A federal report shows how our community stacks up against others across Indiana and Michigan, as well as the entire United States. In some respects, we’re on the right track, but in others, we have a lot of work to do. Many local leaders are stepping up to say it’s time we get moving. Every little bit we can do counts toward a healthier life.

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South Bend Tribune
Saint Joseph Health System
St. Joseph County Health Department
LaPorte County Health Department
Elkhart County Health Department

This Counts Revolution:
Free health and wellness event Saturday, May 30
Details on Page 23
Our health is at stake

For the past two decades, the health of our community has been on a steady decline. According to the Robert Wood Johnson Foundation’s health rankings, St. Joseph County was the 26th healthiest county in Indiana in 1991. Today, we have fallen to 41st on the list. What makes this decline more unsettling is while we sit in the middle of the Indiana rankings, Indiana as a whole is one of the unhealthiest states in the country.

In St. Joseph County, 21 percent of our adults smoke, 29 percent are obese, 25 percent are reportedly inactive, and 19 percent of adults admit to excessive drinking. A closer look at our rankings shows that 37 percent of all driving deaths are alcohol related. When we look at the counties surrounding St Joseph, the numbers are equally bleak.

As leaders in Michiana, we recognize it’s time for us to hold ourselves accountable to improve the health of the communities we serve. We are all in this together. The poor health seen in our community is a result of a continuing cycle that can only be broke when we all decide to change. This is a moment for all of us to step up to the challenge and make real progress in improving our individual and community health. Help us make the Michiana of tomorrow a healthier place for everyone.

Albert L. Gutierrez, FACHE, MBA
President & Chief Executive Officer, Saint Joseph Health System

Kim Wilson,
President & Publisher, South Bend Tribune

Rankings focus on quality of life .................3
Health officers speak out ...............4
Cultural shift ..................................5
Local resources .............................6-7
Health drives our economy ..........8
Closing the gap ............................9
5 changes you can make today ..............10
Simple swaps for healthy snacks ..........11
How healthy are we? ..........12-13
Support from others helped her quit smoking ..........14-15
Taking control of diabetes ..............16-17
Small changes, big weight loss ..........18-19
Mental illness doesn’t define him ..........20-21
This Counts Revolution ..........22-23
Rankings focus on ‘quality of life’

A starting point to improve our county’s health

By Alice Culp
South Bend Tribune

Most of our region’s counties have good access to health care, but most also have a higher percentage of adult smokers, teen birth rates and excessive drinkers than the U.S. median. Most are failing in air quality and are at or above the U.S. median for physical inactivity. Regionally, only two counties — Elkhart and St. Joseph — were less obese than the U.S. median. This greatly impacts a county’s overall rating, since obesity contributes to other conditions like diabetes and cardiovascular disease.

All these factors play into the most important health outcome, the premature death rate, Johnson said. Social and economic factors also influence it.

“Things like income and poverty really matter in health,” Johnson said. “It affects families’ access to affordable housing, a living wage to be able to buy healthy food and their ability to pay for good child care.”

Several local counties had a broader disparity between low-income and high-income earners than the U.S. median. And the unemployment rate, while slightly better than several years ago, is still an issue. In fact, for the first time in several years, most of Indiana’s surrounding states, including Michigan, have lower unemployment rates.

In a way, a healthy community is something of a chicken and egg problem.

Low-paying, low-skilled jobs and higher unemployment result in a population with physical and mental health issues. At the same time, the population’s health is going to affect whether companies decide to open, relocate or expand in the region.

This is why County Health Rankings are important. The data gives communities a starting point to improve their outcomes and provides a way to track their progress.

But no organization can make a difference alone, Vida said. It has to be a collaboration.

Locally, there is a movement to do just that called the Community Health Improvement Alliance. It is composed of community leaders, educators, business professionals, civic groups, agencies and health care organizations in St. Joseph and Elkhart counties. The health department, as a neutral party, facilitates and hosts bimonthly discussions where the group can talk about the goals it is trying to accomplish, resources it has and how it can work together to build successful programs.

“Everyone definitely bought in,” Vida said. “We’re working for the same people. We need to move the needle together. Stop competing and start doing.”

A group plays basketball at Coquillard Park in South Bend. Physical activity is not only fun but crucial to living a healthy life.
County health officers speak out

We asked the county health officers of several surrounding counties for their thoughts on the health ratings and what we should do about them. Here are the answers of those who responded.

Dr. Dale Deardorff
Interim health officer at the St. Joseph County Health Department

Q From your observations, what health factors are the biggest problems in your county? And what has the county improved upon?

A The state health department objectives are reducing obesity, reducing the smoking rate and reducing neonatal mortality. Those are certainly the ones that are called out in our county health rankings as actionable items we know will make a difference in our health outcomes as we go forward. Obesity, as you know, will increase your likelihood of developing diabetes, it will increase your likelihood of heart disease and of hypertension. It also increases your premature birth rate percentage.

There are habits we’ve gotten better with. Obviously smoking has improved over the past 50 to 60 years. But it’s been a struggle in the county with the smoking ordinance. There are people being harmed by smoke and secondhand smoke and it’s reflected in the premature deaths we see in this county.

It’s a challenge for us as a community. Are the programs we’re investing in the programs we’re identifying really making a difference? If we can get a strategy together, tactics that we agree on, then you get movement going forward. That’s what we’re looking for with our partners in the community health alliance that came out of the evaluation that was done in 2011. About 50 to 60 agencies not just in St. Joe County, but in Elkhart County, as well, have come together and are working behind the scenes and working on issues and making some inroads in those areas.

Tony Mancuso
LaPorte County Health Department administrator

A The area we need to work most on is premature death. That’s what is really hurting in LaPorte County. We ranked 75 out of 92 counties (in Indiana). It’s our main goal this year. Last year, we formed a neonatal task force to address this. It includes the health department, both hospitals, the schools, Swanson Center — a couple of agencies are involved. We meet together quarterly. The state has a grant that we are going after that would help us develop this program. Also, every Friday, the health department offers a free pregnancy test. We’ve taken a proactive approach and now we need to expand it more and work more with the schools on this.

We are 26th in clinical care. We’re good there. We have small clinics and the hospitals. Our physical environment, like air and water, is also good; we are 22nd in the state.

Dr. Daniel Nafziger
Elkhart County Health Department health officer

A There are a variety of health behaviors that are challenges in Elkhart County. Smoking remains the leading cause of preventable death in the United States, and our smoking rate of 20 percent is still too high. Like many other communities, our obesity rate and physical inactivity rates are also too high. Our teen birth rate also exceeds that of any of our neighboring counties.

Our health outcomes (premature death and low birth weights) tend to be better on average than most counties in Indiana. There isn’t a definitive explanation for this given that the “health factors” in the report tend to be worse than average. The relatively poor health factor rankings may catch up with us eventually.

There are areas where we are doing better than average, such as the monitoring of (blood sugar tests) in older diabetics, that suggest physicians and nurse practitioners are doing a good job in testing their patients.

There are lots of opportunities for us to improve our rankings. Private industry and government can both work at reducing unemployment and the number of children living in poverty. The Horizon Education Alliance is busy in Elkhart County working with our schools in impacting educational factors that can eventually translate into better health.

