

# Improving Nutrition, Breastfeeding, Physical Activity and Screen Time Policies and Practices in the Child Care Setting

## CDC's Framework

10<sup>th</sup> Annual Maine-Harvard PRC Workshop  
January 21, 2011



# Our General Perspective

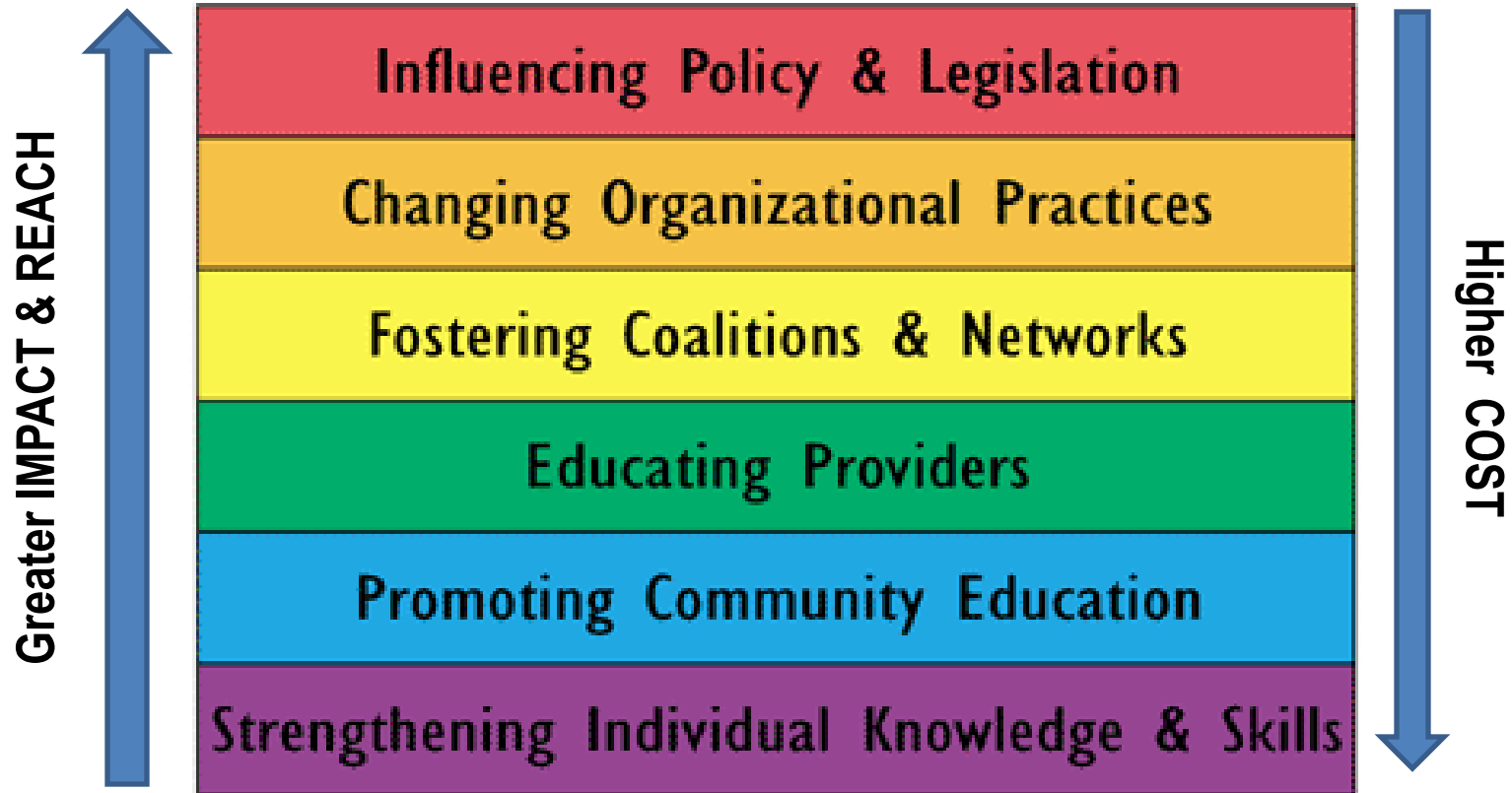
Identification of cause less important than identification of effective intervention

