;+ 1/2 cup (75g) baked beans&lt;br&gt;+40g cucumber/carrot/capsicum sticks&lt;br&gt;<strong>DRINK:</strong> 250ml Water</td>
</tr>
<tr>
<td><strong>Lunch</strong></td>
<td>1 - 2 slice wholegrain toast or ½ wholemeal English muffin&lt;br&gt;+ 1/2 cup (75g) baked beans&lt;br&gt;+75g cucumber/carrot/capsicum sticks&lt;br&gt;<strong>DRINK:</strong> 250ml Water</td>
</tr>
<tr>
<td><strong>Lunch</strong></td>
<td>Tuna/Turkey/Chicken Salad Sandwich/Wrap (2 slices wholegrain toast or multigrain wrap, with tomato/lettuce/carrot/ beetroot and 20g cheese)&lt;br&gt;or mini pizzas (1 wholemeal English)&lt;br&gt;<strong>DRINK:</strong> 250ml Water</td>
</tr>
<tr>
<td>Time</td>
<td>Meal</td>
</tr>
<tr>
<td>-------</td>
<td>-------------------------------------------------</td>
</tr>
<tr>
<td>Afternoon Tea</td>
<td>75g Veggie sticks and 1 tbsp dip</td>
</tr>
<tr>
<td></td>
<td>DRINK: ½ - 1 cup (250ml) of low fat milk or soy milk with 100mg of added calcium per 100ml</td>
</tr>
<tr>
<td>Dinner</td>
<td>Child palm size piece lean meat (chicken, beef, lamb, fish etc.) OR alternatives (tofu, or 1 cup cooked lentils) + fist size of rice/pasta (~1/2 cup cooked) + veggies (1/2 cup cooked broccoli, carrots or pumpkin OR, 1/2 cup of leafy, raw salad vegetables + ½ one medium tomato)</td>
</tr>
<tr>
<td></td>
<td>DRINK: ½ - 1 cup (250ml) of low fat milk or soy milk with 100mg of added calcium per 100ml</td>
</tr>
<tr>
<td></td>
<td>DRINK: 1 cup (250ml) of low fat milk or soy milk with 100mg of added calcium per 100ml</td>
</tr>
<tr>
<td></td>
<td>DRINK: 1 cup (250ml) of low fat milk or soy milk with 100mg of added calcium per 100ml</td>
</tr>
<tr>
<td>Supper</td>
<td>Child palm size piece lean meat (chicken, beef, lamb, fish etc.) OR alternatives (tofu, or 1 cup cooked lentils) + fist size of rice/pasta (~1/2 cup cooked) + veggies (1/2 cup cooked broccoli, carrots or pumpkin OR, 1/2 cup of leafy, raw salad vegetables + ½ one medium tomato)</td>
</tr>
<tr>
<td></td>
<td>DRINK: ½ - 1 cup (250ml) of low fat milk or soy milk with 100mg of added calcium per 100ml</td>
</tr>
<tr>
<td></td>
<td>DRINK: 1 cup (250ml) of low fat milk or soy milk with 100mg of added calcium per 100ml</td>
</tr>
<tr>
<td></td>
<td>DRINK: 1 cup (250ml) of low fat milk or soy milk with 100mg of added calcium per 100ml</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Serves</th>
<th>Fruit: 1</th>
<th>Vegetables: 2 ½</th>
<th>Breads &amp; Cereals: 4</th>
<th>Meat &amp; Alternatives: 1</th>
<th>Dairy: 1 ½</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fruit:</td>
<td>1</td>
<td>1 ½</td>
<td>4</td>
<td>1 ½</td>
<td>Girls - 1 ½, Boys - 2</td>
</tr>
<tr>
<td>Vegetables:</td>
<td>4 ½</td>
<td>4</td>
<td>4</td>
<td>1 ½</td>
<td>Boys - 5, Girls - 4</td>
</tr>
<tr>
<td>Breads &amp; Cereals:</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>1 ½</td>
<td>Boys - 5, Girls - 4</td>
</tr>
<tr>
<td>Meat &amp; Alternatives:</td>
<td>2 ½</td>
<td>2 ½</td>
<td>2 ½</td>
<td>2 ½</td>
<td>Boys - 5, Girls - 5</td>
</tr>
<tr>
<td>Dairy:</td>
<td>Girls - 3</td>
<td>Boys - 3</td>
<td>Girls - 3</td>
<td>Boys - 3</td>
<td>Girls - 3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Serves</th>
<th>Fruit: 2</th>
<th>Vegetables: 5</th>
<th>Breads &amp; Cereals: Boys – 5, Girls - 5</th>
<th>Meat &amp; Alternatives: 2 ½</th>
<th>Dairy: 3 ½</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fruit:</td>
<td>2</td>
<td>2</td>
<td>7</td>
<td>2</td>
<td>Girls - 5</td>
</tr>
<tr>
<td>Vegetables:</td>
<td>5</td>
<td>5</td>
<td>5</td>
<td>2</td>
<td>Boys - 5, Girls - 5</td>
</tr>
<tr>
<td>Meat &amp; Alternatives:</td>
<td>2 ½</td>
<td>2 ½</td>
<td>2 ½</td>
<td>2 ½</td>
<td>Boys - 5, Girls - 5</td>
</tr>
<tr>
<td>Dairy:</td>
<td>Boys - 3</td>
<td>Girls - 3</td>
<td>Boys - 3</td>
<td>Girls - 3</td>
<td>Boys - 3</td>
</tr>
</tbody>
</table>

**DRINK:**
- 75g Veggie sticks and 1 tbsp dip hummus/nut spread or dip
- 75g Veggie sticks and 1 tbsp hummus/nut spread or dip
- 75g Veggie sticks and 1 tbsp hummus/nut spread or dip
- 75g Veggie sticks and 1 tbsp hummus/nut spread or dip
- 75g Veggie sticks and 1 tbsp hummus/nut spread or dip
- 75g Veggie sticks and 1 tbsp hummus/nut spread or dip

**DRINK:**
- 250ml Water
- 250ml Water
- 250ml Water
- 250ml Water
- 250ml Water
- 250ml Water
Healthy Lunchboxes

When packing lunchboxes for school, aim to include one food item from every category:

1. **Vegetables**
2. **Fruit**
3. **Meat and Alternatives**
4. **Grains and Cereals**
5. **Dairy**
6. **Water**
Making Time for Breakfast

Instructions: Make sure breakfast is part of your morning routine by using this schedule to help you manage your time. Start from the bottom by filling in the time you leave home to go to school (7:15, for example). Then work your way up, using the minutes as suggestions. If the routine on this page looks like your typical morning, hang it on your bedroom door and try to stick to it until it really does become a routine. Cross out any activities that don’t apply to you.

