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Evaluation Methods: Semi-structured interviews were conducted, transcribed verbatim, and coded deductively by 3 coders using RE-AIM dimensions as a priori codes and placed into sub-themes and themes using thematic analysis.

Results: All participants perceived EAT Family Style improved children's nutritional and developmental outcomes and encouraged a positive mealtime environment (Effectiveness). Coaches and directors reported EAT Family Style aligned with their professional goals and beliefs. Coaches found incentives to PD important, whereas directors/teachers valued in-service hours followed by other incentives (Adoption). Teachers reported successful implementation of EAT Family Style practices in the classroom. Directors and coaches supported the teachers through administrative and coaching strategies (Implementation). All participants reported they intended to continue using the intervention. Directors and teachers discussed incorporating EAT Family Style practices into handbook/school policy (Maintenance).

Conclusions: EAT Family Style was viewed as feasible by participants. Its implementation strategy has the potential to improve the uptake of evidence-informed feeding practices in childcare centers.

Funding: USDA.

P137 Evaluation of Social Marketing Campaign to Improve Fruit and Vegetable Intake in SNAP-Ed Eligible Adult Georgians, 2017-2019

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Background: Social marketing (SM) has the potential to deliver nutrition education messages targeted to low-income individuals, but limited evidence is available on its feasibility in SNAP-Ed programs.

Objective: To examine the process and impact of the Partnership for a Healthier America's FNV campaign to promote fruit and vegetable consumption in SNAP-Ed eligible adults in Georgia during the 3 consecutive summers in 2017-2019.

Study Design, Setting, Participants: Process evaluation was conducted throughout the campaign using commercial administrative data reporting tools. After each year's FNV campaign, outcome and impact evaluation implemented the same self-administered post-intervention survey using 3 modalities (ie, online, intercept, and direct mail surveys) while employing a non-randomized control study design (2017-2018) or one-group posttest-only design (2019). During the 3-year campaign, 1,904 Georgians (mean age 49.3 ± 16.6 , 77.9% female, 62.6% minority, 82.6% from intervention counties) from

7 intervention and 3 control counties participated in the survey.

Intervention: Each year's FNV campaign used a mix of billboards, radio ads, newspaper ads, food retail ads, and Facebook available in the selected SNAP-Ed eligible zip code areas to saturate FNV messages while partnering with local stakeholders including County Extension Agents.

Outcome Measures/Analysis: Process evaluation estimated program reach, impressions, dosage, and engagement. Outcome and impact evaluation assessed participants' awareness and intention to change due to campaign exposure.

Results: Over the 3 summers, the FNV campaign reached over 2 million people and generated 10.3 million impressions with 154,403 engagements and provided critical process evaluation data on the successes and challenges of the programmatic and evaluation strategies tested. Those exposed to the FNV campaign were more likely to report willingness and actual behaviors of eating of >1 fruits and vegetables/day than those not exposed.

Conclusions and Implications: The findings of the 3-year FNV campaign suggest the feasibility and impact of SM for low-income audiences and will inform a new statewide SNAP-Ed SM intervention development in Georgia.

Funding: Supplemental Nutrition Assistance Program - Education.

P138 An Exploration of Nutrition Education Needs and Barriers of Uninsured Clients of Free Clinics in Western North Carolina

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Background: North Carolina has an uninsured population of 10.7%, the tenth highest in the country, and many uninsured adults must rely on free health clinics for prevention and treatment of chronic disease. However, little is known about the nutrition education needs of uninsured adults served by free health clinics, and potential acceptable strategies for intervention.

Objective: To conduct a needs assessment in western North Carolina to explore nutrition education needs, internet access, barriers, and feasibility of potential nutrition interventions for adults served by free health clinics.

Study Design, Setting, Participants: A semi-quantitative survey was distributed to 156 clients in waiting rooms of 2 free health clinics in western North Carolina.

Measurable Outcome/Analysis: Descriptive analyses were conducted using IBM's SPSS version 26 to determine frequencies for demographics, current nutrition knowledge, barriers, and internet access.

