



Promoting Physical Activity in Early Care and Education

February 23, 2015

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Vision

Every community is an active, safe, and healthy place, where all people have equal opportunity to be physically active.

Early Care & Education Research Community

Working Group Co-Chairs:

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- Kathryn Henderson, PhD, Independent Consultant

Group 1: How diet and physical activity affect child development

Co-leaders: Temitope Erinosh, PhD, and Pooja Tandon, MD

Group 2: Monitoring and informing the regulatory and policy environment

Co-leaders: Natasha Frost, JD, and Geri Henchy, MPH, RD

Group 3: How to better use research to change practice

Co-leaders: Angela Odoms-Young, PhD, MS, and Lorrene Ritchie, PhD, RD

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I have no financial disclosures.

Healthy Eating Research

Building Evidence to
Prevent Childhood Obesity

A Robert Wood Johnson Foundation program

FOCUS AREAS

Beverages

Child Care & Preschool

Food Access

Food & Beverage Marketing

Menu Labeling

Message Framing

Nutrition & Agriculture Policy

Pricing & Economics

School & After School



73%

of kids under 5 participate in
early childhood education
programs

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CHILD CARE & PRESCHOOL



The majority of U.S. children are placed in some form of non-parental care during their preschool years, in arrangements such as child-care centers and family child-care homes, preschools, and Head Start programs. These early care and education settings provide numerous opportunities to promote healthy eating at a young age, when dietary habits are forming. Compared to research regarding schools, there has been limited research to date about federal, state, and local policies and practices that affect food choices or offerings in these settings.

GET STARTED

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How is the child care setting regulated?



- ✓ **Yellow—Definitions of Child Care Arrangements**
- ✓ **Orange—Licensing Agency Authority**
- ✓ **Red—Exemptions from Licensing**
- ✓ **Purple—Environmental Contaminants**
- ✓ **Green—Action/Behavior**
- ✓ **True Blue—Physical Activity**
- ✓ **Gray—Screen Time**
- ✓ **Pink—Breastfeeding**
- ✓ **Burgundy—Smoking/Tobacco Use**
- ✓ **Pale Yellow—Playground Safety**
- ✓ **Fuchsia—Overlapping Information**

- (e) Toilets and sinks shall be at heights accessible to the children using them or shall be equipped with safe and sturdy platforms or steps.
- (f) Privacy shall be provided for toilets used by preschool and school age children.
- (g) Floor and wall surfaces in the toilet area shall have smooth, washable surfaces. Carpeting is not permitted in the toilet area.
- (h) Toilets, toilet seat adapters, sinks and restrooms shall be cleaned at least daily and shall be in good repair.
 - (i) Liquid or granular soap and disposable towels shall be provided at each sink.
 - (j) Children shall not be left unattended in a bathtub or shower.
 - (k) Easily cleanable receptacles shall be provided for waste material. Toilet rooms used by women shall be provided with at least one covered waste receptacle.
 - (l) Bathroom facilities shall be completely enclosed.

B. Outdoor space

- (1) The director shall provide at least seventy-five (75) square feet of outdoor play space per child. Where outdoor space is insufficient at the center, the director and/or staff may take the children outdoors in shifts or utilize parks or other outdoor play areas which meet safety requirements and which are easily accessible.
- (2) The outdoor space shall be free from hazards and litter.
- (3) Outdoor walkways shall be free from debris, leaves, ice, snow, and obstruction.
- (4) Children shall be restricted from unsafe areas and conditions such as traffic, parking areas, ditches, and steep slopes by a fence or natural barrier that is at least four feet high.

