2017

Promoting Health Across the Lifespan

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Chapter 1

Getting and Staying Active for Sedentary Young Adults

Getting and Staying Active for Sedentary Young Adults

Kendra Danby, Thomas Oliveira,Trevor Scappatura, Lauren Walsh

HE 3230 Promoting Health Across the Lifespan

Plymouth State University

December 2017

Title:
Goals Setting and Time Management for Increasing Physical Activity

Author:
Thomas Oliveira

Time & Format:
50-minute workshop consisted of brief lectures, individual brainstorming, and collaboration in small and large groups

Audience/Learners:
College Students

Topic Overview:
Participants will be introduced to barriers and tendencies linked to sedentary behaviors, as well as examine those that personally influence their and their peer's behaviors. They will learn the skills necessary to manage time effectively and set personal goals oriented towards physical activity. Time management skills and resources to integrate them into the participant's daily life is a major part of reaching goals and overall increasing physical activity.

Healthy People 2020 Objective(s):
Topic: Physical Activity
-PA-1 Reduce the proportion of adults who engage in no leisure-time physical activity
-PA-2 Increase the proportion of adults who meet current Federal physical activity guidelines for aerobic physical activity and for muscle-strengthening activity
- PA-13.1 Increase the proportion of trips of 1 mile or less made by walking by adults aged 18 years and older

Workshop Goal:
Getting and Staying Active for Sedentary Young Adults

National Health Education Standards addressed:

Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.
1.12.7 Compare and contrast the benefits of and barriers to practicing a variety of healthy behaviors.
Standard 6: Students will demonstrate the ability to use goal-setting skills to enhance health.
6.12.4 Formulate an effective long-term personal health plan.
Standard 8: Students will demonstrate the ability to advocate for personal health.
8.12.2 Demonstrate how to influence and support others to make positive health choices.

Specific Learning Objectives

1. Participants will be able to determine external motivations and deterrents regarding physical activity. (Standard 1.12.7)
2. Participants will be able to identify the impact that social connections can have on their level of physical activity. (standard 8.12.2)
3. Participants will be able to identify the benefits of physical activity and remaining physically active. (Standard 1.12.7)
4. Participants will attain the skills to remain physically active. (Standard 6.12.4)

Background, Key Concepts, & Terminology:

Background:
The daily stresses of college students lives can cause adverse effects on all aspects of health. Goal setting and time management are key skills to be mastered by college student in order to reduce sedentary behaviors and increase physical activity levels. In 2010 college students who reached the federal guidelines for aerobic physical activity was only 48.7 percent. The same year only 37.6 percent of students met the federal guidelines for muscle strengthening activity. The busy lives of those college students are the reason for their lack of physical activity, but any activity is better than none at all so it is very important to reduce sedentary behaviors. After all the federal guidelines for physical activity are very attainable in a short period of time. Some substantial health benefits will be seen if at least 150 minutes a week of moderate intensity, or 75 minutes of vigorous intensity aerobic physical activity are reached, an equivalent combination of moderate and vigorous intensity aerobic physical activity will also reach the guidelines. Muscle strengthening activities at a moderate to vigorous intensity should also be done at least 2 days a week and incorporate all of the major muscle groups. ("2008 Physical Activity Guidelines," 2008).

Luckily it's never too late to begin being physically active, but it's important to know the factors that inhibit sedentary behaviors and reduce physical activity in college student. Common factor can be, but not limited to:

- Perceived Enjoyment- some people see physical activity as traditional running or going to the gym to do a work out, but there are much larger range of physical activities it just takes some time for the individual to realize what they enjoy to do to stay physically active.
- Self-discipline- some students do not have the discipline to get their recommended amounts of activity, and would rather do sedentary activities like watch television or play video games
- Time and convenience- many college students claim to be too busy to fit in Physical activity along with things like work, assignments, class, regular meals, and sleep, but with some time management this could easily be improved
- Social support- some individuals lack the social support to get up and be active, but once they find some type of activity they enjoy to stay physically active the social support will quickly build itself

- Physical environment- some environments themselves are barriers to being physically active. Some activities require equipment or memberships that could be unaffordable for college students. Weather can prohibit physical activity. The safety of the physical environment in which the college or student are located are also a large factor.

Concepts: Steps to Reducing Sedentary Behaviors and Increasing Physical Activity

1. Identify Barriers- The key to stopping sedentary behaviors and promoting physical activity is to identify what the factors or barriers are that are holding the individual back. This is usually either because the individual enjoys the sedentary behavior they participate in, Do not know of any physical activities they personally enjoy, or they claim they do not have time for physical activity.
2. Determine Health Consequences/ Benefits- Once the barriers have been identified it is important to promote the health benefits of regular physical activity. It is also important to mention the consequences of remaining sedentary on a regular basis.

   For more information on the relationship of physical activity and sedentary behaviors and how they are link to academic performance see the Center for Disease Control(CDC) Physical Activity/ Sedentary Behaviors.(CDC 2017).

3. Goals- Every individual has different goals it is important to help that individual find what they are striving for. These goals can be to reduce a sedentary behavior or improve a physical activity. It is important that the goals are specific, measurable, attainable, realistic and time based.

   For more information on writing SMART goals see the Center for Disease Control How to Write SMART Objectives.(CDC 2017)

4. Time Management- Once they have determined what their goals are it's important to teach proper time management to help them stay on track to reach their goals. I find it most useful to have the students make a daily planner by timing out their day. First they should put down all of their required obligations such as work, class, due dates and any others they may have. They should then put in activities of their daily life such as meals, sleep, and any other daily activity they do on a daily basis. This is when they will realize how many blocks of time they have in between those obligations in which they can fit working on assignments, being physically active, as well as still maintaining a desired social life by staying on track and managing their time wisely

Terminology:

1. SMART Goals**:** An acronym used to draft goals that are specific, measurable, attainable, realistic, and time based

2. Sedentary Behavior: activities that require almost no energy expenditure, for example watching television, playing video games, or any other activity requiring almost no energy expenditure
3. Physical Activity: defined as any bodily movement produced by skeletal muscle that require energy expenditure. In this lesson plan more specifically moderate and vigorous intensity activities
4. Time Management: organizing your time efficiently and dividing that time between specific activities to maximize productivity
5. Barriers: a circumstance that prevents something in this case it prevents physical activity
6. Factor: an influence, in this case usually influencing sedentary behaviors

Teaching Steps (timed):

1. Engage Students by collectively brainstorming barriers that decrease regular physical activity in college students (5')
2. Show brief video on that adverse health benefits from regular physical activity(5') Physical Activity Benefits
3. Describe Goal setting and the importance of time management to be able to attain those goals or remain physically active (3')
4. Have students individually list barriers that impede their physical activity or inhibit their sedentary behaviors and apply them to make possible SMART goals that would help them increase physical activity or reduce sedentary behaviors.(10')
5. Asses the Smart goals by making small discussion groups of 3-4 students to evaluate each other's SMART goals as you walk around and observe for participation in the activity and understanding of SMART goals was clearly communicated. (7')
6. Go over time management and how daily planning can benefit them in many ways.(10')
7. Next have the students individually make a week long plan including all obligations and assignments as well as leisure activities they wish to fit into the next week (10')
8. Close with a group review outlining the objectives and assess the overall understanding of the lesson (5')

Assessment Measures:

AM 1: Observe SMART goals and make sure the concepts are properly being used in goal setting and each individual has at least 1 SMART goal.
AM 2: Asses the classes retainment of the objectives and standards with an entire class discussion and ask any necessary question to be clear if an objective or standard was adequately addressed.

Materials:

-SMART Board

Annotated Resource Bibliography:

2008 Physical activity guidelines for americans summary. (n.d.). Retrieved December 12, 2017, from https://health.gov/paguidelines/guidelines/summary.aspx

From this source i received a great deal of background information about physical activity. I also took a good amount of information about physical activity benefits, as well as the health benefits of remaining physically active for a lifetime.

2020 Topics and objectives – objectives A–Z. (n.d.). Retrieved December 04, 2017, from https://www.healthypeople.gov/2020/topics-objectives

This is the healthy people 2020 topics and objectives resource that I used to get my objectives from. All of the objective i chose all fell under the physical activity sub category.

Buckworth, J., & Nigg, C. (2004). Physical activity, exercise, and sedentary behavior in college students. *Journal of american college health*, *53*(1), 28-34. doi:10.3200/JACH.53.1.28-34

This study showed not only the relationship of accessibility to physical activity and reinforcing properties of sedentary activities, but also the gender-related relationships between physical and sedentary behaviors. Both relationships should be considered in any intervention program to reduce sedentary behaviors and increase physical activity.