Dr. Frederick Johansen
Medical director for Berrien County Health Department and Van Buren/Cass District Health Department

A I’m happy that we’re doing better than all of our comparison counties but one. Preventable hospital stays and diabetic monitoring are better in both counties than they were previously. Obesity is worse and we already were fat. In Berrien County, our physical activity is worse. Those two things (obesity and physical activity) go hand in hand.

In Cass County, the number of primary care physicians to people (according to the study) is really bad. But this is an incredibly misleading number. Doctors don’t hang shingles out in Cass County, but we are surrounded by medical care. We’ve done a study on this. People in the southeast part of the county go to Elkhart for medical care. In the northwest corner, they travel to Niles, South Bend or Elkhart. People in the northeast corner of the county go to Kalamazoo or Sturgis and those in the northwest go to Lake- land. It’s only about a 15- to 20-minute drive from those corners to their medical care.
We need to make a cultural shift
It takes a whole community’s effort to change a community’s health

By Alice Culp
South Bend Tribune

Dr. Brian Moloney has been a member of our community for 35 years as a family physician. He previously practiced at River Park Family Medicine in South Bend. He currently is medical director for Select Health Network in South Bend, a collaboration between Saint Joseph Health System and more than 750 area physicians.

Q How do we compare to the rest of the country when it comes to health?

A Not good. But it’s a statewide thing, not just St. Joseph County. We’re just a microcosm of the state. According to the United Health Foundation, which has been doing state ranking for over 25 years, Indiana is 41st. Twenty-five years ago Indiana was 26th. We’ve been deteriorating. The past three years we’ve stayed the same and we didn’t lose much ground during the recession — we may have gone from 38th to 41st over the last five or six years. We had big losses much earlier. The question is why are we so much worse than most of the rest of the country? It’s not genetics. It’s got to be something that we’re doing or that’s being done to us.

Q How do poor health rankings affect us as a community?

A We’re a state that is pro business. Our leadership needs to think about hidden costs for business, and one of our biggest hidden costs is our poor health status. For example, higher insurance premiums for workers and more absenteeism because workers aren’t healthy. And then there are those who work while sick because they can’t afford not to work. Their performance tends to be worse. These costs aren’t as easily calculated.

Also, a couple of the parameters in the (2014 America’s Health Rankings) study are created from surveys of people, asking about depression. Indiana ranked 40th in “feeling depressed” and 39th in “being in good health.” We’re not a happy state. How much does health contribute to that? If you’re feeling good, you’re happier and not depressed. Those surveys push our ranking down a little bit. There’s concern about the brain drain. We have many excellent universities. Maybe people are leaving because this isn’t a happy area.

Q What can we do to change things as a community?

A Community action means everyone has to be involved. It’s hard for humans to get motivated when the people around them aren’t. If all your best friends are walking everyday, you’re going to be more likely to walk with them. If all of your friends are getting together every night to have beer and chips and watch a sappy movie, you will likely join them. It’s hard to get the critical mass to make a change. People are not motivated by data. I spent 35 years trying to motivate my patients and a lot of them changed, but some didn’t because we’re human beings, we’re weak. I was really a salesman and an educator. But I was competing with better salesmen — Budweiser, Sara Lee and Marlboro. They are very effective salesmen. We’re doing nothing as a community to counteract those messages. We should be. Every politician in our state should be embarrassed that we’re 41st.

I think we have to do something novel. I know it sounds silly, but I’m serious about it. Everyone likes to think that he’s the best. We live in a society now that is dominated by reality television, social media and direct marketing. We could use those to start getting people to pull together and do something positive. I think the only way to motivate people is to start a contest — a state-wide contest with everyone involved. Mayors having a battle with other towns. You can pick whatever metric you want — smoking, losing weight, walking more. Top-of-mind awareness is really important. If you start hearing about something over and over again and reading it on Facebook, it’s a fun thing. We feel that we’re better than the people in Fort Wayne. We’re going to show them. It’s cheap. The whole state could get behind it. It could be a new form of Hoosier Hysteria with weekly standings in the media.

Q What are some things we could do as individuals to improve our health?

A We smoke way too much. Smoking is not being taken seriously and it is the single biggest fixable health problem we’ve got. If you look at the health dollars that are spent because of smoking, it’s just phenomenal. Our local government won’t even ban smoking like other places — big cities can do it.

Obesity to a larger extent would be taken care of if people would eat better and exercise. It’s not rocket science. But the problem is that we don’t see anything in our community or our state that espouses the idea of doing these things. We need leadership at every level to try to get people to be healthier. When something is top of mind awareness, I think you’re more likely to do it.
The help you need is close at hand

Here is a list of some of the resources available in our community to help you attain your wellness goals.

**DIABETES EDUCATION, PREVENTION AND IMPROVEMENT PROGRAMS**

**Memorial Hospital of South Bend—Healthy Diabetics Program**
574-647-1350
Each client is assigned a Community Health Worker to help with diabetes support and education and medication management. Participants are provided a glucometer and test strips.

**YMCA of Michiana—Diabetes Prevention**
574-287-9622
Designed to help those at high risk to adopt and maintain healthy lifestyles and reduce their chances of developing Type 2 diabetes.

**St. Joseph County Health Department—Reducing Obesity Coalition**
574-235-9750
Promotes events to help reduce obesity. Provides toolkits, resources and local guides to support healthy lifestyles.

**Plymouth Parks and Recreation Department**
574-936-2876
Trails, parks, programs, arts and recreation, and other services to help community members remain active.

**Saint Joseph County Health System**

**Earthworks**
574-935-4164
Based on the belief that education is critical in the effort to protect our planet, it offers programs for adults and children to help them learn how to live sustainably. Offers food co-op and classes on eating healthy. Sponsored by the Poor Handmaids of Jesus Christ.

**NUTRITION & WELLNESS PROGRAMS**

**The Food Bank of Northern Indiana**
574-232-9986
Works with community organizations to feed the hungry, increase awareness of the effects of hunger and alleviate hunger.

**Kroc Center**
574-233-9471
Programs and activities for art, education, sports and fitness, designed for the entire family and for individual age groups.

**St. Joseph Health System—Bilingual Diabetics Program: “Si Yo Puedo Controlar mi Diabetes”**
574-335-2372
Diabetes management class for Spanish-speaking community members. Includes nutrition education, physical activity and meal plans.

**St. Joseph County Minority Health Coalition—Diabetes Empowerment Education Program**
574-232-4234
A 20-hour workshop to train health workers to provide diabetes education to other community members. An 8- to 10-week curriculum on diabetes self-management.

**SAINT JOSEPH HEALTH SYSTEM—DIABETES PROGRAMS**

**Marshall County Neighborhood Center**
574-936-3388
Healthy and nutritious options in the food pantry, healthy cooking classes and other services.

**Saint Joseph Health System—Nutritional Counseling for Children**
574-335-6240
A pediatric registered dietitian provides medical nutrition therapy recommendations based on a unified body of scientific research and recognized by the Academy of Nutrition and Dietetics.

**South Bend Parks and Recreation**
574-299-4765
Leisure, health and wellness, human development, environmental stewardship and other programs.

**UNITY GARDENS**
574-315-4361
A network of community gardens to increase the availability and awareness of healthy, locally grown food. To aid those with diabetes, Unity Gardens provides open vegetable gardens and free gardening classes to increase access to healthy, fresh produce.