Remember, depending on what you plan to eat, you can prepare some breakfasts the night before!

After using the planner for a week or so, if you’re still feeling rushed, add some minutes to each thing you have to do before leaving for school and push back your times. You may need to wake up a few minutes earlier or drop something other than breakfast from the list.

Planning ahead will help you feel less rushed, more organized, and ready to face the day!

My top 3 reasons to eat breakfast

1. 
2. 
3. 

My top 3 healthy breakfast options

1. 
2. 
3. 

My Morning Routine

07:00 a.m. – Wake up

___:___ a.m. – Shower, get dressed (15 to 20 minutes)

___:___ a.m. – Morning chore (make bed, walk dog, etc.) (10 minutes)

___:___ a.m. – Prepare, eat breakfast (10 to 15 minutes)

___:___ a.m. – Brush teeth, comb hair, etc. (10 minutes)

___:___ a.m. – Organize school stuff (10 minutes)

08:30 a.m. – Leave for school
Promoting Good Television Habits

The Queensland Government recommends the following guidelines for daily electronic media use for children.

**Children aged less than 2 years**
Children younger than 2 years of age should not spend any time watching television or using other electronic media (DVDs, computer and other electronic games).

**Children aged 2 to 5 years**
For children 2 to 5 years of age, sitting and watching television and the use of other electronic media (DVDs, computer and other electronic games) should be limited to less than one hour per day.

**Children aged 5-17 years**
Use of electronic media for entertainment should be limited to less than 2 hours per day.

Some activities, like reading and doing school work, may need to be done while sitting. The key is to find a healthy balance and limit time spent in front of a screen for entertainment. Too much TV can affect your child’s sleeping patterns, cause behavioural problems, and leaves less time for active play.

Try rewarding children with trips to the park or spending free time as family time, for reading, visiting a museum or exhibit, walking, exploring or bike riding!

**TIPS FOR THE WHOLE FAMILY**
- Introduce good television habits when your children are young. As your children grow older, it will become harder to enforce rules and set limits.
- Children learn from what they see. The morals and values found in a TV show or on a commercial might be different from your own. Be a good role model with your own viewing habits.
- Encourage your child to watch programs that help teach such as shows about nature, science, the arts, music or history.
- Explain the rules of TV watching in your home to caregivers such as nannies or grandparents. Tell your children it’s okay to tell others when they feel afraid or don’t want to watch a particular show.
when visiting.

Violence on TV can affect your child or teen’s behaviour. Young children shouldn’t watch programs with violence, sex or bad language.

Turn off the TV when you aren’t using it such as during meals and during study time. Don’t use the TV as background noise.

Keep televisions and video games out of children’s bedrooms.

Bedtimes should be consistent. They should not change because of a TV show. If your child or teen wants to see a program that airs past your child’s bedtime, consider recording it.

**TIPS FOR YOUNGER CHILDREN (TODDLERS AND PRESCHOOLERS)**

Make sure your child watches programs you are familiar with and, whenever you can, watch them together. Avoid using your TV as a caregiver.

Talk about the ideas and activities your child sees on TV, such as sharing, giving, loving or doing the alphabet together. Use follow-up activities to teach why these things are important.

Build a recorded library of your child’s favourite shows—young children love to watch the same programs over and over again.

**TIPS FOR OLDER CHILDREN (SCHOOL-AGED CHILDREN)**

Older children can plan a weekly viewing schedule, but you should still supervise their choices.

Talk about the difference between fantasy, make-believe and reality. Encourage your children to talk about what they see on TV. Discuss and explain why they can’t watch certain programs. This is a chance to explain the values you feel are important.

Television is a powerful tool for selling or promoting toys and products. Discuss advertising with your child and explain that they are meant to sell something. If you have recorded the show you are watching, fast-forward through the advertising.

Make a rule that homework and chores must be finished before your child can watch television. Consider a “no TV” rule during the school week.

*Source: Canadian Paediatric Society, How to Promote Good Television Habits, Caring for Kids, 2017. Available at [http://www.caringforkids.cps.ca/handouts/promote_good_television_habits](http://www.caringforkids.cps.ca/handouts/promote_good_television_habits)*
How can I set limits on my child’s screen time?

Time spent using electronic media (such as television, seated electronic games, portable electronic devices or computers) for entertainment, is referred to as ‘screen time’. While screen time activities may be popular, they usually involve sitting or lying down for long periods.

Start encouraging good media habits when your children are young. Otherwise, it will get harder to enforce limits and influence their choices as they get older.

- Consider all electronic media when setting time limits for your family. Television, movies, the Internet (including social media), video games and gaming devices (whether hand-held, or played through a computer or television) all add to your child’s total screen time.
- Children learn many of their values and ideas from their parents. Be aware of your own media habits and change them if necessary.
- Keep television, computers and gaming equipment out of your child’s bedroom. Keep them in common areas, where you can watch your children while they use them. Turn off the television or computer when you aren’t using it.
- Balance screen time with sports, hobbies, creative and outdoor play, both on their own and together as a family.
- Late-night chatting online, surfing and texting with friends shouldn’t cut into important sleep time.
- Ask your child or teen to give you their cell phone at a certain time at the end of the day so they aren’t interrupted with phone calls or text messages during family time. Talk about the importance of shutting off cell phones and the value of being unconnected at night.
- Find out about online protection for your family. Programs that provide parental controls can block websites, enforce time limits, monitor the websites your child visits, and their online conversations.
- Ask your child or teen where else she uses computers. Talk to teachers and caregivers about where and when your children are using electronic media.

**ENCOURAGING CHILDHOOD DEVELOPMENT OF HEALTHY ELECTRONIC MEDIA HABITS**

*Get involved* — watch, play and listen with your child. Talk to her about it, find how what she enjoys and why. Share your own beliefs and values. Preview television shows, music and video games to see if they are okay.
Encourage your child to try different media experiences. Help them make good choices.