Individual-focused interventions less effective than multi-level approaches

Need for both evidence-based practice and practice-based evidence

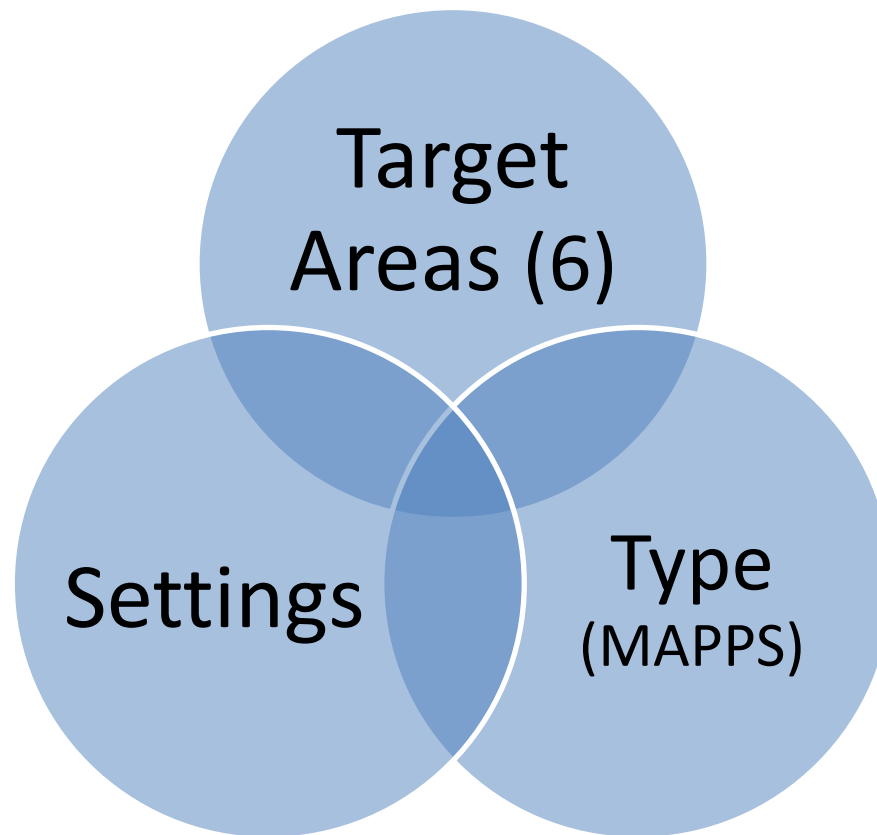
**Focus on population strategies that change the food and physical activity environments (policy & environmental change)**

# The Spectrum of Prevention

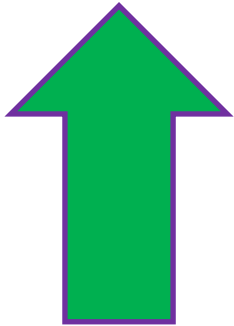


# CDC Priority Strategies for Obesity

## 3 Lenses



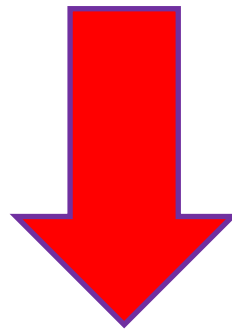
# 6 Principal Target Areas



Fruits and vegetables

Breastfeeding (initiation, duration, exclusivity)

Daily physical activity



High Energy Density foods

Sugar Drinks

Screen Time

# Priority Strategies by Target Area

## Energy density

- Better nutrition standards in child care and schools
- Menu labeling
- More retail food stores in underserved areas

## Fruits and vegetables

- Increase access through retail stores
- Farm to where you are
- Food policy councils

## Sugar Drinks

- Limit access
- Ensure access to safe and good tasting water
- Differential pricing



## Screen Time

- Regulations to limit screen time in child care settings
- Limit food advertising directed at children



## Breastfeeding

- Maternity Care policies and environmental supports
- Policy and environmental supports in worksites
- State and national breastfeeding coalitions

## Physical activity

- Community-wide campaigns
- Increase access with informational outreach
- Increase opportunities for PA in school and child care settings