**YMCA of Michiana**
574-287-9622
Putting Christian principles into practice to build a healthy spirit, mind and body. Fitness facility includes personalized wellness coaching, group fitness classes, cooking/healthy eating classes and LIVESTRONG for cancer survivors.

**ALCOHOL AND TOBACCO RESOURCES**

**Alcohol and Addictions Resource Center**
574-234-6024
Provides families and individuals an anonymous and confidential resource, which allows for safe discussion of alcohol and drug issues.

**Indiana Tobacco Quitline**
1-800-QUIT-NOW (800-784-8669)
Free cessation coaches help with creating an individualized quit plan. May provide two weeks of free nicotine patches or nicotine gum.

**Memorial Hospital—Quit Smoking**
574-647-1801
Individual counseling sessions for 30 minutes each week for 5 weeks to develop a plan to quit smoking.

**Bowen Center**
574-936-9646
Team of psychologists, psychiatrists, nurses, social workers, therapists and chemical dependency specialists helping with a range of concerns, such as inpatient, outpatient, and home and school services. Also provides services for youth issues, students, employee assistance programs, autism and telepsychiatry.

**Healthy Families**
574-287-0541
Weekly services to families in an effort to prevent child abuse and neglect. Information and support for domestic violence, substance abuse, post-partum depression, immunizations and medical appointments and thoughts of suicide.

**Memorial Epworth Center and Epworth Hospital**
574-647-8400
Memorial Epworth Center and Epworth Hospital make up the inpatient psychiatric care division of Memorial Hospital of South Bend.

**Michiana Behavioral Health Center**
574-936-3784
Acute care services, partial hospitalization and residential care services. Also, support and family therapy, education and substance abuse prevention.

See more resources on Page 7.
NAMI (National Alliance on Mental Illness)  
574-259-3564  
Education and training for family members, parents, teachers and other mental health allies.

Oaklawn Psychiatric Center  
269-781-4271  
Intensive residential services for children and adolescents, services for adults with serious and persistent mental illness and treatment of complex addictions. Also, a range of outpatient services.

Samaritan Family and Health Counseling Center  
574-277-0274  
Incorporating mind, body and spirit to help with relationship problems, family issues, anxiety, depression, stress, grief, trauma, addiction and other concerns.

United Health Services—Suicide Prevention Center  
574-247-6047  
Suicide prevention presentations tailored to the audience. Applied Suicide Intervention Skills Training and QPR designed to teach adults life-saving skills. Support groups for those who are grieving.

YWCA North Central Indiana  
574-233-9491  
Economic empowerment programs, residential and non-residential services for women in St. Joseph and Elkhart counties who are victims of domestic violence or sexual assault, or are struggling with chemical dependency.

Saint Joseph Health System—Breastfeeding Mothers’ Support Group  
574-335-4127  
Support group for breastfeeding mothers, meeting from 2 to 3:30 p.m. on the first and third Wednesday of each month.

Saint Joseph Health System—Prenatal Breastfeeding Class  
574-335-6500  
Free prenatal breastfeeding class the last Tuesday of each month at 6 p.m.

Saint Joseph Health System—Prenatal Care Coordination  
574-335-6500  
Licensed social worker provides free services for low-income and underserved populations, including insurance enrollment, coordinated care up to and post-delivery, home visits and clinic appointments, and alert Child Protective Services for babies in jeopardy.

Women’s Care Center  
877-908-2341 (St. Joseph County)  
574-546-2904 (Marshall County)  
Pregnancy testing, first trimester ultrasounds, prenatal vitamins, counseling and mentoring, parenting classes, cribs and baby items distributed under an incentive program, emergency assistance for babies and young children and children’s books.

Saint Joseph Health System—Sister Maura Brannick Health Center, CSC  
574-239-5255  
Medical care, including lab analysis, X-rays, pharmacy, dental care, bilingual staff members, food pantry and other nutrition services for populations without insurance who do not qualify for Medicaid or Medicare. Partnership with Oaklawn to provide mental health services.

OUTREACH SERVICES

Catholic Charities  
574-234-3111  
Adoption, immigration, older adult services, food, clothing, shelter and help to all regardless of religious affiliation, race, national origin or gender.

Real Services  
574-233-8205 (St. Joseph County)  
574-936-3175 (Marshall County)  
Services for older adults and low-income households, including energy assistance, legal services, Meals on Wheels, transportation and more.

Saint Joseph Health System—Health Insurance Services  
574-335-1532  
Three convenient resource centers where individuals and families can learn more about health insurance options and enroll in the Health Insurance Marketplace, other commercial plans and Medicare.

Memorial Hospital—Prenatal classes  
574-647.3540  
The Memorial Childbirth Center offers a variety of classes including preparing for childbirth, breastfeeding and more.

Memorial Health Center  
574-245-4980  
High-quality, cost-effective and patient-friendly primary care to isolated and underserved residents of South Bend and surrounding areas. Offers a sliding-fee scale based on the 2011 Federal Poverty Levels and serves without regard to a patient’s ability to pay.

Saint Joseph Health System—Family Medicine Center  
574-335-6500  
Families and patients are accepted based upon medical need as openings become available. Each family or individual is assigned to a licensed physician. Patients typically see the same doctor for one to three years while he or she is in residency. Access to expanded care, including labs, X-rays, pharmacy and other outpatient services.

Saint Joseph Health System—Mobile Medical Unit  
574-335-3898  
Clinic on wheels provides preventative mammography screenings to women.

United Health Services  
574-247-6047  
Programs to help coordinate the efforts of small not-for-profit health-related organizations. The programs include the Breast Health Programs, Community Services with All Deaf, the Diabetes Resource Center, the Hearing and Speech Center and the Suicide Prevention Center.

OUTREACH SERVICES

Catholic Charities  
574-234-3111  
Adoption, immigration, older adult services, food, clothing, shelter and help to all regardless of religious affiliation, race, national origin or gender.

Real Services  
574-233-8205 (St. Joseph County)  
574-936-3175 (Marshall County)  
Services for older adults and low-income households, including energy assistance, legal services, Meals on Wheels, transportation and more.

Saint Joseph Health System—Health Insurance Services  
574-335-1532  
Three convenient resource centers where individuals and families can learn more about health insurance options and enroll in the Health Insurance Marketplace, other commercial plans and Medicare.

Saint Joseph Health System—Senior Services  
574-335-3891  
Senior navigator assists seniors and their families with many services. Senior Health Insurance Program offers free help with Medicare enrollment.
Healthy workers, healthy economy

Seven years ago I made the personal decision that I wanted to be healthier. Though I didn’t necessarily feel unhealthy, I, like many, had added a few pounds every year after college to the point where a routine health screening at work had Nurse Connie put me in the “obese” category.

I didn’t like those words and made a conscious decision to not let my first heart attack be the thing that convinced me I need to be healthy. But I didn’t want to be on a “diet.” Instead, I changed my lifestyle, ate better and exercised. I didn’t try to lose it all at once, and I began a two-year journey where I eventually lost about 80 pounds.

Though not excited to be the poster child for the fat guy that got skinny, my journey was very public and gave me, as then-mayor of Mishawaka, many opportunities to share my experiences and the highlights and lowlights along the way. For me, my progress meant I felt better. I had more energy, I was more productive, I handled stress better, I even slept better. The community cheered me on and encouraged me along the way.

