

## Child & Toddler Nutrition and Healthy Eating Environments

### Summary

The Washington State Department of Health (DOH) conducted the second **Washington State Survey of Nutrition and Physical Activity in Early Learning** in 2018. The first survey, conducted in 2013, provided valuable information to improve programs and served as a baseline for many of the questions in the second survey. For 2018, DOH reached out to all licensed early learning programs in Washington state; 671 early learning providers responded (297 **early learning centers** and 374 **family home programs**).

### Results

Responses provided information about which foods were served in early learning settings, and also how they were served. Overall, early learning programs did well meeting evidence-based standards<sup>1</sup> in some cases, but fell short of meeting recommendations for others. For instance, while the overall percentage of early learning programs implementing family-style dining practices increased compared to 2013, only 53% of programs reported allowing children to choose how much or how little to decide to eat, and only 23% of programs allow children over 2 to choose and serve all food themselves. And although a greater percentage of programs reported meeting nutrition best practices, less than half of programs reported never serving fruits canned in syrup, providing vegetables at snack time at least once per day, and never serving sweetened baked goods.

### Recommendations

- Provide resources, training and assistance to help early learning programs adopt and implement CACFP nutrition standards.
- Support policies and provide education that encourages family-style dining in early learning programs.
- Support policies, programs and funding decisions that promote Farm to Early Care and Education (ECE) programs and curriculums.
- Include nutrition in existing required trainings for early learning professionals.
- Provide training, education and incentives to early learning programs to develop and enact policies that support nutrition best practices.

### Best Practices in Early Learning

Throughout this document, the findings highlight early learning best practices. Most of the standards addressed in the survey were selected from *Caring for Our Children: National Health and Safety Performance Standards, Fourth Edition (CFOC4)*, the most highly-regarded resource for early care and education standards.<sup>1</sup> For foods served in early learning, CFOC4 often refers to the standards in the Child and Adult Care Food Program (CACFP).

## 2018 Washington State Survey of Nutrition & Physical Activity in Early Learning

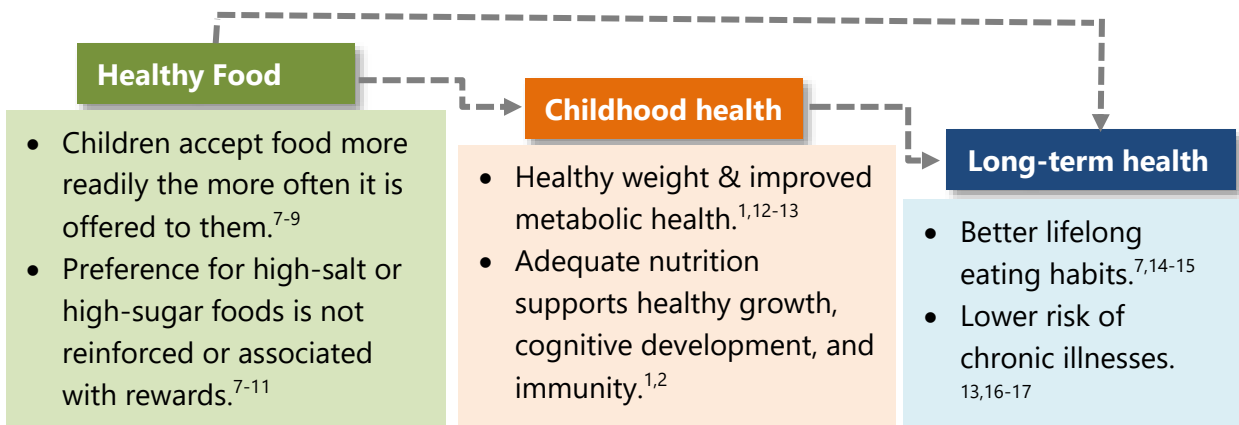
- Identify existing evidence-based resources for early learning programs about good nutrition. In partnership with early learning programs, disseminate those resources to families and communities.



### Why Nutrition Matters

The meals and snacks eaten in early learning programs can account for a major portion of children’s daily food intake, up to two-thirds in the case of children in full-time care.<sup>2</sup> The importance of healthy eating in early learning cannot be overemphasized, especially when taking into account disparities: 24% of low-income 2-to-4 year-olds in Washington state are overweight or obese, and weight-related illnesses are more likely to affect children of color and children of low socioeconomic status.<sup>3-6</sup> Early learning providers have a great opportunity to provide nutritious meals and snacks. Figure 1 shows how nutrition affects not only a child’s current health status, but also sets the stage for lifetime health.

