

# MTSU Center for Health and Human Services Newsletter



*Better Health and Well-being  
for Tennesseans and that of the Nation*



## OPPORTUNITY

**"IN THE MIDDLE OF EVERY DIFFICULTY LIES OPPORTUNITY."**

—Albert Einstein

**The Center for Health and Human Services (CHHS) has had a busy spring and summer continuing its work to promote better health and well-being for Tennesseans. Since March:**

- The center has written and submitted several grants totaling \$2.76 million. Some funding opportunities were halted or delayed during the early days of the pandemic. CHHS has successfully written and submitted grant applications including one for federal funding written in conjunction with MTSU's School of Agriculture focusing on online education for K-12 and first- and second-year college students during the pandemic, one to address substance abuse and prevention in rural Trousdale County and another addressing the opioid epidemic in Wilson County. The COVID pandemic has only worsened the ongoing national issue of substance abuse, particularly opioids, as people turn to substances as a coping mechanism. Some Tennessee counties have reported increased opioid deaths since the pandemic began as compared to earlier years, with some counties having more deaths this year due to opioid overdoses than COVID-19.
- CHHS quickly pivoted its existing research, projects, and programs

to remain functional during the pandemic restrictions and continues to meet or exceed goals for all externally funded work. Campus-based grant activities, such as those with the MTSU Mental Health First Aid program and Blue Raiders Drink Up: Healthy Choices for Healthy Students, have been modified and continue to serve our campus community.

- Final arrangements are being made with three student interns from the Department of Health

*continued on page 2*



CHHS staff (l-r): Linda Williams, mental health first aid program coordinator; Christina Byrd, program coordinator and special projects; Cynthia Chafin, associate director for community programs; Sarah Gwinn, grants coordinator; and Angela Mueller, mental health first aid trainer

## CHHS and Collaborative Opportunities for External Funding

MTSU CHHS operates primarily through external funding. Given recent and ongoing challenges with COVID-19 and decreasing budgets and with hard dollars expected to decrease, new opportunities arise for external funding and collaborative partnerships. In order to continue our mission of promoting health and well-being for all Tennesseans and that of our nation, we need financial resources to continue our work and we need partners to join us in collaborative grant applications that are more robust with diverse academic partners seated at our table.

The Center for Health and Human Services can help community partners as well as MTSU academic partners interested in externally funded collaborative opportunities that improve the health and well-being of Tennesseans and that of the nation through services offered by the center.

Whether a project, program, or research activity has already been identified and assistance is needed with securing funding or implementation, or whether assistance is needed bringing an idea to life, CHHS may serve as a grant applicant with its successful 27-year funding history and experience in multiple health-focused areas or as a collaborator providing administrative, implementation, and management functions which allows academic and community partners to focus on the proposed research or work. The center has expertise in a variety of areas that may complement your proposed scope of work, and we would be most pleased to talk with you about how CHHS can support your efforts with external funding. While we do not provide “grant writing services,” we do offer to write and submit grant proposals where CHHS has a significant role.

Please visit [mtsu.edu/chhs/services-offered.php](https://mtsu.edu/chhs/services-offered.php) to learn more.

### OPPORTUNITY *continued from page 1*

and Human Performance’s Community and Public Health degree program to complete their internships with CHHS during the upcoming fall semester.

- The center formed a partnership with the national UNTOLD initiative as the first university nationwide to pilot Campus Diaries: Behind the Smiles, a project inspired by one of our own students which provides a therapeutic outlet for students to share what’s on their minds through writing anonymous diary entries by inspiring

others with messages of hope, perseverance, and positive change. Expansion of the project is anticipated this fall to include podcasts and other multimedia activities.

- In an effort to begin seeking external funding opportunities outside of grant awards, CHHS successfully raised the minimum required dollars to establish its own foundation account and now has a dedicated CHHS account ready to accept donations. Donations may be made via the CHHS website [mtsu.edu/chhs](https://mtsu.edu/chhs).

