



Health Program

Nutrition and Physical Activity Initiative

Healthy Families

For most people, healthy patterns of diet and physical activity begin at home. In fact, recent studies indicate that the general health and obesity of parents is a powerful indicator for the health outcomes of children. These influences start very early: research shows that nutrition during the first thousand days – starting during pregnancy and continuing to age two – plays a significant role in determining an individual’s health over his or her entire lifetime.

RECOMMENDATION: THE U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES (HHS) AND THE U.S. DEPARTMENT OF AGRICULTURE (USDA) SHOULD EXTEND FEDERAL GUIDELINES FOR DIET AND PHYSICAL ACTIVITY TO ALL CHILDREN UNDER SIX AND ENHANCE PUBLIC AWARENESS AND UNDERSTANDING OF THESE GUIDELINES.

Current federal dietary guidelines start at age two and federal physical activity guidelines start at age six. This is too late when many American children (nearly one in five) are obese by the time they enter kindergarten.

We recommend that HHS and USDA:

- Develop, implement and promote national dietary guidelines for the first thousand days, covering pregnant women and children up to two years old.
- Develop national physical activity guidelines for children under six years old. Develop an effective national strategy for disseminating this information and educating parents about the benefits of first foods and physical activity, particularly for populations that are most at risk for poor nutrition and health.

RECOMMENDATION: USDA SHOULD ENSURE THAT ALL ITS NUTRITION ASSISTANCE PROGRAMS REFLECT AND SUPPORT FEDERAL DIETARY GUIDELINES.

The USDA’s Food and Nutrition Service operates 15 federal nutrition assistance programs that together serve millions of the nation’s most vulnerable citizens, including many of the populations most at risk for poor nutrition, obesity and chronic disease.





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We recommend that USDA:

- Align messaging and education about nutrition through these programs, particularly as they affect pregnant women, new mothers, infants and young children.
- Provide technical training to states and local USDA staff to improve program implementation and effectiveness.
- Conduct research to gain a better understanding of program participation, utilization and impacts.
- Increase awareness of program benefits.

RECOMMENDATION: ALL KEY INSTITUTIONS – INCLUDING HOSPITALS, WORKPLACES, COMMUNITIES, GOVERNMENT AND INSURANCE PROVIDERS – SHOULD SUPPORT AND PROMOTE BREASTFEEDING WITH THE GOAL OF SUBSTANTIALLY INCREASING U.S. BREASTFEEDING RATES FOR THE FIRST SIX MONTHS OF AN INFANT’S LIFE.

Breastfeeding has enormous short- and long-term health benefits and research finds that breastfed infants are at significantly lower risk for obesity and chronic disease later in life. In 2010, the American Academy of Pediatrics estimated that if 90 percent of new mothers in the U.S. breastfed exclusively for six months, this change alone could deliver health care cost savings on the order of \$13 billion annually.¹ In the U.S., most new mothers intend to breastfeed, but actual rates of breastfeeding fall sharply in the first few months after birth.

We recommend that:

- Hospitals should follow “baby friendly” practices. This includes discouraging the use of formula except where medically necessary, tracking and reporting their maternity care practices, and providing follow-up support for breastfeeding after new mothers leave the hospital.
- Hospitals and the federal WIC program should follow the World Health Organization’s Code of Marketing of Breast Milk Substitutes, which aims to limit unwarranted exposure to breast milk substitutes and related advertising.





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- Employers should support breastfeeding by providing nursing breaks and a private place for mothers to express breast milk. We also recommend that a national program be established to publicly recognize businesses that demonstrate best practices in providing lactation accommodations.

Endnote

¹ Bartick, Melissa, and Arnold Reinhold. "The Burden of Suboptimal Breastfeeding in the United States: A Pediatric Cost Analysis." *Pediatrics* vol. 125 No. 5. 2010.

