

CDC's Early Childhood Nutrition Report 2025

DATA TO SUPPORT HEALTHY GROWTH AND DEVELOPMENT FOR CHILDREN 5 YEARS AND YOUNGER



What is the Early Childhood Nutrition Report?

CDC's *Early Childhood Nutrition Report* contains information on nutrition-related behaviors, practices, and policies that can impact the health and development of children 5 years and younger. This report provides national and state data on:

- Breastfeeding
- Supports for Infant Feeding
- <u>First Solid Foods</u>
- Healthy Eating
- <u>Affordability of Nutritious Foods</u>

What is already known?

Infancy and early childhood are periods of rapid growth and development, and healthy nutrition plays a vital role. Healthy nutrition supports brain development, strengthens bones, and supports optimal growth and development. In addition, starting healthy nutrition routines early can establish habits that promote health and prevent chronic diseases.

Early feeding decisions, such as breastfeeding, timing of solid food introduction, and what foods and drinks are provided, can play a critical role in early childhood. Policies and practices in places where children and caregivers spend their time can affect these decisions.

What's new?

CDC has published individual reports, such as the Breastfeeding Report Card, Early Care and Education State Indicator Report, Early Care and Education State Licensing Scorecards, and the State Indicator Report on Fruits and Vegetables. But this is the first time that data on several early child nutrition topics are showcased in a single report. This report and its corresponding individual state reports provide a more complete picture of nutrition in early childhood and related practices and supports at the state level.

How can this report be used?

The *Early Childhood Nutrition Report* provides data for national partners, state public health practitioners, policymakers, and other interested parties to identify gaps and areas for improvement, as well as opportunities for policies and activities that support healthy nutrition in early childhood. The individual state reports include opportunities for action to improve nutrition for young children.





WHAT ARE THE KEY FINDINGS FOR THE NATION?



Breastfeeding

Only 2 in 5 infants born in 2021 were still being breastfed on their first birthday. This means most infants do not receive the full health benefits that breast milk provides.

Supports for Infant Feeding

10 states and the District of Columbia fully met, and **38 states** partially met, the standard to encourage and support breastfeeding in their licensing regulations for early care and education centers in 2023. Meeting, or partially meeting, the standard can help infants receive breast milk for longer.



First Solid Foods

1 in 10 infants born during 2019–2021 was given foods other than breast milk or infant formula before they were 4 months old. This is too early.

Healthy Eating

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Only 49% of children 1–5 years in 2022–2023 ate vegetables at least once daily. Eating a variety of vegetables daily is needed to support this critical time of growth and development.

More than half of children 1–5 years in 2022–2023 drank a sugary drink one or more times weekly. Sugary drinks are the greatest source of added sugars in this age group and are not needed.

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Affordability of Nutritious Foods

69% of children 1–5 years lived in households that were always able to afford nutritious foods in 2022–2023. It is important for all families to be able to afford healthy foods, so they can make healthier choices.

Breastfeeding

Breastfeeding is the best source of nutrition for most infants. It helps protect babies and moms from some illnesses and diseases. It is recommended that infants are fed only breast milk for about the first 6 months. Infants can be introduced to solid foods at about 6 months and can continue to be fed breast milk for 1 to 2 years, or longer. Many mothers stop breastfeeding earlier than they planned. Breastfed infants who receive infant formula within 2 days of birth typically do not breastfeed for as long as those who do not. The table below provides data on breastfeeding rates.



