

CHILD AND ADULT CARE FOOD PROGRAM BEST PRACTICES IN HOME CHILDCARE IN OKLAHOMA

Purpose

This study aiming to assess the impact of Happy Healthy Homes on health-related foods and nutrients served to and consumed by young children, and the level of achievement of Child and Adults Care Food Program (CACFP) requirements and best practices by Family Child Care Homes (FCCH) providers.



Happy Healthy Homes

OUHSC College of Allied Health & College of Public Health
OSU College of Human Sciences
Oklahoma Cooperative Extension Service
Oklahoma Department of Human Services
State Department of Education

**45 Oklahoma
FCCH providers**

**24
providers**

Nutrition Group

**21
providers**

Control Group

Intervention

The intervention was a comprehensive educational program designed to improve the nutrition and feeding practices of Family Child Care Home (FCCH) providers.

- Two in-home individual education sessions including education, activities, reflection, and goal setting.
- One small group cooking class focused on recipes that met CACFP best practices
- A check-in phone call

The education sessions focused on goal setting, improving CACFP best practices, greater portion size awareness, and responsive feeding behaviors.



INITIAL
SCREEN



BASELINE
MEASUREMENT

INTERVENTION
VISIT ONE



GROUP
CLASS



FOLLOW-UP
PHONE CALL



INTERVENTION
VISIT TWO

3-MONTH
MEASUREMENT



12-MONTH
MEASUREMENT



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What was measured

- Nutrients served and consumed
- Percentage of MyPlate recommendations consumed
- Achievement of CACFP requirements and best practices



There was a **26%** reduction in sugar served and consumed by the intervention group

Findings

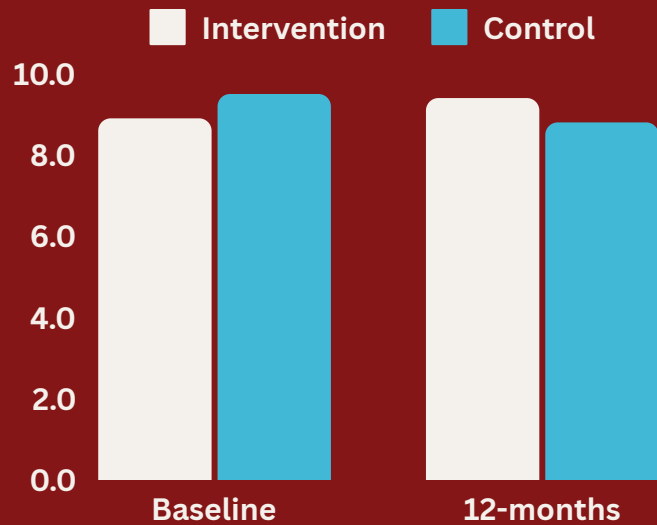


At baseline 83% of CACFP requirements, 51% of CACFP best practices, and 48% of food preparation practices were being met.

The control group had a decrease in vegetables served and consumed at 3 and 12 months compared to baseline



CACFP BEST PRACTICE SCORES



Key Messages

- There improvements in the number of CACFP Best Practices being met and some improvements in diet quality within the intervention group although the effect size was small.
- There were no significant group-by-time differences in the quality of foods served or consumed.
- An increase in the duration of the intervention or the inclusion of more intervention components/ education sessions can be explored in future research.
- This study can be used to inform future nutrition and implemented to help in obesity-prevention interventions for children.

