

# *Serve Up a Healthier You*

## **North Carolina Child Nutrition Services Staff Wellness Toolkit**

### **My Recipe for Health**



**Developed by the N.C. Nutrition Education and Training Program  
N.C. Department of Public Instruction  
N.C. Division of Public Health**



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# Serve Up a Healthier You

## North Carolina Child Nutrition Services Staff Wellness Toolkit Mini-Lessons

**Serve Up a Healthier You**, from the North Carolina Department of Public Instruction, Child Nutrition Services, and the North Carolina Division of Public Health, Nutrition Services Branch, is a staff wellness toolkit tailored for Child Nutrition professionals in North Carolina offering resources and strategies for eating smart, moving more and living healthy.

### Need **Why is there a need for staff wellness?**

Poor nutrition and physical inactivity have a significant health and economic impact.<sup>1-5</sup>

- The number of adults who are overweight or obese has increased.<sup>6</sup>
- An unhealthy lifestyle increases the risk of weight gain and many chronic diseases such as heart disease, diabetes, osteoporosis, and certain cancers.<sup>3,4,5</sup>
- Employees spend a significant part of each day at work.
- Obesity and its related health conditions are responsible for much of the increase in health care spending.
- Obesity and chronic disease can also decrease productivity and increase absenteeism.<sup>5,7-9</sup>

### Yield **What are the benefits of staff wellness?**

Effective employee wellness programs offer direct and indirect benefits, including promotion of a healthy work environment and support of staff in taking steps to protect or improve their health.<sup>7-16</sup>

- Healthier employees
- Reduced health care costs
- Decreased absenteeism
- Increased presenteeism
- Enhanced productivity
- Reduced workers' compensation and disability management claims costs
- Increased employee satisfaction and morale



A review of published worksite health promotion program studies showed an average \$3.50 to \$1 savings-to-cost ratio in reduced absenteeism and health care costs.<sup>11</sup>

The U.S. Department of Health and Human Services Office of Disease Prevention and Health Promotion, the national Task Force on Community Preventive Services, and the North Carolina Institute of Medicine advise a comprehensive workforce health promotion program.<sup>12-14</sup> A key element of a comprehensive staff wellness program is health education focusing on skill development and lifestyle behavior change.

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## Module 1, Lesson 1: Your Path to Wellness - Take Care of You Summary



### Summary:

Well-being  
Energy  
Life  
Love and support  
Nutrition  
Exercise  
Stress management  
Strive for health

Wellness is a gift that we can give ourselves, and in turn, will allow us to give to others. We deserve it!

### Resources:

- Healthfinder.gov  
National Health Information Center  
U.S. Department of Health and Human Services  
[www.healthfinder.gov](http://www.healthfinder.gov)
- Medline Plus  
National Library of Medicine, National Institutes of Health  
U.S. Department of Health and Human Services  
[www.medlineplus.gov](http://www.medlineplus.gov)

# Module 1, Lesson 1: Your Path to Wellness - Take Care of You Summary

## Wellness...in Other Words

W	
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### Notes:

### Reflection:

Goal 1 -

Goal 2 -

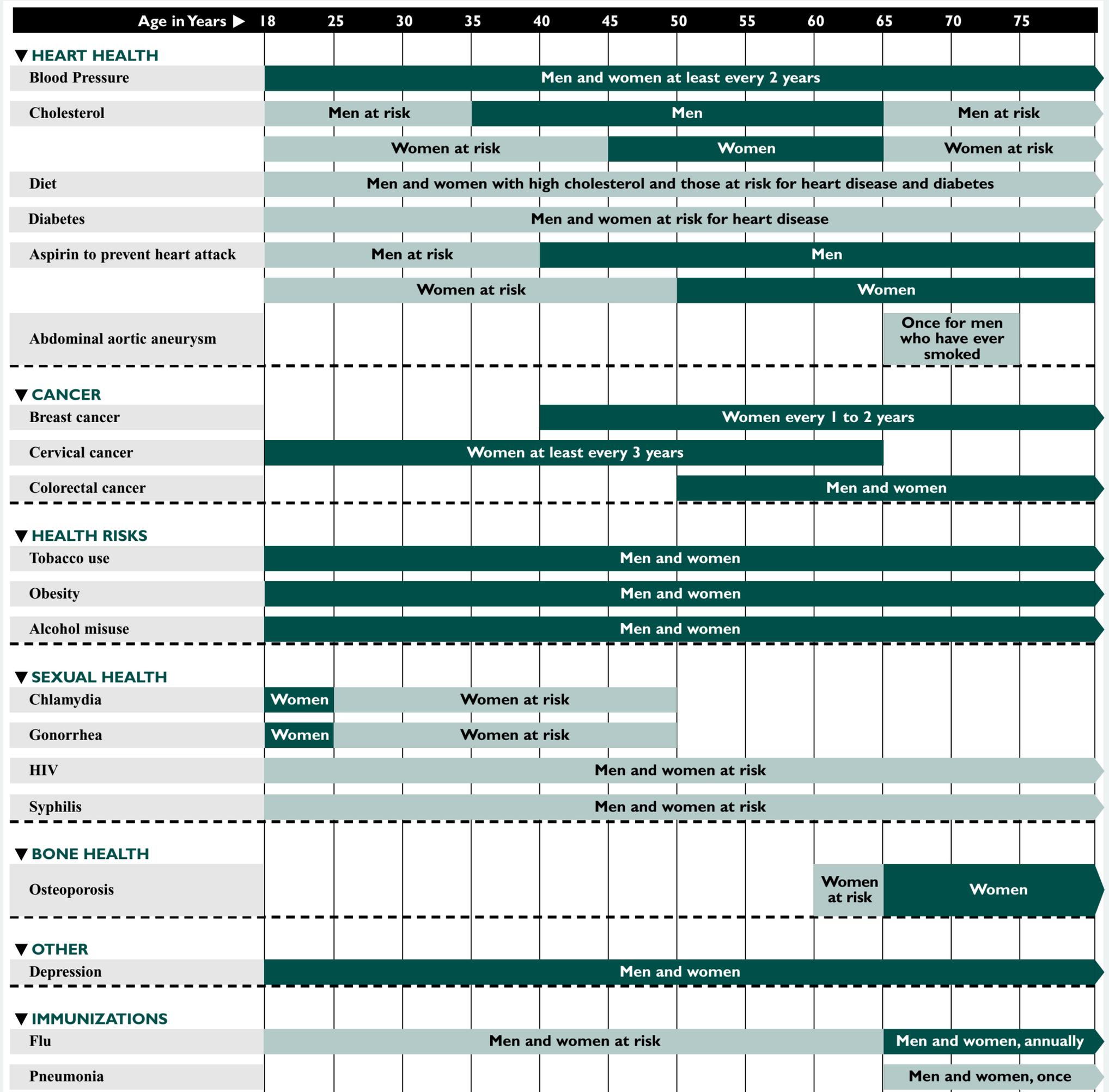


# Adult Preventive Care Timeline

The most important things you can do to prevent disease and be healthy are:

**Be tobacco free • Be physically active • Eat a healthy diet**

Get the right kinds of preventive health services—screenings, counseling, and preventive medicines—at the right times. This chart will tell you what you need and when you need it.



There are some preventive services that people should take advantage of throughout their later adult years. These services are identified by arrows that continue past the last age category on the chart.

Other preventive services offer less benefit at older ages depending on health status. Older adults should talk with their doctors about the services identified by arrows to determine whether a preventive service is right for them.

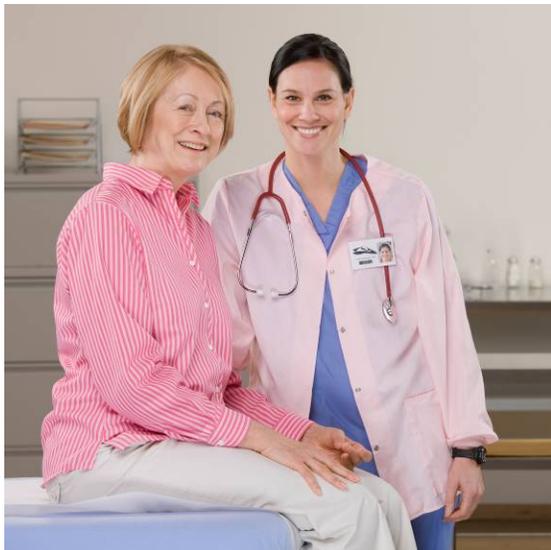
These clinical preventive services are recommended by the U.S. Preventive Services Task Force. For additional materials, see [www.preventiveservices.ahrq.gov](http://www.preventiveservices.ahrq.gov)

What does it mean to be "at risk?" You may be at increased risk for a specific disease or condition. Risk may be based on your family history, tobacco use, and other behaviors, such as lack of physical activity, or other health conditions, such as diabetes.





## Module 1, Lesson 2: Check Up on Health Summary



### Summary:

- It is important to have regular medical check-ups in order to prevent problems and to catch problems early.
- There are four things to do to prepare for a check-up.
  - Review your family health history.
  - Find out if you are due for any general screenings or vaccinations.
  - Write down a list of issues and questions to take with you.
  - Consider your future.

### Resources:

- Family Health  
Centers for Disease Control and Prevention  
U.S. Department of Health and Human Services  
[www.cdc.gov/family](http://www.cdc.gov/family)
- My Family Health Portrait Tool  
Office of the Surgeon General  
U.S. Department of Health and Human Services  
<https://familyhistory.hhs.gov>

## Module 1, Lesson 2: Check Up on Health Summary

### Family History

Does anyone in your family have any of the following? If so, check the box and explain, if needed.

- Cancer  
Relative(s)? \_\_\_\_\_  
Cancer type(s)? \_\_\_\_\_
- Diabetes
- Heart Attack  
Relative(s)? \_\_\_\_\_  
Age of attack(s)? \_\_\_\_\_
- High Blood Pressure
- High Cholesterol
- Heart Disease
- Stroke
- Thyroid Disease

### Notes:

### Reflection:

Question 1 -

Question 2 -

# ADULT VACCINATION SCREENING FORM



DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR DISEASE CONTROL AND PREVENTION



1. Print this form and fill it out.
2. Take the completed form with you next time you go to your doctor.
3. Show the form to your doctor and find out which vaccine shots you need.

Please circle "Yes" or "No" for the following questions.

1. Think of all the vaccine shots you have received in your life. Is there a recent record of those at another doctor's office, in your home, at a school, or at your job?

