#30for30 Walk-a-Weigh

Walk-a-Weigh is an award-winning weight management program offered by UGA Extension Agents throughout the state of Georgia. The program includes nutritious food demonstrations and physical activity. The program has been modified into a popular online format, Walk-a-Weigh Plus, also known as #30for30 Walk-a-Weigh. This is a collaborative project by Extension professionals nationwide that encourages participants to walk or engage in other physical activity for thirty minutes per day for thirty days straight.

Brad Averill is the Family and Consumer Sciences Extension Agent in Athens Clarke County. He facilitates both the traditional Walk-a-Weigh program in person, collaborating with community partners such as the Firefly Trail and Piedmont Healthcare, as well as online via the popular Facebook group which boasts almost two thousand members across the country. Read on for a short interview with Brad to learn more about #30for30 Walk-a-Weigh.

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How did #30for30 Walk a Weigh get started?
In 2021, the University of Georgia’s Family and Consumer Sciences Agent in Madison and Oglethorpe County collaborated with eight other Cooperative Extension Agents from across the country to design a health-based program that incorporated policy, system, and environmental changes. By utilizing online services such as Zoom, Facebook, and Canva, this multi-state team provided a 30-day wellness program via social media. The goal of this program was to foster a community of encouragement for individuals to make short-term changes for better health. Program participants are encouraged to walk for 30 minutes per day for 30 straight days, which is where we get #30for30 from.

What kind of activity “counts?”
While the program is called #30for30 Walk-a-Weigh, walking is just one of many physical activities that the members of our group participate in. We have folks that bike, swim, ski, stretch, and participate in yoga/group exercise classes.

What kind of feedback do you receive from participants?
We have received some great feedback from our program participants. As of August 30th, 2023, our group has 1,922 participants that have posted over 6,500 pictures of their 30-minute bouts of physical activity. With the understanding that each picture represents 30 minutes of physical activity, we can say that as a result of our program, our participants have walked a combined 11,470 miles (17 per minute mile pace on average). While those numbers are amazing, the personal messages from program participants to each other and to the group as a whole mean so much more.

Has the program changed or evolved over time?
Our program started with 8 collaborators from 7 different universities. Our program now has 15 collaborators from 13 different universities.

In addition to posting pictures, program collaborators post daily infographics from their perspective Cooperative Extension offices. This research-based information helps guide participants to make lifestyle changes to improve their nutritional and physical health. Monthly programs are conducted in November, December, January, and May.

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Where can people who are interested learn more and participate?

We would love for you to join our #30for30 Facebook Group. https://www.facebook.com/groups/30for30waw. We look forward to improving your health 30 minutes at a time.

Playing an active role on your diabetes care team

Your diabetes care team line up may include your primary healthcare provider (a doctor, physician’s assistant, or nurse practitioner), a diabetes educator, registered dietitian nutritionist, and pharmacist. You also may see specialty doctors such as endocrinologists (hormone doctors), nephrologists (kidney doctor), cardiologists (heart doctor), or podiatrists (foot doctor). But don’t forget that there is one essential, irreplaceable member of your healthcare team. It’s you!

Healthcare appointments can be overwhelming. There’s nothing like leaving your appointment only to realize you forgot to talk about something important. Prep for your visit by keeping a running list of questions to discuss with your healthcare provider and bring it with you. It is also helpful to note any specific problems or symptoms you’ve had and any supporting details. Bring a trusted friend or loved one to the visit so you have a second set of ears to hear and remember what is being said. Be ready to answer questions about your recent health and lifestyle. Some things you should be prepared to answer include:

- Have you had any recent changes in your diet, appetite, or bowel movements?
- How many servings of fruits and veggies do you have each day?
- Do you take any over the counter vitamins or supplements?
- How often do you exercise? What type of exercise and for how long?
- How do you manage stress?
- In what ways are you doing well with managing your diabetes? What has been difficult?

Come to your appointment ready to ask questions. Below are some ideas for questions your healthcare team should be able to answer for you.

For your primary healthcare provider:
- What is my blood glucose level? What is my target number?
- What is my blood pressure? What is my target number?

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What can I do to lower my risk for heart disease and stroke?

For your diabetes educator:
· What do my blood glucose results mean?
· What is my insulin to carbohydrate ratio?
· What do I need to know about my diabetes medications?
· What should be my sick day plan?
· How does physical activity impact my blood glucose?

For your registered dietitian nutritionist:
· What do I need to know about food and meal planning?
· How do my other medical conditions impact my diabetes management?
· What is the best eating schedule for me?
· Are there any foods I should avoid?
· How do I use the food label to make healthy food choices?

For your pharmacist:
· Are there any medication interactions I should be aware of?
· When is the best time to take my medication?
· What are the side effects of my medications?
· What should I do if I miss a dose?
· Is there a generic or any assistance program to make my medication more affordable?

