

## Creative Living with Sheryl Borden 7100 Series - Home, Hearth & Health



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#### Transformation of Kitchens in the 20th Century The Downton Abby Years

Women power is the dominant force of today. It is making more stir and question than anything else. It is moving like a thunderstorm.

Ladies' Home Journal 1900

#### Motivations for change 1900 - 1920

• Use of clean fuels such as gas and electricity (cleaner and easier to control than coal or oil burning stoves)

• Advancement in the understanding of the need for sanitation

• Lack of cheap domestic help since the women of the house were doing the "drudgery"

• It was acceptable now for women to be educated before getting married but were pretty much limited to that of home ecomonics

1. Applying science to the task of being a housewife for the first time (cooking, cleaning, laundry and chamber work)

2. Study of domestic science was changing the thought process of the kitchen, efficiency and time was becoming important. The women of the house were doing these duties now as household servants were no linger as prevalent.

#### Notable advancements and interesting tidbits:

• You see this in Downton when they get the electric toaster and it's a big deal. Right around the turn of the century is when the electric tea kettle first surfaced.

• You also started to see standardization and mass production in the form of industrialized food processing (cocoa, coffee, some meat and milk products)

This of course made people shop and store dif-



ferently, which changed the way the kitchen needed to be designed.

• Dinner was in the dining room but breakfast and lunch were served in the kitchen on a table

• Frank Lloyd Wright started experimenting with the idea of a pre-fab house using factory line production methods (1915). Sears was much more successful at it with the catalog home.

• WWI spurred the need for speed and efficiency in the kitchen as women had to not only ration food but



also enter the work force. We see this in the kitchen staff of Downton as they struggle with food shortages during this time

• Women are shown and seem to be the chief user of technology.



#### Fascinating women of the time of Christine Frederick:

• She did over 1800 time motion studies in her own kitchen regarding efficiency

• Founded Advertising Women of New York in 1912 (men wouldn't let women in their club)

• Figured out how to advertise to the female

and primary user of household products

Brought standardization to the kitchen industry

#### Materials used in terms of design:

• Tile floor and walls in white as to show mold or bugs (sanitary)

- Linoleum
- Plaster

• Wood floors were common from a cost perspective. They were also the least expensive and the thought at the time was to keep them unfinished.

• Sinks were cast iron or porcelain. Anything else was considered unsanitary (such as zinc or soap-stone)

• The sink was typically on legs and the plumbing exposed

• Colors were white, pale green or shades of grey (lab-like inspired by the clean sanitary feel of a laboratory) It is the personality of the mistress that the home expresses. Men are forever guests in our homes, no matter how much happiness they may find there. The House in Good Taste, Elsie De Wolfe, 1920

#### Motivations for change 1920-1940

• We have realized the importance of efficiency; now we realize the need for beauty!

• You can't really look at this era and not talk about the depression

• The changing roles of women as wife partners

#### Notable advancements and interesting tidbits:

• By this time the efficiency of the kitchen had pretty much been established, and it was widely known that you were to divide the space into 2 zones

1. **Prep center** - used for prepping, cooking and serving food. (Also housed the ice box or in more modern homes, the electric refrigerator)

2. Clean up center

- where you wash and store the dishes

• Keep in mind there were still many rural homes without electricity well into the 20's and 30's

 The Hoosier cabinet was very popular as a work center of ultimate convenience

• Manufacturers used efficiency studies to standardize appli-

ances and work surface heights and widths.

• More common and standardized layouts in homes due to common mass produced kitchen items

#### Materials used in Design:

• Linoleum floors were very popular in an explosion of color and pattern

• Tile floor was starting to become less prevalent as women realized it was hard to stand on for long periods of time

• Built in cabinetry was being used because you didn't have to move it to clean under it

• Painted moldings in light colors made it easier to see dirt and bugs (have to keep everything very clean)

• Manufacturers' standardization of 6 kitchen colors: white, kitchen green, ivory, delphinium blue, royal blue, and red

• By the end of this era the U and L shaped kitchens we commonly see today were prevalent

