



Policy, Systems, and Environmental Change in California Childcare Settings

Presented by
Sabrina Adler
Staff Attorney

In partnership with the Network for a Healthy California



DISCLAIMER

The information provided in this discussion is for informational purposes only, and does not constitute legal advice. ChangeLab Solutions does not enter into attorney-client relationships.

ChangeLab Solutions is a non-partisan, nonprofit organization that educates and informs the public through objective, non-partisan analysis, study, and/or research. The primary purpose of this discussion is to address legal and/or policy options to improve public health. There is no intent to reflect a view on specific legislation.



Warm Up!

Agenda

1. Regulation of Childcare in California
2. PSE in the Childcare Setting
3. PSE Case Studies
4. California's Healthy Beverages in Childcare Law
5. Firsthand Account from a Childcare Provider
6. Questions!



Regulation of Childcare in California



POLL:

How many children ages 0-6 in California need childcare because their parents work?

Childcare in California

I. What is Childcare?

II. What Funding Pays for Childcare?

III. What Authority Governs Childcare?



I. What Is Childcare?

Childcare = non-medical care and supervision to children under 18 on less than a 24-hour basis.

All types of care – whether called preschool, day care, nursery school, or something else – are treated the same under the law and must be licensed, unless they are exempt.

CA – largest population of low-income kids ages 0-5 – 1.3 million (source: First Five)

Categories of Available Childcare:

- ✓ Licensed Childcare
 - Childcare Centers: 593K slots, 10.6K facilities (2012)
 - Licensed Family Childcare Homes: 370K slots, 38K facilities (2012)
- ✓ License-Exempt Childcare

–Source: CA Dept. of Social Services, Community Care Licensing

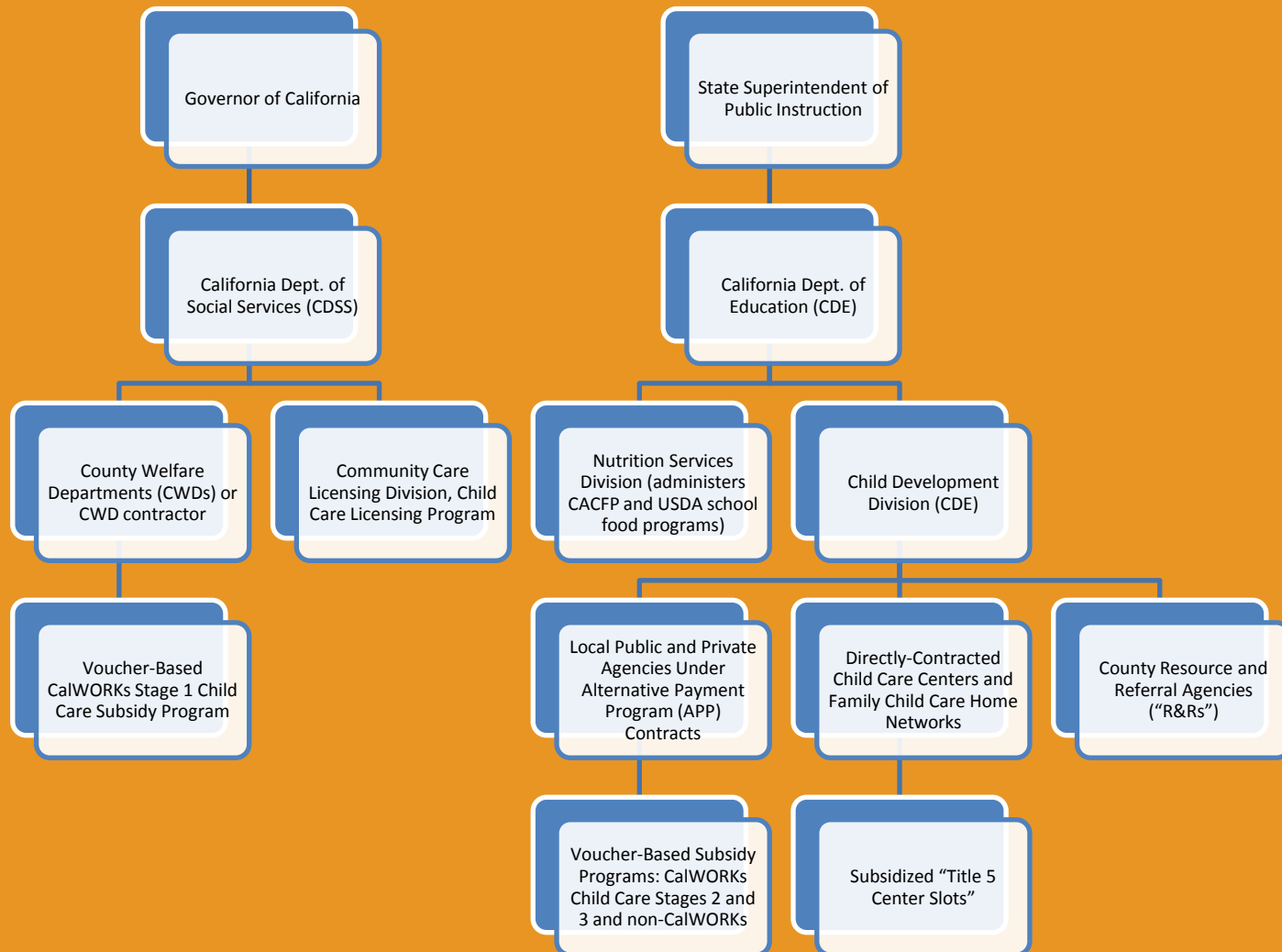
II. What Funding Pays for Childcare?

- Federal funding
 - TANF (CalWORKs programs)
 - Social Services Block Grant (also CalWORKs)
 - CCDF Block Grant (CDE programs)
 - Head Start
 - CACFP
- State funding
 - General fund
 - First Five
- Local funding
 - Taxes, local fees, etc.

