

community April NEWSLETTER



April is Alcohol Awareness Month, a time to raise awareness and understanding of alcohol abuse. Over time, excessive alcohol consumption can lead to the development of chronic diseases and other serious issues that affect your quality of life, physical and mental health.

The World Health Organization estimates that alcohol kills three million people throughout the world every year. In other words, alcohol is the cause of 5.3% of all human deaths annually. Jan 8, 2024

Binge Drinking:

NIAAA defines binge drinking as a pattern of drinking alcohol that brings blood alcohol concentration (BAC) to 0.08 percent - or 0.08 grams of alcohol per deciliter - or higher. For a typical adult, this pattern corresponds to consuming 5 or more drinks (male), or 4 or more drinks (female), in about 2 hours.

The Substance Abuse and Mental Health Services Administration (SAMHSA), which conducts the annual National Survey on Drug Use and Health (NSDUH), defines binge drinking as 5 or more alcoholic drinks for males or 4 or more alcoholic drinks for females on the same occasion (i.e., at the same time or within a couple of hours of each other) on at least 1 day in the past month.

Heavy Alcohol Use:

NIAAA defines heavy drinking as follows:

For men, consuming five or more drinks on any day or 15 or more per week

For women, consuming four or more on any day or 8 or more drinks per week

SAMHSA defines heavy alcohol use as binge drinking on 5 or more days in the past month.

Patterns of Drinking Associated with Alcohol Use Disorder:

Binge drinking and heavy alcohol use can increase an individual's risk of alcohol use disorder.

Certain people should avoid alcohol completely, including those who:

Plan to drive or operate machinery, or participate in activities that require skill, coordination, and alertness

Take certain over-the-counter or prescription medications

Have certain medical conditions

Are recovering from alcohol use disorder or are unable to control the amount that they drink

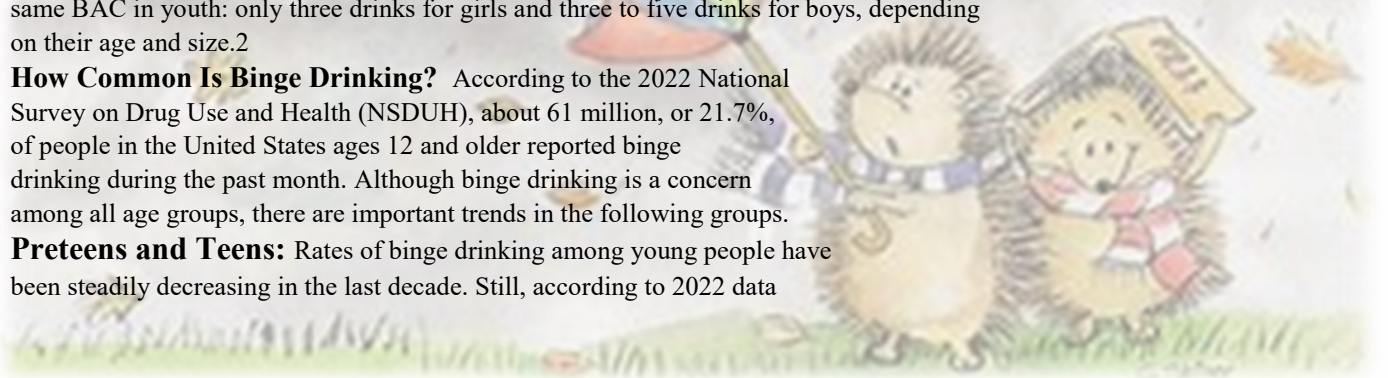
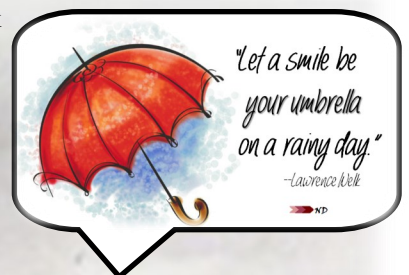
Are younger than age 21

Are pregnant or may become pregnant

What Is Binge Drinking? The National Institute on Alcohol Abuse and Alcoholism (NIAAA) defines binge drinking as a pattern of drinking alcohol that brings blood alcohol concentration (BAC) to 0.08%—or 0.08 grams of alcohol per deciliter—or more. This typically happens if a woman has four or more drinks, or a man has five or more drinks, within about 2 hours. Research shows that fewer drinks in the same time frame result in the same BAC in youth: only three drinks for girls and three to five drinks for boys, depending on their age and size.²

How Common Is Binge Drinking? According to the 2022 National Survey on Drug Use and Health (NSDUH), about 61 million, or 21.7%, of people in the United States ages 12 and older reported binge drinking during the past month. Although binge drinking is a concern among all age groups, there are important trends in the following groups.