# Priority Strategies by Type

Media

Access

Point of Decision

Price

Social Support & Services



# Priority Strategies for Settings.

Child care

School

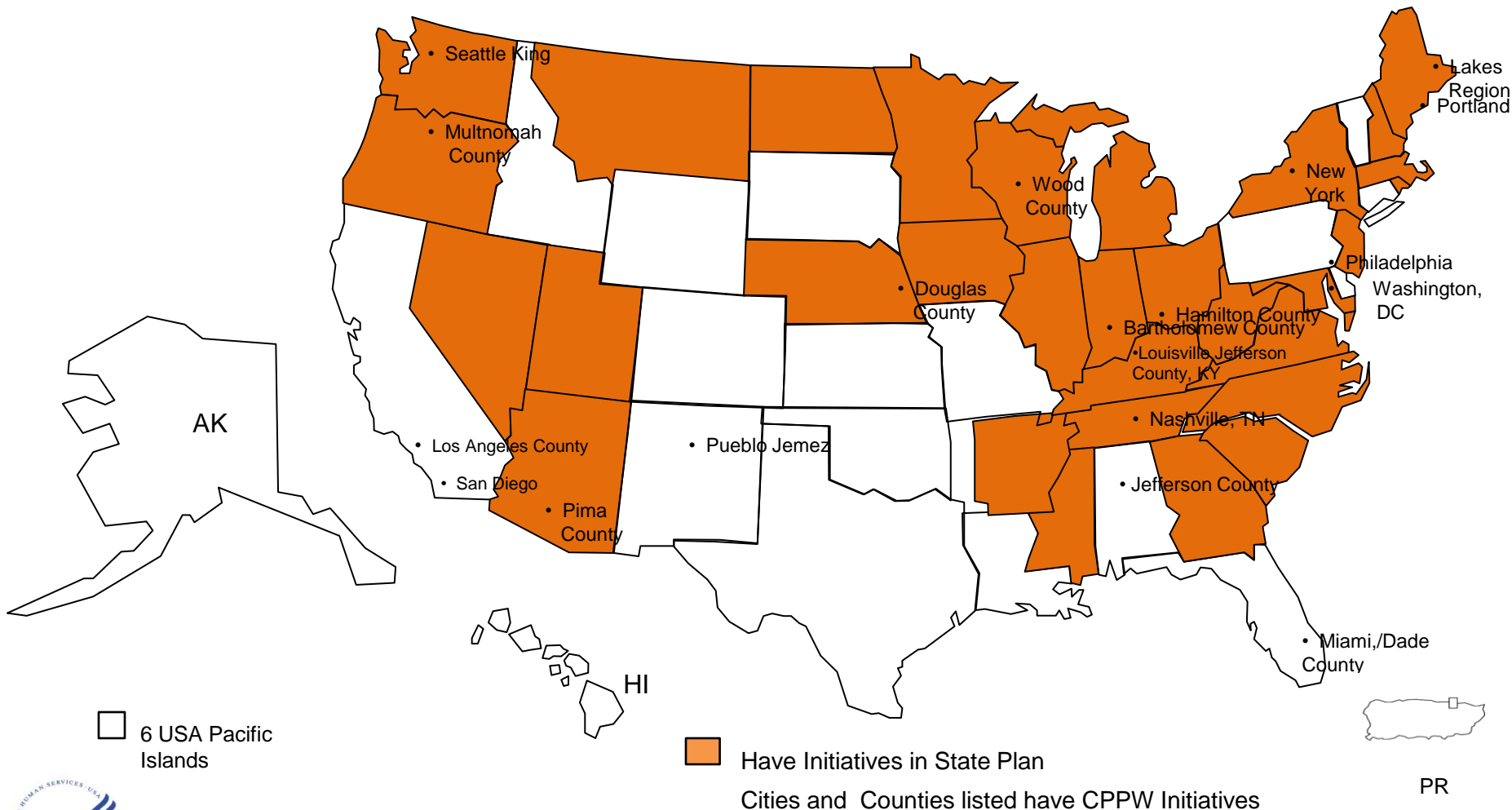
Community

Work Site

Medical Settings



# CDC Funded Child Care Initiatives



# Obesity Prevention in Child Care: The Time is Now

- Increasing calls to intervene for obesity prevention and control at younger ages: > 20% of children are overweight or obese by age 6  
> 30% of low income children participating in WIC
- *The Surgeon General's Vision for a Healthy and Fit Nation 2010* indicates a need to improve the quality of child care related to healthy weight.  
<http://www.surgeongeneral.gov/library/obesityvision/obesityvision2010.pdf>
- *White House Task Force on Childhood Obesity - Report to the President* emphasizes the role of child care settings in preventing obesity.  
<http://www.letsmove.gov/>
- First federal guidelines on obesity prevention in child care: CFOC nutrition, physical activity and screen time standards released July 2010  
[http://nrckids.org/CFOC3/PDFVersion/preventing\\_obesity.pdf](http://nrckids.org/CFOC3/PDFVersion/preventing_obesity.pdf)

## *Caring for Our Children (CFOC)*

- Nationally recognized, model standards for health & safety practices in early care and education settings
- Evidence-based and expert consensus
- Funded by HHS/HRSA/MCHB in partnership with AAP, APHA, and NRC
- 3<sup>rd</sup> edition due 2011, accelerated release of obesity prevention related standards (July 2010)

### **Preventing Childhood Obesity in Early Care and Education Programs**

Selected Standards from  
Caring for Our Children: National Health and Safety Performance Standards

