

Maine Nutrition Council

Newsletter

Fall/Winter 2009

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*Terms begin at annual Board of Directors meeting in April, May or June of each year. The current Board of Directors were selected at the annual meeting held on June 17, 2009.

Message from the Chair

Dear MNC Members,

As I write my first "Message from the Chair," I am thinking about the time and energy that Karen Gallagher, past MNC Chair, devoted to this organization. I would like to take this opportunity to thank Karen for the leadership that she provided to the Council over the past three years. Karen led as only Karen could- with poise, clarity, a depth of experience and knowledge, integrity, sound judgment, and consideration for the board and all MNC members. Thank you, Karen.

Isn't this a great time to be a MNC member! Results from nutrition and physical activity research, local implementation and upcoming legislation continue to bring new insights and opportunities for improving the health of Maine citizens.

One benefit of being a member of the Maine Nutrition Council is the opportunity to hear about many of the latest nutrition discoveries and opportunities first hand. At the fall MNC educational event, Karen Gallagher, Nutrition Consultant and Hannah James, Breastfeeding Consultant, from Maine's WIC Nutrition Program reviewed the new WIC Food Benefits Package. I left the October event with a mixture of pride in knowing that the USDA incorporated many of the changes recommended by the Institute of Medicine and concern that a few changes may create unnecessary barriers for some WIC participants and... Maine potato farmers! (For more information read: Responding to the WIC Food Benefits Package on page 5 of this newsletter.)

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MNC Mission



The Maine Nutrition Council contributes to the health and well-being of Maine's citizens through education, research and advocacy. The Council uses its resources to promote healthful nutrition practices, support education in the areas of food and nutrition, stimulate research in nutrition and physical activity, and promote changes in public attitudes and policies.

The Maine Nutrition Council

Invites You to Attend

“Whole Foods and Your Health: Are Your Genes Your Destiny?”

Wednesday, April 7, 2010

7:30 am - 3:00 pm -Augusta Civic Center

**Learn about how whole foods interact
with genes and affect our health!**

Keynote Speakers:

- **Colleen Fogarty-Draper, MS, RD, LDN**
Personalized Nutrition: Changing
Paradigms
- **James A. Joseph, Ph.D.**
Whole Foods are Functional Foods
- **Elizabeth Ward, MS, RD**
Nutrient-Rich Food

For more information contact Alice Schlosser at:
aschlosser@usm.maine.edu

Stay tuned! The conference brochure and
registration information will be available on
the MNC website in weeks to come.

MNC Educational Events & Board Meeting Schedule

Save the Dates:



January 7, 2010

MNC Quarterly Educational Event and
Board of Directors Meeting
University of Maine, Orono
Room location TBA
“Current Research Happenings in the
Department of Food Science and Human
Nutrition”
FMI: kyerxa@mainenutritioncouncil.org

April 7, 2010

MNC Annual Conference
Augusta Civic Center **“Whole Foods and Your
Health: Are Your Genes Your Destiny?”**
FMI: kyerxa@mainenutritioncouncil.org

May 11, 2010

University of Maine Cooperative Extension
Nutrition, Food and Physical Activity Symposium
University of Maine, Orono
Wells Conference Center
FMI: kyerxa@mainenutritioncouncil.org

May 27, 2010

MNC Quarterly Educational Event and
Annual Board of Directors Meeting
Location and topic TBA
FMI: kyerxa@mainenutritioncouncil.org

Message from the Chair - Continued from Page 1

On January 7th, all Maine Nutrition Council members are invited to gather in Orono to hear about “Current Research Happenings in the Department of Food Science and Human Nutrition”. Learn about the latest and greatest research AND network with your neighbors, colleagues and friends while carpooling to the event! Don’t miss it!