Preteens and Teens: Rates of binge drinking among young people have been steadily decreasing in the last decade. Still, according to 2022 data



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from the Monitoring the Future survey, 2.2% of 8th graders, 5.9% of 10th graders, and 12.6% of 12th graders reported binge drinking in the past 2 weeks.

Young Adults: Rates of binge drinking among people ages 18 to 25 have been decreasing in the past decade, but remain high (29.5% in 2022).⁶ According to the 2022 NSDUH, of full-time college students ages 18 to 22, 49.0% drank alcohol and 28.9% engaged in binge drinking in the past month.

Older Adults: About 9.7% of adults ages 65 and older reported binge drinking in the past month.⁴ Binge drinking among this age group is of particular concern because many older adults use medications that can interact with alcohol, have health conditions that can be exacerbated by alcohol, and may be more susceptible to alcohol-related falls and other accidental injuries.

Women: Studies show that among U.S. women who drink, approximately 1 in 4 have engaged in binge drinking in the last month, averaging about three binge episodes per month and five drinks per binge episode. These trends are concerning because women are at increased risk for health problems related to alcohol misuse.

What Are the Consequences and Health Effects of Binge Drinking? Although drinking any amount of alcohol can carry certain risks, crossing the binge threshold increases the risk of acute harm, such as blackouts and overdoses. Binge drinking also increases the likelihood of unsafe sexual behavior and the risk of sexually transmitted infections and unintentional pregnancy. These risks are greater at higher peak levels of consumption. Because of the impairments it produces, binge drinking also increases the likelihood of a host of potentially deadly consequences, including falls, burns, drownings, and car crashes.

Over time, alcohol misuse, including repeated episodes of binge drinking, contributes to liver and other chronic diseases as well as increases the risk of several types of cancer, including head and neck, esophageal, liver, breast, and colorectal cancers.

How Does Binge Drinking Affect Adolescents? Brain development, once thought to taper off at the end of childhood, enters a unique phase during the adolescent years. Research indicates that repeated episodes of binge drinking during the teen years can alter the trajectory of adolescent brain development and cause lingering deficits in social, attention, memory, and other cognitive functions.

What Is “High-Intensity” Drinking? High-intensity drinking is defined as alcohol intake at levels twice or more the gender-specific threshold for binge drinking. This dangerous drinking pattern means 8 or more drinks for women and 10 or more drinks for men on one occasion.

April is Alcohol Awareness Month — Wisconsin Alcohol Abuse Statistics

Binge-drinking is a significant problem in Wisconsin, and alcohol-related deaths are more likely to involve older, long-term users.

- * 25.8% of Wisconsin adults over 18 binge drink at least once per month.
- * The median number of drinks per binge is 5.5; the 25% most active drinkers consume a median 7.5 drinks per binge.
- * Binge drinking adults in Wisconsin binge a median 1.7 times monthly; the 25% most active drinkers binge 3.8 times per month.
- * An average of 2,651 annual deaths in Wisconsin are attributable to excessive alcohol use.
- * The 5-year average annual rate of excessive alcohol deaths per capita in Wisconsin increased by as much as 51.4% from 2015 to 2019.
- * Wisconsin averages one (1) death from excessive alcohol use for every 2,223 people aged 18 and older or 5.75 deaths for every 10,000 adults.
- * 68.4% of people who die from excessive alcohol use in Wisconsin are male.
- * 63.2% of excessive alcohol use deaths are from chronic causes, such as Alcohol Use Disorder.
- * 86.1% of deaths in Wisconsin from excessive alcohol use are adults aged 35 years and older.
- * 2.30% of people in Wisconsin who die from excessive alcohol use are under the age of 21.
- * The CDC estimates 64,214 years of potential life is lost to excessive alcohol use each year.
- * Wisconsin taxpayers spent \$4.453 billion as a result of excessive alcohol use in 2010; adjusted for inflation, this is equivalent to \$6.011 billion or \$2.19 per drink in 2022 US\$.



