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Healing, dancing, recruiting and crying

By Isabelle Southcott, Publisher | isabelle@prliving.ca

When the team at Powell River Living first started bouncing around the idea of creating a health and wellness magazine, it was met with a mix of excitement and trepidation. How could we turn a complicated, nuanced, wide-ranging and often controversial subject into something that would match the storytelling format that *Powell River Living* readers keep telling us they love so much?



and wellness” are inseparable from the community, we set out to expand on the theme. And, as usual, the story gods blessed us, and we found far more topics, profiles and stories than we had room for in our new magazine, *ZEST*.

Then two beautiful stories were dropped in our laps. The Stardusters Square Dance Club asked our help in creating a feature about their club. And then, veterinarian Bryce Fleming shared his story about how a cat helped his family heal from a tragedy.

Along the way I learned more about health and wellness and health care in Powell River. I discovered that nearly half of Powell River’s population is over 55 years of age and that within a decade we may need more than 1,000 supported nursing home and assisted living units. Information like this makes me pause and think about my future. Where do I want to live when I am older? What kind of treatment options will be available? What will health care look like in the future?

Neither was a doctors-pills-and-surgery type of health story. But they both were clearly still health and wellness stories. Plus they were the kind of stories we love – they help us know our community better, and in the case of Bryce’s story, I cried all three times I read his story.

Just as health care has changed over the years so has seniors housing and leisure time activities. Total health involves our physical, emotional and spiritual selves, for they are connected on so many different levels and having a healthy soul is just as important as having a healthy body. 

Armed with these two beautiful examples of how “health

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ON THE COVER

Swirling colours of square dancing, captured in digital art.

Publisher & Managing Editor • Isabelle Southcott
Associate Publisher & Sales Manager • Sean Percy
Editor & Graphic Design • Pieta Woolley
Sales • Suzi Wiebe



Southcott Communications
7053E Glacier St, Powell River BC V8A 5J7
isabelle@prliving.ca • tel 604 485 0003

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Showcasing the best of Powell River

Aging Boomer. Tsunami

by Rita Boehler-Wiebe, B.Env.D., M.Arch.

I received an email with the subject line, "Kicking Age Myths." It's a collection of photos: seniors doing extraordinary things, such as James Arruda who wrote and published a book at 96 years of age, or Harriet Anderson, 79, the oldest female to ever finish the Ironman World Championship. I admire great things done by seniors, but realize that such feats are the exception, not the norm.



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The norm is more like this. Most people in their 70s are fine on their own, in their own homes. However in their late 70s and early 80's, they realize, "I need help." Today, one in 10 Canadians are over 65 years old; by 2026, it will be one in six. In the coming years, the baby boomers will be looking to sell their homes and move where they have less maintenance, and more freedom.

In many cities, there exists a smorgasbord of seniors housing from independent living, to supportive living, assisted living, lodges, and villages. In Powell River, the reality differs, and the statistics are daunting. Extrapolations from the 2011 census show that in 2015, Powell River's population might be about 14,000, with almost half over 55 yrs of age.

Aging in Powell River
By the numbers:

55 Nearly half Powell River's population is over 55 years old

1,000 Within a decade, Powell River may need more than 1,000 supported, nursing home and assisted living units

200 There are currently about 200 of these units in town

Also through extrapolation, it appears that starting now, and peaking in 2026, Powell River might require 700 supported/assisted living units, and 380 nursing home rooms. Currently there is one subsidized assisted living facility, with 43 suites, and a

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GOLDEN GREATS:

Back in the 1980s, these ladies were pioneering de-institutionalized seniors care. Now, Powell River seniors are considering alternative housing and care options.

few private, in-home providers, and there are two nursing homes with a combined space for 156 persons.

The average Canadian's retirement income is about \$33,800 per year. Compare this to a 2013 Canadian Mortgage and Housing Corporation report, which states the average monthly retirement rent in BC is \$32,964 per year and it is easy to see that there are gaps. In addition, many persons, particularly single women, will live on the maximum government pension of \$19,000 to \$24,000 a year.

What does that mean? It means we need retirement facilities and we need alternatives.

