Puppet shows help Hispanic health group promote proper nutrition

From the Hartford Courant

The 4-year-olds’ eyes are glued on a spiky-haired puppet in a jeans jumpsuit whose name is Tommy.

Tommy, who watches too much television, is cajoled into going to a basketball practice. When he gets thirsty at practice, he asks, “Is there a soda machine around here?”

“Ahhh, nooo” comes a voice out of nowhere. Turns out it’s a talking water bottle puppet—Ms. Water—who has come to warn Tommy about soda.

“Soda makes you thirstier, and it has a lot of sugar that’s not good for you,” Ms. Water tells Tommy.

Minutes later, Maria Arroyo, the puppeteer, appears from behind the mini-puppet theater and quizzes her rapt audience in Marilyn Viera’s pre-kindergarten class at Burr Elementary School in Hartford, Conn.

“How many glasses of water should you drink a day?” Arroyo asks.

“Six to eight,” comes the answer.

“This boy wants to lie around. ... What’s he need to do?” she asks.

“Exercise.”

“Should he eat candy a lot?”

“No, fruits and vegetables.”

Maritza Molina, 4, a Connecticut preschooler, gets into the act when asked to show her muscles at a puppet show about nutrition by the Hispanic Health Council.

For more than a decade, the Hispanic Health Council, in partnership with the University of Connecticut, has been educating Hartford’s young students with an entertaining series of six puppet shows that carry serious messages about nutrition, obesity, exercise, food safety, diabetes and heart disease. Hispanic Health Council officials say it does about 400 puppet shows every year.

And while you might wonder how much a 4-year-old or even an 8-year-old might retain, it’s clear at this recent performance that these puppets reach kids.

“I see it every year,” said Ginnene Branch, a kindergarten teacher at Kennelly School in Hartford. Before the first couple of puppet shows, many of the children are not interested in the healthful snacks—fruits and vegetables—that she often brings to school for them.

“I don’t care how much we tell kids, ‘Vegetables are good for you; eat something from each of the food groups.’ Kids will say, ‘I don’t like vegetables.’ Some of the kids wouldn’t even eat fruit,” said Branch.

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Director’s Corner

Letter to members from Dr. Amelie Ramirez

If we needed yet another reason to address childhood obesity, a recent study indicates that children who establish good exercise habits and are physically fit are more likely to be healthy adults.

The study, published in the January issue of Pediatrics and reported by Reuters, aimed to determine how childhood fitness influences adult health.

In 1979, Norwegian researchers analyzed the exercise habits and fitness levels of more than 1,000 children ages 11-15 participating in the Oslo Youth Study. The measures were retaken in 1981, 1991, 1999, and 2006.

Study results show that participants who began the study in good physical condition were less likely to be obese or have high blood pressure in their 20s and early 30s.

However, by age 40, the link became more tenuous, with more participants becoming overweight and having high blood pressure despite their level of childhood fitness.

Based on the findings, the researchers conclude that, although having high childhood physical fitness levels can lower the risk of obesity and associated diseases as an adult, lifelong fitness habits are essential for continued good health.

This is why it’s so important to look at environmental and policy factors that influence child health and fitness, such as how healthy school foods are, how much time children have to be physically active during the school day and after, whether they have safe places to be active in their neighborhoods, and whether the grocery stores near them at home offer healthy affordable foods. This is especially true for those children at higher risk for obesity, including Latinos.

As always, please be sure to frequently check our Web site for updates on our and others’ efforts to address Latino childhood obesity.

Amelie G. Ramirez, Dr.P.H.
Director, Salud America!
Director, Institute for Health Promotion Research at The University of Texas Health Science Center at San Antonio

News Briefs

Salud America! CFP draws 90 applicants

Salud America! received 90 completed applications in response to its recent call for proposals (CFP) for up to 20 pilot research projects to address Latino childhood obesity. Finalists will be notified April 15, 2009.

Salud America! membership number rises

The number of Salud America! members has grown to 1,331 as of March 26, 2009, up from 1,280 in December 2008, 1,050 in October 2008; and 785 in July 2008. We are gaining new members every day, and we urge you to invite colleagues to join, as well as others you may know who are interested in addressing the problem of obesity among Latino children. Join the network by clicking here.