Learn about the Australian ratings systems for television, music, movies and video games. They can help you choose appropriate media with your child.

Talk to your child about stereotypes and violent images in the media. Educate him about the strategies that advertisers use to sell products to children.

Limit the violent content your child is exposed to. Notice whether there are any changes in how he behaves after watching scary or violent shows, or playing video games.

Speak out. If media content strikes you as inappropriate or offensive, tell the media organization.

Source: Canadian Paediatric Society, How to Promote Good Television Habits, Caring for Kids, 2011. Available at http://www.caringforkids.cps.ca/handouts/limiting_screen_time_at_home
What can I do to help foster my child’s self-esteem?

The most important thing is to show your child lots of love and acceptance. Show him that you love him by spending time with him and by giving him a lot of hugs and affection.

Be a role model. Show your child what it means to love yourself, be willing to do and try new things, and model how you cope with set-backs or challenges. Show your child the rewards of patience, persistence and doing things as well as you can.

Focus on your child by playing with her and listening when she talks. Show interest in your child's activities, projects, or problems. Let her guide play, and be willing to do the things she wants to do.

Be consistent. Decide on and enforce clear rules and limits that are right for your child’s age and stage. Tell him what you expect, and what the consequences will be if the rules aren’t followed. This helps him feel safe and secure, and grow more confident about making his own decisions.

Tell your child you are happy when she cooperates or helps you, follows rules, or does other positive things. Explain what you like about her behaviour.

Help your child find something he is good at and enjoys. Understand and respect that he will be really good at some activities and not good at others.

Support your child and offer genuine praise. Encourage her to try new things, and tell her you are proud of her effort, whether she was successful or not. But don’t over-praise every accomplishment, because it will only take away from the things she succeeds at and that took real effort. Remind her that learning new skills takes time and practice, and that no one can master everything. You can also talk about your own successes and failures and what you’ve learned.

Help your child learn from his mistakes. Talk about what can be done differently next time, and how he can control his own behaviour.

Provide your child with responsibilities and opportunities to contribute in the home. For example, assign family chores, or ask for help preparing dinner. This teaches your child that she’s important.

Offer choices and the chance to problem-solve so that your child learns that he has control over his life.

Create a safe, loving home environment where your children can feel comfortable, secure and happy. Avoid fighting or arguing with your partner in front of your children, and always respect your children.

Source: Canadian Paediatric Society, How to Promote Good Television Habits, Caring for Kids, 2011. Available at http://www.caringforkids.cps.ca/handouts/foster_self_esteem
Active Listening
A skill to promote communication with your child

Active listening can be a powerful tool to improve communication and build a positive relationship with your teenage child.

**You can actively listen by:**

- Getting close to your child when she’s speaking
- Giving your child your full attention
- Allowing your child to talk and not interrupting her
- Avoiding questions that break your child’s train of thought
- Focusing on what your child is saying rather than thinking about what you’ll say next
- Looking at your child so she knows she’s being heard and understood
- Showing your child that you’re interested by nodding your head and making comments like ‘I see’, ‘That sounds hard/great/tricky …’ and so on

*Listening isn’t the same thing as agreeing. You can understand and respect another person’s point of view without agreeing with it.*

**BENEFITS OF ACTIVE LISTENING**

An essential ingredient of strong, healthy relationships is good communication. And successful communication depends a lot on how you listen.

By using active listening, you can strengthen your communication and improve your relationship with your child. This is because active listening shows your child that you care and are interested. It can also help you learn and understand more about what’s going on in your child’s life.

With active listening, you don’t have to talk too much. It can take the pressure off you to come up with answers and solve problems. Active listening can make it more likely that your child will seek your views.
Talking to you is good for your child’s thinking processes too, and can help him to clarify his thoughts.

Good listening is the best way to show your child that you’re genuinely interested and that you really care. It also helps to avoid conflict caused by misunderstandings.

**IMPROVING YOUR ACTIVE LISTENING SKILLS**

*Get into the here and now*
This means really paying attention. If you notice your mind has wandered, bring it back to what your child is saying.

When your child is talking to you, it can help to turn off the TV, your mobile phone and other devices. If you give your child your undivided interest and attention, it sends the message that your child is the most important thing to you right now. It says that you’re available and interested in what she’s thinking, feeling and doing.

*Try to understand*
Concentrate on what your child is saying rather than thinking about what you’re going to say next. Are you missing his point while you think about your own? What is he trying to tell you and why?

*Show that you’re trying to understand*
Summarise your child’s main points and how you think she might be feeling. Try repeating what your child is saying in your own words. For example, ‘Let me see if I’ve understood. You’re feeling angry because I didn’t talk to you before making plans for this weekend. I can understand that’.

Try to avoid making judgments in your summary. For example:

It’s judgmental to say – ‘You want to stay out too late’.

It’s nonjudgmental to say – ‘You want to stay out until midnight’.

Invite your child to tell you more about what he’s thinking and feeling. Often when you use active listening and repeat back the speaker’s words, it acts as an invitation because your child feels heard. This can encourage him to explain further or say more about what he’s thinking.

Negotiating with Teenagers

When you negotiate with your teenage child, you help him learn how to make good decisions. Negotiating can also help you find a compromise that you and your child can both be happy with. Here are some negotiation techniques to use with teenagers.

**NEGOTIATING WITH TEENAGERS: BENEFITS**

- It can be hard to let go of your authority and let your teenage child have more say in decision-making. But your child needs to do this as part of her [journey towards becoming an independent, responsible young adult](#).

- If you use effective negotiation techniques, negotiating can help your child learn to think through what he wants and needs and then communicate this in a reasonable way. It also helps him understand other viewpoints, make good decisions, follow through with those decisions, and learn from the consequences of his decisions.

- Negotiating with your child is about trying to **find common ground and a win-win solution**. Negotiating doesn’t mean you have to compromise on things you think are important, such as cultural traditions, and your child’s safety and wellbeing.

- Families do things in different ways, and different parents have different ideas of what they feel is OK for teenagers to do. For example, if you grew up in a different country you might find what is accepted for teenagers in Australia is different from what you’re used to. Try to find a way of negotiating with your child that works for your family.