Centers for disease control and prevention. (2017, April 26). Retrieved December 12, 2017, from https://www.cdc.gov/

From the CDC webpage I gained a large amount of my background information. I also found a lot of great reference sources that are hyperlinked in text for quick access to very good resources pertaining to SMART goals as well as another great reference link about the link between sedentary behaviors and physical activity.

Han, H., Gabriel, K. P., & Kohl, H. W. (2015). Evaluations of validity and reliability of a transtheoretical model for sedentary behavior among college students. *American journal of health behavior, 39*(5), 601-609. doi:10.5993/ajhb.39.5.2

The results may support the idea of motivational readiness stages correlating to appropriate psychological strategies and techniques to improve through the stages to becoming less sedentary. Overall the finding emphasize the Transtheoretical Model's application affective as a framework for future application to reduce sedentary behaviors among college students.

National health education standards. (2016, August 18). Retrieved December 04, 2017, from https://www.cdc.gov/healthyschools/sher/standards/index.htm

This portion of the CDC website is where I pulled all of my National Health Education Standards from as well as assessment measures to be used to asses those standards and whether or not if the students are retaining the standards.

SMART goals. (n.d.). Retrieved December 04, 2017, https://www.projectsmart.co.uk/smart-goals.php

This source has a ton of useful information pertaining to smart goals. I gained a lot of my background information about SMART goals as well as examples of great smart goals

Vidal, N. (2014, October 12). Benefits of regular physical activity. Retrieved December 12, 2017, from https://www.youtube.com/watch?v=C92dVS8NIw4

This was the video i chose as a small piece of background information to address the health benefits of physical activity .

Heart Rate and RPE

Kendra Danby, Thomas Oliveira, Trevor Scappatura, Lauren Walsh.
HE 3230.01
Plymouth State University

December 2017

Title: Heart Rate and RPE

Author: Trevor Scappatura

Time & Format: 2 45-minute sessions. Lecture/Activity

Audience/Learners:
College Students

Topic Overview:
College student will be able to understand the relationship between Heart Rate and RPE. Students will first understand the relationship through a lecture period. Teaching them the basics and importance of knowing RPE and Heart Rate. Next, they will examine RPE through a Physical Activity Attempting to reach every level of their own RPE

Healthy People 2020 Objective(s) alignment:

- Improve health, fitness, and quality of life through daily physical activity.

Workshop Goal:
Student will understand and can apply heart rate and RPE into the everyday life

National Health Education Standards addressed:

- Students will comprehend concepts related to health promotion and disease prevention to enhance health. *(Standard 1*)
    - *1.12.1 Predict how healthy behaviors can affect health status.*

- Students will demonstrate the ability to advocate for personal, family, and community health. *(Standard 8)*
    - *8.12.4 Adapt health messages and communication techniques to a specific target audience.*

- Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks *(Standard 7)*
    - *7.12.1 Analyze the role of individual responsibility for enhancing health.*

Specific Learning Objectives (linked to NHES and assessments):

- Participants will be able to identify physical activities appropriate for all levels of intensity. *(Standards 1,8)*
- Participants will be able to identify their own breathing, heart rate and rate of perceived exertion. *(Standards 1,3,8)*

Key Concepts & Terminology Background for Instructor Reference:

Understanding heart rate and RPE is crucial for anyone attempting to become fit or teach about it. Your heart rate is the number of heartbeats per a certain unit of time. During exercise your heart rate will increase because your body is needing more oxygen. The next thing I want to bring up is your target heart rate. Your target heart rate is the minimum number of heartbeats in each amount

of time to reach the level of exertion necessary for cardiovascular fitness, specific to a person's age, gender, or physical fitness. This will be different for each person. Also, I want to bring up is your maximum heart rate this. This is the max amount of heart beats your body will be able to do in one minute. To calculate this all you do is take 220 and subtract your age.

RPE is a way coaches and athletes self-regulate their training intensity. It is bases on a scale 1-10, 10 meaning maximum effort, 5 Being Challenging, 1 being very easy. This is great tool to understand how one is feeling during exercise. This compares to your heart rate because if your heart rate increases your RPE will increase as well.

RPE TRAINING ZONES

BORG RPE	MODIFIED RPE	BREATHING	TRAINING ZONE	% of MHR	TYPE
6	0	No exertion	1	50% - 60%	Warm-Up
7		Very light			
8	1				
9					
10	2	Notice breathing deeper, but still comfortable. Conversations possible.	2	60% - 70%	Recovery
11					
12	3				
13		Aware of breathing harder; more difficult to hold conversation	3	70% - 80%	Aerobic
14	4				
15	5	Starting to breathe hard & getting uncomfortable	4	80% - 90%	Anaerobic
16	6				
17	7	Deep & forceful breathing, uncomfortable, don't want to talk	5	90% - 100%	VO2 Max
18	8				
19	9	Extremely hard			
20	10	Maximum exertion			

This chart shows the correlation between RPE, Breathing, Training Zone and percent of Maximum heart rate.

- **Heart Rate-** The number of heartbeats per a certain unit of time. Usually Measured in 1 minute. Heart rate is based on the number of contractions of the ventricles in the heart.
- **Rate of Perceived Exertion (RPE)-** is a way coaches and athletes self-regulate their training intensity. It is bases on a scale 1-10, 10 meaning maximum effort, 5 Being Challenging, 1 being very easy.
- **Target heart rate-** is the minimum number of heartbeats in each amount of time to reach the level of exertion necessary for cardiovascular fitness, specific to a person's age, gender, or physical fitness.
- **Training Zone-** Based on your maximum heart rate it shows what level of activity you are training in.

<u>Teaching Steps (timed) Linked to Learning Outcomes:</u>

Engage- Begin the class with small groups of three to brainstorm the relationship of heart rate and Physical Activity 15 Minutes

Describe- Explain RPE, Heart rate and their correlation of to each other and Physical Activity. Through a simple PowerPoint (lecture). Start off lecture explaining what heart rate is, how it connects to fitness. Next explain what RPE is and how it connects to Heart Rate and fitness. Show the chart I provided up top. 25 Minutes

Examine- At the end of the Class hand out a 5-question assessment for the student to take.

- Question 1 What is Heart rate
- Question 2 Why is Heart rate related to exercise.

- Question 3 What is RPE.
- Question 4 What do you feel at maximum RPE
- Question 5 How is RPE and Heart Rate connected.

Do- Each student will partner up. An attempt to reach each level of RPE. Students will do this by (if available) begin walking outside to warm up. Then increase the level of effort to reach each stage of RPE they just learned about. Some Students may have to challenge themselves more by including full sprint's. If you cannot go outside on this day, find some stairs and run up and down the stairs. At each level of RPE Have the student explain to their partner how they are feeling.
Some Examples of exercise to increase your heart rate.
Inside-

- Walk up and down the stairs.
- Run up and down the stairs.
- Jumping jacks
- Burpees

Outside-

- Walking
- Jogging
- Sprinting
- Jog then Sprint
- Frog jumps for a long distance

Analyze- Have Student Reflect on each stage of RPE By telling their partner how they feel. At the end have each student write a reflection on what they achieved in class.
Some questions to answer.
Question 1 What did it take to get your heart rate up?
Question 2 Were you able to reach10 on the RPE Scale, if so how did it feel?
Question 3 If you were un able to reach 9 or 10 what do you think held you back?
Question 4 How did you feel after this activity

Assessment Measures Linked to Activities:

- Students will have a small quiz at the end of lecture.
- Student will reflect on the activity with the questions provided as well as talk to their partner on how they feel during the exercise.

