Family Child Care Home Providers

Child Care Nutrition and Physical Activity Survey

EARLY CHILDHOOD WORKING GROUP AND WEIGHING IN, CHILDREN'S MERCY HOSIPTALS AND CLINICS—KC COLLABORATIVE ON CHILDHOOD OBESITY

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Authored by: Cheryl A. Gibson, Ph.D., Corie Pritchard, M.S., Sara Staubach, M.S., & Erin McNamara, B.S. University of Kansas Medical Center In collaboration with: Deborah Markenson, MS, RD, LD Children's Mercy Hospitals and Clinics

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Background

Approximately one-third of children are overweight or obese in the Greater Kansas City Area. The Early Childhood Working Group supported by Children's Mercy Hospitals and Clinics' program: Weighing In undertook a planning process which included a review of current evidence-based interventions shown to impact risks for obesity for children 5 and under. It was determined that the child care setting was the priority area of focus for the working group's efforts due to the evidence amassed for successful interventions in this setting and the potential reach these efforts could have in view of the approximate 55,000 children receiving care in 1,800 Kansas City area child care homes and centers. In addition, this setting provides an opportunity to impact children's physical activity levels and food habits and palates in the younger years. This is an important issue because it lays foundation for life-long healthy habits. A school-age child who is obese has difficulty changing food habits if he/she was not exposed to a healthy variety at an early age. Also preschool children who are obese are more likely to remain heavy at age 12 compared to normal weight preschoolers.

RATIONALE

In order to better understand the needs, current practices, and constraints of home providers and tailor strategies accordingly, the working group undertook a survey of family childcare providers in the Greater Kansas City area. The information gathered will be used to develop appropriate resources and supports for child care providers.

STUDY DESIGN

TARGET STUDY POPLUATION SPECIFICS

This is a survey of licensed child care providers in home facilities to determine their current status and needs. There are approximately 1325 family daycare providers in our study area.

Inclusion Criteria

- Licensed family child care home provider participating in training or who sees on-line link to survey
- Licensed facility in one of 6 counties: Johnson and Wyandotte-KS; Jackson, Clay, Platte, and Cass-MO

Exclusion Criteria

• Survey will only be done in English

DATA COLLECTION

Data Collection Procedures

Children's Mercy staff had discussions with the early childhood working group members and select early childhood agency staff to identify the best approaches for promotion and distribution of the survey. This input was received from staff working in the child care resource and referral agency, the licensing offices for the bi-state area, state administrators of the Child and Adult Care Food Program, and Head Start. A promotional flyer and short articles were disseminated to child care providers through multiple newsletters, e-mails, and website postings by early childhood agencies throughout the data collection period. This information gave the purpose of the survey and encouraged providers to complete the survey at trainings or on-line. E-mail addresses were not available from licensing offices so survey links could not be forwarded directly to all licensed providers. The link to the center version of the survey was provided in multiple electronic communications. Paper copies of the survey were distributed at trainings by resource and referral agency, and in Kansas, by county licensing staff at child care trainings. Those distributing the survey were provided talking points and short training and asked to explain the purpose, answer questions, distribute and collect survey forms, provide a take-home information sheet for those attending and return the completed surveys to Children's Mercy for data entry. The collection period covered three and half months in order to include a large training sponsored by the resource and referal agency scheduled at the end of that time. The Kansas licensing offices in Johnson and Wynadotte counties distributed a letter to all of their licensed facilities encouraging them to complete the survey.

STATISTICAL CONSIDERATIONS

Measures

The data to be collected from the survey included the type of facility, age range of children for which they provide care, frequency of select daily practices (e.g., adults join table at meal time, meals and snacks are scheduled regularly), types and frequency of foods served; physical activity practices; opinions on obesity among children, families and staff, community partners, and training issues.

General Design Issues

The survey tool has been developed using previously field-tested surveys for home child care providers. We focused on those issues that are most directly related to factors that influence nutrition and physical activity and risks for obesity. We wanted to make sure we

have input from child care providers on what their needs and priorities are prior to planning our collaborative actions.

