

Supporting Healthy Levels of Physical Activity, Sedentary Behaviour, and Sleep for Preschoolers (3-4 years) in Occupational Therapy

Contributors

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Background

The Guidelines

The <u>Canadian 24-Hour Movement Guidelines</u> offer daily time recommendations for physical activity, sedentary behaviour, and sleep that preschoolers should get in a 24-hour day. The guidelines were developed by scientific experts and are based on the best available research.²

The Suggested Guidelines for Preschoolers (3-4 years) are:



Move

At least 3 hours spent in a variety of physical activities spread throughout the day, of which at least 1 hour is energetic play-more is better.

Physical activity is any movement of the body that is created by the muscles and uses energy.



Sedentary Behaviour

- Not being restrained for more than 1 hour at a time or sitting for extended periods
- Sedentary screen time should be no more than I hour per day-less is better.
- When sedentary, engaging in pursuits such as reading and storytelling with a caregiver is encouraged.

Sedentary behaviour is any activity that takes place when a child is awake, and there is a very low level of energy expenditure.



Sleep

★ 10 to 13 hours of good quality sleep, which may include a nap, with consistent bedtimes and wake up times.

Sleep is affected by lots of factors and can look very different for each person.

Point In Question:

Evidence on movement recommendations for preschoolers with disabilities is lacking.

- The current guidelines are based on research with children without disabilities.
- Research is needed before specific guidelines can be created.3

The evidence does suggest:

- Balanced levels of physical activity, sedentary behaviour, and good quality and consistent sleep are important for all children.
- The current guidelines can be used as a guide for children with disabilities with help from a healthcare professional.

Purpose

This toolkit was created to give OTs information and resources to discuss the movement behaviours with caregivers of preschoolers with disabilities. These conversations can be contextually relevant and supported through the research-based recommendations, and resources provided below. This toolkit was codesigned with OTs, caregivers of children with disabilities, and in consultation with experts on the 24-Hour Movement Guidelines, from across Canada.

This toolkit should be used by OTs in tandem with their clinical judgement to facilitate discussions with caregivers to find a balance of high quality and meaningful movement behaviours.

Occupational Therapy

Occupational Therapists (OTs) are well-suited to implement these guidelines because of:

- Their focus on promoting participation in movement-based play, seated occupations, and sleep.
- Their knowledge and training in supporting engagement in childhood occupations in a client-centred context.



Key:

OTs are really good at fostering inclusion in physical activity, balancing sitting time, and supporting sleep habits, all of which have been linked with preschoolers' positive development and wellbeing.⁶⁻⁸

Quality Participation



The <u>Canadian Disability Participation Project</u> created a <u>Blueprint for Building Quality Participation</u> for children with disabilities to engage in physical activity.

Quality participation is when an individual feels their involvement in an activity is satisfying, and enjoyable, and they experience outcomes deemed personally important and positive.⁹

There are 6 Building Blocks of Quality Participation.



Autonomy

Having independence, choice and control.



Belongingness

Feeling accepted, respected, and part of the group.



Meaning

Contributing towards a personally meaningful goal.



Mastery

A sense of achievement, and competence.



Challenge

Feeling appropriately tested.



Engagement

Being in the moment.

Throughout this toolkit, suggestions are provided to consider quality participation in physical activity, sedentary behaviour and sleep. The goal is for OTs to consider ways to integrate the building blocks during discussions with families to support engagement in each movement behaviour.

The F-Words

OTs can create a welcoming and supportive space that respects a child's context surrounding the movement behaviours by using the F-words for Child Development. *Instead of focusing on what a child can't do, this strength-based approach highlights a child's potential, making movement fun and meaningful. OTs can think about how their proposed session plans fit with the child's F-words.

Function

Some children might do things differently. How is not important

Family

The family knows the child the best. Respect them as part of the team.

Fitness

Find ways to stay fit, mentally and physically.

Fun

What does the child enjoy doing?

Friends

How can we foster meaningful connections?

Future

As children change and grow, continue supporting participation.



The <u>F-words Profile</u> can be used to highlight what each word means to the child and family, and learn more about their hopes and goals for physical activity, sedentary behaviour and sleep.

*To learn more, please visit the <u>F-words Knowledge Hub.</u> This site provides resources including training modules and tools to integrate the F-words in practice.

Considerations When Using this Resource

There can be a lot of pressure on parents to balance the competing demands and priorities of supporting their child's participation daily activities. Although well intentioned, providing too much information all at once may be overwhelming for caregivers. It may also make them feel guilty if they are not meeting the recommendations.

Integrating lots of movement throughout the day might be ideal, but it might not always be achievable at home.

The unique abilities of each child may mean some aspects of this resource are more or less relevant, especially for children who have complex diagnoses.

The OT should be the mediator to help relay this information in a sensitive, culturally relevant, timely, and strength-based way to support conversations surrounding what a family is ready to hear. The OT can integrate their clinical judgement to tailor the messaging of this resource to meet families where they are at, and collaboratively work on meaningful strategies with their clients.



