# Obesity Prevention in Young Children Attending Child Care

Sara E Benjamin PhD, MPH, RD

Department of Community and Family Medicine and Duke Global Health Institute

2.11.10



#### Child care attendance in the US

- Nearly 3/4 of children ages 2 to 6 years are in some form of child care
  - Close to half attend child care centers
  - Other half in home-based settings
    - Family child care home
    - Family, friend, neighbor care

#### Child care attendance and obesity

1. Children who attended part-time child care ages 3 to 5 years had decreased risk of obesity between ages 6 to 12 compared to no child care

Lumeng JC GK, Appugliese D, Cabral HJ, and ZuckermanB. Preschool child care and risk of overweight in 6-to-12year-old children. *International Journal of Obesity and Related Metabolic Disorders*. 2005;29:60-66.

#### Child care attendance and obesity

- Children who attended child care the year prior to kindergarten had ↑ risk of obesity at start of kindergarten compared to no child care
  - Children at greatest risk were cared for in home of family, friend, or neighbor

Maher EJ, Li G, Carter L, Johnson DB. Preschool child care participation and obesity at the start of kindergarten. *Pediatrics*. Aug 2008;122(2):322-330.

#### Child care attendance and obesity

- 3. Infants in child care first 6 months of life
  - Heavier at 1 year and still at 3 years
  - Children at greatest risk cared for in someone else's home
- 4. Infants cared for by a relative first 9 months of life
  - Less likely to have been breastfed
  - More likely to eat solid foods too early
  - Greater weight gain in first 9 months

Benjamin SE, Rifas-Shiman SL, Taveras EM, Finkelstein J, Haines J, Kleinman K, Gillman MW. Early child care and adiposity at 1 and 3 years. *Pediatrics*. 2009 Aug; 124: 555-562.

Kim J, Peterson, K.E. Association of infant child care with infant feeding practices and weight gain among US infants. *Archives of Pediatric and Adolescent Medicine*. 2008;162(7):627-633.

# Does child care attendance contribute to childhood obesity?

- Poor dietary intake of children in child care
  - Low fruits, vegetables, fiber
- Inadequate physical activity in child care
  - Insufficient time for active play



# Two approaches to promoting healthy eating and physical activity in child care

1. Policy

2. Intervention



#### Regulation of child care in the US

- Each US state has own policies for child care facilities, including DC, Puerto Rico, Virgin Islands, and Dept Of Defense
- Most states regulate 2 main types of facilities: child care centers ("centers") and family child care homes ("homes")

#### 10A NCAC

bottle. Bottles shall not be propped. Each child shall be held or placed in feeding

name, be signed by the parent or health care provider, and be dated when received

The parent or health care provider of each child under 15 months of age shall

provide the operator an individual written feeding schedule for the child. This schedule shall be followed at the home. This schedule shall include the child's

chairs or other age-appropriate seating apparatus to be fed.

#### **CHAPTER 9 - CHILD CARE RULES**

(6)

	E	ffective July 1, 2008	
SECTION .0101 .0102	.0100 DEFINITIONS RESERVED FOR FUTUE DEFINITIONS	PAGE 1 RE CODIFICATION	
SECTION	.0200 GENERAL PRO	OVISIONS RELATED TO LICENSING 4	
.0201	INSPECTIONS		
.0202	RESERVED FOR FUTU		
.0203	RESERVED FOR FUTU	The operator shall provide the following on a daily basis for all children in	1 care:
.0204	CHANGES REQUIRIN	(1) Meals and snacks which comply with the Meal Patterns fo standards which are based on the recommended nutrient in	
.0205	PARENTAL ACCESS	National Research Council to be adequate for maintaining	
.0206	CAPACITY OF THE CI	types of food and number and size of servings shall be app	
.0207	RESERVED FOR FUTU	and developmental levels of the children in care. The Mea	
SECTION .0301 .0302	.0300 PROCEDURES PRE-LICENSING REQUAPPLICATION FOR A	in Child Care nutrition standards are incorporated by refer subsequent amendments. A copy of these standards is available from the Division at the address in Rule .0102 of this Chap No child shall go more than four hours without a meal or a Drinking water shall be freely available to children and of	lable free of charge ster. snack being provided.
.0303	RESERVED FOR FUTU	intervals.	_
		<ul> <li>(4) When milk, milk products, or fruit juices are provided by the pasteurized products or products which have undergone at pasteurization shall be used. Any formula which is prepared be prepared according to the instructions on the formula pasteurization to written instructions from the child's health categories.</li> <li>(5) Each infant shall be held for bottle feeding until able to ho</li> </ul>	equivalent process to d by the operator shall ackage or label, or re provider.

