# DIETITIAN'S CORNER

# Meeting Dietary Goals based upon the 2005 Dietary Guidelines

# By Barbara Wakeen, MA, RD, LD, CCFP



The announcement of the *Dietary Guidelines for Americans 2005 [guidelines]* in January raised some discussion from the Corrections Dietitians group in regard to modifying the menus in order to meet the new meal pattern recommendations.

• How can we provide the recommended number of servings of food

groups while maintaining budget constraints?

• Are state DOC's modifying menus to meet these guidelines?

• How can we reduce sodium to 2300 mg when large caloric levels and processed foods are served? 2300 mg of sodium is currently considered a therapeutic level of sodium in our facilities.

• What modifications are being made both to menus and by manufacturers to accommodate the fat, cholesterol and saturated fat restrictions?

The counter to this discussion is, "as long as we are meeting the DRI's and RDA's we should be in compliance." However, to further the discussion, the lack of complete nutrient data in nutritional analysis programs has raised even more concern in regard to meeting all of the guidelines and dietary allowances.

Lack of data ties into our nutritional analyses, because many of us use specific data from manufacturers. Unless we have a complete nutrient breakdown of the items presented, it is possible that our data is incomplete.

#### **Basis and Rationale**

These guidelines are based on scientific evidence to *promote health, and to reduce risk of chronic disease* using diet and physical activity as a vehicle. These guidelines parallel the focus of the latest DRI's that have been presented at ACFSA conferences for the past few years.

The rationale of the *guidelines* attributes a poor diet to inactivity, resulting in over consumption, and ultimately contributing to obesity and other disease states. According to these guidelines, balancing calories with physical activity enhances the health of most individuals.

One premise of the guidelines is that nutrients should be

provided through consumption of a variety of food sources. While fortified foods and supplements are considered beneficial in providing nutrients that may otherwise be lacking, supplements should not take the place of a healthy diet.

# **KEY RECOMMENDATIONS**

The recommendations below are a partial list within the guidelines that will impact our daily operations, menus, and budgets.

#### Food Groups

• Consume a sufficient amount of fruits and vegetables. Two cups of fruit and two and one-half cups of vegetables per day are recommended for a 2,000-calorie diet, with variable serving sizes depending on the calorie level.

• Choose a variety of fruits and vegetables each day. More specifically, select from all five vegetable subgroups (dark green, orange, legumes, starchy vegetables, and other vegetables) several times per week.

• Consume three or more ounces of whole-grain products per day, with the rest of the recommended grains coming from enriched or whole-grain products. In general, at least half the grains should come from whole grains.

• Consume three cups per day of fat-free, low-fat milk or dairy products.

#### Fats

• Consume less than ten percent of calories from saturated fatty acids and less than 300 mg/day of cholesterol, and keep trans fatty acid consumption as low as possible.

• Keep total fat intake between 20 to 35 percent of all daily calories. Most fats should come from sources of polyunsaturated and monounsaturated fatty acids, such as fish, nuts, and vegetable oils.

• When selecting and preparing meat, poultry, dry beans, and milk or milk products, make choices that are lean, low-fat, or fat-free.

• Limit intake of fats and oils high in saturated and/or trans fatty acids, and choose products low in such fats and oils.

#### Carbohydrates

- Choose fiber-rich fruits, vegetables, and whole grains often.
- · Choose and prepare foods and beverages with minimal

added sugars or caloric sweeteners, referring to consumption amounts suggested by the USDA Food Guide and the DASH Eating Plan.

• Reduce the incidence of dental problems by practicing good oral hygiene techniques, as well as reducing consumption of foods containing sugarand starch.

#### Sodium and Potassium

• Consume less than 2,300 mg (approximately 1 teaspoon) of sodium per day.

• Choose and prepare foods with minimal salt. At the same time, consume potassium-rich foods, such as fruits and vegetables.

• Source:

http://www.health.gov/dietaryguidelines/dga2005/document/html/executivesummary.htm (Accessed 3/21/05 )

For additional information visit: http://www.healthierus.gov/dietarygui delines

#### **Corrective Action**

To date, the results of our discussion have been mixed. Some agencies are remodeling their menus to better meet these guidelines, while others are maintaining that meeting the DRI's through a computerized analysis is in compliance with their agency standards.

As for those agencies that acknowledged making changes, many have not yet been finalized. Some of the proposed changes identified thus far include reducing overall calories, increasing meatless meals and/or incorporating soy products into recipes (to offset fat and cholesterol), offering skim milk, omitting/limiting non-nutritional items such as sugar and coffee, and omitting salt in cooking.

#### Considerations

There are many items to consider when attempting to meet this goal:

#### **Budgets and Food Costs**

To contain costs, we often utilize fortified foods to provide nutrients that might otherwise be acquired through additional food items. For example, many of our institutions serve only one to two servings of

fruit per day. We offer vitamin C fortified beverages to ensure that the Vitamin C requirements are met. Five servings of vegetables are possible while considering the nine subgroups identified, and while considering that larger portions of potatoes and legumes are typically served, we don't always guarantee that number. (Don't forget that the 9 servings total fruits and vegetables were based on a 2000-calorie diet!). Very few agencies/institutions serve more than two cups of milk per day. Many institutions serve only one cup of milk in addition to a calcium-fortified beverage.

# Labor Cost

Civilian and inmate labor must be considered. Using limited sodium in foods often requires additional scratch preparation. Using the skills of the inmates and the civilian labor hours can create a huge impact in overall operation budgets.

# **Tray Capacity**

We always have to consider our current tray capacity in menu planning. Our vendors have been accommodating us with trays with more compartments that remedy this dilemma. Considering nine servings of fruits and vegetables alone divided among three meals, our planning will have to take dietary increases into consideration if we are to try meeting the new guidelines.

# Contraband/Pilferage/Added Costs

Serving two cups of fruit per day may result in many wardens and jail administrators raising an eyebrow to a major "hooch" or "pruno" problems, as well as potential plumbing issues including stuffing fresh fruits in the commodes.

On a positive note, if modifications accommodate the *Dietary Guidelines for Americans 2005*, we will see less medical diets, as the entire menu meets most if not all of the guidelines/recommendations. Recommendations are based upon those provided by the American Heart Association, the DASH Diet, the American Diabetes Association's position on Diabetes Care in Corrections, and the National Commission on Correctional Health Care Standards for main population menus.

# Conclusion

This discussion will continue with modification, opposition and quandary. It will involve education at all levels, as well as validation for action, or lack there of, in assessing our stance in regard to menus and compliance. The Nutrition Professionals discussion at the ACFSA International Conference in Savannah will address progress within our many agencies.

#### Meetings and Announcements

#### ACFSA International Conference

Dietitians in Corrections Networking Luncheon Time and Date to be announced.

# National Commission on

**Correctional Health Care (NCCHC)** National Conference October 8 - 12, 2005 Las Vegas, Nevada For more information visit www.ncchc.org.

American Dietetic Association(ADA) FNCE St. Louis, Missouri October 22 - 25, 2005

#### Membership Information

If you would like to be added to the Dietitians in Corrections networking EML, please email me directly at bwakeen@neo.rr.com. This is an informal discussion group, and your name/email address will be listed in each email sent to the group.

If you are interested in joining the CD-HCF Corrections Sub-unit, contact me directly at bwakeen@neo.rr.com. If you are already a member and want to subscribe the Corrections Sub-unit EML or be listed in the directory, visit the CD-HCF web site at www.cdhcf.org/subunits.