Challenges and Issues in Child Care Centers Participating in the Child and Adult Care Food Program

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INTRODUCTION

Children's development of healthy eating behaviors relies on the exposure and acceptability of nutritious foods, which are essential for children's growth and development and strongly influence children's longterm health and learning capabilities. The Child and Adult Care Food Program (CACFP) is a United States Department of Agriculture Food and Nutrition Service (USDA FNS), Child Nutrition Program (CNP) that helps child care operators provide nutritious meals and snacks to more than 4.2 million children and adults across the United States. Like other government-supported programs, the CACFP has meal patterns and nutrition requirements that operators and sponsors must follow to receive meal reimbursement. These child care operators apply for nutrition programs, receive training on CACFP requirements, and prepare and serve CACFP meals to children in family child care homes and various child care settings serving children. The USDA FNS and State agencies support CACFP operators for reimbursement, operational guidance, and technical assistance to support these food service operations.

The CACFP nutrition standards promote meals that require fluid milk, fruits, vegetables, grains, and meats/meat alternates and reduced levels of added sugars and saturated fats. Following these standards support children's early exposure to healthier foods and the development of lifelong dietary habits. To assist child care operators with carrying out these standards, The Institute of Child Nutrition (ICN) provides education, training, resources, technical assistance, and research to support the continuous quality and improvements of all CNP operations, including the CACFP. The ICN Applied Research Division (ICN ARD) conducts formal and informal assessments, environmental scans, and other forms of

research on CNP operations and professionals' needs to capture data that can be used to assist them with the implementation, service, and evaluation of CNP. This research is used to develop training, resources, and information to support technical assistance and meet the CACFP professionals' needs for accessible resources that help link child nutrition policies to practical best practices in food service operations.

The CACFP operators' program needs and barriers to implementing and establishing effective program practices have been identified in the research literature. Previous research shows that some operators need assistance staying current with CACFP policies and clarifying training and implementation requirements to meet CACFP nutrition standards. Some studies found challenges to program success, such as food preparation time, food variety, the availability of foods that meet meal pattern restrictions, food cost, and children's preferences. Limited research and data exist nationally on challenges CNP professionals face, indicating a gap in information on possible issues that child care operators may have implementing the CACFP. To investigate this gap, the ICN ARD conducted a study to assess the challenges and issues impacting CACFP operations. The information garnered from this project can be used to develop new or improved resources and training for the CACFP and other CNP operators.

METHODOLOGY

Research Design

Mixed-method and participatory research approaches were used to develop a validated national survey to assess CACFP challenges and identify the CACFP professionals' training, education, resources, and technical assistance needs. The qualitative phase occurred in two primary steps. The researcher conducted a literature review and gathered information from subject matter experts (SME) and the ICN CACFP National Advisory Committee to identify the top four CACFP challenge categories. This information was used to develop inquiry protocols and draft an online survey that included the survey statements for each challenge category identified in the previous step. This stage of the qualitative process was important for gaining additional insight from CACFP stakeholders—from the federal to the local level involved in the CACFP, confirming the researcher's findings, and developing an online survey for the quantitative step of the project. For the next step of the qualitative process, the researcher identified and invited CACFP stakeholders to participate in a virtual expert panel to confirm the top CACFP challenge categories and survey statements.

Questions and statements were drafted in an online survey format and provided to the expert panel to give feedback on survey instructions and CACFP challenge categories and questions for developing a national rapid response survey (RRS). Additional questions were added to capture panel members' suggestions for improving the survey instructions and instrument. The researcher analyzed the expert panel's comments and suggestions to confirm the CACFP challenge categories and statements and created the second draft survey in Qualtrics, a survey software program, as an online national RRS to be distributed to CACFP operators nationally.

A virtual review panel of CACFP stakeholders was invited to conduct an online evaluation to confirm the electronic format, instructions, and survey components for the draft RRS in preparation for national distribution to CACFP operators. The researcher analyzed the review panelists' feedback and revised the final RRS instrument for distribution. The ICN Marketing Team assisted in distributing

the survey invitation and RRS link through the ICN's national database to garner CACFP operators' participation in completing the survey. Access to the survey was closed after four weeks, and the ICN Data Analytics Team analyzed the findings. The researcher summarized the data to report survey findings as the last step of the project.

Target Audience

The CACFP stakeholders for this study included family child care and child care operators serving CACFP meals, State agencies, ICN personnel, national CNP organizations, and USDA FNS representatives who provided CACFP training, resources, and technical support. These participants served in different capacities as SMEs, expert panel and review panel members, and survey participants for this project.