Sample size determination

There are approximately 1325 home child care facilities in our study area. We aim to reach about 60% of those providers, for an approximate sample size of 795. Power calculations were not completed for this descriptive study.

Data Analyses

Descriptive statistics were calculated for all variables. Frequencies were reported for categorical variables. Statistical analyses were performed using Microsoft Excel and SPSS PC+ (Statistical Package for the Social Sciences) software (SPSS version 14, Chicago, IL).

Results

Child Care Facilities

Two hundred ninety individuals completed the survey. The type of child care facility represented by each of the survey respondents is indicated in Table 1. As shown, the majority of respondents comprised home child care facilities.

Table 1. 7	Type of Child	Care Facility
------------	---------------	---------------

Facility	Ν	9⁄0
Group Home	55	19.0%
Head Start	2	0.7%
Home	222	77.9%
Not Indicated	11	3.9%
Total	290	100.0%

Based on self-reported zip codes, the respondents' child care facilities were located primarily in Johnson county Kansas. Table 2 provides a listing of completed surveys by county. As shown, only 13 surveys were completed by respondents located in Missouri.

Table 2. Number of Child Care Facilities by County

County	Number Surveys	State	
Johnson	224 (77.2%)	KS	
Leavenworth	6 (2.1%)	KS	
Miami	14 (4.8%)	KS	
Wyandotte	28 (9.7%)	KS	
Cass	1 (0.3%)	MO	
Clay	2 (0.7%)	МО	
Jackson	1 (0.3%)	МО	
Not indicated	14 (4.8%)		

About 74% of respondents (214/290) reported they have been in child care for 7 or more years. The number of years providing child care by type of facility is listed in Table 3. As displayed, only 3 child care facilities had been in operation for less than one year while about 13% of the facilities have provided child care for less than 4 years.

Table 3. Number of Years in Child Care

# Years in Child Care	Group Home Head Start Ho		Home	Blank*	Totals	
Less than 1 year	0	0	3 (1.4%)	0	3 (1.0%)	
1 to 3 years	2 (4.0%)	0	34 (15.3%)	1(6.3%)	37 (12.8%)	
4 to 6 years	5 (10.0%)	0	24 (10.8%)	2 (12.5%)	31 (10.7%)	
7 or more years	43(86.0%)	2 (100%)	160 (72.1%)	9 (56.3%)	214 (73.8%)	
Did not indicate	0	0	1 (0.5%)	4 (25.0%)	5 (1.7%)	
Grand Total	50 (17.2%)	2 (0.7%)	222 (76.6%)	16 (5.5%)	290	

*Type of facility not indicated.

When asked if they participate in the Child and Adult Care Food Program, 89% of respondents (257 out of 290) indicated they do, while 4 respondents did not indicate whether or not their agency is part of that program. About 97% of respondents indicated

their child care facilities were licensed while only 3 child care facilities indicated they were not licensed. Four facilities did not indicate whether or not they were licensed.

When asked to indicate the age groups for which they provided care by checking all that apply, the respondents indicated they care for a number of different age groups. As shown in Table 4, the majority of child care facilities provided care for infants, 1 to 2 year olds, 3 to 5 year olds, school age, and offered before/after school care.

Table 4. Age Groups Provided Care

Age Group	Number of Child
	Care Facilities
Infants	238 (82.1%)
1-2 year olds	275 (94.8%)
3-5 year olds	247 (85.2%)
School-age	167 (57.6%)
After of Before school hour care	166 (57.2%)
Other	5 (1.7%)
Did not indicate	5 (1.7%)

*Percentages add up to more than 100% because participants were instructed to indicate all that implied.

Daily Practices

Child care directors were asked about 15 different daily practices and how often each practice was undertaken (i.e., rarely or never, some of the time, most of the time, or all of the time). Table 5 provides the number of child care facilities that participate in a particular daily practice and how often the practice is implemented.