Annotated Resource Bibliography in accurate APA format:

Bjerke W. (2013), Health and Fitness Courses in Higher Education: A Historical Perspective and Contemporary Approach, *The Physical Educator Vol. 70 pp 337-358*

The prevalence of obesity among 18- 24 years old has steadily increased with overweight status exceeding 25% of the population and almost 20% of this age group. Considering most of these young adults are pursuing higher education, it would be a great setting to start implementing health education programs. The implications of this study was to include more programs about health and fitness at higher education levels. 61 college students participated in this 14 week Ape-Cpe curriculum including education, supervised physical activity and the provision of recreational

activities such as sports and guided trail walks. Some sampling techniques included in this study are nonprobability and /or purposive techniques

Cha E, Akazawa M, Kim., Dawkins., Lerner., Guillermo Umpierrez, Sandra B. Dunbar (2015) Lifestyle habits and obesity progression in overweight and obese American young adults: Lessons for promoting cardiometabolic health, *Nurs Health Sci. Author manuscript; available in PMC 2016 December 01.*

Obesity among young adults is a growing problem in the United States. It is related to unhealthy and lifestyle habits, such as high calorie intake and inactivity. About 69.2% of Americans are overweight or obese. Among young adults the rate is increasing. This study was used to provide practical information for researchers and clinical lifestyle interventions for overweight and obese people. The study examined the prevalence of overweight/ obese young adults in each stage of the midfield Edmonton obesity staging system and lifestyle factors that influence obesity progression. A cross sectional, descriptive correlational study design was used. A total of 106 students were recruited from the Metro Atlanta area using recruitment flyers posted in 8 participating colleges and university. The research stated that overweight and obese young adults can promote their cardiometabolic health with health lifestyles. To take action, young adults need practical strategical dietary advice about beverage choices, diet quality, macronutrient and micronutrient sources.

Leen, M. (1970, January 01). The Borg Rating of Perceived Exertion (RPE). Retrieved December 13, 2017, from http://michaelsleen.blogspot.com/2009/01/borg-rating-of-perceived-exertion-rpe.html This is the Photo URl.

Woekel E, Ebbeck Vick, Concepcion R., Readdy T, Li, Hyo Lee, Cardinal. ,(2013.) Physical Activity, Nutrition, and Self-Perception Changes Related to a University "Lifetime Fitness for Health" Curriculum, *The Physical Educator Vol. 70 pp 374-394*

The purpose of this study was to determine whether participating in a lifetime fitness curriculum in college had short or long term benefits. The benefits were Regarding physical activity and nutritional behaviors and self-concept. This study took place at universities and included 20 undergraduate students 15 females 5 males. The students Primarily freshmen and sophomores learning how to adjust. The method used was setting. The study was approved by the institutional review board of the university where the data was collected. After this study the students who participated gained knowledge and confidence in areas of physical activity such as physical health and nutritional behaviors.

Ancillary Materials, Resources, Preparation steps:

PowerPoint on Hear Rate RPE
Notebooks for students
RPE and heart rate

Grading Rubric for Workshop Lesson Plan
Based on 100 points – 40% of total course grad

Element	Target	Minimally adequate	Inadequate
Information Framework Title, Author Time & Format: Audience/Learners Topic Overview & Healthy People 2020 Objectives 10	*All elements clearly included. Catchy title, topic is identified with accurate, brief description of the problem using at least one HP2020 objective. 9-10*	*Most elements included. Topic stated with minimal description of the problem, HP2020 objective not cited 7-8.5*	*Several missing or inaccurate elements. No description of the problem or HP2020 objective cited. 6-0*
NHES, Specific Learning Objectives & Assessment Measures 20	*NHES standards identified; #1 plus 2-3 others with direct link into at least 3 LOs, lesson activities and 3 AMs. 17-20*	*NHES standards noted (only 1-2) inferred link with LOs and activities. Fewer than three each. 13-16*	*NHES not included; LOs and /or AMs not clearly aligned with activities or AMs. Weak in connection and number. 12-0*
Key Concepts and Terminology 25	*Concepts and terms accurately and adequately defined as appropriate for scope of the lesson and audience. Adequate to inform future instructors 22-25*	*Concepts and terms generally correct, lacking evidence based resources. Some inadequacy in definitions, use or of concepts. 17-21*	*Concepts and terms minimally identified, or inaccurate. Little to no evidence of valid resources. 17-0*
Teaching/Facilitation Steps 20	*Activities clearly outlined, linked to concepts and timed. Varied learning methods/ activities applied. At least 4 segments identified*	*Activities outlined, some linkage to concepts identified. Minimal variety of methods applied. Timing unclear. 2-3 segments only.*	*Activities listed with little to no link to concepts. Lack of variety of methods, no timing. No segments identified*
Annotated Bibliography & Appendix 15	*APA format is correct and brief annotation is a descriptive and evaluative paragraph; informing the reader of the relevance, accuracy, and quality of the sources cited. At least 3evidence based/credible sources used. 13-15*	*APA format mostly correct (only punctuation errors). Minimal annotation with some description and evaluation. 1-2 evidence based resources*. 10-13	*Significant errors in APA format, lacking in descriptive or evaluative information. 0-1 evidence based resources. 10-0*
CC License 5	*CC License secured and posted on document*	*No CC license*	*No CC license*
Overall organization and professionalism 5	*Quality writing free of vocabulary, spelling, grammar, punctuation and syntax errors. Cohesive thoughts and well organized. 5*	*Some distracting errors in vocabulary, spelling, grammar, punctuation and syntax. Minimal cohesion and organization of thought 4-2*	*Distracting errors in vocabulary, spelling, grammar, punctuation and syntax. Lacking cohesion and organization of thought. 1-0*
Total / 100			

Getting Active and Staying Active for Sedentary Young Adults

Kendra Danby, Thomas Oliveria, Trevor Scappatura, Lauren Walsh
Course # HE 3230.01
Plymouth State University
December, 2017

Title: Running for a Better Mood

Author: Lauren Walsh

Time & Format: 1 hour and 45 minutes

Audience/Learners: Young Adults/ College Students

Healthy People 2020 Objectives:
PA-1: Reduce the proportion of adults who engage in no leisure-time physical activity.

PA-2: Increase the proportion of adults who meet current Federal physical activity guidelines for aerobic physical activity and for muscle-strengthening activity.

-PA-2.1: Increase the proportion of adults who engage in aerobic physical activity of at least moderate intensity for at least 150minutes/week, or 75 minutes/week of vigorous intensity,
or an equivalent combination.

Topic Overview:
Participants will experience and practice improving their moods through running. There will be a short discussion on how running increases an individual's mood beforehand. Students will be shown proper running techniques for a long distance run. This workshop will include questionnaires both before and after the run to see how each individual's mood changed.

Workshop Goal: Increase young adolescent's moods by partaking in a fifteen-minute run.

National Health Education Standards addressed:
Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health

-1.12.1 Predict how healthy behaviors can affect health status

Standard 5: Students will demonstrate the ability to use decision-making skills to enhance health.

-5.12.7 Evaluate the effectiveness of health-related decisions

Standard 7: Students will demonstrate the ability to practice health- enhancing behaviors and avoid or reduce health risks

-7.5.1 Identify responsible personal health behaviors.

Specific Learning Objectives:

1.Participants will be able to identify benefits of physical activity and remaining physically active (1.12.1)

2.Participants will be able to discuss why physical activity is important in terms of mood and how this happens. (5.12.7)

3. Participants will be able to reflect on the experience of running, and brainstorm other activities that would increase their mood. (7.5.1)

Key Concepts & Terminology for Instructor Reference:

Young Adults are required to participate in 2 hours and 30 minutes (150 minutes) of moderate-intensity aerobic activity or 1 hour and 15 minutes (75 minutes) of vigorous-intensity aerobic activity every week. Aerobic activity can be demonstrated in at least ten minutes at a time, as long as it is categorized as moderate or vigorous intensity. (US Department of Health and Human Services, 2015)

Activities that require moderate intensity:

- Walking fast
- Water aerobics
- Riding a bike on ground level with few hills
- Doubles Tennis
- Pushing a lawn Mower

Activities that require vigorous intensity:

- Jogging or running
- Swimming laps
- Riding a bike fast or on hills
- Singles tennis
- Playing basketball

Running has been found to be significantly correlated with a decrease in tension and anxiety. Physical activity (running) has been described as an emotion-focused coping strategy that provides distraction from daily stressors. Other factors that are decreased with physical activity are depression, fatigue, confusion and anger/hostility. All these factors lead to an increased mood state.
(Goode, K. T., Roth, D. L., 1993)

When running or partaking in any physical activity that is moderate-vigorous intensity endorphins are released. Many people know this as ‘runners high’, the feeling of euphoria. These chemicals are released during exercise blocking out the perception of pain, hence why individuals feel so happy or stress free post running.
(Colombia Electronic Encyclopedia, 6th Edition, 2017)