#### Model child care policies

#### Model Healthy Eating Regulations

- High fat\*, high sugar, and high salt foods are served less than one time per week or are not served
- Sugar sweetened beverages are not served
- Children older than two years are served reduced fat milk (skim or 1%)
- Clean, sanitary drinking water is available for children to serve themselves throughout the day
- Nutrition education is offered to child care providers at least one time per year
- Juice is limited to a total of 4-6 ounces or less 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 three times per year
- 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

- Children are provided with 60 minutes of physical activity per day, a combination of both teacher led and free play
- Television, video, and computer time are limited to one time per week or less and not more than 30 minutes each time
- 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 at least two times per day
- Physical activity education is offered to child care providers at least one time per year
- At least one provider joins children in active play at least one time per day
- Shaded area provided during outdoor play
- Children are not seated for periods longer than 30 minutes except when sleeping or eating
- Physical activity education is offered to children at least three times per year

Model Physical Activity Regulations

<sup>\*</sup>saturated fat and trans fat

Georgia R R Nevada Colorado B-R-Illinois Mississippi B-Ohio B-South Carolina B-Tennessee B-Alaska  $C \pm$ Delaware C+Hawaii  $C \pm$ Maine C+ C+Missouri New Jersey C+ C+New Mexico Oklahoma C+Rhode Island C+Texas C+Vermont C+Virginia C+Washington C+West Virginia C +

Alabama C С Arizona Arkansas California Florida Indiana C lowa С Kansas Marvland C Massachusetts С Michigan Minnesota Montana С New Hampshire New York North Carolina С Oregon С Pennsylvania C Utah С Wisconsin Wyoming C Washington DC Connecticut C-C-Kentucky Louisiana C-C-Nebraska North Dakota C-Virgin Islands C-Department of Defense C-South Dakota D Puerto Rico D F Idaho

Georgia Nevada Colorado Illinois R. IggississiM B-Ohio B-South Carolina B-Tennessee B-Alaska  $C \pm$ Delaware C+Hawaii  $C \pm$ Maine C+ C+Missouri New Jersey C+C+New Mexico Oklahoma C+Rhode Island C+Texas C+Vermont C+Virginia C+Washington C+West Virginia C +

Alabama C С Arizona Arkansas California Florida Indiana C lowa С Kansas Marvland Massachusetts С Michigan Minnesota Montana New Hampshire New York North Carolina С Oregon Pennsylvania Utah С Wisconsin Wyoming C Washington DC Connecticut C-C-Kentucky Louisiana C-C-Nebraska North Dakota C-Virgin Islands C-Department of Defense C-South Dakota D Puerto Rico D F Idaho

Georgia R R Nevada Colorado B-R-Illinois Mississippi B-Ohio B-South Carolina B-Tennessee B-Alaska  $C \pm$ Delaware C+Hawaii  $C \pm$ Maine C+ C+Missouri New Jersey C+C+ New Mexico Oklahoma C+Rhode Island C+Texas C+Vermont C+Virginia C+Washington C+West Virginia C +

Alabama C С Arizona Arkansas California Florida Indiana C lowa С Kansas Marvland Massachusetts С Michigan Minnesota Montana New Hampshire New York North Carolina С Oregon Pennsylvania Utah С Wisconsin Wyoming C Washington DC Connecticut C-C-Kentucky Louisiana C-C-Nebraska North Dakota C-C-Virgin Islands Department of Defense D South Dakota Puerto Rico D Idaho

Georgia R R Nevada Colorado B-R-Illinois Mississippi B-Ohio B-South Carolina B-Tennessee B-Alaska  $C \pm$ Delaware C+Hawaii  $C \pm$ Maine C+ C+Missouri New Jersey C+ C+New Mexico Oklahoma C+Rhode Island C+Texas C+Vermont C+Virginia C+Washington C+West Virginia C +

