

E-Cigarettes: the Safer Alternative?

By: Stephen Moore

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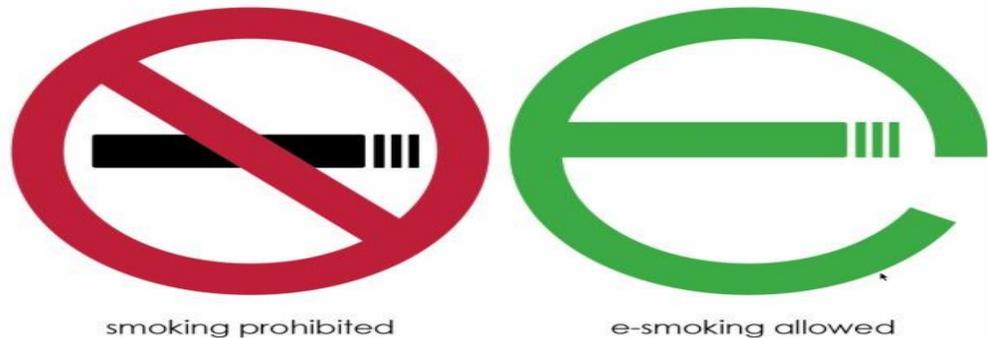


Image retrieved from <http://tech.co/e-cigarettes-technology-changing-cigarette-business-2014-08>.

In this modern age of technology, just about everything has become 'electronic.' A couple decades ago, it all began with email. Nowadays, we have e-banking, e-books, e-business, and even e-learning. Our society has come to equate the letter 'e' (for 'electronic') as a prefix for something that is convenient, modern, instantaneous, and efficient. In most cases, this assumption is accurate, but there is always the exception. A few years ago, we were introduced to the e-cigarette. For the most part, the e-cigarette has been marketed as the new alternative to conventional, tobacco cigarettes. They are seemingly clean, electronic, and create no second-hand smoke whatsoever. But what exactly is an e-cigarette?

The e-cigarette is best described by the Encyclopædia Britannica: "The e-cigarette was invented in 2003 by Chinese pharmacist Hon Lik, who initially developed the device to serve as an alternative to conventional smoking. In addition to the battery component, an e-cigarette comprises an atomizer and a cartridge containing either a nicotine or a non-nicotine liquid solution. When the device is operated, the battery heats the liquid in the cartridge, and the atomizer vaporizes the liquid, emitting it as a mist that users inhale" (Choucair, B. 2014).

It sounds quite simple, right? It gets much more complicated, as Sifferlin's 2014 article from Time magazine's website points out: "The health risks associated with the liquid nicotine used in e-cigarettes are not fully understood" (Sifferlin, A. 2014). This same New York Times article found that the liquid could be linked to poisonings, which rose to 1,351 in 2013 - a 300% increase from 2012. According to the Center for Disease Control (CDC), e-cigarette-related calls went from one call a month in September 2010 to 215 calls a month in February 2014. Over half of the calls involved kids age five and under, and 42% involved people ages 20 and older. Nicotine ingestion causes vomiting, nausea, and eye irritation. Nicotine poisonings are not the only negative effects of e-cigarettes. Recently, e-cigarettes made the news when a 29 year-old man in Costa Mesa, California was smoking one. When it made a 'humming' noise, he pulled the e-cigarette away from his face before it exploded, cutting his hand, and burning his clothes as the filter shot out and lodged into the ceiling!

Proponents of e-cigarettes argue that because they are smokeless, they are a safer and cleaner alternative to conventional cigarettes; however, clinical studies for this new product are minimal to say the least. We do know that e-cigarettes use a liquid called propylene glycol, which becomes the vapor used in e-cigarettes when it is heated. So far, no clinical studies have determined the long term health effects of inhaling this vapor habitually, but it is very likely they are not beneficial. Ellen R. Carr - nurse case manager in the Department of Medical and Surgical Oncology in the Moores Cancer Center at the University of California, San Diego – gives us some insight into the potential dangers of e-cigarettes in a 2014 article: In 2009, the FDA identified and published carcinogens and toxic chemicals found in e-cigarettes, such as diethylene glycol - the same toxic ingredient found in antifreeze.