Yes No

2. If "Yes" to above, would you be willing to sign a form so that this information can be given to your doctor?

Yes No

3. Are you allergic to any medicines or foods?

Yes No

4. Have you ever had a serious reaction to a shot?

Yes No

# ADULT VACCINATION SCREENING FORM

Please circle or fill in the answer that best fits you for the following questions.

5. What country were you born in? \_\_\_\_\_

6. Are you working at a job that pays money?

Yes  No

7. What is the highest grade in school that you finished?

- A. None
- B. Less than 6th grade
- C. 6th through 9th grade
- D. 10th through 12th grade, but did not graduate
- E. High school graduate or GED
- F. Training after high school, other than college (vocational, technical, etc.)
- G. Some college
- H. Graduated from college
- I. Post graduate

8. What is your race?

- A. Black
- B. White
- C. Asian
- D. American Indian/Alaska native
- E. Other

9. What is your ethnicity?

- A. Hispanic (e.g., Mexican, Puerto Rican, Cuban, etc.)
- B. Non-Hispanic

## DO I NEED ANY VACCINE SHOTS?

Many adults have not had all the vaccine shots that they need to prevent serious sickness. Do you know if you have? These lists will help you learn if you need any vaccine shots now or in the future.

### FLU SHOT



Please circle "Yes" or "No" for the following statements.

1. I am 50 years old or older.

Yes No

2. One or more of the following conditions applies to me:

- I have diabetes mellitus (sugar).
- I have lung disease, including asthma.
- I have heart or kidney disease.
- I have sickle-cell disease.
- I have cancer or HIV/AIDS.
- I may be pregnant during the flu season (November to March).
- I take steroids (such as prednisone).

Yes No

3. One or more of the following situations applies to me:

- I live with someone who has one of the conditions listed above.
- I live with or care outside the home for a child less than 2 years old.
- I am a health care worker.
- I provide essential community services.

Yes No

4. I will travel to one or more of the following places:

- to the tropics at anytime
- to South America, Australia or Africa during April through September
- with a large group (such as a cruise ship)

Yes No

If you answered "Yes" to any of these statements, you may need the flu vaccine shot during the flu season (November through March).

5. I already had a flu vaccine shot this season.

Yes No

# Pneumonia (PNEUMOCOCCAL) SHOT



Please circle "Yes" or "No" for the following statements:

1. I am an American Indian or Alaska Native.

Yes No

2. I am 65 years old or older.

Yes No

3. One or more of the following applies to me:

- I have diabetes mellitus (sugar).
- I have lung disease, not just asthma.
- I have heart, kidney, or liver disease.
- I have a drinking problem (alcoholism).
- I have sickle-cell disease.
- I have cancer or HIV/AIDS.
- I do not have a spleen.
- I have spinal fluid leak.
- I take steroids (such as prednisone).

Yes No

4. I am 65 years old or older *and* had a pneumonia (pneumococcal) vaccine shot when I was younger than 65, *and* it has been 5 years or more since I had that vaccine shot.

Yes No

If you answered "Yes" to any of these statements, you may need the pneumonia (pneumococcal) vaccine shot.

5. I already had a pneumonia (pneumococcal) vaccine shot.

Yes No

# HEPATITIS A SHOT



Please circle "Yes" or "No" for the following statements:

1. One or more of the following applies to me:
- I plan to visit a foreign country (but don't count Canada, Japan, Australia or Western Europe).
  - I take drugs bought on the street (use needles or snort).
  - I am a man who has sex with men.
  - I have had liver disease for a long time, or I have hepatitis C.
  - I have a blood-clotting disease with clotting factor infusions.

Yes No

If you answered "Yes" to this statement,  
you may need the hepatitis A vaccine shot.

2. I have had hepatitis A infection or 2 hepatitis A vaccine shots.

Yes No

# HEPATITIS B SHOT



Please circle "Yes" or "No" for the following statements:

1. I am under 20 years old.
2. One or more of the following applies to me:
- I am a health care or public safety worker who could be exposed to blood or body fluids.
  - I recently had or was treated for a sexually transmitted disease.
  - I had more than one sex partner during the last 6 months.
  - I am a man who has sex with men.
  - I have sex or live with a person with hepatitis B.
  - I have had liver disease for a long time, or I have hepatitis C.
  - I shoot drugs with needles.
  - I have bad kidney disease.
  - I provide direct services for people with developmental disabilities.
  - I will live in Asia or Africa for more than 6 months.
  - I come from Asia or the Pacific Islands.
  - I have a blood-clotting disease.

Yes No

If you answered "Yes" to any of these statements,  
you may need the hepatitis B vaccine shot.

3. I have had hepatitis B infection or 3 hepatitis B vaccine shots.

Yes No

# TETANUS SHOT



Please circle "Yes" or "No" for the following statement:

1. It has been more than 10 years since my last tetanus booster shot.

Yes No

If you answered "Yes" to this statement, you may need the tetanus vaccine shot.

# MEASLES-MUMPS-RUBELLA (MMR) SHOT



Please circle "Yes" or "No" for the following statements:

1. I was born in 1957 or later.

Yes No

2. I am a woman who was born outside of the U.S. who could become pregnant.

Yes No

3. One or more of the following applies to me:

- I am a health care worker.
- I am entering college or a trade school.
- I have HIV/AIDS.
- I plan to visit foreign countries in the future.

Yes No

If you answered "Yes" to any of the statements above, you may need the Measles-Mumps-Rubella (MMR) vaccine shot.

4. I have had at least one Measles-Mumps-Rubella (MMR) vaccine shot.

Yes No

## Module 1, Lesson 3: Take Your Best Shot Summary



### Summary:

- Vaccines can help prevent many dangerous diseases.
- Vaccines contain killed or weakened germs, and when you get a vaccine your body learns how to fight the disease.
- Adults may need vaccines based on things such as age and health.
- Flu and pneumonia are two illnesses that can be prevented with a vaccine.

### Resources:

- FLU.GOV – Know what to do with the flu  
U.S. Department of Health and Human Services  
[www.flu.gov](http://www.flu.gov)
- Vaccines and Immunizations  
Centers for Disease Control and Prevention  
U.S. Department of Health and Human Services  
[www.cdc.gov/vaccines/](http://www.cdc.gov/vaccines/)
- Vaccines  
World Health Organization  
[www.who.int/topics/vaccines/en/](http://www.who.int/topics/vaccines/en/)

## Module 1, Lesson 3: Take Your Best Shot Summary

### Notes:

### Reflection:

Goal 1 -

Goal 2 -

## Module 1, Lesson 4: Weigh to Wellness Summary



### Summary:

- Body mass index, or BMI, can help us determine if we are at a healthy weight or if we are underweight, overweight or obese.
- Waist circumference is another number that can help us know if we are at risk for obesity-related health problems.
- We need to balance the number of calories that we eat and drink with the number of calories that our body uses in order to manage our weight.
- One tool to help us manage our weight is a food and activity record.

### Resources:

- Nutrition.gov - Smart nutrition starts here  
National Agricultural Library  
U.S. Department of Agriculture  
[www.nutrition.gov](http://www.nutrition.gov)
- MyPlate  
U.S. Department of Agriculture  
[www.choosemyplate.gov](http://www.choosemyplate.gov)
- Obesity and Overweight  
Centers for Disease Control and Prevention  
U.S. Department of Health and Human Services  
[www.cdc.gov/obesity/index.html](http://www.cdc.gov/obesity/index.html)
- Weight-control Information Network  
National Institute for Diabetes and Digestive and Kidney Diseases, National Institutes of Health  
U.S. Department of Health and Human Services  
<http://win.niddk.nih.gov/index.htm>
- Weight Management and Obesity Resource List  
National Agricultural Library  
U.S. Department of Agriculture  
[www.nal.usda.gov/fnic/pubs/bibs/topics/weight/consumer.pdf](http://www.nal.usda.gov/fnic/pubs/bibs/topics/weight/consumer.pdf)

## Module 1, Lesson 4: Weigh to Wellness Summary

### BMI Ranges

Underweight:	Less than 18.5
Healthy Weight:	18.5-24.9
Overweight:	25.0-29.9
Obese:	30.0 and higher

### Waist Circumference

You are at a higher risk of developing an obesity-related problem if your waistline is:

- More than 40 inches if you are a man
- More than 35 inches if you are a non-pregnant woman

### It's a Balancing Act!

- What will happen if you eat or drink more calories than you burn through physical activity and body processes? \_\_\_\_\_
- What will happen if you eat or drink less calories than you burn through physical activity and body processes? \_\_\_\_\_
- What will happen if you eat or drink the same amount of calories that you burn through physical activity and body processes? \_\_\_\_\_

### Calories Add Up!

1. How many calories would you eat in a year if you ate 100 extra calories each day?  
Multiply 100 calories by 365 days per year. \_\_\_\_\_
2. How many calories are in a pound? \_\_\_\_\_
3. How many pounds could you gain in a year by eating 100 extra calories each day for a year?  
Divide Answer #1 by Answer #2. \_\_\_\_\_

### Reflection:

Other than what I ate, what I drank, and the physical activity I did, two items to include in a food and activity record that would help me find balance are:

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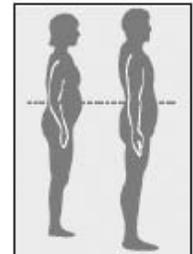
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## Adult BMI Chart

BMI	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35
Height	Weight in Pounds																
4'10"	91	96	100	105	110	115	119	124	129	134	138	143	148	153	158	162	167
4'11"	94	99	104	109	114	119	124	128	133	138	143	148	153	158	163	168	173
5'	97	102	107	112	118	123	128	133	138	143	148	153	158	163	168	174	179
5'1"	100	106	111	116	122	127	132	137	143	148	153	158	164	169	174	180	185
5'2"	104	109	115	120	126	131	136	142	147	153	158	164	169	175	180	186	191
5'3"	107	113	118	124	130	135	141	146	152	158	163	169	175	180	186	191	197
5'4"	110	116	122	128	134	140	145	151	157	163	169	174	180	186	192	197	204
5'5"	114	120	126	132	138	144	150	156	162	168	174	180	186	192	198	204	210
5'6"	118	124	130	136	142	148	155	161	167	173	179	186	192	198	204	210	216
5'7"	121	127	134	140	146	153	159	166	172	178	185	191	198	204	211	217	223
5'8"	125	131	138	144	151	158	164	171	177	184	190	197	203	210	216	223	230
5'9"	128	135	142	149	155	162	169	176	182	189	196	203	209	216	223	230	236
5'10"	132	139	146	153	160	167	174	181	188	195	202	209	216	222	229	236	243
5'11"	136	143	150	157	165	172	179	186	193	200	208	215	222	229	236	243	250
6'	140	147	154	162	169	177	184	191	199	206	213	221	228	235	242	250	258
6'1"	144	151	159	166	174	182	189	197	204	212	219	227	235	242	250	257	265
6'2"	148	155	163	171	179	186	194	202	210	218	225	233	241	249	256	264	272
6'3"	152	160	168	176	184	192	200	208	216	224	232	240	248	256	264	272	279
	Healthy Weight						Overweight					Obese					

## Measuring Your Waist Size

1. Find a tape measure and place it around your bare abdomen, parallel to the floor. Be sure to place it just above your hip bone.
2. Do not compress your skin, but make sure the tape is snug.
3. Relax and exhale.
4. Read the measurement.



