

Issues up close

Hungry for better choices

By Susan Trossman, RN



Nurses promote use of healthy food products for patients, consumers

FOOD AND WATER—what could be more basic to human life? Yet over the years both have been the target of scores of additives, commercial processes, and packaging that oftentimes have made them less than healthy.

However, there is a growing movement among nurses, ANA, and other like-minded organizations to help consumers, healthcare facilities, and colleagues get back to nature. Just last year, nearly 600 nurses attending ANA's House of Delegates (HOD) meeting approved a comprehensive resolution, "Healthy Food in Health Care," that in part promotes the purchasing of more nutritious and safer foods by the healthcare industry. This recent action adds to ANA's wide-ranging educational and legislative initiatives—from working to prevent the overuse of antibiotics in agriculture to advocating against the use of harmful chemicals in everyday products such as children's toys, baby bottles, and food containers.

"As nurses, we want the foods served to our patients, visitors, and coworkers to be healthy and free from harmful additives and chemicals," says Nancy Hughes, MS, RN, director of ANA's Center for Occupational and Environmental Health. "From an environmental standpoint, reducing our carbon footprint by promoting the use of more local foods is also important."

And meeting these goals is something that more and more people want, according to Hughes.

ANA's work, boosting involvement

Among other actions, the "Healthy Food in Health Care" resolution, introduced by the Oregon and Washington State nurses associations, specifically calls for ANA to advocate for laws, regulations, and policies to support local, sustainable agricultural and dairy production practices and to reduce the presence of



environmental contaminants and food additives.

It also requests that ANA support the public's right to know about potential health hazards through appropriate food labeling, including country of origin and genetic modification, and through the listing of nutritional information of foods offered at restaurants and institutions. And it calls on ANA to support legislation creating an efficient and coherent food safety regulatory system in the United States.

ANA already has worked toward achieving several food safety goals. For example, in May ANA urged the White House to not reexamine the dangers of dioxins but instead finally release a 20-plus-year-old report by the Environmental Protection Agency (EPA) that concluded that there was an increased cancer risk in humans when exposed to these toxic chemicals even at lower levels than previously suggested. As a result of ANA's advocacy, as well as other health and environmental organizations' efforts, the EPA acknowledged concerns and stated it will expedite release of the final assessment by the end of 2010 instead of 2012.

ANA also testified before the Food and Drug Administration and asked lawmakers to ban the use of the toxic chemical, bisphenol-A, from food and beverage containers. In her testimony, Hughes stated that, "ANA is a firm advocate of the precautionary approach regarding dangers to the public health. Safer alternatives to BPA are available and currently in use." Those alternatives include using glass instead of plastic for baby bottles.

Get your fresh produce!

Denise Choiniere, MS, RN, works as an environmental health coordinator and part-time cardiac ICU nurse at the University of Maryland Medical Center in Baltimore. In her coordinator role, she leads a range of green initiatives, including improving waste management and selecting environmentally healthy products.

She also works with hospital food service managers to incorporate healthy foods served in the cafeteria and patient meals. Her efforts have led to ensuring that the hospital provides organic yogurt and milk that is free from synthetic hormones; purchases fair trade coffee; and buys vegetables and other products that are locally grown.



Beyond the cafeteria, she helped launch a farmers' market this spring that is open to hospital staff, visitors, and inner-city community residents, who previously lacked easy access to fresh-off-the-farm produce. Currently there are 12 vendors, and more are in the works, Choiniere says.

The benefits of making these food decisions, such as going recombinant bovine growth hormone-free (rBGH), are many. The additive rBGH, which is used to boost milk production in cows and is banned in many countries, may raise people's risk of increased antibiotic resistance and cancer, according to Health Care Without Harm. ANA, in a 2004 HOD resolution, "Inappropriate Use of Antimicrobials in Agriculture," urged meat and poultry producers and bulk purchasers of meat to "promptly phase out the non-therapeutic use of medically important antibiotics and the use of fluoroquinolones in poultry," and ANA supports efforts to require full disclosure of the use of these products by meat producers.