# Staff Spotlight

## Linda Williams, MTSU Mental Health First Aid Program Coordinator

Linda Williams took on the position of mental health coordinator for CHHS in February 2019



after many years in the stressful corporate world. Her impressive resume began with a master's degree in Professional Counseling, leading to her first career as a primary counselor for an addiction treatment facility in middle Tennessee.

It didn't take long for them to discover her talents and promote her to clinical director. After a couple of years, this fulfilling profession led her to the executive director position for an addiction treatment facility in southern Louisiana and then in south Florida.

Williams is passionate when it comes to helping others and admits, "I love knowing that what I am doing impacts the lives of others for good." She goes on to say, "I came to CHHS without a clear understanding of how grant-funded programs operate and had to learn from ground zero, the bottom up, to build a concept of what CHHS does. My work experience has taught me so much: time management, employee development, leadership, and organization." Her career continued to blossom thanks to networking in the Murfreesboro community. Cynthia Chafin, CHHS associate director, hired Linda Williams after the Mental Health First Aid grant was awarded. She manages the program

and has been instrumental in the successful delivery of the service. Mental Health First Aid is a national evidence-based training program that teaches members of the general public how to help a person who is developing a mental health problem, experiencing worsening of an existing mental health problem, or in a mental health crisis.

When asked, Williams had some wonderful advice for new college students: Explore your options because there are so many. She added a bit of wisdom for those graduating and entering the workforce: Trust the process! Many times, that process doesn't look like what we think it should, but she advises that "things work out the way they are supposed to." These words should not be taken lightly, as they come from a woman who has helped more people than can be counted: patients and their family members, friends, colleagues, and many others. Williams has spread hope and love throughout her personal and professional life, setting an example for us all.

As she settles into a less stressful, but just as rewarding career, Williams is enjoying her life as a grandmother to two beautiful little girls. She loves to read, kayak, and spend time with her family (including her adorable dog). When asked if there was anything she would love to learn, she replied, "fly an airplane." Her father is a private pilot, and her "desire comes from him." Williams will one day make an amazing pilot, as she is strong, brilliant, confident, and compassionate—all traits needed to stay the course.



## You can be the difference for someone considering suicide

Do you know what to do if someone around you is having a panic attack or suicidal thoughts? A federal grant has helped MTSU employees recognize possible mental health issues in students and provide information that could help them. MTSU’s Center for Health and Human Services is implementing the Mental Health First Aid program over a three-year period with the Department of Social Work, Student Health Services, the Center for Counseling and Psychological Resources, the Charlie and Hazel Daniels Veterans and Military Family Center, and other on- and off-campus partners. Funding for the project, a grant totalling more than \$365,000, is being provided by the Substance Abuse and Mental Health Services Administration, a branch of the U.S. Department of Health and Human Services.

We take first aid and CPR courses to obtain the skills necessary to help others in an emergency; mental emergencies are just as important and may be life-threatening. Mental

Health First Aid teaches people how to help someone experiencing a mental health or substance abuse crisis. The MTSU Center for Health and Human Services has trained and continues to train faculty, advisors, campus health services, veterans’ services, and residence hall directors, among others. Staff learn risk factors and warning signs for mental illness and addiction concerns, strategies for how to help someone in both crisis and non-crisis situations, and where to turn for help. Students may also participate as a way to support their peers.

In the United States, someone dies by suicide every 12.3 minutes. For every suicide, 25 more people attempt suicide. Every day, 140 people in the United States die of a drug overdose, 91 specifically because of opioids. Approximately 80,000 people in the United States lose their life to alcohol use disorder each year. These statistics say it all. Mental illness and addiction are taking lives every day, making it more important now than ever that everyone is trained to help with Mental Health First Aid. With the right information and skills, you could respond to someone who is struggling and help them get the support they need. As a trained first aid provider, you could respond in a way that may make a difference. Information on training sessions on campus will be posted on the center’s website at [mtsu.edu/chhs](https://mtsu.edu/chhs).

