



Learning Session 3: Serving Meals Family-Style & Supporting Breastfeeding

Early Childhood Health Promotion
and Obesity Prevention

National Early Care and Education
Learning Collaboratives (ECELC)
Project

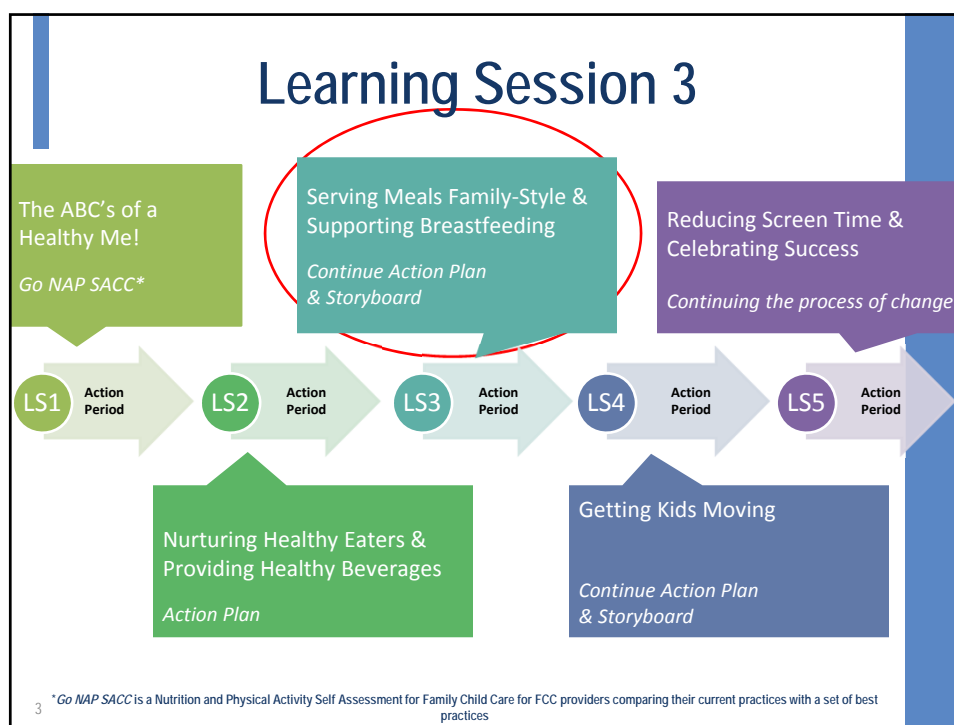
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Learning Session 3 Objectives

At the end of the Learning Session, providers will be able to:

1. Describe best practices for family-style dining and breastfeeding support and identify change opportunities within their program;
2. Continue the Action Plan and develop action steps for the provider and environment; and
3. Continue to document and communicate the process of healthy changes on their storyboard.



LS2 Action Period



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Part A: Family-Style Dining



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Family-Style Dining



Family-Style Dining with 2 Year Olds

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What is Family-Style Dining?

- A meal service approach that helps providers support children to have developmentally appropriate mealtime experiences and helps to prevent childhood obesity
- Involves children and adults sitting together to enjoy foods and beverages in a manner that supports children's independence
- Foods and beverages are placed on the table where the children and adults sit together to share the meal
- Children are encouraged to serve themselves independently with adult help when needed.



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Why is Family-Style Dining Important?

- Enriches a child's learning environment
- Gives children the opportunity to take an active role in their feeding
- Creates a unique opportunity for us to model healthy food choices and table manners

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Characteristics of Family-Style Dining

- Children help set the table
- Child-size tables, utensils, and serving dishes are utilized
- Food is passed in small containers
- Beverages are served in small pitchers
- Children serve themselves
- Providers sit at the table with children and role model by eating the same foods
- Children engage in conversation

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Family-Style Dining Supports Child Development

- Small, large, oral motor development
 - Passing out plates, tipping a pitcher of milk, and lifting a serving spoon of food use a variety of motor skills
 - Learning to use serving utensils, such as tongs, allows children to develop fine motor skills
 - Children need to balance to stay in their chairs, which strengthens core muscles
 - Oral motor skills are developed when children learn to drink from a glass