Figure 1: How nutritious food in early childhood impacts childhood and long-term health



### Foods Served in Early Learning Programs

In the survey, DOH asked programs how often they served certain foods. These survey questions were designed using best practices from Caring for Our Children 3<sup>rd</sup> Edition and Child and Adult Care Food Program (CACFP) standards from 2005, which were current at the time the survey was conducted. After the survey was administered, both sets of guidelines were updated. Best practices in Tables 1 and 2 come from the updated CACFP and CFO4 guidelines, with some adaptations where survey questions did not align with the current guidelines.

## 2018 Washington State Survey of Nutrition & Physical Activity in Early Learning

Table 1: Nutrition best practices and the percent of early learning programs following them for 2013 and 2018

Topic	Best Practice	% meeting in 2013	% meeting in 2018	Difference in % of respondents meeting best practice, 2013-2018
Fruits and Vegetables	Fruits canned in syrup are never served <sup>a</sup>	34%	46%	12%
	Dark green, orange, red or deep yellow vegetables served at least once per week <sup>a,b</sup>	27%	42%	15%
	Vegetables at snack time are served once per day or more <sup>c</sup>	12%	29%	17%
Grains	100% whole grain foods are served at least once per day <sup>b,d</sup>	48%	66%	18%
	Sweetened baked goods (muffins, cookies, cakes, brownies, pop tarts) are never served <sup>a,b</sup>	11%	44%	33%
	Sugary cereals are never served <sup>d</sup>	57%	65%	8%
Sweet Treats	Sweet treats (candy, ice cream, frozen yogurt, popsicles) are never served <sup>a,b</sup>	41%	54%	13%
Fried Foods & Processed Meats	Fried and breaded meat are served less than once per week <sup>e</sup>	60%	81%	21%
	Processed meats are served less than once per week <sup>e</sup>	67%	79%	12%
Beverages	Sugary drinks (juice drinks, flavored waters, sweet teas, sports drinks, sodas) are never served <sup>a,b</sup>	83%	90%	7%
	Flavored milk is never served <sup>a,d</sup>	76%	83%	7%
	100% fruit juice is served less than once per day <sup>f</sup>	81%	87%	6%
	Drinking water is indoors and outdoors where it is visible and available for self-serve <sup>a</sup>	50%	69%	19%

<sup>a</sup> *Caring for Our Children: National Health and Safety Performance Standards, Fourth Edition (CFOC4)*

<sup>b</sup> 2017 Child and Adult Care Food program (CACFP) best practice, which is higher than a CACFP standard.

<sup>c</sup> Based on the 2015-2020 Dietary Guidelines for Americans

<sup>d</sup> 2017 CACFP meal pattern standard

<sup>e</sup> 2017 CACFP best practice states "limit serving to no more than one serving per week"

<sup>f</sup> 2017 CACFP best practice states "Pasteurized full-strength juice may only be used to meet the vegetable or fruit requirement at one meal, including snack, per day"

## 2018 Washington State Survey of Nutrition & Physical Activity in Early Learning

Table 2: Nutrition best practices and the percent of early learning programs following them in 2018, by CACFP status

Topic	Best Practice	% meeting Best Practice, CACFP	% meeting Best Practice, non-CACFP	Difference in % of respondents meeting best practice, CACFP vs non-CACFP
Fruits & Vegetables	Whole fruit with no added sugars served at least once per day <sup>a</sup>	53%	50%	3%
	Fruits canned in syrup are never served <sup>a</sup>	39%	53%	-14%
	Dark green, orange, red or deep yellow vegetables served at least once per week <sup>a,b</sup>	96%	89%	7%
	Vegetables at snack time are served once per day or more <sup>c</sup>	26%	32%	-6%
Grains	100% whole grain foods are served at least once per day <sup>b,d</sup>	80%	44%	36%
	Sweetened baked goods (muffins, cookies, cakes, brownies, pop tarts) are never served <sup>a,b</sup>	52%	29%	23%
	Sugary cereals are never served <sup>d</sup>	73%	50%	23%
Sweet Treats	Sweet treats (candy, ice cream, frozen yogurt, popsicles) are never served <sup>a,b</sup>	61%	41%	20%
Fried Foods & Processed Meats	Fried and breaded meat are served less than once per week <sup>e</sup>	95%	94%	1%
	Processed meats are served less than once per week <sup>e</sup>	93%	94%	-1%
Beverages	Sugary drinks (juice drinks, flavored waters, sweet teas, sports drinks, sodas) are never served <sup>a,b</sup>	91%	82%	9%
	Flavored milk is never served <sup>a,d</sup>	87%	74%	13%
	100% fruit juice is served less than once per day <sup>f</sup>	93%	79%	14%
	Drinking water is indoors and outdoors where it is visible and available for self-serve <sup>a</sup>	85%	28%	57%
	100% Whole Grain foods are served at least once per day <sup>b,d</sup>	72%	64%	8%

<sup>a</sup> Caring for Our Children: National Health and Safety Performance Standards, Fourth Edition (CFOC4)

<sup>b</sup> 2017 Child and Adult Care Food program (CACFP) best practice, which is higher than a CACFP standard.

