

## Study shows program to combat childhood obesity gets kids in daycare moving

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Research led by Dr. Melinda Sothorn, Professor and Director of Behavioral & Community Health at the LSU Health Sciences Center New Orleans School of Public Health, reports that a turn-key intervention program significantly increased physical activity levels among children in daycare. The treatment groups also achieved 91% of the physical activity goals in the improvement plans submitted by the directors of the daycare centers where the program was implemented. The results are published in the August 2014 issue of the journal, *Childhood Obesity*.

"Physical inactivity has been recognized as a major contributing factor to the obesity epidemic, and [research](#) has shown that children in daycare are generally inactive and not meeting [physical activity](#) recommendations," notes Dr. Sothorn. "A goal is to intervene when the children are young, to prevent obesity and build the habits that will promote lifelong health."

The Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC) program was developed to be used in preschool settings as a toolkit to promote healthy weight and help prevent childhood obesity. It was designed to facilitate gradual change and promote continuous quality improvement, and it is one of the few interventions that targets both physical activity and nutrition.

"From a behavioral standpoint, it is far easier to accept and adapt to smaller changes over time than wholesale changes," says Dr. Sothorn.

Although this program has generated interest, there had not been objective, well-designed scientific studies to evaluate and measure outcomes that would support policy decisions and implementation recommendations. Dr. Sothorn's research team designed this study to determine objectively whether the NAP SACC program would improve physical activity levels in randomly selected licensed Louisiana daycare centers.

This study compared the [physical activity levels](#) of children in 26 daycare centers, randomized into treatment and control groups. Of the 209 three–five-year-old children participating, 104 were male and 105 female. The children wore wireless activity monitors that captured data from 8:30 a.m. until 3:00 p.m. for two days before and immediately after a six-month intervention taking identical measurements. Pre-intervention results revealed that the children in both groups combined were sedentary 89.9% of the time.

Dieticians with physical activity training experience implemented the NAP SACC program by conducting workshops for the staff of each treatment facility with information on overweight, nutrition, physical activity and growing, healthy kids. They maintained regular contact with the treatment facility staff and provided support. They also distributed educational information to the parents/guardians focusing on physical activity and nutrition recommendations at home. Each treatment facility devised an improvement plan.

Total physical activity in the treatment group increased by 21.9% compared to 4.4% in the [control group](#). Vigorous physical activity rose by 50% in the treatment group and 3.8% in the control group. Moderate physical activity in the treatment group improved by 32.7% compared to 0% in the control group. The control group showed no significant changes in physical activity and remained relatively unchanged.

"This study demonstrated that the Nutrition and Physical Activity Self-Assessment for Child Care program is a viable tool for increasing physical activity in children in day care," concludes Dr. Sothern. "Turn-key programs like this are beneficial to many daycare centers that do not have the resources to design, identify and implement the types of improvements that are necessary to address childhood obesity."

**More information:** The NAP SACC program is available at [www.centertrt.org/?p=intervention&id=1091](http://www.centertrt.org/?p=intervention&id=1091)

Provided by Louisiana State University

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