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Family-Style Dining Supports Child Development

- Social Development
 - Provides teaching opportunities for sharing, turn taking, and table manners
 - Children learn empathy and how to recognize and respond to others' needs
 - As children talk with their peers and adults at meals, they practice social etiquette behaviors, such as saying “please” and “thank you”, and learn the art of conversation and how important these are for a pleasant mealtime experience
 - Adult role modeling of both manners and conversation skills is fundamental to family-style dining

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Family-Style Dining Supports Child Development

- Language Development
 - Mealtime conversations develops children's language and can create a language-rich environment
 - Using words and sentences describing the flavor, texture, color, or temperature of a food enriches children's vocabulary
 - Talk about topics that interest the children in your program!

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Family-Style Dining Supports Child Development

- Emotional Development
 - Can boost a child's self confidence through trying new things and mastering new skills
 - Getting food from the serving bowl to their plate is a reason to celebrate
 - "I did it!" are important words for children to say
 - Waiting their turn for food to be passed around helps children practice self-regulation
 - Children learn independence when they help to set the table, serve themselves, and clear the table

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Getting Children Ready for Family-Style Dining

- To be successful with family-style meal service, it's important that children:
 - Learn and develop mealtime skills
 - Practice self-feeding



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Child Size Equipment

- **Developmentally appropriate equipment allows children to:**
 - Develop and enhance fine motor skills to grasp, hold, and manipulate small objects and tools
 - Improve hand-eye coordination skills



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Getting Yourself Ready for Family-Style Dining

- It's important that you are prepared to:
 - Encourage self-feeding practices
 - Arrange seating to support skills
 - Assess children's mealtime skills
 - Integrate Meal Service Practice into other activities



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Integrating Meal Service into Daily Activities

- Daily transitions and routines
- Dramatic play
- Small motor experiences
- Sand and water play
- Literacy and music/movement activities



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Create a Mealtime Environment that Promotes Learning and Exploration

Phrases that Hinder

- “You have to eat that”
- “Do not leave the table until everything is finished”
- “Carli, look at Maria. She ate all of her bananas and you did not.”
- “You may not have seconds, we don’t have enough to give them to everyone.”
- “I’m going to tell your mom you weren’t a good eater today at school.”

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Phrases that Help

- “These radishes are crunchy! What other vegetable is crunchy?”
- “This is a kiwi. It is sweet. What fruits do you like that are sweet?”
- “What should you do when your stomach is full from eating?”
- “Thank you for trying a new vegetable. It is ok that you did not like it”



Getting Your Home Ready for Family-Style Dining

- Procure appropriate furniture and equipment
- Implement gradually

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**Are you ready for
family-style dining?**

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Putting It All Together



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Mealtime Routine Sample Handout



Mealtime Routine Sample

1. Call for helpers - children with daily jobs.
2. Transition activity - song.
3. Bathroom and hand wash break.
4. Children sit at the table as food is placed.
5. Teachers sit and eat with children.
6. Children and teachers dispose of plates.
7. Transition - children choose quiet books or puzzles as others finish eating.

Family Style Mealtime Checklist

Mealtime Routine

- ☐ Teachers' routine allows for food to be prepared and ready at the designated mealtime.

Appropriate size bowls and serving utensils

- ☐ Food is served in bowls of appropriate size that children can lift and pass.
- ☐ Serving bowls are made of materials that do not conduct heat and are not too hot to pass.
- ☐ Small size scoops, one-piece plastic tongs, and short-handled hard plastic serving spoons are used.

Family Style Practice Activities

- Serving utensils practice (small group activity or set up a learning center in classroom)**
 - ☐ Practice with scoops, tongs, and short-handled hard plastic serving spoons.

Pouring practice (set up water table or learning center in classroom)

- ☐ Pretend practice.
- ☐ Practice with dry liquid such as sand or beans.
- ☐ Practice with water and pouring into child-size cups.

Cleanup practice (dramatic play or a small group activity)

- ☐ Pretend cleanup with sponge or cloth.
- ☐ Pretend floor cleanup with mini-map or cloth.
- ☐ Practice cleanup of table and floor with water.

