Latinos and Hispanics in Dietetics and Nutrition

a member interest group of the Academy of Nutrition and Dietetics

Adelante LAHIDAN

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Message from the Editor

Zachari Breeding, RDN, LDN

Bienvenidos!

We at Latinos and Hispanics in Dietetics and Nutrition (LAHIDAN) understand the importance of integrating different cultural practices, traditional cuisines, and various languages to achieve a common goal. After all, that is the basis of LAHIDAN. However, many nutrition professionals fail to consider these issues outside the Latino and Hispanic dietetic community. That thought brings us to our issue's theme: **Diversity**.

There are differences among the various Latino and Hispanic cultures, but nutrition care for all of these populations has never been more important. Hispanics are more likely to be affected by obesity than are non-Hispanic whites. The most recent United States census shows that more Latinos and Hispanics are living in the United States than ever. Inevitably, this means that more registered dietitian nutritionists (RDNs) are working with clients from these cultures. Providing optimal nutrition care to this population requires understanding of their specific needs. As we know, dietary compliance is maximized when clients feel they are not giving up the foods they love.



In this issue, we introduce you to our new website through the Academy of Nutrition and Dietetics, EatRightLAHIDAN.org. Our Chair takes a closer look at the dietary guidelines from the perspective of the Latino and Hispanic community. One of our non-Hispanic members relates her experiences in working with the Latino and Hispanic population. We then take flight to Guatemala to discuss the cuisine and culture of these fantastic and beautiful places. Because our members are our life force, we introduce you to two dietitians who are making strides in the Latino and Hispanic community. Finally, who produces a nutrition newsletter without food? We seek to warm your soul with hearty recipes contributed by our members.

We hope you enjoy this issue of Adelante. We are very proud to be a part of the movement to bring nutritious solutions to all within the Latino and Hispanic community. Feel free to contact LAHIDAN if you have questions or if you are interested in being published in our next issue!

Saludos,

2014 FNCE Update

Violeta Nieves



Violeta Nieve

I am very blessed to have been able to attend the Academy of Nutrition and Dietetics Food & Nutrition Conference & Expo (FNCE®) in Atlanta, Georgia. Thank you to the

LAHIDAN Student Scholarship for providing financial support, which enabled me to be part of this great experience. Since I am constantly striving to gain knowledge and improve as a future registered dietitian nutritionist (RDN), attending FNCE this past October gave me the opportunity to enjoy

discussions on future careers, interactive seminars, and most importantly, the opportunity to network with colleagues.

Of all the sessions I attended, the most interesting to me was "Worksite Wellness: RDNs Are You Ready? Big Business Calling." The RDNs who presented were former high school friends who work in the same city and used the valuable skill of networking to build their business. They recommended each other for paid services, enabling both RDNs to become more successful. I learned an extremely valuable skill, which is always to network with people because we never know who may help us build our careers.

Their speech keyed on the growing obesity epidemic in America and how RDNs can have a positive influence on improving health within the worksite setting. They supported their presentation with research and data from credible resources.

This lecture also covered the different career paths available to RDNs. I thought that a career in corporate wellness sounded very interesting. Also, the traditional path of a clinical dietitian appeared to be a great avenue to explore. Due to relatively low supply and growing demand for dietitians, I feel fortunate to be part of a growing field.

Looking Forward to Seeing YOU in Nashville at FNCE 2015!

Would you like to volunteer or work with LAHIDAN during the Conference?

Email us at LAHIDANEC@gmail.com!





Review: The USDA Dietary Guidelines from the Latino Point of View

Sylvia Klinger, MS, RD, LDN, CPT



Sylvia Klinger, MS, RDN, LDN, CPT

As the Dietary Guidelines debate winds down, the Academy of Nutrition and Dietetics member interest group of Latinos and Hispanics in Dietetics and Nutrition (LAHIDAN) would like to provide commentary on

behalf of the Latino community, especially because choosing between what's healthy and what's familiar can be a tremendous struggle for this population.

Latinos bear one of the heaviest burdens of obesity in the country (1). Thus, now more than ever, developing healthier habits is important. This will take a little bit of reprogramming, some planning, and whole lot of patience. It also requires access to the right information, nutrition education, and learning to practice moderation.

Following are a few tips to consider including during the development of the next set of Dietary Guidelines for Americans tailored for the Latino community in the United States.

· More Isn't Always Better: In today's world, creating a "moderate portion size" when serving food requires work. For people who are not active, larger portions can add extra calories and weight. Although saying no to a plate full of abuelita's most delicious platillos is easier said than done, watching food intake is vitally important. Latinos should be encouraged to continue having their favorites, but eat smaller portions, such as half now and saving the rest for later.

When served a large dish, remember to stop eating when you feel satisfied, not full, and take the rest home or share the dish with someone else at the table. Finally, remember to treat yourself only occasionally.

