Get Moving – Get Healthy New Jersey

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It’s here. The new Get Moving – Get Healthy New Jersey (GMGH) website - www.getmovinggethealthynj.rutgers.edu, is ready to help you and your family adopt new positive behaviors in the area of family meals and physical activity. The site provides current information on healthy eating, health topics, physical activity as well as interactive tools to improve your health. The GMGH website adds new topics and information each month, so visit it often.

Get Moving – Get Healthy New Jersey is a statewide program to help New Jersey families and individuals make healthy eating choices and physical activity as part of their daily lives. In just three decades, the number of children and adolescents in the U.S. who are either overweight or obese has tripled. The growing epidemic of childhood obesity is one of the most serious public health concerns facing America today.

The goal of Get Moving – Get Healthy New Jersey is for families to have more family meals together as well as to consume more fruits, vegetables, whole grains, and low-fat dairy products. Look on our website to identify tips and strategies to enjoy more healthy family meals. Research shows that those youth that regularly have meals with their parents eat more fruits, vegetables, calcium-rich foods, ingest more vitamins and nutrients, and consume less junk food. Some of the research has shown that kids who regularly sit down to family meals are at a lower risk for behaviors like smoking, drug and alcohol use.

Increasing physical activity is also an important part of the plan. The GMGH website has recommendations for improving physical activity. The New Year will also see the launch of a walking program – Walk New Jersey – Point to Point. Individuals, families, schools and worksites can register to walk our virtual path from High Point in Sussex County to Cape May Point Lighthouse in Cape May County. Look for it on our website early in 2008 and register to begin your walking program to improve your health.

Several other project components expand GMGH program outreach. A GMGH Advisory Coalition of nutrition and health experts from around the state provides input as to what they see as priority issues. RCE conducted 9 Children’s Health Summits – Fighting Back Against Child Obesity around the state to bring health professionals and teachers the most current research-based information related to child obesity. Finally, RCE trains youth and adult volunteers to promote, lead and teach youth and adult programs on nutrition and physical activity.

So visit our website and watch for Get Moving – Get Healthy New Jersey educational activities in your community or call your county Rutgers Cooperative Extension office listed in the government section of your phone book to see what programs are available in your county.

Cooperating Agencies: Rutgers, The State University of New Jersey, U.S. Department of Agriculture, and County Boards of Chosen Freeholders. Rutgers Cooperative Extension, a unit of the Rutgers New Jersey Agricultural Experiment Station, is an equal opportunity program provider and employer.
Busy Lifestyles vs. Health and Wellness

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Modern busy lifestyles are really at odds with healthy aspirations of consumers who want to achieve wellness through good nutrition and exercise. The desire for convenience, little time to prepare meals or the dislike of food preparation and cooking shapes many people’s lifestyles today. Time seems to be an important factor in whether American families are willing to cook and prepare healthy meals or choose pre-prepared foods, fast foods, take-out or eat snack foods instead of meals.

The American food culture is having a potentially dangerous effect on healthful diets. Here’s why.

- Family meals have declined over the years and in some families have disappeared.
- Fewer families have the time to eat together due to work, sports, school.
- Roles in families have shifted with women working full-time so meal preparation at home has decreased.
- Working parents eat more meals away from home or provide foods for their family that have been prepared by others including: using convenience foods, take out or various types of restaurant foods.
- Working families often work more than one job to make ends meet and have little time for food preparation.
- There is greater availability of take out, fast food and ready prepared food.
- A generation of young people have grown up in homes where neither parent cooks.
- Some ethnic groups try to follow their traditional food patterns but busy lifestyles give way to fast-food solutions.
- The food industry is under pressure to provide more healthful foods but these foods must be convenient, easy to prepare, or be ready to be put on the table or eaten within a few minutes.

