

7 — PHYSICAL ACTIVITY

POLICY COMPONENT PHYSICAL ACTIVITY

POLICY AREAS

This section addresses best practices for physical activity in the child care environment including policy recommendations, rationale, implementation strategies and resources for the following six policy areas:

- Daily Physical Activity
- Play Space and Equipment
- Standards-Based Physical Education
- Connecting with Planning Learning Experiences
- Screen Time
- Physical Activity and Punishment

DAILY PHYSICAL ACTIVITY

Policy Recommendations for Children

- ▶ In accordance with national guidelines, the child care program encourages all children to participate in a variety of daily physical activity opportunities that are appropriate for their age, that are fun and that offer variety. The child care program provides all children with numerous opportunities for physical activity throughout the day.
 - Toddlers (ages 1 to 2) are provided with at least 30 minutes of structured activity and at least 60 minutes up to several hours of unstructured physical activity daily.
 - Preschoolers (ages 3 to 5) are provided with at least 60 minutes of structured activity and at least 60 minutes up to several hours of unstructured physical activity daily.
 - Toddlers and preschoolers are not sedentary for more than 60 minutes at a time except while sleeping.
 - School-age children (ages 6 and older) are provided with at least 60 minutes of daily physical activity that includes aerobic and age-appropriate muscle- and bone-strengthening activities.



SMART STEPS

Plan daily periods of active play that meet physical activity goals and learning standards.

The daily recommended amount of structured physical activity does not need to be provided all at once. Children can accumulate shorter bouts of activity (e.g., 10 minutes) throughout the day to equal the recommended amount.

- ▶ Program practices are inclusive and offer access for children with disabilities to participate in physical activities with nondisabled peers.
- ▶ All children are provided outdoor time at least twice daily, weather and air quality permitting.
 - Children can go outside when the temperatures are above 15 degrees Fahrenheit (including wind chill factor) and below 90 degrees Fahrenheit.
 - Outdoor time should be limited to 20 to 30 minutes when temperatures are between 16 to 32 degrees Fahrenheit.
 - Outdoor time is in safe settings supervised by adults.
- ▶ Staff members lead and participate in active play (e.g., games and activities) during outdoor time and other times devoted to physical activity.

Policy Recommendations for Infants

- ▶ In accordance with national guidelines, the child care program provides all infants with planned daily physical activity to safely support their physical development and health. Activities are planned to support infants' developmental milestones, such as self-supporting head and neck, rolling, reaching, sitting, kicking, crawling, standing and walking.
- ▶ Following the American Academy of Pediatrics' recommendation, infants are provided "tummy time" (time spent lying on their stomachs) for short intervals at least two to three times each day while they are awake and supervised by an adult.
- ▶ All infants are provided daily outdoor time when the weather and air quality are safe.
 - Infants can go outside when the temperatures are above 15 degrees Fahrenheit (including wind chill factor) and below 90 degrees Fahrenheit.
 - Outdoor time should be limited to 20 to 30 minutes when temperatures are between 16 to 32 degrees Fahrenheit.
 - Outdoor time is in safe settings supervised by adults.
- ▶ To support infant development, confining equipment (e.g., swings, bouncy chairs, exercise saucers, car seats and strollers) is limited to less than 30 minutes while infants are awake.



SMART STEPS

Provide planned daily physical activity to safely support infants' physical development and health.

Rationale

Regular physical activity is important to children's health and development. It increases muscle and bone strength, helps maintain healthy weight, enhances psychological well-being and provides numerous health benefits, including reduced risk of chronic diseases, such as heart disease, hypertension, type 2 diabetes and osteoporosis. However, research indicates that few children meet the daily recommendations for physical activity and physical activity declines as children get older. A recent study found that children's activity levels begin to decrease between ages 3 and 5.²⁹ By the time students are in high school, 65 percent do not meet daily physical activity recommendations.³⁰

Child care programs can help children become more physically active and fit by providing a wide range of developmentally appropriate and safe opportunities to be active. Appropriate practices guided by competent, knowledgeable and supportive adults influence the extent to which children choose to engage in activities, enjoy physical activity and develop healthy lifestyles. High-quality motor skill instruction significantly increases preschoolers' motor skill development.²⁷



