Phase 1/Phase 2

Schools

Nutrition

- 1. Increase the number of students who eat healthy school breakfasts, lunches and snacks offered in school.
- 2. Promote and implement age-appropriate, evidence-based nutrition education into the school curriculum.
- 3. Promote the development and adoption of best-practice guidelines for healthy snacks in the classroom, after-school vending, fundraising and concession sales.
- 4. Promote and enhance existing online resource centers and other technical assistance opportunities to provide schools access to nutrition and healthy eating resources (such as menus and recipes).
- 5. Create a best practice model to encourage and enable "farm-to-school" initiatives for schools, early care and education centers, and youth-serving programs, including the creation of local gardens, local purchasing, and related efforts.
- 6. Advocate for the establishment of statewide nutrition education standards in the schools.

Physical Activity

- 1. Integrate physical activity tied to course content into each class period.
- 2. Enhance after-school programs (including more intramural sports options) to provide additional opportunities for students to engage in moderate-to-vigorous physical activity.
- 3. Ensure that the PE curriculum focuses on lifetime physical activity.
- 4. Incorporate the FitnessGram® assessment tool into all PE classes.
- 5. Promote Safe Routes to School initiatives that support walking and biking to school.
- 6. Implement policies to provide that all elementary students have at least 30 minutes of daily moderated recess (per evidenced-based guidelines) that cannot be taken away as punishment.
- 7. Increase opportunities for parents and caregivers to participate in physical activity programs at school with their children where possible (before- or after-school programs, for example).
- 8. Increase education and engagement with parents and caregivers to promote physical activity outside of school.
- Advance policy that restricts the increase of credit flexibility/waiver expansion.
- **10.** Limit the use of on-line Physical Education to specific circumstances (e.g., for use by students with disabilities).
- **11.** Implement policy change to increase the frequency of physical education to conform to evidence-based standards.

Phase 1/Phase 2

Youth-serving Organizations

Nutrition

- 1. Promote the adoption of best practice guidelines for healthy meals, snacks and beverages served at meetings and gatherings.
- 2. Model and incorporate learning about healthy eating habits into the organization's programs and activities.
- 3. Increase the number of youth-serving programs that participate in the Federal Child and Adult Care Food Program, Summer Food Service Program, and/or similar programs with appropriate nutrition guidelines.

Physical Activity

- 1. Promote the adoption of best practice guidelines for physical activity into all programs and policies.
- 2. Ensure that children and youth have the opportunity to play and be physically active while engaged in the organization's programs and activities.

Phase 1/Phase 2

Early Care and Education

Nutrition and Physical Activity (combined)

- 1. Increase the number of early care and education centers, child care facilities and other youth-serving programs that participate in the Federal Child and Adult Care Food Program.
- 2. Educate, advocate, and assist with implementation of nutrition and physical activity best practices in the ECE community.
- 3. Develop and promote online resource centers, technical assistance and other incentive opportunities that cause all child care centers to adopt developmentally appropriate physical activity and nutrition practices.
- 4. Include the adoption and implementation of developmentally appropriate physical activity and nutrition guidelines into the licensing requirements for ECE providers.
- 5. Include the adoption and implementation of developmentally appropriate physical activity and nutrition guidelines into the Paths to Quality rating system.
- 6. Require ECE and child care facilities to adopt and implement recommended nutrition and physical activity guidelines as a condition to participating in the Child Care Development Fund (CCDF) voucher program (amend existing participation standards to include adoption and implementation of recommended nutrition and physical activity guidelines).
- 7. Increase the number of early care and education centers offering best-practice breastfeeding support services to families.
- 8. Increase opportunities for parents and care givers to participate in nutrition education and PA programs with their children at ECE and child care facilities.
- 9. Increase education and engagement with parents and caregivers to promote healthy eating and physical activity outside of ECE and child care facilities.
- 10. Incorporate evidence-based curriculum on developmentally appropriate PA, nutrition and healthy eating in the educational components of the early childhood credentials offered by any provider in Indiana.
- 11. Require evidence-based curriculum on developmentally appropriate PA, nutrition and healthy eating in staff training and professional development courses for early childhood education professionals.

Phase 1/Phase 2

Community-Based Initiatives

Nutrition

- 1. Advocate for the reauthorization of federal supplemental food programs.
- 2. Develop "healthy corner store projects" in underserved areas.
- 3. Expand the number of farmers markets in underserved areas.
- 4. Increase the number of farmer markets wherever located that accept SNAP, WIC and other food assistance programs.
- 5. Increase the number of community gardens in central Indiana.
- 6. Work in partnership with food retailers to incentivize, develop and expand full-service grocery stores and supermarkets in underserved communities.
- 7. Increase local food store marketing of healthy products across the spectrum of product, placement, price and promotion marketing strategies.
- 8. Develop community-based "nutrition hubs" (access, cooking classes, education and counseling).
- 9. Identify and promote community-based programs that provide healthy eating classes and nutrition education using a variety of community venues and communication channels.
- 10. Work with public venues to add and promote healthier food choices at affordable prices.
- 11. Identify and advocate for policy changes that provide additional affordable food resources to low income families.
- 12. Reduce and eliminate the advertising of unhealthy foods to children.
- 13. Increase the promotion of healthy food choices by restaurants and other prepared food vendors through efforts such as menu labeling, calorie counts and portion options.
- 14. Promote services and programs that support and sustain healthy eating behaviors.

Physical Activity

- 1. Support the adoption of active transportation policies, including Complete Streets and investment in the built environment (e.g., sidewalks, trails and greenways, bike paths, and mass transit).
- 2. Promote the development of additional and the improvement of existing neighborhood playgrounds and parks.
- 3. Align with the "Top 10" initiative to promote the use of shared use agreements to give children and families access to public facilities for physical activities.
- 4. Encourage health care providers to adopt and prescribe prevention and treatment strategies that optimize PA among their pediatric patients.
- 5. Enhance community capacity to provide additional programs, events, and other opportunities for children to engage in moderate to vigorous physical activity.