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USDA Food and Nutrition Service, Child Nutrition Division

Survey on Nutrition, Physical Activity and Electronic Media Use in Child Care Settings

INTRODUCTION

TELEPHONE: Good [morning/afternoon/evening]. Hello. My name is _ _ _ _ and I'm calling from KRC Research, an independent survey research company. We are conducting a 15 to 20-minute voluntary survey for the USDA Food and Nutrition Service (FNS). This is the government agency responsible for administering the Child and Adult Care Food Program (CACFP). We're conducting the survey among participating [child care centers, family day care homes, sponsoring organizations, and administering state agency staff]. The survey is about nutrition, physical activity and electronic media use in child care settings for children age five and younger. The purpose is to gather information to help improve the program.

We would very much like to include your perspectives. Your insights are very important, and there are no wrong answers to any of the questions. We are not selling anything, won't ask for any contributions or donations, and your individual responses will be kept secure and only used for research purposes unless otherwise required by law. May I ask you a few questions to verify that you qualify to participate in the survey? If you qualify, we can either conduct the survey now, or we can schedule a time that is best for you. **IF YES, CONTINUE. SCHEDULE CALLBACK IF NEEDED.**

ONLINE: KRC Research, an independent survey research company, is conducting a 15-minute voluntary survey for the USDA Food and Nutrition Service (FNS). This is the government agency responsible for administering the Child and Adult Care Food Program (CACFP). We are conducting the survey among participating [child care centers, family day care homes, sponsoring organizations, and administering state agency staff]. The survey is about nutrition, physical activity and electronic media use in child care settings for children age five and younger. The purpose is to gather information to help improve the program. Your insights are very important, and there are no wrong answers to any of the questions. Your individual responses will be kept secure and only used for research purposes unless otherwise required by law. Click **START** to begin.

IF ASKED ABOUT KRC RESEARCH: KRC Research is a national research company. We conduct surveys, focus groups, and individual interviews for numerous non-profit organizations, governmental organizations, business organizations, and associations. This research is about nearly every topic, including nutrition, healthcare, technology, and consumer products. You can

visit our website at www.krcresearch.com.

IF ASKED HOW KRC GOT NAME/NUMBER: We are conducting a large national survey of [child care centers, family day care homes, sponsoring organizations, and administering state agency staff]. Your name was randomly drawn from a list of organizations currently participating in the Child and Adult Care Food Program (CACFP). The goal is to interview a wide range of people who are responsible for providing meals, exercise and access to media activities. We hope you will participate.

IF RESPONDENT ASKS FOR MORE CLARIFICATION ABOUT SPONSOR: In partnership with the US Department of Agriculture, the [INSERT STATE AGENCY FROM FILE] is the agency in your state responsible for administering the Child and Adult Care Food Program (CACFP). It contracts with independent research companies like KRC Research to evaluate its programs and activities. The Food and Nutrition Service commissioned the survey to get a fresh snapshot of opinions and activities in our nation’s child care centers, family day care homes, sponsoring organizations, and state agency staff. Your feedback will be extremely valuable. May I continue with our interview?

IF RESPONDENT WANTS TO VERIFY LEGITIMACY OF SURVEY: You can contact the project director at KRC Research, a representative from the USDA Food and Nutrition Service, or we can send you a FAX confirmation from the USDA on USDA letterhead if you like. Which would you like to do?

SCREENING QUESTIONS

Objectives of this section:

- Record language and gender, verify audience
- Confirm participants are qualified to complete the survey by asking audience-specific questions

The first few questions are to make sure we are surveying a diverse group of people...

1. LANGUAGE OF INTERVIEW (DO NOT ASK):

- English..... 1
- Spanish..... 2

2. CODE GENDER (DO NOT ASK):

- Male..... 1
- Female..... 2

3. To verify, is the setting where you work... a day care home; ...a child care center; ...a sponsoring organization that oversees child care centers or day care homes; or ...a state agency responsible for administering the Child and Adult Care Food Program (CACFP)?

- Family day care home..... 1
- Child care center..... 2
- Sponsoring organization..... 3
- State agency staff..... 4
- Other..... **TERMINATE**

4. [IF Q3=1, 2 OR 3] Does your [day care home][child care center][sponsoring organization] participate in the Child and Adult Care Food Program, which provides reimbursement for foods served that meet specific meal pattern requirements?

Yes..... 1
No..... **TERMINATE**
(dk/refused)..... **TERMINATE**

5. And are you the individual primarily responsible for administering the Child and Adult Care Food Program and for decision-making when it comes to meals, physical activity, and/or for the access children have to electronic media like TV and video resources [IF Q3=1: in your day care home][IF Q3=2: in your child care center][IF Q3=3: in the child care centers and day care homes your organization sponsors][IF Q3=4: in day care homes and child care centers within your state]?

GO TO Q6 Yes 1
ID INDIVIDUAL¹ No..... **IDENTIFY CORRECT INDIVIDUAL OR TERMINATE**

6. [IF Q3=2] Does your center work with a sponsoring agency to administer CACFP?

