The following brief reports the effects of policies that increase physical activity in child care on the reduction of childhood obesity prevalence in the state of Louisiana, from an evidence-based modeling program.

This policy intervention represents enforced statewide guidelines that require licensed child care facilities to provide the recommended amount of physical activity for children less than five years old.

Also, policies creating screen-time limits for children attending child care are included in this policy intervention.

**Policy Goals**

- Ensure that all children attending child care centers meet moderate- to vigorous-intensity physical activity daily goals appropriate for their age group.
- Minimize the amount of screen time for children.
- Reduce the amount of overall sitting time for children.

**What Does the Research Tell Us?**

- 12.9% of Louisiana children aged 2-5 years are obese.\(^{209}\)
- Excess weight gain and obesity in early childhood predicts later obesity and cardiometabolic risk\(^{210}\) and can alter developing neurological, metabolic, and behavioral systems in ways that increase the risk for obesity and chronic disease.\(^{58}\)
- Health and education are connected: learning and practicing healthy habits in child care is not only the best preparation for school, but can lay the foundation for developing a healthy lifestyle.\(^{211,212}\)
- Child care policies and practices can greatly influence activity levels, screen time exposure, and healthy weight gain during child maturation.\(^{213}\)

**Current Policy Environment in Louisiana**

- An evaluation of Louisiana’s state child care policies gave the state an overall grade of “C”, noting an absence of regulations requiring physical activity or limiting screen time.\(^{214}\)
  While Louisiana’s child care centers should provide children with daily physical activity and outdoor play time, and ensure that children are not seated for extended periods of time, the current regulations are not sufficient to meet national recommendations.
- In 2011, proposed legislation would have initiated changes in standards for physical activity and screen time for licensed child care facilities. The bill called for a requirement of 60 minutes of structured physical activity daily for all ages. It also prohibited screen time for children less than two years old and limited screen time to no more than one hour for children over two years old.\(^{215,216}\) The bill was ultimately deferred by the LA House Committee on Health and Welfare and was not signed into law.
- In 2011, a House Resolution (HR No. 154) was enacted requesting Louisiana Department of Child and Family Services to adopt physical fitness standards for child care facilities, citing the poor state grade on child care regulation and an increase in the state’s obesity prevalence.\(^{217}\)

**Recommended amount of daily structured physical activity by age group\(^{144,184,185}\):**

- 1-3 year olds: 30 minutes per day
- 3-5 year olds: 60 minutes per day

Each age group should participate in at least 60 minutes of unstructured physical play time per day.

**What is Screen Time?**

The number of minutes/hours that a child spends each day looking at a screen - TV, movie, cell phone or handheld/personal computer.\(^{196}\)

Recommended amount of screen time by age group\(^{197,218}\):

- 0-2 years: **NO SCREEN TIME**
- 2-5 years: 30 minutes a day **MAXIMUM**

**WAYS TO SUPPORT**

**Physical Activity in Child Care**

- Require physical activity in child care centers based on recommended levels for children.
- Specify and enforce age-appropriate screen time limits in child care facilities.
- Encourage unstructured free play that reduces overall sitting time.
- Provide children with ample, safe equipment to use while participating in physical activity.
Achieving Maximum Intervention Results

- Louisiana has no active policies that require child care facilities to provide opportunities for children to meet the recommended amount of physical activity levels and screen time limits. Therefore, the child care physical activity policy intervention initial setting reflects the lowest possible value (0%).

- Maximum intervention (100%) represents implemented requirements for: 60 minutes of unstructured physical play, 60 minutes of structured physical activity, and a maximum screen time limit of two hours for children aged two years or older, with no screen time for children less than two years old.

Projected Effect on Louisiana's Childhood Obesity Prevalence

<table>
<thead>
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<th>PRISM Results: Can a Policy Intervention to Create Physical Activity and Screen Time Requirements for Child Care Facilities Reduce the Prevalence of Childhood Obesity?</th>
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<tbody>
<tr>
<td>Policy Strength</td>
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<td>Year Implemented</td>
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<td>% Change [ROU*]</td>
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* ROU refers to the Range of Uncertainty determined by the PRISM sensitivity analysis

Note: The symbol ↓ signifies that the percent change is negative, and the percent represents a decrease.

- Policy interventions targeting children in child care may have a minor effect on the prevalence of childhood obesity.

- Most research has focused on obesity prevention in schools rather than child care facilities. Child care centers are underutilized opportunities for obesity prevention interventions and research.

Implementing the Policy

Developing obesity in early childhood can be extremely detrimental in terms of long-term health and well-being. With working families’ increasing reliance on child care and the recognition of the untapped potential for child care facilities to make an impact to prevent childhood obesity, child care is an ideal environment to promote physical activity in structured programs and unstructured play, reduce young children’s overall sedentary time, and therefore reduce their risk of obesity during their formative years.

When the Louisiana House passed HR No. 154 regarding child care physical activity requirements and screen time limits, this reflects potential for implementing future programs and policies authorizing the recommended guidelines set by medical associations and researchers. In addition, the School Readiness Report, a response to HCR No. 179 of the 2010 Regular Session, recommends that all children participate in physical activity as a critical element to prepare to enter kindergarten. All states have minimum health, safety, and nutrition standards, but including physical activity requirements and screen time limits in the state licensing and certification procedures will require additional buy-in from central stakeholders. Licensed child care providers will be important participants in the policy development and will need to be consulted during every step of the process, from early discussions to implementation to evaluation. Additionally, support from parents and caregivers will be critical in creating new regulations for child care facilities, as they are the most invested and important figures that can affect and promote the health of their children.

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