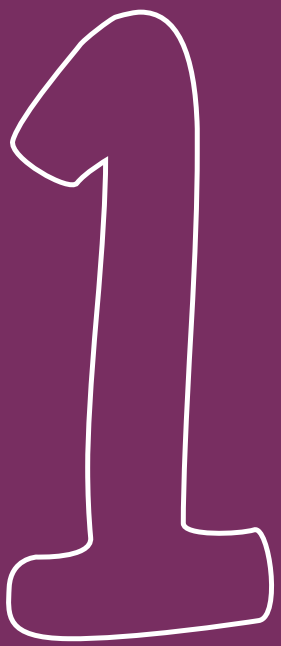
SECTION 1

Appetite Regulation



Appetite regulation

Why is it important to notice, name and respond to hunger and satiety cues?

The number one reason is **connection**. Naming out loud what a child feels shows the child you acknowledge them and builds connection between the adult and child.

EARLY YEARS LEARNING FRAMEWORK	NATIONAL QUALITY STANDARD
Outcome 1, Outcome 3	**QA2, QA5**

Other reasons:

- **Health:** Naming cues helps children to stay in touch with their own hunger and satiety cues. Children are very good at following their own cues, and we want to support them to continue to keep this ability throughout childhood and into adolescence and adulthood. Supporting children to eat because of hunger (not other reasons, such as being bored or upset) and stopping eating when they have eaten enough, supports continued growth and a confident relationship with food.
- **Learning:** Just as we talk to children about all kinds of objects, scenarios and emotions to support language and social development, mealtimes and eating are another setting to do this.

Recognising hunger cues across development: what helps and what gets in the way

Children are born with a very good ability to recognise and follow their hunger and satiety cues. This begins in the newborn period when families are encouraged to pay attention to and respond to their infant's feeding cues, offering a milk feed whenever the infant shows signs they are hungry, and allowing them to feed for as long as they desire. When infants start to eat solid foods, the process of eating and feeding becomes more complex as the infant develops a new set of skills. Young children should be given the space to learn to eat when they are hungry and stop when they have eaten enough. Growth is not linear – children do not grow or gain weight at the same rate every day. Because children grow in spurts, they will be hungrier on some days (and eat more) than on other days to meet their needs for growth. This also means that children may eat more at some mealtimes than others – some children might eat more in the morning, then less in the afternoon. Some children will eat sparingly in the morning but eat more in the afternoon and evening.

Adults may not always understand or feel confident reading children's cues, or they may override cues because they are worried the child is not eating enough or eating too much, or they are worried the child is too small or too big.

These responses are often shaped by adults' own upbringing, cultural norms, and previous experiences, rather than a lack of care or concern.

We can inadvertently train children out of following their natural hunger and satiety cues by using non-responsive feeding practices (sometimes called coercive feeding). Examples of non-responsive feeding practices include pressuring a bottle fed infant to finish all of the breastmilk or formula in their bottle, encouraging a child to eat more because we don't think they have had enough, or they have not finished all of the food on their plate, using food as a bribe to eat a less-preferred food or as a reward for good behaviour, or using food to soothe a child who is upset.

The types of foods children are offered may also mean they ignore their own cues. Children are born with a preference for sweet food because breast milk and infant formula is sweet, and they will naturally choose these over more bitter foods such as vegetables. The biological drive to eat sweet foods can outweigh the other part of our brain that is telling us we have had enough. It may not happen for everybody all the time, but it is an important factor. This is why ECEC is an important setting for offering food consistent with the Australian Dietary Guidelines.

EARLY YEARS LEARNING FRAMEWORK	NATIONAL QUALITY STANDARD
Outcome 3	**QA2**

Food insecurity

It is important to note that for **children who have experienced not having enough to eat**, they might eat whatever amount is available to them whenever they have access to food. It is important to ensure that children and families with previous or current experience of food insecurity have appropriate support in place to stabilise their access to food as much as possible.

We also need to understand that some ECEC staff may themselves be experiencing food insecurity. Educators may be under financial stress themselves, and some report giving children food from their own lunch or going without food during the day so children can eat. While this comes from deep care, it is not sustainable or fair and can add to educator stress, fatigue and burnout. Educators or other staff should not be expected to meet children's food needs from their own lunch or wages; food security is best addressed through service-wide policies, budgeting and, where relevant, advocacy for improved funding and standards.

Self-regulation: What are the components, and how can this be developed in young children with varying abilities?

