



July 15, 2022

Director Paul Reed
Deputy Assistant Secretary for Health
Director, Office of Disease Prevention and Health Promotion
Office of the Assistant Secretary for Health
U.S. Department of Health and Human Services
1101 Wootton Parkway, Suite 420
Rockville, MD 20852

Dear Director Reed,

Child Care Aware® of America (CCAoA) is pleased that for the first time in over 50 years, the Administration will host a White House Conference on Hunger, Nutrition and Health this September. We appreciate the opportunity to share input to inform Conference and agenda planning and urge the Administration to include solutions that improve food access and affordability within the child care community.

Child Care Aware® of America is a national membership organization that works with state and local Child Care Resource and Referral (CCR&R) agencies and other community partners to ensure that all families have access to quality, affordable child care. CCAoA leads innovative projects that increase the quality and availability of child care, and advance the early childhood education profession. CCAoA also conducts research, and advocates for child care policies that foster equity and improve the lives of children and families. As the eyes and ears of the child care community, CCR&Rs see firsthand the effect hunger has on child care providers, children, and their families.

CCAoA has the following recommendations for Administration efforts to tackle hunger and nutrition in the child care and early learning community:

Strengthen CACFP to End Hunger for Children and Families

Child care programs have a considerable influence on the nutrition and health of young children and in many cases, children receive most of their daily meals and snacks in child care settings through the Child and Adult Care Food Program (CACFP).¹ This important federal program improves the nutrition and health of children, supports family budgets, and strengthens the quality and financial stability of child care programs. Data from the U.S. Department of Agriculture shows that in 2020, nearly 600 thousand children in family child care programs and nearly 3.5 million children in child care centers across the United States participated in CACFP.²

Despite its many benefits to families and providers alike, barriers prevent many programs from enrolling and eligible children from participating in CACFP. CCR&Rs have reflected that administrative burdens for providers to enroll and comply with the program requirements and for sponsor organizations to manage the program are among the biggest barriers to participation. To encourage program participation, efforts must be made at the federal level to streamline requirements and reduce duplicative paperwork for providers. Allowing sponsor agencies to minimize travel and do site-visits virtually could also alleviate administrative burden. States should maintain regular data sharing and analysis between lead agencies

representing the nutrition programs and child care and early learning to monitor CACFP participation and inform targeted outreach strategies.

Inadequate reimbursements are another reason why programs do not participate in CACFP, especially among family child care programs. Over the last twenty years, fewer children are receiving meals through CACFP in family child care settings compared to center-based programs.³ This is because for decades, two separate tiered reimbursement rates have been established for family child care programs depending on the household income of the families served. Family child care providers who are eligible for the lower reimbursement rate are often less likely to participate. More must be done— at the local, state, and federal levels— to reduce these barriers for programs and increase participation to reach the children who are currently eligible for CACFP but attend non-participating programs.

The recent passage of the Keep Kids Fed Act is one step in the right direction. It increases CACFP reimbursements and extends the area eligibility test waiver, allowing all family child care programs to qualify for the highest reimbursement rate through June 2023.⁴ These provisions should be adopted permanently to strengthen CACFP. Increasing reimbursement rates with federal and supplemental state funding for all child care programs would incentivize new programs to enroll and help participating programs manage rising food costs and supply chain issues related to the pandemic.

Eliminate Food and Economic Insecurity of Child Care Providers

Many child care providers, who are primarily women and often women of color⁵, are at risk for hunger and food insecurity themselves due to the long-standing under-compensation of the child care workforce.⁶ Of the nearly one million child care workers in the United States, one out of three experienced food insecurity in 2020.⁷ Research from the Center for the Study of Child Care Employment shows that between 2014 and 2016 more than half (53%) of child care workers— compared to 21% of the U.S. workforce— were part of families enrolled in at least one of four forms of federal assistance, such as the Supplemental Nutrition Assistance Program (SNAP) or the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC).⁸

Strengthening and expanding SNAP and WIC will improve the food and economic security of participants, including families and child care providers. However, as we consider strategies to end hunger nationally, we must also address the low earnings of child care providers and why, despite the long arduous hours caring for children, many educators still qualify for assistance. CCAoA strongly believes that we must simultaneously prioritize policies that advance an effective, diverse, and well-compensated early childhood education workforce. Without additional federal funding for child care, fewer programs will remain open to ensure children are getting the nutritious meals they need to develop and thrive.

