**Program Description:** SI is a healthy aging program comprised of six standalone food and health modules. It was created in Iowa and adapted for cultural appropriateness for Louisiana delivery. In 2022 SI was offered virtually and face-to-face (F2F) in Iowa and Louisiana.

**Evaluation Methods:** Participants completed a retrospective survey immediately after the session they attended (n=421 responses). Descriptive statistics assessed sociodemographic attributes and level of likelihood for change. One-way ANOVA examined sociodemographic differences by state, POST familiarity, and program modality. Crosstabs tested for differences in age, race, and likelihood of action by state and program modality. Wilcoxon signed-rank tests assessed change in familiarity.

**Results:** The participant group was predominantly White (75.7%), female (83.4%) aged 70+ years (83.6%), from Iowa (73.7%). Louisiana was more diverse than Iowa (p<0.00001). Many (80.2%) attended a F2F session. More White participants attended a virtual session compared to persons of color (p<0.00001). Familiarity with each module topic increased from PRE to POST (p<0.05). At least one-third were “likely or very likely” to make at least one behavior change related to protein, exercise, brain health, and eating three meals daily. No differences in the likelihood of making at least one recommended behavior change were detected by state or program modality. Higher POST familiarity was detected for those who attended virtual sessions compared to the face-to-face respondents for 3 meals, produce, protein, and physical activity (p<0.05).

**Conclusion:** These outcomes indicate that as conducted virtually or F2F, in Iowa or Louisiana, SI is effective in improving familiarity with health-promoting behaviors and boosting the likelihood of behavior change.

**Funding:** None

---

**Supporting Policy, Systems, and Environmental Change Interventions With Mini-Grant Funding: a Process and Outcome Evaluation**

Matthew Greene, PhD, RD, MSPH, mgreene@agcenter.lsu.edu, Louisiana State University Agriculture Center; Denise Holston, PhD, RDN, LDN, Louisiana State University Agriculture Center

**Background:** The Louisiana Healthy Communities Initiative (LHCI) promotes healthier nutrition and physical activity environments through community-led policy, systems, and environmental (PSE) changes. Selected communities implementing LHCI received mini-grant funding to support PSE change projects.

**Objective:** To identify barriers and facilitators to the implementation of PSE projects supported by mini-grant funds and to determine the qualitative outcomes of those projects.

**Study Design, Settings, Participants:** Implementers of 17 PSE projects completed an online Qualtrics survey consisting of open-ended questions which asked participants to summarize work done using the funds, barriers and facilitators to their work, their perception of the impacts of the project, and any plans for sustainability of the PSE changes made.

**Measurable Outcome/Analysis:** Two independent coders coded survey responses with an inductive approach using initial, structural, and in-vivo coding to allow meaning to emerge from participant responses. Codes were grouped into higher level themes and member checking with participants was used to verify findings.

**Results:** Participants described impacts from mini-grant funding which went beyond the locations where PSE changes were implemented, including changes to systems at schools and community centers to support ongoing use of gardens and walking trails. Barriers to implementation included purchasing difficulties and miscommunications with partner organizations. Facilitators included assistance from external and internal partners to provide labor and administrative support. All respondents reported sustainability plans that included community partners agreeing to maintain or take control of PSE change projects. Demonstrating successes through these projects led to partners having an increased interest in future PSE change work and increased engagement with implementers.

**Conclusion:** Small amounts of funding to support PSE changes projects may contribute to sustainable PSE changes and encourage community involvement in future PSE change projects. Implementers should take into account both the difficulties and benefits that arise from partner involvement in PSE change projects.

**Funding:** Supplemental Nutrition Assistance Program - Education

---

**The Development of a SNAP-Ed Social Marketing Campaign Rooted in Cultural Inclusion**

Fatima Tobar, BS, ftobar@uri.edu, University of Rhode Island; Kate Balestracci, RDN, PhD, University of Rhode Island; Rachel Oliva, BS, University of Rhode Island; Heidi Hetzler, MS, RDN, University of Rhode Island; Jessica Meuleners, RDN, MS, University of Rhode Island; Margaret Samson, RD, MS, University of Rhode Island; Amin Sarah, PhD, MPH, University of Rhode Island

**Background:** The University of Rhode Island (URI) SNAP-Ed program provides nutrition education based on the USDA Dietary Guidelines to income-eligible individuals. Social marketing campaigns apply consumer marketing principles including a population-wide strategy to promote healthy eating messages.