The MNC board is fortunate to be working with both new and experienced board members. Together we are updating procedures, mastering new skills, and reaching out to new and past members while continuing to carry out the mission of the Maine Nutrition Council via the Newsletter, Educational Events and annual Recognition and Scholarship Awards. As we begin the New Year, let’s all work together to expand our membership and to fulfill the MNC mission.

May you all have a Happy Holiday season and a very Healthy New Year!



The Maine School Garden Network

The Maine School Garden Network is a group of committed individuals who believe in the value of teaching children to garden. Our mission is to promote and support educational gardens for youth, and to encourage school programs which teach healthy eating and environmental stewardship. We volunteer our time and knowledge to provide guidance and support to anyone who works with educational gardens in Maine. Advisory Board members have experience and skills in such diverse fields as education, nutrition, horticulture, agriculture and soil science, environmental studies, community building, and resource management. We meet monthly in southern Maine. We are sponsored by the Maine Organic Farmers and Gardeners Association and have received "seed" money from the Maine Ag License Plate program sponsored by Maine Ag in the Classroom. We can always use new people and ideas. Background: The Maine School Garden Network (MSGN) was created in 2002 through the dedicated volunteer efforts of dietitian Anne Johnson and professor Mary Bird, with encouragement from the Maine Organic Farmers and Gardeners Association. They designed an organization that would support and promote school garden programs, realizing that through such programs children would:

- Learn how food and fiber is grown and gain an understanding of Maine agriculture
- Experience growing, preparing, and enjoying their own food
- Discover first-hand the connection between locally-grown fresh produce and good health
- Participate in a garden-based curriculum to enhance learning across subject areas
- Spend active time outdoors, cultivating an appreciation for nature
- Be part of a project which connects their school with the local communities



If you would like to find out more about us, volunteer to be a local resource for teachers, or otherwise get involved in the exciting work we are doing, check out our newly launched web presence www.msgn.org or contact us at info@msgn.org.



A Nutrition Tool on the Web for Healthcare Professionals!

The Food and Nutrition Information Center (FNIC) has launched the ***Interactive DRI for Healthcare Professionals*** (<http://fnic.nal.usda.gov/interactiveDRI>), a new online tool that calculates an individual's daily nutrient recommendations based on the Dietary Reference Intakes (DRIs). This tool is intended to be used by healthcare professionals—registered dietitians (RDs), doctors, nurse practitioners, and others who may have an interest in using these values for dietary planning purposes. The *Interactive DRI for Healthcare Professionals* puts individual nutrient recommendations at the fingertips of those professionals who can help consumers interpret and use these DRI values to guide healthy dietary behaviors.

This tool is the result of a collaboration between the National Agricultural Library/FNIC and the Department of Health and Human Services Office of Disease Prevention and Health Promotion.

The *Interactive DRI for Healthcare Professionals* is available on FNIC's website at <http://fnic.nal.usda.gov/interactiveDRI>. Visitors to the FNIC homepage (<http://fnic.nal.usda.gov/>) will also be able to access this tool from the Dietary Guidance button on the left navigation bar; on this landing page, the topic titled "Dietary Reference Intakes (DRI)" will then offer a link to this tool.

Legislative Corner

Brief Legislative Update

Legislation is being passed at home while national initiatives to improve access to nutrition information and revise and improve child nutrition and WIC benefits are marching forward. At home, Maine's legislature passed three bills relating to nutrition and physical activity during the last session.

- LD1407 An Act To Assess the Physical Education Capacity of Elementary Schools in Maine
- Resolve to Convene a Work Group to Strengthen Farm to School Efforts in the State
- LD 319 Body Mass Index (BMI) Data Collection of students shall be done in accordance with DHHS rules only if a parent or guardian does not object or doing so does not offend religious practices.

During the second session of the legislature in place now expect to see the follow up to the law/resolve to study physical activity in Maine grades K-8 and Farm to School best practices. Although legislation such as this is not typically submitted in the second session, a Physical Education bill could be introduced based on the results of the assessment report required in LD1407.

