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.

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

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**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.

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**Withdrawn**