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## 2018 Washington State Survey of Nutrition & Physical Activity in Early Learning

Table 1 shows the percentage of survey participants who reported meeting best practices for meals and snacks in 2013 and 2018, for those measures that were comparable across survey years. Compared with 2013, in 2018 more early learning programs met the adapted best practices for flavored milk, sugary beverages and 100% juice. In 2018, programs also did better in terms of *not* serving fruit canned in syrup, sugary cereals, sweet treats, processed meats, fried meats and sweetened baked goods.

Most of the early learning programs served at least two meals and two snacks per day, providing many opportunities to serve healthy food. In 2018, programs were more likely to serve dark green, red and orange vegetables at least once a day, vegetables as a snack, and whole grains each day compared to 2013.

DOH asked programs whether or not they were participating in CACFP. For the most part, programs that participated in CACFP were more likely to meet best practices than those that did not. CACFP-participating programs were more likely to meet best practices for fresh fruit, varieties of vegetables and whole grains. They were also more likely to limit servings of non-compliant foods such as sweetened baked goods, sugary cereals and sweet treats. Table 2 shows the percentage of surveyed participants that met best practices standards for foods and beverages being served by CACFP status.

### Recommendations:

**Provide resources, training and assistance to help early learning programs adopt and implement CACFP nutrition standards.**<sup>18</sup> Data from both the 2013 and 2018 surveys showed that programs participating in CACFP were more likely to provide healthier foods and beverages in early learning programs.

- Suggested strategies:
  - **State agencies or other organizations** can develop and offer state-accredited State Training and Registry System (STARS) trainings on CACFP adoption and implementation that are culturally relevant and offered in a variety of languages.
  - **State licensing agents** can be trained on CACFP to understand and help programs meet new regulations (which require all licensed programs to meet CACFP nutrition standards).
  - **State and local governments** can sponsor consultants to assist early learning providers with the paperwork component of CACFP.

### Mealtimes & Feeding Practices

While the food and beverages offered to children in early learning programs are integral to healthy diets, the way mealtimes are conducted is also important in shaping healthy eating patterns and behavioral development in children.<sup>19</sup> Research shows that children benefit from practices such as letting them choose food themselves during mealtimes, modeling healthy eating, and never using food as a punishment or reward.



**What do healthy eating environments accomplish?**

1. Teach children to listen to their own hunger and fullness signals.<sup>19-21</sup>
2. Establishes that adults are responsible for *offering* food; children are responsible for *eating* it.<sup>22</sup>
3. Creates positive associations with meal times.<sup>23</sup>
4. Reinforces education on healthy eating.<sup>23</sup>

Unlike food, these health-promoting practices are generally free of cost (after staff training).

A powerful way to build healthy eating skills in children is by serving food “family-style,” where children use utensils to choose foods from common plates and serve themselves, children decide how much or how little to eat, and everyone sits together at the same table, including staff. Even when children are not yet developmentally ready to serve themselves, family-style dining appears to help children regulate their own appetite, provided they are not pressured to clean their plates.<sup>20</sup> Though teacher-assists may be needed initially, most children can participate in family-style dining to some degree by age 2. Table 3 outlines some best practices for family-style dining and how often programs are meeting these standards.

*Table 3: Family-style dining practices and how often early learning programs are following them in 2013 and 2018*

