

## USDA Child and Adult Care Food Program (CACFP) Family Day Care Home Participation Study (Summary)

### Background

The U.S. Department of Agriculture's (USDA) Food and Nutrition Service (FNS) administers 16 nutrition assistance programs with the mission to increase food security and reduce hunger—in partnership with cooperating organizations—by providing children and low-income people access to food, a healthy diet, and nutrition education in a manner that supports American agriculture and inspires public confidence. The Child and Adult Care Food Program (CACFP) is administered by FNS at the Federal level and reimbursed through State Child Nutrition Agencies. Participating child care providers—child care centers (including Head Start Programs), family day care homes (FDCHs), before- and afterschool programs, and emergency shelters serving children—can receive reimbursement to help offset the cost of nutritious meals and snacks served to eligible children in their care.

This study focuses on FDCHs participating in CACFP. These providers serve a critical need within the child care system, frequently offering longer hours of care (often at a lower cost) than other types of providers to children in their own communities and neighborhoods. Over the past two decades, the number of FDCHs enrolled in CACFP has decreased by almost half and prior research has not identified clear reasons for the decline. This reduction mirrors a decline in the overall number of FDCHs, so it is possible the decline in CACFP-enrolled FDCHs results primarily from this more general decline. It is also possible that providers face obstacles to participating in CACFP or that retention of FDCHs in CACFP could be increased through additional support. Understanding the reasons for the decline in FDCHs participating in CACFP could help improve vulnerable children and families' access to childcare with affordable, nutritious meals.

This study is the first national study to ask current providers why they participate in CACFP and former providers why they left. The study spans 2019–2023, which coincides with the COVID-19 public health emergency, so it provides a unique look at FDCHs during that time. The study: (1) identifies challenges and barriers FDCH providers participating in CACFP face; and (2) shares recommendations from current and former FDCH providers to address these challenges. In addition to differences by CACFP enrollment status, the study also examines differences by urbanicity (urban/rural) and program size (large/small) among the former and current CACFP providers.

### Methods

Data were collected through a survey of currently enrolled and previously enrolled CACFP FDCH providers. For this study *current providers* were FDCH providers who were enrolled in CACFP in April 2023, while *former providers* were those who were participating in CACFP as FDCH providers in 2019 but were not enrolled in CACFP as FDCH providers in 2023.

### Key Findings

- Of Family Day Care Home (FDCH) providers who had left CACFP since 2019, over 70 percent were no longer operating FDCHs in 2023. The survey suggests that declines in CACFP participation may result from declines in FDCH providers.
- Current and former providers alike viewed CACFP positively, finding the program easy to enroll in and praising it for helping provide food to more children.
- Two-thirds or more of current and former providers cited CACFP's training and technical assistance as a benefit of participation.
- Seventy percent of former providers and 62 percent of current providers reported one or more challenges with CACFP. The most frequently reported challenge for both groups was that reimbursements did not cover food costs.
- Challenges related to paperwork and administrative tasks were more common among former participants.

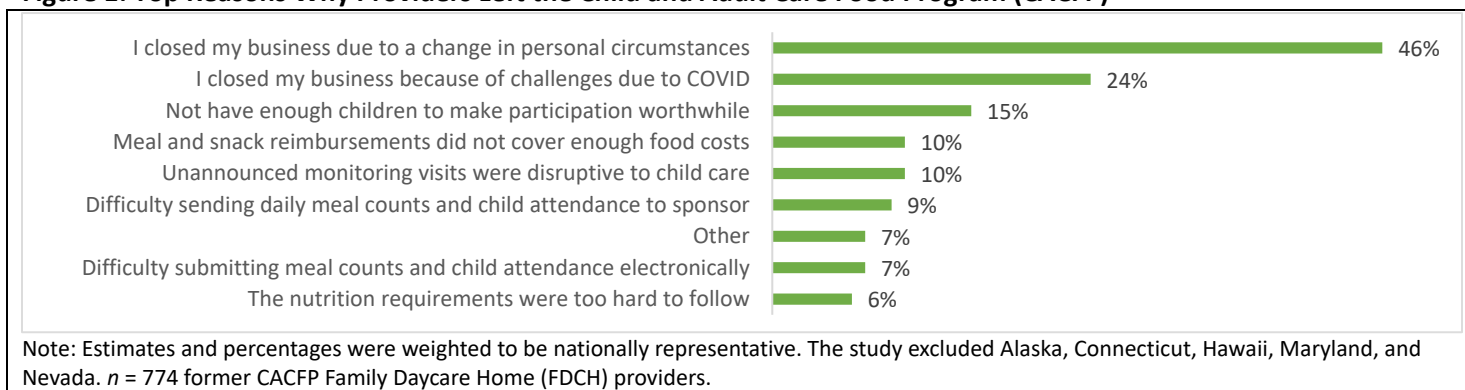
Former providers could still be operating as an FDCH but no longer be enrolled in CACFP, have re-enrolled in CACFP as a child care center, or have closed their FDCH completely.

