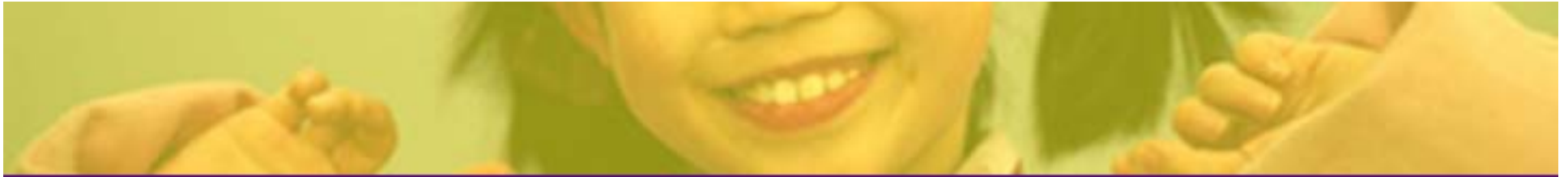


A young child with light-colored hair is shown in profile, blowing bubbles. The background is a soft, greenish-yellow color with many bubbles floating around. The child's face is lit up with a smile, and their eyes are closed in a happy expression. The overall mood is joyful and carefree.

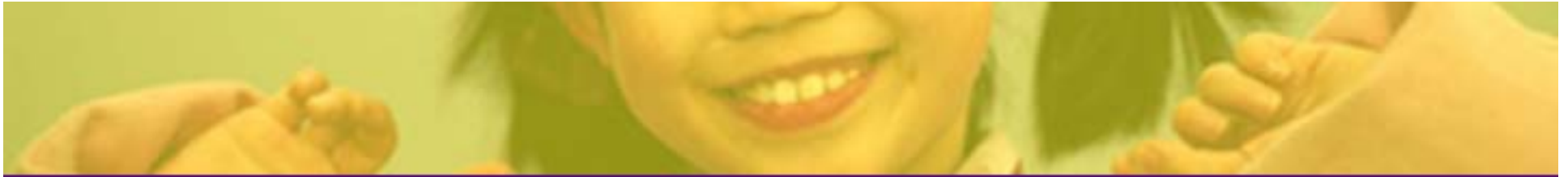
# Healthy Weight at Child Care: The NAP SACC Project

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# Significance

- Childhood overweight is a growing public health concern.
- Nationwide, the number of preschool children classified as overweight has doubled over the past 15 years (from 7 to 14%).



## Background

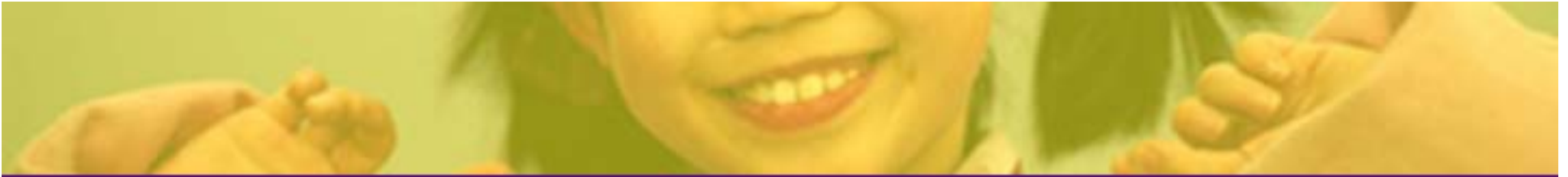
- In 2001, 56% of children aged 3-5 yrs enrolled in child care or preschool
- Child care setting is ideal for promoting early development of health behaviors
- Little research has examined unique contributions of child care setting on children's diet and physical activity levels



## What have we observed?

### The Good

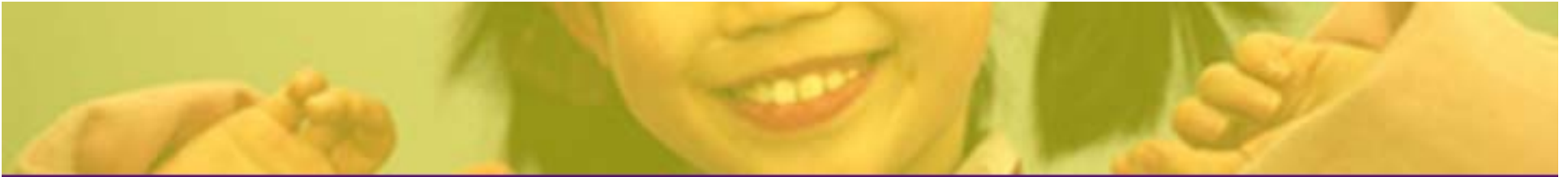
- Virtually all juice served is 100%.
- Most follow CACFP guidelines.
- Most centers serve fruit every day.
- Children are provided with adequate amounts of active play time.
- Most centers have climbing structures of some sort.



