

Early Assessment of Programs and Policies to Prevent Childhood Obesity

Childcare Initiatives in Afterschool & Daycare Settings

Evaluability Assessment Synthesis Report

2009

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We are appreciative to administrators and staff at the selected childcare initiatives who opened their doors to our project team. Interviews were often lengthy and the openness of the staff enable this report to describe what was learned from the initiatives and assists others who may be developing a new childcare initiative addressing childhood obesity.

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I. INTRODUCTION

Early Assessment of Programs and Policies to Prevent Childhood Obesity was a 2-year project to identify and assess local-level programs and policies that have been implemented with apparent success to prevent obesity by improving the eating habits and physical activity levels of children. The project is a collaborative effort led by a team from the Robert Wood Johnson Foundation (RWJF) and the Centers for Disease Control and Prevention (CDC). In both project years, a systematic screening and assessment method identified programs and policies for consideration by an expert panel. Priority was given to initiatives addressing low-income populations and ethnic groups that experience disproportionate childhood obesity rates.

PURPOSE OF SYSTEMATIC SCREENING AND ASSESSMENT METHOD

As the search for solutions that effectively address childhood obesity continues, organizations and communities across the country are experimenting with innovative strategies and new ways of implementing existing interventions aimed at changing children's environments to prevent obesity. The Systematic Screening and Assessment (SSA) Method screens environmental and policy initiatives that show the potential to be effective in controlling childhood obesity.

As part of the SSA Method, evaluability assessments were used to assess the plausibility and feasibility of selected programs and policies that were identified as promising during the search process and selected by the project's expert panel. Evaluability assessment is a process in which evaluators work with program administrators and stakeholders to determine an initiative's readiness for evaluation (Patton, 1997). It involves clarifying goals and program design by specifying the program model, finding out stakeholders' views on the important issues, and exploring program reality (Wholey, 2004). Evaluability assessments can help determine whether a rigorous evaluation study (e.g., an experimental design such as a randomized control trial) is feasible and merited for a particular intervention. As such, they can help avoid premature investment in rigorous evaluation of programs or policies that have not been adequately implemented and allow evaluation resources to be targeted to programs or policies deemed ready for evaluation.

During each year of the 2-year project, focus areas were selected. Initiatives were then identified through a systematic nomination and selection process. Policy or environmental initiatives implemented in community settings intended to address obesity in children aged 3 to 17 years were considered. Once meeting inclusion and exclusion criteria, initiatives were summarized for the project's expert panel. The expert panel consisted of researchers and evaluators with experience in nutrition, physical activity, and health promotion programs. The expert panel selected initiatives to receive an evaluability assessment based on potential impact, innovativeness, reach to target population, acceptability to stakeholders, feasibility of implementation, and feasibility of adoption, intervention sustainability, generalizability, and staff/organizational capacity. Once an initiative was selected, two site visitors conducted a 2- to 4-day evaluability assessment, which consisted of a document review, travel to conduct interviews and observe the program, drafting a logic model, and summarizing what was learned.

FOCUS AREAS

For both years of the project, the Funder’s Advisory Committee identified five thematic areas: (1) childcare programs and policies in afterschool and daycare settings, (2) increasing access to healthier foods, (3) school district local wellness policies, (4) comprehensive school physical activity programs, and (5) initiatives affecting the built environment. This report focuses on childcare initiatives in the afterschool and daycare settings. It describes the findings from the 21 evaluability assessments that took place for both years and concludes with lessons learned.

II. OPPORTUNITIES IN CHILDCARE FOR OBESITY PREVENTION

Childhood overweight has been an increasing problem over the past few decades. Almost 16% of children and adolescents aged 2 to 19 years are overweight based on 2005 to 2006 estimates (Ogden, Carroll, & Flegal, 2008). Overweight children and adolescents are at an increased risk for adverse levels of several cardiovascular disease risk factors compared to normal weight children and adolescents (Freedman, Dietz, Srinivasan, & Berenson, 1999).

PHYSICAL ACTIVITY

Children who engage in regular physical activity typically have lower levels of body fat (U.S. Department of Health and Human Services, 2008a). In addition to increasing the likelihood of being a healthy weight, regular physical activity provides a multitude of health benefits such as improved cardiorespiratory and muscular fitness, improved bone health, and improved cardiovascular and metabolic health biomarkers (U.S. Department of Health and Human Services, 2008a).

The Department of Health and Human Services' *2008 Physical Activity Guidelines for Americans* (U.S. Department of Health and Human Services, 2008a) are provided for those aged 6 years and older. Guidelines state children aged 6 to 17 years should receive 60 or more minutes of daily physical activity, where most of the 60 minutes should be either moderate or vigorous intensity. These are consistent with National Association for Sport and Physical Education (NASPE) recommendations and achieving *Healthy People 2010* goals (National Association for Sport and Physical Education, 2004; U.S. Department of Health and Human Services, 2000). The *Physical Activity Guidelines* also recommend muscle- and bone-strengthening exercises at least 3 days per week, which should be part of the 60 or more minutes. It is recommended that physical activity be age-appropriate, enjoyable, and varied. Unstructured play can also help meet recommendations. However, as children age, structured activity becomes a more appropriate way to be physically active. Physical activity is also recommended for children with disabilities (U.S. Department of Health and Human Services, 2008b). Afterschool initiatives are an ideal setting to increase physical activity levels because time spent in physical activity during the school day may not reach recommended levels (Nader, 2003; McKenzie et al., 1995).

While the *2008 Physical Activity Guidelines* do not have recommendations for children under age 6 years, other recommendations exist. The American Academy of Pediatrics recommends providing a 15 to 20 minutes structured activity combined with 30 minutes of free play for younger children (Committee on Sports Medicine and Fitness and Committee on School Health, 2001) and NASPE recommends preschoolers participate in at least 60 minutes of structured and at least 60 minutes of unstructured physical activity per day (National Association for Sport and Physical Education, 2002). Because of the length of time children often spend in daycare, this setting is ideal for offering time for children to be engaged in physical activity.

NUTRITION

In addition to lack of physical activity, poor diet is a contributor to obesity. Afterschool and daycare initiatives may be able to address nutrition by serving healthy snacks and meals to children. The *2005 Dietary Guidelines*, which provide dietary recommendations for Americans older than age 2 (U.S.

Department of Health and Human Services & U.S. Department of Agriculture, 2005) can be used to guide nutritional standards in afterschool or daycare programs.

Afterschool and daycare initiatives frequently face challenges to providing healthy foods that meet the *Dietary Guidelines*. These may include financial constraints and other competing priorities, inconvenience, or not placing high value on offering healthier options. Another issue afterschool and daycare settings confront is whether to permit children to bring their own snacks and beverages because these foods may be unhealthy.

AFTERSCHOOL INITIATIVES

Afterschool initiatives offer an avenue to increase participation in moderate to vigorous physical activity (MVPA), provide a healthy snack, and educate youth on healthy eating. A large proportion of children are enrolled in some form of afterschool care. As of 2005, 40% of students in kindergarten through eighth grade were enrolled in afterschool care at least once per week (Carver & Iruka, 2006).

There is evidence that afterschool initiatives can successfully address physical activity and nutrition. One 10-month study of an afterschool physical activity program found beneficial changes in body composition and cardiovascular fitness in 8- to 12-year-old African American girls (Barbeau et al., 2007). In Texas, the CATCH (Coordinated Approach to Child Health) program was adapted to an afterschool program, CATCH Kids Club (CKC), which aimed to increase MVPA in 16 afterschool programs; children significantly increased their levels of MVPA during the 6-month study period compared to the control group (Kelder et al., 2005). The FitKid project, an 8-month afterschool program, offered third-grade students a healthy snack following the United States Department of Agriculture's (USDA) National School Lunch Program afterschool snack guidelines and an 80-minute period that included 40 minutes of continuous MVPA. Results revealed a relative reduction in percentage of body fat compared to a control group (Yin et al., 2005a; 2005b).

