P258 (continued)

subjects in the same intake quartile was highest for energy(82.0%) and lowest for vitamin A(56.0%). With regard to validity analysis, Spearman correlation coefficients ranged from 0.27(for PUFA) to 0.79 (for energy). The proportions of subjects in the opposite categories between the first FFQ and 3-day diet recall data were generally low from 0.00% (for fat) to 36.2% (for sodium). Average subjective levels of the website's usability, visual effect, understanding, and familiarity were all found over 4 points out of 5 points.

Conclusions and Implications: The developed web-based dietary evaluation system can serve as a valid and attractive tool for administering FFQ to Korean adolescents.

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P259 Barriers and Facilitators to Weight Maintenance After Reaching a Goal Weight Within a Meal Replacement Program

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Objective: To identify barriers and facilitators of weight maintenance after reaching a goal weight in meal replacement program (MRP) participants.

Design, Setting, and Participants: Seven focus groups of ≤ 8 clients were conducted to discuss barriers and facilitators to weight maintenance prior to reaching a point of saturation. Participants were thirty-two MRP participants (31-82 yrs old) who had reached their goal weight via a proprietary MRP that included an element of health coaching.

Outcome Measures and Analysis: Data were analyzed with NVivo10 qualitative software using content analysis theory to identify emerging themes.

Results: "Program logistics" was the most commonly discussed program barrier, which included subthemes of nutrition and physical activity education, support from health coaches, and confidence in health coach knowledge. "Outside influence" emerged as the second most robust barrier discussed, which included work environments and social interactions. "Interpersonal relationships" emerged as a primary weight maintenance facilitator, which encompassed interactions from family, friends, and coworkers. Health coaches also emerged as a facilitator of weight maintenance in terms of support, knowledge, and consistency.

Conclusions and Implications: While different themes emerged as the most prominent barriers and facilitators to weight maintenance, strengths and weaknesses were noted within each theme highlighting the vast variation in participant needs. MRPs should consider adding a program screening tool to learn about the needs of program participants in order to tailor the

program to each individual and thus, maximize weight maintenance.

Funding: Sanford Health – South Dakota State University

P260 The Undiet Revolution: Impact of a Nutrition and Mindful Eating Intervention on Eating Behaviors and Weight Loss

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Objective: This study assessed the efficacy of a mindful eating and nutrition education program on eating behaviors and weight loss.

Design, Setting, Participants, and Intervention:

This program incorporated nutrition education taught by Registered Dietitians in addition to a mindful eating component. Twelve overweight adult women (average BMI =30; average age 52 years) from Colorado Springs enrolled in a 12-week educational intervention (The Undiet Revolution) consisting of 1.5 hours each week. Topics included mindful eating and movement, basic nutrition education, cooking demonstrations, grocery store and greenhouse tours, and stress.

Outcome Measures and Analysis: Anthropometrics were measured on a Tanita scale at baseline, 6 and 12 weeks. Mindful eating behaviors were evaluated at baseline and 12 weeks using the Framson Mindful Eating Survey (1-4 scale), and other surveys used by Peak Nutrition Clinic. Data were analyzed using non-parametric statistical tests (Significance at $p \leq 0.05$), SPSS 23.

Results: Seven women completed the study. Weight did not change over time. There was a statistically significant increase in eating awareness (2.3+/-0.6 vs 3.1+/-0.8, $p=0.028$), ability to stop when full (disinhibition) (2.4+/-0.6 vs 3.1+/-0.4, $p=0.028$), and emotional eating in response to negative states (2.2+/-0.88 vs 3.01+/-0.93, $p=0.018$ between baseline and 12 weeks. Although not significant, eating while distracted and eating based on environmental cues also improved.

Conclusions and Implications: The Undiet Revolution appeared to improve eating behaviors and mindfulness but not weight loss. Although sample size was a limiting factor, the results proved encouraging for healthier eating patterns.

Funding: None

P261 Behavioral Correlates of Empirically-Derived Dietary Patterns Among University Students

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P261 (continued)

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Objective: Dietary patterns have been associated with disease risk, but behavioral predictors of dietary pattern adherence are poorly understood, especially among emerging adults. This study aims to evaluate health-related behaviors associated with dietary pattern scores among four-year university students.

