



# PARTNERSHIP PROJECT

HIV ADVOCACY & SERVICES SINCE 1995

The Network  
News  
2012  
October Issue #150

OREGON HIV/AIDS CASE MANAGEMENT

## Partnership Project Annual Thanksgiving Program 2012



**Next Meeting**  
**November 13th**

**Working with Sex  
Offenders**

**Katherine Gotch, MA**  
**Integrated Clinical**  
**and Correctional**  
**Services**  
**and**  
**Sandra Rorick,**  
**Multnomah County**  
**Department of**  
**Community Justice**

**Interested in helping to provide a Thanksgiving Meal for someone  
living with HIV/AIDS?**

We're getting ready for our 5th annual Thanksgiving Program and we need your help!  
Last year we provided over 100 families with Turkey and all the fixins'.  
We are able to provide each family with a meal for \$27!

Please consider making a tax deductible donation and adopting a family or two or three!

Donations can be made payable to Partnership Project and  
mailed to 5525 SE Milwaukie Avenue, Portland, OR 97202  
or online at [HTTP://WWW.OHSU.EDU/PARTNERSHIP/DONATE.HTML](http://www.ohsu.edu/partnership/donate.html)



## ASK Joanne

Joanne Maurice is a dietitian with Legacy Emanuel and Multnomah County HIV Clinic with over 15 years of experience specializing in HIV nutrition

### Dieting? What is the right way to diet?

So, you want to lose weight, but how? You don't have to look very far to find the "best diet" to help you lose weight. There are many ads and promotions for the product, supplement, meal plan, cleanse, procedure, you name it, to help melt those pounds away. It can get very confusing as you try to decide what is right for you. There are many programs with proven track records, the best teach you to manage your portion sizes while teaching you to change your behaviors that encourage overeating. Long term weight loss is very hard to maintain if you don't learn to change the underlying behaviors and patterns that lead you to eat more than you need. So, what does work?

**Protein:** When compared to foods high in fat or carbohydrates, protein will keep you feeling full longer so you are not as likely to overeat. Each meal should have a low fat protein source (dry roasted nuts, lean meats, tofu, etc) to help keep you feeling satisfied longer. Eating a small protein snack between meals is another strategy to prevent over eating. Protein foods help rev up your body's metabolism, in other words you burn more calories in the process of digesting protein than you do with other foods. Protein also helps maintain your lean body mass, i.e. muscle, so you burn more calories. Nuts, surprisingly, have been shown to help with weight loss. In studies where they looked at people who ate small amounts of nuts on a regular basis vs. those who seldom eat nuts, those that seldom ate nuts weighed more. Although a small handful of nuts may have 200 calories, in the process of being digested along with revving up your metabolism, and making you feel less hungry, none of those calories "count".

**Fat:** Fat contains twice as many calories as carbohydrates and protein, so obviously foods high in fat should be eaten sparingly. Once thought to help keep you full longer since fat sits in the stomach longer, research has shown that is not the case. Subjects who ate meals higher in fat became hungry sooner than those who ate a meal higher in protein. Not only did they get hungry faster, they also ate more at the next meal. High fat meals also contribute to the risk of developing high cholesterol, heart disease, obesity, chronic inflammation and other chronic diseases.

**Fiber:** Fiber is found in whole, unprocessed foods. It is the part of the food that doesn't get broken down very easily while it goes through your gut. It too, can make you feel full longer; helps get rid of the bad fats (cholesterol), and can increase insulin sensitivity. Higher fiber diets are associated with less weight gain. At least 20 – 30 grams a day is the goal. If you don't eat a lot of high fiber foods now, don't jump right in there and make the change overnight. Go slow and let your gut get adjusted to the change.

**Alcohol:** It has almost the same amount of calories as fat, but unlike fat and protein that might use some energy in the process of being digested; the excess calories in alcohol can be a significant reason for weight gain. It is the "past the lips and on to the hips" type of calorie.

**Calories:** As they say, just a little goes a long way. Even eating 100 calories more a day than you need, every day for a year, will start packing on the pounds. Add to that is the fact that as you age, you don't need or burn calories as much as you did when you were younger. The flip side is that making small changes, by eliminating at least 100 calories a day AND increasing your activity, can be an easy way of taking off weight and keeping it off. Be sure to spread out the calories throughout the whole day. It is best to eat 4-5 small meals, plus light snacks, than to eat 1 or 2 large meals.

**Exercise:** Sorry, no getting around this one. If you want to lose weight and keep it off, this needs to be part of your DAILY routine. If time is a factor, try doing it in small bursts. The goal is to do at least 30 minutes a day. Try exercising (push ups, sit ups, run in place, dance, etc) during every TV commercial break and the minutes will add up. Any added activity is better than doing nothing. The more you do, and the longer you do it, the better the results for losing weight. Those who have been successful at losing significant amounts of weight and keeping it off for years, exercised at least one hour a day.