Daily	Practice	Rarely or never	Some of the time	Most of the time	All of the time	Did Not Indicate
1.	Parents are informed about what their children are eating.	5 (1.7%)	38 (13.1%)	78 (26.9%)	167 (57.6%)	2 (0.7%)
2.	Staff join children at the table for meals.	31(10.7%)	70 (24.1%)	98 (33.8%)	88 (30.3%)	3 (1.0%)
3.	Staff eat and drink the same food and drinks as children.	23 (7.9%)	77 (26.6%)	114 (39.3%)	72 (24.8%)	4 (1.4%)
4.	Meals and snacks are scheduled at regular times.	1 (0.3%)	0	72 (24.8%)	214 (73.8%)	3 (1.0%)
5.	Children decide which foods they will eat from those offered.	30 (10.3%)	74 (25.5%)	59 (20.3%)	120 (41.4%)	7 (2.4%)
6.	Children are required to eat all the food on their plates.	222 (76.6%)	42 (14.5%)	20 (6.9%)	1 (0.3%)	5 (1.7%)
7.	Water is freely available both indoors and outdoors.	1 (0.3%)	6 (2.1%)	29 (10.0%)	251 (86.6%)	3 (1.0%)
8.	Special occasions and holidays are celebrated with mostly healthy foods or non-food treats.	18 (6.2%)	81 (27.9%)	130 (44.8%)	54 (18.6%)	7 (2.4%)
9.	Food is used to encourage positive behavior.	227 (78.3%)	43 (14.8%)	5 (1.7%)	8 (2.8%)	7 (2.4%)
10.	Restriction of play time is used as a disciplinary tool.	208 (71.7%)	54 (18.6%)	15 (5.2%)	7 (2.4%)	6 (2.1%)
11.	I participate in physical activities with the children.	6 (2.1%)	66 (22.8%)	104 (35.9%)	110 (37.9%)	4 (1.4%)
12.	Infants and children up to age 2 watch TV or movies (DVD or videos).	177 (61.0%)	100 (34.5%)	3 (1.0%)	4 (1.4%)	6 (2.1%)
13.	Children age 2 and older watch TV or movies (DVD or videos).	85 (29.3%)	181 (62.4%)	12 (4.1%)	3 (1.0%)	9 (3.1%)
14.	A supportive breastfeeding environment is provided.	30 (10.3%)	14 (4.8%)	23 (7.9%)	216 (74.5%)	7 (2.4%)
15.	If you provided care for infants in the	Yes	No	Did not car	e for infants	Blank
	last year, did you have any that were breastfed?	195 (67.2%)	54 (18.6%)	36 (12	2.4%)	5 (1.7%)

Table 5. Daily Practices of Child Care Facilities (n = 290)

Foods Served

Child care directors were asked 10 questions relating to the type of foods and beverages served at their centers and how often these items are served (e.g., rarely or never, less than 4 times per week, one time per day or 2 or more times per day). Table 6 lists the particular food/beverage question and the number of child care facilities that offer a particular item at the stated frequency.

Table 6. Foods Served (n=290)

