

ASSOCIATIONS BETWEEN FOOD ENVIRONMENT WITH NUTRITION SELF-EFFICACY, KNOWLEDGE AND FOODS SERVED IN CHILD CARE HOMES

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Background: Improvement of childhood nutrition is a point of focus when discussing childhood obesity prevention. Childhood nutrition is influenced by the attitudes and practices of their primary caregivers, including childcare providers. Neighborhood access to healthful food outlets often determines dietary quality of residing children and families. However, the relationship between food access and nutrition outcomes is unknown for family childcare home (FCCH) providers, where childcare takes place in the provider's residence.

Purpose: Determine the relationship between grocery store quality and access with FCCH provider nutrition self-efficacy, nutrition knowledge, and service of fresh fruits and vegetables.

Methods: The sample was comprised of FCCH providers participating in the larger Happy Healthy Homes intervention study; participants served 2-5-year-old children, were within 60 miles of Oklahoma City, and participated in the Child and Adult Care Food Program (CACFP). Grocery store access and quality of the nutrition environment were derived from a grocery store evaluation and audit that collected data on the location and examined areal availability of fresh fruits and vegetables at 457 grocery stores throughout the state of Oklahoma. FCCH provider nutrition self-efficacy and knowledge were determined by self-reported surveys. Service of fresh fruits and vegetables was determined by two in-home observations by trained research staff. SPSS version 25.0 was used to calculate means, standard deviations, and percent of frequencies.

Results: Data were included from 49 FCCH providers. The mean distance in miles to the grocery store (roundtrip) was 9.7 ± 9.8 . Responses from the nutrition self-efficacy questionnaire indicated a higher confidence in both service of fruit 47 (95.9%) and service of vegetables 37 (75.5%) to children compared to those who were not confident in serving fruits and vegetables 12 (24.5%). Overall the providers experience low perceived barriers for providing fruits and vegetables to children. The median nutrition knowledge response was 26 (60%) out of 38 total points possible with sub categories including nutrition knowledge regarding food groups, food choice, advice from health experts and health issues related to diet. Further analysis to describe relationships between grocery store access and quality with nutrition outcomes will be presented at the date of the conference.

Discussions/Conclusions: These baseline descriptive statistics indicate that overall, FCCH providers have a high nutrition self-efficacy and knowledge, and experience low perceived barriers to serving children fruit and vegetables. Forthcoming analyses will determine the relationships between grocery store access and provider nutrition self-efficacy, knowledge and service of fresh fruits and vegetables.

Relevance to Allied Health: These results can be taken into consideration when determining interventions to improve nutrition environments of FCCH ensuring that providers have nutrition knowledge, low perceived barriers and confidence in serving their children fruits and vegetables. Furthermore, these results will give insight to professionals providing treatments and making referrals for patients with various health problems who reside in low-access areas and face different barriers to accessing healthful foods.

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