

P12 (continued)

HAES paradigm, while also addressing diversity and social justice. Social Cognitive Theory was used to guide the development of the HAES GE course. Students studied the impact environmental cues can have on body image and health behaviors and modeled HAES patterns to peers.

Description: Health at Every Size®: A non-diet approach to wellness provides an overview of social, cultural and environmental influences of body esteem. Topics include size discrimination, body dissatisfaction, intuitive eating and activity.

Evaluation: Changes in dieting patterns, intuitive eating scores, body esteem scores, and anti-fat attitudes of students enrolled in the course compared to students in a traditionally taught nutrition course will be presented.

Conclusions and Implications: Data analysis is in progress, though essays written by students in the HAES GE course post intervention suggest notable shifts in attitudes surrounding anti-fat bias and lower body dissatisfaction. GE courses should be considered for implementing HAES interventions.

Funding: None.

P13 Wise at Every Size: A Program for Women of Southeast Alaska to Increase Fitness & Reduce Chronic Disease Risk

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Objective: Develop a Health at Every Size®-oriented lifestyle intervention curriculum. Invite SEARHC WISEWOMAN Program participants to attend the group intervention, and provide pre- and post-intervention screenings for fitness level, blood pressure, glucose, and cholesterol. Reduce clinical CVD risk, as measured by the Framingham Formula.

Target audience: Alaska Native and low-income, rural non-Native women living in Southeast Alaska, enrolled as WISEWOMAN program participants.

Theory, Prior Research, Rationale: Health at Every Size® recognizes that dieting is ineffective, and has proven to be more effective than dieting in the long-term with regard to sustained decreases in blood pressure and cholesterol levels (Bacon, L. et al., *Journal of American Dietetic Assoc*: 2005).

Description: Wise at Every Size (WAES) was designed to provide support for women to increase fitness and reduce risks of chronic disease. The eight-session WAES group intervention curriculum included a combination of patient-centered nutrition counseling, social support, self-esteem and positive body image education using a Health at Every Size® emphasis. Physical activity promotion through collaboration with the WISEWOMAN program was an important element.

Evaluation: Outcome evaluation included analysis of pre- and post-intervention clinical screening measures,

cardiorespiratory fitness measure changes, and participant satisfaction evaluations of the intervention experience.

Conclusions and Implications: Out of 200 participants, 176 women completed pre-and post-screenings. Proxy fitness scores (2 minute step-test) improved by 18%, and the mean 10 year CVD All Risk (Framingham formula) Score decreased by 2.33 points. The majority of participants reported acquiring new knowledge, improved body image, and increased time spent being physically active. In 2010, The Indian Health Service recognized WAES as a best-practice in diabetes prevention.

Funding: CDC-WISEWOMAN, HRSA, Southeast Alaska Regional Health Consortium.

P14 Overcoming Economic Barriers to Implement International Nutrition Education in an Urban University

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Objective: The goal was to develop learning opportunities in our university curriculum that focused on international nutrition issues and behaviors.

Target audience: University honor students, freshmen, and dietetic students were the targeted recipients of the new international nutrition initiatives.

Theory, Prior Research, Rationale: The university curriculum offered limited exposure to international nutrition while interest in this area by our faculty, and current and future students was increasing. In an urban, state-funded university faced with budget reductions, program eliminations, and decreasing state revenues, implementing new initiatives was unlikely.

Description: Despite economic barriers at the university, opportunities surfaced to implement several international nutrition education curricula that included: a Global Issues course through the University Honors Program; a Global Nutrition course through the University Fresh Connections Initiative; and, several faculty-led Nutrition Study Abroad Programs through the University International Programs Office. The annual opportunity for faculty to submit proposals for consideration by these three programs (Honors, Fresh Connections, and International Programs) provided new venues that had previously been untapped by nutrition faculty. University Honors students now have lectures on World Hunger and Cultural Foods; freshmen may enroll in a Global Nutrition course; and, dietetic students may participate in an annual faculty-led Nutrition Study Abroad Program.

Evaluation: Contrary to our expectations, the number of international nutrition education curricula can increase despite financial challenges at universities by thinking outside the box.

Conclusions and Implications: Identifying existing university resources that were previously untapped enabled the expansion of international nutrition education at one university.

Funding: None.