Mental Health First Aid (2020). Retrieved from [mentalhealthfirstaid.org](https://mentalhealthfirstaid.org)

# CHHS Campus Collaborations

## Positive Aging Consortium

According to the Tennessee State Plan on Aging (Tennessee Council on Aging and Disability, 2017), “As of 2017, Tennessee is home to 1.57 million adults ages 60 and older. It is projected that this will grow by 37% to 2.16 million by 2030. In fact, by 2030, 28% of the entire population of Tennessee will be 60 or older. Programs and services will be essential to address the needs of this large and rapidly growing population.”

Seeing the current and growing need to care for and support an aging population, the MTSU Positive Aging Consortium was established in April 2019 by Deborah Lee, NHC Chair of Excellence in Nursing. When Lee joined the faculty in January 2019, she began meeting with faculty and others throughout the University with expertise and research interest in the population of aging and older adults. Realizing there was an opportunity to bring together these individuals from throughout MTSU, the Positive Aging Consortium was established.



The mission of the Positive Aging Consortium is to enhance the health and well-being of older adults by emphasizing positive aging through research, education, workforce development, and advocacy. There are goals in three areas—research, education, and service—with priorities to address each. The purpose of the Positive Aging Consortium is to bring together participants from MTSU, community partners, and individuals who provide services to aging and older adults to focus on framing aging from a place of positivity rather than decline. The consortium provides opportunities for partnership and collaborative research, education, and service in support of positive aging.

Three colleges at MTSU are represented on the consortium: Behavioral and Health Sciences (17 faculty), Liberal Arts (three faculty), and Business (two faculty). There are two centers/institutes represented—the Center for Health and Human Services and the Data Science Institute—as well as the Office of Research and Sponsored Programs.

*continued on page 6*



**POSITIVE AGING CONSORTIUM**

*continued from page 5*

MTSU currently offers an undergraduate minor in Aging Studies and a post-graduate certificate in Gerontology through the interdisciplinary Aging Studies program, housed in the Department of Sociology and Anthropology. The job market for services to address the demographic shift to an older population is growing and is forecast to continue to increase.

“This demographic shift is already creating a wave of new fields and opportunities

for workers of all ages. Professional certifications, however, are becoming increasingly accepted by employers and clients in many arenas . . . [and are] faster and cheaper” (*Forbes*, 2011).

References:

Tennessee Council on Aging and Disability (2017). 2017–2021 Tennessee State Plan on Aging. Retrieved from [tn.gov/aging/administration/state-plan-on-aging.html](https://tn.gov/aging/administration/state-plan-on-aging.html)

*Forbes*. An Aging Population Means New Jobs. Retrieved from: [forbes.com/sites/kerryhannon/2011/09/26/an-aging-population-means-new-jobs/#4beb892c5766](https://forbes.com/sites/kerryhannon/2011/09/26/an-aging-population-means-new-jobs/#4beb892c5766)



**One of the priorities of the Positive Aging Consortium is to increase enrollment in the undergraduate minor and the post-graduate certificate in Gerontology to help fill the void in workers prepared to provide services, programs, and support to aging and older adults and their families.** Faculty participating in the consortium provide an opportunity for students to participate in scholarly activities focused on this population, as well as assist in providing education and service opportunities within our community.

The consortium is making plans for the first Positive Aging Conference at Miller Education Center, scheduled for October 2021. The conference, originally scheduled for October 2020 but postponed due to COVID-19, will bring together MTSU faculty, community partners, older adults, and caregivers to address various strategies to support positive aging.

CHHS has been a key partner with the Positive Aging Consortium. Cindy Chafin, associate director of community programs,

*continued on page 7*



# Want to donate to further the work of MTSU's CHHS?

**MTSU CHHS operates primarily through external funding.** To continue our mission of promoting health and well-being for all Tennesseans and that of our nation, we need financial resources to continue our work. We operate from public and private grants as well as sponsorships and donations. Please consider a donation of any size which will go directly to CHHS. Visit [mtsu.edu/chhs](https://mtsu.edu/chhs), click on Donate Now, and specify that your donation is for CHHS. The site accepts MasterCard, VISA, and American Express.