Extension educators and nutrition professionals must be creative in their solutions to motivate those they work with to make healthy food choices. Teaching consumers about portion sizes, reading labels, eating more fruit and vegetables daily along with high fiber foods and low-fat dairy products will help move them in a better direction. In addition families need to make healthy food choices when eating out and learn to cook simple, healthy meals at home. All can be accomplished if consumers are aware of the need to make better food selections, exercise daily and make improved food choices.

25 Behavior Change Strategies for Health and Wealth

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The Small Steps to Health and Wealth™ program provides information to help you take charge of your future. It was designed to motivate participants to take action to improve their lives. Each of the 25 behavior change strategy fact sheets has health and wealth “action steps” and one or more worksheets that provide an opportunity to apply the strategy to your health and wealth goals and life situation.

We suggest adopting no more than three or four strategies and to coordinate those that are related (e.g., automating a good habit to “defy a statistic” and to reach a recommended benchmark). Think of the list of strategies as a “menu” from which you will choose the ideas that work best for you.

Best wishes for health, wealth, and happiness.

Health and Wealth Behavior Change Strategies

1. Track Your Current Behavior
2. Unload Your Childhood Baggage
3. Put Your Mind to It
4. Commit to Making a Change
5. Defy Someone or Defy the Odds
6. Think Balance-Not Sacrifice
7. Control Your Destiny

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Take Charge of Your Diabetes with Medicare’s Diabetes Self-Management Training

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If you have been diagnosed with diabetes, you may be feeling angry, scared, confused, and even overwhelmed. What foods should you eat? How does your medication work? What should your blood glucose goals be? How do you prevent complications of diabetes? It’s possible to get accurate answers to these and many other questions, and to learn to successfully manage your diabetes through Medicare-covered Diabetes Self-Management Training.

What is Diabetes Self-Management Training?

If you are eligible for Medicare, you may be eligible to receive outpatient training to gain the knowledge and skills needed to manage your diabetes. This is referred to as Diabetes Self-Management Training (DSMT). Your doctor must prescribe this training in order for Medicare to cover it, and you pay 20% of the Medicare-approved amount after the yearly Part B deductible.

You must also meet at least one of the following conditions within the last 12-months:
• You were diagnosed with diabetes
• You had diabetes and became eligible for Medicare
• You changed from taking no diabetes medications to taking medications, or went from oral diabetes medications to insulin use.
• Your doctor considers you at risk* for developing complications of diabetes

*At risk means if you have had problems controlling your blood sugar, you have been treated in an emergency room or been admitted overnight because of diabetes issues. If you have diabetes-related eye disease, foot problems, or kidney problems related to diabetes you are also at risk.

What will you learn in Diabetes Self-Management Training?

Diabetes self-management training is an interactive process involving you, the person with diabetes, and a trained diabetes educator. You will learn the essential skills to help you manage all aspects of your diabetes. This will include training in:
• General information about diabetes
• Nutrition and meal planning
• How your medications work, and how to take them properly
• Self-monitoring of your blood glucose and what the results mean
• The benefits and guidelines for safe exercise
• Preventive foot, skin, and dental care
• How to prevent, recognize, and treat complications of diabetes
• How to adjust emotionally to living with diabetes
• Sources of support and other community and health-care resources

Where do you go for Diabetes Self-Management Training?

DSMT is taught by health care providers (including nurses, dietitians, pharmacists, and other professionals) who have specialized training. These providers are often located at Certified Diabetes Education Centers, which meet the American Diabetes Association “standards for excellence” in diabetes education. These Centers are frequently affiliated with hospitals and other medical facilities. Your doctor may give you information about where to go to receive training. The American Diabetes Association website also maintains an up to date list of Certified Diabetes Education Centers by state, at http://www.diabetes.org/education/edustate2.asp?loc=x

There are currently 51 Certified Diabetes Education Centers in NJ, so there is likely one located near you. Don’t let diabetes manage you, take charge of your diabetes! Ask your doctor about Diabetes Self Management Training today.

