

January, 2014

Red Cliff Community
Health Center

Gitchi-Manidoo— giizis: Great Spirit Moon



The Hell-diver and the Spirit of Winter

Every winter, the birds fly south. One winter, a hell-diver (also called a grebe) told all of the other birds that he would stay for the winter to take care of two of his friends who had been injured and couldn't fly south. Both of his friends, a whooping crane and mallard duck, had broken wings. To feed them, he got fish by diving through a hole in the ice. But the Spirit of Winter got jealous of his success at fishing and froze the water after the hell-diver had dived through his hole below the ice. But the hell-diver swam to shore where there were a lot of reeds and bulrushes. He pulled one of them down through the ice with his bill to make a hole in the ice and so he got out and flew home.

When he got home, he saw that someone was peeking in the door of his wigwam. It was the Spirit of Winter, who did not like him and who was trying to freeze him out. The hell-diver got a big fire going, but it was still cold in the wigwam because the Spirit of Winter was right there making it cold. But the hell-diver tricked the Spirit of Winter by mopping his face with a handkerchief and saying, "Gee, but it's hot in here!" The Spirit of Winter thought the fire was hot enough to melt him, so he ran away.

One day the hell-diver decided to have a feast. He got some wild rice and sent a duck to invite the Spirit of Winter, but it was so cold that the duck froze to death before he got there. Then he sent Partridge with the invitation. She got very cold too, but she dove under the snow to warm up and then went on again. She reached the Spirit of Winter and invited him to the hell-diver's feast.

When the Spirit of Winter came to the feast, it was like a blizzard coming in the door of the wigwam. He had icicles on his nose and face. Hell-diver built the fire higher and higher, and it began to get warm inside the wigwam. The icicles began to melt on the Spirit of Winter's face. He was getting awfully warm, but he liked the wild rice that hell-diver had at his feast and wanted to keep eating.

Hell-diver said, "Whew! It's very warm in here. It must be spring already." The Spirit of Winter got scared and grabbed his blanket and ran out of the wigwam. With his fire, Hell-diver had brought the spring and outside, things were already melting and there were just patches of snow here and there. The Spirit of Winter had a hard time getting back to his home in the north, where there is always snow.

(Adapted from Victor Barnouw, 1977, *Wisconsin Chippewa Myths and Tales and Their Relation to Chippewa Life*, Madison: The University of Wisconsin Press.)

Affordable Care Act Newsletter

December 2013



Season's Greetings

ACA Timeline

- October 2013
Enrollment is open
- January 1st, 2014
New ACA in effect
- March 31st, 2014
Last day to enroll

Applying Through the Marketplace

There are several ways individuals and families can apply for private health insurance through the federal Health Insurance Marketplace:

- Online at Healthcare.gov
- Phone: Call 1-800-318-2596, 24 hours a day, 7 days a week (TTY: 1-855-889-4325). A customer service representative can help complete the application
- Mail: Fill out a paper application. The application can be found online at Healthcare.gov. Click the orange button with the paper icon.
- In Person: Red Cliff Community Health Center



BadgerCare Plus Income Limits

2013 Federal Poverty Level (FPL) Guidelines*



Family Size	Monthly Income Limit for Adults(100% FPL)	Monthly Income Limit for Children (300% FPL)
1	\$958	\$2,873
2	\$1,293	\$3,878
3	\$1,628	\$4,883
4	\$1,963	\$5,888
5	\$2,298	\$6,893



ENROLLING IN THE HEALTH INSURANCE EXCHANGE PLAN MEANS MORE RESOURCES FOR EVERYONE.



BadgerCare Plus Changes in 2014

On April 1, 2014, changes will be made to the BadgerCare Plus program that include the adoption of new income limits and one benefit plan for all members. These changes were made because Wisconsin residents now have new options for purchasing affordable private health insurance through the federal Health Insurance Marketplace, also known as the Exchange.

Originally, these BadgerCare Plus policy changes were going to take effect on January 1, 2014; however, they will now take effect on April 1, 2014. The changes were delayed to allow Wisconsin residents more time to purchase private health insurance through the Marketplace due to technical problems with the Marketplace's website.

These changes only affect BadgerCare Plus members and do not affect people who are enrolled in Medicaid for the Elderly, Blind or Disabled (EBD) or other Medicaid programs.

Affordable Care Act to Provide Substance Abuse Treatment

The Affordable Care Act (ACA) will revolutionize the field of substance abuse treatment. According to A. Thomas McLellan, PhD, CEO and co-founder of the Treatment Research Institute, "It will integrate substance abuse treatment into the rest of health care."

Dr. McLellan reported that 23 million American adults suffer from substance abuse or dependence—about the same number of adults who have diabetes. "If diabetes were treated like substance abuse, only people in the most advanced stages of illness would be covered, such as those who had already lost their vision or had severe kidney damage," he said.