State	Ever Breastfed, 2021 (%) ^a	Breastfed at 12 Months, 2021 (%) ^a	Exclusive Breastfeeding Through 6 Months, 2021 (%) ^a	Breastfed Infants Fed Formula Before 2 Days, 2021 (%) ^a
National	84.1	39.5	27.2	20.5
Alabama	68.0	29.4	28.1	14.9
Alaska	92.3	50.5	42.6	12.2
Arizona	84.5	38.5	26.0	21.7
Arkansas	81.2	30.8	23.8	15.4
California	88.9	48.3	29.5	19.8
Colorado	89.0	44.8	34.0	17.8
Connecticut	87.4	36.1	22.5	36.0
Delaware	84.9	31.8	22.2	20.1
District of Columbia	83.4	38.5	20.7	26.3
Florida	80.6	34.3	22.0	28.1
Georgia	87.8	40.9	28.9	25.1
Hawaii	93.2	54.1	27.4	25.0
Idaho	86.0	37.4	25.2	13.7
Illinois	85.2	36.8	27.0	21.6
Indiana	79.5	37.2	28.1	12.2
Iowa	82.9	39.2	28.7	20.7
Kansas	86.4	43.9	36.1	10.6
Kentucky	75.4	34.2	21.3	15.2
Louisiana	73.3	29.4	22.3	18.4
Maine	88.2	44.7	27.5	13.7
Maryland	89.8	47.1	28.4	22.8
Massachusetts	88.7	42.4	26.4	19.5
Michigan	85.3	39.4	27.2	18.4
Minnesota	87.8	50.3	38.2	13.9
Mississippi	73.4	23.6	21.7	23.9
Missouri	80.7	38.3	28.9	17.6
Montana	87.7	43.5	34.0	12.2

State	Ever Breastfed, 2021 (%) ^a	Breastfed at 12 Months, 2021 (%) ^a	Exclusive Breastfeeding Through 6 Months, 2021 (%) ^a	Breastfed Infants Fed Formula Before 2 Days, 2021 (%) ^a
Nebraska	84.3	38.6	31.5	14.9
Nevada	79.3	30.0	26.1	30.0
New Hampshire	87.9	44.3	26.3	14.2
New Jersey	81.6	40.1	24.6	30.5
New Mexico	78.6	36.5	27.7	16.9
New York	85.7	41.0	28.4	26.2
North Carolina	83.5	38.4	28.3	16.7
North Dakota	83.5	41.8	31.4	13.1
Ohio	82.7	40.8	27.9	18.6
Oklahoma	78.0	27.0	20.0	21.2
Oregon	93.7	51.7	32.3	10.0
Pennsylvania	83.0	37.0	24.7	21.0
Rhode Island	81.0	39.2	19.1	24.8
South Carolina	80.7	34.2	26.1	22.7
South Dakota	88.6	48.0	33.7	19.4
Tennessee	77.7	33.6	25.5	20.7
Texas	82.9	33.3	23.1	17.8
Utah	91.1	40.9	26.8	24.4
Vermont	92.9	56.5	38.1	15.1
Virginia	84.1	42.3	28.4	23.0
Washington	91.2	52.1	36.5	17.0
West Virginia	68.7	24.1	17.5	17.2
Wisconsin	83.3	42.6	30.6	16.4
Wyoming	89.3	39.9	27.7	13.1

^a Among children born in 2021. Breastfeeding indicators are the percentage of infants breastfeeding at the specified time points, calculated among all infants. The rate for infants receiving formula before 2 days of age is calculated among breastfed infants.

Supports for Infant Feeding

Practices and policies can impact how infants and children are fed in places such as hospitals and early care and education (ECE) centers. The table below provides data on maternity care practices in hospitals, ECE licensing standards for breastfeeding support, and state paid family and medical leave legislation. CDC tracks maternity care practices that support optimal infant feeding through the Maternity Practices in Infant Nutrition and Care (mPINC) survey. State ECE licensing regulations and state paid family and medical leave programs can be used to support infant feeding after the birth hospitalization.