Interesting to think how I encountered Nurse Connie in the first place. At the time, like many CEOs, I was concerned about rising health costs in the company and what that was doing to the bottom line. Our health costs had skyrocketed and like many organizations, almost every new dollar was being eaten up by those increasing costs. That left little at the end of the day for other things like employee raises, new equipment or other key projects.

The only way to really help combat this issue long-term was to have a healthier workforce. So I thought, “Why not do simple assessments for employees where they could better understand their current condition and maybe chart a new course for their own personal health and for that of their family?” I had to lead by example and anxiously signed up for my assessment. I’m glad I did; it’s what I needed to get me started.

Employee health costs have risen faster than virtually every other cost category for businesses. Businesses small and large have studied and implemented plans to help combat those rising costs. And while cost is an important factor, it’s not the only consideration for business. Healthier employees have been found to be more productive, absent less, less stressed and have a better attitude in addition to having less expenditures.

Other benefits include having employees with more energy, which helps employees stay more focused when they are on the job. Healthy employees tend to have a higher level of self-confidence in themselves and inspire confidence in others around them. Employees who set fitness goals and stay motivated to exercise also tend to be more goal-oriented at work.

Indiana traditionally hasn’t fared well when comparing health statistics with other states, usually ranking in the bottom 10. Smoking and obesity are two of those categories where we score the worst and studies indicate a high prevalence of physical inactivity as being a major contributing factor to our poor rankings.

For Indiana and our area to grow as we desire, we all have to make a conscious decision to be healthier. The health of our communities is being evaluated by people considering Indiana, as it says a lot about our state, who we are, and what is important to us. Let’s change what the rest of the country thinks of us.

Jeff Rea is President and CEO of the St. Joseph County Chamber of Commerce. He can be reached at jrea@sjchamber.org.
Closing the gap in health care

By Alice Culp
South Bend Tribune

Waldo Mikels-Carrasco is director of community and population health development for Michiana Health Information Network. As an applied medical anthropologist, he studies health disparities and how they inform health policy.

**Q** How do social and economic factors affect health?

**A** There are trends that are often recognized as barriers to care. For instance, if you didn’t finish high school, you are going to wind up in a low-paying job that may not have benefits. That can be exacerbated if you have children at home. You may be living in a rental property with poor air quality, in an unsafe neighborhood that you don’t want your kids to go out and play in. They’re not getting physical activity and you’re not getting physical activity.

You should be eating more fruits and vegetables, but what you can afford to get is processed food. Maybe you live in a neighborhood where there are no fresh fruits and vegetables available at stores, but there is a McDonald’s and a Pizza Hut. With the dollar meals, kids go to bed full with a warm meal, but it isn’t healthy. Or maybe there is a store, but the bus line doesn’t run by there.

Transportation is a problem. Let’s say you do have Medicaid or something, but in order to go get your preventive care, you have to take the bus across town. And if you have small children, you need someplace to take them. So, transportation and childcare are a problem.

Also, if you’re low income, you are more apt to smoke. In Indiana, we have a huge problem with that. We have an insane amount of pregnant women who smoke. We’re a leader in the country in that. We may not be No. 1, but we’re in the top 10.

One of the best predictors for high infant mortality rates is educational attainment. If a woman has completed high school or some college, her chances of fetal loss or losing a child in the first year of life is significantly reduced.

**Q** Why do counties such as Cass and Starke have such low ratings in some health factors?

**A** They’re representative of the challenges of rural health. Nobody ever talks about urban health because it’s kind of taken for granted that medical centers, hospitals and clinics are always going to be in urban areas. Rural health is very different. Look at the time it takes to get to your primary care physician or a critical access hospital. In some cases, we have women who have to drive to the next county or two over to deliver babies. This could be greatly compromised by the fact that you don’t have a second vehicle because your household income doesn’t support that. Those who live far from town centers or stores where they can get food or anything else, tend to drive more, so they are more sedentary. If you have to drive farther for everything, you may not have time in your schedule for physical fitness. Physical fitness and physical activity are not the same. People might be working hard, but the work might not have a lot of stretching or aerobic intensity.

Infrastructure has a lot to do with it, too. It’s hard to go for a walk if there are no sidewalks. It’s hard to ride your bike if you have to ride on a two-lane highway where cars are traveling very fast. And it’s certainly hard to get your kids to do stuff like that.

All these things can contribute to that ranking.

**Q** Will the adoption of the Affordable Care Act help equalize health outcomes for lower-income families?

**A** We haven’t had 100 percent of eligible people sign up yet. But if you look at preventive care utilization, those numbers are way up. That means that of those who have signed up, people are using their insurance. We’ve shown that in cases where people have conditions that would need managed care, those numbers are good. That’s what you want. You want people in early so you can find problems before they become worse. It’s cheaper to take care of expensive patients before they become expensive patients.

Those who are less insured have less access to care, so they get more chronic diseases and they don’t manage them as well. They wind up at the emergency room, which is far more expensive than preventive care. The emergency room is the most expensive place to get primary care. If you get more people insured, they have access to preventive care and they should stay out of the emergency room.

Groups that have been historically uninsured and have had poor access to care also don’t have access to information on what healthy behaviors are and what you should be looking out for. People teach each other how to manage their glucose, their blood sugar, their insulin. These are things learned in horizontal networks. If nobody is sharing that information on good health behaviors, you’re going to continue to have poor outcomes.

For those folks who are now eligible for HIP 2.0 or to get insurance through the exchanges, there’s a lot of catch-up to play on some of these things.
Improving your health and wellness can seem like a daunting task, especially if you know you have some bad health habits to break. Make these changes today for a lifetime payoff.

“It starts with you,” says physician assistant Tricia A. Howard, a faculty member at South University, Savannah’s College of Health Professions. “You have more control over your health than you think you do.”

Here are five steps you can take today that can have a positive impact on your overall health and wellness.

1. **Stop smoking**

   Everyone knows smoking is bad for you. In fact, people who smoke have by far the greatest risk of lung cancer — the No. 1 cause of cancer deaths in the U.S. — and increased risk of a cardiac event.

   But, many people don’t realize that changes in the lungs caused by smoking can actually improve over time once a smoker quits.

   “Even if you’ve smoked for many years, you can reduce your lung cancer risks just by quitting,” Howard says. “And this isn’t just about your own health. Smoking puts the ones you love at risk, because even secondhand smoke can cause cancer. So, quitting is a win-win for you and those you love.”

   Howard says people who want to quit smoking do better when they set a target date to quit. She also advises working with your primary health care provider who can actually individualize a stop-smoking plan for you. And, Howard says, getting support from others is a crucial part of the battle.

   **For a list of resources to help you stop, see Page 6.**

2. **Drink more water**

   Sixty percent of your body weight is water. Your body depends on water to carry nutrients to cells and to flush toxins out of vital organs, so getting the right amount of fluids each day is crucial.

   Howard says men should drink 3 liters, or 13 cups, per day. For women, the recommendation is 2.2 liters, or nine cups, per day. If that recommendation seems tough to follow, Howard says to divide it up throughout the day.

   “Make sure you have water with every meal and drink water at least once between each meal,” she suggests.

   And, Howard says, you don’t have to stick to water. Milk, coffee and other drinks that contain a lot of water and not a lot of calories count toward your daily fluid intake.

3. **Exercise**

   “Exercise reduces your risk for chronic disease, improves balance and coordination and helps with weight loss,” Howard says. “Exercise is a key part of living a healthy life.”

