

NEW OBESITY PREVENTION STANDARDS IN LICENSED CENTERS

Approximately 20 percent of U.S. children are already overweight or obese before they enter school, and rates are even higher (about 33 percent) among low-income children and among African American and Latino children.¹ As early care and education professionals, you can promote healthy lifestyle behaviors of young children and make a substantial impact on reducing early childhood obesity.

Effective 8/1/14, all centers licensed by the Department of Children and Family Services are required to implement the following standards related to obesity prevention:

PHYSICAL ACTIVITY

Infants shall have supervised tummy time every day when the infant is awake. Staff shall interact with an awake infant on his or her tummy for the amount of time that the infant shows enjoyment.

Children of all ages shall participate daily in at least 2 occasions of age-appropriate outdoor time. In inclement weather, active play shall be encouraged and supported in indoor play areas.

Children who are mobile shall not be allowed to sit passively for more than 30 continuous minutes, except during scheduled rest or nap times.

Imposing physical activity or withholding active play shall not be used on children as a form of discipline.

SCREEN TIMEⁱⁱ

Children younger than 2 years of age shall not be allowed passive screen viewing (i.e. the passive, sedentary use of age-appropriate and educational media through screen-based technologies, such as television, video, DVDs, visual recordings and other non-interactive technologies).

Children 2 years of age and older shall not view more than 60 minutes per day of passive screen viewing in a 6 hour program; children attending a program for less than 6 hours in a day shall be limited to a proportionate amount of passive screen viewing (e.g. children in a 3 hour program shall not view more than 30 minutes per day of screen viewing).

TV, video or DVD viewing shall not be allowed during meal or snack time.

JUICE

No juice is permitted for children less than 12 months of age.

For children 12 months of age and older, juices shall be 100 percent fruit juice and limited to a 4 ounce daily serving.

Fruit juice shall be given only as part of a meal or snack.

Beverages with added sweeteners, whether natural or artificial, shall not be provided to children.



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MILK

Human milk or infant formula shall be served to children younger than 1 year of age.

Children between 1 and 2 years of age who are not on human milk or infant formula shall be served whole milk, unless low-fat milk is recommended in writing by the child's medical provider.

Children 2 years of age and older shall not be served milk with a fat content higher than 1 percent, unless recommended in writing by the child's medical provider.

The center shall provide reasonable, private accommodations for breastfeeding mothers who may want to breastfeed during hours of operation, including a private area with an electrical outlet for mothers to pump their breast milk. The center shall notify parents that these accommodations are available.

WATER

The facility shall make drinking water freely available to all children by providing drinking fountains and/or disposable cups for individual use.

Water shall be offered to children at frequent intervals and during meals and snacks.

MEALS

Meals shall be prepared so as to moderate fat and sodium content. Choose monounsaturated and polyunsaturated fats (e.g. olive and safflower oil) and soft margarines; avoid trans fats, saturated fats and fried foods.

Limit salty snack foods, such as pretzels or chips.

Cake, pastries, cookies or other foods with high sugar and/or fat content shall not be served to children.

For more information, please contact your DCFS licensing representative.

For resources on obesity prevention in child care, please contact the following organizations:

CLOCC at info@clocc.net

Ounce of Prevention Fund at advocacy@ounceofpreventionfund.org

Illinois Action for Children at browningt@actforchildren.org

ⁱ Institute of Medicine (IOM). (2011). *Early Childhood Obesity Prevention Policies*. Washington, DC: The National Academies Press.

ⁱⁱ Best practice is to avoid screen media with food advertising and food brand placement.