Under the ACA, substance abuse treatment will also become part of primary care, and will be focused more on prevention. Substance abuse treatment will also be considered an "essential service," meaning health plans are required to provide it. They must treat the full spectrum of the disorder, including people who are in the early stages of substance abuse. "There will be more prevention, early intervention and treatment options," he said. "The result will be better, and less expensive, outcomes."



Seven Tips for Diabetics for the Holidays

1. **Focus on friends and family instead of food.**

Remember, the holidays are a time to slow down and catch up with your loved ones. Play games or spend time outdoors enjoying the weather together.

2. **It's a party, but don't overdo it.**

Eat slowly and really enjoy the foods. Make sure your portions are reasonable and avoid going back for second helpings.

3. **Eat before you eat.**

Do not skip meals or snacks earlier in the day to "save" calories and carbs for the large holiday feast later on. If you do, it will be harder to keep your blood sugar in control. Also, if you arrive hungry, you will be more likely to overeat.

4. **Bring what you like.**

Offer to bring your favorite diabetes-friendly dish.

5. **Drink in moderation.**

If you drink alcohol, remember to eat something beforehand to prevent low blood sugar later. Try to keep it to no more than 1 or 2 drinks.

6. **Stay active.**

Plan time each day for exercise and don't break your routine. Go for a walk with your family, offer to help clean up after a meal instead of sitting in front of leftover food. This will help you avoid snacking on it and get you moving around.

7. **If you overindulge, get back on track.**

Don't beat yourself up. Don't think you have failed. Include extra exercise, monitor your blood sugar, and get back on track with your usual eating habits the next day.

HAPPY HOLIDAYS!!

Ten “Doable” Ways You Can Enjoy Meals on Special Days

Before you go to a holiday meal, feast day, potlatch, graduation or birthday party, make a plan to stay on a healthy eating track:

- Choose the ways you can stay on track and check: **YES! I can!**
- After the event, check the ones you did: **YES! I did it!**
- Bring this to your next appointment with your health care provider.

Special meal: _____ Date: _____

- 1 Earlier in the day, eat breakfast or healthy snacks.** Try not to delay eating so you can eat more at the feast. If you skip meals, it may be harder to manage your blood sugar. It will make you hungry. You will be more likely to overeat at the special meal.
 YES! I can! YES! I did it!
- 2 At the special gathering, limit before-meal chips and crackers.** Try putting a small portion on a small plate or napkin and eat only that. Avoid creamy dips and cheese. Choose salsa as a dip if it is served.
 YES! I can! YES! I did it!
- 3 Limit the number of starchy foods (potatoes, macaroni, bread) you choose.** Have a serving of just your favorite one. Or eat ½ slice bread and a few tablespoonfuls of other starches.
 YES! I can! YES! I did it!
- 4 Choose vegetables that are raw, grilled or steamed.** Avoid vegetables in cream sauce, gravy, butter or cheese sauce.
 YES! I can! YES! I did it!
- 5 Drink calorie-free drinks like water, unsweetened tea, seltzer or diet sodas.** Avoid regular sodas and juice.
 YES! I can! YES! I did it!
- 6 Avoid drinks with alcohol or limit them.** Women should drink no more than one alcoholic drink a day. Men should drink no more than two.
 YES! I can! YES! I did it!
- 7 If you choose to eat dessert, have a small piece.** Ask for a half of a piece of cake or pie. Try not to eat the frosting on cake. Don't add whipped cream.
 YES! I can! YES! I did it!
- 8 After the meal, take a walk with family members.** Walking will lower your blood sugar level. You will have more energy.
 YES! I can! YES! I did it!
- 9 If you eat too much, don't feel bad.** You have not failed because of one meal. Think about the days you did not overeat.
 YES! I can! YES! I did it!
- 10 Plan to get back on track the next day.** Make a plan for what you will eat for breakfast—maybe a boiled egg and a piece of whole wheat toast with non-fat milk (or soy milk). You are back on track!
 YES! I can! YES! I did it!



Produced by IHS Division of Diabetes Treatment and Prevention, 12/2012. To print this and other patient education material, go to www.diabetes.ihs.gov, click **Printable Materials**.

Breastfeeding and Alcohol

Christmas and the New Year are upon us. Here are some tips for celebrating and breastfeeding. Remember: No amount of alcohol is recommended to be safe while pregnant or breastfeeding, so when a celebration is coming up, plan ahead. You can do this by...

- Pumping and storing breast milk before the big night.
- Nurse your baby before you head out for the night.

This will give you and your baby a chance to have some cuddling and bonding time, as well as empty your breasts (which helps keep your milk supply up!).

- Don't forget your pump!

Bringing a pump along will help avoid engorgement, and also make it easier to pump and dump. The recommendation is to wait three hours after one drink before it is safe to breast feed again.