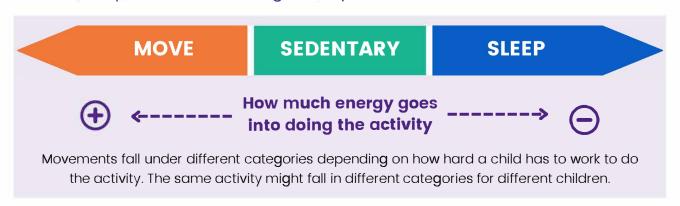
Tips from the Early Movers Advisory Council:

- This document is open-ended and not a prescription. Use it however best suits the needs of families with whom you are working.
- Start general and pick one area of the movement behaviour on which to focus (e.g., physical activity, sedentary behaviour, sleep).
- Consider sharing this information in a one-on-one meeting with caregivers when their child is not present.
- Ask if the family would like to take information home to read first before you discuss it together.
- Shift the conversation to a different movement behaviour when caregivers are feeling like they have exhausted strategies in one area, or if something is not applicable.
- You're a partner in this with the families. Tailor the conversation to support strength-based, meaningful, and positive ways to integrate activities.
- Focus on gradual shifts, supporting caregivers to make small but impactful adjustments rather than big overnight changes.

Contextualizing the Guidelines

This section explores the time-based, daily movement behaviour recommendations. These are not prescriptions. Rather, they should be treated as points of reference for OTs and families.

Physical activity, sedentary behaviour, and sleep are classified by the energy used to engage in each behaviour."* The aim of communicating the guidelines with clients should be to provide flexibility and adaptation to their unique context while focusing on the benefits of healthy movement behaviours. Our conversations starters worksheet will help contextualize current movement behaviours for each client. A <u>companion tool for caregivers</u> is provided at the end of this document.



Energy intensity during activity may be higher or lower for preschoolers with different abilities, and this may change with factors such as:



Fatigue



Pain



Mental Health



Symptom Onset



Emotional Regulation



Medication Side-Effects





Any amount of balanced movement is great - even if your client does not hit these targets. The overarching goal is to integrate a pattern of wellness-supporting behaviours relevant to the family's goals.

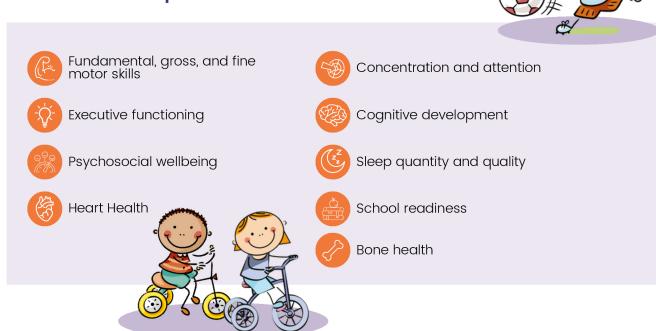
^{*}Definitions of each of these terms, caveats, and examples can be found in the Sedentary Behaviour Research Network Terminology Consensus Project. 12



Physical Activity

Physical activity is any movement of the body that is created by the muscles and requires energy. ¹³ In the preschool years, physical activity can take many forms, but often happens through play.

Studies^{6,14} examining children with and without disabilities show that engaging in physical activity is linked with improvements in...



From an Occupational Therapy Perspective...

Physical activity can be applied in daily life and in functional activities. These factors are linked with improved occupational participation for children with disabilities.¹⁵

Physical activity should be incorporated by OTs in practice, given:



- The positive relationships with physical, cognitive and social-emotional indicators among preschoolers with disabilities.
- The ability to modify activity to suit a child's individual interests, needs, and goals.
- The positive links to children's overall health and wellbeing.

24-Hour Movement Guidelines Recommendation:

For optimal benefits to the health of preschoolers, it is suggested that families should aim for:

- ★ 3 hours spent in a variety of physical activities spread throughout the day, of which at least 1 hour is energetic play—more is better.
- ★ Trade indoor for outdoor time when possible.





Messaging to Share with Caregivers*

"There are lots of benefits for preschoolers' minds and bodies when they move. Any amount of fun movement in a way that makes sense for your child and family is a great start towards building a balanced routine and supporting your child's overall wellbeing."



Suggestions for Quality Participation:



Caregivers and OTs can work together to introduce a variety of activities to provide choice and find something the child enjoys.



Facilitate <u>conversations</u> with caregivers on what their child enjoys when it comes to moving their body, as an entry way to conversation.



Use graded approaches and adaptive equipment to support appropriate levels of challenge and opportunities for mastery.



Support families in locating local programs or spaces which promote inclusion, acceptance, and respect for the child to engage in physical activity.



Try to incorporate opportunities for small, fun bursts of engaged movement throughout the day which align with the child's interests.



Suggest graded approaches to engage in new physical activity opportunities.

^{*}Resources to support physical activity are provided at the end of this document.

National and International Resources

Program	Description	QR
<u>Jumpstart</u>	Curriculum-based, virtual programming series designed to help keep kids active at home.	
<u>Pathways</u>	Games to get kids moving at home.	
The Australian Parenting Website	Ideas, videos, and education on play and physical activity for preschoolers.	
<u>GoNoodle</u>	Get kids moving with short interactive activities.	
Loose Parts Schema	Ideas to support schematic play with loose parts.	
<u>Heartland Area Education</u> <u>Agency</u>	Ideas for adapted physical education, recess activities, and games for students with disabilities (various ages).	
Outdoor Play Canada	Evidence-based learning focused on nature and play available for caregivers.	
National Center on Health, Physical Activity and Disability	Games to play at home to get kids moving.	
Special Olympics	A global organization that serves athletes with intellectual disabilities. • Active Start: program for preschoolers	

Physical Activity Resources that Exist in Your Community

Use this box to record local resources you can refer to in the future.

