

# The NATION'S HEALTH

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Photo by Stephen Chemin, courtesy Getty Images

A grocery worker arranges avocados at a New York City store in January. New federal dietary guidelines encourage Americans to consume four-and-a-half cups of fruits and vegetables each day.

## Educational outreach urged for public New dietary guidelines advocate physical activity, calorie control

**T**HE FEDERAL government's new "Dietary Guidelines for Americans" were released in January, receiving widespread praise for a heightened focus on physical activity and calorie control as well as an emphasis on eating fruits and vegetables. However, advocates warn that the guidelines could yield little progress without effective outreach and marketing.

Revised every five years since their debut in 1980, the 2005 dietary guidelines are being touted as a blueprint for action in the fight against obesity. Nearly two-thirds of Americans are overweight or obese, and federal officials are hoping Americans will take heed of

the new recommendations to not only lose weight, but prevent obesity-related health conditions. Federal dietary guidelines help form the basis of government food-assistance

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## President's 2006 budget proposal bad news for public health

**P**RESIDENT Bush's proposed budget for fiscal year 2006 is woefully shortsighted in its cuts to public health and prevention, according to a wide spectrum of health advocates.

Unveiled Feb. 7, the president's budget proposal includes a total of \$642 billion for the U.S. Department of Health and Human Services and its related agencies — an increase of \$58 billion over fiscal year 2005. However, within the HHS budget is a proposed cut of \$550 million, or nearly 7 percent, for the Centers for Disease Control and Prevention, including a \$60 million cut to the agency's chronic disease prevention and health promotion program. The funding numbers fail to reflect the growing need for prevention, as the nation's top killers — heart disease, cancer and stroke — are

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## Living longer, stronger in later years

## Nutrition, exercise essential components for healthy aging

First in an in-depth series on healthy aging in conjunction with APHA's National Public Health Week 2005. The event, which will be held April 4–10, focuses on "Empowering Americans to Live Stronger, Longer!" Visit [www.apha.org/nphw](http://www.apha.org/nphw) for details.

**A**S THE LIFE expectancy of Americans continues to increase, the pressing concern for many public health professionals has shifted from living longer to living healthier. Good nutrition and physical activity are integral parts of the healthy living equation, and as such, researchers are always searching for innovative ways to instill healthy behaviors.

The importance of promoting healthy aging behaviors is gaining more ground every day as health professionals ready themselves for the coming wave of older baby boomers. By 2030, about 20 percent of the U.S. population will have reached age 65, and many will face the nation's top three killers: cancer, heart disease and stroke. The three conditions were the leading causes of death among older Americans in 2000, causing 60 percent of deaths among those ages 65 and older, according to the "State of Aging and Health in America 2004," a Centers for Disease Control and Prevention report released in November 2004.

The good news, though, is that heart disease, stroke and cancer are oftentimes preventable with the adop-

tion of good eating habits and regular physical activity, among other healthy behavior choices. Such behavior could also stave off diabetes, which currently affects one in five Americans ages 65 and older, according to the CDC report. With overwhelming evidence supporting the benefits of exercise and good nutrition, the challenge is spreading the message and bringing older Americans into the fold.

"As public health professionals, what we want to focus on is finding functional benefits that mean something to older adults, like getting greater mobility or being able to lift their grandchild," said Kay Loughrey, MPH, RD, aging

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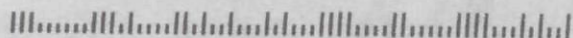
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Photo by Chris Arredondo, courtesy Senior Wellness Project

Participants in the Lifetime Fitness Program get a workout at Seattle's Central Area Senior Center in July 2002.

# Good nutrition, physical activity key to healthy aging among seniors

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program specialist at the U.S. Administration on Aging. "Those are the kinds of benefits that people really care about, rather than the standard benefits like better health, which most people already know."

AoA recently launched the national "You Can!" campaign, which is working at a community level to engage more older adults in becoming physically active and improving their nutrition. A big challenge to engaging the older population is simply getting them information, Loughrey said. Community organizations need to reach out to health care providers, such as giving doctors a list of available fitness and nutrition resources to which patients can be referred, she told *The Nation's Health*.

"It's never too late to start (exercising and eating right)," Loughrey noted. "There's so many benefits, both functional and physical — there's almost too many to list."