State	Total mPINC Score, 2024 (Out of 100) ^a	Weeks of Paid Family and Medical Leave Available for the Care of a New Child, 2025 ^b	Encourage and Support Breastfeeding: State Center- Based ECE Licensing Standard, 2023 ^d
National	82	-	-
Alabama	76	-	Partially met
Alaska	77	-	Partially met
Arizona	76	-	Partially met
Arkansas	71	-	Partially met
California	89	8 weeks	Fully met
Colorado	86	12 weeks	Partially met
Connecticut	88	12 weeks	Partially met
Delaware	93	12 weeks ^c	Fully met
District of Columbia	-	12 weeks	Fully met
Florida	85	-	Partially met
Georgia	78	-	Fully met
Hawaii	78	-	Partially met
Idaho	79	-	Did not address
Illinois	81	-	Fully met
Indiana	83	-	Partially met
Iowa	76	-	Partially met
Kansas	81	-	Partially met
Kentucky	74	-	Partially met
Louisiana	85	-	Fully met
Maine	82	12 weeks ^c	Partially met
Maryland	83	12 weeks ^c	Fully met
Massachusetts	89	12 weeks	Partially met
Michigan	79	-	Partially met
Minnesota	81	12 weeks ^c	Partially met
Mississippi	87	-	Fully met
Missouri	77	-	Did not address
Montana	84	-	Partially met
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State	Total mPINC Score, 2024 (Out of 100) ^a	Weeks of Paid Family and Medical Leave Available for the Care of a New Child, 2025 ^b	Encourage and Support Breastfeeding: State Center- Based ECE Licensing Standard, 2023 ^d
Nebraska	75	-	Partially met
Nevada	76	-	Partially met
New Hampshire	90	-	Partially met
New Jersey	84	12 weeks	Partially met
New Mexico	88	-	Partially met
New York	84	12 weeks	Partially met
North Carolina	84	-	Fully met
North Dakota	78	-	Partially met
Ohio	85	-	Partially met
Oklahoma	79	-	Partially met
Oregon	87	12 weeks	Partially met
Pennsylvania	83	-	Partially met
Rhode Island	87	7 weeks	Partially met
South Carolina	80	-	Partially met
South Dakota	75	-	Partially met
Tennessee	76	-	Partially met
Texas	81	-	Fully met
Utah	78	-	Partially met
Vermont	90	-	Fully met
Virginia	82	-	Partially met
Washington	86	12 weeks	Partially met
West Virginia	76	-	Partially met
Wisconsin	85	-	Partially met
Wyoming	73	-	Partially met

^a Possible mPINC scores are 0 to 100, with higher scores indicating better maternity care practices and policies. Scores are not reported for District of Columbia because of small sample sizes but are included in the US national total mPINC score.

^b Among states with enacted legislation, the number of weeks presented are those that can be claimed by eligible employees for the care of a new child by birth, adoption, or foster care. Weeks may also be used for other family and medical leave events as specified by the state (e.g., a serious health condition of a qualified family member); in some states, additional weeks of benefits may be available for other needs. Employees must meet eligibility requirements to claim benefits; requirements vary across state programs. Voluntary paid family and medical leave programs in New Hampshire and Vermont are not included.

^c State has enacted legislation to create a paid family and medical leave insurance program, but the program is not currently paying benefits. Paid leave benefits for eligible employees in Delaware, Maine, Maryland, and Minnesota will be available in 2026.

^a States can include high-impact obesity prevention standards in their ECE licensing and administrative regulations. Family child care homes are not included. This indicator reports whether states fully met, partially met, did not address, or contradicted, the standard *Encourage and Support Breastfeeding: Encourage and support breastfeeding and feeding of breast milk by making arrangements for mothers to feed their children on-site.*

First Solid Foods

It is recommended that infants be introduced to foods other than breast milk or infant formula when they are about 6 months old. Solid foods can provide important nutrients to support growth and development. However, introducing solid foods before 4 months of age is too early because children might not be developmentally ready, and it could increase their risk of overweight and obesity. The table below provides data on the percentage of children introduced to solid foods too early and the related state ECE licensing regulations, which can support appropriate timing of first solid foods.