<u>Example: The Everyone Can Play Toolkit in London Ontario</u>

Sedentary Behaviour

Sedentary behaviour is any activity that takes place when a child is awake, and there is a very low level of energy expenditure.

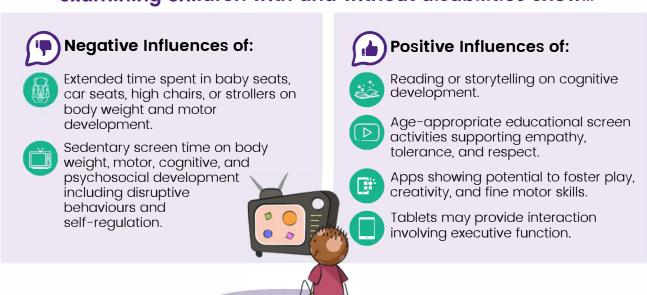
- This usually takes place in a sitting, reclining, or lying position.
- This could include passively using screens, colouring, sitting in a stroller, car seat, or high chair.

However, there are exceptions. These positions do not always mean a child is sedentary.¹⁶

 If a child is sitting in a mobility device and moving their body, it may not be considered a sedentary behaviour as energy is being used.

Evidence is emerging and still being explored on the differences between high and low quality sedentary time.

Although the quality of current evidence available is low, studies examining children with and without disabilities show...^{7,17}





Key:

The type of sedentary behaviour is important. Sedentary behaviours that are engaging and promote learning and connection are important in their own right, making it important to break up passive sedentary behaviour when possible.

Sedentary Screen Time

Screen time can be a positive learning experience when:"



Prioritizing educational content, and using a <u>media classification rating</u> to guide viewing choices.



Connecting what is being viewed with real life, encouraging interaction, and building cognitive skills such as attention, memory, and thinking.



Combining touch screens with creative or active play such as singing, dancing, or language repetition.

From an Occupational Therapy Perspective...



Sedentary behaviour and screens may be a part of children's meaningful occupations and interactions with others:

- Sedentary behaviour can be an accomplishment.
- We can build skills through sitting activities like colouring, playing with blocks, and reading.
- Sitting still without a screen can be an accomplishment.
- Sitting positioned can be an accomplishment.

OTs should take a **harm reduction stance** when working with families. This involves practitioners and families celebrating small victories while striving

to reduce harmful behaviours like extensive screen time exposure to non-age-appropriate content. This includes considering content type, duration, and age-appropriate screen time use. In this way, OTs and caregivers can look for opportunities to balance quality with quantity of sedentary behaviour.¹⁸



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24-Hour Movement Guidelines Recommendation:

For optimal benefits to the health of preschoolers, it is suggested that families should aim to:



- ★ Whenever possible, break-up long periods of passive sitting, especially more than 1 hour at a time.
- ★ Limit passive sedentary screen time to less than 1 hour—less is better.
- ★ Engage in meaningful and interactive sedentary pursuits, such as reading and storytelling with a caregiver.



Messaging to Share with Caregivers*

"There are many types of sedentary behaviours for preschoolers. Some are important for learning and development. We can balance quality sedentary activities that support learning, connection, and engagement while limiting passive screen time when possible."



Suggestions for Quality Participation:18



Support the child in sedentary activities which provide them with learning, age appropriate independence, choice, and control.



Support the child in feeling included, accepted, and respected through shared experiences such as group-based play or family co-viewing during screen time.



Provide opportunities for sedentary activities where the child is engaged and appropriately challenged.



When screens are used in sedentary leisure pursuits, encourage opportunities which help support a personally meaningful goal for child and their family.



Explore new and fun activities or books which align with the child's interest for floor-based reading and play time.



Establish a schedule which includes quality sedentary time and breaks up passive screen use, offering choice within parameters (e.g., shall we paint or play dolls?).

Screen time that contributes meaningfully can be emphasized with the following recommendations: 17,18

- reate a screen schedule with time for sleep and additional activities that develop motor, language, and cognitive skills.
- Maintain screen-free times for meals and book-sharing.
- Curate and monitor children's media use by creating playlists or selecting appropriate channels. Prioritize educational, movement-based, and interactive programming.
- ★ Be present and engaged when screens are used and, whenever possible, engage with media content together.
- Turn off background media when not in use, especially during play and reading time.
- Turn off screens in the evening in preparation for bedtime.
- ★ Model screen-time with a <u>family media plan</u> for when, how, and where screens may (and may not) be used.

^{*}Resources to support sedentary behaviour are provided at the end of this document.

National and International Resources

Program	Description	QR
CBC Kids in Canada	CBC Kids and Studio K is a digital playground designed for kids.	
Common Sense Media	Independent source for media recommendations and advice for families.	
<u>Dolly Parton's</u> <u>Imagination Library</u>	A free book gifting program devoted to inspiring a love of reading in young children.	
PBS Kids	Educational games and videos; also available in an app.	
<u>Learning through Play</u>	Ideas for play-based activities.	
Apps	Baby Games; Khan Academy Kids; Hungry Caterpillar Play School; Sesame Street	

Sedentary Behaviour Resources that Exist in Your Community

Use this box to record local resources you can refer to in the future.

<u>Example: Family Centres and EarlyON Program Locations</u>

Sleep

Sleep is dependent on many external and internal factors and can look very different for each person. Many children with disabilities have trouble falling and staying asleep, and with wake times. When it comes 19-23

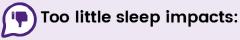
to good sleep, it is not really about a magic number. If children feel tired during the day it could be related to insufficient duration or quality of sleep.