Mealtime expectations to review with children

- ☐ We eat together at the table.
- ☐ We all come to the table at the same time.
- ☐ We wait until everyone is ready before we begin.
- ☐ We serve ourselves and pass food to each other.
- ☐ We use inside voices.

Passing food practices for children

- ☐ Pass with both hands.
- ☐ Keep food over the table when passing it.
- ☐ Hold the bowl by the sides (to keep fingers out food).

National Food Service Management Institute. (2011). Happy mealtimes for healthy kids. University, MN: Author.



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Physical Activity Break



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Part B: Breastfeeding Support



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Call to Action

*“One of the most **highly effective preventative measures** a mother can take to protect the health of her infant and herself **is to breastfeed**. The decision to breastfeed is a personal one, and **a mother should not be made to feel guilty if she cannot, or chooses not to breastfeed**. **The success rate among mothers who choose to breastfeed can be greatly improved through active support...**”*

Action: Ensure that all early care and education providers accommodate the needs of breastfeeding mothers and infants.

U.S. Department of Health and Human Services. Executive Summary: The Surgeon General's Call to Action to Support Breastfeeding. Washington, DC: U.S. Department of Health and Human Services, Office of the Surgeon General; 2011.

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Why is breastfeeding important?

- **Mother's milk is best for babies.**
- Mother's milk provides her baby exactly what is needed to grow and thrive
- Breastmilk changes over time to keep up with a baby's changing nutrition and disease protection needs
- To date, over 30 components to breast milk have been identified, protecting babies from infections and illness.
- Breastfed babies benefit from "borrowing" their mother's immune system at exactly the time when they are most susceptible to illnesses due to the immaturity of their own immune system

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Breastfed Babies are Healthier

- It's no surprise then that breastfed babies are healthier
 - Less likely to grow up to be obese or suffer from conditions like diabetes and asthma
 - Get sick less often with things like diarrhea and ear infections. When they do get sick, it is usually not severe.
 - Breastfeeding helps protect babies against Sudden Infant Death Syndrome (SIDS).
- The physical contact involved in breastfeeding is also important to newborns. It can help them feel more secure, warm and comforted.

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Why Do Moms Need Your Support?

- 81% of moms desire to breastfeed
- 79% of moms start breastfeeding
- 60% of moms do not meet their breastfeeding goals (frequency and/or duration)
- Returning to work is the primary reason for ending breastfeeding
- Shorter duration of breastfeeding if baby is in an early care and education environment

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Breastfeeding Benefits Women

- **Health Benefits**
 - Type 2 diabetes
 - Breast and ovarian cancer
 - Postpartum depression
- **Increased weight loss**
- **Attachment**
- **Convenience**
- **Savings**



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Breast Milk Can Save You Money

- **Breast milk is part of the CACFP meal pattern**
 - It is reimbursable for infants if fed by the mother or care provider
 - It's free! No equipment to purchase
 - Cost effective for families as well
 - For children over 12 months, breast milk may be substituted for cow's milk
 - Doctor's note may be required
- **Human milk is food**
 - You do not need to store human milk in a separate refrigerator
 - You do not need to wear gloves to give a bottle of human milk or formula
 - Contact with human milk is not hazardous exposure

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Breastfeeding Report Card

	National	Healthy People 2020 Targets
Ever breastfed	81.1%	81.9%
Exclusively BF at 3 months	44.4%	46.2%
Exclusively BF at 6 months	22.3%	25.5%
Breastfeeding at 6 months	51.8%	60.6%
Breastfeeding at 1 year	30.7%	34.1%

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Breastfeeding Recommendations

- **The American Academy of Pediatrics recommends:**
 - Exclusive breastfeeding for about 6 months, followed by continued breastfeeding as complementary foods are introduced
 - Continuation of breastfeeding for at least 1 year
 - Continuation of breastfeeding beyond 1 year for as long as mutually desired by mother and infant
- Exclusive breastfeeding means an infant is given no other substances for food (e.g. no infant formula or water)



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Is Your FCC Program Breastfeeding Friendly?