My work for the last 25 years has resulted in a compilation of alternate retirement housing being piloted

in various countries. We do not have to reinvent the wheel, but we do have to do something. There is no longer time to say, I'll deal with it when I need it. We need to plan while we have the energy and assets, because it takes from three to 10 years to realize alternates such as Shared House, Green House, Co-housing, The Small House Model, Co-op, and The Integrated Village.

Two examples I talk about in my workshops are: Villages and Home Sharing.

Villages vary greatly (virtual, integrated, independent, assisted living, gated communities, seniors condos) but have in common the concept of "neighbors helping neighbors."

They rely on a mix of paid staff and volunteers. They work well, although the jury

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Willingdon Creek Village: This new 102-bed seniors' care facility replaces the old 81-bed Olive Devaud Residence. The new facility opened its doors for an open house on February 21.

images courtesy of Colin Palmer and VCHA



is still out on the financial sustainability of these villages, which rely on a fee, or volunteers, and don't provide help once people encounter more serious health, or help issues.

Home, or House sharing is simple, and it's catching on especially well with women who are living alone (for example, The Golden Girls televised home-sharing scenario.) It's fairly simple to implement, fits in well with today's economic climate, and although it involves a great deal of "sharing," it doesn't require a radical lifestyle change, plus it affords a lifestyle that is economically higher than what would be possible alone.

I think the alternatives appeal to anyone who isn't a total curmudgeon or a hermit. The models I present won't transform your personality or your life, but it's worth

thinking proactively about how you want to spend the end of your life. ²

Alternate care for seniors

In Powell River, there is a group of people who are meeting to discuss alternative arrangements for seniors needing care. We have been joined by city councilor Rob Southcott, whose interest and portfolio is Social Planning.

Together we can plan retirement housing solutions which are local, user-specific and affordable, before unfortunate circumstances are imposed.

For more information or to join us, please email: go2rockwoodhouse@gmail.com.

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(but, like, it wouldn't be cool to ask)

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Massage

Relaxation massage

You'll feel refreshed and relaxed after one of these classic spa treatments. The treatment may include long gliding strokes, kneading, rapid strokes, vibrating, or taping. Circulation will be improved. Can be done with hot stones or aromatherapy as well. This type is most often given as a gift (think prenatal, birthday, or anniversary).

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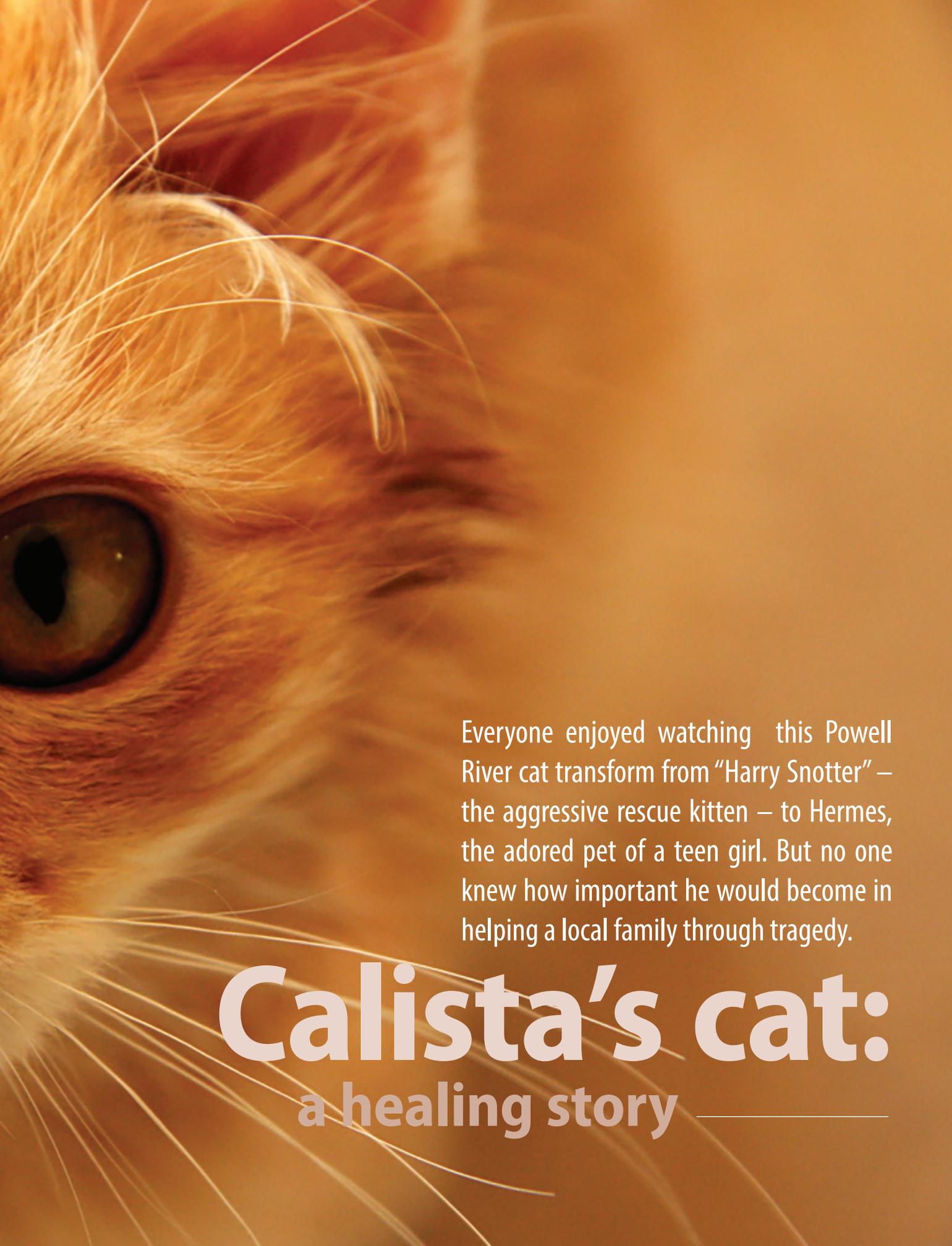
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A close-up, warm-toned photograph of a ginger cat's face. The cat's left eye is wide open, showing a dark pupil and a light-colored iris. Its right eye is closed. The fur is a mix of orange and red tones, with long, thin whiskers extending from the bottom left. The background is a soft, out-of-focus orange.

