

# NUTRI-NET NEWS

JANUARY, 2002

*This newsletter is a service of the Nutrition Education Network of Wisconsin. The Network is designed to enhance coordination and communication among agencies and organizations that educate Wisconsin's low income individuals and families about nutrition and food.*

*Nutri-Net News shares brief information about programs and materials that support healthful and enjoyable eating.*

*Visit our Web site at: <http://www.nutrisci.wisc.edu>.*

## **Working Together to Give Consistent Messages to Clients: Milk Recommendations for Children and Adolescents**

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Parents frequently receive conflicting nutrition information, and milk recommendations for their children can be one area of confusion. The Wisconsin Nutrition and Physical Activity Workgroup (WINPAW) works to ensure consistent messages, policies, and best practices among state nutrition programs to prevent childhood obesity in Wisconsin. Promoting the consumption of low-fat and fat-free milk, as appropriate, for children and adolescents is one WINPAW strategy.

The incidence of overweight and related diseases has increased, and the quality of children's and adolescents' diets has declined in the United States. Calcium intakes range from 76% of dietary recommendations for children ages 7 to 10 years to only 42% of dietary recommendations for girls ages 15 to 18 years (1). Low calcium intakes can contribute to bone fractures in youth and osteoporosis in later adulthood.

Preoccupation with being thin, especially among females, as well as the misconception that all dairy foods are fattening, may be a substantial barrier to adequate calcium intake. Optimal calcium intake is most important during early childhood and adolescence when bones grow and incorporate calcium most rapidly. By age 17, approximately 90% of adult bone mass has been established.

Calcium also plays an important role in the proper functioning of the heart, muscles, and nerves. However, some calcium sources such as whole milk and full-fat dairy products are significant sources of saturated fat and cholesterol. Atherosclerosis begins in childhood, and elevated serum levels of total cho-

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# Nutri-Net News

lesterol and low-density lipoprotein cholesterol (LDL-C) are associated with fatty streaks and fibrous plaques in adolescents and young adults. Reducing dietary saturated fat and cholesterol reduces blood total cholesterol and LDL-C (2).

The new federal nutrient guidelines recommend the following intakes of calcium for these age groups: 1-3 years: 500 mg; 4-8 years: 800 mg; 9-18 years: 1,300 mg (3). The Dietary Guidelines for Americans, intended for healthy Americans age 2 and older, advises: "Choose a diet that is low in saturated fat and cholesterol and moderate in total fat" and "Choose fat-free or low-fat milk, fat-free or low-fat yogurt, and low-fat cheese most often"(4).

## Food Choices for Adequate Calcium Intake and Good Health

Dairy foods provide approximately 73% of the calcium in the U.S. food supply. Yet many parents are confused about milk choices for their children. Children under 2 years of age need adequate dietary fat to assure optimal brain development; recommendations about the type of milk offered should be based on the child's overall dietary pattern. Beginning at 24 months of age, children can join the rest of the family in drinking low-fat (1%) milk and fat-free (skim) milk. This is an important step in achieving a dietary intake that is moderate in total fat and low in saturated fat and cholesterol.

In addition, offering and encouraging food choices that are non-dairy sources of calcium can increase calcium intake and help to lower saturated fat and cholesterol intake. These foods include the following:

- Calcium-fortified fruit juices, cereals, and breads (check labels for calcium and vitamin D content).
- Mustard greens, turnip greens, broccoli, and brussels sprouts.
- Foods with dried beans, for example chili and bean soup.
- Calcium-fortified tofu and soymilk (check labels for calcium and vitamin D content).

- Canned fish with edible soft bones such as salmon, sardines, and mackerel.

## What About Children and Adolescents with Lactose Intolerance or Milk Allergy?

It is important to communicate that lactose intolerance does not mean that one is allergic to milk or dairy products. Dairy foods that provide key nutrients, in addition to calcium, such as vitamins A and D, riboflavin, phosphorus, and protein need not be eliminated. Including milk and other lactose containing dairy food in the daily diet may actually improve tolerance to lactose (5).

Most children and adolescents can consume small amounts of milk without symptoms. Drinking 1 cup or less of milk with meals is usually tolerated. Cheeses and yogurt are generally tolerated better than milk. Lactose-reduced and lactose-free milk and milk products and lactose tablets are other options to consider.

Milk allergy is rare. When present, severe, life-threatening reactions may occur. These children need to totally avoid all cow's milk products. Cow's milk replacements such as soymilk and juices that are calcium fortified may help replace key nutrients.

## References:

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3. Committee on Dietary Reference Intakes. *Dietary Reference Intakes for Calcium, Phosphorus, Magnesium, Vitamin D and Fluoride*. Washington DC: National Academy Press; 1997.
4. U.S. Department of Agriculture. *Nutrition and Your Health: Dietary Guidelines for Americans*. 2000.
5. Inman-Felton AE. Overview of lactose maldigestion (lactase nonpersistence). *J Am Diet Assoc*. 1999; 99:481.

# Nutri-Net News

## Surgeon General's Call to Action to Prevent and Reduce Overweight and Obesity

*Betsy Kelley, M.S. R.D.*

*Outreach Specialist, UW-Extension*

The Surgeon General has released a report based on research and advice of policy makers and community members recommending ways that communities can help prevent overweight and obesity.

