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## APPETITE – “THE CHILD WHO WON’T EAT”

1. Perhaps the most common problem which brings children to the doctor between the ages of 15 months and 8 years is the “child who won’t eat.” Such a problem may have developmental, physical, emotional and nutritional aspects.
2. It is vitally important for you, his parents, to understand that a child’s growth and his appetite are closely related. During the baby’s first 12 months, he tripled his birth weight. No wonder his appetite seemed tremendous. But this surge in growth does not last. Suddenly, a new phase begins. The weight gain during the second year drops to a total of 4 to 5 pounds and the child’s appetite dwindles to parallel this small gain. The appetite of the baby becomes the indifferent, finicky appetite of the toddler. But, just wait! When he is about 8 or 9 years old, he’ll have another growth spurt and you’ll have a hard time filling him up.
3. Along with the normal reduction in the toddler’s appetite, there is a dramatic change in his personality. He becomes more assertive and opinionated toward all activities of life, including feeding. The parents are unable to precisely choose the foods for him as they did during the first year of life. He realizes that he is a separate person with ideas of his own.
4. The child who is constantly coaxed, begged, pleaded with, or threatened about his food will soon develop a complex in regard to eating, especially at mealtime. This will, in turn, lessen an already small appetite. The child whose mealtimes are made unpleasant may learn to vomit unwanted food or may develop a stomach ache after taking in food which is forced upon him. The child may also use the coaxing, forcing and other heroic measures which are directed at him as a means of occupying the center of the family stage.
5. The following are suggestions that we have found useful for the child with a poor appetite. An ultimately successful program, however requires unified family action, carefully planning, and is strictly enforced. Halfhearted measures will not do.
  - a. Do not coax or force your child to eat. The more you fret and urge, the less your child will take and the meals soon become a vicious cycle established at mealtime. Try not even to comment on what is eaten and what is not (this is hard).
  - b. Keep mealtime pleasant. The meal hour is often the only real opportunity for the family to be together. Avoid television during mealtime, since this will only further the child’s disinterest in food.

- c. Make portions small.
  - d. Offer a varied diet. Protein is particularly important for growing children and can be found in meats, eggs, fish, cheese, milk, beans, and peanut butter. The amount of milk, however, should be limited. The young child needs no more than a pint and a half per day and too much milk satisfies the child's hunger without fulfilling his nutritional needs.
6. The young child is not capable of selecting the proper foods instinctively; and the menu, therefore, must be planned by the parents. On the other hand, food dislikes should be respected and he should not be subjected to nagging about eating a plateful of unwanted food.
  7. If your child is not hungry, he should not be forced to eat. If the child leaves the table, however, his decision should be final and he should not be allowed to return.
  8. Snacks at regular times, such as 10:00 in the morning and 3: in the afternoon not only are permissible, but may even be desirable. These snacks, however, should consist of nutritional foods rather than sweets or candy. They should not fill him up or be part of his daily diet.
  9. Do not worry if your child does not seem to be eating a "well balanced diet." In actuality, he probably will be eating a balanced diet from week to week, though it may seem somewhat lopsided from meal to meal or day to day.
  10. There are no appetite stimulant medications that are effective in children, including vitamins.
  11. The appetite problem is a peculiar American institution. It rarely exists in countries where there is insufficient food supply. In such countries, children eagerly eat anything they can find. In America an overabundant food supply plus an overly zealous and conscientious parent can easily create a feeding problem unless common sense, nutritional, and psychological principles are understood and followed.