## What have we observed?

### The Bad & The Ugly

- Whole milk is predominant.
- 100% juice served often in place of fruit.
- Most serve a majority of high fat or fried meats.
- Few serve meals family style.
- Many facilities watch TV.
- PA education for staff is rare.



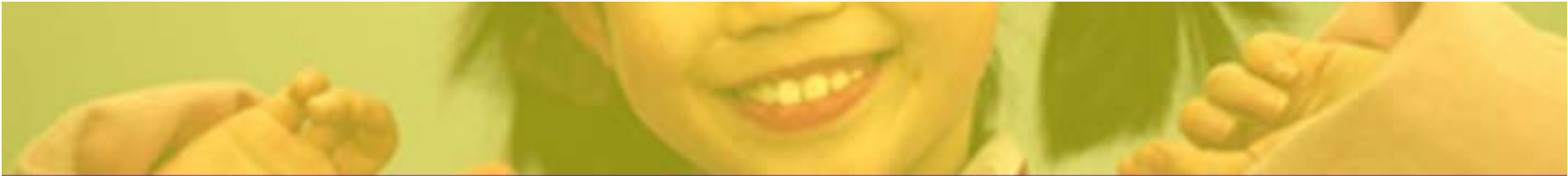
## How can we make a difference?

- Develop training programs for staff in PA and nutrition education (CE credit)
- Disseminate models that improve the healthy weight environment at child care
- Work with policy makers to encourage adoption of healthy weight environmental standards



## Organizational Intervention Design

- Few interventions have been designed to address healthy weight in preschool children
- The child care setting is an excellent opportunity to address environment, policy, and practice



# The Nutrition and Physical Activity Self Assessment for Child Care Project (NAP SACC)

**Goal:** to promote healthy eating and physical activity in young children in child care and preschool settings.





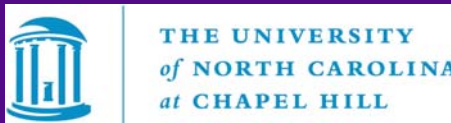


# NAP SACC - Overview

- Intervention study aimed at improving nutrition and PA environment, practices and policies in child care facilities in order to facilitate healthy weight behaviors in young children



# NAP SACC Development Team



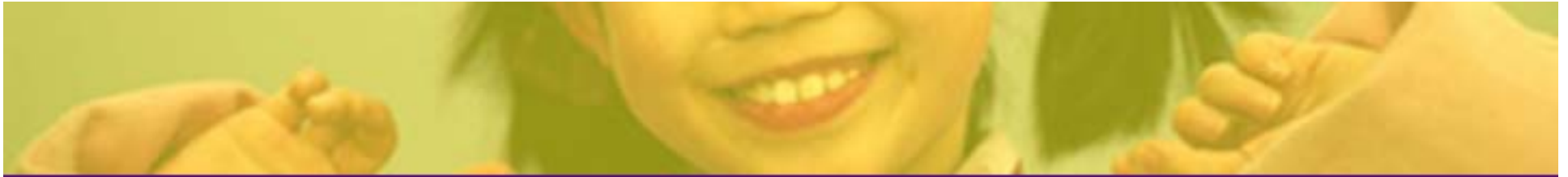
- NC Division of Public Health
- UNC Center for Health Promotion Disease Prevention
- UNC Schools of Public Health and Medicine, Dept of Nutrition
- North Carolina Prevention Partners

Funding for NAP SACC was provided by the Centers for Disease Control and Prevention, the National Institutes of Health, and the NC Division of Public Health



# NAP SACC Development

- Interviews of child care staff
- Focus Groups with parents
- Review of literature, regulations and best practice guidelines
- Consultation with experts including advisory group



