

# Best Practices for Physical Activity



For Organizations Serving Children and Youth

**Nemours** Health &  
Prevention Services

## Acknowledgements

This guide was created by Denise Hughes, MS.

Thanks to Nemours team members: Kate Dupont Phillips, MPH, CHES, PAPHS; Michelle Boyle, MS; Mary Neal Jones, MS; Dorothy Onn, ACSW; Lisa Mealey, PhD; Lauren Falini, BS; Jenna Remmert, MS; and the NHPS Healthy Eating and Physical Activity Team for their input and review.

Special thanks to Elizabeth Walker, MS

## Table of Contents

Introduction	4
Physical Activity Tips	6
Glossary of Terms	7
Physical Activity Guidelines	8
<i>Infants</i>	8
<i>Toddlers</i>	9
<i>Preschoolers</i>	10
<i>School Age</i>	11
Sample Policies	12
<i>Early Care and Education</i>	13
<i>Schools</i>	16
Frequently Asked Questions	18
Physical Activity Resources and Screen Time Resources	20
Family Tip Sheets	24
<i>Birth through 11 months</i>	25
<i>1 through 2 years old</i>	27
<i>3 through 5 years old</i>	29
<i>6 years and older</i>	31
References	33

## Introduction

Nemours Health and Prevention Services (NHPS) created these physical activity guidelines to help promote and support quality physical activity for children and youth. All who care about children and want to see them achieve their full potential have a role to play in helping them grow up to be healthy adults. Those who work in child care centers, schools, community organizations or primary health care practices have powerful opportunities to ensure children have access to health-promoting physical activity on a daily basis. Equipped with information about best practices, parents, family members and neighbors can serve as important advocates to ensure that physical activity becomes a regular and enjoyable part of daily life for children.

When children are physically active on a daily basis, not only are they more effective learners, but they are less likely to be overweight or obese. In the United States, approximately 26.7% of young children ages 2–5 and approximately 31.8% of all children 2–18 are obese or overweight.<sup>1</sup> In Delaware, approximately 30% of young children aged 2–5 and approximately 37% of all children 2–18 are obese or overweight.<sup>1</sup> Overweight and obese children have an increased risk of being overweight or obese as adults and are at high risk for developing immediate health problems such as type 2 diabetes, heart disease, high blood pressure, asthma, and sleep apnea.<sup>2–10</sup> In addition, obese children are at greater risk for social and psychological problems, such as stigmatization and poor self-esteem.<sup>11,12</sup>

To slow down and reverse the trend towards higher rates of childhood obesity, NHPS partners with primary care providers, school districts, child care providers and after school programs throughout Delaware to provide children with opportunities to be physically active in places where they live, learn and play. Together, we can help Delaware’s children become the healthiest in the nation.

Children who are physically active early in life and stay active throughout childhood enjoy many positive benefits to their physical health, building strength, flexibility, endurance and developing and maintaining healthy bones.<sup>13–16</sup> In addition, being physically active supports emotional health, reducing feelings of anxiety and depression, while promoting psychological well-being.<sup>13,16,17</sup> It is important to provide a positive environment for physical activity by giving children of all ages daily opportunities to be physically active, surrounded by positive and responsive adult role models.

Children who have active parents and family members and do regular activities with them are more likely to be active than those who are not active in the family setting.<sup>18,19</sup> Adults who demonstrate enjoyment of physical activity, encourage children to explore the world around them, support child-initiated activity, plan thoughtful structured activity and play with children are helping to lay a strong foundation for life-long health.

To help you promote and support quality physical activity in your setting, this guide provides:

- Physical activity guidelines for children birth through 18 years of age;
- Concrete examples you can use to support the guidelines;
- Rationale for the guidelines;
- Sample early care and education policies and regulations;
- Sample school policies; and
- Family Tip Sheets.



## About Us

Nemours Health and Prevention Services, a non-profit organization based in Newark, Delaware, works with families and community partners to help children grow up healthy. Its goal is to effect long-term changes in policies and practices that promote child health and to leverage community strengths and resources to have the greatest impact on the most children.

NHPS is a division of Nemours, one of the nation's largest pediatric health systems, operating the Alfred I. duPont Hospital for Children and outpatient facilities throughout the Delaware Valley and northern and central Florida. NHPS expands Nemours' reach beyond clinical care to consider the health of the whole child within his or her family and community.

**Nemours** Health & Prevention Service

**“Children who are physically active early in life...  
enjoy many positive benefits to their physical health”**

## Physical Activity Tips

### **Children three years old and over are encouraged to engage in moderate-to-vigorous physical activity (MVPA) daily.<sup>13,20</sup>**

Moderate levels of physical activity are at intensities faster than a slow walk, but still allow children to talk easily.<sup>21</sup> Vigorous levels of physical activity are at intensities like a fast walk, jog or run that get children “breathless” or breathing deeper and faster than during typical activities.<sup>22</sup> Children who are “breathless” are exercising their heart and lungs along with the muscles in their arms and legs! They are getting stronger and burning calories, which allows their bodies to balance food intake with energy used to help them maintain a healthy body weight. Provided that children do not have health restrictions, being breathless during physical activity is healthful, safe and will not cause physical harm.<sup>13,22</sup>

### **Encourage physical activity to be accumulated throughout the day for all children.**

Children are encouraged to accumulate the recommended time spent in daily physical activity by engaging in doses of ten minutes or more of activity. These doses of activity do not need to be continuous to provide the necessary health benefits. Intermittent doses of activity are also beneficial and come in the form of bursts of some vigorous and moderate activity and brief rest periods.

### **Vary the levels of intensity based on the child’s fitness level.**

When participating in physical activity with children, watch them for signs of fatigue or frustration and be ready to change the activity to meet the needs of each individual child. Levels of intensity vary based on the physical fitness of the child. One child may only be slightly winded from running across the playground, while another child may be heavily winded from the same activity. If children are fatigued by physical activity, it is important to support and encourage them to have fun, re-direct them to a less intense or modified activity or help them finish the activity if appropriate.

### **Variety is important.**

When participating in physical activity with children, be sure to include a variety of age-appropriate activities. Encourage preschool and school-age children to work together to adapt or invent games and activities with you. This will serve to keep their interest by preventing boredom and monotony of doing the same activity day in and day out. In addition, engaging in a variety of activities provides children with numerous opportunities to work different muscles.

### **Provide opportunities for adult- or child-led physical activity.**

Physical activity can be adult or child-led; both are important. Adult-led (structured) physical activity tends to get children active at higher levels of intensity; whereas child-led free play (unstructured) physical activity allows children to explore their environments, be creative and use their imaginations.

### **Don’t forget about the infants. They can also be physically active.**

It is important for infants to have the opportunity to explore their environments, build strength and increase body awareness through tummy time. Supervised free play on their tummies in open and safe places encourages infants to explore, touch and feel the world around them.



## Glossary of Terms

**Tummy time** is the time an infant spends on his stomach (tummy) throughout the day. Tummy time is only for when the infant is awake; you should continue to put infants to sleep on their backs to reduce the risk of Sudden Infant Death Syndrome (SIDS). Also, spending time on their tummies builds the strength and coordination needed to reach movement milestones, including rolling over, sitting up, and crawling.<sup>23,24</sup>

**Sedentary activity** is non-moving activity like reading, playing a board game or drawing. Sedentary activity does not provide much physical activity and/or exercise.<sup>25</sup>

**Vigorous-intensity physical activity** is rhythmic, repetitive physical activity that uses large muscle groups, causing a child to breathe rapidly and only enabling them to speak in short phrases. Typically, children's heart rates are substantially increased and they are likely to be sweating.<sup>22</sup>

**Moderate-intensity physical activity** increases children's heart and breathing rates. They may sweat, but are still able to carry on a conversation. They can talk, but they can't sing.<sup>21,22</sup>

**Moderate-to-Vigorous Physical Activity (MVPA)** is a combination of moderate and vigorous intensity physical activity.<sup>21,22</sup>

**Structured physical activity** is teacher-led, developmentally appropriate and fun. Structured activity should include:

- Daily planned physical activity that supports age-appropriate motor skill development. The activity should be engaging and involve all children with minimal or no waiting.
- Daily, fun physical activity that is vigorous (gets children "breathless" or breathing deeper and faster than during typical activities) for short doses of time.

**Unstructured physical activity** is child-led free play. Unstructured activity should include:

- Activities that respect and encourage children's individual abilities and interests.
- Teacher engagement with children, support for extending play, and gentle prompts and encouragement by teachers, when appropriate, to stay physically active.



## Infants: Birth through 11 months



### Recommended

Supervised tummy time daily when awake beginning with short periods of time (3–5 minutes), increasing time as they show they enjoy the activity.<sup>40</sup>

Daily planned physical activities that safely support the infant's developmental milestones are recommended (e.g. head and neck self-support, rolling, floor sitting, kicking, crawling, reaching and grasping for objects, etc.)<sup>20</sup>

Outdoor time 2–3 times a day, as tolerated, in a safe setting supervised by an adult.<sup>40</sup>

Large, open, safe play surfaces and appropriate equipment should be provided in every infant room to promote free movement and physical activity: rattles, balls, simple cause and effect toys, etc.<sup>20</sup>

### Limit<sup>40</sup>

While awake, infants should spend less than 15 minutes at a time in confining equipment. *Examples:*

- Swings
- Bouncy chairs
- Car seats
- Strollers

### Not Recommended

Screen time for children under two years of age. *Screen time includes:*

- TV or DVDs
- Computer
- Video games

Infant walkers and exercise saucers

Physical activity that is not developmentally appropriate. *Includes but is not limited to:*

- Running
- Throwing
- Catching
- Overly structured activities that do not interest or engage infants

### Ways to support the recommendations<sup>26</sup>

- Physical activity should be encouraged when the infant is awake and interested and should be supervised by an adult.
- Until an infant is creeping or crawling, provide at least 30 minutes of tummy time daily. Get down on the floor during tummy time, face to face, so that you can talk, sing and explore together.
- Plan safe, engaging activities both indoors and outdoors. Examples of “motor skills” include simple games, kicking, dancing, and yoga.
- Provide a safe and engaging environment to explore through the use of rattles, mobiles, mirrors; for older infants add balls, dolls, simple cause and effect toys, and solid furniture to use for pulling up.
- Place infants on blankets or other safe, dry surfaces with favorite toys nearby to encourage reaching, free movement and exploration indoors and outdoors each day.
- Share information about healthy habits with families through conversations, newsletters and special events.