- Information is Power: The first step to making better choices is to gather all the right information. Today more than ever, many Spanish-language resources offer important information. For example, MiPlato (2) and the Academy of Nutrition and Dietetics' "MyPlate. How do I rate?" toolkit (3) show how healthy servings look on a plate. Further, many resources (3) review the types of physical activity that burn off calories. Latinos should be aware of these resources.
- · It's All About Choice, Variety, and Balance: A healthy mind and body needs foods from each of the food groups. What's more, we need a variety of foods from within each food group for optimal health. We always hear that we need to eat more fruits and vegetables, but we must think beyond carrots and broccoli. When talking to Latinos, we can move to jicama, sweet peppers, and pumpkin, which not only are good for us but are more culturally appropriate to a Latino audience. It's important to exchange unhealthy fats (saturated and trans fats) for heart-healthy fats like low-fat dairy, avocado, raw nuts, and salmon. When cooking, low-fat Greek yogurt can replace cream, and food can be seasoned with more garlic, onions, sweet and hot peppers, different herbs and spices, and even lemon and lime juice instead of salt.
- Move Those Hips: Make a habit out of exercising. Moving for a half hour each day can make a difference. There's no reason for that half hour not to be fun: playing and dancing salsa or bachata in front of the stove while cooking dinner, playing with the kids outdoors for a few minutes, or walking to do errands. Regular exercise makes the heart and bones stronger and helps maintain a healthy weight. Hispanics can enjoy videos and learning active games to play with the kids that show how they can burn off calories while enjoying fun, everyday activities.
- Be a Role Model: Latino parents are motivated to provide the best for their families. Citing healthy eating as a parenting strategy can help encourage moms and dads to be role models by filling the dinner plate to look like MiPlato with more vegetables or to choose healthy snacks like yogurt with fresh fruit. Putting a focus on family and mom and dad as role models can lead to changing the eating habits of the whole family.

Changing habits is never easy, but it does not necessarily have to be hard. Small changes that are culturally sensitive and allow room for enjoying favorites in moderation is key to helping Latinos stay healthy every day while having fun in the process.

- 1. http://www.cdc.gov/obesity/data/ prevalence-maps.html
- 2. http://www.choosemyplate.gov/ en-espanol.html
- 3. http://www.eatrightfoundation.org/ Foundation/content.aspx?id=6442481455

Editorial: Jumping Obstacles to Close the Gap

Rebecca A. Sparks, MS, RD

Working with different cultural groups is part of the responsibility of a community registered dietitian nutritionist (RDN). We live in a multicultural, multiethnic world that necessitates understanding of both our similarities and differences. As a non-Latino Head Start Nutrition Consultant in New York City, I provide nutrition education and counseling to many Latino families of various origins, including Puerto Rico, Dominican Republic, Mexico, and Ecuador. This can be a challenge, but mostly it has been a great learning experience for me.

Hearned Spanish in Spain many years ago, not through classes, but via the daily experience of having to communicate in a foreign country where most people did not speak English. Living and working in New York City has afforded me many experiences to practice speaking Spanish and has helped me maintain a good level of proficiency. My Spanish is by no means perfect, but I understand and can communicate well enough. Sometimes my lack of language expertise helps to lower barriers and build self-efficacy among my clients because I need their help as they need mine. Being fluent in Spanish is an asset, but RDNs who do not speak Spanish can still communicate with the help of a translator. Learning some key words shows clients that you are interested in them and their culture.

When working with people of different cultures, the most important factor is to respect those with whom you work and to build mutual trust. It is also important to become culturally competent. The first step is to understand your own culture, including your biases, prejudices, and assumptions. The next step is to understand the cultures of your clients, including their attitudes toward health, food choices, and eating patterns. RDNs must be motivated and interested in working with others: learning, accepting, and respecting who they are and recognizing that we are all human beings with more similarities than differences.

Working with children is a joy. They don't care who you are, as long as you are happy to see them. One of my favorite experiences is walking into a classroom of 3- to 4-year-olds and having them all come up to meet me and hug my knees. What can be more joyful? Teaching the children about new food is also fun as we make up stories together to make these new foods acceptable. I was teaching the children about hummus and one child said she didn't like beans. So, I called the hummus magic bean dip. The little girl was now willing to try it. She liked it, but she stated she still did not like beans.

Working with parents and grandparents can be more challenging. In nutrition education, it is important to know which foods are eaten in which countries and their Spanish names, which vary from country to country. Beans can be frijoles, habichuelas, ejotes, or habas. When introducing new foods, it is beneficial to include some foods that are similar and some that are new to your audience but part of an affordable healthy American diet. Quinoa can be part of the diet of clients from Ecuador and other parts of South America that is often used in soup. However, it is unknown in the Caribbean. Black beans and pinto beans are more common in one culture, whereas red beans are consumed in another culture. It is our job as educators to make learning about new foods part of the adventure of eating.

When counseling, it is important to ask the right questions and to make sure that clients understand the advice that you are giving. Often when you ask if they understand, the automatic reply is yes, but that does not necessarily mean they understand or plan to make changes. I often use the talk back method, asking politely for them to repeat what I said and reiterate the goals that we have set to make changes. This helps to ensure that we are all on the same page.

Another important aspect of counseling is to understand the family dynamic and how

it affects food choices. Oftentimes grandmothers support the family by providing child care. Grandmothers are more likely to feel that a healthy child is a plump child and may overfeed children, especially with sweets and cakes. Typically I consult with the mother, and she frequently finds it impossible to contradict her own mother or mother-in-law. In these situations, the best approach is to counsel the grandmother as well. Sometimes, especially with Mexican families, both the mother and father come in to speak with me, and a Mexican father may find it difficult to take the advice of a white female RDN. My approach is to show a lot of respect for the father, developing trust and helping him to understand that we all want what is best for the child and the family. Often when one of my suggested strategies works, the family is more willing to try other ideas.