**NEGOTIATION TECHNIQUES**

- A negotiation might start with your child asking (or telling!) you that she’s going to do something. For example, ‘I want to go to the movies on Saturday night’. Or if she’s older or more assertive, ‘I’m going to the movies tonight’.

- If you’re not ready for the conversation, or you need time to think about what you will and won’t compromise on, **set a time to talk later**. But make sure it’s soon. This will help your child trust that you will keep your word. It also tells him that coming to a compromise is important to you. Then you can put these negotiation techniques into action.
Prepare what you’re going to say. For example, you could discuss it with your partner or a friend, or write down what you want to say.

Use a calm, warm and firm voice to set up a reasonable conversation about the issue. The idea is to avoid it becoming a conflict. For example, you could say, ‘Let’s talk about this’.

Actively listen to your child’s views first without interrupting. Show that you’ve understood how important the issue is to her. For example, ‘So you’re saying that you really want to dye your hair pink for the dress-up party, even though it will stay that colour for a long time. You also know that it might wreck your hair a bit’.

Express your views, and ask your child to tell you more about his. For example, ‘I want you to have fun and see your friends, but I also need to know where you’ll be and that you’ll be safe. So tell me more about the bike ride’.

Be clear about your bottom line. This means knowing what you’re willing to negotiate about and what’s non-negotiable. Understanding your child’s personality and maturity will help you decide what you can and can’t negotiate on. The level of trust you have in your child based on past events will also be important. For example, ‘I don’t want you to travel home from the cinema on your own. How about I come and collect you?’

Think of a range of options. For example, ‘I don’t want you to paint your room black. Is there another colour you’d be happy with, or perhaps you could just paint one wall black? Do you have any other ideas?'

Show that you’re willing to compromise and that you want to agree on something that you can both accept. For example, ‘I know you want to keep checking social media, but I’m concerned about you getting your homework done and getting enough sleep. How much social media time do you think is reasonable after you allow time for homework and sleep?’

Be warm and firm as you stick to your bottom lines. For example, ‘It doesn’t matter what other people are doing. I can pick you up after the movie finishes’.

Take a break if things get tense or argumentative. For example, ‘I need some time out, so let’s work this out after dinner’.

Clearly state the decision that you and your child have agreed on. For example, ‘OK. You can go to the party with your friends. I’ll pick you up at 11 pm’. Your child might be unhappy with the solution. Give her time to accept it without trying to convince her of its benefits.

Discuss and agree on the consequences if the agreement is broken. For example, ‘We’ve agreed that you can paint one wall in your room black. We’ve also agreed that if you paint any more than that, you’ll have to buy the white paint yourself and paint the walls white again. OK?’

End on a positive note even if the negotiation wasn’t perfect. For example, ‘Thanks for talking that through with me. I appreciate that we were able to work things out in the end. It shows me that you’re a mature person’.
When you’re using these negotiation techniques with your child, if there are two parents in the family, it’s helpful to support each other’s views and show a ‘united’ front. This gives you a stronger position and keeps the negotiation simpler. You might need to negotiate with each other to come to a joint decision first.

**USING YOUR AUTHORITY WHEN NEGOTIATING**

Your authority and influence over your child comes into play when you’re negotiating with him. As your child develops, using your authority and influence in a respectful and positive way will help keep your relationship strong and open.

As your child moves into older adolescence, it’s still important to use your authority to protect your child’s safety and wellbeing. For example, it’s OK for you to stand firm on knowing where your child is going, when he’ll be coming home and when he needs to call you about changes to arrangements.

You might find that your child is challenging your authority more as she gets older. For example, she might say, ‘I am going to do that and you can’t stop me’. The way you respond might depend on your child’s age.

For example, if your child is 12 years old, you might say, ‘I’m still your parent and I make the decisions, but I want to help you get what you want too. Let’s talk more about it to work it out’.

But if your child is 16 years old, you might say, ‘I want you to support you in doing what you want, but I’m still responsible for your safety. So I need to know where you’re going and who you’re with. Can we talk more about this to see if we can find a solution we’re both happy with?’

Your own style of parenting can also influence how you negotiate with your child.

Pre-teen Development
The pre-teen years see lots of big changes – physical, emotional, cognitive and social. During this time, children’s bodies, emotions and identities change in different ways at different times.

<table>
<thead>
<tr>
<th>PHYSICAL CHANGES</th>
</tr>
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<tbody>
<tr>
<td>For <strong>girls</strong>, you might start to see early physical changes from about 10-11 years – but this can be seen as young as 8, or as old as 13. Physical changes around puberty include breast development, changes in body shape and height, growth of pubic and body hair, and the start of <strong>periods</strong> (menstruation).</td>
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<tr>
<td>For <strong>boys</strong>, physical changes usually start around 11-12 years – but this can be seen as young as 9, or as old as 14. Physical changes include growth of the penis and testes (testicles), height increase, change in body shape, erections with ejaculation, growth of body and facial hair, and changes to voice.</td>
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<tr>
<th>EMOTIONAL CHANGES</th>
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<tbody>
<tr>
<td>You might notice that your child <strong>shows strong feelings</strong> and intense emotions at different times. His moods might seem unpredictable, and these emotional ups and downs can lead to increased conflict. This is partly because your child’s brain is still learning how to control and express emotions in a grown-up way.</td>
</tr>
<tr>
<td>Young people get better at reading and processing other people’s emotions as they get older. This means your child might be <strong>more sensitive to your emotions</strong>. But while she’s developing these skills, your child can sometimes misread facial expressions or body language.</td>
</tr>
<tr>
<td>Your child is likely to be <strong>more self-conscious</strong>, especially about his physical appearance and changes. Adolescent self-esteem is often affected by appearance, or by how teenagers think they look. As your child develops, he might compare his body with those of his friends and peers.</td>
</tr>
<tr>
<td>And your child could <strong>go through a ‘bulletproof’ stage</strong> of thinking and acting. Your child’s decision-making skills are still developing, and she’s still learning about the consequences of her actions.</td>
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</tbody>
</table>
Your child’s body is maturing physically, but his brain development, thinking skills and emotional development are happening at their own speeds. What you see on the surface doesn’t always match what’s happening on the inside.