## Toddlers: 1 through 2 years old



### Recommended

60–90 minutes\* or more of physical activity per 8 hour day with opportunities for moderate-to-vigorous physical activity.<sup>40</sup>

- Inclusion of both structured and unstructured physical activity.<sup>20</sup>

\* *This can be done in small doses of 10 minutes throughout the day*

60–90 minutes of daily outdoor time in a safe setting supervised by an adult.<sup>40</sup>

Free space, developmentally appropriate toys and equipment to encourage children to be physically active: riding toys, balls, large blocks, tunnels, rocking boats, low climbers, etc.

It is important to encourage participation in physical activities that are appropriate for their age, that are fun, and that offer variety.

### Limit<sup>61</sup>

For children 2 and older, limit total media time (TV/DVDs, computers, video games, smart phones) to 1–2 hours/day.

Because children are likely to get additional media time at home, limit exposure in child care to 30 minutes once a week.

Media should be educational, developmentally appropriate, supervised, and expressly permitted by parents.

Limit computer use to 15 minute increments except for children with special needs who require and consistently use assistive/adaptive computer technology.<sup>40</sup>

### Not Recommended

More than 60 minutes of sedentary activity at a time, except while sleeping.

Infant walkers

Physical activity that is not developmentally appropriate.

*Includes but not limited to:*

- Hopping on one foot
- Skipping
- Climbing on the monkey bars
- Competitive games

Media use for children under 2.<sup>61</sup>

## Ways to support the recommendations<sup>26</sup>

- Model enjoyment of physical activity by joining children in ball play, dancing, games and other physical activities.
- Build time in your schedule for daily, planned structured physical activity that supports age-appropriate motor skill development (walking, running, throwing, kicking, etc.). The activity should be engaging, fun, and involve all children with minimal or no waiting.
- Plan various fun physical activities that are vigorous (get children “breathless” or breathing deeper and faster than during typical activities) for short doses of time (riding toys, navigating an obstacle course, jumping, etc.).
- Play games that incorporate music, imitation and simple directions such as animal movements, follow the leader or dancing with scarves.
- Provide small objects to roll, toss and kick, such as beanbags and balls.
- Offer toys that increase spatial awareness and coordination such as push toys (lawn mowers or doll carriages) or pull toys (wagons and riding toys).
- Provide opportunities to jump using mats, pillows, or lines on the floor.
- Provide activities to encourage balance: walking a balance beam line on the floor, or on different textured or uneven surfaces, with support when appropriate.
- Offer ramps, steps, low climbers, and obstacle courses to build skills, strength, coordination and confidence.
- Share information about healthy habits with families through conversations, newsletters and events.

## Preschoolers: 3 through 5 years old



### Recommended

120 minutes\* or more of physical activity per 8 hour day with opportunities for moderate-to-vigorous physical activity.<sup>63</sup>

- Inclusion of both structured and unstructured physical activity.<sup>20</sup>

\* This can be done in small doses of 10 minutes throughout the day

60–90 minutes of daily outdoor time in a safe setting supervised by an adult.<sup>40</sup>

Free space, developmentally appropriate toys and equipment to encourage children to be physically active: tricycles, yoga mats, balls, rocking boats, hopscotch, hoops, etc.

It is important to encourage participation in physical activities that are appropriate for their age, that are fun, and that offer variety.

### Limit

Limit total media time (TV/DVDs, computers, video games, smart phones) to 1–2 hours/day.

Because children are likely to get additional media time at home, limit exposure in child care to 30 minutes once a week.

Media should be educational, developmentally appropriate, supervised, and expressly permitted by parents.

Limit computer use to 15 minute increments except for children with special needs who require and consistently use assistive/adaptive computer technology.<sup>40</sup>

### Not Recommended

More than 60 minutes of sedentary activity at a time, except while sleeping.

Physical activity that is not developmentally appropriate. *Which includes but is not limited to:*

- Riding a 2-wheel bike
- Roller skating/blading
- Elimination games

### Ways to support the recommendations<sup>26</sup>

- Model enjoyment of physical activity by joining children in ball play, dancing, yoga, stepping, active games and other fitness activities.
- Build time in your schedule to include daily planned structured physical activity that supports age-appropriate motor skill development (jumping, skipping, hopping, etc.). The activity should be engaging, fun, and involve all children with minimal or no waiting.
- Plan various fun physical activities that are vigorous (get children “breathless” or breathing deeper and faster than during typical activities) for short doses of time (riding tricycles, dancing to music, navigating an obstacle course, playing tag, etc.).
- Play games that incorporate music, imitation and simple directions such as animal movements, follow the leader or dancing with scarves.
- Plan safe, engaging activities outdoors: hopscotch, tricycle motocross, freeze tag, parachute games, etc.
- Offer ramps, steps, low climbers and obstacle courses to build skills, strength, coordination, and confidence.
- Develop movement stations indoors or outdoors so children can practice developing skills: throwing, catching, kicking, balancing, changing direction, jumping, hopping, skipping, galloping, etc.
- Provide activities to encourage balance: standing on one foot or walking a balance beam line on the floor, or on different textured or uneven surfaces.
- Provide opportunities to jump and hop using mats, pillows, or lines on the floor.
- Encourage children to work together to create their own games.
- Help children recognize their own faster heart rate and deeper breathing when they are physically active.
- Share information about healthy habits with families through conversations, newsletters and events.

## School Aged: 6 years old and older



### Recommended<sup>13</sup>

Daily, school aged children need:

- At least 60 minutes\* of physical activity,
- Aerobic as well as age-appropriate muscle- and bone-strengthening activities

\* This can be done in small doses of 10 minutes throughout the day

Daily outdoor time.

It is important to encourage participation in physical activities that are appropriate for their age, that are fun, and that offer variety.

### Limit

Limit total media time (TV/DVDs, computers, video games, smart phones) to 1–2 hours/day. Because children are likely to get additional media time at home, limit exposure in child care to 30 minutes once a week.

Media should be educational, developmentally appropriate, supervised, and expressly permitted by parents.

Limit computer use to 15 minute increments except for children with special needs who require and consistently use assistive/adaptive computer technology.<sup>40</sup>

### Not Recommended<sup>13</sup>

More than 120 minutes (2 hours) of sedentary activity at a time.

Elimination games.

### Ways to support the recommendations

- Play games that incorporate music, imitation and simple directions where children are the leaders.
- Play games that incorporate strength, coordination and confidence; finding hidden objects, relay races, obstacle courses, variety of “tag” games, tug-of-war.
- Encourage children to adapt or invent their own games.
- Provide safe objects to throw, kick and catch.
- Provide playground equipment for climbing.
- Share information about healthy habits with families through conversations, newsletters and events.
- Support and supervise child-led free play, which is also called unstructured physical activity.
- Encourage children’s individual abilities and interests.
- Engage children, provide support for extending play, and give gentle prompts and encouragement, when appropriate, to stay physically active.
- Provide free space, toys and equipment to encourage children to be physically active: climbers, monkey bars, yoga mats, balls, balance beams, hopscotch, hoops, etc.

### Physical Activity should include:

**Moderate- or vigorous-intensity aerobic physical activity** for the majority of the 60 minutes a day and vigorous-intensity physical activity at least 3 days a week.<sup>13</sup>

**Daily planned physical activity** that is engaging and involves all children with minimal or no waiting time.

**Muscle strengthening or resistance activities** as part of the 60 or more minutes on at least 3 days of the week.<sup>13</sup> Activities should be fun and can include: movements that strengthen muscles without weights, for instance using playground structures (e.g. monkey bars, rock climbing walls), as well as movements that strengthen muscles with weights (e.g. working with resistance bands).

**Bone-strengthening activities** as part of the 60 or more minutes on at least 3 days of the week to promote bone growth and strength (e.g. running, jumping rope, hopscotch).<sup>13</sup>

**Vigorous physical activity** aiming for at least 10 minutes per day (e.g. running, martial arts, active games that involve running and chasing).<sup>13</sup>



## Sample Policies

### Sample Early Care and Education Policy Support For Program, Staff, And Family Handbooks

Policy can make your practices known, understood and supported by staff, families and older children. When you develop policy statements for your handbooks and orientation materials, your preferred practices are more likely to be permanent, even with changes in your center or staff. The following are some sample statements that you can add to your policies and procedures to make your early care and education program more supportive of physical activity. Your policy statements can help staff and families understand why daily physical activity is so important for children's health and well-being.



