P128 (continued)

tary, physical activity and food resource management behaviors of limited resource individuals to decrease their risk of chronic diseases. Several SNAP-Ed nutrition curricula are known to be effective at changing participants' short-term behaviors. However, less research has been done to determine the long-term effectiveness of such curricula on behavior change.

Objective: The objective of this study was to evaluate the long-term effectiveness of the Utah's Create Better Health adult nutrition curriculum 6 months after participants completed the program. Impact on nutrition, physical activity, food safety, and food resource management behaviors were evaluated.

Study Design, Setting, Participants: Adult participants ($n = 150$) in SNAP-Ed classes were contacted via e-mail or phone 6 months after completing a series of 4-8 Create Better Health classes. Participants completed a 24-question retrospective pre-post survey. Survey respondents were asked 24 nutrition, physical activity, and food resource management questions.

Measurable Outcome/Analysis: Respondents were asked to identify the frequency of behaviors prior to and after participating in the Create Better Health series. Questions included the frequency of making healthy food and physical activity choices consistent with the Dietary and Physical Activity Guidelines for Americans. Food resource management practices were also assessed. Responses were compared using paired t-tests and effect size was calculated using Cohen's d .

Results: Respondents reported statistically significant improvements in several behaviors 6 months after participating in Create Better Health classes including consuming recommended amounts of fruits ($P < .001$, $r = 1.01$), vegetables ($P < .001$, $r = .85$), stretching food dollars to last the month ($P < .001$, $r = .56$), and being active for at least 30 minutes 5 times a week ($P < .001$, $r = .85$).

Conclusions: Utah SNAP-Ed's curriculum, Create Better Health, helps adult participants make and sustain healthy behavior changes for at least six months after participating in classes. This long-term behavior changes may help reduce some of the health disparities often experienced by limited resource individuals.

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P129 Web-Based Nutrition Education Module for Health Professions Students

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Objective: To demonstrate efficacy of a web-based intervention on nutritional counseling for medical, nursing, and health professions students in improvement in 2 areas: objective nutrition knowledge and self-reported confidence in providing nutrition counseling.

Use of Theory or Research: Chronic diseases affect most of the US population and are linked to dietary risk factors, making it crucial for future cohorts of health professionals to provide quality nutritional counseling for patients.

Target Audience: Health professions students from the following schools at The University of Texas Health San Antonio (UTHSA): School of Medicine, Nursing, Health Professions.

Program Description: A 45-minute online lecture on nutritional counseling was created with principles from the USDA Dietary Guidelines, MyPlate, and DHHS Physical Activity Guidelines, and advised by MD and RD/LD faculty at UTHSA, and University of Texas San Antonio, respectively.

Evaluation Methods: Pre-post surveys composed of a 14-question knowledge assessment (KA) based on the lecture intervention and a 15-question self-reported confidence assessment (CA) were administered. CA questions were formatted on a 7-point Likert scale, and confidence was assessed in 4 areas: providing nutrition counseling to others, using nutrition guidelines (USDA, DHHS), counseling evidenced-based diets (DASH, Mediterranean), and satisfaction with current nutrition knowledge. Paired t test and 95% confidence intervals were used to assess improvement in nutritional counseling knowledge and confidence.

Results: Twenty-six health professions students fully completed the pre-post survey and lecture intervention. Fifty-four percent were medical students, 27% nursing students, and 15% health professions students. KA score significantly improved from 9.8 baseline to 12 post-intervention ($P < .01$, $t = 6.25$). Confidence in providing nutrition counseling to strangers significantly improved by 1 point on a 7-point Likert scale (95% CI [0.43, 1.18]). Furthermore, confidence in providing nutrition counseling utilizing USDA and DHHS guidelines, motivational interviewing, dietitians, and evidence-based diets all significantly improved from baseline at the $P < .01$ level post-intervention.

Conclusions: Results indicate that health professional students significantly improved their nutritional counseling knowledge and confidence after the intervention, which can simulate more nutritional counseling conversations with patients.

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P130 Nutrition Education With Seniors (NEWS)—Helping Older Adults with Limited Resources Make Informed Food Choices

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