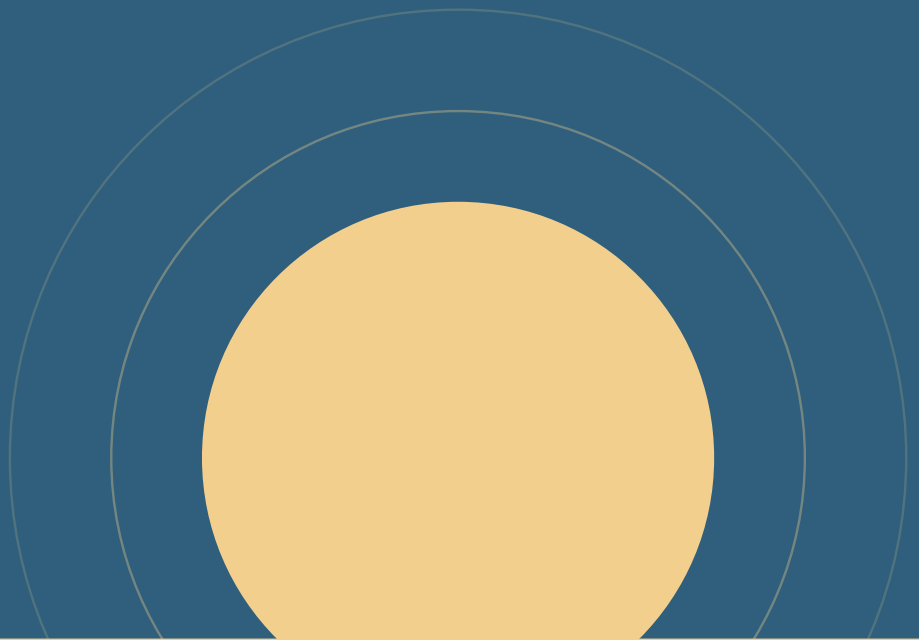


Mamavela

Starting Solids & Baby-Led Weaning

When and how to start solids, purees or baby-led weaning, allergens and choking safety, from WHO and AAP guidance.



Free sample

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Welcome to the messiest, happiest milestone

Somewhere around the middle of your baby's first year, mealtimes change forever. The high chair arrives, the floor gets a mat, and a small person who has only ever known milk discovers that broccoli is green, that yogurt is cold, and that a strip of toast can be waved, squashed, licked and, eventually, eaten.

It is a joyful stage. It can also feel like the moment the advice turns into noise. Your mother started you on baby rice at four months. A friend swears by baby-led weaning. A forum thread says one thing about peanuts, a leaflet from your clinic says another, and the label on a jar says "from 4 months" while your health visitor says "around 6". You want one calm, reliable guide that tells you what the official health bodies actually say, where they agree, where they differ, and how to turn all of it into breakfast.

That is what this book is.

How this guide was built

Every recommendation in these pages comes from a source you can check yourself: the World Health Organization (WHO), the UK's National Health Service (NHS) and its Best Start in Life programme, the US Centers for Disease Control and Prevention (CDC), the American Academy of Pediatrics (AAP) through its parent site HealthyChildren.org, the US Food and Drug Administration (FDA), the European Society for Paediatric Gastroenterology, Hepatology and Nutrition (ESPGHAN), the US National Institute of Allergy and Infectious Diseases (NIAID) expert panel, and the first aid organisations that teach parents what to do in an emergency. Where we quote a research study, it is a published trial with a DOI you can look up. The full list, with web addresses, is at the end of the book. Every source was opened and checked on 13 October 2026.

Where the US and the UK give different advice, you will see both, side by side, so that you can follow the guidance of the country you live in and understand why your pediatrician or health visitor says what they say.

This book is information, not medical advice. It does not replace your pediatrician, family doctor, GP, health visitor or a registered dietitian, who know your baby. If your baby was born prematurely, has a medical condition, has severe eczema, a known food allergy, feeding or swallowing difficulties, or is not growing as expected, talk to them before you start solids and follow their plan.