References:

For more information, please visit: Centers for Medicare & Medicaid Services: www.medicare.gov or 1-800-MEDICARE American Diabetes Association: www.diabetes.org American Association of Diabetes Educators: www.aadenet.org
Food Security in the United States

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There is an ugly reality in the United States, this “land of plenty”. You may not realize it, but some parents in America go without eating so their children will have enough food to get them through the day. Others don’t have enough money to eat well by the end of their pay period. It becomes very difficult to even put the basics on the table. This is called “Food Insecurity.” It is a problem that more and more people in the U.S. are facing each year.

Food insecurity relates to the access, availability and safety of the foods people can purchase. When any of these are affected, worries about the next meal can occur. There are four levels of food security as defined by the U.S. Household Food Security Survey Module (HFSSM):

- **Food secure**: Safe, adequate food supply
- **Food insecure without hunger**: People substitute poor quality, cheaper, less healthy foods for healthy, nutritious foods
- **Food insecure with hunger**: individuals skip meals or cut back on the amount of food they eat
- **Food insecure with hunger among children**: the same as above when there are children in the family

Families become food insecure for many reasons. Money is the main reason, but abuse, health care issues, loss of employment and food available in the area can contribute to a family’s food insecurity.

This can affect anyone at any age.

What are we doing to change this? Rutgers Cooperative Extension believes education is one key for eliminating the problem. Rutgers Cooperative Extension offers three major programs to promote food security. They are the Food Stamp Nutrition Education, Expanded Food and Nutrition Education, and the Youth Farmstand Programs.

**The Food Stamp Nutrition Education Program**

The Food Stamp Nutrition Education Program (FSNEP) helps limited resource families learn how to eat healthy and manage food spending. Families dependent on food stamps struggle every day to meet their dietary needs on a fixed income. New Jersey FSNEP’s mission statement is “to provide nutrition education to increase food security.” Behaviorally-focused, outcome-based lessons are presented to small groups of adults and youth. People learn to make healthy food choices. They also learn how to purchase healthy food and budget their money. Food security comes from this knowledge.

**The Expanded Food and Nutrition Education Program**

The Expanded Food and Nutrition Education Program (EFNEP) teaches limited resource families to make healthy changes to what they eat. Adults and youth learn the skills and changes needed to eat healthy and spend wisely. These are important to help people feel good about their food choices. Education once again provides the basis for food security.

**Youth Farmstand Program**

Research has shown that easy access to healthy foods increases the likelihood that people will eat them. It is much harder for residents of lower income communities to get healthy foods. That’s why Rutgers Cooperative Extension of Gloucester County established the Youth Farmstand Program. It battles food insecurity by:

- Making easy access to healthy, affordable food
- Accepting WIC & Senior Farmers Market Nutrition Program Vouchers
- Teaching which foods grow in the area
- Teaching workforce readiness skills

Gloucester County’s Youth Farmstand project is “Seeds to Success.” The stands are located in 3 at-risk communities in the county: Glassboro, Paulsboro and Woodbury. As part of the program local students are taught basic work skills, along with healthy eating and food preparation. Fruits and vegetables are purchased from local farmers. The students then sell this produce to consumers. The produce is fresh, affordable and healthy. The farmstands accept WIC & Senior Farmers Market Nutrition Program Vouchers (FMNP) and also accept food stamps. Although they only operate in July and August, they sell more than $10,000 in local produce each year. Ten to fifteen percent of these sales come from FMNP vouchers. Of those using these vouchers, many reported this was the first time they had ever used them. They also said that they would not have redeemed the vouchers if the Seeds to Success farmstand was not there. The farmstands provide easy access to healthy foods.

Education and easy access to healthy foods are powerful tools in the fight for food security. These three programs, the Youth Farmstand Program, EFNEP and FSNEP, show that we can fight back and win the battle.

**References**:

Nearness of supermarkets boosts people’s intake of nutritious fruits and vegetables, study reveal. Available at: http://www.unc.edu/news/newserv/archives/nov02/wing110102.html

STOP THE CLOCK! Are You Aging Healthfully?

