**Department of Extension Family and Consumer Sciences**

**Quarterly Newsletter**

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**Is Halloween Candy Tampering a Myth?**

Sonja Koukel, Ph.D.
Community & Environmental Health Specialist

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**Is the fear of Halloween candy tampering based on a myth?**

By and large, yes, according to the best available research. Despite a

very few well-publicized cases of alleged tampering during the 1960s,

'70s, and '80s — nearly all of which were discovered on further

investigation to be unfounded or unverifiable — no child has ever been seriously injured or killed as a result of ingesting adulterated candy, apples, or other treats collected door-to-door on Halloween.

"Since 1983, I have followed stories about contaminated Halloween treats in the New York Times, the Los Angeles Times and the Chicago Tribune going back to 1958," said sociologist Joel Best in a 2002 interview, "and every time a case has been reported, the cause of death or injury has turned out to be something other than Halloween candy."

**What investigators found**

In one of those cases, it turned out that a child who died after allegedly eating Halloween candy laced with heroin had actually found the drug stashed in his uncle's home. In other cases, children who were initially thought to have died as a result of poisoned Halloween candy were found by pathologists to have succumbed to natural causes. And, in one of the very few incidents in which Halloween treats were actually implicated, investigators discovered that the deadly candy had been poisoned by the child's own father, who had recently taken out a life insurance policy on his son.

"Tainted Halloween candy is a contemporary legend, spread by word of mouth, with little to support it," Best concluded. Like most contemporary ("urban") legends, this one has more to reveal about our collective psyche than it does about real-world events. "Contemporary legends are ways we express anxiety," Best explains. This legend shows just how anxious we can be.

**How a myth changed Halloween**

What sociologists term "the myth of the Halloween sadist" became so

firmly entrenched in the American psyche from the 1970s on, in fact,

that aspects of the holiday underwent a fundamental change. Most

crucially, it became every mother and father's urgent priority to protect

young trick-or-treaters from the malicious acts of strangers. Parents

were warned by law enforcement officials to thoroughly inspect

Halloween treats for tampering before allowing children to consume

them. Hospitals began offering the free use of x-ray facilities to detect

foreign objects such as razor blades, pins, and needles. And though

the moral panic that gave rise to these measures showed signs of subsiding by the 1990s, parental accompaniment and supervision had become a widely adopted and apparently permanent addition to the trick-or-treat ritual.

None of which is to say that parents needn't watch out for their children's safety on Halloween — they should — or that monitoring Halloween treats is never warranted — it is. The point to be gleaned is that these dangers were considerably overblown when they first came to light and created an atmosphere of fear and paranoia which, for a time, tainted everyone's enjoyment of the holiday. More recently we've seen a slight easing of this regime and a welcome change of emphasis in the direction of reasonable concern and due caution.

**Dose of reality**

To put all this in perspective, Best points out that there's a much more pressing threat to children's safety on Halloween, and that's automobile accidents. Millions of children go trick-or-treating on October 31, and research shows they're four times more likely to be struck by a car on that date than any other day of the year, a statistic worth bearing in mind.

Resource: D., Emery (2014). Available at <http://urbanlegends.about.com/od/halloween/a/Is-Halloween-Candy-Tampering-A-Myth.htm>

**Halloween Safety Tips**

Sonja Koukel, Ph.D.
Community & Environmental Health Specialist

Make sure your Halloween activities stay happy by following these safety tips.
Recommended by the American Academy of Pediatrics

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**Halloween Safety Tips for Costumes**

* Plan costumes that are bright and reflective. Make sure that shoes fit well and that costumes are short enough to prevent tripping, entanglement or contact with flame.
	+ - * Consider adding reflective tape or striping to costumes and trick-or-treat bags for greater visibility.

* + - * Because masks can limit or block eyesight, consider non-toxic makeup and decorative hats as safer alternatives. Hats should fit properly to prevent them from sliding over eyes.
			* When shopping for costumes, wigs, and accessories, look for and purchase those with a label clearly indicating they are flame resistant.
			* When a sword, cane, or stick is a part of your child's costume, make sure it is not sharp or too long. A child may be easily hurt by these accessories if he stumbles or trips.