State	Early Solid Foods, 2019-2021 (%) ^a	Timely Introduction of Solid Foods: State Center-Based ECE Licensing Standard, 2023 ^b
National	10.1	-
Alabama	13.4	Did not address
Alaska	11.4	Fully met
Arizona	11.8	Did not address
Arkansas	11.3	Fully met
California	11.0	Fully met
Colorado	4.8	Fully met
Connecticut	7.0	Fully met
Delaware	9.5	Fully met
District of Columbia	10.7	Fully met
Florida	7.8	Fully met
Georgia	10.1	Fully met
Hawaii	3.8	Fully met
Idaho	6.3	Did not address
Illinois	13.3	Fully met
Indiana	13.4	Did not address
Iowa	5.9	Fully met
Kansas	8.9	Did not address
Kentucky	11.3	Did not address
Louisiana	10.3	Fully met
Maine	6.3	Did not address
Maryland	8.3	Fully met
Massachusetts	10.4	Did not address
Michigan	7.2	Fully met
Minnesota	7.2	Fully met
Mississippi	12.5	Partially met
Missouri	11.9	Did not address
Montana	9.7	Fully met

State	Early Solid Foods, 2019–2021 (%) ^a	Timely Introduction of Solid Foods: State Center-Based ECE Licensing Standard, 2023 ^b
Nebraska	9.2	Fully met
Nevada	13.3	Fully met
New Hampshire	7.3	Fully met
New Jersey	6.2	Fully met
New Mexico	11.9	Fully met
New York	10.4	Fully met
North Carolina	12.4	Fully met
North Dakota	6.5	Partially met
Ohio	10.0	Partially met
Oklahoma	8.7	Did not address
Oregon	10.5	Contradicted
Pennsylvania	10.3	Did not address
Rhode Island	14.4	Fully met
South Carolina	9.8	Fully met
South Dakota	6.5	Did not address
Tennessee	15.6	Fully met
Texas	11.7	Fully met
Utah	9.0	Fully met
Vermont	10.5	Fully met
Virginia	11.9	Fully met
Washington	5.7	Fully met
West Virginia	13.3	Fully met
Wisconsin	6.1	Fully met
Wyoming	6.8	Did not address

^a Data include children ages 1–3 years born in 2019–2021. Introducing foods before 4 months of age was considered early solid food introduction.

^b States can include high-impact obesity prevention standards in their ECE licensing and administrative regulations. Family child care homes are not included. This indicator reports whether states fully met, partially met, did not address, or contradicted the standard *Timely Introduction of Solid Foods: Introduce age-appropriate solid foods no sooner than 4 months of age, and preferably around 6 months of age.*

Healthy Eating

Once children start eating solid foods, they need a variety of foods from different food groups to meet their nutrient needs. This includes fruits and vegetables. Children younger than 2 years should also avoid foods and beverages with added sugars. Children 2 years and older should limit calories from added sugars. The table below provides data on the percentage of children who ate fruits and vegetables daily and drank a sugary drink one or more times weekly, as well as related state ECE licensing regulations, which can support healthy eating.



