



**ABSTRACTS**

**BEHAVIORAL HEALTH**

**Young men's preferences for design and delivery of physical activity and nutrition interventions: A mixed-methods study.**

Ashton L, Morgan P, Hutchesson M, et al. *Am J Mens Health*. 2017; <http://dx.doi.org/10.1177/1557988317714141>.

The authors aim to explore young men's preferences for recruitment strategies, format, and facilitator characteristics in nutrition and physical activity interventions. A mixed-methods study was designed to address the issue. The sample contained 282 male participants. Of the sample, 80.5% were single and 55.3% reported a high school degree as highest level of education attained. The median age was 22.3 years and 58.5% were of healthy bodyweight, 39% were overweight or obese, and 42.6% reported being in the middle income bracket defined as \$300 to \$999 per week. The study was performed in Australia and inclusion criteria was Australian men aged 18 to 25 years. Recruitment was performed via flyers around universities as well as social media and media releases. The mixed-method approach utilized qualitative data obtained through focus groups, as well as quantitative data obtained via an online survey. The qualitative data set utilized 10 focus groups facilitated by a male doctoral student and one male assistant. Each group ranged in size from three to nine participants and lasted 32 to 63 minutes using 11 questions. Demographic data were collected during the initial screening to include: date of birth, marital status, education level, income, height, and weight. The quantitative information was obtained using a cross-sectional online survey. The online survey was managed by Survey Monkey and included 67 questions. The same demographic information was gathered as for the focus groups. Statistical analyses were performed using Stata version 12.0 (StataCorp, 2011). The focus group qualitative data was also entered into NVIVO 10 (QSR International, 2012). The authors report that participants found resistance training-related strategies and those designed to eat healthy on a budget were particularly favored.

**BUSINESS & INDUSTRY**

**Accessibility and affordability of supermarkets: Associations with the DASH Diet.**

Mackenbach J, Burgoine T, Lakerveld J, et al. *Am J Prevent Med*. 2017;53(1):55-62.

The researchers assess the role geographic and economic access to supermarkets has on interplay with the Dietary Approaches to Stop Hypertension (DASH) diet, hypothesizing that access to supermarkets would be more strongly associated with the diet when taking food prices into account. The researchers utilized a cross-sectional cohort model to address this. The sample contained data on 9,274 participants aged 29 to 64 years. Mean age of the participants was 48.2 years and 48.1% were men. Mean estimated dietary costs were 4.21 British Pounds per day. The cohort data were obtained through the Fenland Study, conducted in the United Kingdom on adults born between 1950 and 1975. Participants attended one of three testing sites in Cambridgeshire for detailed anthropometric measurements, demographic information, as well as a comprehensive lifestyle and food frequency questionnaire. Exclusionary criteria were pregnancy, previously diagnosed diabetes, inability to walk unaided, psychosis, or terminal illness. Data were collected between 2005 and 2015 and analyzed in 2016. Dietary quality was evaluated using an index of the DASH diet. Participants recorded frequency and portions of consumed foods using a 130-item food frequency questionnaire. Individuals were ranked based on overall dietary costs as measured by attributing a food price variable to the foods consumed using retail prices obtained from five

major UK supermarket chains. Participants' home addresses were mapped by postal code using GIS in ArcGIS version 10 (Esri, 2010) to determine distance from food outlet locations. The characteristics of individuals and diet cost was assessed using analysis of variance (ANOVA) and  $\chi^2$  tests, with DASH accordance compared between men and women, lower and higher education, and lower and higher income. Statistical analyses were conducted using SPSS version 22 (IBM Corp, 2013). The researchers report higher-cost diets were more likely to be DASH-accommodant, while individuals with the lowest economic accessibility to supermarkets had lower odds of being DASH-accommodant. The economic association was stronger than the geographic variable alone.

**EDUCATION**

**Systematic review of control groups in nutrition education intervention research.**

Byrd-Bredbenner C, Wu F, Spaccarotella K, et al. *Int J Behav Nutr Phys Act*. 2017; <http://dx.doi.org/10.1186/s12966-017-0546-3>.

The authors investigate how control conditions are described in peer-reviewed journal articles relative to experimental conditions for the purposes of discussing how accurate the results of various experimental designs are. To address this, a systematic review of the literature concerning control groups in nutrition education interventions was designed. The review generated a sample of 43 articles deemed acceptable for use. The sample contained 28 studies that had an active control condition, seven with usual or standard treatment for the control

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group, 12 that offered an alternative active treatment to control participants, and nine that were dismantling component active controls. The authors performed a literature search of select databases CINAHL, PubMed, PsycINFO, WoS, and ERIC for keywords: *nutrition education intervention; control groups; and study design*. Inclusionary criteria were articles reporting primary research findings of controlled nutrition education intervention trials conducted in the United States with free-living consumer populations between January 2005 and December 2015. Exclusionary criteria were studies reporting pilot, feasibility, cross-sectional, follow-up or secondary analysis; those lacking a control or comparison group; studies focusing on weight-loss or disease management/treatment and those lacking an educational component; and studies targeting specific professions or disease classifications. The initial search yielded 1,164 articles that were screened according to the criteria. Statistical analyses were performed by the research team with data extraction performed by one and checked by two members. Factors extracted from the select articles included: Treatment provided to the experimental and control groups, overall intervention content, procedures used to tailor the intervention to participants, intervention delivery mode, duration, intervention setting, individual intervention session description, and procedures for standardization of intervention across multiple sites. The authors report finding a need for more complete reporting of nutrition interventions in peer-reviewed articles.

## PEDIATRIC

### **Infant feeding and growth trajectory patterns in childhood and body composition in young adulthood.**

Rzehak P, Oddy W, Mearin M, et al. *Am J Clin Nutr.* 2017; <http://dx.doi.org/10.3945/ajcn.116.140962>.

The researchers assess whether there are groups of children with different body mass index (BMI) trajectory classes at year 6, whether full breastfeeding for more or less than 3 months is associated, and whether there are any differences in body composition between these classes at age 20 years. The researchers utilize four contemporary cohort studies to address this question. The pooled cohorts selected for study comprised a sample of 6,708 participants. The cohorts utilized were the West Australian Pregnancy Cohort, the European Childhood Obesity Trial, the Norwegian Human Milk Study, and the Prevention of Coeliac Disease study. Inclusionary criteria were: anthropometric measurements of weight and length at birth with regular follow-ups up through year 6, and anthropometric

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