Meanwhile the recommendations from the

Farm to School Work Group to strengthen Farm to School efforts in the state will be provided to three joint standing committees: Agriculture, Education and Health and Human Services and may prompt further legislation this session. Since the law regarding BMI data collection is unfunded and more of a voluntary act it is unlikely that this bill will be re-addressed this session. See the article titled "**Where to get information about the Maine Legislature.**"

Nationally three critical pieces of legislation affecting the nutrition environment of communities and schools will be determined this year and in 2010.

- The Child Nutrition Re-Authorization Act- true revisions on hold until Fall 2010
- National Health Care Reform Bill which includes menu labeling provisions
- WIC Interim Rule - comment period ends February 1, 2010 (See "Responding to the WIC Interim Rule" article on page 5)

Consider sharing your thoughts and passion regarding these pieces of legislation with your state representatives and senators. They are hungry for constituent input. Your viewpoints could impact the future of your health, your neighbor's health and the health of the nation.

Where to get information about the Maine Legislature

Are you concerned about tracking the prevalence of childhood obesity in Maine, the procurement of local produce for food stamp recipients, prohibiting the sale of energy drinks to minors, improving oral health care for Maine's children, expanding access to oral healthcare, provision of unstructured recess time for elementary school students, the Maine Health Data Organization statutes or the establishment of a Nurse Health Program? These are some of the topics, or legislative documents, filed before the legislature last year. Follow the steps listed below, and research your topic of interest:

1. Go to www.maine.gov,
2. Look under the government tab,
3. Click on state legislature,
4. Under bills select bills keyword search; type in, for example, NUTRITION. Any bills relating to this subject matter will be displayed, such as HP878, LD1259, 124th Legislature: An Act to Increase Access to Nutrition Information. For more details about the bill, select bill tracking or web page.

Menu Labeling in the House Health Reform Bill

We are one step closer to passing national menu labeling. The menu labeling provision is in the merged House health reform bill that will go to the House floor (see Section 2572, page 1510-1519 of http://docs.house.gov/rules/health/111_ahcaa.pdf

Proposed Legislation to Increase Meal Reimbursement Rates

Among bills recently introduced in the 111th session of the U.S. Congress are the following: Senate S.2749: Introduced by Senator Kirsten Gillibrand (D-NY), the proposed **Access to Nutritious Meals for Young Children Act** would increase the number of meals allowed to be served daily to children in the Child and Adult Care Food Program and increase meal reimbursement rates. For bill summary and status information, along with the text of legislation, visit: <http://thomas.loc.gov/> and enter the bill number. This bill currently does not have any co-sponsors. Please consider contacting Senators Snowe & Collins to urge their support.

Response to the 2009 WIC Interim Rule Changes – Public Comment Period on WIC Changes Ends Feb 1, 2010

The first major changes to food benefits in the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) since 1974 were enacted on October 1, 2009. These exciting changes were explained in the Spring Maine Nutrition Council Newsletter and at the Fall MNC educational event*. Changes include a decrease in the total milk provided and the addition of new foods including soy milk, whole grains (including whole wheat bread, oatmeal, whole wheat or soft corn tortillas and brown rice), fresh, canned, and/or frozen fruits and vegetables for children and women, infant fruits and vegetables for all babies 6-12 months of age, infant meats for exclusively breastfed babies 6-12 months of age, canned legumes, salmon and sardines.

The United States Department of Agriculture (USDA) made these changes under an interim rule, which remains open for public comment until February 1, 2010. While the USDA deserves many commendations for the positive changes mentioned above, please consider the following areas for possible comment to further improve this landmark ruling.

Milk—One year old children can receive only whole milk.

- The rule does not include a provision for reduced fat, lowfat or skim milk for overweight one year olds.
- Any child with special needs over the age of 24 months cannot receive whole milk unless they are receiving a medical food or medical formula.