Yes..... 1
No..... 2
(dk/refused)..... 99

7. What is the zip code where you work?

RECORD ZIP CODE: _ _ _ _ _

CODE FNS REGION AS FOLLOWS:

Mountain Plains..... 1
Northeast..... 2
Mid-Atlantic..... 3
Mid-West..... 4
Southeast..... 5
Southwest..... 6
Western..... 7

Mountain Plains (CO,IA,KS,MO,MT,NE,ND,SD,UT,WY)
Northeast (CT,ME,MA,NH,NY,RI,VT)
Mid-Atlantic (DE,DC,MD,NJ,PA,PR,VA,VI,WV)
Mid-West (IL,IN,MI,MN,OH,WI)
Southeast (AL,FL,GA,KY,MS,NC,SC,TN)
Southwest (AK,LA,NM,OK,TX)
Western (AK,AZ,CA,HI,ID,NV,OR, WA, Guam, CNMI, AS)

¹ NOTE: Ask to speak to the person responsible for decision-making about meals, physical activity and electronic media access.

8. [IF Q3=1, 2 OR 3] Are you... [READ LIST]

- Under 18..... **TERMINATE**
- 18-20..... 1
- 21-34..... 2
- 35-44..... 3
- 45-54..... 4
- 55-64..... 5
- 65 or older..... 6
- (dk/refused)..... 99

9. [CHILD CARE CENTERS ONLY] What is your job title or role?

- Director or Site Supervisor/Manager..... 1
- Assistant Director..... 2
- Food Service Director or Manager/Cook..... 3
- Teacher..... 4
- Graduate Assistant..... **TERMINATE**
- Teacher Aid or Volunteer..... **TERMINATE**
- (dk/refused)..... **TERMINATE**

10. [DAY CARE HOMES ONLY] What is your job title or role?

- Owner/Co-Owner/Operator..... 1
- Assistant..... **TERMINATE**
- Teacher..... **TERMINATE**
- Volunteer..... **TERMINATE**
- (dk/refused)..... **TERMINATE**

Q11-Q14: PROVIDERS ONLY

11. Which of the following describes the type of your center(s) and home(s)? Please select all that apply.

READ/SHOW LIST

- Head Start..... **TERMINATE**
- State-run preschool..... **TERMINATE**
- Center or other preschool..... 3
- Family day care home..... 4
- Other..... **TERMINATE**
- (dk/refused)..... **TERMINATE**

12. Approximately, how many children are there in the following age groups under your care:
RECORD NUMERIC RESPONSES 0-99

			(dk/refused)
a.	Ages 0 to 12 months	—	999
b.	Ages 1 and 2	—	999
c.	Ages 3, 4 and 5	—	999
d.	Ages 6+	—	999

IF “O” OR DK IN A-C, TERMINATE (MUST HAVE SOME CHILDREN IN CENTER UNDER AGE 6 TO CONTINUE)

13. Does your center or home offer full-day child care for at least nine months out of the year?

Yes..... 1
 No..... **TERMINATE**

14. What is the total number of children at your center(s) and home(s)?

RECORD NUMBER OF CHILDREN:..... _ _ _ _ _
 (dk/refused)..... 99

Q15-Q17: SPONSORING ORGANIZATIONS ONLY

15. What is your job title or role?

Executive Director..... 1
 Assistant Director/Supervisor..... 2
 Food Program/Nutrition Manager..... 3
 Food Program Specialist/Monitor..... 4
 Board Member..... **TERMINATE**
 Finance Director..... **TERMINATE**
 Human Resources Director..... **TERMINATE**

 Community Operations Director..... **TERMINATE**

 Other..... **TERMINATE**
 (dk/refused)..... **TERMINATE**

16. Are the child care centers that you sponsor **affiliated**—that is sponsor-owned, or **unaffiliated**—that is not sponsor-owned, or both?

Affiliated 1
 Unaffiliated..... 2
 Both..... 3
 (dk/refused)..... 99

17. What is the total number of child care centers and/or day care homes that your organization sponsors?

RECORD NUMERIC RESPONSES 0-500

			(dk/refused)
a.	Child care centers	—	999
b.	Day care homes	—	999

Q18-Q22: STATE AGENCY STAFF ONLY

18. To confirm, do you work at [INSERT STATE AGENCY/DIVISION FROM SAMPLE]?

IF NOT CONTACT FROM SAMPLE, ASK TO SEE IF RESPONDENT HAS CONTACT INFORMATION FOR NAME ON LIST OR FOR AN ALTERNATIVE CONTACT WHO HAS RESPONSIBILITY FOR ADMINISTERING THE CACFP

19. What is your job title or role?

- Director/Chief..... 1
- Program Manager/Supervisor/Administrator..... 2
- Nutritionist..... 3
- Program Specialist..... 4
- Education/Training Specialist..... 5
- Field Staff/Monitor..... 6
- Secretary..... **TERMINATE**
- Other..... **TERMINATE**
- (dk/refused)..... **TERMINATE**

20. Does your agency or division work with sponsoring organizations and/or child care centers to administer the Child and Adult Care Food Program, or CACFP in your state?