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Results: Roughly 60% of participants were female with an average age of 45 (± 12.81), and the majority were Caucasian (81%). Nearly one-third of participants requested interventions focused on managing diabetes (32%), hypertension (39%), and heart disease (32%). Most participants were interested in interventions focused on produce (87%) and recipe ideas (73%). Barriers to cooking included: budgeting/cost, time constraints, lack of access to food and cooking equipment, disabilities, and homelessness. The majority reported having regular access to smartphones (70%), internet (60%), and were open to receiving nutrition education through social media (41%) and online videos (43%).

Conclusions: This study adds to the limited body of literature on nutrition education needs and potential strategies/foci of intervention for uninsured adults who rely on free health clinics. Results suggest nutrition interventions should work alongside clinics to address equipment and food access to facilitate the preparation and selection of healthier items. Additionally, future interventions could leverage online modalities to support and enhance in-person nutrition education offered through clinics.

Funding: None.

P139 A Trauma-Informed Approach to Charitable Food Distribution: The Nutrition Pantry Program

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Objective: This study's objective was to evaluate the change in environment, inventory, policies, services, and overall healthy scores of pantries in the Nutrition Pantry Program (NPP), a trauma-informed policy, systems, and environment (PSE) intervention.

Use of Theory or Research: One out of 8 Californians faces food insecurity and 1 out of 7 utilize food pantries. This population also faces higher rates of diet-related diseases and traumatic experiences related to food insecurity. NPP utilizes behavioral economics, trauma-informed principles, and the transtheoretical model of change to create environments that promote healthy choices and mitigate retraumatization.

Target Audience: NPP is open to all California pantries; participants included 53 pantries during 2018 and 2019 within the following settings: faith-based, higher-education, general social services, housing, and K-12.

Program Description: NPP provides a framework for pantries to provide trauma-informed nutrition security, and lasts on average 10 months. Pantries start by completing the Healthy Food Pantry Assessment Tool (HFPAT) and a client needs assessment and obtaining client feedback. Next, a personalized work-plan is created, and trainings, technical support, and resources are provided.

Evaluation Methods: The HFPAT is a validated survey used to evaluate PSE initiatives in pantries. Those using the tool viewed a 2-hour instructional webinar. Researchers analyzed pre- and post-HFPAT scores to evaluate the effectiveness of NPP on pantry practices.

Results: Fifty-three pantries completed a baseline HFPAT and 19 completed a follow-up HFPAT. On average, overall healthy scores increased by 9 points, with the most improvements in the "Food Distribution to Clients" and "Policies" sections. Sections with the lowest improvements include "Frozen Foods" and "Services for Clients."

Conclusions: When given a framework, technical support, and resources, pantries are able to improve their overall "healthy" score by using PSE and trauma-informed interventions. Pantries are, however, limited on changes requiring larger infrastructure investments, such as increased refrigeration/freezer space and increased staff time for support services.

Funding: Bob and Dolores Hope Foundation; CalFresh Healthy Living.

P140 Get the Good Stuff in NYC: Baseline Survey Findings of a Supermarket-Based Nutrition Incentive Program

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Objective: The objective of this study was to assess participant characteristics and evaluate usage of a fruit and vegetable (FV) incentive program for people with Supplemental Nutrition Assistance Program (SNAP) benefits at 4 supermarkets in New York City (NYC).

Use of Theory or Research: In 2017, NYC residents with low incomes reported consuming 1 serving less of FV per day on average than those with high incomes (3.1 vs 2.1). Cost is a barrier to healthy eating and research shows that financial incentives are a promising tool for making produce more affordable. A recent study demonstrated that offering a \$0.30 match on every SNAP dollar spent on FV resulted in nearly a quarter-cup increase in consumption.

Target Audience: NYC residents enrolled in SNAP at 4 participating supermarkets.

Program Description: Utilizing supermarkets' electronic point-of-sales systems and customer loyalty technology, participants get a dollar-for-dollar match on SNAP purchases of eligible FV. The electronic infrastructure streamlines incentive distribution and benefits are extended beyond fresh produce to frozen and canned FV and dried beans.

Evaluation Methods: At baseline, a 13-question survey collects participant demographics and supermarkets report incentive distribution and redemption monthly.

Results: From June 2019 through January 2020, 3,159 individuals enrolled in the program. The mean participant

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