C. Furniture, toys, and recreational equipment shall:

- (1) Be clean and free from hazards such as broken or loose parts, rust or peeling paint, pinch or crush points, unstable bases, sharp edges, exposed bolts, and openings that could cause head or limb entrapment;
- (2) Meet the standards of the US Consumer Products Safety Commission (CPSC), if applicable. Recalled products listed by the CPSC shall not be accessible to children;
- (3) Be developmentally and size appropriate, accommodating the maximum number of children involved in an activity at any one time;
- (4) The sides of playpens shall remain latched as long as a child is using the playpen. If playpens are used they shall have waterproof, washable, comfortable pads;
- (5) All arts and crafts and play materials shall be nontoxic;
- (6) Outdoor recreational equipment shall be made of durable, non-rusting, non-poisonous materials, and shall be sturdy;
- (7) Stationary outdoor equipment shall be firmly anchored and shall not be placed on a concrete or asphalt surface. Cushioning material such as mats, wood chips or sand shall be used under climbers, slides, swings, and large pieces of equipment;
- (8) Swings shall be located to minimize accidents and shall have soft and flexible seats;
- (9) Cushioning material shall extend at least six (6) feet beyond the equipment and swings;
- (10) Slides shall have secure guards along both sides of the ladder and placed in a shaded area;
- (11) Outdoor metal equipment shall be located in shaded areas or otherwise protected from the sun;
- (12) Outdoor equipment shall be arranged so that children can be seen at all times;

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Student Research Assistant Openings at the Public Health Law Center

Are you interested in working at the Public Health Law Center? Our nonprofit group of attorneys and public health professionals work on many public health law topics in the headlines today, including issues related to tobacco control, obesity prevention, and workplace wellness. Our projects can involve intriguing constitutional issues, regulatory concerns, state and local policymaking, and social justice issues.



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Healthy Eating

Obesity is one of the most serious health threats facing our nation. According to the [U.S. Centers for Disease Control and Prevention](#), more than two-thirds of American adults and one-third of American youth are now obese or overweight. Obesity-related conditions make up several of the leading causes of death in the U.S. High rates of obesity are largely responsible for the United States' declining health outcomes and rapidly rising healthcare costs. Lack of availability and affordability of healthy food contribute to the obesity epidemic. Laws and policies that promote healthy food and limit access to unhealthy food are critical tools in addressing the obesity epidemic.

As one example, at the federal level, in 2012, the U.S. Department of Agriculture updated the minimum nutritional standards for the national school breakfast and lunch programs to bring them in line with current nutritional science about what makes up a healthy diet for kids across different age groups. Additionally, the federal Affordable Care Act passed in 2010 includes provisions that require large chains of retail food establishments and vending machine operators to disclose calorie content of items on menus and in machines and provide other important nutritional information, so that consumers can know what's in the food they're getting before they pay for it. This federal law also established minimum protections for working mothers who are breastfeeding, providing support for parents trying to ensure that their children get the best healthy eating start in life that they can. Finally, public health advocates are rapidly learning how federal agricultural policy impacts healthy eating efforts from the local to the national level.

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Child Care

As the rate of childhood obesity has [more than tripled in the United States](#) over the past 30 years, many obesity prevention efforts have focused on school-age children and the school environment. Child care settings also play a [fundamental role](#) in establishing healthy eating and physical activity habits. [Over half of all children](#) between the ages of zero and five regularly spend significant time in non-parental child care. There is untapped potential for government to take meaningful action to prevent childhood obesity through the implementation of nutrition, physical activity, screen time standards and other policies in child care settings.

Every state regulates the child care setting in some manner. These state regulations differ between states, however, depending on the type of child care facility and provider. The Public Health Law Center has developed a 50-state analysis of child care licensing laws, including state statutes and licensing regulations. We have [highlighted](#) the laws in each state for easy review by advocates and policy makers. Please note: Many states have updated their statutes and regulations since our 2011 dataset collection. This project was funded by Healthy Eating Research grant #80209 from the Robert Wood Johnson Foundation.

[Click here to find your state](#)

Regulatory standards play a critical role in establishing norms in child care settings. These standards also establish important baseline protections for the health and safety of children receiving non-parental care. Recent studies have assessed the [strength of state child care regulatory schemes](#), finding that state regulations generally do not provide adequate nutrition or physical activity standards. Local governments represent untapped potential for improving child care nutrition and physical activity standards because in many cases, they could act where states have failed to do so. For more information on local authority to relate the child care section, [click here](#).

