



# Health Beat

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Serving All of Southern California

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## A Guide to Keeping Your Child Safe and Reassured as Coronavirus Spreads

By AJ Willingham, CNN

Talking about the coronavirus is hard enough when you're an adult. The information, numbers and advice concerning the outbreak seem to shift by the day, and the abstract nature of the threat can invite plenty of fear and uncertainty.



However, if everyone is talking about the coronavirus, your children are definitely listening. Here is some expert advice on how to start this important conversation, and keep your child safe and reassured.

### 1. Don't wait until they come to you



Even the most scrupulous and watchful parent or guardian can't keep children from hearing about something as widely discussed as the coronavirus. And trust the experts: Your kids

already know. "The chances of a child, of any age, to not have heard about this is really low," says Robin Gurwitch, PhD, a psychologist and professor at Duke University.

"We don't always know where children learn things from. It could be from teachers or older students at school, and any child with a social media footprint or access to media in any way has definitely picked up something."

Getting ahead of the conversation, then, is essential, says David Schonfeld, a developmental behavioral pediatrician and member of the American Academy of Pediatrics Council on Disaster Preparedness. "Kids can misinterpret things, they can over-generalize and believe misinformation."

In fact, Schonfeld says, ignoring the conversation can cause more harm than good. "You can't count on children to bring up difficult topics. If you ignore the subject, they may think the discussion is inappropriate or naughty or upsetting. So you need to present yourself as a source of information and let them know they can come to you."

### 2. Ask questions



Of course, every parent or guardian wants to reassure children. But, as Schonfeld says, "You can't reassure people until you find out what they're worried about." Below are some lines and questions that he and Gurwitch suggested to open the conversation:

- "There's been a lot of talk about the coronavirus. Tell me what you've heard about it."

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- "What do you think about this?"
- "How does it make you feel?"
- "What questions do you have?"

"Asking questions lets you know where they're coming from," says Gurwitch. "It allows us to correct any misinformation, clarify points and know where we want to enter in to the conversation."

### **3. Keep information simple and useful**

"There is so much information out there," says Schonfeld. "What you need to do is filter down the information and distill it to what's clear, relevant to the individual, and give them what can be used to take immediate action."

In other words, while you want to be open and communicative with your child, resist the urge to bombard them with every possible headline or piece of information about the outbreak.

Schonfeld also suggests trying to keep the conversation productive and positive. For instance, if you were to bring up vaccines, instead of saying there are no known vaccines, say medical experts are working on trying to develop one.

### **4. Validate their concerns**

There's no reason to ignore the truth: The idea of an epidemic can inspire anxiety, so resist the urge to wave away any worries your child may have. "It's important to validate children's concerns and let them know their feelings are real," Gurwitch says.

Recognizing these feelings can give children permission to cope with their distress. "There is a tendency to tell children that they shouldn't be worried," says Schonfeld. "We should stop telling children that they shouldn't be worried, and encourage them to explore their feelings."

### **5. Tell them what's being done to keep them safe**

"We need to tell them what's being done. Because you can't just put it out there without describing a solution," says Gurwitch. "We want to say, our family is doing this, our country is doing this, and our family is doing this."

#### ***Here are a few other expert suggestions:***

- "We know that this is something that people can catch but we also know how to help keep ourselves as safe as possible."
- "We don't know everything about this virus, but we're learning more all the time."
  - "We are making sure we wash our hands well."
  - We know it's always good to cover our mouth when we cough or sneeze."
  - "Right now, as much as we want to hug our friends, we may want to fist bump or knock elbows."

This is also an opportunity, Gurwitch says, to explain to them that not every cough or sneeze means someone is going to get the coronavirus. Not only can this cut down on anxiety, it can also keep kids from expressing prejudice or fear toward other people.

### **6. Empower them to make healthy choices with you**

After you've told your child what is being done to keep them safe, it's time to give them a chance to take their safety into their own hands -- to whatever level is age-appropriate.

