HEAD START
BODY START

POLICY SERIES

Policy Action Recommendations
for Physical Activity and Nutrition in Early Childhood Settings

by Head Start Body Start
a project of the American Alliance for Health, Physical Education, Recreation and Dance
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Building Health in Early Childhood Requires Policy Attention

Healthy, active children have the building blocks for school success, and Early Childhood Education and Care (ECEC) providers want their children to have foods, learning activities, play, and spaces for strong bodies and minds. However, time, know-how, resources, and limited policy support currently constrain providers’ ability to promote wellness.

This brief will help ECEC policymakers, administrators, providers, parents, and other stakeholders understand the barriers to sound nutrition and active physical play in Head Start and other ECEC settings. These stakeholders can take five steps to improve ECEC environments for young children’s health and physical development. The findings and recommendations are based on existing research, evidence-based guidelines, and input from experts in the field (see also Head Start Body Start’s What Do the Experts Say? Interviews with Experts in Nutrition and Physical Activity, 2012).

Physical Activity, Healthy Foods Fuel Child Development

Physical health in early childhood can influence both school readiness and the development of healthy behaviors. For this reason, it is concerning that one in five preschoolers are overweight, which puts their longer-term health – and learning potential – at risk (see also Head Start Body Start’s Just the Facts: Evidence Base and Policy Overview, Physical Activity and Nutrition in Early Childhood Settings, 2012).

To develop strong minds and bodies, young children need both well-balanced diets and moderate-to-vigorous physical activity (MVPA). National guidelines recommend young children engage in at least one hour each day of playful MVPA. An active early childhood fueled by healthy foods also helps establish lifelong preferences that support wellness.

ECEC settings play a vital role in assuring that children enter school with the health and development to succeed. First, many young children spend many of their waking hours outside the home. As a result, MVPA and foods in ECEC settings can be a major factor in young children’s learning, growth, and development. Second, ECEC settings influence the formation of young children’s preferences for physical activity and nutrition over time. For example, children who develop age-appropriate physical movement skills at an early age are more likely to participate in athletic activities later due to the feeling of competence.
ECEC leaders, researchers, and child advocates increasingly are focused on meeting the nutritional and MVPA needs of young children. National Initiatives Addressing Childhood Obesity (below) highlights a few of these efforts.

### Just the Facts

- 42 percent of young children (birth to six years) spend 35 hours or more per week in childcare settings.\(^8\)
- 1 million young children (three to five years) participate in the Head Start program.\(^9\)
- Preschool-aged children consume 50 to 100 percent of their daily calories in care settings outside the home.\(^10\)
- 21 percent of children ages two to five are overweight, increasing their risk for disease, disability, and psychosocial problems.\(^11\)

### National Initiatives Addressing Childhood Obesity

- First Lady Michelle Obama’s [Let’s Move!](#) Initiative
- The US [National Physical Activity Plan](#)
- [Preventing Childhood Obesity in Early Care and Education: Selected Standards from Caring for Our Children](#)
- [Head Start Body Start National Center for Physical Development and Outdoor Play](#)

### ECEC Providers Face Multiple Barriers

ECEC providers care about children’s health and wellbeing but face several interrelated obstacles to getting children active and eating well.\(^12,13,14,15,16,17,18,19,20,21,22\) Figure 1 summarizes constraints internal to many ECEC settings. Figure 2 focuses on external challenges.
## Figure 1: Internal ECEC Barriers to Promoting MVPA and Healthy Eating

<table>
<thead>
<tr>
<th>Barriers Faced by ECEC Administrators and Teachers</th>
<th>Overview</th>
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| Knowledge and Skills                              | Gaps in education and training include:  
  - What constitutes MVPA and healthy diets  
  - Why these matter  
  - How to get children active and eating healthy foods |
| Cultural Preferences and Beliefs                  | Cultural preferences and beliefs presenting challenges include:  
  - Partiality to foods that have low nutritional value  
  - Beliefs that are inconsistent with research about:  
    - Feeding young children  
    - “Good” foods and physical activity in general |
| Inadequate Time                                   | ECEC staff lack the time outside of the classroom or office to:  
  - Participate in professional development  
  - Build community partnerships  
  - Plan and implement improvements |
| Resource Constraints                               | Resources often are insufficient or lacking in terms of:  
  - Food preparation equipment  
  - Meal reimbursement for nutritious foods  
  - Access to age-appropriate equipment as well as indoor and outdoor spaces that are safe |
| Limited Family Support                            | Family support issues presenting challenges include:  
  - Families’ cultural beliefs, knowledge, values, and practices that are at odds with MVPA and healthy foods  
  - Foods from home may have low nutritional value due to lack of access, lack of knowledge, or differing cultural beliefs |
**Figure 2: Gaps in External Support That Inhibit Improvements in ECEC Environments**