   Howard says the U.S. Department of Health and Human Services recommends 150 minutes a week of moderate exercise, or 90 minutes of vigorous exercise a week, for adults.

   “That sounds like a lot,” Howard says. “But, if you break it into 15- or 20-minute daily workouts it’s much easier to fit into your schedule.”

4. **Adopt the Mediterranean diet**

   The Mediterranean diet is a diet rich in fruits, vegetables, olive oil, nuts and fish. The results of numerous studies show long-term health benefits to adopting the diet.

   “This is a diet filled with antioxidants and anti-inflammatories,” Howard explains. “This diet has been shown to reduce the risk of heart disease and cancer when adhered to long-term. Weight loss and improvement in cholesterol can be seen after just a few months.”

5. **Have your cholesterol checked**

   You might be surprised to learn that you should begin having your cholesterol monitored by a doctor at age 20.

   But since coronary artery disease is the No. 1 cause of death in the U.S., it’s a recommendation you should take seriously.

   Howard says levels that are too high can be controlled by diet, quitting smoking, exercise and prescription drugs.

   “There are so many things we can do to improve not only the length of our life, but the quality of those years,” Howard says. “Don’t wait.”
Americans are more concerned than ever before about living a healthy lifestyle. Implementing dietary changes and adopting an exercise routine, however, can prove to be overwhelming. A recent Gallup poll found that nine out of 10 consumers say they make it a point to try to include fruits and vegetables on their plates, but they are not necessarily succeeding.

“Simple everyday swaps can make the difference in achieving a healthy lifestyle,” says registered dietitian Dawn Jackson Blatner, author of “The Flexitarian Diet.” “We live in a busy society, and no one diet is all. Focus on small daily shortcuts that are realistic and will have a lasting impact.”

Try these quick and simple swaps, which can actually make a difference in realizing your goals:

1. **Boardroom conference vs. walking meeting**

   Swap your sedentary internal office meeting for a “walking meeting.” Instead of meeting in a conference room for 30 minutes, make a few trips around the office building.

2. **Online shopping vs. mall**

   While online shopping has made life more convenient, it has eliminated another opportunity to realize the health benefits of walking.

3. **Gym vs. 5-minute routine**

   Eliminate the guilt of missing a day at the gym. Do jumping jacks or crunches during TV commercials.

4. **Salad dressing vs. rice vinegar**

   Replace heavy salad dressing with a light vinaigrette. Simply whisk together natural rice vinegar, garlic salt, mustard powder, sesame oil, sesame seeds and canola oil in a measuring cup. Pour over arugula and tomato halves for a delicious salad.

5. **Butter and oil vs. avocado**

   Instead of making your favorite baked goods with oil or butter, use mashed avocado. The substitution of avocado in baked goods helps increase their nutritional value and serves as a great alternative to ingredients that are high in saturated fat. Avocados offer a subtle flavor and creamy texture to any recipe.

6. **Mid-morning snack vs. almonds**

   Control hunger by eating a few almonds instead of the mid-morning pastry. A study published in the European Journal of Nutrition found that almonds helped control appetite and resulted in reduced calorie intake.

   Another simple swap is to incorporate healthier options into your afternoon snack routine and cut the fat. It’s an opportunity to start the week by adding a zesty flavor alternative into your diet. Look for recipes that are quick and easy, such as this Superfood Trailmix recipe.

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**Superfood Trailmix**

Makes 2 cups

**Ingredients:**
- 1/2 cup raw almonds, chopped
- 1 tablespoon chia seeds
- 1 cup puffed brown rice cereal
- 1/4 cup pumpkin seeds
- 1/4 cup raisins
- 1 tablespoon natural rice vinegar
- 1 tablespoon honey
- 1/8 teaspoon sea salt
- Dash cayenne pepper (optional)
- 1 teaspoon coconut oil

**Directions:**

In a small bowl, mix natural rice vinegar, honey, salt and cayenne. In a 10-inch skillet over medium-low heat, warm oil and add the vinegar mix, almonds and chia seeds. Cook for 6 minutes, stirring constantly, until all excess liquid is gone. Pour onto a parchment paper-lined baking sheet and let cool in the refrigerator for 15 minutes to set. Toss almonds with brown rice cereal, pumpkin seeds and raisins.

Nutrition (1/4 cup): 110 calories, 6 g total fat, 1 g saturated fat, 0 g cholesterol, 60 mg sodium, 12 g carbs, 2 g fiber, 6 g sugar, 3 g protein

Recipe created exclusively for Mizkan by Dawn Jackson Blatner at dawnjacksonblatner.com.
The annual County Health Rankings & Roadmaps report uses 30 factors to compare the health of nearly every county in the nation. Here’s how local counties compare to the U.S. median, top 10 percent of counties in the nation and the state as a whole.

**HEALTH BEHAVIORS**

### Adult Smokers
- Percent of adults who are current smokers
  - U.S. median — 21 percent
  - Top 10 percent — 5.9 percent
  - Michigan — 20 percent
  - Cass — 24 percent
  - Berrien — 20 percent
  - Starke — 23 percent
  - Elkhart — 23 percent

### Physical inactivity
- Percent of adults over age 20 reporting no leisure-time physical activity
  - U.S. — 27 percent
  - Top 10 percent — 20 percent
  - Michigan — 23 percent
  - Cass — 26 percent
  - Berrien — 28 percent
  - Starke — 27 percent

### Adult obesity
- Percent of adults that report a BMI greater than or equal to 30
  - U.S. — 31 percent
  - Top 10 percent — 14 percent
  - Michigan — 31 percent
  - Cass — 36 percent
  - Berrien — 36 percent
  - Starke — 37 percent

### Access to exercise activities
- Percent of population with adequate access to locations for physical activity such as parks, recreational facilities, gyms, dance classes, etc.
  - U.S. — 65 percent
  - Top 10 percent — 92 percent
  - Michigan — 83 percent
  - Cass — 77 percent
  - Berrien — 77 percent
  - Starke — 78 percent

### Alcohol-impaired driving deaths
- Percent of motor vehicle crash deaths with alcohol involvement
  - U.S. — 31 percent
  - Top 10 percent — 14 percent
  - Michigan — 31 percent
  - Cass — 30 percent
  - Berrien — 29 percent
  - Starke — 28 percent

### Low birth weight
- Percent of live births where the baby weighed less than 5.8 pounds
  - U.S. — 8 percent
  - Top 10 percent — 5.9 percent
  - Michigan — 8 percent
  - Cass — 7.8 percent
  - Berrien — 8.4 percent
  - Starke — 7.8 percent

### Children in poverty
- Percent of children under age 18 in poverty
  - U.S. — 24 percent
  - Top 10 percent — 13 percent
  - Michigan — 22 percent
  - Cass — 20 percent
  - Berrien — 25 percent
  - Starke — 24 percent

### Injury deaths
- Number of deaths because of injury per 100,000 population
  - U.S. — 73.8
  - Top 10 percent — 47.9
  - Michigan — 48.1
  - Cass — 51.4
  - Berrien — 47.9
  - Starke — 47.9

### Social & Economic Factors

### Mental Health providers
- Ratio of population to one mental health provider

### Sexual transmitted infections
- Number of newly diagnosed chlamydia cases per 100,000 population
  - U.S. — 29
  - Top 10 percent — 138
  - Michigan — 481
  - Cass — 603
  - Berrien — 497
  - Starke — 47

### Crackdown on hepatitis, STD and TB Prevention
- Number of newly diagnosed chlamydia infections
  - U.S. — 29
  - Top 10 percent — 138
  - Michigan — 481
  - Cass — 603
  - Berrien — 497
  - Starke — 47
Going smoke-free got her life back

By Alice Culp
South Bend Tribune

MISHAWAKA — The arrival of warm weather means Julie Verheyen can get out and take 20-mile bike rides in the countryside around Mishawaka.