**SOCIAL CHANGES**

Young people are busy working out who they are and where they fit into the world. So you might notice that your child is **searching for identity**. This search can be influenced by gender, peer group, cultural background and family expectations.

**Seeking more independence** is common. This is likely to influence the decisions your child makes and the relationships your child has with family and friends. Your child might want more responsibility too, both at home and at school.

The nature of teenage brain development means that teenagers are likely to **seek out new experiences** and engage in more risk-taking behaviour. At the same time, your child is still developing control over her impulses.

On the upside, your child is likely to be **thinking more about ‘right’ and ‘wrong’**. He’ll start developing a stronger individual set of values and morals. He’ll question more things. Your words and actions shape your child’s sense of right and wrong.

You’ll probably find your child is influenced more by friends, especially when it comes to behaviour, sense of self and self-esteem.

She might also be **starting to develop and explore a sexual identity**. This might include romantic relationships, or going out with someone special. These aren’t necessarily intimate relationships, though – for some young people, intimate or sexual relationships don’t happen until later on in life.

The internet, mobile phones and social media can significantly influence how your child communicates with his peers and how he learns about the world.

**CHANGES IN RELATIONSHIPS**

Your child’s relationships with family and peers will undergo dramatic changes and shifts. But maintaining **strong relationships with both family and friends is vital** for healthy social and emotional development.

You might notice that your child **wants to spend less time with her family** and more time with her friends and peers. If you find this hard, it might help to know that friends are more likely to influence your child’s short-term choices, such as appearance and interests. Your influence is important on your child’s long-term decisions, such as career choices, values and morals.

There might be **more arguments with you**. Some conflict between parents and their children during the teenage years is normal, because children are seeking more independence. It actually shows that your child is maturing. Conflict tends to peak in early adolescence. Even if you feel like...
you’re arguing with your child all the time, it isn’t likely to affect your relationship with him in the longer term.

And it might seem like your child sees things differently from you now. This isn’t because she wants to upset you – it’s because she’s beginning to think more abstractly, and is questioning different points of view. At the same time, some teenagers find it difficult to understand the effects of their behaviour and comments on other people. These skills will develop with time.

Through all of this, a strong relationship with you is an important foundation for building your child’s resilience.


MORE FROM THE RAISING CHILDREN NETWORK (FOLLOW THE LINKS)

- Problem-solving with teenagers
- Difficult conversations with teenagers
- Conflict management with teenagers
- Encouraging good behaviour in teenagers
- Discipline strategies for teenagers
- Family rules
- Body image: teens
- Sleep FAQs
- Sleep better: tips
- Persistent problems
- Sleep & learning
- Shifting responsibility to your child
- Social & emotional changes in adolescence
- Self-esteem: different ages
Making Family Meals Enjoyable: six tips

Family life is so busy – work, after-school activities, homework and more. Regular family meals give everybody a chance to catch up and enjoy each other’s company. Here’s how to get the most out of your family meals.

<table>
<thead>
<tr>
<th>BENEFITS OF FAMILY MEALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family life often comes with a busy schedule. It isn’t always easy to put a meal on the table, let alone get the whole family to sit down together to enjoy it. But a regular family mealtime is worth the effort.</td>
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<tr>
<td>Whether it’s a nightly dinner or a special Sunday lunch, sharing regular family meals gives everyone a chance to catch up, connect and communicate with each other. This can be especially important for busy older children and teenagers.</td>
</tr>
<tr>
<td>Your child can also learn a lot about food and eating by watching what you do at mealtimes.</td>
</tr>
<tr>
<td>For example, eating with the rest of the family helps younger children learn to eat the same healthy food that the rest of your family eats. Watching the family eat a range of foods can encourage picky eaters to try new foods.</td>
</tr>
<tr>
<td>Family meals are also a chance to show children how to use spoons, forks, chopsticks and so on.</td>
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<tr>
<td>And your children see you modelling good eating habits as well as the behaviour you want at the table. This isn’t just about table manners. For example, family meals can also help your child learn to communicate, as he takes turns talking and listening.</td>
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<table>
<thead>
<tr>
<th>SIX WAYS TO MAKE FAMILY MEALS ENJOYABLE</th>
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<tbody>
<tr>
<td>1. Set aside regular times to eat together</td>
</tr>
<tr>
<td>When you put these times in your weekly schedule, you’re all more likely to be there. Having your meal at a table, with the television and phone turned off, can make this time even more special.</td>
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<tr>
<td>Children can help by setting the table and even decorating it with flowers from the garden or placemats.</td>
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<tr>
<td>2. Reduce the rush</td>
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<tr>
<td>Allowing around half an hour for the family meal gives your children plenty of time to eat. They’ll have the chance to try new foods and develop good eating habits. This also gives you time to relax,</td>
</tr>
</tbody>
</table>
chat and enjoy your family.

### 3. Get everyone involved

Involving your family in choosing and preparing the meal increases the chance that they’ll eat it. It can also help fussy eaters to try new food.

Older children and teenagers might enjoy choosing and cooking a meal for the family – for example, once a week or fortnight. This helps share the responsibility for preparing a meal and gives your child the chance to learn to cook.

### 4. Use family meals as a chance to talk

Family meals can be a great way to keep up with what everyone is doing. But many parents know what it’s like to be on the receiving end of a grunt or a ‘dunno’ when they ask a question. If this sounds like you and your child, using questions that need more than a yes-or-no answer can help. For example, ‘Tell me one great thing that happened at school today’.

Another idea might be for everyone to take turns sharing something good and bad about their day. This way your child won’t feel like she’s being put on the spot.

But if your child really doesn’t want to talk, it’s best not to push too hard or bring up touchy subjects. It’s good for your child just to be with the family and listen to other people talking. The idea is to make mealtimes enjoyable and social.

### 5. Reward good behaviour

When your younger children are eating nicely, using good manners and trying different foods, try to reward them with some descriptive praise. Tell them what they’re doing well. You might even want to use a reward chart to reward behaviour like trying every food on the plate or saying ‘please’ and ‘thank you’.

Avoid using food as punishment or bribes. For example, it isn’t a good idea to say, ‘If you eat your broccoli, you can have some ice-cream for dessert’. This can make your child more interested in treats than healthy foods.