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Join the U.S. Public Health Service

By Dr. Nina Bell

One of the lesser-known uniformed forces in the United States is the U.S. Public Health Service. Its mission is simple: “to protect, promote, and advance the health and safety of our nation” (U.S. Department of Health and Human Services, 2014). It is one of the smallest uniformed forces in our nation with approximately 6,500 public health professionals serving the corps. However, for public health professionals, it’s one of the most important uniformed forces for the country.

Officers are commissioned by the Surgeon General in various community and public health roles – those revolving around fighting disease, conducting research, and caring for underserved populations. Those who have been commissioned to the U.S. Public Health Service work full-time in various health fields such as physicians, dentists, behavioral health counselors, therapists, dietitians, pharmacists, nurses, and veterinarians. While those careers may seem obvious for serving in the U.S. Public Health Service, there are a few unusual service members.

For one, engineers are common in the Commissioned Corps. According to the Corps, “being an engineer officer...means you’re serving on the front lines of public health.” Basically, the engineers of this group design and construct infrastructures that serve the public such as water and sewer lines for underserved populations, responding to natural disasters, conducting workplace safety programs, and overseeing construction of health-related projects (i.e., hospitals, schools).

A second unusual public health officer may be found in the research end of the health field. These individuals conduct research in the fields of epidemiology, chemistry, biology, entomology, and toxicology, just to name a few. Third, students have an excellent opportunity to join the force while completing their education. There are two routes that students can take: Junior or Senior Commissioned Officer Training:



Junior Commissioned Officer Student Training and Extern Program (JRCOSTEP):

Students can apply for internships or practicums in their own communities while serving in the junior corps.

Assignments usually vary between one to three months in length and take place during official school breaks. The specific fields of interest for Junior Corps members are engineering, environmental health, pharmacy, and nursing. There is a paycheck which is based on any prior service in another other uniformed service office (Navy, Air Force, Army, Marines, Coast Guard, National Oceanic and Atmospheric Administration, Commissioned Corps for the Department of Commerce, or the Commissioned Corps for the Department of Health and Human Services).

To be eligible, you must have at least two years of undergraduate study under your belt in one of the following disciplines: environmental health, engineering, nursing, physician assistant, dental hygiene, dietetics, medical laboratory technology, medical record administration, or therapy. It would appear that the [Health Information Management program](#) as well as [Health Care Administration](#) might qualify; however, to be certain, you should check with the Corps for qualifying status.

Senior Commissioned Officer Student Training and Extern Program (SRCOSTEP):

This highly competitive program is only open to students who are about to begin their final year of academic study. They should be in the areas of nursing, pharmacy, nurse practitioner, or physician assistant. Ashford does not offer such programs; however, some of our students do move into these fields for graduate work. More information on SRCOSTEP can be found at: <http://www.usphs.gov/student/srcostep.aspx>.

Currently, the application process is open for certain fields such as physicians and dentists, but you may want to check on the process for students by emailing corpsrecruitment@hhs.gov. It may be worth the effort, and you get to join one of the important uniformed forces protecting our nation! Check out the process in [this video](#).

Well Being: A Personal Perspective

By Dr. Pamela Hardy



Image retrieved from <http://www.physiosculpt.com/Surveys%20home.html>.

This past year has been an eye opener for me; I lost my father and a family friend one year ago, a very good friend two weeks ago, and my best friend had a heart attack four days ago. The reality of loss has caused me to pause and really look at my life through a different lens called well-being. Contrary to popular belief, one's well-being is not dependent on only eating healthy, regular exercise, and having a routine check-up from your doctor. According to the Gallup Poll (2014) your well-being is also dependent upon your age, gender, race/ethnicity, income, education, environmental location (work and home), and your thoughts. According to Rath and Harter (2010) there are five main factors to well-being: career, social, financial, physical, and community well-being. These five factors provide a complete view of what influences our well-being over time. With this knowledge, I began asking myself some powerful questions about my well-being.