Source: Dietary Guidelines for Americans



## Serve Up a Healthier You – What I Eat

**My goal(s) for the week:**

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
<p>Taking a look at what we eat can help us to find things we can improve about our habits.</p> <p>Think about everything that you eat and drink each day. Write it down.</p> <p><b>Food and Drink</b></p> <ul style="list-style-type: none"> <li>▪ What did you eat?</li> <li>▪ What did you drink?</li> <li>▪ How much did you eat or drink - cups, ounces, tablespoons?</li> <li>▪ How was it cooked - baked, grilled, fried?</li> <li>▪ What did you add - butter, cream, sugar, dressing, mayonnaise?</li> </ul> <p><b>Time</b></p> <ul style="list-style-type: none"> <li>▪ When did you eat or drink this?</li> </ul> <p><b>Why</b></p> <ul style="list-style-type: none"> <li>▪ How hungry were you before and after eating - using a scale of 1 (starving) to 10 (uncomfortably full)?</li> <li>▪ How did you feel - sad, happy, bored, worried, tired, stressed, angry?</li> </ul>							
Did you meet your goal(s) for today – yes or no?							



## Serve Up a Healthier You – How Active I Am

<b>My goal(s) for the week:</b>							
<p>Taking a look at how active we are can help us to find things we can improve about our habits.</p> <p>Think about everything you do to move more each day. Write it down.</p> <p><b><u>Activity</u></b></p> <ul style="list-style-type: none"> <li>▪ What did you do – walk, bike, swim, dance, garden, yoga, pilates?</li> <li>▪ What type of activity - aerobic, flexibility or strengthening?</li> </ul> <p><b><u>Amount</u></b></p> <ul style="list-style-type: none"> <li>▪ How long did you do the activity - minutes?</li> <li>▪ How many steps or miles did you go - what was your pedometer or odometer distance?</li> </ul> <p><b><u>Time</u></b></p> <ul style="list-style-type: none"> <li>▪ When did you do your activity?</li> </ul> <p><b><u>Intensity</u></b></p> <ul style="list-style-type: none"> <li>▪ How hard did you work, moderate or vigorous - on a scale of 0 (nothing at all) to 11 (maximum effort)?</li> <li>▪ How did you feel?</li> </ul>	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>	<b>Saturday</b>	<b>Sunday</b>
<p>Did you meet your goal(s) for today – yes or no?</p>							



## Module 1, Lesson 5: Tobacco - Make It a Part of Your Past Summary



### Summary:

- The use of any tobacco product carries health risks.
- Quitting has many benefits, most importantly, better health by reducing risk of diseases such as cancer, stroke and heart disease.
- Once you decide to quit:
  - Find help (a help line, support group, medical provider, or counselor).
  - Learn your triggers and ways to avoid them.

### Resources:

#### Help for quitting

- American Cancer Society (ACS)  
1-800-ACS-2345 (1-800-227-2345)  
[www.cancer.org](http://www.cancer.org)
- American Lung Association  
1-800-LUNG-USA (1-800-586-4872)  
[www.lung.org](http://www.lung.org)
- N.C. HealthSmart  
N.C. State Health Plan for Teachers and State Employees  
[www.shpnc.org/ncHealthSmart/default.aspx](http://www.shpnc.org/ncHealthSmart/default.aspx)
- Quit Line (Connect to counseling and information within your state)  
1-800-QUIT-NOW (1-800-784-8669)  
[www.quitlinenc.com](http://www.quitlinenc.com)
- Smokefree.gov  
National Cancer Institute, National Institutes of Health  
U.S. Department of Health and Human Services  
[www.smokefree.gov](http://www.smokefree.gov)

#### General information

- Smoking and Tobacco Use  
Centers for Disease Control and Prevention  
U.S. Department of Health and Human Services  
[www.cdc.gov/tobacco/index.htm](http://www.cdc.gov/tobacco/index.htm)

# Module 1, Lesson 5: Tobacco - Make It a Part of Your Past Summary

## Pros and Cons of Quitting

Pros	Cons

### Notes:

### Reflection:

Idea 1 -

Idea 2 -



## Cutting the Habit Cuts the Cost!

### 1 pack of cigarettes = \$4.45

1. What is the cost of smoking  $\frac{1}{2}$  of a pack per day?

$$\$4.45 \div 2 = \underline{\hspace{10cm}}$$

2. What is the cost of smoking  $\frac{1}{2}$  of a pack per day for a week?

$$\text{Answer to \#1} \underline{\hspace{1cm}} \times 7 = \underline{\hspace{10cm}}$$

3. What is the cost of smoking  $\frac{1}{2}$  of a pack per day for a year?

$$\text{Answer to \#1} \underline{\hspace{1cm}} \times 365 = \underline{\hspace{10cm}}$$

4. What is the cost of smoking 1 pack per day for a week?

$$\$4.45 \times 7 = \underline{\hspace{10cm}}$$

5. What is the cost of smoking 1 pack per day for a year?

$$\$4.45 \times 365 = \underline{\hspace{10cm}}$$



## Module 1, Lesson 6: Be a Stress Survivor Summary



### Summary:

- Stress can come from many different things. We all deal with stress.
- Stress affects:
  - Our bodies
  - Our thoughts and feelings
  - Our behavior
- It is important to manage our stress to lower its effects.
- We can manage our stress through:
  - Physical activity
  - Nutrition
  - Social support
  - Relaxation

### Resources:

- Stress and Anxiety  
Medline Plus  
National Library of Medicine, National Institutes of Health  
U.S. Department of Health and Human Services  
[www.nlm.nih.gov/medlineplus/ency/article/003211.htm](http://www.nlm.nih.gov/medlineplus/ency/article/003211.htm)
- Stress Management  
Mayo Clinic  
[www.mayoclinic.com/health/stress-management/MY00435](http://www.mayoclinic.com/health/stress-management/MY00435)
- Stress Management  
Medline Plus  
National Library of Medicine, National Institutes of Health  
U.S. Department of Health and Human Services  
[www.nlm.nih.gov/medlineplus/ency/article/001942.htm](http://www.nlm.nih.gov/medlineplus/ency/article/001942.htm)

## Module 1, Lesson 6: Be a Stress Survivor Summary

### My Stress Plan

What stresses me?	How does this affect me?	What can I do to manage it?

### Notes:



### Reflection:

Goal 1 -

Goal 2 -





## Module 1, Lesson 7: Manage Your Medications Summary



### Summary:

- Steps for managing your medications:
  - Know your medicine.
  - Read the label.
  - Keep a list.
  - Share your list.

### Resources:

- Drugs  
U.S. Food and Drug Administration (FDA)  
[www.fda.gov/drugs](http://www.fda.gov/drugs)

## Module 1, Lesson 7: Manage Your Medications Summary

### Read the Label!

Directions: Answer the following questions using your medicine label or package.

1. What is the name of your medicine? \_\_\_\_\_  
\_\_\_\_\_
2. Why might someone use this medicine? \_\_\_\_\_  
\_\_\_\_\_
3. How much should an adult take? \_\_\_\_\_  
\_\_\_\_\_
4. How should the medicine be stored? \_\_\_\_\_  
\_\_\_\_\_
5. What are some of the side effects or things that might happen if you take this medicine?  
(for example, sleepiness) \_\_\_\_\_  
\_\_\_\_\_
6. What is the expiration date for this medicine? \_\_\_\_\_  
\_\_\_\_\_

### Notes:

### Reflection:

Goal 1 -

Goal 2 -



## Module 1, Lesson 8: Sweet Dreams Summary



### Summary:

- As adults, we need between 7 and 9 hours of sleep each night.
- Getting a good night's sleep can help us learn and think better and can improve our mood.
- Not getting enough sleep can lead to weight gain, accidents, and health problems.
- Starting a good nighttime routine can help us go to sleep and stay asleep.

### Resources:

- Importance of Sleep: Six reasons not to scrimp on sleep  
Harvard Health Publications, Harvard Medical School  
[www.health.harvard.edu/press\\_releases/importance\\_of\\_sleep\\_and\\_health](http://www.health.harvard.edu/press_releases/importance_of_sleep_and_health)
- National Sleep Foundation  
[www.sleepfoundation.org](http://www.sleepfoundation.org)
- Sleep and Sleep Disorders  
Centers for Disease Control and Prevention  
U.S. Department of Health and Human Services  
[www.cdc.gov/sleep/](http://www.cdc.gov/sleep/)

# Module 1, Lesson 8: Sweet Dreams Summary

## My Nighttime Routine

My Current Routine:	How I Can Improve My Routine:

### Notes:

### Reflection:

Goal 1 -

Goal 2 -



## Module 2, Lesson 1: Your Path to Wellness - Eat Smart with the Dietary Guidelines Summary



### Summary:

The Dietary Guidelines for Americans give us guidelines for ways to eat smart including:

- Make half your plate fruits and vegetables.
- Switch to fat free or low fat (1%) milk.
- Consume at least half of all grains as whole grains.
- Choose lean proteins.
- Compare sodium in foods like soup, bread, and frozen meals—and choose the foods with lower numbers.
- Drink water instead of sugary drinks.