Everyone enjoyed watching this Powell River cat transform from “Harry Snotter” – the aggressive rescue kitten – to Hermes, the adored pet of a teen girl. But no one knew how important he would become in helping a local family through tragedy.

Calista's cat:

a healing story



The power of a pet

By Bryce Fleming | Powell River Veterinary Hospital

KISSES WITH HERMES: Calista and her rescue cat, Hermes, snuggle at home before she left for college.

All photos in this story were taken by Calista Fleming

Hermes, AKA "the red-devil," came to me as a kitten likely no older than three weeks. At the time he was "red kitten number two" of a litter of kittens found in Townsite near the mill.

The makeshift SPCA crew back then, before there was any shelter, had fostered him out to a good Samaritan who nursed him hourly, wrapped in an old woolen toque for warmth.

When I first saw him I did not hold out much hope for his survival: his eyes were crusted shut, his nose nothing more than a glob of dried goo, his breathing ragged and rough.

The foster-mom begged me to do something and she seemed willing to work hard to save him, so I started him on antibiotics and asked her to clean his nose frequently, treat his sore eyes with

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drops and bottle feed him by hand. She smiled and jumped at the chance to save him.

Four months later, my daughter Calista was working reception in my veterinary clinic when the SPCA brought in a small, scrawny ball of red fur who was due to leave his foster home and become a "shop cat" in a mechanics workshop out in the country. He was to be neutered before he left the care of the SPCA.

My daughter took him in, weighed him and settled him into a pre-op cage. The kitten was purring from the moment she touched him.

The SPCA volunteer that brought him in was my "good Samaritan," and she asked me if I recognized the little cat. I did not. She laughed and pointed out that he was that "Harry Snotter" that I had thought would die months ago. She was rightfully proud that she had saved him.

She was not terribly happy that "red kitten two" was going to be a shop cat since he was still quite delicate and very wary of humans in general.

Meanwhile, back in the kennels, Calista was falling in love.

About half-way through the morning, as "red kitten number two" was recovering, my Calista came to me and asked me, tearfully, if I knew that he was going to be a "shop kitty." I said I did....then I asked her if she knew what a shop-kitty was. She did not, but it sounded bad and that was wrong.