Data collection occurred in early 2023. A nationally representative sample of 2,393 current providers and 2,871 former providers were invited to complete the Family Day Care Home (FDCH) Provider Experience Survey via the web and received a \$5 pre-incentive. All information was sent to providers in both English and Spanish, and providers could choose to complete the survey in English or Spanish. Providers who completed the survey received a \$40 post-incentive. Response rates for current and former providers were 45.5 percent and 39.5 percent, respectively. A total of 2,170 providers completed the survey. Due to substantial churn, some providers were sampled as current providers but had left the program by the time of survey administration and vice versa. For analytic purposes, providers were reclassified based on their status at survey completion. Weights were applied to reflect differential probabilities of selection and to compensate for survey non-response.

## Findings

**Of those FDCH providers who had left CACFP since 2019, most were no longer operating FDCHs. Decisions to close their FDCH were commonly attributed to circumstances outside CACFP's control.** Less than a third of former CACFP FDCH providers were still operating FDCHs. Many former providers reported they left CACFP because they closed their business as a result of personal circumstances or the challenges of operating during the COVID-19 public health emergency (PHE) (Figure 1).

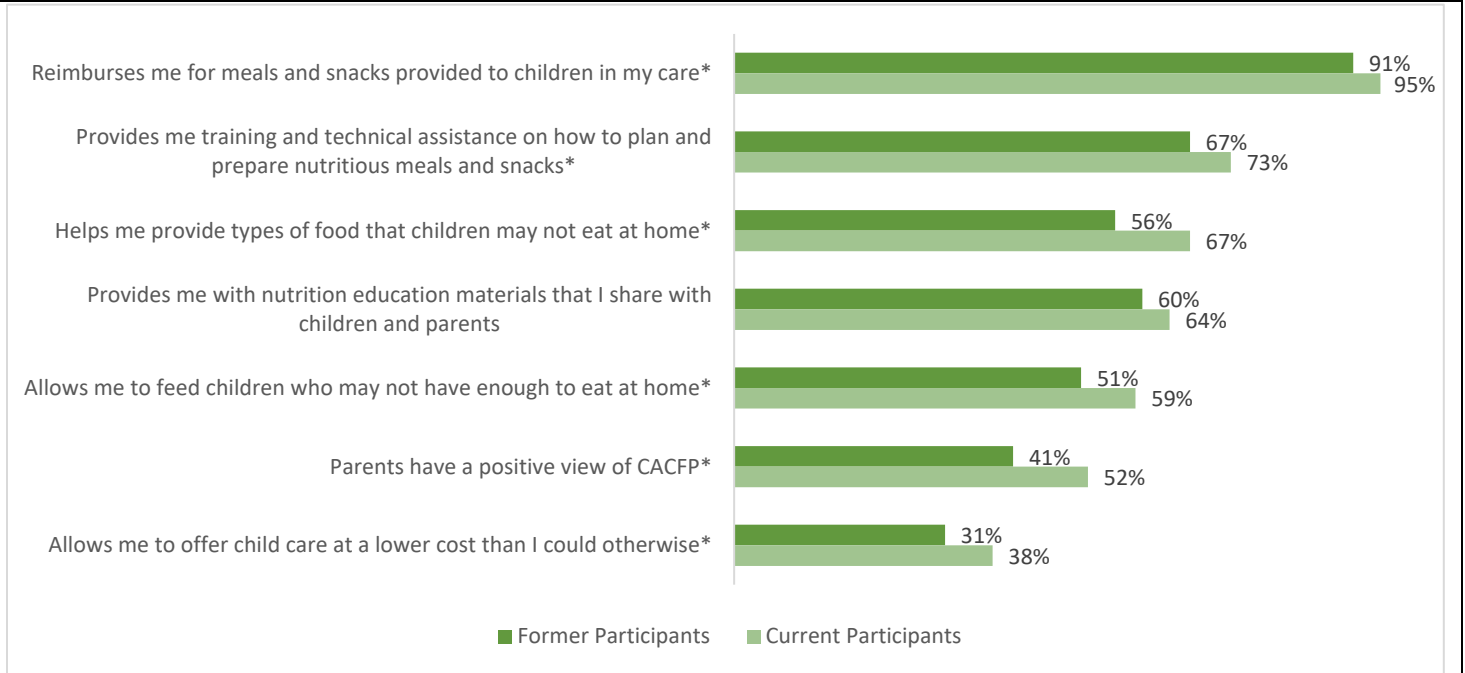
**Figure 1: Top Reasons Why Providers Left the Child and Adult Care Food Program (CACFP)**