## Intervention Model

- NAP SACC was designed to use a health professional to support changes at child care.
- We have worked with child care (CC) consultants and nutrition educators; health educations can be used as well
- Also, have provided direct training to CC



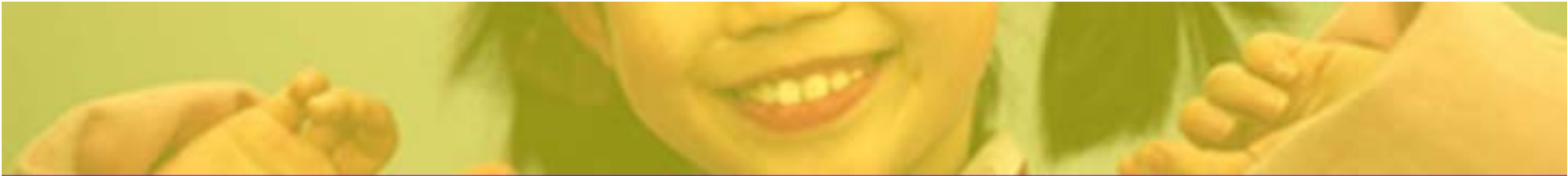
# Training

- Health professional is trained to deliver intervention
- Training: 1) 3 hour in-person workshop or 2) 3 hour web-based training module



# NAP SACC Self-Assessment

- Nine nutrition and six physical activity areas of assessment
- Based on national recommendations, standards, and literature review
- 12 expert reviews of instrument



## **NAP SACC Nutrition and Physical Activity Areas**

1. Fruits and Vegetables
  2. Fried Foods/High Fat Meats
  3. Beverages
  4. Menus and Variety
  5. Meals and Snacks
  6. Foods Outside of Meals and Snacks
  7. Modeling
  8. Nutrition Education
  9. Nutrition Policies
1. Active and Inactive Play
  2. TV Use and Viewing
  3. Play Environment
  4. Modeling
  5. PA Education
  6. PA Policies



## Step 3: Workshop Delivery

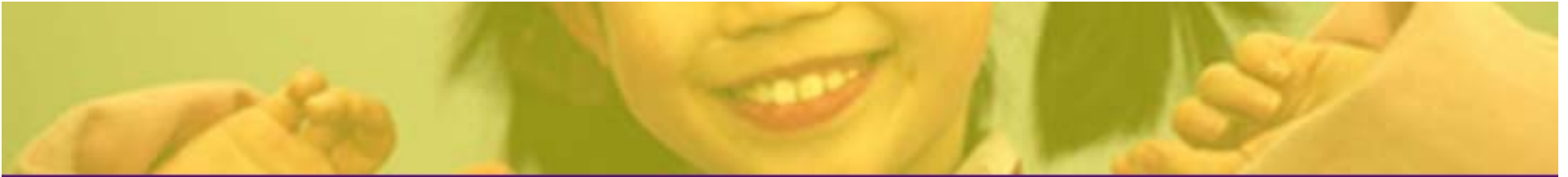
4 workshops  
with approved  
credits from NC  
Division of Child  
Development





## Step 4: Technical Assistance

- The NAP SACC Consultant provides ongoing technical assistance to the providers through in-person visits or phone calls.
- This provides the centers with support and encouragement as well as working with them to break down barriers to change.



## **Step 5: Re self-assess**

How and where did we improve?



# NAP SACC Tool Kit

## NAP SACC Notebook

- Assessment Tool
- Consultation Guides
- Center Handouts
- Parent/Caregiver Handout

## Workshops

- Childhood Overweight
- Healthy Eating
- Physical Activity
- Personal Health
- Working with Families (in development)



# **NAP SACC**

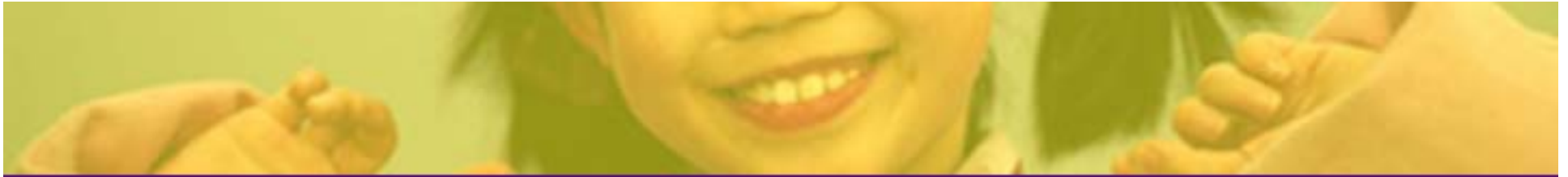
## **Pilot Intervention**

Pilot project assessing the feasibility of the NAP SACC model using Child Care Health Consultants to assist child care centers in improving their nutrition and physical activity environments



