

# Child Care and Obesity Prevention: What Policymakers Can Do



Issue Brief #3 ♦ 2009

## Child care policies that lead to higher standards in nutrition, physical activity, and screen media can benefit millions of children.

The child care setting significantly impacts child behavior, health, and learning. Policy is a powerful tool for shaping environments that promote healthy eating and physical activity and plays an important role in obesity prevention. This brief identifies key strategies and policy actions at the federal, state, and local levels.

### 1. Raise the Status of the Child Care Profession

Child care is a business—and a calling for many. Providers are also educators with professional responsibility for the development and well being of the children in their care. It takes training, skill, and experience to provide developmentally appropriate approaches to nutrition and physical activity during a busy child care day. Increasing wages and improving benefits acknowledges the value of child care work and will keep good teachers in the field. Raising the status of the child care profession will lead to healthier environments for children and greater opportunity for those working in child care.

### 2. Strengthen Licensing Requirements

Except for the federal Head Start program, child care program policies differ considerably from state to state. More uniform and stronger performance standards would help to ensure that all children are eating healthy foods and meeting recommendations for physical activity and screen media use during the time they are in care. Some actions can be done more easily without increasing costs, while others will require additional funding and effort. Reviews of current regulations can determine where feasible and cost-effective improvements can be made.

**Sample policy for licensed child care centers:** *Television, video and other visual recordings shall not be used with children under 2 years of age. For children ages 2 and older, viewing of television, videos, and other visual recordings shall be limited to no more than 60 minutes per day of educational programs or programs that actively engage child movement. (Adopted in New York City)*

### 3. Improve the Infrastructure of Child Care Health & Nutrition Programs

Child care professionals and researchers agree that expanding and improving programs such as the federal Child and Adult Care Food Program (CACFP) would ensure that more young children receive the nutrients they need for growth and development. CACFP reaches over 3 million preschool children each day. Eligible providers are reimbursed for serving meals and snacks that meet USDA nutritional guidelines. Nutrition education, menu planning, training, and other services are also available. By offsetting the relatively higher cost of healthy foods, CACFP also helps keep child care rates affordable for parents.

Over the past 12 years, enrollment of child care centers in CACFP has increased 48%. However, the number of family child care providers in CACFP has dropped by 27%.<sup>4</sup> Reducing barriers to participation and building and strengthening the sponsor network at the state-level would encourage more providers to participate and serve more low income children.

- Children who receive CACFP meals eat healthier food than children who bring meals and snacks from home.<sup>1</sup>
- In many child care settings preschool children are inactive. One study found preschoolers were sedentary for 90% of the day, and spent only 3.4% of the time doing moderate to vigorous physical activity.<sup>2</sup>
- TV viewing is linked to violence and aggressive behavior, antisocial conduct, lower grades, poor nutrition, increased obesity, and disrupted sleep schedules.<sup>3</sup>



#### 4. Increase Consultation and Training Opportunities

Child care offers both challenging and rewarding career opportunities. Better access to training and professional development would enable child care providers to learn, share best practices, and build their skills. In a survey of more than 550 child care centers, participants who reported taking specialized coursework in nutrition and feeding young children in group settings, also reported using recognized best practices at mealtimes in their centers.<sup>5</sup> Child care health consultants with public agencies can help to educate providers and promote healthy child development by improving policies and practices in the areas of nutrition, physical activity, and screen media.



### Actions to Improve the Child Care Environment

	Raise the Status of the Child Care Profession	Strengthen Licensing Requirements	Improve Health & Nutrition Program Infrastructure	Provide Consultation & Training
Federal	<ul style="list-style-type: none"> <li>Establish model standards for certification of child care providers.</li> </ul>	<ul style="list-style-type: none"> <li>Improve nutritional quality of meals and snacks served through federal programs.</li> <li>Convene experts to establish recommendations for comprehensive nutrition, physical activity, and screen media policies.</li> </ul>	<ul style="list-style-type: none"> <li>Increase federal resources for child care.</li> <li>Raise CACFP reimbursement to reflect increased food costs.</li> <li>Improve payment structure for CACFP sponsors to meet true costs of administration.</li> <li>Streamline the CACFP enrollment and reimbursement system.</li> </ul>	<ul style="list-style-type: none"> <li>Increase funding for training and educational materials.</li> <li>Provide funds to evaluate and disseminate promising models for obesity prevention.</li> <li>Strengthen requirements and provide resources for nutrition education through CACFP.</li> </ul>
State	<ul style="list-style-type: none"> <li>Offer regulatory and fiscal support to increase wages and benefits for child care providers.</li> <li>Develop and support associate degree programs at community colleges.</li> </ul>	<ul style="list-style-type: none"> <li>Establish nutrition standards and improve regulations for child care menus.</li> <li>Require policies for daily physical activity.</li> <li>Set limits on screen media.</li> </ul>	<ul style="list-style-type: none"> <li>Integrate child care policy goals with health and education policy.</li> <li>Partner with child care licensers to raise awareness of CACFP benefits and eligibility.</li> <li>Ensure that the creditable food list includes culturally relevant options.</li> </ul>	<ul style="list-style-type: none"> <li>Provide resources for CACFP sponsors to distribute to providers.</li> <li>Offer continuing education credit for training programs, including courses on nutrition, feeding, and physical activity.</li> </ul>
Local Agencies	<ul style="list-style-type: none"> <li>Engage child care providers in planning, training, and mentoring.</li> <li>Organize workshops and conferences for providers to network and share best practices.</li> </ul>	<ul style="list-style-type: none"> <li>Provide on site consultation with child care health consultants.</li> <li>Partner with local academic organizations for assessment and evaluation.</li> </ul>	<ul style="list-style-type: none"> <li>Provide budget and support for child care health consultation programs.</li> <li>Establish partnerships with child education, health, and community organizations.</li> </ul>	<ul style="list-style-type: none"> <li>Provide culturally relevant education materials.</li> <li>Disseminate evidence-based nutrition education curricula and model programs.</li> <li>Include parents and other caregivers in educational outreach.</li> </ul>

#### References

- <sup>1</sup> Bruening KS et al. *Journal of the American Dietetic Association*. 1999; 99(12):1529-35.
- <sup>2</sup> Brown WH et al. *Child Development*. 2009; 80(1):45-58.
- <sup>3</sup> American Academy of Pediatrics. *Pediatrics*. 2001 107: 423-426.
- <sup>4</sup> Food Research and Action Center. [www.frac.org](http://www.frac.org)
- <sup>5</sup> Sigman-Grant M et al. *Journal of the American Dietetic Association*. 2008; 108(2), 340-346.

For more information see [www.cphn.org](http://www.cphn.org)



Prepared by the University of Washington Center for Public Health Nutrition.  
Support for this project was provided by a grant from the Robert Wood Johnson Foundation.