



Central District Health Department Public Health Informer

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We're A Tobacco Free Zone



To protect the health of **everyone** at CDHD, no smoking or other tobacco use is permitted in our facilities or on our property, both indoors and out.

Thank you for your cooperation.



Health Care Reform: What is a Health Exchange?

The Affordable Care Act requires all states to set up a “health exchange” or, more simply, a marketplace. This marketplace is where people, **not covered by insurance through their employers**, can shop for a health plan that meets their needs. The exchange allows consumers to compare costs between different health insurance companies. By banding together in a competitive marketplace, individuals and small businesses should be able to get better prices and more variety in health insurance.

Idaho Governor “Butch” Otter notified the U.S. Department of Health and Human Services (HHS) in December, 2012 that Idaho would create a state run health exchange. The state won conditional approval from HHS in January, 2013. It’s still not known what Idaho’s

health exchange will look like, or if it will be operational by the federal government’s desired Jan. 1, 2014 start date.

All health exchanges will be consumer-oriented. Each exchange will have a website and a toll-free number for consumers to get personalized assistance in determining the best plan for them. The exchanges will have to certify that the health plans meet federal standards of being ‘in the interest’ of potential buyers. And finally, the exchanges will help consumers determine their eligibility for assistance in acquiring health insurance, up to and including, enrolling them in Medicaid.

More information on health exchanges and the Affordable Care Act is available at healthcare.gov.

Checklist for Individuals and Families: 7 Things You Can Do to Get Ready

Whether you’re uninsured, or just want to explore new options, the Health Insurance Marketplace will give you and your family more choice and selection in health plans.



1. Learn about different types of health insurance. Through the Marketplace, you’ll be able to choose a health plan that gives you the right balance of costs and coverage.

2. Make a list of questions you have before it’s time to choose your health plan. For example, “Can I stay with my current doctor?” or “Will this plan cover my health costs when I’m traveling?”

3. Make sure you understand how insurance works, including deductibles, out-of-pocket maximums, co-payments, etc. You’ll want to consider these details while you’re shopping around.

4. Start gathering basic information about your household income. Most people will qualify to get a break on costs, and you’ll need income information to find out how much you’re eligible for.

5. Set your budget. There will be different types of health plans to meet a variety of needs and budgets, and breaking them down by cost can help narrow your choices.

6. Find out from your employer whether they plan to offer health insurance, especially if you work for a small business.

7. Explore current options. You may be able to get help with insurance now, through existing programs or changes that are in effect already from the new health care law. Use www.healthcare.org to get information about health insurance for adults up to age 26, children in families with limited incomes (CHIP), and Medicare for people who are over 65 or have disabilities.



Public Health Informer

The Public Health Informer is a quarterly publication of the Central District Health Department.

The Central District Health Department provides services in Ada, Elmore, Boise and Valley counties.

All offices are open Monday through Friday from 8:00 a.m. to 5:00 p.m., though clinic hours may vary. Call the numbers below for more information and to make an appointment. Boise County residents should call the main office for information on services.

Main Office

707 N. Armstrong Pl.
Boise, Idaho 83704
208-375-5211

Mountain Home:

520 E. 8th St. N.
Mountain Home, ID 83647
208-587-4407

McCall Office:

703 N. 1st St.
McCall, ID 83638
208-634-7194

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Changing WIC Changes What Children Eat

In 2008, the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) was updated to provide more fruits, vegetables, and whole grains, as well as low-fat or nonfat milk. New York was the first state to roll out the new package. At the same time, the state's Healthy Lifestyle Initiative encouraged breastfeeding among participating mothers, promoted physical activity, and provided strategies to reduce screen time among young children. This study assessed the impact of all of these changes two years after implementation.

Researchers from the Mailman School of Public Health at Columbia University, the New York State Department of Health, and Public Health Solutions, a New York-based nonprofit, analyzed data for infants and children through age four. Analyses were conducted at six-month intervals from July–December 2008 through July–December 2011. More than 3.5 million participant records were included in the study. On average, more than 500,000 children were enrolled in WIC during each assessment period.