Appetite self-regulation is knowing when you are hungry and to start eating; when you have eaten enough during a meal and to stop eating; and knowing between meals that you are not yet ready to eat again. Many factors influence our ability to tune into and follow these internal cues.

Figure 2 maps these factors across three levels, including those to consider (e.g. genetics, pregnancy environment), those to respond to (e.g. temperament, trauma), and those to act upon (e.g. feeding practices, food being offered).

Emotional dysregulation is a nervous system response that can lead to hyperarousal (fight or flight) or hypoarousal (freeze) responses. In some children (e.g. those who have lived through maltreatment, violence, significant fear events), this type of dysregulation can be severe and can impact behaviour and engagement while attending ECEC. Children can feel unsafe, may not trust the relationships within ECEC, and may readily emotionally dysregulate.

If this happens around mealtimes, individual considerations and informed responses are vital – to do no further harm. Certain fight or flight responses (e.g. yelling, throwing food, aggression) or freeze responses (e.g. refusing to come to the table, or eat, or talk) can be interpreted as deliberate and defiant – when they are actually neurobiological survival responses to toxic stress.

However, when there is an understanding of what a dysregulated nervous response is – why it happens, and what we can do to help – these vulnerable children can be assisted back to a regulated state where they can engage, eat, and play.

EARLY YEARS LEARNING FRAMEWORK
Outcome 1, Outcome 3

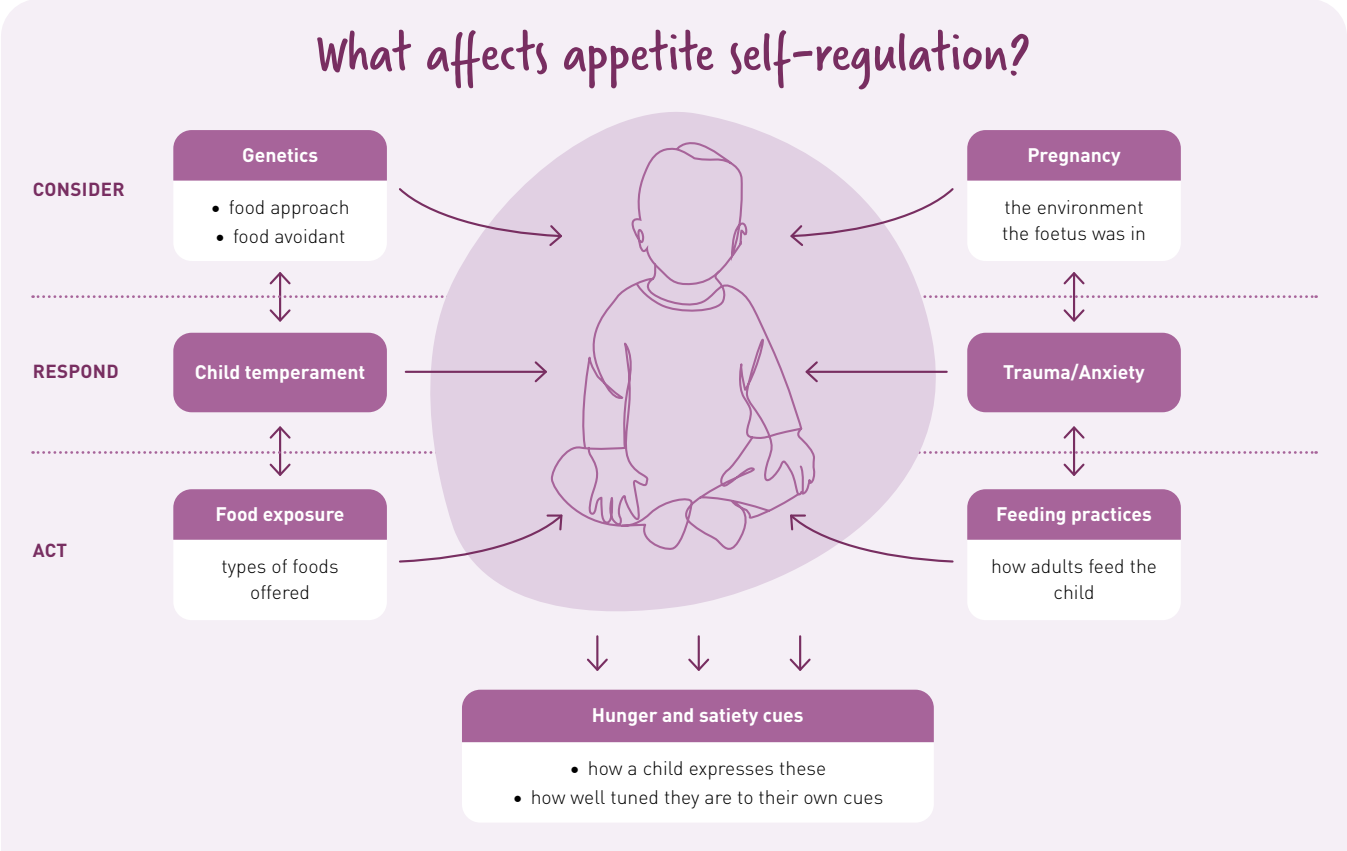
NATIONAL QUALITY STANDARD
QA5

Reflective questions

Educators

- *Think about a child in your care. What hunger and 'had enough' cues have you noticed?*
- *What are some examples of how you currently respond to children's hunger and 'had enough' cues? What are some actions you could take to strengthen your practices?*
- *How do you create an inclusive environment where each child's appetite and varying abilities are respected?*

FIGURE 2: *What affects appetite self-regulation?*



How are young children's developmental eating practices influenced by disability or neurodivergence?

Children with disability may express hunger and satiety cues in different ways (e.g. non-speaking). As adults, we should behave the same way as we would with any child, i.e. notice, name and respond to cues, and use responsive feeding practices. Adults may need to make more modifications to the environment to support children with disability to recognise and respond to their own cues.

Ask yourself the following questions:

- *Is the mealtime atmosphere reasonably calm?*
- *Does seating support their body adequately?*
- *Are plates, cutlery and tablecloths suitable for their use?*
- *Is the texture of food appropriate?*
- *Are children being offered foods that they feel comfortable with?*

Occupational therapists and speech pathologists can provide wonderful support with identifying what is needed.