### 6. Be creative with mealtimes

When you have the time and opportunity, having some fun with mealtimes can give the whole family something to look forward to. For example, on a weekend you might:

- make healthy pancakes for breakfast
- have a picnic at the park, in your backyard or on the lounge room floor
- invite a special guest over for dinner, like a friend, grandparent or neighbour. This can also be a great way of getting to know your older child’s or teenager’s friends
- create a meal with a theme – for example, food from a country with a language your child is learning at school.

Cooking with Kids

In most households, the kitchen is where the action is. Cooking with kids and sharing your kitchen with them encourages their interest in cooking and food. It’s also a fun way to encourage healthy eating habits and skills for life.

**BENEFITS OF COOKING WITH KIDS**

Cooking with kids gives you the chance to introduce them to fresh, healthy food and interesting ways of cooking it. It can be lots of fun, and it’s also a way of spending more time with your children.

There are also all sorts of things your child can learn while helping you to cook, including:

- what different foods look and feel like
- Where foods come from
- How to get food ready for cooking – for example, washing and peeling vegies
- What new words mean – for example, whisk, peel, egg beater, grater
- How to understand measuring and maths concepts – for example, half, one teaspoon, 30 minutes
- How to follow instructions in a recipe and do things step by step
- How to wait patiently for that cake to rise!

**COOKING WITH TODDLERS**

Almost everything that involves a toddler involves time and patience. So it’s a good idea to choose short and simple cooking tasks that match your toddler’s skills and attention span.

For example, your toddler could help out with:

- washing fruit and vegies
- getting things from the fridge
- handing over utensils
- stirring cake mixes or tossing salads.

Simple recipes such as [pita bread pizza](#), fruit salad and green salad are good because they’re simple to prepare, don’t take long to make and involve lots of interesting colours and textures.

When your toddler loses interest or gets tired of cooking, it’s a good idea to focus on thanking your toddler for helping and praising his effort, rather than expecting perfection.
COOKING WITH PRESCHOOLERS

With preschoolers, you can talk about which foods are healthy and why.

This is also a good age to introduce recipes that involve ‘building’. This could include layering toppings on a sandwich for lunch or spooning yoghurt, cereal and fruit into a glass to make a tasty and healthy dessert.

You could try making some of the following:
- homemade dips like tzatziki or hommus
- fruit salad with yoghurt
- healthy muffins – let your child add raisins, chopped fruit, mashed banana, cooked pumpkin or grated carrot and mix it all together
- roasted vegetables – let your child help out with counting, peeling and chopping (depending on your child’s age) the vegies you need for dinner
- mashed potatoes – let your child have a go with the masher, and jazz up the spuds with yoghurt and herbs or another vegetable such as sweet potato.

Cooking also helps preschoolers learn about washing vegetables and fruit, as well as some measuring and counting basics and some new words.

And preschoolers are old enough to help with things like setting the table, serving food and cleaning up after meals.

COOKING WITH SCHOOL AGE CHILDREN

Your school-age child will probably love helping in the kitchen and making menu suggestions.

This is also a good age to involve your child in choosing fruit, vegies and other foods for mealtimes. You can teach your child about which fruits and vegies are in season.

At this age, your child can also help to choose and pack her own healthy lunch box.

When you include your child in choosing and preparing food like this, he’s more likely to eat the food you’ve made together. You can now try more complex kitchen creations, such as:

- fried rice
- vegetable or chicken stir-fry
- soup
- gnocchi and pasta – with or without a pasta machine
- homemade muesli with nuts and seeds
- pancakes or pikelets.

Your child can help do the dishes and clean the table now.

