Background

- The Wisconsin Early Childhood Obesity Prevention Initiative (WECOPI), formed in 2008, is a multi-organizational group that includes partners from government, nonprofits, academics, and advocacy organizations.
- WECOPI conducted a comprehensive formative assessment of the early care and education (ECE) setting focused on nutrition and physical activity.
- In 2010, Active Early was launched in ECE sites to increase physical activity (PA) to 120 minutes each day and to promote environments and policies that are supportive of PA.
- In 2012, Active Early 2.0 built upon the original pilot project, ensuring that approaches to PA were culturally relevant and effective in reducing health disparities among children of low socioeconomic status and from diverse backgrounds.

Goals & Objectives

Active Early aims to increase PA in ECE and to reduce disparate rates of childhood obesity by:

- Promoting local-level, evidence-based approaches.
- Utilizing a statewide approach to educate key decision-makers on strategies to offer 120 minutes of PA in ECE.

Objectives include:

- Increase PA to 60 minutes of teacher-led and 60 minutes of free active play each day.
- Secure parent and provider buy-in to PA and childhood obesity prevention efforts.
- Support providers in implementing policies and practices that ensure adequate PA and in successfully engaging parents in learning opportunities related to PA and childhood obesity prevention.

Methods

Early Care and Education Programs

- Active Early 1.0: 13 Group Centers and 7 Family Providers, ~450 2- to 5-year-old children
- Active Early 2.0: 8 Group Centers and 7 Family Providers, ~500 2- to 5-year-old children, > 100 parents

Training and Technical Assistance

- 4-hour evidence-based PA training
- Customized on- and off-site technical assistance (TA):
  - Family child care programs received 25-20 hours of onsite TA.
  - Group child care programs received 35-60 hours of onsite TA.
  - Each site received 12-15 hours of offsite TA.
- Technical assistance was based on Active Early: A Wisconsin Guide for Improving Childhood PA and was guided by a structured protocol.
- Sites received micro-grants for sustainable investments to promote PA.

Evaluation

- Baseline, midpoint, and final
- Effectiveness of Active Early assessed by:
  - Direct observation of PA environment and policies using Environment and Policy Assessment and Observation Tool (EPAO)
  - Measurement of child PA levels using accelerometers
  - Height and weight measurements to calculate child BMI percentile
  - Surveys regarding provider knowledge and attitudes and parent beliefs and attitudes

Evaluation Results

- Active Early 1.0 sites showed statistically significant improvement in PA environment and policy EPAO scores, in minutes of teacher-led PA, and in percent of moderate-vigorous activity.

Implications for the Field

- Active Early offers and evaluates an approach to childhood obesity prevention that promotes PA, is culturally competent, and focuses on the reduction of health disparities.
- Results from the Active Early projects provide evidence to show that achieving 120 minutes of daily PA in regulated child care is feasible and thus provides support for systemic, multi-level environmental changes through various policy drivers.
- Engagement of multi-sector, diverse stakeholders through WECOPI led to the successful development and implementation of Active Early as a statewide initiative to promote PA in early childhood.
- States can support the Physical Activity Guidelines for Americans by leveraging similar cross-sector partnerships and coalitions.