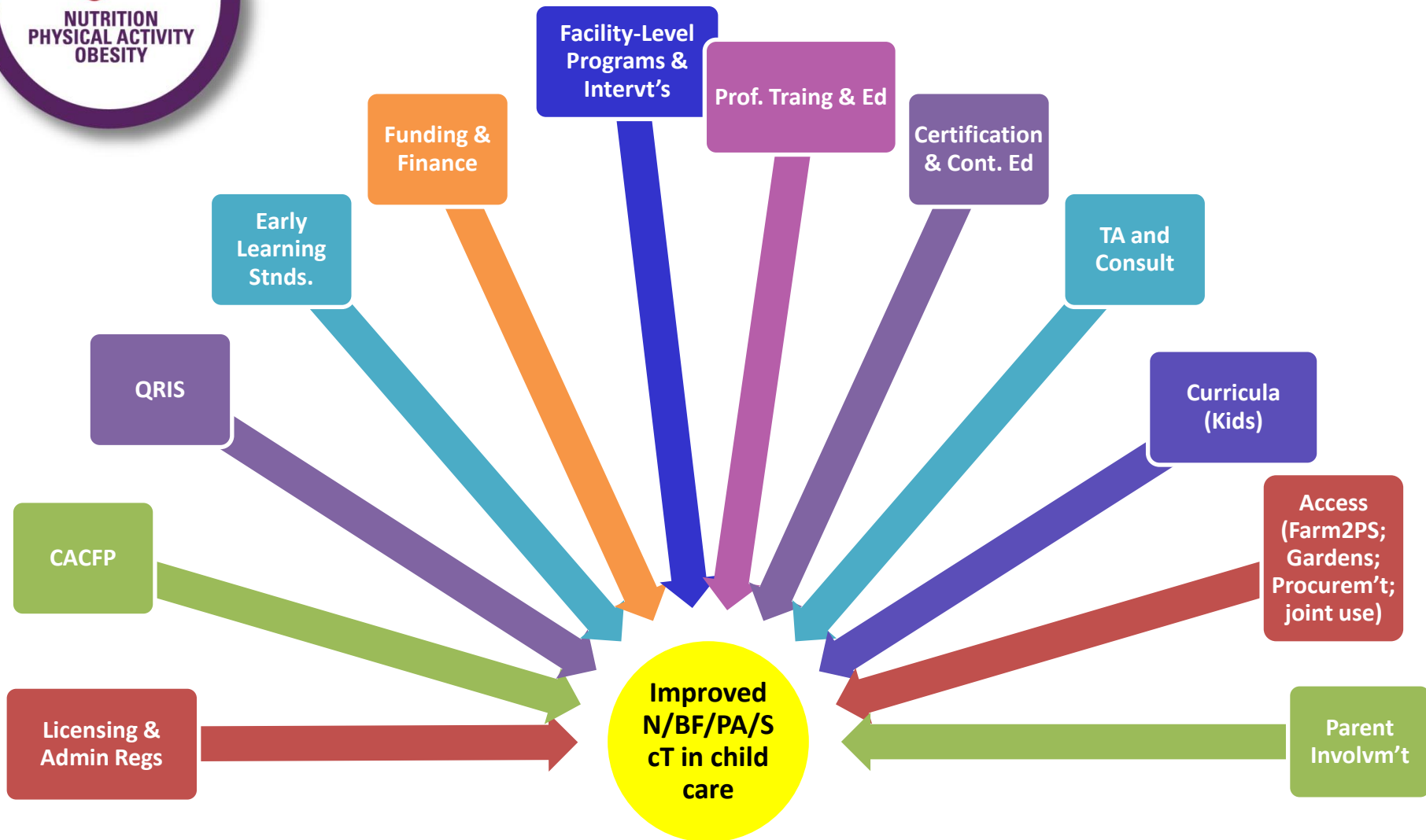


# Obesity Prevention Comprehensive Standards

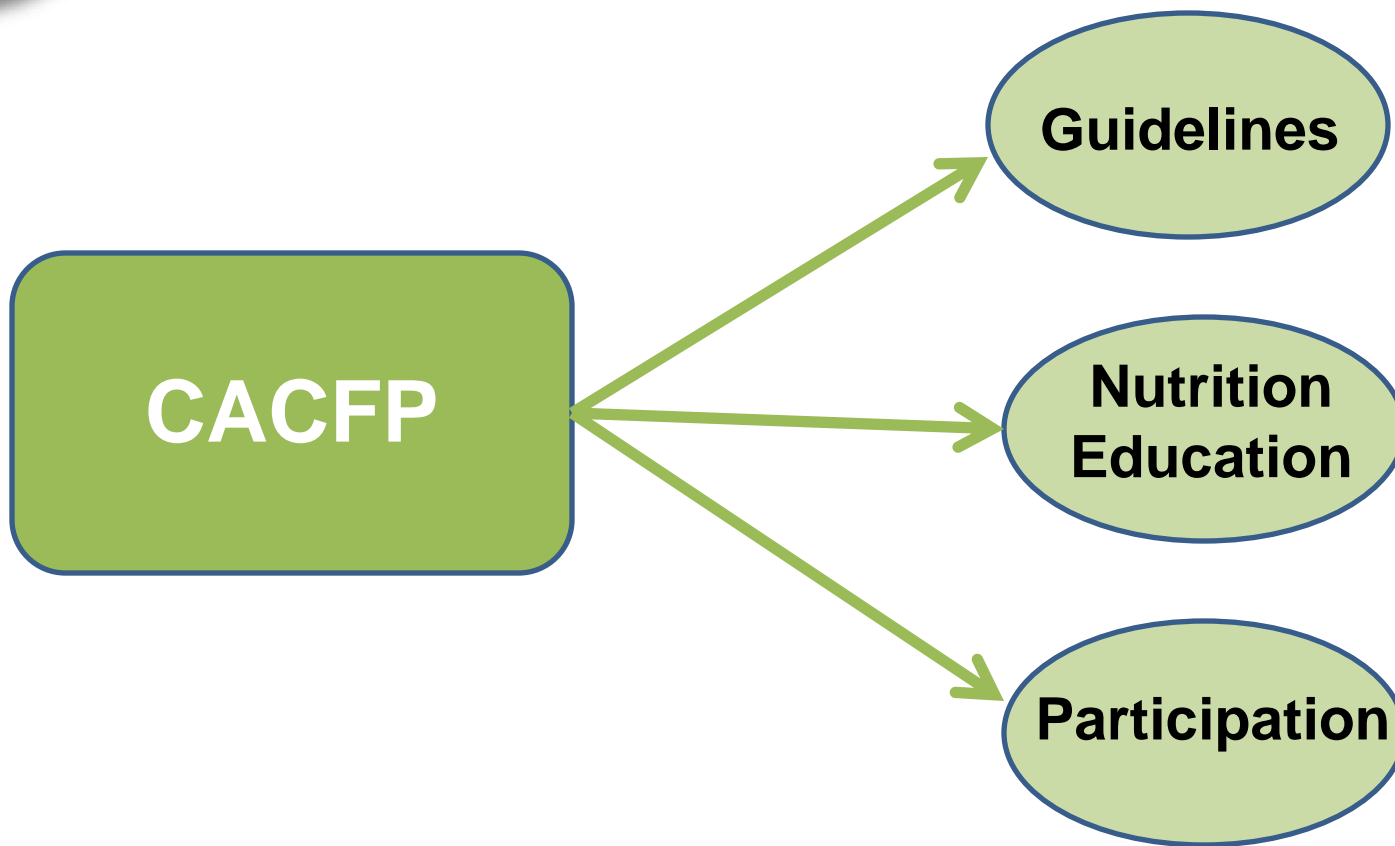
NUTRITION: variety of healthy foods and beverages  