Many second-generation families have learned about healthy meals, and when you ask them about a typical day's eating, their example is a perfectly health meal plan. However, a 3-year-old child following such a plan should not weigh 75 lb. Asking the right questions may reveal the true eating pattern, but in many cases, the RDN never gets the truth. In this case, the best approach is to repeat some suggestions and hope that the mother will try to make some changes. For the mother who is very resistant to change, I try to find areas where I can praise her efforts and continue to make myself available for her if and when she is ready to try something new. Understanding that change is very difficult for most people and being sympathetic is key.

All in all, you must love what you do and love the people with whom you work.
Caring goes a long way. Nothing feels better than learning that a client has followed through, made changes, and seen positive results. That makes it all worthwhile.

Volunteering and Leading Through Mentoring

Julie Plasencia, MS, RDN



Julie Plasencia, MS, RDN

The journey toward becoming a registered dietitian nutritionist (RDN) is not a solitary one. Many of us have received encouragement, support, and tough love from instructors,

colleagues, supervisors, and friends. Throughout our careers, no matter at what stage, formal and informal mentors guide us through a variety of professional situations, such as job searching or improving communication skills. This article provides a glimpse of mentoring activities within Latinos and Hispanics in Dietetics and Nutrition (LAHIDAN).

As LAHIDAN grows, so does peer mentoring among its members, particularly the Executive Committee. As new Executive Committee members begin their terms, they are mentored by those who previously held the same positions. For example, one responsibility of the Chair Elect is to organize the Academy of Nutrition and Dietetics Food & Nutrition Conference & Exhibition (FNCE®) reception for the following year. Navigating through the forms and sponsor contracts can be daunting, but the Chair who completed that particular task the previous year offers knowledge and recommendations to ensure continuity and the success of the event. Another great example of mentoring is the Executive Committee Meeting held at **FNCE** where former LAHIDAN Executive Committee members and Academy leaders are invited to provide input as the next year's program of work is presented.

These types of relationships are also embodied in our student mentoring program. Our program is available to all of our members, including mentors/ mentees of non-Latino/Hispanic heritage. Mentors share with mentees experiences that helped them achieve success as well as facts that the mentors would have wanted before making important decisions in their careers. My past mentees have often faced challenges to which I can relate and asked the same questions that I had early in my career: How soon should I make contact with the internship director of my top choice? Can I ask for a better salary because I am bilingual? How do you decide between two job offers? Having students and early career professionals reach out to established RDNs when they are facing a professional situation for the first time makes all professionals feel valued as role models.

The current LAHIDAN mentoring program cohort of 17 students was asked to rank topics on mentoring generated from responses to open-ended questions by prior mentees. The following are the top five topics in which this cohort was interested:

- 1. Guidance on cultural aspects of being an RDN (n=10)
- 2. Networking (n=10)
- 3. Leadership (n=9)
- 4. Guidance on the internship application and selection process (n=8)
- 5. General career guidance (n=6)

Many students want to know what unique opportunities are available to RDNs who are of Hispanic/Latino heritage. One of the most common interests of students is to hear others' stories, "What have you gone through to obtain their dream?" Your perspective on this and other topics may provide students with important information they may not be able to obtain

from family members or their institutions. An important aspect of the LAHIDAN mentoring program is that it is student-led, which means that students reach out to their mentors to ask questions and follow up on conversations. Guidelines for these communications are provided to demonstrate professionalism and enhance their networking skills.

Without mentors, this program would not be possible. I would like to thank current and past mentors for volunteering their time and sharing their knowledge with our students, but this is a two-way street. Busy professionals may not always have time to find the most recent references for a presentation or create a new patient handout. Students are often searching for opportunities to showcase their skills, and small tasks can provide a valuable opportunity to enhance their portfolio as they advance to the next step in their career. Without much effort or time, mentors naturally role-model leadership skills.

The biggest reward of being a mentor is the feeling of pride in giving back to the profession and playing a positive role in a student's professional growth and journey. The mentor/mentee relationship also provides professional development opportunities in communications skills, networking, and leadership. These happen to be the exact skills we look for in LAHIDAN leadership positions. By mentoring relationships at both student and leadership levels, our Member Interest Group will continue to grow and accomplish our goal of "identifying, mentoring and supporting promising future Latino/Hispanic dietetic practitioners."

Volunteer of the Year: Alixs Tahia Agamez Florez

The Volunteer of the Year Award was created in 2014 by the Latinos and Hispanics in Dietetics and Nutrition (LAHIDAN) Executive Committee to acknowledge the hard work of its volunteers. "We have volunteers who work really hard to help us move LAHIDAN along and they deserve to be recognized," says Sandra Arevalo, MPH, RDN, CDE, CDN, and LAHIDAN Past-President. Award selections are based on the nominee's volunteer efforts and commitment of time, accomplishments, community impact, and enhancement of LAHIDAN. Nominees must have been engaged for a minimum of 6 months in nonpaid volunteer activities that benefited the LAHIDAN community in a substantial, important, or unique way.

This year's Volunteer of the Year Award was presented to Alixs Tahia Agamez Florez. She dedicated 1 year of her time to LAHIDAN in helping to find the links that now comprise the Resources page in our website. She verified that the links were informative and relevant for fellow registered dietitian nutritionists (RDNs) as well as patients.

Born and raised in Monteria, Colombia, Alixs earned her Bachelor's in Nutrition and Science at the Universidad Metropolitana in Barranquilla, Colombia. She gained 3 years of experience working in private practice and at the Rotary Club
Barranquilla in the Comprehensive Lip and
Palate Rehabilitation Center, for which she
was a spokesperson. After moving to
Bogota to improve her future potential,
she worked for 5 years in foodservice. She
reports that coming from a little town to
the big city was an amazing experience as
well as a big challenge, but she knew there
was more to come.