Division of Public Health Information Update

CDC Health Alert Network (HAN) Regarding Measles Vaccination

This message is being sent to local health officers, Tribal health directors, Health Alert Network (HAN) subscribers, VFC providers, VFA providers, Wisconsin vaccinators, LTHD nurses, local health department staff, select immunization program staff, and infection preventionists.

The CDC released the following HAN on March 18, 2024: [Increase in Global and Domestic Measles Cases and Outbreaks: Ensure Children in the United States and Those Traveling Internationally 6 Months and Older are Current on MMR Vaccination](#).

Since the start of 2024 there have been 58 confirmed measles cases in the United States. There were only 58 domestic cases of measles in 2023. The CDC outlines guidance on measles prevention for all international travelers 6 months and younger, and all domestic travelers 12 months and younger.

Measles is a highly contagious infectious disease that can be transmitted by direct contact with infectious droplets or by airborne spread when an infected person breathes, coughs, or sneezes.

As of March 20, 2024 there have been no confirmed cases of measles in Wisconsin.

Updated maps of MMR coverage for children can be found on the [DHS website](#) under the accordion titled "reports for children aged 0-18 years."

DHS continues to recommend the following action items

Health care providers are required to immediately report by telephone the suspected or confirmed case to the [Local and Tribal Health Department \(LTHD\)](#) in which the patient resides. [Detailed guidance regarding measles case investigation and reporting](#) from DHS is also available.

- Review policies and procedures regarding intake of a measles case. Educate staff on prevention practices.
- Keep a record of staff who have documented measles immunity. Only those with immunity should care for a suspected measles case.
- Assess supply of personal protective equipment (PPE) and alcohol-based hand sanitizer available to staff.
- Recommend that health care providers and facilities take steps to ensure that their patient populations are up to date on their measles vaccines.

April is Sexual Assault Awareness Month

Sexual violence happens in every community and affects people of all genders and ages. Sexual violence is any type of unwanted sexual contact. This includes words and actions of a sexual nature against a person's will and without their consent. A person may use force, threats, manipulation, or coercion to commit sexual violence. Forms of sexual violence include:

- Rape or sexual assault
- Child sexual assault and incest
- Sexual assault by a person's spouse or partner
- Unwanted sexual contact/touching
- Sexual harassment
- Sexual exploitation and trafficking
- Exposing one's genitals or naked body to other(s) without consent
- Masturbating in public
- Watching someone engage in private acts without their knowledge or permission
- Nonconsensual image sharing



What is consent? Consent must be freely given and informed, and a person can change their mind at any time. Consent is more than a yes or no. It is a dialogue about desires, needs, and level of comfort with different sexual interactions.

Who does sexual violence impact? Victims of sexual violence include people of all ages, races, genders, and religions — with and without disabilities.

- Nearly one in five women in the United States have experienced rape or attempted rape some time in their lives (Black et al., 2011).

In the United States, one in 71 men have experienced rape or attempted rape (Black et al., 2011).

An estimated 32.3% of multiracial women, 27.5% of American Indian/Alaska Native women, 21.2% of non-Hispanic black women, 20.5% of non-Hispanic white women, and 13.6% of Hispanic women were raped during their lifetimes.

People who sexually abuse usually target someone they know.

- Nearly three out of four adolescents (74%) who have been sexually assaulted were victimized by someone they knew well (Kilpatrick, Saunders, & Smith, 2003).
- One-fifth (21.1%) were committed by a family member (Kilpatrick, Saunders, & Smith, 2003).

Choosing to violate another person is not about “drinking too much,” “trying to have a good time,” or “getting carried away,” nor is it about the clothes someone was wearing, how they were acting, or what type of relationship they have with the person who abused them. Violating another person is a choice.

There are many ways you can use your experience with sexual violence to help others.

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These are just a few to consider:

- **Become an advocate for survivors.** Use what you've learned from your healing process to help others having a similar experience. Although every survivor's path is unique, your own first-hand knowledge of your process can help you to better relate to the unique experiences other survivors are having. The best way to become an advocate is to reach out to your local rape crisis center and inquire about volunteering as an advocate. Advocates usually answer telephone calls from survivors and may also provide support to survivors during forensic exams or court proceedings.