Playing an active role, continued

For your primary healthcare provider:
· What is my blood glucose level? What is my target number?
· What is my blood pressure? What is my target number?
· What is my cholesterol? What are my target numbers?
· Has my weight increased or decreased since my last visit? Am I at a healthy body weight? Would I benefit from gaining or losing weight?
· How physically active should I be? What are the best types of activities and how much should I do?
· What are my medications? Are you making any changes to my dose or medication schedule?
FDA issues final ruling on partially hydrogenated oils

The United States Food and Drug Administration (FDA) has issued final regulations on partially hydrogenated oils (PHO). PHO are liquid oils that are turned into solid fats through a chemical reaction called hydrogenation. These have been popular for their use as a low cost, shelf stable ingredient with a pleasing mouthfeel. They are found in foods such as commercial baked goods like cakes, crackers, or pies, vegetable shortening, margarines, frozen pizza, or premade dough products, like biscuits and rolls. When oil is partially hydrogenated, artificial trans fats are formed. Trans fats are a type of saturated fat.

Diets high in artificial trans fats have become a well-known risk factor for heart disease. Evidence that trans fats are bad for heart health has continue to grow throughout the 20th century, with increased heart disease risk for those consuming high quantities of trans fat as well as increased all-cause mortality and altered cholesterol levels. The FDA ruling applies to PHO as a food ingredient and does not ban naturally occurring trans fats that are found in meat and milk of ruminant animals in small amounts.

This ruling has been a work in progress from a public health perspective. In 1999, the FDA proposed mandatory labeling of trans fats to be included on the Nutrition Facts Panel. This went into effect in 2006. Between 2003 and 2012, likely as a result of industry response to the labeling requirements, the intake of trans fats decreased by 78% in the US. In 2015, the FDA ruled that PHO were no longer Generally Recognized as Safe for human food consumption.

“Generally Recognized as Safe,” or GRAS, is a status that indicates a substance has been shown to be safe under conditions of intended use. With this ruling, food manufacturers were given a three-year grace period by which PHO should be out of the food supply. As of June 2018, artificial trans fats were effectively banned in the US food supply.

The banning of PHO is an example of public policy and systems approach to improving health. However, consumers should be aware that with the removal of PHO from the food supply, other potentially harmful ingredients may be increased to meet the needs of food manufacturers for low cost, tasty, and shelf stable fat sources. Palm oil is an ingredient that has been commonly substituted for PHO. It is cheap, plentiful, and high in saturated fat. There are environmental concerns surrounding the harvesting of palm oil, which is associated with the destruction of vulnerable rain forest habitats.

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FDA ruling, continued

The US Dietary Guidelines for Americans recommend that adults limit their daily intake of saturated fats – which are typically solid at room temperature – as part of a healthy dietary pattern. No more than 10% of calories should come from saturated fat. They recommend shifting from foods rich in saturated fats to those high in unsaturated fats. Saturated fats are found in higher-fat cuts of meat, butter, margarine, full-fat dairy products, and vegetable shortening. Unsaturated fats are typically liquid at room temperature (think liquid oils).

“Nutritious sources of heart-healthy, unsaturated fats include nuts, seeds, avocados, and liquid oils like olive, canola, and safflower oil. Choosing lean meats and low-fat dairy products is another way to decrease your intake of saturated fats and improve your heart health.

Contributors

Alison C. Berg, PhD, RDN, LD Associate Professor, Extension Nutrition and Health Specialist, Nutritional Sciences Extension University of Georgia, Athens, GA

Beth Kindamo, MS, RDN, LD Nutritional Sciences Extension UGA, Athens, GA

Brad Averill, MS
FACS Extension Agent, Athens Clarke County, GA

Editorial board:

Ian C. Herskowitz, MD FACE, University Health Care System, Augusta, Georgia
Recipe corner: lentil soup with sweet potatoes
(yields 6 servings)

Ingredients:
3 tablespoons olive oil
2 large red onions, diced
2 cloves garlic, minced
2 medium (1 pound) sweet potatoes, peeled and diced
1 ½ teaspoons dried thyme
10 cups reduced sodium chicken stock or vegetable stock
1 ¼ cups dry lentils
2 ribs of celery, sliced
½ cup minced fresh parsley
Fresh ground pepper, to taste

1. Wash hands and assemble clean equipment.
2. In a large pot, warm olive oil over medium heat. Add onions and sauté until soft.
3. Add garlic and thyme. Cook for additional 2–3 minutes. If needed, turn the heat down.
4. Stir in stock, lentils, sweet potatoes, thyme, celery, and ¼ cup of the parsley.
5. Bring mixture to boil over high heat, then reduce to simmer. Simmer, uncovered, for 30 minutes. Garnish with remaining parsley and add black pepper to taste.
Dear Friend,

Diabetes Life Lines is a quarterly publication sent to you by your local county Extension Agent.

It is written by an Extension Nutrition and Health Specialist and other health professionals from the University of Georgia. This newsletter brings you timely information on diabetes self-management, nutritious recipes, and news about important diabetes-related events.

If you would like more information, please contact your local county Extension Office.

Yours Truly,

County Extension Agent

Diabetes Life Lines: Your current issue is enclosed

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