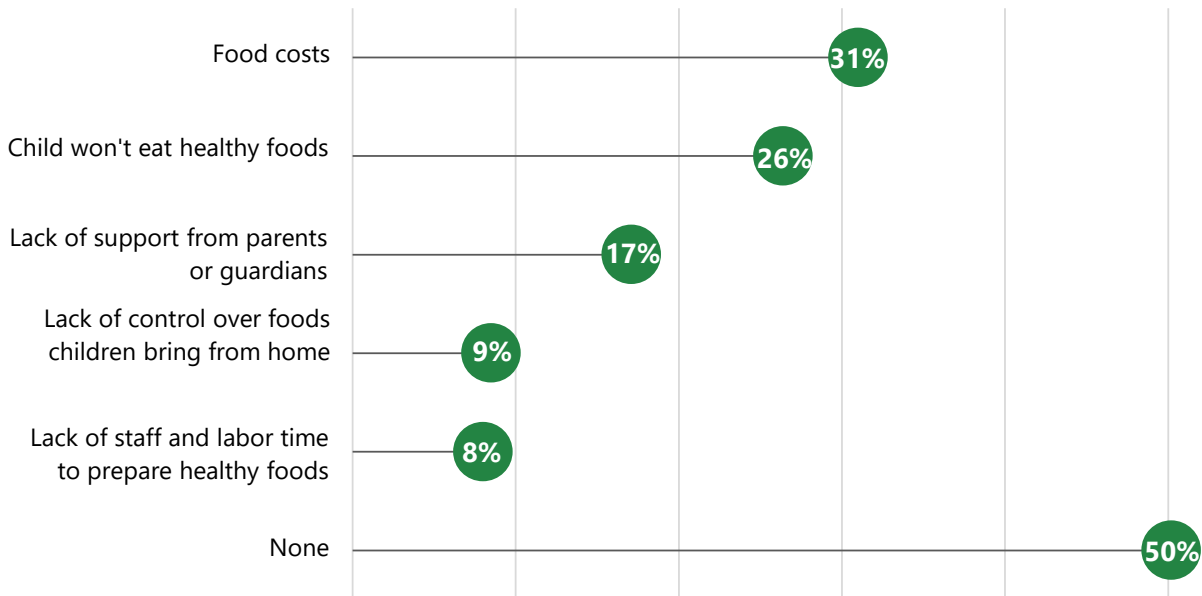
<b>Best Practice</b>	<b>% of programs in 2013</b>	<b>% of programs in 2018</b>	<b>% change in responses 2013-2018</b>
Children ages 2 and older choose and serve all foods themselves	18%	23%	<b>5%</b>
Staff sit and eat with children and model healthy mealtime behaviors	63%	70%	<b>7%</b>
Children always get to decide how much or how little food they eat	46%	53%	<b>7%</b>

When asked about challenges and asked to choose those that they felt affected their ability to promote healthy eating in their program. The main challenges selected were food costs, getting

## 2018 Washington State Survey of Nutrition & Physical Activity in Early Learning

children to eat healthy foods, and lack of support from parents or guardians. These were the same top challenges reported in 2013. See Figure 2 for a complete list of challenges.

Figure 2: Major challenges identified by early learning programs to promoting healthy eating in 2018



### Recommendations:

#### Support policies and provide education that encourages family-style dining in early learning programs.

- Suggested strategies:
  - **Training and curriculum developers** can integrate guidance on family-style dining into existing nutrition trainings and curriculum for early learning providers, and make sure trainings and curriculums are available and relevant to all early learning audiences.
  - **Regional resource and referral offices** and **local agencies** can train technical assistance providers (such as Early Achievers coaches) to show providers how family-style dining can be used to meet quality standards.

**Support policies, programs and funding decisions that promote Farm to Early Care and Education (ECE) programs and curriculums.** One-quarter of sites said that children refusing healthy foods was a barrier to providing them. Farm to ECE programs and curriculums such as "Grow It, Try It, Like It!" or "Harvest for Healthy Kids" have been shown to increase servings and acceptance of fruits and vegetables.

- Suggested strategies:
  - **State Agencies that manage CACFP** can incorporate Farm to ECE into existing trainings for CACFP specialists.

## 2018 Washington State Survey of Nutrition & Physical Activity in Early Learning

- **State and local agencies** can provide resources and trainings in multiple languages for providers on Farm to ECE, both regionally and statewide.

### Staff Training

Staff training is key to incorporating more healthy foods and beverages into early learning programs and implementing healthy mealtime environments. Because of the unique structure of early learning centers compared to family home programs, questions on staff training were phrased differently for each type of program. Figures 3 and 4 show what trainings are required or were received by providers in **early learning centers** and **family home programs**, respectively.