"Daddy, you have to save him." She batted her tearful eyes at me and any hope of not taking another cat home that evening was gone. A call was made to the SPCA and I ended up adopting the cat, now dubbed "Hermes" (the Greek God, not the designer).

I am not sure, but I might have earned a kiss on the cheek for that, but my own cat, "Fat Dougie" (another rescue by Calista) was not going to be happy about it....and I still had not told Roni, my wife.

Hermes came home, still half-wild and very jumpy. The slightest abrupt movement would make him jump sky high and he hid from just about every-



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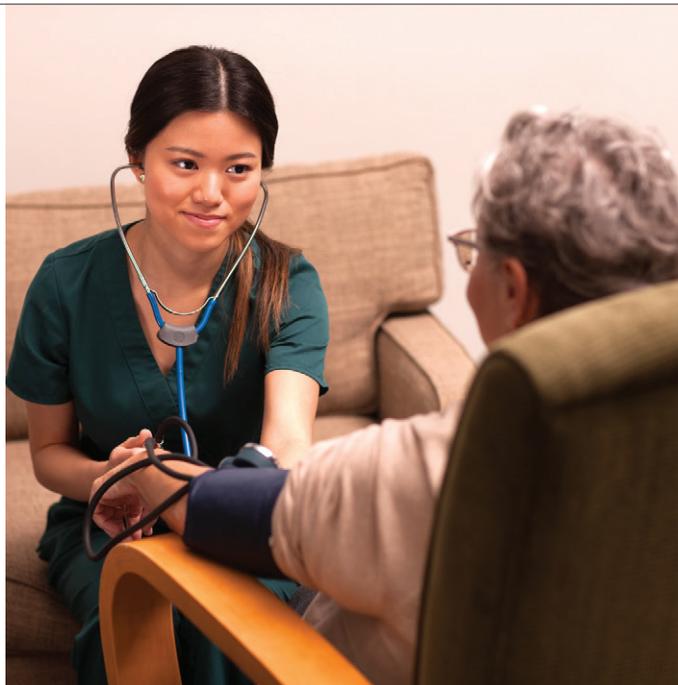
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“Guests, anyone coming to the door, and sometimes even phone calls would make him run and forget litter training for days.”

one except Calista. The only person he really was affectionate with was Calista.

She was his Sun, Moon and Stars. He followed her everywhere, cuddled with her on the couch and would sneak into her room at every chance.

He was a troubled cat though. Litter boxes were merely helpful suggestions, to be ignored if anyone disturbed his house. Guests, anyone coming to the door, and sometimes even phone calls would make him run and forget litter-training for days. He would bite or scratch if he got scared. He thought I might be the devil and made wide circles around me when I was home.

One thing he did do though: the cat played fetch. He would bring me a toy and stare at me until I threw it. He would then race to pick it up and bring it back.

He would do this for many, many throws until he was puffing from exhaustion and was too tired to continue. Fetch was about all I was good for.

Hermes was lost when Calista left for college. He moaned around the

house during the week and would come alive the moment Calista came home from college. He would sleep in the bedroom with my wife and I, but there was no contact: he would sit upon the chair across the room and avoid us altogether.

The only reason he came into the room was because Fat Dougie was there and the two had become fast friends (or battling siblings).

On May 17, 2012, Calista attended a quiet barbecue at the house of one of her college friends. She decided to stay the night after having three drinks (and being a cautious driver at the best of times).

She was found dying at 6:10 am. The EMT crew really never had a chance; her ECG showed a dying heart from the first trace. The hospital in Comox declared her dead at 7:15 am after going to pretty extreme measures. The coroner said it was Sudden Arrhythmia Death Syndrome.

After she died, my wife and I inherited a red cat who really did not care for us all that much.