The following definitions are taken in part from Well-Being: The Five Essential Elements:

Career Well-Being- *how do you occupy your time each day?*

Do I like what I do? What kind of environment do I work in? Do I have job satisfaction?

Social Well-Being- *is having strong relationships and love in your life.*

What kind of relationships do I have in my life? Are they supportive and/or loving; or do they create more stress and drama?

Financial Well-Being- *is about how effectively you manage your economic life.*

Do I live within my means? How well do I manage my money?

Physical Well-Being *-is having good health and enough energy to get things done on a daily basis.*

Do I meet the day with enthusiasm, or do I crawl into my day kicking and screaming?

Community Well-Being- *is the sense of engagement we have in the area where we live.*

Have I made a difference in my community? Am I a change agent? Do I make a difference in the lives of others?

I answered each question with the utmost honesty to ensure I could get a clear picture of where I was and where was I going. I found some very interesting things about myself. I realized I took some of the things I do for granted or never gave much thought to doing my job. A perfect example of this was question number one: how do you occupy your time each day? A colleague of mine helped me with this question by outlining every meeting I regularly attended, every committee of which I was a member, and every project I was working on. Having a visual of what I did every day helped me see that I had to begin to delegate more. It also showed me that I needed to step away from my desk from time-to-time throughout the day.

It is my hope that my opportunity to ponder these questions for myself will help you to begin to consider your own life and how these factors play a role in your well-being. Until next time, remember: your life is what you make it, *make it count!*

Dalen et al. (2010) studied the effects of mindfulness on treating obese patients over the course of 6 weeks to determine whether it encouraged them to eat healthier. They agreed that “in contrast to a focus on cutting calories, mindfulness help people reduce weight and improve health by restoring the individual’s ability to detect, and respond to, natural cues of hunger and satiety” p.4. Once again shifting your focus to your food choices and enjoying the process of taking care of your body may be the pushing step towards being healthier overall and eventually helping to take off some weight from everything that cripples your mind.

Benefits of Being Mind-FULL

Slowly adding excitement, happiness, confidence, self-esteem, and love to your bucket of “To-Want” things generates physical and mental rewards.

Physically:

- May leave you with more energy to look forward to exercising or spending a fun night out with your friends and family
- It can reduce the strain that stress may be causing on your heart by reducing blood pressure
- It can alleviate some chronic pain as your body relaxes and loosens up
- It can improve your digestion and reduce bloating
- It can set you off for a peaceful sleep

Mentally:

- It can brush away feelings of sadness and depression
- It can reduce the need to find emotional comfort in food or other substances
- It can alleviate relationship conflict
- It can eliminate compulsive or obsessive behaviours

Source: <http://www.helpguide.org/harvard/benefits-of-mindfulness.htm>

Additionally, mindfulness has been incorporated in the psychology field and training programs have been designed for war veterans who may be experiencing Post Traumatic Stress Disorder symptoms. Marzabadi et al. (2015) concluded from a study that “mindfulness training raises the individuals’ consciousness of psychological and physical feelings, it results in a realistic acceptance of life events and confidence, deep sympathy and love toward others” p.6. While these may be extreme cases it still highlights the therapeutic effects of re-connecting with your mind and filling it up with positive feelings.

How Can I Start Being Mind-FULL?

Be here. Start by pausing to think how you feel right now and how you actually want to feel. Is it the same?

Before you go to bed tonight write down what made you happy, excited, and joyful today and remember it. Journaling your thoughts can make you aware of what you have felt and what you want to keep feeling.

Look for cues during the day where those feelings seem to fade away and instead are taken over by stress. Is it something that keeps repeating itself?

Being mindful starts by connecting with your inner self and knowing how your mind and body works. Breathing exercises and periods of meditation can help you find this connection as the rhythm of your breathing allows your muscles to relax and loosen up.

Know that wherever you sit at a basketball game you will always see the game from a different viewpoint. Choose where you want to sit and whom you want to bring with you.