Figure 3: Percent of **early learning centers** that required training on food and beverage recommendations and healthy mealtime practices for children

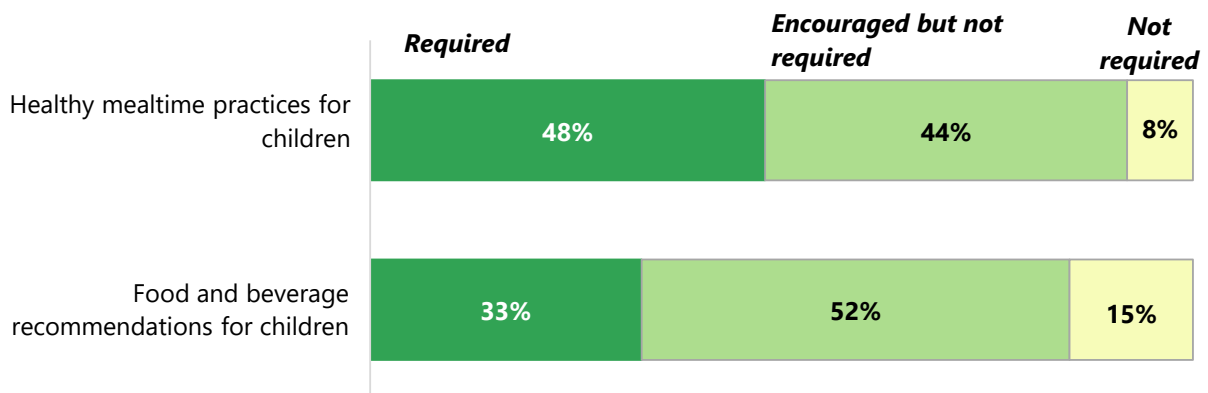
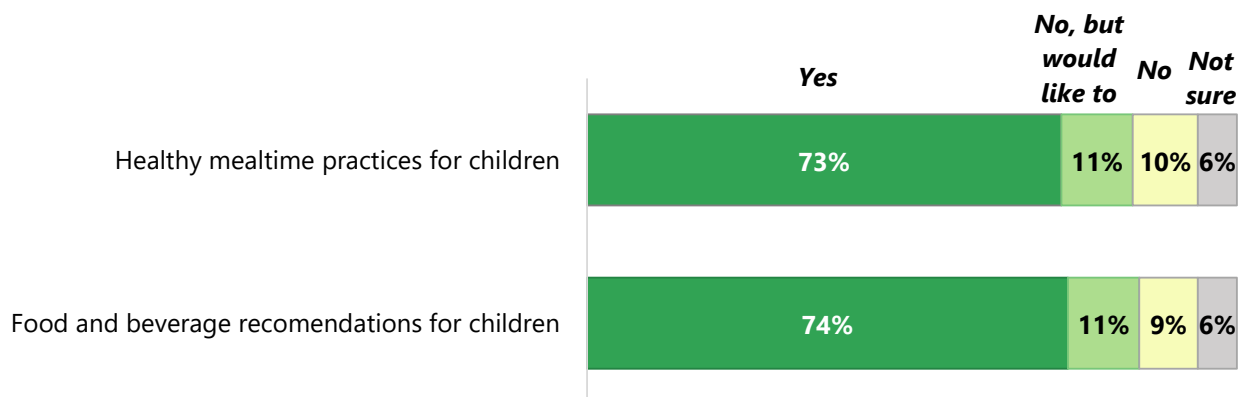


Figure 4: Percent of providers working in **family home programs** that received training on food and beverage recommendations and healthy mealtime practices for children within the past 3 years





### Recommendations:

**Include nutrition in existing required trainings for early learning professionals.** Research shows training early learning providers in nutrition can lead to more supportive feeding environments.<sup>24</sup>

- Suggested strategies:
  - Make nutrition one of the mandatory health and safety training topics for the [Child Care Development Fund](#), the primary source of federal funding for child care subsidies and to improve child care quality.
  - **Higher education programs** can include or increase nutrition education in their curriculums for early learning professionals.

### Early Learning Program Policies



Having clear program policies, including guidelines and hand books, helps with staff training and planning to meet best practices. Policies or guidelines on nutrition is also one of the best practices identified in CFOC4. Similar to survey questions on trainings, questions on program policies were phrased differently for early learning centers and family homes to better capture what was happening in both types of programs. Figures 5 and 6

describe the existence of policies or guidelines in Washington **early learning centers** and **family home programs**.