She moved to the United States, married a wonderful man, and gave birth to two handsome boys to whom she has dedicated her last 10 years while working as a volunteer. During that time, she also completed her dietetic internship and received a certification from Ashworth University as a Professional Nutrition Specialist. Since then, she has volunteered for the American Red Cross and FLIPANY Cooking Matters. She provided nutrition education in Spanish and English to children, adults, and families, teaching low-income participants how to make healthy food choices and helping families improve their ways to shop, cook, and eat.

Alixs has also volunteered for the Palm Beach Health Department of Florida, from which she received a Certification of Appreciation in 2011 and 2012. She also received the Women, Infants and Children Breastfeeding Peer Counselor Award and a Center Award from the Florida Health Palm Beach County in 2013. During her volunteer service in the Health Department, Alixs realized that her true passion is community service. She loves and enjoys helping others, especially the Latino population because "they need that interpreter and that person who understands and cares for them."

Recently she started working full time as a Community Connector in Molina Healthcare doing advocacy for its members. She provides nutrition education and mental health and social work support. Her clients report that they "are happy to find that person who speaks for them and helps them navigate the health system, receiving the feeling that somebody cares for them on their physical and psychological health so that they don't feel alone anymore."

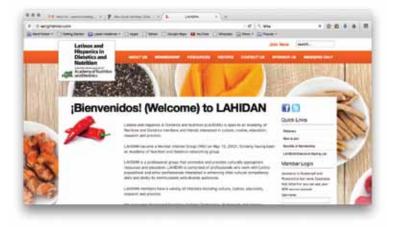
Alixs states that she loved her volunteer activities for LAHIDAN, which gave her the opportunity to discover resources for health and nutrition topics and helped her to refresh her knowledge on various nutrition subjects. In addition, she made new friends who share her passions.

The NEW EatRightLAHIDAN!

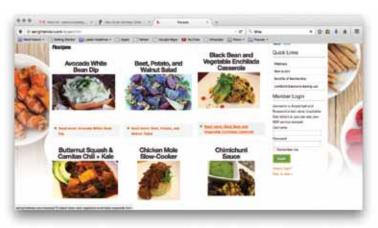
Zachari Breeding, RDN, LDN

As you may have noticed, our website through the Academy of Nutrition and Dietetics has undergone significant change. We worked with our sponsors, members, and friends within the Academy to bring more resources, recipes, and overall content to the website. Our goal was simple: Make EatRightLAHIDAN the best source for acquiring the most accurate and informative material to help those within the dietetic community optimize nutrition care to patients and clients. Let's take a look at the biggest changes to the website.









Our Home Page

Our new and improved home page features slick design and easy navigation to all of the content on the website. The "Join Now" link allows any member of the Academy to become part of our growing community. There is also a link to LAHIDAN Members Only content that becomes available to users who log in with their Academy ID. Visitors may also make a contribution to the Academy Political Action Committee at the bottom of the page.

Our Resources Tab

With the help of members, volunteers, sponsors, and our Executive Committee, we have amped up the types and amount of resources available to you. Featured content includes information on a variety of diseases and conditions (see image), educational tools to assist providers, handouts for patients and clients, and free webinars with available CEUs. More content in all of these areas will be forthcoming. Be sure to check out this tab regularly to partake in all that this section has to offer!

Our Recipes Tab

One of the newest features on the new website is a Recipes section. Recipes range from traditional dishes with healthy twists to new recipes that use ingredients familiar to the Latino and Hispanic community. All of the recipes have been tested by dietitians and professional chefs to ensure accuracy and palatability. New content is uploaded periodically, and we invite members to submit recipes to enhance this section.

Visit the new EatRightLAHIDAN.org today and check out all of these changes. We hope the new content provides you with the information you need to enhance your nutrition care. We encourage you to submit any materials or recipes you may have to the Executive Committee for publication on the website by emailing LAHIDANEC@gmail.com.

Around Latin America: Guatemala

Toby Levin, Contributing Author

Capital City: Guatemala City

Currency: Quetzal

Average Climate/Topography: Outside of the sparsely populated northern lowlands, Guatemala is largely covered by mountains, with 37 volcanos, three of which are still active. The climate in the northern lowlands is tropical, with high heat and humidity. In the highlands, the climate is more temperate. Guatemala City, at just under 5,000 ft in elevation, sees average highs in the mid-70s to low 80s year round, with lows in the mid-50s. Higher elevations are colder.

Places of Interest: The most famous attraction in Guatemala is inarguably Tikal, the ruins of a Mayan city that dates back at least to the 4th century BC. Mayan ruins are

scattered throughout the country, although many have not been restored. Antigua Guatemala, commonly referred to as simply Antigua, is known for its well-preserved Baroque architecture and is home to many language schools, making it very popular with tourists. Natural areas are also popular, and companies offer guided hikes up all three volcanos overlooking Antigua. Lake Atitlán, the deepest lake in Central America, is also a popular destination. Most tourists avoid Guatemala City itself due to the widespread violence.