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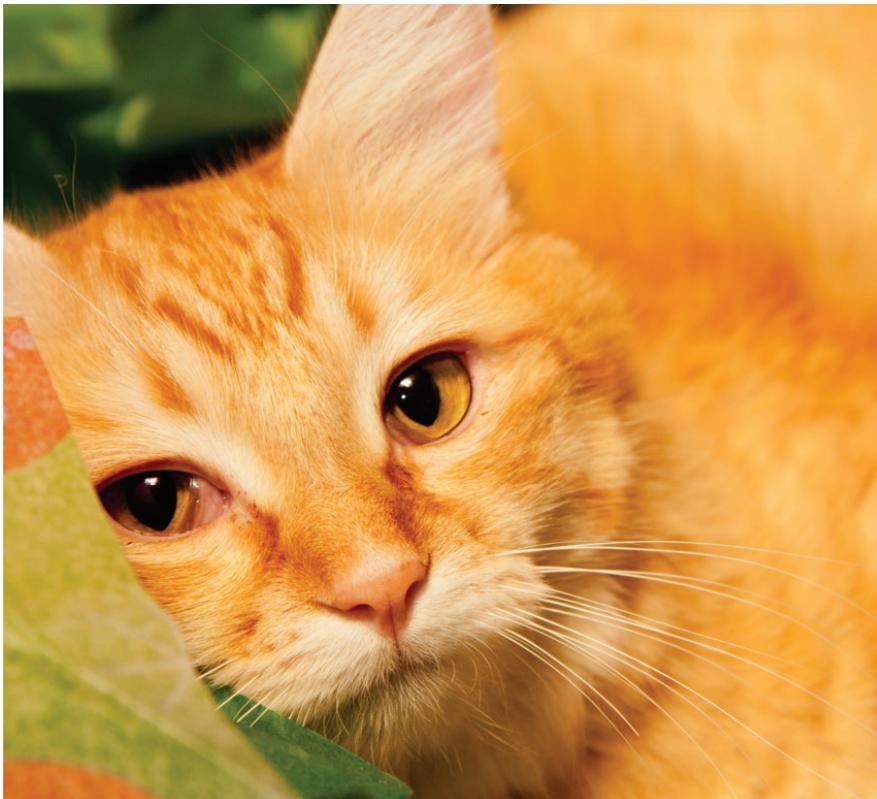
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Hermes became one of the anchors that helped my wife stay sane.

Out of the blue that little red cat started cuddling with my wife. First he would climb up on Calista's bed, where Roni camped out for weeks at a time, and cuddle with her, often sleeping spooned into her stomach as she cried herself to sleep.

I would sometimes catch the two of them sitting on the couch, Hermes draped on Roni's lap, rolled upside down and sleeping.

We had never heard him purr before and suddenly he was quietly purring while snuggling up to Roni.

Just lately, Roni has started to heal from the trauma of losing her only child, but I myself have had a few set-backs. I was the one that had to make all the big decisions in the months after Calista's death and I never really had time to mourn her as I had to keep it together for Roni.

Just lately Hermes has started to become very attentive to me. Just last week, for no apparent reason, he was sitting in front of me meowing plaintively. It was not until I picked him up and snuggled

"I am not a religious or mystical man, but I am at a loss as to why this little feral cat changed so much."

with him on the old purple chair in our basement that he seemed content. He had never shown any interest in attention from me unless it involved food or fetch.

I am not a religious or a mystical man, but I am at a loss why this little feral cat changed so much after his mistress died.

My wife swears that some small part of Calista took up residence within.

Two years ago I might have scoffed at such a suggestion, but a grieving parent has to believe in something, and this is a pretty good thing to believe. It certainly has saved my wife. ☑

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Candice Roadknight



It's hip to be square

By Heather Allen

Square dancing? Why square dancing? All those crinolines and fiddle music? Isn't it a bit anachronistic?

Well, try wearing your jeans and dancing to 'Pretty Woman', 'That Old Time Rock and Roll', or 'Forever in Blue Jeans'. That's square dancing with the Stardusters Square Dance Club in Powell River. The venerable club, which celebrated its 50th anniversary last summer, has received a new lease on life with new and younger dancers succumbing to its universal appeal.

"Alf and I met dancing," said Monika Paemoller, "at German folk dancing in Winnipeg, when I was 16." They square danced in 1976 for a few years shortly after they came to Powell River, and then

family responsibilities got in the way. "But we missed it, so we came back a few years ago, and we really enjoy it. We joined for the exercise but the unexpected benefit has been meeting new people."

New dancers Madeleine and Fraser Field began the 10 week West Coast Dance lessons in October last year. "We've both found the experienced dancers more than kind and patient, and also more than willing to help us when we get muddled. No matter how fatigued or worried one might feel, when the music starts and the dancers begin moving in response to the calls, everything else is left behind. It's good exercise, not just physically but also mentally. And it's social. Different partners, different squares and one has the chance to chat during the breaks."