One drink equals:

One mixed drink with
• 1.5 fl oz (44 mL)
of 80-proof liquor
(such as vodka,
gin, scotch, bourbon,
brandy, or rum)

5 fl oz (148 mL)
of wine

12 fl oz (355 mL) of
beer or wine cooler

ONE 12 oz. can or bottle of beer or
ONE 5 oz. glass of wine or
ONE 1.5 oz. shot (even in a glass of eggnog)

So if a woman has 3 beers, she can safely nurse her baby after 9 hours. In the meantime pumping and dumping out the milk will help keep your milk supply up and keep baby safe from alcohol.



© Healthwise, Incorporated

- Remember a baby's liver does not process alcohol like an adult's liver, so if you can still feel the effects of alcohol it is not safe to nurse your baby yet...
- Don't forget to get a designated driver, buckle up and have a Happy New Year!

Breastfeeding Burns Calories!

Feeling guilty about eating extra calories over the holidays? If it's any consolation, you burn anywhere from 200-600 extra calories per day when you are breastfeeding. So go ahead and indulge yourself a little bit!



Wisconsin Wins 2013 Synar Number Release

October 25, 2013

For Immediate Release

Contact:

Wisconsin tobacco sales to minors rise 35% in 2013

Free retailer training available at smokecheck.org

CITY, WI – Local health advocates announced today that illegal tobacco sales to Wisconsin minors rose substantially for the first time since 2008. The state’s 2013 Synar sales compliance survey, which determines the number of retail outlets that are selling tobacco illegally to minors, shows a non-compliance rate of 7.3% – up from 5.4% in 2012.

“QUOTE ABOUT HOW THESE RESULTS SHOW THAT THERE IS STILL WORK TO BE DONE,” SAID (CONTACT NAME). “QUOTE THANKING THE MAJORITY OF RETAILERS WHO DON’T SELL TOBACCO PRODUCTS TO MINORS, BUT ACKNOWLEDGING THAT WE CAN AND HAVE DONE BETTER AS A STATE.”

Free training is available through the website smokecheck.org. At smokecheck.org, retail employees learn about tobacco sales law, potential sale situations, and key partnerships to help keep tobacco out of the hands of kids. They then take a short test, and upon passing, can print a certificate of training from the state.

“QUOTE ABOUT SMOKECHECK.ORG BEING AVAILABLE TO HELP AVOID ILLEGAL SALES” SAID (CONTACT NAME). “QUOTE TALKING ABOUT A FEATURE OF SMOKECHECK.ORG THAT THEY THINK IS ESPECIALLY HELPFUL.”

The annual Synar survey randomly selects retail outlets from across the state to determine a reliable estimate of the rate of illegal tobacco sales to minors. Named after the Congressman who sponsored the federal legislation, the Synar legislation requires all states to monitor and reduce the rate of illegal tobacco sales to minors at retail establishments.

“QUOTE ABOUT HOW MORE THAN 80% OF ADULTS START USING TOBACCO PRODUCTS BEFORE THE AGE OF 18,” SAID (CONTACT NAME). “QUOTE ABOUT HOW IT’S IMPORTANT TO CONTINUE THESE EFFORTS.”

The state’s Wisconsin Wins program provides the framework for reducing tobacco sales to youth. The program is managed by the Wisconsin Department of Health Services.

Free training is available for retailers at smokecheck.org. For more on local tobacco prevention efforts, visit ([URL](#), [FACEBOOK URL](#), [ETC.](#))

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Chequamegon Bay Area Breastfeeding Coalition

Improving the health of our community through breastfeeding support, education and advocacy.



Our Activities

M2M Mama to Mama
Breastfeeding Parent
Support Group

Meets regularly once a month
--see posters for times and
locations

Chequamegon Bay Area
Breastfeeding Coalition
meeting.

The last Thursday of every
month at 1:30PM

Everyone is
welcome!



Check out our new
name and logo!

WBC | Wisconsin
Breastfeeding
Coalition
Chequamegon Chapter

www.cheqbaybreastfeeding.org

Breastfeeding & Traveling

A mother traveling with her breastfeeding infant or child may find that nursing makes travel easier than it would have been with a bottle-fed infant or child. Breastfed infants do not require water supplementation, even in extreme heat environments. When accompanying their mothers, nursing infants and children may feed on demand. This eliminates bottle making and bottle washing.

The traveling mother may find it helpful to take along a soft infant carrier and nursing cover or blanket, which may be used to:



- Ease the burden of carrying a child for extended periods of time
- Increase opportunities for unrestricted nursing, effective in maintaining an abundant milk supply
- Maintain skin-to-skin contact with the child, which helps in maintaining a milk supply
- Protect the child from some environmental hazards

(Adapted from www.cdc.org)



Live Well, Work Well

January 2014



Winterize Your Skin

While many people think of summer as the prime season for skin damage thanks to the risk of overexposure in the hot sun, winter can also be brutal for skin. The dry winter air can cause flaking, cracking and itchy skin as well as chapped lips. Even worse, the problem is exacerbated once you step inside a heated area or hot shower, where furnace air or scalding water dries skin out even more. Dry skin can even lead to eczema.

