Improving Nutrition and Promoting Wellness in Child Care With CACFP

State agencies can implement innovative state policies and initiatives to enhance Child and Adult Care Food Program (CACFP) nutrition standards in child-care settings through guidelines and recognition programs, supported by training and technical assistance. By working proactively to pave the way for meal-pattern improvements required by the Healthy, Hunger-Free Kids Act, CACFP can help to improve nutrition and prevent obesity among low-income children whose families have limited access to nutritious foods and physical activity. Enhanced CACFP nutrition standards, consistent with current dietary guidance and nutrition recommendations, can improve participants' diets by reducing the prevalence of inadequate and excessive intakes of food, nutrients, and calories.



The Case for Improving Nutrition and Promoting Wellness in Child Care With CACFP

Food insecurity, overweight, and obesity are all serious problems for American children. Food insecurity affects 22.4 percent of households with children, and the rate is even higher—24.5 percent—for the subgroup of children under age six. Slightly more than 20 percent of preschoolers are overweight or obese; for school-age children, the figure is nearly 32 percent.

CACFP uses federal dollars to provide nutritious meals and snacks to low-income children in child-care centers and family child-care homes. Research has demonstrated CACFP's positive impact. In its report Local Government Actions to Prevent Childhood Obesity, the Institute of Medicine identified increasing participation in CACFP as a strategy to promote healthy eating, citing research on the association between participation in federal nutrition assistance programs, improved dietary quality, and decreased risk of overweight among children. Data from the Fragile Families and Child Wellbeing Study, presented in Federal Food Policy and Childhood Obesity: A Solution or Part of the Problem?, showed that participation in federal child care and school meal programs, such as the CACFP, is associated with a lower body mass index in children, particularly low-income children.

As beneficial as CACFP already is, the program can be strengthened to more effectively improve children's nutrition and further reduce obesity. With the new, broader mandate from the Healthy, Hunger-Free Kids Act (HHFKA), now is the time to move forward with these best practices to assure that CACFP can play an even stronger role in efforts to improve nutrition and combat childhood obesity.

Implementation

State CACFP agencies have improved the nutritional value of meals and snacks in participating child-care centers and homes by introducing:

- Enhanced CACFP nutrition standards through guidelines and recognition programs, which assure that only healthy meals and snacks fully consistent with current nutritional science and the U.S. Dietary Guidelines are served; and
- CACFP training and technical assistance for program operators, and nutrition education for children, teachers, and parents.

Because it already has nutrition standards and can phase in additional policies, CACFP is one of the best vehicles for successfully implementing wellness-promoting changes. Specifically, CACFP's meal-pattern requirements must be fulfilled by participating child-care centers and homes. For example, breakfast must include one serving of milk; one serving of vegetable and/or fruit or full-strength fruit or vegetable juice; and one serving of bread, cereal, rice, or pasta. While these rules ensure that any meal served is nutritious (and often closer to the Dietary Guidelines than a child would have without CACFP), they do allow for a wide range of meal options, some of which are less consistent with the Dietary Guidelines than others.

Stronger state policies can enhance the CACFP meal pattern by including additional recommendations based on the Dietary Guidelines, encouraging more whole grains, more whole fruits and vegetables, less juice, leaner meats or protein sources, and less sugar (including limiting high-sugar cereals). These enhanced standards will also help providers transition to the new federal meal pattern scheduled to be implemented in several years.

State agencies can use education, training, and support to promote these enhanced nutrition standards, developing instructional materials, curriculum, and trainings for use by sponsoring organizations, child-care trainers, and nutrition educators. CACFP education and training can focus on strengthening adherence to existing CACFP nutrition standards and/or the successful implementation of new state nutrition policies. Comprehensive education campaigns can also focus on participating children and their parents. The new USDA-HHS publication, Nutrition and Wellness Tips for Young Children: Provider Handbook for the Child and Adult Care Food Program, is an excellent tool with a wealth of practical advice for providers.

Advocacy partnerships are key to strengthening the role of CACFP in supporting good child-care nutrition. State agencies and advocates can establish an advisory council or working group, or work with existing ones; schedule CACFP listening sessions or hold statewide CACFP summits; or rely instead on occasional meetings and interviews.

Advocates from nutrition, obesity, child-care, and anti-hunger, provider and sponsor organizations and coalitions can provide valuable input at every stage of the process:

- In the planning stage, advocates can help create and administer surveys; review
 educational and marketing materials; assess translation and literacy requirements; suggest culturally appropriate options; and make recommendations for
 overcoming barriers and identifying facilitators to productive improvements.
- In the implementation stage, advocates can offer coordinated positive messages emphasizing the value of the nutrition and physical-activity improvements in child care (such as "CACFP Is the Gold Standard in Nutrition"). Depending on their areas of expertise, advocates may be able to provide training, support, and problem-solving assistance to CACFP sponsors, family child-care homes, childcare center and after-school program staff.
- In the evaluation stage, advocates can provide valuable feedback on the impact of the new policies, standards, and/or training initiatives, and make recommendations for adjustments.

