

eat smart

move more



RHODE ISLAND EARLY CARE AND EDUCATION ACTION PLAN 2011





MESSAGE FROM THE RHODE ISLAND DEPARTMENT OF HEALTH

We are pleased to introduce the *Rhode Island Eat Smart Move More: Early Care and Education Action Plan 2011*, a plan to improve nutrition and physical activity in early care and education settings. Rhode Island was selected by the Centers for Disease Control and Prevention (CDC) as one of five pilot states to improve nutrition and physical activity policies and practices in these settings. In August 2010, the Obesity Prevention in Early Care and Education Committee—a stakeholder group of child care experts—was formed to respond to this challenge. The Rhode Island Department of Health (HEALTH) would like to extend our thanks to this committee for recognizing the importance of promoting healthy lifestyles and for their commitment to making this action plan possible.

With about a third of Rhode Island children entering kindergarten overweight or obese, obesity prevention efforts must target young children. Thousands of Rhode Island children receive care outside their home in early care and education facilities, making these settings ideal for promoting healthy eating and physical activity. Within this plan, the Obesity Prevention in Early Care and Education Committee has outlined policy recommendations and practice changes that will create healthier environments for Rhode Island children.

The Committee's efforts to reduce the burden of obesity in early care and education settings are part of a multi-faceted strategy led by Rhode Island's Initiative for a Healthy Weight (IHW) program. As outlined in IHW's *Eat Smart Move More: A Plan for Action 2010-2015*, this comprehensive strategy includes obesity prevention efforts in child care, schools, worksites, healthcare, communities, and the built environment. Rhode Island must continue to work in all these settings to ensure that every child in the state has the opportunity to live a long, healthy, and productive life.

Sincerely,

Michael Fine, MD, Director of Health

By helping to implement the recommendations in this action plan, we will create healthier early care and education settings throughout the state, giving our children the opportunity to establish healthy habits critical to shaping their physical, emotional, and social well being.



RHODE ISLAND EARLY CARE AND EDUCATION GOALS AND STRATEGIES

The goals and strategies selected as part of the *Rhode Island Eat Smart Move More: Early Care and Education Action Plan 2011* represent a key investment in high-quality early education. The goals articulate the state's vision for early care and education environments that promote healthy eating and physical activity. The supporting action steps include:

1. Changes to the Department of Children, Youth and Families (DCYF) licensing regulations to explicitly include standards on physical activity, screen time, nutrition and breastfeeding.
2. Improvements to the BrightStars Quality Rating and Improvement Systems to explicitly include standards on physical activity, screen time, nutrition, and breastfeeding.
3. Improvements to the Rhode Island Department of Education Early Learning Standards to explicitly include standards on physical activity and nutrition.
4. Additions to professional development criteria to support early care and education providers in their efforts to keep children healthy, active, and learning.

The goals and strategies outlined below are evidence-based and, when implemented as a comprehensive, coordinated plan, have the potential to significantly impact the rates of childhood obesity and overweight in our state.

EXECUTIVE SUMMARY

Early care and education experiences influence thousands of Rhode Island children every day. Care outside the home has become the norm for working families as more than three-quarters of children are cared for in early care and education settings, and even more in informal arrangements such as care by family, friends, or neighbors.¹ Research has shown that early care and education policies and environments greatly influence children's physical activity levels and younger children are more likely than older children to adopt healthy nutrition and physical activity related behaviors.^{2,3} Additionally, policies in these settings can greatly influence food intake, as children consume about two-thirds of their total calories in child care.

Despite the fact that early care and education settings are ideal environments for promoting healthy eating and physical activity for the majority of Rhode Island children, these settings face significant challenges in creating healthier environments. Promoting healthy habits requires a shift in the way this entire community approaches caring for children and supports high-quality early education. Early care and education settings need comprehensive guidance and training in physical activity, nutrition, screen time, and breastfeeding to help create healthier environments and combat childhood obesity.

Childhood obesity has been increasing at alarming rates across the country and in Rhode Island. In Rhode Island, over 30% of children entering kindergarten are overweight or obese. About 35% of Rhode Island's low income children between the ages of two to five are overweight or obese—higher than the national average of 32%.⁴ Obese children are more likely to suffer from chronic disease including type 2 diabetes, high blood pressure, and cardiovascular disease. These medical conditions not only affect the health of these young children, but also contribute to rising healthcare costs.

