

Research Space

Journal article

A real thirst?

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The impact of hydration for babies and young children.

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Health Education in particular the health benefits of sufficient hydration and recognising the signs of thirst is vital for early years' practitioners to teach young children in their care and educational settings. "Drinking and the impact of fluid intake is often the forgotten part of food and diet" (Howells, 2021, p.141) Adequate hydration is essential for children, as they may not correctly replace fluid loss, as

Children aged between 4 and 5 are recommended to need 1.6 – 1.7 litres of fluid a day to maintain hydrated, 20-30% of that total amount is obtained from food, leaving 1.1 – 1.3 litres for children to drink (WHO, 2004). Previous European research (Kenney and Chiu, 2001) has indicated that children do not recognise the early stages of thirst, and find it difficult to understand when and what to drink (Shaw, 2010). This results in children not exhibiting any desire to drink, so they may never ask for a drink, or appear to want a drink. This highlights the importance of us as practitioners that we need to within our early years settings to teach children to recognise and understand what their bodies' needs.

Williamson and Howells (2019) focused on 4 and 5 years old and children's understanding of drinking, they were able to identify running as the main reasons for being thirsty, but most struggled to explain why it is important, some told the researchers it was 'so you don't die'. The later response although seems at first light dramatic and a potential misunderstanding of them learning about staying hydrated, it is important to consider if there are barriers are in place within our settings, as to when drinking is not allowed then what are the unintentional consequences on the children who think they will die if they don't drink, but who then can't find the words to express themselves when this situation occurs.

Within the current pandemic national lockdown anecdotal evidence has been reported with parents sharing that their children are not being allowed access to water during the afternoons to reduce the number of bathroom visits in an attempt to ensure good hand washing practices can be in place, this knock on effect is that the children then drink almost excessive amounts when they return to home settings, and for some this has made them return to bed wetting, when previously they had been dry through the night. Other concerns have been on having water bottles within settings, it has been reported in some settings these have been removed to prevent any cross contamination of the virus especially the new mutant version of virus, leaving the children with no independent access to hydration of fluid, or habit forming behaviour, leaving it up to practitioners to set times within the day for drink breaks, rather than children learning the feelings of thirst.

The purpose of sharing the anecdotal evidence is a way of raising awareness and to pause for thought about our intentions and the possible unintentional implications of our actions.

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