Possible recommendation(s): Allow reduced fat or skim milk for overweight or obese one year olds (consistent with recommendations published by the American Academy of Pediatrics) and include an allowance for a 24 month and older child with special needs who is not thriving to receive whole milk.



Cheese—One pound per month can be provided as a milk replacement; 1 pound of cheese replaces 3 quarts of milk.

- Since the milk provision for children is 16 quarts, a mother purchasing 1 pound of cheese is then left with 3 gallons and 1 quart of milk. Although it may sound like a minor inconvenience, consider the following: one quart of milk is an expensive measure to purchase; not all convenience stores carry milk by the quart; not everyone is familiar with the measure of a quart, especially non-English speaking populations.

Possible recommendation: Change the milk replacement for 1 pound of cheese to 2 quarts (½ gallon).

Infant formula—Maximum amounts provided are dependent on the feeding choice (partial breastfeeding vs. non-breastfeeding) and age of the baby.

- Because the total amount of formula provided to non-breastfed infants who are 6 to 12 months of age was significantly reduced (approximately 20-21 ounces per day) the concern is that mothers may try to stretch the formula with water or provide cow's milk. (Cow's milk can lead to gastrointestinal bleeding and anemia when consumed by babies under 10 months.)

Possible recommendation: Increase formula issuance to ensure appropriate nutrition support for these babies.

Fruits and Vegetables—The rule allows only pre-prepared infant fruits and veggies for infants and no white potatoes.

Possible recommendation: Consider allowing fruit and vegetable vouchers for those parents who desire to make their own baby food. Allow white potatoes as they are inexpensive, versatile, and nutritious. We also want to support Maine's economy.

Infant formula for infants with special needs NOT receiving medical formula

- The rule has no provision to provide infants with special needs that are not ready for solids at 6 months a higher volume of formula. Only those special need infants on a medically prescribed special formula may receive an increased volume of formula (28 to 31 oz) until they are able to begin solid foods.
- *Possible recommendation:* Allow special need infants not receiving a medical formula the higher amount (28 to 31 oz) of formula until they are able to initiate solid foods.

The USDA will be accepting comments on the provisions of this interim rule until February 1, 2010. To review the Interim Rule, go to the following website: <http://www.fns.usda.gov/wic/regspublished/foodpackages-interimrule.htm>. To register your comments follow this link:

<http://www.regulations.gov/search/Regs/home.html#submitComment?R=0900006480370d00>.

*To view the **PowerPoint slides** from the Fall Educational Event visit the **MNC Website** at www.mainenutritioncouncil.org.

Original Research

Weight Control Behavior in a Maine Middle School

Introduction

According to the 2005 Maine Youth Risk Behavior Survey (YRBS), 12% of Maine middle school students self-reported heights and weights that were indicative of being “overweight” (Body Mass Index (BMI) \geq 95th %tile NHANES prior to 1980). An additional 15% of middle school students were considered to be “at risk for becoming overweight” (BMI \geq 85th %tile and $<$ 95th %tile NHANES prior to 1980). Therefore, approximately 27% were either “at risk” or “overweight”. On the other hand, 45% of middle school students reported that they were “currently trying to lose weight”. In December 2007, Maine CDC released a report entitled *The Burden of Overweight and Obesity in Maine*. The report included some additional analysis of the 2005 YRBS data, indicating that 38% of middle school students who were “at a healthy weight” reported they were “currently trying to lose weight”. YRBS data from 2007 further illustrated that many high school youth with weights in the healthy range perceived themselves to be overweight.

It’s no wonder that youth are trying to lose weight and have distorted perceptions of their body weight, even when their weight is in a healthy range. For years, the media, parents, peers, and others have reinforced the message that being slender is socially desirable. Moreover, as a result of the “obesity epidemic”, dire predictions of shorter life spans and soaring rates of type 2 diabetes, health advocates have further raised awareness of the importance of being thin.