1. My child care home is a place where breastfeeding families are welcome. Yes ____ No ____
 - I encourage mothers to visit and breastfeed during the day.
 - When meeting with new families, I include information about how I support breastfeeding.
 - There is a sign/poster visible to mothers so they know breastfed babies are welcome.
2. My child care home helps mothers to continue breastfeeding their babies when they return to work or school. Yes ____ No ____
 - I have a comfortable place available for mothers to nurse their infants before or after work.
 - I ensure that nursing mothers employed by me have reasonable breaks each day to express milk and reasonable efforts are made to provide a room or other location (not a bathroom) to express milk in privacy.
3. My child care home has accurate written materials on breastfeeding topics available for all parents. Yes ____ No ____
 - I offer written materials that are easy to understand and are not produced by formula companies.
 - I understand the breastfeeding materials offered to families.
 - I provide Moms with information about community resources such as support groups, WIC Breastfeeding Coordinators and Lactation Consultants.
4. My child care home feeds infants on demand and coordinates feeding times with the mother's normal feeding schedule. Yes ____ No ____
 - I develop an infant feeding plan with each family as infants enroll. The plan is updated as infants move through the stages of development.
 - I do not give breastfed babies food/drink, other than their mother's breast milk, unless indicated in the feeding plan.
 - I feed infants based on their hunger and fullness cues.
 - Refrigerator and freezer space is available for pumped breast milk which is labeled with the infant's full name and the date it was pumped.
 - I encourage mothers to provide a small backup supply of frozen breast milk in case the infant needs to eat more often or the pickup time is delayed.
5. My child care home is prepared to support breastfeeding moms. Yes ____ No ____
 - I am trained about the benefits of breastfeeding, how to prepare, feed and store human milk and I have breastfeeding resources available for my families.
 - Training for my assistant(s) is given soon after they are hired.

Adapted from the Is Your Day Care Home Breastfeeding Friendly Self-Assessment, developed by the New York State Department of Health, Child and Adult Care Food Program.

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Hunger Cues

- **Doctors recommend that all babies be fed when they are hungry, rather than on a schedule**
- **Hunger Cues**
 - Moving head side to side
 - Opening mouth and sticking out tongue
 - Puckering lips to suck
 - Rooting reflex
- **Watch the baby, not the clock**
- **It is normal for young babies to eat only 2-3 ounces of milk in one sitting**
- **We want babies to learn that when they are hungry, they eat, and then they are full**
 - Scheduled feeding disrupts this learning

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Is Your Baby Hungry or Full? Responsive Feeding Explained



The American Academy of Pediatrics (AAP) has resources to explain and promote responsive feeding including a video, infographic, and tip pages.

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General Infant Feeding

- **Breastfed babies do not need solid food before 6 months**
 - Early solids replace breast milk, which should still be main source of food
 - Introduce solids when developmentally appropriate
- **Introduce solids at signs of readiness**
 - Sits with good head control
 - Opens mouth when food comes his/her way
 - Can move food from spoon to back of throat
- **Don't feed cereal in a bottle**
 - It's bad for teeth and will not help a baby sleep longer
- **Hold infants while feeding them**
 - Puts you in good position to see an infant signaling they are full

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Cultural Views of Breastfeeding

- Many different cultures look at breastfeeding as a natural choice for feeding
- Many countries have banned the practice of giving free or subsidized formula to new mothers
- Accepting and understanding cultural differences increases cultural sensitivity to those parents who decide to breastfeed
- Some cultures discourage breastfeeding because it 'spoils' babies and/or discourages babies from sleeping through the night

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How to Support Breastfeeding Mothers