-Moderate-intensity aerobic activity: When an individual is working hard enough to raise their heart rate and break a sweat, while being able to talk.
-Vigorous-intensity aerobic activity: When an individual is breathing hard and fast, and the heart rate is very high. A person at this level will find it difficult to say a few words without pausing for a breath.
-Running: A type of physical activity that helps improve moods, and bring out happiness along with other medical concepts. Running can raise good cholesterol, increase lung function and use, boost your immune system and lower your risk of developing blood clots.
-Aerobic Activity: or “cardio” gets a person’s heart beating faster. This can be anything from pushing a lawn mower, to taking dance class.
-**Mood:** The broad overview for how a person is feeling on a certain day. When somebody is in a good mood, tension and stress is released. Also, showing a state of happiness decreases stress hormones, and increases immune cells and infection-fighting bodies.
-Endorphins: Brain chemicals that are released when an individual is active. These neurotransmitters block out the perception to pain, and increase individual’s moods.
-Mood States Questionaire:

Teaching Steps (timed) Linked to Learning Outcomes:

1.) Grab Attention, Motivate:

a. Introduction- Have everybody in the group introduce their names. Engage them by asking what they would like to get out of the lesson.
b. Share my past experiences with cross country in high school as well as soccer and practice exercises. Explain the benefits of running and how it actively helped myself.
c. Discuss proper running form with the class:
   - 90 degree angled arms
   - Run more on the heels of feet, rather than toes
   - Keep shoulders rotated backwards, chest held high

2.) Do

A) Warm Up-Involve the group in a series of pre-run exercises

I. Jumping jacks (25x)
II. Walking High leg kicks (10 each leg)
III. Leg Swings (25 sec)
IV. Walk/Jog (5 minutes)

B) Start with stretching, lead in a series of different stretches.

I. Neck rotations (30 Sec)
II. Hip rotations (30 Sec)
III. Side Arm Raises (30 Sec)
IV. Over chest triceps (20 Sec each side)

(Leave time for participants to get a drink of water)

C) Begin 15-minute Run- Stand on side of track, critique posture and form.

I. Students may choose to walk if feeling fatigue.

D) As fatigue starts slow down the group in preparation for the long run.

I. Give motivation to keep going
II. Remind group to run by landing on their heels for long distance.

E) For the last 30 seconds tell them to run as fast as they can

F) Cool Down

I. Walk two laps around the track
II. Repeat original stretches/ Have them make own
III. Let participants get water

3.) Create and Integrate

a) Put participants into groups of two to discuss:

I. the mood change that they encountered after the run in terms of mood change.
II. Other activates that will increase their mood.
III. Why physical activity is important in terms of mood and how this happens.

b.) Share information to the entire group.

4.) Examine and Analysis- see how they can fix weaknesses

A. What weaknesses that were found throughout the exercise?
B. Will this make you want to run more?
C. What were you thinking about while running?
D. How did this activity make you feel in the beginning compared to the end?

5.) Ask and Discuss- have students fill out mood state questionnaire

Closure

1. Thank you all for participating in this activity. I hope you were all able to walk away with a newfound appreciation for running and an improved outlook to your day.
2. If there are any questions please come and talk to me, once again thank you.

Assessment Measures Linked to Activities:

Mood Self Assessment Tool
http://www.topendsports.com/psychology/poms.htm

-Before 15min Run
-After 15min Run

Materials, Resources, Preparation:

-Timer
-Track to run on
-Shoes to run in
-Proper workout attire
-Water Bottle

Annotated Resource Bibliography in accurate APA format:

Goode, K. T., & Roth, D. L. (1993). Factor analysis of cognitions during running: Association with mood change. *Journal Of Sport & Exercise Psychology*, *15*(4), 375-389.

-Provides evidence and a statement about moods before running and after. Also, the article provides proof that negative effects felt before running drop after exercising.

N.A (2017). *Endorphins,* Received from Colombia Electronic Encyclopedia, 6th Edition.

-Provides information about Endorphins and what they do to an individual

Pelletier, L., Shanmugasegaram, S., Patten, S. B., & Demers, A. (2017). Self-management of mood and/or anxiety disorders through physical activity/exercise. *Maladies Chroniques Et Blessures Au Canada*, *37*(5), 149-159. doi:10.24095/hpcdp.37.5.03

-Provides information about how an improved mood can help with mental illnesses.

US Department of Health and Human Services. (2015). *How much physical activity do adults need.* Retrieved from https://www.cdc.gov/physicalactivity/basics/adults/index.htm
-Provides the amount of time a young adult should exercise a week, along with different examples of each

Wood, R. J. (2017). *Profile of Mood States (POMS) Questionnaire.* Retrieved from http://www.topendsports.com/psychology/poms.htm
-access to the mood assessment distributed both before and after the run.

Appendix:

PROFILE OF MOOD STATES QUESTIONNAIRE

Here is another version of the POMS questionnaire, very similar to the original. This is a 40 question modified form.

Below is a list of words that describe feelings people have. Please **CIRCLE THE NUMBER THAT BEST DESCRIBES HOW YOU FEEL RIGHT NOW**.

	Not at all	A little	Moderately	Quite a lot	Extremely
Tense	0	1	2	3	4
Angry	0	1	2	3	4
Worn out	0	1	2	3	4
Unhappy	0	1	2	3	4

Proud	0	1	2	3	4
Lively	0	1	2	3	4
Confused	0	1	2	3	4
Sad	0	1	2	3	4
Active	0	1	2	3	4
On-edge	0	1	2	3	4
Grouchy	0	1	2	3	4
Ashamed	0	1	2	3	4
Energetic	0	1	2	3	4
Hopeless	0	1	2	3	4
Uneasy	0	1	2	3	4
Restless	0	1	2	3	4
Unable to concentrate	0	1	2	3	4

Fatigued	0	1	2	3	4
Competent	0	1	2	3	4
Annoyed	0	1	2	3	4
Discouraged	0	1	2	3	4
Resentful	0	1	2	3	4
Nervous	0	1	2	3	4
Miserable	0	1	2	3	4
Confident	0	1	2	3	4
Bitter	0	1	2	3	4
Exhausted	0	1	2	3	4
Anxious	0	1	2	3	4
Helpless	0	1	2	3	4
Weary	0	1	2	3	4

Satisfied	0	1	2	3	4
Bewildered	0	1	2	3	4
Furious	0	1	2	3	4
Full of pep	0	1	2	3	4
Worthless	0	1	2	3	4
Forgetful	0	1	2	3	4
Vigorous	0	1	2	3	4
Uncertain about things	0	1	2	3	4
Bushed	0	1	2	3	4
Embarrassed	0	1	2	3	4

Social Connections and Physical Activity

Kendra Danby

Promoting Health Across the Lifespan-HE 3230.01

Plymouth State University

December 2017

Time & format: 1 day- 1 hour and 40 mins

Audience & learners: young adults (age 18-25)/ college students

Overview: Participants will experience what it is like to engage in physical activity with the support of other individuals. They will explore the impacts of social interaction by participating in a circuit exercise with a group oriented atmosphere. Participants will aim to support their group members throughout the exercise, and strategies for incorporating support for their teammates will be woven throughout the activity.

Healthy People 2020 Objective(s) alignment:

Physical activity- PA-1-Reduce the proportion of adults who engage in no leisure-time physical activity

Workshop Goal: Promote getting and staying active for sedentary young adults

National Health and Education Standards being addressed in this lesson:

Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.

1.5.3-Describe ways in which safe and healthy school and community environments can promote personal health.

Standard 2: Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.

2.12.3-Analyze how peers influence healthy and unhealthy behaviors.

Standard 8: Students will demonstrate the ability to advocate for personal, family, and community health.

8.12.1-Utilize accurate peer and societal norms to formulate a health-enhancing message.

8.12.2-Demonstrate how to influence and support others to make positive health choices.

Learning Objectives:

1. By the end of this workshop, participants will identify external motivations and deterrents regarding physical activity.
2. By the end of this workshop, participants will determine the impact that social connections can have on their desire to be physically active.
3. By the end of the workshop, participants will demonstrate social support regarding physical activity.

Materials & preparation:

White board and white board safe markers

Dumbbells

Yoga mats

Foam blocks

Tennis ball

Timer/ stop watches

Volunteers

Paper and pencils

Background:

Social support is one of the most important key aspects of physical activity. Many people need the support of family and friends to motivate them to be physically active. Having a partner to exercise with can have a major influence on one's drive and can make the experience of participating in physical activity a more positive one. Social support is classified as an extrinsic motivator, meaning it derives from the external environment. The other form of motivation is internal, meaning it comes from within. People with a lot of internal motivation may not need as much social support, but everyone benefits from surrounding themselves with people with similar physical activity goals. Being surrounded by people who do not have a desire to be physically active can be a major deterrent for physical activity. Overall, extrinsic motivations increase a person's ability to be more intrinsically motivated, due to the way a positive external environment makes a person feel internally. (Kimiecik, 2005).

