

Grocery-store based nutrition education improves eating habits

February 11 2019

Hypertension affects over 60 million adults in the United States and less than half have their condition under control. A new study published in the *Journal of Nutrition Education and Behavior* found that grocery store? based nutrition counseling was effective in changing dietary habits of patients being treated for hypertension.

"Primary care providers face multiple barriers when delivering nutrition information to <u>patients</u>, including lack of training on how to provide lifestyle behavior counseling combined with lack of time to interact with the patient," said lead author Rosanna P. Watowicz, Ph.D., RDN, LD, Department of Nutrition, Case Western Reserve University, Cleveland, OH, USA. "This study's aim was to evaluate the effectiveness of a nutrition counseling program provided by a registered dietitian in the familiar setting of a <u>grocery store</u>."

This study recruited patients from three primary care offices that were part of an urban academic medical center. Thirty adults aged 18-60 years diagnosed with hypertension participated. Study participants represented a diverse demographic in regard to sex, race, education, and employment.

Participants received individual counseling at one of three local grocery stores from two registered dietitians trained to provide lifestyle modification information based on the DASH (Dietary Approaches to Stop Hypertension) diet. Three counseling sessions, provided free to the patients, occurred over 12 weeks. The first visit was 60 minutes long



followed by two 30-45-minute sessions. Following each session, a recap of the visit and patient's progress towards goals were provided to the primary care provider to be included in the patient's records.

Diet quality was assessed using the Healthy Eating Index-2010, a measure of overall diet quality compared to the Dietary Guidelines for Americans. Patients completed a food frequency questionnaire, documenting food and beverages consumed at least once during the previous three months, prior to beginning the study and at the end of the study. Blood pressure measurements were also taken.

Following the education, patients' eating habits significantly improved in regard to total fruit, whole fruit, greens and beans, whole grains, fatty acids, refined grains, and empty calories. Sodium, saturated fat, discretionary solid fat, and total fat intake decreased significantly as well. Intake of added sugar also decreased although not to the same extent as the other categories.

Blood pressure measurements also decreased during the study, but due to the small number of participants the differences were not statistically significant. Additionally, patients reported a high level of compliance in taking their hypertension medication as prescribed during the study.

"Providing education at the grocery store offers a convenient location on a schedule with more flexibility than a primary care office and reinforces dietary changes in the environment where food decisions are made," said Dr. Watowicz. "This strategy should be researched with other health conditions."

More information: Rosanna P. Watowicz et al, Nutrition Counseling for Hypertension Within a Grocery Store: An Example of the Patient-Centered Medical Neighborhood Model, *Journal of Nutrition Education and Behavior* (2019). DOI: 10.1016/j.jneb.2018.11.011



Provided by Elsevier

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