#### Motivation for change 1940-1950

- Advancement in technology
- Lifestyle changes
- Housing boom following WWII

#### Notable advancements and interesting tidbits:

• The advancements in this area had a slow start due to the war time efforts

 Refrigerators began to include freezer compartments

• The breakfast nook started to disappear and instead the kitchen floor plan was enlarged to accommodate a table directly in the kitchen

• Post war ranch housing even had the kitchen located at times in the front of the home so the family room could be close to the back yard

• The dishwasher becomes more widely available but not yet commonly used in the 1950's

#### Materials used in design:

• The standard 6 colors start to give way to white appliances and pastel accessorizes

• The idea of conducting consumer research each year to develop new color trends emerges so you see a wider variety of color, a mixture of primary and pastels

• Linoleum is still a primary material in floors but now it's more monochromatic and subdued

• Linoleum and laminate is also being used on countertops and tabletops

• The emerging trend of chrome table and chair legs, instead of the precious oak variety, becomes popular

• You see the addition of drapes and curtains to soften the kitchen

• Wall cabinets are now being used, and the kitchen looks a lot more like we see it today

#### 1960-thru today

• Color and trends through time, 60's & 70's saw lots of Spanish accents in iron and burnt orange, avocado green, brown

• 80's and 90's tech clean "yuppie" moved into the blue and white kitchens, lots of products available. Corian countertops were popular. White cabinets instead of wood

Now, style is all over the place partially due to unlimited access to information. Pictures pictures everywhere. Technology integration will be the next big thing.



### **Pediatric Dentistry**

The design for dentistry came from a perceived need related to an industry driven mistake. Starting during and after WWII, the population in general had disposable income for the first time. Toothpaste is one of the first things people buy with "discretionary income".

All popular brands of toothpaste were 30% sucrose, touching off a massive epidemic of decay. The "Greatest Generation" returning from WWII represented a general population that for the first time in history had access to higher education through the GI bill.

These thousands of now educated professionals also set out to transform rural America to the most advanced country in the world. They got most things right. i.e. the interstate highway system, the intercoastal waterway, and anticipated the needs of a growing population in terms of educational and medical infrastructure. What they got wrong was the future need for dentists. The figures used to calculate the future need was thrown off by the toothpaste industry induced epidemic of decay. When the reason for the epidemic of decay was removed, the sugar in the toothpaste, there was not a corresponding shift in the dental profession that reflected the needs of the public. Rather than freestanding mini clinics manned by a few dentists trained to repair the ravages of decay, the focus should have been on training prevention specialists.

The pediatric population is faced with the problems created by the mini clinics that need a massive influx of patients with serious problems just to meet the massive overhead associated with running these mini clinics. The most lucrative portion of the pediatric practices is dentistry requiring heavy sedation.

We also see very aggressive "selling" of heavy sedation and very little "full disclosure" or informed consent. Most heavy sedation is accompanied by steroids to control an unlikely nausea.

There is a general lack of disclosure that steroid use is associated with shortened stature in males. Some research has shown that multiple exposures to heavy sedation are associated with "brain dysfunction". These children have rapidly developing brains that are more vulnerable to damage. If there is no pain, there is very little dentistry requiring immediate attention.

Universally, what we see on "second opinion" visits is:

- Over diagnosis
- Overtreatment
- Lack of prevention

Prevention is the most effective treatment for decay. Pediatric decay can mostly be stopped simply by educating the parents. Initiate the child into the dental practice when the child is six months old. Most parents coming into our practice for a "second opinion" for their children have not been instructed in simple preventive hygiene procedures that can and will prevent future decay.

Prevention of pediatric decay starts BEFORE the child is born and preferably before conception. The oral bioflora of the child comes from the placenta of the mother, which reflects her oral bioflora. Minimize decay in the prospective parents. Having the pregnant parents initiate effective oral hygiene methods will alter the mother's oral bioflora. Emphasize the use of baking soda and Xylitol for the mother-to-be.

The most commonly diseased area in the human body is the distal of the first pediatric molars which erupt when the child is likely still on a soft, cariogenic diet. Simply teaching the parents how to clean BE-HIND the first primary molar will stop the need for this most common pediatric dental treatment.