Neurodivergence includes areas of disability such as developmental delay and autism, but also can include the neurodevelopmental impact on nervous systems of children who have lived through maltreatment and violence.

Individual developmental and/or emotional and/or sensory issues that might impact appetite regulation need to be considered and addressed. This can include attention to food aversions, anxieties that stem from a range of sources (including trauma, food insecurity, medical procedures and concerns, allergic reactions, disability, etc.), and timeframe requirements that might not suit all children. Most children will be okay with generalised procedures, but there needs to be general staff awareness and acceptance that particular children will need an individualised and informed approach.

It is important that staff understand that hyperarousal or hypoarousal of the nervous system can impact digestion and toileting, and therefore appetite and even the capacity to engage in eating. Dysregulated children need help with emotional co-regulation before their bodies and brains are settled enough – so that they can feel hungry and want to eat, and can eat.

EARLY YEARS LEARNING FRAMEWORK	NATIONAL QUALITY STANDARD
Outcome 1	**QA6**

Reflective questions

Cooks/Nominated supervisor

- *How does this service's approach to menu planning, preparing and serving meals encourage children to eat according to their needs?*

Enteral feeding

For some children, medical or enteral (tube) feeding (such as gastrostomy tubes) will also shape how they participate in mealtimes. Children who are tube-fed can, and should, be fully included in the social and relational aspects of mealtimes. While gastrostomy feeding may alter the traditional experience of eating alongside peers, research shows it enables improved nutrition, energy, and broader participation in play and early education when managed inclusively.[5]

Educators should maintain inclusive routines by seating tube-fed children with peers, offering safe opportunities for sensory participation (e.g., smelling, handling, or serving food), and using Augmentative and Alternative Communication (AAC) or visuals to support communication. Further, for children who are partially tube-fed, they should be offered foods that are appropriate for their needs with no pressure to eat. Collaborating with families and health professionals ensures tube feeding is integrated safely into the daily rhythm without excluding children from shared moments. Respect for the child's dignity, autonomy, and right to participate should guide planning and language around feeding.

EARLY YEARS LEARNING FRAMEWORK	NATIONAL QUALITY STANDARD
Outcome 1, Outcome 5	**QA5**

Reflective questions

Service leadership team

- *Are any of these concepts new to you or your team? If so, what challenges you/them? Why? What further learning do you and your team require?*
- *Who do you need to discuss this with to suggest this as required support?*

The principles and strategies in Sections 2, 3, and 4 are relevant for all children. For specifics on bottle feeding or feeding babies, see the Menu and Meal Quality module.

