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in analysis. FI status was not related to zBMI, $t(62) = 1.01$, $P = 0.32$, or EI, $t(48) = 0.44$, $P = .66$, at post-intervention. A main effect of time was observed for zBMI (2.01 ± 0.42 vs 1.94 ± 0.47), $F(1,64) = 5.97$, $P = .017$, and EI (1172 ± 454 kcal vs 1021 ± 196 kcal), $F(1,50) = 6.86$, $P = .012$.

Conclusions: FI status did not affect weight-related outcomes in this low-intensity obesity treatment program. Future research should examine whether FI status affects outcomes in more intensive interventions for which adherence may be challenging for families with unstable food access.

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Food and Nutrition Policy

P118 Campus Food Insecurity and Pantry Awareness at a Public University in South Central Florida

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Background: Higher education institutions have reported from 21 to 59% of their students experiencing food insecurity, meaning they lack the resources to be able to obtain enough food. Food insecurity can negatively impact students' academic performance, physical health, and mental health. Thus, many campuses have established on-site food pantries to address this issue.

Objective: To establish the prevalence of food insecurity among students and their awareness and use of the campus food pantry.

Study Design, Setting, Participants: An online survey was administered to students at the University of South Florida in Fall 2019. A convenience sample of 497 students with representation from all academic colleges completed the survey via Qualtrics.

Measurable Outcome/Analysis: Descriptive analysis was conducted using SPSS 26. To determine food security status, only completed responses ($n = 434$) from the U.S. Department of Agriculture's 6-item short form Food Security Survey Module were included.

Results: Of the 434 students, 309 were categorized as food secure (71.2%); 90 were low food secure (20.7%), and 35 were very low food secure (8.1%) in the previous 30 days of taking the survey. Of the food insecure students ($n = 125$), 5 visited the pantry because they needed assistance (4.0%), 3 visited but not for assistance (2.4%), 76 heard of the pantry but never visited (60.8%), and 41 had never heard of the pantry (32.8%). When asked if students would use the pantry if they needed, 38 said they would not use it for various reasons including: embarrassment, perception of foods provided (eg, canned foods high in sodium), lack of awareness (eg, did not know the physical location of the pantry), and perception of the purpose of the pantry (eg, for undergraduates only).

Conclusions: Findings from this survey can help higher education institutions identify student food insecurity needs and barriers to campus food pantry access.

Funding: University of South Florida.

Nutrition Across the Life Cycle

P119 Examining Predictors for Diet Quality: A Needs Assessment of Rural Versus Urban Older Adults

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Background: Diet and lifestyle are vital in maintaining good health and independence for older adults. Older adults living in rural areas are at risk for chronic disease, poor diet quality, and limited accessibility to healthy foods, compared to their urban counterparts.

Objective: To assess rural and urban older adults' diet quality, food insecurity, and self-efficacy for overcoming barriers to making informed nutrition-related decisions.

Study Design, Setting, Participants: From April-August 2019, a cross-sectional design was used to administer a self-reported survey to adults ≥ 50 years, in Maryland, participating at senior/community sites. Using convenience sampling, 475 participants (Urban, $n = 215$; Rural $n = 260$) were recruited prior to a nutrition education program (44 sites, 19 counties).

Measurable Outcome/Analysis: Participants completed a self-administered survey (41 items). Measurable constructs included diet quality assessed by the validated Dietary Screening Tool (DST), which evaluates nutritional risk in older adults. Perceived self-efficacy for healthy eating behaviors, food insecurity, and sociodemographic factors were also measured. Data were analyzed using SPSS version 24.0 (t-test, chi-square, and multiple linear regression).

Results: Participants were predominantly women (83.6%), white (54.0%), who lived alone (53.6%), with a median age of 74.5 ($SD \pm 8.5$), and reported their health as somewhat good/very good (53.1%). Those in rural areas had significantly lower DST scores ($P = .024$), higher average number of chronic diseases ($P = .004$), and lower self-efficacy for changing health behaviors ($P = .001$) compared to urban/suburban counterparts. After controlling for other variables, rural and urban dwelling was not a significant predictor of diet quality. However, DST scores

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were significant predictors of food insecurity ($B = -3.097$, $P < .05$) and perceived self-efficacy ($B = 1.145$, $P < .001$) among older adults.