Key Findings:

- The percentage of children ages one to two who were obese decreased by 6 percent.
- The percentage of children ages two to four who were obese decreased by 2.7 percent.
- Consumption of low-fat or nonfat milk increased 3 percent among children ages two to four.
- Participating children saw steady increases in daily consumption of fruits, vegetables, and whole grains.
- The percentage of mothers breastfeeding increased from 72.2 to 77.5 percent.
- The percentage of children under two for whom parents reported no screen time increased by 33.3 percent.
- The number of mothers waiting to feed infants solid foods until after four months of age increased by 4.1 percent.

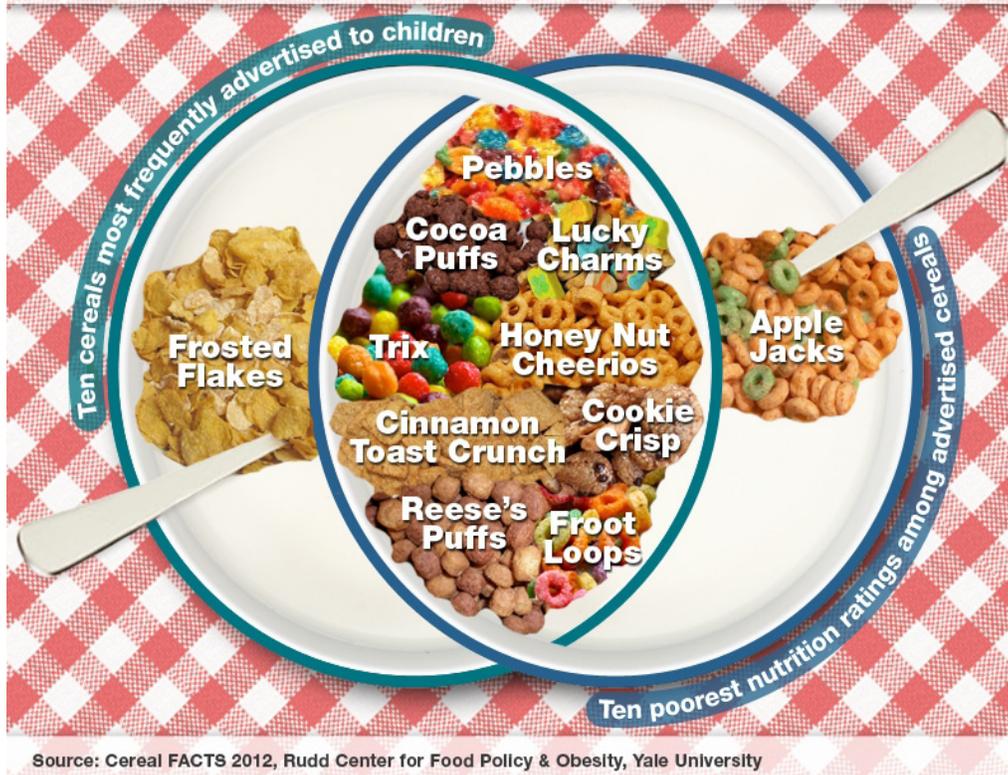
According to the authors, the findings demonstrate a strong relationship between changes to the WIC program and improvements in participants' dietary behaviors, screen time, and weight. Because WIC reaches nearly half of all infants born in the United States, continued exploration of these types of changes may result in improved well-being for thousands of young children.



The Least Nutritious Cereals Are Those Most Frequently Advertised to Children

This graphic shows the overlap between the cereals most advertised to children and the cereals with the poorest nutrition ratings.

Read the latest Cereal FACTS report at www.cerealfacts.org



Source: Cereal FACTS 2012, Rudd Center for Food Policy & Obesity, Yale University

Top Ten Cereals by Nutrition Score

1. Post Shredded Wheat - Original
2. Barbara's Bakery Shredded Wheat
3. Kashi - Kashi Puffs 7 whole grain Puffs
4. Post - Shredded Wheat Spoon Size Original
5. Kellogg's - Mini-Wheats Unfrosted/bite size
6. Post - Shredded Wheat Spoon Size Wheat 'n Bran
7. Barbara's Bakery Hole 'n Oats Fruit Juice Sweetened
8. General Mills - Fiber One Original (bran)
9. Kashi - Kashi GoLean Original
10. Kashi - Kashi (Shredded Wheat Type) Island Vanilla

Visit cerealfacts.org to get the latest report and lists of the best and worst breakfast cereals.