Salud America! NAC member gets new position

Dr. Amy Lazarus Yaroch, a member of the Salud America! National Advisory Committee (NAC), has become executive director of the Center for Human Nutrition in Omaha, Neb., which promotes nutrition instruction and conducts research in nutrition and related fields. Previously, Dr. Yaroch was a behavioral scientist and program director at the National Cancer Institute’s Health Promotion Research Branch.

Funding Opportunities

CFP: Active Living Research, Healthy Eating Research

Through its Active Living Research and Healthy Eating Research national programs, RWJF has issued a CFP to support studies to evaluate changes in policies or environments that can promote healthy eating and increase physical activity. The grants will focus on evaluating those changes that can reach children at highest risk for obesity, including African-American, Latino, Native American, Asian-American and Pacific Islander children (ages 3 to 18) who live in low-income communities or those with limited access to affordable healthy foods and/or safe opportunities for physical activity. The application deadline is July 17, 2009.

NHLBI, NICHD grants on childhood obesity

The National Heart, Lung, and Blood Institute (NHLBI) and the Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD) seek cooperative agreement grant (applications from institutions to conduct randomized, controlled trials to test innovative interventions that address childhood obesity. The grant runs parallel with a separate funding opportunity that solicits applications for a research coordinating unit. Letters of intent are due Sept. 8, 2009, and applications are due Oct. 6, 2009.
Stepping Up Against Latino Childhood Obesity

San Antonio school starts wellness campaign

From the Alliance for a Healthier Generation

After watching some middle school students using soda machines to purchase “lunch,” Principal Dr. John Kennedy decided that some changes needed to be made at St. Anthony Catholic School in the predominantly Latino city of San Antonio, Texas.

He was approached by some parents who also were interested in addressing student health, and the “Mi Vida” (My Life) wellness campaign was born.

Mi Vida is an acronym for a short poem they wrote:

My life includes Veggies, fruits & fun in meals with everyone, daily walks or climbing trees, and learning at St. Anthony’s!

The motto of Mi Vida is “Play Often.

Students from St. Anthony Catholic School partake in a “Mi Vida” wellness campaign.

Eat Well.”

“The paths toward healthy minds, bodies, and spirit are interconnected, and achieving this overall health is part of our community goals at St. Anthony’s,” said Dr. Kennedy.

“Increasing knowledge about the benefits of exercise and healthy eating are just some of the steps we are taking for this life-long process.”

The campaign first addressed student eating by removing vending machines, changing cafeteria options, and creating new birthday party policies.

Next it focused on “play” by including teachers and students in a pedometer challenge, with students receiving ribbons for completion.

St. Anthony has a dedicated school wellness council involving passionate parents and support from faculty.

“With the focus on the faculty leading the way, we have a chance to show the children how anyone can make good wellness choices, and in fact, seven of the 34 teachers ran the San Antonio half- or full marathon with many of our parents,” Dr. Kennedy said.

The school also hopes to provide healthier food options to students and staff upon the construction of its new cafeteria, to help broaden the campaign’s effect.

“It is exciting to see how little, relatively inexpensive steps can bring change to the community,” said Dr. Heather Sullivan, parent and Mi Vida committee member. “Indeed, we have learned how essential it is to include as much of the community as possible.”

Meet the National Advisory Committee

Dr. Arredondo also is involved with Aventuras Para Niños (Adventures with Children), to promote healthy eating and exercise in many culturally appropriate ways—teaching parents effective ways to engage their family in healthy behaviors, training teachers to deliver healthy messages to students, and hiring community health workers to advocate for better parks and more fruits and vegetables in grocery stores.

“It’s important to involve researchers, community leaders, etc., to really address Latino childhood obesity at many levels,” said Dr. Arredondo, a member of the Salud America! National Advisory Committee. “That’s the most effective ways to tackle the epidemic.”

Elva Arredondo

Studies the cultural influences and psychosocial mediators of preventive behaviors, such as physical activity and dietary practices among Latinos.

One way to make a difference in the world is to improve people’s health,” she said.

