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REEFD tiene como objeto primordial colaborar en la difusión del creciente número de resultados de investigaciones originales, estudios teóricos, técnicos, experiencias prácticas de relevancia, etc. que se realizan en nuestro país y en el ámbito internacional sobre las Ciencias de la Actividad Física y del Deporte (CAFD), escritos en castellano. Los trabajos deben ser originales, no publicados ni estar siendo considerados en otra revista para su publicación, siendo los autores los únicos responsables de las afirmaciones sostenidas en su artículo.

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DO BEST PRACTICE RECOMMENDATION FOR PHYSICAL ACTIVITY AT CHILD CARE RESULT IN MORE ACTIVITY AND LESS SEDENTARY TIME?

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INTRODUCTION

A large number (57%) of U.S. children ages 3-5 years are enrolled in center-based child care, spending about 23 hours in these non-parental care arrangements. Thus, child care centers have been identified as a potential setting (1, 2) for implementing physical activity policies to combat the child-hood obesity epidemic (3). The purpose of this study was to assess five best practice physical activity recommendations in child care settings (≥ 120 min/day of active play time; ≥ 90 min/day outdoor PA; ≥ 30 min/day of teacher lead PA; < 30 min/week TV watching; < 15 min/day sedentary time) and their impact on children's physical activity and sedentary time.

METHOD

Forty-nine child-care centers were recruited from central North Carolina in the U.S. Physical activity practices in center classrooms were assessed using the Environment and Policy Assessment and Observation (EPAO) instrument (4). Children ($n=557$) ages 2-5 years wore accelerometers to assess their physical activity levels at child care. Data were collected at each center over a 4-day period.

RESULTS AND DISCUSSION

Children spent more time in moderate-to-vigorous physical activity

(MVPA) at centers that met or exceeded the 120 min/day of active play time standard, compared to those who did not. Children also spent more time in MVPA and less time in sedentary activities at centers that provided > 90 minutes/day of outdoor playtime. Although not statistically significant, providing at least 30 minutes/day of teacher-led physical activity was also associated with more time spent in MVPA.

CONCLUSIONS

Significantly higher MVPA levels were observed in children enrolled in centers that met two of the five best practice recommendations (≥ 120 minutes per day of active play time and ≥ 90 minutes per day of outdoor PA). Child care centers should be encouraged to develop policies and practices to achieve sufficient activity time, including time outdoors, for children in their care.

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