Get the FACTS about Cereal

It's no surprise that kids tend to like the cereals they see advertised most often. Sadly, those cereals are usually packed with sugar and lack much good nutritional value. That's why Cereal FACTS (Food Advertising to Children and Teens Score) was developed in 2009. The organization strives to highlight how food marketing affects the health of children. Each year Cereal FACTS quantifies changes in the nutritional quality of cereals and children's exposure to cereal marketing. The 2012 report shows some things getting better, but other things getting worse.

The Good News

Thirteen of 14 brands that advertise to children improved nutritional quality by reducing sodium and sugar, and by increasing fiber. General Mills improved the nutritional

quality of all its child-targeted brands. Two popular advergame sites (Millsberry.com and Postopia.com) were discontinued and General Mills decreased banner ads on children's websites by 43 percent.

The Bad News

Total media spending to promote child-targeted cereals increased 34 percent between 2008 and 2011. The top ten most frequently marketed cereals to children are all heavy in sugar and light in nutrition.

Though companies do offer more nutritious and lower-sugar cereals for children, like Cheerios and Frosted Mini-Wheats, they are marketed to parents, not children.





Help Your Child Brush Daily

Parents or caregivers should help children brush their teeth twice a day until they are about eight years old. Children under seven or eight years of age do not have the coordination to brush very well on their own. However, they should be encouraged to brush to help develop that skill. Parents should brush their own teeth before or after a child brushes to make sure their teeth also get cleaned.

Use fluoridated toothpaste

For children under two years old, just a small smear is enough. Children over two years old can use a small drop about the size of a pea. Remember to ask them to spit out after brushing. It is best to brush our teeth in the morning after breakfast, and at night before going to bed.

Use a soft toothbrush

Always use a soft toothbrush. For very young children, a soft cloth, gauze or finger cot can be used to clean the teeth.

Keep your own mouth clean

You can give your child the bacteria that cause tooth decay. You can reduce this risk by keeping your own mouth clean. Don't share eating utensils, toothbrushes or other items that could transfer bacteria to your child.

Breast Milk Contains Lots of Good Bacteria

Breast milk plays an important role in determining the composition of the bacterial community in a child's digestive system.

Breast milk contains more than 700 species of bacteria, which is more than previously believed, according to a new study.

Breast milk from overweight mothers or those who put on more weight than recommended during pregnancy, however, had fewer species of bacteria, according to Spanish researchers.

They also found that mothers who had a planned cesarean-section delivery had fewer species of bacteria in their breast milk than those who had a vaginal birth, while mothers who had an unplanned C-section had about the same number of species of those who had a vaginal birth.

This suggests that a mother's hormonal state at the time of birth may affect the diversity of bacteria species in her breast milk, according to the study by Raul Cabrera-Rubio and colleagues, which was published in the *American Journal of Clinical Nutrition*.

The study authors are now trying to determine if bacteria in breast milk help babies digest the milk or if they play a role in immune system development. The investigators said their research could lead to improved child nutrition.

"If the breast milk bacteria discovered in this study were important for the development of the immune system, its addition to infant formula could decrease the risk of allergies, asthma and autoimmune diseases," they wrote.

Breastfeeding Does a Heart Good

Breastfeeding can reduce the risk of developing heart disease in both the breastfeeding mother and her child. Formula-fed infants tend to have higher cholesterol and less of the "good" cholesterol, LDL, than those who are breastfed. Formula feeding is also associated with increased Body Mass Index (BMI), a major risk factor in heart disease.

A number of studies have shown that mothers who don't breastfeed seem to have higher rates of cardiovascular disease, retained 'baby' weight, type 2 diabetes and heart attack, all of which increase the risk of heart disease.

And when it comes to heart health, more is better. In every study reviewed, mothers who breastfed exclusively and did so for a long time had healthier babies and were healthier themselves.

Breastfeeding is important for optimal health. International Board Certified Lactation Consultants (IBCLCs) are internationally credentialed health

care professionals with the advanced expertise and skills needed to support breastfeeding. IBCLCs provide prenatal education and timely assistance in hospitals, health clinics and WIC agencies. For information about becoming an IBCLC or to locate an IBCLC in your area, contact USLCA at www.uslca.org.

Central District Health, and the WIC clients it serves, are fortunate to have two IBCLC health professionals; Cindy Galloway and Laurie Valdes.