Early care and education settings represent a critical—and largely untapped—opportunity for obesity prevention efforts. These settings have historically ensured that children's health is a top priority, addressing issues such as immunizations, cleanliness, and safety. Supported by changes in Rhode Island's state licensing, early learning standards, quality rating improvement system, and professional development curriculum, early care and education settings will be able to make the needed improvements in nutrition and physical activity and strengthen their ongoing focus on the health of Rhode Island children.

1. Federal Interagency Forum on Child and Family Statistics. *America's Children: Key National Indicators of Well-Being, 2002*. Washington, DC: DC: U. S. Government Printing Office; 2002

2. Pate RR, Pfeiffer KA, Trost SG, Ziegler P, Dowda M. Physical activity among children attending preschools. *Pediatrics*. 2004 Nov;114(5):1258-63.

3. Centers for Disease Control and Prevention, Division of Nutrition, Physical Activity, and Obesity. *State Action Guide to Address Childhood Obesity in Early Care and Education*. Draft. Mar 2011.

4. Rhode Island Special Supplement for Women Infants and Children, 2009.

goal 1

All children in licensed* early care and education centers will engage in 30 or 60 minutes of daily physical activity, depending on the type of program.



STRATEGY 1A. Support changes to DCYF regulations to require at least 60 minutes of daily moderate to vigorous physical activity for children, birth to five years old, in full day programs in all licensed early care and education centers.

STRATEGY 1B. Support changes to DCYF regulations to require at least 30 minutes of daily moderate to vigorous physical activity for children, birth to five years old, in half day programs in all licensed early care and education centers.

STRATEGY 1C. Develop early learning and quality rating standards for physical activity for children, birth to five years old, and distribute them to early educators, center administrators, parents, and key stakeholders.

STRATEGY 1D. Provide training, tools, and technical assistance on physical activity standards to early educators and center administrators.

* Early care and education centers in Rhode Island are licensed by the Rhode Island Department of Children, Youth, and Families (DCYF).

goal

2

All children in licensed early care and education centers will have limited or no screen time (television or computer), depending on their age.



STRATEGY 2A. Support changes to DCYF regulations to prohibit screen time for children, younger than 24 months, in all licensed early care and education centers.

STRATEGY 2B. Support changes to DCYF regulations to limit daily screen time to 30 minutes of education concepts for children, 24 months to five years old, in all licensed early care and education centers.

STRATEGY 2C. Provide trainings, tools, and technical assistance on screen time alternatives to early educators and center administrators.

goal 3

All children in licensed early care and education centers will be offered healthy foods and beverages.



STRATEGY 3A. Support changes to DCYF regulations to require compliance with Rhode Island Child and Adult Care Food Program (CACFP) in all licensed early care and education centers.

STRATEGY 3B. Support changes to DCYF regulations to prohibit sugar-sweetened beverages in all licensed early care and education centers.

STRATEGY 3C. Develop early learning and quality rating standards for nutrition for children, birth to five years old, and distribute them to early educators, center administrators, and parents.

STRATEGY 3D. Provide training, tools, and technical assistance on nutrition standards to early care and education food service providers, caterers, and staff.

STRATEGY 3E. Provide training, tools, and technical assistance on nutrition standards to early educators, center administrators, and health nurse consultants.

goal

4

All breastfeeding mothers and breastfed babies will be supported in licensed early care and education centers.



STRATEGY 4A. Support changes to DCYF regulations to require an onsite space for breastfeeding in all licensed early care and education centers.

STRATEGY 4B. Develop early learning and quality rating standards for feeding practices and breastmilk handling, and distribute them to early educators and center administrators.

STRATEGY 3C. Provide training, tools, and technical assistance on breastfeeding and breastmilk handling to early educators and center administrators.

call to --- action

The burden of overweight and obesity continues to affect millions of young children. Rhode Island must take the lead in addressing this challenge. In the past year, the Obesity Prevention in Early Care and Education Committee has taken the first steps—outlining the way to improve healthy eating and physical activity in early care and education settings. Now, we—policymakers, government representatives, parents, early care and education providers, and community members—must contribute to this effort. Implementation of the goals presented in this action plan will create healthier early care and education settings throughout the state, helping our children to establish healthy habits that are critical to shaping their physical, emotional, and social well being.



Initiative for a Healthy Weight Program • www.health.ri.gov