Participating in group exercise can provide people with more confidence in themselves, supporting their ability to form relationships. Group exercise classes (such as dance), aid people in their ability to form connections and may help them feel more comfortable in their environment and community. Group exercise has been found to have an immediate impact on one's internal wellbeing because it provides a feeling of reward. As well as having a positive impact on a person internally, their external environment is impacted, due to the social connections and support that can be generated from this type of activity. (Gardner, Komesarof & Fensham, 2008)

External factors are proven to be the main motivator for physical activity over internal factors. Many people struggle with the internal motivation to engage in physical activity and need motivation that derives from their social circle. It has been found that both men and women are externally motivated. Women are often motivated to exercise because of the social norms that they are supposed to fit, which displays the way in which social motivations may be negative. Men, on the other hand, look to others in their social circle to praise them and boost their ego. Regardless of the way in which people are motivated by their social connections, whether it be good or bad, it can be concluded that the people that one surrounds themselves with have a tremendous impact on their desire to be active, and their reasons for making a lifestyle change. (Pauline, 2013)

Terminology:

Social Support- The different types of support a person receives from others.

Motivation- the drive a person has, to participate in activities or the reasons behind a person's decisions. When applied to physical activity, motivation can come from either within, or from outside sources, and is what pushes a person to be physically active.

> Intrinsic- Intrinsic motivation is internal. In other words, the motivation to behave a certain way comes from within the person, because the behavior is rewarding to them and makes them feel good internally.
>
> Extrinsic- Extrinsic motivation is external. It refers to behavior that derives from outside sources such as: social connections (praise from others). Extrinsic motivation requires a sense of reward from a person's external environment.

Deterrents- something that discourages or decreases the desire a person has to do something.

Teaching Steps:

1. Engage **(15 mins)**
    a. Introduce the lesson and have each participant identify a factor that motivated them to attend the workshop to become more physically active. Divide the white board into two columns and write each reason in the first column as they are given.
    b. Ask participants to list factors that have deterred them from participating in physical activity in the past. Write each factor in the second column as they are listed.
    c. Go through the list in each column and ask participants to identify if each factor listed is either internal or external.
    d. Note that social support is often an important external factor in our decision to be physically active. People often are more motivated to be active when they surround themselves with people with similar fitness goals.
    e. Tell participants to be mindful of how they are being effected by social support during the group activity.
2. Describe **(20 mins)**
    a. Explain the activity that participants will be applying. Note that they will flow through a circuit of exercises that work various parts of the body in different ways.
    b. Explain and demonstrate each station
        i. Station 1: dumbbells- participants will perform tri-cep extensions and bi-cep curls. No specific amount is required, but participants will aim for 3 sets of 8 reps (demonstrate each).
        ii. Station 2: yoga mats- participants will lie on their backs with their legs straight up in the air. They will then lower their legs, while keeping their backs flat on the ground, and raise them up again. This will work their core and abs. Participants will be asked to aim for 2 sets of 8 reps of this activity. (demonstrate).
        iii. Station 3: foam blocks- Participants will step up and down on the blocks as quickly as they can for a 1 minute period. After one minute, group

members will switch. It is the group's job to time the member at work with the stop watch provided (demonstrate).

iv. Station 4: group activity- Participants will sit in a circle with one person holding the tennis ball. The person with the ball will say their name, the reason they are attending the workshop, and one interesting fact about them. They will then toss the ball to someone else in the group who will then follow the same steps. Once everyone has had the tennis ball, the activity is complete.

c. Ask participants to get into 4 groups and explain that while part of the group undergo the activity, the others will be encouraging them and cheering them on. It is each partners job to make their group members feel comfortable and to assist them in any problems that they may run into.
d. Demonstrate and explain ways in which groups can help other members feel comfortable and more motivated.
    i. Demonstrate the exercise if a member of the group needs clarification
    ii. Point out exercises they are good at instead of focusing on their flaws.
    iii. Count out loud and encourage participants to go a little further for each set.
    iv. Give praise to each group member upon completion of the circuit. This could be a high five, pat on the back, good job, or anything you feel would be a positive gesture.

3. Do **(30 mins)**
   a. Lay the dumbbells (4), yoga mats (4), and foam blocks around the room (4), making sure there is about 10 feet in between each group of equipment. A tennis ball should be placed at the 4^{th} station, which will require no specialized equipment.
   b. Have volunteers at each station to show participants how each exercise works and to aid them with any questions they may come across to ensure that the exercise flows smoothly. (5 mins)
   c. Assign each group to one of the 4 stations and tell them that they have 5 minutes to explore each station and exercise.
   d. Set the timer for 20 minutes and yell "switch" at each 5 minute mark.
   e. While the circuit is going on, circle the room, stopping at each station to encourage and give positive feedback to participants.
   f. Encourage participants to cheer their group members on throughout each exercise. (20 mins)
   g. After the circuit is complete, give the participants a short break to get water, and have them report back to their groups when they are finished. (5 mins)

4. Examine/ Analyze **(5 mins)**
   a. Have each group discuss how they felt during the activity and how their group members helped to motivate them to work harder/ finish each activity.

5. Apply/Create/Integrate **(10 mins)**
   a. Have all groups come together and ask them to share their group discussions with the class.

b. Ask participants to come up to the white board and write their biggest take-aways from the circuit regarding social impacts.
c. Briefly discuss these take-aways and talk about how participants can apply social interactions to their physical activity routine, and what group exercises are available to them.

6. Assess **(15 mins)**

a. Hand out paper and pencils and ask participants to write down one way in which they will use social factors to encourage them to be more physically active in the future.
b. On the same paper, ask participants to list at least one person in their life who they feel could be a support system for them regarding physical activity and the name of one person from the workshop who they feel helped motivate them to complete the circuit.
c. Finally, ask participants to write one interesting thing that they have learned about themselves and someone else in their group during the workshop.
d. Collect each slip of paper to review after the workshop, to better understand the impact and takeaways from the lesson.
e. Close the assessment by asking participants to raise their hand if they found it beneficial to have the social support of others while exercising.

7. Close **(5 mins)**

a. Thank everyone for participating in the session and wish them good luck on reaching their physical activity goals.

Annotated Bibliography

Gardner, S. M., Komesaroff, P., & Fensham, R. (2008). Dancing beyond exercise: young people's experiences in dance classes. *Journal Of Youth Studies*, *11*(6), 701-709. doi:10.1080/13676260802393294

The authors, researchers at the School of Communication and Creative Arts, Deakin University and Centre of Ethics in Medicine and Society, Monash University, use data collected from young adults who participate in recreational dance classes to analyze and determine the motivations of these students and their reasons for choosing dance as their preferred form of physical activity. The authors identify the benefit dance could have on health promotion strategy and raise awareness of social and community values the students acquire from participating in this form of recreational activity.

Kimiecik, J. (2005). Phat Exercise: How Young Adults Enjoy and Sustain Physical Activity. *JOPERD: The Journal Of Physical Education, Recreation & Dance*, *76*(8), 19-30.

The author, a researcher for the Department of Kinesiology and Health at Miami University, uses data collected from college campuses to evaluate physical activity levels among college students and young adults. The author connects the young adult's desire to exercise to four intrinsic factors: vision, mastery, flow, and inergy. Kimiecik proves his hypothesis that college students are most influenced by these intrinsic factors by explaining why each is essential in one's decision and thought process regarding physical activity and by showing connections between each factor.

Pauline, J. S. (2013). Physical Activity Behaviors, Motivation, and Self-Efficacy Among College Students. College Student Journal, 47(1), 64-74.

The author, researcher at Syracuse University demonstrates a study that acquires basic physical behaviors, motivation factors, and self- efficacy levels to help with physical activity programs and interventions for young adults. Pauline conducted a questionnaire which was distributed to eight hundred and seventy-one undergraduate students that assess their physical activity behavior, motivation and their self-efficacy. From this questionnaire, data suggested physical activity promotion and practitioners need to consider gender when developing interventions from college students.

Chapter 2

Physical Activity in Older Adults

Importance of Strength Training for Older Adults

Justin Jannini
Plymouth State University

Title

Strength Training for Older Adults

Author

Justin Jannini

Time & Format

75 minutes workshop in a physical activity teaching space

Audience/Learners

Ages 65+

Topic Overview

This workshop will introduce older adults to the importance of strength training and how to incorporate into daily living. Specific exercises will be demonstrated and practiced for use at home.