The policy recommendations for daily physical activity are based on national standards from the National Association for Sport and Physical Education (NASPE) and the U.S. Department of Health and Human Services. The NASPE recommends that all children from birth to age 5 should engage in daily physical activity that promotes movement skillfulness and foundations of health-related fitness (see appendix G).²⁸ For children ages 1 to 2, the daily recommendation is at least 30 minutes of structured activity and at least 60 minutes up to several hours of unstructured physical activity. For children ages 3 to 5, the daily recommendation is at least 60 minutes of structured activity and at least 60 minutes up to several hours of unstructured physical activity. The U.S. Department of Health and Human Services recommends that children and adolescents engage in at least 60 minutes of daily physical activity that is appropriate for their age, enjoyable and offers variety (see appendix H).²⁶

Daily outdoor play helps all children be more physically active. Research shows that preschoolers' participation in moderate to vigorous physical activity is significantly associated with the percentage of time spent in outside play areas and child-initiated free play activities, while interacting with peers.⁶⁹ Child care programs can decrease children's sedentary activity simply by providing sufficient portable play equipment, e.g., large building blocks and balls. Adding portable play equipment to an outdoor playground significantly increases physical activity among 3 to 5 year olds.⁷⁰

Providing a child care environment that supports appropriate physical activity for infants helps them with developing movement skills, such as sitting up, rolling over and crawling. The AAP recommends that infants are provided tummy time (time spent lying on their stomachs) at least two to three times each day while they are awake and being supervised by an adult.⁷¹ Tummy time promotes babies' muscle development and prepares them for when they will be ready to slide on their bellies and crawl. Insufficient tummy time can cause a delay of babies' motor skill development. The Nemours Foundation recommends at least 30 minutes of daily tummy time until an infant is creeping or crawling.⁷² *Note: Babies must always sleep on their backs to reduce the risk of Sudden Infant Death Syndrome (SIDS).*



SMART STEPS

Provide outdoor play time at least twice daily and provide enough portable play equipment for all children.



SMART STEPS

Provide daily tummy time for infants. Limit confining equipment to less than 30 minutes per day when infants are awake.

The Nemours Foundation recommends that the use of confining equipment for infants (e.g., swings, bouncy chairs and exercise saucers) is limited to less than 30 minutes per day while the infant is awake.⁷² The overuse of confining equipment can delay infants' motor skill development, such as rolling over, sitting, crawling and walking.²⁸

Implementation Strategies for Children

- For children ages birth to 5, follow the guidelines in the NASPE's *Active Start: A Statement of Physical Activity Guidelines for Children Birth to Age 5* (see appendix G).
- For children ages 6 and older, follow the U.S. Department of Health and Human Services' *Physical Activity Guidelines for Children and Adolescents* (see appendix H).
- Provide teacher-led physical activity at least two times per day.
- Promote noncompetitive age-appropriate games.
- Provide daily outdoor time for all children at least twice daily, as appropriate, based on weather and air quality.
- Develop guidelines for staff members regarding appropriate temperatures and length of time for outdoor play. For more information, see the National Weather Service's *Wind Chill Temperature Chart* and the Iowa Department of Public Health's *Child Care Weather Watch*.
- Provide guidance for parents on appropriate seasonal clothing and footwear that allows children to move freely and play safely.
- Encourage all children to try new noncompetitive activities and provide positive reinforcement when they do.
- Schedule structured physical activity or active play before mealtimes to encourage better meal consumption, better behavior and a more positive mealtime environment. For more information, see *Meal Schedules* in section 5 and *Play Then Eat* in section 10.
- Encourage staff members to model positive behaviors by being physically active with the children and making positive comments about physical activity.
- Offer training opportunities for staff members at least twice a year on strategies for promoting developmentally appropriate structured physical activity. Staff training should be provided by a qualified professional, e.g., physical education teacher or other experts regarding physical education and physical activity for children.
- Limit time in confining equipment (e.g., car seats and strollers) for toddlers to less than 30 minutes while they are awake.