SECTION 2

Responsive Feeding, and Hunger and 'Had Enough' Cue Recognition



Responsive feeding

In ECEC settings, how a child is offered food is equally important as which foods a child is served to eat. Offering food to a child involves caregivers responding to the child's individual needs.[6,7]

Consistent, responsive interactions between a child and their caregiver in early life are crucial in shaping lifelong learning, behaviour, and health.[8] Mealtimes provide a valuable opportunity for caregivers and children to engage in supportive, health-promoting interactions.[9]

Feeding practices versus Responsive feeding practices

Feeding practices can be defined as techniques that caregivers employ with children during mealtimes to ensure that children consume the type or amount of food the caregiver deems appropriate.[6,10]

Responsive feeding practices shifts this focus and control to the child. Responsive feeding practices recognise, respond appropriately, and trust children's body cues at mealtimes.[6,7,9,11] Responsive feeding practices encourage the child to eat independently and in response to their individual physiological and developmental needs, which may encourage self-regulation when eating whilst also supporting cognitive, emotional and social learning and development.[6,7] Responsive feeding can be considered as a core element of nurturing and care.[7]

Responsive feeding approach

Responsive feeding follows three steps:

1. The child signals hunger or satiety (the satisfied feeling when you have 'had enough' food) through motor actions, facial expressions, or vocalisations.
2. The caregiver recognises the cues and responds promptly in a manner that is emotionally supportive, in response to the signal, and developmentally appropriate, e.g. helps the child access another helping if they are still hungry.
3. The child experiences a predictable response to signals. This last step is important for building trusting relationships as well as supporting individual cues.[7]

Responsive feeding may look different depending on the child's age, developmental stage and individual abilities.

The following two concepts are also useful to understand a Responsive Feeding approach:

Division of responsibility refers to the responsive feeding relationship where the caregivers are responsible for the developmentally appropriate structures and routines of feeding (the 'what', 'where' and 'when' of meals served). The child is responsible for whether or not they will eat, and how much of the meal they will eat.[12,13]

Self-Determination Theory (SDT) is a well-researched framework for understanding motivation and optimal development. In the context of child feeding, SDT provides a useful lens for responsive feeding practices in that it highlights three core psychological needs:

- autonomy – feeling a sense of choice and control
- competence – feeling capable and effective
- relatedness – feeling connected and supported by others

When these needs are met, children are more likely to develop intrinsic motivation to eat, self-regulate effectively, and build a positive relationship with food.[14]

Reflective questions

Educators

- *What do responsive feeding practices currently look like in your service? What strategies are working well? What would you like to improve?*
- *How can you involve children in evaluating the success of mealtime practices? How can you include their voices?*

EARLY YEARS LEARNING FRAMEWORK	NATIONAL QUALITY STANDARD
Outcome 1, Outcome 3	QA5

Responsive feeding strategies

There are key strategies that form part of a Responsive Feeding approach. The following strategies are how an educator can support a responsive feeding approach in their service and during mealtimes.

Responsive Feeding Strategies to adopt

See Table 2 over page for more examples.



Create a relaxed, enjoyable mealtime atmosphere and recognise that children eat at different speeds.



Many children benefit from mealtime structure and clear expectations; however, some children need a flexible approach and to be able to eat outside of usual mealtimes.



Sit, be present and actively engage with children.



Place food and beverages in common serving containers and allow children to serve themselves what and how much they would like to eat.

Note that this strategy is not suitable where there are children with food allergies, unless the food served is appropriate for all children with food allergies present at that mealtime.



Use specific, individualised feedback during mealtimes that focuses on what the child is doing, not on how much or what they eat.

For example, "I noticed you were eating so well with your spoon today", rather than "Good job for eating all of your broccoli".



Help children recognise their internal hunger and 'had enough' cues, for example, when a child is too busy to eat – help the child to recognise and name internal cues.

For example, "Looks like your tummy is saying 'all done'."



Provide guided choices but let children decide what and how much of the food offered they will consume.

For example, "Let's share these so that everyone who wants some can have some".

See Section 5, page 41



Model feelings of 'had enough' and hunger.

For example, "I'm noticing I've had enough; I'll eat again next time I'm hungry."



Encourage rather than praise children when they try new foods or food that they dislike. Comments should not be about the character of the child, but about the action.

Things to avoid

See Section 2, page 23



Do not use food as a reward for behaviour; Avoid using foods to soothe children when they are upset.



Do not pressure children to eat.



Do not withdraw food from children or make judgements about food provided by families in lunchboxes.

Unless there are immediate safety concerns.

The following examples demonstrate how responsive feeding can be put into practice.