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Physical Activity Break

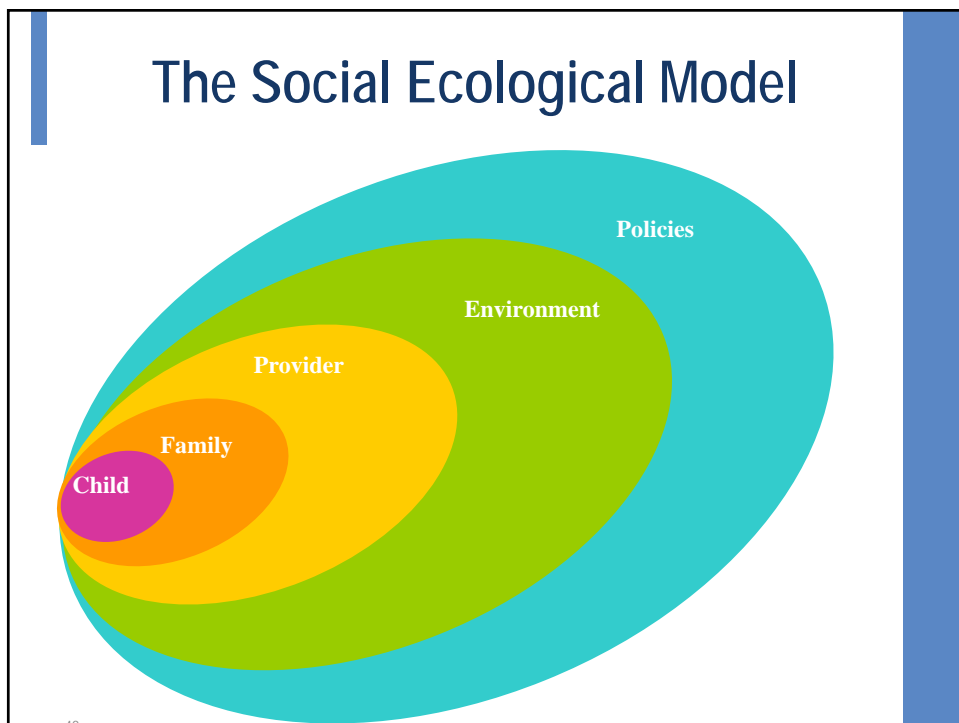


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Part C:
Facilitating
Change in
Your
Program

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Action Plan Worksheet



Start Date: August

Provider Name:

Goal: Introduce and Implement Family-Style Dining by October

Child	Family	Provider	Environment	Policies
Practice family-style dining techniques and skills during center and free times (Ongoing beginning August)	Host a family meeting to introduce the benefits of family-style dining (September)	Learn about family-style dining and review resources to prepare for family-style dining (Ongoing beginning August)	Add pictures to the bulletin board of children in various stages of pretend play and real play practicing family-style dining techniques (Ongoing beginning August)	Research policies on family-style dining (August)
Encourage through activities and books that promote healthy nutrition and family-style dining in the home to continue practicing techniques in preparation for family-style dining (Ongoing beginning September)	Include family-style dining information and benefits in the programs monthly newsletter (Ongoing)		Post information and tips on family-style dining on the bulletin board (Ongoing beginning August)	Prepare for parent meeting to introduce family-style dining into the program (August)
Encourage through play in developing conversations and language skills, social/emotional skills, and fine/gross motor skills (Ongoing beginning September)	Encourage parents to practice family-style dining at home with children (Ongoing beginning September)		Purchase family-style dining materials, books, and resources for the home (September)	Develop written policy on family-style dining to be included in program policies and family handbook (October)
Practice set-up/clearing the tables and serve food and beverages at meal times (Ongoing beginning September)			Fully implement family-style dining in the home (Ongoing beginning October)	
Implement family-style dining fully with children (Ongoing beginning October)				

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Action Plan Worksheet



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Implement family-style dining fully with children (Ongoing beginning October)				

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Action Plan Worksheet



Start Date: November

Provider Name:

Goal: Improve the breastfeeding environment in my program by developing infant feeding plans and creating a private breastfeeding space.

