P135 (continued)

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

Jean Butel, MPH, jbutel@hawaii.edu, University of Hawaii, Manoa, 1960 East West Road, Honolulu, HI 96822; Claudio Nigg, PhD; Kathryn Braun, DPH; James Davis, PhD, John A Burns School of Medicine; Carol Boushey, PhD, University of Hawaii Cancer Center; Rachael Leon Guerrero, PhD, University of Guam; Andrea Bersamin, PhD, University of Alaska, Fairbanks; Patricia Coleman, BS, Northern Marianas College; Travis Fleming, BS, American Samoa Community College; Rachel Novotny, PhD, University of Hawaii, Manoa

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

Jade McNamara, MS, University of Rhode Island; Annie Clarkin, BS; Emily Karn, BS; Kelsey Pawson, BS; Kelly O'Connell, BS; Ingrid Lofgren, PhD; MPH; RD; Sara Sweetman, PhD; Geoffrey Greene, PhD, LDN, RD, ggreene@uri.edu, University of Rhode Island, 125 Fogarty Hall, Kingston, RI 02881

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.

Continued on page S73