The Healthy, Hunger-Free Kids Act of 2010 (HHFKA, PL 111-296) required sweeping changes to the USDA Child Nutrition Programs, including the Child and Adult Care Food Program (CACFP). The Act expanded the purpose of CACFP to promote health and wellness in child care settings and mandated the USDA to provide training and technical assistance to help child care centers and family or group day care homes comply with current nutrition, physical activity, and electronic media use recommendations. Under the HHFKA, CACFP centers and homes are encouraged to follow the most recent Dietary Guidelines for Americans to serve foods recommended for increased consumption, reduce sedentary behaviors, and provide opportunities for regular physical activity.

In 2013, USDA contracted with FCB Garfinkel, KRC Research, and Weber-Shandwick to conduct formative research among CACFP audiences in the areas of nutrition, physical activity, and electronic media use. The purpose of the research was to determine perceived challenges in implementing recommendations in the three areas, the corresponding training and technical assistance needs, and preferred delivery formats of training and resources.

Phase 2 of the research consisted of seven followup telephone focus groups, randomly pulled from those Phase 1 participants who volunteered to participate in further research. Each of the CACFP audiences was represented in the focus groups, which elaborated on the findings of the Phase 1 survey and explored unanswered questions.

### Findings

#### Nutrition

- All groups were at least somewhat familiar with the 2010 Dietary Guidelines for Americans (DGAs) and interest in meeting the DGA recommendations was high.

- Sixty-three percent of child care centers and 60 percent of family day care homes reported serving their meals family style rather than preplated. Providers who preplate meals expressed in focus groups that they want to know more about how to successfully implement family style service.

- Reflecting CACFP nutrition guidelines, 94 percent of child care centers and family day care homes said milk is served at all, most, or some meals and snacks. Few (1 percent) said they serve sugary drinks or soda at all or most meals.

- Nearly 6 in 10 providers reported that fruits, whole grains, and vegetables were served during all or most meals on the preceding day.

- Fried foods, nuts and seeds, and sweet snacks were not served as frequently; under 5 percent of child care centers and family day care homes reported serving any of these in all or most meals on the previous days.

- All audiences would appreciate nutrition guidelines specific to age groups.
  - Providers would like help with meal planning, recipe ideas, and managing food

### Method

The research was conducted in two phases. Phase 1 consisted of an electronic or telephone survey administered nationwide to randomly selected CACFP audiences – providers (child care centers and day care homes), sponsoring organizations, and State agencies. A total of 1,402 structured qualitative interviews (SQIs) were conducted during this phase. The SQIs asked detailed questions regarding knowledge and practices in the areas of nutrition, physical activity, and electronic media use, as well as challenges and areas of interest for guidance and assistance.
costs (the top challenges reported).

- Audiences would also benefit from training and information on availability of fresh produce and managing children’s preferences.
- Providers want to learn from peers about best practices in promoting healthy habits not only among children, but also among the parents of children in their care.

**Physical Activity**

- All groups recognized the value of age-specific physical activity guidelines.
  - Guidelines can help create structure.
  - Some providers are less familiar with what children can do at different ages.
- Time for physical activity reported by providers is consistent with what they perceive to be best practices – but not always consistent with actual recommendations.
- Key factors providers consider when deciding on physical activity included safety, caregiver-to-child ratio, children’s clothing and footwear, and space or equipment limitations.
- Key barriers to promoting physical activity included weather and limited indoor spaces. Examples of structured and unstructured play conducive to small spaces and ideas for indoor activities would help providers overcome these barriers.

**Electronic Media Use**

- Electronic media use is widespread, with 82 percent of child care centers and 91 percent of family day care homes saying that electronic media is used at their child care facilities.
- Audiences differ in perceived appropriateness of use in child care settings:
  - State agency staff are more likely to say young children should not be exposed to electronic media.
  - Most providers and sponsoring organizations see electronic media as an asset if both limited and appropriately used.
  - Providers discuss primarily using electronic media for educational purposes, with some reporting having well-defined strategies for limiting electronic media use.

- Use is associated with age: younger children are allowed less screen time per day than older children.
- Finding activities for mixed-age groups is a top challenge to limiting electronic media use in child care settings.

**Needs Assessment**

- All audiences want information and training on a range of topics, with the greatest number of topics concerning nutrition.
- Technical assistance and training needs and interests are aligned most clearly around nutrition over physical activity and electronic media use.
- Preferences vary around the delivery of information and training, so one size will not fit all – multiple formats for delivering the same content are needed.
  - Overall, interactive training methods and peer learning, when possible, are preferred.
  - Videos, webinars, and in-person trainings are all considered useful.
  - Print materials are useful because they can be shared with parents and can provide expert reference for decisions and behaviors.
  - Social media can also play a role in helping providers communicate to parents.
- There is a need to increase awareness among CACFP audiences about the roles each can play in encouraging nutrition, physical activity, and electronic media use best practices, and how that ties in to the expanded purpose of CACFP.

**For More Information**


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