Become an activist. The services and support available to survivors today exist because of decades of activism. There is no one way to become an activist for social changes that end sexual violence, but many people begin their activism by finding like-minded people in their community and working together to raise awareness about sexual violence and advocate for change through organizing art projects, performances, marches, or speaking to lawmakers. [V-Day](#), [Denim Day](#), and [Take Back the Night](#) are good examples of community events

where many activists get their start. Contact your [local rape crisis center](#) to see how you can get involved in your local community. If you are a college student, [SAFER](#) has many resources you can use to create change on your campus.

[Need help?](#)

If at any time you feel that you are in immediate danger, we strongly urge you to [call your local police department's emergency number \(911\)](#)

National Sexual Assault Hotline The National Sexual Assault Hotline's trained support specialists are available to offer support, information, advice or a referral. [You are not alone. 800.656.HOPE \(4673\)](#)



SEXUAL ASSAULT
AWARENESS MONTH
APRIL

April is Stress Awareness Month

Health

A cluster of small, colorful butterflies in shades of orange, black, and white, positioned in the upper right corner of the page.

The Butterfly Effect: Understanding the Impact of Small Actions on Mental Health

The Butterfly Effect, a concept from chaos theory, illustrates how small actions or events can lead to significant consequences in complex systems. When applied to mental health, this idea highlights the profound impact of seemingly minor decisions, habits, or experiences on our emotional well-being. This comprehensive guide explores the connection between the Butterfly Effect and mental health, discusses the importance of recognizing its influence in our daily lives, and provides practical strategies for harnessing its power to create lasting positive change.

The Butterfly Effect and Mental Health — The Butterfly Effect is a chaos theory concept suggesting that small actions or events can lead to significant consequences in complex systems. In the context of mental health, the Butterfly Effect implies that seemingly minor decisions, habits, or experiences can profoundly impact our emotional well-being and overall quality of life. By understanding the interconnected nature of our thoughts, feelings, and actions, we can make more conscious choices that promote mental health and foster personal growth.

Small Actions with Significant Impacts — Various small actions can significantly impact our mental health, either positively or negatively. Here are some examples of minor habits or choices that can contribute to our emotional well-being:



Mindfulness practices: Daily mindfulness exercises, such as meditation or deep breathing, can help reduce stress, improve focus, and promote emotional stability.



Physical activity: Incorporating regular physical activity into our routine, even just taking short walks, can boost mood, decrease anxiety, and improve overall mental health.



Sleep hygiene: Prioritizing sleep and maintaining a consistent sleep schedule can profoundly impact our emotional well-being and cognitive functioning.



Social connections: Cultivating and maintaining healthy relationships can provide emotional support, enhance self-esteem, and improve overall mental health.
Acts of kindness: Performing small acts of kindness for others can foster feelings of happiness and well-being and strengthen social bonds.

Recognizing the Butterfly Effect in Everyday Life — To leverage the power of the Butterfly Effect in our mental health journey, we must first recognize how our choices and habits contribute to our emotional well-being. Some strategies for cultivating this awareness include:

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 **Self-reflection:** Regularly engage in self-reflection to identify patterns in thoughts, feelings, and behaviors that may impact mental health.

 **Journaling:** Use journaling to track emotions, identify triggers, and explore the impact of small actions on mental health.

 **Seeking professional guidance:** Work with a mental health professional to uncover the connections between seemingly minor choices and overall emotional well-being.

The Power of The Butterfly Effect on Mental

Health Improvement — By understanding the Butterfly Effect's influence on our mental health, we can take proactive steps to cultivate habits and make choices that positively impact our emotional well-being. Here are some tips for harnessing the power of the Butterfly Effect:

 **Set small, achievable goals:** Focus on setting realistic, incremental goals that contribute to improved mental health, such as increasing physical activity or practicing mindfulness daily.

 **Be patient and persistent:** Recognize that change takes time and that the impact of small actions may not be immediately apparent.

Celebrate small victories: Acknowledge and celebrate progress, even if it seems minor, to build momentum and reinforce positive habits.

Build a support network: Share your mental health journey with trusted friends or family members who can provide encouragement and accountability.