limiting unhealthy foods and beverages  
promote positive mealtime environment  
support **breastfeeding** mothers

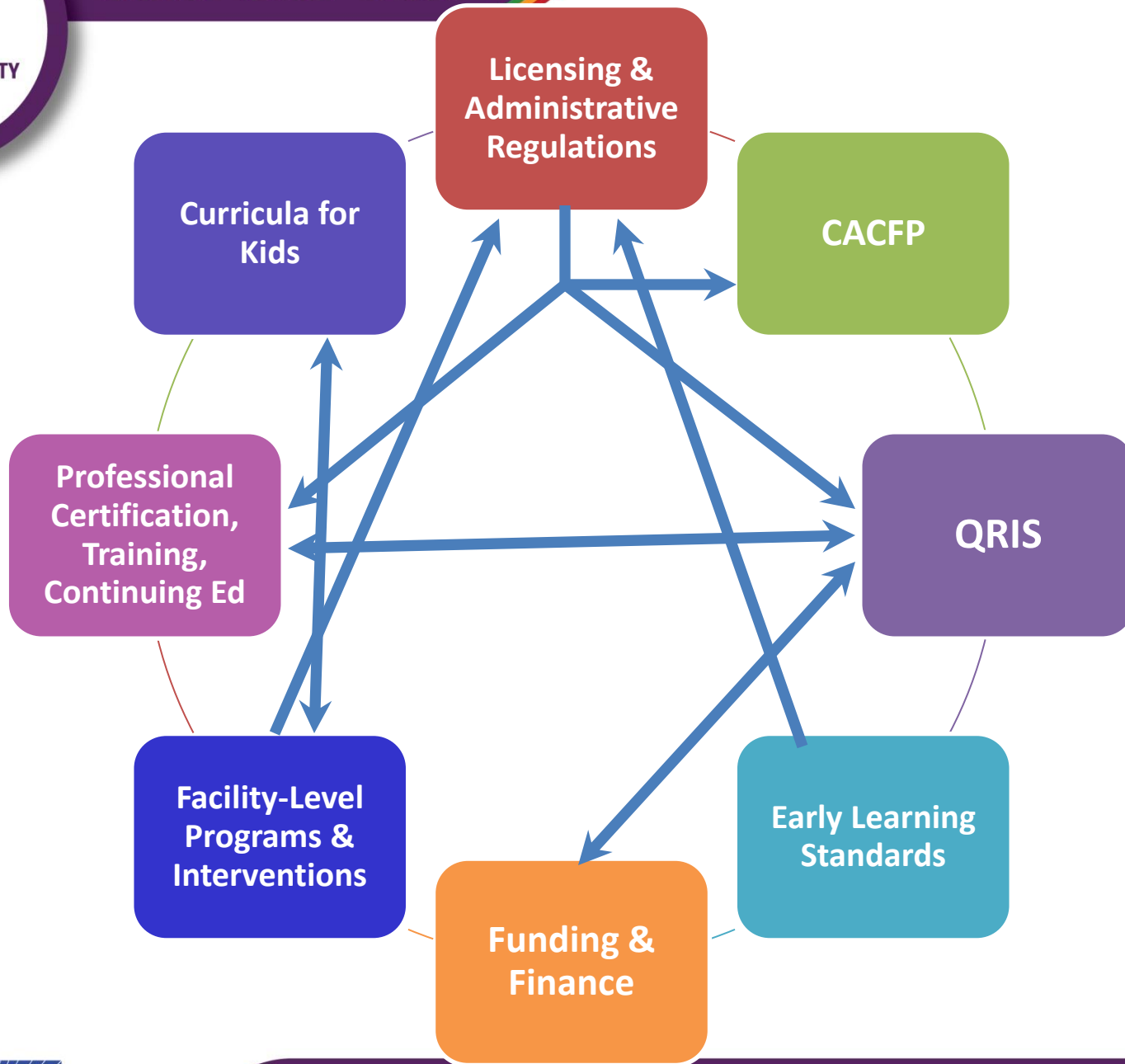
PHYSICAL ACTIVITY: daily indoor & outdoor activities