# TABLE OF CONTENTS

Patient Education Resource Package

<table>
<thead>
<tr>
<th>Resource Number</th>
<th>Title</th>
<th>Description</th>
<th>Page Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1</td>
<td>Ellyn Satter, Division of Responsibility in Feeding</td>
<td>Explaining the role of the parent and the child around feeding.</td>
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<tr>
<td>#2</td>
<td>Ellyn Satter, Division of Responsibility in Feeding</td>
<td>Explaining the role of the parent and the child around physical activity.</td>
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<tr>
<td>#3</td>
<td>Ellyn Satter, Helping Children be Good Eaters</td>
<td>Explaining the challenge of feeding, the role of parental support and setting limits, and natural childhood feeding behaviours</td>
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<tr>
<td>#4</td>
<td>LCCH, Weight management 'Tip Sheet'</td>
<td>TBC</td>
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<td>#5</td>
<td>Healthy Eating for Children Brochure</td>
<td>NHMRC Australian Dietary Guidelines for children, serve sizes, tips for encouraging healthy habits</td>
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<tr>
<td>#6</td>
<td>LCCH Weight Management Meal Plan Resource</td>
<td>Australian Dietary Guidelines – Recommended Serves, Example Serve Sizes and Example Meal Plan for ages 2-16 years</td>
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<tr>
<td>#7</td>
<td>Eat for Health, Following the recommendations in the Australian Dietary Guidelines</td>
<td>Sample meal plan providing the nutritional and energy requirements for a CHILD aged 9-11 years</td>
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<tr>
<td>#8</td>
<td>Department of Health: My Meal Planner</td>
<td>Meal Planning template</td>
<td></td>
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<tr>
<td>#9</td>
<td>Nutrition Education Materials Online: Healthy eating and weight control in children</td>
<td>Establishing healthy habits for development, the do’s and don’ts, explaining fat, sugar, discretionary/extra foods, drinks, and physical activity recommendations, sample meal plan template</td>
<td></td>
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<tr>
<td>#10</td>
<td>Nutrition Education Materials Online: Healthy fats for children</td>
<td>Explaining the types of fats, tips for reducing excess fats, healthy snack ideas</td>
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<tr>
<td>#11</td>
<td>A Healthy Start in Life, Toddler Nutrition</td>
<td>Explaining the developmental characteristics of toddlers, determinants of toddler dietary intake, recommended/appropriate foods, sample meal plan, assessing dietary intake, tips for normal and safe</td>
<td></td>
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<tr>
<td>#12</td>
<td>Nutrition Education Materials Online: Healthy eating for toddlers</td>
<td>Explaining toddler development, healthy habits to encourage, nutritional concerns including Iron deficiency anaemia, suitable snack options, recommended fluids, and serving sizes.</td>
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<tr>
<td>#13</td>
<td>A Healthy Start in Life, Preschool Nutrition</td>
<td>Explaining eating patterns, developmental characteristics, nutrition requirements, sample serve sizes and sample meal plan, establishing eating habits, growth and appetite development, packing lunches for kindergarten, understanding food preferences, and useful websites and resources.</td>
<td></td>
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<tr>
<td>#14</td>
<td>Dietitians of Canada, Tips on Feeding Your Picky Toddler or Preschooler</td>
<td>9 tips for encouraging healthy feeding habits for fussy eaters, FAQs regarding fussy eaters.</td>
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<tr>
<td>#15</td>
<td>Dietitians of Canada, Feeding your 6-12 year old Fussy Eater</td>
<td>Division of feeding responsibilities, 11 steps to encourage healthy eating behaviours, FAQs regarding fussy eating.</td>
<td></td>
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<tr>
<td>#16</td>
<td>Easy Family Eating for Healthy Kids</td>
<td>9 Healthy habits to get your family eating better, Plan and shop for healthy foods, making time for breakfast, make school lunches cool, cooking together, eating together, easy ideas for healthy snacks and fluids.</td>
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<tr>
<td>#17</td>
<td>Making Time for Breakfast</td>
<td>Explaining the benefits of eating breakfast and an activity to encourage healthy breakfast habits.</td>
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<tr>
<td>#18</td>
<td>Healthy Lunchboxes</td>
<td>Outlining what to include in a healthy lunchbox.</td>
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<tr>
<td>#19</td>
<td>Pick &amp; Mix</td>
<td>What to include in every healthy lunchbox, tips and options for snacks and lunchbox ideas.</td>
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<tr>
<td>#20</td>
<td>Food Cents: Lunchbox ideas for busy parents and carers</td>
<td>Making healthy food and drink choices at schools, keeping food safe, allergies, choosing packet foods and reading food labels, recommended serves and serving sizes, healthy lunchbox ideas, healthy recipes.</td>
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<tr>
<td>#21</td>
<td>Getting Kids in the Kitchen</td>
<td>How to get children interested and involved.</td>
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<tr>
<td>#22</td>
<td>Gardening Ideas</td>
<td>Getting children active and involved in growing foods.</td>
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<td>#23</td>
<td>Healthy Family Eating on a budget</td>
<td>Smart shopping tips, planning ahead, sample family meal plans.</td>
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<td>Title</td>
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<td>Budget - TBC</td>
<td>meal plan, writing a shopping list, navigating the supermarket, food safety and storage, sample recipes</td>
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<tr>
<td>#24</td>
<td>The Eat Cheap Cook Book</td>
<td>Includes 31 recipes with bread, baked beans, eggs, weet-bix, instant noodles and mince</td>
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<tr>
<td>#25</td>
<td>Eat Cheap: Price Comparison Brochure</td>
<td>Demonstrating the ability to purchase healthier and cheaper alternatives</td>
<td></td>
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<tr>
<td>#26</td>
<td>Healthy Snacks for the Grandkids</td>
<td>A resource for Grandparents including tips for making healthy food choices that are fun and nutritious. Contains recipe suggestions and healthy party ideas.</td>
<td></td>
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<tr>
<td>#27</td>
<td>Alternative Treats for Grandchildren</td>
<td>A resource for Grandparents including active ideas, fun activities, creative activities, and social rewards to use as an alternative to treats</td>
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<tr>
<td>#28</td>
<td>What’s in Food: Breakfast Poster</td>
<td>Queensland Government, Living Strong initiative, visually demonstrating sugar and fat content of common breakfast foods</td>
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<tr>
<td>#29</td>
<td>What’s in Food: Snacks Poster</td>
<td>Queensland Government, Living Strong initiative, visually demonstrating sugar and fat content of common snack foods</td>
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<tr>
<td>#30</td>
<td>What’s in Food: Dinner Meals Poster</td>
<td>Queensland Government, Living Strong initiative, visually demonstrating sugar and fat content of common dinner meals</td>
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<tr>
<td>#31</td>
<td>What’s in Food: Takeaway Poster</td>
<td>Queensland Government, Living Strong initiative, visually demonstrating sugar and fat content of common takeaway foods</td>
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<tr>
<td>#32</td>
<td>Move and Play Every Day</td>
<td>Physical activity recommendations for 0-5 years</td>
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<tr>
<td>#33</td>
<td>Playtime from 24 months helps your toddler discover</td>
<td>Encouraging healthy development through unstructured and structured play ideas</td>
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<tr>
<td>#34</td>
<td>Australia’s Physical Activity and Sedentary Behaviour Guidelines for 5-12 years</td>
<td>Defining physical activity and sedentary behaviours, explaining the benefits of physical activity, limiting screen time, ideas for getting active</td>
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<tr>
<td>#35</td>
<td>Australia’s Physical Activity and Sedentary Behaviour Guidelines for 13-17 years</td>
<td>Defining physical activity and sedentary behaviours, explaining the benefits of physical activity, limiting screen time, ideas for getting active</td>
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<tr>
<td>#36</td>
<td>Australia’s Physical Activity and Sedentary Behaviour Guidelines for Families</td>
<td>Defining physical activity and sedentary behaviours, explaining the benefits of physical activity, limiting screen time, ideas for getting active</td>
<td></td>
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<tr>
<td>#37</td>
<td>Department of Health: My Physical Activity Planner</td>
<td>Physical activity planner template to give to patients to fill out with their weekly physical activity goals</td>
<td></td>
</tr>
<tr>
<td>#38</td>
<td>Canadian Paediatric Society, Promoting Good Television Habits</td>
<td>Tip sheet for encouraging good television habits throughout childhood development. Also includes the Queensland recommendations for limiting screen time in children.</td>
<td></td>
</tr>
<tr>
<td>#39</td>
<td>Canadian Paediatric Society, How can I set limits on my child’s screen time</td>
<td>Tip sheet helping parents to establish rules around limiting screen time and encouraging the development of healthy screen time habits</td>
<td></td>
</tr>
<tr>
<td>#40</td>
<td>Canadian Paediatric Society, What can I do to help foster my child’s self-esteem?</td>
<td>Tip sheet helping parents to foster a healthy self-esteem in children</td>
<td></td>
</tr>
<tr>
<td>#41</td>
<td>Department of Health: Goal Planner</td>
<td>Includes a template for patients to write their nutritional and lifestyle goals</td>
<td></td>
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<tr>
<td>#42</td>
<td>LCCH: Weekly SMART goals worksheet example</td>
<td>Includes template for eating and drinking, physical activity and other lifestyle goals and example goals</td>
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<tr>
<td>#43</td>
<td>Raising Children Network, Active Listening</td>
<td>Includes tips on the benefits of active listening and how to improve parent active listening skills</td>
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<tr>
<td>#44</td>
<td>Raising Children Network, Negotiating with Teenagers</td>
<td>Outlines the benefits of negotiation, negotiation techniques and using authority</td>
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<tr>
<td>#45</td>
<td>Raising Children Network, Preteen Development</td>
<td>Outlines the common physical, emotional, social changes and changes in relationships observed during preteen development</td>
<td></td>
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<tr>
<td>#46</td>
<td>Raising Children Network, Making family meals enjoyable: six tips</td>
<td>Outlines the benefits of family meals and includes six tips to help make family meals more enjoyable</td>
<td></td>
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<tr>
<td>#47</td>
<td>Raising Children Network, Cooking with Kids</td>
<td>Outlines the benefits of including kids in the cooking process, and how to include kids of different ages in the kitchen</td>
<td></td>
</tr>
</tbody>
</table>
Additional Online Resources Available for Patients

