



Market To Table: A Physical Activity and Healthful Eating Program for Individuals With Prediabetes

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Background

One out of three US adults has pre-diabetes and healthful eating and physical activity can help to prevent or delay the onset of type 2 diabetes.

Sentara RMH Medical Center (SRMH) has had an established Diabetes Prevention Program (DPP) since 2016, which is fully recognized by CDC as providing National DPP. Participants often ask for “cooking” classes and more information on healthy eating.

Sentara RMH Medical Center partnered with James Madison University dietetics program to provide a Market-to-Table Workshop series.

Objective:

To determine the change in frequency and duration of physical activity, vegetable purchasing, preparation, and overall consumption, and the behavioral outcomes in participants with prediabetes in a 6-week program.

Use of Theory or Research:

The Transtheoretical Model and Social Cognitive Theory was used to develop the program and to justify the results.

Target Audience:

Adults that have been diagnosed with or at risk for prediabetes.



Methodology

This is an experiential workshop program that examined physical activity and healthful eating behavior following the 6-week intervention. Weekly workshops were designed using behavior change theories to facilitate vegetable preparation and consumption, mindful eating, and physical activity.

The Market-to-Table Workshop Series teaches how to select, prepare, and enjoy a variety of fresh produce items, as well as how to incorporate many aspects of healthy eating and physical activity into day-to-day life.

Six (6) sessions were held over the course of six weeks. Sessions were held on Saturdays from 9 AM – 12 PM at James Madison University state-of-the-art Foods Lab.

Sample curriculum:

Week 1: Carrot and Beet Slaw
•Featured Vegetables: Carrot, Beet, Garlic
•Cooking Technique: Basic Knife Skills
•Nutrition Component: Vegetable variety
•Mindful Eating: Eating Enjoyment
•Handouts: Farmers Market Info, Shopping Bag
•Non-perishable: Pistachios, Raisins
•Kitchen Tool: Grater
•Physical Activity: Breaking Barriers

Week 2: Roasted Eggplant Dip & Zucchini Fries
•Featured Vegetables: Eggplant, Pepper, Zucchini
•Cooking Technique: Roasting & Baking
•Nutrition Component: Phytochemicals
•Mindful Eating: Non-Judgment Eating
•Handouts: Cooking Basics
•Non-perishable: Cannellini Beans, Cornmeal
•Kitchen Tool: Cutting Board
•Physical Activity: Tips to add in physical activity

After attending each workshop, participants received a \$25 voucher to use on fresh produce items from the Harrisonburg Farmers Market. Throughout the program, participants also received tools to help achieve goals, such as fitness trackers and kitchen gadgets.

At the end of each session, a group walk was completed to the Harrisonburg Famer’s Market to incorporate activity into daily life. The distance was 0.6 miles one way.



Results

The tools and methods used were the IPAQ Short Form (International Physical Activity Questionnaire), Physical Activity Stages of Change Questionnaire, Mindful Eating Questionnaire, Food Attitudes and Behaviors Survey, Food Purchasing Practices, and weekly surveys. The data was collected at pre-, post- (6 weeks at the final workshop), and follow-up (6 weeks after the final workshop).

The program started with 13 participants (11 females, 2 males) with an average age of 51.5 years who were predominantly non-Hispanic white Americans. After the 6 weeks, 9 completed at least 4 of the 6 workshops.

75% of participants were in the preparation stage at baseline and 56% were in the action stage at post-testing. Self-efficacy also improved regarding physical activity from pre- to post-assessment.

Conclusions

Findings show that physical activity and healthful eating behaviors related to vegetable intake improved and are sustained following the 6-week nutrition and physical activity intervention.



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