SCREEN TIME: limited



## Spectrum of Opportunities for State Action







# U.S. State Child Care Licensing Regulations

## (Pre-CFOC Obesity Prevention Guidelines)

Indicator	Child Care Centers (# of states)	Family Child Care Homes (# of states)
Water freely available	41	34
Limit sugar drinks	7	7
Limit low nutrition foods	9	7
No forcing to eat	32	32
No using food as rewards	10	5
Support Breastfeeding	9	3
Limit screen time	17	15
Required Physical Activity	3	3

# MAINE OVERALL GRADE: C+

## Healthy Eating Grades

Centers  
C

Homes  
C-

## Physical Activity Grades

Centers  
B

Homes  
B



Centers	Homes	Healthy Eating Regulations in Maine
		Foods of low nutritional value are served infrequently
		Sugar sweetened beverages are not served
		Children older than two years are served reduced fat milk
✓		Clean, sanitary drinking water is available for children to serve themselves throughout the day
		Nutrition education is offered to child care providers
		Juice is limited to a total of 4-6 ounces per day for children over one year of age
✓	✓	Child care providers do not use food as a reward or punishment
		Nutrition education is offered to children
		At least one child care provider sits with children at the table and eats the same meals and snacks
✓	✓	Providers encourage, but do not force, children to eat



Centers	Homes	Physical Activity Regulations in Maine
✓	✓	Children are provided with physical activity daily
✓	✓	Television, video, and computer time are limited
		Child care providers do not withhold active play time as punishment
✓	✓	Children with special needs are provided opportunities for active play while other children are physically active
✓	✓	Children are provided outdoor active play time
		Physical activity education is offered to child care providers
		At least one provider joins children in active play
✓	✓	Shaded areas are provided during outdoor play
✓	✓	Children are not seated for long periods of time
		Physical activity education is offered to children

## NYC Board of Health Amendment, Article 47

- 60 minutes of physical activity per day (full day attendance)
  - At least 30 minutes of structured and guided
- No screen time for children younger than 2 years
- Screen time limited to 60 minutes per day of educational programming for children 2 years or older
- No beverages with added sweeteners
- Require water to be accessible and available throughout the day
- Limit juice to one 6-oz serving, 100% juice per day
- 1% or lower fat milk for children 2 years and older
- Require distribution of nutrition guidelines to parents for food brought into day care facilities from other sources

## Arizona “EMPOWER” Program Incentivizing Improved Standards

- Set of 10 improved nutrition, physical activity, and screen time standards
  - 60 minutes of planned activity
  - only low fat or fat free milk for children  $\geq 2$  years
  - Water offered at least 4 times per day
  - limit juice to 4 to 6 ounces per day of only 100% juice
  - family style meals
  - let the child decide how much to eat.
- 50% reduction for licensing fees (3 year period).
- A series of videos helps child care providers successfully implement the standards

## Florida: Improved Standards Highlights

- Ready-to-eat cereals limited to 10 grams of sugar or less per serving with primary grain a whole grain
- Encourages low fat or fat-free milk for children 2 years and older
- Enhanced requirements for weekly servings of fruit and vegetable
- No more than two sweet grain/bread snack items per week



## Wisconsin: 'YoungStar' Child Care Rating Program

- Awards programs up to 5 stars based on points earned.
- Points earned for serving nutritious meals and snacks are required to reach the 3-star and higher levels
- Optional points can be earned for providing at least 60 minutes of physical activity a day.
- Beginning July 2011, all programs that receive child care subsidy funds are required to participate in the YoungStar program.



