F2.1: Healthy Eating in Low-Income, Pregnant, Anglo and Hispanic Women: Commonalities and Differences

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**Abstract:**

**Introduction:** A woman’s dietary quality in the 1st trimester of pregnancy has a profound effect on pregnancy outcomes. However, little is known about the relationship between ethnicity and dietary quality in early pregnancy. Using a Positive Deviance framework, this study aims to identify common and divergent factors that promote or inhibit healthy eating behaviors early in pregnancy in low-income, pregnant, Anglo and Hispanic women.

**Method(s):** A cohort design was used in a clinic sample of low-income women in their first 6-10 weeks of pregnancy. Women were asked to respond to open-ended questions describing factors that promoted or inhibited healthy eating choices in the past 24 hours. Responses were audio-taped and transcribed verbatim. 3-24-hour dietary recalls were conducted over a 2 week period and the Dietary Quality Index for Pregnancy (DQIP) was used to score the recalls. A score of 60 (out of max of 80) on 2 out of 3 days indicated a healthy eater.

**Results:** A sample of 12 Hispanic and 6 Anglo women were, on average, 25.8 years old and 8.5 weeks gestation. 3 Hispanic women and 5 Anglo women were “Healthy Eaters.” Content analysis revealed that Anglo and Hispanic women focused on eating a variety of foods during their pregnancies and made an effort to eat healthy during pregnancy. Common barriers to healthy eating included time demands involving shopping and cooking and preference for high-fat and sugary foods. Anglo healthy eaters relied on external sources of nutrition knowledge and named specific foods to eat or avoid. Anglo unhealthy eaters made food choices based on personal preferences, were not specific about healthy foods to eat during pregnancy and did not believe help for eating healthy was needed. Hispanic healthy eaters had a focus on the family that served to motivate healthy eating, emphasized the need to eat fruits, vegetables and grains, but did not identify any barriers. Hispanic unhealthy eater had a lack of internal motivation to eat healthy and relied on external sources.

**Discussion & Conclusions:** The 1st trimester of pregnancy is a critical window of time to provide ethnic-specific dietary interventions that may lead to improved birth outcomes.

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No, I (or a member of my immediate family) have not received something of value* from or own stock (or stock options) in a commercial company or institution related directly or indirectly to the subject of my presentation.
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