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Greetings

What a month it has been. I believe I spent more time out of the office than in during the month of March. I am not sure why all of the association meetings I attended this year were scheduled back to back. That happened to me in the fall with NEAFCS and ITAA (International Textiles and Apparel Association). Now this spring Council of Administrators in FCS (CAFCS), ITAA Council, and Board of Human Sciences were all back to back. This was my first time to attend Board of Human Sciences, and I am really glad I took advantage of the opportunity to attend.

Board of Human Sciences (BoHS) is part of APLU (Association of Public and Land-Grant Universities) and includes family and consumer sciences programs. Attending the CAFCS I received great information on having crucial conversations and dealing with difficult people. (Of course we do not have any difficult people in the Margaret Ritchie School of Family and Consumer Sciences 😊.) It was a good leadership training meeting. BoHS on the other hand is involved more with setting policy or working within the parameters of existing policy. And, BoHS only includes those individuals associated with public and land-grant universities. Both meetings, however, provided a great opportunity for sharing what is happening on other campuses across the country and for networking.

In fact I met two former UI SFCS faculty members at BoHS. Some of you may remember Linda Kirk Fox and Ann Vail. Ann now serves as the Director of the School of Human Environmental Sciences and Assistant Director of Family and Consumer Sciences at the University of Kentucky. Linda is the Dean of the College of Family and Consumer Sciences, University of Georgia. I would say that is pretty impressive track record for those who were once part of UI SFCS! Oh and if you did not hear Laurie Nichols was named the new President for the University of Wyoming, my former employer. Correct me if I am wrong but I believe Laurie was also on faculty here. Now this short list does not even begin to cover others I have met in rather high level academic or industry positions who served on UI SFCS faculty at one time or are alumni of our great School. President Staben and I recently attended a function here on campus; this was shortly after Wyoming’s announcement about Laurie Nichols becoming their 26th President. I told him that FCS produces great administrators! He smiled. Seriously there is an amazing legacy connected to the Margaret Ritchie School of Family and Consumer Sciences. I sensed it when I first arrived and the longer I serve in my position the more I learn the far reach we have.

I do not want all of you to think that the highlight of the BoHS meeting was meeting Linda and Ann. As great as it was to meet them it was the information shared that took center stage. Both were involved with a presentation titled “Emerging Research Partnerships and Funding Opportunities.” Updates on two emerging initiatives were shared during this session. The Robert Wood Johnson Foundation partnered with Extension to address childhood obesity. The funding for this initiative will be funneled through the National 4-H Foundation and the rfp should be released soon.

The other initiative presented is one I am excited about for Idaho. The APLU initiative Healthy Food Systems, Healthy People provides opportunities for all FCS programs to contribute to the research, teaching and extension. Throughout the entire conference presenters stressed the importance of Social Science and the contributions all areas/
specializations within Human Sciences can make to Healthy Food Systems, Healthy People through our Research, Teaching and Extension. We are already doing a pretty good job here in Idaho, but we can do better. Barbara Petty and I already met with Dean Parrella to discuss this initiative. I am even more excited about the possibilities after our meeting with him. I want all of us, County Faculty, Specialists and Teaching/Research faculty brain storm how we can address this initiative. I ordered the several copies of the APLU publication to share with faculty during Annual Conference.

Speaking of Annual Conference, we, here in Moscow, are looking forward to hosting conference again this year. I hope people are sending Harriet Shaklee or me their kudos for this past year. I know of several, but I do not want to leave anything out.

Happy Spring!
What's Hiding in Your Ice?

It’s amazing how few Americans realize how dirty the insides of ice machines are. They just assume that the ice in their beverages is clean and safe. The hidden truth is that the insides of most ice machines contain mold—especially the commercial ones in restaurants that are more susceptible to contamination.

Who is responsible for keeping Americans safe from mold and foodborne pathogens in these cases? Is it even possible to stop the continual food out-breaks we hear about on the news? And who is to blame for dirty ice machines? Is it service technicians, health inspectors, policymakers, ice machine manufacturers or restaurant employees?

