

Choosing good food

By eating a range of different healthy foods, your child can get the best possible nutrition for growth, development and learning. When children learn about and eat good food from an early age, they can develop healthy habits for life.

- ✓ [What is good food?](#)
- ✓ [The good food groups](#)
- ✓ [‘Sometimes’ foods](#)
- ✓ [Choosing good foods for different ages and stages](#)
- ✓ [Good food choices at any age](#)



What is good food?

Good food means a wide variety of fresh foods from the main food groups – fruit, vegetables, grains, lean meats, fish, poultry and dairy.

Each food group provides different [nutrients](#). That’s why we need to eat a range of foods from across all the food groups.



You might like to check out our handy [illustrated guide to daily food portions](#). It’ll help you work out what your child needs to eat for good health every day.

The good food groups

Fruit and vegetables

Fruit and vegetables help protect your child’s body against all kinds of diseases. This is because fruit and vegies provide energy, [vitamins](#), [antioxidants](#), [fibre](#) and water.

Children aged 4-8 years need to eat at least one piece of fruit and two servings of vegies every day. Instead of giving your child full serves (one serve equals half a cup) of just two vegetables, you might want to consider including several smaller serves of vegetables for more variety.

Choosing different-coloured fruits and vegetables is a great way to get a good range of nutrients.



It can be really difficult if your child is ‘fussy’ with fruit and vegies – many kids don’t eat enough of these foods. In fact, one survey found that only 5% of kids eat the recommended amount. For ideas and information, you could have a look at our article on [getting your child to eat vegetables](#).

Starchy foods and grains

Starchy foods and grains give your child the energy she needs to grow, develop and learn. These foods include cereals, breads, rice, pasta and noodles. It's a good idea to offer them at every meal.

Starchy foods with a low [glycaemic index](#), such as pasta and wholegrain bread, will give your child long-lasting energy.

Lean meats, fish and poultry, and meat alternatives

Lean meat, fish, chicken and meat alternatives such as eggs, beans (legumes), tofu and nuts give your child [iron](#), [zinc](#), [vitamin B12](#), [omega-3 fatty acids](#) and [protein](#) for growth and muscle development.

Iron and omega-3 fatty acids are particularly important for your child's brain development and learning.

Milk and other dairy products

Milk, cheese and yoghurt are high in protein and [calcium](#), which helps build strong bones and teeth.

When your child's a baby, breastmilk or formula is the best milk until he's 12 months old. After that, he can start drinking full-fat cow's milk before switching to low-fat milk after he turns two.

To get enough calcium, children aged:

- 1-3 years need 1-2 cups of milk or dairy serves a day
- 4-8 years need three dairy serves a day
- 9-13 years need 3-4 dairy serves a day
- over 13 need 4-5 dairy serves a day.

A serve of dairy can be one cup of milk, two slices (40g) of cheese or a 200g tub of yoghurt.

Water

Water's the best drink for your child.

Sweet drinks – which include fruit juice, cordials, sports drinks, flavoured waters, soft drinks and flavoured milks – can fill your child up with sugar. This might mean she won't want to eat her meals.

Drinking sweet drinks can also contribute to weight gain and [obesity](#) and [tooth decay](#). If kids start on these drinks when they're young, it can kick off a lifelong habit.

'Sometimes' foods

'Sometimes' foods include chips, chocolates, lollies, cakes, pastries, muesli bars, soft drinks, juices and takeaway foods – basically anything that's high in sugar, salt and/or fat, and low in nutrition.

It can be easy to eat too many 'sometimes' foods. The important thing is to find a balance – no more than 1-2 small serves of 'sometimes' foods a day is plenty.

Choosing good foods for different ages and stages

Babies

Going from drinking breastmilk or formula to eating family meals takes time, and [starting your baby on solids](#) is the first step.

Many parents start their children off with some rice cereal at about six months or so. From this, you can move on to mashed vegies, fruit and meat, and toast fingers. By about eight months, many babies are ready for some cheese or yoghurt. By 12 months, your baby can try most healthy foods your family's eating.

You might like to read more about [baby nutrition](#).

Toddlers

Lots of parents describe their toddlers as ['fussy' with food](#). This can make mealtimes stressful, especially if you're worried your toddler isn't eating enough.

Your toddler might seem to eat less than when he was a baby, which is because he's growing more slowly. But he still needs regular meals and snacks – three meals and several snacks every day. The key thing to remember with toddlers is that [you decide what your child eats, and he decides how much](#).

You can offer lots of variety from the main food groups, but try to limit 'sometimes' foods as much as you can.

It's also a good idea to avoid bottles for your toddler. Using a bottle is associated with [iron deficiency anaemia](#) and could be linked to a higher risk of overweight and obesity.

For more information, you can read our article on [toddler nutrition](#).

Preschoolers

Your preschooler needs lots of energy for play and learning. A [good breakfast](#) is important – it helps your child get a good start to her daily nutrition needs.

Your child might still be a fussy eater at this age. If he's not keen on trying new foods, you could get him to help you with choosing and preparing healthy family meals. When children have a say in their food, they're more likely to eat it.

You might like to read more about [preschooler nutrition](#).