Minnesota Child Care Toolkit



Child care providers are in a unique position to address the childhood obesity epidemic and tobacco-related health hazards. The Public Health Law Center has developed a series of resources designed to inform and support

SUBTOPICS

- [Resources](#)

FEATURED PUBLICATIONS



[Does it Work? Evaluating Local Early Care and Education Regulatory Change](#)

Date: Mon, 05/07/2012

On May 8, 2012, Public Health Law Center Staff Attorney Natasha Frost joined other child care experts to present at the [Weight of the Nation](#) conference. Other presenters included Dr. Dianne Ward, Professor of Nutrition in the Gillings School of Global Public Health; Dr. Laura Kettle Khan, Senior Scientist in the Division of Nutrition, Physical Activity, and Obesity at the Centers for Disease Control; and Dr.



[Healthy Kids, Healthy Child Care](#)

Date: Tue, 06/19/2012
Time: 12:00PM

This webinar outlines intervention and policy strategies to promote healthy eating and physical activity in the child care setting. Presenters cover the current state of the research, including opportunities for improvement and research gaps. In addition, presenters provide an analysis of the child care legal landscape, including statutes, regulations and cases. Finally, presenters will cover existing intervention-based resources and promising interventions being used around the country.



[Nutrition, Active Play & Screen Time Child Care Laws in Kansas](#)

Child care providers are in a unique position to address the childhood obesity epidemic and tobacco-related health hazards. The Public Health Law Center has developed a series of resources designed to inform and

Healthy Child Care

Children who are obese are more likely to be obese as adults, and are at risk for developing serious, life-shortening chronic diseases, including cardiovascular disease, type-2 diabetes, and several types of cancer. The earlier children can learn healthy eating and physical activity habits, the better for their long-term health. Because most infants and young children regularly spend much of their time in non-parental child care, child care settings provide a unique and important opportunity to address the childhood obesity epidemic. Child care providers are well positioned to intervene and help decrease the risk of childhood obesity by cultivating environments that promote healthy eating and positive exercise habits at young ages.

Every state regulates the child care setting in some manner, although the depth and breadth of the regulations vary by state and by the type of care. Most states require a license for child care centers and family child care homes, but afterschool programs and informal care providers (such as family, friends and neighbors) are often exempted from these regulations. State regulations also establish baseline protections for the health and safety of children receiving non-parental care, and are important in establishing norms.

The Public Health Law Center has developed a 50-state analysis of child care licensing laws, including state statutes and licensing regulations. We have [highlighted](#) the laws in each state for easy review by advocates and policy makers. Please note: Many states have updated their statutes and regulations since our 2011 dataset collection. This project was funded by Healthy Eating Research grant #89299 from the Robert Wood Johnson Foundation. For more information on local authority to regulate the child care setting, [click here](#).

Click on your state below to find out more.



<http://www.publichealthlawcenter.org/resources/healthy-child-care>

Missouri Child Care Laws

Child care providers are important partners in helping children learn how to eat healthy and be physically active. California requires licensure of certain child care providers, and the licensing requirements include regulations about providing nutritious food and active play.

The Public Health Law Center has reviewed the child care licensing statutes and regulations to identify the how the setting is defined, how it is regulated, and who is exempt from regulation. The review also identifies the public health requirements for child care providers (nutrition, active play, screen-time limitations, etc.).

With funding from the YMCA of the USA, the Public Health Law Center created a chart summarizing the highlighted information for Missouri.

What we found for Missouri: Attached are the highlighted regulations for child care facilities in Missouri.

Missouri Statutes (current through 6/10/14)

[Child Day Care Facilities, Smoking or Tobacco Use when Children Are Present, Prohibited, Penalty \(Missouri Statutes, Title XII, Chapter 191, Sec. 191.776\)](#)

[Licensing of Certain Child Care Homes \(Missouri Statutes, Title XII, Chapter 210, Sec. 201.199-201.259\)](#)

Missouri Regulations (current through 5/31/14)

[License – Exempt Child Care Facilities \(Missouri Regulations, Title 19, Division 30, Special Notice, Chapter 60\)](#)

[Licensing Rules for Family Day Care Homes \(Missouri Regulations, Title 19, Division 30, Special Notice, Chapter 61\)](#)

[Licensing Rules for Group Child Care Homes and Child Care Centers \(Missouri Regulations, Title 19, Division 30, Special Notice, Chapter 62\)](#)

[Food Protection; General Sanitation; Lead Program \(Missouri Regulations, Title 19, Division 20, Chapters 1, 3, 8\)](#)

Documents downloaded but not relevant for highlighting project:

Regulations

[Chapters 70, 80-83 \(Missouri Regulations, Title 19, Division 30, Special Notice\)](#)

Please confirm these are the most recent versions of the laws. For more information on our research process, [click here](#).

