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nutrition and to increase physical activity among employees.

Theory, Prior Research, Rationale: Via formative research, an extensive review of the worksite literature and existing programs; interviews and focus groups with business leaders; and focus groups with low- and middle-income working Californian adults was conducted on the California Fit Business Kit (Kit), a tool for assessing organizational need and readiness for PSE change.

Description: Target audience were employees at worksites that qualify for SNAP-Ed programming. Based upon preliminary findings from formative research, promising strategies to promote healthy eating and physical activity at worksites were identified. The Michigan Fitness Foundation is currently implementing the Kit, an emerging intervention, among low-wage worksites participating in SNAP-Ed programming.

Evaluation: This intervention is being conducted among 12 worksites using the Kit's Check for Health Scorecard, which is based on 12 wellness components related to nutrition and physical activity. Quantitative and qualitative results will be reported as basic descriptive statistics and themes using SPSS and NVivo, respectively.

Conclusions and Implications: There are few tools available to date designed to prioritize PSE strategies to promote healthy eating and physical activity at low-income worksites. The preliminary findings from the use of the Kit at California worksites will be compared to priority PSE strategies identified in Michigan worksites. This tool may be useful in assisting employers with improving employee health and reducing health care costs related to poor nutrition and sedentary behaviors among low-income populations.

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P169 Barriers of Culture, Acculturation and Religion on Nutrition Behaviors of Arab Muslim Mothers of Young Children in the US

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Objective: To explore the relationships among acculturation, cultural/religious barriers, eating patterns and physical activity (PA) levels.

Design, Setting, Participants, and Intervention: An online questionnaire including a food frequency questionnaire and questions related to leisure time PA, acculturation, food choices, barriers to eating habits and PA, and religious strength was distributed. Arab Muslim mothers of young children living in the US (n=477) from 13 Arab countries participated in the survey.

Measures and Analysis: Factor analysis was used to categorize barriers to healthy eating and PA and to determine dietary patterns. Correlation and regression analysis were conducted to evaluate the relationships among barriers, acculturation, dietary patterns, strength of religious faith, and PA levels where appropriate.

Results: Cost, feeling hungry and low self-control, negative attitude towards healthy eating, family preference and disorganization were barriers to eating healthy. Four dietary patterns were identified: fruits/vegetables; animal products; saturated fat foods; and beverages/grains. Acculturation significantly influenced fruit/vegetable, saturated fat foods and beverages/grain intake ($P<0.01$) and barriers related to cost significantly influenced consumption of foods rich in saturated fat ($p<0.05$). Dress code and negative perception, lack of motivation and stress, and responsibilities were barriers to PA. Barriers significantly influenced PA levels ($p<0.001$) but strength of religious faith did not. Acculturation and the barriers of lack of motivation and stress, and responsibilities were associated with higher PA levels ($R^2=0.178$, $p<0.001$).

Conclusions and Implications: Understanding the influences of barriers and acculturation on Arab Muslim women will help nutrition educators develop culturally appropriate strategies to prevent overweight and obesity in this growing community.

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P170 Evaluation of Current Educational Materials to Prevent Early Childhood Obesity: A Content Analysis

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Objective: Educational materials available in print or printable download on topics related to feeding, activity and childhood obesity prevention intended for parents with children ages birth to 2 years (B-24) were collected and evaluated to determine appropriateness and accuracy of content.

Study Design and Analysis: Sources of materials were recommended by a child nutrition advisory committee, key leaders, parents and health and education providers. Materials were collected from pediatrician offices, WIC, family/community centers, nutrition education programs, government, hospitals, and Early Head Start from a Northeast US state. Materials were screened for relevance, duplication and then inventoried and coded (n=136). An adapted version of the previously validated "Developing and Assessing Nutrition Education Handouts" (DANEH) tool was used for analysis by two trained researchers.

Results: Main topics of the materials included breastfeeding or formula feeding (29%); mealtime or food topics (23%); complementary feeding (15%); physical activity or sedentary behavior (9%) or multiple topics

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