**Halloween Safety Tips for Trick-or-Treating**

* To keep homes safe for visiting trick-or-treaters, remove from the porch and front yard anything a child could trip over (such as garden hoses, toys, bikes, and lawn decorations).
* Check outdoor lights and replace burned-out bulbs.
* Sweep wet leaves from sidewalks and steps.
* Restrain pets so they do not jump on or bite a trick-or-treater.
* A parent or responsible adult should always accompany young children on their neighborhood rounds.
* If your older children are going door-to-door alone, plan and review the route that is acceptable to you. Agree on a specific time when they should return home.
* Only go to homes with a porch light on and never enter a home or car for a treat.
* Make sure children stay in a group and communicate where they will be going.
* Carry a cell phone for quick communication.
* Remain on well-lit streets and always use the sidewalk.
* If no sidewalk is available, walk at the far edge of the roadway facing traffic.
* Never cut across yards or use alleys.
* Only cross the street as a group in established crosswalks. Never cross between parked cars or out of driveways.
* Don't assume the right of way. Motorists may have trouble seeing trick-or-treaters. Just because one car stops, doesn't mean others will!
* Notify law enforcement authorities of any suspicious or unlawful activity.

Resource: C., Holecko (2014, April 30). Available at <http://familyfitness.about.com/od/healthandsafety/qt/halloween_safety_tips.htm>

**The Multivitamin Maze**

Carol W. Turner, Ph.D.

Food & Nutrition Specialist

For millions of Americans, popping a vitamin and mineral supplement every morning has become as routine as drinking a glass of orange juice. Most of the public views this as a safeguard against nutrient deficiencies and health problems. In 2013, the Centers for Disease Control and Prevent found that 60% of American adults take dietary supplements, including multivitamin and mineral formulas. But how much do we really know about what is in the bottle?

*Peering inside the bottle*

Some multivitamins formulas are on overdrive. It may benefit people to flip the bottle over and read the facts, making sure that it doesn’t exceed 100% of the Daily Value (DV) for any nutrient. The DV is the amount of a vitamin or nutrient that a person should get for optimum health from a 2,000 calories-a-day diet. The number can help people understand how foods and supplements contribute to the total diet. The DVs are set high to cover the needs of 97% to 98% of the U.S. population with a margin for safety.

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| **Nutrient** | **Daily Value (DV)** |
| Vitamin A | 5,000 IU |
| Vitamin C | 60 mg |
| Vitamin D | 400 IU |
| Vitamin E | 30 IU |
| Vitamin K | 80 mcg |
| Thiamin (vitamin B1) | 1.5 mg |
| Riboflavin (vitamin B2) | 1.7 mg |
| Niacin (vitamin B3) | 20 mg |
| Vitamin B6 | 2 mg |
| Folic Acid | 400 mcg |
| Vitamin B12 | 6 mcg |
| Biotin | 300 mcg |
| Pantothenic Acid  | 10 mg |
| Calcium | 1,000 mg |
| Iron | 18 mg |
| Phosphorus | 1,000 mg |
| Magnesium | 400 mg |
| Zinc | 15 mcg |
| Copper | 2 mg |
| Selenium  | 70 mcg |
| Chromium | 120 mcg |
| Iodine | 150 mcg |
| Manganese | 2 mg |
| Molybedenum | 75 mcg |
| Chloride | 3,400 mg |
| Potassium | 3,500 mg |

*What does research report?*

It is important to note that the science of vitamin supplementation and health risk is full of inconsistencies. Some studies have shown health-protective effects while others have demonstrated risks. These negative findings do not mean that vitamins are not good for the body. We know that the human body requires an array of micronutrients – from vitamin A to zinc – to maintain normal function. What we do not fully understand is how supplemental forms of micronutrients work in the body.

*Who should take vitamin and mineral supplements?*

Many groups and individuals can benefit from vitamin/mineral

supplementation. Pregnant women, young children, frail elders, and

individuals with compromised nutritional intake are populations that

typically benefit from supplementation. We know that many Americans

do not make the right food choices to meet their micronutrient needs. Surveys consistently show that people fall short on dairy, fruit, vegetable, and whole grain intake. So what is the answer?