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FILE HOME INSERT PAGE LAYOUT FORMULAS DATA REVIEW VIEW

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Calibri 10 A A Wrap Text General Normal Bad Good Neutral

Insert Delete Format AutoSum Fill Clear Sort & Find & Filter Select

A	B	C	D	E
Category	Relevant Statutes	License-Exempt Child Care Facilities	Group Child Care Home & Child Care Center Regulation	Family Day Care Home Regulations
Quality and Quantity of Food			Mo. Code. Regs. Ann. tit. 19, § 30-62.202 <i>Nutrition and Food Service</i> (1) General Requirements. (F) If the facility is licensed exclusively for school-age care, the child may be permitted to bring sack meals. The provider shall supply one (1) serving of fluid milk with each sack meal and shall supply nutritious snacks.	Mo. Code. Regs. Ann. tit. 19, § 30-61.190 <i>Nutrition and Food Service</i> (1) General Requirements (F) If the home is licensed exclusively for school-age care, the child may be permitted to bring sack meals. The provider shall supply one (1) serving of fluid milk with each sack meal and shall supply nutritious snacks.
Quality and Quantity of Food			Mo. Code. Regs. Ann. tit. 19, § 30-62.202 <i>Nutrition and Food Service</i> (1) General Requirements. (H) The water and milk supply, and the method of dispensing, shall be approved by local or state health authorities, or both. Powdered milk shall not be used except for cooking purposes. Milk substitutes shall not be used for drinking or cooking.	Mo. Code. Regs. Ann. tit. 19, § 30-61.190 <i>Nutrition and Food Service</i> (1) General Requirements (H) The water and milk supply shall be approved by local and state health authorities, or both. Powdered milk shall not be used except for cooking purposes. Milk substitutes shall not be used for drinking or cooking.
Water			Mo. Code. Regs. Ann. tit. 19, § 30-62.202 <i>Nutrition and Food Service</i> (1) General Requirements. (L) Drinking water shall be located conveniently near playrooms and the playground so children may be free to drink as they wish. Water fountains or individual cups shall be used.	Mo. Code. Regs. Ann. tit. 19, § 30-61.190 <i>Nutrition and Food Service</i> (1) General Requirements (L) Drinking water shall be conveniently located near playrooms so children may be free to drink as they wish. Water fountains or individual cups shall be used.
Prohibited Food		Mo. Code. Regs. Ann. tit. 19, § 30-60.090 <i>Sanitation Requirements</i> (9) Providers shall observe the following food protection practices: (B) Home-canned foods shall not be used;		
Food Service			Mo. Code. Regs. Ann. tit. 19, § 30-62.202 <i>Nutrition and Food Service</i> (1) General Requirements. (J) Mealtime atmosphere shall be enjoyable and relaxed. No child shall be forced to eat, but shall be encouraged to set his/her own pace according to personal preferences.	Mo. Code. Regs. Ann. tit. 19, § 30-61.190 <i>Nutrition and Food Service</i> (1) General Requirements (J) Mealtime atmosphere shall be enjoyable and relaxed. No child shall be forced to eat, but shall be encouraged to set his/her own pace according to personal preferences.
Food Service			Mo. Code. Regs. Ann. tit. 19, § 30-62.202 <i>Nutrition and Food Service</i> (2) Nutrition and Food Service for Infants Up to Twelve (12) Months of Age. (D) Until infants can hold a bottle comfortably, they shall be held by a caregiver during bottle feeding. Bottles shall not be propped.	Mo. Code. Regs. Ann. tit. 19, § 30-61.190 <i>Nutrition and Food Service</i> (2) Nutrition and Food Service for Infants Up to Twelve (12) Months of Age. (C) Until infants can hold a bottle comfortably, they shall be held by a caregiver during bottle feeding. Bottles shall not be propped.