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Extension Specialist in Nutrition

The quest for the fountain of youth is alive! Americans spend several billion dollars every year on potions, gadgets, and books that are purported to extend life expectancy and stave off aging. Although there is no surefire elixir that will stop aging in its tracks, there are many things you can do to control the rate of aging.

If you want to feel younger longer, the tips below can help. Studies have found that adults who followed all of these suggestions have a physical health status comparable to people 30 years younger who followed few of these tips. How closely are you (or a parent or other older relative) following such a plan?

- Eat regular meals that, in combination, provide all the calories and nutrients you need in adequate, but not excessive, amounts.
- Limit alcohol consumption to a maximum of 1 or 2 drinks daily.
- Keep your body weight at a desirable level. Severe underweight and extreme overweight greatly reduce life expectancy.
- Exercise at least 3 or 4 times each week for an hour or more. But, don’t overdo exercise to the point that you become too thin, physically injured, or, if you are a woman, menstruation ceases.
- Sleep about 7 or 8 hours each day.
- Do not use any tobacco products or street drugs.
- Limit exposure to direct sunlight to no more than 15 minutes each day.
- Have regular medical and dental check-ups. Seek health care as soon as it is needed and follow the instructions of your health care provider.
- Take responsibility for maintaining your own health--don’t leave everything in the hands of your health care provider.
- Protect yourself from environmental pollutants.
- Minimize emotional stress, adjust to the causes of stress, or learn constructive techniques for dealing with, relieving, or managing it (e.g., meditation, massage, relaxation techniques, time management, or exercise).
- Develop close, sustained, supportive friendships.
- Have an optimistic outlook and find ways to add meaning to your life. Laugh and relax regularly.
- Continue to learn and challenge your mind.

How many of the tips do you follow? If there are any you don’t follow, it’s probably a good idea to find ways to make them part of your lifestyle. Remember, you may not be able to turn back the clock, but you can keep it from ticking faster than it should.

Medication Management for Older Adults

Have you ever had a problem with your medicines? You are not alone. There are so many things to keep track of. For example, you may have asked yourself:

- When exactly should I take my medicine?
- Is it safe to take vitamins when I am taking a prescription medicine?
- Now that I feel better, can I stop taking my medicine?

Medicine is prescribed to help you. But, it can hurt you if you take too much or mix medicines that don’t go together. Many people are harmed each year, some seriously, because of taking the wrong medicine or not taking the right medicines correctly.

The Council on Family Health has updated its guide for older adults about safe medicine use. The guide, also available in Spanish, is distributed in cooperation with the FDA and the Administration on Aging. “Medicines and You” gives facts about drug interactions, tips for talking to health care professionals and ways to lower medicine costs. The 17-page guide also features “My Medicine Record,” a chart on which seniors can list the medicines they take and other important health information.

For a free copy of Medicines and You: A Guide for Older Adults (specify English or Spanish), write to: FDA/MEDYOU, PSC Personal Property Facility, 16071 Industrial Dr., Gaithersburg, MD 20877. You can also send an e-mail to dpapubs@cdr.fda.gov or call 800-677-1116.
When it comes to health insurance, there are two vulnerable age groups: retired workers and young adults. For decades, many employers provided health insurance for Medicare-eligible retirees (age 65+) and workers who retire before turning 65. Current and future retirees, however, face an increasingly insecure future with respect to employer-provided health insurance.

According to the 2006 Kaiser/Hewitt Survey on Retiree Health Benefits, the share of large employers offering health benefits declined to 35% from 66% from 1988 to 2006. In addition, employers with benefit plans have been increasingly shifting costs to retirees in the form of higher premium contributions and cost-sharing requirements. Even state and local governments, which have traditionally had generous retiree health benefits, are starting to trim them back as they struggle to cope with unfunded liabilities for retiree health care expenses.