# Pilot Results

- 13/14 intervention centers improved their overall NAP SACC score
- Average increase in overall score in intervention centers was 13 points (132 total possible points)
- Comparison centers increased as well, but the change wasn't significant



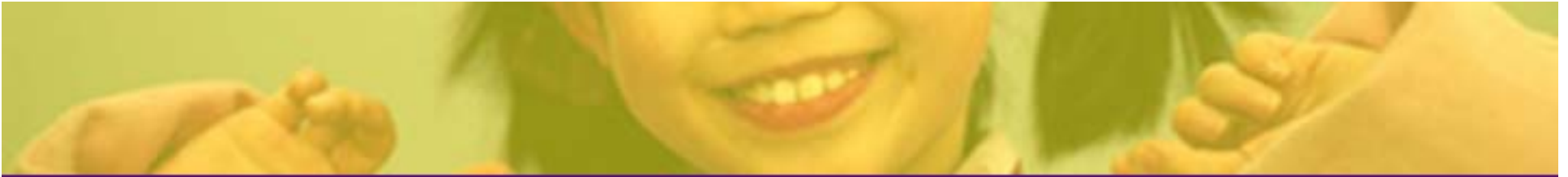
## Center Activities Included:

- Revising menus to meet “best practice” guidelines
- Moving vending machines from lobby to less accessible (visible) area
- Switching to low-fat milk for children over two years
- Remodeling to allow for an indoor play space
- Writing nutrition and physical activity policies



## What providers said about nutrition

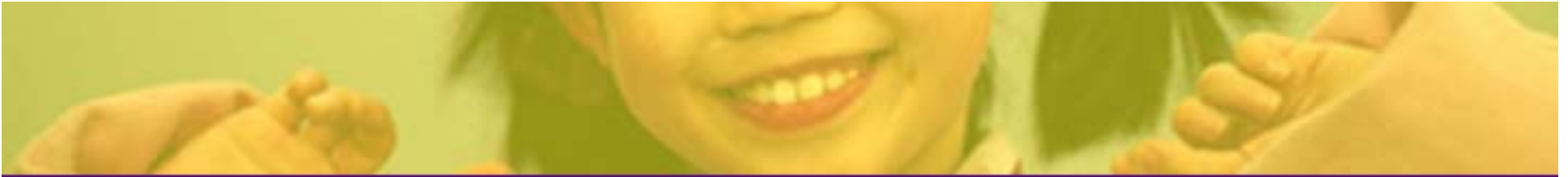
- *“It was surprisingly easy to make these changes.”*
- *“Until this program some of the staff did not realize that fat free milk was ok for children.”*
- *“We started looking at our menus more closely.”*



## What providers said about physical activity

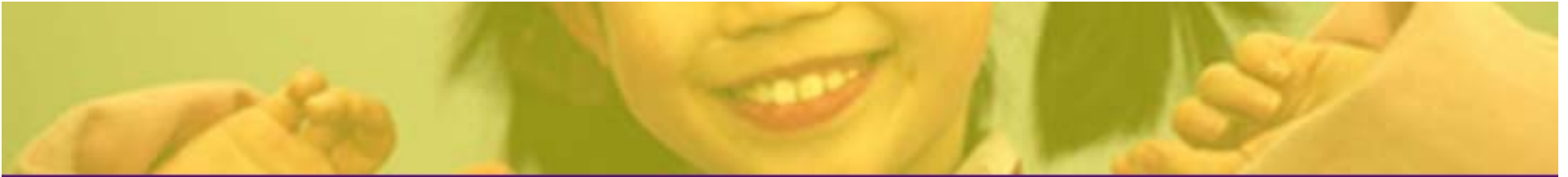
- *“It helped make my staff realize how important modeling was.”*
- *“The rainy day activities they brought to us were wonderful!”*
- *“It reminded staff of things they should be doing, like physical activity.”*





## Barriers to Implementation

- Initial meeting between the center director and consultant was often hard to schedule
- Many centers have food catered and feel as if they have little control over changes.