The Ripple Effect of Positive Mental Health Choices: When we consistently make small, positive choices and cultivate healthy habits, we create a ripple effect that can lead to lasting improvements in mental health. By recognizing the power of the Butterfly Effect and actively engaging in practices that promote emotional well-being, we can foster resilience, personal growth, and overall life satisfaction.

Final Thoughts: The Butterfly Effect is a powerful concept that highlights the potential impact of small actions on our mental health. Through consistent effort and a focus on incremental progress, we can harness the power of the Butterfly Effect to create a lasting positive impact on our mental health and overall quality of life. By cultivating an awareness of the interconnected nature of our thoughts, feelings, and actions, we can make more informed decisions and develop habits that contribute to improved emotional well-being. By prioritizing self-care and embracing the ripple effect of our choices, we can work towards a more balanced, resilient, and fulfilling existence.





Did you know?

Fun (Seriously) Umbrella History & Trivia

— by Jean Grigsby Updated: October 17, 2023

Also known as a **bumbershoot**, **broolly**, **parapluie**, and **parasol**, the umbrella shields us against rain, snow, sunlight, and wind. You might not think there's much that's exciting about the umbrella, but you'd be wrong! Check out these interesting facts and trivia about the ultimate weather accessory.

The Origin of the Umbrella

Its origins can be traced back more than 3,000 years to China, Egypt, and other ancient civilizations. The umbrella was first developed as protection from the Sun and was a symbol of status, held by servants over royalty and others of high rank. Feathers, leaves, paper, and silk were all used as coverings, some of which were oiled or varnished to make them waterproof. The ribs were originally made from cane, and later, whalebone, but in the 1800s, steel began to be used for the ribs and oilcloth for the covering, which made the umbrella much stronger.

Today, the umbrella's basic design remains much the same, but the coverings are mostly made of synthetic fibers in vivid colors.

Some Interesting Umbrella Facts and Trivia

According to UmbrellaHistory.net:



The word umbrella comes from the Latin word “umbra” which means shade or shadow.



Modern-day acceptance of umbrellas started to spread across Europe in the middle of the 18th century. Up until that point, umbrellas were viewed as a female fashion accessory.



The first man who publicly carried umbrella was Englishman Jonas Hanway. His influence finally introduced the umbrella to the male population of England, and soon after the entire world.



Modern-day umbrellas are coated with Teflon, which makes their canopy waterproof.



Many religions adopted umbrellas and parasols as a part of their ceremonies and processions.



One of the most famous hats that serves as a big parasol is the Mexican *sombrero* (which can be translated as “shade maker”).



During the 19th century, European fashion demanded that umbrellas be held in the middle of their shaft, with the handle pointing toward the ground.



English nobility preferred umbrellas made from blue or green silk.



The first working “folding umbrella” was introduced in 1969 by Bradford Philips.

Over 33 million umbrellas are sold in the United States each year.

As for the future of the umbrella, Japanese researchers have invented a high-tech umbrella—“to make rainy days fun”—that projects images on the inside. Users get to scroll the images by twisting the handle. What do you think? Good idea, or bad?

RECIPES

Easy Beef Empanadas

PREP TIME 15 minutes - TOTAL TIME 30 minutes

Ingredients

- 1 package of pre-made pie crust (2 rolls)
- 1 pound of lean ground beef - 80% Lean or less will work - just drain off the excess fat before continuing.
- 1/4 cup diced yellow onion
- 1/2 medium diced bell pepper, any color
- 1 teaspoon cumin
- 1 teaspoons minced garlic
- 1/4 teaspoon salt
- 1/4 teaspoon pepper
- 1 teaspoon chili powder
- 1 cup Mexican blended cheese
- 1 egg