Alabama C С Arizona Arkansas California Florida Indiana lowa Kansas Marvland Massachusetts С Michigan Minnesota Montana New Hampshire New York North Carolina Oregon С Pennsylvania Utah Wisconsin Wyoming C Washington DC Connecticut C-C-Kentucky Louisiana C-C-Nebraska North Dakota C-Virgin Islands C-Department of Defense C-South Dakota D Puerto Rico D F Idaho

## Preventing Obesity In The Child Care Setting: Evaluating State Regulations



#### ROLE OF CHILD CARE IN OBESITY PREVENTION

Over the past few decades, the prevalence of childhood obesity has risen dramatically in the US. Today, 24.4% of children ages two through five years are classified as either overweight or obese. The preschool period is a critical time for

growth and active play of

In the US
to six are in
just over he
With such
care, child c
to support
promote phy

In the U is the responsable and enforce result, regulations and considerable

#### **EVALUATION OF STATE CHILD CARE REGULATIONS**

For this study, experts in nutrition, physical activity, early care and education, and policy and regulation reviewed a number of standards and recommendations that were developed to help child care facilities prevent obesity in young

#### NORTH CAROLINA OVERALL GRADE: C

Healthy Eating Grades
Centers Homes

C

Physical Activity Grades

Centers

Homes

B-

C-

To view the full report or individual state report cards, please visit: http://cfm.mc.duke.edu/childcare

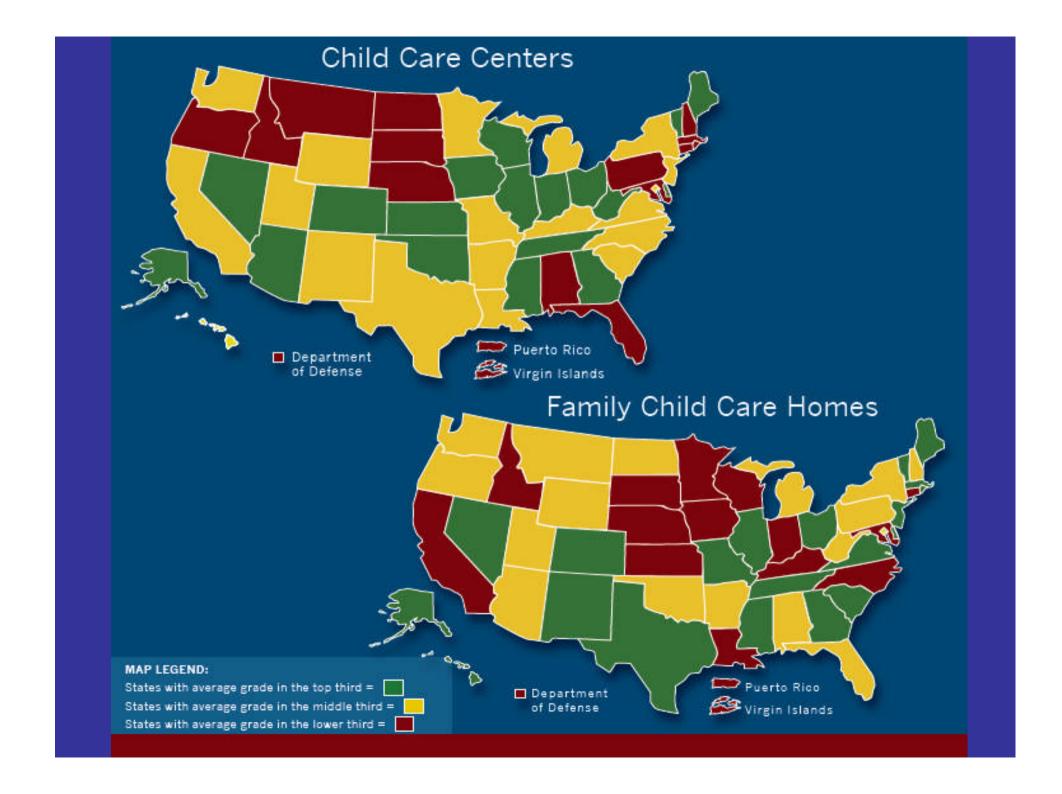
### NC child care regulations

Centers	Homes	Healthy Eating Regulations in North Carolina
1		Foods of low nutritional value are served infrequently
		Sugar sweetened beverages are not served
		Children older than two years are served reduced fat milk
1	1	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
	1	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 shacks
		Providers encourage, but do not force, children to eat

