

Elizabeth Brown

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NFSC 360 Observations

Infant Observation

My first observation was of a 13-month-old boy, Sean. I observed him eating breakfast that was being fed to him by his mother at 8:30 in the morning. He was seated in a high chair in the kitchen of his house. He was sitting up, strapped in to the high chair with a tray on top of him, and had a bib on.

Sean was fed a variety of foods for his meal. He was first given cheerios with a cup full of whole milk. His Mom gave him about 3 tablespoons of cheerios, and he ate all of them while she was preparing the rest of his breakfast. Sean was then given scrambled eggs and strawberries. Both items were cut into bite-sized bits that were easily consumed by Sean. He did not like the eggs very much, and only ate a small amount of what he was given. He was given a large amount at one time, about $\frac{1}{2}$ a cup, but he only ate about 2 tablespoons. He seemed to like the strawberries much more than the eggs. He ate almost all of what was served to him, about 4 tablespoons. After he had eaten a large portion of these two items, his Mom gave him whole-wheat toast with grape jelly. He loved this item, and ate all of what was given to him. He was given about 1 slice of toast, with about 1 tbsp of jelly, and it was all placed on the tray at the same time.

Sean showed many different feeding skills during his mealtime. He finger-fed himself all of the foods that were given to him. He also had good eye-hand-mouth coordination and was able to pick up and put the food into his mouth without difficulty. He demonstrated up and down chewing, although some of the food did drop out of his

mouth if the bite that he took was too large. He also drank out of a cup with a lid, and did not spill out of his mouth.

During his meal, Sean and his Mother interacted often and in a positive manner. His Mom talked to him while she was preparing his food, and praised him for eating. She laughed and smiled at him, and he did the same in response. Although his Mom talked to me often, she made sure he knew she was there and responded to his cues. Sean knows several different sign language signals, and he used several of them while eating instead of saying words. His Mom responded to his signs, especially when he signaled that he was “all done”. She did not force him to eat anymore after he said he was done.

Sean was extremely well behaved throughout the 20 minutes that I observed him eating. He did not fuss or cry, except at the very end when he was impatiently waiting for his face to be wiped off so he could be removed from the high chair. He did seem to get distracted by his Mother’s movement and outside noises, which delayed his eating and caused him to become disinterested for a short time. Other than that, Sean appeared to be enjoying his eating experience and the fact that

This meal did seem to be a learning experience for Sean. He was eating with his hands, drinking from a cup, doing sign language, and learning to listen to his Mom’s verbal cues. It was obvious from his Mother’s feeding that she puts a lot of time and effort into teaching Sean and paying attention to the way he was eating and behaving.

After observing this meal, there is only one major recommendation that I would have for Sean’s Mom. As she was feeding Sean, she gave him all of the food she had prepared at one time. I would recommend that she give him the appropriate serving size of each item, which would be 1 tablespoon, and allow Sean to ask for more of the items that he wants. I do agree that she should feed him the items he tends to like less first, and

the ones that are the most nutritious. If she feeds him in small amounts, he is able to be more in control of his own eating, and learn to ask for more of what he wants to eat and not what is placed in front of him.

In assessing the nutritional value of Sean's meal, it showed that his intakes were high for one meal, compared to his daily reference values. His calorie intake was 35% of his DRI, which is accurate for breakfast, but his protein intake was 85% of his DRI, which is very high for one meal. His vitamin values were also extremely high, which seems unusual based on the amounts he ate. Overall, it appears that he had a hearty appetite for his age, but his size did not show that he is overweight or at risk of being overweight. He may be simply going through a higher growth period.

Preschool Child

For my second observation, I went to the child development lab located on campus. I observed a 4-½ year old girl, Suzie, eating her breakfast. She ate at approximately 9:00 AM, which was about 5 minutes after her mother had dropped her off at the daycare center. She washed her hands, ran over and gave her friend who was playing a hug, and then sat down at the table with 2 other children and 1 student staff member to eat her breakfast.

As soon as she sat down, the staff member asked Suzie what she would like to eat. The choices for today's breakfast were granola, Cheerios, toast with peanut butter, fresh pears or bananas, and 2 % milk. Suzie already had a bag open that she had brought from home, which contained three cut-up pieces of blueberry muffin, the equivalent of

approximately 1 small muffin. Of the other foods offered, she stated that she wanted a sliver of pear, already sliced, a cup of milk, and a piece of toast with peanut butter. She was given a pre-sliced $\frac{1}{2}$ piece of toast, and a spoon with about a tablespoon of peanut butter on it. She then spread the peanut butter on the toast, and ate all of it. She ate the piece of pear she was given, as well as the muffin pieces in her bag. She did not finish her milk at first, but when asked to drink it by the staff member, she did finish it eventually. Overall, she ate approximately $\frac{1}{2}$ cup of milk, $\frac{1}{2}$ piece of wheat bread, 1 tablespoon of peanut butter, $\frac{1}{6}$ of a pear, and 1 small blueberry muffin.

The eating environment for Suzie appeared to be a positive one. She laughed and joked with the other students and staff member as she ate, and appeared to be in a joyful mood. She became easily distracted from eating by seeing what the other children around her were playing with, and a few times had to be reminded to eat by the staff member. There did not seem to be a pressure placed upon her, however, to eat quickly, but she was allowed to enjoy her meal and the other children eating with her. The meal setting appeared to be a familiar one for Suzie, and she knew what was expected of her at the table. She demonstrated polite behavioral and eating behaviors, as well as asking if she could be excused to play before she got up from the table. It was a learning experience because she had to learn to sit at a table to eat, use utensils, drink from a cup without spilling, listen to the instructions of the staff member, and interact with others in an appropriate way.

In watching this meal, I would say that there were very little suggestions or changes that I would suggest. The staff members appeared to be well educated in which types of foods to serve the children, and in what amounts. They served them appropriate serving sizes initially, and allowed the children to ask for more of certain items if they so

desired. They did not pressure the children to eat all of their food, but did ask that they say when they were done so they could be excused. Overall, I felt this was a very accurate meal setting and nutrition-appropriate meal for the age of the children that were being served.

Based on the daily reference values for Suzie's age and size, her intake was lower than it should have been. She consumed roughly 22% of her DRI calories for breakfast. A value around 30% would have been healthier for her growth. Her fat intake was higher than what is recommended for one meal, being roughly 50% of her DRI. I would suggest that she increase her caloric intake of nutrient rich foods, and lower the amount of fat she is consuming. It is not a serious problem if she is going through a lag phase in her growth, but if she is continuing to consume high fat products in the midst of a lowered intake, this could prove to be detrimental in the future.