State	Ate Fruit at Least Once Daily, 2022–2023 (%) ^a	Serve Fruits of Several Varieties: State Center-Based ECE Licensing Standard, 2023 ^b	Ate Vegetables at Least Once Daily, 2022–2023 (%) ^a	Serve Vegetables: State Center-Based ECE Licensing Standard, 2023 ^b	Drank a Sugary Drink One or More Times Weekly, 2022–2023 (%) ^a	Avoid Sugar: State Center- Based ECE Licensing Standard, 2023 ^b
National	66.6	-	49.1	-	57.0	-
Alabama	60.1	Partially met	44.4	Partially met	67.1	Did not address
Alaska	70.5	Partially met	59.4	Partially met	52.0	Partially met
Arizona	70.5	Partially met	47.2	Partially met	61.1	Partially met
Arkansas	59.1	Partially met	45.9	Partially met	72.6	Partially met
California	70.5	Fully met	53.3	Partially met	49.9	Fully met
Colorado	71.7	Partially met	51.7	Partially met	55.7	Partially met
Connecticut	75.2	Partially met	55.6	Partially met	43.1	Partially met
Delaware	61.9	Partially met	44.6	Partially met	55.5	Partially met
District of Columbia	70.2	Partially met	54.1	Partially met	41.2	Partially met
Florida	56.1	Partially met	38.5	Partially met	50.3	Partially met
Georgia	67.1	Partially met	54.4	Partially met	65.7	Partially met
Hawaii	60.6	Partially met	44.7	Partially met	50.7	Partially met
Idaho	64.5	Did not address	49.7	Did not address	66.7	Did not address
Illinois	71.9	Partially met	47.4	Partially met	57.2	Fully met
Indiana	64.6	Did not address	45.1	Did not address	60.3	Partially met
Iowa	69.8	Partially met	53.1	Partially met	61.4	Partially met
Kansas	68.4	Partially met	48.6	Partially met	57.3	Did not address
Kentucky	61.7	Partially met	49.9	Partially met	63.9	Did not address
Louisiana	51.4	Partially met	39.7	Partially met	68.3	Partially met
Maine	79.4	Partially met	62.1	Partially met	39.0	Partially met
Maryland	67.1	Partially met	47.3	Partially met	53.6	Partially met
Massachusetts	68.7	Did not address	49.9	Did not address	47.8	Did not address
Michigan	71.9	Partially met	53.4	Partially met	52.1	Partially met
Minnesota	75.1	Partially met	56.5	Partially met	49.3	Partially met
Mississippi	50.1	Fully met	38.2	Fully met	74.3	Partially met
Missouri	70.1	Partially met	57.4	Partially met	58.3	Did not address
Montana	78.9	Partially met	54.8	Partially met	59.4	Partially met

State	Ate Fruit at Least Once Daily, 2022–2023 (%) ^a	Serve Fruits of Several Varieties: State Center-Based ECE Licensing Standard, 2023 ^b	Ate Vegetables at Least Once Daily, 2022–2023 (%) ^a	Serve Vegetables: State Center-Based ECE Licensing Standard, 2023 ^b	Drank a Sugary Drink One or More Times Weekly, 2022–2023 (%) ^a	Avoid Sugar: State Center- Based ECE Licensing Standard, 2023 ^b
Nebraska	67.6	Partially met	50.6	Partially met	63.1	Partially met
Nevada	64.3	Partially met	48.9	Partially met	63.1	Partially met
New Hampshire	78.9	Partially met	57.3	Partially met	35.2	Partially met
New Jersey	68.9	Fully met	46.9	Fully met	44.6	Partially met
New Mexico	66.0	Fully met	52.5	Fully met	69.0	Partially met
New York	62.6	Partially met	45.1	Partially met	51.7	Partially met
North Carolina	66.6	Partially met	51.9	Partially met	60.4	Partially met
North Dakota	70.2	Did not address	53.3	Did not address	59.9	Did not address
Ohio	66.8	Partially met	49.1	Fully met	53.3	Did not address
Oklahoma	63.0	Partially met	44.3	Partially met	69.9	Partially met
Oregon	76.6	Partially met	54.0	Partially met	51.7	Partially met
Pennsylvania	69.5	Fully met	49.3	Fully met	55.6	Did not address
Rhode Island	71.0	Partially met	50.4	Partially met	42.2	Partially met
South Carolina	66.1	Partially met	47.1	Partially met	59.8	Partially met
South Dakota	69.4	Did not address	50.1	Did not address	59.0	Did not address
Tennessee	65.9	Partially met	48.0	Partially met	61.9	Fully met
Texas	59.0	Partially met	44.1	Partially met	69.2	Fully met
Utah	69.6	Partially met	47.6	Partially met	65.9	Partially met
Vermont	75.8	Partially met	62.6	Partially met	41.8	Partially met
Virginia	70.1	Partially met	54.2	Partially met	55.9	Partially met
Washington	81.1	Partially met	59.5	Partially met	49.2	Partially met
West Virginia	63.4	Partially met	54.4	Partially met	68.6	Fully met
Wisconsin	73.7	Partially met	58.4	Partially met	54.2	Partially met
Wyoming	69.3	Did not address	51.6	Did not address	66.1	Did not address

^aData include children 1–5 years.