- Yes 1
- No..... **TERMINATE**
- (dk/refused)..... **TERMINATE**

21. What is the total number of sponsoring organizations that you work with to administer CACFP?

RECORD NUMBER:..... _ _ _ _ _
(dk/refused)..... 99

22. What is the total number of independent child care centers you work with to administer the CACFP?

RECORD NUMBER OF CENTERS:..... _ _ _ _ _
(dk/refused)..... 99

GENERAL AWARENESS OF EXISTING NUTRITION GUIDELINES AND RECOMMENDATIONS AND CURRENT NUTRITION PRACTICES

Objectives of this section: Record current nutrition practices in child care settings in order to:

- Measure general awareness of nutrition guidelines and recommendations for children 0 to 5
- Understand how closely providers' menus, use of food labels, food preparation, and food purchasing reflect meals and snacks that are consistent with the 2010 Dietary Guidelines and recommendations by the IOM, especially foods and food components that need to be (a) increased and (b) limited
- Understand how closely providers' menus, use of food labels, food preparation, and food purchasing reflect meals and snacks that promote this population's health through a feeding environment that reflects best practices and recommendations for infants and children

TELEPHONE:

The next questions focus on nutrition, including current practices related to nutrition at child care centers and day care homes. **IF NEEDED:** If there is someone at your organization better suited to answer these questions about nutrition, may I please speak with them?

ONLINE:

The next questions focus on nutrition, including current practices related to nutrition at child care centers and day care homes. **IF NEEDED:** If there is someone at your organization better suited to answer these questions about nutrition, please have him/her complete the next series of questions.

23. How familiar would you say you are with the recommendations in the *2010 Dietary Guidelines for Americans*?

Very familiar.....	1
Somewhat familiar.....	2
Not too familiar.....	3
Not at all familiar.....	4
I have not heard of the <i>Dietary Guidelines for Americans</i>	5
(dk/refused).....	99

24. How important are each of the following factors in deciding what types of food and beverages are served to children at your child care centers and day care homes?

[FOR SPONSORING ORGANIZATIONS] When answering this question, please think about the child care centers and/or day care homes that your organization sponsors.

[FOR STATE AGENCY STAFF] When answering this question, please think about the child care centers you work with to administer the CACFP.

RANDOMIZE

		Very important 1	Somewhat important 2	Not too important 3	Not at all important 4	(dk/refused) 99
a.	Cost	1	2	3	4	99
b.	Convenience and ease of preparation	1	2	3	4	99
c.	Nutritional/health value	1	2	3	4	99
d.	Child preferences	1	2	3	4	99
e.	Parental preferences	1	2	3	4	99
f.	Kitchen/food preparation space	1	2	3	4	99
g.	Staff knowledge about types of food to prepare/serve	1	2	3	4	99
h.	Access to nutritious foods and beverages	1	2	3	4	99

Q25-Q30: PROVIDERS ONLY

The purpose of the next set of questions is to better understand the different food and beverages served to children ages 0 to 5 in child care centers and day care homes. As you are answering these questions, please do your best to think about the food and beverages served in a typical day.

TELEPHONE: If there is someone at your organization better suited to answer questions, may I please speak with them?

ONLINE: If there is someone at your organization better suited to answer these questions, please have him/her complete the next series of questions.

25. Which of the following meals and snacks are provided at your center or home?

		Yes 1	No 2	(dk/ref) 99
a.	Breakfast	1	2	99
b.	Morning snack	1	2	99
c.	Lunch	1	2	99
d.	Afternoon snack	1	2	99
e.	Supper	1	2	99
f.	Evening snack	1	2	99

IF "NO" SELECTED IN A-F, SKIP TO NEXT SECTION (Q31)

Q26-Q30: ASK ONLY IF AT LEAST ONE MEAL OR SNACK USUALLY PROVIDED BY CENTER OR HOME

26. Where is most of the food prepared for meals and snacks provided at your child care center or day care home?

- Prepared on site at center or home..... 1
- Prepared off-site by school food service staff..... 2
- Pre-prepared and purchased from a catering company or another child care center..... 3
- (dk/refused)..... 99

27. How are most meals and snacks served at your child care center or day care home?

- Family-style..... 1
- Pre-plated 2
- (dk/refused)..... 99

28. Who is involved in menu planning for meals and snacks at your child care center or day care home? *Please select all that apply.*

- Director and/or Site Supervisor..... 1
- Cook/Chef 2
- Dietitian or Nutritionist..... 3
- Teacher/Provider..... 4
- Other [WRITE IN: _____]..... 5
- (dk/refused)..... 99

29. Now we will look at specific types of food and beverages that are served to children in your home or center, starting with beverages. For each category of beverages, please indicate how frequently each category was served to children ages 0 to 5 at your center or home yesterday.