In response to these messages, youth are often engaging in weight control strategies that paradoxically increase their risk for obesity. Longitudinal studies suggest associations between trying to lose weight through dieting and the later onset of obesity, disordered eating and eating disorders. In Project EAT II: Eating Among Teens (Neumark-Sztainer et al 2006), 2,516 individuals that completed surveys as junior and high school students in Project EAT I were followed 5 years later to determine how dieting and weight control behaviors correlated with obesity and eating disorders. Exercising, eating more fruits and vegetables, eating less high fat foods and eating fewer sweets were categorized as healthful behaviors. Unhealthful weight-control behaviors included fasting, skipping meals, vomiting, using laxatives, diet pills, diuretics, food substitutes (powder or special drink) or smoking to control weight. Participants who reported “changing the way you eat so you can lose weight” within the last year were considered to have dieted. BMIs were calculated from self reported heights and weights. **Dieting, particularly the use of unhealthful weight-control behaviors, increased the risk for obesity by three fold. It also increased the risk for other eating and weight-related problems. “None of the behaviors used by adolescents for weight-control purposes predicted weight loss”.**

Methods

Students in a Maine middle school were surveyed to explore prevalence of various types of weight control practices in 6th, 7th and 8th grades, particularly those behaviors that have been correlated with increased risk for obesity five years later. Middle school youth in 6th, 7th and 8th grades were selected for study because according to Maine YRBS 2005 data, 8th graders were significantly more likely than 7th graders (17% vs. 24%) to use “unsafe weight loss strategies” (within the last 30 days reported fasting more than 24 hours, using diet pills or purging by vomiting or laxatives), while there was little difference between grades in high school (range 13% to 16%). If there is a dramatic increase in “unsafe weight loss strategies” between grades 7 and 8, this may be the best age to target prevention of dieting and unhealthful weight-control behavior.

A brief paper survey was administered to all students in one Maine middle school who satisfied assent and parent consent requirements. Relevant survey questions were selected directly from the validity and reliability tested Project Eat Questionnaire. In addition to questions about weight control behaviors, participants were asked to report their gender, current age, weight and height. The school principal, district superintendant and school board approved administering the questionnaire. Approval was also obtained from the University of Maine Institutional Review Board. Since school administrators indicated the participation rate for previous studies requiring parental consent was only about 15%, participants received compensation by being entered into a drawing. At a biweekly teacher meeting, teachers received oral and written instructions from the principal investigator on how to present student assent information, disseminate and collect signed parental consent forms and administer the questionnaire. The questionnaires were anonymous. Each participant received a file folder to stand on their desk to provide additional privacy while completing the survey. To prevent others from seeing their answers, participants were instructed to fold their completed questionnaires and seal them in a separate envelope each student received. Students who did not have consent or who did not want to participate were told to work quietly at their desks.

Results

Due to researcher, administrator and teacher recruitment efforts, and the opportunity for significant compensation, 195 of 568 students participated. A 34% participation rate was more than double the 15% reported for previous surveys at the school.

Key findings were:

- 19% of the sample reported weights corresponding to being “at risk for overweight” and 21% “overweight” as compared to the YRBS figures of 12% and 15%.
- 82% of girls, and 36% of boys, engaged in weight control behaviors that were associated in Project EAT II with a three-fold increased risk for obesity five years later.
- 74% of girls, and 26% of boys, who reported weights in the healthy range (BMI \geq 5th %tile and $<$ 85th %tile) engaged in weight control practices associated with increased risk for obesity.
- According to a study conducted by CDC in 2000, on the average, high school students over-reported their heights by 2.7 inches and under-reported their weights by 3.5 pounds. After adjusting reported heights and weights by these factors, there was little change in the results for girls, yet the percent of boys with healthy weights who reported unhealthful behaviors dropped significantly: 72% of girls, and 10% of boys, with *adjusted* weights in the healthy range (\geq 5th %tile and $<$ 85th %tile) engaged in weight control practices associated with increased risk for obesity.
- Using the chi-square test of independence at the 0.05 level, there was no significant difference between weight control practices amongst male and female students. The differences between boys and girls above were due to different analysis criteria being applied to boys and girls. Project EAT II findings indicated behaviors associated with increased risk for obesity were different in boys and girls.
- Using the chi-square test of independence at the 0.05 level, differences in weight control behaviors between 6th, 7th and 8th grade students were insignificant.
- There was, however, a significant difference in weight control behaviors practiced by subjects in different weight categories of underweight, healthy weight, at risk for overweight and overweight.