She expects to enjoy them more since she quit smoking Jan. 1.

“After just two weeks of not smoking, I felt faster and less winded while riding my bike.”

Her decision to stop smoking was an easy one, she explained. Both of her parents died of cancer and her father, who smoked, died at age 50.

“I realized I didn’t want to die that young.”

Though the decision was easy, quitting was a bit more difficult. Verheyen began smoking in college because she thought it was cool. She wouldn’t classify herself as a heavy smoker — she smoked only two to three packs per week — but said she’s learned that there’s no such thing as smoking a little.

“None of it’s healthy,” she said.

Verheyen practices family law and is a St. Joseph County public defender. Though some former smokers talk about missing their first cigarette and cup of coffee in the morning, she said, it was the cigarette she had after a long day at work that she misses most.

When the smoking ordinance in St. Joseph County went into effect, Verheyen found fewer and fewer places to smoke. It helped her cut back. She even quit for a year and a half at one point, but a stressful case caused her to reach for the cigarettes again. The lapse made her feel guilty.

She quit again — “cold turkey” — Jan. 1. It was a good time, she said, because there were no major stressors at work or in her personal life and she felt it would be her chance to really succeed.

A friend, who had successfully quit, recommended the Tobacco Cessation Program at Saint Joseph Health System, and Verheyen decided to attend.
Support from others helped Mishawaka woman quit

I thought I needed something a little more organized to help me actually stick with it,” she explained.

The eight-session class is modeled after the Freedom from Smoking program put together by the American Lung Association. A facilitator walks the class through a workbook and invites guest speakers to provide more in-depth tools on various topics. For example, someone from the health department talked about nutrition and the importance of portion control and someone from the YMCA talked about physical activity that can be done around the house. A massage therapist even visited the class one day.

“If you’re staying on track with your goal, you should set little rewards for yourself,” Verheye explained, “as a way to say you’re doing a good job.”

The class also provided motivators to stop smoking. In one session, participants figured out how much they’d spent on cigarettes over the years.

“They’re expensive and when you think about how much money you’re blowing — literally — you might as well take your money and burn it,” Verheye said. “One of the fellows in our class was going to use whatever he was saving to take his family on a trip.”

Verheye’s class had about eight people in it. This is a typical group size, said Latorya Greene, the tobacco education coordinator for the program.

“It really creates a group dynamic, a camaraderie, where they are actually able to support one another,” Greene said. “We hope they have support at home, but if they don’t, this is a great opportunity to find it.”

Verheye appreciated that support and Greene’s upbeat, positive attitude.

“After just two weeks of not smoking, I felt faster and less winded while riding my bike.”

— Julie Verheye

She said you shouldn’t let a failure or a slip get in the way of succeeding at your goal,” Verheye said. It was something she needed to hear after her earlier lapse.

By the time she entered the program, she hadn’t had a cigarette in three weeks. That’s a bit unusual. Most participants select a stop date during the program — usually in week four, Greene said.

“We really want a person to look at what has been their smoking habit or pattern,” she explained. “Once they understand why they want that cigarette, they can come up with ways to avoid that pattern, alter it or come up with alternative to it.”

When she gets the urge to smoke, Verheye walks her two dogs, washes dishes or plays with a stop-smoking app on her phone, which sends her reminders of why she quit. Her husband usually does most of the cooking, she said, “but I’ve started fixing dinners a little more often just because it does give me something to do.”

And she still rides her bike. It’s an ongoing struggle, but Verheye is determined to succeed.

“The last couple of weeks have been stressful and I’ve seriously thought about having one, but I’m not going to do that again,” she said. “You will always have stress in your life and smoking is not going to make it go away.”

Stop smoking tips

- Identify why you want to stop.
- Have a plan as to how you will succeed.
- Let friends and coworkers know you’re quitting. Support and accountability helps.
- Get rid of all your smoking stuff, such as ashtrays and lighters.
- Break patterns. If your routine was a cup of coffee and a cigarette first thing in the morning, drop the coffee or replace it with something else so you break that association. Maybe have tea instead.
- Drink lots of water. It gives you something to do with your hands and to put in your mouth, and it won’t cause you to gain weight.
- Don’t replace one bad habit with another.

For a list of programs to help you quit smoking, see Page 6.

Sources: Julie Verheye and Latorya Greene
South Bend TRIBUNE  I  SUNDAY, May 17, 2015  I

COMMUNITY HEALTH REPORT

How to take control of your diabetes

Morales’ acceptance of his condition helped him understand and manage it

By Landa Bagley
Tribune Correspondent

Although he loved his sisters’ cooking and appreciated their effort, his slice of pie would go mostly untouched while others heartily enjoyed theirs. Morales said he had started to notice how “bad, physically” he felt after having too many sweets.

“So, I would let my slice sit on the plate with not much more than a bite eaten,” said Morales, 64, of LaPaz. “I knew I didn’t like the way I felt after I ate certain types of food. But I didn’t know what was wrong with me at the time.”

Morales was 40 years old when he was diagnosed with Type 2 diabetes, meaning that either his pancreas is unable to produce insulin or his body is unable to use insulin properly. If not addressed, Type 2 diabetes can lead to other serious medical problems such as kidney failure, blindness and neuropathy.

Today, Morales is managing his diabetes with proper diet, exercise and medication. His blood sugar
Morales credits the staff at the Saint Joseph Health Center in Plymouth for motivating him and supporting him. “The nurses, doctors, volunteers and the manager — everyone there cares about the patients. They actually listen to the patients. They motivate me and challenge me to live a more healthy life and to take control of my situation the best way that I can.”

A positive attitude, yet another part of Morales’ approach to dealing with his diabetes, is also important, according to Dr. Michael Deery.

Deery, a volunteer at the Saint Joseph Health Center in Plymouth, treats Morales. The center offers low-cost, affordable healthcare to those low-income Marshall County residents who meet the financial qualifications.

“He’s motivated,” the doctor said about Morales. “He has taken ownership of his problem and he’s doing something about it. He’s getting good results.

“Assuming you take care of your diabetes, you can live a normal life — and a long life,” Deery added.

Morales credits the staff at the health center in Plymouth for motivating him and supporting him. “The nurses, doctors, volunteers and the manager — everyone there cares about the patients. They actually listen to the patients. They motivate me and challenge me to live a more healthy life and to take control of my situation the best way that I can.”

Given the support he gets at the center, the love he gets from his family and friends and the kindness of his sisters who used to take turns making his favorite dessert for his birthday, Morales doesn’t mind leaving his slice of lemon meringue pie virtually untouched, he said.

“I decided that I have a good life, and I want to live as long as I can,” Morales added. “Life, itself, is sweet.”

levels are about a third of what they were previously — a good sign, as far as his health is concerned.

