

P007 Medical Providers' Management of and Messaging for Adolescent Hypertension Recommendations to Low-income Families

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Background: Poverty affects approximately 1 in 7 children in the US. Although social determinants of health (SDOH) have been shown to have a detrimental effect on children's health status, medical providers often focus on recommending lifestyle changes without considering social implications that may pose a challenge for patients.

Objective: To examine the processes used and barriers experienced by providers when addressing adolescent hypertension and to identify how SDOH influences exam room messaging to families.

Study Design, Setting, Participants: Semi-structured private phone interviews (n=12) were conducted with medical providers (MD, DO, PA, NP) who treat adolescents in North Carolina. Participants were recruited through North Carolina Pediatric Society listserv, Federally Qualified Health Centers, three academic medical centers, and three major healthcare systems. The interview guide was content and face validated prior to use.

Measurable Outcome/Analysis: Interviews were audio-recorded and transcribed verbatim. Content analysis of member-checked transcripts revealed main themes and consensus was reached between four reviewers.

Results: Main themes included variation in monitoring blood pressure in adolescents, level of comfort associated with HTN diagnosis and management, approaches to weight and diet-related chronic disease discussions, SDOH data collection and influence on provider messaging, and resources desired. Providers had variable approaches to managing hypertension with greater comfort in recommending lifestyle changes than prescribing medications. Collection methods related to SDOH varied and these factors were used differently among providers with most considering access to food and safe space to exercise in their messaging to families.

Conclusions: Management of adolescent hypertension is challenging because providers must consider clinical symptoms and unmet social needs when making recommendations to their patients. Altering messages to meet families where they are and providing referrals to appropriate community resources supports patients in their efforts to make changes. Providers identified barriers and opportunities for improvement which should be further investigated to improve overall patient care.

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P008 ArFoods in the Garden: A SNAP-Ed Educational/PSE Strategy

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Objective: To implement a nutrition, gardening-based pilot project in SNAP-Ed eligible schools that incorporates direct education, indirect education, and PSE

Use of Theory or Research: Studies show garden-based nutrition education combined with healthy food marketing has potential to improve children's diet quality and is associated with more positive food choices.

Target Audience: K-5th grade students, teachers in 4 SNAP-Ed eligible schools.

Program Description: University of Arkansas Division of Agriculture Cooperative Extension Service SNAP-Ed Program developed Arkansas Foods (ArFoods) to highlight locally grown foods. ArFoods consists of nutrition education posters, newsletters, and taste-testing activities that can be used alone or in conjunction with evidence-based curriculum. During Farm to School month 2021, ArFoods was used in school gardens. "ArFoods in the Garden" pilot project consisted of 34 individual events in 4 schools reaching 713 youth. Nutrition education posters featuring spinach were printed on corrugated plastic and used as crop markers. MyPlate resources were used, along with taste tests and physical activity breaks. Posters were displayed in cafeterias, and parent newsletters were sent home with students.

Evaluation Methods: Post-teacher survey used to assess value and effectiveness of pilot project, changes in eating habits of students and teachers, and PSE changes adopted. Students surveyed about whether they would try spinach again.

Results: All teachers (n=6) reported the program was very valuable to their students; their students seemed more willing to try new foods. Among student respondents (n=288), 80.9% indicated they would try spinach again. Among teachers, five (83%) reported because of program they were motivated to try new foods, eat healthier, and/or be more physically active; four (67%) reported making changes in classrooms.

Conclusions: This pilot project was an example of how multiple delivery methods (direct education, indirect education, policy, systems, and environmental) can be incorporated into SNAP-Ed approaches. The project was successful in increasing students' and teachers' willingness to try new healthy foods and/or be more physically active.

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