Definitions Licensing Exemptions Environmental Contamination Nutrition Space & Equip-Physical Activity Screen Time Breast Feeding Tobacco Playground Safety

Takeaways: Physical Activity

Common	Not Common
Space requirements – indoor/outdoor	Weather guidance
Equipment	Defined time requirements
Activity Plans for “Active Play” & “Large Muscle”	Moderate to Vigorous
Toddler Confinement	Training
Discipline	Supervised, Structured Active Play

State	Screen time regulation
FL	Limit electronic media time to no more than 1 to 2 hours per day for children older than 2 years of age.
IN	Caregivers shall not require children to watch or sit in front of a television and shall offer other choices of activities.
NY	Television and other electronic visual media must be turned off when not part of a planned developmentally appropriate program activity. Children must not watch television or other electronic visual media during meals.
NC	ACTIVITIES FOR CHILDREN UNDER TWO YEARS OF AGE. (e) Screen time, including television, videos, video games, and computer usage, is prohibited
TX	May I use TV/video, computer, or video games for activities with children? (a) Activities using TV/video, computer, or video games are prohibited for children under the age of two years. (c) If you use TV/video, computer or video games as an activity for children, you must ensure that they: (3) Do not exceed two hours per day.
WA	Wash. Admin. Code § 170-296A-6675. Screen time-Limitations. The licensee or staff must: (2) Not require children to participate in screen time; (3) Provide alternative activities to screen time; and (4) Place children at least three feet from a television screen.

WV Child Care Centers	WV Family Child Care Facility Licensing	WV Out-of-School-Time Child Care Center	WV Family Child Care Home Registration	WV Informal and Relative Family Child Care Home Registration
No weather statement	7.3.b.4 – Participation in vigorous outdoor play whenever temperatures are above forty (40) degrees Fahrenheit and weather conditions permit	No weather statement	14.1.b.4 Outdoor play time on days when temperatures are forth (40) degrees and above, weather and circumstances permitting.	13.1.d Outdoor play time on days when temperatures are forty (40) degrees and above, weather and circumstances permitting.

The Law's Impact on Child Care Research

- Cross Jurisdictional Analysis
- Cross Setting Analysis
- Licensing versus other policies (Building Code, QRIS)

How to Use 50-state Review

In Research

- Informing Surveys
- Implementation versus Strengthening Regulations

In Education and Advocacy

- Develop talking points
- Identify other jurisdictions

Kansas Child Care Resources

Child care providers are in a unique position to address the childhood obesity epidemic and tobacco-related health hazards. The Public Health Law Center has developed a series of resources designed to inform and support Kansas efforts to cultivate child care settings that promote healthy eating, positive exercise habits, reduced screen time, and support tobacco-free environments.

The Public Health Law Center, Kansas Action for Children and ChildCare Aware of Kansas are creating a series a resources to promote healthy eating in child care settings. Check back throughout 2014 for the most recent list of resources!



[Kansas Child Care: An Overview](#)

This fact sheet outlines how child care is defined and regulated in Kansas. It identifies child care program definitions, who is required to be licensed, how regulations impact child care settings, and how the regulatory process works.



[Kansas Child Care Program Data Map](#)

This Kansas map provides a snapshot of the number of child care facilities operating in Kansas on March 13, 2014, based on information from the NACCRRRAware database. The resource was created by ChildCare Aware of Kansas, Kansas Action for Children and the Public Health Law Center as part of a series funded by the Kansas Health Foundation to increase the availability of healthy foods in Kansas through child care providers.



[Nutrition, Active Play & Screen Time Child Care Laws in Kansas](#)

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[Farm to Child Care Year-Round](#)

The Public Health Law Center has developed a series of resources designed to inform and support efforts to cultivate child care settings that promote healthy eating, active play opportunities, reduced screen time, and tobacco-free environments. This resource identifies Farm to Child Care activities that can be pursued year-round.

In Development

- Crosswalk of key concepts
- Child Care and Out of School Time Policy Brief
 - key mandatory or voluntary policy levers
 - national scope, with relevant examples from states
- State specific policy brief focusing on one key oppc



rier for 28 states



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