[mtsu.edu/chhs](https://mtsu.edu/chhs) • Follow us on social media



## POSITIVE AGING CONSORTIUM continued from page 6



*Deborah Lee  
NHC Chair of Excellence in Nursing*

sits on the consortium and is a member of both the Steering Committee and the Conference Planning Team. Chafin brings CHHS resources, as well as the experience of producing successful grant funding, to the

consortium. As highlighted in a previous newsletter, CHHS collaborated with two consortium members, Brandon Grubbs and Vaughn Barry, in submitting a proposal to the Tennessee Department of Health, Civil Monetary Penalty Fund, for their work addressing activity and fall prevention of long-term care residents.

.....

*"We look forward to this opportunity to bring together our University with community partners who provide programs and services to older adults, as well as older adults and their caregivers, to facilitate the conversation in how we think about, talk about, and do our work in a way to support positive aging rather than focusing on decline," Lee said.*

.....

To learn more about the Positive Aging Consortium and stay informed about the upcoming conference, please visit the consortium website ([mtsu.edu/pac/index.php](https://mtsu.edu/pac/index.php)) or Facebook page ([facebook.com/PACMTSU](https://facebook.com/PACMTSU)).

## Good Health Matters!

The MTSU Center for Health and Human Services' vision is to improve the health and well-being of Tennesseans and, through multi-state partnerships, to impact health nationally.



We will continue to facilitate projects, programs, and research activities in public health issues of importance to Tennessee and the nation, consistent with the mission and purpose of MTSU. A healthier Tennessee means a population

that puts itself in the best possible position for good health in the midst of a pandemic.



### David Butler, Vice Provost for Research and Dean, College of Graduate Studies



"I commend the Center for Health and Human Services for its ongoing commitment to the health and well-being of Tennesseans and to addressing chronic disease and obesity prevention through its externally funded research and projects. We have all heard from health professionals in the daily news that those with chronic disease and obesity are at greater risk of COVID-19 complications should they be exposed to the virus. Now more than ever, the work of CHHS is vitally important and meaningful to the

people of Tennessee. I am pleased to see 'Pandemic Pounds' featured in this latest version of the CHHS newsletter, given my own experience of trying to maintain a healthy lifestyle while dealing with the many challenges of the pandemic and while under quarantine restrictions."





# Pandemic Pounds PART I

**What happens when the messages received by public health and medical professionals lean more toward hunkering down and staying home than toward getting out and about with an active lifestyle?**



When it's due to a pandemic, it certainly creates a change in mindset and can seem very contradictory to advice we have been given for years. What we are now being asked to do is 360 degrees from what health experts have encouraged us to do for years—and were still encouraging just six short months ago. And while we are being encouraged to stay within the four walls of home as often as possible, what kind of foods are we eating while staring at those same walls for months on end? And what about that “active lifestyle”? It is the perfect setup for compounding the problems this country already is experiencing with obesity and individuals who are overweight or have obesity.

For months, most gyms, fitness clubs, and similar venues were closed during stay-at-home orders, and trips to grocery stores often meant coming home with whatever happened to be on the shelves as people were often in a state of panic and picking the shelves clean. Immediately placing people in quarantine requires a dramatic change in lifestyle for most. The psychosocial aspects are tremendous—significant enough to be a separate topic to themselves. What about the physical impact of the pandemic, specific to healthy weight and the food and activity levels brought about by the pandemic? It is certain that there will be research on this topic, and we will soon learn a lot more. For now, we can start with what we do know.