Conclusions: Although previous research reported rural dwellers were more at risk for poor diet quality than urban dwellers, our findings did not support this. However, our results did support the need for nutrition interventions addressing food insecurity and barriers to self-efficacy for improving diet quality of all older adults.

Funding: University of Maryland Extension.

P120 Children with Autism Spectrum Disorder Who Are Picky Eaters May Consume More Ultra-Processed Foods than Non-Picky Eaters

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Background: Ultra-processed foods may induce high energy intake that leads to excess weight gain, which can be problematic for children with autism spectrum disorder (ASD), as the prevalence of obesity is higher in this population than typically-developing children. Picky eating is also more common in children with ASD compared to typically-developing children, yet how picky eating is associated with types of food that children with ASD consume is unknown.

Objective: To examine associations between picky eating and food categories by NOVA classifications (unprocessed foods vs ultra-processed foods) among youth with ASD.

Study Design, Setting, Participants: A cross-sectional study conducted with 42 parents of children with ASD ages 2-17 years in Florida.

Measurable Outcome/Analysis: A food record and mealtime behavior survey were completed by a parent of each child. Foods were coded based on NOVA classifications, and percent energy from each food category was assessed using the Nutrition Data System for Research (NDSR) software. Parent-reported picky eating was assessed with a mealtime behavior survey. Descriptive statistics and Mann-Whitney U tests were performed.

Results: Ultra-processed foods accounted for the majority of the children's energy intake (mean 62.6%). Picky eaters had greater percent energy intake from ultra-processed foods ($P = .004$, mean 68.7% vs 48.0%) and lower percent energy intake from unprocessed foods ($P = .001$, mean 23.4% vs 44.7%) compared to non-picky eaters. Among the picky eaters, 5 were also considered as binge eaters, which was associated with greater percent energy intake from ultra-processed foods ($P = .032$, 79.4% vs 60.0%) and lower percent energy intake from unprocessed foods ($P = .041$, 14.8% vs 32.1%) compared to those who were picky eaters but not binge eaters and non-picky eaters combined.

Conclusions: Among youth with ASD, picky eaters may selectively eat more ultra-processed foods. Nutrition

education for children with ASD and their parents should address both picky eating behaviors and types of foods. If children have disordered eating behaviors such as binge eating, further intervention may be necessary.

Funding: None.

P121 New Perspectives on Breastfeeding: A Review of the Role of Trauma Among Mothers with a History of Child Maltreatment

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Background: Current efforts to increase optimal breastfeeding rates focus on the multitude of physical benefits for both mother and child, but do not necessarily explicitly take into account the mother's mental health. Women with their own history of childhood maltreatment are especially vulnerable, yet little is known about their experience breastfeeding. A better understanding of this relationship is critical to be able to better support mothers.

Objective: To review current research that examines how women's personal experience of child maltreatment affects their breastfeeding outcomes and experiences.

Study Design, Setting, Participants: A scoping review was conducted to evaluate current literature on breastfeeding and child maltreatment. After the screening process ($n = 275$), 8 ($n = 8$) articles met the selection criteria and were included in the review.

Measurable Outcome/Analysis: Articles were analyzed for content on breastfeeding intention, initiation, duration, and exclusivity; medical conditions associated with breastfeeding; and mothers' experiences related to breastfeeding.

Results: Mothers with a history of their own childhood maltreatment had both decreased exclusivity and duration of breastfeeding. These mothers were more likely to report pain and experience mastitis. Challenges during this period include managing touch, struggling with the power differential between providers and women, and coping with trauma symptoms, such as dissociation. Overall, mothers' experience of breastfeeding varies: some find it empowering and others experience great distress while breastfeeding.

Conclusions: For some mothers, it is possible to breastfeed successfully after child maltreatment, but others find the experience distressing. There is a need for a trauma-informed approach to lactation care for women with a child maltreatment history.

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