## 2018 Washington State Survey of Nutrition & Physical Activity in Early Learning

Figure 5: Nutrition and healthy eating policies in **early learning centers** by policy type

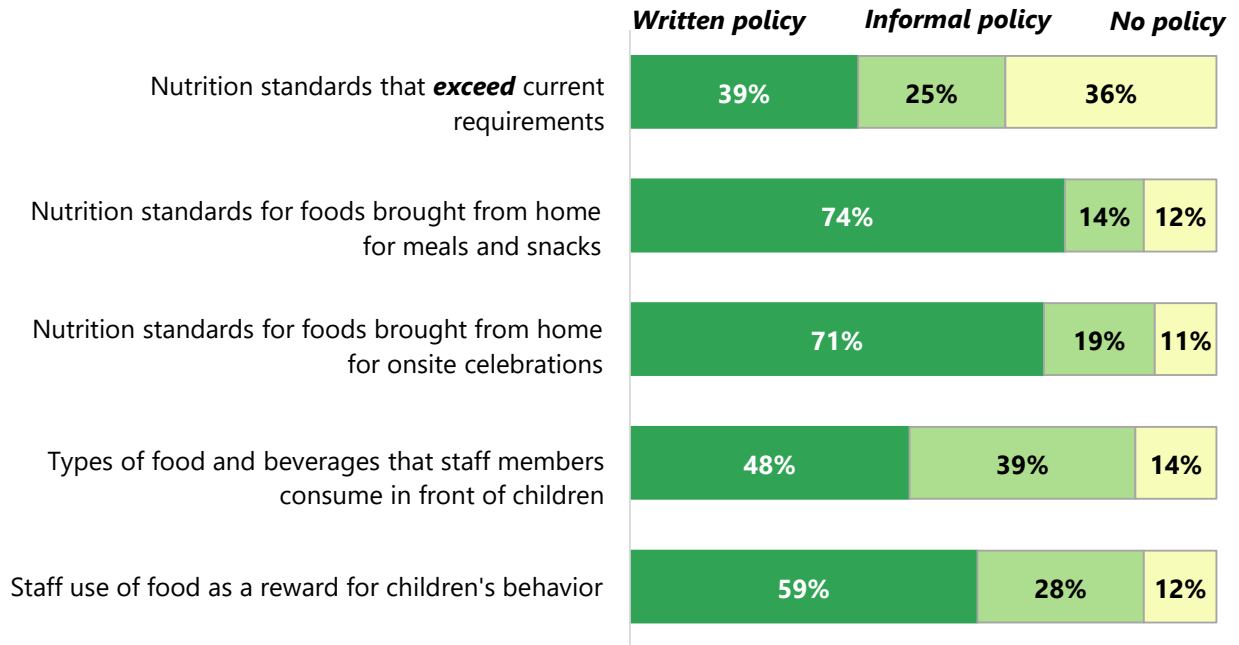
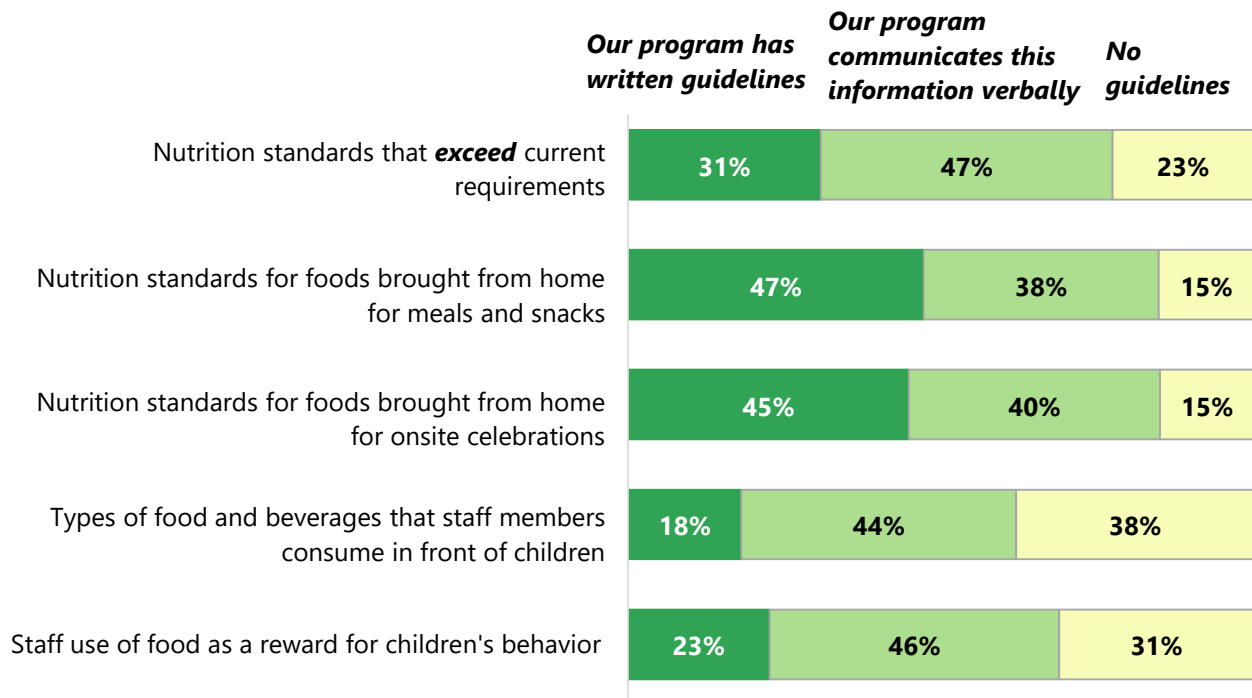