Cuisine: Traditional Guatemalan food is based on Mayan cuisine and includes corn, chili, and beans as its foundation. Tamales are traditional throughout Guatemala and vary according to location. The *masa* or dough of the tamale is made of corn,

potatoes, or rice and the stuffing may be made of vegetables or meat. Some variations include tamales colorados, made with tomatoes, bell peppers, and meat, and chuchitos, a smaller version of the more widely known Mexican-style tamale. There are many variations on traditional Mexican dishes, such as chiles rellenos, mole de platanos (fried plantains in a savory cocoabased sauce), and chicharrónes (fried pork skins). Tortillas are part of most meals. Chicken, turkey, and beef, the most popular meats, are often served grilled or in stews. Although Guatemalan coffee is considered to be some of the best in the world, Guatemalans typically drink instant coffee with lots of sugar. Sweet soft drinks are also popular.

Meet Our Members: Nicole Patience, MS, RDN, LDN, CDE



Nicole Patience, MS, RDN, LDN, CDE

Nicole Patience has taught classes and counseled clients with diabetes in Spanish since 2006 and was credentialed as Spanish language-proficient by the Temple Health System. She works at

Bryn Mawr College as a Nutrition Counselor and Consultant to Dining Services. Nicole supports students who have disordered eating, food allergies, diabetes, and weight management goals and is active on the college's Body Image Council. She serves on the Nutrition Committee for the National Association of College and University Food Services (NACUFS). Nicole graduated with an M.S. in Nutrition from the Pennsylvania State University and a B.S. from the University of Wisconsin-Madison. She studied abroad, volunteered, and traveled in Spain, Mexico, Puerto Rico, Ecuador, Chile, and Peru. Through these experiences, she developed a strong respect for the Latino culture and a passion for educating her Spanish-speaking clients. In 2014, she taught a *Spanish for Dietitians* course at

Immaculata University and co-presented a *Spanish for Dietitians* workshop at the Pennsylvania State Academy meeting. Nicole continues to develop interactive workshops that foster cultural understanding and language communications between non-native Spanish-speaking registered dietitian nutritionists (RDNs) and Latino clients. Participants include RDNs who have a wide range of Spanish proficiency. Workshops role-play dietetic clinical and counseling client-interactions and explore cuisine unique to each country.

Meet Our Members: Alexandria Wolz



Alexandria Wolz

Alexandria moved to Philadelphia from San Francisco slightly more than 3 years ago as an aspiring registered dietitian nutritionist (RDN). She is now in her senior year of the

Didactic Program in Dietetics at Drexel University and hoping to match with a dietetic internship this coming spring. Alexandria works part time with Eat.Right.Now, bringing nutrition education to various schools around Philadelphia for grade levels kindergarten through high school. In addition, she spent 6 months working as a Cooperative Intern for The Sage: Nutritious Solutions and at Drexel Medicine's Cystic Fibrosis Clinic.

Alexandria has a passion for sharing and helping people improve their lives through nutrition and is an avid promoter of physical activity. She trains in Muay Thai boxing and enjoys daily runs along Kelly Drive in Philadelphia. Her career path began with enthusiasm for performance and sportsrelated nutrition, but her experiences along the way have opened possibilities in other areas of dietetics. The need for health care that caters to the elderly is increasing as the older adult population is growing. Her time spent volunteering at the Community Living Center of the Philadelphia Veterans Administration has sparked Alexandria's interest in long-term care and assisted living.

Alexandria grew up in a diverse urban environment, and she continues to work with diverse urban populations in the schools where she teaches nutrition lessons and at the hospitals where she shadows and volunteers. Her knowledge of various Latin

foods (and even her nominal ability to understand and speak Spanish) has been beneficial. Earlier this year, Alexandria attended an amazing seminar at Pennsylvania Academy of Nutrition and Dietetics' yearly expo — Spanish in Dietetics. The seminar inspired her to learn more about ways to break through language and other cultural barriers that may inhibit effective nutrition counseling. She believes that being culturally competent is absolutely essential to providing excellent dietetic services. Alexandria joined LAHIDAN to broaden her network and access to dietetic resources. Her point of view is that even if we can't speak all the languages, RDNs and future RDNS should speak fluently in the foods of the world.

Learn more about Alex at www.The-Sage.org.

Meet Our Members: Andrea Hinojosa



Andrea Hinojosa

Andrea Evelyn Hinojosa was born in La Paz, Bolivia. She is an undergraduate student on the Dean's List going into her third year at Dominican University, River

Forest, Illinois, majoring in Nutrition and minoring in Social Justice and Civic Engagement and Business Administration. She is involved in nine organizations, including Nutrition Club and Organization of Latin American Students.

Andrea also works at Dominican University's Crown Library, is a Noble Mentor at The Associated Colleges of Illinois, participates in Dominican's Peer Advising Program, and holds a job at Bacci Pizzeria. She received the Golden Star Award both years at Dominican University. This award honors students who have supported Dominican's mission and values during the current academic year: to pursue truth, to give compassionate service, and to participate in the creation of a more just and humane world.

During her schooling, Andrea traveled to Cuba and Haiti, where she studied the power of food in these countries compared to the United States. She described her research and experience at the Global Learning Symposium at Dominican. She also conducted undergraduate research on why most diets fail. She plans to continue her research on the power of food by doing a service trip after college in Central or South America.

