Ringing in a Healthy Start to the New Year
By Elizabeth Phillips, Urban Regional Extension Agent

After holiday indulgences, the New Year brings new opportunities to return to a healthier lifestyle. The high caloric and high fat temptations of the season are gone, and Americans often make resolutions to lose weight or increase physical exercise in the New Year. Adhering to the New Year’s resolutions can be strengthened with a plan to set goals for healthier living. However, do not set impossible goals. Millions of Americans set and then break New Year’s resolutions each year. Instead of setting yourself up for failure with goals that are too ambitious, make small lifestyles changes and choices that can produce big results in the New Year.

Plan to control the types of food choices.
Focus on a healthy balance of all the choices from the United States Department of Agriculture’s food pyramid at www.mypyramid.gov. Select an array of grains, vegetables, fruits, milk and dairy, and meats and beans for optimal meal planning. Plan to control the portions of foods selected. After a super-sized holiday season, trim down the portions and see better results in maintaining or losing weight.

Plan to change your style of food preparation and alter poor habits of the past.
Instead of frying foods, you might try baking or broiling your food. Try reducing the amount of fat and sodium in your preparation of meals. Seek other flavorings such as herbs and spices to make your meals tasty and interesting. Be adventurous in 2009 and try cooking with healthier additives that will help promote your new lifestyle plan.

Develop a plan for getting more exercise in the New Year.
Walking, jogging, swimming, dancing, biking, and other forms of physical activity can achieve excellent healthy results when combined with wise dietary choices. Ask a friend or relative to join you to achieve your goal of increased activity. It is always more fun to tackle tough challenges when you have a buddy for encouragement. Burning calories through healthy exercise can help everyone live healthier and more balanced lives.

Remember to maintain your healthy food choices when eating away from home in the New Year.
Many restaurants now have leaner and healthier menu choices for those who are watching their waistline.

The New Year will bring new challenges and will require high energy and optimal fitness to face these challenges. Resolve to use good judgment and to make sound choices to improve your overall health in 2009.

Health Benefits of Honey
By Phillip Carter, Urban Regional Extension Agent

Honey has numerous health benefits and it would take a long time to list them all. However, there are a few benefits we should consider to improve the quality and the duration of our lives.

Raw honey is about as natural as you can get. Many beekeepers only filter larger particles. However, some companies pasteurize their honey to prevent granulation while it is in a store. There has been much debate as to whether pasteurizing honey reduces some of its beneficial health properties. Virtually, every county in Alabama has beekeepers so most individuals should be able to locate a local beekeeper and purchase their honey.

Many people are unaware of the numerous minerals, vitamins, and antioxidants that are found in honey. In essence, it’s like taking a multivitamin. All you need is a teaspoon before bed and a teaspoon in the morning. The minerals found in honey include magnesium, potassium, calcium, sulphur, iron, copper, iodine, zinc, and phosphate.

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Learning to Maintain Weight Loss
By Mary Andrews, Urban Regional Extension Agent & Wendi Williams, Editor

It’s that time of the year when countless people make the decision to lose weight, which is quite noble. But after the hard work of losing weight, how do you maintain that weight loss.

Lauderdale County residents and participants of the Alabama Cooperative Extension System’s Walking and Eating program, Narzey Turner and Mabel and Richard Taylor, have discovered the secret to maintaining their weight loss for the past four years by eating more fruits and vegetables and walking an average of six miles during the course of a week.

According to the United States Department of Health and Human Services, most Americans consume a lot of calories, but not enough fruits, vegetables, and whole grains. The typical American diet is high in saturated fat, sugars, and salt, which adds on the pounds and makes us ideal candidates for heart disease, hypertension, diabetes, and cancer. And you know the rest of the story. We rarely exercise and spend more time leading sedentary lifestyles.