It's easy to take healthy skin for granted, but it doesn't just happen. Make sure the products you use and the environment you live in are primed to help your skin stay healthy.

To begin, choose a cleanser that will nourish the skin as it cleanses. This means avoiding foaming face washes and alcohol-based toners. Instead, look for antioxidant-rich products that contain ingredients like tocopherol (vitamin E), lipoic acid and CoQ enzymes.

Be sure to exfoliate as well; in the winter, dead skin cells build up more easily, resulting in a dull complexion and potential breakouts. Exfoliating can help remove the buildup.

After cleansing, moisturize. Swap your water-based moisturizer for one that is oil-based. As weather conditions change, your skin care routine should, too. Many lotions labeled as "night creams" are oil-based. Just be careful to choose non-clogging oils like avocado, mineral, primrose or almond.

Be sure to wear sunscreen when going out, even in the dead of winter. Winter sun—combined with snow glare—can still damage skin. Try applying a broad-spectrum sunscreen to any exposed skin about 30 minutes before going outside. Reapply frequently if you stay outside a long time. You may be able to double up by choosing a moisturizer that is fortified with sunscreen.

Also when going outside, try to cover up as much skin as possible. Wear cotton garments underneath wool to prevent irritation. Always change out of wet clothes as soon as possible.

In addition to topical skin products, there are other practical, economical steps that you can take to protect your skin. Modify your diet to include foods rich in omega-3 fatty acids and antioxidants (nuts, beans, berries, apples, fish). And, as always, make sure you drink plenty of water (two to three liters a day).

Keeping your thermostat down around 68° F will help keep moisture in the air (and save on utility bills). You may also want to consider running a humidifier when heating your home. Additionally, try to keep shower temperatures below 98.6° F to lessen the drying effect hot water can have on skin. Limit hot showers to five minutes or less to protect against dryness.

If all else fails, seek professional assistance. Find an esthetician or dermatologist who can evaluate your regimen and skin type and offer advice on products or lifestyle changes needed to protect and improve your skin.

The cervix is the lower, narrow end of the uterus, also known as the womb.

Get Screened for Cervical Cancer

Cervical cancer is a cancer that starts in the cervix, which, early on, may not exhibit any signs or symptoms. In advanced stages, it may cause abnormal vaginal bleeding or discharge. It is often caused by the human papillomavirus (HPV).

Cervical cancer is highly preventable in the United States because of screening tests and an HPV vaccination. When cervical cancer is found early, it is highly treatable and has high survival rates.

The two tests women can use to help prevent cervical cancer or catch it in its earliest and most treatable stages are the Pap test (or Pap smear) and the HPV test. Having these tests done at regular intervals beginning at age 21 is the most important thing you can do to prevent cervical cancer.

Besides regular screenings, other steps you can take to reduce your risk of developing cervical cancer are not smoking, using condoms during sex and limiting your number of sexual partners.

Provided by:

CB Cottingham & Butler
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Health Benefits of Yoga

Yoga is a mind and body practice with origins in ancient Indian philosophy. Like other meditative movement practices used for health purposes, various styles of yoga typically combine physical postures, breathing techniques and meditation or relaxation. In the United States, yoga is the sixth-most commonly used complementary health practice, according to a 2007 National Health Interview Survey, and is generally considered safe for most healthy people when practiced under the guidance of a trained instructor. In addition to being a fun and relaxing pastime, yoga has been linked to the following:

Stress reduction. A number of studies have shown that yoga can help reduce stress and anxiety, and people who practice yoga regularly frequently self-report they are sleeping better and experiencing lower levels of stress. Yoga practice has been demonstrated to reduce the levels of cortisol—the stress hormone. Most yoga classes end with a savasana, or relaxation pose.

Improved fitness. Practicing yoga can lead to improved balance, flexibility, range of motion and strength. These gains mean practitioners are less likely to injure themselves performing other physical tasks.

Management of pain and chronic conditions. If you're already injured or suffering from chronic illness, research shows that yoga postures, meditation or a combination of the two can reduce pain for people who have cancer, multiple sclerosis, auto-immune diseases, hypertension, arthritis, back and neck pain and other chronic conditions. Yoga can also help reduce risk factors for developing chronic diseases, such as heart disease and high blood pressure.

Groceries on a Budget



It's no secret that you can eat for less money by making your meals instead of dining out. But did you know you can also save money through smart shopping?

Plan. Set aside a certain amount of money each week or pay period and do not over what you budget. Consider buying a gift card from the grocery store you go to most often as a way of reinforcing your limit. Make a grocery list before going to the store, using coupons and advertised sales.

Purchase. Stick to your list and avoid impulse buys. Opt for the cheaper store brands for most items; in most cases you're not sacrificing quality. Buy whole, in-season fruits and vegetables (not pre-cut or packaged) for maximum produce savings. Opt for dried beans over canned—they are among the cheapest, healthiest items you can purchase. Never go shopping on an empty stomach.