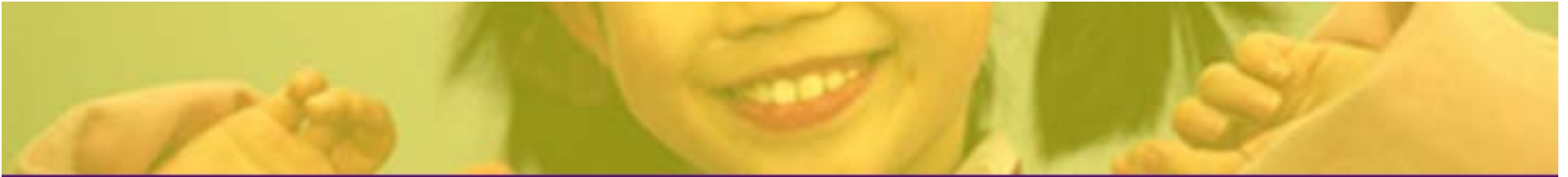
## What we've heard

- *“The NAP SACC info was important for me to hear. I’m looking forward to sharing the action plan with my staff.”*
- *“I learned a lot about the benefits of serving whole fruits instead of juice.”*
- *“These workshops emphasized our job as a role model.”*

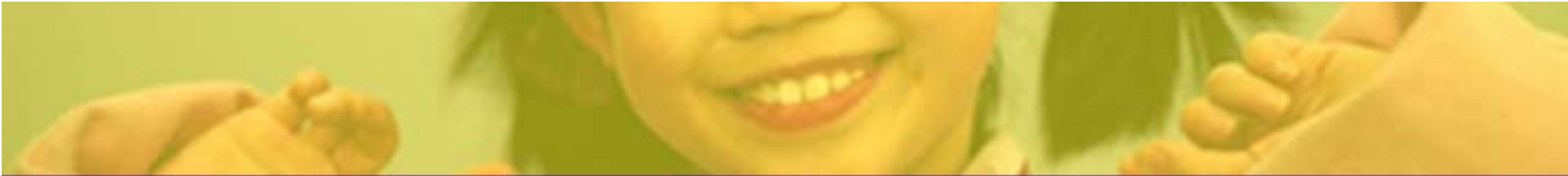