### Resources:

- Let's eat for the health of it Consumer Brochure  
Dietary Guidelines for Americans  
U.S. Departments of Agriculture and Health and Human Services  
[www.dietaryguidelines.gov/Publications/DietaryGuidelines/2010/DG2010Brochure.pdf](http://www.dietaryguidelines.gov/Publications/DietaryGuidelines/2010/DG2010Brochure.pdf)
- Dietary Guidelines for Americans  
Center for Nutrition Policy and Promotion  
U.S. Department of Agriculture  
[www.dietaryguidelines.gov](http://www.dietaryguidelines.gov)

# Module 2, Lesson 1: Your Path to Wellness - Eat Smart with the Dietary Guidelines Summary

## Foods and Nutrients to Increase

1. M \_\_\_\_\_

What is a fruit or vegetable that you would like to try? \_\_\_\_\_

2. S \_\_\_\_\_

List calcium-rich foods that you like. \_\_\_\_\_

3. C \_\_\_\_\_

What is a whole grain that you would like to try? \_\_\_\_\_

5. C \_\_\_\_\_

List lean protein choices. \_\_\_\_\_

## Foods and Food Components to Reduce

1. C \_\_\_\_\_

What is one way that you can reduce sodium? \_\_\_\_\_

2. D \_\_\_\_\_

What is one way that you can limit sugary drinks? \_\_\_\_\_

### Notes:

### Reflection:

Goal 1 -

Goal 2 -



## Module 2, Lesson 2: Eat Smart with MyPlate Summary



### Summary:

Two reminders for healthy eating illustrated by MyPlate include the following:

- Build a healthy plate.
- Eat the right amount of calories for you.

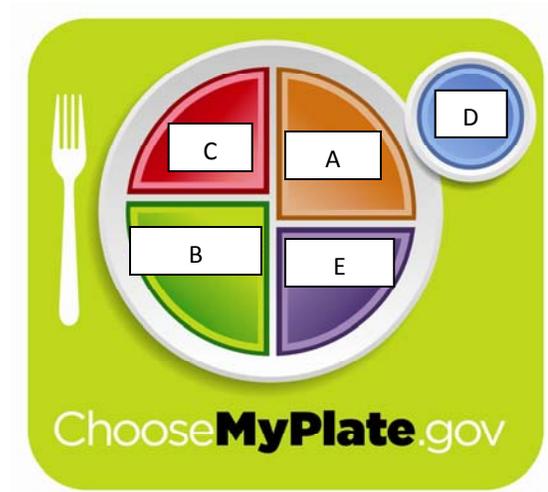
### Resources:

- MyPlate  
U.S. Department of Agriculture  
[www.choosemyplate.gov](http://www.choosemyplate.gov)

## Module 2, Lesson 2: Eat Smart with MyPlate Summary

### The Colors of MyPlate

A. Orange = _____
B. Green = _____
C. Red = _____
D. Blue = _____
E. Purple = _____



### Eat the Right Amount for You

Age	
Gender	
Activity Level	
Calories	
Fruits	
Vegetables	
Grains	
Protein Foods	
Dairy	

### Notes:

### Reflection:

Goal 1 -

Goal 2 -

Serve Up a Healthier You

# MyPlate Food Intake Patterns

## Appendix 6. Estimated Calorie Needs Per Day by Age, Gender, and Physical Activity Level (Detailed), Dietary Guidelines for Americans, 2010

Estimated amounts of calories<sup>a</sup> needed to maintain calorie balance for various gender and age groups at three different levels of physical activity. The estimates are rounded to the nearest 200 calories. An individual's calorie needs may be higher or lower than these average estimates.

Gender/ Activity level <sup>b</sup>	Male/ Sedentary	Male/ Moderately Active	Male/ Active	Female <sup>c</sup> / Sedentary	Female <sup>c</sup> / Moderately Active	Female <sup>c</sup> / Active
Age (years)						
2	1,000	1,000	1,000	1,000	1,000	1,000
3	1,200	1,400	1,400	1,000	1,200	1,400
4	1,200	1,400	1,600	1,200	1,400	1,400
5	1,200	1,400	1,600	1,200	1,400	1,600
6	1,400	1,600	1,800	1,200	1,400	1,600
7	1,400	1,600	1,800	1,200	1,600	1,800
8	1,400	1,600	2,000	1,400	1,600	1,800
9	1,600	1,800	2,000	1,400	1,600	1,800
10	1,600	1,800	2,200	1,400	1,800	2,000
11	1,800	2,000	2,200	1,600	1,800	2,000
12	1,800	2,200	2,400	1,600	2,000	2,200
13	2,000	2,200	2,600	1,600	2,000	2,200
14	2,000	2,400	2,800	1,800	2,000	2,400
15	2,200	2,600	3,000	1,800	2,000	2,400
16	2,400	2,800	3,200	1,800	2,000	2,400
17	2,400	2,800	3,200	1,800	2,000	2,400
18	2,400	2,800	3,200	1,800	2,000	2,400
19-20	2,600	2,800	3,000	2,000	2,200	2,400
21-25	2,400	2,800	3,000	2,000	2,200	2,400
26-30	2,400	2,600	3,000	1,800	2,000	2,400
31-35	2,400	2,600	3,000	1,800	2,000	2,200
36-40	2,400	2,600	2,800	1,800	2,000	2,200
41-45	2,200	2,600	2,800	1,800	2,000	2,200
46-50	2,200	2,400	2,800	1,800	2,000	2,200
51-55	2,200	2,400	2,800	1,600	1,800	2,200
56-60	2,200	2,400	2,600	1,600	1,800	2,200
61-65	2,000	2,400	2,600	1,600	1,800	2,000
66-70	2,000	2,200	2,600	1,600	1,800	2,000
71-75	2,000	2,200	2,600	1,600	1,800	2,000
76+	2,000	2,200	2,400	1,600	1,800	2,000

a. Based on Estimated Energy Requirements (EER) equations, using reference heights (average) and reference weights (healthy) for each age-gender group. For children and adolescents, reference height and weight vary. For adults, the reference man is 5 feet 10 inches tall and weighs 154 pounds. The reference woman is 5 feet 4 inches tall and weighs 126 pounds. EER equations are from the Institute of Medicine. Dietary Reference Intakes for Energy, Carbohydrate, Fiber, Fat, Fatty Acids, Cholesterol, Protein, and Amino Acids. Washington (DC): The National Academies Press; 2002.

b. Sedentary means a lifestyle that includes only the light physical activity associated with typical day-to-day life. Moderately active means a lifestyle that includes physical activity equivalent to walking about 1.5 to 3 miles per day at 3 to 4 miles per hour, in addition to the light physical activity associated with typical day-to-day life. Active means a lifestyle that includes physical activity equivalent to walking more than 3 miles per day at 3 to 4 miles per hour, in addition to the light physical activity associated with typical day-to-day life.

c. Estimates for females do not include women who are pregnant or breastfeeding.

Source: Britten P, Marcøe K, Yamini S, Davis C. Development of food intake patterns for the MyPyramid Food Guidance System. J Nutr Educ Behav 2006;38(6 Suppl):S78-S92.



Appendix 7. USDA Food Patterns, Dietary Guidelines for Americans, 2010

For each food group or subgroup,<sup>a</sup> recommended average daily intake amounts<sup>b</sup> at all calorie levels. Recommended intakes from vegetable and protein foods subgroups are per week. For more information and tools for application, go to [MyPyramid.gov](http://MyPyramid.gov).

Calorie level of pattern <sup>c</sup>	1,000	1,200	1,400	1,600	1,800	2,000	2,200	2,400	2,600	2,800	3,000	3,200
<b>Fruits</b>	1 c	1 c	1½ c	1½ c	1½ c	2 c	2 c	2 c	2 c	2½ c	2½ c	2½ c
<b>Vegetables<sup>d</sup></b>	1 c	1½ c	1½ c	2 c	2½ c	2½ c	3 c	3 c	3½ c	3½ c	4 c	4 c
Dark-green vegetables	½ c/wk	1 c/wk	1 c/wk	1½ c/wk	1½ c/wk	1½ c/wk	2 c/wk	2 c/wk	2½ c/wk	2½ c/wk	2½ c/wk	2½ c/wk
Red and orange vegetables	2½ c/wk	3 c/wk	3 c/wk	4 c/wk	5½ c/wk	5½ c/wk	6 c/wk	6 c/wk	7 c/wk	7 c/wk	7½ c/wk	7½ c/wk
Beans and peas (legumes)	½ c/wk	½ c/wk	½ c/wk	1 c/wk	1½ c/wk	1½ c/wk	2 c/wk	2 c/wk	2½ c/wk	2½ c/wk	3 c/wk	3 c/wk
Starchy vegetables	2 c/wk	3½ c/wk	3½ c/wk	4 c/wk	5 c/wk	5 c/wk	6 c/wk	6 c/wk	7 c/wk	7 c/wk	8 c/wk	8 c/wk
Other vegetables	1½ c/wk	2½ c/wk	2½ c/wk	3½ c/wk	4 c/wk	4 c/wk	5 c/wk	5 c/wk	5½ c/wk	5½ c/wk	7 c/wk	7 c/wk
<b>Grains<sup>e</sup></b>	3 oz-eq	4 oz-eq	5 oz-eq	5 oz-eq	6 oz-eq	6 oz-eq	7 oz-eq	8 oz-eq	9 oz-eq	10 oz-eq	10 oz-eq	10 oz-eq
Whole grains	1½ oz-eq	2 oz-eq	2½ oz-eq	3 oz-eq	3 oz-eq	3 oz-eq	3½ oz-eq	4 oz-eq	4½ oz-eq	5 oz-eq	5 oz-eq	5 oz-eq
Enriched grains	1½ oz-eq	2 oz-eq	2½ oz-eq	2 oz-eq	3 oz-eq	3 oz-eq	3½ oz-eq	4 oz-eq	4½ oz-eq	5 oz-eq	5 oz-eq	5 oz-eq
<b>Protein foods<sup>d</sup></b>	2 oz-eq	3 oz-eq	4 oz-eq	5 oz-eq	5 oz-eq	5½ oz-eq	6 oz-eq	6½ oz-eq	6½ oz-eq	7 oz-eq	7 oz-eq	7 oz-eq
Seafood	3 oz/wk	5 oz/wk	6 oz/wk	8 oz/wk	8 oz/wk	8 oz/wk	9 oz/wk	10 oz/wk	10 oz/wk	11 oz/wk	11 oz/wk	11 oz/wk
Meat, poultry, eggs	10 oz/wk	14 oz/wk	19 oz/wk	24 oz/wk	24 oz/wk	26 oz/wk	29 oz/wk	31 oz/wk	31 oz/wk	34 oz/wk	34 oz/wk	34 oz/wk
Nuts, seeds, soy products	1 oz/wk	2 oz/wk	3 oz/wk	4 oz/wk	4 oz/wk	4 oz/wk	4 oz/wk	5 oz/wk				
<b>Dairy<sup>f</sup></b>	2 c	2½ c	2½ c	3 c	3 c	3 c	3 c	3 c	3 c	3 c	3 c	3 c
<b>Oils<sup>g</sup></b>	15 g	17 g	17 g	22 g	24 g	27 g	29 g	31 g	34 g	36 g	44 g	51 g
<b>Maximum SoFAS<sup>h</sup> limit, calories (% of calories)</b>	137 (14%)	121 (10%)	121 (9%)	121 (8%)	161 (9%)	258 (13%)	266 (12%)	330 (14%)	362 (14%)	395 (14%)	459 (15%)	596 (19%)

# Prevent Portion Distortion

Alice Henneman, MS, RD  
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Portion sizes have gotten bigger over the past 20 years, and so have we! Larger portions add up. Just 100 extra calories per day can lead to a weight gain of 10 pounds per year. Maintaining a healthy weight is a balancing act ... balance calories in with calories out.