Survey Instrument

For the development of the RRS, 10 expert panel members responded to seven questions to confirm research-based CACFP challenge categories and 10 draft survey statements. The expert panel provided feedback and additional survey question/statement suggestions for the researcher for each category. The researcher created the draft RRS using Qualtrics (2024), an online survey software program. A review panel of 13 members completed the RRS and submitted recommendations to revise, delete, and add survey questions and statements. The final RRS, The Child Care CACFP Challenges Survey, included participants' consent, a survey of 33 questions and statements organized under four categories (food challenges, training challenges, facility and supply challenges, and nutrition education resource challenges), four demographic questions, and a final open-ended question providing participants an opportunity to share additional experiences of CACFP challenges and issues. The survey completion criteria only required participants to read and confirm their consent to access the survey questions and statements and share their experiences. Per the review panel's evaluation, completing the survey took 10–15 minutes. Reviewers electing to share additional CACFP challenges took more time to complete.

Recruitment and Data Collection

The survey participants were a nationally representative sample of CACFP and child care professionals obtained from The ICN database. An online invitation was developed, providing an overview of the project, an electronic link to the RRS, and instructions for completing the survey. The ICN marketing team assisted with the distribution of invitations via multiple marketing formats on The ICN website, social media sites, and email database. The RRS invitation was promoted for four weeks, from June 2024 to July 2024.

RESULTS

Project Participants

Three subject matter experts, 10 expert panel members, and 13 review panel members participated in confirming questions and topics that identified common CACFP challenge categories described in the research literature and from practitioners in the field to develop and revise the RRS. The final RRS was distributed by email and made accessible on social media platforms to 22,579 potential CNP professionals, of which 56.5% accessed the invitation. Three hundred twenty-five people opened the survey, and 17 elected not to participate after reading the consent form, resulting in 308 completed surveys.

Survey Results

ICN Data Analytics analyzed the survey, and the results were reported as frequencies for CACFP challenges questions. If applicable to their CACFP operations, participants encountered challenges sometimes across the six categories. The greatest needs were for resources and assistance to meet the procurement of foods to meet children's special dietary needs (84.4%), CACFP guidelines (84.1%), and finding fresh fruits and vegetables that meet their CACFP budget (82.8%). Training challenges were the second highest issue, with administrators and staff responding time to train (63.3%) and finding local face-to-face CACFP training (58.4%) as their highest issues. There were also role-specific challenges for administrators and staff occurring after CACFP training. Administrators found it more challenging after CACFP training to manage audits efficiently (72.7%), understand CACFP guidelines (72.1%), and stay current with CACFP policy updates (70.8%). Understanding and adapting to meal preparation guidance (70.4%) and adapting to CACFP meal plan changes (68.2%) were the most challenging for CACFP staff.

Limited space for food storage (54.5%) and equipment updates (41.2%) were the highest facility and supply challenges. Participants responded that they had fewer issues accessing nutrition education resources, with only 36% responding to the need for nutrition education for CACFP staff. The top challenges for each category are listed in Table 1 below.

Table 1Top Child Care Center CACFP Challenges and Issues by Category

Top Issues				
Category	%	Challenge		
Food Challenges				
	84.4	Finding foods for children with special nutrition needs.		
	84.1	Finding foods that meet CACFP guidelines.		
	82.8	Finding a variety of fresh fruits and vegetables within the CACFP budget.		
Training Challenges				
	63.3	Time for administrators and staff training.		
	58.4	Finding local face-to-face CACFP training beyond the annual required training.		
Training Difficulty for Administrators Experienced after CACFP Training				
	72.7	Managing CACFP audits and reviews efficiently.		
	72.1	Staying informed about CACFP policy updates and changes.		
	70.8	Understanding CACFP guidelines and regulations.		
Training Difficulty for Staff after CACFP Training				
	70.4	Understanding and adapting to CACFP meal preparation guidelines.		
	68.2	Adapting to changes for CACFP meal plans.		
Facility and Supply Challenges				
	54.5	Do not have enough space to store more produce and other foods.		
	41.2	Do not have facility space for food service equipment updates.		
Nutrition Education Resources Challenges				
	36.0	Need help finding nutrition education resources for staff.		