# Sample Early Care and Education Policies for Programs

## Birth through 11 months old

1. Following the American Academy of Pediatrics recommendations and to encourage optimal motor development, this program will plan engaging activities for Tummy Time with all infants at least 2-3 times per day while the child is awake. Our staff will respond promptly to cues for frustration, boredom or fatigue.<sup>58</sup>
2. To promote lifelong physical activity, this program will provide planned daily physical activity that is safe, engaging and appropriate for each child to safely support their physical development and health.<sup>60</sup>
3. All infants and children will be provided outdoor time daily. Children will go outside when the temperatures are above 15° F (including wind chill factor) and below 90°F. Outdoor time will be limited to 20-30 min when temperatures are between 16-32° F.<sup>40</sup>
4. To support infant development, swings, bouncy chairs and other confining equipment (except high chairs and strollers) will not be used in the infant classroom at any time.<sup>59</sup>

## Children ages one year and older

1. We at (name of center) are committed to our children's health. We recognize the importance of staff as positive role models for children as they learn to live healthy lives. Therefore, we will:<sup>60</sup>
  - Role-model positive behaviors by being physically active with the children, both indoors and outdoors.
  - Encourage all children to try new physical activities and respond positively when they do.
  - Share our own positive experiences with physical activity and facilitate conversations with the children about their experiences.
  - Provide fun, engaging physical activity daily in our lesson plans.
  - Make safe equipment accessible in the classroom at all times (e.g. soft balls, push-pull toys, low carpeted blocks to climb on, etc.).
  - Not use physical activity as punishment.
  - Re-direct children to safe physical activities and/or involve them in discussions about what to do when safety issues or other concerns (e.g. mud, arguments over play equipment, etc.) arise.
2. Screen time (except for educational computer use and physical activity) is not permitted in this program.<sup>41</sup>







## Sample Early Care and Education Regulatory Policies

1. The Licensee shall ensure that each child, according to his or her ability, is provided the opportunity for a minimum of 1 hour of moderate to vigorous physical activity indoors and/or outdoors for every four (4) hours the child is in attendance between the hours of 7:00 AM to 7:00 PM.
2. A licensee shall ensure that television, digital video display (DVD), and video cassette viewing shall be as follows:
  - A. Prohibited for children younger than two (2) years of age;
  - B. Not permitted without the written approval of each child's parent/guardian;
  - C. Limited to programs which are age-appropriate and educational; and
  - D. Not to exceed 30 minutes a week per child or group of children.
    - a. Viewing times may be extended for specific special events or occasions such as current event, holiday or birthday celebration. Written documentation shall justify the reason(s) for extending the time period.
3. A licensee shall ensure that the use of the computer shall be as follows:
  - A. Prohibited for children younger than two (2) years of age;
  - B. Not permitted without the written approval of each child's parent/guardian;
  - C. Limited to programs, games and web sites which are age-appropriate and educational;
  - D. Provides protection from exposure to inappropriate web sites such as those that are sexually explicit, violent, or use inappropriate language;
  - E. Supervised by a staff member, and;
  - F. Not to exceed 30 minutes a week per child or group of children.
    - a. Usage time periods may be extended for special projects such as homework, researching topics, or special events or interests of a child or group of children. Written documentation shall justify the reason(s) for extending the usage period.
    - b. Limited to increments of 15 minutes at a time, except for school-age children completing homework and children with special health care needs who require and consistently use assistive and adaptive computer technology.
4. A licensee shall ensure that staff limits infant's time in any confining equipment such as a crib, infant seat, swing, high chair, or play pen to less than 15 min at a time while awake, immediately after which opportunities for movement are provided.
5. A licensee shall ensure that staff interact with toddlers at their eye level, sitting on the floor with them whenever appropriate. Staff shall provide opportunities throughout the day for children to walk, run, climb, stack, balance, scribble, draw, and develop fine and large motor skills.
6. A licensee shall ensure that staff interact with preschool age children at their eye level, sitting on the floor with them whenever appropriate. Staff shall provide opportunities throughout the day for children to walk, run, climb, stack, balance, scribble, draw, write, and develop fine and large motor skills.

## Sample School Policies

The Child Nutrition and WIC Reauthorization Act of 2004 outlined the components that must be covered, at a minimum, in every district wellness policy. Within each of these broad components, there are many specific best practices that can form the substance of a comprehensive wellness policy. Many of these best practice policy items are listed below. Policy items which appear under the heading “Highly Recommended” are those that have the most potential to have a positive health impact on a large number of students.<sup>28</sup>

### Highly recommended policies<sup>28</sup>

1. All students get daily physical education or at least 150 minutes of physical activity per week.
2. Students spend at least 50 percent of physical education time in moderate-to-vigorous physical activity.
3. Physical education is consistent with State Department of Education curriculum standards.
4. Physical education is taught by a certified physical education teacher (as defined by the State’s Department of Education).
5. The physical education program:
  - Provides many different physical activity choices;
  - Features cooperative as well as competitive games;
  - Meets the needs of all students, especially those who are not athletically gifted;
  - Takes into account gender and cultural differences in students’ interests;
  - Promotes participation in physical activity outside of school;
  - At the high school level, focuses on helping adolescents make the transition to an active adult lifestyle; and
  - Is an enjoyable experience for all students.
6. Elementary schools have at least 20 minutes a day of recess, preferably outdoors. Elementary schools have a back-up plan for physical activity when outdoor recess is not allowed due to weather conditions.
7. In situations where students in all grades are indoors for long periods of time (2 hours or more), schools provide periodic breaks in which students are encouraged to be moderately-to-vigorously active.



### Other school policies to consider<sup>28</sup>

1. Teachers and other school personnel do not use physical activity (e.g., running laps, pushups) or withhold opportunities for physical activity (e.g., recess, physical education) as punishment.
2. Teachers and other school personnel use physical activity opportunities as rewards.
3. School spaces and facilities are available for physical activity to students, staff and community members before, during and after the school day, on weekends and during vacations. School policies concerning safety apply at all times.
4. Districts/schools provide information to parents about physical education and other school-based physical activity opportunities before, during and after the school day.
5. After-school child care programs provide and encourage – verbally and through the provision of space, equipment, and activities – daily periods of at least 20 minutes of moderate/vigorous physical activity for all participants.
6. Suitable adapted physical education is included as part of individual education plans for students with chronic health problems, other disabling conditions, or other special needs that preclude such students' participating in regular physical education instruction or activities.
7. Physical education teachers have annual professional development training.
8. Physical education class has student/teacher ratios comparable to those in other curricular areas.



# Frequently Asked Questions and Rationale

## Infants

[Why do we have to get infants on their tummies? Don't experts recommend that babies stay on their backs?](#)

While infants are asleep or not supervised by adults, infants should be placed on their backs to reduce the incidence of Sudden Infant Death Syndrome (SIDS).<sup>23,24</sup> However, babies should be placed on their tummies daily to play while awake and supervised by an adult.<sup>24</sup> Tummy time builds strength and coordination needed to reach physical development milestones.<sup>24</sup> Researchers have found that infants who spend more time on their backs while awake had lower gross motor skills than those who spend time on their tummies.<sup>29</sup>

[What is wrong with infant bouncy seats, swings, strollers and equipment like that? And don't exercise saucers help babies get physical activity?](#)

Research has shown that infants who overuse confining equipment, including exercise saucers, may experience delayed motor skill development.<sup>30-32</sup> Therefore, restricting or not allowing use of confining infant equipment is important to promote the best physical development of infants in your care. Your infant will learn the most about her body and how it works in the real world, if she is free to explore the environment and learn from her experiences.

[Why no infant walkers?](#)

Research has shown a large risk of major and minor injury and even death from the use of infant walkers, and walkers have not been shown by research to help children learn to walk. Therefore, the American Academy of Pediatrics does not recommend the use of infant walkers. If a you or a parent insists on using a mobile infant walker, it is vital that they choose a walker that meets the performance standards of ASTM F977-96 to prevent falls down stairs.<sup>32,33</sup>

## Infants & Toddlers

[Aren't infant and toddler DVDs and computer games good for them? Won't those things help make them smarter?](#)

The American Academy of Pediatrics does not recommend any screen time for children under 2 years of age and no more than 2 hours a day after age 2.<sup>34</sup> Research shows that for 8-16 month old children, every hour of viewing baby DVD/videos was associated with 6-8 fewer words learned compared to those that did not watch them.<sup>35</sup> For older children, more hours of TV viewing at 3 years of age was associated with decreased cognitive test scores at 6 years of age.<sup>36</sup> Children learn best through interactive play with caregivers and through exploration of their environment.

## All Children

[Why is physical activity important? Aren't children already active?](#)

During free-play, children are not as active as people commonly think. Researchers have found that preschoolers were only moderately to vigorously active for approximately 25 minutes during the child care day and they were sedentary for over 50% of their day.<sup>37</sup> Only 36% of youth participate in at least 60 minutes of physical activity a day.<sup>38,39</sup> Therefore, to help children and youth obtain the recommended amounts of daily physical activity, we need to provide more opportunities throughout the day for fun, engaging physical activity.

### Why should we take children outside everyday? Won't they get sick when it's cold?

Research has shown that outdoor play helps children be more physically active.<sup>40</sup> There is no data or evidence to support the belief that children must stay inside any time of the year to prevent infections, pneumonia, or other illnesses. In fact, going outside is important to expose children to sunlight for Vitamin D and to get fresh air.