Losing weight is a commitment like anything else. Therefore, maintaining weight loss requires that same level of commitment. In other words, it means making lasting lifestyle changes. The National Weight Control Registry found these common factors among people who lost 30 or more pounds and kept it off for at least a year:

- Exercise
- Lost weight slowly
- Ate breakfast and watched food portion sizes
- Enjoyed living a healthier lifestyle

Other factors that researcher Diane Berry found among women that maintained their weight loss was a support system to reinforce their objective, an awareness of their “trigger” foods in addition to portion sizes, and they understood that losing and/or maintaining weight loss would be a lifetime challenge.

The Walking and Eating Program is now a part of the Community Health, Aerobic, and Motivational Program Initiating Optimal Nutrition or CHAMPION program that is designed to improve a participant’s overall health through lifestyle changes such as adopting obtainable and safe eating practices, daily physical activity, and improving behavioral habits.

For more information about the CHAMPION program, please contact Dr. Tamara Warren at (256) 372-4981.

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The vitamins include A (carotene), B1 (thiamin), B2 (riboflavin), B3 (nicotinic acid), B5 (panothenic acid), C (ascorbic acid), H (biotin), and P1 (rutin). Without having to go into a chemistry lesson, antioxidants are substances that help the body reduce the effects of cellular damage and chronic diseases. The concentration of antioxidants varies with the floral sources of honey. For example, darker honey usually has more antioxidants than lighter honey.

Honey also has some amazing antiseptic and skin healing properties. It contains antimicrobial agents that prevent infections by killing bacteria in and around wounds. Many types of bacteria cannot survive in honey so wounds heal, swelling eases, and tissue can grow back. Medical journals cite more than 600 cases in which honey was used to treat wounds. It appears that a lot more research is being done on using honey for burn victims. For example, honey is being used in Iraq to treat burn wounds in children.

Honey also has a wonderful ability to attract water, which makes it great for re-hydrating dry skin. Most individuals know how bad a sun burn hurts. Honey can ease that pain and speed the healing process.
Health Benefits of Honey (continued from page 2)

Bee pollen is another important substance found in honey. Bee pollen in itself is high in protein and contains all the vitamins and minerals previously mentioned. But more importantly it may provide some relief for those who suffer with seasonal allergies. Pollen can be purchased by itself to take separately; however, one can still benefit from taking honey since it already contains trace amounts of pollen. This trace amount of pollen every day may help reduce the symptoms of pollen-related allergies by inoculating yourself. In addition, it is very important that the pollen and honey be purchased locally since that is where the allergens are located. Because every individual is different, one can only try it to determine its effectiveness.

There are numerous books and Web-based resources that have additional information. Try some local honey and start feeling better today.


By Wendi Williams, Editor & HIV/AIDS Prevention Educator

Instead of the usual doom and gloom article about HIV/AIDS, I thought I would highlight what I consider to be the top seven major developments that have occurred in the AIDS arena since 1981 when the epidemic first began in the United States. Although they are not in any order of importance, these factors have played a major role in helping to change the course of history in what is now a global pandemic.

#1: One of the most significant changes in regard to HIV/AIDS is the development of new antiretroviral drugs. When AIDS first hit the United States (US) in 1981, the mortality rate was 100 percent and people on average lived only a year after being diagnosed. Today, individuals are living for two decades or longer under the care of a physician. AZT was the first HIV antiretroviral drug approved by the Food and Drug Administration (FDA) on March 19, 1987. However, it is the Highly Active Antiretroviral Therapy, also known as HAART with its drug “cocktails,” that is responsible for slowing down the spread of HIV in the human body. Today, more than 30 antiretroviral drugs have been approved by the FDA for use in the US.

#2: When the history books are written, President George W. Bush may not be remembered as one of our most favourable presidents, but he will be remembered for his AIDS efforts in Africa and other countries. In 2003, when the President’s Emergency Plan for AIDS Relief (PEPFAR) was first introduced to the global community approximately 50,000 people were documented as receiving HIV/AIDS treatment. In a five-year span, 40 times that number or more than 1.7 million people in sub-Saharan Africa alone now receive care for HIV/AIDS. In addition, more than 240,000 babies are HIV-negative as a result of PEPFAR efforts. Funding from PEPFAR is expected to increase from $15 billion to $48 billion over the next five years (PEPFAR, 2008).