## One Center's Success Story

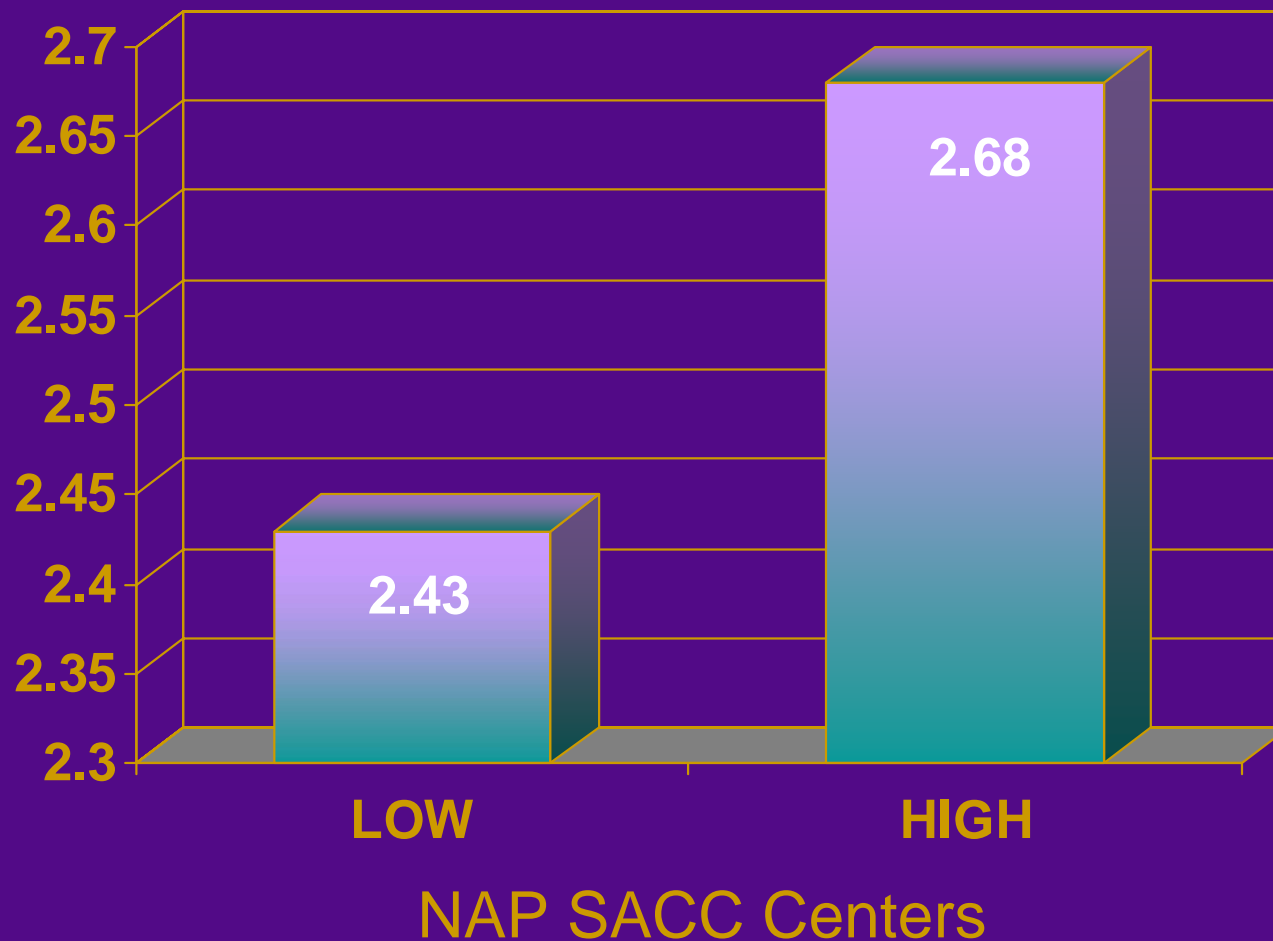
- Added a green salad and a pasta salad with vegetables to the menu, switched to brown rice and whole wheat bread and increased the use of whole grain cereals.
- Started encouraging parents to bring fruit cups instead of cupcakes for birthday party treats
- Is seeking a small gym to provide discount registration to her staff.



