

# Strategy #5 - Early Care and Education Physical Activity Standards

## **Expected Outcomes:**

- 1. Increased number of ECEs that implement physical activity standards
- 2. Increased ECE physical activity standards

Priority Population: Low socioeconomic status

The Community and Clinical Connections for Prevention and Health Branch will collaborate with state and local partners to implement and integrate PA standards into state-wide ECE systems by:

- A. Engage in training, TA and coaching models to support the implementation of NC child care regulations related to PA.
- B. Support state efforts to mitigate the impacts of adverse childhood experiences (ACEs) on healthy behaviors related to PA.
- C. Distribute PA resources for ECE

Target Settings: Child care centers and family child care homes enrolled in NC's subsidized child care program

### **Recommended Partners:**

smart start partnerships for children • head start programs (early, regional, migrant/seasonal, American Indian) • child care health consultants • health organizations (e.g. hospitals, pediatric offices) • mental health professionals • NC Child Care Resource and Referral Council • ECE technical assistance providers • women, infants and children (WIC) programs • department of social services (DSS) • Children's Developmental Services Agency (CDSA) • Go NAP SACC Coordinators • Prevent Child Abuse NC • family child care homes • child care centers • academic institutions (colleges and or universities) • nutrition professionals • lactation consultants •

**Health Equity Planning Principals:** Disparities in healthy development start early in life, and far too many are the result of social and economic inequities that are disproportionately experienced by children. Healthy equity within ECE settings requires concerted and intentional activity to address issues of diversity and disparity. It requires the engagement and support of families and young children and includes their voices in design and delivery of services and supports. ECE applicable projects should address health equity through:

- 1. Build or enhance early childhood systems
- 2. Expand health's role in wellness and prevention and population health
- 3. Close disparities in health and well-being by race, place, and income
- 4. Develop more culturally and linguistically responsive and inclusive systems
- 5. Educate and advocate and mobilize to produce policy change

### **ECE Milestones:**

- Convene a coalition
- 2. Complete ECE assessment
- 3. Develop an Action Plan
- 4. Accomplish activities proposed in Action Plan
- 5. Produce or use existing promotional materials and messages to support coalition.
- 6. Follow up assessment

**Example** of the types of specific activities that can used to implement Physical Activity Strategy #5:

A. Yoga was introduced at a child care center. The teachers and students visited the social hall and participated in yoga together as a class.

## Resources:

- A. ACEs Too High acestoohigh.com
- B. Caring for Our Children: Preventing Childhood Obesity in Early Care and Education Programs nrckids.org/CFOC/Childhood Obesity
- C. Center on the Developing Child at Harvard University <u>developingchild.harvard.edu/science/key-concepts/toxic-</u> stress
- D. Division of Child Development and Early Education ncchildcare.ncdhhs.gov
- E. First 2000 Days first2000days.org
- F. Go NAP SACC gonapsacc.org
- G. Health Kids, Health Future healthykidshealthyfuture.org
- H. NC Child Care Health and Safety Resource Center healthychildcarenc.org
- I. The Center for Training and Research Translation (Center TRT) centertrt.org/?p=find\_strategies