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O02 (continued)

O04 The Impact of COVID-19 on Perceived Barriers and Facilitators to the Healthfulness of Communities With Low-Income

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Background: The COVID-19 pandemic brought new challenges affecting the wellbeing of individuals in communities with low income. Understanding where people live and how those environments can facilitate or hinder living a healthy lifestyle is essential for developing interventions that target behavior change and health promotion.

Objective: This study compares Extension Nutrition Educators' (NEs) perceptions of the barriers and facilitators impacting the healthfulness of the environment of communities with low income in eleven states before and during the COVID-19 pandemic.

Continued on page S3

O04 (continued)

Study Design, Setting, Participants: Trained researchers conducted focus groups and interviews with NEs prior to (n = 97) and during (n = 77) the first two years of the pandemic in Alabama, Kansas, Florida, Georgia, Maine, Mississippi, Nebraska, New Hampshire, Rhode Island, South Dakota, Tennessee, and West Virginia.

Measurable Outcome/Analysis: Discussions were audio-recorded, transcribed verbatim, and coded by researchers using inductive thematic analysis. Cross-tabulation analysis was used to compare data pre-and-during COVID-19.

Results: NEs' revealed COVID-19 not only exacerbated existing barriers (i.e., lack of access to healthy foods, transportation, nutrition education and information, and physical and mental health resources) but also created new challenges in these communities. NEs stated increased unemployment rates led to financial hardships and greater food insecurity. Participants mentioned COVID-19 restrictions (i.e., social distancing, shutdowns, etc.) and fear of exposure made services and resources more difficult to acquire, and impacted dietary behavior, physical activity patterns, and mental health. Likewise, limited access to technology and connectivity decreased the ability to learn about and access services and resources. Nonetheless, NEs suggested new opportunities were designed to mitigate COVID-related barriers, such as virtual programming, COVID-19 relief programs, food distribution programs, grocery store delivery services, and revised social marketing approaches to increase awareness of available resources/services.

Conclusions: Given the onset of new barriers resulting from COVID-19, there is a need to consider these barriers when developing or adapting health promotion strategies to support the healthfulness of communities.

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