Sean and Ruth Dees of Breakwater Books were invited to the annual Harvest Dinner by friends. They were amazed at how much fun and how easy the initial moves were to learn in that first lesson after dinner. "We must have learned 10

SQUARE DANCING: 10 WEEKS TO DO-SI-DO

The Stardusters meet every week at the Rancho Hall, 5399 Timberlane.

For several years, caller Gord Ruedig has been successfully teaching West Coast style dancing which comprises 10 weeks of lessons.

Club members are always on hand to help newcomers at the weekly sessions held each Tuesday at 7:30 p.m.

Graduates of this fun course are then invited to join the Stardusters Club and dance each Thursday as well.

New classes begin in September and January.

For further information, check out www.WestcoastSquareDance.com.

moves that night," Sean said. "So, we're still dancing a year and a half later. I really like the variety of music that Gord (caller Gord Ruedig) uses. He has an



Bob Butkus

Candice Poadknight

Bob Butkus

Candice Poadknight

“He’ll keep you dancing long after your legs are begging for a rest!”

– Alison Barbour

amazing repertoire of popular music.”

Alison Barbour, who has been square dancing with her husband Bob Butkus for the past five years, says, “Gord is a very patient teacher with a great sense of humour and his singing calls are such fun; he’ll keep you dancing long after your legs are begging for a rest.”

The health benefits of dancing are being recognized throughout the world. In an average two hour session, the dancer dances 8,000 steps. Since you only need 10,000 a day to maintain good health, square dancing certainly gives you more than a head start. As well, you burn nearly 400 calories. But the physical benefits are only the beginning. Having to listen

to, and respond to the calls gives your mind a workout as well. Perhaps best of all, you have to concentrate in order to square dance. Your mind can’t wander; i.e. You can’t worry. For at least one evening a week you can put your worries to rest and just follow the commands of the caller and the rhythm of the music.

Studies at a New York College of Medicine show that dancing assists in helping our mental acuity by integrating several brain functions at once. So, not only healthier, but smarter! Starduster dancers all agree that there are definite social benefits to square dancing, an observation that becomes very important in light of recent studies in both the UK and the US. Shockingly these studies warn that loneliness can be worse than obesity. Chronic loneliness has been shown to increase the chances of an early grave by 14%. As bad as being overweight.

Fitness and fun, music and sociability, easy to learn in a supportive environment – there don’t seem to be any downsides. Make 2015 the year you try dancing! 📌

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Doctors who already know someone in Powell River are the ones most likely to come and stay. We're pretty sure that, among the 20,000 of us who live in the region, we know some great doctors who would love to practice here. Do you have an out-of-town Dr. Friend, Dr. Relative, or even your own former GP who might like a change? Reach out! Send them this magazine, and connect them with the PRDFP. 

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Science,
applied with
compassion



Home health care is the new hospital care

By Pieta Woolley | pieta@prliving.ca

An older gentleman in Powell River was in failing health, isolated in his home and depressed. He had just about stopped talking.

But he wasn't completely alone.

Lisa Seaberly, one of Powell River's 10 home health clinicians, came by for an appointment. Home health clinicians – mobile Registered Nurses – get to see their clients in their true contexts: where they sleep, eat and store their stuff.

At this gentleman's house, deep in a closet in his bedroom, she found a guitar.

"Do you play?" she asked.

"No I wish I could."

For his next appointment, Lisa's colleague Lyla Smith visited him.

After treating him, Lyla – also an artist and musician – took a few minutes to play his guitar and sing with him.

"We sang May the Circle Be Unbro-

"Hospital stays really can't get any shorter than they are now. We need to keep home health care intact and funded, to keep standards of care up."

– Lyla Smith

ken, and other songs," said Lyla, noting that music helped convince him to start talking again. "And I thought... I get paid to do this?"

This story represents the most satisfying part of the job: helping to heal a patient through noticing their individu-

ality, in their home. But the job is also heavy; the nurses see between five and eight clients a day, from Saltery Bay to Lund. Home nursing has become increasingly complicated over the last decades. What used to be mostly maternity care has mushroomed into acute wound care, bed care, post-surgery care, ostomy care, and very often, palliative care.