"Good quality sleep"²⁴ in preschoolers involves:



- A high ratio of sleep time while in bed.
- 2 A shorter transition from being awake to asleep.
- 3 Fewer awakenings more than 5 minutes in length.
- 4. Fewer wakes after sleep onset.

Various studies^{8,25} examining children with and without disabilities show...





Physical and psychosocial health.



Increased symptom presentation of disabilities.



Effectiveness of language development.



Good quality sleep impacts:



Overall quality of life.



Energy for movement throughout the day.



Positive behavioural and emotional regulation.



Mood.



Health and wellbeing for the entire family.



From an Occupational Therapy Perspective...

Canadian OTs have reported that sleep is a highly prioritized occupation by parents of preschoolers with disabilities. ²⁶ Healthy sleep practices and routines both day and night can help support caregivers in working towards improvements in the quality of their child's sleep.

24-Hour Movement Guidelines Recommendation:

For optimal benefits to the health of preschoolers, it is suggested that families should aim for:

★ 10 to 13 hours of good-quality sleep, which may include a nap, with consistent bedtimes and wake-up times.



Messaging to Share with Caregivers*

"Sleep can be difficult, especially for preschoolers with disabilities. Getting enough good-quality sleep is important for health, but it may take time and practice to find what works best for each child. Overall, staying active during the day and limiting screen time before bed can help preschoolers sleep well at night."

Suggestions for Quality Participation: 24,27,28



Use family routines that do not involve screens in the evenings for regulating behaviour and to support a sense of control for the child as they wind down to bedtime.



Establish a regular bedtime schedule such as bath time, brush teeth, story time, tuck in, and lights out, offering choice within parameters (e.g., what book should we read tonight?).



Try a <u>visual schedule</u> which may help children process information and feel included in the process of bedtime routines.



During the daytime hours, engage in lots of meaningful movement activities.



Create environments supportive of sleep including a dark, quiet, and cool space.



Maintain a stable sleep schedule, trying for consistent bed and wake times.



^{*}Resources to support sleep are provided at the end of this document.

National and International Resources

Program	Description	QR
<u>Autism Speaks</u>	Strategies to Improve Sleep in Children with Autism. • <u>Sleep Toolkit:</u> resources including a visual timeline and a family media plan template.	
Better Nights, Better Days	Evidence-based research program from Dalhousie University.	
Canadian Paediatric Society	Information for caregivers from Canada's paediatricians on sleep in children and babies.	
Canadian Sleep Research Consortium	National hub of sleep scientists and clinicians advancing research and interventions to optimize sleep. • Sleep Tips for Preschoolers	
Pediatric Sleep Council	Accurate and up-to-date information on sleep in young children for caregivers.	
Sleep on it Canada	Evidence-based fact sheets.	回信日 注意录 回读
<u>The Australian Parenting</u> <u>Website</u>	Free, evidence-based caregiver resources	

Sleep Behaviour Resources that Exist in Your Community

Use this box to record local resources you can refer to in the future. <u>Example: The Sleep Lab at the Children's Hospital of Eastern Ontario</u>

Summary



Key:

The overarching message on the movement behaviours to share is balance, acknowledging each day might look different. We are aiming to work towards a pattern of movement behaviours that align with each child's goals and abilities, and which is supportive of their overall wellbeing.

Additional Resources

Program	Description	QR
The Ability Toolkit	A resource to support youth with disabilities in meeting the Canadian 24-Hour Movement Guidelines.	
The Australian Parenting Website	A free, evidence-based, up-to-date resource for caregivers funded by the Australian Government.	
Canadian Disability Participation Project	Partners working together to enhance community participation among Canadians with disabilities.	
Canadian Society for Exercise Physiology	The principal body for physical activity, health and fitness research and personal training in Canada.	
<u>CanChild</u>	A Canadian research centre with caregiver-friendly language dedicated to generating knowledge and transforming lives of children with developmental conditions and their families.	
<u>Easter Seals</u>	Canada's largest local provider of programs, services, and development for the disability community.	
<u>HealthyChildren.org</u>	The American Academy of Pediatrics site providing caregiver resources related to healthy living.	
The National Center on Health, Physical Activity and Disability	Promoting the health and wellness of people with disabilities through evidence-based programs.	
<u>ParticipACTION</u>	Resources to help people living in Canada be less sedentary and more physically active.	
<u>Pathways.org</u>	Tools and resources to support children's motor, sensory, and communication development.	
Rick Hansen Foundation	Resources to support education on accessibility.	
<u>Sport for Life</u>	Educates and informs to support better understanding and delivery of quality sport and physical literacy programming.	
Sensory Processing Resource Pack	Leicester, Leicestershire & Rutland Children's Services Partnership provide sensory processing ideas for the movement behaviours.	
<u>Vancouver Paediatric</u> <u>Team</u>	Resources for OTs to support fine and gross motor, and sensory programming for children (starting at kindergarten age).	

Appendix: Resources for Working with Caregivers



- 01 F-Words Profile
- 02 Conversation Starters
- 03 Companion Tool for Caregivers
 - 05 Physical Activity
 - 06 Physical Activity Diary
 - 07 Movement Planner
 - 08 Loose Parts and Sensory Toy Box
 - 09 Sedentary Behaviour
 - 10 Sedentary Behaviour Diary
 - 11 Screen Time Agreement
 - 12 Sleep
 - 13 Sleep Diary
 - 14 Visual Bedtime Routine
 - 17 Body Scanning
 - 18 Office Poster

F-Words Profile

This resource was adapted from the <u>F-Words Profile</u> provided by CanChild and created by a parent researcher to highlight what each F-word means to a family. It can be used as an introductory document with a family to learn more about them.