# New York

- NAP SACC statewide implementation
- Eat Well Play Hard in Child Care  
<http://center-trt.org/index.cfm?fa=op.overview>
- Breastfeeding Friendly Centers  
[www.health.state.ny.us/prevention/nutrition/cacfp/breastfeedingspon.htm](http://www.health.state.ny.us/prevention/nutrition/cacfp/breastfeedingspon.htm)

## Live Well Springfield Farm to Preschool

- Preschools can purchase fresh produce from a local farmer in Hadley, MA.
- Co-operative model with bulk pricing
- Professional development series for staff about the latest nutrition guidelines, culinary skills, and business management.

## St. Louis: Farm to Child Care Program

- Fresh, local food to twenty child care centers in partnership with a farmer owned grocery store and distributor
- Child care centers place orders on Wednesday evenings, orders delivered to the centers on Monday
- Parents can pay \$15 to get a bag of fresh, local, seasonal produce with recipes for using both common and less common fruits and vegetables.
- 6 educational workshops per year for child care center staff.
- Gardens are established at the centers via partnership with Gateway Greening.

# Multi-Component Child Care Initiative: Delaware

- Regulatory changes that affect all licensed child care;
- Nutrition regulation changes to the Delaware Child and Adult Care Food Program
- Legislation creating 'Delaware Stars for Early Success' (QRIS)
- Changed the training infrastructure of the state
- Learning collaborative model to support long term sustainable policy and practice changes in the child care setting; and
- Development of tools for teachers to use to educate and engage infants, toddlers and preschoolers in healthy eating habits, reduced screen time and physical activity in the classroom.

# State Action Guide Project

Addressing Obesity in the Child Care Setting by improving Nutrition, Breastfeeding, Physical Activity, and Screen Time Policies & Practices

## Purpose

Framework for state action to improve policy and practice via a 'Spectrum of Opportunities'

Guide users through a process for change

# Guide Outline

1. Introduction: why child care
2. Child Care 101
3. Identifying key stakeholders & building partnerships wi/state
4. Assessing current status & readiness for change
5. Selecting opportunities for change: the 'spectrum of opportunity'
6. Implementing a state plan
7. Evaluation & Monitoring
8. Appendices