Daily	Practice	Rarely or never	Less than 4 times/wk	1 time/day	2 or more times/day	Did not indicate
16.	Fruit, including fresh, frozen or canned is offered (not including juice).	0	3 (1.0%)	27 (9.3%)	256 (88.3%)	4 (1.4%)
17.	100% fruit juice is offered.	79 (27.2%)	93 (32.1%)	77 (26.6%)	38 (13.1%)	3 (1.0%)
18.	Vegetables, including fresh, frozen or canned are offered (not including French fries, tater tots, hash browns)	0	1 (0.3%)	122 (42.1%)	164 (56.1%)	3 (1.0%)
		Rarely or never	Some of the time	Most of the time	All of the time	Did not indicate
19.	Cooked vegetables are prepared with added fat, margarine/butter or fried.	217 (74.8%)	61 (21.0%)	6 (2.1%)	4 (1.4%)	2 (0.7%)
		Rarely or never	Less than 4 times/wk	1 time/day	2 or more times/day	Did not indicate
20.	Whole grain bread, oatmeal, or cereal, whole wheat or corn tortillas, or other whole grains are offered.	3 (1.0%)	34 (11.7%)	75 (25.9%)	175 (60.3%)	3 (1.0%)
		Rarely or never	Less than 4 times/wk	1 to 2 times/wk	3 to 4 times/wk	Did not indicate
21.	Chicken nuggets, fish sticks, hot dogs, corn dogs, bologna or lunch meat, sausage or bacon are offered.	79 (27.2%)	66 (22.8%)	129 (44.5%)	13 (4.5%)	3 (1.0%)
		Rarely or never	Less than 4 times/wk	1 time/day	2 or more times/day	Did not indicate
22.	Sweet or salty foods (cookies, cakes, muffins, chips, etc.) are offered.	131 (45.2%)	142 (49.0%)	11 (3.8%)	3 (1.0%)	3 (1.0%)
23.	Milk served to children ages 2 and older is usually	Skim or non-fat	1% low-fat milk	2% reduced fat	Whole or regular	Did not indicate
		80 (27.6%)	158 (54.5%)	39 (13.4%)	11 (3.8%)	2 (0.7%)
		Rarely or never	Some of the time	Most of the time	All of the time	Did not indicate
24.	Flavored milk, like chocolate or strawberry, is offered.	244 (84.1%)	39 (13.4%)	2 (0.7%)	1 (0.3%)	4 (1.4%)
25.	Sugary drinks (e.g., Kool-Aid, Sunny D, sweet tea, soda, Tampico) or sports drinks (e.g., Gatorade) are offered.	274 (94.5%)	12 (4.1%)	1 (0.3%)	0	3 (1.0%)

Physical Activity

Child care directors were asked three questions about the frequency of active play and planned movement activities at their centers. Table 7 provides the information about the number of child care facilities that engage in a particular activity at the stated frequency.

Physical Activity	Rarely or never	Less than 1 hour/day	1 to 2 hours/day	More than 2 hours/day	Did not indicate
 Daily play and planned movement experiences both indoors and outdoors are provided to children. 	2 (0.7%)	15 (5.2%)	143 (49.3%)	128 (44.1%)	2 (0.7%)
	Rarely or never	Less than once/wk	1 time/day	2 or more times/day	Did not indicate
27. Outdoor active play is provided for all children, weather permitting.	1 (0.3%)	0	102 (35.2%)	184 (63.4%)	3 (1.0%)
	Limited and children take turns	Some variety but still take turns	Good variety— most can use	Much variety— most can use at same time	Did not indicate
28. Play equipment and planned activities are available for all children to be active during play time.	9 (3.1%)	20 (6.9%)	133 (45.9%)	125 (43.1%)	3 (1.0%)

Opinions on Obesity

For the next section of the survey, child care directors were asked about their opinions on obesity. Directors were asked to indicate how much of a problem obesity was for children and parents of children in their program, and themselves. Table 8 provides the responses to each of the questions. As shown, the majority of child care directors do not view obesity as a significant problem among children or parent of children in their program. About one-third of directors indicated obesity was a small problem among parents of children in their program. Additionally, about 40% of child care directors indicated obesity was not a problem at all while less than 20% of directors indicated obesity as a moderate problem for them as individuals.

Table 8. Extent of Obesity Problem (n=290)

In your opinion:	Not a problem at all	Small problem	Moderate problem	Large problem	Very large problem	Did not indicate
29. How much of a problem is obesity among the children in your program?	228 (78.6%)	48 (16.6%)	9 (3.1%)	0	1 (0.3%)	4 (1.4%)
30. How much of a problem is obesity among the parents of children in your program?	146 (50.3%)	95 (32.8%)	40 (13.8%)	4 (1.4%)	2 (0.7%)	3 (1.0%)
31. How much of a problem is obesity for you?	114 (39.3%)	71 (24.5%)	54 (18.6%)	30 (10.3%)	17 (5.9%)	4 (1.4%)

Community Partners

To learn if child care directors are collaborating with anyone in the community to encourage children's healthy eating and physical activity, two questions concerning these issues were asked. Approximately one-third (\sim 32%) of child care directors indicated they had joined with the community to encourage children's healthy eating. About 27% of child care directors joined with the community to encourage children's physical activity. Of those who worked with the community to encourage healthy eating and physical activity, Table 9 lists the organizations specified by the directors.

