

Acting Early to Prevent Obesity

CDC'S DIVISION OF
NUTRITION, PHYSICAL
ACTIVITY, AND OBESITY

Working with Nemours
Children's Health System
to keep Americans safe
and healthy where they
live, work, learn, and play.



Childhood obesity is a major threat to the health of our nation, with nearly one in four 2–5 year olds overweight or with obesity. Acting early to address obesity is critical. If young children are overweight by the time they enter kindergarten, they are four times more likely to have obesity by 8th grade.¹

Most young children spend time in care outside the home, making the Early Care and Education (ECE) setting one of the best places to address childhood obesity. More than 60% of children aged 3–5 years are cared for in ECE programs, which include child care centers, family child care homes, Head Start and pre-kindergarten programs. ECE programs can directly influence what young children eat and drink, encourage physical activity, and promote healthy habits.

¹ Compared to children who are not overweight.

In FY 2012, CDC launched the **Early Childcare and Education Obesity Prevention Program**. As part of this program, CDC funds Nemours Children's Health System (Nemours) to work closely with state and local partners, on a voluntary basis, to support proven obesity prevention strategies in the ECE setting. Together, CDC and Nemours work with state public health and ECE leaders to:

1 MAKE STATEWIDE IMPROVEMENTS in the state ECE system

2 SUPPORT A TARGETED GROUP OF ECE PROVIDERS

with practical training and technical assistance regarding how to make changes within their program to support healthy eating and physical activity using the "National Early Child Care Collaboratives (NECCC)" intervention.

Together, we have reached ECE systems and programs in 10 states – Alabama, Arizona, California, Florida, Indiana, Kansas, Kentucky, Missouri, New Jersey, and Virginia. State leaders are now integrating obesity prevention strategies into statewide training and technical assistance resources and quality rating and improvement systems (QRIS), impacting thousands of ECE programs. The NECCC has directly trained providers from over 2,300 ECE programs, serving more than 194,000 children. In looking across four groups of ECE providers, there was a statistically significant increase in the adoption of best practices for healthy eating, physical activity, reduced screen time, and breastfeeding support.

In Kentucky, many stakeholders have been hesitant to address obesity prevention practices and policies that impact the operations of nearly 3,000 licensed child care centers and certified homes. [Through this] project, we have been able to shift statewide attitudes so that more stakeholders are valuing and prioritizing early childhood obesity prevention efforts.

Rebekah Duchette
ECELC Project Coordinator

Through the [NECCC intervention], I have learned that small changes can have a big impact. Our center has increased the number of times per week that fresh fruits are used rather than canned; we are purchasing 100% whole wheat bread, and we are implementing family style dining practices gradually. We are also incorporating more movement activities in our daily routines. Since beginning the implementation of our goals, the children's table skills have increased, they are showing more of a willingness to try new things, and their behavior has changed for the better.

Ms. Harman
Director, Kids Playhouse, Joplin, MO

HOW THE NECCC INTERVENTION WORKS

The NECCC intervention trains teams of early care and education providers on proven obesity prevention strategies in the ECE setting. Over a 10 month period, teams typically meet together for five, day-long trainings covering nutrition, physical activity, breastfeeding support, and limited screen time. The training includes hands on learning, peer-to-peer sharing, and customized technical assistance to make improvements.



TRAINED
PROVIDERS FROM
2,300
ECE PROGRAMS



SERVED
194,000
CHILDREN

State Highlights

The training and technical assistance provided to states through the **Early Childcare and Education Obesity Prevention Program** supported the obesity prevention efforts highlighted below.