*Buyer beware*

In a world that finds vitamins and minerals stirred into everything from water to candy, it is important for people to consider the supplemental intake of micronutrients they are consuming – particularly for folic acid. Some studies have indicated that too much folic acid may increase the risk for certain cancers. It is not difficult to exceed a day’s worth of folic acid in fortified foods.

*How do I choose one that is right for me?*

There are many types of multivitamin supplement on the market, so if you decide to add one to your healthy living plan, which one do you choose? There are many "gimmicky" multivitamin supplements that claim to be designed to relieve stress, to be of high potency, or to be better for you because they are more "natural".

Points to Consider

* Special formulas geared towards women, older adults or the stressed-out are often nothing but marketing ploys. For women of child-bearing age the folic acid content is important. For older adults the important issues are vitamin A content that is no more than 100% of the Daily Value and no added iron. Claims for special "stress relieving" or "energizing" vitamins are largely unsubstantiated and are not worth the extra money.
* "Natural" supplements are usually higher priced than synthetic versions, but they are chemically identical, with the exception of vitamin E. In fact, some vitamins labeled "natural" are actually synthetics with small amounts of plant extracts added. There is no need to pay extra just because the label says "natural."
* Cheap or generic brands of multivitamin supplements are just as effective as more expensive, advertised name brands. The vitamins are of the same chemical composition no matter the price.
* Many multivitamins are fortified with substances that have no recommended daily allowance and no proven health benefit. Examples are algae, bee pollen, etc. There is no need to pay extra for these substances.

Multivitamins and supplements should be handled like other medications in your home. Be sure to follow these precautions –

* Keep multivitamin supplements that are designed for adults away from children as the doses are designed for adults and can result in toxicity.
* If you choose children's vitamins, beware of chewable tablets that contain vitamin C as they can erode tooth enamel. If these supplements are used, immediately rinse out the child's mouth.
* Make sure that children know that vitamin supplements are not candy and keep the supplements out of children's reach.

The most important lesson to remember is foods first, pills second. Our diets should focus on whole food sources of micronutrients. We do not know enough about how supplements can protect from or trigger disease, but there is no controversy over the benefits of eating a diet rich in nutrients from whole foods. Fruits, vegetables, whole grains, legumes, nuts, and seeds contain a symphony of vitamins, minerals, phytochemicals, and fiber that appear to work together to protect against disease.

**Holiday Gift Ideas for People with Diabetes**

Cassandra Vanderpool, M.S., R.D.N., L.D.

Extension Diabetes Coordinator

With the holidays approaching, many people are searching for gifts to give their friends and loved ones. Shopping for someone with diabetes is not necessarily different than shopping for others, but sometimes it can make it more difficult to select the perfect present. Consider what the person you are shopping for likes, already has, and wants or would appreciate. Some people prefer not to receive gifts that remind them of their diabetes, while others are grateful for gifts that make it easier to live healthy. Here are some ideas to consider:

* **What do they wear?** Clothing and accessories make great gifts. Help those with diabetes stay warm during the chilly season with stylish hats, scarves, gloves, and thermal socks. Choose comfortable house slippers that have protective soles. You may purchase a gift certificate for a clothing store if you are unsure of sizes or fashion tastes. Also consider gift certificates for shoe stores with certified pedorthists, experts on corrective footwear. Jewelry is a popular gift. Make it special with a meaningful inscription or by choosing diabetes awareness jewelry. Individuals who use insulin may appreciate medical identification jewelry or a stylish bag for their diabetes supplies. Those who use an insulin pump may also value a gift certificate for a seamstress who can place hidden pockets in their clothing as needed to hold their pump.
* **What do they eat?** Avoid diabetic gift baskets that advertise sugar-free foods. That does not mean they are healthy for those with diabetes. Baskets or food of the month clubs that feature fresh vegetables and fruits, nuts, cheeses, popcorn, tea, and/or coffee are better choices. If the person likes to cook or wants to do more home cooking, there are many items that naturally encourage healthier meals and snacks. Grills or grooved pans, slow cookers, pressure cookers, non-stick cookware, digital food scales, hot air poppers, and diabetes cookbooks are just a few. There are many fun kitchen gadgets available for all budgets. Herbs and spices also make a nice gift for those who enjoy exploring flavors and are trying to use less salt.
* **What physical activities do they like?** Fitness comes in a variety of options. While a gym membership may work for some, others might prefer memberships or gift certificates for dancing, yoga, swimming, Zumba, or other group classes. Many people make walking their exercise of choice and might find a pedometer helpful. A bicycle can encourage physical activity plus provide transportation. For those who want to get in shape but do not know where to start, consider buying them sessions with a personal trainer who can help them develop an individualized plan that works for them.
* **What helps them relax?** People with diabetes and other chronic diseases often feel burdened with stress and need relaxation. Help them pamper themselves with a gift certificate for a massage or facial or with hand and body creams or a foot care basket. They may enjoy scented candles, a diabetes magazine subscription, music (including an iPod or other player), or an evening out. Those who enjoy traveling may like a contribution toward a trip or a handy travel pouch for their insulin. People who feel stress about driving on unfamiliar streets may appreciate a GPS navigation device.
* **How can you serve them?** One of the most valuable gifts you can give is your time. Assist with rides and home or yard work as needed. Join with them in regular physical activity. Cook healthy meals together and enjoy socializing. If you do not have the time or ability to fill a need, consider paying for a personal chef, housekeeping services, grocery delivery, or other service.
* **What else might they need?** People with diabetes may need specific items to help maintain good health, and they are sometimes expensive. You may be able to help purchase a blood glucose meter, test strips, or medications. A good health book may be useful as a reference in their home. Some may benefit from a menu planner. Most could use visits with a Certified Diabetes Educator, and many feel more comfortable having a cell phone that they can use to contact others as needed.
* **Are there any more ideas?** Of course! Depending on the preferences of the individual, you may consider a religious gift, an adventurous gift like bungee jumping, a framed motivational poster, or a donation in their name to their favorite charity. Also browse the American Diabetes Association store at [www.shopdiabetes.org](http://www.shopdiabetes.org) for cookbooks, other diabetes books, holiday cards and décor, jewelry, kitchen and entertaining items, tools and gadgets, bags, accessories, travel gifts and more. Purchases help support the Stop Diabetes efforts.

Many of these ideas came from Diabetic Lifestyle, dLife, Diabetes Forecast, and the American Diabetes Association.

**Safely Preserving New Mexico Chile Peppers**

Nancy Flores, Ph.D.

Food Technology Extension Specialist

New Mexico chiles are highly nutritious but also perishable and must be preserved by canning, drying or freezing for long-term storage. Each method has its advantages that depend on the time, cost and storage space and the final consumer use. Most home canned foods have a 24 months storage period. While frozen food has 6-12 months and dehydrated foods will safely last 12 months. Keep in mind the condition of the starting ingredient. Fresh red and green chile peppers have an outer skin that is not digestible and should be removed to help with any of the preservation methods used.

Green chiles are naturally low in acid, canning them requires special

precautions that differ from those followed when canning high-acid

fruits. There are several tested recipes for canning green chile (*E-308*

*Canning Green Chile*), and fruit spreads *(E-326* *Home Canned Sweet*

*Spreads Made with Green Chile*). Other references on canning

procedures for other vegetables are found at the National Center

For Home Food Preservation (<http://nchfp.uga.edu/how/can_04/peppers.html>.

Many people have asked for canning recipes for red chile sauce. Following USDA guidelines for canned food recipe development, the recipes that we have developed for consumers to safely can at home using either water bath and pressure canning methods have resulted in canned sauce products that have poor flavor, quality and texture that breaks down over time. Therefore we continue to recommend that consumer either dry or freeze red chile to preserve food products for an extended time.