Functioning: My child's strengths are:
Family: Our family is:
Fitness: My child likes to move or play by:
My child enjoys:
Friends:
My child's friends are:
Future:
Our goals for the future are:



Conversation Starters



Use the following worksheet to facilitate discussion and set goals related to physical activity, sedentary behaviour, and sleep with your clients.

Physical Activity

What does physical activity mean to you?

How much physical activity does your child currently get each day?

What does your child like to do for fun?

How does your family engage in physical activity together?

How do they like to move their body?

What is challenging about being active?

What sorts of sensory experiences influence their movement activities?

What is your goal for physical activity?

Sedentary Behaviour

What does sedentary behaviour mean to you?

How much time does your child typically spend sedentary each day?

What sorts of seated activities does your child have fun doing?

How does your family engage in sedentary behaviour together?

How are you feeling about your ability to manage screen use in your house?

What is challenging about sedentary behaviour?

What sorts of sensory experiences influence their sedentary behaviour?

What is your goal for sedentary behaviour?

Sleep

What does quality sleep mean to you?

Does your child have difficulty with getting to sleep or staying asleep?

What is currently working to help your child get to or stay asleep?

What does a typical sleep schedule (naps, sleeps) look like in your house?

Does your family have a sleep routine you typically follow?

Does your child have books or bath time toys that they enjoy?

Do you feel like you have the skills you need to get your child to sleep at night?

What is challenging about going to sleep or staying asleep?

What sorts of sensory experiences influence their sleep?

What is your goal for sleep?

Early Movers

Companion Tool for Caregivers

The Canadian 24-Hour Movement Guidelines recommend how preschoolers should spend their day. They cover physical activity, sedentary behaviour, and sleep.



These recommendations are not prescriptions.

Your OT can help adjust these guidelines to fit your family's needs. They can find a balance of quality and meaningful movement.

Families of preschoolers with disabilities can aim for:

Move

- 🚖 3 hours spent in a variety of physical activities spread throughout the day, of which at least 1 hour is energetic play—more is better.
- Trade indoor for outdoor time when possible.

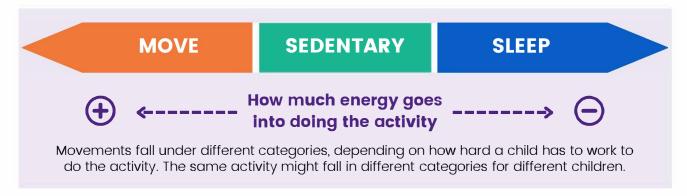
Sedentary Behaviour

- 🖈 Whenever possible, break-up long periods of disengaged sitting, especially when it is more than I hour at a time.
- ★ Limit passive sedentary screen time to less than 1 hour—less is better.
- 🛊 Engage in meaningful and interactive sedentary pursuits, such as reading and storytelling with a caregiver.

Sleep

🖈 10 to 13 hours of good-quality sleep, which may include a nap, with consistent bedtimes and wake-up times.

Any amount of physical activity, healthy balances of sedentary behaviours, and improvements in sleep quality are good, even if your child does not hit these targets.



Movement is about balance, and each day may look different. The goal is to build a routine that supports your child's well-being.

Healthy Movement for Preschoolers

Balanced levels of physical activity, sedentary behaviour, and good sleep matched to a child's abilities are important the health, development and wellbeing of all children.

A healthy 24-hour day is made up of lots of different types of movement.

How can caregivers encourage healthy movement behaviour?

Physical Activity

Is any movement that uses muscles and energy. In preschoolers, this usually happens through play.



Physical Activity

- Spend time outside
- Model physical activity around children
- Play together
- Use portable play equipment and loose
- Minimize screen use

Sedentary Behaviour

Is any activity that takes place when a child is awake, and there is a very low level of energy being used.

The type of sedentary behaviour is important.

Sedentary Behaviour

- Try crafts, puzzles, games, toys and
- Do sedentary activities together with your child
- Trade passive screen watching for engaging seated play
- Spend time outside

Sleep

Is affected by lots of factors and can look very different for each person.

When it comes to good sleep, it is not really about a magic number.

If children feel tired during the day, it could be related to the amount or quality of sleep.

Sleep

- Establish bedtime routines
- Keep regular bed and wake times
- Protect the last I hour before bed for screen-free time





Ask your OT about the Canadian 24-Hour Movement Guidelines for tips, tricks, and resources.

Physical Activity

Phyiscal activity, is any movement that uses muscles and energy. In preschoolers, this usually happens through play. Physical activity is linked with:



Fundamental, gross, and fine motor skills



Planning and problem solving



Wellbeing



Heart Health



Bone health



Concentration and attention



Brain development



Better sleep



School readiness



- There are lots of benefits for preschoolers' minds and bodies when they move.
- Any amount of fun movement in a way that makes sense for your child and family is a great start towards building a balanced routine and supporting your child's overall wellbeing.