TABLE 2: *Responsive feeding strategies examples*

Strategy	Examples
Create a relaxed, enjoyable mealtime atmosphere and recognise that children eat at different speeds.	• Children may eat at different speeds; some are slow, and some are fast. • It is beneficial to create a relaxed mealtime, with safe access to sensory supports for those children who need them. The intent is not that every meal has to be 'enjoyable' or 'fun', rather mealtimes are a more relaxed and enjoyable experience when adults use responsive feeding practices and recognise and respond to child cues.
Many children benefit from mealtime structure and clear expectations; however, some children need a flexible approach and to be able to eat outside of usual mealtimes.	• Ensure water is always available. • Allow time to transition so the mealtime is not rushed, and have predictable windows for eating. • Expectations and routines are great and provide stability and security for many children, but all children may sometimes need a flexible approach for varying reasons. • Work with individual care plans (e.g. medical, additional needs, trauma, or neurodivergence) where children may need more frequent or flexible access to food. • Offer early/late other food options (e.g. fruit, vegetables, or milk) for children who are genuinely hungry outside the main eating window, so hunger is responded to.
Help children recognise their internal hunger and 'had enough' cues, for example, when a child is too busy to eat – help the child to recognise and name internal cues (for example, "Looks like your tummy is saying 'all done'. You listened well.").	• Respecting children's decisions (e.g. no requirements to finish their plate or try a new food). - Invite children to pause and notice, e.g. "Let's listen to your body for a moment, does it feel like you need more, or is your tummy saying it's had enough?" - Use simple, age-appropriate language to help children notice and name hunger and 'had enough' cues, that consider developmental differences. • Recognising that some children will need to be emotionally regulated to be able to recognise and respond to these cues. • Gently check in with busy children who want to return to play, supporting them to decide if their body needs more food or a break. • Work with families to share similar language about hunger and 'had enough' cues across home and ECEC.
Use specific, individualised feedback during mealtimes that focuses on what the child is doing, not on how much or what they eat. For example, "I noticed you were eating so well with your spoon today", rather than "Good job for eating all of your broccoli."	• Sit with children at mealtimes, be present, and actively engage in conversation while supervising. • Plan routines to support uninterrupted mealtime presence of staff, especially when staffing is limited – e.g. Family Day Care changing nappies before mealtimes so educators can remain with children eating.

EARLY YEARS LEARNING FRAMEWORK
Outcome 1, Outcome 2, Outcome 3, Outcome 4, Outcome 5

NATIONAL QUALITY STANDARD
QA1, QA2, QA3, QA5

Non-responsive feeding practices

Non-responsive feeding practices occur when caregivers ignore or misinterpret child hunger and satiety cues, leading to behaviours that pressure, force or manipulate children into eating certain foods or amounts of food.[6]

Why this matters

Recognising non-responsive feeding patterns empowers educators to strengthen children's natural ability to self-regulate and trust their bodies. These practices are common and often stem from caring intentions to ensure children eat well. By building awareness of how certain approaches may affect children's connection to their internal cues, educators can intentionally choose responsive strategies that honour children's autonomy and support their learning, development, and wellbeing.

Non-responsive feeding practices generally come from good intentions; however, they can have a significant negative impact on children's ability to develop awareness of their body signals and to build positive skills and attitudes for eating. At their extreme, coercive practices can send children messages that make them unsafe, such as believing that adults will not listen to them if something does not feel good.

Below are examples of coercive or controlling feeding practices which should be avoided in day to day practice:

Talking about food using moral language

EXAMPLE

'good', 'bad', 'naughty', 'cheeky'

Linking behaviour with food

EXAMPLE

"you are a good boy/girl for eating the cucumber"[16]

Assuming you know a child's hunger or satiety levels[6]

Treat/speak to children differently based on their body composition[17,18]

Use words like 'should' when referring to eating

EXAMPLE

"I should eat my fruit, I shouldn't be eating this"

Pressuring to eat or pressuring a child to finish all the food on their plate[6,17,18]

Using food as a reward or punishment[6,16]

EXAMPLE

"you can have dessert if you finish your vegetables" or "you can only eat the muffin in your lunchbox once you have finished your sandwich."

Using food to regulate emotions, such as offering food to children to calm them when they are upset[6,16]

Use food to encourage or discourage specific behaviours[16]

EXAMPLE

"if you behave well, you can have a lollipop."

Inadvertently misleading children about the purposes, functions or outcomes of eating certain foods

EXAMPLE

"eat your crusts for curly hair", or "you'll get fat if you eat that."

Hunger and 'had enough' cue recognition

RECOMMENDATION STATEMENT

Use 'had enough' instead of 'full' when referring to hunger and satiety cues

Throughout this Best Practice Guide, you will find information on identifying and responding to cues that infants and young children may present when they are 'hungry' or have 'had enough' to eat.