"Nobody likes to feel powerless, and one thing kids can learn from a very young age is that their health is their health," says Schonfeld. He suggests letting them design their own hand washing routine, or encouraging them to ask questions about why certain safety measures are put in place and how they can make them a part of their own habits. "There's always some decision a child can make that can give them a sense of partial control," he says.

This collaborative spirit can be expanded past virus prevention. "It's important to include kids in all of these preparations," says Gurwitch. "If you are preparing in case you need to stay in your house for a bit, ask your child what they would like from the store. Remember to include things that would keep your child occupied and active."

### **7. Keep yourself informed so you can be a trustworthy source**

All of this would be much easier if the adults knew exactly what was going on and exactly what to expect. Unfortunately, with a situation like this, that's not the case. So it's imperative to keep yourself well-informed so your child feels comfortable trusting you. Schonfeld says to avoid sharing rumors or sensationalistic information, and to refrain from bringing politics or personal beliefs into the situation. "It's a good idea to go to the most consistent source of information, like the CDC," he says.

### **8. Be compassionate**

When we get anxious, we sometimes make bad decisions. We sometimes get cranky. That's as true for children as it is for adults.

"There's a few things that happen, doesn't matter if they're 4 or 14," says Gurwitch. "Children may become a little bit more irritable. Young kids may have more temper tantrums or meltdowns, they may become a little more clingy. But they may also have more problems with sleeping, children may have a little bit harder time with concentration and attention." That could man-

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ifest itself in forgetfulness or issues with completing chores or homework.

The important thing, Gurwitch says, is to be patient with them, and stick to normal routines as much as possible.

### 9. Follow up

This situation is ever-changing, and as time goes on, there may be new information you want to share with your child, or they may have new questions.

"We should check back in as new information comes up," Gurwitch says. "Being able to have this difficult conversation about

coronavirus will set parents up in a very nice way for children to know they can come to their parents or guardians with difficult topics. When children know that we're willing to talk about something difficult, they will talk to us about something difficult."

That's why it's so important to establish trust and openness early on. "Parents do become trusted sources when they are trustworthy; when they are honest and open and forthcoming," Schonfeld says. "But it's not just something you can establish in a day. It has to be a pattern."

And it all starts by being brave enough to bring it up.

## Children Who Don't Get Enough Sleep May Have A Higher Risk Of Mental Health Problems

*New European research has found that children who don't get enough sleep may be at a higher risk of developing mental health problems such as ADHD, anxiety and depression.*



Carried out by researchers at the Norwegian University of Science and Technology and the University of Bergen, Norway, the new study looked at 799 children who were followed from the age of 6 to 12 years.

Every two years, the children were asked to wear an accelerometer, 24 hours a day over a seven-day period to track their movement and were interviewed on more than one occasion to measure any mental health difficulties that they might be experiencing.

Insufficient sleep was defined as sleeping less than seven hours a night on average over the seven nights.

The findings, published in the journal *Pediatric Research*, showed that children who got the least sleep had the greatest risk of developing mental health issues. Boys who slept the least hours had an increased risk of

developing behavioral problems, and both boys and girls who slept the least had a higher risk of future emotional problems.

"If we make sure our children get enough sleep, it can help protect them from mental health problems," says study author Bror M. Ranum. "We're seeing an association between sleep duration and a risk of symptoms of emotional and behavioural disorders."

The researchers also looked into whether it might be the mental health problems which were causing the lack of sleep, but the data showed that it was sleep duration which influenced mental health, and not the other way round.

"Previous studies have also shown that sleep is related to mental health difficulties. But our study is one of the first to investigate this in children over several years, and to use an objective measurement of sleep," says senior author Silje Steinsbekk at NTNU's Department of Psychology. "Our study shows that the children who sleep fewer hours than others more often develop psychiatric symptoms, even two years later."

According to guidelines from the National Sleep Foundation (NSF), children aged six to 13 years are recommended to get nine to 11 hours of sleep a night, and less than seven hours sleep a night is "not recommended."