National and International Physical Activity Resources

Relevant	Program	QR	Description
Y / N	<u>Jumpstart</u>		Curriculum-based, virtual programming series designed to help keep kids active at home.
Y / N	<u>Pathways</u>		Games to get kids moving at home.
Y / N	The Australian Parenting Website		Ideas, videos, and education on play and physical activity for preschoolers.
Y / N	<u>GoNoodle</u>		Get kids moving with short interactive activities; also available in an app.
Y / N	Outdoor Play Canada		Evidence-based learning available for caregivers.
y / N	<u>National Center on Health,</u> <u>Physical Activity and</u> <u>Disability</u>		Games to play at home to get kids moving.
Y / N	<u>Special Olympics</u>		A global organization that serves athletes with intellectual disabilities. <u>Active Start: program for preschoolers</u>

Additional Resources in Your Community

Physical Activity Diary

Use the following worksheet to log victories and challenges between therapy sessions.

Next Visit:	
What are some things that was really fun that your child did to move their last visit?	r body since our
On average, how much time did your child spend moving each day?	
How did your family engage in physical activity together?	
Did you try out a community resource or new activity since our last visit?	
What did you find challenging about being active?	
What sorts of sensory experiences influenced your child's movement activ	rities?
What is your goal for physical activity? Are there resources you want to he this goal?	elp you achieve

Movement Planner

Together with your OT, use this planner to identify times of the day your child and family can try to incorporate movement into your schedule.

Your OT can help you consider:

- Thinking about activities your family already does and your child enjoys.
- Starting small and focusing on meaningful movement, not big overnight changes.
- Time for sitting, resting, and sleeping. Sedentary activities can be engaging and are important too.

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
7:00							
8:00							
9:00							
10:00							
11:00							
12:00							
1:00							
2:00							
3:00							
4:00							
5:00							
6:00							
7:00							
8:00							
9:00							

Loose Parts and Sensory Toy Box

Loose parts are commonly found objects that can be moved, combined, taken apart, or explored in a way that allows a child to use their imagination during play. There are no set instructions.

Any items found around the house or in nature that are interesting and enjoyable for your child to play with can be included in your toy box. Loose parts play supports physical activity, wellbeing, and development. It can also incorporate sensory play opportunities. The key is letting your child use their imagination to guide the experience. Here are some ideas...



Objects that feel different when touched (tactile)

- Sand/Water bins
- Sticks
- Pinecones
- Pipe cleaners Velcro
- Play dough
- Fabric or old tights
- Beads
- Shells and rocks
- Wood
- **Paint** Ice cubes Pompoms

Objects, that create sound (auditory):

- Pots and pans
- Spoons
- Whisk
- Cardboard tubes
- Acorns and stones
- Leaves
- Water
- **Buckets** Bubble wrap
- Sticks

Use the extra bullets to add your own ideas!

Objects that allow for processing information seen with the eyes (visual):

- · Coloured gift wrap
- Paint
- Photos of favourite
- characters • Things for stacking or throwing objects into such
- as boxes Lights
- Bubbles
- Objects with high contrast colours
- Bottles or jars

Objects that provide heavy work (proprioception):

- Branches
- Rocks
- **Buckets**
- Tools
- Thick blankets or towels
- Water
- Wood
- Bean bags
- Rolling pins
- Old nylons/pantyhose

Objects that provide a smell (olfactory):

- Herbs
- Dried fruit
- Pinecones
- Leaves
- Wood
- Sticks Play dough
- Flowers

Objects that provide mouth stimulation (oral Motor):

- Marshmallows
- Edible play dough
- Straws

Objects which incorporate moving the body in space (vestibular):

- · Cardboard boxes of all sizes to build and crawl
- Wood to stack and jump from
- Exercise ball

You can also explore feelings inside of your child's body (interoception) while playing, through conversation: e.g., how do you feel when you bounce up and down?

Adapted from: Casey T, Robertson J. Loose Parts Play: A Toolkit. Inspire Scotland. 2019. For more information and loose parts play strategies, visit their website.



Sedentary Behaviour

Sedentary behaviour is any activity that takes place when a child is awake, and there is a very low level of energy being used. The type of sedentary behaviour is important.

Risks of Too Much Sedentary Behaviour:



Extended time spent in baby seats, car seats, high chairs or strollers can affect motor development.



Sedentary screen time can impact development wellbeing and regulation.



Benefits of Engaging in Sedentary Behaviours:



Reading or storytelling supports brain development.



Age-appropriate educational screen activities may support empathy, tolerance, and respect.



Some apps show potential to foster play, creativity, and fine motor skills.



Tablets may provide interactions which involve executive function.

- There are many types of sedentary behaviours for preschoolers.
- Some are very important for their learning and development.
- We can balance quality sedentary activities that support learning, connection, and engagement while limiting passive screen time when possible.

National and International Sedentary Behaviour Resources

Relevant	Program	QR	Description	
Y / N	CBC Kids in Canada		CBC Kids and Studio K is a digital playground designed for kids.	
Y / N	Common Sense Media		Independent source for media recommendations and advice for families.	
Y / N	Dolly Parton's Imagination Library		A free book gifting program devoted to inspiring a love of reading in young children.	
Y / N	PBS Kids		Educational games and videos; also available in an app.	
Y / N	<u>Learning through Play</u>		Ideas for play-based activities.	
Y / N	Apps		Baby Games; Khan Academy Kids; Hungry Caterpillar Play School; Sesame Street	

Additional Resources in Your Community

Sedentary Behaviour Diary



Use the following worksheet to log victories and challenges between therapy sessions.