<table>
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<tr>
<th>Gaps in External Support</th>
<th>Overview</th>
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<tbody>
<tr>
<td><strong>Policy Attention</strong></td>
<td>• Limited attention to both wellness in ECEC settings and young children’s need for MVPA and nutrition</td>
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<td>• Insufficient reinforcement of the connection between Head Start’s school readiness goals and the physical health component of the new Early Learning Framework</td>
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<td><strong>Policy Support and Financial Investments</strong></td>
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<td>• Federal, state, and local ECEC policies about MVPA and nutrition often are outdated</td>
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<td>• Existing quality standards for healthful environments are weak, lacking connection to</td>
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<td></td>
<td>- Incentives or rewards for improvements</td>
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<td></td>
<td>- Accountability policies and procedures that assure</td>
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<td></td>
<td>• implementation of standards at appropriate levels</td>
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<td><strong>Research Gaps</strong></td>
<td>Dearth of studies regarding:</td>
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<td></td>
<td>• Impact of ECEC regulations on MVPA and nutrition</td>
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<td></td>
<td>• ECEC providers’ professional development needs</td>
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<td></td>
<td>• The needed quality of indoor and outdoor spaces for MVPA</td>
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<td></td>
<td>• Strategies for adapting model programs and guidelines into Head Start and other ECEC settings</td>
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<tr>
<td><strong>Limited Community Support</strong></td>
<td>Local governments, civic groups, and businesses often do not assist ECEC providers in obtaining:</td>
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<td>• Joint-use agreements for access to community facilities, parks, and gardens</td>
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<td></td>
<td>• Grants for equipment and curriculum upgrades</td>
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<td></td>
<td>• Healthy foods stocked in neighborhood stores</td>
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Proven and promising strategies are available to address these barriers. Existing resources include expert guidelines, toolkits for ECEC providers, and model regulations. The challenge is helping ECEC policymakers, providers, and families recognize the importance of and take steps to improve places where young children are learning, playing, and growing.

**Five Actions to Promote Child Health in ECEC Settings**

Giving all young children in ECEC settings the benefits of healthful environments will require local, state, and federal action, as well as private sector support. Five investment opportunities collectively address the barriers identified above. Each investment is necessary to move solutions into practice.
Five Policy Actions

To get children active and eating well in ECEC settings, policymakers and early childhood advocates must:

A. Secure support from ECEC providers, families, and local stakeholders;
B. Update ECEC policies and regulations using evidence-based guidelines;
C. Provide ECECs with financial and technical resources to make improvements;
D. Enhance systems of accountability at all levels; and
E. Expand research about how best to meet the dietary and MVPA needs of young children in different ECEC settings.

FIRST, to attain sustainable improvements, **early childhood advocates and policymakers must secure buy-in from ECEC administrators, teachers, and families.** A starting point is to raise awareness among these key audiences about the importance of MVPA and nutrition in early childhood. (Other key audiences include employers that sponsor childcare, local businesses and civic groups, and human services agencies that support families.) Champions should use consistent, tested messaging about the benefits of MVPA and healthy eating for young children. The US Department of Agriculture’s dietary guidelines ([www.ChooseMyPlate.gov](http://www.ChooseMyPlate.gov)) provide one source of nutrition messaging for preschoolers. Head Start Body Start and its resources, including the 2012 HSBS Policy Guide documents as well as HSBS literature reviews on the benefits of play and sociocultural influences on play are valuable resources for best practices and current research in the area of physical play. The collaborative, multi-agency National Physical Activity Plan and the Institute of Medicine’s Early Childhood Obesity Prevention Policies also are useful sources of physical activity messaging.

Moving from awareness to buy-in will require involving ECEC stakeholders in making changes. Plans must specifically address the needs of infants, toddlers, and preschoolers. Further, investments should take into account ECEC providers’ realities, especially those listed in Figure 1, above.

SECOND, policymakers should integrate evidence-based guidelines about MVPA and nutrition into ECEC standards, licensing, and funding policies. Both Head Start policies and the federal Child and Adult Care Feeding Program need updating. State and local ECEC regulators can adapt model regulations to local conditions and goals. To assure feasibility, policy changes should be phased in, with regular review and updating.

THIRD, national, state, and local stakeholders should offer ECEC providers a range of new resources to build healthful environments. Ongoing training, technical assistance, community partnerships, and seed funding are necessary to help ECEC providers find time to plan and implement changes. Financial support can be time-limited and require recipients to achieve benchmarks. To motivate or reward improvements, new
incentives could include certification, regional recognition, or increased meal reimbursements for exceeding Child and Adult Care Feeding Program standards.

FOURTH, ECEC regulators and employers that sponsor childcare should enhance ECEC systems of accountability. Wellness-related performance standards must be transparent, and measures should correspond with evidence-based guidelines and program goals. Accountability should be woven into all levels of ECEC oversight. State or regional coordinators can monitor changes at the local level, help resolve problems, broker partnerships, and arrange regional professional training.

FIFTH, private philanthropies and governments should expand research to:

- Develop programs and curriculum for MVPA and healthy eating that are tailored to young children and ECEC settings;
- Identify and test promising practices; and
- Evaluate different regulatory approaches to promoting healthful ECEC environments and to measuring performance.

Conclusions

Young children can thrive and be ready for school when they have opportunities for healthy growth and development in ECEC settings. The first steps to realizing this vision are, one, engaging ECEC providers and families and, two, updating federal, state, and local policies. Related actions include increasing support to enable ECEC providers to make improvements, enhancing accountability for wellness throughout the system, and furthering research about meeting young children’s needs for MVPA and healthy foods.

For More Information

This policy brief is based on a Head Start Body Start study that reviewed the literature, existing policies, and evidence-based guidelines regarding nutrition and MVPA in ECEC settings. Researchers also interviewed 17 experts for the analysis. This policy brief has three companion reports:


Head Start Body Start National Center for Physical Development and Outdoor Play

This policy brief was developed by the Head Start Body Start National Center for Physical Development and Outdoor Play, a project of the American Alliance for Health, Physical Education, Recreation and Dance. With grant funding from the Administration for Children and Families, U.S. Department of Health and Human Services (HHS), Head Start Body Start aims to increase physical activity, outdoor play, and healthy eating among Head Start and Early Head Start children, families, and staff. To learn more about Head Start Body Start, please visit: http://www.headstartbodystart.org

The opinions and views expressed in this report are those of the authors. They do not necessarily reflect the views of HHS, the contractor, or any other organization.
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