

Lax child care regulations affecting children's health, study suggests ^[1]

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EXCERPTS:

Child care center regulations in most states don't uphold the health standards set by the nation's leading pediatricians' group, missing opportunities to prevent tooth decay and obesity among millions of the nation's young children, suggests a recent study.

On average, state child care regulations cover only a third of the oral health standards and half of the nutrition standards for early care and education programs developed by the American Academy of Pediatrics in collaboration with the American Public Health Association and the National Resource Center for Health and Safety in Child Care and Early Education.

"Considering the rising rates of both obesity and dental caries among preschool children, child care can be an important point of intervention in today's society," said the study's lead author, Juhee Kim. "We hope that the findings will prompt child care providers to develop and implement comprehensive feeding and oral health care policies."

With nearly 75 percent of U.S. children experiencing regular non-parental day care, federal and state officials have significant opportunities to help safeguard children's health through program regulations and policy, according to the researchers.

The standards used for the study were outlined in the 2002 edition of the report "Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs." Kim's research team compared the standards against regulations for the 50 states and the District of Columbia that were in force from February-April 2010, according to a database maintained by the National Resource Center.

The study's focus was prevention of early childhood caries, a virulent form of tooth decay that is on the rise among the nation's youngest children, according to the Centers for Disease Control and Prevention.

The national standards for nutrition - which address infant breast-feeding, meal and snack patterns and children's intake of fruits, vegetables and sugar-sweetened beverages, among other issues - also have implications for preventing childhood obesity as well as dental caries.

The third and most recent edition of the standards was issued in July 2010 and contained recommendations for obesity prevention, such as specifying the type and frequency of physical activity for children by age group and using "teachable moments" and learning experiences on appropriate portion sizes.

Of the eight national standards set for children's oral health, the mean number covered by state regulations was 2.6, the researchers found.

Seven states - Arkansas, Hawaii, Idaho, Maryland, Michigan, Montana and Rhode Island - included none of the oral health guidelines in their child care regulations. Illinois and West Virginia covered the highest number of oral health standards, with six each.

Children's having a toothbrush in child care settings was mentioned in 39 states' regulations, the highest response for any of the oral health topics.

However, only 10 states had policies pertaining to the frequency of children's teeth brushing, but eight of them pertained only to children that were in care at night.

Although the national standards recommend that children undergo oral screenings upon entering or at some time during care, only four states - Massachusetts, Nevada, Pennsylvania and Virginia - and Washington, D.C., mentioned or implied oral screenings.

States did somewhat better with adhering to the nutritional standards, with 30 states requiring that menus at child care centers include fruits and vegetables, although the amounts and types varied. Nearly all of the states had regulations that addressed the frequency of children's meals and snacks, which varied from two to four hours, depending upon the number of hours that children were in care.

However, eating that frequently without proper oral hygiene contributes to the development of dental caries, the researchers pointed out.

Sugar-sweetened beverages were prohibited by seven states - Delaware, Georgia, Indiana, Mississippi, New Mexico, North Carolina and Oregon - and Georgia, Mississippi and North Carolina further recommended that non-nutritional drinks be limited to special occasions.

While most states (39) prohibited propping baby bottles, slightly fewer - 34 states - prohibited children's carrying or sleeping with bottles, practices that also have been linked to dental cavities.

Although 38 states had regulations supportive of breast-feeding, only Delaware, Mississippi and Washington, D.C., mandated that mothers be allowed to breast-feed at child care centers.

The study, which was funded in part by a National Research Foundation grant from the Korean government, appeared recently in the journal *Pediatric Dentistry*.

When the study was conducted, Kim was a professor of family studies in the department of kinesiology and community health at the University of Illinois. She now is on the faculty of East Carolina University.

Co-authors of the research were Linda M. Kaste, D.D.S. and Shahrbanoo Fadavi, D.D.S., both faculty members in the College of Dentistry at the U. of I. at Chicago; and Sara E. Benjamin Neelon, a registered dietitian on the faculty of Duke University Medical Center and Duke Global Health Institute.

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