Healthy People 2020 Objective(s)

PA2 Increase the proportion of adults who meet current Federal physical activity guidelines for aerobic physical activity and for muscle-strengthening activity

PA-2.3 Increase the proportion of adults who perform muscle-strengthening activities on 2 or more days of the week

Workshop Goal

Increase self efficacy in older adults for exercise and physical activity

National Health Education Standards addressed

Standard 1- Learners will comprehend concepts related to health promotion and disease prevention to enhance health.

- PI: 1.12.5 Propose ways to prevent injuries and health problems

Standard 7- Learners will demonstrate the ability to practice health enhancing behaviors and avoid or reduce health risks.

- PI:7.12.2 Demonstrate a variety of healthy practices and behaviors that will maintain or improve the health of self and others.

Specific Learning Objectives: By the end of this session, learners will be able to:

1. Describe 3 benefits of maintaining strength across life. (NEHS 1, AM 1)
2. Perform safely 3 home exercises to maintain or improve strength (NHES 7, AM 2)

3. Describe one resource for finding more exercises to use at home (NHES 1, AM 1)

Background, Key Concepts & Terminology:

Strength training is essential for maintaining and improving one's body and helps with completing everyday tasks. It can also help prevent diseases such as heart disease and diabetes and can help reduce risks of things such as arthritis and osteoporosis. Often people especially older adults do not recognize the importance of strength training so teaching them the benefits along with exercises will put them in right direction. By having older adults follow a strength training routine it will help them to stay more independent longer.

By doing small muscle building exercises older adults will be able to do things such as pick up their grandkids, get out of chair, carry groceries, get up from a fall, etc. All those activities are normal everyday tasks that they should be prepared to tackle. Strength training is also great for staying in shape by burning calories and increasing metabolism. What's great about strength training is that you can start from anywhere it doesn't matter if you can only use 1-2 lbs dumbbells or even just body weight, as long as you are progressing over time you are improving and getting stronger.

Basic Concepts:

- Why strength training is important.
- How much training they need to be most effective for themselves and their fitness level.
- Strength training exercises that they can do at their home.

Strength training- a type of physical exercise specializing in the use of resistance to induce muscular contraction which builds up strength,anaerobic endurance and size of skeletal muscles. *Training routine*-actions in which you follow regularly to reach your goals. *Resistance*- a form of exercise that forces your skeletal muscles to contract. An external resistance is used to cause the contractions, and those contractions lead to increases in muscular mass, strength, endurance and tone.

Teaching Steps (timed):

[Engage, Describe, Do, Examine, Analyze, Apply/Create/Integrate, **Assess**, Close]

Engage and motivate

- Learners will share names and share what they hope to get from the workshop (5 mins)

Do

- Pass out and review information sheet which will include information about the importance of strength training and its benefits with resources (National Institute of Aging, CDC) Exercises for use at home will be included along with the recommended guidelines for how much strength training to do a week. (5 min)
    - Each person will have a chair, a set of hand held weights and an exercise band. Partners will work together.

- Instructor will demonstrate each exercise and describe the key elements and safety factors for performance.. Each person will do adequate repetitions to show that they can effectively execute the motion to fatigue.
- Exercises to demonstrate and perform:
    1. Chair Dip Arms behind shoulders, press to straighten arms lifting body weight off the chair. Slowly lower back to sitting.
    2. chair stand,
    3. wall push up,
    4. side leg raise
    5. arm curl.
- The groups of two will switch off aiding each other along with the helpers correcting from and for assistance in general. (30 min)
- Have a resting and water break. (5 min)
- Instructor check off of each person doing exercises safely. [P/NP checklist]
- *Assess*
- Administer the mini quiz. For each team that answers a question correctly, they get one door prize ticket. The quiz is followed by a door prize drawing.
    - Questions: What are 3 benefits of strength training? What are 3 exercises that i can do at home to improve my strength? How many days and for how long should you work out for a week? Go over answers when all learners. Finish. (15 min)

Close

- Allow learners to ask questions on what they did tonight and any other questions they may have.

Assessment Measures:

1. Quiz on concepts (LO 1& 3)
2. Instructor performance check off (LO 2

Materials, Resources, Preparation

- Handouts with useful websites, benefits and recommendations of strength training.
- A computer and smartboard for the powerpoint.
- Around 4-6 helpers to aid learners during exercises and move desks.
- Chairs and desks for all the learners.
- Water to drink.
- Cell phone incase of emergency.

Annotated Resource Bibliography

ACSM | ACSM Journals. (n.d.). Retrieved December 16, 2017, from http://www.acsm.org/public-information/acsm-journals

This is a public website with scholarly journals that provide information about health and health guidelines. Also has information on medicine and provides more resources for further information.

How much physical activity do older adults need? (2015, June 04). Retrieved December 16, 2017, from https://www.cdc.gov/physicalactivity/basics/older_adults/index.htm

This resource is a science-based government website providing information on all aspects of physical activity for older adults. The physical activity guidelines for older adult are spelled out.

Strength, Improve your Strength Retrieved December 22, 2017, from https://go4life.nia.nih.gov/exercises/strength

This resource is a science based government website providing information strength training for older adults and gives examples of exercises for people to do.

Let’s Flex

Lillian O’Connor
Promoting Health Across the Lifespan
Plymouth State University

Title: Let's Flex

Author: Lily O'Connor

Time & Format: 75 min Workshop, All Well North, Plymouth NH

Audience/Learners: Older Adults (65+)

Topic Overview: Increasing awareness on flexibility

Workshop Goal: Increase self-efficacy in older adults during physical activity

Health People Goals 2020:
Physical Activity Objectives;
PA objective 1: Reduce the proportions of adults who in engage in no leisure-time activity

PA objective 2: Increase the proportion of adults who meet current Federal physical activity guidelines for aerobic physical activity and for muscle-strengthening activity

National Health Education Standards addressed:
Standard 1: Comprehend Concepts
Performance Indicators 1.12.5 Propose ways to reduce or prevent injuries and health problems.
Standard 7: Practice health-enhancing behaviors and avoid or reduce health risks
Performance Indicators 7.12.2 Demonstrate a variety of healthy practices and behaviors that will maintain or improve the health of self and others.

Specific Learning Objectives (linked to NHES and assessments):
By the end of the workshop, participants will be able to:
1. Define flexibility
2. Demonstrate 3 simple flexibility exercises

Background, Key Concepts, & Terminology:

"Flexibility is needed to perform everyday activities with relative ease. To get out of bed, lift children, or sweep the floor, we need flexibility. Flexibility tends to deteriorate with age, often due to a sedentary lifestyle. Without adequate flexibility, daily activities become more difficult to perform. Over time, we create body movements and posture habits that can lead to reduced mobility of joints and compromised body positions. Staying active and stretching regularly help prevent this loss of mobility, which ensures independence as we age. Being flexible significantly reduces the chance of experiencing occasional and chronic back pain."
(from https://www.htstherapy.com/benefits-stretching-older-adults/)

Stretching is an important for aging adults, flexibility will help offset the effects of normal decline in the flexibility of your joints, and help you remain active and independent.
Aging can affect the structure of your bones and muscles, causing pain and decreased range of motion in joints. Flexibility, or stretching, exercises give you more freedom of movement for your physical activities and for everyday activities such as getting dressed and reaching objects on a shelf. Stretching exercises can improve your flexibility, but they will not improve your strength or endurance. (https://go4life.nia.nih.gov/exercises/flexibility)

Ankle: This exercise stretches your ankle muscles. You can stretch both ankles at once or one at a time.

1. Sit securely toward the edge of a sturdy, armless chair.
2. Stretch your legs out in front of you.
3. With your heels on the floor, bend your ankles to point toes toward you.
4. Hold the position for 10-30 seconds.
5. Bend ankles to point toes away from you and hold for 10-30 seconds.
6. Repeat at least 3-5 times.

Upper back: This exercise increases the flexibility of your arms, chest, and shoulders, and will help you reach items on the upper shelves of your closet or kitchen cabinet.

1. Stand facing a wall slightly farther than arm's length from the wall, feet shoulder-width apart.
2. Lean your body forward and put your palms flat against the wall at shoulder height and shoulder-width apart.
3. Keeping your back straight, slowly walk your hands up the wall until your arms are above your head.
4. Hold your arms overhead for about 10-30 seconds.
5. Slowly walk your hands back down.
6. Repeat at least 3-5 times.