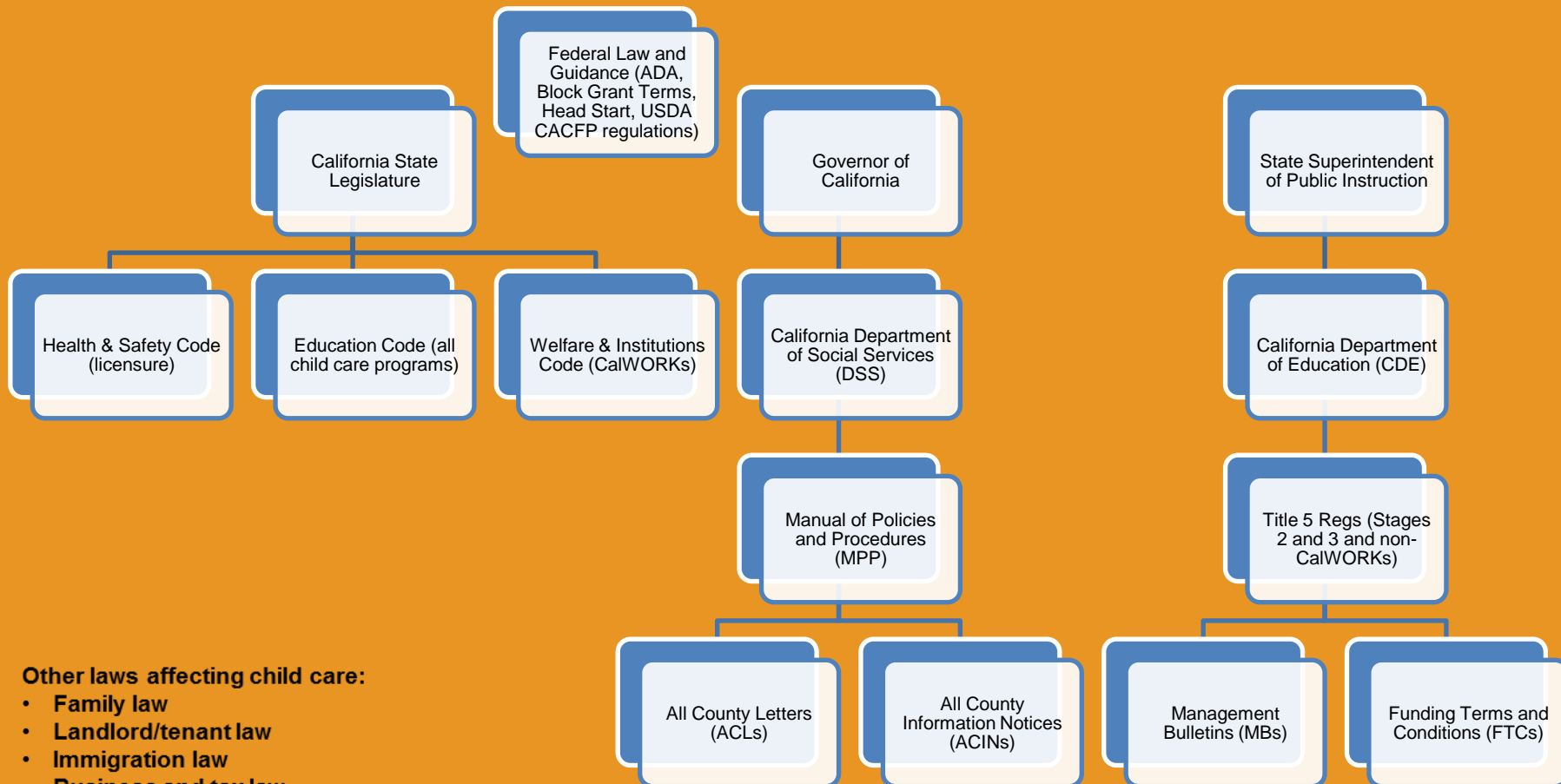
State Quality Improvement Programs

- Programs To Promote Quality, Health, and Safety
 - ✓ State-administered (CA Early Learning Quality Improvement System)
 - ✓ Child Care Development Fund (administered locally by R&Rs, local councils, etc.)
 - ✓ First 5 programs and commissions (Quality Rating and Improvement Systems, Preventative Health and Oral Health Services)
 - ✓ California Early Learning Advisory Council
 - ✓ California Early Childhood Mentor Program

III. What Authority Governs Childcare? Administrative Agencies



Legal Framework



Other laws affecting child care:

- Family law
- Landlord/tenant law
- Immigration law
- Business and tax law
- Disability law
- Contracts law
- Local ordinances (business licensing, land use, zoning)
- Employment law
- Insurance law
- Criminal law

Child and Adult Care Food Program (CACFP)

- Provides financial assistance to licensed childcare providers for meals.
 - Regulated on the federal level (USDA); administered by the state (CDE)
 - Mixed federal and state funding
- Room for more participation
- New nutrition regulations set to be released this year – will be open for public comment
- <http://www.teamnutrition.usda.gov/Resources/nutritionandwellness.html>

PSE in Childcare



Why focus on nutrition and physical activity in childcare?

POLL:

What percentage of California's low-income Children ages 2-5 are overweight or obese?

PSE Strategies

- ✓ Nutrition Strategies
- ✓ Physical Activity Strategies

Nutrition Strategies



Network for a Healthy California

- Develop, implement, and evaluate food and beverage policies for childcare settings that meet United States Department of Agriculture (USDA), Centers for Disease Control and Prevention (CDC), Let's Move! Child Care (LMCC), or American Academy of Pediatrics (AAP) standards
- Encourage childcare center and student participation in federal food and nutrition assistance (CACFP, WIC, and SNAP)
- Support breastfeeding in childcare
- Improve capacity of childcare providers and food service staff in nutrition education and healthy meal planning and food preparation
- Develop, implement, and evaluate childcare gardens
- Start and expand Farm to Child Care programs
- Promote access to drinking water
- Support development of wellness councils
- Establish strong childcare wellness and education programs and policies consistent with LMCC
- Provide parent education through the childcare setting



Physical Activity Strategies

- Develop, implement, and evaluate physical activity policies and environments that meet USDA, CDC, LMCC, or AAP standards
- Limit screen time
- Develop, implement, and evaluate active transport programs
- Establish strong childcare wellness educational programs and policies consistent with LMCC
- Improve capacity of childcare providers to provide children with opportunities for physical activity throughout the day, including outside play when possible
- Support development of childcare wellness councils
- Provide parent education through the childcare setting

PSE Case Studies



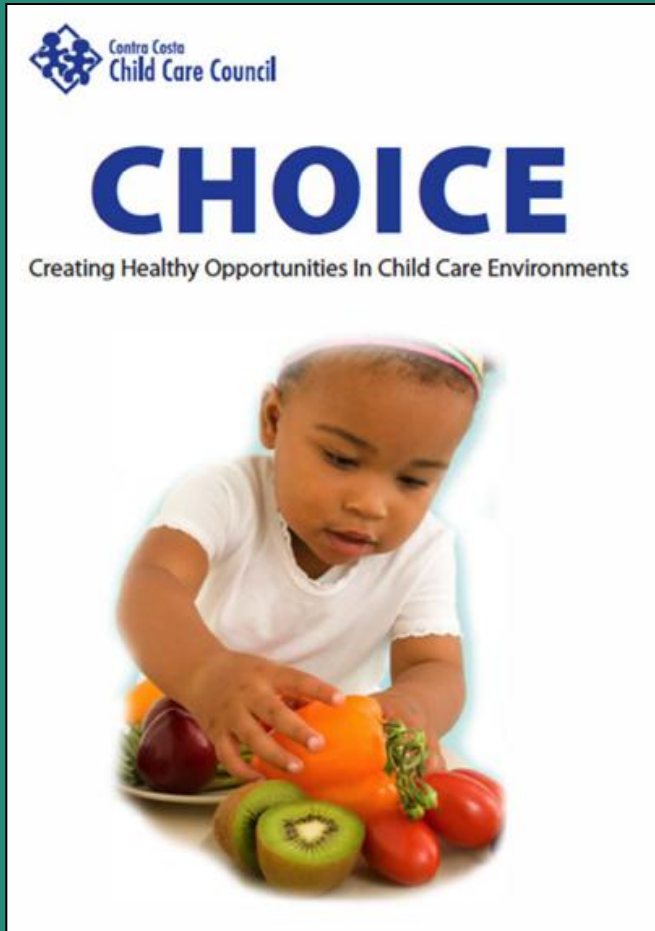


Increasing Physical Activity in Childcare Facilities in Butte County

Butte County

- Goals:
 - ✓ Develop, adopt, and implement policies supporting PA and outdoor play
 - ✓ Promote providers' encouragement of PA
 - ✓ Implement practices that promote PA
 - ✓ Limit screen time
- Outcomes:
 - ✓ Increase from 30% to 86% of teachers reporting at least 90 minutes PA per day
 - ✓ Increase from 10% to 86% of teachers reporting over 60 minutes of teacher-led PA per week

Contra Costa Child Care Council: Choice Manual



CONTENTS

THIS IS A TOOL KIT to help you through the process of developing and implementing comprehensive written nutrition and physical activity policies for your child care center or child care home. Whether you are working on single or multiple policies, use the following outline as a guide to set your goals, monitor your progress, and achieve individualized written and implemented policy for your program.