DAYCARE INITIATIVES

Daycare centers are another setting to focus efforts on addressing childhood obesity, particularly because young children may spend a large amount of time in daycare centers where there is potential to influence physical activity and food consumption. There are more than 118,000 daycare centers in the United States, and approximately 18% of children are younger than age 5 of employed mothers are enrolled in daycare (National Association of Child Care Resource & Referral Agencies, 2008). Children in this age group (2 to 5 years) are at risk for being obese. In the 2 to 5-year age group, about 12% of children are obese, with 24.4% classified as overweight (Ogden et al., 2008).

Good feeding and eating experiences early in life shape dietary preferences and may affect the quality of nutrition throughout childhood (Fuller, Keller, Olson, & Plymale, 2005). Because children develop food and nutrition-related attitudes during the preschool years (Fuller et al., 2005), and the daycare setting provides a venue in which to teach nutrition, offer nutritious foods, provide opportunities to try new foods, and there is potential for shaping behaviors in later life.

There is limited evidence describing the nutritional quality of foods served and activity levels in daycare settings (Story, Kaphingst, & French, 2006). However, evidence is available from those daycare programs that participate in the USDA's Child and Adult Care Food Program (CACFP) that

meals and snacks being served are high in fat, saturated fat, and lacking fruits and vegetables (U.S. Department of Agriculture, 2008; Story et al., 2006). Story and colleagues (Story et al., 2006) recommend CACFP comply with the U.S. *Dietary Guidelines*.

Adequate physical activity time during daycare hours is also essential. Prior research has demonstrated that physical activity levels can range from 4.4. to 10.2 minutes of MVPA per hour during the preschool day (Pate, Pfeiffer, Trost, Ziegler, & Dowda, 2004). Institutional policies and practices that offer greater opportunities for physical activity may meet this standard through policies that require children to spend 60 minutes in structured play while also offering time for unstructured play.

Because many children spend time in afterschool and daycare settings where there is opportunity to offer nutritious meals/snacks and MVPA, afterschool and day care settings were selected for the Early Assessment project. Results from the evaluability assessments have the potential to fill some research gaps as well as identify promising practices that can be shared with the field. For afterschool and daycare initiatives, these include (1) understanding how to engage children in MVPA, (2) identifying strategies to engage parents in their child's diet and physical activity habits, and (3) identifying ways to educate parents on nutrition and physical activity during the brief window of opportunity when the parents come to pick up their child.

III. METHODS

NOMINATION OF PROGRAMS AND POLICIES

The project team solicited nominations for afterschool and daycare initiatives in spring 2007 for year 1 and spring/summer 2008 for year 2. Postings were put on a variety of listservs (e.g., CDC's Chronic Disease Nutrition listserv), and contacts were made with organizations familiar with afterschool or daycare initiatives (e.g., YMCA).

For both project years, nominated programs and policies were eligible for inclusion in the project if they were an environmental program or policy taking place in an afterschool or daycare setting that were suitable for the United States (i.e., either taking place in the United States or in a developed country), being implemented during the scheduled time evaluability assessments, had a primary goal to address nutrition or physical activity, had not previously been evaluated, and were not a strict replication of an evidence-based model.

During year 1, a total of 81 afterschool and daycare initiatives were nominated, 34 met inclusion criteria, and 25 were summarized for the expert panel. Nine initiatives met the criteria for inclusion, but were not summarized for several reasons (e.g., contact could not be made with the program nominator to complete a program summary after multiple attempts before the deadline, or the deadline had passed before the program nomination was received).

During year 2, 86 afterschool and daycare initiatives were nominated, 27 met eligibility criteria, and 25 were summarized for the expert panel. Two were not summarized because contact could not be made with the person who nominated the initiative before the deadline.

CRITERIA AND SELECTION OF PROGRAMS AND POLICIES FOR EVALUABILITY ASSESSMENTS

The expert panel used the following criteria to select initiatives for evaluability assessment: potential impact, innovativeness, reach to target population, acceptability to stakeholders, feasibility of implementation, and feasibility of adoption, intervention sustainability, generalizability, and staff/organizational capacity. See Appendix A for a detailed description of each criterion. For both years, the expert panel reviewed and rated each summarized initiative using an online survey tool followed by in-person recommendations on which initiatives should receive an evaluability assessment. For year 1, 10 of the 25 summarized afterschool and daycare initiatives were selected for evaluability assessments: 7 afterschool and 3 daycare initiatives. Eight afterschool and four daycare initiatives were selected for year 2. One evaluability assessment was not conducted on one of the selected afterschool initiatives in year 2 because initial follow-up revealed the program was very different from how it was originally presented. Therefore, seven afterschool initiatives were visited in year 2.

AFTERSCHOOL AND DAYCARE EVALUABILITY ASSESSMENTS

Evaluability assessments consisted of two trained site visitors (1) reviewing background documents for their initiative, (2) drafting a logic model to graphically describe the initiative's activities, desired outcomes, and goals, (3) traveling to the location of the initiative to observe the initiative in progress

and conduct interviews with staff and stakeholders to assess development, implementation, funding, data collection, and evaluation capacity. During year 1, the afterschool evaluability assessments took place in Texas, Wisconsin, Ohio, Kentucky, North Carolina, Pennsylvania, and New York. Two daycare evaluability assessments occurred in New York and one in North Carolina. During year 2, three afterschool evaluability assessments took place in California and one each in Colorado, Oklahoma, Nebraska, Missouri, and Ohio. The daycare initiatives were located in Ohio, North Carolina, and the Virginia/Washington, DC area. Each year, after the evaluability assessments took place, the project team and expert panel reviewed the findings from the evaluability assessments to discuss their promise and readiness for rigorous evaluation.

DATA ANALYSIS

For each evaluability assessment, site visitors wrote summary reports describing what was learned during the site visit. The summary reports served as the primary data source for this report. Common themes were extracted from the site visit reports using ATLAS.ti (Scientific Software Development GmbH, 2008) a qualitative analysis program. Prior to coding, two coders conducted test runs of site visit reports to ensure reliability. Discrepancies between coders were discussed and resolved. Coding for the childcare thematic area was carried out by an independent coder. Codes fell into larger themes, such as plausibility, feasibility, program/policy components, and staff capacity. Site visitors reviewed coding results to ensure coders accurately interpreted the information. A secondary data source for this report includes expert panel members' recommendations regarding the initiatives.

IV. RESULTS

GOALS AND ANTICIPATED OUTCOMES OF THE AFTERSCHOOL AND DAYCARE INITIATIVES

The most common goals outlined by the initiatives were increasing physical activity and fitness levels, improving nutritional intake during the time children were enrolled in the program, gaining parental buy-in, and incorporating staff wellness components. The most common end-goal was to impact childhood obesity, whether through increased physical activity, improved nutrition, or both.

TARGET AUDIENCE

All afterschool initiatives targeted children of elementary school age, while two also included children as young as kindergarten. Nine afterschool programs included parents as a target audience and four also included staff as a target audience. One of the Early Assessment project's goals was to focus on initiatives serving minority populations. Within our sample, six afterschool initiatives targeted Latinos, African Americans, or Native American Indians. While other programs did not specify a particular race/ethnic group, they targeted urban youth or urban and suburban youth, and were reaching high minority populations. Additionally, all afterschool programs served children from economically disadvantaged groups; however, 10 focused specifically on low socioeconomic status (SES) families.