Being at a healthy weight and free from chronic disease is important at any time, but especially in the era of COVID-19. According to the Centers for Disease Control and Prevention’s National Center for Health Statistics (NCHS) data brief, the prevalence of obesity in the

*continued on page 10*



**PANDEMIC POUNDS PART I**

*continued from page 9*

United States was 42.4% in 2017–18.<sup>1</sup> We have all heard from public health and medical professionals repeatedly that it isn't just older adults who are at risk of COVID-related complications and premature death, but those with underlying health conditions, including being overweight and obesity. Preliminary research published in *The Lancet* found that as the pandemic hit Johns Hopkins Hospital in late March, younger patients began to be admitted to its intensive care unit (ICU), many of whom were obese.<sup>2</sup> An informal survey of colleagues directing ICUs at other hospitals around the country yielded similar findings, and *The Lancet* study noted several news editorials identifying obesity as an underappreciated risk factor for COVID-19. With weight being a risk factor for several chronic diseases and conditions—and the United States having obesity rates upwards of 42%—it is wise to manage weight as best we can to reduce risk of developing chronic disease and for overall good health, especially during the COVID-19 pandemic.

A study published July 1 in the *Journal of the American Medical Association (JAMA)* examined the number of deaths reported in the U.S. in March and April of this year, when the pandemic first began, as compared with preceding years.<sup>3</sup> The study found large increases in excess deaths from underlying causes such as diabetes,



heart disease, and Alzheimer's disease in Massachusetts, Michigan, New Jersey, New York, and Pennsylvania. These states had the most COVID-19 deaths in March and April. The largest increases were in New York City, which

experienced the biggest increases, including a 398% rise in heart disease deaths and a 356% increase in diabetes-related deaths; both conditions have obesity and being overweight as risk factors. There are also issues with mental health and substance abuse that are beyond the scope of this article but equally important to consider.

**Is there any good news with all of this?**

Yes and no. We do not yet have published research on fitness and activity levels during the pandemic. However, there are several unscientific polls and studies that give a picture of this. According to eBay sales data, sales of dumbbells went up by 1,980% in March and April of this year compared with 2019, and weight plate sales increased by 1,355%.<sup>4</sup>



Despite the surge in purchases of fitness equipment, many have found it difficult to maintain their pre-quarantine level of activity. A survey of 2,000 Americans was conducted by the protein powder company Naked Nutrition, with assistance from OnePoll, with the survey results published in national, international, and regional media outlets such as the *New York Post*, *International Business Times*, Fox News, *People* magazine, and others. The survey found that of 2,000 Americans who routinely exercised, 65% were taking time off to “let themselves go a bit,” and half had given up on

*continued on page 11*



**PANDEMIC POUNDS PART I**  
continued from page 10

their 2020 summer fitness goals.<sup>5</sup> The study also found that 64% had tried an in-home exercise routine, with the most popular activities being outdoor walks, exercise apps, health/exercise websites, online livestream classes, and pre-taped workout videos. Respondents indicated dumbbells (48%) and yoga mats (45%) were the top isolation exercise equipment choices, with stationary bikes (41%) and ankle weights (38%) trailing behind. Responses indicated 54% purchased some kind of workout equipment. The survey also looked at eating habits and found that 50% of respondents have increased their consumption of refined carbohydrates such as pastries, white bread, and pasta, though 54% still made an effort to eat vegetables and 46% increased the amount of protein they consume.

While the Naked Nutrition survey had respondents reporting an average weight gain of 5 pounds during quarantine, there has not yet been a larger and more formal national study of how COVID-19 has impacted the nation's weight. There are a lot of anecdotal reports, including those from a Yale University School of Medicine physician who has seen 10-, 20-, and even up to 30-pound weight gains

during quarantine.<sup>6</sup> There have also been some anecdotal reports of weight loss, according to Yale. Several nonscientific polls from multiple fitness, weight loss, and other organizations show mixed results. Overall, it appears that there is some "good" along with some "not-so-good" in regards to eating and physical activity habits and weight during the ongoing pandemic. We need more time for scientific research to catch up, though, and complete a large-scale assessment of the impact the pandemic has had in these areas.