"Forty years ago, most of our clients would have been in the hospital," said Lyla. "Hospital stays really can't get any shorter than they are now. We need to keep the home health care right, to keep standards up. We're very protective of it. I know we're needed and I'm happy we're there"

ZEST recently sat down with some of the region's home health clinicians, because the BC Nurses Union is concerned that a new patient care model being tried on Vancouver Island may come to Pow-



BETTER LIVING, BETTER DYING: Reistered Nurses Caroline Lance, Lyla Smith and Lisa Seaberly bring their skills and selves into Powell River homes.

ell River. For workplace efficiency, shifting some care from Registered Nurses to Care Aids is a hallmark of the plan. A spokesperson for Vancouver Coastal Health Authority maintains that there is no plan to execute a similar model here.

The role of the home health clinician team is unique. Because so much of Powell River’s acute health care happens in other communities, and the patients are sent home to recover, these nurses treat complex cases – and often, they’re the only health care providers with a keen eye on these clients’ charts.

“People are alive longer,” home health clinician Caroline Lance explains. “There’s a greater reliance on outpatient care. We see a lot of people with cancer, with central lines [an IV to the heart].”

They see them wherever they live: in houses and apartments, in relatives’ homes, in group homes, boats, garages and motor homes.

“We know we’re walking out the door, so we need to teach them to take care of themselves,” said Caroline.

At the time of this interview, the team was serving about 80 patients; more than 30 of them received palliative care.

As patients, we’re lucky to have such

“We know we’re walking out the door, so we need to teach them to take care of themselves.”

– Caroline Lance

an accomplished team here, when we need them. Lyla’s 30 years as a nurse includes 20 at Vancouver’s intense St. Paul’s Hospital, in urology and community-based mental health. Lisa taught home health care at BCIT before moving here. And Caroline’s expertise is in palliative care, with a hospital background in maternity and medical-surgical units.

The home health clinicians clearly respect each other – and like each other. A necessity in a busy, communication-dependant workplace. There’s never a day, they point out, when they show up to work wondering what to do.

“Catch up on emails? I delete them,” said Caroline.

“There’s a lot of camaraderie,” said Lyla. “We trust each other.” **Z**

Staffing changes

With the introduction of the new Care Delivery Model Redesign on Vancouver Island, and the loss of the six acute care beds at Powell River General, I sought some clarification about what’s happening to health staffing in Powell River.

Vancouver Coastal Health’s communications team answered my questions by email – sadly up against deadline, so there wasn’t time to ask for follow-ups.

Here’s what they had to say:

“VCH will shift funding for six acute care beds at Powell River General Hospital into 21 additional beds at Willingdon Creek Village WCV, bringing the facility’s number of residential care beds to 102.

“It’s important to note that these acute care beds were not being occupied by acute care patients, but rather, those waiting for assisted living or residential care. As a result of WCV’s opening in March, the staffing mix in Powell River will change—not only to better match our resources to the needs of our patients, but also because of the way WCV was designed. ...Specifically in terms of staffing, RNs will not be replaced with LPNs or Care Aides; in fact, there will be a net increase in FTEs (full-time equivalents) for RNs (2.70), LPNs (1.78) and Care Aides (2.59) when comparing PRGH to WCV. Given these FTE increases, VCH does not foresee any job loss in the community.”

VCHA noted that the following numbers fluctuate based on projects, and should not be interpreted as indicating new models.

Who works Where?	January 2013	January 2014
PR Health Unit	30 RNs	34 RNs
Evergreen	17 RNs, 78 Care Aids, 20 LPNs	20 RNs, 59 Care Aids, 15 LPNs
Home Support	64 community health workers	74 community health workers
PR General Hospital	115 RNs, 11 Care Aids, 36 LPNs	106 RNs, 10 Care Aids, 34 LPNs
PR Mental Health	8 RNs	9 RNs

Health help for busy families

I like to move it move it



A LITTLE MORE OF THIS: Biking around the neighbourhood was a staple of generations past. Now? Much more Netflix.

Pieta Woolley | pieta@prliving.ca

Christine Parsons is a busy mom of two growing girls, and she's the first to admit, "It's hard to raise healthy kids!" That statement, coming from the City of Powell River's recreation programmer, should allow all parents to take a collective sigh of relief.