Future generations of retirees can expect to pay more for health care expenses as employer-provided benefits are reduced or eliminated. Moreover, these costs are projected to be significant. According to the Employee Benefit Research Institute, a couple both 65 today living to average life expectancy could need as much as $295,000 to cover premiums for health insurance and out-of-pocket medical expenses. A couple who lives to 95 could need as much as $550,000. Both estimates are for retirees who have access to health benefits from a former employer but pay the full premium.

At the other end of the lifespan are young adults. They, too, have health insurance concerns. Young adults often lose coverage through their parents’ policies or public insurance programs (e.g., Medicaid and the State Children’s Health Insurance Program) at age 19 or during their early 20s if attending college full-time. In recent years, young adults have been the fastest growing group of uninsured. An estimated 13.7 million young adults age 19 to 29 lacked coverage in 2004, an increase of 2.5 million since 2000. Not surprisingly, a number of states have passed laws raising dependent age limits on family policies to the mid 20s or, for residents of New Jersey, age 30.

Nationally, nearly two of five college graduates and one-half of high school graduates who do not go on to college will be uninsured during the first year after graduation. As a result, they are far less likely than those with coverage to have a regular doctor. Several options are available, however, to provide health insurance for young adults. One is a federal law called COBRA. Adult children who lose eligibility under a parent’s policy can purchase continued coverage for up to 36 months if they (or a parent) pay the full premium plus a 2% administrative fee.

Another option, although costly, is to purchase health insurance sold to individuals. Short-term individual policies generally last six months to a year and may be renewed if policyholders remain healthy. In a handful of states, including New Jersey, insurers doing business in the state are required to sell coverage to any resident, regardless of health status. This is referred to as “guaranteed issue” insurance.

It is now well known to the medical profession that very small doses of lead, once thought harmless, can seriously harm young children’s brains. Despite this damage, they don’t look sick. Lead has no known benefit in the body, and small doses, once thought harmless, can lower IQ and cause learning and behavioral problems as well. Since lead collects in the body and is not well excreted, tiny amounts, eaten daily can collect in the body to cause harm. The child doesn’t have to eat paint chips, but simply take in small amounts of lead dust (common in many older homes) through normal hand-to-mouth activity. Infants and toddlers are most at risk, because they spend a lot of time on the floor. In addition, they put lots of things into their mouths, and are at a critical stage of development. The main sources of lead-tainted dust are old (pre-1978) paint and contaminated soils that are tracked into the house. Lead in soil comes mainly from outside paint and from past auto exhaust. (Lead was gradually removed from gasoline, beginning in 1984.)

What about toys? The biggest risk from lead painted toys comes from chewing them, or when they become chipped or cracked, releasing paint particles and chips. Another source is inexpensive jewelry. This is often imported, and made from lead. The lead can rub off on hands
The Power of the Potato

Joanne Kinsey, M.S., Family and Community Health Sciences Educator
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Newsflash! Potatoes can be part of healthy nutritious low-fat diet!

Potatoes are a good source of vitamins, and a medium-sized potato provides 1/3 the vitamin C recommended daily for an average adult. Potatoes also supply thiamin, niacin, iron, carbohydrates and small amounts of vegetable protein. In addition, potatoes are low in sodium, virtually fat free and easy to digest. According to the MyPyramid.gov website, potatoes are highly acceptable in almost any diet, including the 2000 Calorie Food Pattern.