ROTATE TOP TO BOTTOM, BOTTOM TO TOP

		All or most meals and snacks included this type of beverage 1	Some meals and snacks included this type of beverage 2	One or two meals and snacks included this type of beverage 3	None of the meals or snacks included this type of beverage 4	(dk/ref) 99
a.	Water	1	2	3	4	99
b.	100% fruit juice, including 100% fruit juice bars	1	2	3	4	99
c.	Sugar-sweetened or fruit-flavored drinks or soda	1	2	3	4	99
d.	Milk, including dairy milk, lactose-free milk, soy milk, breast milk, and infant formula	1	2	3	4	99

30. Now, turning to meals and snacks. For each category of food, please indicate how frequently each category was served to children ages 0 to 5 at your center or home yesterday.

RANDOMIZE LIST

		All or most meals and snacks included this type of food 1	Some meals and snacks included this type of food 2	One or two meals and snacks included this type of food 3	None of the meals or snacks included this type of food 4	(dk/ref) 99
a.	Fresh, frozen, canned, and/or dried fruits	1	2	3	4	99
b.	Fresh, frozen and/or canned vegetables	1	2	3	4	99
c.	Beans and peas, such as black beans, kidney beans and lentils	1	2	3	4	99
d.	Minimally processed fish and seafood, such as canned tuna and non-breaded fish filets	1	2	3	4	99
e.	Lean meat and poultry, including beef, pork, lamb, chicken, and turkey	1	2	3	4	99

		All or most meals and snacks included this type of food 1	Some meals and snacks included this type of food 2	One or two meals and snacks included this type of food 3	None of the meals or snacks included this type of food 4	(dk/ref) 99
f.	Nuts and seeds, such as almonds, peanuts and sunflower seeds, and their butters	1	2	3	4	99
g.	Whole grains, such as oatmeal, brown rice, whole wheat bread, whole wheat pasta, and whole grain crackers	1	2	3	4	99
h.	Low-fat or nonfat dairy foods, such as yogurt and cheese	1	2	3	4	99
i.	Sweet snacks, such as ice cream, granola bars, doughnuts, pies, pudding, cookies, cake, and candy	1	2	3	4	99
j.	Fried foods, such as fried chicken, French fries or potato chips	1	2	3	4	99
k.	Processed foods, such as fish sticks, chicken nuggets and hot dogs	1	2	3	4	99

IMPLEMENTING AND OPERATIONALIZING NUTRITION GUIDELINES/RECOMMENDATIONS AND TRAINING/TECHNICAL ASSISTANCE NEEDS

Objectives of this section:

- Identify motivations that encourage key audiences to promote, implement and operationalize nutrition guidelines and recommendations as well as barriers
- Determine trusted resources, information gaps/training needs and preferred communications channels for nutrition guidelines and recommendations

31. Some people find meeting nutritional guidelines challenging. In your work, which of the following present the biggest challenges when trying to ensure that the food prepared and served to children at your center(s) and home(s) meets nutritional guidelines?

[FOR SPONSORING ORGANIZATIONS] When answering this question, please think about the child care centers and/or day care homes that your organization sponsors.

[FOR STATE AGENCY STAFF] When answering this question, please think about the child care centers you work with to administer the CACFP.

Please select up to three answers from the list below.

RANDOMIZE; ANCHOR “OTHER” AND “NONE” AT BOTTOM AND MAKE “NONE” EXCLUSIVE CHOICE

Cost of food.....	1
Time needed to prepare more nutritious meals and snacks...2	
Child preferences.....	3
Parental preferences, including those related to culture.....4	
Lack of knowledge about nutrition guidelines.....	5
Limitations with kitchen space and/or equipment.....	6
Lack of staff knowledge/skills required to prepare nutritious meals and snacks.....	7
Access to nutritious food and beverage options.....	8
Convenience of using processed and pre-prepared foods.....	9
Staff resistance because of personal food preferences.....	10
Other [WRITE IN: _____].....	11
None of the above.....	12
(dk/refused).....	99

32. How interested are you in assistance or training on the following topics?

RANDOMIZE

		Very interested 1	Somewhat interested 2	Not too interested 3	Not at all interested 4	(dk/ref) 99
a.	Reading nutrition labels	1	2	3	4	99
b.	Menu planning	1	2	3	4	99
c.	Nutrition guidelines for children ages 0 to 5	1	2	3	4	99
d.	Best practices to encourage children ages 0 to 5 to eat more nutritious meals and snacks	1	2	3	4	99
e.	Preparing meals and snacks that meet nutritional guidelines	1	2	3	4	99
f.	Cost-effective ways to integrate more nutritious options into meals and snacks	1	2	3	4	99

33. What additional topics would you like assistance or training about to ensure that the food prepared and served to children at your center(s) and home(s) meets nutritional guidelines?

RECORD VERBATIM RESPONSE.

34. How would you prefer to **receive** information about nutrition guidelines for children ages 0 to 5 and information about opportunities for nutrition-related assistance and training?