 Assessment	1
How to Start: First Steps	3
Readiness Assessment	5
How to Use Self Assessment Questionnaire (SAQ)	7
Self Assessment Questionnaire (SAQ)	9
 Best Practices for Child Care Nutrition & Physical Activity Environments	11
<i>Best Practices Manual</i>	13
 Writing and Implementing Nutrition & Physical Activity Policy	42
Writing Policy for Child Care Environments	44
A Case Study: Policy Development	44
Best Practices Work Sheets	46
Tracking Progress for Policy Development and Implementation	81
Decision Check List	82
 Additional Resources	84

CHOICE Results

(UC Berkeley Atkins Center for Weight and Health)

Feeding practices

- 35% improved in children's self service of meals
- 29% improved in posting menus for parents
- 22% improved in providing guidance for parents on meals brought from home
- 19% improved in adults sitting with kids during meal time

Beverages

- Amount of whole milk served decreased, while services of skim milk increased

Active play

- 41% improvement in parents receiving a written PA policy
- 30% improvement in parents being informed about kids' activity

Staff and parent training

- 26% improvement in parents getting PA info at home
- 23% improvements in parents getting nutrition info at home



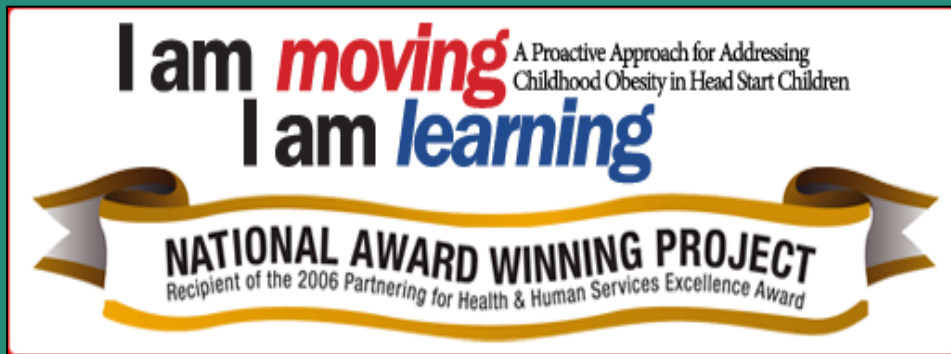
Santa Clara County and Choices for Children



Santa Clara County

- 300 family childcare homes participating in CACFP (about 2700 children reached)
- **Strategy**
 - ✓ Target family childcare homes participating in CACFP – self-assessment, policy development, policy implementation, follow-up assessment.
 - ✓ Nutrition education activities
 - ✓ 5 Keys to Raising a Healthy, Happy Eater class
<http://www.proprofs.com/training/course/?title=5-keys-to-raising-a-healthy-happy-eater-in-child-care-online>
 - ✓ Improve childcare feeding environments
- **Outcomes**
 - ✓ All providers developed policy statements
 - ✓ Implementation of written PA policies
 - ✓ Structured PA increased to 1 hour per day

Head Start: I Am Moving, I Am Learning



Head Start:

- Federally funded child development program for very low income kids and their families
- Primary target population: children 0-5 and pregnant women living under the federal poverty level
- 112K kids in Head Start in CA in 2011-12
 - 18.6% obese, 15.2% overweight.

The I am Moving, I am Learning Program was designed to increase daily moderate-to-vigorous physical activity (MVPA), improve the quality of movement activities, and promote healthy food choices among preschool children.



San Bernardino State Preschool Healthy Food Policy

PRODUCE OF U.S.A.
PRODUIT DES É.U.

San Bernardino State Preschool

- “Appropriate Food at Parent Functions” policy
 - ✓ Passed by County Preschool Services Department and implemented June 2012
- Nutritious snacks required in parent meetings:
 - ✓ Avoid high sugar products
 - ✓ Choose low fat, high fiber foods such as whole grains, fresh fruits and vegetables, and low-fat dairy
- Provides list of healthy snack ideas, such as vegetable tray with hummus

CALIFORNIA'S HEALTHY BEVERAGES IN CHILD CARE LAW

Elyse Homel Vitale, MPH
Nutrition Policy Advocate





CFPA is a statewide policy and advocacy organization dedicated to improving the health and well being of low income Californians by increasing their access to nutritious, affordable food.

www.cfpa.net

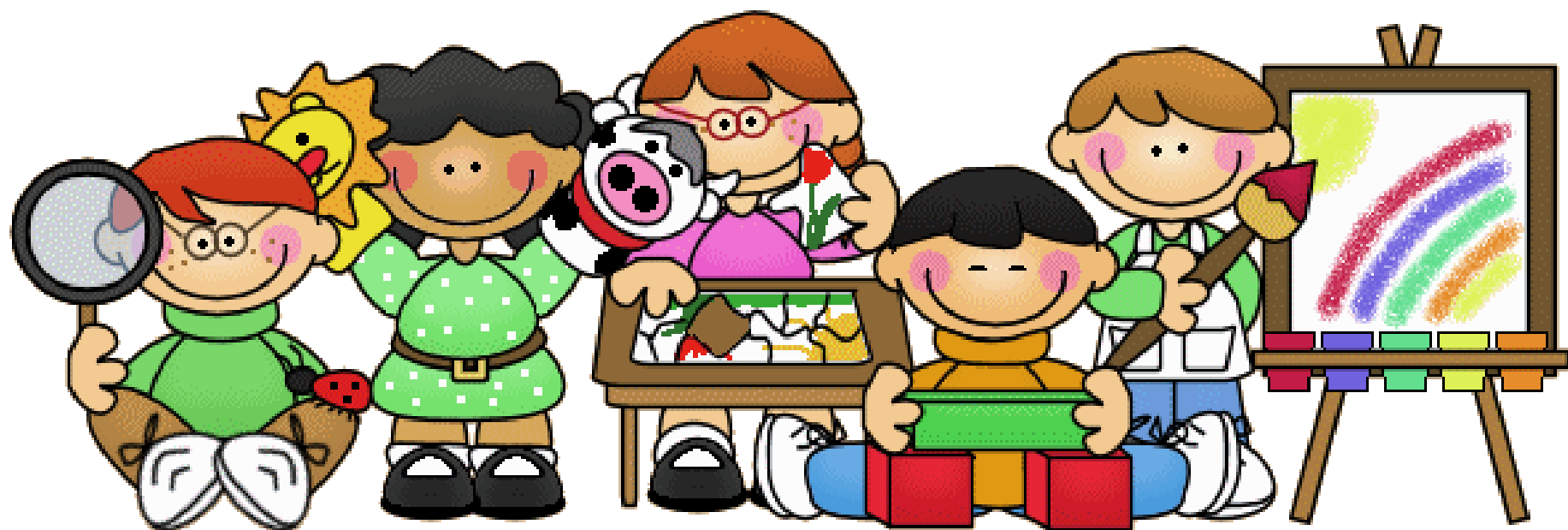
Today's presentation is *education*

- Under IRS regulations, “lobbying” is defined as:
 - A **communication**
 - To **legislators**
 - Intended to influence **specific legislation** (pending or proposed)
- Advocacy is not lobbying unless discussing specific proposed or pending legislation

What we'll cover

The journey of AB 2084 and new opportunities to support healthy beverages in child care:

- Building support
- Garnering evidence
- Sticking it out
- Evaluating effectiveness
- Next steps



Early intervention is key.
Child care is a prime opportunity!

Before AB 2084

An environment ripe for change:

Research

- Pilot study in Los Angeles County, 2008
- Statewide Assessment of Nutrition in Childcare, 2009

Stakeholder involvement

- The Strategic Assessment of the Child Care Nutrition Environment Advisory Group – Formed in 2007

Legislation

- AB 627: *Improving Nutrition in Child Care* – Vetoed 2009
- SB 1413: *Water in Schools* – Chaptered 2010

Why regulate beverages in child care?