Calf: Because many people have tight calf muscles, it's important to stretch them.

1. Stand facing a wall slightly farther than arm's length from the wall, feet shoulder-width apart.
2. Put your palms flat against the wall at shoulder height and shoulder-width apart.
3. Step forward with right leg and bend right knee. Keeping both feet flat on the floor, bend left knee slightly until you feel a stretch in your left calf muscle. It shouldn't feel uncomfortable. If you don't feel a stretch, bend your right knee until you do.
4. Hold position for 10-30 seconds, and then return to starting position.
5. Repeat with left leg.
6. Continue alternating legs for at least 3-5 times on each leg.

Neck: This easy stretch can help relieve tension in your neck. Try to stretch after strength training and during any activity that makes you feel stiff, such as sitting at a desk.

1. You can do this stretch while standing or sitting in a sturdy chair.
2. Keep your feet flat on the floor, shoulder-width apart.
3. Slowly turn your head to the right until you feel a slight stretch. Be careful not to tip or tilt your head forward or backward, but hold it in a comfortable position.
4. Hold the position for 10-30 seconds.
5. Turn your head to the left and hold the position for 10-30 seconds.
6. Repeat at least 3-5 times.

Shoulder Exercise: This exercise to stretch your shoulder muscles will help improve your posture.

1. Stand back against a wall, feet shoulder-width apart and arms at shoulder height.
2. Bend your elbows so your fingertips point toward the ceiling and touch the wall behind you. Stop when you feel a stretch or slight discomfort, and stop immediately if you feel sharp pain.
3. Hold position for 10-30 seconds.
4. Let your arms slowly roll forward, remaining bent at the elbows, to point toward the floor and touch the wall again, if possible. Stop when you feel a stretch or slight discomfort.

5. Hold position for 10-30 seconds.

6. Alternate pointing above head, then toward hips.

7. Repeat at least 3-5 times.

(https://go4life.nia.nih.gov/exercises/flexibility **)**

Stretch: straighten or extend one's body or a part of one's body to its full length, typically to tighten one's muscles or to reach something.

Range of motion (ROM): The full movement potential of a joint, usually its range of flexion and extension.
Flexibility or limberness: refers to the range of movement in a joint or series of joints, and length in muscles that cross the joints to induce a bending movement or motion. Flexibility varies between individuals, particularly in terms of differences in muscle length of multi-joint muscles. Flexibility in some joints can be increased to a certain degree by exercise, with stretching a common exercise component to maintain or improve flexibility.

Teaching Steps (timed):
[Engage, Describe, Do, Examine, Analyze, Apply/Create/Integrate, Assess, Close]

Engage: Get the participants into small groups within the classroom, have them discus the level of flexibility they believe they are at. Have one person from each group share what they discussed. (5 minutes)
Describe: Pass out a sheet of paper, and ask participants to write down what flexibility means to them. Now also pass out behavioral contract for Facebook posting. Choose one person from each group to share with the class, their thoughts. Then, describe the importance of flexibility and the advantages of gaining flexibility. Show the https://www.nia.nih.gov/health/exercise-physical-activity website, and show the participants how at home they can receive free materials and online videos and classes for flexibility (20 minutes)
Do: Let the groups rediscuss flexibility, Pick 5 people to re-describe what flexibility means. Pick 3 exercises that you want to demonstrate to the class. (based off website). Have participants stretch what they feel needs to be stretched before beginning. Have the class spread out and begin teaching the participants the exercises. While doing the exercises, make sure you walk around spotting all participants. (20 min)
Examine: After demonstrating all the exercises have participants pair off and practice the exercises. At this time walk group to group and help participants if needed.(15 min)
Analyze/apply: Have participants take pictures of each other during the practicing of their exercise. During this time, explain the #letsflex, and example that they must post a picture to Facebook to prove they can complete the exercise. (10 mins)
Assess: Bring participants back together. Give them handouts on the simple flexibility exercises to take home with them. (2 minutes)
Close: Have participants explain which stretches they enjoyed the most and which 2 they can add into their daily lives (5 minutes)

Assessment Measures:

AM 1: Have paired partner groups, demonstrate 3 exercises to the class (LO4)

AM 2: Show evidence of exercises by posting a post to Facebook using #letsflex

Materials, Resources, Preparation:

Cameras, pieces of paper, water, large open space, chairs, projector, computer

Annotated Resource Bibliography:

Holland, G., Tanaka, K., Shigematsu, R., & Nakagaichi, M. (2002). Flexibility and physical functions of older adults: A review. *Journal of Aging and Physical Activity, 10*(2), 169-206. doi:10.1123/japa.10.2.169

This article educates the reader on connective tissue and joints, along with ROM, range of motions, for older adults. It touches upon ways to increase ROM for older adults, and diseases that may contribute to loss of ROM, and how you can gain back some flexibility in these areas.

Stathokostas, L., McDonald, M., Little, R., & Paterson, D. (2013). Flexibility of older adults aged 55–86 years and the influence of physical activity. *Journal of Aging Research, 2013*(9), 1-8. doi:10.1155/2013/743843

Stathokostas (2013) studies the decrease in flexibility, joints decrease, and stiffness increase. This study goes in depth on how to reverse some change in the joints and increase flexibility. It also studied how relationship between improved flexibility and daily functioning had health benefits.

H. (2017, March 28). The Benefits of Stretching in Older Adults | Physical & Speech Therapy. Retrieved December 14, 2017, from https://www.htstherapy.com/benefits-stretching-older-adults/

This was used for the background, and goes in depth on the importance of older adults and flexibility training.

Appendix of Support Materials

Use these for handout:

Ankle: This exercise stretches your ankle muscles. You can stretch both ankles at once or one at a time.

1. Sit securely toward the edge of a sturdy, armless chair.
2. Stretch your legs out in front of you.
3. With your heels on the floor, bend your ankles to point toes toward you.
4. Hold the position for 10-30 seconds.
5. Bend ankles to point toes away from you and hold for 10-30 seconds.
6. Repeat at least 3-5 times.

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3. Slowly turn your head to the right until you feel a slight stretch. Be careful not to tip or tilt your head forward or backward, but hold it in a comfortable position.

4.Hold the position for 10-30 seconds.
5.Turn your head to the left and hold the position for 10-30 seconds.
6.Repeat at least 3-5 times.

Shoulder Exercise: This exercise to stretch your shoulder muscles will help improve your posture.

1.Stand back against a wall, feet shoulder-width apart and arms at shoulder height.
2.Bend your elbows so your fingertips point toward the ceiling and touch the wall behind you. Stop when you feel a stretch or slight discomfort, and stop immediately if you feel sharp pain.
3.Hold position for 10-30 seconds.
4.Let your arms slowly roll forward, remaining bent at the elbows, to point toward the floor and touch the wall again, if possible. Stop when you feel a stretch or slight discomfort.
5.Hold position for 10-30 seconds.
6.Alternate pointing above head, then toward hips.
7.Repeat at least 3-5 times.

Behavioral Contract: I will take a photo of myself doing a balance exercise and either post it on facebook or send it to the instructor. X_____(Signature)
(Participants need to sign for Facebook posting #letsflex)

Reduce your Fear of Falling
Kelsey Wang
Promoting Health Across the Lifespan/ HE 3230
Plymouth State University
December 2017

Title:
Reduce Your Fear of Falling

Author:
Kelsey Wang

Time & Format:
60 minutes workshop in a classroom with open space

Audience/Learners
Older Adults 65+

Topic Overview:
The topic of balance for older adults will be addressed through discussion and skill practice with a goal of reducing fear of falling and falls. Creating a safer home environment and learning selective balance exercises will be the focus of this workshop.

Healthy People 2020 Objective:
PA-1 Reduce the proportion of adults who engage in no leisure-time physical activity

Workshop Goal:
Increase self-efficacy in older adults for physical activity

National Health Education Standards addressed:
Standard 1: Comprehend concepts related to health promotion and disease prevention to enhance health.

1.12.5 Propose ways to reduce or prevent injuries and health problems.

Standard 7: Practice health-enhancing behaviors and avoid or reduce health risks

7.12.2 Demonstrate a variety of healthy practices and behaviors that will maintain or improve the health of self and others.