RANDOMIZE; ANCHOR “OTHER” AND “NONE” AT BOTTOM AND MAKE “NONE” EXCLUSIVE CHOICE

- Email communications, including e-newsletters..... 1
- Postal mail..... 2
- On-site visits..... 3
- Web portal or website..... 4
- Social media, such as Facebook or YouTube..... 5
- Other [WRITE IN:_____]...... 6
- None of the above..... 7
- (dk/refused)..... 99

35. And, how would you prefer to **be trained** on nutrition guidelines for children ages 0 to 5?

**RANDOMIZE; ANCHOR “OTHER” AND “NONE” AT
BOTTOM AND MAKE “NONE” EXCLUSIVE CHOICE**

- Webinars/online trainings..... 1
- Video clips (online, DVD)..... 2
- On-site visits by food program and other professionals.....3
- In-person trainings at a nearby location.....4
- Other [SPECIFY: _____]..... 5
- None of the above..... 6
- (dk/refused)..... 99

ATTITUDES ON PHYSICAL ACTIVITY AND AWARENESS OF GUIDELINES/RECOMMENDATIONS

Objectives of this section:

- Understand attitudes related to physical activity, including attitudes about personal physical activity and about physical activity among 0 to 5 year olds
- Measure awareness of physical activity guidelines for children ages 0 to 5
- Measure awareness of any existing efforts to promote physical activity guidelines and recommendations for children ages 0 to 5
- Self-report of how well current physical activity practices in child care settings align with related guidelines and recommendations

The purpose of the next set of questions is to better understand opportunities children ages 0 to 5 have for physical activity while in a child care setting. As you are answering these questions, think about opportunities for physical activity in typical day at your center(s) or home(s).

Physical activity:

- Is defined as any type of active play or movement and includes both structured play led by an adult caregiver and free play not led by an adult;
- Does not have to happen all at once but can be scattered over the course of a day; and
- Can occur indoors or outdoors.

TELEPHONE: If there is someone at your organization better suited to answer questions about physical activity, can I please speak with them?

ONLINE: If there is someone at your organization better suited to answer questions about physical activity, please have him/her complete the next series of questions.

36. Thinking about time spent on physical activity, please indicate how many minutes you think each of the following age groups of children **should** spend on moderate to vigorous physical activity in a typical day.

Moderate physical activity means walking, playing on outdoor play equipment and activities like playing hopscotch or kickball. Vigorous physical activity is running, skipping, hopping, dancing, or jumping activities. Appropriate physical activity for infants includes supervised tummy time and time outdoors.

		Less than 30 minutes 1	30-60 minutes 2	60-90 minutes 3	90-120 minutes 4	120+ minutes 5	(dk/refused) 99
a.	Ages 0-12 months	1	2	3	4	5	99
b.	Ages 1 and 2	1	2	3	4	5	99
c.	Ages 3, 4 and 5	1	2	3	4	5	99

37. How important are each of the following factors in deciding the amount of time children have for physical activity in a typical day while at your child care center(s) and day care home(s)?

[FOR SPONSORING ORGANIZATIONS] When answering this question, please think about the child care centers and/or day care homes that your organization sponsors.

[FOR STATE AGENCY STAFF] When answering this question, please think about the child care centers you work with to administer the CACFP.

RANDOMIZE

		Very important 1	Somewhat important 2	Not too important 3	Not at all important 4	(dk/refused) 99
a.	Safety concerns	1	2	3	4	99
b.	Child preferences	1	2	3	4	99
c.	Parental preferences	1	2	3	4	99
d.	Space or equipment limitations	1	2	3	4	99
e.	Staff interest in physical activity	1	2	3	4	99
f.	Caregiver to child ratio	1	2	3	4	99
g.	Weather	1	2	3	4	99
h.	Parental desire to focus on academics	1	2	3	4	99
i.	Electronic media use	1	2	3	4	99
j.	Children wearing inappropriate clothing and/or footwear	1	2	3	4	99

CURRENT PHYSICAL ACTIVITY PRACTICES

PROVIDERS ONLY

Objective of this section:

- Record current physical activity practices in child care settings, including the types and frequencies of opportunities for both structured and unstructured play time and physical activity that are available throughout the day

38. Physical activity can be integrated into activities throughout the day. In a typical day, how many different opportunities do children have for moderate to vigorous physical activity while at your center or home?

		None 1	1-2 times per day 2	3-4 times per day 3	5+ times per day 4	(dk/refused) 99
a.	Ages 0-12 months	1	2	3	4	99
b.	Ages 1 and 2	1	2	3	4	99
c.	Ages 3, 4 and 5	1	2	3	4	99

IF “NONE” TO A-C ABOVE, SKIP TO NEXT SECTION (Q41)

39. In a typical day, how much time **in total** do children at your center or home have for moderate to vigorous physical activity while in your care?