^b States can include high-impact obesity prevention standards in their ECE licensing and administrative regulations. Family child care homes are not included. This indicator reports whether states fully met, partially met, did not address, or contradicted the respective standards: (Serve Fruit: Serve fruits of several varieties, especially whole fruits; Serve Vegetables: Serve vegetables, specifically, dark green, orange, and deep yellow vegetables; and root vegetables such as potatoes and viandas; Avoid Sugar: Avoid sugar, including concentrated sweets such as candy, sodas, sweetened drinks, fruit nectars, and flavored milk).

Affordability of Nutritious Foods

When healthy foods are inaccessible or unaffordable, families might feed their children foods that are higher in calories and lower in important nutrients. It is important for all families to be able to afford healthy foods so they can make healthier choices. The table below provides data on the percentage of children 1–5 years of age living in households that were always able to afford nutritious foods during the past year.



State	Children 1–5 years living in households that were always able to afford nutritious foods, 2022–2023 (%)	
National	69.3	
Alabama	64.7	
Alaska	68.4	
Arizona	65.9	
Arkansas	59.2	
California	77.1	
Colorado	73.8	
Connecticut	74.0	
Delaware	67.9	
District of Columbia	87.2	
Florida	61.0	
Georgia	69.0	
Hawaii	65.2	
Idaho	65.9	
Illinois	74.2	
Indiana	67.0	
Iowa	67.9	
Kansas	68.7	
Kentucky	59.8	
Louisiana	60.8	
Maine	72.3	
Maryland	76.7	
Massachusetts	79.3	
Michigan	70.6	
Minnesota	77.4	
Mississippi	58.8	
Missouri	63.4	
Montana	69.7	
Nebraska	64.0	
Nevada	63.7	

State	Children 1–5 years living in households that were always able to afford nutritious foods, 2022–2023 (%)
New Hampshire	74.8
New Jersey	74.5
New Mexico	68.0
New York	72.7
North Carolina	69.2
North Dakota	72.3
Ohio	70.5
Oklahoma	59.4
Oregon	72.7
Pennsylvania	70.1
Rhode Island	76.6
South Carolina	70.0
South Dakota	69.5
Tennessee	67.9
Texas	59.9
Utah	73.0
Vermont	78.4
Virginia	72.3
Washington	74.8
West Virginia	62.0
Wisconsin	70.3
Wyoming	71.6

INDICATORS, DATA SOURCES, AND METHODOLOGY

Breastfeeding			
Indicators	Data Sources & Methodology		
 Ever breastfed (%) Breastfed at 12 months (%) Exclusive breastfeeding through 6 months (%) Breastfed infants fed formula before 2 days (%) 	 Source: CDC National Immunization Survey – Child (NIS-Child) 2022 and 2023, among children born in 2021. https://www.cdc.gov/breastfeeding-data/survey/ The NIS-Child provides current national, state, and selected urban-area estimates of vaccination coverage rates for U.S. children and is used to estimate national and state breastfeeding rates. Because breastfeeding data are obtained by parent or guardian recall when children are between 19 and 35 months of age, breastfeeding rates are analyzed by when children were born rather than by the survey year. This report presents the proportion of children who were ever breastfeed or given breast milk, the proportion of children who continued breastfeeding or received breast milk through 12 months of age or older, the proportion that were fed only breast milk through 6 months of age or older and the proportion of breastfeed infants who were given infant formula before 2 days of age. 		