**Patient Education Resources**

*Healthy eating*

1. Lunchbox ideas for busy parents and carers

2. Pick & Mix Lunchbox Ideas

3. Healthy eating for children

4. Multicultural Health Communication Nutrition Resources

*Physical Activity Guidelines*

1. Make your move - Sit less - Be active for life: Australia’s Physical Activity & Sedentary Behaviour Guidelines for Children (5-12 years)
   [http://www.health.gov.au/internet/main/publishing.nsf/content/F01F92328EDADA5B8A2578BF0001E720D/$File/brochure%20PA%20Guidelines_A5_5-12yrs.PDF](http://www.health.gov.au/internet/main/publishing.nsf/content/F01F92328EDADA5B8A2578BF0001E720D/$File/brochure%20PA%20Guidelines_A5_5-12yrs.PDF)

2. Make your move - Sit less - Be active for life: Australia’s physical activity and sedentary behaviour guidelines for 13–17 year olds

3. Move and play every day: national physical activity recommendations for children 0–5 years
   [http://www.health.gov.au/internet/main/publishing.nsf/content/F01F92328EDADA5B8A2578BF0001E720D/$File/Move%20and%20play%20every%20day%200-5yrs.PDF](http://www.health.gov.au/internet/main/publishing.nsf/content/F01F92328EDADA5B8A2578BF0001E720D/$File/Move%20and%20play%20every%20day%200-5yrs.PDF)
4. WHO Recommended levels of physical activity for children aged 5 - 17 years
   http://www.who.int/dietphysicalactivity/factsheet_young_people/en/

Communication and Development Strategies, Parenting Tips

Teenagers

1. Problem-solving with teenagers

2. Difficult conversations with teenagers
   http://raisingchildren.net.au/articles/tricky_conversations.html/context/1100

3. Conflict management with teenagers

4. Encouraging good behaviour in teenagers
   http://raisingchildren.net.au/articles/improving_behaviour_teenagers.html/context/1140

5. Discipline strategies for teenagers
   http://raisingchildren.net.au/articles/discipline_teenagers.html/context/1122

6. Body image: teens
   http://raisingchildren.net.au/articles/body_image.html/context/1064

7. Social & emotional changes in adolescence
   http://raisingchildren.net.au/articles/social_and_emotional_development_teenagers.html/context/1153

Parenting, family behaviours

8. Family rules
   http://raisingchildren.net.au/articles/family_rules.html/context/1122

9. Shifting responsibility to your child
   http://raisingchildren.net.au/articles/responsibility_teenagers.html/context/1101

10. Being a role model
    http://raisingchildren.net.au/articles/role-modelling.html/context/1140

11. Department of Health: Setting goals, and Tips for Setting Goals
    http://healthyweight.health.gov.au/wps/portal/Home/set-goals/setting%20goals/lut/p/a1/nZDLboMwEEV_hU2WlgfzcpYpiYAoeBNVW8q83YLhjRWU_6-JqpUdZG-ZjUj3bIz5mKOM8yVeJWt0HJUoI9m7_GZlezIWsnikB8PIQkooymzSWh7- AFzzeEuI93hvkTf7vZutSy7bRVjkrXSq9gEfk4FxIt19bLVrXcfFYPglfPGq2zqBT4C6flrSkg6hYeKgpYk 6Cs6oaUBik3SHCjNvArYiMJo03sBgez41CyfYu3gbrFCDxPwTfnMgNQ_B5BO4PxoFfx5Aw8y8y8fGPT-1_oj2y6ftfW9M2kuxbpn_4zbWJGXEbxQyh0h6RqRpx91UzDQJoZPTeMlV7MldC77PU/dl5/dS/L2dBiSEv20FBl9nQSEh/

Sleeping behaviours

12. Sleep FAQs
    http://raisingchildren.net.au/articles/sleep_faqs.html/context/1063
13. Sleep better: tips
   http://raisingchildren.net.au/articles/good_sleep_habits_tips.html/context/1063

14. Persistent sleeping problems

15. Sleep & learning
   http://raisingchildren.net.au/articles/sleep_and_learning.html/context/1063

**Younger Children**

16. Self-esteem: different ages

17. 5-6 years: child development
   http://raisingchildren.net.au/articles/child_development_5-6_years.html/context/511

18. 6-8 years: child development

**Parenting Programs**

19. Triple P, Positive Parenting Program
   http://www.triplep-parenting.net.au/qld-uchen/find-help/triple-p-online/toddlers-to-tweens/?itb=52aa16fc56779ac9b2ae91a8b47927ba&gclid=Cj0KEQjwrYbiBRGnY-0luOk89EBeiQAZERS8kFfd9c2AqDr20TW17eRJBTFa1sRG3-9vRXmWQAYNTMAAjVi8P8HAQ