Being mindful is being here, but being mind-FULL is being here with an over-bursting backpack of happiness to carry you through life.

The Aging of Baby Boomers

By Maria Lara

In view of the aging population, the United States has never before covered as many baby boomers as it does today. For the past century, persons aged 65 years or older have significantly increased from 4.1% to 12.9%. Consequently, an estimated 20% of Americans will be aged 65 years or older by 2030 as per the US Department of Health and Human Services (2010). Within the major factors of aging in America, the growing numbers of baby boomers living with multiple chronic conditions such as somatic diseases, behavioral health problems, cognitive functional limitations, and geriatric syndromes such as falls and frailty, is an alarming health epidemic we face today. Considering the stark reality of the health issues amongst the baby boomers, the American community is prepared to address the aging population by contributing time to volunteer at community-based programs.



Image retrieved from <http://www.brisbanekids.com.au/volunteering-with-your-family-in-brisbane/>.

As a result, helping the aging generation and spending time with them, shall improve their health and maintain a high quality of life at every age, regardless of the onset of chronic conditions. More importantly, research shows that volunteering for community-based programs, hospitals, or retirement homes can also provide the opportunities to bring into excellent condition the health and functioning of older adults, as well as magnify intergenerational programs and policies to better enrich society as a whole. (Anderson, Goodman, Holtzman, Prosner, Northridge, 2012).

With that in perspective, as a college student at Ashford University and granddaughter of a baby boomer and veteran, I have the opportunity to care for and connect with my grandparents on a regular basis. By assisting with their at-home health care, I have come to learn and observe that with time, patience, and care, their health has improved as well as their well-being. In addition, the positive impact I have obtained from caring for my grandparents has sparked an interest in my involvement with the baby boomer community. By volunteering and helping the baby boomer community increase physical activity, prevent falls, improve functioning, and avoid social isolation, I contribute to the designing and testing of new ways for them to contribute to society. Make your community focus on the aging population as a resource to enrich our society rather than a burden. Volunteer your time to help the baby boomers thrive!

Continued from page 1 — E-Cigarettes: the Safer Alternative?

Indeed, smoking a chemical component of antifreeze is not a safe alternative to conventional cigarettes, yet the e-cigarette does not actually contain tobacco, and this point has created a legal loophole. To date, e-cigarettes are not subject to U.S. tobacco laws and U.S. Food and Drug Administration (FDA) regulation. Although smokeless, e-cigarettes do contain nicotine – the harmful, cancer-causing ingredient found in conventional cigarettes which creates an addictive, chemical dependency in users.

Because e-cigarettes are smokeless, unregulated, and even available for online purchase, they are an attractive market for adolescents. E-cigarette vendors do not even require proof of age. Perhaps this fact is why e-cigarette interest is growing in middle and high school. Ashford University students are no longer adolescents, but critical thinking adults. As adults, there is the freedom of being a consumer. With this freedom comes the responsibility of making informed decisions. If you are a smoker, be informed of the consequences. Please make every effort to quit smoking, and question whether e-cigarettes are actually a safer alternative. Websites such as *webmd.com* offer sound advice for quitting, such as avoiding alcohol, trying nicotine-replacement therapy, and managing stress. An active lifestyle and healthy hobbies are options to consider, and many natural, herbal products are available which claim to help stop the craving to smoke; although their claims may be unsubstantiated, they might be worth trying. Remember that nothing is safer for the lungs than vapor-free oxygen.

Flu? What flu?

By Dr. Roxanne Beharie

Chicken soup for the flu? Of course, everybody knows that. But, did you know that the flu season is very long? According to the Centers for Disease Control and Prevention (CDC), while flu activity most often peaks in February, flu activity can last as late as May (CDC, 2014). That's a lot of chicken soup. Therefore, while the protein in chicken soup is a good step in fighting the flu, another tried and true way to fight the flu is with vitamin C. Like me, your first thought was probably an orange as a source of vitamin C, and while oranges are indeed great sources of vitamin C there are, in fact, other fruits with higher vitamin C levels that may be beneficial to you in this fight against the flu. Orange you glad to hear it? :)

The National Institutes of Health (NIH) recommend that adult men over age 19 consume 90 milligrams of vitamin C a day, and adult women 75 milligrams a day. Keep in mind that one medium navel orange contains about 82.7 milligrams of vitamin C (NIH, 2011). Here are just a few other sources of vitamin C that can help to boost your immune system and serve the flu a knockout punch.