If you downsize your portion size and feel a smaller portion looks too small ... serve it on a smaller plate so it looks larger. Note the difference in the appearance of one cup of cereal when a smaller bowl is used.

Using a smaller plate or bowl also can help you eat less according to research by professors Brian Wansink and Koert van Ittersum. Larger plates can make a serving of food appear smaller. For example, in a study conducted at a health and fitness camp, campers given larger bowls consumed



16 percent more cereal than those given smaller bowls. Their estimates of their cereal consumption, however, were 7 percent lower than the estimates of those eating from the smaller bowls.

## Portion Distortion

### 20 YEARS AGO

Renee Comet, National Cancer Institute



**333 Calories**

Lifting weights for **1 HOUR AND 30 MINUTES** burns approximately 257 calories\* *\*Based on 130-pound person*

### TODAY



**590 Calories**

### DIFFERENCE

**257 MORE CALORIES**

### 20 YEARS AGO



**45 Calories**

Walking **1 HOUR AND 20 MINUTES** burns approximately 305 calories\* *\*Based on 130-pound person*

### TODAY

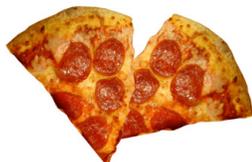
renee mcgurk, www.flickr.com



**350 Calories**

### DIFFERENCE

**305 MORE CALORIES**



**500 Calories**

Playing golf (while walking and carrying your clubs) for **1 HOUR** burns approximately 350 calories\* *\*Based on 160-pound person*



**850 Calories**

**350 MORE CALORIES**



1.5 oz

**210 Calories**

Vacuuming for **1 HOUR AND 30 MINUTES** burns approximately 290 calories\* *\*Based on 130-pound person*



4 oz

**500 Calories**

**290 MORE CALORIES**



1 cup spaghetti with sauce and 3 small meatballs

**500 Calories**

Housecleaning for **2 HOURS AND 35 MINUTES** burns approximately 525 calories\* *\*Based on 130-pound person*



2 cups spaghetti with sauce and 3 large meatballs

**1,025 Calories**

**525 MORE CALORIES**

Renee Comet, National Cancer Institute



1.5 diameter

**55 Calories**

Washing a car for **1 HOUR AND 15 MINUTES** burns approximately 220 calories\* *\*Based on 130-pound person*



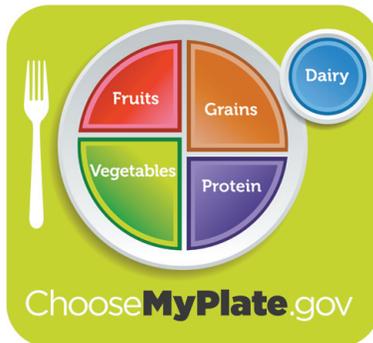
3.5 diameter

**275 Calories**

**220 MORE CALORIES**

# MyPlate Helps You Choose Types and Amounts of Foods

The following foods and amounts are for a 2,000 calorie daily food pattern for ages 19 and over. Your calorie needs may be more or less; adjust the amount you are eating accordingly. For a more personalized plan for YOUR calorie level, based on your age, gender, height/weight, and activity level — and for ages 2 through 18 — visit <http://choosemyplate.gov>.



## GRAINS:

**Eat 6 “ounce-equivalents.”  
Make at least half your grains whole grains.**

- Ounce-equivalents:
- 1 slice bread
  - 1 cup ready-to-eat cereal (such as flakes)
  - ½ cup cooked pasta, cooked rice, or cooked cereal

## FRUITS: Eat 2 cups of fresh, canned, or frozen fruits.

- In general, 1 cup of fruit or 100% fruit juice, or 1/2 cup of dried fruit can be considered as 1 cup from the Fruit Group
- Make most of your choices whole or cut-up fruit rather than juice, for the benefits dietary fiber provides

## VEGETABLES: Eat 2½ cups of fresh, frozen, canned vegetables, or an equivalent amount of dried/dehydrated vegetables.

- Note: 2 cups raw leafy greens = 1 cup of vegetable

## DAIRY: Consume 3 cups of fat-free or low-fat milk (1%) or equivalent Dairy Group foods.

- 1-cup equivalents:
- 8 oz milk
  - 1 cup yogurt
  - 1½ oz natural cheese
  - 2 oz processed cheese
  - 8 oz calcium-fortified soy beverages

## PROTEIN FOODS: Eat 5½ oz (or equivalent) of lean meat, poultry, or fish.

- 1-ounce equivalents:
- 1 oz meat, poultry, or fish
  - ¼ cup cooked beans or peas (does not include green beans and peas)
  - 1 egg
  - 1 tablespoon peanut butter or almond butter
  - ½ oz of nuts or seeds
  - ¼ cup (about 2 oz) of tofu
  - ¼ cup roasted soybeans

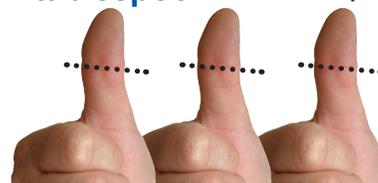
# Keep an Eye on Your Portion Sizes

Here are some ways to “eyeball” food portion amounts:



**1 teaspoon =** tip of a thumb to the first joint

**1 tablespoon =** 3 thumb tips



**1½ ounces of cheese =**  
**4 stacked dice**



**3 ounces cooked meat, or poultry =** a deck of cards



**3 ounces grilled/baked fish =** checkbook



## REFERENCES:

- Choose MyPlate at <http://ChooseMyPlate.gov>
- Dietary Guidelines for Americans, 2010 at [www.cnpp.usda.gov/DGAS2010-PolicyDocument.htm](http://www.cnpp.usda.gov/DGAS2010-PolicyDocument.htm)
- Keep an Eye on Portion Size Serving Size card, Dept. of Health & Human Services, National Institutes of Health, and National Heart, Lung, and Blood Institute at <http://hp2010.nhlbihin.net/portion/servingcard7.pdf>
- Portion Distortion Quiz, Dept. of Health & Human Services, National Institutes of Health, and National Heart, Lung, and Blood Institute at <http://hp2010.nhlbihin.net/portion>
- Rethink Your Drink, Centers for Disease Control and Prevention at [www.cdc.gov/healthyweight/healthy\\_eating/drinks.html](http://www.cdc.gov/healthyweight/healthy_eating/drinks.html)
- Selected Messages for Consumers, USDA Center for Nutrition Policy and Promotion at [www.choosemyplate.gov/print-materials-ordering/selected-messages.html](http://www.choosemyplate.gov/print-materials-ordering/selected-messages.html)
- Wansink, Brian and Koert van Ittersum (2006), “The Visual Illusions of Food: Why Plates, Bowls and Spoons Can Bias Consumption Volume,” *FASEB Journal*, 20:4 (Mar 6) A618-A618, Part 1

For more information about healthy eating, visit <http://food.unl.edu>

This is a peer reviewed publication

## Module 2, Lesson 3: Right-Size Your Portions Summary



### Summary:

- Portions have increased over the years, and we may be eating more than we need.
- MyPlate is a tool that we can use to find serving sizes to help us right-size our portions.
- You can even use your hand or everyday items to help you picture serving sizes.

### Resources:

- Avoid Portion Distortion Presentation  
University of Nebraska-Lincoln Extension  
<http://food.unl.edu/web/fnh/portiondistortion>
- MyPlate  
U.S. Department of Agriculture  
[www.choosemyplate.gov](http://www.choosemyplate.gov)

### Notes:

## Module 2, Lesson 3: Right-Size Your Portions Summary

### MyPlate Suggestions based on 2,000 calories each day:

- 6 ounces from the Grain group
- 2 ½ cups from the Vegetable group
- 2 cups from the Fruit group
- 3 cups from the Dairy group
- 5 ½ ounces from the Protein Foods group

### Serving Sizes for Each Food Group

Food Group	Serving Sizes
Grains - What counts as an ounce?	½ cup of rice or pasta, 1 slice of bread, 1 cup of cereal, ½ of a hamburger bun
Fruit - What counts as a cup?	1 medium piece of fruit, ½ cup of diced fruit, ¼ cup of dried fruit, ¾ cup of 100% fruit juice
Vegetables - What counts as a cup?	1 cup of fresh/cooked vegetables, 2 cups of leafy greens, ¾ cup of 100% vegetable juice
Dairy - What counts as a cup?	1 cup (8 oz.) of milk, 1 cup (8 oz.) of yogurt, 1.5 oz. of hard cheese, 2 oz. of processed cheese
Protein Foods (Meat, Poultry, Fish, Legumes, Eggs and Nuts) - What counts as an ounce?	1 oz. of meat, poultry or seafood; ¼ cup of cooked dried beans; 1 egg; ½ ounce nuts or seeds; 1 tablespoon of peanut butter

### What’s on the Menu?

Breakfast -

Lunch -

Dinner -

Don’t forget snacks!



### Reflection:

Goal 1 -

Goal 2 -

**Serve Up a Healthier You**

# Serving Sizes are in Your Hand



**A fist or cupped hand = 1 cup**



- 1 serving = ½ cup cereal, cooked pasta or rice
- or 1 cup of raw, leafy green vegetables
- or ½ cup of cooked or raw, chopped vegetables or fruit



**Palm = 3 oz. of meat**

Two servings, or 6 oz., of lean meat (poultry, fish, shellfish, beef) should be a part of a daily diet. Measure the right amount with your palm. One palm size portion equals 3 oz., or one serving.

**A thumb = 1 oz. of cheese**

Consuming low-fat cheese is a good way to help you meet the required servings from the milk, yogurt and cheese group. 1 ½ - 2 oz. of low-fat cheese counts as 1 of the 2-3 daily recommended servings.



**Thumb tip = 1 teaspoon**

Keep high-fat foods, such as peanut butter and mayonnaise, at a minimum by measuring the serving with your thumb. One teaspoon is equal to the end of your thumb, from the knuckle up. Three teaspoons equals 1 tablespoon.