**Objective:** The objective of this study was to develop and test social marketing campaign nutrition messages designed for racially and ethnically diverse communities in RI.

**Study Design, Settings, Participants:** This formative and summative research used a mixed methods design and applied a cultural and racial equity lens to ensure that the campaign was informed by community partners and income-eligible adults representing diverse groups across RI. Methods included virtual key informant interviews (KIs) with community partners, along with surveys and

Continued on page S90
A/B testing in English and Spanish with adults at food access and community sites.

**Measurable Outcome/Analysis:** KIIs with community partners focused on successes and barriers to reaching and engaging with diverse audiences through social marketing channels. Adults completed a 12-question survey to capture how they access food and healthy eating information and what is most important when seeking this information. A/B testing of the two bilingual slogans and taglines ensured the messaging resonated with the community. In-depth notes of KIIs were analyzed through thematic analysis. Frequency and descriptive statistics were used to analyze survey data using SPSS 27.

**Results:** Nine community partners participated in the KIIs. Themes included: (1) barriers to reaching SNAP-Ed audience; (2) unique strategies for overcoming barriers to expand audience engagement; and (3) prominent modes for communication. Adult survey participants (n=75) revealed that fruits and vegetables and healthy recipes were the most desired topics, with their preferred mode of communication being social media followed by family/friends.

**Conclusion:** Overall, study results informed a campaign rooted in cultural inclusion that focuses on fruits and vegetables and food resource management, disseminated through multiple modes of communication. Future directions include piloting the campaign, coupled with in-person education, to assess its impact on behavior change among income-eligible individuals.

**Funding:** Supplemental Nutrition Assistance Program - Education

---

**The Imperative for Resident Clinical Nutrition Education and Practical Training: A Call to Action From Community Frontlines**

*Ramona Wallace, BS, D.O. IFMCP, ramona.wallace@med.wmich.edu, Western Michigan University Homer Stryker M.D. School of Medicine; Janet Mindes, Ph.D., Western Michigan University Homer Stryker M.D. School of Medicine; Irfan Furqan, MBBS, MBA, PhD, MSUCOM; Holli Neiman-Hart, MD, Western Michigan University Homer Stryker M.D. School of Medicine; Mahmudur Rahman, MD, Western Michigan University Homer Stryker M.D. School of Medicine; Kari Watts, DO, Western Michigan University Homer Stryker M.D. School of Medicine; Hesamaddin Shakourianfard, MD, Western Michigan University Homer Stryker M.D. School of Medicine*

**Objective:** Primary care/community medicine residents need enhanced training in nutrition and health: to improve patient nutrition for better health outcomes, to strengthen physician efficacy and morale, and reduce unnecessary interventions and healthcare costs.

**Use of Theory or Research:** Extensive research establishes the significance of nutrition: for short- and long-term health; prevention of chronic illnesses and micronutrient deficiency diseases (eg, beri beri, scurvy); clinically significant co-factors in chronic disease include micronutrient deficiencies. Expanded evidence-based nutritional health curricula are needed.

**Target Audience:** Primary care/community medicine residents; community patients.

**Program Description:** The presenter established the first Functional Medicine residency program track, focused on patient health through improved nutrition and lifestyle. Expanded nutrition curricula will better equip residents to: implement routine nutritional assessment, diagnose malnutrition, identify specific deficiency syndromes and risk factors for deficiencies, elicit a 24-hour food recall, do micronutrient testing at intake; and implement as-needed micronutrient supplementation, patient nutrition education, and outcomes monitoring. Residents will continue to contribute to a registry of nutritional deficiencies in their clinic population for ongoing surveillance. Patients will give feedback about how this new program affects them and their relationship with their healthcare team.

**Evaluation Methods:** The new training’s impact will be evaluated qualitatively and quantitatively through resident: questionnaires, academic performance, feedback on quality and relevance of curricula, and patient outcomes; and by patient interview feedback on the nutrition intervention.

**Results:** Pilot data from one small cohort of residents, to be presented at SNEB, revealed minimal exposure to nutrition training in medical school, yet the conviction that nutritional health strategies are important and needed; additional data will be available for the conference. Going forward, residents, and patients, will contribute questionnaire and interview data to be published.

**Conclusion:** Enhanced training in nutrition and health is crucial to support an effective, updated primary care model and should result in improved physician competency, self-efficacy and better patient outcomes, with the potential to lower healthcare costs.

**Funding:** None

---

**Withdrawn**