Implementation Strategies for Infants

- Follow the NASPE's *Active Start: A Statement of Physical Activity Guidelines for Children Birth to Age 5* (see appendix G).
- Provide all infants with planned daily physical activity that safely supports their physical development and health, e.g., self-supporting head and neck, rolling, reaching, sitting, kicking, crawling, standing and walking.

- Engage infants in physical activity when they are awake and interested.
- Provide daily outdoor time for all infants, as appropriate, based on weather and air quality. Dress infants appropriately for the weather. Place infants on a blanket at least 5 by 7 feet or other safe, dry surface for free movement and exploration.
- Develop guidelines for staff members regarding appropriate temperatures and length of time for outdoor play. For more information, see the National Weather Service's *Wind Chill Temperature Chart* and the Iowa Department of Public Health's *Child Care Weather Watch*.
- From birth, provide tummy time for all infants at least two to three times each day while the infant is awake and supervised by an adult. Start with a short period of time (three to five minutes) and increase the amount of time as the baby begins to enjoy this position.
- Limit time in confining equipment for infants (e.g., swings, bouncy chairs and exercise saucers) to less than 30 minutes while they are awake.



Resources

Active Start: A Statement of Physical Activity Guidelines for Children Birth to Age 5, National Association for Sport and Physical Education, 2009: <http://www.aahperd.org/naspe/standards/nationalGuidelines/ActiveStart.cfm>

Back to Sleep, Tummy to Play, Healthy Child Care America, American Academy of Pediatrics, 2008: <http://www.healthychildcare.org/pdf/SIDStummytime.pdf>

Best Practices for Physical Activity: A Guide to Help Children Grow Up Healthy, Nemours Foundation, 2009: <http://www.nemours.org>

Child Care Weather Watch, Iowa Department of Public Health, 2009: <http://www.idph.state.ia.us/hcci/common/pdf/weatherwatch.pdf>.

Model Physical Activity Standards for Child-Care Providers (for Infants through Preschool-Age Children), National Policy & Legal Analysis Network to Prevent Childhood Obesity (NPLAN), 2009: <http://nplanonline.org/products/model-physical-activity-standards-child-care-providers-infant-through-preschool-age-childre>

Physical Activity for Children: A Statement of Guidelines for Children Ages 5-12, 2nd Edition, National Association for Sport and Physical Education, 2004: <http://www.aahperd.org/naspe/standards/nationalGuidelines/PA-Children-5-12.cfm>

Physical Activity for Preschoolers (MyPyramid), USDA: <http://www.mypyramid.gov/Preschoolers/PhysicalActivity/index.html>

Wind Chill Temperature Chart, National Weather Service, 2001: <http://www.nws.noaa.gov/om/windchill/>

For additional resources, see *Guidelines and Standards, Physical Activity Policies and Programs to Promote Physical Activity* in section 10. Resources to promote physical activity in afterschool programs can be found in *Physical Activity Before and After School* in section 10.

PLAY SPACE AND EQUIPMENT

Policy Recommendations for Children

- ▶ The child care program provides children with a physical environment that promotes active play. Safe, sufficient and developmentally appropriate indoor and outdoor space and equipment encourage all children to be physically active, including children with disabilities. Sufficient equipment is provided to avoid competition and long waits.
 - A variety of fixed play equipment is available that accommodates the needs of all children, such as climbing structures, swings, sandboxes, tunnels and slides.
 - A large variety of indoor and outdoor portable play equipment is available for children to use at the same time, such as balls, hula hoops, tumbling mats, jump ropes, tricycles and buckets.
 - Outdoor play space includes open grassy areas and a path for wheeled toys.
 - Indoor play areas are safe and provide adequate space for each child.
- ▶ Staff members regularly inspect equipment and play areas to ensure they are safe.
- ▶ Staff members always supervise children on playground equipment and during active play and other physical activities.
- ▶ The physical environment does not promote sedentary activity. Sedentary equipment such as televisions, videos and electronic games are not prominently displayed.



SMART STEPS

Provide safe, sufficient and developmentally appropriate indoor and outdoor play space and equipment.

