



Nutrition for Family Living

Susan Nitzke, Nutrition Specialist; susan.nitzke@ces.uwex.edu
Sherry Tanumihardjo, Nutrition Specialist; sherry.tan@ces.uwex.edu
Julia Salomon, Nutrition Specialist; julia.salomon@uwex.edu
Gayle Coleman, Nutrition Specialist; gayle.coleman@ces.uwex.edu
Teresa Curtis, Nutrition Specialist; teresa.curtis@ces.uwex.edu

October, 2009 Topics

American Indians and Environmentally-Focused Nutrition Education

A Broadcast/Online Interview about Michael Pollan's book, "In Defense of Food"

WI PAN Basics

American Indians and Environmentally-Focused Nutrition Education

By Teresa Curtis

In a recent article, Jamie Stang, assistant professor and chair of the Public Health Nutrition Program at the University of Minnesota, reiterates the warnings that researchers keep sounding: if our current lifestyle of limited physical activity and poor diet-quality continues, the number of people who experience illness or death from cardiovascular disease and diabetes will most likely double. Minority populations, including American Indians, are likely to carry a disproportionate amount of the burden of chronic disease. While short-term behavior change has been accomplished, Stang is proposing a new strategy that may have a greater long-term effect on the overall health of American Indians.

According to information collected from 13 American Indian nations, the diet of many American Indians is similar to the diet of most Americans: too many processed meats, fried foods, sweetened or salty snacks, and sweetened beverages, and not enough fruits vegetables and whole grains. Members of the Native American community are aware of the relationship between a healthful diet and disease prevention; however, they cite a number of barriers to healthful eating:

- Limited access to grocery stores that stock a variety of fruits and vegetables, low-fat products, low-sugar products, and whole grain products.
- Loss of traditional agriculture due to poor soil conditions and water scarcity
- Loss of hunting and fishing rights and unavailability of traditional foods, such as wild game.
- Lack of a reliable energy supply to run refrigerators.

Given these barriers, Stang suggests that chronic disease prevention interventions should include more than just personal behavior-change strategies. Long-term effective interventions must also take into consideration the social and environmental issues that are related to creating a healthy lifestyle. As Stang writes in her article, "Even the most culturally competent, evidence-based programs cannot improve eating behaviors among individuals or populations who live and work in an environment that does not support or provide healthful food choices. . . . Individuals must have access to an environment that supports healthful eating if they are to successfully change their behaviors." One such model, the socio-ecological model, creates a framework for addressing behavior change at an individual level while simultaneously addressing the environmental (social, community, and national) influences that affect behavior change.

Stang has proposed a social ecological model for health promotion and disease prevention specific to American Indian communities. Her model, shown below, is a series of four nested circles with personal knowledge, attitudes, and beliefs at the center. Individual, family and peer nutrition education programs are good examples of personal level interventions. One of the defining characteristics of Native American communities is the importance of family and tribal values. Talking circles, group story-telling and other traditional communication methods can provide information regarding the social influences of extended



Nutrition for Family Living October 2009

and immediate family, peers, elders, traditional healers and social networks. Cultural level factors; specifically tribal customs, traditions, and rules; community regulations; health care facilities; and local

food systems and venues can also be explored through traditional communication methods, as well as through community greenhouses, gardening projects, or community support networks. Finally, national and state level influences include legislation; food systems; food marketing; and public health policy, programs, and services. Urban planning initiatives and legislation regarding hunting and fishing rights are just a few examples of national and state level influences.

Planning and implementing a multi-level program takes a multitude of partners, a longer time-frame, and many more resources than the traditional individual or family based approaches; however, such programs have the potential to result in a more sustainable behavior change. The Healthy Children, Strong Families, and Supportive Communities (HCSF-SC) project is an example of a multi-level, chronic disease prevention program currently working with several Native American communities in Wisconsin. It is a cooperative effort between researchers in the UW Dept of Family Medicine and Bad River, Lac du Flambeau, Oneida and Menominee Tribes that aims to teach families to make better lifestyle choices in an effort to decrease the prevalence of diabetes and heart disease. A primary component of the Supportive Communities portion of this project is the Community Advisory Boards, a grass-roots coalition of community members that works to identify and address environmental barriers and supportive mechanisms within their communities.

Implications for Extension Educators: Stang's article and the HCSF-SC project stresses the importance and the potential long-term benefits of developing partnerships. HCSF team members are interested in working with extension educators. If your office provides services in the areas of nutrition, recreation, transportation, commerce, or education to the Bad River, Lac du Flambeau, Oneida, or Menominee Tribe, please consider participating in the HCSF-SC Community Advisory Boards. Bayfield and Menominee county Extension offices are currently involved with CABs in their area and are willing to discuss the project with fellow extension educators.