- Children can play outdoors daily when weather and air quality conditions do not pose a significant health risk. Weather that poses a significant health risk includes wind chill at or below 15° F and heat index at or above 90° F, as identified by the National Weather Service.<sup>40</sup>
- During the winter: Children can go outside when temperatures are above 15° F, including wind chill factor. Outdoor time should be limited to 20-30 minutes when temperatures are between 16-32° F. Dress children in layers (typically, one layer warmer than adults). Cover hands, feet, heads and necks to prevent heat from escaping. Caregivers should check children's extremities for maintenance of normal color and warmth at least every 15 minutes when children are outdoors in cold weather.<sup>40</sup>
- During the summer: Provide shade to infants under 6 months because sunscreen cannot be used at this age. For infants and children over 6 months, provide sunscreen and sun hat protection, especially during the hours between 10 AM and 2 PM. Keep clothes loose, light-colored, lightweight and limited to one layer of absorbent material to facilitate the evaporation of sweat. Before prolonged physical activity in warm weather, children should be well-hydrated and should be encouraged to drink water during and after the activity. Help keep infants properly hydrated and go inside when needed.<sup>40</sup>

### Why do we need to reduce screen time?

The American Academy of Pediatrics recommends that children over age two watch no more than two hours of screen time (television, video games, recreational computer time, etc.) daily.<sup>34</sup> On average, children are using screen media for almost six hours daily.<sup>41,42</sup> Increased screen time is associated with increased risk for obesity, poor academic performance, violent and aggressive behavior, substance abuse, sexual activity and poor body image.<sup>36,41,43-57</sup> Therefore, reducing screen time is important to help children form lifelong healthy habits.



# Physical Activity Resources

## Early Care and Education Settings

(\* indicates that resource is available for a fee)

*A Guide to Creating Active Outdoor Play Spaces:* <http://www.eatsmartmovemorenc.com/ActivePlaySpaces/Texts/PlaySpacesGuide-HiRez.pdf>

### *Animal Trackers\**

A physical education program for children ages 3—6. Featuring over 60 activities spread out over 10 units and filled with colorful characters with tons of games, songs, and stories, children will learn to associate developing their motor skills and coordination with fun!

<http://www.healthy-start.com/preschool-teaching-aids/animal-trackers.html>

### *Coordinated Approach to Child Health (CATCH) Early Childhood Program\**

Modeled after the original coordinated school health program, this program is designed to nurture a love for physical activity, provide an introduction to classroom-based gardening and nutrition, and encourage healthy eating in children ages 3 through 5.

<http://www.catchinfo.org/pdf/cec%20flier.pdf>

### *Choosy Kids\**

Resources for developing healthy food choices and physical activity preferences in children. Features some free and some fee-based materials.

<http://www.choosykids.com/CK2/>

### *Color Me Healthy\**

A program developed to reach children ages four and five with fun, interactive learning opportunities on physical activity and healthy eating. Features some free and some fee-based materials.

<http://www.colormehealthy.com>

### *Eat Well Play Hard in Childcare Settings (EWPHCCS)*

An intervention that provides nutrition and physical activity education to preschool children, their parents and child care staff. The curriculum focuses on improving the nutrition and physical activity behaviors of preschool children and their parents/caregivers and influencing food and activity practices in child care settings. Materials developed by the New York State Department of Health:

<http://www.health.state.ny.us/prevention/nutrition/cacfp/ewphccs.htm>

### *Growing, Moving, Learning Infant Toddler Toolkit*

This toolkit includes developmentally appropriate activities that promote physical activities and healthy eating for infants and toddlers. It provides activities to do in the classroom, and at home, and encourages parents to write about their child's response to the activities. Activity exercises include ways to adapt and extend each activity. This development and production of this toolkit was a collaborative effort by Nemours and the Delaware Institute for Excellence in Early Childhood at the University of Delaware.

[http://www.dieec.udel.edu/sites/dieec.udel.edu/files/pdfs/early\\_childhood\\_professionals/Infant%20Toddler%20Toolkit%20Complete%20Vols%201-2-3.pdf](http://www.dieec.udel.edu/sites/dieec.udel.edu/files/pdfs/early_childhood_professionals/Infant%20Toddler%20Toolkit%20Complete%20Vols%201-2-3.pdf)

### *Head Start Body Start*

A website that provides links to tip sheets, and other physical activity resources for young children, their families and teachers: an easily accessible calendar of activities, physical activity experiences to plan for infants and toddlers and activities for preschool children. The site offers many additional links to resources to develop program, environments, and outdoor/nature opportunities; in addition there are links to webinars and online classes. Thoughtful materials for families are available in both Spanish and English. Provided by the National Center for Physical Development and Outdoor Play.

<http://www.aahperd.org/headstartbodystart/>



### ***I am Moving, I am Learning (IMIL)***

A proactive approach for addressing childhood obesity in Head Start children. IMIL seeks to increase moderate to vigorous physical activity, improve the quality of movement activities intentionally planned and facilitated by adults, and promote healthy food choices:

<http://eclkc.ohs.acf.hhs.gov/hslc/ecdh/Health/Nutrition/Nutrition%20Program%20Staff/IMIL/IamMovingIam.htm>

### ***Let's Move Child Care***

A national effort pioneered by First Lady Michelle Obama and Nemours to promote children's health by encouraging and supporting healthier nutrition and physical activity practices in child care. The website offers many resources, access to a wide range of helpful tools and videos, and inspirational stories from partners and providers who are changing their practice to help children grow up healthy:

<http://www.healthykidshealthyfuture.org/home/activities.html>

### ***MODEL Health! Promoting Nutrition & Physical Activity in Children***

Nutrition and physical activity lessons: <http://healthymeals.nal.usda.gov/hsmrs/Maryland/MODELHealth.pdf>

### ***Music & Movement: Nutrition in Action\****

Offers creative and fun solutions for children to learn about nutrition and physical activity:

<http://www.nutritioninaction.org/Pages/default.aspx>

### ***Sesame Street Healthy Habits for Life***

A bilingual, multi-media resource kit for preschool classrooms to build healthy habits in fun, developmentally appropriate ways. This toolkit offers games, poems, songs, posters, activities, family newsletters and more to incorporate physical activity, nutrition and healthy choices into preschool classrooms: <http://www.sesameworkshop.org/what-we-do/our-initiatives/healthy-habits-for-life.html>

## **School Settings**

### ***CATCH (Coordinated Approach to Child Health) Physical Education\****

CATCH PE, one component of the multi-faceted, evidence-based CATCH program, has been shown to significantly increase physical activity levels of students in grades K-8 during PE class. The program combines high energy, non-elimination activities with teaching strategies that keep kids moving and having fun.

<http://www.catchinfo.org/whatis.html>

### ***Eat Well & Keep Moving\****

An evidence-based program for grades 4-5 that helps children learn about and adopt healthy nutrition and physical activity practices using six coordinated components--classroom education, food services, physical education, staff wellness, parent involvement, and a school-wide promotional campaign.

<http://www.eatwellandkeepmoving.org/>

### ***Peaceful Playgrounds\****

A guide to designing a playground for grades K-6 that offers a variety of enjoyable games to maximize the number of students involved in physical activity. The Peaceful Playgrounds kit includes guidance on marking the playground, setting rules and expectations, selecting playground equipment, and resolving conflicts.

[www.peacefulplaygrounds.com](http://www.peacefulplaygrounds.com)

### ***Physical Best***

A comprehensive fitness education program for grades K-12 designed to provide students with the knowledge, skills and attitudes they need to lead a healthy and fit life. The program promotes enjoyable physical activity for ALL children, and can be combined with the FITNESSGRAM/ACTIVITYGRAM assessment program to help students set and track progress toward personal fitness goals.

<http://www.aahperd.org/naspe/professionaldevelopment/physicalbest/>

### ***Planet Health\****

An evidence-based, interdisciplinary curriculum focused on improving the health and well-being of sixth through eighth grade students while building and reinforcing skills in language arts, math, science, social studies, and physical education. Program goals include increasing activity, improving dietary quality, and decreasing inactivity. <http://www.planet-health.org/>  
Order from [www.humankinetics.com](http://www.humankinetics.com)

### ***SPARK (Sports, Play, & Active Recreation for Kids)\****

A collection of programs designed to help teachers provide quality physical education in early childhood environments, K-8 PE classes, and after-school programs. SPARK focuses on maximum use of PE time and individual improvements in fitness. <http://www.sparkpe.org/about.jsp>

### ***Take 10!\****

Audience: Grades K-5

A collection of 10-minute physical activities that are age-appropriate and linked to academic learning objectives. Program kits include activity cards, worksheets, tracking posters with stickers, teacher training videos, and student and teacher assessments.  
<http://www.take10.net>

### ***VERB***

A national, multicultural social marketing campaign that encourages tweens (9-13) to be physically active. Downloadable components of the VERB campaign include handouts, classroom activities, games, print ads, reward kits, and more.  
<http://www.cdc.gov/youthcampaign/>

## **After-school Settings**

### ***CATCH Afterschool (CATCH Kids Club)\****

An after-school program for grades K-8 developed from the evidence-based CATCH (Coordinated Approach to Child Health) Program. Provides enjoyable physical activity and nutrition education, and reinforces messages learned during the school day  
<http://www.catchinfo.org/whatis.html>

### ***Safe Routes to School***

A program for grades K-8 designed to make it safer for children to walk and bicycle to school. The program provides guidance on a variety of education, engineering, enforcement, and encouragement strategies to help more children walk and bicycle to school.  
<http://www.saferoutesinfo.org/guide/introduction/index.cfm>

### ***SPARK After School Program\****

An after-school program for grades K-8 that promotes enjoyable physical activity for ALL kids. Developed from the evidence-based SPARK program.  
<http://www.sparkpe.org/programAfterSchool.jsp>

### ***VERB***

A national, multicultural social marketing campaign that encourages tweens (9-13) to be physically active. Downloadable components of the VERB campaign include handouts, classroom activities, games, print ads, reward kits, and more.  
<http://www.cdc.gov/youthcampaign/>

## Physical Activity Books\*

Sanders, Stephen, W. (2002). *Active for Life: Developmentally Appropriate Movement Programs for Young Children*. Human Kinetics Publishers.

Craft, D. & Smith, C. (2008). *Active play! Fun physical activities for young children*. Cortland, NY: Active Play Books.