An important aspect in changing lifestyle behaviors is to "start slow with any change and determine short-term as well as long-term goals," according to Serena Sanker, senior program associate at the National Council on the Aging, a non-profit organization that has focused on aging issues for more than

50 years. For example, older Americans can make a commitment to walk a few minutes a day several times a week or consider some easy diet changes such as substituting an unhealthy snack such as potato chips with fruit, Sanker said. Starting out with small modifications can ensure a longer lasting behavior change, she noted. According to the CDC aging report, older people don't necessarily have to take part in strenuous physical activity to see health benefits — daily walking or leisure-time activities such as gardening can also improve health.

"Physical activity is absolutely the thing that all Americans can do to improve the way they feel, their level of independence and the length of their life," Sanker told *The Nation's Health*.

Checking with a health care provider before beginning to exercise isn't necessarily a requirement for older people, Sanker noted. In fact, "(older Americans) almost need a doctor's okay not to exercise," said APHA member Susan Hughes, DSW, co-director of the Center for Research on Health and Aging at the Institute for Health Research and Policy at the University of Illinois in Chicago. Although, for people living with conditions such as arthritis, it can't hurt to consult a provider, Hughes noted.

"We can really cut into a cycle of disability by intervening and 'reactivating' people," Hughes told *The Nation's Health*. "It's a terrific thing that people can do for themselves."

The solution, Hughes said, is to tailor exercise activities toward different population characteristics. For example, a phased build-up of aerobic activity over time might be best for frail or sedentary people, she said. To learn how to motivate people to begin exercising, Hughes and her colleagues created "Fit and Strong!" a program for those with osteoarthritis and lower-extremity joint problems offered at several locations in Chicago. People who took part in "Fit and Strong!" experienced reduced joint stiffness and pain, an increased confidence in their ability to safely exercise as well as increased participation in physical activity, Hughes reported.

"I don't think we know as much as we should about barriers (to exercise)...but we are starting to learn that information," she said.

Hughes' university is also part of CDC's Healthy Aging Research Network, which recently finished a seven-site survey of physical activity programming. The survey found that compared to the number of older adults, the supply of programming will only meet about half of existing demand. However, the good news, Hughes noted, is that exercise can be as simple as using ankle weights and getting a good pair of walking shoes.

Low-income older adults can face additional barriers to exercise, such as living in neighborhoods not safe for outdoor activities. But, the "important thing is for people to be as creative as possible," Hughes said, suggesting that people get their exercise walking inside a mall or finding the local YMCA.

"People should be thinking of (exercising) in the same vein as going to the doctor," she said.

Not only does exercise improve physical health, but mental health as well. According to two December 2004 studies published



Photo courtesy Ohio Department of Aging

*Seniors shop for fresh fruits and vegetables at a farmers' market in Franklin County, Ohio. The Ohio Department of Aging sponsors the markets, which increase seniors' access to healthy food.*

in the *Journal of the American Medical Association*, physical activities such as walking are associated with better cognitive functions in both older men and women. In Seattle, older residents who participated in a fitness pilot program reported a decrease in depression after six months of activity, said Susan Snyder, director of the Senior Wellness Project at Senior Services of Seattle/King County. The pilot program would later become the award-winning Lifetime Fitness Program.

"A lot of it is just getting out of their homes and feeling that they're still an important person," Snyder told *The Nation's Health*.

The Senior Wellness Project serves thousands of older residents in the Seattle and King County area — most of whom are older than 75. The project's Lifetime Fitness Program, which has been operating since 1994, grew out of a research collaboration that included the University of Washington and has now grown to more than 80 sites around the nation, according to Snyder. Participants are able to take advantage of low-cost fitness classes taught by certified fitness instructors, and about 99 percent of participants said they would recommend the classes to a friend, Snyder noted.

"(Regular exercise) is a paradigm shift for a lot of people," she said. "It's not about aging, it's how they take care of themselves."

Another program under the Senior Wellness Project umbrella is the Health Enhancement Program,

which was originally designed for people older than 75 living with chronic conditions who wanted to make healthy behavior changes. Participants in the enhancement program work with a nurse and social worker to create a health action plan primarily around physical activity and good nutrition. According to Snyder, a study conducted on the program found that participants had a 72 percent decrease in days spent in the hospital from the prior year.