Recipe Corner: Black Bean "Mud" Soup

Christy Wilson, RD www.christywilsonnutrition.com

Servings: 8-10 people
Cooking Time: 30 minutes

Ingredients -

4 oz pancetta (Italian bacon), diced

1 small yellow or sweet onion (1½ - 2 cups diced)

1 red or yellow bell pepper, diced

1-2 cups mushrooms, chopped

5 cloves garlic, smashed and minced

1 tablespoon tomato paste

1 teaspoon ground cumin

½ teaspoon paprika

1/4 teaspoon chili powder

1 (32 oz) box low-sodium chicken or vegetable broth

1 (14.4 oz) can diced tomatoes (or fire-roasted)

2 teaspoons Worcestershire sauce

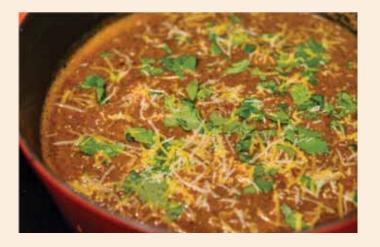
4 cans black beans, drained and quickly rinsed

Salt and pepper to taste

About 1 bunch (at least 1 cup) chopped cilantro

Juice from 3 key limes, or more to taste

Garnish: Grated cheddar cheese and sliced avocado



Directions

- 1. Put bacon in a warm large heavy pot. Heat over medium heat until bacon cooks and starts to give up its fat, about 5 minutes.
- Add onions and peppers and cook for about 3 minutes until onions are translucent. Add mushrooms and garlic and cook for a few minutes until you smell the garlic and the mushrooms begin to soften. Stir to combine all vegetables.
- 3. Add tomato paste, cumin, paprika, and chili powder. Allow the paste to melt into the vegetables and seasonings to coat them.
- 4. Add broth, tomatoes, and Worcestershire, then stir in beans and increase heat setting. Once ingredients come to a boil, lower heat to keep the soup simmering for about 10 minutes. Add salt and pepper to taste.
- 5. While ingredients simmer, rinse cilantro and pick leaves off of thick stems. Coarsely chop leaves and stir all but a few tablespoons (which you'll use for garnish at the end) into the soup after it has been simmering and has thickened. Stir in lime juice.
- 6. Using an immersion blender, puree all (or most) of the soup directly in the pot.*
- 7. Top soup with grated cheese, sliced avocado, and cilantro.

*If you do not have a hand-held immersion blender, carefully transfer soup to a blender or food processor to puree ingredients. Add blended soup back into the pot and serve as directed.

Nutrition Information per serving:

Calories 230 Protein 14 g

Total Fat 4.5 g Sodium 420 mg Total Carbohydrates 33 g

Cumin Spiced Pumpkin & Lentil Salad

Preparation Time: Approximately 10 minutes Approximately 45 minutes Cooking Time: Serving Size: 1 cup, Serves approximately 6

Ingredients -

10 oz arugula

2 cups green lentils

6 cups pumpkin, peeled, seeded, and diced into 1-inch pieces

2 tablespoons olive oil

2 teaspoons ground cumin

1 teaspoon paprika

½ teaspoon salt

1 cup soft goat cheese, crumbled

3 tablespoons extra virgin olive oil

1 tablespoons red wine vinegar

1/4 teaspoons salt

1/4 teaspoons black pepper

1/4 cup mint leaves, minced



Directions

Preheat oven to 375°F.

To prepare lentils: Place lentils in small bowl. Cover with cold water and soak 10 minutes; drain. Cook lentils in boiling salted water until tender but firm, about 30 minutes. Drain lentils, rinse under cold water, and drain again.

To prepare pumpkin: Place pumpkin in large bowl; toss with 2 tablespoons oil, cumin, paprika, and salt. Arrange pumpkin in single layer on baking sheet. Roast 30 minutes or until tender, turning pumpkin over once.

Combine lentils and pumpkin. Meanwhile, whisk together olive oil, vinegar, salt, pepper, and mint leaves and toss with arugula.

Turn-out and Storage

Place pumpkin-lentil mixture (warm or room temperature) on a small bed of arugula leaves. Sprinkle with goat cheese and serve immediately.

Pumpkin-lentil mixture can be stored up to 3 days under refrigeration. Dressing can be stored up to 7 days under refrigeration.

Find more recipes like these at www.eatrightLAHIDAN.org!

Esquina del Sabor Sopa de Frijoles Negros "Embarrados"

Porciones: 8-10 personas
Tiempo de Cocción: 30 minutos

Ingredientes

4 oz pancetta (tocino italiano), en cubos

1 cebolla amarilla pequeña (1½ - 2 tazas, en cubos)

1 pimiento dulce rojo o amarillo, en cubos

1-2 tazas de hongos, cortados

5 dientes de ajo, cortados finamente y machacados

1 cucharada de pasta de tomate

1 cucharadita de comino

½ cucharadita de paprika

¼ cucharadita de chile en polvo

1 (32 oz) caja de caldo de pollo o vegetales bajo en sodio

1 (14.4 oz) lata de tomates picados en salsa italiana (o rostizados)

2 cucharaditas de salsa Worcestershire

4 latas de frijoles negros, escurridos y lavados

Sal y pimienta al gusto

1 manojo de cilantro (aproximadamente 1 taza)