Fuchs, M. & Craft, D. (2012). *Movement matters: A movement album for Montessori early childhood programs*. Cortland, NY: Active Play Books.

Pica, R. (2004). *Experiences in Movement: Birth to Age 8*. Wadsworth Publishing.

Torbert, M., & Schneider, L. (1993). *Follow Me Too: A Handbook of Movement Activities for Three- to Five-Year-Olds*. Addison-Wesley.

## Screen Time Resources

### *Campaign for a Commercial-free Childhood*

Resources, toolkits and fact sheets for caregivers and families on limiting screen time, and screen time alternatives. Includes tools for organizing and participating in Screen-Free Week: <http://www.commercialfreechildhood.org/>

### *Kaiser Permanente*

Handouts about limiting screen time to post or send home to families. Includes screen time log sheet, activity page and book lists for children and adults: <http://www.health.state.mn.us/divs/hpcd/chp/cdrr/obesity/pdfdocs/screentimetoolkit.pdf>

### *USDA Team Nutrition*

Information about limiting screen time for children, including activities child care providers can try to reduce the amount of time children spend watching TV: <http://www.fns.usda.gov/tn/Resources/nutritionandwellness/limitscreen.pdf>

### *WIC*

Poster to hang up or send home to families: [http://www.idph.state.ia.us/hcci/common/pdf/poster\\_childcare\\_centers.pdf](http://www.idph.state.ia.us/hcci/common/pdf/poster_childcare_centers.pdf)



## Family Tip Sheets

The following family tip sheets are meant to be copied and distributed to support the recommendations of this guide.



## Did you know...

Nurturing your baby provides the sense of safety that allows her to explore her environment?

Babies learn through movement? When babies move, they build strength, brain connections and knowledge about the world and the people in it.

Carrying or gently rocking babies not only soothes them, but may improve coordination, balance, muscle tone and visual alertness?

Infants need time on their tummies daily to build strong neck and back muscles and to help them learn how to move and control their bodies?

That 40% of 3 month old infants are watching TV/video/DVDs, even though screen time is not recommended for children under two.

### HELP YOUR CHILD BE PHYSICALLY ACTIVE EVERY DAY.

An infant (birth through 11 months) is physically active when rolling, reaching, crawling, and cruising. Newborns enjoy the movement of being carried, rocked and snuggled close to the bodies of their family members. When infants are a few weeks old, they need plenty of opportunities for free movement and exploration indoors and outdoors every day. Pay close attention to your baby's wants and needs and you will discover endless options for working physical activity into each day!

### DAILY PHYSICAL ACTIVITY FOR INFANTS...

- Develops their brains and increases their ability to learn.
- Builds and maintains healthy bones, muscles and joints.
- Promotes good sleep.
- Helps them stay at a healthy weight.
- Develops a healthy heart and mind.
- Develops their independence.
- Develops movement skills like sitting, crawling and reaching.

### PHYSICAL ACTIVITY AND YOUR FAMILY

Most of us don't get enough physical activity daily, but it is fun and something you can enjoy together as a family. Physical activity is an important part of a healthy lifestyle for people of all ages and it is never too soon to begin being physically active. You can help your baby be active by gently interacting and playing with her every day. Include her in family outings and bring along a blanket so that she can explore once you reach your destination.

### TIPS FOR BEING ACTIVE WITH YOUR INFANT

- Make it fun! When physical activity is enjoyable, your whole family will WANT to play!
- Babies are naturally active and curious about the world. Encourage her to explore in safe environments with your caring supervision and involvement.
- Be active together! Use physical activity as family bonding time. When you play together, she has the opportunity and encouragement to try and master new skills such as: rolling over, sitting up, crawling, pulling up and reaching for and grasping objects.
- Be a great role model for healthy habits. Add physical activity to the things you do already. Park farther away from the door when you go shopping. Walk to get your mail instead of driving up to the mailbox. Take the stairs instead of the elevator.
- Provide engaging objects to use and explore to support physical development and active play:

#### *For younger infants*

- Rattles
- Mobiles
- Board books
- Unbreakable mirrors

#### *For older infants*

- Balls
- Dolls
- Solid furniture to use for pulling up, standing and cruising.

- Play with your baby! Enjoy the time to discover the world together.

- Have tummy time 2-3 times each day. This means laying her on a clean, safe and open area on the floor on her tummy. Place some favorite toys, an unbreakable mirror or board books nearby to encourage her to reach and explore. Be sure to respond to signs of frustration. Get down on the floor face-to-face to talk, sing and play with her.
- Give her plenty of safe opportunities every day to move on the open floor or on a clean blanket outside.
- Play simple games that use a variety of movements with her: Pat a Cake, This Little Piggy, How Big is Baby, Wheels on the Bus, etc.
- Limit time spent in confining equipment like infant carriers, seats and swings to less than 15 minutes while awake.
- Limit the use of strollers.
- Set up a safe area inside your home where active play is A-OK—bad weather is no excuse for not being active!
- Schedule a regular daily time for physical activity—maybe an hour before or after dinner go for a family walk or simply roll a ball back and forth outdoors.
- Set your weekend in motion by planning active family fun. Try a hike, a walk through the park, or a dip in the pool. Include your infant, but remember to bring along a blanket so she can explore freely when you take a break.

### NO SCREEN TIME FOR CHILDREN UNDER TWO!

What is screen time? It's any time spent in front of a screen, for example, watching television or DVDs, using the computer, smart phones, and/or playing video games. The American Academy of Pediatrics, an organization of children's doctors, recommends that children under two years of age have no screen time.

Too much screen time isn't good for your infant's health or her physical and mental development. It puts children at an increased risk for obesity. The more time she spend in front of a screen, the less time she is actively exploring her environment and developing important physical skills like sitting, crawling and reaching for objects.

### TIPS FOR TUNING OUT AND TURNING OFF

- Turn off the TV. Get down on the floor with your baby and play together. Sing silly songs that have movements like "This Little Piggy" or make up some of your own that include her name. Go outside with her and explore in the grass or watch the children coming home from school. Turn on music and dance.
- Move the TVs in your house out of bedrooms and to a central location like the family room.
- Wait to watch adult-only shows until after your children have gone to bed.

**“You are your baby’s guide and first teacher—the best person to help her learn how to live a healthy life! Instead of screen time, focus on positive activities like physical activity to help your baby grow up healthy.”**



## Did you know...

Toddlers need physical activity to grow up healthy?

Toddlers learn through movement? When they move, they build strength, brain connections and knowledge about our world and the people in it. As their skills increase, so does their confidence.

You do not need to “teach” toddlers to walk? Just provide support and many opportunities for them to practice their developing skills.

That 68% of children under two watch over two hours of screen time a day, even though screen time is not recommended for this age group?

### HELP YOUR TODDLER BE PHYSICALLY ACTIVE EVERY DAY.

Toddlers should get at least 60 - 90 minutes of physical activity daily. A toddler (1 through 2 years old) uses energy by walking, running, climbing and throwing. Toddlers need a safe environment and good supervision to keep them safe. They are curious, mobile and sometimes fearless, and they may not always understand the result of their actions. Toddlers often love to participate in daily activities with the family, so if they are interested, encourage them to help with sorting laundry, setting the table, and putting away toys. The options are endless for working physical activity into your toddler’s day!

### DAILY PHYSICAL ACTIVITY FOR TODDLERS...

- Develops their brains and increases their ability to learn.
- Builds and maintains healthy bones, muscles and joints.
- Promotes good sleep.
- Helps them stay at a healthy weight.
- Develops a healthy heart and mind.
- Develops their independence.
- Develops movement skills such as walking, running and throwing.
- Develops social skills such as sharing, communicating, problem-solving, and decision making.

### PHYSICAL ACTIVITY AND YOUR FAMILY

Most of us don’t get enough activity daily, but physical activity is fun and something you can enjoy together as a family. Physical activity is an important part of a healthy lifestyle for people of all ages. You can begin to help your toddler develop healthy habits by including physical activity in your daily routine. Your whole family will be healthier and you will be supporting learning at the same time.

### TIPS FOR BEING ACTIVE WITH YOUR TODDLER

- Make it fun! When physical activity is enjoyable, both you and your children will WANT to play!
- Toddlers are naturally very active and curious about the world. They are often fearless because they do not always expect the results of their actions. Encourage your toddler to explore in safe environments with your caring supervision and involvement.
- Be active together! Use physical activity as family bonding time. When you play together, she has the opportunity and support to try and master new skills such as: walking, running, climbing, kicking, throwing and catching.
- Be a great role model for healthy habits. Add physical activity to the things you do already. Park farther away from the door when you go shopping. Walk to get your mail instead of driving up to the mailbox. Take the stairs instead of the elevator.
- Offer a wide range of equipment or opportunities to support physical development and active play:
  - Objects to roll, throw and kick, such as bean bags and large, soft balls
  - Push toys like sturdy shopping carts, lawn mowers or doll carriages
  - Wagons to fill up with objects and pull
  - Riding toys
  - Low climbers
- Limit the use of strollers. Encourage young children to walk short distances.
- Involve your family in household tasks: setting the table, sorting laundry, folding clothes, washing the car, putting away toys, etc.
- Give your toddler plenty of opportunities to play outdoors in a safe, supervised environment. Bad weather is no excuse for not being active – just make sure that he/she is dressed appropriately for the weather conditions.
- Schedule a daily time for physical activity—maybe an hour before or after dinner go for a family walk or play a game outdoors.

