

“How to Cultivate a Family Culture of Health & Wellbeing”

Webinar Questions Answered by Jill Castle, MS, RDN

Please note that these are brief answers to complex questions and are not meant as medical advice. Please seek medical advice from your personal healthcare professional for more complete information.

- What would you say about the belief of equity over equality when parenting children, as every child is different and has different needs that support their personal growth and development? *I think nutrition for kids is very nuanced, and while we have “guidelines” we should always seek to treat the whole child and his/her/their individual needs and unique circumstances.*
- Can you describe the willy nilly meals approach more? ‘Willy nilly meals’ is a term describing erratic, unpredictable meal and snack times. These can be perceived as unpredictable and may cause insecurity or hyperfocus on food for some children.
- How might you approach outside family members who insist on labeling certain foods as treats or appropriate language to talk to younger children about health promoting versus disease promoting foods? *I recorded a podcast on extended family members who talk too much about nutrition, food and health, and who use language that may cause shame and anxiety for children. You can listen to it here: <https://podcasts.apple.com/us/podcast/the-nourished-child/id1149940384?i=1000627829577>*
- Many parents will tell me that their children don’t enjoy sitting at the table and they’re always running to play. They’re young and don’t like sitting and talking about their days but they want to encourage family mealtimes-any advice? *Young children can be hard to keep at the table, but they will learn over time. Parents do well when they have the right expectations: young children sit for 10 or 15 minutes max (or perhaps less) for mealtimes and older children will sit a bit longer. Most kids don’t sit longer than 30 minutes. Some strategies that I’ve seen work: have meals ready to go when kids sit down (don’t have them sit at the table while the parent is gathering the food); set a timer for little ones or older kids who have trouble staying seated – when it alarms, kids are free to go (kids are concrete thinkers so a timer can work well); or use a family-style service and let kids pass food (or support them by holding the dish and let them serve themselves with the utensil) – this keeps the meal somewhat engaging.*
- It feels like we're fighting an uphill battle in the medical community when we encourage a weight neutral environment at home, especially when many pediatricians are weight-centric and per the recent guidelines from the AAP. What tools do we have to approach primary care providers about these recommendations you mentioned to provide some continuity of care? *Soon, you will have my book, [Kids Thrive at Every Size - ☺](#) - which will be a thoughtful, research-backed way to approach children’s health and well-being through positive lifestyle habits and attitudes, and without stigmatizing them based on size. I am hopeful more tools will emerge.*

I would also encourage all healthcare providers to use the lens of body function rather than weight/size. Many kids’ bodies function well, even at larger and smaller sizes. Having positive lifestyle habits on board helps all children’s bodies function well. But when their bodies don’t function well (prediabetes, hyperlipidemia, etc), the condition will likely need to be treated – that doesn’t always

mean a change in body size, but it may mean that, at times. While it's unhelpful to make size a problem when it isn't, it's also unhelpful to ignore a real medical condition.

Last, the ground is shifting when it comes to body size, physical health, and emotional well-being in children. It's not an "either-or" situation, but an "and" situation. How do we address *both* health and well-being without sacrificing one or the other?

- Would love to know how to approach social media with older kids? I wrote a chapter on screens because they are so prevalent in our kids' lives and not always a good influence. Social media can be a real threat to emotional wellbeing. First, I encourage parents to hold off on this privilege for as long as possible. Second, be everywhere your child is. Third, set up safety controls and parameters for use. Parameters will be different for each family. Fourth, teach kids how to process the information they're seeing on social. I go into more details and resources in the book, but this is a start.
- What are strategies for helping a child get to a healthy weight? First, a "healthy weight" is a well-functioning body – at any size. Not every child will achieve trim, slim, thin, or even an "average" body size because size is highly genetic. But I believe all children can achieve health and functionality no matter their size. Positive lifestyle habits are the sustainable forces along with the context of the environment that support a healthy body, and this may include sleep hygiene, food choices, movement, screen usage, self-care, family culture (which you learned about in this presentation), eating habits, and feeding approaches...and probably more. Families need a lot of help in setting up good habits... because life gets in the way. That's where you come in! I will have more resources on this as I get closer to the book launch, but in the meantime, [my podcast](#) and website, [The Nourished Child](#), as well as [my weekly newsletter](#), tackle these topics and more.