Alaska Child Care Workgroup Addresses Childhood Obesity

Melissa Byers

"One idea I learned from the training was to incorporate summer toys in outside winter play. For example, I laid a tunnel across the snow. The children enjoyed crawling through it, and feeling and hearing the sounds of the snow as they moved."

Kamie Miller, owner of Kamie's Kid Kare

Summary

The Alaska Department of Health and Social Services (Alaska DHSS) provided resources and support to form the Alaska Alliance for Healthy Kids—Early Childhood Education (ECE) Workgroup. Participating organizations include those that provide licensing, training, and technical assistance to child care centers. The Workgroup identifies technical assistance and training needs to help child care centers align with recommended nutrition and physical activity policies for preventing childhood obesity.

Challenge

According to the 2013 Alaska Childhood Understanding Behaviors Survey results, more than 33% of 3-year-olds in Alaska are overweight or obese (BMI at or above the 85th percentile). Several statewide organizations are working to make child care centers healthier to combat rising childhood obesity rates. Some agencies govern licensing requirements, while others provide technical assistance and training for early child care centers. Because each organization has a different role in the ECE work, the need for collaboration was clear; however, many agencies had never worked together before.

Solution

In 2015, the Alaska Alliance for Healthy Kids—ECE workgroup was formed to help lower the childhood overweight and obesity problem in Alaska. The Alaska DHSS Obesity Prevention and Control Program invited a variety of ECE partners to meet and plan together for the first time. State partners included the Alaska Child Care Program Office, the Alaska Childcare Resource and Referral Network, the Quality Rating and Improvement System, and the Child and Adult Care Food Program. Primary points of contacts from each organization were identified and meeting times were established so the team could focus on strategic collaboration and implement an action plan to make child care centers healthier.

Your Involvement is Key

Learn more about the Alaska Alliance for Healthy Kids-ECE Workgroup, visit http://dhss.alaska.gov/dph/Chronic/Pages/Obesity/earlycare.aspx. To access the most up-to-date information and resources, sign up for the Alliance's listserv. This project is supported by the State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity, and Associated Risk Factors and Promote School Health cooperative agreement (DP13-1305).

Results

After identifying individual organizational strengths, challenges, and opportunities, the workgroup determined the greatest need for ECE providers was professional development on nutrition and physical activity policies. Leveraging the Let's Move Child Care (LMCC) tools, the workgroup helped 52 ECE providers and trainers identify their nutrition and physical activity goals. The LMCC quiz helped providers assess their readiness in implementing practices like serving a fruit or vegetable at every meal or providing water rather than sugary drinks. Additionally, the workgroup used quiz responses to identify specific ECEs needing support in creating an action plan. Each ECE will receive technical assistance, funding, and resources to implement the changes.

Sustainable Success

Recently, the Alaska Alliance for Healthy Kids started reviewing the state licensing regulations and creating recommendations for changes that will help Alaska follow the Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Early Education Programs recommendations. Often, enacting policies to encourage physical activity and nutrition practices are not enough. ECEs will need support from multiple sources to implement policy changes. In the future, the workgroup will conduct trainings and provide support that will help ECE's meet any new regulations. For now, having the workgroup allows many organizations to collaborate with other programs to help make child care environments healthier.

Contact

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The findings and conclusions in this success story are those of the author(s) and do not necessarily represent the official position of the funding agencies or the Centers for Disease Control and Prevention (CDC).

National Center for Chronic Disease Prevention and Health Promotion