The daycare initiatives targeted all children enrolled in the daycare center(s), as well as parents. All daycare initiatives, with one exception, also included staff as a target audience. In addition, all daycare initiative were either serving children of regardless of their SES status or specifically targeting low SES children and families. One daycare program specifically targeted ZIP codes where there were higher rates of obesity. Two other daycare programs reached urban and rural children throughout their community.

REACH

Reach varied for afterschool initiatives; the range was 1 to 111 sites, with a median of 20 sites. Afterschool initiatives reported a wide range for the total number of children being reached; 11 children to approximately 5,500, with a median of 1,100 (two programs did not report the number of children being reached). Programs reaching many children across several sites tended to be YMCA-based programs. Daycare initiatives also varied in how many centers they were reaching; 3 to more than 2,000, with a median of 52 sites (two did not report the number of sites). The range for number of children being reached was 300 to 300,000, with a median of 1,820 children.

AFTERSCHOOL/DAYCARE LOGIC MODEL

As part of each evaluability assessment, program/policy administrators, stakeholders, and staff worked with the site visitors to tailor a logic model to their initiative based on a standard template. Appendix B provides an example logic model with appropriate information entered into each box. The logic models for each initiative in the childcare setting were reviewed for commonalities and differences. This section discusses two components of the logic model: (1) Inputs and (2) Activities and Outputs.

INPUTS

The findings relevant to the Inputs section of the logic model clustered in five main areas: staffing, resources, funding, target audience, and nutrition and/or physical activity guidelines.

Staffing

Interviewees frequently explained that a dedicated and knowledgeable staff was important to keeping the program running. There are several examples of afterschool and daycare initiatives where administrators hired staff with knowledge and skills that would benefit their program. Examples include experience in teaching physical education, health promotion program planning, or implementing programs on a large scale. Staff at one afterschool program was able to develop, with the help of the physical education instructors on staff, a curriculum with 70 lesson plans to maintain children's interest in physical activity. A second example includes a manager with experience in health promotion planning who helped design and implement an afterschool program that reached approximately 1,400 students and then designed an evaluation.

High levels of staff turnover is a common challenge within the childcare industry (Center for the Childcare Workforce, 2004). The initiatives that received an evaluability assessment echoed this. High turnover may lead to problems with program fidelity because staff may not be present for trainings if they are held only once or at pre-specified intervals. Several initiatives addressed this issue by holding initial trainings when staff first started, instead of at pre-specified intervals, and also held frequent staff trainings that allowed staff to maintain their programmatic knowledge.

Various staff structures and chains of command existed in the afterschool programs. In many cases, a centrally located, high-level administrative staff designed the program, which was then implemented by part-time afterschool instructors, employed by the agency that developed the program, at multiple locations throughout the program's catchment area. For example, administrators at a county YMCA developed a program and had their own afterschool instructors implement the program in various locations throughout the county. Another model is an afterschool program developed by a central team of administrators (e.g., a university professor and health department personnel) where part-time afterschool instructors were trained to implement the program. The part-time afterschool instructors were employees of other agencies with already existing afterschool programs, such as Boys and Girls Club and the YMCA.

Resources

Community partnerships are an example of the resources many initiatives relied upon. Community partnerships provided social support for the program and helped programs meet their objectives. Community support ranged from supplemental funding to social marketing to donating time. One example is an afterschool program receiving community support in the form of local chefs volunteering their time to demonstrate how to prepare healthy meals during afterschool sessions on a regular basis. Children observed the chef and ate appropriate portions immediately after the chef finished.

Another community resource is evaluators and researchers from local universities or local health departments. Three afterschool programs had the assistance of a faculty member employed at a nearby university. One program used this collaboration to have the faculty member conduct a program evaluation on implementing the program. A second afterschool program had university

faculty design and develop a program implementation strategy within the afterschool setting. And the third afterschool program with university faculty had their researcher intimately involved with curriculum development, implementation, and evaluation. One afterschool program serves as a good example of enlisting the help of an evaluator from a local health department. This evaluator provided technical assistance on program implementation and encouraged the program developers to consider evaluation.

Funding

Funding for the afterschool and daycare initiatives varied in amount and type. Funding came from Federal (e.g., CDC, USDA's Food Stamp Nutrition Education Program), State, and private dollars (e.g., local medical center), as well as from partner organizations and philanthropic foundations. Those program needs that were not met by such mechanisms were met by offering services on a fee-based model.

Many afterschool initiatives relied on several funding sources; the reported number of sources ranged from 2 to 18. Sites were also asked to provide the estimated costs of their initiative, however, these were challenging to ascertain. Eight afterschool programs reported dollar amounts ranging from approximately \$15,000 to \$700,000. It is not possible to determine if these are start-up or annual operational costs; many provided a listing of the grants and donations they received. Other initiatives were unable to provide dollar amounts because their afterschool program was one part of a larger grant or staff worked on the afterschool program but also had additional responsibilities not related to the afterschool program. Programs that tended to have many funding sources or higher funding amounts typically had a larger reach, but not always. Examples include having 18 funding sources reaching more than 2,500 children across 16 schools or having funding more than \$650,000 and reaching more than 110 schools. An example of a program that seems more costly is a program with funding of approximately \$250,000 per year with a reach of slightly less than 100 children. However, this funding includes staff salaries and also efforts that went to non-afterschool programming.

Daycare initiatives reported from 2 to 13 funding sources, with one exception. The exception is a daycare program reporting zero outside funding sources. After a small start-up grant of \$4,000 was obtained, the program continued as a line item in the annual budget. Funding amounts ranged from \$4,000 up to \$1.4 million. Daycare initiatives often blended funding sources to implement their programs; for example, one daycare program received \$500,000 for the first year of implementation and \$1.2 million for the second year from a federal source, and matched these funds with state health department dollars of \$95,000 per year. While the daycare policy did not require funding, childcare staff time was necessary to make changes in food purchasing habits or obtain additional equipment to ensure foods provided adhered to the policy and there was adequate equipment to meet physical activity regulations. The Sports, Play, and Active Recreation for Kids (SPARK) program, which is widely used but not mandated by the daycare policy, requires an annual purchase. The reported amount for the 2007 to 2008 fiscal year was \$1.4 million for SPARK, which the city health department purchased. Programs and policies with higher funding amounts had larger reach than those with lower funding amounts.

USE OF PHYSICAL ACTIVITY AND NUTRITION GUIDELINES

Several initiatives use physical activity and nutrition guidelines from various sources. The following physical activity guidelines were reportedly used: NASPE (for two daycare initiatives), and CANFIT (one afterschool initiative) (National Association for Sport and Physical Education, 2002; California After School Resource Center, 2006). Several initiatives developed their own rules for length of time children should be engaged in physical activity and several also sought guidance from physical education instructors.

Seven afterschool and daycare initiatives were following at least one of the following guidelines: the USDA Child Adult Care Feeding Program, the *2005 Dietary Guidelines for Americans*, Institute of Medicine (IOM) guidelines for snack foods, *Healthy People 2010* nutrition objectives, and CANFIT nutrition guidelines. (U.S. Department of Health and Human Services & U.S. Department of Agriculture, 2005; Committee on Nutrition Standards for Foods in Schools Food and Nutrition Board, 2007; U.S. Department of Health and Human Services, 2000; Tides Center, 2009).

While several programs reported specific guidelines they were following, other programs also ensured their program or policy components were grounded in scientific evidence. Examples of documents that programs referred to include *Bright Futures in Practice: Nutrition*, *Bright Futures in Practice: Physical Activity*, *Institute of Medicine Report: Preventing Childhood Obesity*, *Health in the Balance* (Story, Holt, & Sofka, 2002; Patrick, Spear, Holt, & Sofka, 2001; Committee on Prevention of Obesity in Children and Youth, 2005). Some initiatives also conducted scientific literature reviews to ensure they had an understanding of physical activity and nutrition for their age group and target audience.

