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Results: 61 mother-child dyads (51.7% male) participated, including mainly Caucasian (63.9%), and married mothers (77%). On average, children were 5.7 ± 0.7 years old, with a BMI percentile of 60.4 ± 31.0 , 64.4 ± 9.4 HEI total score, and 1187 ± 273.7 CPM. Total FNPA score and Child and Family Activity/Involvement construct were positively associated with CPM in boys only. In boys, Beverage Choices construct was positively associated with BMI percentile. Healthy Environment construct was negatively associated with weekday HEI in girls, while the Food Choices and Family Meals constructs were positively associated with kcal/age in boys.

Conclusions and Implications: In this sample, family environment influenced child health behaviors, mainly in boys. The relationship between FNPA score and child outcomes had not been observed previously in a sex-stratified sample. These findings suggest there may be sex-related differences in the degree to which children are influenced by family behaviors.

Funding: College of Allied Healthy Student Research and Creativity Grant, OUHSC Department of Nutritional Sciences.

P134 Toddler Caregiver Responses to Novel Food Acceptance and Rejection

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Background (Background, Rationale, Prior Research, and/or Theory): Parent responses to toddler hunger and satiety influence eating behavior development. However, little is known about parent responses to general food acceptance and rejection.

Objective: Describe the associations between parent responses to toddler (12–36 months) food acceptance and rejection, feeding practices, and toddler eating behaviors.

Study Design, Setting, Participants, Intervention: In this cross-sectional observation study, parents of toddlers were recruited from the community. Participants recorded one family meal with a new food, in their home, and completed the Toddler Feeding Behavior (Hurley et al., 2013) and the Toddler-Parent Mealtime Behavior (Horodyski et al., 2008) questionnaires.

Outcome Measures and Analysis: Trained coders identified eight parent responses (i.e. reward, validate, encourage, non-judgment, coercion, indulge, punish, model) following toddler food acceptance (i.e. eating a bite) and rejection (e.g. spitting out, pushing away) episodes. Kruskal Wallis analyses tested differences in the eight parent responses across toddler age groups (12–18 months, 19–24 months, 25–30 months, and 31–36 months). Spearman Rho analyses tested the associations between the eight parent responses and feeding practices and toddler eating behaviors.

Results: 40 primarily white (73%) mothers (100%) from middle socioeconomic conditions (75% college educated, 70% earn >\$50,000) participated. Parent use of rewards ($P = .01$), validations ($P < .01$), and modeling ($P = .03$) differed by toddler age. Reward responses were related to parent centered feeding ($r = .32, P < .05$) and to toddler picky eating ($r = -.36, P < .05$). Validating responses were related to parent socialization at meals ($r = .32, P < .05$). Coercive responses were related to TV watching during meals ($r = .44, P < .01$). Toddler food rejection was related to reward responses ($r = -.45, P < .01$), coercive responses ($r = .47, P < .01$), parent centered feeding ($r = -.38, P < .05$), forceful feeding ($r = .40, P < .05$), and toddler picky eating ($r = .55, P < .001$).

Conclusions and Implications. Parent responses to toddler food acceptance and rejection were related to feeding practices and toddler eating behaviors. Research should determine whether changes in parent responses may influence toddler eating behaviors.

Funding: University of Houston College of Liberal Arts and Social Sciences.

P135 Using the Theory of Planned Behavior to Understand College Student Snack Choices

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Background (Background, Rationale, Prior Research, and/or Theory): Healthy snacks are an important avenue to improve the dietary quality of college students.

Objective: The purpose of the present study was to determine reasons why students do or do not select healthy snacks for purchase on a college campus.

Study Design, Setting, Participants, Intervention: College students ($N = 780$) living in campus housing at a southern university completed the survey. Framework for the survey was driven by the Theory of Planned Behavior to predict students' intention to select healthy snacks on a campus setting as determined by direct and indirect measures of attitude, subjective norms and the perceived behavioral control.

Outcome Measures and Analysis: Pairwise correlation coefficients and multiple linear regressions assessed relationships between determinants and intention to purchase healthy snacks.