- You don't have to do the same physical activity for a whole hour or even do it all at one time. You and your family can do as many different activities as you want throughout the day in blocks of at least ten minutes. Then, add up the minutes to meet your goal of at least 60-90 minutes of physical activity a day.
- Set your weekend in motion by planning active family fun. Try a hike, a walk to a nearby playground, or a dip in the pool.
- Put on different kinds of music and dance together. To add variety, try "jamming" together by drumming with your hands on a sturdy bench or table. Children of all ages love music and will get a kick out of dancing and drumming with the family.
- Try rolling a ball back and forth. As she becomes more comfortable with this activity, see if she would like to play "catch." Have her throw you a ball and then you throw it back to her. She may chase after the ball at first, but before you know it she will catch it!
- Try kicking a large, soft ball around. As she becomes more comfortable with this activity, see if she would like to play "Kick ball." Have her kick a ball to you and then you kick it back. Try kicking the ball different ways: hard and soft, and notice where the ball goes.

## SCREEN TIME

What is screen time? It's any time spent in front of a screen, for example, watching television or DVDs, using the computer, smart phones, and/or playing video games. The American Academy of Pediatrics, an organization of children's doctors, recommends no screen time for children under two years of age and no more than 1-2 hours a day for children two and older.

Too much screen time isn't good for your toddler's health or her physical and mental development. It puts children at an increased risk for obesity. The more time she spends in front of a screen, the less time she is being active, using energy and developing important physical skills. Also, the more TV your child watches, the more likely she is to snack even though she is not hungry, which may lead to weight gain.

## TIPS FOR TUNING OUT AND TURNING OFF

Your child may be used to watching TV, so establishing some "media rules" may take time, but it will work. This doesn't mean you can never watch TV again! But setting limits will help her grow up healthy and give you more opportunities to spend quality time together. Children will find something fun to do if you make it easy and support them with ideas. Try these to start:

- Put special toys or materials that she enjoys on a shelf or cupboard in your kitchen: blocks, board books or a craft box with safe items for them to use (crayons, markers, stickers, tape, and blank paper). She can "work" in the kitchen with you while you make dinner.
- Turn off the TV during dinner and enjoy each other. This is a great time to talk with her.
- Move the TVs in your house out of the bedrooms and to a central location like the family room so you can easily watch with her and monitor use by older children.
- Have one specific time during the day with age-appropriate, educational programming, during which TV viewing is okay for your two year old. An even better approach is to steer her to activities that do not involve screen time. If you do allow your two year old to watch television, always watch the program with her, so you can talk about it together.
- Wait to watch adult-only shows until after your children have gone to bed.
- Create a quiet corner. Have picture books available and easy puzzles so she can entertain herself.
- Create a safe area for supervised physical activity where your toddler can walk, run, and play and use push or pull toys. Always provide close supervision for toddlers.

**“You are your child’s guide and teacher – the best person to help her learn how to live a healthy life! Instead of screen time, focus on positive activities like physical activity to help your child grow up healthy.”**

## Did you know...

Preschoolers need physical activity to grow up healthy?

Children who are active are more likely to be active as adults?

Physical activity not only has a powerful and positive impact on physical health and development, it promotes mental health, social well-being and learning?

Many children spend the same amount of time in front of a screen as they spend outdoors?

### HELP YOUR CHILD BE PHYSICALLY ACTIVE EVERY DAY.

Preschoolers should get at least 90 minutes to 120 minutes of physical activity daily. Preschoolers (3 through 5 years old) are mastering skills such as running, jumping, and throwing. They develop confidence in their abilities over time when they have opportunities to follow their interests and learn and practice new skills. Preschool children are often very social and imaginative; they love games, dancing, riding tricycles and creating obstacle courses to move through. They are full of ideas and will help you discover endless options for working physical activity into the day!

### DAILY PHYSICAL ACTIVITY FOR PRESCHOOLERS...

- Develops their brains and increases their ability to learn.
- Builds and maintains healthy bones, muscles and joints.
- Promotes good sleep.
- Helps them stay at a healthy weight.
- Develops a healthy heart and mind.
- Develops their independence.
- Develops movement skills such as jumping, skipping and hopping.
- Develops social skills such as sharing, communicating, problem-solving, and decision making.

### PHYSICAL ACTIVITY AND YOUR FAMILY

Most of us don't get enough activity daily, but physical activity is fun and something you can enjoy together as a family. Physical activity is an important part of a healthy lifestyle for people of all ages. You can help your preschooler develop healthy habits by including physical activity in your daily routine. Your whole family will be healthier and you will be supporting learning at the same time.

### TIPS FOR BEING ACTIVE WITH YOUR PRESCHOOLERS

- Make it fun! When physical activity is enjoyable, both you and your children will WANT to play!
- Be active together! Use physical activity as family bonding time. When you play together, she has the opportunity and support to try and master new skills such as: running, jumping, hopping, galloping, pedaling, climbing, catching and throwing.
- Be a great role model for healthy habits. Add physical activity to the things you do already. Park farther away from the door when you go shopping. Walk to get your mail instead of driving up to the mailbox. Take the stairs instead of the elevator.
- You don't have to do the same physical activity for a whole hour or even do it all at one time. You and your family can do as many different activities as you want throughout the day in blocks of at least ten minutes. Then, add up the minutes to meet your goal of at least 90-120 minutes of physical activity per day.
- Offer a wide range of opportunities for physical activity as well as some basic equipment:
  - Different kinds of balls and bean bags
  - Old boxes or tunnels to crawl through
  - Tricycle or other riding toy
  - Push-pull toys like wagons, doll buggies or lawn mowers
  - Access to climbing equipment at a playground
- Have a "Movement Parade." March around the room or outside and call out different things that you and she can do like twirl, leap, hop, jump, etc.
- Go on a nature hunt. Find acorns, pine cones, bird feathers, shiny rocks, etc.
- Play simple singing games that involve movement: "Hokey-Pokey," "Head, Shoulders, Knees and Toes," or "If You're Happy and You Know It!"



- If she feels like running, try some fun running games like Tag, Red Light-Green Light, or Freeze Tag.
- Involve your whole family in household tasks: setting the table, sorting laundry, folding clothes, washing dishes, putting away toys, cleaning the house, packing for a trip, caring for the garden, etc.
- Schedule a daily time for physical activity—maybe an hour before or after dinner go for a family walk or play a game outdoors.
- Give your child plenty of opportunities to play outdoors in a safe, supervised environment. Bad weather is no excuse for not being active – just make sure that he/she is dressed appropriately for the weather conditions.
- Set your weekend in motion by planning active family fun. Try a hike in the woods, a walk to a nearby playground, or a dip in the pool.
- Limit the use of strollers. Encourage her to walk.

### LIMIT SCREEN TIME FOR PRESCHOOL CHILDREN TO 1-2 HOURS OR LESS EACH DAY.

What is screen time? It's any time spent in front of a screen, for example, watching television or DVDs, using the computer, smart phones, and/or playing video games. The American Academy of Pediatrics, an organization of children's doctors, recommends no more than 1-2 hours a day of screen time for children two and older.

Too much screen time isn't good for your preschooler's health or her physical and mental development. It puts children at an increased risk for obesity. The more time she spends in front of a screen, the less time she is being active, using energy and developing important physical skills like hopping, galloping, skipping, catching, throwing. Also, the more TV she watches, the more likely she is to snack even though she is not hungry, which may lead to weight gain. The average preschooler watches 2.6 hours of television per day!

### TIPS FOR TUNING OUT AND TURNING OFF

Your children may be use to watching TV, so establishing some “media rules” may take time, but it will work. This doesn't mean you can never watch TV again! But setting limits will help her grow up healthy and give you more opportunities to spend quality time together. Kids will find something fun to do if you make it easy and support them with ideas. Try these to start:

- Involve your preschooler in creating a “TV allowance.” Decide together during what time of day TV will be allowed and what shows are okay for viewing. If you and her disagree on appropriate shows, talk with her about why you feel the way you do about certain shows. Remember to limit all screen time to 1-2 hours or less each day.
- Put special toys or materials that she enjoys on a shelf or cupboard in your kitchen: blocks, board books or a craft box with safe items for them to use (crayons, markers, stickers, tape, scissors, glue, and blank paper). She can “work” in the kitchen with you while you make dinner.
- Turn off the TV during dinner and enjoy each other. Ask everyone around the table (this includes you) to share the best and worst parts of their day with each other.
- Move the TVs in your house out of the bedrooms and to a central location, such as the family room, where you can easily watch programs with her and monitor television use by older children. Have one specific time during the day in which age-appropriate, safe and educational TV viewing is okay.
- When she watches television, watch the program together and talk about what you are seeing.
- If you allow her to use a computer, always watch and teach her how to use it appropriately.
- Wait to watch adult-only shows until after your children have gone to bed.
- Create a quiet, cozy corner with picture books, puzzles, and blocks so that she can play quietly.

**“You are your child’s guide and teacher – the best person to help her learn how to live a healthy life! Instead of screen time, focus on positive activities like physical activity to help your child grow up healthy.”**

## Did you know...

Children who are active are more likely to be active as adults?

Physical activity has a positive impact on physical health and development and it is good for her mental health, social well-being and learning?

The English language has more than 10,000 words for describing physical activities?

The average American teen spends more time watching TV than any other activity except for sleeping—even more time than going to school?

### HELP YOUR CHILD BE PHYSICALLY ACTIVE EVERY DAY.

Physical activity is any body movement that uses energy. Children who are physically active enjoy many positive benefits to their physical (builds muscles and develops and maintains healthy bones) and emotional (reduces feelings of anxiety and depression) health. When children are physically active on a daily basis, not only are they more effective learners, but they are less likely to be overweight. Children and youth are full of ideas for being active and can help you discover endless options for working physical activity into the day!