ACTIVITIES AND OUTPUTS

Common Program and Policy Activities

General program activities, most of which are necessary for program maintenance and sustainability, tended to include activities in the following categories: enrollment of children into the program; staff training, staff meetings and professional development; parental engagement (often via newsletters or information sent home with children); curriculum revision; and community partnership-building activities. The majority of initiatives did not list evaluation as a priority, with the exception of one program which included grant writing and accompanying evaluation tasks as a primary activity. See Appendix C for detailed program and policy components.

Physical Activity and Nutrition Activities

All initiatives attempted to increase physical activity and physical fitness levels, and most incorporated nutrition components. Some initiatives ensured that moderate to vigorous physical activity took place five days a week, while others tried to engage children in any intensity of physical activity fewer days of the week.

With one exception, every initiative included in this project addressed nutrition by either serving healthier snacks or by offering nutrition education. Most reported improving offerings to provide healthier snacks and meals; but four programs only provided nutrition education and did not change the meal or snack provided. The most common reason was it was not in their purview to do so; food service was under the direction of others, rendering control impossible. However, two

programs reported contacting food service staff to improve snack offerings, but this was not successful for both programs.

Parental Engagement Activities

Afterschool program and policy developers designed a range of strategies to involve parents. Parental involvement was achieved by holding family nights to engage in physical activity, family nights with cooking demonstrations and dinner, and grocery shopping trips with a registered dietician to plan family meals. Other examples include providing information to parents through newsletters, a handbook, and brochures with health messages. One afterschool program developed parent pledges which were written promises to eat healthier and to engage in physical activity. Pledges were signed by the parents and parents were asked to post the top portion of the pledge to their refrigerator as a reminder. Another afterschool program offered events for entire families so all could participate in activities with all of their children.

All daycare initiatives took steps to involve parents. Parental engagement ranged from providing information to offering trainings for parents. For example, one program gave children a take home sheet to notify parents of the lesson taught to the child with a recipe included. The daycare policy asked daycare centers to distribute fliers to parents and educate parents on the policy components. In addition, trainings for parents were held to gain parental support for the policy by educating parents on healthier food items that were permitted to be sent with their child to daycare.

Staff Wellness Activities

Staff wellness components were also common, especially in daycare initiatives. Six out of seven daycare initiatives had a staff wellness component such as nutrition education for staff, requiring staff to engage in physical activity with the children, and teaching staff the importance of modeling healthy behaviors. Four afterschool initiatives had formal staff wellness components that restricted beverages that the staff could consume in front of the children or required staff to participate in the physical activity time with the children.

Additional Activities

In addition to addressing physical activity and nutrition, there are several examples of initiatives incorporating additional activities. Three initiatives addressed the importance of limiting television viewing and video time. Three initiatives integrated components such as health literacy and commitment to a healthy lifestyle through education. Another afterschool program that focused on Native Americans taught traditional Indian games.

Evaluation Activities

Evaluating childcare initiatives aiming to reduce obesity can help fill evidence gaps for the afterschool and daycare settings. The vast majority of the selected initiatives appear promising. While it is uncertain if they will impact body mass index (BMI), they can contribute to increasing healthy eating behaviors through nutrition education and offering healthier snacks and addressing physical activity by engaging children in 60 minutes of physical activity five days per week.

Devoting time and effort to evaluation is often challenging, but some initiatives either engaged in process evaluation or were in planning stages of an outcome evaluation. Those engaging in process

evaluation were collecting relevant data. For example, one afterschool initiative was evaluating staff trainings to determine level of knowledge gained and whether or not program components were being implemented properly. Four initiatives were either collecting data or had plans to collect data to measure fitness levels, height and weight to calculate BMI, or use Fitnessgram, which are assessments on aerobic capacity, body composition, muscle strength, endurance, and flexibility (Welk & Meredith, 2008). These data could be a part of an outcome evaluation. Most initiatives were not actively evaluating their program or policy. The primary reason for this was funding was typically reserved for staff salaries and meeting the needs of the program (e.g., food costs) with little remaining for evaluation.

V. DISCUSSION

PLAUSIBILITY

Afterschool and daycare initiatives are important settings to address childhood obesity because they can affect children’s eating habits and physical activity levels on a daily basis. The goals of the afterschool and daycare initiatives—to improve children’s eating habits and increase physical activity levels to reduce childhood obesity—are plausible because of the initiatives’ concerted efforts to address nutrition, physical activity, and other components related to healthy living.

We found many examples of initiatives grounding their program or policy in existing science. Program or policy developers consulted existing literature, experts, and resources to guide their initiative. Initiatives were reported plausible at reducing obesity by ensuring adequate physical activity was taking place, focusing on fruit and vegetable intake, low-fat dairy consumption, reducing television viewing time, and more. Additionally, the outreach to staff and parents increase plausibility by staff modeling healthy behaviors and parents being knowledgeable of program components, adhering to policy guidelines, or modeling healthy behaviors themselves.

Because of their sound approach to addressing nutrition and physical activity and their strong management, it is plausible short- and long-term outcomes will be achieved with faithful implementation. Afterschool initiatives have the ability to help children meet physical activity recommendations and to a somewhat lesser extent also affect children’s eating habits. Daycare initiatives have the ability to address physical activity and children’s eating habits because of the amount of time children frequently spend while in daycare. Both settings can address childhood obesity via physical activity and nutrition, and along with a coordinated approach by the community, parents, and schools, may impact BMI over the long term.

FEASIBILITY OF IMPLEMENTATION

Feasibility of implementation, or the likelihood the initiative will be implemented with fidelity, is likely for many of the initiatives with clearly outlined goals, strong leadership, success with obtaining funding, and ensuring trained staff. Initiatives also reported strong stakeholder support, institutionalization of the program, and strong infrastructure, which all further increase the likelihood of feasibility of full implementation.

FEASIBILITY OF ADOPTION

Feasibility of similar sites to adopt the intervention exists because most initiatives considered the audience when designing their program or policy. Most initiatives either tailored their program to low SES children and families, or offered their program in low SES communities. As described above, some initiatives offered family events with free dinners to educate parents on healthy eating and physical activity or offered the program at little to no cost to families. Age-appropriate lessons were also researched and offered as appropriate. Initiatives with similar objectives can use these initiatives as role models when determining which curriculum to follow.

VI. KEY LESSONS LEARNED

While each childcare program serves a unique population and thus faces a unique set of challenges and opportunities, several potential barriers to success were found across many initiatives.

CHALLENGES TO OFFERING PHYSICAL ACTIVITY OPPORTUNITIES AND ENGAGING CHILDREN

As increasing physical activity is included in all program and policy objectives, difficulties in providing or engaging children in the activity can present a major obstacle to meeting expected outcomes. The programs visited had laudable goals for the time devoted to physical activity. However, even within a framework that provides ample time, challenges remain.

Several examples exist where children were bored or did not understand the physical activity they were to be participating in. Many afterschool programs found that children were easily bored if the same activity was frequently offered, and so they provided a range of play activities to stimulate children's interest in being physically active. Multiple games (gathered from various curricula, Web sites, and program staff's imaginations) were played, and children were exposed to various sports as well. One daycare program noticed that some physical activity games were too difficult for young children and modified them with the assistance of early childhood specialists.

When children did not have the desire to participate in physical activity, some initiatives addressed this by requiring staff to participate in the physical activity with the children and model the behavior, and by making a dedicated effort to ensure that children learned to perceive physical activity as fun, not as a chore, by offering varied fun activities suitable for many fitness levels. An example of this was an afterschool program that allowed children to opt out of organized play activities and instead walk around a track.