Jugo de 3 limones, o al gusto

Decoración: Queso Chedar rallado, cilantro picado y aguacate en tajadas



Instrucciones

- Ponga el tocino en un sartén grande y pesado. Caliéntelo a fuego medio hasta que el tocino se cocine y comience a soltar la grasa, como por 5 minutos.
- 2. Añada cebolla y pimientos dulces y cocine por otros 3 minutos o hasta que la cebolla esté translucida. Agregue los hongos y el ajo y cocine por unos pocos minutos hasta que huela a ajo y los hongos comiencen a ablandarse. Revuelva para combiner bien todos los vegetales.
- 3. Añada pasta de tomate, comino, paprika y chile en polvo. Deje que la pasta se disuelva en los vegetales y aliños para cubrirlos.
- 4. Añada el caldo, tomates y salsa Worcestershire, luego añada los frijoles y aumente el fuego. Una vez que los ingredientes empiecen a hervir, baje la tempertura para que la sopa herva a fuego lento por 10 minutos. Añada sal y pimienta al gusto.
- 5. Mientras que los ingredients herven a fuego lento, enjuague el cilantro y corte las hojas de las ramas. Corte las hojas y separe algunas para usar al final para decorar el plato. Añada el cilantro al sartén cuando la sopa haya hervido por un rato y esté espesa. Agregue el jugo de limón.
- 6. Usando una licuadora de mano, licúe la sopa (o parte de ella) directamente en la olla.*
- 7. Sirva la sopa con queso rallado por encima, aguacate en tajadas, y cilantro picado

^{*}Si usted no tiene una licuadora de mano, puede usar la licuadora regular. Vacié la sopa cuidadosamente en la licuadora o en un procesador de alimentos. Devuelva la sopa a la olla y sirva siguiendo las instrucciones.

Ensalada de Calabaza con Comino y Lentejas

Tiempo de Preparación: apróximadamente 10 minutos Tiempo de Cocción: apróximadamente 45 minutos

Tamaño de la Porción: 1 taza

Porciones: apróximadamente 6 porciones

Ingredientes

10 onzas rúcula

2 tazas lentejas verdes

6 tazas calabaza, pelada, sin semillas y cortada en dados

2 cucharadas de aceite de olivas

2 cucharaditas de comino molido

1 cucharadita de paprika

½ cucharadita de sal

1 taza de queso de cabra fresco, desmenuzado

3 cucharadas de aceite de olivas extra virgen

1 cucharadas de vinagre de vino tinto

1/4 cucharadita de sal

¼ cucharaditas de pimienta negra

1/4 taza de hojas de menta, picadas



Instruccione -

Precaliente el horno a 375°F.

Para preparar las lentejas: Coloque las lentejas en un recipient hondo pequeño. Cúbralas con agua y déjelas remojar por 10 minutos; escúrralas. Cocine las lentejas en agua hierviendo con sal hasta que estén blandas pero firmes, aproximadamente 30 minutos. Escurra las lentejas. Enjuáguelas con agua fría, luego escúrralas de nuevo.

Para preparar la calabaza: Coloque la calabaza en un recipient hondo grande; revuélvala con 2 cucharadas de aceite, comino, paprika y sal. Coloque la calabaza en una capa sobre una bandeja para hornear; ásela en el horno por 30 minutos o hasta que ablande, volteando la calabaza una vez.

Combine las lentejas y la calabaza. Mientras tanto, bata el aceite de olivas, vinagre, sal, pimienta y las hojas de menta; añada la rúcula.

Resultado y Almacenamiento

Coloque la mezcla de calabaza y lentejas (caliente o a temperature ambiente) sobre hojas de rúcula. Salpíque con el queso de cabra y sirva inmediatamente

La mezcla de calabaza y lentejas puede guardarse hasta por 3 días en el refrigerador. La salsa se puede guardar hasta por 7 días refrigerada.

For translations contact Sandra.Arevalo.RD@gmail.com!

Policy News

Teresa A. Nece, MS, RDN, LD, SNS, Director, Grassroots Advocacy

Strengthening Programs that Affect Children's Nutrition

The Academy of Nutrition and Dietetics Child Nutrition Reauthorization Work Group, which is tasked with creation of the Academy's recommendations for improving and supporting child nutrition programs, has begun their work with the review of the Special Supplemental Nutrition Assistance Program for Women, Infants and Children (WIC), Child and Adult Care Feeding Program, and Farm to School Program. The Work Group has also discussed, in detail, the important role and benefit of nutrition education to children's health. These programs are vitally important to the health of millions of children from before birth through young adulthood. To refresh your memory on the reach, impact, and benefits of these programs, please see the handout that is posted in the Public Policy Panel COI, Child Nutrition Reauthorization Work Group topic

The Work Group also is beginning their discussion of school nutrition programs. To review those programs, an infographic titled Healthy Schools Raise Healthy Kids from the Academy is also posted on the Public Policy Panel COI, Child Nutrition Reauthorization Work Group. A copy on the Academy's website can be found at http://www.eatright.org/Public/content.aspx?id=6442482994.

Congressional Briefing to Discuss the Importance of Diabetes Screening and Prevention

In November 2014, the Congressional Diabetes Caucus hosted a briefing entitled *Diabetes: The Importance of Early Detection and Prevention.* Topics included translating research into practice, transforming the health care system, diabetes screening, and the importance of elevating and coordinating diabetes treatment efforts. The National Diabetes Clinical Care Commission Act also was discussed in a continued effort to pass the legislation during the lame duck session. The Academy will report in the future on highlights of the discussion and any follow-up activities.

USA Today Examines Underutilization of Obesity Treatment in Medicare

Despite the fact that 30% of Medicare beneficiaries are obese, a mere 1% is taking advantage of the intensive behavioral therapy for obesity benefit of the government program. In a recent article, *USA Today* confirmed that some of the most prominent problems in the United States could be ameliorated by the Treat and Reduce Obesity Act: "Experts blame the government's failure to promote the program, rules that limit where and when

patients can go for counseling and the relatively low level of reimbursement fees for providers." The Academy continues to work with Congress and with the Centers for Medicare and Medicaid Services to ensure that the most qualified and effective providers, including registered dietitian nutritionists, can independently provide and bill for these counseling services.