Even his high blood pressure, which is unrelated to his diabetes, has been well under control since he made changes in his diet and exercise and continued with his medication and medical care.

But he didn’t immediately take that approach to his diabetes diagnosis.

“When I was told I am a diabetic, I pushed it aside. I took my life for granted. For a while, I had started to just eat what I wanted and how much I wanted,” Morales said. “It took me a while before I accepted my medical problem. I understand it now, and I have been trying to do something about it.”

These days, Morales consumes much less sugar, fats, carbohydrates and sodium than he did prior to his diagnosis. “All in moderation,” he added.

Morales said he drinks a lot of water, eats salads sometimes and makes healthy food substitutions that work for him, such as eating wheat bread instead of white bread. He checks his blood sugar levels and blood pressure levels on a regular basis.

Boosting physical activity is another way he effectively deals with diabetes.

Morales, a retiree, has become more physically active — as much as he can handle with his foot problems and back problems.

In addition, he has a part-time, on-call driving job.

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Small changes, big weight loss

MISHAWAKA — Scott Starkweather’s weight was the highest it has ever been: 425 pounds. At that time, he was diagnosed as a Type 2 diabetic with high blood pressure, high cholesterol and severe sleep apnea.

He was classified as “morbidly obese.”

“I thought I’d be lucky to make it to 45 (years old). This was my wake-up call that things had to change,” said Starkweather, a Mishawaka husband and father of three.

That was three years ago. Now, Starkweather weighs approximately 225 pounds and is 45 years old.

He lost 200 pounds without assistance of surgery, medication or dietary supplements. Scott no longer needs medication for diabetes and cholesterol. He takes a much milder blood pressure medication, and he uses half the air pressure he previously needed for his sleep apnea machine.

“He just decided he was going to change his life, and he did it. This was, and remains, a priority for him,” said Starkweather’s doctor, Michelle Pearson. Pearson practices at Our Lady of the Rosary Health Center in South Bend. Our Lady of the Rosary is part of Saint Joseph Physician Network.

The story and details are different for each person who battles with weight issues and/or who is deemed to be “morbidly obese.” Starkweather’s approach to his health crisis may not be the answer for all people. Still, Starkweather has chosen to share his story in hopes that his journey can somehow help someone else.

So, how did he shed 200 pounds? Starkweather said he made significant, permanent lifestyle changes. He made healthier food choices, consumed food in moderation and exercised just

By Landa Bagley
Tribune Correspondent

Scott Starkweather, of Mishawaka, lost 200 pounds in three years. He did it by simply eating healthier foods and exercising daily. His wife, Traci, supported him in his efforts and found that she also lost weight.  

Photo provided.
Creating healthy habits

Replace unhealthy and fattening foods with healthier alternatives, such as whole grains, fruits and vegetables. Eat lower-calorie foods with a healthier balance of nutrients. It may be easier to make one food substitution at a time. For example, switch from whole milk to skim milk.

Reduce your food portions.

Eat meals and snacks at or about the same time each day. Do not skip meals.

Eat your vegetables first, then go on to the rest of your meal. This will help fill your stomach with fewer calories and lots of fiber.

Eat slower. It takes time for your body to recognize that you have eaten, and for the feeling of hunger to go away.

Drink plenty of water or another calorie-free drink while eating. This will help you feel fuller faster.

Don’t reward yourself with food or use it for comfort.

Consult your physician before beginning an exercise routine, increasing your physical activity or making significant changes to your daily diet. If you have been given the OK to implement these changes, you can get some good tips from Saint Joseph Health System’s website: sjmed.com/care-guides.

“When you’re morbidly obese, you lose some control over your life. You don’t have total control over where you shop for clothes, what car you drive, where you can walk. You avoid crowds because it’s often hard to maneuver yourself through crowds. In a sense, your weight, and your weight loss, affects the whole family.” — Scott Starkweather

Traci and Scott Starkweather walk along the Mishawaka Riverwalk at Beutter Park. SBT Photo/GREG SWIERCZ

“With every day.

Starkweather wakes up in the pre-dawn hours to do his fitness machine workout in the exercise room in his home. Starkweather and his wife, Traci, often go for walks together. Little things also help, such as parking a little farther from the front door or walking around in a store before shopping, he added.

Being well-over a healthy weight affected him more than just physically, according to Scott.

“It’s hard for me to put into words how I feel when I am the biggest person in the room. You feel like everybody’s looking at you. And you can’t go and hide,” Scott said.

“Being morbidly obese, you lose some control over your life. You don’t have total control over where you shop for clothes, what car you drive, where you can walk. You avoid crowds because it’s often hard to maneuver yourself through crowds. In a sense, your weight, and your weight loss, affects the whole family,” he added.

Even though Scott had seen some success attaining goals for a healthy weight several times previously, he struggled with maintaining them.

“For me, that’s because I didn’t address the real issues of why I was overeating: I’m an emotional eater — glad, sad, mad … whatever,” Scott said. “I had to change the way I looked at food and what I was putting in my body.”

Traci offered additional insight about the added importance food had in their lives. “Food was our life. ‘Where are we going to eat?’ was one of the biggest questions of each day for us. We lived to eat. Now, we eat to stay alive.”

Although she has never reached the point of being deemed “morbidly obese,” Traci has been dealing with her longtime struggle with weight, she said. She lost 50 pounds in a year, and has been able to keep those pounds off.

Like Scott, she changed her lifestyle — making healthier food choices, eating certain foods in moderation and boosting physical activity (such as walking). The two offer support to one another as they make and maintain these changes, they said.

Traci summed up the pair’s message for those battling major weight issues: “You’re never too far gone to come back, and you’re never alone. Get informed about your specific situation. Talk to your doctor. Make better decisions. Make the commitment, and do the work.

“Yes, everybody’s story is different. But maybe your story can have a happy ending.”
Mental illness doesn’t define him

“I’m a person with a mental illness, not a mental illness who just happens to be a person.”

“I have positive things to offer and I am a good person. Left unchecked, my disorder and addiction may mask those positive things, but they don’t take away the good in me.”

“If you have a mental illness, it’s possible to live a normal life — or close to normal life, with proper treatment and a commitment to stick to your treatment.”

— David Smail

Mishawaka man gets his life back on track

By Landa Bagley
Tribune Correspondent

MISHAWAKA — David Smail doesn’t mind defining his mental illness and addiction when asked about them.

Maybe that’s because he doesn’t let his mental illness and addiction define him.

“I’m a person with a mental illness, not a mental illness who just happens to be a person,” said Smail, 44, of Mishawaka. “Everyone has challenges. Mine can be overwhelming, but I’m OK.”

Smail has bipolar disorder and is a recovering alcoholic. He has been taking medication for his disorder since he was diagnosed more than a decade ago. He has been sober for three years.

Bipolar disorder is a chronic condition that causes dramatic shifts in a person’s mood, energy and ability to think clearly, according to the National Alliance on Mental Illness’ (NAMI) website.

Lifestyle changes, medication, professional treatment, personal commitment, plus the support of family and friends help Smail keep his condition in check.

“Life is easier these days. Because of my illness, I don’t normally deal well with stress. But when I’m fully medicated and sober, I can handle everyday stresses and disappointments,” Smail said. “I have positive things to offer and I am a good person. Left unchecked, my disorder and addiction may mask those positive things, but they don’t take away the good in me.”