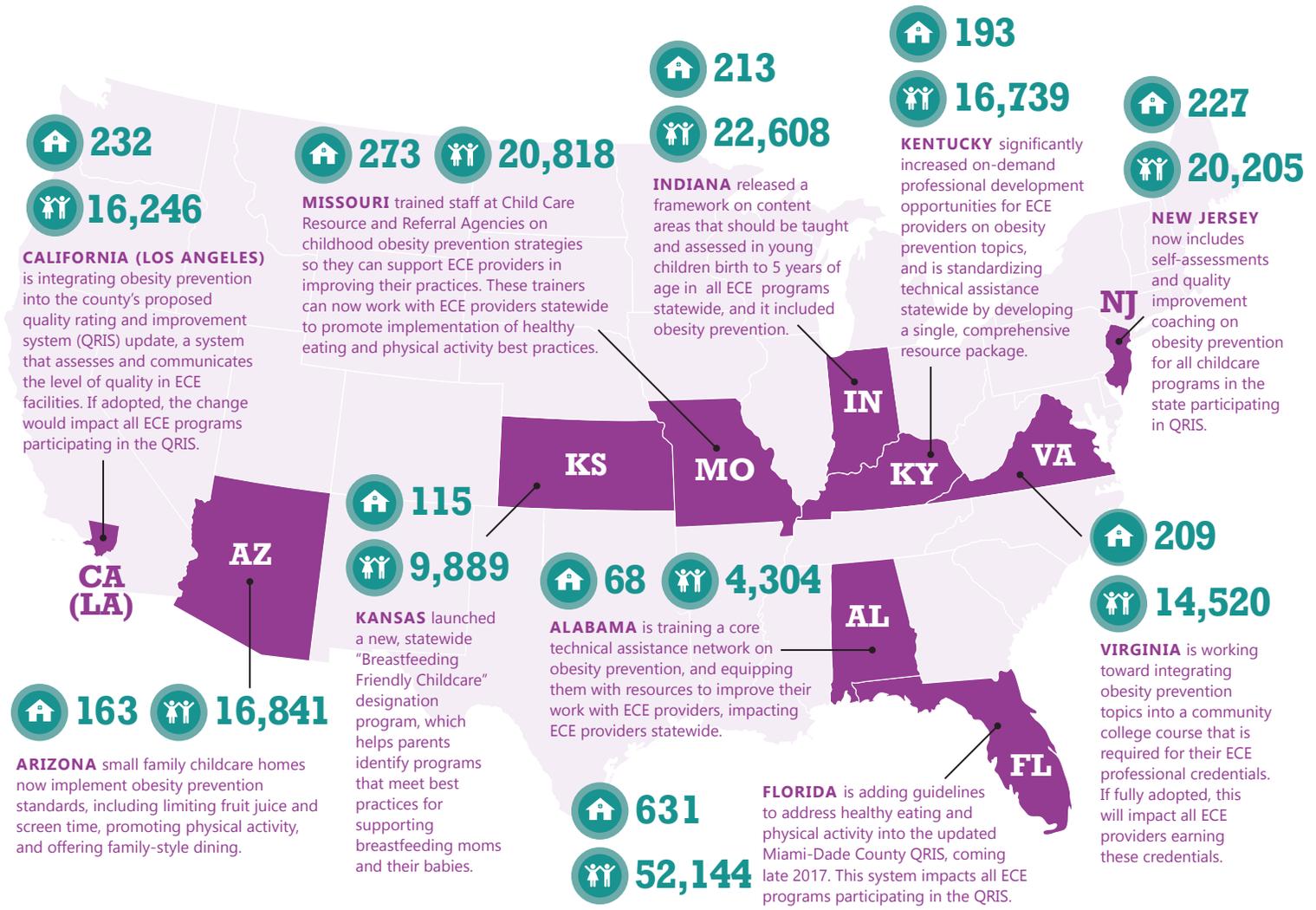
NECCC Intervention Reach



Number of ECE Facilities



Number of Children Served



CALIFORNIA (LOS ANGELES) is integrating obesity prevention into the county's proposed quality rating and improvement system (QRIS) update, a system that assesses and communicates the level of quality in ECE facilities. If adopted, the change would impact all ECE programs participating in the QRIS.

ARIZONA small family childcare homes now implement obesity prevention standards, including limiting fruit juice and screen time, promoting physical activity, and offering family-style dining.

MISSOURI trained staff at Child Care Resource and Referral Agencies on childhood obesity prevention strategies so they can support ECE providers in improving their practices. These trainers can now work with ECE providers statewide to promote implementation of healthy eating and physical activity best practices.

KANSAS launched a new, statewide "Breastfeeding Friendly Childcare" designation program, which helps parents identify programs that meet best practices for supporting breastfeeding moms and their babies.

INDIANA released a framework on content areas that should be taught and assessed in young children birth to 5 years of age in all ECE programs statewide, and it included obesity prevention.

ALABAMA is training a core technical assistance network on obesity prevention, and equipping them with resources to improve their work with ECE providers, impacting ECE providers statewide.

FLORIDA is adding guidelines to address healthy eating and physical activity into the updated Miami-Dade County QRIS, coming late 2017. This system impacts all ECE programs participating in the QRIS.

KENTUCKY significantly increased on-demand professional development opportunities for ECE providers on obesity prevention topics, and is standardizing technical assistance statewide by developing a single, comprehensive resource package.

NEW JERSEY now includes self-assessments and quality improvement coaching on obesity prevention for all childcare programs in the state participating in QRIS.

VIRGINIA is working toward integrating obesity prevention topics into a community college course that is required for their ECE professional credentials. If fully adopted, this will impact all ECE providers earning these credentials.

These efforts help prevent childhood obesity and promote readiness to learn in childcare centers, family child care, Head Start, and pre-Kindergarten programs across the country.

To learn more about DNPAO's work to promote healthy eating and active living for young children in the ECE setting, please visit <https://www.cdc.gov/obesity/strategies/childcareece.html>

For more information on the NECCC model, please visit <https://healthykidshealthyfuture.org/about-ecelc/national-project/>



U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