A word on words

In the US, people tend to say "starting solids" or "complementary feeding". In the UK, the same stage is usually called "weaning", which does not mean stopping breastfeeding: it means moving from milk only to milk plus food. "Baby-led weaning" (often shortened to BLW) is one particular way of doing it, where your baby feeds themselves finger foods from the start. We use all of these terms, and we spell out the differences in Chapter 2.

Throughout the book, "doctor" means your baby's pediatrician or family doctor (US) or GP (UK). "Health visitor" is the specialist community nurse who supports families with young children in the UK.

Emergency numbers to keep by the high chair

	United States	United Kingdom
Emergency (choking that does not clear, breathing difficulty, signs of a severe allergic reaction, baby unresponsive)	911	999 (112 also works)
Urgent advice when it is not an emergency	Your pediatrician's after-hours line	NHS 111 (phone or online)
Routine questions about feeding	Your pediatrician, WIC office if you use one	Your health visitor or GP

Write your own numbers here:

- Pediatrician / GP: _____
- Health visitor or nurse line: _____
- Nearest emergency department: _____

Chapter 1. Ready or not: when to start

What the health bodies say

The single most common question parents ask about solids is "when?". The short answer is: for most healthy, full-term babies, around 6 months. The longer answer is worth knowing, because you will hear different numbers, and each of them comes from a real source.

The World Health Organization. WHO and UNICEF recommend that babies are breastfed exclusively for the first 6 months of life, then continue breastfeeding up to 2 years of age or beyond while nutritionally adequate, safe complementary foods are introduced from six months. WHO explains that around the age of 6 months, a baby's need for energy and nutrients starts to exceed what breast milk provides, and that if complementary foods are introduced too late, or before this age, growth may falter. Its 2023 Guideline for complementary feeding of infants and young children 6-23 months of age covers this whole period and replaces its older guiding principles.

The NHS (UK). The NHS says introducing solid foods should start when your baby is around 6 months old. Its reasons: breast milk or first infant formula provides the energy and nutrients your baby needs until then (with the exception of vitamin D in some cases); feeding only breast milk up to around 6 months helps protect against illness and infection; waiting gives your baby time to develop so that they can cope fully with solid foods; they will be more able to feed themselves; and they will be better at moving food around their mouth, chewing and swallowing, so they may progress more quickly to mashed, lumpy and finger foods and may not need smooth, blended foods at all. The NHS also advises waiting until around 6 months even if a jar or pouch label says "from 4 months".

The American Academy of Pediatrics. The AAP recommends providing your baby only breast milk for approximately 6 months after birth, then continued breastfeeding alongside introductory foods, for as long as you and your child wish, for 2 years or beyond. Its parent page on starting solids also reminds families that each child's readiness depends on their own rate of development, and lists the developmental signs to look for (below).

The CDC (US). The CDC says your child can begin solid foods at about 6 months, that introducing foods before 4 months is not recommended, and that every child is different.

ESPGHAN (Europe). The 2017 ESPGHAN position paper on complementary feeding, written for healthy term infants in Europe, says exclusive or full breastfeeding should be promoted for at least 4 months (17 weeks), that exclusive or predominant breastfeeding for approximately 6 months (26 weeks) is a desirable goal, and that complementary foods should not be introduced before 4 months but should not be delayed beyond 6 months.

So who is right?