Table 9. Partner Organizations for Healthy Eating and Physical Activity	Table 9.	Partner	Organizations	for Health	y Eating	and Ph	ysical Activity	y
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Community Partners Healthy Eating		
List of organizations	Frequency	
Daycare Connection	31	
Government Program	10	
Regional Program	18	
Other	25	
Community Partners Physical Activity		
List of organizations	Frequency	
Daycare Connection	3	
Government Program	17	
Youth Programs (Parks/Recreation	21	
activities, youth sports)		

Nutrition Education and Physical Activity Training

For this section of the survey, child care directors were asked six questions concerning nutrition education and physical activity training. Table 10 provides the results for how much training on child nutrition and physical activity has been completed in the last 12 months and whether or not the directors would like more information on obesity prevention practices and routines for parents of children in their program and themselves. As shown, a significant proportion of parents does not receive or rarely receives information that encourages physical activity (~48%) and healthy eating (~36%). In contrast, about 30% of child care directors indicated parents are provided information that encourages physical activity several times a year. Approximately 37% of child care directors indicated parents are provided information several times a year.

		• •		At least monthly	At least week	Did not indicate	
34.	Parents are provided information that encourages physical activity.	137 (47.2%)	89 (30.75%)	33 (11.4%)	25 (8.6%)	6 (2.1%)	
35.	Parents are provided information on child nutrition and healthy eating.	104 (35.9%)	108 (37.2%)	47 (16.2%)	29 (10.0%)	2 (0.7%)	
		Workshop/ training	Read articles/ books	Online training	DVD/video	None	
36.	Please mark the training or actions that you completed in the last 12 months to learn about practices and routines that apply to nutrition and feeding children. Mark all that apply.	197 (67.9%) 80 (27.6%)	37 (12.8%)	21 (7.2%)	12 (4.1%)	
37.	Please mark the training or actions that you completed in the last 12 months to learn about practices and routines that apply to physical activity. Mark all that apply.	174 (60.0%) 84 (29.0%)	15 (5.2%)	18 (6.2%)	33 (11.4%)	

Table 10. Child Nutrition and	Physical Activity $(n = 290)$
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38.	Would you like more	Yes = 113 (39.0%)	No = 167 (57.6%)	Did not indicate = 10
	information on practices and	· · · · ·	· · · · ·	(3.4%)
	routines to prevent obesity and			
	increase activity living/healthy			
	eating among young children			
	in your child care home?			
39.	Would you like information	Yes = 123(42.4%)	No = 159 (54.8%)	Did not indicate = 8
	that you can share with your			(2.8%)
	parents on ways to increase			
	physical activity and healthy			
	eating to prevent obesity for			
	the children in your care?			

Of those who responded that they would like information on practices and routines to prevent obesity and increase activity/healthy eating among young children in their child care home.

Of those who wanted more information that could be shared with parents on ways to increase physical activity and healthy eating to prevent obesity for the children in their care, the following table provides a listing of the types of information wanted.

Table 11. Information Requests for Physical Activity and Healthy Eating

Responses	Frequency	
Information for parents in the form of newsletters, articles, handouts, in-services, pamphlets, emails, website links	27	
Any information available	24	
Other	13	

Additional Comments

For the last section of the survey, respondents were invited to include additional comments. These comments were organized into common themes. Of those that responded to this question (n=52), 25% (n= 17) mentioned that healthy eating and physical activity habits need to be promoted in some fashion while 12% (n=8) indicated that they are already providing educational materials to parents. There were comments about regulations being too strict (16%, n=11) with several respondents discussing the requirement for skim milk as

too restrictive and resulting in hungry children and waste due to children not drinking it. Finally, 15% (n=10) respondents indicated they need more training and/or educational materials. Some specific comments received are listed below:

"I know some of the youngsters in my daycare do not get as many healthy meals at home as they should; however, approaching this subject with parents is likely to cause the parents to change daycare and sometimes it is difficult to fill those spots.