Child	Family	Provider	Environment	Policies
Feed infants based on infant feeding plan and using responsive feeding cues (Ongoing beginning November)	<p>Work with families to create individual feeding plans for each infant (Ongoing, beginning November)</p> <p>Invite families to attend training on breastfeeding support (Ongoing beginning mid-November)</p> <p>Identify and gather brochures for community breastfeeding support ie: La Leche League (November)</p> <p>Maintain on-going communication with families regarding infant feeding needs and cues (Ongoing beginning November)</p>	<p>Collect sample infant feeding plans and choose a template to use with families (November)</p> <p>Learn about best practices in breastfeeding support and attend training (Ongoing beginning early November)</p> <p>Set up the bulletin board for parent information regarding breastfeeding (Ongoing beginning November)</p> <p>Display posters and books regarding breastfeeding support (Ongoing beginning November)</p> <p>Set up private breastfeeding space with new equipment (early December)</p>	<p>Identify a private, clean, comfortable place for mother's to breastfeed or express their milk (October)</p> <p>Purchase all equipment needed: refrigerator for storage of breastmilk, bottles/bags, labels, comfortable chair, etc. (end of November)</p> <p>Purchase posters, books, handouts for both children and families regarding breastfeeding support (November)</p> <p>Display on parent bulletin board breastfeeding support information (Ongoing beginning November)</p> <p>Create the nursing room with all items purchased for breastfeeding mothers to use while at the home (early December)</p>	<p>Research sample breastfeeding support practices in preparation for trainings to families (October)</p> <p>Offer breastfeeding support sessions twice a year for families (Ongoing beginning November)</p> <p>Apply to the State for becoming a breastfeeding friendly facility (January)</p> <p>Implement program policy on breastfeeding support and include in parent handbook (January)</p>

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Action Plan Worksheet



Start Date: November

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Sample Policy: Family-Style Dining

At ABC Family Child Care, we support family-style dining by:

- Role-modeling positive healthy eating behaviors in the presence of children
- Sitting with children at the table and eating the same meals and snacks
- Encouraging children to try developmentally-appropriate servings of new foods
- Providing child-size tables, utensils and serving dishes at mealtime
- Providing opportunities outside of mealtime to strengthen pouring and scooping skills that can be utilized during family-style dining



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Sample Policy: Breastfeeding Support

At ABC Family Child Care, we support breastfeeding and infant feeding by:

- Providing a clean, welcoming place for mothers to breastfeed or express their milk
- Offering breastfeeding promotional materials that are culturally appropriate
- Providing a refrigerator for the storage of expressed milk



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FAMILY CHILD CARE BREASTFEEDING POLICIES AND PRACTICES

To create the healthiest possible environment for the infants in my care, I have instituted the following policies in my family child care program:

Supportive Environment

- I provide an atmosphere that welcomes breastfeeding families. I support mothers who continue to breastfeed their infants/children as they return and continue to work.
- I have a private, designated space (other than the bathroom) for mothers to breastfeed their children. If that space is not available, a portable divider/partition will be made available. I welcome mothers to breastfeed on site when they are able to.
- I maintain a breastfeeding supportive environment through posting and providing culturally appropriate breastfeeding support materials (pictures, posters, etc) not including those produced or supplied by commercial entities and/or manufacturers of infant formula.
- I "check-in" with mothers for feedback and ways to continue providing support.
- I communicate the infant's daily routine (i.e., feeding, napping, etc.) so a mother can adjust her schedule for pumping and/or visiting to feed her infant.

Initial Contact

- I discuss breastfeeding support with all potential new families and share this policy and breastfeeding resources with them. The policy is included in my parent handbook.
- I work with parents prior to their first day in child care to transition the infant to bottle or cup feedings.

Feeding and Handling Milk

- I follow storage and handling of breast milk as defined by California Department of Public Health and Centers for Disease Control regulations. http://www.cdc.gov/breastfeeding/recommendations/handling_breastmilk.htm
- I discuss with all families how expressed milk is handled at our home.
- Freezer space is available for milk storage.
- I inform families using written procedures on the proper way to label and handle breast milk.
- I coordinate with parents about the quantity of milk remaining in containers to avoid waste. I fill bottles with less breast milk than necessary for a feeding. I will have additional breast milk available to add to the bottle as needed.
- I develop a sustainable feeding plan with each family including feeding infants on demand as we observe hunger cues and coordinating the last feeding of the day to meet the mother's feeding needs (either to feed or wait mother's feeding).
- I hold infants when feeding them.

Staff Training

- I participate in training at a minimum of once a year on feeding breast milk, breastfeeding policy, supporting exclusive breastfeeding and transitioning to whole milk.
- Families have the right to request information about the content of breastfeeding training I have completed.
- This policy is reviewed annually and updated to incorporate new evidence based research and practices.