		Less than 30 minutes 1	30-60 minutes 2	60-90 minutes 3	90-120 minutes 4	120+ minutes 5	(dk/refused) 99
a.	Ages 0-12 months	1	2	3	4	5	99
b.	Ages 1 and 2	1	2	3	4	5	99
c.	Ages 3, 4 and 5	1	2	3	4	5	99

40. In a typical day how frequently does a caregiver lead physical activity at your center or home?

- All or most of the time..... 1
- Some of the time..... 2
- Once in a while..... 3
- Never..... 4
- (dk/refused)..... 5

**IMPLEMENTING AND OPERATIONALIZING PHYSICAL ACTIVITY
GUIDELINES/RECOMMENDATIONS AND TRAINING/TECHNICAL ASSISTANCE NEEDS**

Objectives of this section:

- Identify motivations that encourage key audiences to promote, implement and operationalize physical activity guidelines and recommendations
- Identify barriers to implementing physical activity guidelines and recommendations
- Determine trusted resources for information related to physical activity guidelines and recommendations
- Identify information gaps in trusted resources and needs for physical activity technical assistance
- Identify preferred communication channels for information about physical activity guidelines and recommendations

41. Some people find it challenging to provide opportunities for physical activity for the children under their care. In your work, which of the following present the biggest challenges when trying to make sure there are enough opportunities for physical activity for children at your center(s) and home(s)?

[FOR SPONSORING ORGANIZATIONS] When answering this question, please think about the child care centers and/or day care homes that your organization sponsors.

[FOR STATE AGENCY STAFF] When answering this question, please think about the child care centers you work with to administer the CACFP.

Please select up to three answers from the list below.

**RANDOMIZE; ANCHOR “OTHER” AND “NONE” AT
BOTTOM AND MAKE “NONE” EXCLUSIVE CHOICE**

- Cost of purchasing large or small equipment..... 1
- Child resistance to increased physical activity..... 2
- Parental pressure to focus on academics or other activities... 3
- Lack of knowledge about ways to engage infants and young children in physical activity..... 4
- Limitations with indoor or outdoor space..... 5
- Number and varied ages of children 6
- Staff resistance to or discomfort with physical activity..... 7
- Lack of time in schedule to increase time spent on physical activity..... 8
- Safety/crime concerns..... 9
- Level of physical coordination among children..... 10
- Other [WRITE IN: _____]..... 11
- None of the above..... 12
- (dk/refused)..... 99

42. How interested are you in assistance and training on the following topics?

RANDOMIZE

		Very interested 1	Somewhat interested 2	Not too interested 3	Not at all interested 4	(dk/ref) 99
a.	Training staff members about how to lead structured play	1	2	3	4	99
b.	Planning physical activity for infants and children of different ages	1	2	3	4	99
c.	Physical activity guidelines and recommendations for children ages 0 to 5	1	2	3	4	99
d.	Best practices to encourage children ages 0 to 5 to be more physically active	1	2	3	4	99
e.	Ideas for both structured and free play in indoor settings	1	2	3	4	99
f.	Engaging children in physical activity	1	2	3	4	99
g.	Cost-effective ways to integrate more physical activity into the day	1	2	3	4	99

43. What additional topics would you like to receive assistance or training on to ensure children have more opportunities for physical activity during the day?

RECORD VERBATIM RESPONSE.

44. How would you prefer to **receive** information about physical activity guidelines and recommendations for children ages 0 to 5 and information about opportunities for physical activity assistance and training?

RANDOMIZE; ANCHOR “OTHER” AND “NONE” AT BOTTOM AND MAKE “NONE” EXCLUSIVE CHOICE

- Email communications, including e-newsletters..... 1
- Postal mail..... 2
- On-site visits..... 3
- Web portal or website..... 4
- Social media, such as Facebook, or YouTube..... 5
- Other [SPECIFY: _____]..... 6
- None of the above..... 7

(dk/refused)..... 99
45. And, how would you prefer to **be trained** on physical activity guidelines and recommendations for children ages 0 to 5?

RANDOMIZE; ANCHOR “OTHER” AND “NONE” AT BOTTOM AND MAKE “NONE” EXCLUSIVE CHOICE

- Webinars/online trainings..... 1
- Video clips (online, DVD) 2
- On-site visits by food program and other professionals.....3
- In-person trainings at a nearby location.....4
- Other [SPECIFY:_____]..... 5
- None of the above..... 6
- (dk/refused)..... 99

ATTITUDES ON ELECTRONIC MEDIA USE AND AWARENESS OF GUIDELINES/RECOMMENDATIONS AND CURRENT ELECTRONIC MEDIA USE PRACTICES

Objectives of this section:

- Understand attitudes related to electronic media use, including attitudes about personal electronic media use and about physical activity among 0 to 5 year olds
- Measure awareness of electronic media use guidelines and recommendations for children ages 0 to 5
- Measure awareness of any existing efforts to promote electronic media use guidelines and recommendations for children ages 0 to 5
- Self-report of how well current electronic media use practices in child care settings align with related guidelines and recommendations
- Record current electronic media use practices, including the amount of time children spend with electronic media (TV, DVD, video games, recreational computer use, cell phones) in a typical day and/or week

The purpose of the next set of questions is to better understand the amount of time children ages 0 to 5 interact with electronic media while in a child care setting. As you are answering these questions, think about the time children spend using electronic media in a typical day. Electronic media includes any TV, video and DVD watching, electronic games, computer use, and use of other electronic devices (like cell phones).