Prepare. Make fewer trips to the grocery store by cooking large batches of food and freezing the extra portions.



Savory Squash Soup

Start the new year off right with this nourishing soup made from fresh, cost-effective seasonal winter vegetables. This delicious dinner will taste extra savory when you know that healthy eating and bargain buys are among the best decisions you can make over the next 12 months.

- 1 tbsp. olive oil
- 2 chopped onions
- 2 chopped carrots
- 2 minced garlic cloves
- 1 cup canned tomato puree
- 5 cups chicken or vegetable broth
- 4 cups cooked winter squash (acorn, butternut, delicata, hubbard, pumpkin or spaghetti)
- 1½ tbsp. dried oregano
- 1½ tbsp. dried basil

In a large saucepan, warm oil over medium heat. Stir in onions, carrot and garlic. Cook for about 5 minutes, covered. Stir in the tomato puree, broth, squash and herbs. Bring soup to a simmer and cook, covered, for about 30 minutes.

Yield: 6 servings. Each serving provides 140 calories, 2.5g of fat, 0.5g saturated fat, 5mg of cholesterol, 140mg of sodium, 7g of sugar and 5g of fiber.

Source: USDA

Live Well, Work Well



Thanks to a grant from **Essentia Health**, the Bayfield Area Recreation Center is now providing the following to the **Red Cliff community**:

-family day passes for evening and weekend visits

Call Don Gordon at Red Cliff Family Services 715-779-3722 for info

-financial scholarships for low-income children to take classes, including

Martial Arts Swim Lessons Swim Team Sailing

Call the Rec Center at 715-779-5408 to apply



Nutrition Content of Local Wild Foods

Food	Amount	Calories	Fat in grams	Cholesterol in milligrams	Carbo- hydrates in grams	Fiber in grams
Fish						
Trout, dry heat	3 oz	161	7	63	0	0
Whitefish, dry heat	3 oz	146	6	65	0	0
Whitefish, smoked	3 oz	91	1	28	0	0
Animals						
Bear, simmered	3 oz	220	11	83	0	0
Bison	3 oz	146	2	45	0	0
Cottontail	3 oz	144	2.4	77	0	0
Deer meat,	3 oz	158	7	83	0	0
Elk	3 oz	138	1	65	0	0
Moose	3 oz	130	1	45	0	0
Squirrel	3 oz	149	3	83	0	0
Birds						
Canadian Goose	3 oz	171	4	105	0	0
Mallard	3 oz	154	2	143	0	0
Pheasant	3 oz	149	1	49	0	0
Grouse	3 oz	142	1	105	0	0
Wild Turkey	3 oz	158	1	58	0	0
Plant Foods						
Blackberries	1 cup	72	0	0	9	4
Blueberries	1 cup	81	0	0	20	4
Cranberries, raw and whole	1 cup	46	0	0	12	4
Strawberries	1 cup	45	0	0	10	3
Raspberries	1 cup	60	0	0	14	8
Wild rice, cooked	1 cup	165	0	0	35	3

Courtesy of Rebecca Crumb-Johnson, Memorial Medical Center, Ashland WI

Seven Findings from American Cancer Society's Long Term Cancer Caregivers Study

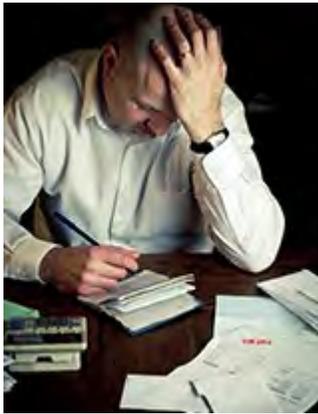
To better understand the effects of cancer on the quality of life of caregivers, the American Cancer Society's Behavioral Research Center (BRC) initiated an eight-year study in 2002, called the American Cancer Society National Quality of Life Survey for Caregivers. It is the largest nationwide, long-term study of its kind, encompassing surveys of nearly 2,000 cancer caregivers.

The following are the seven findings that one of the survey's lead researchers, Rachel Cannady, a scientist with the BRC, thinks are the most important thus far, and her takeaways:

- 1. Fear of cancer coming back is a two-way street:** Caregivers' emotional distress and fear of cancer recurrence affects the quality of life of survivors – and vice versa. “Interventions aimed at decreasing anxiety about cancer recurrence would benefit both the survivor and caregiver,” says Cannady. “Guided meditation is an example of a successful technique for reducing stress in caregivers.”
- 2. Caregiving is valuable:** On average, cancer caregivers studied spent about eight hours per day providing care. The value of their time can equate to tens of thousands of dollars per year, depending on how much care the person needs. “To alleviate the time costs, caregivers can recruit help from other family members or friends, or find [respite services](#) to share care,” says Cannady.
- 3. Caregivers may have unrealistic expectations:** Some cancer caregivers feel they should be doing more than is realistic, creating a sense of guilt, which is linked to an overall poorer quality of life. Says Cannady: “Guilt typically goes hand-in-hand with being overwhelmed. In order to restore a sense of meaning about the caregiving experience, it is extremely important for caregivers to prioritize their own emotional and physical needs, so they are better able to provide quality care to the survivor. Taking time away, perhaps once a week, to do something for oneself is highly encouraged.”
- 4. Caregivers can find meaning in their experience:** Family caregivers see their loved one's cancer or even death from the disease as an opportunity to reflect on life's purpose – and sometimes gain a new appreciation for it. “Meaning-centered therapy has been proven effective in reducing the distress associated with providing care and helping caregivers find meaning and peace in their caregiving experience,” notes Cannady.
- 5. Caregivers need a strong support system:** Cancer caregivers who have to face a loved one's recurrence of cancer or death from cancer are better equipped to handle these situations if they have a solid system of support in place. Cannady observes, “While it may be obvious that those who have more support have a better quality of life, our study shows that this holds true and is even more important when you're dealing with the serious health condition of a close family member or friend. Caregivers can strengthen their support system to help improve their situation. There are many options out there, including the online community [Cancer Survivors Network](#).”
- 6. As caregivers, husbands and wives each have strengths:** Husbands and wives face different challenges. Husbands tend to feel better than wives do about themselves as cancer caregivers. But wives do better than husbands when it comes to dealing with the emotional distress and social withdrawal of the person for whom they are caring. Says Cannady: “Men tend to be ‘fixers’ when things aren't right, so when a husband sees his wife struggling with cancer, he might try to fix the situation rather than help her adjust to it. Husband caregivers would benefit from interventions that educate them on how to cope with their wife's distress around having cancer.”
- 7. Caregiving is demanding:** Women caregivers who have multiple competing demands – such as employment outside the home, and taking care of children – report experiencing more stress from caregiving than do those without as many demands. They also report higher levels of caregiver guilt. “Women in the ‘sandwich generation’ (people who care for aging parents and their own children at the same time) tend to be professional jugglers,” says Cannady. “Finding additional help from family and friends would potentially alleviate the burden caused by multiple responsibilities.”

This Doctor Treats Poverty Like a Disease

Trudy Lieberman | November 6, 2013



What would you think if your doctor handed you a prescription that recommended filing your tax returns or applying for food stamps instead of the usual medicines for high blood pressure or diabetes? You'd probably say the physician was nuts. Tax refunds? Food? What do they have to do with making you healthier?

I just returned from a month long Fulbright fellowship in Canada and met such a physician, Dr. Gary Bloch, who practices family medicine at St. Michael's Hospital in Toronto. We had a long conversation about what makes people healthy. He wasn't interested in talking about new drugs to lower cholesterol hyped by the latest drug salesperson to walk through his door.

"We've created an advocacy or interventional initiative aimed at changing the conversation about poverty and how doctors think about poverty as a health issue," Bloch told me. "It's one of those cultural shift things. My job is to push ideas for physician interventions around poverty." Bloch showed me a clinical tool used by primary care practices in Ontario that is based on strong evidence linking poverty to bad health outcomes.

The tool, a [four-page brochure](#), is simple in design but powerful in concept. "You come at poverty from every possible angle," Bloch said. "You start from the evidence and frame the issue in language doctors can understand."

The evidence: Page one of the tool points out that "poverty accounts for 24percent of person years of life lost in Canada (second only to 30 percent for neoplasms)," and notes that "higher social and economic status seem to be the most important determinants of health."

The tool: Three steps to address poverty in primary care practices.

Step 1: Screen everyone by asking, "Do you ever have difficulty making ends meet at the end of the month?" Using [the language of clinical tests](#), the tool says that this question yields a sensitivity of 98 percent (the ability to predict the number of people with the disease) and a specificity of 64 percent (the ability to predict those without the disease).

Step 2: Factor poverty into clinical decisions like other patient risk factors. The tool provides examples, such as noting that a man living in the lowest quartile of poverty has twice the risk of diabetes as a high income man. Therefore, when a 35-year-old man comes to the office without risk factors for diabetes but has a very low or no income, doctors should consider ordering a screening test for the disease.

Step 3: Intervene by asking questions. Here's where that prescription to file your tax returns comes in. Bloch suggests asking if older patients have applied for all the supplemental income benefits they're entitled to or whether all patients have applied for drug benefits they may be eligible for.

While these seem pretty straightforward and useful, I wondered how many primary care docs in the U.S. have thought about asking similar questions. I don't know how many times I've heard physicians say they order prescriptions for expensive meds knowing that even cheap, basic antibiotics are out of reach for their patients. That's where the conversation ends, and so does care for those who need treatment.

I asked Bloch about the impact of his poverty tool, a simple paper brochure, in an age when the press, the public and the medical profession are focused more on shiny, new technology and drugs than the basics of life. He said this approach is "one of those snowball things that keeps rolling."