"We want people to graduate from the program with a feeling that they can manage their health on their own," she said.

## Good nutrition also key to healthy aging

In addition to getting physical, making wise food choices could have a significant impact on healthy aging. While older Americans are more likely to eat five or more servings of fruits and vegetables daily, many are not doing so. Some older Americans — and Americans in general — might view diet changes as a sacrifice, but they don't have to be, said Susan Moores, MS, RD, a spokeswoman for the American Dietetic Association and a nutrition consultant in St. Paul, Minn.

"Diet is so important, and it's not all about sacrifice, but about embracing the wonderful foods that are out there," Moores told *The Nation's Health*. "As

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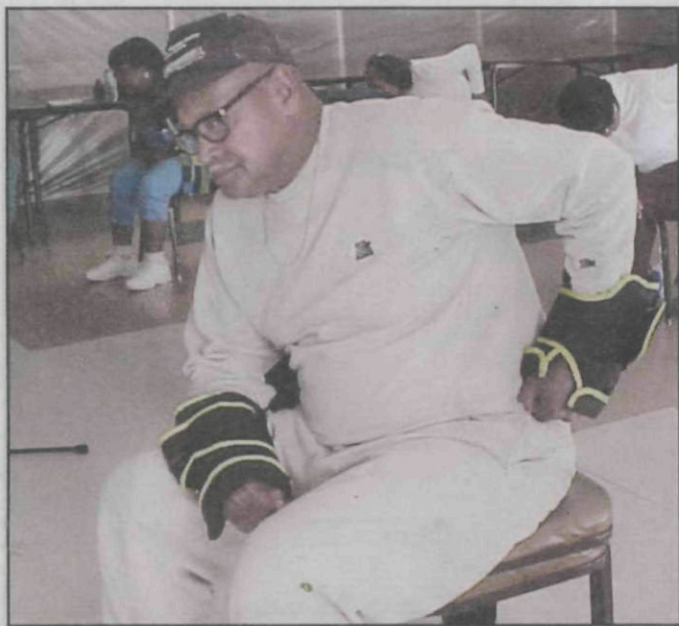


Photo courtesy Senior Wellness Project

*A senior does weight exercises during a class offered by the Lifetime Fitness Program at Seattle's Central Area Senior Center.*

# Community nutrition, exercise programs encourage healthy aging

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you get older, you need to make more of your calories count — there's less wiggle room."

For some older Americans, a major barrier to eating healthily is cost. In fact, many seniors face difficult financial trade-offs: to afford prescription medicines and other necessities, fresh fruit and vegetables can be left by the wayside, according to Shari Baker, RDL, nutrition program manager at the Ohio Department of Aging.

Baker helps manage the department's Senior Farmers' Market Nutrition Program, which works with local farmers to help low-income seniors gain access to fresh produce. The program — now in its fifth year — operates in 13 Ohio counties, and in 2004, served about 16,000 older residents, Baker said. The U.S. Department of Agriculture was the market's grant funder, but such funding was recently cut and, in

turn, the program will not be able to expand, Baker noted.

"Seniors know that eating fruits and vegetables is a good thing, but maybe in the past, they didn't have the wherewithal to do it," Baker told *The Nation's Health*.

The Ohio Department of Aging allocates the USDA grant money to its partners throughout the state, who then contract with local farmers who take part in the program. Eligible seniors are given coupons they can use to purchase fresh fruits and vegetables at the farmers' markets and oftentimes, area aging agencies will also provide transportation. The farmers' markets are also tied to an educational component in which the senior center or aging agency involved will offer classes on the benefits of healthy eating, sharing recipes and cooking tips, according to Marc Molea, MHA, MCRP, chief of planning, development and evaluation at the Ohio Department of Aging.



Photo courtesy Ohio Department of Aging

Seniors can use coupons to shop for fresh fruits and vegetables at farmers' markets sponsored by the Ohio Department of Aging.

In addition, Baker said, a survey of farmers' market participants found that 77 percent ate more fruits and vegetables than usual, almost 76 percent ate more than three servings per day — a 43 percent increase — and 93 percent said the best aspect of the program was access to fresh produce.