How to Contribute

Imagine the impact on our elected officials if they knew that all of our members support ANDPAC. If every member donated just \$10/year, ANDPAC would be one of the largest health care professional political action committees in the country! No Academy membership dues are funneled to ANDPAC, which is prohibited by law. On average, only 5% of Academy members support ANDPAC. As the Academy approaches its 100th Anniversary, this is the year to increase our membership involvement numbers! If you haven't supported ANDPAC in the past, now is definitely the time to make your voice heard. Please go to www.eatright.org/ ANDPAC and make a contribution today. Together we can celebrate our successes and enjoy this amazing time for all registered dietitian nutritionists.



By CanolaInfo

As a dietitian, you probably know canola oil is healthy and versatile, but perhaps not exactly why.

Canola oil is lauded for both what it *does* contain and what it *doesn't*. Of all common cooking oils, it has the most plant-based omega-3 fat (11 percent) and the least saturated fat (7 percent) – half that of olive oil (15 percent). Canola oil is also is free of *trans* fat, which the U.S. Food and Drug Administration (FDA) preliminarily ruled unsafe in 2013.

Heart-Smart Fat

"Since heart disease is the leading cause of death in the United States, it's critical to keep intake of saturated fat to 6-10 percent of total daily calories, depending on one's risk of heart disease, and to consume a moderate amount of healthy unsaturated fats instead," says Dr. Suzanne Steinbaum, cardiologist and director of the women's heart disease center at New York's Lenox Hill Hospital. "Canola oil is simply a smart choice as an everyday cooking oil."

In fact, the FDA authorized a qualified health claim* on canola oil's ability to reduce the risk of heart disease when used in place of saturated fat. Research has shown that the oil's high unsaturated fat content (93 percent) helps lower LDL cholesterol, thereby reducing the risk of cardiovascular disease. The unsaturated fats are made up of monounsaturated fat (61 percent) and polyunsaturated fats (32 percent). The latter category is comprised of alpha-linolenic acid, an omega-3 fat, and linoleic acid, an omega-6 fat.

"The types of omega-3 and omega-6 fats that are found in canola oil can be considered 'essential' in the diet because the body can't make them on its own," notes Roberta Duyff, M.S., R.D.N., author of the *American Dietetic Association Complete Food and Nutrition Guide*. "Canola oil is higher in the omega-3 alpha-linolenic acid than other common cooking oils so it's an easy way to get some of this often underconsumed fat in the diet."

A Plant All Its Own

Canola oil comes from the crushed seeds of the canola plant, which a member of the *Brassica* family that includes broccoli, cabbage and cauliflower. It was developed in Canada through traditional plant breeding to remove two undesirable components (erucic acid and

glucosinolates) found in rapeseed. To acknowledge these differences, the new plant earned a new name, canola – a contraction of "Canadian" and "ola" meaning "oil."

"Canola is often confused with rapeseed, but the two crops and their oils are distinctly different," says Minnesota canola grower Rob Rynning.

Indeed, there is an internationally regulated definition of canola that differentiates it from rapeseed based upon it having less than 2 percent erucic acid and less than 30 micromoles of glucosinolates (a bitter-tasting organic compound). Oilseeds that do not meet this standard cannot use the term "canola."

Rapeseed, although still grown in limited quantities in North America, is now confined to production under contract for specific industrial uses, Rynning notes.

Go-to Ingredient

Moreover, chefs consider canola oil a kitchen essential, too. Its neutral flavor, light texture and high heat tolerance (smoke point of 468 $^{\circ}$ F) make it a match for almost any culinary application.

"I love cooking with canola oil because it's incredibly versatile," agrees Nancy Hughes, a professional recipe developer and cookbook author. "I can use it for sautéing, searing, roasting, baking, stir-frying, vinaigrettes – you name it. The fact that it's healthy to boot makes my decision in the kitchen even easier."

*Limited and not conclusive scientific evidence suggests that eating about 1½ tablespoons (19 grams) of canola oil daily may reduce the risk of coronary heart disease due to the unsaturated fat content in canola oil. To achieve this possible benefit, canola oil is to replace a similar amount of saturated fat and not increase the total number of calories you eat in a day.

References:

- 1. U.S. Food and Drug Administration. 2006. Docket No. 2006Q-0091.
- 2. Lin L. Evidence of health benefits of canola oil. Nutr Rev. 2013;71(6):370-385.

canola oil. good for every body!™

Canolalnfo is the information source about canola oil for consumers, health professionals, chefs, media, educators—anyone who wants to know more about this oil.





Adelante LAHIDAN

Latinos and Hispanics in Dietetics and Nutrition Ann Arbor, MI 48113-0797

Credits

Editor

Zachari Breeding, RDN, LDN

Reviewers

Sylvia Klinger, MS, RD, LDN, CPT Sandra Arevalo, MPH, RD, CDE

Contact Information

Online: www.eatrightlahidan.org Email: LAHIDANec@gmail.com

Academy Staff

Katie Gustafson DPG/MIG Affiliate

Latinos and Hispanics in Dietetics and Nutrition



LAHIDAN Contact and Social Media Information:



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