Cindy Galloway (left) and Laurie Valdes were recently recognized by the WIC staff for achieving IBCLC certification.



Baby Oatmeal Cookies

Uses: baby oatmeal and baby applesauce

- 2 cups flour
- 1 tsp. soda
- ½ tsp. salt
- ½ tsp. baking powder
- 2 ½ cups baby oatmeal
- 3 egg yolks
- 1 cup white sugar
- 1 cup brown sugar
- ½ cup baby applesauce
- 1 tsp. vanilla

Directions:

Mix eggs, sugars, applesauce and vanilla. Add dry ingredients and mix well. Scoop into small balls and place on cookie sheet. Bake at 350 degrees about 15 minutes.



Introducing Your Baby to Dairy



You should wait until your baby is 12 months old before feeding her cow's milk. Why?

1. Babies can't digest cow's milk as well as breast milk or formula.
2. Cow's milk has a high concentration of protein and minerals which can be hard on your baby's kidneys.
3. Cow's milk does not contain the right amount of nutrients and fats your baby needs. Breast milk and formula are much better.
4. Cow's milk may cause iron deficiency anemia because it can inhibit the absorption of iron.

Breast milk is the best source of nutrition and is designed to meet all of your baby's needs. Formula is also made to provide the important nutrients babies need to grow and develop. Cow's milk simply does not supply proper nutrition for growing babies.

So what about other milk products like yogurt and cheese?

Yogurt can usually be introduced at six months and cheese at around eight months of age. This is because the lactose is already broken down during the processing of these foods and the milk proteins are also removed, making it easier to digest.

Check with your doctor if you have any concerns.

What to Do With That Leftover Baby Food

Leftover Fruits

- Freeze into popsicles
- Use fruit puree as a jam for bread or crackers
- Mix into pancake or waffle batter for an added fruity taste
- Mix in with cottage cheese or yogurt

Leftover Vegetables

- Mix in with soups, stews (ex: vegetable soup)
- Mix into spaghetti sauce or other sauces and pour over pasta
- Mix in with cream cheese and spread on crackers
- Add to meatballs (carrots, peas, and green beans)
- Add to macaroni & cheese (broccoli, cauliflower, etc.)
- Mix broccoli into scrambled eggs

Leftover Cereals

- Cereal-Oatmeal Cookies (replace one cup of oatmeal with the cereal)
- Mix in with yogurt, oatmeal, etc.

Leftover Meats

- Mix in with sauces and casseroles
- Mix beef into beef stroganoff





It Takes Two to Talk About Birth Control

Did you know that of all of the pregnancies that occur throughout the United States each year, about half of them are unintended?

While most of the prescription birth control methods on the market are available only to women, most men and women feel that family planning and pregnancy prevention is a shared responsibility.

So what are some ways that men can be involved in family planning?

It starts with a conversation. Men and women can talk together about their future plans and decide together which method of contraception will work best for them. Men can support their partners who are on prescription birth control by helping to cover the costs, or by assisting with transportation to appointments, or picking up prescription refills.

CDHD provides support for men who want to play a more active role in family planning by providing free condoms. CDHD can also provide vasectomy procedures for those men who have all the children they want.

Visit our websites for more ways to involve men in family planning or to learn more about the services available:

cdhd.idaho.gov and reveal4real.org.

Immunization Requirements for School Entry

It's getting to be that time of year when parents need to register their children for school, and that can mean bringing the kids up-to-date on their immunizations. Below is a table that outlines the requirements:

Minimum Immunization Requirement for School Entry	
Immunization Requirement by Age	Doses of Vaccines Required
Children born on or before September 1, 1999 must have a minimum of:	4) Diphtheria, Tetanus, Pertussis (DTap) (1) Measles, Mumps, and Rubella (MMR) (3) Polio (3) Hepatitis B
Children born after September 1, 1999 through September 1, 2005 must have a minimum of:	(5) Diphtheria, Tetanus, Pertussis (DTap) (2) Measles, Mumps, and Rubella (MMR) (3) Polio (3) Hepatitis B
Children born after September 1, 2005 must have a minimum of:	(5) Diphtheria, Tetanus, Pertussis (DTap) (2) Measles, Mumps, and Rubella (MMR) (4) Polio (3) Hepatitis B (2) Varicella (Chickenpox) (2) Hepatitis A
7th Grade Immunization Requirements	
Immunization Requirement by Age	Doses of Vaccines Required
Children admitted to 7th Grade must meet the following minimum immunization requirement in addition to school entry requirements:	(1) Tetanus, Diphtheria, Pertussis (Tdap) (1) Meningococcal

Exemptions

Idaho law allows a parent/guardian to claim an exemption from immunization requirements for their child for medical, religious, or personal reasons. All exemptions must be documented on the official State of Idaho form provided by the Idaho Department of Health and Welfare, Immunizations Program.