CCR&Rs are Essential Partners to Ending Hunger

CCR&Rs are community-centered organizations and have strong connections with the local child care community and relevant stakeholders. Given their unique perspective as trusted community partners, CCR&Rs play a vital role in ending hunger within their communities.⁹ CCR&Rs should be included as a partner in the nation's plan to address hunger, nutrition, and health.

CCR&Rs are equipped to help increase CACFP participation among child care providers and already do in many states. They provide technical assistance to help with paperwork and enroll programs in CACFP. CCR&Rs partner with CACFP-sponsor organizations to make connections between providers and nutrition coaches, who share strategies to promote healthy food financing initiatives. Programs such as Child Care Aware® of North Dakota help providers identify local food sponsors and raise awareness of the program's benefits among non-participating providers.¹⁰ The Family Conservancy, a CCR&R serving Kansas and Missouri, serves as the sponsoring agency for CACFP in seven counties.¹¹ They provide nutrition and meal planning information to providers and make connections with a nutrition specialist,

who provides on-site training and support throughout the year. CCR&Rs that are co-located within a larger nonprofit organization that provides additional wrap-around services for families, like Child Care Aware® of New Hampshire, can also match eligible families with other benefits, like SNAP and WIC. These models should be invested in and expanded to better serve our communities.

The nutrition programs such as CACFP, WIC, and SNAP intersect with child care and the daily lives of early learning educators and families. Therefore, it is imperative that child care is represented and that families, child care providers, and CCR&Rs be included as part of the national plan to address hunger, nutrition, and health. More must be done at the federal and state levels to ensure these critical federal nutrition programs have even greater reach in lifting – and keeping— people out of food and economic insecurity.

Sincerely,



Lynette M. Fraga, Ph.D.
Chief Executive Officer

¹ Child Care Aware® of America (n.d.). Nutrition. <https://www.childcareaware.org/our-issues/health-nutrition/health-resources-and-links/nutrition/>

² U.S. Department of Agriculture Economic Research Service. (2022). Child and Adult Food Care Program. <https://www.ers.usda.gov/topics/food-nutrition-assistance/child-nutrition-programs/child-and-adult-care-food-program/>

³Ibid.

⁴ S.2089. Keep Kids Fed Act of 2022

⁵ Child Care Aware® of America (n.d.). A Compass to Guide the Way: Child Care Aware® of America’s 2020-2022 Policy Agenda. <https://info.childcareaware.org/2020-2022-public-policy-agenda>

⁶ Peeks, C. (2021). Child Care Aware® of America Supports the Raise the Wage Act. Child Care Aware® of America. <https://info.childcareaware.org/blog/child-care-aware-of-america-supports-the-raise-the-wage-act>

⁷ Dynia, J. M., Koury, A. J., Bates, R. A., & Page McGinnis, C. (2021). *Food insecurity in a nationally representative sample of child care workers*. The Center for Early Childhood Innovation at South Side Early Learning. <https://www.southsidelearning.org/whitepapers/early-childhood-food-insecurity>

⁸ Center for the Study of Child Care Employment, University of California, Berkeley. (2018). Early Childhood Workforce Index. <https://cscce.berkeley.edu/wp-content/uploads/2022/04/3-Earnings-Economic-Security.pdf>

⁹ Child Care Aware® of America (n.d.). Mapping CACFP Participation. <https://www.childcareaware.org/mapping-cacfp-participation/>

¹⁰ Child Care Aware® of North Dakota. (n.d.). Best Practices for Nutrition. <https://ndchildcare.org/providers/nutrition.html>

¹¹ The Family Conservatory. (n.d.). Child Care Food Program. <https://www.thefamilyconservancy.org/child-care-food-program/>