Once a child reaches 2.5 years of age, there is a natural increasing resistance to decay due to the "maturation of enamel" phenomena which applies to both permanent and pediatric dentition. If there is a reasonable diet, teeth literally become more resistant to decay as time passes and the need for invasive dentistry lessens accordingly. As the child approaches nine years of age, the question is if the tooth will last until it will shed naturally or should we intervene with a restoration?

If children are properly "nurtured" in the dental practice from an early age, many of these children will become very manageable and compliant by the age of three and the vast majority will be manageable for preventive measures by the age of four. This doesn't mean that you will be able to throw a child in a chair and administer several injections. The goal is to use only topical anesthetics. The most important step in "nurturing" a child to accept preventive measures is in having the parents successfully use a toothbrush effectively daily. The patient must be plaque free. If not, this is a sign of effective resistance by the child and a harbinger of failure. The dental professional contribution to "nurturing" a child is to acclimate the child to having the dental professional spray water and air in the mouth while suctioning.

If the above are accomplished, the dentist can do virtually any procedure in the child's mouth. **The goal of pediatric dentistry is to stop the decay without traumatizing the child.** Pediatric dentition has different innervations than adult dentition. There is very little feeling in the dentin of pediatric teeth. There is no need for heavy-handed treatment modalities. Most repair of pediatric decay can be accomplished quite comfortably without anesthetic.

By properly removing the early decay aided by topical anesthetic, warm water, a very slow speed drill, and air-abrasion, the vast majority of pediatric dentistry can be accomplished without the trauma associated with injections and the high speed drill.

What are the solutions to the problems both dentists and patients face for transforming pediatric dentistry to a patient centered health science?

• First, an understanding of the genesis of any microbial related disease, the acid-base balance. Tip the oral environment to the acidic side, and this permits acidogenic microbes to survive and thrive in the acidic environment

• Understand that the disease of dental caries comes from an oral microflora that is shared by all members of the family.

• Pathogenic microbes have a higher metabolic rate than probiotic microbes, requiring an acidic environment.

• Neutralize the acids associated with decay. Baking soda has a positive pH, and will neutralize acids, which have a negative pH.

• The technology exists that would painlessly allow an ultrasonic device used to extend the preparations into sound tooth structure to give enough bulk to resist damage to a properly bonded restoration.

What to look for in a MIPD dentist:

• Is there a significant emphasis put on prevention or is the practice simply a hunt and search based practice, looking for things to fix? • The first visit should emphasize education and prevention, typically with very little interaction with the dentist.

• An interview with a parent is imperative to success.

• Does the parent/guardian accompany the child or does the child disappear behind a closed door at any time?

• Is there pressure on the bill payer to act immediately?

• Is the initial examination done with one of the decay diagnosing aids? Time and again it has been shown that decay is microscopic in origin thus using the common dental pick is NOT an accurate way to diagnose decay or the severity of decay.

• A dental laser or filtered light system can be used to detect decay accurately and a decision can be made regarding severity of decay and the need to intervene.

• If the patients/guardian alters the reasons for decay, the teeth can and do heal without the need for intervention.

• Does the dentist use magnification? The very small areas of decay that are the genesis of future breakdown are difficult to see.

• Are SS crowns the treatment of choice in the practice? Any half blind person can grind enough tooth structure down to snap on a stainless steel crown. Some practices don't even grind the tooth down, simply forcing the SS form over the tooth, which are good excuses not to use magnification.

• Does the dentist routinely use injectable anesthesia? Most pediatric dentistry can be accomplished without the need for anesthesia.

• Does the dentist routinely do "Pulpectomies"? Pulpectomies are partial or complete pediatric root canals. If the dentist routinely does pulpectomies, the dentist simply doesn't understand the tooth structure of his patients.

• Does the dentist routinely use air abrasion on most preparations? Air abrasion, slow speed drill, ultrasonics, and the high speed drill are all different forms of energy and have entirely different functions.