One of her programs, Caminando Con Fe (Walking with Faith), promotes physical activity among church-going Latinos and advocates environmental changes that facilitate physical activity.

When she was just a teenager, Elva Arredondo got a first-hand taste of acculturation when her family moved from her native Mexico to Seattle.

Her mother worked two jobs and had little time for the healthy homemade meals they had traditionally cooked in Mexico—so fast food picked up the slack.

Watching TV helped teach them English—and many unhealthy food messages, too.

“I remember being so thrilled my mother took us to McDonald’s, it felt like we were living the American life,” Arredondo said.

“But we all gained a little bit of weight. I’ve seen how acculturation can impact your health.”

Arredondo’s experience spurred her to get her PhD and become a professor dedicated to preventing obesity and its health complications among foreign-born and U.S.-born monolingual Spanish-speaking and bilingual populations.

Today, Dr. Arredondo works at San Diego State University and studies the cultural influences and psychosocial mediators of preventive behaviors, such as physical activity and dietary practices among Latinos.

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### Study: Health impacts of obesity seen in children as young as age 3, especially Hispanics

Health problems caused by childhood obesity may begin as early as age 3 with the onset of risky cholesterol and artery inflammation levels that often portend heart disease, diabetes, and other health problems in young adulthood, according to a new study.

Risky cholesterol and inflammation levels were highest among Hispanic children.

The study, presented by researchers at the University of Miami at a March conference of the American Heart Association in Palm Harbor, Fla., examined data from the National Health and Nutrition Examination Survey on children ages 3-6.

“People believe their children will outgrow their baby fat and that a chubby 2-year-old is healthy; it isn’t true,” said Sarah Messiah, a UM research assistant professor and lead author of the study, according to a [Miami Herald report](http://www.miamiherald.com).

“These children are experiencing a childhood at the edge of disease, potentially setting them up for chronic problems,” she said.

The survey sharply lowers the age at which problems have been detected; most previous studies involved children 8 and older, Messiah told the Herald.

The study measured 3,000 children’s waist circumference and body mass index (BMI) and compared them with their cholesterol levels and inflammation of the arteries, which are potential risk factors for future health problems.

It found that children with high BMI and large waist sizes are far more likely to have low levels of HDL, the “good” cholesterol, and high levels of artery inflammation, warning signs for future heart disease.

The study found sharp differences by race and ethnic group.

- High BMI and waist size predicted higher inflammation levels in all 5-year-old girls and in 6-year-old black and Hispanic boys.
- High BMI and waist size predicted lower levels of HDL in 3-year-old Hispanic girls and 5-year-old Hispanic boys.

 Messiah urged parents to watch their child’s weight even in preschool years and pediatricians to measure children’s waist size and body mass at least by age 3, and preferably earlier.

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### Research Briefs

#### Study: Physically fit Texas students likely to fare better in school

A [study](http://www.texaslifestyles.org) of more than 2.4 million Texas students found that students who are physically fit are more likely to do well on the state’s standardized tests and have good school attendance. Fit students are also less likely to have disciplinary referrals.

The findings are based on the results from six fitness tests taken by students in grades 3-12 in over 6,300 Texas schools in 2007-2008. At high-performing schools that earned the state’s top rating, about 80 percent of students have healthy cardiovascular fitness levels. At schools with the state’s lowest rating, slightly more than 40 percent of students achieved cardiovascular fitness.

**Faith-based coalitions to combat childhood obesity, especially among minorities**

In a new [initiative](http://www.bluecrossblueShield.org), which aims to help these diverse groups advance policy and environmental changes, recognizes the growing role that faith-based groups play in addressing public health issues like obesity, especially among children at greatest risk (Latinos, other minority groups, etc.). Among the projects, which are located in 18 states, is a San Diego initiative in which faith leaders, youth, and promotoras (Latino outreach workers) will work to improve the safety, aesthetics, and physical structures of playgrounds and parks.

**WIC Association, Sesame Workshop to promote healthy food to underserved families**

The National Women, Infants, and Children (WIC) Association and Sesame Workshop, the nonprofit educational organization that created the Sesame Street TV show, have partnered on a [new program](http://www.sesamestreet.org) to provide underserved mothers and children with healthier food options and encourage them to adopt healthy habits.