Start your journey to a better weight by making consistent small changes. Get up and move more often, look at what you are eating and eat when you are hungry, not when you are \_\_\_\_ (bored, lonely, etc). Stop eating when you are satisfied not when you are stuffed. Small, consistent changes can result in significant changes in weight. You just need to start – why not now?

## THE HUNT IS AFOOT FOR MEDICARE PART D

By Alan Edwards, Social Security Public Affairs

Hunting season is open. But rather than hunting for game, may we recommend setting your sights for the Part D Medicare prescription drug plan that's best for you? You'll have more time than usual this year, because open season is lasting longer than usual.

If you currently are enrolled in Medicare and are considering changes to your Medicare Part D plan, act now. The "open season" runs from October 15 to December 7. The Medicare Part D prescription drug program is available to all Medicare beneficiaries to help with the cost of medications. Joining a Medicare prescription drug plan is voluntary, and participants pay an additional monthly premium for the coverage.

While all Medicare beneficiaries can participate in the prescription drug program, some people with limited income and resources also are eligible for *Extra Help* to pay for monthly premiums, annual deductibles, and prescription co-payments. The *Extra Help* is estimated to be worth about \$4,000 per year. Many people qualify for these big savings and don't even know it.

To figure out whether you are eligible for the *Extra Help*, Social Security needs to know your income and the value of any savings, investments, and real estate (other than the home you live in). To qualify, you must be receiving Medicare and have: Income limited to \$16,755 for an individual or \$22,695 for a married couple living together. Even if your annual income is higher, you still may be able to get some help with monthly premiums, annual deductibles, and prescription co-payments. Some examples where your income may be higher include if you or your spouse:

- Support other family members who live with you;
- Have earnings from work; or
- Live in Alaska or Hawaii; and

Resources limited to \$13,070 for an individual or \$26,120 for a married couple living together. Resources include such things as bank accounts, stocks, and bonds. We do not count your house or car as resources.

You can complete an easy-to-use online application for *Extra Help* at [www.socialsecurity.gov](http://www.socialsecurity.gov). Click on Medicare on the top right side of the page. Then click on "Get Extra Help with Medicare Prescription Drug Plan Costs." To apply by phone or have an application mailed to you, call Social Security at 1-800-772-1213 (TTY 1-800-325-0778) and ask for the *Application for Extra Help with Medicare Prescription Drug Plan Costs* (SSA-1020). Or go to your nearest Social Security office.

And if you would like more information about the Medicare Part D prescription drug program, visit [www.medicare.gov](http://www.medicare.gov) or call 1-800-MEDICARE (1-800-633-4227; TTY 1-877-486-2048). So this open season, hunt for something that could put an extra \$4,000 in your pocket — bag the best Medicare prescription drug plan for you and see if you qualify for the *Extra Help* through Social Security. That's a trophy worth displaying in your den.

## SOCIAL SECURITY HELPS VETERANS (AND ACTIVE DUTY MILITARY) EVERY DAY

By Alan Edwards, Social Security Public Affairs

November 11 is more than just a national holiday; Veterans Day is a time to honor the men and women who risk their lives to protect our freedom. We at Social Security ask you to join us in saluting the men and women of the armed forces. Be sure to say “thank you” to a veteran on this important day.

For those who return home with injuries, it will be our turn to help them. If you know any wounded veterans, please let them know about Social Security’s Wounded Warriors website. You can find it at [www.socialsecurity.gov/woundedwarriors](http://www.socialsecurity.gov/woundedwarriors).

The Wounded Warriors website answers a number of commonly asked questions, and shares other useful information about disability benefits, including how veterans can receive expedited processing of disability claims. It is important to note that benefits available through Social Security are different than those from the Department of Veterans Affairs and require a separate application.

The expedited process is used for military service members who become disabled while on active military service on or after October 1, 2001, regardless of where the disability occurs. Even active duty military who continue to receive pay while in a hospital or on medical leave should consider applying for disability benefits if they are unable to work due to a disabling condition. Active duty status and receipt of military pay does not necessarily prevent payment of Social Security disability benefits. Receipt of military payments should never stop someone from applying for disability benefits from Social Security.

A person cannot receive Social Security disability benefits while engaging in substantial work for pay or profit. However, the work activity is the controlling factor and not the amount of pay the person receives or military duty status.

Learn more by visiting [www.socialsecurity.gov/woundedwarriors](http://www.socialsecurity.gov/woundedwarriors).

We at Social Security thank all veterans and members of the armed services for all that they do — not only on Veterans Day, but every day of the year.

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**This issue, and issues from Feb 2002 on, can be found electronically at <http://www.oregon.gov/DHS/ph/hiv/services/news.shtml>**