CHALLENGES TO PROVIDING HEALTHIER SNACKS

Providing healthier snacks to children was seen as an opportunity by many initiatives, not only as a way for children to consume fruits and vegetables and to limit consumption of less healthy food, but also to increase children's exposure to new healthy foods, countering neophobia and prompting children to ask their parents to purchase healthy options for home.

A challenge specific to some afterschool initiatives is the lack of control over the snacks that are served. Snacks may be under the purview of the school or may be surplus foods leftover from lunch. As a result, snacks may or may not follow any sort of nutritional guidelines. One afterschool program addressed this by partnering with a local distributor to offer low-cost fresh fruit and vegetables for snacks. Another afterschool program experiencing this issue devised two strategies. First, program administrators contacted the food service coordinators, spoke with them about their concerns, and provided suggestions for low-cost, healthier snacks. This approach was reported to be only somewhat successful because food service personnel also faced limitations in what they were able to purchase. Second, program staff made sure to include a nutrition education piece every day, regardless of snack content, in the hope that children would remember a nutrition message.

Childcare initiatives often wished to introduce different or exotic fruits and vegetables to children to increase exposure to new and different foods. One afterschool initiative included a component to expose children to new foods and reported mixed success. When the activities were first offered, children were highly reluctant to try new foods, and parents were wary of any attempts to encourage their children to try new foods. However, the initiative made multiple and varied attempts to present children with new food items in appealing ways.

CHALLENGES TO PARENTAL INVOLVEMENT

Many childcare initiatives reported that engaging parents is challenging. Many parents are unable to take time away from their home life with their children to meet with childcare staff or to participate in program activities—parents often need to quickly pick up their child and continue on with their daily routine. Several afterschool initiatives developed tactics to engage parents during other times of the week, such as the weekend, or offered family nights where the whole family was welcome and dinner was provided. These were not always reported to be highly attended, however, one program did report after offering family night (dinner provided and physical activity time at a local YMCA) twice, the attendance increased greatly. They believed word spread that it was a fun night for families.

Because afterschool programs host children for a small portion of the day, parental engagement is one avenue in which an afterschool program can affect the home environment. By educating parents on the activities of the program, the family is aware of the nutrition education and physical activity their child is receiving and can possibly reinforce some activities outside of program hours.

Another challenge with parental involvement is time in an afterschool program is frequently viewed less as a time for engaging in nutrition education and physical activity and more as a safe and friendly place for children to be watched while their parents are at work. Even among parents who view afterschool care as an educational and enrichment environment, other priorities may take precedence over physical activity and nutrition. For example, afterschool programs frequently reported that homework help was the most desired afterschool activity parents wished for and requested technical assistance with “making the case” for physical activity and nutrition education. Childcare initiatives wishing to involve parents may wish to attempt similar tactics as these initiatives used, such as providing information on what their child is learning, offering recipe ideas, and holding trainings for parents to educate them on what their child will be exposed to during time in the program.

CHALLENGES TO PROGRAM FIDELITY

One particularly delicate challenge for site visitors to address was variation in program fidelity. Some program components, while perceived as fully implemented by program administrators, were viewed by staff working with children more as aspirational goals than required activities.

A clear logic model can assist programs in monitoring program implementation and fidelity. When gaps occur between what is planned and implemented, program administrators can offer additional trainings and education to assist staff or revisit the program design if the challenges to full implementation are more extensive than anticipated during program design. Such events can provide an opportunity to both support staff and to continually improve and refine the program. While a logic model is useful throughout the life of a program, it is particularly useful during the early stages

of implementation to identify potential problem areas with fidelity. Creating a logic model may aid future afterschool and daycare initiatives outline desired activities and the importance of these activities for reaching short- and long-term outcomes; this may help identify potential problems with fidelity.

CURRICULA AND OTHER RESOURCES

Another challenge the initiatives faced and excelled at was determining which curriculum to use or if a new curriculum should be developed. The initiatives either used established curricula, created a new one from scratch, or blended established curricula with their own ideas. This is perhaps the most noteworthy aspect of the initiatives that received an evaluability assessment—their commitment to researching what was best for their target audience and coming up with the best solution.

Resources on childcare initiatives are available. Many are inexpensive or available at no cost:

- Resources on Afterschool: <http://www.afterschoolresources.org>
- Afterschool Alliance: <http://www.afterschoolalliance.org/>
- YMCA Programs for Child Care: http://www.ymca.net/programs/programs_for_child_care.html

CHALLENGES TO CODE COMPLIANCE (DAYCARE POLICY ONLY)

A reported challenge specific to the daycare policy is how to enforce code compliance. Staff that would typically be responsible for ensuring compliance are often overburdened with other responsibilities. However, specific daycare sites that were visited stated that the policy enabled them to educate parents and provide guidelines on what children should be eating and what food items parents are permitted to send with their child each day. Therefore, while efforts to find feasible ways to enforce compliance are currently underway, daycare centers are able to explain to parents there is a new policy that the daycare center and parents must follow, which helps enforce compliance. As other cities and states develop similar daycare regulations, enforcing compliance will likely present an ongoing challenge. Hopefully in the near future there will be a model to replicate.

PARTNERSHIPS AND STAKEHOLDERS

Creating partnerships and collaborating with pertinent stakeholders is another arena in which the selected initiatives excelled. For example, some initiatives collaborated with local health departments because they did not have the expertise of a nutritionist on staff and others collaborated with local universities to assist with evaluating their initiative and obtaining content expertise in physical activity or nutrition. Building such partnerships and collaborations helps entrench the program in the community and increases awareness and sustainability due to increased interest. Other initiatives may want to follow this example and partner with a local or state health department for assistance or collaborate with local universities, which may have faculty with the appropriate content expertise and could lead an evaluation effort.

VII. CONCLUSION

The Early Assessment of Programs and Policies to Prevent Childhood Obesity project aimed to discover community-level initiatives that were addressing childhood obesity in afterschool and daycare settings. Because of their reach, programs or policies in these settings have great potential for childhood obesity prevention and control. However, practice-based evidence is needed to determine the core components necessary to effectively improve physical activity levels and nutrition in these settings. This report highlights several noteworthy initiatives that are exposing large numbers of children to healthier eating and physical activity opportunities.

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APPENDIX A

DESCRIPTION OF SELECTION CRITERIA

SELECTION CRITERIA

Potential Impact. The intervention appears to have potential for impact on the social or physical environment pertinent to healthy eating and active living—and ultimately on the target individual behaviors. Potential impact is assessed based on the intervention’s conceptual logic and other pertinent characteristics such as intensity and duration. Estimate of impact is based on “face value,” program documents, and brief expert input from funding organization staff and contractors, and other experts who know the intervention but are independent from it.

Innovativeness. Intervention is new or different or a significant variation on an existing promising intervention. Emphasis on innovativeness may be mitigated if the intervention represents a type or category of intervention that is prevalent in the field and/or of particular interest to the Foundation and collaborating organizations.

Reach to Target Population. The likelihood or actual evidence that the intervention will achieve participation (and even retention and completion) by the target population (i.e., approximately what percentage of the target population is likely to or actually does participate in or is “reached” in some other way by the intervention).

Acceptability to Stakeholders. The potential or actual evidence that the intervention is acceptable and even attractive to pertinent collaborators, gatekeepers, and other necessary groups such as schools, businesses, government agencies, grassroots groups, etc.