TELEPHONE:

If there is someone at your organization better suited to answer questions about electronic media use, can I please speak with them?

ONLINE:

If there is someone at your organization better suited to answer these questions about electronic media use, please have him/her complete the next series of questions.

46. Thinking about time children spend using electronic media, please indicate how many minutes you think each of the following age groups of children **should** spend using electronic media in a typical day at your center or day care home.

		None 1	Less than 15 minutes	15 to under 30 minutes	30 to 60 minutes 4	More than 1 hour 5	(dk/refused) 99
a.	Under age 2	1	2	3	4	5	99
b.	Ages 2 and older	1	2	3	4	5	99

47. Are any types of electronic media used at your center or day care home? Electronic media includes any TV, video and DVD watching, electronic games, computer use, and use of other electronic devices (like cell phones).

[FOR SPONSORING ORGANIZATIONS] When answering this question, please think about the child care centers and/or day care homes that your organization sponsors.

[FOR STATE AGENCY STAFF] When answering this question, please think about the child care centers you work with to administer the CACFP.

Yes..... 1
 No..... 2
 (dk/refused)..... 99

48. How important are each of the following factors in deciding the amount of time children spend using electronic media in a typical day while at your child care center(s) and day care home(s)?

[FOR SPONSORING ORGANIZATIONS] When answering this question, please think about the child care centers and/or day care homes that your organization sponsors.

[FOR STATE AGENCY STAFF] When answering this question, please think about the child care centers you work with to administer the CACFP.

		Very important 1	Somewhat important 2	Not too important 3	Not at all important 4	(dk/refused) 99
a.	Convenience	1	2	3	4	99
b.	Time spent on other activities	1	2	3	4	99
c.	Child preferences	1	2	3	4	99
d.	Parental preferences	1	2	3	4	99
e.	Staff breaks or needing to leave children without direct supervision	1	2	3	4	99
f.	Lack of staff knowledge about the need to limit electronic media use and/or more age-appropriate activities	1	2	3	4	99
g.	Caregiver to child ratio	1	2	3	4	99
h.	Weather	1	2	3	4	99
i.	Space restrictions both inside and outside	1	2	3	4	99

49. [IF Q47=YES AND PROVIDERS]In a typical day, how much time **in total** do children in your care spend using electronic media?

		None 1	Less than 15 minutes	15 to under 30 minutes	30 to 60 minutes 4	More than 1 hour 5	(dk/refused) 99
a.	Under age 2	1	2	3	4	5	99
b.	Ages 2 and older	1	2	3	4	5	99

**IMPLEMENTING AND OPERATIONALIZING ELECTRONIC MEDIA USE
GUIDELINES/RECOMMENDATIONS AND TRAINING/TECHNICAL ASSISTANCE NEEDS**

Objectives of this section:

- Identify motivations that encourage key audiences to promote, implement and operationalize electronic media use guidelines and recommendations
- Identify barriers to implementing electronic media use guidelines and recommendations
- Determine trusted resources for information related to electronic media use guidelines and recommendations
- Identify information gaps in trusted resources and needs for electronic media use technical assistance
- Identify preferred communication channels for information about electronic media use guidelines and recommendations

50. Some people find it challenging to control the amount of electronic media used in child care settings. In your work, which of the following present the biggest challenges when trying to decide the amount of electronic media to use for children at your center(s) and home(s)?

[FOR SPONSORING ORGANIZATIONS] When answering this question, please think about the child care centers and/or day care homes that your organization sponsors.

[FOR STATE AGENCY STAFF] When answering this question, please think about the child care centers you work with to administer the CACFP.

Please select up to three answers from the list below.

**RANDOMIZE; ANCHOR “OTHER” AND “NONE” AT
BOTTOM AND MAKE “NONE” EXCLUSIVE CHOICE**

- Perceptions that electronic media use is educational..... 1
- Child resistance to reduced/limited electronic media use.....2
- Parental pressure to integrate electronic media.....3
- Staff need to leave children unsupervised/engaged.....4
- Education level of staff 5
- Staff resistance to reduced/limited electronic media use.....6
- Lack of staff training about age-appropriate electronic media use guidelines and recommendations..... 7
- Challenges with finding activities for mixed age groups of children..... 8
- Lack of clear definition and guidelines for electronic media use..... 9
- Other [SPECIFY: _____]..... 10
- None of the above..... 11
- (dk/refused)..... 99

51. How interested are you in assistance and training on the following topics?

RANDOMIZE

		Very interested 1	Somewhat interested 2	A little interested 3	Not at all interested 4	(dk/ref) 99
a.	Planning activities that do not involve electronic media	1	2	3	4	99
b.	Electronic media use guidelines and recommendations for children ages 0 to 5	1	2	3	4	99
c.	Best practices to encourage children ages 0 to 5 to choose alternatives to electronic media	1	2	3	4	99

52. What additional topics would you like to receive assistance or training on related to electronic media use?

RECORD VERBATIM RESPONSE.