	Next Visit:
What are some sedentary thi	ngs that was really fun that your child did since last visit?
On average, how much time of Think about activities with an	did your child spend in different sitting activities each day? d without screens.
How did your family engage i	n sedentary behaviour together?
Did you try out a community	resource or new activity since our last visit?
What did you find difficult or	challenging since our last visit?
How has screen time been go	ing since our last visit?
What sorts of sensory experie	nces influenced your child's sedentary behaviours?
What is your goal for sedento help you achieve this goal?	ry behaviour or screen use? Are there resources you want to

Family Screen Time Plan

Below are some things to think about when creating a family screen time plan. This can be a starting point for families (especially those with older siblings) to establish their own plan.



THE FAMILY SCREEN TIME PLAN
To help our family create healthy screen habits, we agree to follow this plan for when and how we use screens.
Daily Screen Time Limits Screen time includes:
2) Screen-Free Moments Our family keeps screens off during (check all that apply): Meals together Bath time Family time Before naps and bedtime Outdoor play Car rides (except for long trips) Reading time
 3) Travel and Special Occasions When traveling, screen time will be limited to hour(s) per day. During outings and family activities, devices stay at home, in the car, or in a designated bag. One device may be used for taking photos or emergencies.
Where Screens Are Used Screens are used only in the following rooms: Devices are not used in:
 Fun Activities Instead of Screens Our family enjoys these activities instead of screens (check all that apply): Playing outside Playing with toys and puzzles Reading books Doing arts and crafts Cooking together
 6) Safe Screen Use Our family only watches age-appropriate shows and plays games chosen by a grown-up. Screen time is always supervised. We do not use screens to avoid feelings like boredom or frustration. If we see something confusing or upsetting, we talk to a grown-up.
 7) When the Plan Is Not Followed If someone does not follow the plan, screen time may be paused for hour(s). A grown-up will decide when screens can be used again.

Sleep

Sleep is affected by lots of factors and can look very different for each person. When it comes to good sleep, it is not really about a magic number. If children feel tired during the day it could be related to the amount or quality of sleep.

"Good quality sleep" in preschoolers involves:

- A high ratio of sleep to wake time while in bed.
- A shorter amount of time from being awake to asleep.

Good Sleep Impacts:



Quality of life



Energy for movement throughout the day



Regulation



Mood



Health and wellbeing for the entire family

• Fewer awakenings more than 5 minutes long, and number of times waking up after falling asleep.

Poor Sleep Impacts:



Overall health



Increased symptom presentation of disabilities



Language development



- Sleep can be tough, especially for preschoolers with disabilities.
- Getting enough good-quality sleep is important for health, but it may take time and practice to find what works best for each child.
- Overall, staying active during the day and limiting screen time before bed can help preschoolers sleep well at night.

National and International Sleep Resources

reaction and international close Researces				
Relevant	Program	QR	Description	
y / N	<u>Autism Speaks</u>		Strategies to Improve Sleep in Children with Autism. • <u>Sleep Toolkit</u> : resources including a visual timeline and a family media plan template.	
Y / N	<u>Better Nights, Better Days</u>		Evidence-based research program from Dalhousie University.	
Y / N	Canadian Paediatric Society		Information for caregivers from Canada's paediatricians on sleep in children and babies.	
y / N	<u>Canadian Sleep Research</u> <u>Consortium</u>		National hub of sleep scientists and clinicians advancing research and interventions to optimize sleep. • Sleep Tips for Preschoolers	
y / N	<u>Pediatric Sleep Council</u>		Accurate and up-to-date information on sleep in young children for caregivers.	
Y / N	Sleep on it Canada		Evidence-based fact sheets.	
Y / N	The Australian Parenting Website		Free, evidence-based caregiver resources	

Additional Resources in Your Community

Sleep Diary

Use the following worksheet to log victories and challenges between therapy sessions.

Next Visit:	
How has your child and your family's sleep changed or stayed the s visit?	same since our last
On average, how much time did your child spend sleeping each day	y/night?
How is your sleep routine going? What did you incorporate in the ro	outine?
What did your child find fun about the sleep routine or strategies yo	ou tried?
What did you find challenging about sleep time since our last visit?	•
Did you try changing the sleep environment? How did it go?	
What sorts of sensory experiences influenced your child's sleep?	
What is your goal for sleep? Are there resources you want to help ve	ou achieve this goal?

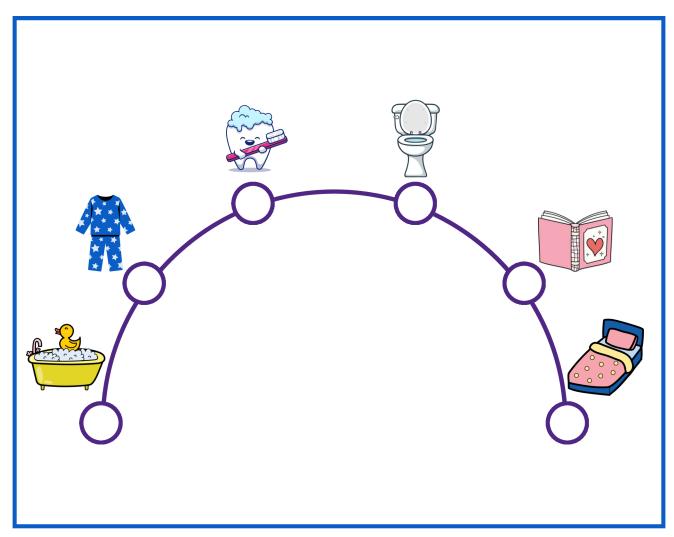
Visual Bedtime Routine

Use the following timeline to help your child process and engage in their evening schedule.