Discussion

This study had several limitations. Participants were not selected at random. It was a convenience sample of all those in a single school who received parental consent and were willing to participate. Therefore, results are not necessarily representative of all students in the school or students in other schools. Moreover, students with weight or eating concerns may have avoided participation. Furthermore, all data were self-reported. As was previously stated, heights may have been over-reported and weights may have been under-reported. Eating behaviors perceived to be embarrassing may have been under-reported and participants may have provided answers that they thought researchers would like.

The vast majority of middle school girls who participated in this study had attempted to lose weight by using methods that have been associated with an increased risk for obesity. Even girls in the healthy weight range engaged in activities that could unintentionally lead to excessive weight gain. A smaller, yet significant, number of boys engaged in the potentially harmful behaviors. Adjusting for misreporting of weights and heights had little effect on interpretation of results for girls, yet made a substantial difference for boys. While boys and girls reported similar rates of weight control behaviors, differences in data interpretation resulted in large differences in the percent of each sex who were engaging in potentially harmful weight control behaviors. Since there was not a significant increase in behavior through 6th, 7th and 8th grades, perhaps children in earlier grades should be assessed to determine when potentially harmful weight control behaviors begin to be practiced.

Conclusion

These results indicate that the majority of middle school students are well aware of the desirability of avoiding excessive weight gain; however, in trying to control body weight, they may be unintentionally increasing their risk for obesity. There is a clear need for interventions that discourage behaviors that increase risk for obesity and provide youth with the knowledge and skills they need to make better dietary decisions. Since detrimental weight control behaviors seem to be well established before 6th grade, more research is needed to determine when prevention interventions would be most effective. Those who work with children should focus on healthy behavior instead of body weight.

A reference list is available by
contacting: Alan Majka, MS, RD, LD
amajka@umext.maine.edu



SAVE THE DATES!

Learn to use science-based programs and innovative approaches to help prevent childhood obesity.



are hosting a **We Can!**TM Training!

We Can! (Ways to Enhance Children's Activity and Nutrition) is a fast-growing national movement of families and communities coming together to promote healthy weight in children ages 8 through 13 through improved food choices, increased physical activity, and reduced screen time. More than 1,000 community sites around the country have signed on to join **We Can!** They are using many **We Can!** resources, including the **We Can!** Energize Our Family: A Parent Program, science-based curricula for youth, and **We Can!** community events in their local organizations.

Attend the Training!



Who: 150 people who work with 8 to 13 year old children

What: Will learn how to implement 4 turn-key science-based curricula for use with children and their parents

When: April 8 & 9, 2010

Where: Senator Inn & Spa, Augusta, Maine

Why: Childhood obesity will be prevented through improved nutrition, physical activity and media awareness

- Learn the basics of **We Can!** -- programs, public visibility, partners, and performance measures.
- Hear from successful **We Can!** sites and discover innovative ideas for turning on **We Can!** in your community.
- Receive training from national experts on science-based curricula promoting healthy lifestyles for parents and youth, including **We Can!** Energize Our Family: A Parent Program focused on healthy weight through energy balance; and three youth programs, Media-Smart Youth: Eat, Think, and Be Active!; CATCH Kids Club; and S.M.A.R.T. (Student Media Awareness to Reduce Television).
- Network with others in park and recreation departments, schools, public health departments, youth-serving organizations, hospitals and health systems, worksites, and other organizations around the country.