- Key dietary determinant of weight status ¹
- 84% of 2-5 year olds drink sugary drinks ²
- **1 in 4** preschool-aged overweight or obese ³
- Substantial need for improvement ⁴

1. Woodward-Lopez G, Kao J, Ritchie LD. To what extent have sweetened beverages contributed to the obesity epidemic? *Public Health Nutr* 2010;Sep 23:1-11.
2. Wang YC, Bleich SN, Gortmaker SL. Increasing caloric contribution from sugar sweetened beverages and 100% fruit juices among US children and adolescents, 1988- 2004. *Pediatrics*. 2008;121:e1604-14.
3. Anderson SE, Whitaker RC. Prevalence of obesity among US preschool children in different racial and ethnic groups. *Arch Pediatr Adolesc Med*. 2009;163:344-8Story M, Kaphingst K, French S. The role of childcare settings in obesity prevention. *Future Child* 2006;16:143-78.
4. Ritchie LD, Boyle M, Chandran K, Spector P, Whaley SE, James P, Samuels S, Hecht K, Crawford P. Participation in the Child and Adult Care Food Program is associated with more nutritious foods and beverages in child care. *Child Obes* 2012;8:236-41.



What is AB 2084?

THE HEALTHY BEVERAGES IN CHILDCARE LAW
IMPLEMENTED IN JANUARY 2012

1. Water available to children at all times, including at meals and snacks.
2. Only 1% or nonfat unflavored milk served to children ages 2 and older.
3. No more than 1 daily serving (in age appropriate portion size) of 100% juice.
4. No natural or artificial sweeteners added to any beverage.

Evaluation

CONDUCTED IN 2012



Research Questions

1

Providers aware of law?

2

Beverage changes from 2008 to 2012?

3

Compliance vary by type of childcare?

4

Facilitators & barriers to compliance and policy recommendations?