Support for Infant Feeding

Indicators	Data Sources & Methodology
mPINC total score	Source: Maternity Practices in Infant Nutrition and Care (mPINC) Survey, 2024. https://www.cdc.gov/breastfeeding-data/mpinc/index.html CDC's national survey of Maternity Practices in Infant Nutrition and Care (mPINC) assesses and reports on maternity care practices and policies to encourage hospitals to make improvements that better support breastfeeding. mPINC national and state total scores represent the overall level of maternity care practices and policies that support optimal infant feeding during the previous year. Possible scores are from 0 to 100, with higher scores indicating better maternity care practices and policies supportive of optimal infant feeding. Scores are not reported for District of Columbia because of small sample sizes but are included in the US national total mPINC score. Read more about the mPINC scoring algorithm at https://www.cdc.gov/breastfeeding-data/mpinc/scoring.html.
Weeks of paid family and medical leave available for the care of a new child	 Source: Congressional Research Service Report: Paid Family and Medical Leave in the United States as of March 26, 2025. (Donovan, SA). Paid Family and Medical Leave in the United States (CRS Report No. R44835). https://www.congress.gov/crs_external_products/R/PDF/R44835/R44835.30.pdf Paid family and medical leave (PFML) refers to partially or fully compensated time away from work for specific and generally significant family caregiving needs, such as the arrival of a new child or serious illness of a close family member, or an employee's own serious medical needs. Among states with enacted legislation, the PFML indicator identifies the number of weeks of paid parental leave benefits for the care of a new child by birth, adoption, or foster care available to eligible employees within a benefit year. As of March 2025, Delaware, Maine, Maryland, and Minnesota had enacted legislation to create a paid family and medical leave insurance program, but the program was not yet paying benefits. Paid leave benefits for eligible employees will be available in these states in 2026. Voluntary paid family and medical leave programs in New Hampshire and Vermont are not included.
Encourage and support breastfeeding: state center-based ECE licensing standard	 Source: University of Colorado College of Nursing. 2023 Supplement: Achieving a State of Healthy Weight. State Profile Pages: Child Care Centers. University of Colorado Anschutz Medical Campus; 2024 https://nursing.cuanschutz.edu/research/healthy-weight States can include high-impact obesity prevention standards in their ECE licensing regulations. This indicator reports whether states' licensing fully met, partially met, did not address, or contradicted standard IA1 for child care centers: <i>Encourage and support breastfeeding and feeding of breast milk by making arrangements for mothers to feed their children on-site. Family child care homes are not included</i>.

First Solids Foods

Indicators	Data Sources & Methodology
Early solid foods (%)	Source: National Survey of Children's Health (NSCH) 2021–2023 Survey Years, among children born in 2019–2021. https://www.childhealthdata.org/learn-about-the-nsch/NSCH NSCH is a national survey that provides data on multiple aspects of children's health and well-being. Caregivers were asked their child's age at which they first fed anything other than breast milk or infant formula. Introducing foods before 4 months of age was considered early solid food introduc- tion. Only children 1–3 years of age were included to improve the reliability of recall. Children were excluded if the reported age that they were first given solid foods was unlikely to be correct (after >12 months of age) or the combination of breastfeeding duration, infant formula introduction, and solid food introduction suggested the child had no source of nutrition for ≥2 months. Data are analyzed by when children were born rather than survey year.
Timely introduction of solid foods: state center-based ECE licensing standard	Source: University of Colorado College of Nursing. 2023 Supplement: Achieving a State of Healthy Weight. State Profile Pages: Child Care Centers. University of Colorado Anschutz Medical Campus; 2024 https://nursing.cuanschutz.edu/research/healthy-weight States can include high-impact obesity prevention standards in their ECE licensing regulations. This indicator reports whether states' licensing fully met, partially met, did not address, or contradicted, standard IC2 for child care centers: <i>Introduce age-appropriate solid foods no sooner than 4 months of age, and preferably around 6 months of age.</i> Family child care homes are not included.