Policy Recommendations for Infants

- ▶ The child care program provides infants with a safe and engaging physical environment that encourages movement and exploration.
- ▶ The child care program provides safe, sufficient and developmentally appropriate equipment for infants, such as rattles, balls, and simple cause and effect toys.
- ▶ Staff members regularly inspect infant equipment and play areas to ensure they are safe.
- ▶ Staff members always supervise infants in their play environments.

Rationale

The physical space and equipment provided in the child care environment greatly affects children's physical activity levels and development of movement skills. Sufficient and appropriate space and equipment increases the likelihood that children are physically active.^{69, 70} Stimulating environments that engage children in appropriate movement experiences help develop children's movement skills.²⁸

Indoor and outdoor play areas should provide sufficient safe and developmentally appropriate space and equipment to encourage active play. The NASPE indicates that each toddler and preschooler needs at least 35 square feet of indoor space for structured movement and activities.²⁸ More space is needed for advanced motor skills such as running, skipping and kicking. The NASPE recommends a minimum of 75 square feet

of accessible outside play space for each child.²⁸ State licensing regulations for licensed child care centers require at least 75 square feet of outdoor space per child for the number of children using the space at any one time.³⁷

An appropriate physical activity environment provides important opportunities to foster an infant's developing movement skills. Child care programs should provide safe and developmentally appropriate space and equipment that facilitates infants' movement and exploration. Infants require a minimum of 35 square feet, such as a 5-by-7-foot rug or blanket, for playing, rolling, crawling and other large muscle activities.²⁸ Infants who are confined to a small play space or confining equipment are more likely to have delayed motor skill development.²⁸

Implementation Strategies for Children

- Provide safe and developmentally appropriate play environments and equipment, such as climbing structures and portable play equipment, e.g., balls, riding toys and hula hoops.
- Provide sufficient outdoor space for safe active play (at least 75 square feet per child).
- Provide sufficient indoor space for safe active play (at least 35 square feet per child).
- Provide adaptive equipment for children with disabilities and access to safe play environments with nondisabled peers.
- Develop a schedule for regular inspections of equipment and play areas.
- Store televisions, videos, electronic games and other sedentary equipment out of sight.

Implementation Strategies for Infants

- Provide large open safe play surfaces at least 5 by 7 feet and appropriate equipment in every infant room to promote free movement and physical activity.
- Engage young infants with rattles, mobiles, mirrors and other appropriate objects. Engage babies' senses with toys that make music or noise or flash lights.
- Provide safe and appropriate infant play objects of different textures, sizes, colors, shapes and weights, such as rattles, balls and stuffed animals. For older infants, add simple cause and effect toys (e.g., toys that respond with sound or motion after infant manipulation) and solid furniture to use for pulling up.
- Interact with infants to encourage safe and positive movement and exploration.
- Provide adaptive equipment for infants with disabilities and access to safe play environments with nondisabled peers.
- Develop a schedule for regular inspections of equipment and play areas.
- Store televisions, videos, electronic games and other sedentary equipment out of sight.

Resources

Active Start: A Statement of Physical Activity Guidelines for Children Birth to Age 5, National Association for Sport and Physical Education, 2009: <http://www.aahperd.org/naspe/standards/nationalGuidelines/ActiveStart.cfm>

Best Practices for Physical Activity: A Guide to Help Children Grow Up Healthy, Nemours Foundation, 2009:
<http://www.nemours.org>

Best Practice Guidelines for Physical Activity at Child Care, Pediatrics, 124(6), 2009:
<http://pediatrics.aappublications.org/cgi/reprint/124/6/1650>

Caring for Our Children: National Health and Safety Performance Standards: Guidelines for Out-of-Home Child Care, 2nd Edition, American Academy of Pediatrics, American Public Health Association and National Resource Center for Health and Safety in Child Care and Early Education, 2002:
<http://nrc.uchsc.edu/CFOC/>

NAP SACC Best Practice Recommendations for Child Care Facilities, Center for Health Promotion and Disease Prevention, The University of North Carolina at Chapel Hill, 2007:
<http://www.whrv.org/NR/rdonlyres/4C89B06B-4ED9-4315-99B3-4B0D7A3F0E0C/10128/NAPSACCBestPracticeRecommendationsforChildCareFaci.pdf>

For additional resources, see *Guidelines and Standards* and *Physical Activity Policies* in section 10.