> COURTESY: Dr. J. Tim Rainey D.D.S, M.A.G.D. www.tiads.com

### **POISON PURSE**

#### BE WARY OF THE DANGER YOU MAY CARRY



#### **Staining and Finishing Nesting Trays**

**W oodworker's Tip:** Though you may be tempted to cut short your sanding, preparation and application time, don't do it.

These tasks are very important steps in obtaining a high-quality finish. Remember, it is the finish, just as much as the fit and smoothness of the parts, that will have great bearing on how people judge your craftsmanship. To ensure an excellent result, follow the steps listed below and also the instructions the finish manufacturer puts on its products.

#### **FINISHING TIPS**

• Test the stains and finishes you are planning to use on scraps of wood. On the back of the scrap, mark the stain/finish combination and the type of wood. Allow all samples to dry thoroughly before making your final finish selection. Save your samples for quick reference on future projects.

• All stains and finishes must be allowed to dry thoroughly between coats. Remember that drying times can vary due to humidity and other climatic conditions.

• If you have some leftover stain or finish, wipe the can rim so that stain or finish in the rim won't dry out and prevent the lid from forming a tight seal.

• Brushes used for water-based products, such as Minwax® Water-Based Wood Stains or Minwax® Polycrylic® Protective Finish, must be cleaned with soap and water; brushes used for oil-based finishes must be cleaned with mineral spirits.

#### **INSTRUCTIONS:**

1. Finish-sand the corners and any other rough spots with 220-grit sandpaper. Dust off the piece and wipe it carefully with a clean, lint-free cloth lightly dampened with mineral spirits.

2. Before applying Minwax® Water-Based Wood Stain to a hardwood or softwood,

apply Minwax® Pre-Stain Water-Based Wood Conditioner following the directions on the can. Applying it will help to ensure even absorption of stain and prevent blotchiness that can occur with some woods. After 1 to 5 minutes, wipe off all excess conditioner using a clean, soft



cloth. Wait 15 to 30 minutes then use 220-grit or finer sandpaper to sand off any "whiskers" raised by the

conditioner. Proceed to the staining within 2 hours. 3. Do the staining in two steps, starting on the interior surfaces and



then moving to the exterior surfaces. Apply the Min-

wax® Water-Based Wood Stain you've chosen to the surface using either a nylon/ polyester brush or a cloth. Allow stain to penetrate no longer than 3 minutes. While stain is still wet, wipe off all excess with a clean cloth that's been lightly



dampened with stain. Allow the piece to dry for 2 hours before applying a second coat, if desired. Allow the piece to dry overnight before applying the protective clear finish.

Woodworker's Tip: Minwax® Water-Based Wood Stain is available in 6 wood tones, a White Wash Pickling Stain, 60 custom-mixed colors, and 8 bold Accents<sup>™</sup> colors. This means that you are not limited to just traditional wood colors (pine, oak, walnut, etc.). Instead, you can pick and apply a color to complement the décor of the room in which the piece will be placed. For this reason, make sure you look over all of the Minwax® color charts or go to minwax.com before making your final selection.

4. After allowing the piece to dry overnight, apply

Minwax® Polycrylic® Protec-

tive Finish following the directions on the can. Stir the can contents thoroughly before starting and periodically repeat the stirring during your work session.



5. Working a small area at a time to maintain a wet edge,

apply the first coat. Work quickly and make the final strokes in each newly finished section using with-thegrain brushstrokes.

6. Allow the finish to dry a minimum of 2 hours. Then sand lightly with 220-grit or finer sandpaper wrapped around a soft backup block. Thoroughly dust off and

wipe all surfaces with a cloth lightly dampened with water.

7. Repeat steps 5 and 6 to apply the second and final coat.

#### Alternate Finish

8. Apply the Minwax® Wood Finish<sup>™</sup> you've chosen using a natural bristle brush and a clean, lint-free cloth following the directions on the can. The brush will help you get the stain into the inside corners. Allow the Wood Finish<sup>™</sup> to set for about 5 to 15 minutes, then wipe off any excess. To achieve a deeper color, you may apply a second coat after 4-6 hours, repeating the application directions for the first coat. Allow the stain to dry for 24 hours before applying the protective clear finish.