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Ranum added that children do require different amounts of sleep, and what is too little for one might be sufficient for another. "But if you find that your child seems to be under the weather and can't concentrate,

or you notice their mood fluctuate more than normal, then you may want to help them get more sleep," he adds.

## Thirdhand Smoke From Clothes Can Deposit Hazardous Chemicals, Study Says



You can tell the dude sitting next to you in the movie theater is a smoker or vaper; you can smell it on his clothes. But since he's not lighting up and puffing smoke your way, it's OK, right?

### Not at all.

A new study out of Yale University says thirdhand smoke -- the tobacco contaminants that adhere to walls, bedding, carpet and other surfaces until a room smells like an ashtray -- can actually cling to a smoker's body and clothes as well.

Those potentially toxic chemicals, including nicotine, can then be released into environments where smoking has never occurred, like your movie theater, according to the study.

Even more disturbing: The study found those chemical exposure levels could be the equivalent of between one and 10 cigarettes by the end of the movie.

"People are substantial carriers of thirdhand smoke contaminants to other environments," said Drew Gentner, an associate professor of chemical and environmental engineering at Yale.

The study may be the first to show that people can transmit nicotine and other potentially toxic chemicals via their clothing after smoking, he said.

"That was the unique part of this study," Gentner said. "We were surprised by the wide array of hazardous volatile organic compounds that were offgassing from the audience -- including some that are known to be known carcinogens in people, such as benzene and formaldehyde."

### What is 'thirdhand smoke'?

Thirdhand "smoke" isn't actually smoke at all. It's the residue of nicotine and other chemicals in tobacco, some of which are toxic, that remain long after active smoking is over.

Some of these chemicals stick to surfaces, and others attach to dust particles. Still others often penetrate deep into wallboard, drapes and upholstery. As the compounds linger, they may react with oxidants or other particles in the room's atmosphere. The chemical reactions can create potentially harmful byproducts that can become airborne.

Science has known about this type of environmental pollution for decades, sparking the creation of smoking and no-smoking rooms at hotels, restaurants and the like.

But thirdhand smoke has also been found in environments which were not known to be contaminated by smokers, which led researchers to ask how that could happen.

To find out, Gentner and some of his Ph.D students set up an experiment in a movie theater that had not allowed smoking for 15 years. They supplied fresh air into the theater, making sure that no smoking or other contaminants entered the space.

Sophisticated equipment measured airborne particles before and after moviegoers arrived. Right away,

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they saw a huge spike in levels of hazardous chemicals.

As they came into the theater, the concentrations went up, and then decreased over time, Gentner said.

"But they didn't completely disappear after the audience left. In many cases," he added, "the persistent contamination was observable the following day in the unoccupied theater."

The testing continued over a four-day period across different movie genres. Perhaps not surprisingly, levels of nicotine and other chemicals were lower in the G-rated movies geared to kids.

"Despite cases where we had audiences of over 200 people for some of the G-rated movies, the pollutants were much larger for R-rated films, even with smaller audiences," Gentner said. "Those movies would likely draw older audiences that might be more likely to smoke."

#### Dangerous exposure?

Despite declines in smoking in some developed nations, there are still over a billion smokers worldwide, according to the World Health Organization.

"That billion smokers contribute to about 880,000 deaths from secondhand smoke," said Dr. Jagat Narula, a cardiologist at Mount Sinai Morningside in New York City who researches the health impact of smoking.

"I call it a form of murder."

Learning about the Yale study's findings on the level of offgassing from human bodies and clothing was not surprising, said Narula, who was not involved in the

study.

"But it is disturbing," he said. "Numerous reports that have shown that there is no safe level of exposure to secondhand smoke.

"If future research replicates these findings on third-hand smoke, it means that smokers could potentially still do harm even if the act of smoking took place in a different space."

And it's not just smoking tobacco cigarettes. In America, vaping is growing in popularity, enticing younger and younger ages.