The term 'had enough' has been deliberately used instead of the commonly used term 'full'.

In Australia, many of us will say 'I'm full' at the end of a meal, which may imply that we could not fit any more food into our stomachs. Sometimes, feeling 'full' can also be uncomfortable if we have eaten too much, and it might mean we have eaten more food than our bodies require to be replenished and satisfied.

By using the term 'had enough' throughout this Guide and when speaking to young children, we encourage children to listen to their bodies and stop eating once they are comfortable – rather than waiting until they feel like they could not fit any more food in. *See Section 1, page 16*

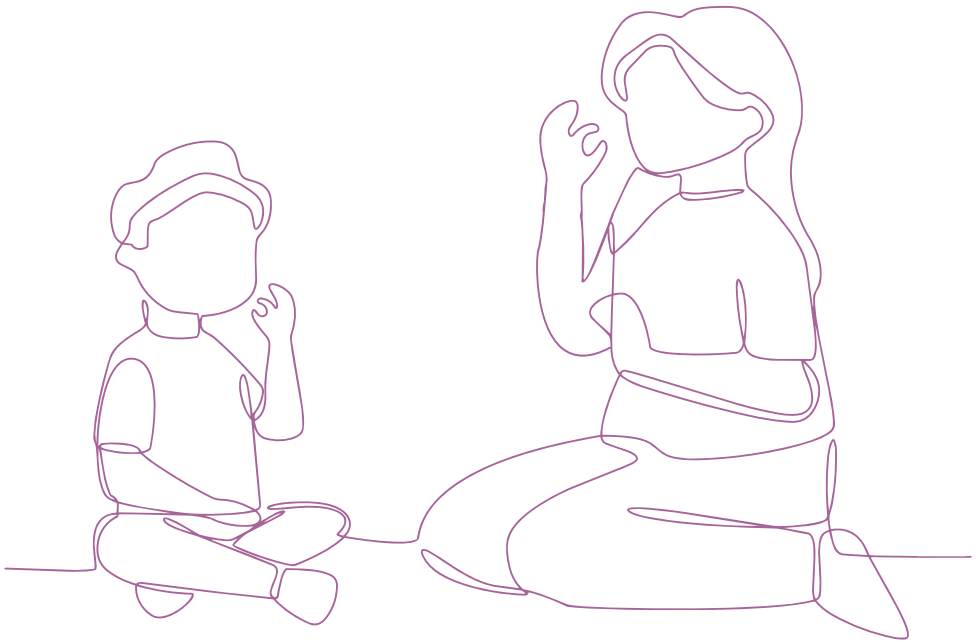
Remember that the amount of food someone needs can vary; 'enough' will look different at different mealtimes, on different days, and across different contexts.

Educators should use this same language when talking about their own eating. For example, "I've had enough, I'll eat again when I'm hungry" rather than "I'm so full." When children hear educators use this language naturally, it reinforces that listening to our bodies is how everyone eats, not just a rule for children.

Reflective questions

Cooks/Nominated supervisor

- *How does our menu planning and food service support responsive feeding strategies?*



Strategies to support the development of hunger and 'had enough' cue recognition

The following environment and practice-based strategies support a child's development of cue recognition:

Engaging with, listening to and observing children helps educators recognise hunger and 'had enough' cues.

- Children will tell you if they are hungry or have 'had enough' via verbal (e.g. 'I don't want anymore') and non-verbal (e.g. pushing food/spoon/bottle away, fidgeting, and turning head away) communication
- Educators need to be aware of cues regarding appetite. This may look different child to child, so it is important educators discuss with families what this looks like for their child.

Structure and routine are calming and regulatory, but flexibility is also needed for certain children for varying reasons.

- Create mealtime structure and routines with clear expectations, but be flexible for children who may not be able to follow these routines for varying reasons.

Using 'had enough' language helps children recognise satiety cues and supports self-regulation, while reducing pressure to eat beyond comfort.

- When checking in with infants and young children, use 'had enough' language.
  - Example prompts include: 'Would you like more food, or have you had enough?', 'Is your tummy telling you it wants a bit more, or has it had enough for now?'
- Keep language neutral and non-judgemental, focusing on body sensations rather than 'good' or 'bad' eating.
- Follow any individual medical or feeding plans and integrate 'had enough' wording alongside those plans.
- For infants and non-speaking children, respond to 'had enough' cues (turning away, slowing down, pushing the spoon or bottle away) and narrate, 'Looks like you've had enough', or 'Looks like you've had what you need for now.'

