Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

Elsevier hereby grants permission to make all its COVID-19-related research that is available on the COVID-19 resource centre - including this research content - immediately available in PubMed Central and other publicly funded repositories, such as the WHO COVID database with rights for unrestricted research re-use and analyses in any form or by any means with acknowledgement of the original source. These permissions are granted for free by Elsevier for as long as the COVID-19 resource centre remains active.
PO54 (continued)

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**Background:** Social participation, including community-based social activities (CBSA), improves self-rated health (SRH) among older adults, which contributes to healthy aging. Social support (SS) and self-efficacy (SE), which facilitate healthy behavior in community settings according to Social Cognitive Theory, were associated with the frequency of attending social activities. However, the association between SS, SE, and the number of CBSAs in which a participant was engaged is not well-known.

**Objective:** This cross-sectional study examined the relationship between the number of engaged CBSAs, SS and SE for community-based social participation, and SRH among community-dwelling older adults.

**Study Design, Setting, Participants:** The data used in this study was collected at community events in a suburb area of Tokyo in Japan in 2018. Among 334 participants, 220 people answered paper-based anonymous questionnaires, and 174 participants aged ≥65 years completed the questionnaires used in this study.

**Measurable Outcome/Analysis:** Responses to 4 questionnaires regarding engaged CBSAs, SS, SE, and SRH were used in this study. The engaged CBSA number was calculated by summing the number of CBSAs chosen from 9 representative CBSA options and the CBSA number listed on an open-ended question asking the other engaged CBSAs. Structural equation modeling examined relationships among SRH (endogenous variable) and the engaged CBSA number, SS, and SE (exogenous variables), with covariates identified by preliminary analyses.

**Results:** The median number of engaged CBSAs was 3 (25 and 75 percentiles: 2, 5). SRH was associated with the engaged CBSA number ($\beta = 0.037, P = 0.049$). The engaged CBSA number was related to both SS ($\beta = 0.373, P < 0.001$) and SE ($\beta = 0.081, P = 0.024$), and the effect of SS was stronger than SE.

**Conclusions:** Enlarging SS for participating in CBSA rather than SE could encourage older adults to participate in diverse CBSAs, which could improve their SRH.

**Funding:** None

Food and Nutrition Policy

PO55 ‘Silver Lining’: Encouraging Outcomes and Perceived Best Practices for Child Nutrition Directors During COVID-19 Pandemic

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**Background:** COVID-19 pandemic school shutdowns impacted child food security. Resilient school meal programs are imperative to cope and persist through shocks and stressors.

**Objective:** To explore unforeseen positive outcomes and determine best practices during the COVID-19 pandemic for child nutrition directors in Mississippi (MS), Louisiana (LA), and West Virginia (WV).

**Study Design, Setting, Participants:** A semi-structured focus group discussion guide was developed based on the resilience capacity model (RCM). Four focus group discussions with child nutrition directors (n = 16) from MS, LA, and WV were conducted to elicit directors’ perceptions of encouraging outcomes during the COVID-19 pandemic and best practices for building resilient school meal programs.

**Measurable Outcome/Analysis:** The discussion guide was tested for content validation by subject experts and face validation by testing the guide in one focus group discussion session. The primary researcher developed a codebook based on the conceptual RCM. Two researchers independently reviewed and coded transcripts to assess interrater reliability. Predominant themes were identified using an inductive and deductive content analysis approach.

**Results:** Encouraging outcomes included acknowledgment of school nutrition staff as essential workers and recognition of child nutrition programs as important for child food security. Best practices recommended by child nutrition directors include effective communication and networking among all personnel from policymakers to staff involved in food preparation and distribution, revision of standard operating procedures to include disaster/pandemic related mitigation strategies, taking initiatives to improve school meal provision process, and emergency management training for everyone involved in school meal provision process. Director recommendations included: in-class food distribution, increased food storage, preparation, and distribution equipment, and developing a best practices policy document for each state with a comprehensive plan for emergency management situations.

**Conclusions:** Future emergency school nutrition policies should encourage efficient communication, revision of existing standard operating procedures, and implement training for all school nutrition personnel.

**Funding:** Achieving Equity Investment Grant 2021 (University of Mississippi)

PO56 Challenges and Successes of a Pediatric Produce Prescription Program During COVID-19

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**Background:** Social participate, including community-based social activities (CBSA), improves social participation, which contributes to healthy aging. Social support (SS) and self-efficacy (SE), which facilitate healthy behavior in community settings according to Social Cognitive Theory, were associated with the frequency of attending social activities. However, the association between SS, SE, and the number of CBSAs in which a participant was engaged is not well-known.

**Objective:** This cross-sectional study examined the relationship between the number of engaged CBSAs, SS and SE for community-based social participation, and SRH among community-dwelling older adults.