The study wasn't set up to study vaping, Gentner said, and researchers didn't find any of the compounds known to come from vaping emissions other than nicotine.

Still, he said, levels of nicotine were high. Therefore, it's possible that vapers could be also be the source of some of the nicotine found by the analysis.

"Nicotine from e-cigarettes could have also been transported by people and off-gassed in the theater, or this could be occurring in other places where people enter after vaping," Gentner said.

Clarity will come with additional research, Narula said. In the meantime, "the concentration of toxic organic compounds off-gassed by smokers cannot be seen as insignificant."

"If the findings hold true, the implication is that essentially we are going to need to make everything smoke free," Narula said. "And the only way that you will be able to do that is nothing short of banning smoking everywhere."



# 6 SIDE EFFECTS OF CONSUMING TOO MUCH DAIRY FROM BLOATING TO ACNE



- Many of us have been told that dairy products like milk and yogurt are important to build strong bones and healthy muscles.
- However, you can have too much of a good thing. A majority of the population is sensitive to dairy, and can experience side effects when consuming too much.

## **1. You might feel nauseous.**

According to research from the National Institute of Health, 65% of adults have some form of lactose intolerance. That's nearly 3 out of 4 people worldwide.

Symptoms can include nausea and in extreme cases, vomiting, after consuming most forms of dairy that contain lactose, including milk, ice cream, and cheese.

Lactose intolerance tends to be more common in people of Asian, South American, or African ancestry, according to research.

And despite its growing popularity, health experts don't recommend ever drinking raw milk.

## **2. Too much dairy can cause bloating and digestive distress.**

Even if dairy doesn't make you sick, you could still be sensitive to lactose, and too much of it could cause other digestive issues like bloating, cramps, or diarrhea.

If you're not able to easily break down lactose, it travels through your digestive system and is broken down by gut bacteria in a process of fermentation. Side effects of that process include the gassiness and other digestive woes associated with lactose intolerance.

## **3. Hormones found in commercial dairy products can make acne worse.**

Even if you can digest lactose, you may experience other side effects

from dairy products that contain growth and milk-production-regulating hormones.

In your body, this is thought to aggravate acne by disrupting insulin regulation through something called insulin-like growth factor-1 (IGF-1). Skim milk appears to be the most likely to worsen acne, so if this is a problem for you, consider switching to full-fat dairy from cows not treated with hormones.

## **4. Full-fat dairy can be healthy, but could lead to eating too many calories.**

Dairy products are nutritious, with important vitamins and minerals like calcium, potassium and vitamin B12. However, they often contain a lot of fat, making them very calorie-dense foods.

This isn't necessarily a bad thing - research has shown full-fat dairy can actually help prevent obesity. It's not entirely clear why, but the fat content may convey some metabolic benefits, and potentially make you feel fuller and more satisfied after eating.

However, if you are trying to slim down, keep in mind that any weight or fat loss depends on a calorie deficit, so those extra calories in a sprinkle of cheese or cream in your coffee can impede your efforts.

## **5. Too much dairy could increase risk of certain cancers.**

Aside from the immediate side effects, there's mixed research on the long-term health consequences of consuming dairy.

Some studies have found high dairy intake is linked to higher risk of certain types of cancers like prostate or breast cancer. However, other studies on the same subject have found no significant increase in risk. Many of these studies are epidemiological, meaning they look at trends in consumption and illness in the population over time, and therefore can only determine correlations, not causation.

Other research has found dairy could also lead to a lower risk of other types of cancer, such as colon cancer.

## **6. Milk could increase risk of heart disease, but cheese and yogurt may decrease the risk.**

Dairy's effects on heart health are even more complex. As Insider previously reported, research has shown that drinking milk can increase the risk of heart disease by a small but significant amount.

However, consuming other dairy products like milk and cheese can actually lower your risk of cardiovascular illness, studies show, and lead to a longer life overall.

Researchers are still working to understand why, but it may have to do with the way that fat and protein molecules are arranged differently in milk compared to cheese and yogurt.