It is hard to raise healthy kids, given the incredible time and financial constraints on working families, and our immersion in a culture rich in junk food, TV, Netflix, video games and iPads. Is it any wonder so many kids are less active than they should be, and tipping the scales?

"As females, we all feel the pressure to look a certain way," said Parsons, noting that putting kids on diets often backfires, badly. "I don't want my girls to feel that pressure, but I want them to know the importance of eating healthy and developing healthy habits that will stay with them as they get older."

For the first time this April, the Recreation Complex will offer a fun, supportive program (i.e. *not* a diet) for families with children aged 7 to 13 who are above a healthy weight. MEND (Mind, Exercise, Nutrition, Do It!), an initiative of BC's Childhood Obesity Foundation, offers families a twice-a-week activity and learning evening for 10 weeks. Fam-

"Between working and then running kids to their activities, it is just easier at times to quickly stop off at one of the fast food restaurants and grab a meal."

– Christine Parsons

ilies that complete the program get \$250 towards a three-month family recreation complex pass – all the swimming, skating, yoga, and other activities you can handle. (A three-month family pass is normally \$319.80.)

"One of the biggest things MEND offers is educating family members on healthier choices for not only food but activities to do as a family," said Chris-

FREE, FUN, AND FUNCTIONAL

The MEND Program is a fully funded program that builds healthier, active families. It is jam packed fun that's informative and energizing and FREE for the whole family!

MEND is targeted at children between the ages of 7-13 years who are above a healthy weight. It will run twice a week for 10 weeks and a parent/guardian must attend with their child.

The first hour of each class will focus on theory and lively discussion around nutrition. The second hour will have the children participating in fun activities that get them moving.

Families will receive \$250 towards a three month pass here at the Complex on completion of the program.

tine. "We need to get moving and making smarter choices. As a parent there is a constant struggle to ensure your children are eating well balanced meals day in and day out. Between working and then running kids to their activities, it is just easier at times to quickly stop off at one of the fast food restaurants and grab a meal."

Yes... that's true. And the solution?

"Taking a day out of your weekend to prep food can help ensure we are planned and prepared for the week ahead. There is also a cost factor; there is a perceived notion that eating healthy cost more. However, you can cook a whole chicken and get two to three meals out of it by making soup or a casserole out of the leftovers. When you look at health on a larger scale, putting the money out now for healthier options only reduces the costs as a whole on our health care system. Being preventative is one of the best things we can do for our families!"

Most of us are familiar with health statistics outlining the dramatic rise in average weights between the 1970s and today, with about 59 percent of Canadian adults now classed as overweight or obese. Similarly, screen-time statistics highlight that many kids are sitting on a couch during their free time, rather than romping through the neighbourhood as they would have in other generations.

MEND is part of a wider set of programs offered by BC's Childhood Obesity Foundation hoping to turn that around through direct intervention with families. BC Children's Hospital offers ShapeDown BC, a more intense support to families with children aged 6 to 17, which will be rolled out across health authorities by 2017.

"We felt this program [MEND] would be a huge benefit to Powell River as many of the medical or health programs available are located in areas such as Vancouver Island or Vancouver," said Christine. "To have a program like this in our own community would reduce transportation or financial barriers for people in order to make changes in their lives."

Any effort towards healthier eating and more activity is a good effort, Christine noted. And given that she both works in the field and understands how difficult it is to consistently make healthy choices for her family, we're sure MEND will be delivered with a super-sized dose of empathy. 

Making it easy

Tips from the Childhood Obesity Foundation

What every family can do: The 5-2-1-0 rule

Every child and every adult has a healthy body shape that is just right for them. However in today's world it is easy for us all to gain excessive, and unhealthy, weight. Weight gain occurs when energy intake (food and drink) is more than energy burned off (physical activity). The best thing you can do to help your child achieve the healthy body that is just right for them is by creating healthy habits for the entire family.

5 or more servings of fruit and vegetables per day

2 hours of screen time or less per day

1 hour or more of physical activity per day

0 sugar sweetened beverages per day

What else can a family do to prevent childhood obesity?

- Become knowledgeable and take time
- Eat breakfast together
- Eat most meals at home
- Portion sizes should be age appropriate
- Lead by example
- Be authoritative
- Do not set your child up for failure
- Start early



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