Dates of Publication Surveys are conducted quarterly: March, June, September and December

Cost of Food at Home for a Week in Alaska September 2003

Up to three stores in each of 19 communities were surveyed during September of 2003 for the cost of a specific set of food and non-food items. The 104 food items selected were taken, with some modification, from the USDA Low-cost Food Plan which is itself based on a nationwide survey of eating habits of Americans, conducted in 1977-78. In addition, the costs of such items as water, propane and electricity were collected. All costs were adjusted to reflect local sales tax where applicable.

The estimated prices of unavailable food items in various communities were calculated as the expected cost as judged from the prices of all available items relative to the price of those items in Anchorage. The percent of foods unavailable in each community are shown in the survey.

Weekly food consumption rates for a family of 4, children 6 - 11 years, form the basis of the expressed food costs. All other costs are ratios of that cost as calculated from the USDA Cost of Food at Home survey issued September 2003. The cost for this family of 4 can be calculated from the table by summing the individual members. For smaller families such a sum would be too low and should be adjusted up by 20%, 10% or 5% for families of 1, 2 or 3 persons respectively. Similarly, the sum for larger families

would be too high and downward adjustments of 5% and 10% are suggested for 6 and 7 or more member families. These adjustments reflect that some economies may be realized when preparing foods for larger families.

Rows 19 through 23 represent historical food costs. The Anchorage column is a comparison of present to previous Anchorage costs. Similarly the U.S. Average column represents changes in U.S. average prices. A one (1) appearing in the Anchorage column indicates that the current Anchorage cost is 1% higher now than at that date. Therefore, rising food costs are indicated by positive values. The remaining columns are each community's cost relative to Anchorage at that date. For instance, a cell containing a one (1) indicates a community that was experiencing a food cost 1% higher than Anchorage at that date.

Body Mass Index

A bathroom scale tells us how much we weigh. If you have a reasonably sensitive scale you can watch yourself gain a pound by drinking two cups of water. This is not a risky venture as the kidneys will quickly respond to remove the extra water, and drinking plenty of water is a good health practice in any case. If you were to eat a pound of fat, a more formidable task, it would not be eliminated so readily. Instead, it would largely be stored here and there in the body. Not to worry though, eating a pound of fat doesn't result in a pound gained. Fat is an excellent energy source and even the most sedentary person burns some of the fat for energy. Nevertheless the average American consumes more fat than necessary, and this excess fat may increase a person's risk for chronic diseases, such as diabetes, cardiovascular disease, and some cancers. How much fat is too much, you might ask? A very simple and widely used approach to estimate excess body fat, and risk, uses a bathroom scale and tape measure. The bathroom scale is not enough because

people have different 'frame sizes', meaning a taller person can be expected to weigh more without having risky amounts of fat.

Body Mass Index (BMI) is the most widely used method of assessing body fat. To determine your BMI divide your weight in kilograms by your height in centimeters squared. Alternatively, multiply your weight in pounds by 703 and then divide that number by your height in inches squared. BMI values that fall outside the "normal" range (18.25- 24.9) may indicate an increased risk for chronic diseases. Since BMI values are a measure of weight, and not fat per se, both high and low values should be confirmed by other techniques. Take a tape measure and measure you waist circumference by gently drawing the tape against the skin around the smallest circumference below the ribs and above the umbilicus. A measurement of above 40" in males and above 35" in females may be indicative of increased risk. As long as you are measuring, move the tape down to the hips taking the circumference at the largest extension of the buttocks. Divide the waist circumference by the hip circumference to get the waist to hip ratio. A ratio above 1.0 is risky for men or women, a ratio below 0.9 for men or 0.8 for women is considered safe.

More than a century ago scientists observed that after water, body fat is the most easily altered component in the body. As such, frequent use of these assessment tools can detect changes in body composition and therefore risk. There are many risk factors for various diseases and many of them can be controlled. Many valuable resources such as assessment tools and educational programs are available through the National Institutes of Health at http://nhlbi.nih.gov.

Authored by Bret Luick and Andrea Bersamin

Submitted by:

Bret R. Luick Foods & Nutrition Specialist