Research Methods

1

Statewide survey of providers

2

Key informant interviews & site observations

3

Policy convening with local, state, and national stakeholders

Statewide Survey: 2008 & 2012

Licensed childcare lists

>10,000 Centers

>42,000 Childcare homes

Random sample selected

1,400-1,500

Surveys administered

2008

429 sites

2012

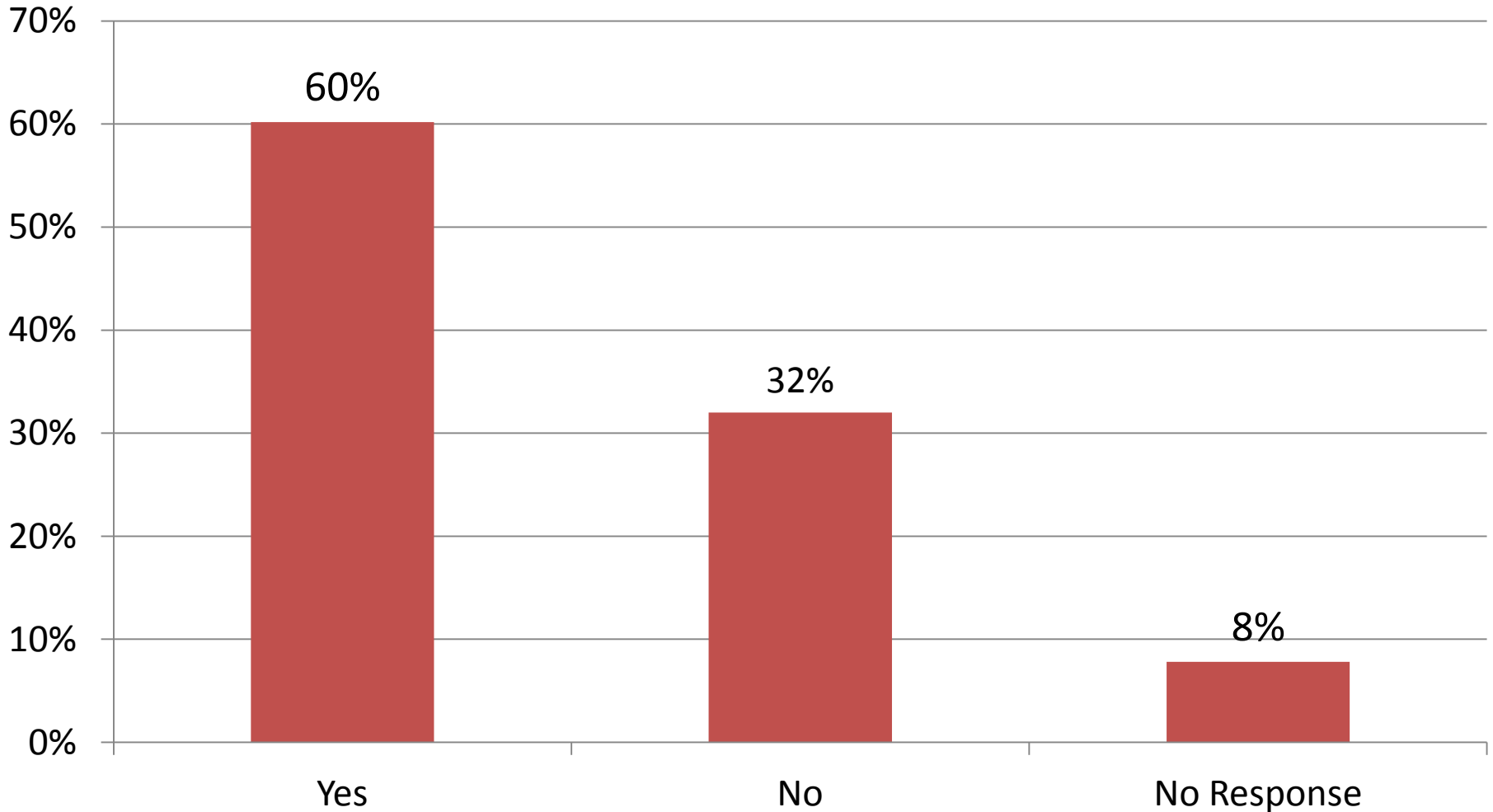
435 sites



AWARENESS

Most – *But Not All* – Knew About Law

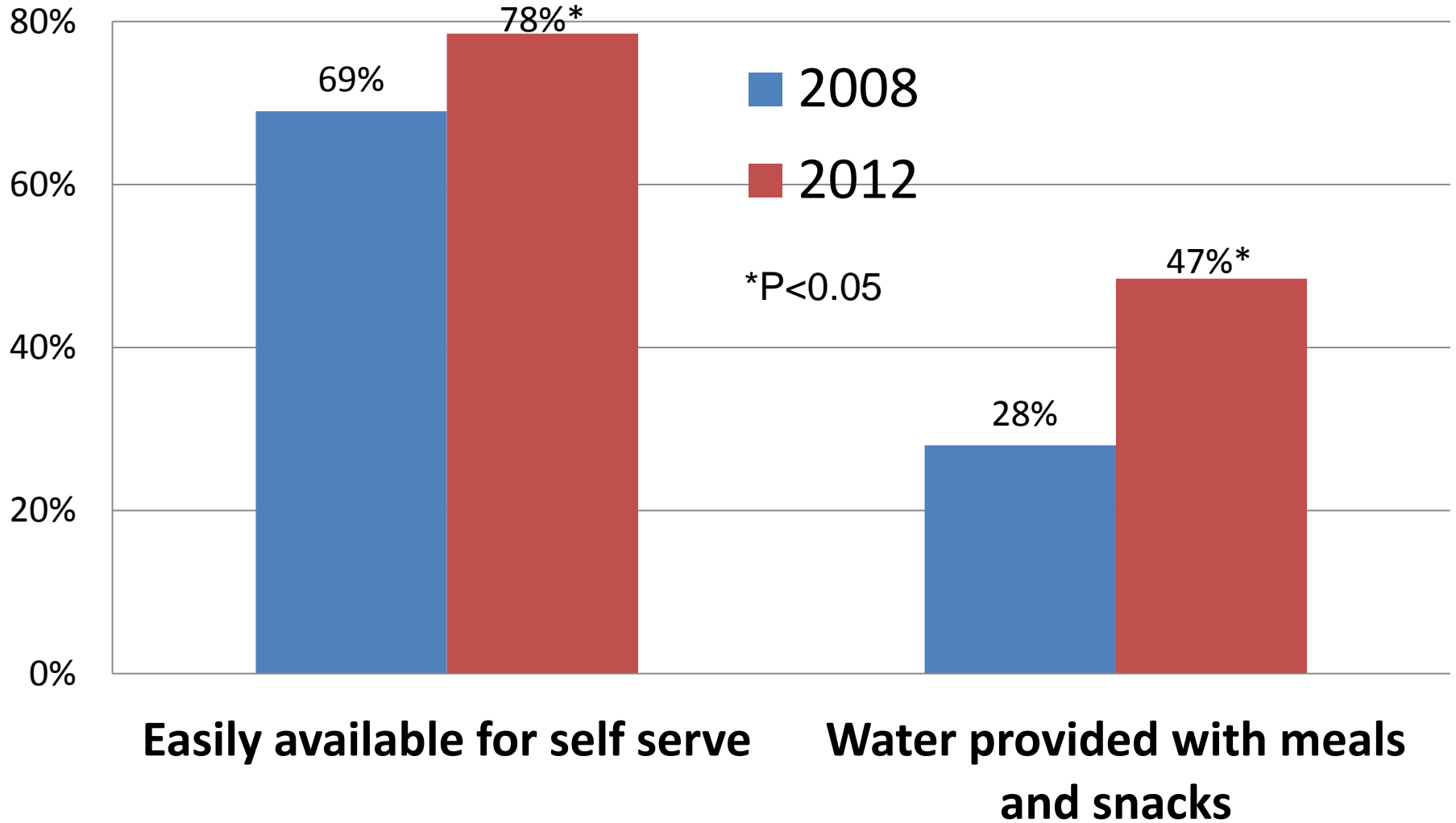
2012



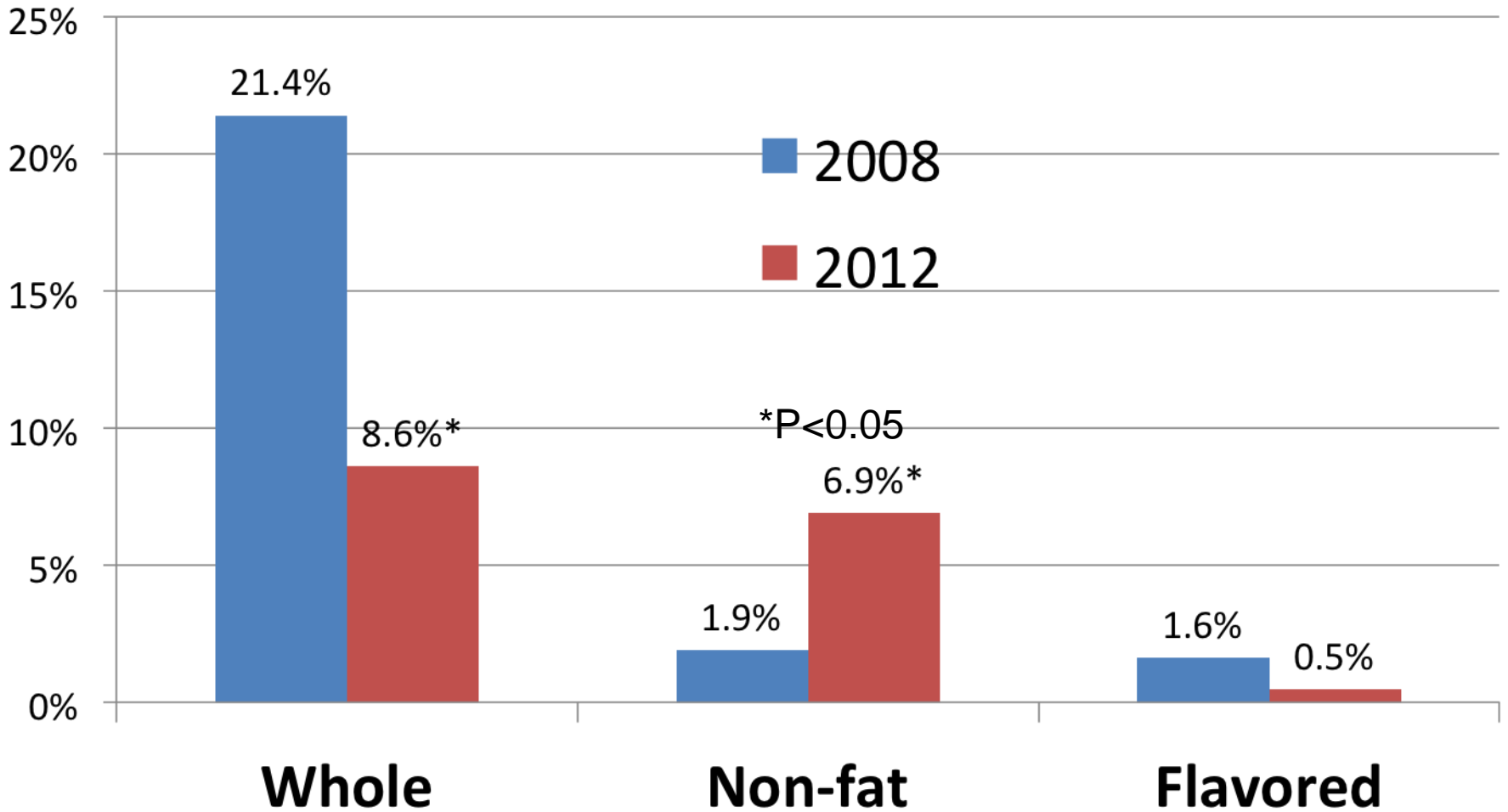


BEHAVIOR CHANGE

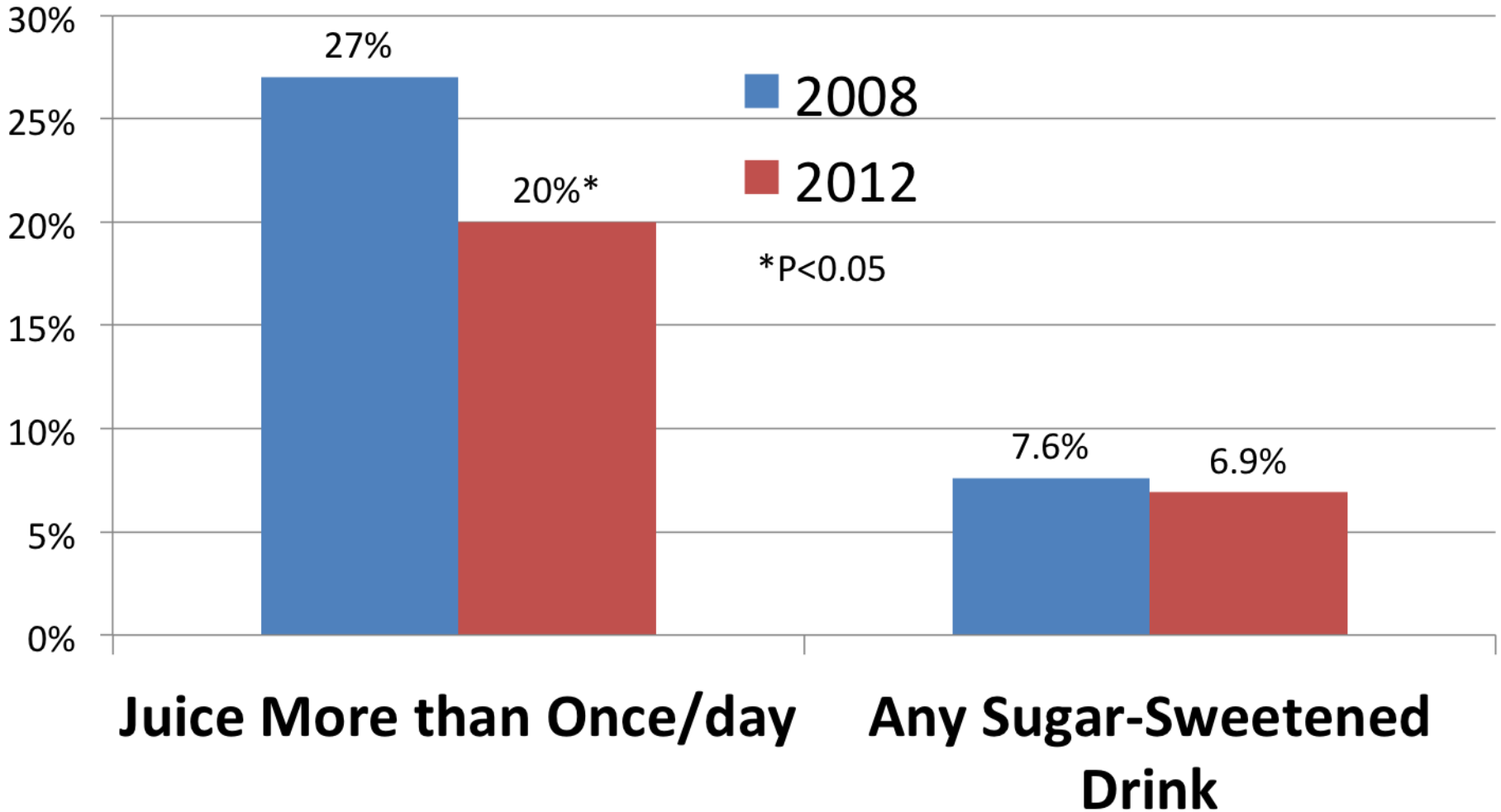
Water Access Improves



Milk Type Improves



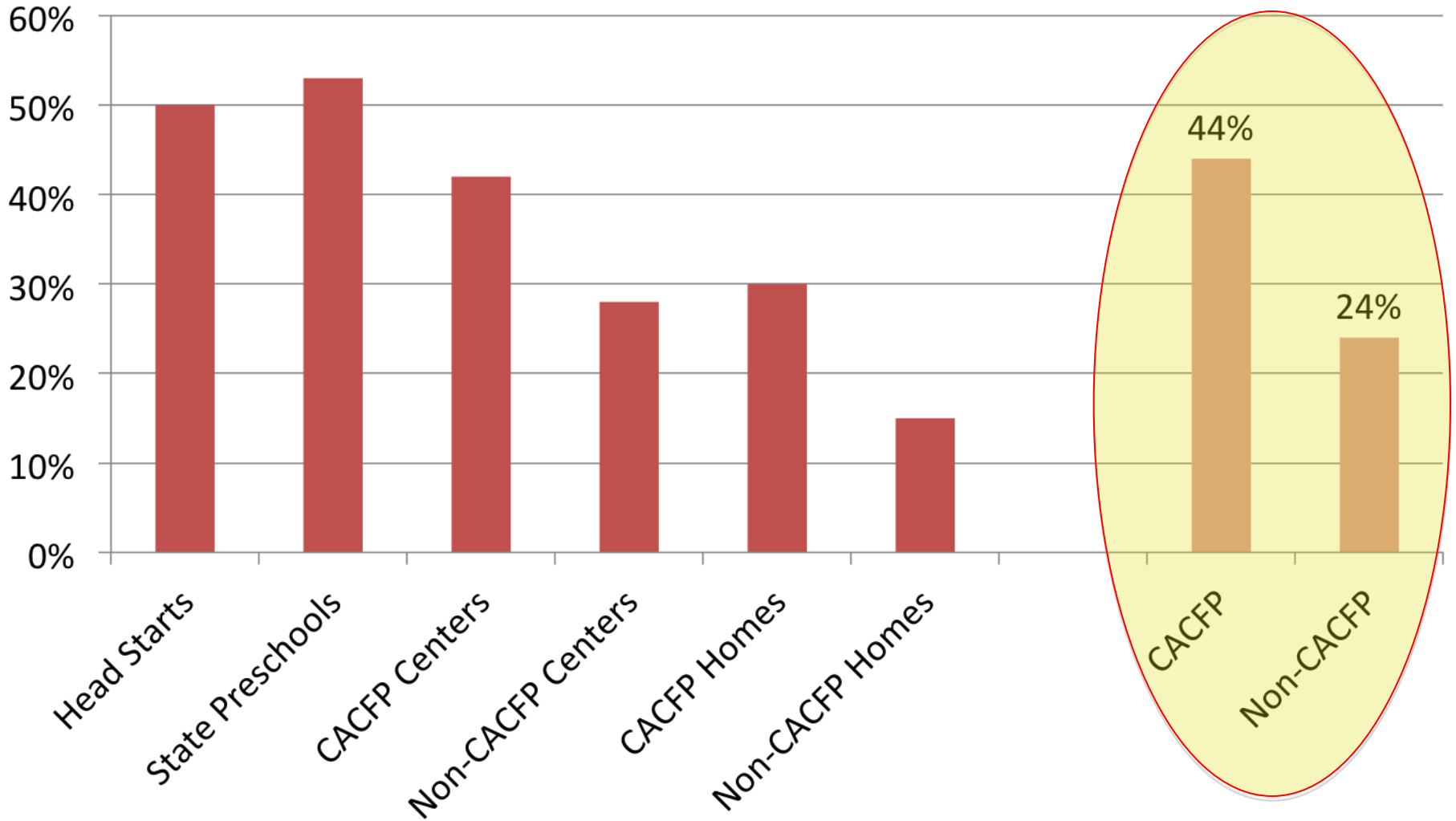
Improvement In Other Beverages





COMPLIANCE

Compliance Differs by Type of Childcare





BARRIERS & FACILITATORS

Few Barriers to Serving Healthy Beverages: WATER

- **NONE!** (77%)
- Misguided belief that “government [CACFP] rule” prohibits water with meals and snacks – *not true!*
- Not available outside in some locations
- Not reimbursed by CACFP
- Cost of bottled water, filters and cups



Few Barriers to Serving Healthy Beverages: **MILK**

- **NONE!** (70% for lower fat milk and 90% for unflavored milk)

A few reported barriers:

- Taste
- Getting from school food service
- Difficulty buying different kinds of milk
- Parent preferences



Facilitators to serving healthy beverages



- Healthy beverage policy
- Information for families and children
- Teaching children about healthy beverages
- Serving only healthy beverages



- Water at the table in age appropriate containers
- Adults lead by example & encourage water drinking