"Buying locally not only cuts down on transportation-related carbon dioxide emissions, but also these foods are more nutritious and taste better because they're picked when ripe and ready to be eaten," Choiniere says.

She truly believes in the old saying, you are what you eat. So why should nurses settle for junk food or chemically treated food, or serve them to their patients?

"By having healthy food available to patients and visitors, it sends a powerful message that these foods are important for their health," she says.

That message is starting to take hold around the nation, and it's one that nurses clearly understand and are willing to champion, according to Louise Mitchell, sustainable foods coordinator at Maryland Hospitals for a Healthy Environment, a program of the University of Maryland School of Nursing.

Hospital food service directors and chefs are taking gradual steps to provide healthier, sustainably produced foods in their cafeterias and on their patient trays, Mitchell says.

But she acknowledges that "it does require a shift in their purchasing practices and in the foods they request from their established food vendors and distributors."

Conventionally produced foods grown with pesticides or raised with routine antibiotic use are often perceived as costing less, Mitchell says. However, there often are





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hidden expenses within these “bargains,” including harmful health effects and subsequent healthcare costs.

Cue the cardio nurse

Allison Kellenberger, RN, a staff nurse in the cardiology outreach program at the University of Missouri-Columbia Hospital and Missouri Nurses Association member, has been interested in agricultural sciences for a long time. But for the past 2 years, she has focused on promoting healthier food options in her workplace and nationally.

“Florence Nightingale believed in holistic nursing,” Kellenberger says. “Making sure we have healthy foods for our patients and our communities is holistic nursing. We also shouldn’t tell our patients to make sure they exercise and cut fat from their diets, and then go home and stay on the couch and eat steak and processed foods. We owe it to our patients to live a healthy lifestyle too.”

Kellenberger recently worked with the food purchaser at her hospital cafeteria to take an inventory of all the cheese, butter, sour cream, and other nonfluid dairy products to determine amounts of each product used and who their distributors are. She learned that the distributor for all those products is located in Maryland—even though there is a large dairy nearby and the hospital is located in the nation’s “heartland,” which begs the question of why

the hospital can’t buy more food products locally.

Given her findings, Kellenberger is trying to drum up more support among nurses and other hospital staff to buy products from the local dairy and to change other food-purchasing decisions. “Right now the cafeteria management has focused on eliminating foods containing trans fats,” Kellenberger says. “But there are so many other healthy options they can consider, like substituting brown rice for white rice.”

As for building support for healthier food options and food-related products at nurses’ workplaces, Mitchell and Kellenberger suggest that nurses take the following action:

- Plan a local food event, such as a “green” bag lunch, or educational workshop, inviting local farmers to display food they produce.
- Use their desire to make a difference by getting involved at any level.
- Educate themselves and each other about the science behind the actual or potential risks of certain agricultural and food production practices.

More information on healthy food-related issues is available online through ANA at www.nursingworld.org. To view a toolkit on rBGH-free dairy, go to www.noharm.org/us/nurses.rbgh.



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UNITED STATES POSTAL SERVICE® (All Periodicals Publications Except Requester Publications)

