P79 (continued)

Background (Background, Rationale, Prior Research, and/or Theory): Frequent consumption of sugar-sweetened beverages (SSBs), fast food, and sweets is associated with obesity. Fast food restaurants and marketing of unhealthful foods and beverages are especially prevalent in lower-income areas and neighborhoods populated by non-Whites.

Objective: Examine trends in intake of SSBs, fast food, and sweets by race/ethnicity among low-income mothers in California.

Study Design, Setting, Participants, Intervention: Randomly sampled mothers from households eligible for the Supplemental Nutrition Assistance Program participated in cross-sectional telephone interviews in 2015, 2016, and 2017.

Outcome Measures and Analysis: Separate items assessed number of times mothers drank regular soda, sports drinks, energy drinks, sweetened coffee/tea, and sweetened fruit juice. Trained interviewers asked about times eating food from a fast food restaurant and times eating sweets (e.g. cake, cookies, ice cream). Responses were standardized to represent times per week. Three-year comparisons for Latina, African American, and White mothers were analyzed separately by ANOVA with Tukey's HSD for post hoc comparisons.

Results: Over 13,000 Latina (69%), White (18%), and African American (14%) mothers responded across the three years. Levels of intake of SSBs and sweets remained unchanged. Unadjusted analyses found increases in fast food consumption for Latina and African American mothers.

Conclusions and Implications: Levels of intake of sugar from SSBs or sweets were stable among low-income mothers in California. This conclusion is based on the statistical power of our analyses; however, we recognize the possibility of Type II error from such claims. Fast food intake increased over the past three years among Latina and African American, but not White mothers. This may be related to environmental influences (more restaurants or advertisements targeting Latinas and African Americans). Our study is limited by the unknown types or quantities of foods consumed from fast food restaurants.

Funding: USDA.

P80 Process Evaluation of a Breastfeeding Program for African American, Adolescent Mothers

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Objective: Describe the process (reach, dose delivered, dose received, fidelity, and satisfaction) of a culturally tailored breastfeeding intervention.

Target Audience: African American, adolescent pregnant and postpartum mothers ages 16–22 and their mentors.

Theory, Prior Research, Rationale: Community-Based Participatory Research approach.

Description: The Healthy and Proper Parenting for Youth (HAPPY) breastfeeding curriculum consists of three 1-hour workshops: SMART Goals Matter focusing on setting SMART (Specific, Measurable, Action-oriented, Realistic, Timely) goals since having a breastfeeding goal was an important determinant to intention to breastfeed during curriculum development; Breastfeeding Matters consisting of culturally-tailored breastfeeding videos, discussion and a latching simulation activity; and You Matter consisting of a personality test, stress triggers and stretching as a way to relieve stress to emphasize the need to take care of oneself as a breastfeeding mother.

Evaluation: Reach was 48% for SMART Goals Matter, 29% for Breastfeeding Matters and 55% for the You Matter workshops based on 31 participants who were active in the local non-profit organization. Dose delivered were 88%, 92% and 100% for the first, second and third workshop, respectively. Participants who were exposed to the intervention ($n = 21$) received an average of 59% (14.8 ± 2.2 components) of the intervention components, with an average of 56%, 52%, and 73% for workshops 1, 2, and 3, respectively. Fidelity increased from the first (75%), second (86%) to third (100%) workshop. Out of a 5-point likert scale (1 = disagree to 5 = agree), participants were satisfied with all workshops (5 ± 0), felt comfortable expressing their opinions (4.5 ± 1.4), and felt respected as a person (5 ± 0).

Conclusions and Implications: Although fidelity and dose delivered were high for all workshops, there were low participation rates and dose received. Future efforts should focus more on integrating breastfeeding into non-breastfeeding topics to increase participation in this population.

Funding: NIFA.

P81 Process Evaluation of a Rural Community-Based Cardiovascular Disease Prevention Program: Strong Hearts, Healthy Communities

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Background (Background, Rationale, Prior Research, and/or Theory): Rural women have a higher prevalence of cardiovascular disease (CVD) and behavioral risk factors than their urban counterparts. Although existing CVD prevention programs have shown promise in changing women's lifestyle behaviors, few programs have specifically targeted rural populations nor have they included social and environmental foci.

Objective: To evaluate the implementation of a multi-level community-based CVD prevention program for rural women grounded in the socioecological framework.

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