CHILD CARE PRACTICES



Self-serve
family style at
meals and
snacks

CHILD CARE PRACTICES



- Make water easily accessible & the default option
- Both *indoors* & outdoors

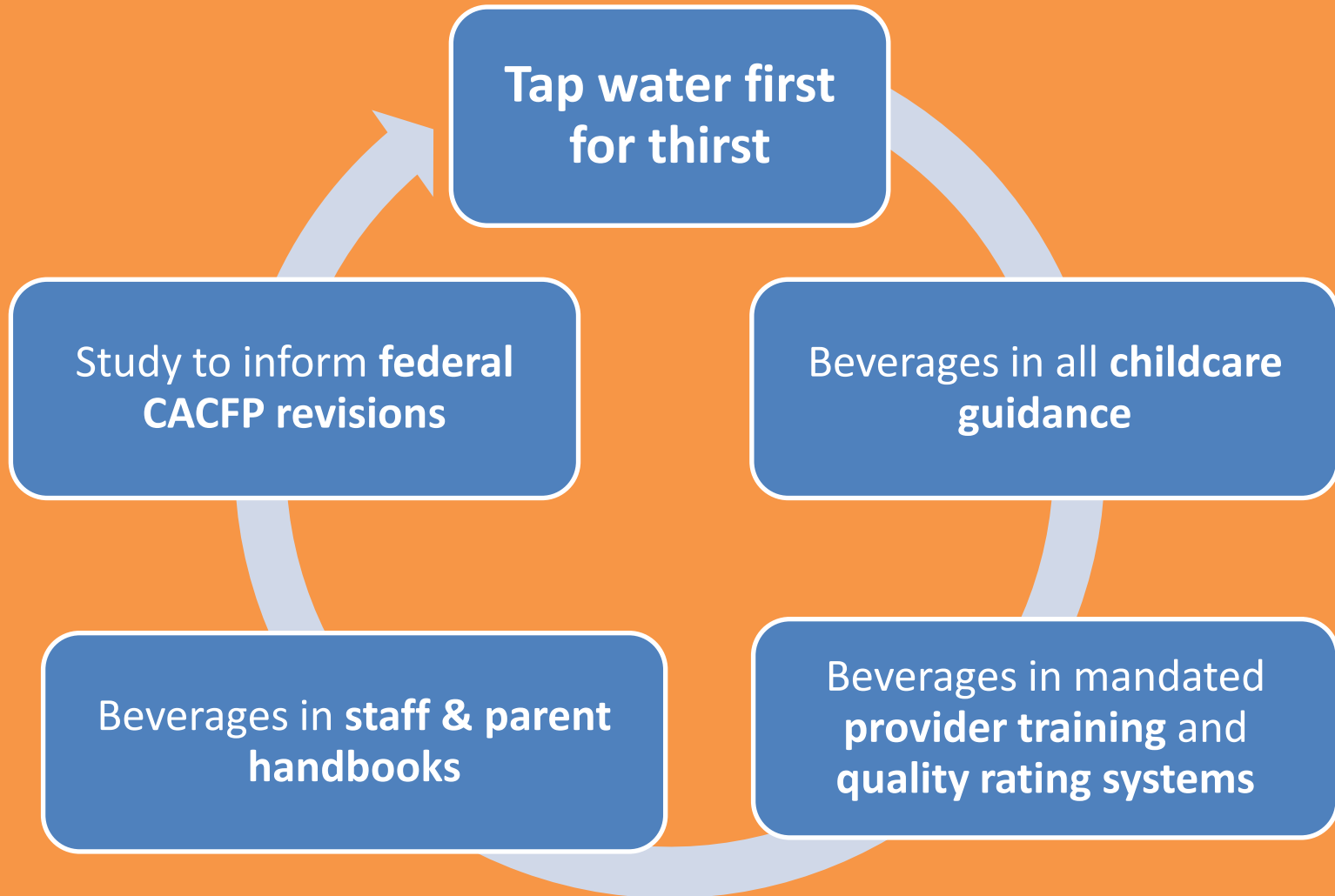
CHILD CARE PRACTICES



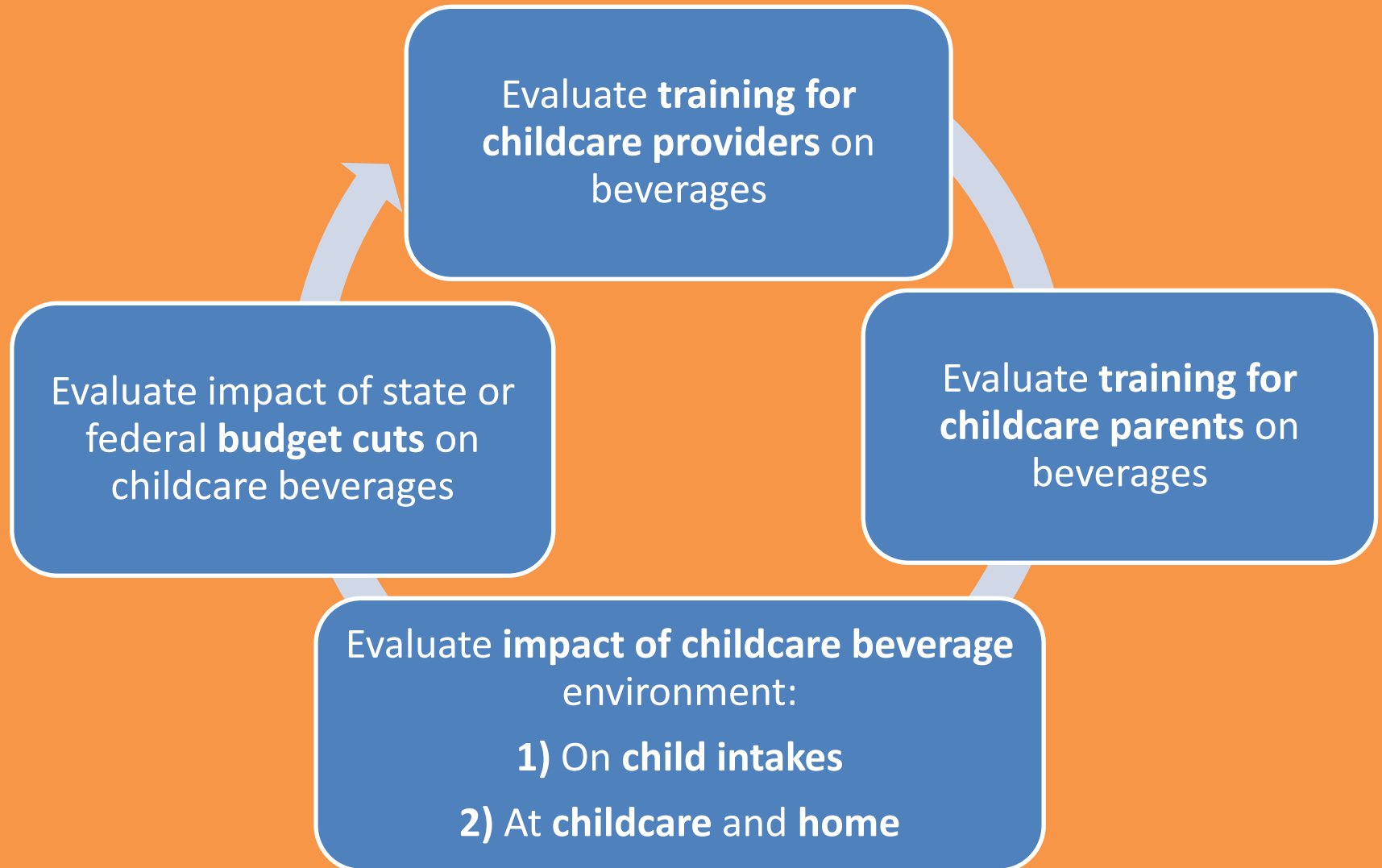
- Make water easily accessible & the default option
- Both indoors & *outdoors*