<sup>&</sup>quot;Checkmark indicates presence of state regulation

Centers	Homes	Physical Activity Regulations in North Carolina
1	1	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
1	1	Children are provided outdoor active play time
1		Physical activity education is offered to child care providers
		At least one provider joins children in active play
1		Shaded areas are provided during outdoor play
1		Children are not sealed for long periods of time
		Physical activity education is offered to children

<sup>\*</sup>Checkmark indicates presence of state regulation



#### Conclusions

 Most states lacked adequate healthy eating and physical activity policies, esp. for family child care homes

 North Carolina average scores for child care centers and low scores for family

child care homes

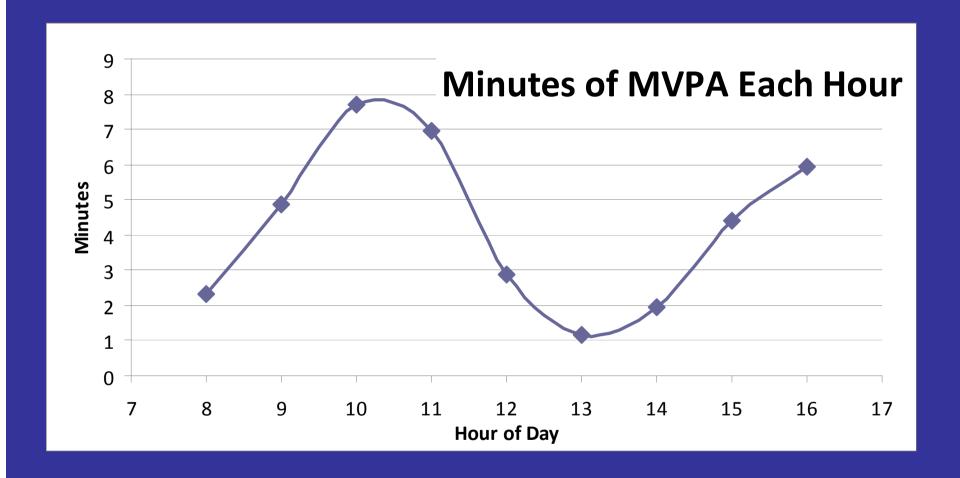
#### Physical activity policy

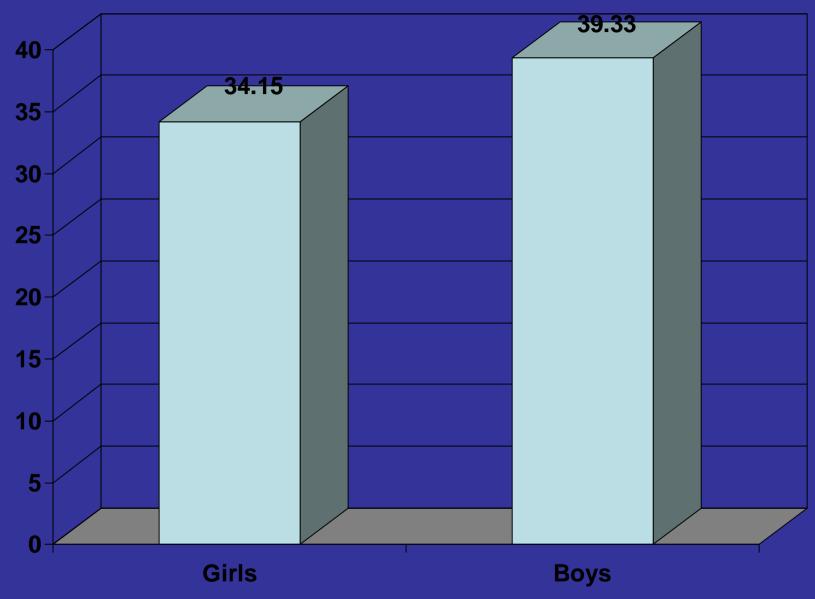
- Delaware, Alaska, and Massachusetts require specific amount of time for physical activity
  - 20-30 minutes for half day care
  - 60 minutes for full-day care