School-age children

At this age, your child might have a busy social life, her own pocket money to spend and some definite preferences when it comes to food. She'll also be influenced by friends and trends, so it's a great time to reinforce messages about healthy foods.

For example, you can explain to your child that a healthy breakfast can help him concentrate on his schoolwork and have lots of energy for the day.

Sharing healthy meals and snacks with your school-age child can encourage her to eat nutritious food and to develop a regular eating routine.

When you're packing [your child's lunch box](#), healthy variety is the way to go. You might include vegies, fruit, a dairy food, meat or egg, starchy food (bread, roll, pita, or flat bread) and water.

For more information, you can read our article on [school-age nutrition](#).

Secondary school

Your adolescent child will explore his increasing independence through his food choices. He'll also experience lots of new pressures in his life. All of this makes healthy family meals and role-modelling important during this time.

Good food choices at any age

You're a big part of helping your child choose nutritious foods at every age and stage. Some of the best – and most enjoyable – ways to set and reinforce healthy eating habits include the following:

- Involve your child in meal-planning and preparation.
- Enjoy meals together as a family regularly – every night if possible.
- Try to have a bowl of fruit or veggie sticks available for snacking.
- Increase variety whenever possible and keep offering good foods.
- Stock your pantry and fridge with lots of healthy, nutritious options, and leave the sometimes food on the supermarket shelves.



Add to favourites



Create PDF



Print



Email

Rated  (28 ratings)

More to explore

- ▶ Nutrition and fitness: the basics
- ▶ Food & recipes
- ▶ Healthy habits for a healthy life: 12 tips
- ▶ Vitamins and minerals
- ▶ Good fat and bad fat: the basics

GLOSSARY

nutrients

Substances that help with growth and metabolism. They include three essential categories: proteins, carbohydrates and essential fats. They also include vitamins, minerals and other components, some of which have antioxidant properties.

vitamins

Organic compounds found in foods. Vitamins are essential to normal physical functioning and healthy living. Lack of vitamins will quickly affect your health. Deficiency in a specific vitamin usually corresponds to specific health issues and diseases.

anti-oxidants

Substances found especially in dark and colourful vegetables, including beans and spinach. Anti-oxidants contribute to good health by counteracting the cell damage caused by harmful compounds known as free radicals. Antioxidants are thought to decrease the risk of cancer and other diseases. Eating a broad range of fruits and vegetables is the best way of ensuring you get enough antioxidants in your diet.

fibre

The parts of vegetables, fruit and cereal that can't be digested. Fibre plays an essential role in keeping our digestive systems healthy. It also helps to lower glucose and cholesterol levels. Adequate fibre intake can help to prevent bowel cancer, diabetes, heart disease and constipation.

iron

An essential mineral that carries oxygen around the body. It is needed for absorption of B vitamins, calcium and copper. It also boosts immune function. It is found in red meat, wholegrain cereals, liver, kidney, eggs, shellfish, nuts, soy, dark-green vegetables and dried fruit.

zinc

An essential trace mineral needed for healthy skin, bones and teeth and also for normal development of the brain and nervous system. Zinc is found in seafood, nuts and seeds, wholegrain cereals, pulses, sardines, beef, milk and green vegetables.

vitamin B12

A vitamin important for the creation of red blood cells and healthy nerve tissues. It is found in meat (especially liver), fish, eggs, dairy produce, yeast extract and seaweed. Untreated B12 deficiency can result in anaemia and permanent nerve and brain damage.

omega-3 fatty acids

One of the types of essential fatty acids needed to build and repair skin and other tissues in the body as well as for healthy functioning of immune and nervous systems. Omega-3 fatty acids are found in oily fish such as salmon, herring, mackerel, anchovies and sardines, and also in some seeds. Fish oil can be taken as a supplement. The other type of essential fatty acid is omega-6.

protein

An organic compound made up of amino acids and essential for the structure and survival of all living cells. Without protein, we can't grow. Protein deficiency causes tiredness, hair loss, decreased muscle mass, low body temperature and hormonal changes. Protein is found in meat, fish and eggs, as well as dairy products, legumes and wholegrain cereals.

calcium

An essential mineral needed for healthy bones and strong teeth. Sources include dairy products; beans and bean products (like tofu and soy milk); nuts and seeds (including tahini and almond butter); sardines, prawns and salmon (including the tinned and cured versions); oranges; seaweed; wholegrain cereals; and leafy greens.

iron deficiency anaemia

A condition that occurs when the level of haemoglobin in the blood is lower than it should be, because of a low level of iron in the body. It usually happens when children don't get enough iron in their diets. Iron is essential for your child's body because it helps form haemoglobin.

Last Updated
23-09-2011

Last Reviewed
16-09-2011

Addressi, E., Galloway, A., Visalberghi, E., & Birch, L. (2005) Specific social influences on the acceptance of novel foods in 2-5 year old children. *Appetite*, 45, 264-271.

Agostoni, C., Decsi, T., Fewtrell, M., Goulet, O., Kolacek, S., Koletzko, B., et al. (2008). Complementary feeding: A commentary by the ESPGHAN Committee on Nutrition. *Journal of Pediatric Gastroenterology and Nutrition*, 46, 99-110.