Figure 6: Nutrition and healthy eating guidelines in **family home programs** by guideline type



**Recommendations:**

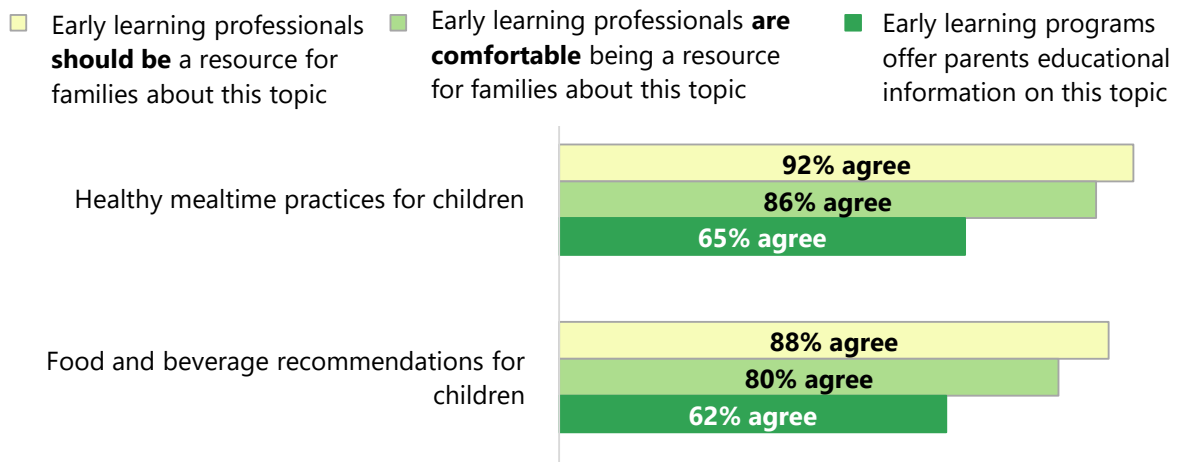
**Provide training, education and incentives to early learning programs to develop and enact policies that support nutrition best practices.** Providing training and resources (such as model policies) to early learning programs may help to improve the percentage of programs with a written policy on nutrition.

- Suggested strategies:
  - **State agencies and organizations** can develop culturally competent, state-accredited trainings (in a variety of languages) for administrators and family home owners on developing and implementing policies on nutrition and healthy eating practices.
  - **Washington state or local counties** can develop and implement a state or county [recognition program](#) on healthy eating.
  - **Washington’s Quality Rating and Improvement System** criteria can be revised to include healthy eating and nutrition policies and best practices.