There were also notable challenges listed that participants believed were not an issue. Many believed that meeting CACFP guidelines for infants (44.5%) was a food-related challenge for them. For training challenges, administrators and staff did not perceive finding training in a non-English language (81.8%) and did not have technological issues preventing virtual training (76.3%). Administrators had fewer problems promoting teamwork and communication (40.9%), and staff did not perceive maintaining food safety standards as challenging (63.0%). Technology support and online CACFP management were not noted as a challenge by most respondents (70.8%), and they did not have issues accessing nutrition education resources for children (70.1%), parents (66.9%), and administrators/staff (66.2%).

Table 2 *Issues Not Recognized as CACFP Challenges by Category*

Issues Not Recognized as CACFP Challenges					
Category	%	Not a Challenge/Not Applicable			
Food Challenges					
	44.5	Meeting CACFP guidelines for infants.			
Training Challenges					
	81.8	Finding food and nutrition training in languages other than English is a challenge.			
	76.3	Attending virtual training due to technology issues.			
Training Difficulty for Administrators Experienced after CACFP Training					
	40.9	Promoting teamwork and communication among CACFP stakeholders.			
Training Difficulty for Staff after CACFP Training					
	63.0	Maintaining CACFP food safety standards.			
Facility and Supply Challenges					
	70.8	No additional support is necessary to update Internet service and computer technology for CACFP management.			
Nutrition Education Resources Challenges					
	70.1	No difficulty finding nutrition education resources for children.			
	66.9	No difficulty finding nutrition education resources for parents.			
	66.2	No difficulty finding resources designed for child care administrators managing the CACFP.			

Demographics

Respondents (n = 308) reported from 45 states, the District of Columbia, and United States Territories. Participants represented every facet of CACFP professionals, including family home care providers, child care directors, CACFP sponsors, Head Start nutrition administrators, State agency representatives, and the ICN representatives (Figure 1). Although no USDA FNS representative indicated their affiliation from the suggested listing, USDA FNS representation at the regional level was noted as the "other" option, and this employment reference was typed as their job title under this category. Most participants (n = 122 or 39.6%) selected "other" as an indication that their direct job title was not listed. This option allowed participants to type their role or job title. Data analysis indicated that many of these roles fell within four job-related categories: food service and management, nutrition-related roles, education and training, and child development. They are described in Figure 1 and Table 3.

Figure 1 *Job Title of Participants*

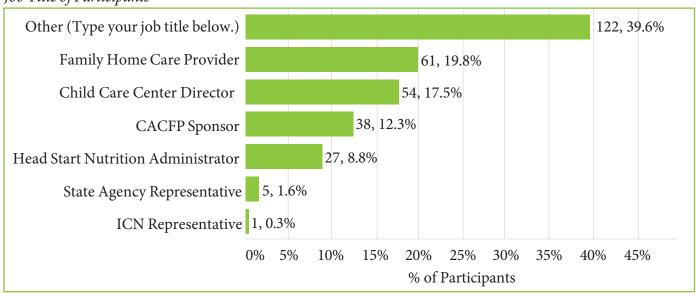


Table 3Qualitative Analysis of Suggested "Other" Job Titles

"Other" Job Titles				
Job Category	Major Titles			
Food Service & Management	Food Service Manager, Cafeteria Manager, District Food Service Director, Head Start Food and Nutrition Manager, Cook			
Nutrition-Related Roles	Nutrition Supervisor, Nutrition Compliance Specialist, Child Nutrition Director, Registered Licensed Dietitian, Health & Nutrition Manager, Child Care Nutritionist			
Education & Training	Culinary Arts Teacher, Trainer, Educator/Trainer, and Professional Development Coordinator			
Child Care & Development	Child Care Lead Teacher, Child Care Center Assistant Director, and Family Service Worker.			

Participants' CACFP experience varied from one to more than 26 years, with most participants (29.9%) working in child care one to five years. The years of experience are shared in Figure 2. They also served various children enrolled in the child care settings in which they served. These ranged from less than five children in family home care centers to more than 500 children served by CACFP sponsors. The number of children enrolled in these settings served CACFP meals and snacks is listed in Table 4.