**New grant aims to improve immigrants’ diets**

A $2.3 million grant teams Tufts University with several nonprofits in Somerville, Mass., to help local recent immigrants to the U.S. eat healthier foods and be more physically active, according to a [Boston Globe news report](http://www.bostonglobe.com).

In Somerville, where 29 percent of residents are foreign-born, clinics see higher levels of diabetes in Latino and Haitian Creole patients than in other residents. Researchers will follow 400 mothers who have been in the U.S. for less than five years and their children on how to best communicate about and implement methods to help them eat healthier.
Farmer’s market launched to address obesity, diabetes in South Texas

HOUSTON—To address an epidemic of obesity and its life-threatening complications in the predominantly Latino area of Brownsville, Texas, faculty and students at The University of Texas School of Public Health Brownsville Regional Campus have launched a farmer’s market loaded with fresh fruits and vegetables.

Research has shown that the predominately Hispanic community of Cameron County, in which Brownsville is located, has twice the national average of diabetes, a co-morbidity of obesity.

According to the Texas Diabetes Council 2008 fact sheet, Hispanics ages 18-44 have the highest prevalence of diabetes (6.8 percent) among all ethnic age groups in Texas.

The Brownsville Farmer’s Market, a collaborative effort to provide locally grown produce and increase the awareness of chronic diseases associated with obesity, is the brainchild of Dr. Belinda Reininger, associate professor of behavioral sciences at the UT School of Public Health.

The market provides affordable fresh produce to the community, and it provides local farmers an outlet to sell their produce. It also gives health care experts the opportunity to educate shoppers on nutrition, etc.

Through a grant from the Texas Department of State Health Services, farmer’s market partner Su Clinica Familiar provides a voucher system for low-income families, who can receive $10 in vouchers to purchase fruits and vegetables.

“Last week I bought four cucumbers, six grapefruits, a dozen farm eggs, fresh cilantro and dill all for $10,” said Dr. Rose Gowen, medical director of the Clinical Research Unit at the UT School of Public Health and chair of the market’s board of directors.

The idea was developed more than a year ago when graduate students, faculty members, and the Texas Department of State Health Services assessed the Brownsville community’s fruit and vegetable consumption.

“Based on our initial assessments of the community, it was clear that creating access to fresh fruits and vegetables was needed. As with most behavioral change efforts, education alone was not enough; environmental changes were needed too,” Reininger said. “That is when we partnered with stakeholders, including public officials, to create the Brownsville Farmer’s Market.”

Many area diabetes cases are related to obesity, which is beginning in childhood and adolescence, said Gowen, a local resident and a driving force behind the market.

In 2008, faculty of the Brownsville regional campus found that 52.2 percent of Cameron County adults older than 18 are considered obese (body mass index of 30 or higher) compared to the national average of 28 percent. Additionally, 27 percent of area adolescents are obese, boys more so than girls, compared with 16 percent nationally.

“A significant portion of the obesity problem here is because local diets are high in carbohydrates and include very few vegetables and fruits,” Gowen said.

At the market, shoppers can discover a wide range of produce from cilantro and eggs to dragon fruit and tomatoes from local farmers at low prices.

“The market produce is definitely fresher and has been handled less,” said frequent market shopper Lee Lopez. “My family and I enjoy the fresh produce and supporting local farmers.”

On-site nutrition, obesity and diabetes information is provided by the UT School of Public Health, Texas Department of State Health Services (DSHHS) and other organizations. Health screenings, such as glucose testing, are provided once a week.

The response to the market has been strong. More than 600 people attended the market’s opening day in November 2008. Several of the 13 vendors were completely sold out of their produce within the first hour of opening.

The market is located along Linear Park’s walking trail, which the committee hopes will encourage people to increase their physical activity. Market shoppers walk or ride bicycles as they browse the merchandise from vendors.

Students studying kinesiology provide physical activity for children while parents shop.

The market is scheduled to be open from 8 a.m. to noon every Saturday until July 2009. The committee is currently seeking funding opportunities to bring the market to the community year-round.