"The food program for us providers is WAY [too] strict. Time to ease up a tad bit and realize that eating at daycare is better than the junk they are getting at home. No need in the skim milk issue. I think as long as we follow the food pyramid and the rules there, we should be ok. And the way certain items have to be written, what ALL has to be recorded. . . it's getting ridiculous."

"I have a child in care with food allergies. It would be great to see a class addressing healthy eating for children with allergies."

"All information is helpful – thank you."

Appendix A

Child Care Nutrition and Physical Activity Survey Early Childhood Working Group-KC Collaborative on Childhood Obesity Family Child Care Home Providers

Dear Family Child Care Home Provider,

Children's eating and play habits are formed during these earliest years and child care experiences help shape these habits. Kansas City's Childhood Obesity Collaborative— Weighing In wants to support you in this important job.

We are inviting providers to help us learn more about the current nutrition, feeding and physical activity practices among child care providers in the Greater Kansas City area. The information we gather will be tallied to reflect the area as a whole and will help us develop appropriate resources and supports.

Please take 10 minutes to complete this survey. Your answers will be kept private and your time is appreciated.

First, please tell us a little bit about you, but no names or identifying information. We want							
to keep your responses completely anonymous.							
Zip Code for your facility:	Type of Child Care Fa Start	cility: 🗌 Home 🛛 Group Home 🗌 Head					
Number of children you typical	ly care for in a day:	Age groups for which you provide care (check all					
		that apply):					
		\Box infants \Box 1-2 year olds \Box 3-5 year olds \Box school-age					
How many years have you been	in child care?	\Box after or before school hour care					
\Box Less than 1 year \Box 1-3 years \Box	4-6years 27 or more	□ other, please specify:					
years	,						
		Do you provide before and after school care?					
De mer perticipate in the Child	and Adult Cana Faad	\Box Yes \Box No					
Do you participate in the Child	and Adult Care Food	If yes, what proportion of the children enrolled at your facility					
Program?		is before or after school care?					
\Box Yes \Box No		\Box less than 25% \Box 25-50% \Box more than 50%					
Are you licensed?		Do you care for children for part days?					
		Yes No					
\Box Yes \Box No		If yes, what proportion of the children enrolled at your facility					
		are part day care?					
		\Box less than 25 \Box 25-50% \Box more than 50%					

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Child Care Providers Nutrition and Physical Activity Survey—HOMES

EPlease mark the box that describes your current practice.

Daily Practices	Rarely or never	Some of the time	Most of the time	All of the time
1. Parents are informed about what their children are eating:				
2. Staff join children at the table for meals:				
3. Staff eat and drink the same food and drinks as children:				
4. Meals and snacks are scheduled at regular times:				
5. Children decide which foods they will eat from those offered:				
6. Children are required to eat all the food on their plates:				
7. Water is freely available both indoors and outdoors:				
8. Special occasions and holidays are celebrated with mostly healthy foods or non-food treats:				
9. Food is used to encourage positive behavior.				
10. Restriction of play time is used as a disciplinary tool:				
11. I participate in physical activities with the children:				
12. Infants & children up to age 2 watch TV or movies (DVD or videos):				
13. Children age 2 and older watch TV or movies (DVD or videos):				
14. A supportive breastfeeding environment is provided:				
15. If you provided care for infants in the last year, did you have any that were breastfed?	The Yes	🗆 No	Did not car	e for infants
Foods Served				
16. Fruit , including fresh, frozen or canned is offered (NOT INCLUDING juice):	Rarely or never	□ less than 4 times/week	□ 1 time/ day	2 or more times / day
17. 100% fruit juice is offered:	Rarely or never	□ less than 4 times/week	□ 1 time/ day	2 or more times / day
 Vegetables, including fresh, frozen or canned are offered (NOT INCLUDING French fries, tater tots, or hash browns): 	Rarely or never	less than 4 times/week	□ 1 time/ day	2 or more times / day
19. Cooked vegetables are prepared with added meat fat, margarine/butter, or fried:	Rarely or never	Some of the time	Most of the time	All of the time
20. Whole grain bread, oatmeal, whole grain cereal, whole wheat or corn tortillas, or other whole grains are offered:	Rarely or never	□ less than 4 times/week	□ 1 time/ day	2 or more times / day
21. Chicken nuggets, fish sticks, hot dogs, corn dogs, bologna or other lunch meat, sausage or bacon are offered:	Rarely or never	□ less than 4 times/week	□ 1-2 time/ week	3-4 times /week
22. Sweet or salty foods (cookies, cakes, muffins, chips, etc) are offered:	Rarely or never	□ less than 4 times/week	1 time/ day	2 or more times / day
23. Milk served to children ages 2 years and older is usually:	Skim or non-fat	1% low-fat	2% reduced fat	Whole or regular
24. Flavored milk, like chocolate or strawberry, is offered:	Rarely or never	Some of the time	Most of the time	All of the time
25. Sugary drinks (e.g., Kool-Aid TM , SunnyD, sweet tea, soda Tampico [®]) or sports drinks (e.g. Gatorade) are offered:	Rarely or never	Some of the time	Most of the time	All of the time