CHILD CARE PRACTICES

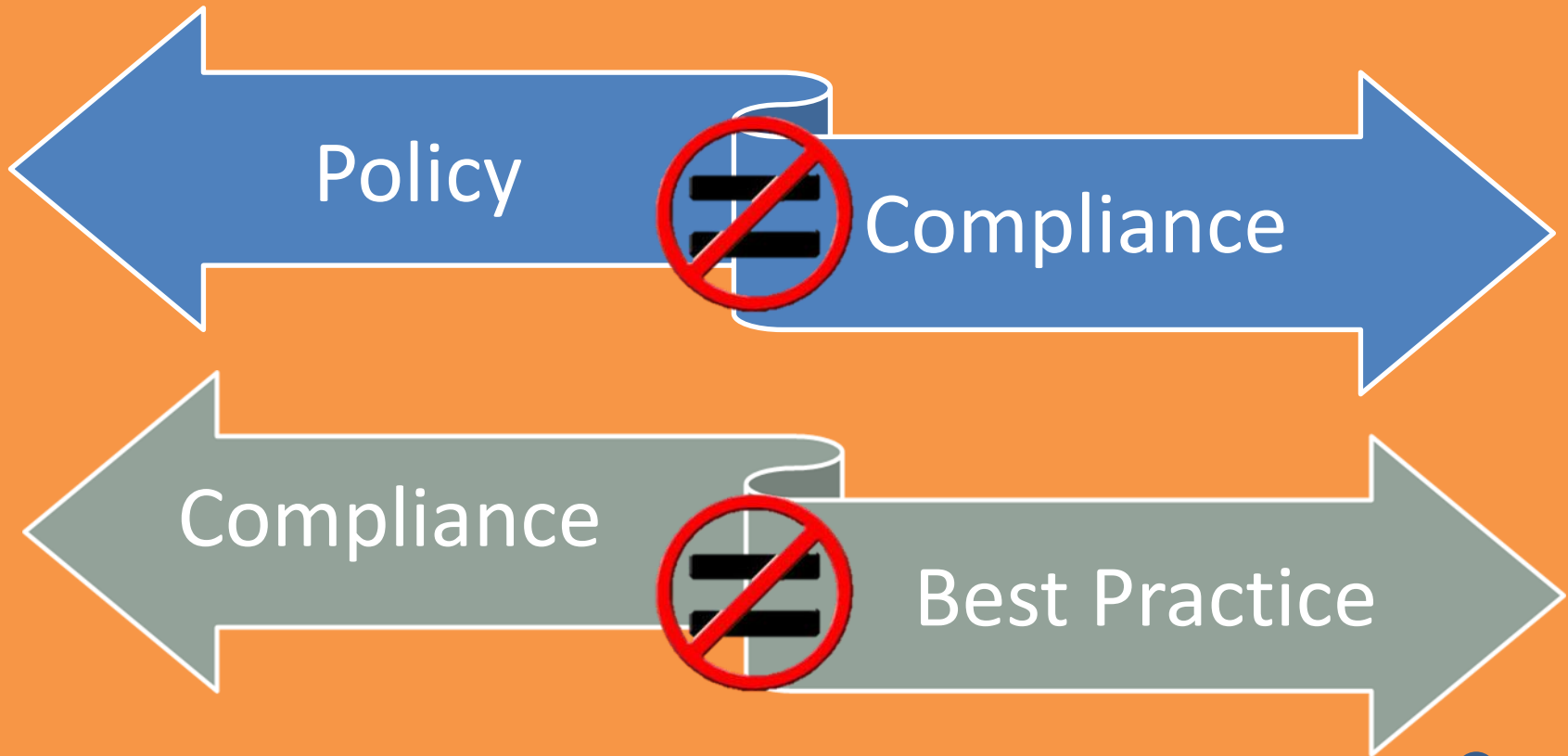
POLICY RECOMMENDATIONS



RESEARCH RECOMMENDATIONS



CONCLUSIONS



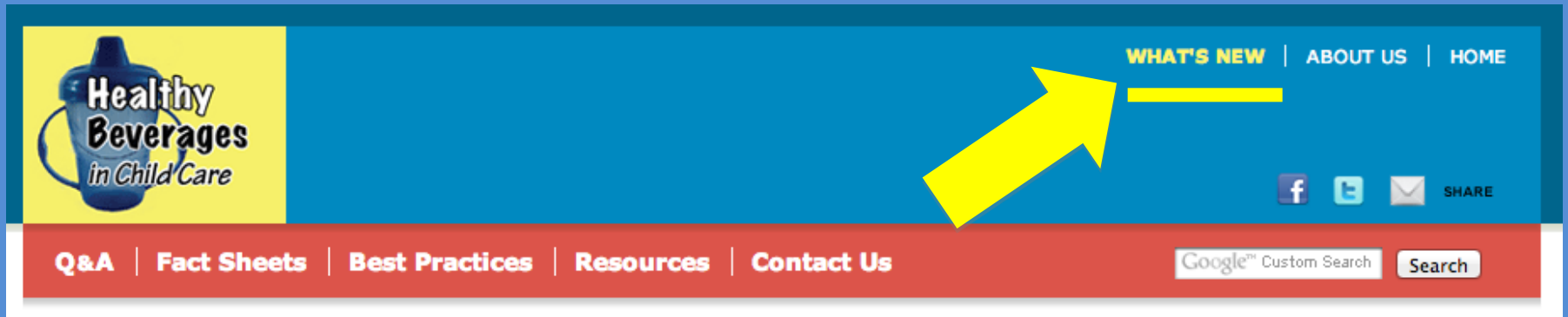
**Need More Training, Monitoring,
Promotion & Research**

NEXT STEPS

- Consider how to realistically **monitor/enforce** and how to get the word out about the new standards.
- Develop, pilot and evaluate **innovative methods** to reach and educate providers *and* parents of children in licensed childcare on the importance of healthy beverages in both the childcare and home environments.

RESOURCES FOR SERVING HEALTHY BEVERAGES IN CHILD CARE

www.HealthyBeveragesinChildcare.org



The image shows a horizontal banner for the website. On the left, there is a yellow square containing a blue sippy cup with the text "Healthy Beverages in Child Care" in black. To the right of this is a blue navigation bar with the following links: "WHAT'S NEW" (highlighted with a yellow arrow), "ABOUT US", and "HOME". Below these links are social media icons for Facebook, Twitter, and Email, followed by the word "SHARE". At the bottom of the banner is a red navigation bar with the following links: "Q&A", "Fact Sheets", "Best Practices", "Resources", and "Contact Us". On the right side of the red bar is a search box with the text "Google™ Custom Search" and a "Search" button.

Childcare Provider: **Nancy Wyatt**

Family Childcare Provider, Kidsgardens (San Fernando Valley)

nancywyatt@sbcglobal.net



Successes and Opportunities



Successes and Opportunities

- Vegetable gardening with kids – increases interest in and desire for healthy foods
 - Growing broccoli, hunting for strawberries, making soup with fresh herbs
- Training providers (using play doh to learn about serving sizes and appropriate nutrition)
 - After training, there is a difference in the way providers serve meals
- Participation in CACFP has resulted in good information about appropriate meal components and serving sizes, foods that can choke children, foods that might cause infants to have allergic reactions and much more.
- Serving as Family Child Care Environmental Rating Scale (<http://ers.fpg.unc.edu/node/111>) rater for 8 years – exposure to different ways of serving meals and snacks, importance of sharing information with other providers



Challenges

Challenges

- Conflicting parent nutrition or PA preferences
 - Many parents opposed to milk
- Cost of PA equipment
- Emphasis on increasing circle time and attention span for school readiness conflicts with desire to increase PA
- Kids can be picky eaters
- Kids already predisposed to want screen time (especially school aged)
- Caring for kids of different ages in the same setting means needs and schedules vary widely
- Lack of adequate space for PA
- Weather can make getting outside difficult

Resources

- Network's Rethink Your Drink Campaign Resources and Materials: <http://www.cdph.ca.gov/programs/cpns/Pages/RethinkYourDrink.aspx>
- CDE/DSS Report: Keeping Children Healthy in California's Child Care Environments: <http://www.cde.ca.gov/ls/nu/he/documents/keepchildhealth.pdf>
- Contra Costa Child Care Council's Best Practices: <http://www.healthybeveragesinchildcare.org/bestpractices/BestPracticesHandbook.pdf>
- SNAP-Ed Interventions Toolkit (from USDA), includes a childcare-specific section with additional resources: <http://snap.nal.usda.gov/snap/SNAP-EdInterventionsToolkit.pdf>
- Incorporating MyPlate in the Child Care Classroom: <http://nfsmi.org/Webinars/MyPlate/3/handouts-3per.pdf>
- Nutrition & Wellness Tips for Young Children: Provider Handbook for the Child and Adult Care Food Program (CACFP): <http://www.teamnutrition.usda.gov/Resources/nutritionandwellness.html>
- Child Care Food Program Roundtable: <http://ccfproundtable.org/>

THANK YOU!

For additional information, contact:

Lisa Tadlock, Policy, Planning, and Partnership Section

lisa.tadlock@cdph.ca.gov

Betty Sun, Research and Evaluation Section

betty.sun@cdph.ca.gov