## ADHD vs. Autism: What These Different Disorders Look Like in Children

When the Diagnostic and Statistical Manual of Mental Disorders (DSM-5)—a.k.a. the diagnostic bible for psychiatry—was updated in 2013, it marked the first time that a person could be diagnosed with both ADHD and autism.

“The conditions themselves look very different on paper, but there’s confusion between the two of them because they can sometimes co-exist,” says Elisa I. Muniz, MD, developmental behavioral pediatrician and assistant professor of pediatrics at the Rose F. Kennedy Children’s Evaluation and Rehabilitation Center at Einstein/Montefiore in New York City. “Though estimates vary widely, it has been reported that up to 50 percent of children with autism have symptoms of ADHD. And approximately 14 percent of children with ADHD have autism. A child can be diagnosed with both conditions because distinguishing between the two can be challenging, especially in younger children.”

According to the Centers for Disease Control and Prevention, 9.4 percent of children in the U.S., or almost 1 in 10, have ADHD, while 1 in 59 has autism. ADHD is a disorder that can affect adults and children and is characterized by trouble with attention (the ability to focus), hyperactivity (the ability to sit still), and impulsivity (the ability to control impulsive actions).

Autism spectrum disorder, on the other hand, is a developmental disability that affects an individual’s ability to communicate, interact socially, and form relationships. It’s a lifelong, complicated condition that can range from mild to severe, and may include an inability to speak or delayed speech, repetitive movements, and repetition of sounds and phrases, among other symptoms.

We asked our experts what these two very different conditions can look like in children.

### Social interactions

“A child with ADHD is interested in making friends, seeks out attention from others, and is generally motivated to interact with others,” says Dr. Muniz. That child “is usually persistent in engaging others, utilizing their ability to make good eye contact, and use facial expressions and gestures to engage others in activity. However, someone with ADHD may have trouble keeping friends. They may face challenges such as having trouble waiting their turn, difficulty participating in an activity that doesn’t capture their attention, and interrupting when others are speaking.”

Children with autism, on the other hand, often “struggle with initiating social interactions and in maintaining those relationships over time,” says Dr. Muniz. “They may avoid eye contact when spoken to, and at times, appear to avoid people and social situations. A child with autism may be contently playing alone or even alongside another child, but may struggle to make attempts to engage the other child in their activity.”

### Energy levels and focus

The classic high energy level of someone with ADHD differentiates them from someone with autism. “Children with ADHD are more likely to be distractible, having trouble finishing tasks, and can be overly active,” says Geraldine Dawson, PhD, professor of psychiatry and behavioral sciences at Duke University in Durham, North Carolina. “Many children with autism can be unusually focused on a task and have trouble transitioning from one activity to another. Children with autism also tend to have more challenges understanding social cues and interacting with other children.” Girls are often underdiagnosed for ADHD, in fact, because they don’t always have those classic hyperactive qualities.

### Sensitivity

A main symptom of autism is an extreme sensitivity to tastes, smells, textures,

and sounds—especially loud noises. Many people with the disorder are hypersensitive to bright lights or certain light wavelengths (fluorescent lights, for example). And certain types of touch (light or deep) can feel extremely uncomfortable. Discover other autism symptoms you may not realize.

### Organizational skills

Here’s where the two conditions’ differences can be very apparent: Children with autism are very precise and hyper-organized—making sure there’s a place for everything and everything in its place—whereas a child with ADHD struggles with organization. “Although both autism and ADHD are associated with some difficulties in organizational skills, children with ADHD are more likely to become distracted and have trouble following through with instructions,” says Dr. Dawson. “Children with autism, on the other hand, have more difficulty flexibly changing their learning strategies to adapt to different tasks.”