Ph	ysical Activity									
	Daily play and planned movement experiences both indoors and outdoors are provided to children.	;	Rarely onever	or	Less th		□1-		□More th hours/day	
27.	Outdoor active play is provided for all children, weather permitting.		Rarely	or	hour /day		hours/day		2 or times / da	
28.	 Play equipment and planned activities are available for all children to be active during play time. 		□ limited a children tak turns		□ some vari but still take turns	~			□much va most can u same time	ise at
In	your opinion:									
29.	How much of a problem is obesity among the <i>children</i> in ye program?	our	□Not problem at all		□ Small problem	Пм prob	loderate lem	□La probl	em lar] Very ·ge oblem
	How much of a problem is obesity among the <i>parents of children</i> in your program?		□Not probler at all		□Small problem	Пм prob	Ioderate lem	□La probl	em lar] Very ge oblem
31.	How much of a problem is obesity for <i>you</i> ?	r you?			□ Small problem	Пм prob	loderate lem	□La probl	em lar] Very ge oblem
Co	ommunity Partners									
32.	2. During the past year, did you join with anyone in the community to encourage children's healthy eating ?			es	□No		If yes, please specify:		cify:	
	33. During the past year, did you join with anyone in the communi to encourage children's physical activity?			es	□No		If yes, please specify:			
	utrition Education and Physical Activity Train	ing								
34.	Parents are provided information that encourages physical activity.	□ nev	Rarely or er		☐ Sever times a y			At least onthly	A week	t least ly
35.	Parents are provided information on child nutrition and healthy eating.	□ nev	Rarely or er		☐ Several times a year		r At least monthly		A week	t least ly
36.	Please mark the training or actions that you completed in the last 12 months to learn about practices and routines that apply to nutrition and feeding children (e.g., cooking with children, dealing with picky eaters)? Please mark all that apply. <i>If other, please specify</i> :	Workshop/ training			Read articles/ line]On- ne aining	DVD video	/ DNC	her, e y in
37.	Please mark the training or actions that you completed in the last 12 months to learn about practices and routines that apply to physical activity ? (e.g., active play, designing safe play space, age-appropriate activities.) Please mark all that apply. <i>If other, please specify:</i>	Workshop/ training			articles/ l]On- ne aining	DVD video	/ DNC	her, e y in
38.	Would you like more information on practices and routines to prevent obesity and increase active living/healthy eating among young children in your child care home?	□ Yes			□ No]	If yes, J	blease spec	I	
39.	Would you like information that you can share with your parents on ways to increase physical activity and healthy		Yes		□ No]	If yes, p	olease spec	rify:	

40. Any other comments?

You have completed all of the questions. Thank you for taking the time to complete this survey.