**Handful = 1-2 oz. of snack food**

Snacking can add up. Remember, 1 handful equals 1 oz. of nuts and small candies. For chips and pretzels, 2 handfuls equals 1 oz.



**1 tennis ball = 1 serving of fruit**

Healthy diets include 2-4 servings of fruit a day.

*Because hand sizes vary, compare your fist size to an actual measuring cup.*

## What's in a Serving Size?

Finding it hard to picture a serving size? Everyday examples can help you compare your portion size with the standard Food Guide Pyramid serving size.

**Note: hands and finger sizes vary from person to person! These are GUIDES only.**



### The Grain Group

- 1 pancake.....is a compact disc (CD)
- ½ cooked cup rice, pasta.....is a cupcake wrapper full or a rounded handful
- 1 piece of cornbread.....is a bar of soap
- 1 slice of bread.....is an audiocassette tape
- 1 cup of cereal.....is tennis ball
- 1 roll.....is a bar of soap

### The Vegetable Group

- 1 cup green salad.....is a tennis ball
- 1 baked potato.....is a tennis ball
- ¾ cup tomato juice.....is a small Styrofoam cup
- ½ cup cooked broccoli.....is a scoop of ice cream or a light bulb
- ½ cup serving.....is 6 asparagus spears/7 or 8 baby carrots/1 ear of corn

### The Fruit Group

- ½ cup of grapes (15 grapes).....is a light bulb
- ½ cup of fresh fruit.....is 7 cotton balls
- 1 medium size fruit.....is a tennis ball
- 1 cup of cut-up fruit.....is a tennis ball
- ¼ cup raisins.....is a large egg or a golf ball

### The Dairy Group

- 1½ ounces cheese is a 9-volt battery
- 1 ounce of cheese.....is a pair of dice
- 1 cup of ice cream.....is the size of a tennis ball

### The Protein Foods Group

- 2 tablespoons peanut butter.....is a Ping-Pong ball
- 3 ounces cooked meat, fish, poultry.....is a deck of cards
- 3 ounces grilled/baked fish.....is a checkbook
- 3 ounces cooked chicken.....is a chicken leg and thigh or a breast
- 1 cup cooked dried beans.....is a tennis ball
- 1 ounce of nuts.....is one handful

### Fats, Oils and Sweets

- 1 teaspoon butter, margarine....is the size of a stamp the thickness of your finger
- 2 tablespoons salad dressing.....is a Ping-Pong ball
- 1 ounce of chocolate.....is one package of dental floss
- 1 ounce of small candies.....is one handful
- 1 ounce of chips or pretzels.....is two handfuls
- ½ cup of potato chips, crackers or popcorn.....is one handful

**Serve Up a Healthier You****Module 2, Lesson 4: Label Lingo Summary****Notes:****Summary:**

- Use labels to help you make smart food and beverage choices.
- Check the Nutrition Facts Panel for serving size, servings per container and calories per serving.
  - Limit these:
    - Total, Saturated and Trans fat
    - Cholesterol
    - Sodium
  - Get enough of these:
    - Potassium
    - Dietary fiber
    - Vitamins A and C
    - Calcium
    - Iron
  - Percent Daily Values:
    - 5% or less is low
    - 20% or more is high
  - General Guide to Calories:
    - 40 calories = LOW
    - 100 calories = MODERATE
    - 400 calories = HIGH
- Read the Ingredients list. The ingredients are listed by weight, from highest weight to lowest weight.

**Resources:**

- How to Understand and Use the Nutrition Facts Label  
U.S. Food and Drug Administration  
[www.fda.gov/Food/ResourcesForYou/Consumers/NFLPM/ucm274593.htm](http://www.fda.gov/Food/ResourcesForYou/Consumers/NFLPM/ucm274593.htm)
- Make your Calories Count, Use the Nutrition Facts Label for Healthy Weight Management  
U.S. Food and Drug Administration  
[www.fda.gov/Food/ResourcesForYou/Consumers/NFLPM/ucm275438.htm](http://www.fda.gov/Food/ResourcesForYou/Consumers/NFLPM/ucm275438.htm)

## Module 2, Lesson 4: Label Lingo Summary

### What's in Label?

# Nutrition Facts

Serving Size 1 cup (228g)  
 Servings Per Container 2

**Amount Per Serving**  
**Calories** 250      **Calories from Fat** 110

	% Daily Value*
<b>Total Fat</b> 12g	<b>18%</b>
Saturated Fat 3g	<b>15%</b>
Trans Fat 3g	
<b>Cholesterol</b> 30mg	<b>10%</b>
<b>Sodium</b> 470mg	<b>20%</b>
<b>Potassium</b> 700mg	<b>20%</b>
<b>Total Carbohydrate</b> 31g	<b>10%</b>
Dietary Fiber 0g	<b>0%</b>
Sugars 5g	
<b>Protein</b> 5g	
<b>Vitamin A</b>	<b>4%</b>
<b>Vitamin C</b>	<b>2%</b>
<b>Calcium</b>	<b>20%</b>
<b>Iron</b>	<b>4%</b>

\* Percent Daily Values are based on a 2,000 calorie diet. Your Daily Values may be higher or lower depending on your calorie needs.

	Calories:	2,000	2,500
Total Fat	Less than	65g	80g
Sat Fat	Less than	20g	25g
Cholesterol	Less than	300mg	300mg
Sodium	Less than	2,400mg	2,400mg
Total Carbohydrate		300g	375g
Dietary Fiber		25g	30g

#### A. Servings and Calories

How much is a serving? \_\_\_\_\_

How many servings are in the container or package? \_\_\_\_\_

How many calories are in each serving? \_\_\_\_\_

How many calories would you eat if you ate the whole container or package? \_\_\_\_\_

#### B. Limit These

List the things you should limit:

#### C. Get Enough of These

List the things you should get enough of:

### Notes:

### Reflection:

Goal 1 -

Goal 2 -

## Module 2, Lesson 5: Make Sense of Carbs Summary



### Summary:

- Carbohydrates are a type of nutrient found in foods that provide our bodies with energy.
- Types of carbohydrates:
  - Simple
  - Complex
    - Starch
    - Fiber
- Try to limit the amount of added sugars in foods you prepare and foods you buy.
- Eat a variety of high fiber foods, including whole grains, vegetables, fruit, beans, peas, seeds and nuts.
- Make at least half your grains whole grains.

### Resources:

- Dietary Guidelines for Americans  
Center for Nutrition Policy and Promotion  
U.S. Department of Agriculture  
[www.dietaryguidelines.gov](http://www.dietaryguidelines.gov)
- MyPlate  
U.S. Department of Agriculture  
[www.choosemyplate.gov](http://www.choosemyplate.gov)

### Notes:

## Module 2, Lesson 5: Make Sense of Carbs Summary

### Names for Added Sugars

Brown sugar	Invert sugar
Corn sweetener	Lactose
Corn syrup	Maltose
Dextrose	Malt syrup
Fructose	Molasses
Fruit juice concentrate	Raw sugar
Glucose	Sucrose
High-fructose corn syrup	Sugar
Honey	Syrup



### My Menu

Foods I ate yesterday:	Whole grain additions or substitutions:

### Reflection:

Goal 1 -

Goal 2 -

## Module 2, Lesson 6: Make Sense of Protein Summary



### Summary:

- Protein is a nutrient found in meat, poultry, fish and shellfish, eggs, milk and milk products, beans and peas, nuts and seeds, grains and some vegetables.
- Types of protein:
  - Complete
    - Found in animal-based foods and soy
    - Contain all essential amino acids
  - Incomplete
    - Found in plant-based foods
    - Low in one or more essential amino acids
- Ways to go lean with protein:
  - Choose lean meats and poultry.
  - Use healthy ways to prepare.
  - Try more seafood, beans, nuts and seeds.

### Resources:

- Dietary Guidelines for Americans  
Center for Nutrition Policy and Promotion  
U.S. Department of Agriculture  
[www.dietaryguidelines.gov](http://www.dietaryguidelines.gov)
- MyPlate  
U.S. Department of Agriculture  
[www.choosemyplate.gov](http://www.choosemyplate.gov)
- Nutrition Basics: Protein  
Nutrition for Everyone  
Centers for Disease Control and Prevention  
U.S. Department of Health and Human Services  
[www.cdc.gov/nutrition/everyone/basics/protein.html](http://www.cdc.gov/nutrition/everyone/basics/protein.html)

## Module 2, Lesson 6: Make Sense of Protein Summary

### Notes:

### Go Lean with Protein

Choose lean meats and protein.

1. \_\_\_\_\_
2. \_\_\_\_\_

Use healthy ways to prepare.

1. \_\_\_\_\_
2. \_\_\_\_\_

Try more seafood, beans, nuts and seeds.

1. \_\_\_\_\_
2. \_\_\_\_\_

### Reflection:

Goal 1 -

Goal 2 -

## Module 2, Lesson 7: Make Sense of Fat Summary



### Summary:

- Saturated fat and trans fats are “bad” fats that can raise bad cholesterol and increase heart disease risk.
- Monounsaturated fat and polyunsaturated fat are “good” fats that may help lower bad cholesterol and decrease heart disease risk.
- Limit “bad” fat and try to replace “bad” fat in the diet with “good” fat.

### Resources:

- Fats and Oils  
American Heart Association  
[www.heart.org/HEARTORG/GettingHealthy/FatsAndOils/Fats-Oils\\_UCM\\_001084\\_SubHomePage.jsp](http://www.heart.org/HEARTORG/GettingHealthy/FatsAndOils/Fats-Oils_UCM_001084_SubHomePage.jsp)
- MyPlate  
U.S. Department of Agriculture  
[www.choosemyplate.gov](http://www.choosemyplate.gov)
- Nutrition Basics: Dietary Fat  
Nutrition for Everyone  
Centers for Disease Control and Prevention  
U.S. Department of Health and Human Services  
[www.cdc.gov/nutrition/everyone/basics/fat/index.html](http://www.cdc.gov/nutrition/everyone/basics/fat/index.html)

### Notes:

## Module 2, Lesson 7: Make Sense of Fat Summary

### All About Fats

<b>Bad fats</b>	<b>Found in:</b>
Saturated	Beef, lamb, pork, poultry Lard Butter, cheese and other whole or reduced fat dairy products Palm and palm kernel oils Coconut oil
Trans	Processed baked goods (pies, pastries, muffins, biscuits, etc.) Fried foods (French fries, fried chicken, fried fish, etc.) Margarine and vegetable shortening Foods with “hydrogenated oil” or “partially hydrogenated oil” in the Ingredients list
<b>Good fats</b>	<b>Found in:</b>
Monounsaturated	Olive, canola, peanut and sesame oils Avocado and olives Nuts and seeds (almonds, peanuts, peanut butter)
Polyunsaturated	Soybean, corn and safflower oils Nuts and seeds (walnuts and sunflower seeds) Fish (salmon, tuna, mackerel, herring, trout)

### Fat Change

What are some ways we can limit or replace “bad” fats with “good” fats?