Feasibility of Implementation. The likelihood that the intervention as designed can be implemented fully given the clarity of its goals, objectives and strategies; complexity and leadership requirements; financial and other costs; and training and supervision requirements. If evidence exists regarding program implementation, then the extent to which the intervention “on paper” has been fully and faithfully implemented and the degree of difficulty in achieving implementation.

Feasibility of Adoption. The potential for similar sites/entities to adopt the intervention.

Intervention Sustainability. The likelihood that the intervention can continue over time without special resources or extraordinary leadership.

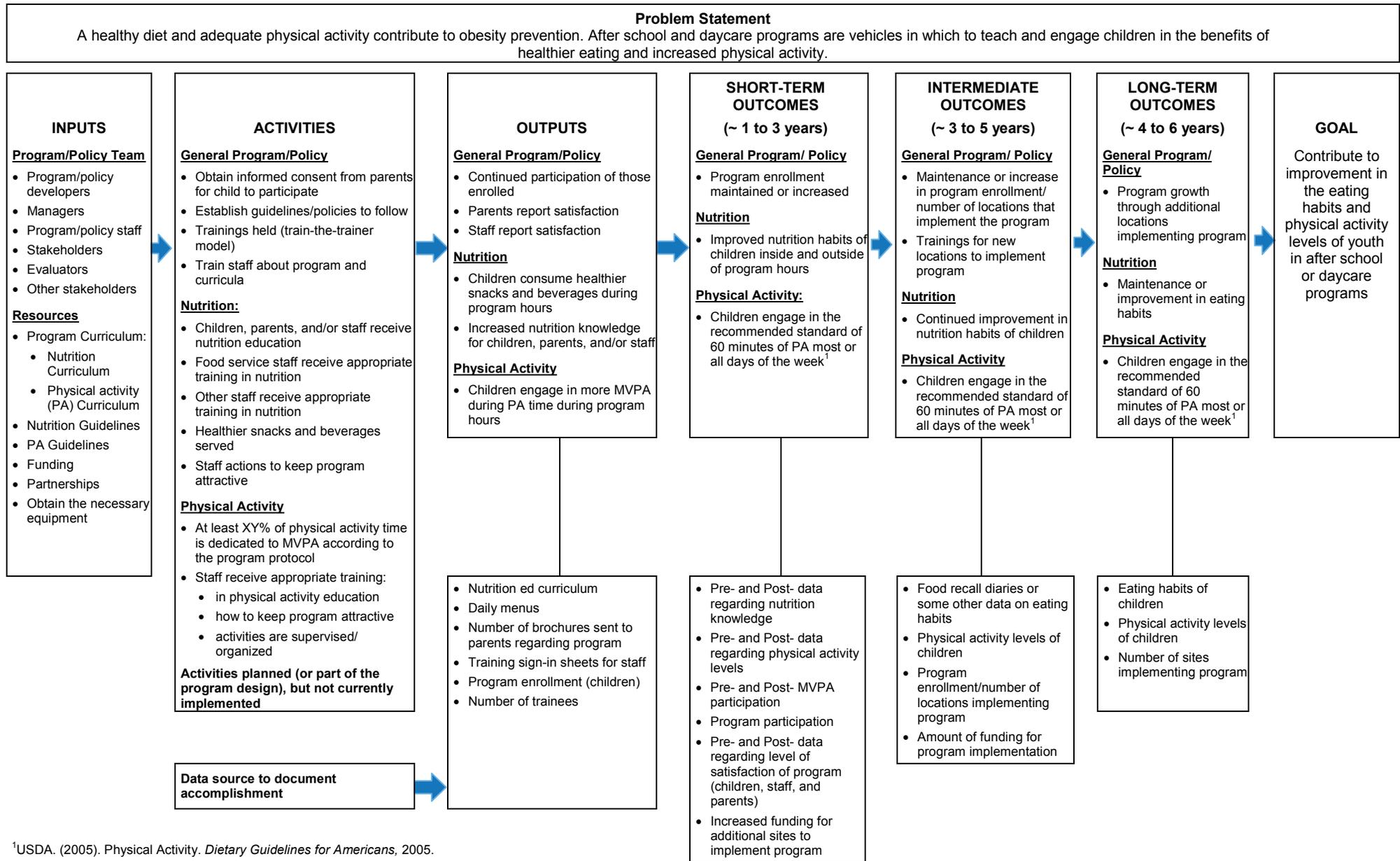
Generalizability. The degree to which the intervention demonstrates or has potential to be adapted for other populations and settings.

Staff/Organizational Capacity. Sponsoring organization and staff have the capacity to participate fully in a brief assessment, learn from it, and further develop the intervention.

APPENDIX B

LOGIC MODEL

LOGIC MODEL



¹USDA. (2005). Physical Activity. *Dietary Guidelines for Americans*, 2005.

APPENDIX C

COMMON PROGRAM/ POLICY COMPONENTS

COMMON PROGRAM/POLICY COMPONENTS

AFTERSCHOOL INITIATIVES							
LOCATION	PHYSICAL ACTIVITY	NUTRITION	DURATION	OTHER	PLAUSIBILITY	FEASIBILITY	POTENTIAL IMPACT
Midwest	Draw destination to "walk" to/PA 4x/week. Any PA qualified of any degree of intensity.	Any sort of nutrition activity; "healthier snacks" encouraged; healthier was not defined.	2 sites visited, 1 implemented over 6 weeks, other over 5 weeks.		Program is based on a plausible theory: increased physical activity and healthier eating will lead to reduction in obesity. Plausibility of program could be increased through increasing intensity of PA and including a stronger nutrition component.	Program feasible because of flexible implementation approach.	The duration (5 to 6 weeks) of the program may limit its potential impact. Perhaps with a longer duration and more intense PA, potential impact will increase.
Midwest	PA time; focus on football.	Program guide includes Healthy Snack section.	NA		Plausible program can lead to obesity prevention, however, due to limited time children exposed to program, other environmental, policy and behavioral interventions need to occur concurrently.	Model is sound and focused on capacity building of a nationwide system. Parent organization seeks public awareness, engages partners, tries for environmental change in schools; easy implementation.	For the particular site visited, potential impact may be limited due to no sustainability plan and low parental support. By addressing these two issues, potential impact would be increased.

AFTERSCHOOL INITIATIVES (CONT.)							
LOCATION	PHYSICAL ACTIVITY	NUTRITION	DURATION	OTHER	PLAUSIBILITY	FEASIBILITY	POTENTIAL IMPACT
Northeast	30 lesson plans for PA; 2x/weekly; lessons last approximately 45-60 minutes sessions to produce MVPA.	Healthy snack component/ partnership with local produce distributor for fresh fruit and vegetables and milk. The grain component of snack varies (e.g., graham crackers, pretzels, chex mix, cookies).	15 weeks; delivered twice yearly—Spring and Fall.	Health literacy section, designed to teach about food and healthy eating, delivered informally and inconsistently. Developmental assets section includes topics of discussion with children; informally delivered.	Sound logic for improved physical fitness; links in logic model between activities, outputs and outcomes sound for physical fitness.	Strong administrative support for program implementation.	Due to the sound approach in physical activity and fruit intake, the program has potential impact for childhood obesity.
Northeast	40 minutes PA daily (staff expected to participate with children). Games requiring PA.	Nutritious snack daily; nutrition education periodically. Participate in USDA Child Adult Care Feeding Program.	Throughout school year; ongoing year to year.	Parent pledge (eat healthier and engage in PA), staff incentives, game to reinforce healthy snacks being served, staff BMI reduction challenge, family lifestyle food challenge (\$100 groceries, recipes, grocery store trip with RD), family fun nights, newsletters (healthy recipes, games to play).	For children participating daily, it is highly plausible children will receive health benefits because of the required 40 minutes of PA daily.	Parent organization has necessary resources for full implementation; program institutionalized.	Potential impact is high due to the changing of the afterschool environment to promote physical activity and healthy eating.