Adapted from the Family Child Care Home Model Breastfeeding Policy tool developed by the Colorado Department of Public Health and Environment.
Disclaimer: All articles, samples, and resources offered by the Colorado Department of Public Health and Environment are for informational purposes only and should not be construed as professional advice. Sample policies and procedures may need to be adapted to best reflect your organization's unique circumstances.

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LS3 Action Period



The ABC's of a
Healthy Me!

Go NAP SACC*

Serving Meals Family-Style &
Supporting Breastfeeding

Continue Action Plan
& Storyboard

Celebrating Success

Continuing the process of change

LS1 Action
Period

LS2 Action
Period

LS3 Action
Period

LS4 Action
Period

LS5 Action
Period

Nurturing Healthy Eaters &
Providing Healthy Beverages

Action Plan

Getting Kids Moving &
Reducing Screen Time

Continue Action Plan
& Storyboard

*GoNAP SACC is a Nutrition and Physical Activity Self Assessment for Family Child Care for FCC providers comparing their current practices with a set of best practices

Technical Assistance Groups



Action Plan

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Facilitating Change in Your Program: LS3 Action Period



- **Opportunity to:**
 - Implement action steps for the provider and environment identified for the 1-2 areas providers would like to improve upon
 - Continue a storyboard demonstrating what area(s) the provider improved
- **Trainers provide technical assistance (TA)**

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Continuing Your Storyboard



Providers will finalize their story of change by:

- Describing what change(s) were made and how they did it
- Sharing who was involved in the process
- Explaining accomplishments and challenges faced
- Sharing photos of the implementation process
- Outlining any policies that were updated as a result
- Explaining the next steps they will take to sustain the change(s)

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Part D: Extending your Learning: Provider, Families and Policies

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Family-Style Dining at Home

- **Encourage families to practice family-style dining at home**
- **You can promote family-style dining by:**
 - Offering special days that parents can participate in eating family-style (Mother's/Father's Day Breakfast, Back to School Night, etc.)
 - Sending home easy/quick recipes that allow less time for cooking and more time for eating together at the table
 - Taking photos of children eating family-style at your home and send home a conversation starter for 'table talk'

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Support mothers in breastfeeding as they return to work

- 80% of mothers desire to breastfeed, but 60% are unable to meet their breastfeeding goals
- Returning to work is the primary reason mothers end breastfeeding early
- Important steps to supporting nursing mothers:
 - Talk with the mother to begin to understand her ideas and goals for breastfeeding.
 - Reassure breastfeeding moms that they are doing the best thing for their baby.
 - Encourage them to breastfeed as long as possible.

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Advocating for Breastfeeding

- **Breastfeeding is more than a lifestyle choice, it's a public health issue**
- **Benefits for employers**
 - Moms miss fewer days of work because child isn't sick as often.
- **Benefits for society**
 - Decreased abuse and neglect rates for Mothers who breastfeed.
 - If 90% of mothers breastfed for 6 months:
 - 1,000 infant deaths could be prevented
 - U.S. could save \$13 billion



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Resources for Providers and Parents

- La Leche League
- National Resource Center for Health and Safety in Child Care and Early Education
- International Board Certified Lactation Consultants
- Baby-Friendly Hospital Initiative
- Women, Infants, and Children (WIC)
- CDC's *Breastfeeding and Early Care and Education: Increasing Support for Breastfeeding Families*



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CDC's Breastfeeding and Early Care and Education: Increasing Support for Breastfeeding Families

Breastfeeding and Early Care and Education Increasing support for breastfeeding families



Obesity rates among children aged 2 to 5 years approximately doubled between 1979-1982 and 2007-2010. With an estimated 12.1% of children aged 2 to 5 years already obese, prevention efforts must target our youngest children.

Breastfeeding helps protect children against obesity, among other important health benefits. The American Academy of Pediatrics recommends exclusive breastfeeding for about the first six months and continued breastfeeding for at least the first year to boost an individual's immunity. In 2010 only 41% of mothers breastfed at six months and 33% at 12 months of age.

