P190 (continued)

techniques and health risk assessment measurements for experiential learning. The objective of this study was to create an undergraduate near-peer education program to allow upper-level nutrition majors to practice motivational interviewing and counseling with live clients.

Target Audience: The program recruited clients from a freshman-level wellness course. Near-peer mentors were junior-level nutrition assessment students who completed the experience as part of a course assignment.

Theory, Prior Research, Rationale: Provide hands-on experience to build competence and confidence in critical thinking, nutrition assessment and counseling skills.

Description: The near-peer mentors received program instruction during class time. Study details and informed consents were provided during the wellness class. Completed baseline assessments included: an ASA-24 hour dietary recall, the Health Promoting Lifestyle Profile questionnaire, and establishment of nutrition goals. Body composition using Inbody 770, blood pressure and hemoglobin measures were recorded. Afterwards, a dietary analysis report was developed, interpreted, and progress toward nutrition goals was discussed between the near-peer mentor and client. Follow-up assessments included: a 24-hour dietary recall, body composition measurements and adherence to established nutrition goals. At the end of the program, near-peer mentors submitted journal entries to the faculty evaluating their experience. Common themes identified by students included: knowledge, preparedness, communication, and confidence. Overall, student comments were positive, supporting program objectives.

Conclusions and Implications: A total of 29 upper-level nutrition majors completed the near-peer counseling sessions; 27 completed the self-evaluation journals. The near-peer model of experiential learning enhances the development of desired professional skills and supports the delivery of health risk assessment measurements as part of a college curriculum. Use of near-peer nutrition education can be applied to nutrition education curricula to meet student learning objectives.

Funding: None.

P191 Vidas Activas y Familias Saludables (VALÉ): Development of a Multidisciplinary and Culturally Adapted Pediatric Obesity Treatment Program

Sina Gallo, PhD, RD, George Mason University, Nutrition and Food Studies; Amara Channell Doig, MPH, BS, achannel@gmu.edu, George Mason University, Nutrition and Food Studies, 4408 Patriot Circle, Fairfax, VA 22030; Robyn Mehlenbeck, PhD, George Mason University, Psychology; Jennifer Fields, MS, George Mason University, Exercise, Fitness and Health Promotion; Joseph Wonderlich, MA, George Mason University, Psychology; Margaret T. Jones, PhD, George Mason University, Exercise, Fitness and Health Promotion

Objective: To design and assess the feasibility and preliminary effectiveness of a culturally adapted, evidenced-

based weight management program for overweight and obese Latino children aged 4–9 years and their families.

Target Audience: Latino families whose children had a BMI-for-age >85th percentile, age 4–9 years were recruited through local schools and health care clinics.

Theory, Prior Research, Rationale: Latino children are disproportionately affected by obesity, yet evidence-based treatment guidelines are limited. Previous studies have not addressed factors such as cultural perceptions and home environment. The program design was informed by the principles of both cognitive behavioral therapy (CBT) and dialectical behavior therapy (DBT) to provide participants with strategies to modify health behaviors. The health belief model provided the basis for lessons that addressed nutrition and eating practices.

Description: Children ($n = 36$) and their families participated in a 10-week (~90 min/week) group and family based program that addressed diet, exercise, and behavior modification administered by a multidisciplinary team. The intervention was delivered in Spanish. Children engaged in supervised exercise programming, siblings participated in alternate activities, and caregivers participated in culturally adapted nutrition (reading labels, affording healthy options, altering cultural recipes) and behavioral health sessions (i.e. behavioral reinforcement, family problem solving, stimulus control). Dinner and healthy recipes were provided to families while they set SMART (specific, measurable, achievable, realistic, and time-sensitive) goals weekly.

Evaluation: Retention rate was 64%. All families reported feeling more confident in making healthier food choices and observed positive changes in their child's eating and physical activity behaviors. For children who completed the program, a significant decrease in BMI percentile (-0.07 , $P < .05$), body fat percentage (-1.16 , $P < .05$) and waist circumference (-2.05 , $P < .05$) were observed.

Conclusions and Implications: A 10-week multidisciplinary and culturally adapted group intervention for Latino families was well accepted and improved self-efficacy among children and parents.

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Nutrition Education Research Methods

P192 African Americans' High Social Support, Self-Efficacy and Low Barriers to Healthy Eating Still Translate to Poor Diet Quality

Ingrid K. Richards Adams, PhD, LD, RDN, LDE, Richards.3@osu.edu, Ohio State University, College of Medicine, College of Food, Agricultural, and Environmental Sciences, 453 W 10th Avenue, Columbus, OH 43210; Wilson Figueroa, PhD; Joshua J. Joseph, MD, Ohio State University, College of Medicine; James B. Odei, PhD, Ohio State University, College of Public Health, Department of Biostatistics

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