AFTERSCHOOL INITIATIVES (CONT.)							
LOCATION	PHYSICAL ACTIVITY	NUTRITION	DURATION	OTHER	PLAUSIBILITY	FEASIBILITY	POTENTIAL IMPACT
Midwest	At least 30 minutes PA daily; 1 flexibility activity, 2 strength activities, 3 cardio activities. CATCH curriculum followed.	At least 1 nutrition lesson or activity per week (e.g., cooking lesson, food pyramid discussion); "healthy snacks and beverages" daily.		"...several features of the planned program that, at the time of the site visit, were not uniformly implemented in all [name] afterschool programs."	Program plausible for obesity because children exposed to 30 minutes PA/day and offering of a healthy snack.	Program has been institutionalized; in need of more CATCH activity kits, space, and equipment to enhance feasibility.	Potential impact could be increased with more training offered to afterschool coordinators who were reported to not have adequate knowledge about nutrition or willingness to participate in PA with the children.
Southeast	PA twice per week.	Nutrition twice per week.		Site visitors observed little nutrition or physical activity intervention taking place.	With more PA and more nutrition activities taking place, the program could produce favorable outcomes.	Feasible program could be implemented as intended, but full implementation not witnessed during site visit.	Potential impact could be increased with more thorough implementation.
Southwest	Daily, 50 to 60 (about 30 minutes in PA) minutes; "physical education standards"; has on staff a retired Physical Education Instructor; Variety of games involving PA.	Nutrition education included in lesson plans.	Throughout school year; ongoing year to year.	70 lesson plans educating children on physical fitness, nutrition, and self-respect.	Program plausible for reducing childhood obesity because of strong PA program component and other events held by parent organization.	Program feasible based on support from multiple school districts, youth groups, non-profits, and local businesses; high level involvement of trained staff.	High potential impact during after school hours because of dedication to PA. Also small potential impact on home environment due to involvement of family during events offered by parent organization.

AFTERSCHOOL INITIATIVES (CONT.)							
LOCATION	PHYSICAL ACTIVITY	NUTRITION	DURATION	OTHER	PLAUSIBILITY	FEASIBILITY	POTENTIAL IMPACT
West	Require 10 minutes of physical activity for every hour of after school programming.	Nutrition standards for snacks served (including vending machines) have been set. Examples include: No more than 35% of calories from fat, no more than 10% from saturated fat No more than 35% sugar by weight No more than 175 calories per serving for elementary and 250 calories per serving for middle and high schools At least 50% fruit-juice or 50% vegetable-juice based drinks with no added sweetener Water with no added sweetener	Ongoing.	Annual training to staff and coaches on healthy vending and healthy snacks. Engage community members through youth advocacy and involvement; a community-based advisory group; and Promoturas providing training to parents.	It is highly plausible that this policy can increase accessibility and availability of healthy food options to school-age children. There is some observational data available to support this.	It is feasible to fully implement this intervention as intended in this community. Keys to full implementation include: A political will to support healthy youth. Strong support and participation from community members. Leadership in the partnering organizations.	Potential impact is high. The policies are being implemented in many school-based and non-school-based after school programs; there are systems to support and monitor implementation.
Midwest	60 to 90 minutes each week of physical activity.	60 minutes of nutritional activities and education each week.	Ongoing.	Parental and other adults (e.g., staff) are encouraged to develop a healthy environment; improve self-image and enjoyment of healthy behaviors.	Plausibility is high. Initial evaluation findings show changes in children's physical activity enjoyment, increased health behaviors, and an initial decrease in BMI.	Multiple agencies implement this program. Staff at each agency implement the program, and graduate students collect data and provide technical assistance.	Potential impact is fairly high because of ongoing evaluation efforts. They have modified the program to increase fidelity, sustainability, and collaboration.

AFTERSCHOOL INITIATIVES (CONT.)							
LOCATION	PHYSICAL ACTIVITY	NUTRITION	DURATION	OTHER	PLAUSIBILITY	FEASIBILITY	POTENTIAL IMPACT
Midwest	60 to 90 minutes each week of physical activity.	60 minutes of nutritional activities and education each week.	Ongoing.	Parental and other adults (e.g., staff) are encouraged to develop a healthy environment; improve self-image and enjoyment of healthy behaviors.	Plausibility is high. Initial evaluation findings show changes in children's physical activity enjoyment, increased health behaviors, and an initial decrease in BMI.	Multiple agencies implement this program. Staff at each agency implement the program, and graduate students collect data and provide technical assistance.	Potential impact is fairly high because of ongoing evaluation efforts. They have modified the program to increase fidelity, sustainability, and collaboration.
Southwest	One hour is dedicated to physical activity each day. The majority is MVPA.	Nutrition education is delivered by a registered dietitian; efforts to serve a healthy snack by collaborating with food service staff; children at one school site maintain eight raised garden beds.	Program lasts for duration of school year.	Emphasis on cultural awareness; field trips; tobacco prevention; diabetes education.	It is plausible that the program could reduce childhood obesity by ensuring that children spend at least 60 minutes after each school day in MVPA and by offering a healthy snack.	Feasibility of implementation is high if there is adequate staff and space to engage in MVPA.	At the time of the site visit, enrollment was limited to 2 schools, but there were plans to increase this. Potential impact is high for participants because of focus on physical activity.

AFTERSCHOOL INITIATIVES (CONT.)							
LOCATION	PHYSICAL ACTIVITY	NUTRITION	DURATION	OTHER	PLAUSIBILITY	FEASIBILITY	POTENTIAL IMPACT
West	Activities typically occur for 30 minutes per day 4 to 5 days/week, and include games from the CATCH and SPARK curricula, other games, or sports such as basketball, volleyball, and soccer.	Nutrition Education (1 hour/week): Activities are included in a nutrition binder that provides materials for each month of the school year. Gardening (1 hour/week): Activities include visits to one of two large gardens owned by the program. Cooking (1 hour/week): Classes occur at the individual school sites and a kitchen classroom. No Junk Food policy for students and staff (staff who violate can be terminated).	Program lasts for duration of school year.	Half of the program sites receive 800 to 1,000 pound produce deliveries from a local food bank weekly. Each child takes 3 to 5 pounds home each week.	Plausibility for nutrition improvement is high because nutrition policies and practices appear well-developed. Plausibility for physical activity is unknown because the policies and programs are less well-defined and do not include a requirement for MVPA.	Feasibility of full implementation appears high due to the well-established nature of the communication and training systems. The leaders and administrator meet weekly, and each leader conducts visits to their after school sites.	Potential impact on nutrition is high: the nutrition education, gardening, cooking, junk food policy and produce distribution programs may impact the after school and home environments related to healthy eating.
Southwest	There are an estimated 5 to 10 hours of physical activity and/or nutrition education weekly.	Nutrition education.	Program lasts for duration of school year.		Plausibility somewhat limited because the program's primary emphasis is on educating children about the importance and value of good eating and exercise.	Feasibility is varied because of multiple agencies implementing the program. The program offers an important model for delivering an afterschool program via a multi-agency collaboration.	Potential impact could be increased with more emphasis on changing the nutrition and physical activity environments versus emphasizing education alone.