To learn more about **We Can!** Communities, Partners, and Resources, visit: <http://wecan.nhlbi.nih.gov>, or call Heather Andrews at (207) 622-7546



Fuel Up To Play 60

Created in partnership by the National Dairy Council and the National Football League, the Maine Dairy & Nutrition Council is excited to announce *Fuel Up to Play 60!* This program **empowers youth to take action** in their school and for their own health. The goal of the program is to make long-term changes in the school's nutrition and physical activity.

Fuel Up to Play 60 program reaches youth directly to get their friends and school to expand opportunities for physical activity and increase availability of more kid-appealing, good-tasting, nutrient-rich foods.

How does the program work?

Fuel Up to Play 60 has fun Action Strategies for students to plan, implement and participate in – all while earning points for themselves and their school. Students help lead and design the strategies to create more options for being active and eating more healthy foods.

Program Components

- Interactive website (www.FuelUpToPlay60.com) where students can sign up and take the pledge, play games and track healthy behaviors while earning points towards the *Fuel Up to Play 60* National Competition.
- Free *Fuel Up to Play 60* Wellness Activation Kit for Maine schools. Available at www.FuelUpToPlay60.com, the kit includes healthy eating and physical activity programs and tools, such as posters, healthy habits pledge cards and tracking sheets. These resources will help students and adult advisors in co-creating and leading tailored *Fuel Up to Play 60* efforts in their schools.

Maine schools and youth who enroll in *Fuel Up to Play 60* are also enrolled in the *Fuel Up to Play 60* national competition (Competition dates are: 10/15-12/15, 2009 and 2/1-3/15, 2010). *Fuel Up to Play 60* participants can be eligible for rewards and prizes based on points earned by participating in the program, including tracking their healthy habits and being active in the program at school. Schools and students have the chance to win:

- **One national school grand prize:** a *Fuel Up to Play 60*-themed healthy school makeover and a starring role in a *Fuel Up to Play 60* promotion
- **One national individual grand prize:** a personal healthy makeover and a starring role in a *Fuel Up to Play 60* promotion
- **Individual prizes** (one per state): an iPod touch® and a \$50 NFLShop.com gift card
- **State-wide prize** (one school from each state): a *Fuel Up to Play 60*-themed healthy school makeover



2009 REPORT SUMMARIZES FRUIT & VEGETABLE CONSUMPTION DATA BY STATE

Report also Highlights Environmental Supports and Policies to Improve Diet

The U.S. Centers for Disease Control and Prevention (CDC) released the *State Indicator Report on Fruits and Vegetables, 2009*. This report summarizes data for fruit and vegetable consumption from multiple sources, and for the first time, breaks the results down by state. It also discusses policies and environmental supports that can make it easier for everyone to eat more fruits and vegetables. To meet national objectives for consumption of fruits and vegetables, 75 percent of Americans would need to eat at least 2 servings of fruit, and 50 percent of Americans would need to eat at least 3 servings of vegetables daily.

Highlights from the Report

American Adults:

- ⇒ only 33 percent of adults are meeting the recommendation for fruit consumption
- ⇒ 27 percent are meeting the vegetable consumption recommendation
- ⇒ on average, only 14 percent consume at least 2 servings of fruit and at least 3 servings of vegetables each day

American High School Students:

- ⇒ 32 percent of high school students report eating at least 2 fruit servings daily
- ⇒ 13 percent report eating at least 3 vegetable servings each day
- ⇒ on average, only 9.5 percent of American adolescents consume at least 2 servings of fruit and at least 3 servings of vegetables each day

Maine

While all states are well below recommendations, Maine ranked as one of the states that reported doing a better job of eating 2 or more fruit servings and 3 or more vegetable servings.