The Ontario Medical Association will soon publish a poverty intervention tool, and the Canadian Medical Association held town hall meetings earlier this year in several Canadian cities. Participants identified four main social determinants of health: income, housing, nutrition and food security, and early childhood development.

Put all this in the current American political context, which calls for cutting food stamps, making seniors pay more for their Medicare benefits, changing the calculation of the Social Security cost-of-living formula, and the lack of focus on early education and affordable housing. Contrast the latter with all the media hype about affordable health care. In the end, affordable housing may trump affordable health care if the objective is really better health.

More Blog Posts by [Trudy Lieberman](#)



Trudy Lieberman, a journalist for more than 40 years, is an adjunct associate professor of public health at Hunter College in New York City. She had a long career at Consumer Reports specializing in insurance, health care, health care financing and long-term care. She is a longtime contributor to the Columbia Journalism Review and blogs for its website, [CJR.org](#), about media coverage of health care, Social Security and retirement. As a [William Ziff Fellow](#) at the Center for Advancing Health, she contributes regularly to the Prepared Patient Blog. Follow her on twitter [@Trudy_Lieberman](#).

January 2014

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Sat

			<i>1</i> <i>Closed</i>	<i>2</i> NOONI 10-12	<i>3</i>	<i>4</i>
<i>5</i>	<i>6</i> WIC pickup Flu Clinic @ RCCHC 1-4 Adult MIHH	<i>7</i> WIC pickup	<i>8</i>	<i>9</i> Podiatry	<i>10</i>	<i>11</i>
<i>12</i>	<i>13</i> WIC pickup	<i>14</i> WIC pick up	<i>15</i> Flu Clinic @ RCCHC 9-12 Screenings 9- 11 @ RCCHC	<i>16</i>	<i>17</i>	<i>18</i>
<i>19</i>	<i>20</i> Kids MIHH	<i>21</i>	<i>22</i>	<i>23</i> Podiatry	<i>24</i> Healthy Life- styles 4-5	<i>25</i>
<i>26</i>	<i>27</i>	<i>28</i>	<i>29</i>	<i>30</i>	<i>31</i>	

February 2014

Sun

Mon

Tue

Wed

Thu

Fri

Sat

						1
2	3 WIC Pick up	4 WIC pick up	5	6	7	8
9	10 WIC Pick up	11 WIC pick up	12	13	14	15
16	17	18	19	20	21 Healthy Life- styles 4-5	22
23	24	25	26	27	28	



FOR IMMEDIATE RELEASE

FOR MORE INFORMATION:

Beth Meyers, Executive Director

director@corecr.org

715-779-3457

Headline: Fair Weather Friends

Bayfield, WI December 23, 2013

As the snow continues to fall, and national weather reports show inclement weather throughout most of the country, it seems to be an ideal time to introduce a new program.

Fair Weather Friends was a concept formed by the Red Cliff Health Department Director as a program to provide a safe environment for elderly members of our geographic area during inclement weather. The RC Health Department partnered with multiple agencies to design the program and CORE Community Resources offered to take the lead in its implementation.

Our first phase is to establish teams of dedicated community volunteers who will respond during a weather crisis to ensure seniors are safe. It may be a simple reassuring phone call or a brief home visit. Volunteers will not be asked, nor expected, to put themselves in harm's way to help. First responders will be contacted when the situation is unsafe for volunteers to complete a task.

Seniors within CORE's service area* will be encouraged to call CORE at 715-779-3457 to register for the program by providing a name, phone number, address, and some more basic information. During inclement weather a volunteer will contact the senior to ensure wellness and provide or arrange for assistance if needed. Elders, and everyone else, will be encouraged to have an emergency plan and kit of supplies on hand at all times.

Many winter storms are accompanied by dangerously low temperatures and sometimes by strong winds, icing, sleet and freezing rain. One of the primary concerns is the winter weather's ability to knock out heat, power and communications services to homes or businesses, sometimes for days at a time. As part of second phase of program development we are working to establish safe places for seniors to go if power is off for an extended time period.

We are looking for volunteers to help with this program. Reassuring phone call can be done from the comfort of your home. The planning team anticipated that home visits would be very rare.

If you'd like more information on this program please contact CORE at 715-779-3457.

information on this program please contact CORE at 715-779-3457.

**If you live in one of these zip codes, you're in CORE's service area: Bayfield 54814, Washburn 54891, Cornucopia 54827 and La Pointe 54850. For the purposes of this program seniors are defined as age 55 and older.*

Photo Cutline:

CORE volunteers make re-assuring phone contact with seniors during inclement weather.

####

Thank you.

Beth Meyers

Executive Director, CORE Community Resources

14 South Broad Street

PO Box 1530

Bayfield, WI 54814

715-779-3457

director@corecr.org

www.corecr.org

Join us on Facebook

Serving Seniors & Caregivers in northern Bayfield County since 2006



Senior Wellness Day!