It’s difficult to pin this on the health inspectors since they are not legally responsible for looking inside every ice machine. These local agencies are overwhelmed by the sheer number of inspections they need to carry out and are almost always under-funded. On a national level, the federal Food Safety Modernization Act is full of loopholes and doesn’t seem to have stopped foodborne illnesses from breaking out all across the country.

Should Americans be wary of commercial ice machine manufacturers? Are they doing the best they can to ensure clean ice? They do provide cleaning and sanitizing instructions for their machines, but unfortunately for thirsty Americans, those recommendations are insufficient for removing all of the mold, biofilm and other buildup that grows in commercial ice machines.

Most restaurants follow local and state regulations and schedule regular cleanings with HVAC technicians. Unfortunately, 95 percent of HVAC service technicians’ lack food safety training and the knowledge to properly clean and sanitize commercial ice machines. And somehow, 99 percent of food industry professionals have never viewed inside the mechanicals of a commercial icemaker. Ultimately, restaurants are relying on untrained technicians using faulty instructions and following poorly written regulations. The result of this disastrous combination should be brutally obvious, especially in schools and healthcare settings.

Joe Lillis has been in the ice business for more than 30 years and his mission is to give restaurants and healthcare facilities the confidence that they are serving 100 percent pure, clean ice. “I’ve stuck my head inside hundreds of machines, and what I’ve seen is not pretty,” he says. “At least 90 percent of all commercial ice machines are not properly cleaned and sanitized and would absolutely fail a proper U.S. Food and Drug Administration inspection. It’s a real problem.”

Unknown to virtually everyone except the technicians who quietly service them, commercial ice machines are a significant ongoing source of mold and biofilm in foodservice settings. The water may be clean and pure when it goes into the machines, but the tubes and inner workings of the machines can be harboring bacteria and other foodborne pathogens, potentially contaminating the ice cubes that end up in customers’ drinks.

The average American consumes nearly two pounds of ice per day. If they could see the insides of ice machines, that number might plummet. For most people, out of sight still equates to out of mind and unfortunately that includes those in the foodservice industry.

“People have zero-tolerance for mold in their homes,” Lillis says, “but there has been mold or biofilm in almost every ice machine I’ve ever looked inside.”
The 46-year-old Bostonian knows what he’s talking about. He developed the nation’s first cleaning, sanitation and verification program that results in a truly clean, sanitary machine. According to Lillis, after undergoing a manufacturer’s recommended cleaning procedure, 80 percent of ice machines still contain measurable quantities of mold, biofilm or other biological buildup. “The cleaning process as described by most ice machine manufacturers is really just a descaling procedure that is intended to remove mineral buildup on the heat exchanger.”

The average HVAC or refrigeration technician will claim it takes approximately 2 hours to clean an ice machine. Lillis estimates that it actually takes between 4 and 8 hours to properly clean and sanitize an ice machine and bin. Lillis constantly battles with service technicians on this matter. “Quite often, I have to swab the ice machine in front of them after their 2-hour descaling procedure to prove that the ice maker isn’t clean yet.”

“Most restaurants also forget that the ice bins and dispensers need to be emptied, cleaned, and sanitized much more frequently than they are,” Lillis says. “And don’t even get me started on people who reach in and grab ice with their bare hands.”


Keywords: foodborne pathogen, mold, bacteria.

**Ice: The Overlooked Product**

Some food service operators and their employees take that fact for granted. They don’t care proper precautionary measures to handle the product properly or the necessary preventive maintenance measures to ensure that ice machine is clean, sanitary and operating safely. Listed below are some best practices and questions to ask. Some are basic and some are worth taking a second look.