#### Physical activity in child care

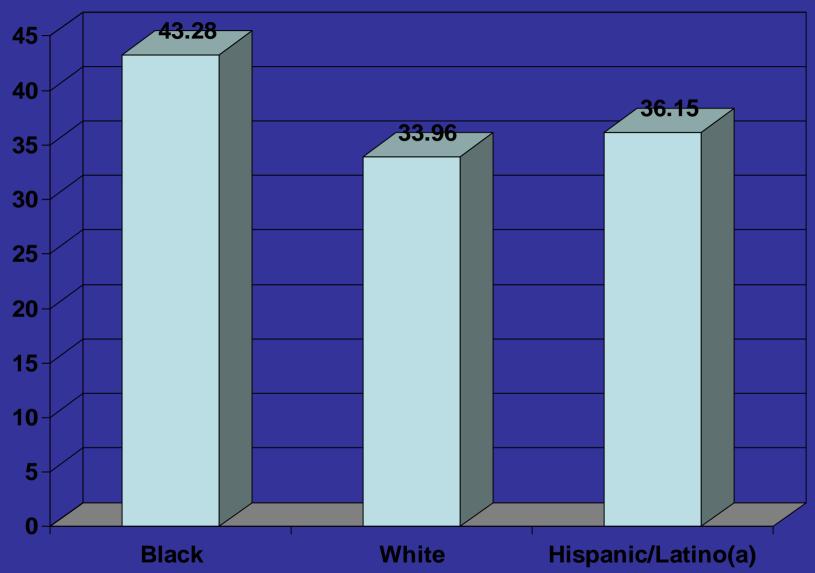
State	Sedentary activity,* minutes	Moderate/vigorous activity, minutes
	Mean	(SD, range)
MA	150 (91-178)	42 (6-88)
RI	165 (93-243)	29 (1-66)
NC	206	43

<sup>\*</sup>Does not include minutes of slow and easy movement or minutes children spent eating and sleeping





Minutes of MVPA per day accumulated while in child care for girls and Boys. Control for race, how long monitor worn, age, and center. P < 0.0001



Minutes of MVPA time per day accumulated while in child care. Control for gender, how long monitor worn, age, and center. P<0.0001

#### Healthy eating policy

- Delaware enacted new regulations requiring
  - Low-fat milk for children over 2 years
  - Majority of grains to be whole grains
  - Limit juice (no juice for infants)
  - No sugar-sweetened beverages

#### Dietary intake in NC child care

- Children consumed less than recommended for all food groups except milk
- Children consumed 1/3 cup fruit and 1/4 cup vegetables
   (21% of recommended amount fruit and 16% vegetables)

Table 1. Foods	served to and consumed by 3 to 5 year old
children (n=117	in NC child care centers, compared to

		Amt. So	erved	Amt. Consumed	
Food/Group	<b>MyPyramid</b>	Amount	% Rec	Amount	% Rec
	Rec, <sup>a</sup> Daily				
Vegetables, total	1.5 C	0.37 C	24.7	0.25 C	16.7
Vegetables, dark <sup>b</sup>	0.5 C	0.07 C	14	0.04 C	7
Fruit	1.5 C	0.48 C	32	0.32 C	21.3
100% Fruit Juice	≤6 oz	3.48 oz	58	2.80 C	46

<sup>&</sup>lt;sup>a</sup>Based on 1400 kcal diet for 4-year-old girl active 30-60 minutes/day



<sup>&</sup>lt;sup>b</sup>Based on amounts recommended weekly

# The Nutrition and Physical Activity Self Assessment for Child Care Project (NAP SACC)

Promoting healthy eating and physical activity in child care and preschool settings



#### NAP SACC Nutrition Areas

- 1. Fruits and Vegetables
- 2. Fried Foods/High Fat Meats
- 3. Beverages
- 4. Menus and Variety
- 5. Meals and Snacks
- 6. Foods Outside of Meals and Snacks
- 7. Modeling
- 8. Nutrition Education
- 9. Nutrition Policies