Sweet potatoes are a nutritional powerhouse with 4 ounces of cooked pulp supplying 2 grams of protein, 3.4 grams of fiber, 24.6 mg of vitamin C, 28 mg of calcium, 22.6 mcg of folic acid, 20 mg of potassium and 21822 I.U. of vitamin A! Here are a few fast health facts about sweet potatoes:
- Sweet potatoes have 4 times the US Recommended Dietary Allowance of beta-carotene when eaten with the skin on.
- Just 2/3 cup of sweet potatoes provides 100% of the USRDA recommendations for vitamin E.
- Sweet potatoes provide other essential nutrients including vitamin B6, potassium, and iron.
- Sweet potatoes are a good source of dietary fiber which helps promote a healthy digestive tract. Eating the skin of the potato provides even more fiber!
- Sweet potatoes have more fiber than oatmeal.
- Sweet potatoes are virtually fat free, cholesterol-free, and very low in sodium, with only about 118 calories for the medium size potato.

Potato Selection, Storage & Cooking

According to the CDC, potatoes should be fairly clean, firm and smooth with a regular shape. Avoid potatoes that are wilted, wrinkled skin, soft dark areas, cut surfaces or a green appearance.

Make sure that potatoes are stored in a cool, dry, dark place that is well ventilated. The ideal temperatures are 45-50 degrees. At that temperature potatoes will keep well for several weeks. Avoid prolonged exposure to light which causes the potato to turn green. The green area should be pared off before the potato is used. It is recommended that potatoes not be refrigerated.

Potatoes retain their healthy nutrients better if cooked whole however, they may be halved, sliced or diced before cooking, if a shorter cooking time is desired. Potatoes will turn dark if not cooked right away. To protect their color, toss them with a small amount of lemon juice after cutting.

Potato Facts and Trivia
- The potato is about 80% water and 20% solids.
- Potatoes grow underground, but they are actually swollen stems, not roots.
- The average American eats about 134 pounds of potatoes per year while Germans eat about twice as much.
- Potatoes are an excellent diet food….It is the toppings we use on potatoes that add the extra calories.
- The United Nations has declared 2008 the International Year of the Potato.

References:

25 Behavior Changes

continued from page 2.

8. Make Progress Every Day
9. Get Help and Be Accountable
10. Meet Yourself Halfway
11. Say “No” to Super-Sizing
12. Convert Consumption Into Labor
13. Compare Yourself With Recommended Benchmarks
14. Use Easy Frames of Reference
15. Automate Good Habits and Create Templates
16. Live “The Power of 10”
17. Take Calculated Risks and Conquer Your Fears
18. Appreciate Teachable Moments and Wake-Up Calls
19. Weigh the Costs and Benefits of Changing
20. Step Down to Change
21. Kick It Up a Notch
22. Control Your Environment
23. Monitor Your Progress and Reward Success
24. Expect Obstacles and Prepare For Relapses
25. Set a Date and Get Started…Just Do It!

For more information on each of the 25 strategies go to: http://njaes.rutgers.edu/sshw/

To order a copy of the workbook Small Steps to Health and Wealth go to: http://njaes.rutgers.edu/sshw/pdfs/order-form.pdf
and be swallowed, and sometimes the item itself is swallowed. In a tragic case in Minnesota last year, a young boy died after swallowing a small lead trinket packed in a box of new shoes. Bottom line: toys should be lead free!

So what is a parent to do? Suspicious toys should be kept away from infants and toddlers to prevent children from placing these toys in their mouth. The same goes for old or antique toys, which may also have lead paint. Can toys be tested? Yes, but this is expensive and usually not practical. (Do-it yourself test kits are unreliable for testing consumer products, according to the Consumer Product Safety Commission). The CPSC maintains a list of recalled toys and jewelry at their website (www.cpsc.gov) or 1-800-638-2772. The risk to older children who no longer chew on toys is smaller. Recalled toys should be returned when possible; this encourages manufacturers to monitor their suppliers. But it is important for parents to know that the environment, especially in older homes or near highways, poses the most important risks through lead-tainted dust.

If you think this may be an issue, have your child tested for lead. This is best done at ages one and two. Other ways to protect youngsters is to wash their hands frequently. A balanced diet is also helpful. Be sure to include lots of calcium- and iron- rich foods. Both help to fight lead poisoning.

Raising children in today's world is complicated, and requires vigilance on many fronts.