- Make sure to properly clean the floor drain, inspect for leaks, and remove any standing water on the floor under the ice machine. This can be a breeding area for drain/fruit flies or any other species of fly.
- While we’re on the topics of insects, look out for cockroaches. The warm, wet areas can be a favorite hangout, especially the interior motor area behind the front panel. If there is an infestation, you may have contaminated ice (a potential Salmonella infection).
- That ice shovel, where are we storing it? Is it hung on a dirty wall, does it even get cleaned or sanitized, is the contact surface excessively scored or chipped, or are your maintenance personnel using the ice shovel to remove garbage from the compactor pad, too?
- Is the ice scoop stored on top of the dusty ice machine top? Is the contact surface compromised, or the scoop used for something else?
- Do we make sure we disconnect the ice machine, empty it, and clean and sanitize the interior when there is a contaminated water emergency? Is there a backflow prevention device on the unit?
- What does the gasket to the ice machine door look like? If it is damaged, humid air can constantly enter the interior of the machine and accelerate mold growth (pink or black mold growth, especially around the chute and interior surfaces of ice machines).
- Clean the dust off the filter. It will help the ice machine’s performance and save electricity. Speaking of filters, how about that black water filter that is mounted near the machine on the wall?
- Is there a contracted company that takes care of cleaning and preventive maintenance of the ice machine? There should be, at least once a month.
- Are food handling employees properly trained in handling ice?

Ice and ice machines need to be taken into consideration throughout the year, not just as a summer afterthought.


Keywords: mold.
American’s Changing Religious Landscape

The Christian share of the U.S. population is declining, while the number of U.S. adults who do not identify with any organized religion is growing, according to an extensive new survey by the Pew Research Center. Moreover, these changes are taking place across the religious landscape, affecting all regions of the country and many demographic groups. While the drop in Christian affiliation is particularly pronounced among young adults, it is occurring among Americans of all ages. The same trends are seen among whites, blacks and Latinos; among both college graduates and adults with only a high school education; and among women as well as men.

The United States remains home to more Christians than any other country, and a large majority of Americans — roughly seven-in-ten — continue to identify with some branch of the Christian faith. But the major new survey of more than 35,000 Americans finds that the percentage of adults who describe themselves as Christians has dropped by nearly eight percentage points in just seven years, from 78.4 percent in an equally massive Pew Research survey in 2007 to 70.6 percent in 2014. Over the same period, the percentage of Americans who are religiously unaffiliated — describing themselves as atheist, agnostic or “nothing in particular” — has jumped more than six points, from 16.1 percent to 22.8 percent. And the share of Americans who identify with non-Christian faiths also has inched up, rising 1.2 percentage points, from 4.7 percent in 2007 to 5.9 percent in 2014. Growth has been especially great among Muslims and Hindus, albeit from a very low base.

The drop in the Christian share of the population has been driven mainly by declines among mainline Protestants and Catholics. Each of those groups has shrunk by approximately three percentage points since 2007. The evangelical Protestant share of the U.S. population also has dipped, but at a slower rate, falling by about one percentage point since 2007.

Among other finds in the study:

- **Christians probably have lost ground not only in their relative share of the U.S. population but also in absolute numbers.** In 2007, there were 227 million adults in the United States, and a little more than 78 percent of them — or roughly 178 million — identified as Christians. Between 2007 and 2014, the overall size of the U.S. adult population grew by about 18 million people, to nearly 245 million. But the share of adults who identify as Christians fell to just under 71 percent, or approximately 173 million Americans, a net decline of about 5 million.

- **American Christians — like the U.S. population as a whole — are becoming more racially and ethnically diverse.** Non-Hispanic whites now account for smaller shares of evangelical Protestants, mainline Protestants and Catholics than they did seven years earlier, while Hispanics have grown as a share of all religious groups. Racial and ethnic minorities now make up 41 percent of Catholics (up from 35% in 2007), 24 percent of evangelical Protestants (up from 19%) and 14 percent of mainline Protestants (up from 9%).

- **Religious intermarriage appears to be on the rise.** Among Americans who have gotten married since 2010 nearly four-in-ten (39%) report that they are in religiously mixed marriages,

Harriet Shaklee
Family Development Specialist
University of Idaho, Boise
322 E Front St., Suite 180
Boise, ID 83702-7364
hshaklee@uidaho.edu
compared with 19 percent among those who got married before 1960.