References:

Stang J. Improving health among American Indians through environmentally-focused nutrition interventions. *J Am Diet Assoc.* 2009;109(9):1528-1531.

Healthy Children, Strong Families. Available from the Department of Family Medicine, University of Wisconsin: <http://www.fammed.wisc.edu/research/external-funded/hcsf>. Accessed 09. 19. 09.



Nutrition for Family Living October 2009

A Broadcast/Online Interview about Michael Pollan's book, "In Defense of Food"

By Susan Nitzke

The University of Wisconsin–Madison's new common book program, *Go Big Read*, is designed to engage members of the campus community and beyond in a shared, academically focused reading experience. Chancellor Martin selected *In Defense of Food: An Eater's Manifesto*, by Michael Pollan, as the book for this inaugural year. Pollan visited the UW campus September 24-26 and spoke at a free public event September 24th at the Kohl Center. Pollan's critical examination of the American food system raised controversial issues and generated both favorable and harshly negative reactions from interested parties statewide.

Irwin Goldman, professor of horticulture and vice dean of the College of Agricultural and Life Sciences, and Susan Nitzke, professor, extension specialist and chair of the Department of Nutritional Sciences at UW-Madison, discuss Pollan's book, its claims and the modern American diet on *Office Hours*, a half-hour weekly talk show airing on the Big Ten Network. The interview can be seen at <http://www.news.wisc.edu/17092>.



Nutrition for Family Living October 2009

WI PAN Basics

By Gayle Coleman

What is WI-PAN?

The Wisconsin Partnership for Activity and Nutrition (WI-PAN) supports Wisconsin residents in making healthier eating and physical activity choices. Partners include representatives from public health, education, health care, business, transportation, nonprofit organizations, universities, and extension. The Wisconsin Department of Health Services Nutrition and Physical Activity Program coordinates and provides leadership for WI-PAN with the support of a cooperative agreement grant from the Centers for Disease Control and Prevention (CDC).

What does WI-PAN do?

One of the first things WI-PAN did after receiving funding in 2005 was to develop a state plan. The plan is being updated and a 2010 plan will be released sometime in the next year. The Wisconsin Nutrition and Physical Activity State Plan provides a framework to help create and support environments that make it easier for all Wisconsin residents to make healthy food choices, be physically active and achieve and maintain a healthy weight. The Plan is based on the Social Ecological Model that includes efforts at the individual, interpersonal (family, friends), organizational (work, schools), community, and public policy levels. The Plan emphasizes:

- Increase physical activity.
- Increase fruit and vegetable consumption.
- Increase breastfeeding.
- Decrease television viewing.
- Balance caloric intake and energy expenditure.

Over the past four years, WI-PAN has developed a variety of resources to support community efforts such as The Worksite Wellness Resource kit, and a series of 'What works' fact sheets, which can be found at the Department of Health Services website, <http://dhs.wisconsin.gov/health/physicalactivity/index.htm>. WI-PAN also has made grants available to initiate and support health coalitions in many Wisconsin communities.

What has WI-PAN accomplished?

In addition to developing a variety of resources to support community efforts, WI-PAN members have helped to educate legislators in Wisconsin leading to several policy initiatives. Examples of initiatives that WI-PAN has been involved with are a quality rating system for child care that includes a wellness component, farm-to-school legislation, physical education requirements in schools, the right to breastfeed act, and complete streets legislation which would require highways to be bicycle and pedestrian friendly.

WI-PAN's surveillance and evaluation committee worked with DHS to release a 2009 report on "Obesity, Nutrition, and Physical Activity in Wisconsin." They also published a document on weighing and measuring school-aged children and they are collaborating with the Wisconsin Oral health Program to add height and weight measurements to statewide oral health screenings that are conducted with 3rd graders each year.

What is WI-PAN's relationship to UW-Extension?

Several UW-Extension faculty and staff are directly involved with WI-PAN. Susan Nitzke is the chair of WI-PAN and Nancy Crevier is chair of the Coalition Support Team subcommittee. In addition, many county-based faculty/staff are members of local wellness or obesity prevention coalitions that receive support from WI-PAN. WI-PAN efforts around public policy and community programs that support healthy eating and physical activity behaviors is a nice complement to the education that UW-Extension Educators are able to provide to individuals and families.