1. **Papaya** - One small papaya (about 157 grams) has 95.6 milligrams of vitamin C while a cup of mashed papaya has about 140 milligrams.
2. **Mango** - One serving of mango has 122.3mg of vitamin C.
3. **Strawberry** - One serving (147 grams) of strawberries has 86.5 milligrams of vitamin C.
4. **Kiwi** - Although one kiwi, a small fruit, contains only 64 milligrams of vitamin C, a cup of sliced, green kiwi gives you 167 milligrams of vitamin C. You would have to eat nearly 1 $\frac{3}{4}$ cups of orange slices to get the amount of vitamin C in 1 cup of sliced kiwi.
5. **Guava** - One cup of guava has a vitamin C content of about 377 milligrams.
6. **Lychee** - Each cup of lychee fruit contains 136 milligrams of vitamin C.

Try this simple fruit salad, and show the flu who is boss! :)



Image retrieved from <http://fruitsaladrecipephotos.blogspot.com/2014/07/fruit-salads-recipes-fruit-salad-recipe.html>.

INGREDIENTS

- ¼ cup cubed mangoes
- ¼ cup sliced strawberries
- ¼ cup cubed papayas
- ¼ cup sliced kiwis
- ¼ cup mandarin orange sections
- 1 teaspoon finely shredded lemon peel
- 1 lemon, juiced (3 tablespoons)
- 1 tablespoon water
- 1 teaspoon agave or honey
- 1 Tbsp finely chopped, fresh mint

DIRECTIONS

In a medium mixing bowl, combine the fruits, lemon peel, lemon juice, water, agave or honey. Taste and add more lemon juice, honey, and mint as needed. Enjoy! :)

Contributors



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Elsie Goycoolea is an international Ashford student from Spain pursuing an B.A. in Journalism and Mass Communications. She is a healthy lifestyle enthusiast and she currently combines her studies with writing on her personal blog: sharing healthiness.



Maria Lara is in her second year at Ashford majoring in Journalism and Mass Communication. She graduated from La Joya High School in Texas. Maria is committed to writing and aims to be an award winning writer.



Dr. Pamela Hardy is an Assistant Professor and the Health Promotion Department Chair in the College of Health, Human Services, and Science at Ashford University. She holds a Doctorate of Philosophy in Human Services, Management of Nonprofits specialization from Capella University.



Dr. Nina M. Bell is the chair of the BA in Health Education degree program for Ashford University. She earned her PhD and MPH from Walden University and has been at Ashford since 2011.



Dr. Roxanne Beharie is an Assistant Professor with Ashford University. Dr. Beharie earned her doctorate in Public Health from Morgan State University in Baltimore, Maryland. Dr. Beharie also earned a BS in Exercise Science from the University of Pittsburgh and an MPA in Health Services Management from Mercy College.

April

- Alcohol Awareness Month
- National Distracted Driving Awareness Month
- National Donate Life Month
- National Minority Health Month
- 7 World Health Day
- 7 - 13 National Public Health Week
- 21 - 25 Every Kid Healthy™ Week
- 23 - 30 World Immunization Week

May

- Arthritis Awareness Month
- Mental Health Month
- National Asthma and Allergy Awareness Month
- National Physical Fitness and Sports Month
- 11 - 17 National Women's Health Week
- 12 National Women's Check-up Day
- 25 - 31 National Hurricane Preparedness Week
- 28 National Senior Health & Fitness Day®
- 31 World No Tobacco Day

June

- Men's Health Month
- National Safety Month
- 1 National Cancer Survivors Day
- 9 - 15 Men's Health Week
- 19 World Sickle Cell Day

Conferences

Society for Public Health Education (SOPHE)
66th Annual Meeting
April 23-25, 2015 | Portland, OR

The University of Arizona
12th Annual Nutrition & Health Conference
May 4-6, 2015 | Phoenix, AZ

National Wellness Institute
40th Annual National Wellness Conference
June 15-18, 2015 | Minneapolis, MN

1. E-Cigarettes, the Safer Alternative?

Choucair, B. (2014). E-cigarette. Encyclopædia Britannica,

Sifferlin, A. (2014). 5 Sketchy Things We Still Don't Know About E-Cigarettes. Time.Com, 1.

