State and local decision-makers play an important role in supporting early childcare and education (ECE) standards and practices for obesity prevention. The information in this guide provides recommendations to help state and local public health partners reframe messaging related to evidence-based approaches that will resonate with values of decision-makers. Recommendations are based on a qualitative analysis that included a literature review, key informant interviews, and focus groups conducted by the National Association of Chronic Disease Directors.

Define and reframe obesity as it relates to ECE policy

Focus on both the immediate and long-term health impacts of obesity in children. Not only can obesity have lifetime physical and psychological effects on children, it poses an immediate increased risk for Type 2 diabetes, asthma, and depression. Young
children who are overweight in kindergarten are four times more likely to have obesity in the eighth grade than those not overweight. Childhood obesity is associated strongly with chronic disease in adulthood.

**Discuss appropriate expectations for reductions in obesity-related disease and associated costs, including intermediate measures of success.** Key informants said that legislators and other decision-makers want more substantial results regarding obesity reduction rates than states are currently reporting. Because it is unrealistic to assume that changes to ECE systems and settings will result in significant reductions in obesity rates within a short time period, promote other, more immediate benefits, including improvement in behavior and ability of children to learn.

**Explain that policy and environmental changes are more impactful than individual approaches.** Obesity is influenced by multiple determinants that require intervention and prevention strategies at both individual and environmental levels. Most young children spend time in care outside their home at least once weekly. ECE settings can directly influence what children eat and drink and how active they are, building a foundation for healthy habits. Altering ECE environments may be an effective driver of individual behavior change for both the child and their family. For example, research indicates that children who participate in gardening activities in a childcare setting are more likely to eat the vegetables they have grown and to request them at home.

**Communicate the economic perspective to move healthy eating and active living strategies forward**

**Discuss impact of healthy diet and physical activity to prepare children for future academic success.** Key informants recommended that messengers provide data and/or examples of outcomes such as improved brain development and kindergarten
readiness of young children who are physically active and consume diets with nutritional content appropriate for their age and stage of development. Because children spend a large part of their day in ECE settings, there is a significant opportunity to influence child growth and development by limiting sedentary behavior, encouraging physical activity, and providing healthful food.

Focus on local data and solutions, rather than national statistics or problems

Provide local examples and solutions or examples from similar states when describing how evidence-based approaches in ECE settings will positively affect children’s health and development. Key informants noted that decision-makers are particularly receptive to considering successfully implemented guidelines in the communities they represent when considering state policies that have the potential to positively affect children. Decision-makers prefer stories from people directly impacted by the issue. Use local stories to describe how successful local ECE guidelines have benefitted both the providers and the children in their care and can serve as models for state-level policies. Share stories about successful evidence-based early ECE policies in geographically and demographically similar states that he/she can then promote.

Use constituent support or stories. The literature review identified constituent needs or opinions as the most influential factor for legislators when determining health policy priorities. Key informant interviewees also noted that when legislators and other decision-makers are considering health policy, personal interest, and strong constituent voices are influential. Therefore, identify constituents who can effectively support the evidence and highlight childcare providers who observed improved behavior of children in their care following implementation of healthy eating and active living guidelines. Share stories about successful evidence-based local ECE policies in childcare, Head Start, preschool, and pre-kindergarten in communities represented by the decision-maker that he/she can then promote.

“Healthy kids are more productive adults and that has a positive economic impact on the state.”

- State Level Policy Advocate
Provide tangible solutions broken down into actionable steps. The literature review, key informants, and focus groups participants said that focusing on the solution, rather than the problem is particularly effective: For example, health departments can provide evidence on the impact of healthy eating and physical activity (e.g. improved academic performance) and then collect and share stories of childcare providers who implemented voluntary guidelines for healthy eating and physical activity in ECE as an effective first step toward development of policy for ECE physical activity and nutrition. Share stories about successful evidence-based policies co-promoted by the State Health Department and other state agencies that support physical activity and nutrition in early childcare settings while also meeting the desired outcomes of the other agency sponsors – a “win-win.” Highlight the solution in plain language in oral and written communications (e.g., briefs, infographics, website, etc.), and accompanied by clear, actions that stakeholders can take to achieve the solution.

Actions to effectively frame early childcare and education policy messages to decision-makers

I. Consider decision-makers’ values that relate to the ECE setting
   • Support for improving the state’s economy.
   • Support for initiatives that help attract businesses and young workers.
   • Support for policy that reduces Medicaid and other publicly funded healthcare costs.
   • Support for academic performance of children.
   • Support for investment in children that results in good outcomes and illustrates positive investment of government resources and finances.

II. Develop messages that resonate with decision-makers
   • Discuss the impact of ECE policies on children’s brain development and kindergarten readiness.
   • Ensure that a “just in time” solution is available for action when the opportunity arises by laying the groundwork early through public and decision-maker education.
• Provide specific examples of how ECE policies can contribute to healthy children.
• Discuss how significant reductions in chronic disease rates require a combination of policies that support and promote individual health behaviors during multiple years, starting in early childhood.
• Share state and local data rather than national or regional data when it’s available.
• Share examples of success and/or need from the communities the decision-maker represents.
• Highlight a comparable state or community that has adopted ECE policies to illustrate the potential impact.
• Discuss specific issues related to ECE access and inequality for respective groups of children.

V. Use effective messengers
• Community stakeholders to gather and share evidence to supplement available data.
• Local municipalities and ECE sites to adopt voluntary ECE guidelines for healthy food options, limited screen time, and/or minutes of physical activity in ECE settings that, if successful, can serve as examples for local or state policy.
• Schools and businesses to demonstrate support for early childcare and education policies, as they are considered credible sources of information by legislators.
• Partner organizations that can help deliver a unified message:
  • Schools, Head Start, and childcare operators
  • Individuals in and professional organizations representing the business and medical communities that are involved in caring for children
  • Grassroots advocates
  • Local government entities
  • Local boards of health, city councils, and county commissions to share their stories of successful ECE policies initiatives and to lend support for similar state-level policies
  • Governor’s office for state leadership related to ECE policies.

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