#### NAP SACC Physical Activity Areas

- 1. Active and Inactive Play
- 2. TV Use and Viewing
- 3. Play Environment
- 4. Modeling
- 5. Physical Activity Education
- 6. Physical Activity Policies

#### NAP SACC Self-Assessment

- Child care providers selfassess their nutrition and physical activity environments
- Providers work with a trained health professional to identify goals for improvement

	Your Name: _			Date:	
S	ACC Child Care Ce	enter/Home Name			
ones	e read each statement or question ca st responses will help us work with yo	u to build a healthy nul			
577.7	1) Fruits and Vegetables	·			
A	Fruit (not juice) is served:	2 times per week or less	3-4 times per week	1 time per day	2 or more times per day
В.	Fruit is served fresh, frozen, or canned in own juice:	Rarely or never	Some of the time	Most of the time	All of the time
C.	100% fruit juice is served:	2 or more times per day	1 time per day	2-4 times per week	1 time per week or less
D.	Vegetables (not including french fries or fried potatoes) are served:	2 times per week or less	3-4 times per week	1 time per day	2 or more times per day
E.	Vegetables served are dark green, red, orange, or yellow in color:	Less than 1 time per week	1-2 times per week	3-4 times per week	1 or more times per day
F.	Cooked vegetables are prepared with added meat fat, margarine or butter:	1 or more times per day	3-4 times per week	1-2 times per week	Less than 1 time per week
(N	I2) Fried Foods and High	Fat Meats			
A	Fried or pre-fried meats (chicken nuggets) or fish (fish sticks) are served:	1 or more times each day	3-4 times per week	1-2 times per week	Less than one a week or nev
В.	Fried or pre-fried potatoes (french fries, tater tots, hash browns) are served:	1 or more times each day	3-4 times per week	1-2 times per week	Less than one a week or nev
C.	High fat meats (sausage, bacon, hot dogs, bologna, ground beef) are served:	1 or more times each day	3-4 times per week	1-2 times per week	Less than one a week or nev

## NAP SACC The Intervention Process

- Step 1

  Centers self-assess nutrition and physical activity environments
- Step 2

  Centers identify areas for improvement and map out strategies with NAP SACC Consultant
- Step 3

  NAP SACC Consultants conduct continuing education workshops for center staff
- Step 4
  NAP SACC Consultants provide monthly technical assistance
- Step 5
  Centers self-assess nutrition and physical activity environments

# NAP SACC Nutrition Improvements



- Moved vending machine from lobby to less visible area
- Wrote nutrition policies
- Revised menus
- Switched to low-fat milk for children over two years

# NAP SACC Physical Activity Improvements

- Wrote physical activity policies
- Created indoor play space



#### What Providers Said About NAP SACC

"We started looking at our menus more closely."

"Until this program some of the staff did not realize that fat free milk was ok for children."

"It was surprisingly easy to make these changes."

"The only change that cost money was adding more vegetables to the menu"



#### Children will eat fruits and vegetables

- Providing greater amounts of fruits and vegetables to children increases their consumption
  - Spill and colleagues found that increasing amount of carrots served to preschool children resulted in greater consumption
  - Fisher et al. doubled portion of fruit and vegetables (75g to 150g) served to 4 to 6 year old children and found intake increased by 70% and 38%, respectively

#### Watch Me Grow Intervention

- Watch Me Grow (WMG) is a preschool garden program rooted in the community
- Worked with Duke Center for Community Research to engage 3 community partners in Durham County, NC to help deliver the WMG intervention:
  - 1. SEEDS
  - 2. Child Care Services Association
  - 3. Durham County Health Department



#### Watch Me Grow Intervention

- Establish gardens in child care to grow fruits and vegetables over the course
- Child Care Nutritionists deliver a coordinated Watch Me Grow curriculum planned around harvest of month.
  - Activity
  - Book
  - Recipe



#### **Collaborators**

Jonathan Finkelstein, MD, MPH (Harvard Medical School) Matthew Gillman, MD, SM (Harvard Medical School) Dianne Ward, EdD (UNC-Chapel Hill) Derek Hales, PhD (UNC-Chapel Hill)

#### **State Partners**

MA Early Education and Care
MA Department of Public Heath
Rhode Island Department of Health

Thank you!