### Reflection:

Goal 1 -

Goal 2 -

## Module 2, Lesson 8: Hunger Hoax Summary



### Summary:

- Use the Hunger/Satiety Scale to help you determine if you are truly hungry:
  - 1 is the hungriest
  - 10 is the fullest
  - Try to stay between 3 and 7.
- Savor your foods and take time to think about why you eat and what you eat. This will help you avoid overeating.

### Resources:

- Nutrition.gov - Smart nutrition starts here  
National Agricultural Library  
U.S. Department of Agriculture  
[www.nutrition.gov](http://www.nutrition.gov)
- MyPlate  
U.S. Department of Agriculture  
[www.choosemyplate.gov](http://www.choosemyplate.gov)

### Notes:

## Module 2, Lesson 8: Hunger Hoax Summary

### Am I Really Hungry?

#### Hunger/Satiety Scale

1	2	3	4	5	6	7	8	9	10
---	---	---	---	---	---	---	---	---	----

- 1 - Famished, starving
- 2 - Headache, weak, cranky, low energy
- 3 - Want to eat now
- 4 - Hungry, could wait to eat
- 5 - Not hungry, not full
- 6 - Feeling satisfied
- 7 - Feeling full
- 8 - Uncomfortably full
- 9 - Stuffed, very uncomfortable
- 10 - Bursting, painfully full

How does my body feel right now? \_\_\_\_\_

What is my Hunger/Satiety Scale number right now? \_\_\_\_\_

#### Reflection:

Goal 1 -

Goal 2 -



## Module 3, Lesson 1: Your Path to Wellness - Move More Summary



### Summary:

#### Physical Activity Guidelines for Americans:

- Aerobic activity
  - Moderate: 150 minutes per week
  - Vigorous: 75 minutes per week
- Muscle strengthening activity
  - 2 days per week

### Resources:

- Be Active Your Way: A Guide for Adults  
Office of Disease Prevention and Health Promotion  
U.S. Department of Health and Human Services  
[www.health.gov/paguidelines/adultguide/default.aspx#toc](http://www.health.gov/paguidelines/adultguide/default.aspx#toc)
- Physical Activity for Everyone  
Centers for Disease Control and Prevention  
U.S. Department of Health and Human Services  
[www.cdc.gov/physicalactivity/everyone/guidelines/index.html](http://www.cdc.gov/physicalactivity/everyone/guidelines/index.html)
- Physical Activity Guidelines for Americans  
Office of Disease Prevention and Health Promotion  
U.S. Department of Health and Human Services  
[www.health.gov/paguidelines/guidelines/default.aspx](http://www.health.gov/paguidelines/guidelines/default.aspx)

## Module 3, Lesson 1: Your Path to Wellness - Move More Summary

### Notes:

### Reflection:

Goal 1 -

Goal 2 -



# 2008 Physical Activity Guidelines for Americans

## Be Active Your Way: A Fact Sheet for Adults



### Finding out what kind and how much physical activity you need

#### How do I do it?

It's your choice. Pick an activity that's easy to fit into your life. Do at least 10 minutes of physical activity at a time. Choose **aerobic** activities that work for you. These make your heart beat faster and can make your heart, lungs, and blood vessels stronger and more fit. Also, do **strengthening** activities which make your muscles do more work than usual.

#### Why should I be physically active?

Physical activity can make you feel stronger and more alive. It is a fun way to be with your family or friends. It also helps you improve your health.

### How many times a week should I be physically active?

It is up to you, but it is better to spread your activity throughout the week and to be active at least 3 days a week.

### How do I build up more physical activity?

Do a little more each time. Once you feel comfortable, do it more often. Then you can trade activities at a moderate level for vigorous ones that take more effort. You can do moderate and vigorous activities in the same week.

## How much physical activity do I need to do?

This chart tells you about the activities that are important for you to do. Do **both** aerobic activities and strengthening activities. Each offers important health benefits. And remember, some physical activity is better than none!

### Aerobic Activities

If you choose activities at a **moderate** level, do at least **2 hours and 30 minutes** a week.

If you choose **vigorous** activities, do at least **1 hour and 15 minutes** a week.

- Slowly build up the amount of time you do physical activities. The more time you spend, the more health benefits you gain. Aim for twice the amount of activity in the box above.
- Do at least 10 minutes at a time.
- You can combine moderate and vigorous activities.

### Muscle Strengthening Activities

Do these at least **2 days** a week.

- Include all the major muscle groups such as legs, hips, back, chest, stomach, shoulders, and arms.
- Exercises for each muscle group should be repeated 8 to 12 times per session.

Be Active, Healthy, and Happy!



## How can I tell an activity at a moderate level from a vigorous one?

Vigorous activities take more effort than moderate ones. Here are just a few moderate and vigorous aerobic physical activities. Do these for **10 minutes or more** at a time.

### Moderate Activities

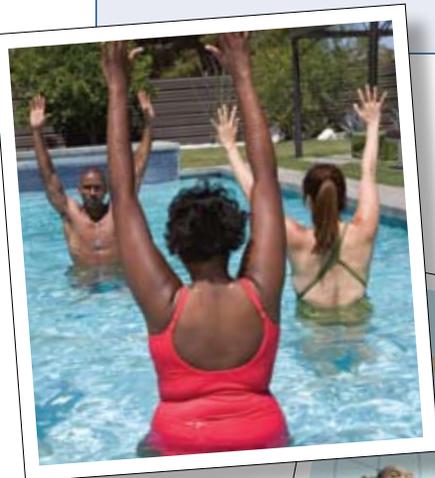
(I can talk while I do them, but I can't sing.)

- Ballroom and line dancing
- Biking on level ground or with few hills
- Canoeing
- General gardening (raking, trimming shrubs)
- Sports where you catch and throw (baseball, softball, volleyball)
- Tennis (doubles)
- Using your manual wheelchair
- Using hand cyclers—also called ergometers
- Walking briskly
- Water aerobics

### Vigorous Activities

(I can only say a few words without stopping to catch my breath.)

- Aerobic dance
- Biking faster than 10 miles per hour
- Fast dancing
- Heavy gardening (digging, hoeing)
- Hiking uphill
- Jumping rope
- Martial arts (such as karate)
- Race walking, jogging, or running
- Sports with a lot of running (basketball, hockey, soccer)
- Swimming fast or swimming laps
- Tennis (singles)



For more information, visit [www.healthfinder.gov/getactive](http://www.healthfinder.gov/getactive)

Be active your way by choosing activities you enjoy!

# 2008 Physical Activity Guidelines for Americans

Be Active Your Way



## Keeping track of what you do each week

Make copies of the forms on the next page to write down your goals and track your activities each week. There are examples below.

The first form is for aerobic activities. The second form is for strengthening activities. Be active **your way** by choosing activities you enjoy!



### Tracking works!

"I made a copy of the tracking forms and keep them handy to fill out each day. Know what? When I fill out the forms—it's easier to reach my weekly goal."

### Example: My aerobic activities this week

My goal is to do aerobic activities for a total of 2 hours and 30 minutes this week.

What I did	Effort	When I did it and for how long							Total hours or minutes
		Mon	Tue	Wed	Thu	Fri	Sat	Sun	
<i>Walked</i>	<i>Moderate</i>		<i>30 min</i>	<i>30 min</i>		<i>30 min</i>		<i>30 min</i>	<i>2 hours</i>
<i>Biked fast</i>	<i>Vigorous</i>						<i>30 min</i>		<i>30 min</i>
This is the total number of hours or minutes I did these activities this week:									<i>2 hours and 30 min</i>

### Example: My strengthening activities this week

My goal is to do strengthening activities for a total of 2 days this week.

What I did	When I did it							Total days
	Mon	Tue	Wed	Thu	Fri	Sat	Sun	
<i>Sit-ups</i>	<i>Yes</i>							<i>1 day</i>
<i>Stretch bands</i>				<i>Yes</i>				<i>1 day</i>
This is the total number of days I did these activities this week:								<i>2 days</i>

Be active **your way** by choosing activities you enjoy!

**My aerobic activities this week**

My goal is to do aerobic activities for a total of \_\_\_\_\_ hours and \_\_\_\_\_ minutes this week.

What I did	Effort	When I did it and for how long							Total hours or minutes
		Mon	Tue	Wed	Thu	Fri	Sat	Sun	
This is the total number of hours or minutes I did these activities this week:									

**My strengthening activities this week**

My goal is to do strengthening activities for a total of \_\_\_\_\_ days this week.

What I did	When I did it							Total days
	Mon	Tue	Wed	Thu	Fri	Sat	Sun	
This is the total number of days I did these activities this week:								

For more information, visit [www.healthfinder.gov/getactive](http://www.healthfinder.gov/getactive)

Be Active, Healthy, and Happy!

## Module 3, Lesson 2: Fitness to Fit your Lifestyle Summary



### Summary:

- You can become more active by making some small lifestyle changes.
- In order to reach the goal of 2 ½ hours of moderate aerobic activity each week (according to the Physical Activity Guidelines for Americans), you need to try and overcome barriers.

### Resources:

- **Be Active Your Way: A Guide for Adults**  
Office of Disease Prevention and Health Promotion  
U.S. Department of Health and Human Services  
[www.health.gov/paguidelines/adultguide/default.aspx#toc](http://www.health.gov/paguidelines/adultguide/default.aspx#toc)
- **Exercise & Physical Activity: Your Everyday Guide**  
National Institute on Aging, National Institutes of Health  
U.S. Department of Health and Human Services  
[www.nia.nih.gov/HealthInformation/Publications/ExerciseGuide/](http://www.nia.nih.gov/HealthInformation/Publications/ExerciseGuide/)
- **Physical Activity for Everyone Videos**  
Centers for Disease Control and Prevention  
U.S. Department of Health and Human Services  
[www.cdc.gov/physicalactivity/everyone/videos/index.html](http://www.cdc.gov/physicalactivity/everyone/videos/index.html)

# Module 3, Lesson 2: Fitness to Fit your Lifestyle Summary

## My Barrier

My biggest barrier to physical activity is \_\_\_\_\_

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Ways to overcome that barrier:

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## Notes:



## Reflection:

Goal 1 -

Goal 2 -



## Keep It Simple: The anytime, anywhere exercise program

If everyone took a brisk half-hour walk each day, the health of our world would be remarkably improved. And if everyone did minimal strength training and stretching, there would be tremendous added benefits.