# Benefits of a Healthy Child Care Environment

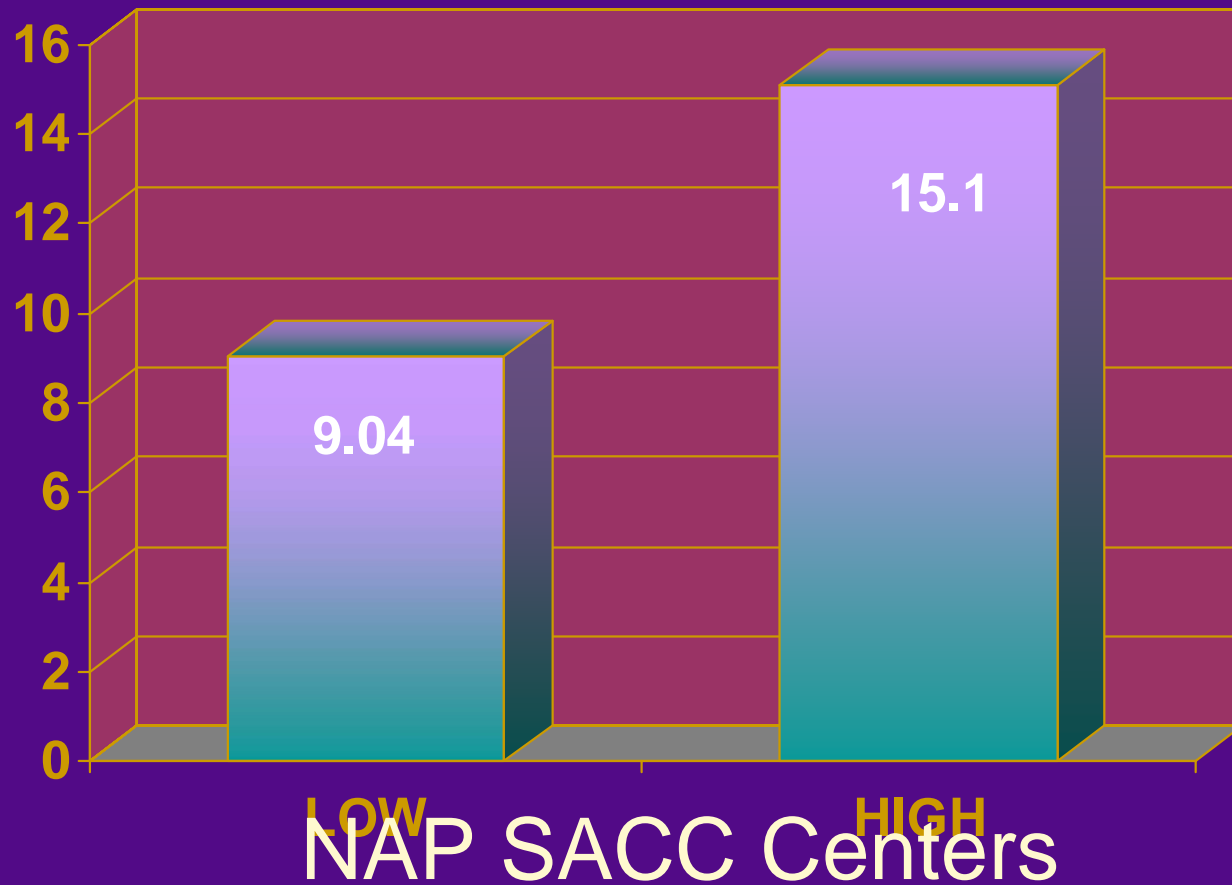


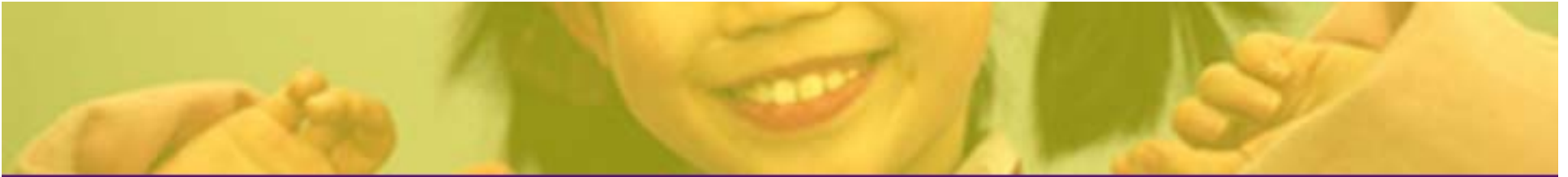
## Average Activity Level (Sedentary – High Intensity)





## Percent Time in High Active Play: Levels 4 & 5





# Preliminary Results Suggest

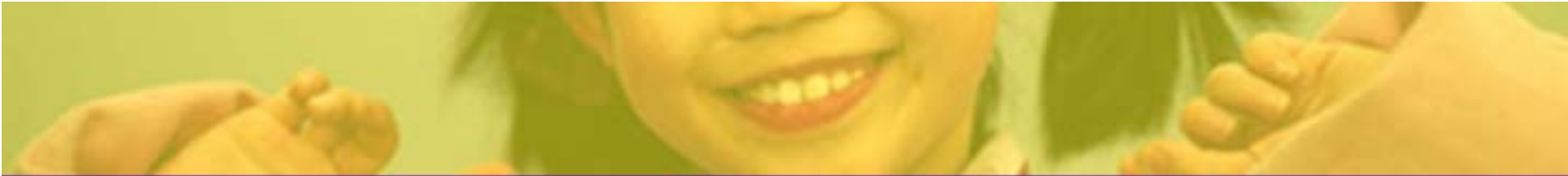
- **Average Active Level**
  - Active Play (in and out doors)
  - Physical Activity Training and Education
- **Higher Activity Levels**
  - Active Play Time (in and out doors)
  - Portable Environment
  - Fixed Environment (-)



## **NAP SACC Dissemination**

- Currently revising the self-assessment instrument, workshops, tool kit and on-line training modules.
- Will be developing a state and national dissemination plan this fall.





# Contact Us

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