FREE FRIDAYS

at the

Bayfield Area Recreation Center

All seniors, 60+ years of age, in the CORE service area (By Zip Code: Bayfield 54814, Washburn 54891, Madeline Island 54850 or Cornucopia 54827) may use the Rec Center for free on Fridays all year. Choose from MANY fun options:

Swimming 6-9 am and 4-8 pm

Aqua Fit 9-10 am

SilverSneakers 11-12 am

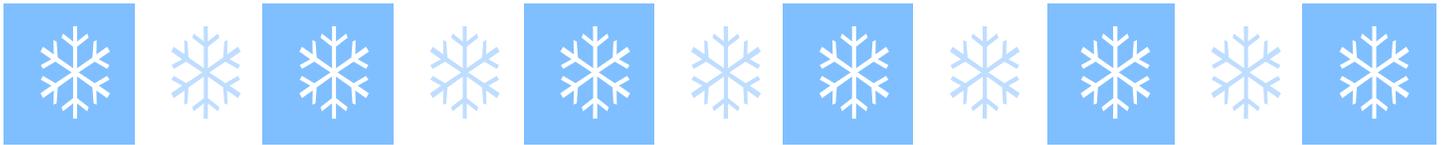
Fitness Room 6 am – 8 pm, or

Schedule time with a Personal Trainer

Call 715-779-5408 with questions.
Be healthy and happy!



The Senior Wellness Day is funded by a grant from the Otto Bremer Foundation in collaboration with CORE Community Resources and the Bayfield Area Rec Center.

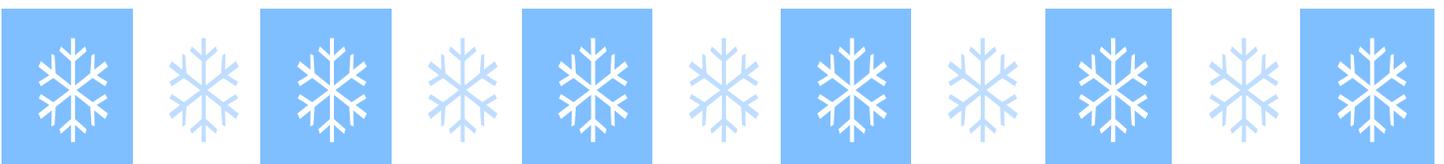


Cold Weather Exercise

Outdoor activities can relieve cabin fever, pump up your energy on gloomy days and boost your immunity during flu season.

- * ***Have fun in the cold with a little preparation:***
- * **Check** with your health care provider first if you have cardiac problems or asthma, even if you have had no problems exercising in warmer temperatures.
- * **Dress in layers.** Wear moisture-wicking polypropylene, fleece or wool for insulation and a waterproof breathable outer layers as needed.
- * **Wear** a warm hat and gloves, and if you have respiratory or cardiac concerns, wear a scarf over your mouth.
- * **Stay visible after dark.** Wear light colored or reflective clothing, and clip on a flashing light.
- * **Put on footwear** with good traction to avoid slips.
- * **Use sunscreen and sunglasses** to reduce UV rays and glare.
- * **Watch** the wind chill factor and consider exercising indoors when it's below zero.
- * **Stay hydrated.** Drink one or two cups of water before exercising; you may need additional water during vigorous exercise.
- * **Don't go it alone.** Exercise with a buddy or let someone know when you will return.

Take care to avoid frostbite and hypothermia. If you notice pain, numbness, tingling or skin whitening (usually on the face fingers or toes), get out of the cold immediately and slowly warm the area without rubbing. If hypothermia symptoms occur (intense shivering, slurred speech, fatigue or loss of coordination) seek emergency help



You Can Prevent Diabetes related complications

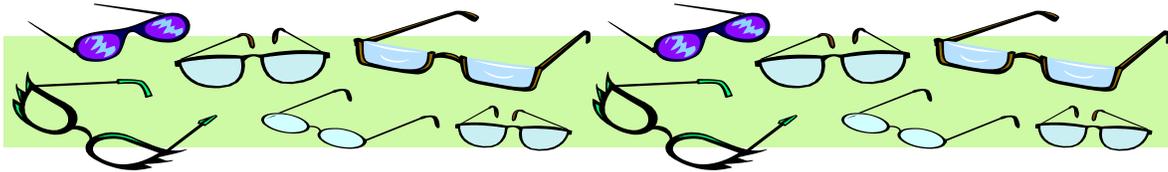
And this is how...



Ask your Provider about what your 10 year risk of heart attack.

Get your cholesterol checked (HDL & LDL & Triglycerides).

The American College of Cardiology and American Heart Association recommends statin (cholesterol lowering medication) therapy for those with Type 1 or 2 diabetes who are 40-75 years old.



Get an eye exam- with dilation.

The normal progression of diabetes can lead to death of the cells that make up the eye. Damage can happen without discomfort to the person and may result in the loss of vision. Treatment, if started early can slow the progression and help keep the eye as healthy as possible, saving a person's sight.