1. Publication Title American Nurse Today		2. Publication Number 1 9 3 0 - 5 5 8 3		3. Filing Date Sept. 29, 2009	
4. Issue Frequency Bi-Monthly		5. Number of Issues Published Annually 6		6. Annual Subscription Price \$27.95	
7. Complete Mailing Address of Known Office of Publication (Not printer) (Street, city, county, state, and ZIP+4®) HealthCom Media, 259 Veterans Ln, 3rd Floor Doylestown PA 18901-6719				Contact Person Jennifer Kenny Telephone (include area code) 215-489-7000	
8. Complete Mailing Address of Headquarters or General Business Office of Publisher (Not printer) HealthCom Media, 259 Veterans Ln, 3rd Floor Doylestown PA 18901-6719					
9. Full Names and Complete Mailing Addresses of Publisher, Editor, and Managing Editor (Do not leave blank)					
Publisher (Name and complete mailing address) Gregory P. Osborne HealthCom Media, 259 Veterans Ln, 3rd Floor, Doylestown PA 18901-6719					
Editor (Name and complete mailing address) Kathy Goldberg HealthCom Media, 259 Veterans Ln, 3rd Floor, Doylestown PA 18901-6719					
Managing Editor (Name and complete mailing address) Kathy Goldberg HealthCom Media, 259 Veterans Ln, 3rd Floor, Doylestown PA 18901-6719					
10. Owner (Do not leave blank. If the publication is owned by a corporation, give the name and address of the corporation immediately followed by the names and addresses of all stockholders owning or holding 1 percent or more of the total amount of stock. If not owned by a corporation, give the names and addresses of the individual owners. If owned by a partnership or other unincorporated firm, give its name and address as well as those of each individual owner. If the publication is published by a nonprofit organization, give its name and address.)					
Full Name		Complete Mailing Address			
Health Affinities, LLC dba HealthCom Media		259 Veterans Ln 3rd Floor Doylestown PA 18901			
David W. Dierk, Principal		259 Veterans Ln 3rd Floor Doylestown PA 18901			
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11. Known Bondholders, Mortgagees, and Other Security Holders Owning or Holding 1 Percent or More of Total Amount of Bonds, Mortgages, or Other Securities. If none, check box <input checked="" type="checkbox"/> None					
Full Name		Complete Mailing Address			

12. Tax Status (For completion by nonprofit organizations authorized to mail at nonprofit rates) (Check one)
The purpose, function, and nonprofit status of this organization and the exempt status for federal income tax purposes:
 Has Not Changed During Preceding 12 Months
 Has Changed During Preceding 12 Months (Publisher must submit explanation of change with this statement)

PS Form 3526, September 2007 (Page 1 of 3 (Instructions Page 3)) PSN 7530-01-000-9931 PRIVACY NOTICE: See our privacy policy on www.usps.com

13. Publication Title American Nurse Today		14. Issue Date for Circulation Data Below September/October 2009	
15. Extent and Nature of Circulation		Average No. Copies Each Issue During Preceding 12 Months	No. Copies of Single Issue Published Nearest to Filing Date
a. Total Number of Copies (Net press run)		155,007	142,970
b. Paid Distribution (By Mail and Outside the Mail)	(1) Mailed Outside-County Paid Subscriptions Stated on PS Form 3541 (include paid distribution above nominal rate, advertiser's proof copies, and exchange copies)	153,381	139,629
	(2) Mailed In-County Paid Subscriptions Stated on PS Form 3541 (include paid distribution above nominal rate, advertiser's proof copies, and exchange copies)		
	(3) Paid Distribution Outside the Mails Including Sales Through Dealers and Carriers, Street Vendors, Counter Sales, and Other Paid Distribution Outside USPS®	304	
	(4) Paid Distribution by Other Classes of Mail Through the USPS (e.g. First-Class Mail®)		
c. Total Paid Distribution (Sum of 15b(1), (2), (3), and (4))		153,685	139,629
d. Free or Nominal Rate Distribution (By Mail and Outside the Mail)	(1) Free or Nominal Rate Outside-County Copies included on PS Form 3541	224	435
	(2) Free or Nominal Rate In-County Copies included on PS Form 3541		
	(3) Free or Nominal Rate Copies Mailed at Other Classes Through the USPS (e.g. First-Class Mail)	753	2,056
	(4) Free or Nominal Rate Distribution Outside the Mail (Carriers or other means)		
e. Total Free or Nominal Rate Distribution (Sum of 15d(1), (2), (3) and (4))		977	2,491
f. Total Distribution (Sum of 15c and 15e)		154,662	142,120
g. Copies not Distributed (See Instructions to Publishers #4 (page #3))		345	850
h. Total (Sum of 15f and g)		155,007	142,970
i. Percent Paid (15c divided by 15f times 100)		98.94%	97.45%
16. Publication of Statement of Ownership			
<input checked="" type="checkbox"/> If the publication is a general publication, publication of this statement is required. Will be printed in the November/December 2009 issue of this publication. <input type="checkbox"/> Publication not required.			
17. Signature and Title of Editor, Publisher, Business Manager, or Owner			Date

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