**The study also confirms the continued decline in CACFP FDCH providers during the COVID-19 PHE.** Among FDCHs that left CACFP during the early months of the pandemic, the most common reason for leaving CACFP (cited by 6-in-10 former providers) was that they closed their business due to COVID-related challenges. The study did not examine the independent effects on FDCH participation of temporary changes to CACFP that increased the meal and snack reimbursement rate for many providers and allowed additional flexibilities between 2021 and 2023.

**Current and former providers largely had positive perceptions of CACFP, finding the program easy to enroll in and praising it for helping provide food to more children (Figure 2).** Over a quarter of current and former providers said they had not experienced any issues while participating in CACFP.

**Figure 2: Top Reported Benefits of Child and Adult Care Food Program (CACFP) Participation, by CACFP Enrollment Status**



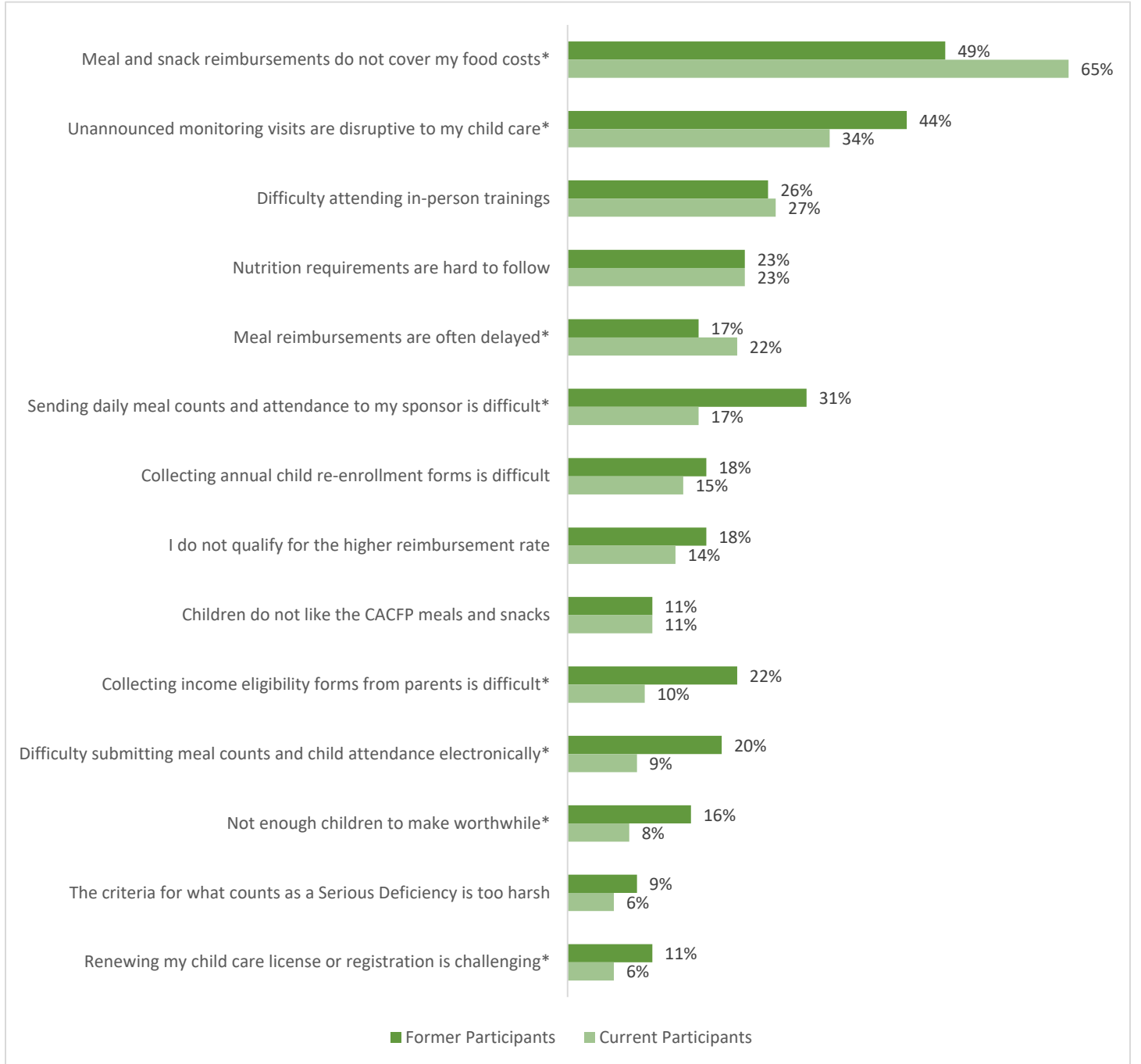
Note: Estimates and percentages were weighted to be nationally representative. The study excluded Alaska, Connecticut, Hawaii, Maryland, and Nevada. Providers could choose all applicable options; percentages sum to more than 100. *n* = 2,169 providers, \*Difference is statistically significant at the .05 level.

**Seventy percent of former providers did experience challenges with CACFP, as did 62 percent of current providers.** Nearly two-thirds of current providers and nearly half of former providers who reported experiencing challenges said that meal and snack reimbursements did not cover their food costs, which aligns with the program’s intention to help offset food costs, not necessarily fully cover them (**Figure 3**). More than one-third of current participants and over 40 percent of former participants said that unannounced monitoring visits were disruptive to child care. Former providers were also more likely than current providers to report challenges related to CACFP administrative or paperwork requirements, including meal counting and claiming. They were also more likely to report low attendance as a barrier to participation.