Routes to Improving Nutrition and Promoting Wellness in Child Care With CACEP

State CACFP agencies can issue enhanced nutrition standards in a formal guidance memorandum, guidebook, and/or as recognition program requirements. State CACFP agencies have created innovative best practices in training and education focused on improving nutrition in child care. Key steps include conducting a needs assessment, identifying options, and generating a plan. The following examples highlight specific nutrition standards to implement as well as creative ways to garner support for changes and then implement them.

- New York: The CACFP agency within the State Department of Health has developed the Healthy Child Meal Pattern for participating childcare providers. Issued as policy guidance, these updated nutrition recommendations help ensure that providers serve nutritious foods consistent with the Dietary Guidelines. The nutrition standards, which included a focus on serving lower fat milk, paved the way for an easy transition to the new federal lower fat milk requirement. These changes are part of a childhood obesity prevention initiative called Eat Well Play Hard in Child Care Settings, which provides preschool-age children in childcare and their parents with nutrition and physical activity education.
- Connecticut: The State Department of Education implemented the Connecticut Child Care Nutrition Standards as part of a larger initiative to improve health and wellness in CACFP childcare. A set of recommendations for all meals and snacks served in child-care settings, the enhanced nutrition standards were issued as part of the project's Action Guide, and each nutrition standard is accompanied by extensive rationale, background information, and tips. Six regional workshops, aimed at CACFP child-care centers (including Head Start) and sponsoring organizations, were held to promote the action guide and facilitate implementation of the nutrition standards and other recommendations.



- Maryland: The ABC Child Care Nutrition Guidelines were developed by the CACFP section of the
 Maryland State Department of Education, School and Community Nutrition Programs Branch. Modeled
 after a similar program from the Contra Costa Child Care Council in California, the guidelines were sent via
 a series of internal memos on a password-protected, document-sharing website for CACFP centers. The
 one-page guidelines, which are posted as a fillable PDF and include the official Maryland state seal, are
 designed to function as a self-assessment checklist that, when completed, can be used by the provider to
 market their high nutrition standards to parents and to engage parents as partners in the nutrition policy.
- Missouri: The Missouri Department of Health and Senior Services, Bureau of Community Food and Nutrition Assistance, established an interdisciplinary workgroup to create a recognition program. The Missouri Eat Smart Guidelines challenge child-care facilities to make nutrient-dense foods available and to embrace policies that support a healthy nutrition environment, while also providing simple, straightforward implementation strategies. CACFP child-care providers can be certified as meeting the nutrition recommendations at one of three levels: minimum, intermediate, and advanced.
- California: The California Department of Education, Nutrition Services Division launched a
 CACFP recognition program, Preschools Shaping Healthy Impressions through Nutrition and
 Exercise (SHINE). The 10-part program focuses on enhanced nutrition standards, mealtime
 environments, classroom nutrition education, edible gardens, physical activity, wellness policies,
 professional development, partnerships, and leadership teams. To become a Preschools SHINE site,
 child-care sites must complete required online training, attend Preschools SHINE Forums, conduct
 self-assessment of their environments, and develop policies and practices to SHINE.

Challenges, Lessons, and Resources

CACFP state agencies, sponsoring organizations, and advocates have learned some valuable lessons from the implementation of these best practices. Strategies for success include:

- Engaging stakeholders directly affected by the initiative;
- Creating a balanced plan to maximize the positive impact on nutrition and program participation;
- Avoiding expensive or burdensome requirements;
- Assuring practicality by planning a menu with readily available foods;
- Implementing improvements gradually; and
- Addressing language and literacy issues.



Engaging stakeholders directly affected by the initiative is crucial to its acceptance and success. Conducting a survey, holding a series of group meetings, and/or establishing an advisory committee or working group are all productive mechanisms for engaging providers and sponsoring organizations. It is important to pay particular attention to addressing common barriers and facilitators identified by stakeholders, including costs, staffing, facilities, access to required foods, policy experience, knowledge and skills, and the perceived preferences of children and parents.

A crucial lesson learned is to implement change gradually, allotting time for evaluation or feedback at the end of each stage. Prepare clear and consistent written guidance for every improvement, conduct thorough training, and offer technical assistance throughout. Busy child-care directors rarely have a whole day to devote to CACFP training, so consider controlling travel time and costs by planning a mix of training webinars and meetings.

Experience has also shown that very expensive requirements are not within the budget of many providers, who struggle to keep their fees affordable for low-income families. Higher priced requirements will be met with understandable opposition.

Before launching new nutrition standards, pilot the standards by planning at least a four-week menu with readily available foods. Providers in rural and low-income areas may have limited access to some healthier food products. Enhanced nutrition standards that mirror WIC food products—such as whole grain breads/tortillas, unsweetened fruits and vegetables, whole grain and low-sugar cereals—can sometimes help overcome "food deserts" with limited availability. Where healthier options are available, provide a list of "qualifying" choices by product name and brand. Ultimately, if the new nutrition standards rely on products not currently available in some areas of the state, be clear about expectations for providers in those areas. In addition, for centers that rely on vendors, it is helpful to allow healthier products that meet the new school meals standards.

Plan to address language barriers by translating materials and having bilingual staff on hand for trainings and on-site visits. In addition, literacy issues can prevent child-care providers and child-care center cooks from understanding the new nutrition education initiative and enhanced nutrition guidelines. Keep materials simple and with the appropriate reading comprehension level. Posting webinars and training videos on your website can also be very helpful.

For additional information and resources:

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