Some facts about overweight and obesity that are especially relevant to Network partners:

- In women, there are higher rates of overweight and obesity in racial and ethnic minority groups than among non-Hispanic white women.
- For all racial and ethnic groups combined, low-income women are approximately 50% more likely to be obese than higher-income women.
- Non-Hispanic white adolescents from low-income families have a higher prevalence of overweight than those from higher-income families.
- Less than 1/3 of adults get the recommended amount of physical activity.
- 40% of adults do not participate in any leisure-time physical activity.
- Overweight in children and adolescents is generally caused by lack of physical activity, unhealthy eating habits, or a combination of the two.

As we begin to develop our physical activity campaign for 2002-3, the Surgeon General's report makes some excellent suggestions for us to consider. These are chosen from the fifteen activities that are national priorities for immediate action:

- Change the perception of overweight and obesity at all ages. Health should be the primary concern, not appearance.
- Provide culturally appropriate education in schools and communities about healthy eating habits and regular physical activity, based on the Dietary Guidelines for Americans, for people of all ages. Emphasize the consumer's role in making wise food and physical activity

choices.

- Build physical activity into regular routines and playtime for children and their families.
- Encourage all employers to make physical activity available for all employees.
- Promote healthier food choices, including at least five servings of fruits and vegetables each day, and reasonable portion sizes.

Other suggestions from the report include:

- Make community decision makers aware of programs that support healthful food and physical activity choices.
- Educate parents about the need to serve as good role models by practicing healthy eating habits and engaging in regular physical activity in order to instill lifelong healthy habits in their children.
- Empower families to manage weight and health through skill building in parenting, meal planning, and behavioral management.
- Expand efforts to encourage healthy eating among nutrition assistance recipients.
- Emphasize to media professionals the higher prevalence of overweight and obesity in low-income and racial and ethnic minority populations and the need for culturally sensitive health messages.
- Build awareness of the importance of social and environmental influences on making appropriate diet and physical activity choices.
- Emphasize to media professionals the need to develop uniform health messages about physical activity and nutrition that are consistent with the Dietary Guidelines for Americans.

In preparing the report, the Surgeon General's office gathered ideas from clinicians, researchers, consumers and advocates. The full text of this report, entitled *The Surgeon General's Call to Action to Prevent and Reduce Overweight and Obesity*, and fact sheets on obesity prevention, can be found at [www.surgeongeneral.gov/topics/obesity/default.htm](http://www.surgeongeneral.gov/topics/obesity/default.htm).

# Nutri-Net News



## **JUMP 'N JIVE ... Come Alive With Fruit Nears Completion**

The multi-agency social marketing and nutrition education campaign, **JUMP 'N JIVE ... Come Alive With Fruit**, successfully completed its third round of promotion during the months of October and November 2001. The campaign was piloted in three counties in the fall of 1999, expanded to 28 counties and Great Lakes Inter-Tribal Council in the fall of 2000 and was conducted in 34 counties this fall. We are now collecting, tabulating and analyzing evaluation results from the 2001 campaign. A final report will be distributed to campaign coordinators in March. Look for a summary of the evaluation in the April 2002 issue of *Nutri-Net News*.

## **Network Prepares for New Campaign – Spring 2003**

When local agencies/programs completed their evaluation surveys for campaign 2000, they told us that the theme/topic most helpful in addressing the needs of their limited-income audiences was “Be Active.” Now a new report from the Surgeon General calls for action to fight overweight and obesity (see Betsy Kelley’s article on page 3.) One of the key actions recommended in the report is conducting a national campaign on the benefits of regular physical activity and healthful dietary choices. The report also stated that overweight and obesity are more prevalent in lower-income families than in higher-income families. Thus, a physical activity campaign is both timely and on target for the Network and its partners.

## Network Update

The Network’s physical activity workgroup gathered background information for the development of a nutrition education campaign to help Wisconsin’s food stamp eligible audience adopt healthy exercise and eating behaviors consistent with the Dietary Guidelines for Americans. Social marketing research and materials from other states were reviewed and three campaign messages and three types of graphics were selected for testing. The testing took place at Dane County WIC clinics in the month of December. The messages tested were: “Step Lively!” “Jump 'N Jive...Be Active and Alive!” and “Walk, Dance, Play -- Be Active Every Day!” The graphics were active animals, active people, and active fruits/vegetables. The most preferred message was “Walk, Dance, Play -- Be Active Every Day!” because participants said, “it tells you what to do to be active.” Participants preferred the picture of active people because it showed a parent and a child being active together.

The next steps in planning the campaign will be working with an artist on the graphics and logo for the education/marketing materials and identifying and developing the actual campaign materials. Look for further developments of “Walk, Dance, Play -- Be Active Every Day!” in the April 2002 issue of *Nutri-Net News*. If you would like to participate in developing the campaign or have ideas for materials you would like to see, please contact Kate Pederson.

### **OUR MISSION:**

*The Nutrition Education Network of Wisconsin facilitates collaborative planning of nutrition education programs at the state and local levels. We promote healthful and enjoyable eating so that Wisconsin’s low income individuals and families receive consistent, positive, relevant, accurate, and effective nutrition messages.*