53. How would you prefer to **receive** information about electronic media use guidelines and recommendations for children ages 0 to 5 and information about opportunities for electronic media use training and assistance?

RANDOMIZE; ANCHOR “OTHER” AND “NONE” AT BOTTOM AND MAKE “NONE” EXCLUSIVE CHOICE

- Email communications, including e-newsletters..... 1
- Postal mail..... 2
- On-site visits..... 3
- Web portal or website..... 4
- Social media, such as Facebook, or YouTube..... 5
- Other [SPECIFY: _____]..... 6
- None of the above..... 7
- (dk/refused)..... 99

54. And, how would you prefer to **be trained** on electronic media use guidelines and recommendations for children ages 0 to 5?

**RANDOMIZE; ANCHOR “OTHER” AND “NONE” AT
BOTTOM AND MAKE “NONE” EXCLUSIVE CHOICE**

Webinars/online trainings.....	1
Video clips (online, DVD).....	2
On-site visits by food program and other professionals.....	3
In-person trainings at a nearby location.....	4
Other [SPECIFY:_____].....	5
None of the above.....	6
(dk/refused).....	99

DEMOGRAPHICS AND FIRMOGRAPHICS

Objectives of this section:

- Collect demographic and firmographics information about survey respondents to ensure a diverse mix of respondents
- Gauge interest in participating in a follow-up telephone focus group

We've almost reached the end of our survey. I have just a few final questions to wrap up.

55. **[STATE AGENCY STAFF AND SPONSORING ORGANIZATIONS ONLY]** How often do you communicate with and provide information to your child care centers and/or day care homes **[FOR STATE AGENCY STAFF ONLY]** as well as sponsoring organizations in your state about each of the following?

		At least weekly 1	At least monthly 2	Every few months 3	Yearly at most 4	Never 5	(dk/ref) 99
a.	Information to promote healthy habits related to nutrition	1	2	3	4	5	99
b.	Information to promote healthy habits related to physical activity	1	2	3	4	5	99
c.	Information to promote healthy habits related to electronic media use	1	2	3	4	5	99

56. **[STATE AGENCY STAFF AND SPONSORING ORGANIZATIONS ONLY]** How do you communicate with and provide information to your child care centers and/or day care homes **[FOR STATE AGENCY STAFF ONLY]** as well as sponsoring organizations in your state?

RANDOMIZE; ANCHOR "OTHER" AND "NONE" AT BOTTOM AND MAKE "NONE" EXCLUSIVE CHOICE

- Mail..... 1
- Email, including e-newsletters 2
- On-site visits..... 3
- Conferences and events..... 4
- Webinars..... 5
- Conference calls/meeting..... 6
- Listservs..... 7
- Other [SPECIFY: _____]..... 8
- None of the above..... 9
- (dk/refused)..... 99

57. What is the last grade of school you have completed? If you are currently in college, please indicate so. [DO NOT READ LIST]

- Less than high school..... 1
- High school or GED..... 2
- Some university/college or vocational school..... 3
- College..... 4
- Postgraduate degree (Masters, Ph.D., professional degree)... 5
- (dk/refused)..... 9

58. Are you of Hispanic or Latino background – such as Mexican, Puerto Rican, Cuban, or another Latin American background?

- Hispanic or Latino..... 1
- Not Hispanic or Latino..... 2
- (dk/refused)..... 99

59. [IF NOT HISPANIC OR LATINO (Q58=2 OR 99)] Which of the following categories best describes your race or ethnicity?

- American Indian or Alaska Native..... 1
- Asian..... 2
- Black or African American..... 3
- Native Hawaiian or Other Pacific Islander..... 4
- White..... 5
- (dk/refused)..... 99

60. [PROVIDERS AND SPONSORING ORGANIZATIONS ONLY] How would you describe the area in which your center(s) and home(s) is located – urban, suburban, small town, rural, or tribal community?

- Urban..... 1
- Suburban..... 2
- Small town..... 3
- Rural..... 4
- Tribal community..... 5
- (dk/refused)..... 99

61. [PROVIDERS ONLY] In a typical day, do you have regular access to the Internet at your center(s) and home(s)?

- Yes..... 1
- No..... 2
- (dk/refused)..... 99

62. Thank you for sharing your time and thoughts with us today. Is there anything else you would like to add? **RECORD VERBATIM RESPONSE.**

63. One more thing. In the future, if we would like to include you in follow-up research on this topic, would you be willing to participate?

- Yes please..... **RECORD CONTACT INFO**
- No thank you..... 2

That's terrific. Thank you again for your participation. Goodbye.

RECORD FROM SAMPLE:

Phone: (____) _____

Zip: _____

Media market: ____

County: ____

State/District ____