Garcia (continued)

sessments. To date, 59 youth and their caregivers have participated in the study. Preliminary findings show increases in vegetable intake and reductions in sugar-sweetened beverages and fast-food consumption. A total of nine student fellows have engaged in research, training, and professional development, showing increased skills and efficacy in community-based research.

Conclusions and Implications: Eat, Play, Go! is a promising culturally tailored intervention focused on increasing healthy lifestyles among Latinos.

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Expanding Nutrition Student Competency in Telehealth to Improve Diet and Prevent Chronic Disease in Adults With Obesity: Year 1
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Objective: The objectives of this four-year integrated research and education project are 1) to develop, implement and evaluate a telenutrition intervention that includes student-delivered health coaching and 2) to use competency-based training and experiential learning activities to prepare future nutrition professionals to provide virtual nutrition coaching for chronic disease prevention.

Description: Year 1, the developmental phase, included designing intervention components and amending the educational materials that were previously pilot tested in men. Additionally, the curriculum for one of a series of competency-based telenutrition courses for chronic disease prevention was developed and is being pilot tested. In the implementation phase, all participants will receive a nutrition prescription and counseling by a registered dietitian (RD), educational materials, and in-person assessments at months zero, three, six, 12, and 18. Participants assigned to the high-intensity group will receive support from an RD through five virtual medical nutrition therapy (MNT) encounters and 15 telephonic nutrition student coaching sessions. The low-intensity group will receive three virtual MNT encounters and four nutrition-coaching sessions.

Evaluation: The project will use a randomized comparative effectiveness intervention design to evaluate the program under the two levels of intensity on primary outcomes (knowledge, self-efficacy, diet quality, and weight change) and secondary outcomes (health-related quality of life and risk factors for cardiovascular disease). An incremental cost-effectiveness ratio will also be determined. Additionally, competency-based courses will be evaluated using both formative and summative assessments.

Conclusions and Implications: This project is expected to represent an essential step toward increasing access to nutrition care and dietary counseling for improvements in diet quality and reaching and maintaining a healthy weight, which ultimately reduces comorbidities, improves the quality of life, and reduces healthcare costs. Additionally, by educating and training students to provide virtual nutrition coaching as part of the program, we will improve the knowledge and skills of future nutrition care professionals and contribute to the program’s sustainability.

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HCRC 2022: A Novel Conference Approach for Disseminating Information on Assessing the Healthfulness of College Campuses
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Objective: The goal of the conference was to disseminate education and assessment tools that can help professionals more effectively assess their college environments and develop health promotion interventions/programs.

Description: This online, three-day conference brought people together who wanted to assess and create healthy behaviors and positive environmental supports on college campuses. Speakers shared information on tools that can be used to assess the healthfulness of the college campus and students’ behaviors. Speakers also shared interventions/program approaches that can be used to improve behaviors and environmental factors that support healthy behavior.

Evaluation: The conference was attended by 199 participants from 51 different universities (including seven administrators, three community partners, six extension professionals, 52 faculty members, 64 graduate students, 43 undergraduate students, 20 health and wellness professionals, and four staff members) and brought together 22 speakers from across the nation. All of the participants who attended sessions and completed feedback surveys provided positive evaluations.

Conclusions and Implications: The conference format was successfully implemented and well received by attendees. Research is needed to assess impacts of attending the conference on the attendees’ future health-related assessments and intervention efforts. If a similar conference is repeated, efforts are needed to attract more non-faculty and student attendees (specifically more administrators, community partners, extension professionals and health and wellness professionals).

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Impact of Food Retailers’ Presence and Composition on Nutritional Equity and Health Outcomes in the United States With Machine Learning
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Objective: Many studies find evidence of nutritional inequality in the United States—that is the association between low access to healthful food and low-income or non-White population. However, the findings are not causal: we do not know whether the residents of the low-income non-White neighborhoods are choosing unhealthful diets because of the lack of access, or large food retailers with a variety of healthful options choose not to locate in the neighborhood due to lack of demand. The current project conducts an in-depth analysis for policy generation.

Description: First, we derive the conditional probabilities of each type of food retailer, eg, grocery or fast-food restaurants, that locates in a certain region, given the demographic and regional features. Second, we calculate the rate of substitution between two types of food retailers to understand the dietary preferences of residents. Third, if one type of food retailer is present, we assess how it affects residents’ dietary and nutritional choices, such as fresh vegetable consumption.

Evaluation: We use the COVID-19 lockdown and store closures for causal inference. Household food purchase information is obtained from scanner data. We use cell-phone mobility data to track available food stores in a region, and machine learning models for improved prediction. Finally, we evaluate the impact of the presence of various food retailers and their composition in the neighborhood on diseases that might be influenced by dietary choices, such as diabetes, obesity, and cardiovascular diseases.

Conclusions and Implications: Machine learning results indicate that demographic features and neighborhood amenities of census tracts predict food retailer type in 72-92% of the out-of-sample cases. Store types are complements rather than substitutes: there is a positive association between the density and popularity of all store types, ie, grocery stores’ presence or visitors are positively associated with those of fast food retailers. However, a large grocery’s presence has a negative association with diabetes and obesity, whereas a convenience store’s presence has a positive association. The estimation of the causal effects of store closure is underway.

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Implementation Strategies for Extension’s Rural Healthy Eating and Active Living Policy, Systems, and Environmental Changes

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Objective: To identify and tailor implementation strategies (methods or techniques to move research to practice) to support Louisiana Cooperative Extension Services (LCES) Family and Consumer Sciences (FCS) practitioners’ delivery of rural healthy eating and active living policy, systems, and environmental (PSE) changes.

Description: LCES is charged with bridging innovations to communities. The prioritization of complex healthy eating and active living PSE changes has the potential to remove upstream barriers for rural Louisianans to meet public health guidelines; however, FCS practitioners have historically focused on direct education. Implementation strategies tailored to LCES FCS could help overcome challenges to PSE change delivery and support scaling.

Evaluation: A formative assessment was used to: identify barriers and facilitators to FCS practitioners’ delivery of PSE changes; and select and tailor implementation strategies to support FCS practitioners. First, focus group discussions following the updated Consolidated Framework for Implementation Research (CFIR) were conducted at 2022 LCES FCS regional trainings. The CFIR is an implementation science determinant framework with multi-level constructs to represent the LCES organization, rural communities, healthy eating and active living PSE changes, and implementation actors/partners. FCS practitioners (n = 40) described more barriers (n = 1,002) than facilitators (n = 399); barriers were often related to LCES communication channels, consistent access to information, and organizational culture, as well as rural community partnerships/context. Results were matched to implementation strategies in the Expert Recommendations for Implementing Change (ERIC) compilation and grouped following five classes established by Leeman et al., which resulted in 12 implementation strategies. Second, a survey was created to understand the relative importance of the identified implementation strategies. Distribution is occurring at 2023 LCES FCS regional trainings with an option for follow-up interviews to explore how the most important implementation strategies should be tailored.

Conclusions and Implications: This research-to-practice partnership approach could serve as a model for national CES regarding systematically identifying and tailoring implementation strategies to improve the likelihood healthy eating and active living PSE changes are delivered, sustained, and scaled.

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