**Providers’ recommendations for policy changes and program supports closely track these challenges.** Over 80 percent of current and former FDCH providers recommended increasing the meal and snack reimbursement rate.<sup>1</sup> About a third of current and former providers recommended replacing some in-person monitoring visits with remote monitoring visits. Over a third of current and former providers endorsed the program offering remote trainings.

<sup>1</sup> CACFP reimbursement rates are set by Congress in statute and are adjusted each year for inflation.

**Figure 3: Top Challenges Family Daycare Home (FDCH) Providers Experienced While Participating in Child and Adult Care Food Program (CACFP) Among Those Who Experienced at Least One Challenge, by CACFP Enrollment Status**



Note: Estimates and percentages were weighted to be nationally representative. The study excluded Alaska, Connecticut, Hawaii, Maryland, and Nevada. The table excludes 727 providers who reported not experiencing any issues while participating in CACFP. Providers could choose all applicable options; percentages sum to more than 100. n = 1,443 providers, \*Difference is statistically significant at the .05 level.

**For More Information:**

Gearing, M., Gola, A., Manglitz, C., et al. (2024). Family Daycare Home Participation Study. Prepared by Westat, Contract No. GS-00F-009DA/12319821F0061. Alexandria, VA: U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, Project Officer: Catherine Doren Guerrero. Available online at: [www.fns.usda.gov/research-and-analysis](http://www.fns.usda.gov/research-and-analysis).