Figure 2

Participants' Years of Experience

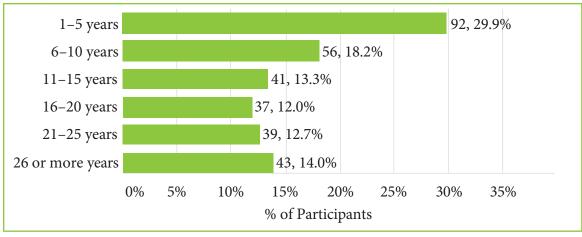


Table 4Number of Children Enrolled in Participants Child Care Center or Sponsoring Organization

Number of Children	N	Percent
Less than five children	7	2.3%
5–10 children	42	13.6%
11–15 children	15	4.9%
16–20 children	8	2.6%
21–25 children	5	1.6%
25–50 children	30	9.7%
51–100 children	45	14.6%
101–200 children	46	14.9%
201–300 children	26	8.4%
301–400 children	15	4.9%
401–500 children	11	3.6%
More than 500 children	42	13.6%

The option to provide additional information about challenges that may not be listed on the survey received 142 responses. Although qualitative analysis revealed that many of the statements added were included in the survey, participants provided details about these challenges that the survey format would be limited in capturing. These included statements coded into nine themes. These are presented in Table 5.

Additional CACFP Challenges Faced by CACFP Survey Participants (n = 142)

1. Food Variety and Resource Limitations

- Meat Alternatives: There is a shortage of meat alternatives and resources for vegan and vegetarian programs.
- Seasonal Availability: The program does not operate during June, July, or August, limiting access to fresh fruits and vegetables when in season.
- Lack of Menu Flexibility: Feedback indicates that military menus and school district menus do not cater effectively to the age group served, particularly for younger children.

2. Administrative Burdens

- Meal Recording Deadlines: The requirement to record meals by midnight is challenging, especially for operators managing personal responsibilities and outside employment.
- Redundant Paperwork: Operators find the meal benefits eligibility form and annual enrollment form redundant and overwhelming for parents.
- Technical Challenges: The KidKare software for meal reporting is slow and frequently crashes, wasting time.

3. Training and Support

- Training Ineffectiveness: In-person training does not meet providers' needs; more relevant scenarios and hands-on training are requested.
- Communication Gaps: Responses to questions often reiterate policies without addressing specific concerns, leading to frustration.
- Need for Comprehensive Manuals: There is a demand for a current manual that clearly outlines program requirements to avoid confusion.

4. Financial Concerns

- Training Ineffectiveness: In-person training does not meet providers' needs; more relevant scenarios and hands-on training are requested.
- Communication Gaps: Responses to questions often reiterate policies without addressing specific concerns, leading to frustration.
- Need for Comprehensive Manuals: There is a demand for a current manual that clearly outlines program requirements to avoid confusion.

5. Waste Management

- Milk Waste: The requirement for excessive milk provision leads to significant waste, with frustration over being unable to distribute the excess to families or staff.
- Food Waste: Operators highlight the challenges of food waste due to strict serving portion requirements, recommending more flexible portions.

6. Collaboration and Cohesion

- Inter-program Discrepancies: There is a lack of alignment and cohesiveness between the meal pattern requirements of the National School Breakfast Program, National School Lunch Program, and CACFP, leading to confusion among providers.
- Collaboration with Head Start: Enhanced collaboration between CACFP and Head Start could provide additional resources to align standards and practices.

7. Operational Challenges

- Vendor Constraints: Operators express frustration with contracting vendors and the limited control over food delivery and availability, especially post-COVID-19.
- Rural Challenges: Limited grocery options in rural areas complicate food procurement and storage, affecting meal quality and variety.

8. Special Diet Considerations

- Costs of Special Diets: There is a need for reimbursement for special diets that incur higher costs, essential for meeting children's nutritional needs.
- Baby Food and Formula Costs: Increasing costs for baby food and formula impact facilities with many infants, straining budgets.

9. Overall Feedback and Suggestions

- Encouragement of Scratch Cooking: There is a call for minimum percentages of foods made from scratch or sourced locally to improve meal quality.
- Need for Practical Resources: Operators request online tools for tracking milk inventory and guidance on allowable purchases for additional food and snacks.
- Expanded Support for New Providers: More accessible training and recorded sessions for new nutrition managers would facilitate onboarding and adherence to regulations.

SUMMARY

This project aimed to identify issues experienced by child care operators providing CACFP meals in various settings. Respondents to this RRS indicated that they have experienced CACFP food, training, facility and supply, and nutrition education resource challenges in maintaining compliance with the program's standards. The data for this project can be used to bridge the gap between CACFP policies and the practical implementation of the program. It can also be used to explore the challenges and issues experienced in child care settings serving CACFP meals; stakeholders can better align training, create and improve resources, and offer technical assistance that aids in the improvement of operational practices used to meet these standards. The additional information shared by CACFP stakeholders offers valuable insights into improving the CACFP in child care settings that can also be used to justify improvements in resources and develop tools for CACFP operators.

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