**Woodworker's Tip:** When wiping off stain, make certain that your last wipe with the cloth goes with the grain of the wood. This way, any stain you might miss during wipe-off will be visually minimized by the wood grain.

#### **Applying Fast-Drying Polyurethane**

9. Apply Minwax® Fast-Drying Polyurethane following the directions on the can, stirring it occasionally. Use a good quality, natural bristle brush. Allow the first coat to dry overnight.



10. The next day, sand all surfaces lightly with 220-grit or

finer sandpaper using with-the-grain strokes. Dust off and wipe all surfaces with a cloth lightly dampened with mineral spirits. Apply a second coat of polyurethane and set the piece aside to cure overnight. 11. The following day, sand all surfaces lightly with 220-grit sandpaper. Dust off and wipe the piece with a cloth lightly dampened with mineral spirits and apply the third and final coat of polyurethane.

#### Applying Clear Brushing Lacquer

12. Apply Minwax® Lacquer Sanding Sealer, if desired, following label directions. Let dry at least 1 hour, then sand with 220-grit sandpaper, moving



in the direction of the grain. Remove all sanding dust. 13. Apply Minwax® Clear Brushing Lacquer, stirring it well before and during use to rotate the product from the bottom to the top of the can.

#### NEVER SHAKE.

14. Apply a coat of lacquer using a high-quality natural or synthetic bristle brush. Apply sufficient lacquer to seal open joints edges, and end grain.

15. Let the first coat dry at least 2 hours, then apply a second coat.



16. Apply a third coat, repeating the steps above for each coat. Apply a fourth coat, if desired.

17. After the final coat, allow at least 24 hours before using the trays.

#### **PRODUCT SAFETY**

For your safety and the safety of those you work with, always read the safety warnings, which manufacturers print on their labels, and follow them to the letter.

**WARNING!** Removal of old paint by sanding, scraping or other means may generate dust or fumes that contain lead. Exposure to lead dust or fumes may cause brain damage or other adverse health effects, especially in children or pregnant women. Controlling exposure to lead or other hazardous substances requires the use of proper protective equipment, such as properly fitted respirator (NIOSH approved) and proper containment and cleanup.

Woodworker's Tip: To clean spilled candle wax off of furniture and flooring, freeze the wax with an ice cube. Then use a plastic scraper or credit card to pop it off - simple as that!

Minwax® Wood Finish™ Stain Markers are great for quick and easy touchups of nicks and scratches on wood furniture, moldings, cabinets, doors, floors and other wood surfaces in your home.



This stain pen contains real Minwax® Wood Finish™ stain, the number one consumer choice of wood stain. Minwax® Wood Finish™ Stain Markers are also ideal for small hobby and wood craft projects and to add decorative touches to large projects.

> COURTESY: Bruce Johnson Minwax

www.minwax.com

### Seasonal Decorating & Buying Tips for Candles

t's important to start with timeless, versatile accessories, and it only takes a few basic pieces, which is especially nice if you live in a small home or if you like to keep life simple. Using different candles, you can change up what's inside as you see in the examples below.

#### **Customizable Tealight Centerpiece**

A silver metal tealight tray sits elegantly on top of a hand-blown glass base displaying treasures like seashells, flowers or colored marbles. Arrange the contents of this beautiful centerpiece to match your home's décor or change it seasonally.



#### **Twilight Mist Hurricane**

Dimpled glass hurricane on metal stand. Includes leveling beads

to stabilize pillar. 10" h, 6 3/4" dia. (Use with round pillar, tealight tree, large tealight tree, votive cup, jar)







#### **Bubble Glass Hurricane**

Hand blown glass, 10 1/2" h, 9 1/4" dia. (Use with round pillar, large tealight tree) Looks great

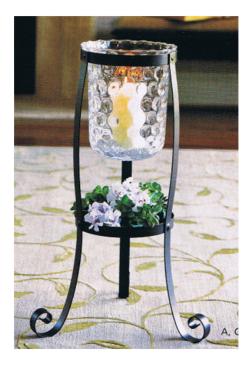
in the Rustic Scroll Floor Stand (next page.)