MyExercisePlan.com provides you with the necessary resources to create an exercise program, from the very simple to the fairly complex. Let's take a look at a "keep it simple" routine in each of the three components of an exercise program.

### Aerobic Exercise

For most people, the simplest aerobic activity is walking or jogging. Minimal equipment is required; just put on your shoes and head out. But if you have easy access to equipment, then all the types of aerobic activity can be very simple. What aerobic activities are the easiest access for you?

- |  |   |
|--|---|
| <input type="checkbox"/> Walking             | <input type="checkbox"/> Rowing             |
| <input type="checkbox"/> Walking - treadmill | <input type="checkbox"/> Stationary Rowing  |
| <input type="checkbox"/> Jogging             | <input type="checkbox"/> Elliptical Trainer |
| <input type="checkbox"/> Jogging - treadmill | <input type="checkbox"/> Group Exercise     |
| <input type="checkbox"/> Swimming            | <input type="checkbox"/> Stepper            |
| <input type="checkbox"/> Cycling             | <input type="checkbox"/> _____              |
| <input type="checkbox"/> Indoor Cycling      | <input type="checkbox"/> _____              |

Remember: Aerobic exercise that is moderate in intensity is also part of the "keeping it simple" theme. It is more difficult to keep up a habit that involves "hard" aerobic exercise—not impossible, just more difficult at the beginning of your exercise program.

### Strength Exercise

Bodyweight exercise a great way to keep your strength training simple. Here are some bodyweight exercises that work most of the major muscle groups:

- Push-up – chest, triceps
- Crunches – middle and side abdominals
- Pull-ups – biceps and upper back (you do need a bar – if you can't do one pull-up, then jump up and lower yourself)
- Squats and Lunges – gluteals, quads and hamstrings (that's butt, front thigh and back thigh)
- Dips – triceps (from the front of a chair or bench)

If you have easy access to equipment then things can really open up for you. Exercise tubing is great anytime/anywhere equipment.

### Stretching

Stretching certainly can be done almost anytime and anywhere. An exercise mat or towel is a very "nice to have."

Pick at least one stretch for each of the following muscle groups. MyExercisePlan.com provides tutorials on how to perform these exercises.

- |            |                          |
|------------|--------------------------|
| Upper Back | Front Thigh (quadriceps) |
| Lower Back | Back Thigh (hamstrings)  |
| Chest      | Inner Thigh              |
| Triceps    | Hips                     |
| Shoulders  | Gluteals (butt)          |
| Neck       | Calves                   |

Keep your exercising as simple as it needs to be. There is tremendous return on investment from the simplest of routines.



## Module 3, Lesson 3: Smart Moves - Get Started Safely Summary



### Summary:

- Safety barriers may keep us from moving more, but we can take certain steps to be sure that the benefits of moving more are much greater than the chances of getting hurt.
- There are three steps to take to be safe when moving more:
  - Make sure you are healthy enough to start moving more.
  - Follow some general safety rules.
  - Warm up at the beginning and cool down at the end of any activity.
- Warming up and cooling down require stretching exercises, which help to prevent injuries and muscle soreness.

### Resources:

- Exercise & Physical Activity: Your Everyday Guide  
National Institute on Aging, National Institutes of Health  
U.S. Department of Health and Human Services  
[www.nia.nih.gov/HealthInformation/Publications/ExerciseGuide/](http://www.nia.nih.gov/HealthInformation/Publications/ExerciseGuide/)
- Flexibility  
My Eat Smart, Move More  
N.C. Division of Public Health  
[www.myeatsmartmovemore.com/Texts/Flexibility.pdf](http://www.myeatsmartmovemore.com/Texts/Flexibility.pdf)
- Stretching and Flexibility Exercises  
American Heart Association  
[www.heart.org/HEARTORG/Conditions/More/CardiacRehab/Stretching-and-Flexibility-Exercises\\_UCM\\_307383\\_Article.jsp](http://www.heart.org/HEARTORG/Conditions/More/CardiacRehab/Stretching-and-Flexibility-Exercises_UCM_307383_Article.jsp)

## Module 3, Lesson 3: Smart Moves - Get Started Safely Summary

### Notes:



### Reflection:

Goal 1 -

Goal 2 -

## Module 3, Lesson 4: FITTness - Where Do You Stand? Summary



### Summary:

The FITT Principle:

- F = Frequency - How often are you active?
- I = Intensity - How hard are you working?
- T = Time - How long are you active?
- T = Type - What different types of activities are you doing?

### Resources:

- Be Active Your Way: A Guide for Adults  
Office of Disease Prevention and Health Promotion  
U.S. Department of Health and Human Services  
[www.health.gov/paguidelines/adultguide/default.aspx#toc](http://www.health.gov/paguidelines/adultguide/default.aspx#toc)
- Exercise & Physical Activity: Your Everyday Guide  
National Institute on Aging, National Institutes of Health  
U.S. Department of Health and Human Services  
[www.nia.nih.gov/HealthInformation/Publications/ExerciseGuide/](http://www.nia.nih.gov/HealthInformation/Publications/ExerciseGuide/)
- Physical Activity for Everyone  
Centers for Disease Control and Prevention  
U.S. Department of Health and Human Services  
[www.cdc.gov/physicalactivity/everyone/guidelines/index.html](http://www.cdc.gov/physicalactivity/everyone/guidelines/index.html)
- Physical Activity Guidelines for Americans  
Office of Disease Prevention and Health Promotion  
U.S. Department of Health and Human Services  
[www.health.gov/paguidelines/guidelines/default.aspx](http://www.health.gov/paguidelines/guidelines/default.aspx)
- Public Resources  
American College of Sports Medicine  
[www.acsm.org/access-public-information](http://www.acsm.org/access-public-information)
- Sample Walking Program  
National Heart, Lung and Blood Institute, National Institutes of Health  
U.S. Department of Health and Human Services  
[www.nhlbi.nih.gov/hbp/prevent/p\\_active/walk.htm](http://www.nhlbi.nih.gov/hbp/prevent/p_active/walk.htm)

## Module 3, Lesson 4: FITTness - Where Do You Stand? Summary

<b>F</b>	Notes:
<b>I</b>	Notes:
<b>T</b>	Notes:
<b>T</b>	Notes:

What is my FITTness now?

What is my FITTness goal?

**Notes:**

**Reflection:**

Goal 1 -

Goal 2 -



**Serve Up a Healthier You****Sample Walking Program**

	Warm Up	Activity	Cool Down	Total Time (Minutes)
Week 1				
Session A	Walk slowly for 5 minutes.	Then, walk briskly for 5 minutes.	Then, walk slowly for 5 minutes.	15
Session B	Repeat above pattern.			
Session C	Repeat above pattern.			
Continue with at least three walking sessions during each week of the program.				
Week 2	Walk slowly for 5 minutes.	Then, walk briskly for 7 minutes.	Then, walk slowly for 5 minutes.	17
Week 3	Walk slowly for 5 minutes.	Then, walk briskly for 9 minutes.	Then, walk slowly for 5 minutes.	19
Week 4	Walk slowly for 5 minutes.	Then, walk briskly for 11 minutes.	Then, walk slowly for 5 minutes.	21
Week 5	Walk slowly for 5 minutes.	Then, walk briskly for 13 minutes.	Then, walk slowly for 5 minutes.	23
Week 6	Walk slowly for 5 minutes.	Then, walk briskly for 15 minutes.	Then, walk slowly for 5 minutes.	25
Week 7	Walk slowly for 5 minutes.	Then, walk briskly for 18 minutes.	Then, walk slowly for 5 minutes.	28
Week 8	Walk slowly for 5 minutes.	Then, walk briskly for 20 minutes.	Then, walk slowly for 5 minutes.	30
Week 9	Walk slowly for 5 minutes.	Then, walk briskly for 23 minutes.	Then, walk slowly for 5 minutes.	33
Week 10	Walk slowly for 5 minutes.	Then, walk briskly for 26 minutes.	Then, walk slowly for 5 minutes.	36
Week 11	Walk slowly for 5 minutes.	Then, walk briskly for 28 minutes.	Then, walk slowly for 5 minutes.	38
Week 12 and beyond	Walk slowly for 5 minutes.	Then, walk briskly for 30 minutes.	Then, walk slowly for 5 minutes.	40

*Adapted from the National Heart, Lung and Blood Institute, National Institutes on Health, U.S. Department of Health and Human Services*

## Walking Equivalents of Other Aerobic Activities

Your physical activity routine may include different types of activities throughout the week. Different types of activities provide different benefits, which is important for a well-rounded routine.

Use the chart below to convert minutes of activities other than walking to a number that can be recorded on your *How Active I Am* log.

First, locate the type of activity performed in the left hand column of the table below, then multiply the number of minutes you performed the activity by the corresponding number in the right hand column of the table.



**For example:**

If you went dancing for 60 minutes: Or

If you jogged for 30 minutes:

60 minutes dancing x 1.0 = 60 minutes  
Record 60 minutes.

30 minutes x 2.0 = 60 minutes  
Record 60 minutes.

If an activity is not listed in the table below, find the activity that most closely relates to the activity you performed and follow the conversion steps as explained above.

Activity	Time walking*
Bicycling (slower than 10 miles per hour)	1.0
Elliptical trainer	1.0
Stair climbing machine (light to moderate)	1.0
Dancing	1.0
Golf (walking and carrying clubs)	1.0
Walking (13 minutes per mile)	1.4
Stair climbing machine (vigorous)	1.6
Rowing machine (vigorous)	1.6
Aerobic Dance or Step Aerobics	1.6
Swimming (slow freestyle laps)	1.7
Running/jogging (12 minutes per mile)	2.0
Bicycling (10 miles per hour or faster)	2.0
*Based on walking at a pace of 17 minutes per mile	

Adapted from *Eat Smart, Move More, Weigh Less*, N.C. Division of Public Health and N.C. Cooperative Extension



**Serve Up a Healthier You**



*Serve Up a Healthier You*

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[www.ncdhhs.gov](http://www.ncdhhs.gov) • [www.nutritionnc.com](http://www.nutritionnc.com) • <http://childnutrition.ncpublicschools.gov>