Both red and green chiles are easy to dry or dehydrate using a home dehydration unit or even oven. There are solar methods that can be used but must be carefully monitored for insects and condensation during the evening hours. Fresh red or green peppers should be roasted to blistered outer skin so that the peel can be removed before drying. Red peppers can be strung together to form a “ristra” and dried in ambient room temperatures. See guide *E-322 Drying Foods* for guidelines and tips for storage and dryness test criteria. Once dried these products must be protected from the environment and must be properly packaged and stored.

Similarly fresh red or green chile peppers pods are easy to prepare for

freezer storage. Fresh peppers should be roasted to blister outer skin

so that the peel can be removed before freezing. Sauces or purees can

be made using chiles and other ingredients then portioned into freezer

safe containers or bags. Roasted peeled peppers should be refrigerated

within 2 hours of exposure to heat. Whole peppers can be frozen

unpeeled and are easier to peel after freezing. Roasted peppers must be cooked or consumed or frozen within 3 days of storage in the refrigerator. Home freezers are inefficient at removing heat quickly from food placed in containers deeper than 2 inches. If storage packages are too large, peppers will freeze slowly, resulting in a mushy texture because of ice crystal formation within the chile tissue. Therefore, it’s best to use shallow containers to allow for quick cooling. Specialized plastic freezer containers with lids or plastic freezer bags are best for storing peppers in the freezer. Remove as much air as possible to reduce the amount of surface crystallization that can form in air spaces during freezer storage. See *Processing Fresh Chile Peppers* *Guide E-324* for specific instructions on freezing procedures.

Food & Nutrition Publications can be found at <http://aces.nmsu.edu/pubs/_e/>

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**Health Insurance Literacy: Extension Programs Help People Make a Smart Choice**

Karim Martinez

Doña Ana County Home Economist

As a result of the Affordable Care Act (ACA), many people in our communities will be enrolling or re-enrolling in health insurance plans this fall. Research shows the majority of people in the U.S. feel overwhelmed and intimidated when deciding on health insurance coverage for themselves and their families. In response, University of Maryland Cooperative Extension developed a curriculum aptly entitled, ***Smart Choice Health Insurance****©*. With support from Dr. Sonja Koukel, Extension Specialist, and NMSU Extension administration, New Mexico was one of seven states to participate in pilot-testing this research-based curriculum. Participants in this 2-hour workshop cover topics, such as:

* Key health insurance terms
* How to estimate costs for health care
* What questions to ask
* How/where to find information for choosing a health insurance plan

Doña Ana County Commissioners and stakeholders identified educational outreach in Health Insurance Literacy as a priority and I was fortunate to have the opportunity to bring the ***Smart Choice Health Insurance****©* workshop to my county. In June 2014, I piloted an English-version workshop at the Doña Ana County Extension Office with Kelly Knight, Otero County Home Economist. Twenty people attended and the majority of participants left feeling more confident about making a smart decision selecting health care coverage for themselves and their family. I also piloted Spanish-version workshops with County Health and Human Services staff and community members. The results of these pilot workshops were shared with the Maryland Cooperative Extension Service during a webinar in September 2014.

What Kelly and I discovered from our pilot testing is that participants could have benefited from a general informational presentation prior to attending the ***Smart Choice Health Insurance****©* workshop. I was fortunate (again) to be at the right place at the right time and was invited to be part of a committee formed by our County Health and Human Services department to develop just this type of presentation. They received a grant from the NM Association of Counties to develop this presentation and train people to present it in the community. The goals of this presentation are to inform people about the Medicaid expansion that now covers people ages 19-64 and about the NM Health Insurance Exchange. The information is basic, can be taught by anyone in the community and focuses on referring people to Medicaid Determiners and Healthcare Guides for more in-depth information.

On October 6, 2014 I co-facilitated a train-the-trainer workshop for this project and it was very well-received. I hope to share this presentation as well as information on the ***Smart Choice Health Insurance****©* workshop in a future webinar. As more people decide to enroll in health insurance, Extension can play a key role in providing people with accurate info and empowering people to make the best possible choice when selecting a health insurance plan. For more information on the ***Smart Choice Health Insurance****©* workshop contact Dr. Sonja Koukel or visit <http://extension.umd.edu/insure>

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