### DAILY PHYSICAL ACTIVITY FOR CHILDREN AND YOUTH...

- Develops their brains and increases their ability to learn.
- Builds and maintains healthy bones, muscles, and joints.
- Boosts energy and promotes good sleep.
- Helps them stay at a healthy weight.
- Develops a healthy heart and mind.
- Develops their independence.
- Increases self-esteem and feelings of happiness.
- Develops social skills such as sharing, communicating, problem-solving, and decision-making.

### PHYSICAL ACTIVITY AND YOUR FAMILY

Physical activity is an important part of a healthy lifestyle for people of all ages. Help your child and yourself by making physical activity something fun that you can enjoy together as a family. Children and youth six years and older should get at least 60 minutes of physical activity daily, and adults should get at least 30 minutes. You don't have to do the same physical activity for a whole hour, or even do it all at one time. You and your family can do as many different activities as you want throughout the day in blocks of at least ten minutes; just add up the minutes to meet your goal of at least one hour of physical activity per day.

### TIPS FOR BEING ACTIVE WITH YOUR CHILD

- Make it fun! When physical activity is enjoyable, both you and your children will WANT to play!
- Be active together! Use physical activity as family bonding time. Talk with your kids while taking the dog for a walk, go to the play ground, ride bikes together or play a game outdoors.
- Be a great role model for healthy habits. Add physical activity to the things you do already. Park farther away from the door when you go shopping. Walk to get your mail instead of driving up to the mailbox. Take the stairs instead of the elevator.
- Offer a wide range of opportunities for physical activity, as well as some basic activity equipment:
  - Bicycles
  - Jump Ropes
  - Balls
  - Sneakers
- Go on a nature hunt. Find acorns, pine cones, bird feathers, shiny rocks, etc.
- Play a game involving movement like charades, Frisbee, catch, or invent your own game (and rules!).
- Schedule a daily time for physical activity—maybe an hour before or after dinner go for a family walk or play a game outdoors.
- Walk her to school or start a “walking school bus” (a group of children walking to school with one or more adults) in your neighborhood so kids have a safe, social and supervised opportunity for physical activity.
- Make physical activity a family challenge. Have each family member set personal goals, and keep track of your minutes on a chart on the fridge.
- Involve your whole family in household tasks: setting the table, sorting laundry, folding clothes, washing putting away toys, cleaning the house, packing for a trip, caring for the garden, etc.

- Take advantage of your city's parks and recreational opportunities. Many areas have sponsored "fun runs," walking and hiking tours, and sports leagues.
- Give your child plenty of opportunities to play outdoors in a safe, supervised environment. Bad weather is no excuse for not being active – just make sure that he/she is dressed appropriately for the weather conditions.

### LIMIT SCREEN TIME TO 1-2 HOURS OR LESS EACH DAY.

What is screen time? It's any time spent in front of a screen, for example, watching television or DVDs, using the computer, smart phones, and/or playing video games. The American Academy of Pediatrics, an organization of children's doctors, recommends no more than 1-2 hours a day of screen time for children two and older.

Too much screen time isn't good for her health or physical and mental development. It puts children at an increased risk for obesity. The more time a child spends in front of a screen, the less time she is being active, using energy and developing important physical skills. Also, the more TV your child watches, the more likely she is to snack even though she is not hungry, which may lead to weight gain. Our children are spending more time than ever in front of the screen—almost 6 hours per day. That's about 42 hours per week... more than a full time job!

### TIPS FOR TUNING OUT AND TURNING OFF

Your children may be used to watching TV, so establishing some "media rules" may take time, but it will work. This doesn't mean you can never watch TV again! But setting limits will help her grow up healthy and give you more opportunities to spend quality time together. Kids will find something fun to do if you make it easy and support them with ideas.

### Try these to start:

- Involve her in creating a "TV allowance." Decide together during what time of day TV will be allowed and what shows are okay for viewing. Remember to limit all screen time to 1-2 hours or less each day.
- Homework is always a good place to start. If you have younger children put special toys or materials that she enjoys on a shelf or cupboard in your kitchen: blocks, board books or a craft box with safe items for them to use (crayons, markers, stickers, tape, scissors, glue, and blank paper). She can "work" in the kitchen with you while you make dinner.
- Turn off the TV during dinner and enjoy each other. Ask everyone around the table (this includes you) to share the best and worst parts of their day with each other.
- Move the TVs in your house out of the bedrooms and to a central location like the family room where you can easily watch programs with her and monitor television use by older children.
- Have one specific time during the day in which age-appropriate, safe and educational TV viewing or computer use is okay.
- Encourage other activities that do not involve screen time. In order to develop and learn, children need lots of opportunities to be active and interact with other people and the world around them.
- Wait to watch adult-only shows until after your children have gone to bed.
- Point your kids to a good book, comic book, newspaper, or magazine to read, either for school or for pleasure. If she can't read alone yet, read aloud to her.

**"You are your child's guide and teacher – the best person to help her learn how to live a healthy life! Instead of screen time, focus on positive activities like physical activity to help your child grow up healthy."**

# References

- 1 Ogden CL, Carroll MD, Kit BK, et al. Prevalence of obesity and trends in body mass index among US children and adolescents, 1999-2010. *JAMA*. 2012;307:483-490.
- 2 Whitaker RC, Wright JA, Pepe MS, Seidel KD, Dietz WH. Predicting obesity in young adulthood from childhood and parental obesity. *N Engl J Med*. Sep 25 1997; 337(13):869-873.
- 3 Serdula MK, Ivery D, Coates RJ, Freedman DS, Williamson DF, Byers T. Do obese children become obese adults? a review of the literature. *Prev Med*. 1993;22:167-177.
- 4 Shinha R, Fisch G, Teague B, et al. Prevalence of impaired glucose tolerance among children and adolescents with marked obesity. *N Engl J Med*. 2002;346:802-810.
- 5 Pinhas-Hamiel O, Dolan LM, Daniels SR, Standiford D, Khoury PR, Zeitler P. Increased incidence of non-insulin-dependent diabetes mellitus among adolescents. *J Pediatr*. 1996;128:608-615.
- 6 Richards GE, Cavallo A, Meyer WJ III, et al. Obesity, acanthosis nigricans, insulin resistance, and hyperandrogenemia: pediatric perspective and natural history. *J Pediatr*. 1985;107:893-897.
- 7 Gidding SS, Bao W, Srinivasan SR, Berenson GW. Effects of secular trends in obesity on coronary risk factors in children: the Bogalusa Heart Study. *J Pediatr*. 1995;127:868-874.
- 8 Clarke WR, Woolson RF, Lauer RM. Changes in ponderosity and blood pressure in childhood: the muscatine study. *Am J Epidemiol*. 1986;124:195-206.
- 9 Johnson AL, Cornoni JC, Cassel JC, Tyroler HA, Heyden S, Hames CG. Influence of race, sex, and weight on blood pressure behaviors in young adults. *Am J Cardiol*. 1975;35:523-530.
- 10 Centers for Disease Control and Prevention. Health consequences: overweight and obesity. <http://www.cdc.gov/obesity/causes/health.html>. Updated May 28, 2009. Accessed July 2009.
- 11 Crocker J, Garcia JA. Self-esteem and the stigma of obesity. [http://www.rcgd.isr.umich.edu/crockerlab/articles/2005\\_Crocker\\_Garcia\\_Self-Esteem\\_&\\_Stigma\\_of\\_Obesity.pdf](http://www.rcgd.isr.umich.edu/crockerlab/articles/2005_Crocker_Garcia_Self-Esteem_&_Stigma_of_Obesity.pdf). Accessed July 2009.
- 12 Brownell K, Puhl R. Stigma and discrimination in weight management. *The Permanente Journal*. <http://xnet.kp.org/permanentejournal/sum03/stigma.html>. Accessed July 2009.
- 13 US Department of Health and Human Services. *2008 Physical Activity Guidelines for Americans*. <http://www.health.gov/paguidelines>. October 17, 2008. Accessed April 2009.
- 14 US Department of Health and Human Services. *Physical Activity and Health: A Report of the Surgeon General* 1996.
- 15 American College of Sports Medicine. *ACSM's Guidelines for Exercise Testing and Prescription*. 8th ed; 2009.
- 16 Ganley T, Sherman C. Exercise and children's health. *The Physician and Sports Medicine Journal*. February 2000.
- 17 American Heart Association. Exercise (physical activity) and children. <http://www.americanheart.org/presenter.jhtml?identifier=4596>. Accessed July 2009.
- 18 President's Council on Physical Fitness and Sport. Health benefits of physical activity during childhood and adolescents. <http://www.fitness.gov/childhood.htm>. Accessed July 2009.
- 19 Weight-control Information Network, National Institute of Diabetes and Digestive and Kidney Diseases. Healthy eating and physical activity across the lifespan. <http://www.win.niddk.nih.gov/publications/child.htm#tips>. Accessed July 2009.
- 20 National Association for Sport and Physical Education. *Active start: A Statement of Physical Activity Guidelines for Children Birth to Five Years*. 2<sup>nd</sup> ed; 2002.
- 21 American College of Sports Medicine, American Heart Association. Physical activity and public health guidelines. [http://www.acsm.org/AM/Template.cfm?Section=Home\\_Page&TEMPLATE=/CM/HTMLDisplay.cfm&CONTENTID=7764](http://www.acsm.org/AM/Template.cfm?Section=Home_Page&TEMPLATE=/CM/HTMLDisplay.cfm&CONTENTID=7764). Accessed July 2009.
- 22 US Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition and Physical Activity. *Promoting Physical Activity: A Guide for Community Action*. 1999.
- 23 National Institutes of Health, Eunice Kennedy Shriver, National Institute of Child Health and Human Development. Safe sleep for your baby: ten ways to reduce the risk of Sudden Infant Death Syndrome (SIDS). [http://www.nichd.nih.gov/publications/pubs/safe\\_sleep\\_gen.cfm](http://www.nichd.nih.gov/publications/pubs/safe_sleep_gen.cfm). Accessed July 2009.
- 24 Healthy Childcare America and American Academy of Pediatrics. Back to sleep, tummy to play. <http://www.healthychildcare.org/pdf/SIDStummytime.pdf>. Revised 2008. Accessed July 2009.
- 25 Sedentary activity: definition. <http://www.dictionary.com>. Accessed July 2009.
- 26 Delaware Department of Education. *Early Learning Foundations for School Success*. [http://www.doe.k12.de.us/infosuites/students\\_family/earlychildhood/preschool.shtml](http://www.doe.k12.de.us/infosuites/students_family/earlychildhood/preschool.shtml). Accessed July 2009.
- 27 Office of Child Care Licensing, Division of Family Services, Department of Services for Children, Youth and their Families. Delacare: rules for early care and education and school-age centers. [http://kids.delaware.gov/pdfs/occl\\_regulations\\_plain\\_jan\\_2007.pdf](http://kids.delaware.gov/pdfs/occl_regulations_plain_jan_2007.pdf). Accessed July 2009.
- 28 Nemours Health and Prevention Services. Planting the seeds for healthy schools: building effective district wellness policies. 2008. <http://www.nemours.org/department/nhps/school/school-toolkit.html>. Accessed July 2009.
- 29 Majnemer A, Barr RG. Associations between sleep position and early motor development. *J Pediatr*. 2006;149(5):623-629.e1.
- 30 Garrett M, McElroy A, Staines A. Locomotor milestones and babywalkers: cross sectional study. *BMJ*. 2002;324:1494.
- 31 Abbott A, Bartlett D. Infant motor development and equipment use in the home. *Child Care Health Dev*. 2001;27(3):295-306.
- 32 US Department of Agriculture, Food and Nutrition Services, Supplemental Food Programs. Infant nutrition and feeding: a guide for use in the WIC and CSF programs: Chapter 7. <http://www.nal.usda.gov/wicworks/Topics/FG/CompleteIFG.pdf>. Accessed July 2009.
- 33 Committee on Injury and Poison Prevention, American Academy of Pediatrics. Injuries associated with infant walkers. *Pediatrics*. 2001;108(3):790-792.
- 34 American Academy of Pediatrics. *Bright Futures Guidelines for Health Supervision of Infants, Children and Adolescents: 3<sup>rd</sup> ed*. Elk Grove Village, IL. 2008.
- 35 Zimmerman FJ, Christakis DA, Meltzoff AN. Associations between media viewing and language development in children under age 2 years. *J Pediatr*. 2007;151(4):364-368.
- 36 Zimmerman FJ, Christakis DA. Children's television viewing and cognitive outcomes: a longitudinal analysis of national data. *Arch Pediatr Adolesc Med*. 2005;159:619-625.
- 37 Bower JK, Hales DP, Tate DE, Rubin DA, Benjamin SE, Ward DW. The childcare environment and children's physical activity. *Am J Prev Med*. 2008;34(1):23-29.
- 38 Centers for Disease Control and Prevention, Department of Health and Human Services. Youth Risk Behavior Surveillance-United States, 2007. <http://www.cdc.gov/HealthyYouth/yrbs/index.htm>. Accessed July 2009.
- 39 Child Trends Databank. Vigorous physical activity by youth. <http://www.childtrends.databank.org/indicators/16PhysicalActivity.cfm>. Accessed July 2009.