STANDARDS-BASED PHYSICAL EDUCATION

Policy Recommendations

- ▶ The child care program provides standards-based physical education for children at least once per week, using national or state-developed standards, such as the CSDE's *Healthy and Balanced Living Curriculum Framework*, the CSDE's *Connecticut Preschool Assessment Framework* and guidelines from the National Association for Sport and Physical Education and the U.S. Department of Health and Human Services.
- ▶ Physical education complements health education by reinforcing the knowledge and self-management skills needed to maintain a physically active lifestyle and to reduce time spent on sedentary activities, such as watching television and playing video games.
- ▶ Children with disabilities have appropriate physical education opportunities and participate with nondisabled peers.



SMART STEPS

Provide physical education for children through a standardized curriculum at least once per week.

Rationale

Physical education plays a critical role in helping children learn necessary skills and develop confidence in their physical abilities. Child care programs can help children become more physically active and fit by providing a wide range of developmentally appropriate and safe opportunities to be active. Standards-based physical education helps child care programs provide children with developmentally appropriate learning experiences. Appropriate practices guided by competent, knowledgeable and supportive adults influence the extent to which children choose to engage in activities, enjoy physical activity and develop healthy lifestyles.

Implementation Strategies

- Provide regular physical activity opportunities for children based on recognized standards, e.g., the CSDE's *Healthy and Balanced Living Curriculum Framework* and *Connecticut Preschool Curriculum Framework*.

- Provide physical education for children through a standardized curriculum at least once per week.
- Provide appropriate accommodations for children with disabilities based on the curriculum standards for all children.
- Plan opportunities for children to engage in a wide variety of gross-motor activities that are child selected and teacher initiated.
- Provide physical education for children through a standardized curriculum at least once per week.
- Provide education about active play in language families can understand through a variety of methods, such as workshops, family events, newsletters and the program's Web site. For more information, see the *Stay Active Physical Activity Tips* (birth to 12 months, ages 1 to 2, ages 3 to 5 and ages 6 and older) in The Nemours Foundation's *Best Practices for Physical Activity: A Guide to Help Children Grow Up Healthy*.
- Provide positive messages about safe and developmentally appropriate physical activity throughout the child care environment, e.g., posters, pictures and books about physical activity.

Resources

A Guide to Early Childhood Program Development, CSDE, 2007:

http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Early/early_childhood_guide.pdf

Best Practices for Physical Activity: A Guide to Help Children Grow Up Healthy, The Nemours Foundation, 2009:

<http://www.nemours.org>

Connecticut Preschool Assessment Framework, CSDE, 2008:

http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Early/Preschool_Assessment_Framework.pdf

Connecticut Preschool Curriculum Framework, CSDE, 2006:

http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Early/Preschool_framework.pdf

Healthy and Balanced Living Curriculum Framework, CSDE, 2006:

<http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Student/Healthy&BalancedLiving.pdf>

For additional resources, see *Guidelines and Standards, Programs to Promote Physical Activity* and *Evaluating Physical Education* in section 10.

CONNECTING WITH PLANNED LEARNING EXPERIENCES

Policy Recommendations

- ▶ Opportunities for physical activity and active play are incorporated into planned learning experiences outside physical education, such as language and literacy development, mathematics, science and music.
- ▶ Teachers provide short physical activity breaks between learning activities, as appropriate.
- ▶ Physical activity is integrated into daily routines whenever possible, such as transition time.
- ▶ As age appropriate, physical activity is used as reinforcement, reward and celebration for group achievement.
- ▶ Afterschool programs integrate physical activity throughout the learning environment.

Rationale

Children who are physically active learn better. Daily classroom physical activity breaks improve children's on-task behavior.^{73,74} Children's fitness levels are correlated with academic achievement, including improved math, reading and writing scores.¹²⁻¹⁸

For children to receive the recommended amount of daily physical activity and to fully embrace regular physical activity as a personal behavior, ongoing opportunities for daily physical activity must be provided. Child care programs can easily incorporate physical activity into planned learning activities and routines or as an energizing break.

