



Tidbit Times

November 2011

“How Was Your Day? Oh, and Please Pass the Rolls.”

Teens Who Eat Dinner with Family Are Less Likely to Drink, Smoke or Use Drugs

Just the mention of “Thanksgiving” conjures up images of family. Folks gathered around the table with a turkey and all the trimmings strategically placed to fit between the plates and glasses. This time spent together creates memories and a feeling of belonging.

Of course, not every family celebrates Thanksgiving this way, either by choice or by circumstance. Nonetheless, November seems a fitting time to bring attention to the fact that eating meals with your children—everyday meals—produces a sense of connectedness, improves relationships and as studies show, reduces their chances of using drug, alcohol and tobacco.

Teens whose families eat dinner together at least five times per week are less likely to smoke, drink and



use drugs. But teens whose families eat together fewer than three times per week are almost four times more likely to smoke, more than twice as likely to use alcohol and two and a half times more likely to use marijuana, according to a recent report from the National Center on Addiction and Substance Abuse (CASA) at Columbia University. Published in September, the report is the seventh in a multi-year series on the importance of family dinners.

Conversations & Casserole

This year’s study again validates that it isn’t the food on the table, but the

conversations and family time that creates an impact. According to the report, when teens were asked about the best part of family dinners, the most frequent answer is the sharing, talking and interacting with family members; the second most frequent answer is sitting down or being together.

Siblings Matter

The impact of siblings is significant too. Teens who believe their older siblings have tried illegal drugs are more than three times likelier to expect to try drugs (including marijuana and prescription drugs without a prescription to get high) in the future.

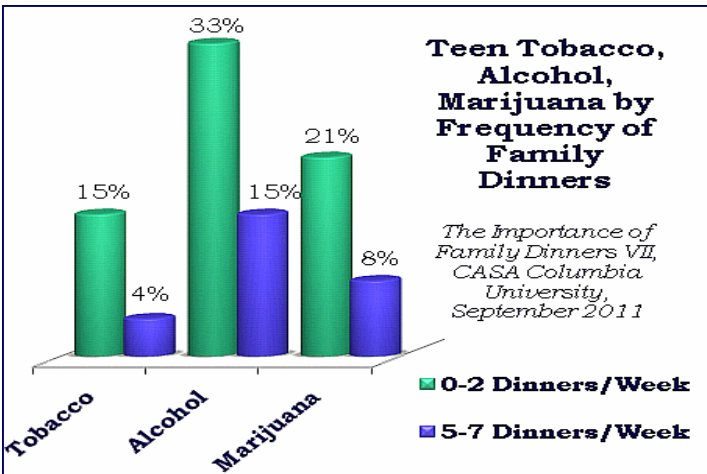


In a release about the study, Joseph A. Califano, Jr., founder of CASA at Columbia University stated, “Ninety percent of Americans who meet the medical criteria for addiction started smoking, drinking, or using other drugs before age 18. Parental engagement in children’s lives is key to raising healthy, drug-free kids, and one of the simplest acts of parental engagement is

sitting down to the family dinner. Years of surveying teens has taught us that the more often children have dinner with their families the less likely they are to smoke, drink or use drugs.”

Those everyday meals are opportunities to spend time together: to laugh, learn and share. Truly reasons to be thankful.

For more information, visit www.casacolumbia.org.



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Public Health
Prevent. Promote. Protect.



Daylight saving times ends on November 6th. Is your emergency preparedness stockpile up to date? When it's time to change your clocks because of daylight saving time, remember to check your preparedness kit to make sure your emergency stockpile isn't missing any items and that the food hasn't expired. If you haven't created a stockpile yet,

now is the time to create one! The easiest way to tell if your foods are still usable is expiration dates. Even bottled water can go bad, so look for the stamped date on the containers. Experts recommend rotating your bottled water supply every six months. Sometimes canned foods don't have expiration dates or have dates that aren't legible. So how to tell if the food is still good? According to the USDA, high-acid canned foods such as tomatoes and pineapple can be stored for a



year to 18 months. Low-acid canned foods such as meat, fish and most vegetables will keep two

to five years if stored properly. You should also physically examine the contents of your stockpile. Check that none of your boxes or food containers have signs of pests or have been crushed or have opened. On cans, look for rust, bulging, dents or leaks. www.getreadyforflu.org/clocksstocks

Sniffle or Sneeze? No Antibiotics Please

CDC Advises Parents About Colds, Flu and Antibiotics

Get Smart About
Antibiotics Week
November 14-20, 2011

GET SMART
Know When Antibiotics Work



The Centers for Disease Control and Prevention (CDC) has a reminder for parents this cold and flu season: antibiotics don't work for a cold or the flu. Antibiotics kill bacteria, not viruses.

And colds, flu and most sore throats are caused by viruses. Antibiotics don't touch viruses — never have, never will.

But tell that to parents seeking relief for a child's runny nose. Research shows that most Americans have either missed the message about appropriate antibiotic use or they simply don't believe it. It's a case of mistaken popular belief winning out over fact. According to public opinion research, there is a perception that "antibiotics cure everything."

Risk of Antibiotic-Resistance

The problem is, taking antibiotics when they are not needed can do more harm than good. Widespread inappropriate use of antibiotics is fueling an increase in drug-resistant bacteria. And sick individuals aren't the only people who can suffer the consequences. Families and entire communities feel the impact when disease-causing germs become resistant to antibiotics.

The most obvious consequence of inappropriate antibiotic use is its effect on the sick patient. When antibiotics are incorrectly used to treat children or adults with viral infections, such as colds and flu, they aren't getting the best care for their condition. A course of antibiotics won't fight the virus, make the patient feel better, yield a quicker recovery or keep others from getting sick.

So what can you do? For upper respiratory infections, such as sore throats, ear infections, sinus infections, colds, and bronchitis, try the following: get plenty of rest, drink plenty of fluids, use saline nasal spray or cool mist vaporizer and avoid exposing your child to second-hand smoke. Soothe a sore throat with ice chips. Discuss over-the-counter options for your child with your pediatrician such as pain relievers, lozenges and decongestants. Viral infections may sometimes lead to bacterial infections. Patients should keep their doctor informed if their illness gets worse or lasts a long time.

People of all ages can lower the risk of antibiotic resistance by talking to their doctors and using antibiotics appropriately during this cold and flu season. And of course, flu vaccine can help reduce you family's chances of getting the influenza virus.

www.cdc.gov/getsmart