Instructions

- Preheat oven to 350°F
- Prepare a cookie sheet with a baking mat, non-stick foil, parchment paper or oil. Set aside.
- In a large skillet cook ground beef, onions and bell pepper until beef is cooked through, onions are translucent and peppers are soft.
- Drain any excess fat.
- Add cumin, garlic, salt, pepper, and chili powder to ground beef mixture and cook for 2 minutes.
- Remove from hot burner.
- Roll out pie crusts. Using a bowl similar to a cereal bowl, trace circles onto each pie crust. I can get 3 per crust. A smaller bowl will result in more circles.
- With leftover pie crust, mix together and roll out and continue cutting circles, until all dough is used.
- Lay a pie crust circle down. on prepared cookie sheet. Add 2 - 3 Tablespoons of filling to the middle of the circle. Top with 1 Tablespoon a cheese.
- Fold pie crust circle in half, keeping the filling inside, and press edges down with a fork.
- Repeat steps 9 and 10 for all empanadas.
- Arrange empanadas on cookie sheet.
- Beat egg in a small bowl and brush on top of each empanada.
- Bake for 12 - 15 minutes or until tops are golden.
- Remove from oven and serve with your favorite salads, salsas and guacamole.

Nutrition Information: SERVING SIZE: 1

Amount Per Serving: **CALORIES:** 409 **TOTAL FAT:** 24g **SATURATED FAT:** 10g
TRANS FAT: 0g **UNSATURATED FAT:** 11g **CHOLESTEROL:** 118mg
SODIUM: 433mg **CARBOHYDRATES:** 17g **FIBER:** 1g **SUGAR:** 2g **PROTEIN:** 29g



Lavender and Earl Grey Boba Tea



Ingredients

- boba tapioca pearls (your desired amount, cooked per package directions)
- honey (a few spoonfuls, divided)
- 5 earl grey tea bags
- 3 cups water
- 1 tablespoon dry lavender flowers (culinary grade)
- spoonful of sweetened condensed milk (or more for desired taste)
- milk (dairy or non-dairy) or half & half

Directions

Prepare your tapioca pearls according to the package directions, and mix with a spoonful or two of honey for flavor and store in an airtight container. The cooked tapioca pearls are best when fresh, but can be used for up to 24 hours.

To make the lavender infused earl grey tea concentrate: Place dried lavender into a tea infuser. Boil 3 cups of water, remove from heat and steep the earl grey tea bags and lavender for 5 minutes. Discard the tea bags and lavender once fully brewed. Store this tea concentrate in the refrigerator until ready to use.

To enjoy a glass of Lavender and Earl Grey Boba Tea: Add your desired amount of prepared tapioca pearls to a glass, top with a spoonful each of honey and sweetened condensed milk, stir until combined. Leaving room for ice, fill the glass 2/3 full with the earl grey tea concentrate and then fill the remaining 1/3 of the way with your chosen milk and give it all a good stir. Taste and adjust sweetness and add more honey or sweetened condensed milk if desired. Add ice and enjoy with a wide straw.

To enjoy hot, refrain from refrigerating the tea concentrate and boba and make a glass once they're prepared following the same amounts for a hot drink, OR you can reheat once it is all combined in a microwave safe cup adding in the boba after the liquids have been heated. Keep in mind the boba will only be fresh for about 24 hours after preparing.



The National Alliance on Mental Illness (NAMI) Wolf River Region Need Your Help

NAMI Wolf River Region are looking for 2-4 interested community members who are willing to support other community members who are struggling with a Mental Illness by becoming a facilitator of the **Hearts + Minds** program available to our community from NAMI.

Hearts + Minds is a presentation program that prepares individuals and family members to care for mental and physical health at the same time. NAMI **Hearts + Minds** is a wellness program designed to educate and empower individuals and family members to better manage health; both mentally and physically. A participant will gain information and tools that can help plan and achieve recovery goals and better overall health through:

- Advocating for your health;
- How physical and mental health are specifically connected;
- Gut health and how nutrition can affect the brain;
- The interplay of diet and fitness and how they can influence your symptoms;
- Substance abuse and smoking cessation; and
- How to gain a greater sense of control over how you feel.

Timeline: As soon as August 2024. Registration and Interest is important. We have NAMI staff that will be providing the training in August. This training will provide public/community sessions within the community for 1.5 hours over a 5 week timeline.

Program Leader Requirements: Individuals living with mental illness in recovery or family members of individuals living with mental illness that are willing to share their story with Hearts + Minds program participants

Training Requirements: Take the Hearts+Minds class which takes place in a 1.5 hours online format over a 5 week timeline a 6-hour online trainer course with NAMI Wisconsin Hearts +Minds state trainers.

If interested, please contact Shannon Wilber at 715-799-3861 or email: swilber@co.menominee.wi.us