

Creating BETTER HEALTH TOGETHER by getting kids off to a healthy start

8 OF 10 CHILDREN BETWEEN THREE AND FIVE YEARS OLD IN MINNESOTA ARE CARED FOR BY SOMEONE OTHER THAN THEIR OWN PARENTS AT SOME TIME DURING THE WEEK.¹



All children should have a chance to grow up healthy. Early childhood is a time when kids develop healthy eating and physical activity habits that help them do just that.

How SHIP works with child care providers

SHIP is creating a critical mass of child care providers that follow best practices for breastfeeding support, healthy eating and physical activity – all of which have been identified by child health and development experts as proven strategies that will help get our youngest generation off to a healthy start.

Child care providers are required to attend professional development activities in order to maintain their state license. Before SHIP, there were few approved activities that taught providers how to support good nutrition (including breastfeeding) and

developmentally appropriate active playtime for children in their care.

SHIP reaches children in all corners of the state

- In 2016, **244** child care providers serving nearly **9,000** children participated in SHIP.
- Three-quarters of those providers served low-income children.



¹ Chase, R, Valorose, J. Child Care Use in Minnesota: Report of the 2009 Statewide Household Child Care Survey. St. Paul, MN: Wilder Research; 2010.

Child care providers are vital for our kids and our state

Child care providers play an important role in the health and development of Minnesota's children. SHIP helps child care providers with tools and training that can instill healthy habits in children during those critical early years.

Child care is also an important part of the state's workforce, employing more than 40,000 people. Sixty-two percent of small child

care providers are located outside of the Twin Cities metro area.²

Why early prevention matters

Obese children in the U.S. who become obese adults face more severe health consequences and incur roughly **\$19,000** more in direct medical costs over the course of their lifetime compared to normal weight children who remain normal weight into adulthood.³

SHIP in action

SHIP provides training and offers critical follow-up assistance to help providers put what they learned into practice.

An evaluation study by MDH found that this model works. After receiving training and six months of technical assistance, there was a:

- **13** percentage point increase in offering vegetables
- **25** percentage point increase in proper breastmilk handling
- **21** percentage point increase in providing 90+ minutes of active playtime

PROVIDERS ALSO SHOWED:

- increased knowledge of best practices
- greater willingness to try new methods to promote healthy behaviors
- greater agreement that child care practices impact the current and lifelong health of children.



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² Minnesota Department of Human Services. Minnesota's Great Workforce for Early Care and Education. 2015 Annual Report. Publication No. DHS-6313E-ENG 1-17). St. Paul, MN: Minnesota State Government Printing Office; 2015.

³ Finkelstein, EA, Graham, WC and Malhotra, R. Lifetime Direct Medical Costs of Childhood Obesity. *Pediatrics*, 2014;133(5):854-862.