Provide guided choices but let children decide what and how much of the food offered they will consume.

- Encourage children when they explore or try new foods or foods that they dislike, without pressure. Encouragement rather than praise – should not be about the character of the child, but about the action.
- Place food and beverages in common serving containers and allow children to serve themselves what and how much they would like to eat.
- For lunchbox services, support children to choose from their lunchbox (e.g. inviting them to start with foods of their choice), rather than strictly controlling the order in which foods must be eaten, so children can still honour their food preferences and listen to their own hunger and 'had enough' cues.
- Reinforce that children are allowed to listen to their bodies, even if there is still food on the plate or in the lunchbox.
  - For bottle-fed infants, allowing them to stop a feed without finishing everything in the bottle.

The environmental setup of eating areas and the provision of an appropriate physical and sensory environment allows children to focus on their appetite during mealtimes.

- Mealtimes environment: physical equipment, spatial environment, sensory atmosphere (smells, noise), social atmosphere. Incorporate individual accommodations within the group setting when needed.

Many children benefit from mealtime structure; some need flexibility.

- Predictable mealtimes help many children recognise hunger patterns.
- Some children need to eat outside scheduled times – flexible access to simple foods (fruit, vegetables, bread) ensures genuine hunger is met.
- Watch for growth spurts, illness recovery, or stressful periods when usual patterns may shift.

EARLY YEARS LEARNING FRAMEWORK
Outcome 1, Outcome 2, Outcome 3, Outcome 4

NATIONAL QUALITY STANDARD
QA1, QA2, QA3, QA5

Role modelling strategies to support the development of hunger and 'had enough' cue recognition

Role of the ECEC educator

ECEC educators have the opportunity to be a positive force in empowering a child to better understand and respond to their cues. This can be done by responding in predictable and supportive ways when a child expresses hunger or satiety.[15] Including recognising how their cues change as the child develops, and understanding when hunger is not the reason for a child crying or fussing, to avoid using food as an emotional support tool.[15]

Role modelling to children on how to express their hunger and 'had enough' cues, e.g. equipping children with language and the words to use to express themselves

- Model feelings of hunger and of feeling like you have 'had enough' – including noticing and naming these cues from your body
  - For example: "I'm starting to feel hungry; it's nearly time for lunch", or "My tummy has had enough, so I'm going to stop eating", or "I am still feeling hungry, so I am going to have a second helping."
- Help children recognise their internal hunger and satiety cues. For example, a child may say they are too busy to eat – ask if they are not hungry right now, and that is why they don't want to eat. Offer flexibility and reassure them that food will be available when they are hungry.
- Sit with children where possible, whether or not you are eating at the same time
- Role modelling can also occur without educators having to eat the same food as the children
  - To acknowledge different foods, educators can give a brief, neutral explanation (e.g. an educator with a food allergy may say – "I can't eat that food because I have a food allergy")

Staff member may have their own concerns with food, body image, or following their own cues; this can make role modelling challenging.

There should be no comment on intake; no dieting talk or jokes about bodies. This relates both to adults commenting on children in the service, and to adults commenting on their own or each other's food or bodies in front of children.

Role modelling that there is no one 'correct' portion size

- Model taking an amount that feels right for you and name this briefly, e.g. 'I'll start with this much and see how my tummy feels', or I'll see how my energy levels feel'
- When educators need to serve food for practical reasons, they still check in with the child (e.g. 'Would you like a little or a lot to start with?') and offer the option for more or to stop when they've had enough.
  - This can be difficult when a limited amount of food is provided at a mealtime. To make sure there is enough for everyone, use a standardised serve and encourage children to come back for another serve after finishing their first.

How can appetite self-regulation in children, when eating, be supported in a way that is inclusive and non-judgemental?

- Avoid using food as a reward or punishment, or pressuring children to eat.
- Use specific, individualised feedback during mealtimes that focuses on what the child is doing, not on how much or what they eat, for example, 'I noticed you were eating so well with your spoon today', rather than 'Good job for eating all of your broccoli'
- Do not withdraw food from children or make judgements about food provided by families (unless there are immediate safety concerns)
- Using food as a reward for behaviour is not recommended and is also not appropriate for children experiencing trauma

EARLY YEARS LEARNING FRAMEWORK	NATIONAL QUALITY STANDARD
Outcome 1, Outcome 3, Outcome 5	**QA1, QA2**

Reflective questions

Service leadership team

- *What is your service's approach to creating a relaxed, enjoyable mealtime atmosphere? Is this consistent across your service?*

"I realised when the music is on, the children tend to kind of lower their voice by themselves, without us telling them. They're talking to each other and we exchange a lot of information on what we are going to do at home, what we like to eat and things like that. And I think it's a very positive experience."