Smail was diagnosed as being bipolar in 2001.

His diagnosis stemmed from a doctor’s appointment Smail’s mother made for him after he told her his plans to storm the beaches of Benton Harbor and march to Detroit with the help of some famous people.
Before Smail got the care he needed, he would abstain from drinking alcohol for a while and later start up again. It was some time before he took his drinking problem seriously.

The 5-foot-11, strawberry blond with a large handlebar mustache that almost blocks his friendly smile appears to have reclaimed his health and his life.

But nothing is perfect. Smail points out that occasionally, he has manic episodes. But with adjustments to his medication made by his doctor, management of his illness is back on track.

Smail, a 1993 graduate of Wabash College — where he majored in speech/rhetoric — is quick to tell his story if he thinks he can help someone, he said. Smail teaches NAMI’s “Peer to Peer” classes, for adults with mental illness, at the Elkhart County Jail.

Recently, Smail was elected to the St. Joseph County Board of Directors for NAMI.

Kris Monagle, also on the NAMI board for St. Joseph County, said Smail has several positive things going for him, such as his parents’ involvement in getting him treatment at the very start.

“He also has support from many others,” Monagle said. “And, David is smart. He seems to understand his illness.

“Many people don’t understand that mental illness is a biologically based illness — a chemical imbalance in the brain,” Monagle added. “In some cases, it’s genetic. It’s not due to bad parenting or that sort of thing. It’s treatable and there is hope.”

Smail agrees.

“Recovery from something major is possible,” he said. “If you have a mental illness, it’s possible to live a normal life — or close to normal life, with proper treatment and a commitment to stick to your treatment.”
This Counts Revolution

In 2014, Saint Joseph Health System partnered with other organizations to form This Counts. Today, 50 nonprofits, health agencies, schools and businesses have joined the This Counts movement to encourage better health by using the tools we all have available.

At its heart, This Counts uses encouragement to promote healthy activities that can be achieved by everyone. Taking out the trash, parking at the back of the lot or choosing to eat an apple instead of a chocolate bar are perfect examples of healthy steps we can all take — and they all count toward a greater wellness goal. By doing what we can today, we’re building a foundation for growth and greater wellness tomorrow.

This Counts also recognizes that making the decision to live well isn’t easy. Often, the hardest part is just getting started. This Counts emphasizes that you remain patient and kind to yourself as you work toward your goal. Simply making the choice to start living a healthier lifestyle is the most important step.

If you want to join the movement, visit ThisCounts.org to view videos on how other members of the community are starting their wellness journey. You can also upload your own video and tell your story to encourage others or join the conversation on Facebook and follow This Counts.

If you are struggling to make these wellness decisions, the This Counts partners are here to help. All of the partners have committed to joining the journey to better wellness and are taking steps to making Michiana a healthier place to live. We are all in this together.

“We’re all capable of living a healthier life. It’s no more unique to us than breathing. You just have to start where you are, use what you have and do what you can. Just start moving.

Remember the goal isn’t to finish first; it’s to stay in it as long as you can.”

“Younger Next Year” author coaching a healthier lifestyle

By Landa Bagley
Tribune Correspondent

SOUTH BEND — Who hasn’t been lectured about making healthier food choices and exercising more? Somehow, it sounds different coming from Chris Crowley.

Crowley, a renowned speaker and best-selling co-author on health and fitness issues, speaks in a direct, no-nonsense manner with zeal and sincerity — like a good friend who calls it as he sees it.

“We need to stop putting garbage in our bodies and get moving, get more physically active if we’re able to. We can live longer, happier lives,” Crowley said in a recent telephone interview, fresh off of a multi-city national speaking engagement.

“Science does back this up. It’s absolutely rock-solid, I tell you!”

Crowley is the featured speaker at the “This Counts Revolution” event, presented by Saint Joseph Health System on May 30. The event is free and open to the public. Event attendees can also get free health and wellness screenings and have their questions answered by a panel of local health experts.

“This Counts Revolution” will be held twice on May 30 — starting at 9 a.m. at Plymouth High School, and again at 2 p.m. at Penn High School.

After retiring from a 25-year long career as a New York City trial lawyer many years ago, Crowley turned his attention to another of his interests: health and wellness.

He teamed up with leading New York medical internist Dr. Henry S. Lodge to write “Younger Next Year,” an advice book about health, wellness and fitness. Published in 2004, the book made the New York Times Best Sellers List. Crowley and Lodge also wrote a “Younger Next Year” book specifically for women.

In 2013, Crowley teamed up with Jen Sacheck, a Tufts University professor of nutrition and muscle physiology, to co-author another book, “Thinner This Year.” With emphasis on nutrition and exercise, “Thinner This Year” offers an in-depth exploration of major issues mentioned in “Younger Next Year.”

“These days, a lot of the focus seems to be about what to do when you get sick. But shouldn’t the focus be on you NOT getting sick in the first place?” Crowley said. “The ‘This Counts Revolution’ is a good first step at learning about staying well. At this event, you’ll have fun and you’ll laugh — and, it just might change your life.”
PRESENTED BY SAINT JOSEPH HEALTH SYSTEM

ThisCounts.org

REVOLUTION

NEW YORK TIMES BEST SELLER CHRIS CROWLEY, CO-AUTHOR YOUNGER NEXT YEAR

ALSO FEATURING: FREE HEALTH AND WELLNESS SCREENINGS AND A LOCAL PANEL OF HEALTH EXPERTS

Saturday, May 30
Plymouth High School, 9 am
Penn High School, 2 pm

Registration is requested but not required. Call (855) 88-SJMED.

Register by May 28 for a chance to win lunch with Chris or one of five Fitbits!
Getting healthy together.
ThisCounts.org

This Counts is a community wellness initiative brought to Michiana with the partnership and support of the following organizations:

- Allied Physicians
- American Cancer Society
- Bendix Family Physicians
- Burkhart Advertising
- Center for Hospice Care
- Center for the Homeless
- Girls on the Run
- Hannah's House
- Harper Cancer Research Institute
- Holy Cross College
- Kelly Cares Foundation
- La Casa de Amistad
- Marian High School
- Meijer
- Michiana CRAN
- Michiana Hematology Oncology, PC
- Mishawaka Catholic
- Newton Park
- Notre Dame Athletics
- Oaklawn Psychiatric Center
- O'Brien Fitness Center
- Office of Sustainability, City of South Bend
- Penn-Harris-Madison Educational Foundation
- Race Play Michiana
- Reducing Obesity Coalition
- Reins of Life, Inc.
- RiverBend Cancer Services
- Saint Joseph County Health Department
- Saint Joseph County Minority Health Coalition
- Saint Joseph Health System
  - Holy Cross
  - Mishawaka Medical Center
  - Plymouth Medical Center
  - Saint Joseph Physician Network
  - St. Paul’s
  - Trinity Tower
  - VNA Homecare
- Saint Joseph High School
- Saint Joseph High School Athletics
- Samaritan Counseling Center
- Select Health Network
- ServiceMaster Clean
- Smoke Free St. Joe
- South Bend Parks and Recreation
- South Bend Cubs
- St. Vincent de Paul
- The Medical Foundation
- United Health Services
- Whole Foods
- WNDU 16
- WNIT Public Television
- WSBT 22
- YMCA
- Youth Service Bureau

Visit ThisCounts.org to get involved. #ThisCounts