- **While many U.S. religious groups are aging, the unaffiliated are comparatively young — and getting younger, on average, over time.** As a rising cohort of highly unaffiliated Millennials reaches adulthood, the median age of unaffiliated adults has dropped to 36, down from 38 in 2007 and far lower than the general (adult) population’s median age of 46. By contrast, the median age of mainline Protestant adults in the new survey is 52 (up from 50 in 2007), and the median age of Catholic adults is 49 (up from 45 seven years earlier).

- **Switching religion is a common occurrence in the United States.** If all Protestants were treated as a single religious group, then fully 34 percent of American adults currently have a religious identity different from the one in which they were raised. This is up six points since 2007, when 28 percent of adults identified with a religion different from their childhood faith. If switching among the three Protestant traditions (e.g., from mainline Protestantism to evangelicalism, or from evangelicalism to a historically black Protestant denomination) is added to the total, then the share of Americans who currently have a different religion than they did in childhood rises to 42 percent.

- **Christianity — and especially Catholicism — has been losing more adherents through religious switching than it has been gaining.** More than 85 percent of American adults were raised Christian, but nearly a quarter of those who were raised Christian no longer identify with Christianity. Former Christians represent 19.2 percent of U.S. adults overall. Both the mainline and historically black Protestant traditions have lost more members than they have gained through religious switching, but within Christianity the greatest net losses, by far, have been experienced by Catholics. Nearly one-third of American adults (31.7%) say they were raised Catholic. Among that group, fully 41 percent no longer identify with Catholicism. This means that 12.9 percent of American adults are former Catholics, while just 2 percent of U.S. adults have converted to Catholicism from another religious tradition. No other religious group in the survey has such a lopsided ratio of losses to gains.

- **The evangelical Protestant tradition is the only major Christian group in the survey that has gained more members than it has lost through religious switching.** Roughly 10 percent of U.S. adults now identify with evangelical Protestantism after having been raised in another tradition, which more than offsets the roughly 8 percent of adults who were raised as evangelicals but left for another religious tradition or who no longer identify with any organized faith.

- **The Christian share of the population is declining and the religiously unaffiliated share is growing in all four major geographic regions of the country.** Religious “nones” now constitute 19 percent of the adult population in the South (up from 13% in 2007), 22 percent of the population in the Midwest (up from 16%), 25 percent of the population in the Northwest (up from 16%) and 28 percent of the population in the West (up from 21%). In the West, the religiously unaffiliated are more numerous than Catholics (23%), evangelicals (22%) and every other religious group.

This is the first report on findings from the 2014 U.S. Religious Landscape Study, the centerpiece of which is a nationally representative telephone survey of 35,071 adults interviewed on both cell-phones and landlines from June 4 - Sept. 30, 2014. Findings based on the full sample have a margin of sampling error of plus or minus 0.6 percentage points. The full report is available on the website (http://www.pewresearch.org/religion) of the Pew Research Center’s Religion & Public Life project.


Keywords: family, young adults.
Is Gaining Weight on Vacation a Problem?

Once spring arrives, many of us start thinking about summer vacation — a time to rest, relax, kick back and indulge. Researchers at the University of Georgia have found that vacations can also result in significant weight gain.

In their study, they surveyed 122 American adults, aged 18 to 65, who went on vacations lasting between one to three weeks, during March to August. They collected data on individuals’ weight, eating habits, alcohol consumption, and level of physical activity at three times — 1 week pre vacation, 1 week post vacation, and 6 weeks post vacation.

The results showed that 61 percent of individuals gained weight while on vacation. Average weight gain was 0.7 pounds which, unfortunately, stayed on when they were weighed 6 weeks post vacation. There was a large variation in vacation weight change, with some individuals losing weight and others gaining as much as 7 pounds. The longer the vacation, the more they gained.

The vacation weight gain occurred even though their level of physical activity slightly increased while on vacation, from 3,940 minutes/week at pre-vacation, to 4,313 minutes/week during vacation. While on vacation, they significantly increased the amount of time they spent walking. Unfortunately, their level of physical activity decreased six weeks post vacation to 3,715 minutes/week.