<sup>1</sup>Centers for Disease Control and Prevention (CDC). Adult Obesity Facts. National Center for Health Statistics Data Brief. Retrieved July 28, 2020, from [cdc.gov/obesity/data/adult.html](https://www.cdc.gov/obesity/data/adult.html)

<sup>2</sup>Kass, D. A. ( 1 ), Cingolani, O. ( 1 ), & Duggal, P. ( 2 ). (n.d.). Obesity could shift severe COVID-19 disease to younger ages. *The Lancet*, 395(10236), 1544–1545. doi.org/10.1016/S0140-6736(20)31024-2

<sup>3</sup>Woolf SH, Chapman DA, Sabo RT, Weinberger DM, Hill L. Excess Deaths From COVID-19 and Other Causes, March-April 2020. *JAMA*. Published online July 01, 2020. doi:10.1001/jama.2020.11787

<sup>4</sup>Srikanth, Anagha. Americans are Gaining Weight and Buying More Fitness Equipment but are They Using it? *The Hill*. *Changing America*. Retrieved July 28, 2020, from [thehill.com/changing-america/well-being/longevity/506100-americans-are-gaining-weight-and-buying-more-fitness](https://thehill.com/changing-america/well-being/longevity/506100-americans-are-gaining-weight-and-buying-more-fitness).

<sup>5</sup>Sadlier, A. (2020, May 19). Nearly half of Americans worry they'll never get their pre-quarantine body back. *New York Post*. Retrieved July 28, 2020, from [nypost.com/2020/05/19/nearly-half-of-americans-worry-theyll-never-get-their-pre-quarantine-body-back/](https://nypost.com/2020/05/19/nearly-half-of-americans-worry-theyll-never-get-their-pre-quarantine-body-back/)

<sup>6</sup>Katella, Kathy. *Yale Medicine*. Quarantine 15? What to Do About Weight Gain During the Pandemic. Retrieved July 28, 2020 from [yalemedicine.org/stories/quarantine-15-weight-gain-pandemic/](https://yalemedicine.org/stories/quarantine-15-weight-gain-pandemic/)

# Pandemic Pounds PART II

## Let's make this personal.

Wondering what people on campus say about their eating and activity habits throughout the pandemic? We asked a series of questions to a select few employees and faculty on campus about their food and activity habits to see what they had to say. It isn't all bad news! Take a look at the responses to our questions below.

*This article was written as part of an assignment in MTSU's graduate level course, NFS 6600/7600 Nutrition and Obesity, taught by Elizabeth Smith, Ph.D., RDN, LD.*



### Here's what we asked:

Has your food intake changed during the COVID-19 quarantine (quantity as well as type of foods)? Please explain if so, and indicate why you think this is so. Did you have any foods that you ate that you usually do not eat? Found new favorites?

Has your physical activity level changed during the quarantine? Please explain, if so.

Have you gained weight, lost weight, or stayed the same during the ongoing pandemic? Before the pandemic, were you at what you consider a healthy weight, or over-/underweight?

Do you believe that you experienced any "stress eating" during the quarantine so far?

Do you have anything else interesting that you would like to share?

### Responses included:

**Chandra Story, Associate Professor, Department of Health and Human Performance:**

"Prior to COVID-19, I tried to devote more time to an exercise regime and being active. When COVID hit, I began walking with a neighbor in the evenings for an hour to unwind and to take a break from the routine of dealing with a loved one who was in the hospital. I began to enjoy that time and continued it after returning to Murfreesboro. I am more active now than I was before COVID. As a person of color, this is vitally important as we know that COVID disproportionately impacts communities of color, primarily due to underlying chronic health conditions. It is important that all of us—especially people of color—keep ourselves

*continued on page 13*



**PANDEMIC POUNDS PART II**

*continued from page 12*

as healthy as possible. The social aspect of a fitness routine can also be so important to staying engaged. There are plenty of ways to stay engaged with others who support your fitness routine and can keep you motivated, such as online fitness classes with friends. Social support is an important factor in good health.”