### Interests and hobbies

Someone with ADHD may have a bunch of varied interests, whereas those with autism will show a restrictive, hyper-focused interest in one particular topic. But that’s not always true. “ADHD describes the pattern of behavior of inattention and/or hyperactivity and impulsivity that is inconsistent with developmental level and causes challenges in functioning,” says Elizabeth Harstad, MD, developmental behavioral pediatrician at Boston Children’s Hospital in Boston, Mass. “Autism describes significant challenges with social communication and restrictive, repetitive patterns of behavior or functioning.” And yet, adds Dr. Harstad, “it’s hard to make a universal statement about how hobbies and interests differ among kids with ADHD versus autism. While some children with autism fixate on certain interests, others have a broad range of interests and hobbies. Additionally, some children with ADHD have a broad range of hobbies and interests, while others prefer only a few things.”

### Speech development

While both conditions develop in childhood, it’s evident earlier in children with autism. “Autism generally presents itself in the first few years of life with a child having difficulty communicating, challenges with understanding others’ perspectives, and repetitive or rigid behaviors or movements,” says Dr. Harstad. “ADHD often presents by early- to mid-elementary school age.” (Learn what you should try to avoid saying to a parent of child with autism.)

### Early development

Just as with speech, other areas of early development may look different in children with autism versus those with ADHD. “Many of my parents of children with autism say they knew something was different early on,” says Deborah A. Pearson, PhD, professor of psychiatry and behavior sciences at The University of Texas Health Science Center at Houston, in Houston, Texas. “I had one parent, for example, who said, ‘When he was a baby he wouldn’t look me in the eye.’ On the other hand, ADHD doesn’t usually become evident until they’re going to preschool and are compared to other children.”

### Nonverbal behavior

“Those with ADHD display pretty typical nonverbal behavior—they make good eye contact, use gestures, and have a normal range of facial expressions, but in autism, this isn’t the case,” says Dr. Pearson. “With autism, you’ll see inconsistent or nonexistent eye contact, they may not use gestures, and they may have a limited range of expressions or very exaggerated or neutral facial expressions.”



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### What's for Dinner?



#### Quinoa and Red Pepper Chili

This dish is a vegetarian version of a classic winter staple.

**Ingredients:**      **Servings: 4**

- 2 red bell peppers
- 2 poblano chilis
- 4 teaspoons olive oil
- 3 cups chopped zucchini
- 1 1/2 cups chopped onion
- 4 garlic cloves, minced
- 1 tablespoon chili powder
- 1 teaspoon ground cumin
- 1/2 teaspoon Spanish smoked paprika
- 1/2 cup water
- 1/3 cup uncooked quinoa, rinsed

- 1/4 teaspoon kosher salt
- 1-14.5 ounce can fire-roasted diced tomatoes, undrained
- 1-15 ounce can no-salt-added pinto beans, rinsed and drained
- 1 cup low-sodium vegetable broth
- 1 avocado

#### Directions

1. Preheat broiler.
2. Cut bell peppers and chilis in half lengthwise; discard seeds and membranes.
3. Place bell pepper and chili halves, skin side up, on a foil-lined baking sheet and flatten with hand. Broil 10 minutes or until blackened. Place in a paper bag and fold to close tightly. Let stand 10 minutes, then remove, peel, and coarsely chop. For quicker cook time, skip this step and sauté peppers with zucchini, onion, and garlic in step 4.
4. Heat a large Dutch oven over medium-high heat. Add oil to pan; swirl to coat. Add zucchini, onion, and garlic; sauté 4 minutes. Stir in chili powder, cumin, and paprika; sauté for 30 seconds. Add roasted peppers and chilis, 1/2 cup water, quinoa, salt, tomatoes, beans, and broth; bring to a boil. Reduce heat to medium-low; cover and simmer for 20 minutes or until quinoa is tender.
5. Serve topped with chopped avocado.

#### Nutrition Information (per serving)

- Calories: 360
- Total fat: 15 g
- Saturated fat: 2 g
- Cholesterol: 0 mg
- Sodium: 470 mg
- Total carbohydrate: 50 g
- Dietary fiber: 14 g
- Sugars: 13 g
- Added sugars: 0 g
- Protein: 12 g