The vacation weight gain could have been due to the participants’ increase in alcohol consumption. The average number of drinks increased from eight a week pre vacation to 16 a week while on vacation.

Lead researcher, Dr. Jamie Cooper, found the vacation weight gain results alarming. He commented, “If you’re only gaining a pound or two a year and you gained three-quarters of that on a one to three-week vacation, that’s a pretty substantial weight gain during a short period of time.” This small increase in weight that people don’t lose over a long period of time is referred to as “creeping obesity.” It can increase their likelihood of developing future health problems.

The bottom line is to enjoy your vacation but keep an eye on your food and alcohol intake. Yes, indulge but don’t overindulge. If you are more active on vacation, try to maintain that once you’ve returned home. It’s hard to lose weight that has been gained, even if it’s a small amount.


Keyword: weight.
Should There Be Health Warning Labels on Sugar-Sweetened Beverages?

The most recent Dietary Guidelines for Americans recommends that individuals consume < 10 percent of their calories from added sugars. In children 4-18 years-old, added sugars make up between 15-17 percent of their calories consumed, and in adults it ranges from 12-16 percent. Approximately half of their added sugar intake comes from sugar-sweetened beverages (SSB). In addition, more than half of children under the age of 11 drink SSBs on a daily basis.

The health risks for adults consuming excess added sugar includes cardiovascular disease, type 2 diabetes, obesity, and some types of cancer. In children, excess sugar is associated with dental caries or tooth decay.

What might deter parents from purchasing sugar-sweetened beverages for their children? Researchers at the University of Pennsylvania Perelman School of Medicine theorized that health warning labels, similar to those found on tobacco products, may deter parents from purchasing SSB and did a follow up study.

In this study, there were 2,381 parents with at least one child between six and 11 years old. They were randomly divided into one of six groups and asked to look at a SSB with one of the following types of labels and then asked if they would purchase a SSB for their child:

- Group 1 was a control group and saw no label.
- Group 2 saw a label with the amount of calories it contained.
- Groups 3-6 saw one of four warning labels (see below), where the content varied slightly about possible negative health effects of SSB.

| SAFETY WARNING: Drinking beverages with added sugar(s) contributes to obesity, diabetes, and tooth decay. |
| SAFETY WARNING: Drinking beverages with added sugar(s) contributes to weight gain, diabetes, and tooth decay. |
| SAFETY WARNING: Drinking beverages with added sugar(s) contributes to preventable diseases like obesity, diabetes, and tooth decay. |
| SAFETY WARNING: Drinking beverages with added sugar(s) contributes to obesity, type 2 diabetes, and tooth decay. |

The results showed that the specific text of the health warning labels did not affect a parent’s beverage purchase choice. Just having the health warning label on the SSB impacted their decision to not purchase SSB. Significantly fewer parents (40 percent) in groups 3-6 said they would choose a SSB for their kids, compared to group 1 parents (60%) who saw no label and group 2 parents (53%) who saw just the calorie label.

Lead researcher Christina Roberto commented, “regardless of the specific working, results show that adding health warning labels to SSBs may be an important and impactful way to educate parents about the potential health risks associated with regular consumption of these beverages, and encourage them to make fewer of these purchases.”

Source: February 2016 issue of Pediatrics, http://pediatrics.aappublications.org/content/137/2/1.46.

Keyword: sugar-sweetened beverages.
United Way Alice Project

The United Way ALICE Project provides a framework, language and tools to measure and understand the struggles of the growing number of households who do not earn enough to afford basic necessities. This population is called ALICE, an acronym for Asset Limited, Income Constrained, Employed. Despite working and earning more than the Federal Poverty Level (FPL), they still do not earn enough to afford the five basic household necessities of housing, child care, food, transportation and health care. Analyzing the economic characteristics of ALICE households provides a different way to think beyond poverty level to a broader family need perspective and can be helpful in implementing effective financial education programs.