Need an Appointment?

Call your family medical provider or contact the CDHD Immunizations Clinic at 208-327-7450.





New Website for Project Filter

Idaho's Project Filter has a new web link and contractor for its online cessation services:

www.quitnow.net/idaho

Enroll in either the QuitLine 1-800-QuitNow (1-800-784-8669) or Quitnow.net/Idaho and receive up to four weeks of the nicotine patch, gum, or lozenge.

FREE tobacco cessation classes are offered by Central District Health Department. Call 208-375-5211 to register. Classes are supported by the Idaho Tobacco Millennium Fund.

Quit Smoking and Add Years to Your Life



The message seems clear — the sooner you quit smoking, the longer you're going to live. This is the conclusion of a pair of studies published recently in the *New England Journal of Medicine*.

Researchers with the National Health Interview Survey analyzed health data on more than 200,000 Americans and calculated that current smokers were three times more likely to die during the course of the study than people who had never smoked. Their deaths were usually caused by smoking-related ailments, like heart and lung disease. Overall, their odds of surviving to age 80 were about half as good as never-smokers.

Still, the study found there were significant benefits to quitting, even if people had been smoking for years. Giving up the habit between the ages of 35 and 44 was associated with a gain of nine years of life. Those who quit between 45 and 54 picked up about six years. And even crushing the habit at age 64 could add four years to a person's life.

According to the Centers for Disease Control and Prevention (CDC) smoking rates in the U.S. have declined to about 19.3 percent among adults. But that still leaves an estimated 54.3 million smokers. The grim reality of these numbers is a smoking-related death toll of some 443,000 Americans each year.

A second study examined mortality rates over half a century in 2.2 million people age 55 and above, possibly the largest such survey ever undertaken. The survey measured trends in death rates across three time periods: 1959 to 1965, 1982 to 1988 and 2000 to 2010. The analysis revealed a trend that also cropped up in the other study: Women's death rates from smoking, which had long lagged behind men's, had pulled even.

It's an unsurprising glass ceiling to break, doctors said. Women began smoking routinely after World War II, about two decades after men took up the habit, so it was only a matter of time until their mortality rates caught up.

The take away from both studies is that far more effective efforts are needed to reach potential and current smokers in order to reduce deaths from smoking-related illnesses.

It's never too late to quit!



Boise Hawks Immunization Nights

CDHD is teaming up with the Boise Hawks again this year to promote children's vaccinations. The Boise Hawks season kicks off with Fan Fest May 10th, and then the home opener June 17th against the Spokane Indians. CDHD Immunizations staff will be on hand to check children's immunizations records during Fan Fest, and then every Thursday home game for Boise Hawks Immunizations night.

Any child age 4 to 13 can become one of Humphrey's Heroes and get a voucher to a future Hawks game if their immunizations records are up-to-date. Ask your medical provider if they have vouchers for the Boise Hawks the next time your children are in for immunizations. Or contact our Immunizations Department at 208-327-7450 about getting vouchers for your children.



April 20-27, 2013

Children spend more than 30 hours a week in front of a "screen" (TV, video games, computers). By the time the average person reaches the age of 70, he or she will have spent the equivalent of seven to ten years watching TV. Spending too much time in front of the "screen" is associated with numerous negative consequences. For example, children who watch more TV are more likely to be overweight and perform poorly in school.

Unplug is a week-long community event, sponsored by *Be Outside, Idaho* and the Blue Cross of Idaho Foundation for Health, that encourages families to "unplug" from the TV, video game consoles, computer games and go explore outdoor activities. For a full list of community activities that promote being active outdoors and nature visit www.unplugandbeoutside.com.

Look for the *Unplug* passport card at participating Unplug event locations. Children who attend three or more events during *Unplug* week will be entered to win drawing prizes.