**Child Care Providers as Community Resources**

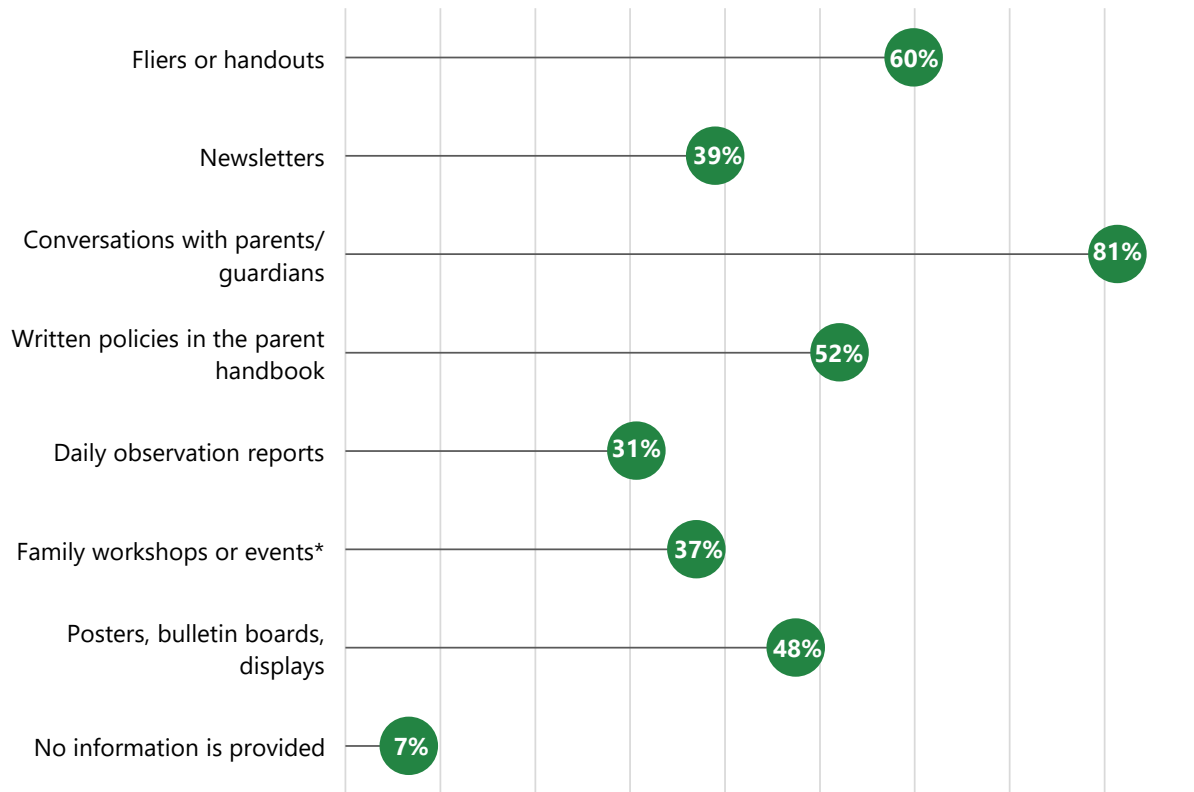
As trusted caregivers, early learning providers have tremendous potential to be a resource for families needing or wanting child health information. Figures 7 and 8 show that while most providers agree this is an important role, not all providers are comfortable providing this type of information to families. Even fewer actually provide educational information, and when they do, it’s most often in the form of conversations with parents or guardians, which may not be ideal for all families.

*Figure 7: Early learning providers' opinions and practices on being a child nutrition resource for families*



## 2018 Washington State Survey of Nutrition & Physical Activity in Early Learning

Figure 8: How educational information is communicated to parents or guardians



\*Early Learning Center providers only

### Recommendations:

**Identify existing evidence-based resources for early learning programs about good nutrition. In partnership with early learning programs, disseminate those resources to families and communities.** Being a resource for information doesn't mean providers need to create their own materials or be experts on nutrition. By utilizing the wealth of nutrition resources already created by organizations such as the USDA or the American Academy of Pediatrics, early learning programs can present evidence-based information to help families reinforce the best practices used in their programs.

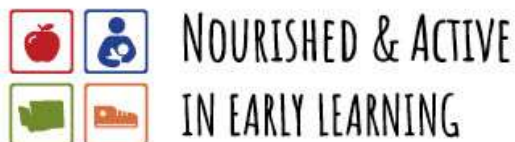
- Suggested strategies:
  - **State and local agencies** associated with early learning can provide links to nutrition resources or distribute materials at conferences and meetings.
  - **Resource and referral agencies** can include links to family and community education materials on resource pages, or provide resources to technical assistance providers to share with programs.

## 2018 Washington State Survey of Nutrition & Physical Activity in Early Learning

### Examples of websites with nutrition resources for families of young children:

- USDA MyPlate – Health and Nutrition Information for Preschoolers (<https://www.choosemyplate.gov/health-and-nutrition-information>)
- Nemours Children’s Health Service – Healthy Eating Helpful Tips & Resources for Families (<https://www.nemours.org/services/health/growuphealthy/eating/families.html>)
- American Academy of Pediatrics –Toddler Nutrition (<https://www.healthychildren.org/English/ages-stages/toddler/nutrition/Pages/default.aspx>)
- USDA Food and Nutrition Service – Nibbles for Health: Nutrition Newsletters for Parents of Young Children (<https://www.fns.usda.gov/tn/nibbles>)

To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email [civil.rights@doh.wa.gov](mailto:civil.rights@doh.wa.gov). Questions about this survey? Email the Washington State Department of Health at [nourishedandactive@doh.wa.gov](mailto:nourishedandactive@doh.wa.gov), or visit the “Nourished and Active in Early Learning” website at <http://www.doh.wa.gov/HEAL/earlylearning>.



DOH 140-230 February 2020 English

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