Implementation Strategies

- Provide fun, engaging physical activity in planned daily learning experiences for all content areas.
- As age appropriate, use physical activity to reinforce, reward and celebrate group achievements, positive behavior and completion of tasks.
- Ensure that children are not excluded from physical activity if they do not achieve tasks or complete assignments. For more information, see *Physical Activity and Punishment* in this section.
- Establish routines for safely managing physical activity and behavior in classroom spaces.
- Provide short physical activity breaks between learning activities to invigorate children and eliminate long periods of sitting.
- Incorporate physical activity into transition time.
- Provide staff members with resources on integrating physical activity throughout the curriculum.
- Train staff members on the use of adaptive strategies and equipment in the classroom environment for children with disabilities.



Resources

ABC for Fitness (Activity Bursts in the Classroom), Yale University School of Medicine, 2008:

<http://www.davidkatzmd.com/abcforfitness.aspx>

Active Academics: <http://www.activeacademics.org/>

Energizers, North Carolina Department of Instruction: <http://www.ncpe4me.com/energizers.html>

I am Moving, I am Learning — A Proactive Approach for Addressing Childhood Obesity in Head Start Children, U.S. Department of Health and Human Services, Office of Head Start: <http://eclkc.ohs.acf.hhs.gov/hslc/ecdh/Health/Nutrition/Nutrition%20Program%20Staff/IMIL/IamMovingIam.htm>

Mind and Body: Activities for the Elementary Classroom, Montana Office of Public Instruction: <http://www.schoolnutritionandfitness.com/data/pdf/TeacherPDFs/MindBody.pdf>

For resources on incorporating physical activity into afterschool programs, see *Resources* under *Connecting with Planned Learning Experiences* in section 6. For more information, see *Classroom-Based Physical Activity* in section 10.

SCREEN TIME

Policy Recommendations

- ▶ In accordance with the American Academy of Pediatrics recommendations, the child care program does not permit screen time (e.g., television, movies, video games and computers) for infants and children younger than 2.
- ▶ For children ages 2 and older, screen time is limited to less than one hour per day and consists only of quality educational activities that are connected to learning goals and standards or programs that actively engage child movement.
- ▶ The child care program does not allow screen time during meals or snacks.



SMART STEPS

No screen time for infants and children younger than 2. Limit daily screen time to less than one hour for ages 2 and older.

Rationale

The AAP recommends no screen time for children younger than 2 and less than two hours per day for children ages 2 and older.^{75, 76} Since most children get additional screen time at home, limiting screen time in child care to less than one hour will help meet the AAP recommendation.

While most children ages 3 to 6 meet the AAP guidelines, 70 percent of children ages 2 and younger do not.⁷⁷ Furthermore, children's screen time and engagement in other sedentary activities increase as children get older. A recent study from the Kaiser Family Foundation found that children ages 8 to 18 devote an average of seven hours and 38 minutes to using recreational entertainment media each day (i.e., watching television and movies; playing video games; listening to music; using computers; and reading newspapers, magazines and books), not including computer use or reading for school work.⁷⁸

Before age 3, television viewing can harm children's cognitive development.⁷⁹ Research shows that for children ages 8 to 16 months, every hour of viewing baby DVDs or videos was associated with six to eight fewer words learned compared to those who did not watch.⁸⁰ The AAP discourages television viewing for children younger than 2 and encourages interactive activities that promote brain development, such as talking, singing, playing and reading together.⁷⁶ Because children watch television before and after child care, limiting screen time in child care will help meet the AAP recommendation.



Screen time increases children's sedentary activity. Extensive screen time is associated with childhood obesity, poor academic performance and developmental delays.⁷⁴ Studies indicate that television viewing of more than two hours per day contributes to greater rates of obesity in preschoolers and school-age children.⁸¹⁻⁸³ For each one hour increment of television viewing, 3-year-olds consumed more sugar-sweetened beverages, fast food and calories, and less fruit, vegetables, calcium and fiber.⁸⁴ Research has also shown links between extensive screen time and violent and aggressive behavior, substance abuse, sexual activity and poor body image.⁷⁷ Reducing screen time is important in providing an environment that encourages children to develop lifelong healthy habits.