- ⇒ 17.7 percent of Maine adults and 10.0 percent of Maine adolescents eat 2 or more fruit servings and 3 or more vegetable servings per day



Valuable Resource

The Fruits and Veggies-More Matters website at www.fruitsandveggiesmorematters.org, can act as a resource to assist in efforts to increase fruit and vegetable consumption.

Where to Access the Report

- ⇒ The *State Indicator Report on Fruits and Vegetable, 2009* is available from CDC's Division of Nutrition, Physical Activity and Obesity (<http://www.cdc.gov/nccdphp/dnpaol/>) at <http://www.fruitsandveggiesmatter.gov/indicatorreport>.

MNC Scholarships and Katherine O. Musgrave Award

Each year at the spring conference, the Maine Nutrition Council awards three \$500.00 scholarships as well as the Katherine O. Musgrave (KOM) Public Service Award. If you know students enrolled in the four-year nutrition program at the University of Maine, the two-year dietetic technician program at Southern Maine Community College (SMCC), or a culinary arts program in the state, please tell them about the scholarship opportunity. If you know of an individual, an organization or an institution which has done outstanding work in the areas of nutrition policy, education or research in Maine, consider sending in a nomination for the KOM Award.

Scholarship applications and the KOM nomination forms are available to print from the Maine Nutrition Council's website www.mainenutritioncouncil.org. Deadline for submission for both the scholarship application and KOM nomination is **February 12, 2010**.



Save the Date!

Growing Connections: Farm to School and Classroom to Cafeteria



The Maine-ly Nutrition and Take Time! School Program is bringing Tony Geraci, Chef Andrea, and local Maine advocates for Farm-to-School initiatives together to help school teams develop plans to increase nutrition education, local foods, and a strong cafeteria/classroom connection in Maine schools.

**Thursday, March 25, 2010
8:00 AM - 3:15 PM
at the Augusta Civic Center**

Please contact Mary Ann Bennett at:
mbennett@usm.maine.edu (207-626-5044) or Amy
Root at: aroot@usm.maine.edu (207-592-2276) for
more information.

*Sponsored by the Maine Nutrition Network, a part of the
USM/Muskie. School Registration and further
information is coming soon!*

Notice to Members Regarding Your E-Mail Address

If you have received the MNC Newsletter in the mail, we do not have a current working e-mail address for you. In order to save postage and provide you with announcements and newsletters in a timely manner, we would like to have your current e-mail address. It will not be shared with anyone outside of MNC. If you have an e-mail address, please send it to Karen Gallagher at: info@mainenutritioncouncil.org. Thank you!

Technical Assistance Toolkits Are Available!

Childcare Settings and Childhood Obesity Prevention Toolkit

Resources for advocates, state childcare subsidy, Child and Adult Care Food Program (CACFP) and licensing agencies, state and local health promotion and obesity prevention initiatives, childcare providers, policymakers, and other key stakeholders interested in policy and environmental changes in childcare settings. These resources include a list of Robert Wood Johnson Foundation (RWJF) grantees working in this field, two best practices and strategy toolkits, research on childcare settings, a practice-based intervention guide, and model physical activity standards.

Youth Engagement Toolkit

A compilation of resources that will help public health advocates and researchers incorporate youth engagement in their childhood obesity prevention work. This toolkit includes both national and international case studies, research articles and specific tools that can be used to engage youth in becoming change agents in their communities.

Food Marketing to Children Toolkit

A compilation of resources that support policy and environmental changes to decrease the amount of marketing of unhealthy food products to our children. This toolkit includes evidence, recommendations and action steps for improving the media landscape to which our children are exposed.

Toolkits are available on the Robert Wood Johnson Foundation Center to Prevent Childhood Obesity website:

<http://www.reversechildhoodobesity.org/content/technical-assistance-toolkits>.



Visit the Maine Nutrition Council's Website at:
www.mainenutritioncouncil.org.



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ADDRESS CORRECTION REQUESTED