In Idaho in 2013, 15 percent (87,233) of households lived in poverty and 22 percent (130,397) of all households are ALICE. A comparatively low percentage of senior households live in poverty (10%) in Idaho, but almost one-quarter (24%) of senior households qualify as ALICE. “ALICE households vary in size and makeup; there is no typical configuration. In fact, contrary to some stereotypes, the composition of ALICE households mirrors that of the population in general. There are young and old ALICE households, those with children, and those with a family member who has a disability. They vary in educational level attained, as well as in race and ethnicity. They live in cities, in suburbs, and in rural areas. These households move in and out of being ALICE over time.” For instance, a young ALICE household may move above the ALICE Threshold by increasing their education. An older ALICE household may develop an illness, lose a job or suffer from a disaster and slip into poverty.

"While the demographic characteristics of households in poverty measured by the FPL are well known from U.S. Census reports, the demographic characteristics of ALICE households are not as well known... ALICE households generally reflect the demographics of the overall state population. Differences are most striking for those groups who traditionally have the lowest wages: women; racial/ethnic minorities; undocumented, language-isolated or unskilled recent immigrants; people with low levels of education; people with a disability; and younger veterans."

In addition to the state-level data, the ALICE report reveals that the total number of households living below the ALICE Threshold varies greatly across Idaho’s 44 counties. For example, Clark County has 304 households and the smallest number of households with income below the ALICE Threshold. Another measure of economic conditions in a county is the persistence of economic hardship over time. Madison County is the only county where 20 percent or more of the population has lived in poverty over the last 30 years. The county-by-county data provides excellent demographic and economic insights for Extension educators.


Keywords: Family economics, limited resource, poverty.
Alice Households in the Pacific Northwest

The United Way ALICE Project began researching and reporting on the needs of the vulnerable ALICE population with a pilot project in Morris County, New Jersey in 2009. It expanded to the entire state of New Jersey in 2012. There are currently United Way ALICE Reports in ten states including the three states in the Pacific Northwest.

The report indicates that the number of ALICE households in Idaho and the Pacific Northwest is due to several factors:

1. **Low wage jobs dominate the economy of the region.** More than half of all jobs in the Pacific Northwest pay less than $20 per hour, with a majority paying between $10 and $15 per hour ($15 per hour full time = $30,000/year). These jobs, especially service jobs, will grow faster than higher-wage jobs over the next ten years.

2. **The basic cost of living is high.** The average annual Household Survival Budget (a measure that estimates the minimal cost of five basic household necessities (housing, child care, food, transportation and health care) for a four-person family living in Idaho is $46,176, an increase of 10 percent from the start of the Great Recession in 2007. In comparison, the U.S. poverty level is $23,550 per year for a family of four. The average annual Household Survival Budget for a single adult is $16,660 in Idaho, which translates to an hourly wage of $8.33.

3. **Child care is expensive.** This budget category often represents a family’s greatest expense. The average in Idaho is $902 per month for two children in registered home-based care and $962 for licensed and accredited child care.

4. **Jobs are not located near housing that is affordable.** For a single adult in the Pacific Northwest, an efficiency apartment accounts for 32-37 percent of the Household Survival Budget, above the affordability guidelines of 30 percent. It is difficult for ALICE households to find both affordable housing and job opportunities in the same county.

5. **Public and private assistance helps, but does not help achieve financial stability.** The Household Stability Budget measures how much income is needed to support and sustain an economically viable household, and includes a 10 percent savings plan. The Household Stability Budget totals $85,896 per year in Idaho. To afford the Household Stability Budget for a two-parent family, one parent in Idaho must earn $42.95 per hour or each parent must earn $21.48 per hour.

“When ALICE households cannot make ends meet, they are forced to make difficult choices such as forgoing health care, accredited child care, healthy food, or car insurance. These ‘savings’ threaten their health, safety, and future – and they reduce productivity and raise insurance premiums and taxes for everyone. The costs are high for both ALICE families and the wider community.”

The ALICE Project report is an excellent resource for Extension personnel who write grant proposals and need family financial data from a variety of perspectives. The report provides great regional, state, county and selected city level data that is not often readily available.


Keywords: Family economics, limited resource, poverty.