**Sarah Gwinn, Grants Coordinator, MTSU Center for Health and Human Services:**

“I’ve been stress eating Oreos, and my coffee intake has increased from one cup a day to about three cups a day. I’ve eaten fewer salads during remote working, and I started going to the gym and then stopped when we had that COVID scare and am too afraid to go back. We have started doing more delivery food since we can’t go out, AND we are so tired of cooking at home. We still do our meal kit delivery service for three suppers a week, so at least those are healthy and portion controlled. But major yes on the stress eating AND boredom eating. I don’t like being stuck at home.”

**Anonymous, Faculty, Department of Health and Human Performance:**

“Our eating habits have certainly changed. We used to eat out 2–3 times a week. Now it’s takeout maybe once a week, and then it’s dictated by either which food truck happens to be in our neighborhood or which local business we want to support rather than health or nutrition. Also, we’ve been planning all of our home-cooked meals a week in advance and not “impulse shopping” at the grocery since we do curbside pickup now. I don’t really feel like the quantity of food has increased, except for an increase in home-baked sweets that I make with my 8-year-old daughter.

“Until the heat got unbearable, our family had been very intentional about going on at least one family walk/bike ride every day. However, I don’t think that has been enough physical activity to offset the unintentional (or “built-in”) activity I was getting just by going into work, walking to classes, doing the shopping, etc. I don’t know that stress eating has increased, but frequency of wine in the evenings has increased.”

*continued on page 14*



**PANDEMIC POUNDS PART II**  
*continued from page 13*

**Deborah Lee, School of Nursing:**

“When the pandemic necessitated that I had to work exclusively from home, this was not a huge adjustment for me. For years, my home office was my primary worksite until January 2019, when I transitioned into a new role. What WAS new to me was not having any contact with people other than through Zoom, day in and day out. Over time, the monotony of day-to-day work from home without personal interaction with others became difficult. With that came my old ‘friend,’ eating to combat boredom and/or feelings of loneliness.

“As a National Board Certified-Health and Wellness Coach (NBC-HWC), I know a good deal about habit formation, as well as how to live a healthy lifestyle. I knew what was happening when the new habit of eating snacks mid-afternoon started to take over. It wasn’t about being hungry; it was about giving myself something to distract from the feelings I was

experiencing. Even with awareness, it was difficult to not overeat. I told myself it was the reward for being productive and to soothe my feelings of boredom in my routine.

“The other side is that being home meant I didn’t have to commute, so I had more time each morning to exercise. This extra time meant I could run more frequently or add a walk after my weight-training routine in the morning. I also started taking a short walk each evening with my husband, so I had an opportunity to be outside in the evening after being inside all day. I was able to increase my combined running and walking total to 40 miles/week. This resulted in offsetting my increased eating, so my weight has remained unchanged since mid-March.

“My weight and BMI are within normal limits. Usually, I try and shed 10 pounds between the first of the year and September, when I run a 10K, and in October, when I run a half-marathon. When both of these events were cancelled, my motivation to shed 10 pounds left me. Even with not training for a race as my motivation, I find the pandemic and the time it affords me to work from home has been the blessing for me to continue to run a good amount each week and to maintain my weight.

*continued on page 15*



**PANDEMIC POUNDS PART II**

*continued from page 14*

“As I transition back into my workplace in August and my time to exercise goes back to the pre-pandemic days, my hope is the mid-afternoon snacking won’t be necessary since I will have more contact with others, and the boredom of being home alone all day isn’t an issue. I will draw upon what I know as an NBC-HWC and my awareness of my habits and patterns to guide me through this next transition. I will also remind myself that I am doing the best I can in each moment and afford myself grace in this time of uncertainty.”

**Lisa Schrader, Student Health Services:**

“Particularly during the month of our stay-at-home order, my family definitely ate more fast food and takeout food than we had before. With both adults and three young children at home all day every day, it was common for us to go out late afternoon or early evening to pick up drinks, snacks, or even meals from drive-throughs and then just drive around town to break the monotony of the day. That had not been a part of our routine prior to COVID. Now, we still do that a lot on weekends. Even though the community has opened back up, we continue to avoid public gathering spots like park playgrounds, so fast food takeout is our way to get the kids out of the house. I never expected to be a mom who fed her kids McDonald’s multiple times a week.”