Results: All three determinants, attitude ($t = 4.24, P < .001$), subjective norm ($t = 4.92, P < .001$), and perceived behavioral control ($t = 5.11, P < .001$) were strong predictors of intention to select a healthy snack. When measured directly, attitude ($\beta = .373, P < .001$) was the strongest predictor of intention to purchase, yet perceived behavioral control ($\beta = .253, P < .001$) was the strongest predictor of intention when observing indirect measures. Most students (59.7%) indicated that they were likely to select a healthy snack and a vast majority of students (89.1%) were confident that they could select a healthy snack.

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Yet, only 40.8% state that they often select healthy snacks. Many students (59%) noted that no healthy snacks were available in vending machines in their residence halls.

Conclusions and Implications: Educational interventions should instruct students how to read nutrition labels and where to find healthy snacks. A campus wide healthy snack intervention may improve frequency of healthy snack selection. Future studies should determine how students determine if a snack is healthy and if student perceptions of healthy snack availability are accurate.

Funding: None.

P136 What Supports and Hinders Community Intervention Success? A Cross-Case Study of the Children's Healthy Living (CHL) Program

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Background (Background, Rationale, Prior Research, and/or Theory): Multisite studies are useful in testing the generalizability of community-level interventions. Building collective efficacy (CE), defined as social cohesion and willingness to work for the common good, is suggested for community-level interventions. However, little is known about CE strategies and barriers in implementation of multisite, community interventions.

Objective: This study aimed to identify CE-based implementation strategies and intervention barriers in a multisite community intervention.

Study Design, Setting, Participants, Intervention: Cross-case, theory-driven, qualitative analysis techniques of documents from the nine intervention communities of the Children's Healthy Living (CHL) program, were inductively and deductively coded for CE theory-based themes related to implementation supports and barriers. CHL was a community randomized control trial, conducted in the U.S. Affiliated Pacific.

Outcome Measures and Analysis: Five CE-based organizing themes emerged from 47 basic strategy themes. Seven organizing barrier themes were generated from 17 basic themes. Based on total CE intervention dose, CHL communities were categorized into high-dose ($n = 4$) and low-dose groups ($n = 5$). Codes were examined across intervention activities and compared and contrasted across the two groups.

Results: Across communities, "unforeseen delays" was the primary organizing barrier theme followed by "modifications of intervention materials and activities". CE-based

strategy themes of civic engagement (i.e. participation in policy and/or community change) and social bonding (i.e. development of trusting relationships) were three times higher and two times higher, respectively, in the high-dose group compared to the low-dose group. Barriers due to complexity, prioritization, and resources were coded more frequently in the low-dose group (1.8, 1.9, and 1.9 times, respectively) compared to the high-dose group and appeared to hinder community success.

Conclusions and Implications: Findings suggest community-level interventions should include activities promoting social bonding and civic engagement, as these help build CE when implementing interventions. A measure of pre-existing CE might be useful to understand potential barriers and supports when tailoring interventions as community acceptable activities that strengthen CE will more likely be implemented.

Funding: USDA.

P137 Evidence of Critical Decision Making in College Students Using Nutrition Modules that Include a Contextual Framework

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Background (Background, Rationale, Prior Research, and/or Theory): Educational institutions have prioritized critical thinking (CT) skills as learning outcome goals, yet research has demonstrated mixed results about the development of CT in college courses.

Objective: To understand how the addition of a contextual framework to an online nutrition module influences college students' critical decision making (CDM).

Study Design, Setting, Participants, Intervention: Students at two universities (RI and TX) were individually randomized into an intervention group with a contextual framework or a control group without the framework. The modules focused on protein sources and organic/non-organic foods. Groups were exposed to the same instruction about CDM, shown two identical videos, and asked to make a decision about each issue. The contextual framework for the intervention group included: framing the topic in the form of a question, organizational activities, and support in forming a decision.

Outcome Measures and Analysis: CDM was scored by trained researchers using a validated rubric ranging from 0–30 points. Responses were scored on: making a decision (10 points), providing evidence based reasoning (0–15 points) and seeing the other side's point-of-view (5 points). Evaluation was based on scores assessed at the end of module 2 using hierarchical linear regression. Analyses were conducted using SPSS 24.

Results: 440 students participated (intervention = 210; control = 230); mean age was 19.5, and 73.4% were female.

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