"(The farmers' market) serves seniors, but it also supports the local economy — it's a dual impact program," Molea said.

Unfortunately, funding for senior nutrition programs such as the Ohio farmers' market has been steadily decreasing over time in proportion to demand and increases in costs of living. Such issues leave a discrepancy between current and predicted demand for senior services and their status as a national priority, according to Nadine Sahyoun, PhD, RD, assistant professor in the Department of Food Science and Nutrition at the University of Maryland.

"We're not putting enough emphasis yet on dealing with some of these issues," Sahyoun told *The Nation's Health*. "In order to decrease the expenditures on chronic disease and illness, we need more preventive work — the kind of work that will help people stay at home and live healthfully."

In addition to eating wholesome foods, older Americans should also be mindful of how aging affects their bodies' ability to take in nutrients, Sahyoun said. For example, there is often decreased absorption of calcium and vitamin D in older women,

which can lead to osteoporosis. In turn, older people should be aware of such physiological changes so they can make appropriate accommodations, she said. However, for some low-income seniors, just overcoming barriers that limit access to fresh produce is difficult enough, Sahyoun said. For example, an older person with a fixed income and mobility issues might have problems affording transportation services to and from the grocery store.

"It is so complex to understand all of the factors that affect nutrition among older adults," Sahyoun noted.

Eating properly is also affected by physical and mental well-being, according to Ruth Palombo, PhD, MS, RD, an independent healthy aging consultant in Boston and co-chair of APHA's Task Force on Aging. For instance, because Medicare — the nation's health care program for seniors — doesn't cover dental care,

an individual's ability to eat fruits and vegetables could be impacted by poor teeth or broken dentures, Palombo said. Also, social isolation can affect dietary intake, such as seniors who live alone and don't want to bother cooking for themselves — Palombo called it the "tea and toast" syndrome.

"Social factors, physical factors and eating are very much tied together," she told *The Nation's Health*.

One way to bridge the gap between good health and good eating is to train medical professionals in nutrition, Palombo said.

"If you tell someone to eat a healthy diet without specifics, it's difficult," she said. "(Nutrition) is a big area to look at and it doesn't happen in a short visit. Our health care system needs to be working much more as a team — to be able to refer to a (registered dietitian) or nutritionist who can help someone with the specifics."

Both Palombo and Sahyoun agreed that much more preparation is needed to ready the nation for the next generation of older Americans.

"There is a gap here between knowledge and actual education of older adults and this is where we need to begin our efforts," Sahyoun said.

For more information on healthy aging, visit <[www.aoa.gov](http://www.aoa.gov)>. ■

— Kim Krisberg

For more on National Public Health Week events or to become a partner or sponsor, visit <[www.nphw.org](http://www.nphw.org)>.

## CDC: Deaths from obesity serious, but lower than original estimate

THE nation's obesity epidemic is having a serious toll on the health of Americans, but isn't causing as many deaths as recently estimated, according to the Centers for Disease Control and Prevention.

In January, CDC officials revised their estimates on the number of Americans who die each year because of poor diet and physical inactivity. According to a correction in the Jan. 19 issue of the *Journal of the American Medical Association*, about 365,000 people died because of those causes in 2000, up from about 300,000 in 1990.

While significant, the new number is an almost 9 percent decrease from the 400,000 deaths from poor diet and physical inactivity that were reported in a CDC study in the same journal last year. The mistake was caused by a computational error, according to CDC, and was detected when researchers re-examined their data.

Despite the error, the researchers' principal conclusions "remain unchanged," according to Ali H. Mokdad, PhD, chief of the Behavioral Surveillance Branch within CDC's National Center for Chronic Disease Prevention and Health Promotion.

"Tobacco use and poor diet and physical inactivity contributed to the largest number of deaths, and the number of deaths related to poor diet and physical activity is increasing," wrote Mokdad in a letter in the same journal issue as the correction.

The original estimates, reported in the March 10, 2004, *Journal of the American Medical Association*, were featured in the May 2004 issue of *The Nation's Health*.

For more information on the study, visit <<http://jama.ama-assn.org>>. ■



Photo by Chris Arredondo, courtesy Senior Wellness Project

The Lifetime Fitness Program in Seattle is helping seniors gain access to low-cost fitness classes taught by certified instructors.

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