



## **PROMOTING A CULTURE OF HEALTH IN BALTIMORE'S FAMILY CHILD CARE HOMES**

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Nearly 2 million young children in the U.S. are cared for in Family Child Care Homes (FCCH)s where they have opportunities for physical activity and receive most of their daily meals and beverages. Given that approximately one quarter of young children are overweight/obese, a greater understanding of the environment and practices in FCCHs will inform overweight/obesity prevention strategies in children. Of particular interest is the impact of the Child and Adult Care Food Program (CACFP), a federal initiative to combat childhood obesity by providing nutrition training and cash reimbursements to eligible childcare providers to purchase nutritious foods. The objective of this presentation is to discuss two studies (one past and one ongoing) with the overall aim of examining the nutrition, physical activity, and screen time environment and practices of Baltimore's CACFP and non-participating CACFP FCCHs.

The purpose of the first study was to describe and determine the association between the nutrition environment and child care provider practices in Baltimore's FCCHs. We compared the mealtime environment in non-CACFP and CACFP FCCHs and examined the association between the mealtime environment and provider practices in the FCCH. We used a cross-sectional design with a proportionate stratified random sample of Baltimore's FCCH providers by CACFP participation. We collected data by telephone using the nutrition part of the Nutrition and Physical Activity Self-Assessment for Child Care Survey. Ninety-one licensed providers (69 CACFP, 22 non-CACFP) participated. More CACFP than non-CACFP FCCHs exceeded childcare nutrition standards in meal style delivery, encouragement of new foods, quality of vegetables served, and quality and frequency of whole grains served. Non-CACFP FCCHs had lower mean mealtime environment scores ( $\beta=-0.18$ ,  $p=0.04$ ). Mealtime environment was positively associated with the quality of foods offered to children ( $\beta=0.26$ ,  $p=0.008$ ). These relationships persisted after adjusting for provider-level characteristics.

The purpose of our present and ongoing study is a mixed methods study to describe the physical activity and screen time environment of Baltimore's FCCHs and to explore FCCH providers' attitudes, beliefs, intent, and challenges regarding the physical activity and screen time environment and practices. We will enroll a convenience sample of 30 FCCH providers, conduct systematic observations of the FCCH environment and practices, and assess FCCH providers' attitudes, beliefs, intent, and challenges regarding PA and screen time.

Our ultimate goal is to design a multi-level, feasible, and acceptable solutions for improving the nutrition, physical activity and screen time environment and practices tailored to Baltimore's FCCHs serving predominantly African-American children.