– Service leader, Very remote service

"In one of our team meetings we identified that as adults, when you go out for dinner with your friends and family you don't just talk about what's in front of you in terms of your meal, so we like to have lots of conversations to build relationships with children – [mealtime] is an opportune moment for this"

– Educational Leader, Outer regional service

More than the meal: Everyday learning at mealtimes

Mealtimes present many opportunities beyond nutrition, by offering opportunities to come together to foster connection and communication. The mealtime context is an informal, yet powerful site to continue to support belonging, being and becoming through the intentional creation of supportive environments and conversations.

Through discussions across life's spectrum, including educational, social and emotional-related topics, and using supportive language, educators can have a lifelong impact on how a child grows to perceive food and the contexts in which they consume it and associate it with. Therefore, seeking ways to engage the mealtime as an opportunity for learning, communication and connection is paramount.

This module focuses on day-to-day mealtimes and best practices for responsive feeding. However, mealtimes in ECEC hold space for more than eating and nutrition. They are occasions for:

1. Everyday learning
2. Everyday connection
3. Just being

Not every mealtime needs to do all three, and not every child will want or need the same thing at the same time. The aim is to notice what children need and to keep mealtimes low-pressure, responsive and genuinely supportive.

There are also occasions that are different to a typical mealtime in ECEC. Some examples are:

- **Cultural explorations or celebrations and theme weeks as an opportunity to explore diversity**: celebrations (e.g., Harmony Day) can be used to help children understand diverse values and beliefs in the community. This links to 'belonging' as described in the Early Years Learning Framework.[1]
- **Child-based celebration (e.g., birthday):** The focus here is on the celebrated child, not their interaction with food.[19]

With this in mind, services can think about mealtimes through the three lenses on the next page.

EARLY YEARS LEARNING FRAMEWORK
Outcome 1, Outcome 2

NATIONAL QUALITY STANDARD
QA6

Reflective questions

Educators

- *Thinking about your group of children, what opportunities are there for the development of social skills during mealtimes? How could you facilitate this? What teaching strategies would you employ?*

Service leadership team

- *How do your service's mealtime practices honour the cultural traditions and include the food preferences of the children and families in your service? How is this reflected in your service philosophy and enacted in practice?*

Cooks/Nominated supervisor

- *How could you include families' voices in your service's menu planning? What opportunities might there be for you to contribute to supportive mealtime environments and conversations?*

1

Everyday learning

Mealtimes are rich with meaning and learning potential far beyond satisfying hunger and the nutritional value of meals. They naturally create opportunities for children to develop across many areas. These moments emerge organically through the routines and interactions that already happen at the table:

- Social skills[20]
- Language skills[21]
- Cultural awareness and sense of community[22]
- Mathematical learning[23]
- Independence/responsibility[14]
- Relationship building[24]
- Emotional regulation[25]
- Problem solving[26]
- Decision making and agency.[27]

For detailed examples of how mealtimes support learning across different developmental areas, see the *Food Education module*.

2

Everyday connection

Mealtimes offer rich opportunities for relationship building between educators and children, and among peers. When educators sit with children and eat comparable foods, they model calm, respectful, kind interactions. Unhurried conversations, sharing food from different cultural backgrounds, and the simple act of sitting together nurture a sense of community and belonging.

These moments of connection help children feel seen, understood, and valued. Connection at mealtimes is strengthened when educators show genuine interest in children's experiences and create space for children to help one another and share their families' food traditions.

3

Just being

Not every mealtime needs to be a teaching moment or an opportunity to achieve specific goals. Sometimes, mealtimes are simply a time to sit, eat, and 'just be', with no expectation to talk, join in an activity, or try new foods.

For some children, particularly those who need quiet time to regulate or simply rest, this space to 'just be' is vital. Creating room for low-pressure mealtimes acknowledges that:

- children have different sensory, social and emotional needs
- some children may prefer to watch and listen rather than join in
- calm, predictable routines can be as valuable as conversation or curriculum.

Creating room for low-pressure mealtimes acknowledges that children have different needs, and that responding with kindness – including kindness to ourselves as educators – is more important than 'getting it right' every time. It is both safe and appropriate for some meals to focus mainly on comfort, regulation and presence, rather than on learning outcomes. Sometimes the most valuable thing we can offer is calm, peaceful presence alongside food.