40 American Academy of Pediatrics, American Public Health Association, and National Resource Center for Health and Safety in Child Care and Early Education. 2012. Preventing Childhood Obesity in Early Care and Education: Selected Standards from Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs, 3rd Edition. [http://nrckids.org/CFOC3/PDFVersion/preventing\\_obesity.pdf](http://nrckids.org/CFOC3/PDFVersion/preventing_obesity.pdf)

41 American Academy of Pediatrics: Committee on Public Education. Children, adolescents, and television. *Pediatrics*. 2001;107(2):423-426.

42 CHILDWISE. The monitor trends report 2009: trends data from the CHILDWISE MONITOR report 1994-2008. <http://www.childwise.co.uk/childwise-published-research-detail.asp?PUBLISH=53>. Accessed July 2009.

43 Harrison K, Cantor J. The relationship between media consumption and eating disorders. *J Commun*. 1997;47:40-67.

44 Andersen RE, Crespo CJ, Bartlett SJ, Cheskin LJ, Pratt M. Relationship of physical activity and television watching with body weight and level of fatness among children: results from the Third National Health and Nutrition Examination Study. *JAMA*. 1998;279:938-942.

45 Jeffrey RW, French SA. Epidemic obesity in the United States: are fast foods and television viewing contributing? *Am J Public Health*. 1998;88(2):277-280.

46 Morgan M. Television and school performance. *Adolesc Med*. 1993;4:607-622.

47 Strasburger VC. "Sex, drugs, rock'n'roll," and the media: are the media responsible for adolescent behavior? *Adolesc Med*. 1997;8:403-414.

48 Huston AC, Donnerstein E, Fairchild H, et al. *Big World, Small Screen: The Role of Television in American Society*. Lincoln, NE: University of Nebraska Press; 1992.

49 Donnerstein E, Linz D. The mass media: a role in injury causation and prevention. *Adolesc Med*. 1995;6:271-284.

50 Eron LR. Media violence. *Pediatr Ann*. 1995;24:84-87.

51 Willis E, Strasburger VC. Media violence. *Pediatr Clin North Am*. 1998;45(2):319-331.

52 Kunkel D, Cope KM, Farinola WJM, Biely E, Rollin E, Donnerstein E. *Sex on TV: Content and context: a biennial report to the Kaiser Family Foundation* 1999.

53 Huston AC, Wartella E, Donnerstein E. *Measuring the effects of sexual content in the media: a report to the Kaiser Family Foundation* 1998.

54 Brown JD, Greenberg BS, Buerkel-Rothfuss NL. Mass media, sex and sexuality. *Adolesc Med*. 1993;4:511-525.

55 Harrison K, Cantor J. The relationship between media consumption and eating disorders. *J Commun*. 1997;47:40-67.

56 Signorelli N. Sex roles and stereotyping on television. *Adolesc Med*. 1993;4:551-561.

57 Children Now. *A Different World. Children's Perceptions of Race and Class in the Media*. Oakland, CA; 1998.

58 American Academy of Pediatrics. (2008). "Reducing the Risk of SIDS in Child Care." Retrieved March 17, 2010, from <http://www.healthychildcare.org/PPT/SIDSfinal.ppt#330,37,Slide 37>.

59 American Academy of Pediatrics. (2008). "Back to Sleep, Tummy to Play." Retrieved March 17, 2010, from <http://www.healthychildcare.org/Pdf/SIDStummytime.pdf>.

60 Center for Disease Control. (2008, November 5). "Physical Activity for Everyone." Retrieved March 17, 2010, from <http://www.cdc.gov/physicalactivity/everyone/getactive/children.html>.

61 American Academy of Pediatrics: Council on Communications and Media. Media use by children younger than 2 years. *Pediatrics*. 2011;128(5):1-6. Retrieved December 19, 2012, from <http://pediatrics.aappublications.org/content/early/2011/10/12/peds.2011-1753.full.pdf>

62 American Academy of Pediatrics: Children, adolescents, and television. *Pediatrics*. Feb 2001;107(2):423-426.

63 Pate RR, O'Neill JR. Physical Activity Guidelines for Young Children: An Emerging Consensus. *Arch Pediatr Adolesc Med*. 2012;166(12):1095-1096. doi:10.1001/archpediatrics.2012.1458.



## REFERENCES SPECIFIC TO HANDOUTS

Liddle TL, Yorke L. *Why Motor Skills Matter: Improve Your Child's Physical Development to Enhance Learning and Self-Esteem*. New York: McGraw-Hill; 2004.

Zimmerman FJ, Christakis DA. Television and DVD/video viewing in children younger than 2 years. *Arch Pediatr Adolesc Med*. 2007;161(5):473-479.

Henry J Kaiser Family Foundation. New study finds children age zero to six spend as much time with TV, computers and video games as playing outside. <http://www.kff.org/entmedia/entmedia102803nr.cfm>. Accessed July 2009.

Dennison BA, Erb TA, Jenkins PL. Television viewing and television in bedroom associated with overweight risk among low income preschool children. *Pediatrics*. Jun 2002;109(6):1028-1035.

Coon KA, Goldberg J, Rogers BL, Tucker KL. Relationships between use of television during meals and children's food consumption patterns. *Pediatrics*. 2001;107(1):e7.

Stranger JD. *Television in the Home 1998: The Third Annual National Survey of Parents and Children*. Philadelphia, PA: Annenberg Public Policy Center; 1998.

Nemours Health and Prevention Services. Fact sheet for kids: Growing up healthy. <http://static.nemours.org/www-filebox/nhps/grow-up-healthy/growing-up-healthy-kids2.pdf>. Accessed July 2009.

Nemours Health and Prevention Services. Fact sheet for parents: Growing up healthy. <http://static.nemours.org/www-filebox/nhps/grow-up-healthy/growing-up-healthy-parent2.pdf>. Accessed July 2009

## Notes

VERSION 3



252 Chapman Road  
Christiana Building, Ste. 200  
Newark, Delaware 19702  
302-444-9100 ■ 888-494-5252

[nemours.org/growuphealthy](http://nemours.org/growuphealthy)