#### The Rustic Scroll Floor Stand

This is the perfect way to Showcase your Party-Lite hurricanes. Crafted with simple curved lines and a Classic bronze finish, it complements every decorating style. Try a different hurricane each season for a quick and easy room update.





#### Expressions ScentGlow Warmer!

Get creative — customize your Expressions ScentGlow Warmer! Download our templates at <u>partylite.com</u>, keyword: **express it** or use your own craft and scrapbooking supplies. Glass with ceramic base and dish. White cord. 5 3/4" h, 5 1/4" dia. (Below)



#### Tips on buying candles

Quality: What you pay can mean there's a difference

Fragrance: You shouldn't buy based on fragrance alone

Buy Smart: Then you'll get the most out of what you buy Look for:

- length of burn time & quality of burn
- what is the minimum burn time for pillars and 3-wicks to prevent tunneling
- liquifying wax in tealight or votive
- the right wick for the right candle shape
- little or no sooting
- consistent fragrance and color throughout
- completely burns

COURTESY: Christine Alt PartyLite Independent Consultant www.partylite.com

### EAT YOUR WAY TO CLEAR VISION

ccording to the Vision Council of America, the vision care industry accumulated a revenue of \$32.8 billion in 2011. Approximately 179.5 million adults need vision correction, an increasing amount annually.

Dr. Edward Kondrot, the world's leading ophthalmologist and a board-certified homeopathic physician, provides an answer to helping your eyesight: a nutritious diet.

The USDA states that organic food is produced without using most conventional pesticides, fertilizers, sewage sludge, bioengineering or ionizing radiation. The lack of intrusive pesticides creates organic food that maintains a higher nutritional value, which improves your diet and helps your eyesight.

Here are five essential foods to incorporate into your diet:

• **Butternut Squash:** contains Vitamin A, which is needed by the retina in the form of light-absorbing retinal molecule and keeps eyes, skin and mucous membranes moist.



• **Zucchini:** contains lutein, used as an antioxidant and for blue light absorption.

• **Brussel Sprouts:** contains Vitamin C, an antioxidant that reduces the risk of cataract and macular degeneration.



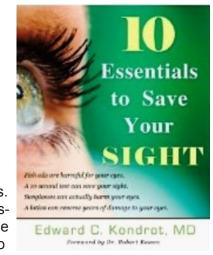
• Blue-



**berries:** contains Vitamin C which protects the body from free radicals that can damage the eyes and cause disease, as well as decrease the potential for developing glaucoma.

• **Kale:** contains protein which can decrease the risk for eye disease such as Age-Related Macular Degeneration.

According to the Centers for Disease Control and Prevention, 61 million adults in the United States are currently at risk for serious vision loss. While it is a serious issue, millions of people don't know what to do and what not to do, or



do not realize that they are the ones at risk for vision loss. The answers to these issues, and more, are all being offered in his book, "10 Essentials to Save Your Sight," that was ten years in the making and is founded on a vast amount of research.

According to the National Institute of Health, 1.75 million people in the country have age-related macular degeneration. The Glaucoma Research Foundation reports that 2.2 million individuals around the national have glaucoma, the leading cause of blindness. Clearly, millions of people suffer from vision problems, whether from these two conditions or others. The good news is that no matter what your age, there are things you can do to help save your sight.

Dr. Kondrot's book includes topics such as: nutrition and supplements, hydration and detoxification, relaxation, vision therapy, homeopathy, sleep and light therapy and many more as well as patient's stories. The book offers a look at some of the essential information that people need in order to help save their sight, including addressing such questions as:

- Whether or not fish oils are harmful to the eyes
- How a 10-second test can help save your sight
- Why sunglasses can actually harm the eyes
- How a lotion can reverse years of damage to the eyes.

COURTESY: Dr. Edward Kondrot Healing the Eye & Wellness Center www.healingtheeye.com

# Home, Hearth & Health Guests

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