# Innovative and Pilot States

Innovative States - lessons learned, keys for success

Examples for each menu option

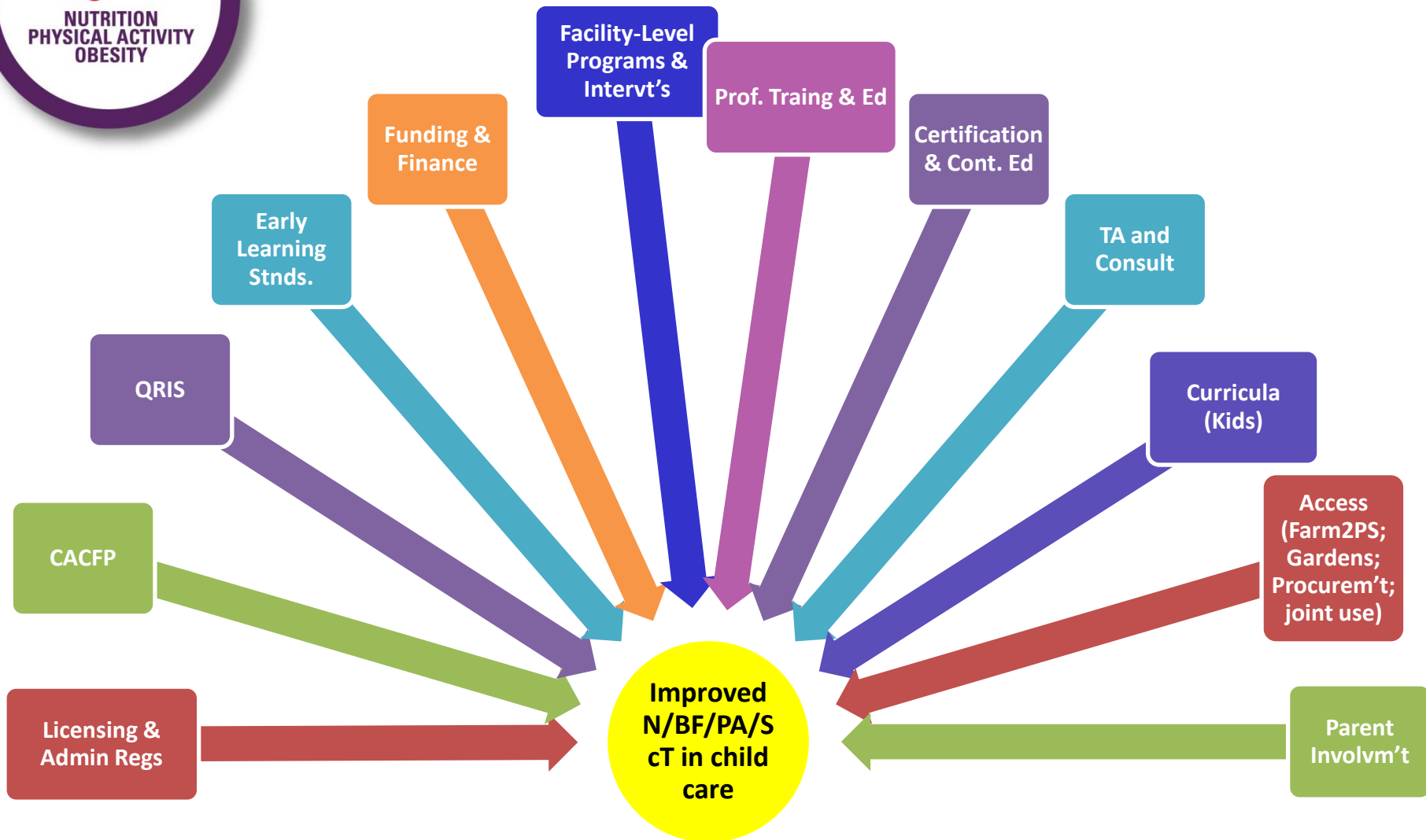
Illustrate steps in process

Pilot States (AR, GA, KY, MS, RI, NY)

Convening stakeholders – 2 meetings

Interact with guide material (1<sup>st</sup> draft: Jan 2011)

Extra Technical Assistance



## Spectrum of Opportunities for State Action





# Questions?

# CFOC Nutrition Standards



## Encourage breastfeeding :

- Encourage mothers to breastfeed at the child care program
  - provide comfortable, private areas
- Train caregivers/teachers to support and advocate for breastfeeding.
- Implement policies and procedures on handling and feeding human milk safely – reduces mother's anxiety and promotes safety for infants

# CFOC Nutrition Standards



- Feed infants on cue by consistent caregiver
- Accommodate use of soy formula and soy milk when necessary
- Use 2% milk for children 12 months to 2 years, for whom overweight or obesity is a concern with written documentation from health professional

# CFOC Nutrition Standards



- Accommodate vegetarian diets
- Serve small size portions
- Availability of age-appropriate nutritious snacks
- Caregivers are models of healthy eating habits
- Provider sits with children during meal time and encourages socialization
- Food is never used as a reward/punishment

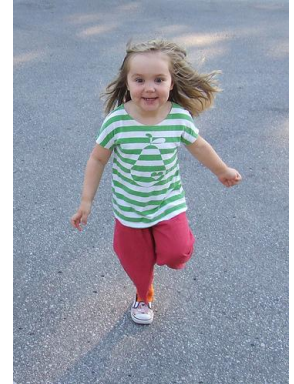
# Nutrition Standards



- Water available throughout the day
- No fruit juice for children under 12 months
- 100% juice limited to 4-6 ounces for children 1– 6 years of age
- Whole fruits encouraged
- Nutrition education offered to children & parents

# CFOC Physical Activity Standards

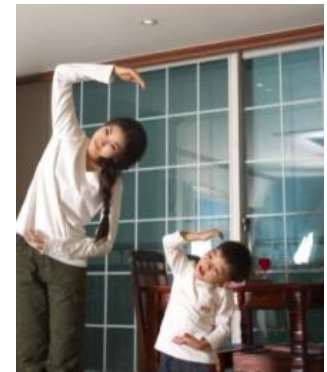
- Promote development of infant movement skills – plenty of tummy time
- Promote active daily play for 1-6 year olds with:
  - 2-3 outdoor occasions
  - 2 or more structured activities over course of day (indoor and/or outdoor)
  - Time for unstructured active play



# CFOC Physical Activity Standards

Caregivers and teachers encourage and participate in physical activities:

- Lead structure activities
- Wear clothing that permits safe and easy movement
- Prompt children to be active





# CFOC Physical Activity Standards

## Limit restrictive movement

- Limit time in high chair to no more than 15 minutes (except for meals & snacks)
- Cribs are only for sleeping or resting
- Restricting active play as a punishment is not allowed





# CFOC Screen Time Standards

- No TV, video, DVD and computer use under 2 years of age
- 2 years and older:
  - Only 30 minutes per week of media time and only for educational/physical activity purposes
  - Computer use – 15 minute increments; school age children may have longer for homework.
- Caregivers as role models
  - no TV watching during day