2. Join the U.S. Public Health Service

U.S. Department of Health and Human Services. (2014). Commissioned Corps of the U.S. Public Health Service. Retrieved from <http://www.usphs.gov/aboutus/mission.aspx>.

3. Well Being: a personal perspective

Gallup, Inc. (2015). Gallup's top 10 U.S. well-being discoveries of 2014. Retrieved from <http://www.gallup.com/poll/180383/gallup-top-discoveries-2014.aspx>

Rath, T. and Harter, J. (2010). Well being: The five essential elements. Gallup Press. New York, NY.

4. Mind-FULL-ness – Carry a Happy Backpack

Carpenter, S. (2012). That gut feeling. American Psychological Association. Retrieved from <http://www.apa.org/monitor/2012/09/gut-feeling.aspx>.

Dalen, J., Smith, B. W., Shelley, B. M., Sloan, A. L., Leahigh, L., & Begay, D. (2010). Pilot study: Mindful eating and living (MEAL): Weight, eating behavior, and psychological outcomes associated with a mindfulness-based intervention for people with obesity. *Complementary Therapies in Medicine*, 18(6), 260-4.

Helpguide.org. (n.d.). Benefits of mindfulness: practices for improving emotional and physical well-being. Retrieved from <http://www.helpguide.org/harvard/benefits-of-mindfulness.htm>.

Marzabadi, E. A., & Hashem Zadeh, S. M. (2014). The Effectiveness of Mindfulness Training in Improving the Quality of Life of the War Victims with Post Traumatic stress disorder (PTSD). *Iranian Journal Of Psychiatry*, 9(4), 228-236.

5. The Aging of Baby Boomers

Anderson, L. A., Goodman, R. A., Holtzman, D., Posner, S. F., & Northridge, M. E. (2012). Aging in the United States: Opportunities and Challenges for Public Health. *American Journal of Public Health*. 102(3), 393-395.

US Department of Health and Human Services. (2010). A Profile of Older Americans: 2010. Administration on Aging. Available at: http://www.aoa.gov/Aging_Statistics/Profile/2010/docs/2010profile.pdf.

6. Grocer's Corner

Centers for Disease Control and Prevention (CDC). (2014). Influenza (Flu): The Flu Season. Available at: <http://www.cdc.gov/flu/about/season/flu-season.htm>.

National Institutes of Health (NIH). (2011). Vitamin C: Fact Sheet for Consumers. Available at: <http://ods.od.nih.gov/factsheets/VitaminC-Consumer/>.

“The higher your energy level, the more efficient your body. The more efficient your body, the better you feel, and the more you will use your talent to produce outstanding results.”

-Anthony Robbins

Get to know the Health Promotion faculty in the College of Health, Human Services, and Science

Department Chair: Dr. Pamela Hardy

Program Chair: Dr. Nina Bell—Bachelor of Arts in Health Education

Program Chair: Dr. Erick Cervantes—Bachelor of Arts in Complementary and Alternative Health

Program Chair: Dr. Christine McMahon—Bachelor of Arts in Health and Wellness

Full-Time Faculty:

Dr. Roxanne Beharie

Dr. Charles Holmes

Dr. Melissa Kenzig

Sandra Rebeor

Visit the COHHSS webpage for bios and more:

<http://www.ashford.edu/degrees/online/health.htm>

If you would like to be a part of future editions of the Health Promotion Quarterly newsletter, please email Dr. Roxanne Beharie at : roxanne.beharie@faculty.ashford.edu.