In December 2008, President Bush was awarded the Global Peace Coalition’s first “International Medal of PEACE” for his AIDS efforts.

#3: No longer do you have to wait days or weeks before knowing your HIV status. Rapid HIV tests allow you to get your results in just 3-5 minutes. When I underwent my first HIV test, I had to wait a period of three days for my results. Timing is significant because people generally did not return for their results that may have been HIV-positive. Timing is significant because people will know their status and hopefully will act responsibly. Timing is significant because people can enter treatment earlier, and early treatment helps to prolong and to improve their quality of life. For more information about rapid HIV screening, visit www.cdc.gov/hiv/topics/testing.

#4: HIV/AIDS Prevention education like other programmatic education has evolved over the years. Not only is it important to educate people about HIV/AIDS, but it’s important to try and change negative behavior that puts people at risk for HIV. Therefore, the thrust of prevention education in the past five years has been to develop and implement effective scientific-based programs for culturally-specific audiences regardless of race, sexual orientation, age, and HIV status. There is scientific proof from random controlled trials that individual, small-group, and community-level interventions do work to change behavior. The goals of any health prevention or intervention program are to reduce the number of cases and to prolong or improve the quality of life through treatment and education.

#5: When I think about prevention education, I must also mention increased media coverage. I’m not just referring to the daily news that is broadcasted over our television sets, radios, or other electronic gadgets, but rather every single form of electronic and print media from movies to weekly magazines and drug ads. There was a time when we rarely talked or heard anything about HIV/AIDS, but not a day goes by when I don’t receive some developing news about this pandemic.

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On January 15, 2004, former United Nations Secretary-General Kofi Annan urged media executives from around the world to educate consumers about HIV/AIDS. He stated, “If there is one thing we have learned in the two decades of this epidemic, it is that in the world of AIDS, silence is death.”

What we have witnessed since 2004 is an explosion of information filtering out to households around the world from CNN reports to Black Entertainment Television’s Rap-it-Up campaign. People are now talking about HIV and AIDS in their homes, on their jobs, and even at their religious places of worship.

#6: According to a report issued by the Kaiser Family Foundation, the US spent roughly $150 billion dollars on fighting the AIDS epidemic from 1981 to 2004. In 1981, only a few thousand dollars was spent on AIDS research. However, in 2009, an estimated $24.1 billion has been requested for domestic ($18.2 billion) and global ($5.9 billion) HIV/AIDS efforts. More than half of these proposed funds are going for care and treatment programs in the US, while the rest will go to housing, domestic HIV prevention and research, and global efforts.

One of the most significant changes in regard to funding is certainly the reauthorization of the Ryan White Care Act. In 2006, the reauthorization redefined “Eligible Metropolitan Areas” as cities with a population greater than 50,000 versus 500,000. This allowed more funding to go to cities that have witnessed an escalation in HIV/AIDS cases rather than just to larger metropolitan areas like New York, Los Angeles, and Chicago. The Ryan White Care Act funds the AIDS Drugs Assistance Program that provides HIV antiretroviral drugs to low-income people. Without this program many US citizens would not be able to afford the medications that help to prolong their lives.

#7: Research is critical when it comes to HIV/AIDS, particularly since there is no cure. How we respond to this epidemic is certainly driven by research. It is research that gives us the tools we need to combat HIV/AIDS at the grassroots level and the medications physicians prescribe to patients. Because of research we now know that certain blood types may be more susceptible to HIV (Clark, 2009). Because of research we also know that HIV may have been evolving since the early 1900s (Avasthi, 2008). It is research that will take us one step closer to finding that elusive cure.

Visit www.aces.edu or www.cdc.gov/hiv for additional HIV/AIDS resources.