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**Results:** The median number of engaged CBSAs was 3 (25 and 75 percentiles: 2, 5). SRH was associated with the engaged CBSA number ($\beta = 0.037, P = 0.049$). The engaged CBSA number was related to both SS ($\beta = 0.373, P < 0.001$) and SE ($\beta = 0.081, P = 0.024$), and the effect of SS was stronger than SE.

**Conclusions:** Enlarging SS for participating in CBSA rather than SE could encourage older adults to participate in diverse CBSAs, which could improve their SRH.

**Funding:** None

**PO56 Challenges and Successes of a Pediatric Produce Prescription Program During COVID-19**

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P056 (continued)

**Background:** A large pediatric clinic in Flint, Michigan, a low-income, urban community, implemented a fruit and vegetable prescription program for youth to address enduring challenges with food access and food insecurity. Approximately 18 months after this prescription program was introduced, the State of Michigan issued a “stay home, stay safe” executive order in response to the COVID-19 pandemic.

**Objective:** This study sought to investigate perceived changes to access and utilization of fruit and vegetable prescriptions as well as general changes in the food environment resulting from the pandemic and related executive order.

**Study Design, Setting, Participants:** Data were collected using semi-structured telephone interviews with caregivers of children (8-18 years of age) who received at least one fruit and vegetable prescription.

**Measurable Outcome/Analysis:** Interview recordings were transcribed verbatim for textual analysis. Using thematic analysis, qualitative data was examined to identify patterns across transcripts and formulate common themes. Interviews concluded when data saturation was reached.

**Results:** Fifty-six caregivers participated in interviews (mean age, 41.3 ± 10.3 years). The majority were female (91%), African American (70%), and residents of Flint (75%). Four recurrent themes, centered around changes in the food environment resulting from COVID-19, emerged: produce prescription access and utilization; food access constraints; food shopping adjustments; and food insecurity stress.

**Conclusions:** The current study highlights stark ramifications of COVID-19, particularly among vulnerable families, many of whom were at elevated risk for food insecurity and hunger prior to the pandemic. Perceived consequences of COVID-19 included increased anxiety related to food shopping and food insecurity alongside challenges with access and utilization of a fruit and vegetable prescription program as pediatric clinics moved to virtual healthcare visits and farmers’ markets closed.

**Funding:** Michigan Health Endowment Fund

P057 Disparities in Food Insecurity Prevalence and Correlates Among Undergraduate, Masters and Doctoral Students

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**Background:** Previous studies have found that the prevalence of food insecurity (FI) in graduate students is lower than in undergraduates. However, few studies have examined FI prevalence or correlates at the master’s and doctoral levels separately.

**Objective:** To compare the prevalence and correlates of FI among undergraduate, master’s and doctoral students.

**Study Design, Setting, Participants:** All matriculated students at a large public northeastern university were invited to complete a cross-sectional online survey in 2019, resulting in a sample of 5,017 undergraduate (85.3%), 581 master’s (9.9%), and 282 doctoral students (4.8%).

**Measurable Outcome/Analysis:** Food insecurity status over the past 30 days was measured using the USDA 18-item Food Security Survey Module. Additional data were drawn from institutional databases (degree level, age, sex, race/ethnicity, first-generation student) and survey questions (loans, financial aid, LGBTQ+). Frequencies and multivariate logistic regressions were conducted separately by degree level.

**Results:** Food insecurity rates were highest for master’s (32.2%) and undergraduate (31.4%) compared with doctoral students (21.6%). For undergraduates, FI risk factors included being older (OR = 1.08 [95% CI 1.05 – 1.10]), Black (OR = 1.94 [95% CI 1.40 – 2.67]), Hispanic (OR = 1.36, [95% CI 1.08 – 1.71]), international (OR = 1.89 [95% CI 1.40 – 2.73]), LGBTQ+ (OR = 1.40 [95% CI 1.15 – 1.68]), first-generation college student (OR = 1.52, [95% CI 1.30 – 1.79]) and having loans (OR = 1.72 [95% CI 1.48 – 2.01]). Among master’s students, being Black (OR = 3.20 [95% CI 1.68 – 6.08]) and having loans (OR = 2.46 [95% CI 1.61 – 3.76]) increased FI risk, while being older decreased FI risk (OR=0.96 [95% CI 0.93 – 0.99]). For doctoral students, risk factors included loans (OR=3.40 [95% CI 1.17 – 9.87]) and being a first-generation college student (OR=2.9 [95% CI 1.55 – 5.47]).

**Conclusions:** Food insecurity prevalence and risk factors vary by degree level, with doctoral students having the lowest prevalence and fewest correlates. The effectiveness of FI interventions, such as campus pantries, can be improved if they are targeted by degree level and corresponding risk factors.

**Funding:** None

P058 Experiences of New Visitors Seeking Emergency Food Assistance Due to the COVID-19 Pandemic

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**Background:** During the COVID-19 pandemic, food insecurity rates doubled, even tripled among households with children. In May 2020, Feeding America reported an average increase of charitable food use by 59% compared

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