Design, Setting, Participants, and Intervention: Dietary data were collected from undergraduates participating in the Tufts Longitudinal Health Study (1998-2007) via Block Food Frequency Questionnaire (n=568). Dietary patterns were derived using principal components analysis and orthogonal rotation. Scree plots, eigenvalues, factor loadings, and previous studies were used to select the final number of dietary patterns. Data on students' health-related behaviors, including self-identified eating styles, meal locations, weight loss intentions, and external influences on food choice were collected via the Health Behavior Survey. Vegetarian eating styles were defined as all eating styles that omitted meat, dairy, eggs, and/or fish.

Outcome Measures and Analysis: Unadjusted linear models were used to determine associations between dietary pattern scores (DPS) and health-related behaviors. Significant correlates were retained in multivariable regression models, adjusted for demographics, and p values <0.05 were considered significant.

Results: Three dietary patterns were identified: Prudent, Western, and Alcohol. Vegetarian eating styles and never eating meals outside of the home were associated with higher Prudent and lower Western and Alcohol DPS. Intentions to lose weight were positively associated with Prudent and Alcohol DPS, and negatively associated with the Western DPS. No external influences on food choice (friends, family, cost, convenience, cultural) were significantly associated with DPS.

Conclusions and Implications: These findings suggest that targeting eating out behavior, intentions to lose weight, and/or encouraging students to adhere to plant-based diets may promote healthier dietary patterns in college students.

Funding: None

P262 Content Validity of the Child Nutrition and Physical Activity Screening Tool

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Objective: The content validity of the Child Nutrition and Physical Activity (CNPA) screening tool was determined.

Design, Setting, and Participants: A cross sectional design using survey methods was used to collect input from experts about the CNPA. Experts were asked to eval-

uate items in each of six CNPA domains for theoretical relevance, clinical significance, clarity in wording, and cohesiveness via email. Eleven experts in pediatric weight management or questionnaire development reviewed the CNPA. Ten of the 11 experts were registered dietitians and nine of the 11 had a PhD. The experts have been in the field from one to 30 years, majority being in the field 20 years.

Outcome Measures and Analysis: The CNPA consists of 22 items in six domains: dietary behavior, screen time, physical activity, confidence, importance, and perception. Proportion of experts who agreed domain items met criteria was calculated with 50% or more agreeing meeting criteria.

Results: Fifty percent and more of the experts agreed that all CNPA domains were theoretically relevant, clinically significant, and were cohesive. Less than 50% of experts agreed that there was clarity in wording in the confidence, importance, and perception CNPA domains.

Conclusions and Implications: The CNPA may still need changes to increase content validity. This will mean further testing and development need to be done before a valid screening tool is created that can be used by health care providers in an urban pediatric primary care clinic.

Funding: Clinical Nutrition Department

P263 The Impact of Health at Every Size[®] Versus a Weight Loss Intervention on Diet

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Objective: To determine dietary patterns of Health At Every Size[®] (HAES[®]) participants and to compare with individuals in a traditional weight loss program (WL).

Design, Setting, and Participants: A convenience sample of 46 non-diabetic adults enrolled in this pilot study (29 in HAES[®]). Both HAES[®] and WL programs ran parallel from April to July 2015. The HAES[®] group focused on food and body acceptance while the WL group focused on calorie and fat reduction and increasing exercise. Attrition was 14% in HAES[®] and 59% in the WL group.

Outcome Measures and Analysis: It was hypothesized that upon program completion, individuals in the HAES[®] group would consume a more nutrient-dense diet, more whole foods, higher fiber and lower sodium than those in the WL group, and that those in the WL group would consume fewer calories, less fat and less fiber. T-tests were used to compare baseline data between groups and to assess within-group changes. Regression was used to compare follow-up data between groups while controlling for group, age and caloric intake.

Results: HAES[®] lost $-2.05 \pm 0.74\%$ while the WL group lost $-6.71 \pm 1.26\%$ body weight (both $p=0.01$). Healthy Eating Index score increased (7.41 ± 2.31 ; $p=0.01$) and sodium

Continued on page S111