P13 (continued)

consumption of vegetables has remained constant over time and below recommended levels.

Objective: The study purpose is to describe how willingness to try a new vegetable differs by place (friend's house, school, home) based on vegetable preference.

Study Design, Setting, Participants, Intervention: Baseline data were analyzed from the NU-HOME study, a randomized trial to prevent childhood obesity. Participants completed data collection in a rural Minnesota community (2017). Children ($n = 60$) were predominantly female (62%), with a mean age of 8.95 years ($SD = 0.89$). Four items from a vegetable neophobia scale were analyzed; one assessed how much the child likes vegetables, and three assessed willingness to try a new vegetable in three different locations. Liking vegetable variables was recoded as binary ("liked very much" vs. "liked a little/-didn't like at all").

Outcome Measures and Analysis: Chi-square and Fisher's exact test examined associations between liking vegetables, and willingness to try new vegetables in the three locations.

Results: Only 38% of children reported liking vegetables "very much" compared to fruit (87%); thus, analyses were limited to vegetable items only. Compared to children who reported liking vegetables, children who reported not liking vegetables were less likely to try a new vegetable at a friend's house (91% vs. 46%, $P = .003$), or at school (87% vs. 62%, $P = .028$). However, no significant difference was observed in willingness to try a new vegetable at home between children who like vegetables, and those who do not (87% vs. 73%, $P = .12$). There were no differences in associations by gender or age.

Conclusions and Implications: Children who reported not liking vegetables were more likely to try a new vegetable at home than other locations. Therefore, efforts to promote vegetables should target the home, and interventions promoting at-home cooking can optimize introduction of new vegetables.

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P14 Impact of Health at Every Size Curriculum Module on Weight Attitudes of College Students

Teresa Drake, PhD, RD, CHES, tdrake@fsmail.bradley.edu, Bradley University, 1501 W Bradley Avenue, Peoria, IL 61625; Roberta Ogletree, HSD, Southern Illinois University, Carbondale

Background (Background, Rationale, Prior Research, and/or Theory): Weight bias is pervasive in Western society. Health at Every Size (HAES) provides an alternative to weight-centric approaches and may help to alleviate weight stigma.

Objective: The purpose of this study was to evaluate whether a HAES curriculum module would impact weight attitudes of college students.

Study Design, Setting, Participants, Intervention: Quasi-experimental design using pre- and post-testing was

used to compare attitudes among students in a personal health course. Students in 11 sections of the course received the usual weight management module (comparison) while students in the other 11 sections received a 2-day HAES-focused module (intervention). The HAES module included information about HAES principles, mindful eating, comparison of dieting and non-dieting approaches to nutrition, and body positive self-talk.

Outcome Measures and Analysis: Attitudes were measured using the Health and Weight Attitudes Scale, an instrument measuring HAES attitudes. Independent t-tests were used to analyze differences in attitudes among the comparison and intervention groups, paired t-tests to analyze differences between pre- and post-tests, and ANOVA to analyze differences in gain scores among the groups.

Results: One hundred and ninety five college students participated in both pre- and post-tests. Attitudes at pre-test did not differ significantly between the intervention ($n = 109$) and comparison ($n = 86$) groups [$t(193) = -.08$, $P = .93$]. Comparison group scores did not change from pre- to post-test [$t(85) = .29$, $P = .77$] while the intervention group did have a significant change from pre- to post-test [$t(108) = -7.55$, $P < .001$]. At post-test, intervention group attitudes also differed significantly from the comparison group [$t(193) = -4.67$, $P < .001$]; the intervention group had significantly more positive attitudes at post-test [$F(1,193) = 32.43$, $P < .0001$].

Conclusions and Implications: Even a short, 2-day HAES curriculum module can increase positive attitudes of students toward HAES principles. Nutrition educators can optimize the impact of their instruction by incorporating HAES principles in their curriculum, even in small doses, to support body and size acceptance and improve attitudes about weight.

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P15 Modifiable Cardiovascular Risk Factors in a Population of University Undergraduates From South East, Nigeria

Patricia Ukegbu, PhD, adanna2025@yahoo.com, Michael Okpara University of Agriculture, Umudike, Abia State, Nigeria 11 Hoffman Street, Potchefstroom, North West Province 02520, South Africa; Chukwunonso Ejike, PhD; Chinyere Echendu, PhD; Julie Anyika-Elekeh, PhD, RD; Blessing Nwaofia, MSc; Chinwe Uzokwe, MSc; Awele Iwelumor, BS; Ada Uwaegbute, PhD, RD

Background (Background, Rationale, Prior Research, and/or Theory): Cardiovascular diseases (CVDs) are the leading cause of mortality and morbidity worldwide. The burden of the disease can be reduced by early identification and controlling of cardiovascular risk factors. Data on modifiable cardiovascular disease risk factors among young adult populations in Nigeria are scarce.

Objective: The study objective was to examine the prevalence of modifiable cardiovascular risk factors (MCRFs) among apparently healthy university undergraduates.

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