**Casie Higginbotham, Department of Health and Human Performance:**

“My food intake has changed dramatically! Our family used to eat out or get takeout 5+ times per week before the pandemic. We always tried to make healthy choices, but restaurant

meals tend to be larger, fattier, and more calorie-dense than home-cooked meals. Since we are no longer running to sports and other activities and do not feel that dining out is worth the risk right now, I have been

cooking all our meals for months. I feel like our nutrient intake has definitely improved (and we’ve saved lots of money!). I am in control of what I’m preparing, and it’s been really nice to be able to do that for my family. At work, I usually eat microwave meals, but I’ve been eating lots of fresh foods at home since I have more time and access to my own pantry/fridge at lunchtime.

“My activity level has stayed about the same. I used to exercise at the YMCA, but during the pandemic, I’ve been running outside. I have a very routine running schedule that gives me a sense of structure during the week. It’s a nice way to get out of the house and enjoy being outside by myself! My weight was healthy before the pandemic, and I have stayed the same. So much is out of my control right now, but my personal choices are mine, and that gives me a sense of having control over something.

“I have definitely had some moments of stress eating. I try to not get stuck in those moments and recognize them as a temporary response that shouldn’t become the norm.



*continued on page 16*

**PANDEMIC POUNDS PART II**

*continued from page 15*

“It’s probably really important that people don’t compare their pandemic experience with others. This is a major shift in the way we live life, and we should give ourselves some grace as we figure out how to cope.”

**Anonymous MTSU Employee:**

“I think the stay-at-home period led to a more equitable distribution of household tasks between my partner and me. Most of that work had been shouldered by me in the past, but my husband has really risen to the occasion in recent months. I think being at home all the time made it clear to him just how much work was going into my typical day. But we would have conversations each morning about what our individual schedules were for the day (i.e., who had an important Zoom meeting or conference call at what time so that the other could wrangle the kids elsewhere during that

time period, did we have enough clean bottles for the babies, what food items were in our pantry/fridge for meals or did we need to put in a grocery pickup order, etc.), and do our best to divide and conquer. Now that I am back at my job site and he is still working from home, he has taken on the responsibility of preparing dinner and typically has it ready about the time I get home after picking up the kids from day care. That specific element of the pandemic has been great for our marriage.”

**Stay Healthy, MTSU!** Visit the Center for Health and Human Services website—[mtsu.edu/chhs](https://mtsu.edu/chhs)—to learn more about the work the center does to promote good health throughout Tennessee. Also visit the MTSU Health Promotion website—[mtsu.edu/healthpro](https://mtsu.edu/healthpro)—for great information on how you can stay healthy year-round and to learn more about resources available to you on campus as a student, faculty member, or employee.

**We are True Blue!**



**MTSU Center for Health and Human Services, 1114 E. Lytle St., Murfreesboro, TN 37132  
615-898-5493 • [mtsu.edu/chhs](https://mtsu.edu/chhs) • [chhs@mtsu.edu](mailto:chhs@mtsu.edu)**

0820-9140 / Middle Tennessee State University does not discriminate against students, employees, or applicants for admission or employment on the basis of race, color, religion, creed, national origin, sex, sexual orientation, gender identity/expression, disability, age, status as a protected veteran, genetic information, or any other legally protected class with respect to all employment, programs, and activities sponsored by MTSU. The Assistant to the President for Institutional Equity and Compliance has been designated to handle inquiries regarding the non-discrimination policies and can be reached at Cope Administration Building 116, 1301 East Main Street, Murfreesboro, TN 37132; [Marian.Wilson@mtsu.edu](mailto:Marian.Wilson@mtsu.edu); or 615-898-2185. The MTSU policy on non-discrimination can be found at [mtsu.edu/iec](https://mtsu.edu/iec).