Australian Government Department of Health and Ageing (2007). *Nutrition and healthy eating: 2007 Australian Children's Nutrition and Physical Activity Survey*. Canberra: Commonwealth of Australia. Retrieved August 11, 2011, from <http://www.health.gov.au/internet/main/publishing.nsf/Content/phd-nutrition-childrens-survey-keyfindings>.

- Birch, L.L., & Fisher, J.O. (1998). Development of eating behaviours among children and adolescents. *Pediatrics*, 101, Suppl. 3, S539-549.
- Bonuck, K.A., Huang, V., & Fletcher, J. (2010). Inappropriate bottle use: An early risk for overweight? *Maternal & Child Nutrition*, 6, 38-52.
- Brotanek, J., Halterman, J., Auinger, P., Giores, G., & Weitzman, M. (2005). Iron deficiency, prolonged bottle-feeding, and racial-ethnic disparities in young children. *Archives of Pediatric Adolescent Medicine*, 159, 1038-1042.
- Fiorito, L.M., Marini, M., Mitchell, D.C., Smiciklas-Wright, H., & Birch, L.L. (2010). Girls' early sweetened carbonated beverage intake predicts different patterns of beverage and nutrient intake across childhood and adolescence. *Journal of the American Dietetic Association*, 110, 543-550.
- Fisher, J., Rolls, B., & Birch, L.L. (2003). Children's bite size and intake of an entrée are greater with large portions than with age-appropriate or self-selected portions. *American Journal of Clinical Nutrition*, 77, 1164-1170.
- Fox, M., Devaney, B., Reidy, K., Razafindrakoto, C., & Ziegler, P. (2006). Relationship between portion size and energy intake among infants and toddlers: Evidence of self-regulation. *Journal of the American Dietetic Association*, 106, S77-83.
- Grant, C., Wall, C., Brewster, D., Nicholson, R., Whitehall, J., Super, L., et al. (2007). Policy statement on iron deficiency in pre-school aged children. *Journal of Paediatrics and Child Health*, 43, 513-521.
- Gussy, M.G., Waters, E.G., Walsh, O., & Kilpatrick, N.M. (2006). Early childhood caries: Current evidence for aetiology and prevention. *Journal of Paediatrics and Child Health*, 42, 37-43.
- Hoyland, A., Dye, L., & Lawton, C. (2009). A systematic review of the effect of breakfast on the cognitive performance of children and adolescents. *Nutrition Research Reviews*, 22, 220-243.
- Kohn, M. (2003). *Newspoll survey for Kellogg's Australia & New Zealand: Fussy eaters*. Retrieved July 18, 2011, from <http://www.kellogg.com.au/Home/Products/Cereal/RiceBubbles/FussyEatersResearch/tabid/479/Default.aspx>.
- Lock, K., Pomerleau, J., Caser, L., Altmann, D.R., & McKee, M. (2005). The global burden of disease attributable to low consumption of fruit and vegetables: Implications for the global strategy on diet. *Bulletin of the World Health Organisation*, 83(20), 100-108.
- National Health and Medical Research Council (2003). *Dietary guidelines for children and adolescents*. Canberra: Australian Government Publishing Service.
- National Health and Medical Research Council (2006). *Nutrient reference values for Australia and New Zealand*. Canberra: Australian Government Publishing Service.
- Neumark-Sztainer, D., Eisenberg, M.E., Fulerson, J.A., et al. (2008). Family meals and disordered eating in adolescents. *Archives Pediatric Adolescent Medicine*, 162(1), 17-22.
- Rangan, A.M., Randall, D., Hector, D.J., Gill, T.P., & Webb, K.L. (2008). Consumption of 'extra' foods by Australian children: Types, quantities and contribution to energy and nutrient intakes. *European Journal of Clinical Nutrition*, 62, 3560-3564.
- Savage, J., Orlet Fisher, J., & Birch, L.L. (2007). Parental influence on eating behaviour: Conception to adolescence. *The Journal of Law, Medicine and Ethics*, 35, 22-34.
- Savidge, G.S., Ball, K., Worsley, A., & Crawford, D. (2007). Food intake patterns among Australian adolescents. *Asian Pacific Journal Clinical Nutrition*, 16(4), 738-747.
- Sjoberg, A., Hallberg, L., Hoglund, D., et al. (2003). Meal pattern, food choice, nutrient intake and lifestyle factors in the Goteborg Adolescence Study. *European Journal of Clinical Nutrition*, 57, 1569-1578.
- Skinner, J.D., Ziegler, P., Pac, S., & Devaney, B. (2004). Meal and snack patterns of infants and toddlers. *American Dietetic Association*, 104(1), S65-70
- Whittaker, R.C. (2003). Obesity prevention in pediatric primary care: Four behaviours to target. *Archives Pediatric and Adolescent Medicine*, 157, 1050-1055.
- Williams, P. (2007). Breakfast and the diets of Australian children and adolescents: An analysis of data from the 1995 National Nutrition Survey. *International Journal of Food Science and Nutrition*, 58, 201-221.