AFTERSCHOOL INITIATIVES (CONT.)							
LOCATION	PHYSICAL ACTIVITY	NUTRITION	DURATION	OTHER	PLAUSIBILITY	FEASIBILITY	POTENTIAL IMPACT
Midwest	Participants engage in 20 minutes of vigorous physical activity at least two times per week and 30 minutes of moderate PA daily.	The program provides nutritious options for snacks and nutrition education.	12 weeks.	Parents can participate in the program by working with their children to complete charts of healthy fruit and vegetable choices or by participating in Family Night activities.	It is likely that the program will produce the desired outcomes if they continue to develop and implement an evaluation plan and continue to discuss detailed plans, evaluate goals and progress, and communicate plans for expansion.	Feasibility is high because the 12-week nutrition and physical activity curriculum have been packaged into one program book for site leaders. Further, weekly reports of the curriculum items presented to the children are collected to ensure program fidelity.	Program impact information has demonstrated increases in the percent of children who engage in moderate and vigorous activity, choose healthy snack options, and improve overall nutrition knowledge.
Midwest	Physical activity lessons offered 3 times/week, include three steps: warm-up/auxiliary activity, main event, and cool down/stretching. The main event is intended to provide 20 minutes of continuous activity.	There are six initial 45 minutes nutrition lessons on the following topics: (1) choosing lower calorie alternatives for snacks; (2) choosing one serving of packaged snack food; (3) choosing beverages without added sugar; (4) choosing cereals with a low amount of added sugar; (5) eating fruit; and, (6) eating vegetables and snacking on vegetables.	Program lasts for duration of school year.		The PA strategy can be expected to increase physical activity. The nutrition lessons employ teaching strategies consistent with Social Cognitive Theory. However, plausibility of the nutrition lessons may be limited because education alone tends to have a limited impact on behavior.	The program is fully implemented in the area's YMCA program. The program is delivered by 12 dietetic interns, a number which may be too low to reach the 40+ YMCAs offering before and after school care throughout the area.	Potential for impact is high because of the broad reach to all children in the YMCA before and after school programs.

DAYCARE INITIATIVES							
LOCATION	PHYSICAL ACTIVITY	NUTRITION	DURATION	OTHER	PLAUSIBILITY	FEASIBILITY	POTENTIAL IMPACT
Northeast	Children 12 months+ receive 60 minutes PA daily (children 3 years+ receive 30 minutes structured, total of 60 minutes); SPARK trainings provided to some communities, but not required.	Reduced intake of low nutrient energy dense beverages and fruit juices with intent to reduce caloric intake by 100-200 kcal/day. Children 2 years+ 1% or lower fat milk. 100% fruit juice, 6 ounces. No specific nutrition guidelines, but the health dept will provide the Eat Well Play Hard nutrition program.	Ongoing.	60 minutes limit for TV and screen time. Parents must follow guidelines when bringing food in with children.	Highly plausible the policy will produce favorable outcomes because of the standards set forth and enforcement.	Feasible policy implemented as intended due to support of administrators in ensuring daycare centers are receiving training.	Potential impact is high because of the focus on sugar sweetened beverages, low fat milk, TV time, and PA time.
Northeast	20 to 30 minutes lesson providing opportunity for PA or a new food.	20 to 30 minutes lesson including an interactive presentation by an RD, opportunity for children to try a new food or PA. Follows <i>Dietary Guidelines for Americans</i> .	6-10 weeks.	Train child care staff using NAP SACC. Children given a take home sheet that introduces parents to the lesson taught to the child and a recipe.	Program plausible because of multi-components: PA, increased fruit and vegetable and low-fat dairy consumption all stressed.	Program can be implemented with fidelity due to strong organizational support at state and community level as well as strong infrastructure.	Potential impact could be increased with a longer duration and more PA offered to childcare staff to support changes in the social/physical environment of the daycare.

DAYCARE INITIATIVES (CONT.)							
LOCATION	PHYSICAL ACTIVITY	NUTRITION	DURATION	OTHER	PLAUSIBILITY	FEASIBILITY	POTENTIAL IMPACT
Southeast	Brief PA games.	Information on nutrition (both for children and for childcare providers).	Ongoing to various levels of implementation.	Train-the-trainer (county health promotion coordinators and cooperative extension agents trained, who then train child care providers). Trainings offered 1 to 3x/year and last 3 to 4 hours, cost \$5.	Plausible that children will increase recognition of fruits and vegetables.	Quality packaging of materials, use of trainer's manual, training of childcare providers, provision of free kits to those trained all enhance feasibility of implementation.	High potential impact on increasing children's recognition of and willingness to try new fruits and vegetables. Potential impact for changing the physical or social environment of the daycare is more limited due to limited outreach offered.
West	Children receive PA education and participate in structured PA. Parents and staff receive PA education and may attend classes.	Children, parents, and staff receive nutrition education, recipes, cooking classes, access to community resources; healthier meals, snacks, and beverages served at center; container gardening; targeted and individualized "intervention" among overweight children and those at risk.	Ongoing.	Health fairs and screening for families and staff; child nutrition assessments: 2 times/year; comprehensive wellness and training activities.	It is plausible that this type of multi-level intervention can produce the desired outcomes. The program hopes to create an environment that supports healthy living.	There is administrative commitment and much energy by staff members. However, fidelity of implementation is unknown due to lack of documentation of key intervention elements.	Potential impact is unknown. During the site visit, limited implementation of unique programming and little participation by staff and families was observed.

DAYCARE INITIATIVES (CONT.)							
LOCATION	PHYSICAL ACTIVITY	NUTRITION	DURATION	OTHER	PLAUSIBILITY	FEASIBILITY	POTENTIAL IMPACT
Midwest	Structured physical activity for children to achieve the NASPE goal of 60 minutes per day; a 2-hour training on strategies to improve nutrition and physical activity for children.	A 2-hour training on strategies to improve nutrition and physical activity for children; attempts at menu improvement.	Ongoing.	A toolbox with materials to enhance the program, two technical assistance visits; a parent outreach training; materials to conduct a social marketing campaign .	A pilot study shows this is a plausible program for reaching outcomes for nutrition and physical activity.	The program is being implemented as designed; the designated number of child care centers has been recruited and trainers are delivering the intervention to the child care center staff.	Potential impact depends on the trainings and how well the trainees are implementing the program. Training has been provided to approximately 80 centers over the past 2 years.
Southeast	Staff training in curricula to promote healthy eating and physical activity to kids.	Improvement of childcare menus to promote healthy food and beverage options; policies to reduce or eliminate unhealthy options at parties and celebrations.	Ongoing.	Staff wellness initiatives; nutrition and physical activity newsletters are provided to parents on a monthly basis.	It is plausible that the intervention could produce the desired outcomes with rigorous implementation and close monitoring.	It is feasible that the intervention for the childcare centers could be implemented fully as there appears to be buy-in and commitment from childcare center staff	At the time of site visit, full implementation was in progress in 3 childcare centers; full implementation could have an impact on eating habits and physical activity.

DAYCARE INITIATIVES (CONT.)							
LOCATION	PHYSICAL ACTIVITY	NUTRITION	DURATION	OTHER	PLAUSIBILITY	FEASIBILITY	POTENTIAL IMPACT
East	A research-to-practice initiative incorporating best practice guidelines such as: NASPE recommendations; Bright Futures in Practice-Nutrition and Physical Activity; American Academy of Pediatrics Policy Statements and Task Force on Obesity Strategies; Institute of Medicine Report; & CDC's BMI-for-Age/Gender Screening Guidelines.	See Physical Activity column.	Ongoing.	Training and technical assistance to program staff.	It is plausible that the intervention could lead to healthier eating and physical activity with rigorous implementation and close monitoring.	The training of regional facilitators has the potential to expand the program in an expeditious way. Mechanisms to ensure that the training provided by facilitators is of the same caliber as that provided by the initial core cadre of trainers would ensure quality training is taking place.	At the time of the site visit, 110 facilitators had been trained. There is potential for impact on the social and physical environment to promote active living and healthy eating.