One factor affecting breastfeeding duration is that many mothers are away from their children during the day and may not receive the support they need to continue breastfeeding. In 2007, 40% of women with children under age 3 were in the labor force. As a result, many children are cared for by persons other than their parents.

Early care and education (ECE) providers and teachers influence the lives and health of the families they serve and have an important role in supporting breastfeeding mothers. ECE programs, centers and family home child care support breastfeeding mothers by ensuring that staff members are well-informed to meet national recommendations for supporting breastfeeding mothers. Support may include allowing mothers to breastfeed at the facility, handling of pumped milk, as needed and helping solve breast milk in a freezer to store it for use.

As of December 2011, only 6 states' licensing regulations contained language that meets national recommendations for encouraging and supporting breastfeeding and the handling of breast milk (AL, CA, HI, MD, NC, VT).

Examples of state efforts to increase support for breastfeeding women in ECE environments:

Arkansas's Great Start Program is a model for ECE providers to help children to make healthy choices related to nutrition, physical activity, and wellness. The program includes staff education, a sample breastfeeding policy and a video on how to support and work with breastfeeding mothers (<http://health.gov/greatstart>).

The Massachusetts Department of Health-WHC program has developed a training curriculum for ECE providers aimed at how to support a Breastfeeding Mother's Guide for the Child and Center. The curriculum:

incorporates guidelines for providers on how to support breastfeeding mothers as well as guidelines for the storage and handling of expressed milk (<http://www.dhs.state.ma.us/health/childcare/center>).

The Utah Department of Health's Nutrition, Physical Activity and Nutrition Program provides an online CPE for Training, composed of an overview about preventing childhood overweight. This training is approved for professional development credit. Videos of Training Credit, and Center Lactation Credits in Health and Safety for child care providers in the state. Training Module 6: How to Support a Breastfeeding Mother's Guide for Child Care Providers, provides ECE directors and staff accurate information and resources as they can best support breastfeeding mothers whose babies are in their care.

The New York State Department of Health's Child and Adult Care Food Program (CACFP) recognizes ECE centers and family day care homes that participate in CACFP and support breastfeeding families with Breastfeeding Friendly certification. A website provides ECE centers and family day care homes with self-assessment to apply for this designation, and lists the breastfeeding friendly centers and homes (<http://www.health.ny.gov/prevention/nutrition/early-breastfeeding.aspx>).

The Wake County Breastfeeding Friendly Child Care Initiative (BFCCI) supports breastfeeding in ECE centers serving low-income families through collaboration between the Carolina Global Breastfeeding Institute and the Wake County Child Care Health Consultants and Wake County SmartStart. Activities include identifying the knowledge, attitudes, and practices that support breastfeeding among ECE center staff, mandatory trainings for ECE providers, and a toolkit that includes handouts and materials for both providers and breastfeeding families (<http://highlights.wake.gov/active/health/2016>).

The Wisconsin Department of Health Services developed the **Five Steps to Breastfeeding Friendly Child Care Centers**, a resource kit to help ECE centers and family home providers promote breastfeeding and ensure that they support mothers to be able to breastfeed. (<http://www.dhs.wisconsin.gov/publications/P090002.pdf>)

Find out more at **Let's Breast! Child Care** (<http://healthykidshealthyfuture.org>)

Setting and endorsing ECE standards is the responsibility of individual states and territories, although some local jurisdictions can set standards. The 1st edition of *Caring for our Children: National Health and Safety Performance Standards*, the gold standard for ECE, provides recommendations on how childcare providers can support breastfeeding families.


References to non-federal organizations are provided solely as a service to the audience. These references do not constitute an endorsement of these organizations or their programs and policies by CDC, or the Federal Government, and none should be inferred.



Resources

- **Healthy Kids, Healthy Future**
 - www.healthykidshealthyfuture.org
- **MyPlate for Preschoolers**
 - <http://www.choosemyplate.gov/preschoolers.html>
- **Nutrition and Wellness Tips for Young Children**
 - www.teamnutrition.usda.gov
- **Nemours' Best Practices for Healthy Eating**
 - www.healthykidshealthyfuture.org
- **Child and Adult Care Food Program (CACFP)**
 - www.fns.gov/cacfp






Check-Out

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Trainer Contact Information



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