Indicators	Data Sources & Methodology
Ate fruit at least once daily (%)	Source: National Survey of Children's Health (NSCH) 2022–2023 Survey Years. <u>https://www.childhealthdata.org/learn-about-the-nsch/NSCH.</u>
	NSCH is a national survey that provides data on multiple aspects of children's health and well-being. Respondents with children 1–5 years were asked about how many times in the past week did the child eat fruit*? This report presents the percentage of children 1–5 years who ate fruits at least once daily (\geq 1 time per day in preceding week).
	*Fruit includes fresh, frozen, or canned. It does not include juice.
Serve fruits of several varieties: state center-based ECE licensing standard	Source: University of Colorado College of Nursing. 2023 Supplement: Achieving a State of Healthy Weight. State Profile Pages: Child Care Centers. University of Colorado Anschutz Medical Campus; 2024 <u>https://nursing.cuanschutz.edu/research/healthy-weight</u>
	States can include high-impact obesity prevention standards in their ECE licensing regulations. This indicator reports whether states' licensing fully met, partially met, did not address, or contradicted standard NB3 for child care centers: <i>Serve fruits of several varieties, especially whole fruits.</i> Family child care homes are not included.
Ate vegetables at least once daily (%)	Source: National Survey of Children's Health (NSCH) 2022–2023 Survey Years. https://www.childhealthdata.org/learn-about-the-nsch/NSCH.
	NSCH is a national survey that provides data on multiple aspects of children's health and well-being. Respondents with children 1–5 years were asked about how many times in the past week did the child eat fruit*? This report presents the percentage of children 1–5 years who ate fruits at least once daily (\geq 1 time per day in preceding week).
	*Fruit includes fresh, frozen, or canned. It does not include juice.
Serve vegetables: state center-based ECE licensing standard	Source : University of Colorado College of Nursing. 2023 Supplement: Achieving a State of Healthy Weight. State Profile Pages: Child Care Centers. University of Colorado Anschutz Medical Campus; 2024. https://nursing.cuanschutz.edu/research/healthy-weight
	States can include high-impact obesity prevention standards in their ECE licensing regulations. This indi- cator reports whether states' licensing fully met, partially met, did not address, or contradicted standard NB2 for child care centers: <i>Serve vegetables, specifically, dark green, orange, and deep yellow vegetables; and</i> <i>root vegetables such as potatoes and viandas.</i> Family child care homes are not included.
Drank a sugary drink one or more times weekly (%)	Source : National Survey of Children's Health (NSCH) 2022–2023 Survey Years. https://www.childhealthdata.org/learn-about-the-nsch/NSCH
	NSCH is a national survey that provides data on multiple aspects of children's health and well-being. Respondents with children 1–5 years were asked how many times in the past week did the child drink sugary drinks such as soda, fruit drinks, sports drinks, or sweet tea? This report presents the percentage of children 1–5 years who drank a sugary drink one or more times weekly (≥1 time in preceding week).
	Source: University of Colorado College of Nursing. 2023 Supplement: Achieving a State of Healthy Weight. State Profile Pages: Child Care Centers. University of Colorado Anschutz Medical Campus; 2024
Avoid sugar: state center-based ECE	https://nursing.cuanschutz.edu/research/healthy-weight
licensing standard	States can include high-impact obesity prevention standards in their ECE licensing regulations. This indicator reports whether states' licensing fully met, partially met, did not address, or contradicted standard NG2 for child care centers: <i>Avoid sugar, including concentrated sweets such as candy, sodas, sweetened drinks, fruit nectars, and flavored milk.</i> Family child care homes are not included.

Affordability of Nutritious Foods

Indicators	Data Sources & Methodology
Children 1–5 years living in households that could always afford to eat nutritious foods (%)	Source: National Survey of Children's Health (NSCH) 2022–2023 Survey Years. <u>https://www.childhealthdata.org/learn-about-the-nsch/NSCH</u> NSCH is a national survey that provides data on multiple aspects of children's health and well-being. Respondents from households with children 1–5 years were asked to describe their ability to afford and eat nutritious foods during the past 12 months. This report presents the percentage of children 1–5 years living in households that could always afford to eat nutritious foods.



For more information please contact

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Centers for Disease Control and Prevention www.cdc.gov/nutrition/php/resources 800-CDC-INFO (800-232-4636) Publication date: June 2025

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