Screen time may be even more prevalent in family day care homes. A recent study indicates that preschool children in home-based child care programs are exposed to significantly more television on an average day (2.4 hours) than are children in center-based programs (0.4 hours).⁸⁵ Toddlers in family day care homes watched 1.6 hours of television while those in centers watched 0.1 hours.

Implementation Strategies

- Eliminate screen time for children younger than 2.
- Limit screen time to less than one hour per day for children ages 2 and older. Ensure that screen time is used only for quality educational activities that are connected to learning goals and standards or programs that actively engage child movement.
- Do not use screen time to reward children.
- Require parental permission for any screen time.
- Educate families in language they can understand about the importance of limiting screen time for children at home.

Resources

Center on Media and Children's Health, Children's Hospital Boston, Harvard Medical School and Harvard School of Public Health: <http://www.cmch.tv/>

Help Children Reduce Screen Time, U.S. Department of Health and Human Services: http://www.nhlbi.nih.gov/health/public/heart/obesity/wecan/downloads/tip_screen_time.pdf

How Much Inactive Time Is Too Much?, MyPyramid for Preschoolers, USDA: <http://www.mypyramid.gov/preschoolers/PhysicalActivity/inactivetime.html>

Reduce Screen Time Tools and Resources, U.S. Department of Health and Human Services: <http://www.nhlbi.nih.gov/health/public/heart/obesity/wecan/tools-resources/tools-reduce-screen-time.htm>

For more information, see *Reducing Screen Time* in section 10.

PHYSICAL ACTIVITY AND PUNISHMENT

Policy Recommendations

- ▶ Staff members do not withhold opportunities for physical activity (e.g., not being permitted to play with the rest of the class or being kept from play time), except when a child's behavior is dangerous to himself or others.
- ▶ Staff members never use physical activity or exercise as punishment, e.g., doing push-ups or running laps.
- ▶ Play time or other opportunities for physical activity are never withheld as a measure to enforce the completion of learning activities or academic work.
- ▶ The child care program uses appropriate alternate strategies as consequences for negative or undesirable behaviors.



SMART STEPS

Teach staff members educationally sound strategies for positive behavior management.

Rationale

The NASPE emphasizes that administering or withholding physical activity as punishment is inappropriate and constitutes an unsound educational practice.⁸⁶ Children need to encounter positive physical activity experiences to become active adults. One of the prime goals of opportunities to engage in physical activity is to provide children with positive experiences that will motivate them to pursue and develop active lifestyles. The practice of using physical activity as punishment develops children's attitudes that are contrary to this goal. Teachers do not punish children with reading and then expect them to develop a love of reading. Neither should teachers punish with exercise and expect children to develop a love of physical activity. To promote and support children's enjoyment of physical activity, child care programs must ensure that opportunities for active play are never withheld and exercise is never used as punishment.

Implementation Strategies

- Prohibit staff members from restricting active play time as a consequence for misbehavior (except when a child's behavior is dangerous to himself or others) or using physical activity as punishment.
- Develop purposeful, educationally sound strategies that provide teachers and other program personnel with appropriate actions and measures that are consistent with the child care program's philosophy to positively reinforce behaviors and messages while discouraging undesirable behaviors.
- Provide training for staff members on positive behavior management for children and implementation of age-appropriate physical activity.
- Educate families in language they can understand about the importance of daily physical activity and the negative consequences of using physical activity as punishment or withholding physical activity. For more information, see *Engaging Families* in section 8.

Resources

Center on the Social and Emotional Foundations for Early Learning, Vanderbilt University:

<http://www.vanderbilt.edu/csefel/>

Developmentally Appropriate Practice in Early Childhood Programs Serving Children from Birth through Age 8,

NAEYC, 2009: <http://www.naeyc.org/store/node/162>

Physical Activity Used as Punishment and/or Behavior Management (NASPE Position Statement), National Association for Sport and Physical Education, 2009:

<http://www.aahperd.org/naspe/standards/upload/Physical-Activity-as-Punishment-to-Board-12-10.pdf>

For additional resources, see *Behavior Management* in section 10.