“It is important that everyone learn about healthy eating and active lifestyles. We hope the market will create a change in the entire city,” Gowen said.
Puppet shows help promote nutrition

Continued from page 1

But after a couple of puppet-show discussions on nutrition and health, she said, “It’s like night and day.” She’ll ask, “Who wants fruit? Everyone wants fruit. Who wants vegetables? Everyone does.”

The show is part of a multifaceted effort—with additional programs and materials that reach parents and teenagers as well as small children—designed to address the nutritional and health needs for the Latino community.

A recent study found that 41 percent of a sample of children ages 6 to 11 in the Hartford school system are either obese or at risk of obesity, compared with a national average for that age group of 33.3 percent, according to Dr. Lee Pachter, a pediatric researcher at the Connecticut Children’s Medical Center and a professor at the University of Connecticut School of Medicine.

In Connecticut, 64.6 percent of Latino adults are obese or overweight, compared with 64.5 percent of blacks, and 58.9 percent of whites, according to statistics provided by the Hispanic Health Council.

With the extra weight comes greater risks for diabetes and other diseases. In Connecticut in 2007, 6.7 percent of white adults were told by their doctors that they have diabetes, compared with 15.8 percent of blacks and 8.1 percent of Hispanics.

Why the disparity?

Rafael Pérez-Escamilla, who is director of the Connecticut Hispanic Family Nutrition Program and a professor of nutrition and public health at the University of Connecticut, said the main explanation is lack of access to healthful foods and lack of exercise.

“Healthy foods are much more expensive,” he said.

In addition, he said, there is a lack of green space in urban low-income areas and a lack of opportunity and money for sports activities. “Latinos and low-income groups are very vulnerable to the marketing of unhealthy foods by the food industry,” said Pérez-Escamilla.

Pérez-Escamilla said children are “the best ambassadors” when “they go home and share the healthy nutrition messages we give to them. They are a part of the movement convincing parents of the need to make a change.”

Children play a very crucial role, he said, particularly in families where the parents don’t speak English very well. These kids often play a more central role in terms of the decision-making about diet and food purchases than do most kids, he said.

Pachter concurred that it is very important to reach children when they are young. “I really feel the future of obesity prevention is going to start younger and younger and younger,” he said. “I think that the habits that lead to obesity are formulated very early in life.”

Back in the classroom at Burr, the kids are telling Arroyo all about their healthy habits. Uriana Ortega says, “I have a cousin who doesn’t eat fruit, but I eat a lot of fruit at my grandma’s house.”

Makayla Esquinlin says she likes broccoli.

Later, Jennifer Fagalar, Uriana’s mother, said the 4-year-old definitely carries the healthy-habits messages home. When her mother offers her a treat, she goes for fruit and vegetables, not candy.

Said Fagalar: “She said junk food won’t let her grow like she’s supposed to.”

**Kids’ Health Q&A**

**Question:** How do I pack a healthy lunch box for my children?

Packing a healthy lunch for your children is a great way to get them the nutrients they need to power through the school day. Unfortunately, lunch boxes are often filled with packaged “convenience” foods like full-calorie soda, chips, and cookies. This can add up to a lot of excess fat, sugar, sodium and calories that may contribute to long-term health problems like diabetes and obesity. These extra calories may also make kids sluggish or cranky in the afternoons.

When deciding what to put in your child’s lunch box, it’s a good idea to include foods from different groups. Focusing on variety not only makes lunches more interesting, but also helps your children enjoy a balanced meal that will provide the energy and nutrients they need to grow, play, learn, and stay healthy.

Here are the ingredients for a healthy lunch box from the Alliance for a Healthier Generation:

1. One serving of vegetables or salad and one serving of fruit (fresh, canned, or dried can all count).
2. One serving of a low-fat or fat-free milk or dairy item, such as a low-fat cheese stick, a yogurt cup, or some cottage cheese.
3. One serving of meat, chicken, fish, eggs, peanut butter, beans, or another protein source.
4. A healthy drink, such as water or 100% juice.

Go here for more advanced tips for packing a healthy lunch box.