Print off a small photo your child. Use tape or velcro to move the photo around the circles as the child moves onto the next activity. Use the templates on the next two pages to make your own and your child can colour them in.

Tips:

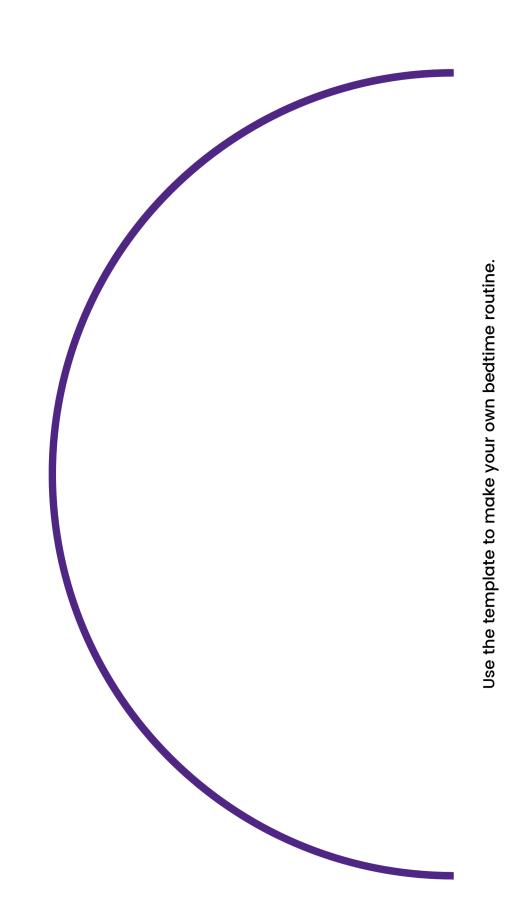
- Put the schedule in the child's bedtime area, at a height they can use it.
- Only your child should move their photo around the schedule. Try to ask questions to prompt your child to move their photo, for example: "what happens after we brush our teeth?"
- Celebrate your child when they use the schedule, for example: "Great job putting on your pyjamas!"



Adapted from: Autism Speaks. Sleep Toolkit. Vanderbilt University. For more information and sleep strategies, visit their website.



's Bedtime Routine





Use the template to make your own bedtime routine.

Body Scanning

Body scanning before bed is an interoception activity that can help preschoolers tune into their bodies. By guiding them to focus on different parts

of their body and practice deep breathing, body scanning can help little ones to relax. If they need some help, you can use a light touch on your child's body as you read. For children who have difficulty with motor control, try instructing them to imagine the feeling of tensing and releasing the muscles.29 Use this script together when the child is in bed, right before you exit the room.



Snuggle in, so soft and tight, it's time to rest and say goodnight. Close your eyes and breathe in deep. Let's help your body fall asleep.

Wiggle your toes, now hold them tight. Squeeze them closed with all your might. Now let them go and feel them sigh, like little clouds up in the sky.

Stretch your leas out like a tree. Hold them tight and count to three. Now let them fall like autumn leaves, they blow away into the breeze.

Fill your belly, big and round. Like a balloon leaving the ground. Now let it go into the sky, raise your hands and wave goodbye.

Make your hands two tiny fists, pretend you're holding a slippery fish. Now let them open, soft and slow, back to the water your fish will go.

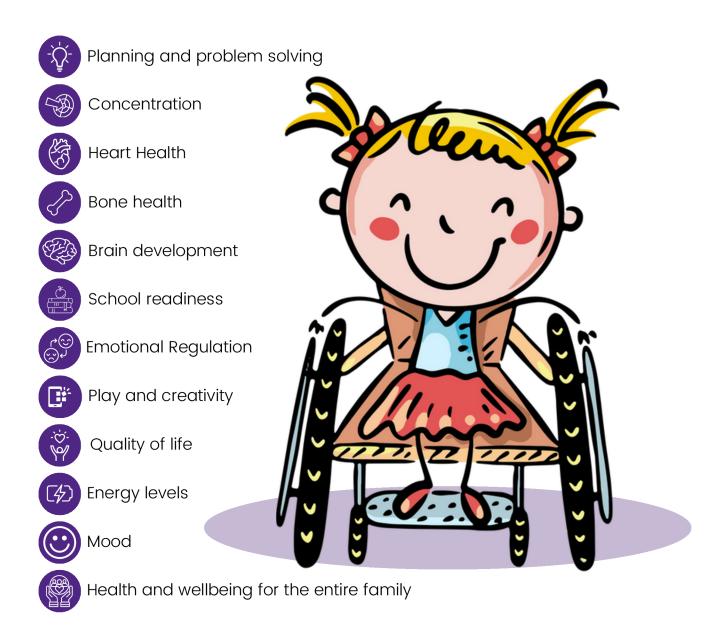
Bring your shoulders up so high. Pull them up towards the sky. Now drop them down, relax for bed. It's time to move onto your head.

Scrunch your face up really small. Eyes, nose, mouth - squeeze them all. Now let it go, so soft and light, it's almost time to say goodnight.

One more breath, soft and slow, drifting off in moonlight's glow. Time for dreams, stars above, you're warm, you're safe, and you are loved.

Healthy Movement for Preschoolers

Balanced levels of physical activity, sedentary behaviour, and good sleep help preschoolers with...



Ask your OT about the Canadian 24-Hour Movement Guidelines for tips, tricks, and resources.

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