They are all describing the same baby from slightly different angles. Put together honestly, the picture is this:

- **Around 6 months is the shared target.** WHO, the NHS, the AAP and the CDC all name it.
- **Never before 4 months.** The CDC and ESPGHAN both say so explicitly.
- **Between 4 and 6 months there is a window, not a deadline.** European specialists (ESPGHAN) describe solids as acceptable from 4 months and not later than 6 months. In the US, the NIAID expert panel advises that babies at high risk of peanut allergy may need peanut introduced as early as 4 to 6 months, after a medical evaluation (see Chapter 7). If your doctor suggests starting a little before 6 months for a specific reason, that is a medical decision made for your baby.
- **Not much later than 6 months.** WHO warns that growth may falter if foods are introduced too late, and ESPGHAN says not to delay beyond 6 months.
- **Premature babies are different.** The NHS asks parents of babies born prematurely to talk to their health visitor or GP about when to start.

The calm way through: aim for around 6 months, watch for the signs of readiness below, and if you are thinking of starting earlier or later, have a short conversation with your doctor or health visitor first.

The signs of readiness

Age is only half the story. Your baby's body has to be ready, too.

The NHS describes **3 clear signs** which, when they appear together from around 6 months, show your baby is ready for first foods alongside breast milk or first infant formula. Your baby can:

- ☐ stay in a sitting position and hold their head steady
- ☐ co-ordinate their eyes, hands and mouth, so they can look at food, pick it up and put it in their mouth by themselves
- ☐ swallow food rather than spit it back out

The CDC's list of signs is a little longer. Your child:

- ☐ sits up alone or with support
- ☐ is able to control their head and neck
- ☐ opens their mouth when food is offered
- ☐ swallows food rather than pushing it back out onto the chin
- ☐ brings objects to their mouth
- ☐ tries to grasp small objects, such as toys or food

- ☐ moves food from the front to the back of the tongue to swallow

The AAP asks parents a set of questions: can your baby hold their head up and sit in a high chair, feeding seat or infant seat with good head control? Do they open their mouth when food comes their way, watch you eating and reach for your food? Can they move food from a spoon into their throat, or does it dribble back out? The AAP also mentions size: generally, when babies have doubled their birth weight (typically at about 4 months) and weigh about 13 pounds or more, they may be ready. Size alone is not a sign, though; the developmental signs come first.

Signs that are often mistaken for readiness

The NHS lists three behaviours that parents commonly read as "my baby needs food", which are in fact normal baby behaviours:

- chewing their fists
- waking up in the night more than usual
- wanting extra milk feeds

None of these, on their own, means your baby is hungry for solids. The NHS is also clear that starting solid foods will not make your baby more likely to sleep through the night. Sometimes a little extra milk helps until your baby is ready.

Milk stays the main event

When you start, food is practice. The NHS reminds parents that, at the beginning, how much your baby eats is less important than getting them used to the idea of eating, and that they will still get most of their energy and nutrients from breast milk or first infant formula. The AAP says the same: at first, your baby will still be getting most of their nutrition from breast milk, formula or both.

Both the NHS and the AAP advise that whole cow's milk should not be given as a main drink before 12 months (more on drinks in Chapter 10).

Your readiness checklist

Use this page in the week you are thinking of starting.

- ☐ My baby is around 6 months old (or my doctor/health visitor has advised a different start for a specific reason)
- ☐ My baby is not premature, or I have asked about the right timing for a premature baby
- ☐ My baby can sit upright with support and hold their head steady
- ☐ My baby reaches for objects and brings them to their mouth
- ☐ My baby swallows rather than pushing food straight back out
- ☐ I know whether my baby has risk factors for food allergy (severe eczema, a known food allergy) and, if so, I have spoken to the doctor
- ☐ I have a safe high chair with a harness

- ☐ I have read Chapter 4 (gagging and choking) and know where the emergency numbers are
- ☐ I have looked into an infant first aid course

Date I plan to start:

Notes for the doctor or health visitor:

End of the sample

Thank you for reading this far. We hope these first pages already feel useful, and that you can see how the rest of the book is built: clear steps, pages to fill in, sources you can check.

The full book has 56 pages.

Get it here: <https://mamavela.com/shop/starting-solids-baby-led-weaning/>

One-time payment, instant PDF.