Specific Learning Objectives- through this workshop participants will be able to:

1. Identify 3 elements in the home that increase the risk of falls (picture) (NHES 1, AM1)
2. Demonstrate two exercise to improve static and dynamic balance (NHES 7, AM2)
3. Select and describe two movements to incorporate into daily life to maintain and improve balance (NHES 1, AM3)

Background:
In America today there are an increasing number of older adults, people who are older than 60-65. It's estimated that one in three older adults fall every year and that 20%-60% of them experience injuries due to their fall (G.I. 2011). Some of injuries may be minor, e.g. bruises or scrapes, or major, e.g. head injuries and fractures. The severity of the injury is largely dependent on the nature of the fall. A major injury may greatly impact a person's lifestyle.

Consequences of a major injury due to a fall may be loss of independence, chronic pain, and decreased mobility in any motor functions (Landers 2016).

The fear of falling has many consequences. Some potential consequences are functional decline, decreased of quality of life, and increased risk of falling. The risk of falling may be decreased by physical activity, balance exercises, and home improvements (G. I. 2011). These alterations may reduce fear of falling and can improve quality of life for older adults.

Terminology & Concepts:

Vision Impairment: Cataracts, retinal changes and visual acuity can all be changes from aging that result in balance challenges. About 58% of older adults are blind making it harder to get around and have a sense of the environment (Steinman 2016).

Sarcopenia - Decline of skeletal muscle tissue with age (Walston 2012).

Fall History: Many older adults who have fallen fear of falling again, so many stay away from physical activity that is associated with fallen or may risk them to fall (Landers 2016).

Balance and Gait: Independent factors related to gait and balance that increase fall risk in older adults include difficulty or inability to perform a tandem walk, slower than average gait speed, and narrow stance width (Landers 2016).

Medications: Many older adults start to take medications for chronic pain or illnesses. Some of the side effects are more common when we age. Some of the side effects are dizziness and headaches which are correlated with poor balance (Hafström 2016).

Chronic Conditions: Diabetes Type II, heart disease, vascular disease, COPD and arthritis are common chronic condition which may impair physical activity and balance. These conditions may cause a loss of proprioception and balance control

Home Modification: Change to layout of furniture and rugs to help support activity in home.

(Hafström, A., Malmström, E.-M., Terdèn, J., Fransson, P.-A., & Magnusson, M. (2016). Improved Balance Confidence and Stability for Elderly After 6 Weeks of a Multimodal Self-Administered Balance-Enhancing Exercise Program: A Randomized Single Arm Crossover Study. *Gerontology and Geriatric Medicine, 2*. doi.org/10.1177/2333721416644149, G. I. Kempen, S. F. Wesselink, J.C. Haastregt, G. A. Zijlstra. (2011, May 7) Long-Term Effect on Mortality of a Multicomponent Cognitive Behavioural Group Intervention to Reduce Fear of Falling in Older Adults: a Randomised Controlled Trial. Age and Ageing, Volume 40, (4), Pages 519-523. Retrieved from https://doiorg.libproxy.plymouth.edu/10.1093/ageing/afr041, Landers, M. R., Oscar, S., Sasaoka, J., & Vaughn, K. (2016). Balance Confidence and Fear of Falling Avoidance Behavior Are Most Predictive of Falling in Older Adults: Prospective Analysis. *Physical Therapy, Volume 96* (4), 433-442. doi:10.2522/ptj.20150184, Steinman, B. A., Chen, J., & Coyle, C. E. (2016, January 12). *Self-Reported Vision, Upper/Lower Limb Disability, and Fall Risk in Older Adults*. Retrieved from http://journals.sagepub.com.libproxy.plymouth.edu/doi/pdf/10.1177/0733464807312176, Walston, J. D. (2012, November). *Sarcopenia in older adults*. Retrieved from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4066461/)

Teaching Steps (timed):

[Engage, Describe, Do, Examine, Analyze, Apply/Create/Integrate, Assess, Close]

1) Engage and Motivate
    a) (10 Minutes) Greet participants and go around and introduce everyone
        i) How do you feel about falling?
        ii) Talk to a neighbor or partner about your experience with falls or near falls
2) Describe Mini Lecture on causes in home environment (10 minutes)
    a) Why homes can be dangerous
    b) Show and discuss home factors with pictures in a PowerPoint
3) Analyze (10 Minutes) Home safety analysis
    a) Organize in groups of three or two
        a. Make a list on what they have modified or could modified
        b. Show pictures of home modifications and discuss how they can change their homes to reduce their risk of falling
    b) What works, what have you done?
    c) Create a list
4) Do (20 Minutes) Practice Balance exercises
    a) (3 Minutes) Warm up stretching
    b) One by one demonstrate each exercise and work in partners to practice the movement
    c) Stand up and go (fast feet)
    d) Standing on one leg
    e) Backward walking
    f) Sliding walking
5) Ask & Discuss (5 Minutes)
    a) Big group discussion: how can these exercise be incorporated in daily living?
6) Closure (5 Minutes)
    a) Bring everyone together
    b) Cool down stretch
    c) Say goodbyes

Assessment Measures:

1. Final quiz question about identifying home elements that increase fall risk (LO 1)
2. Partner activity with photo evidence of balance skills (LO 2)
3. Take home list and sign behavioral contract about practicing balance exercises (LO3)

Ancillary Materials, Resources, Preparation steps:

- Chairs
- Water for participants
- Behavior contract (Appendix)
- List of ways to incorporate behaviors in daily life (Appendix)
- PowerPoint (Pictures of home modifications/ Appendix)
- Projector and screen

Annotated Resource Bibliography in accurate APA format:

(2016, August 18). *National Health Education Standards*. Retrieved from https://www.cdc.gov/healthyschools/sher/standards/index.htm

- Provided information about the National Health Education Standards and how to use them.

(2014). *Physical Activity*. Retrieved from https://www.healthypeople.gov/2020/topics-objectives/topic/physical-activity

- Provided information about Physical activity in older adults and what the goals are for the year 2020.

Hafström, A., Malmström, E.-M., Terdèn, J., Fransson, P.-A., & Magnusson, M. (2016). Improved Balance Confidence and Stability for Elderly After 6 Weeks of a Multimodal Self-Administered Balance-Enhancing Exercise Program: A Randomized Single Arm Crossover Study. *Gerontology and Geriatric Medicine, 2*. doi.org/10.1177/2333721416644149

- This peered review journal was used as a resource for examples of balance exercises that help older adults. It provided information about how exercise is very simple and can be introduce in daily living. Also, how physical activity is very beneficial for older adults.

G. I. Kempen, S. F. Wesselink, J.C. Haastregt, G. A. Zijlstra. (2011, May 7) Long-Term Effect on Mortality of a Multicomponent Cognitive Behavioural Group Intervention to Reduce Fear of Falling in Older Adults: a Randomised Controlled Trial. *Age and Ageing, Volume 40, (4*), Pages 519-523. Retrieved from https://doiorg.libproxy.plymouth.edu/10.1093/ageing/afr041

- This peered review journal was very useful because talks about older adults and how balance exercise may help them reduce their chance of falling and risk of falling. They use many techniques to help improve older adult's confidence regarding falling and how to not be scared of some physical activity that is known for falling.

Landers, M. R., Oscar, S., Sasaoka, J., & Vaughn, K. (2016). Balance Confidence and Fear of Falling Avoidance Behavior Are Most Predictive of Falling in Older Adults: *Prospective Analysis. Physical Therapy, Volume 96 (4)*, 433-442. doi:10.2522/ptj.20150184

- This peered review journal was very useful because it correlates physical and psychological falls and which one is more predictable in older adults. It provides information about balance confidence and how many older adults lack it. The journal also talks about different tests that can be used to test balance.

Steinman, B. A., Chen, J., & Coyle, C. E. (2016, January 12). *Self-Reported Vision, Upper/Lower Limb Disability, and Fall Risk in Older Adults*. Retrieved from http://journals.sagepub.com.libproxy.plymouth.edu/doi/pdf/10.1177/0733464807312176

- This peer reviewed journal talks about how many older adults lose vision and muscle tissue as they age. They focus on older adults who are vision impaired and how it correlates to their balance.

Walston, J. D. (2012, November). *Sarcopenia in older adults*. Retrieved from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4066461/

- This government page talks about how Sarcopenia is very relevant in older adults. They address how many older adults start to develop sarcopenia early.

Appendix:

Behavioral Contract: I will take a photo of myself doing a balance exercise and either post it on Facebook or send it to the instructor. X_____ (Signature)

PowerPoint on Home Modifications and lists of ways to incorporate behaviors in daily life.

Home Modifications

Kelsey Wang

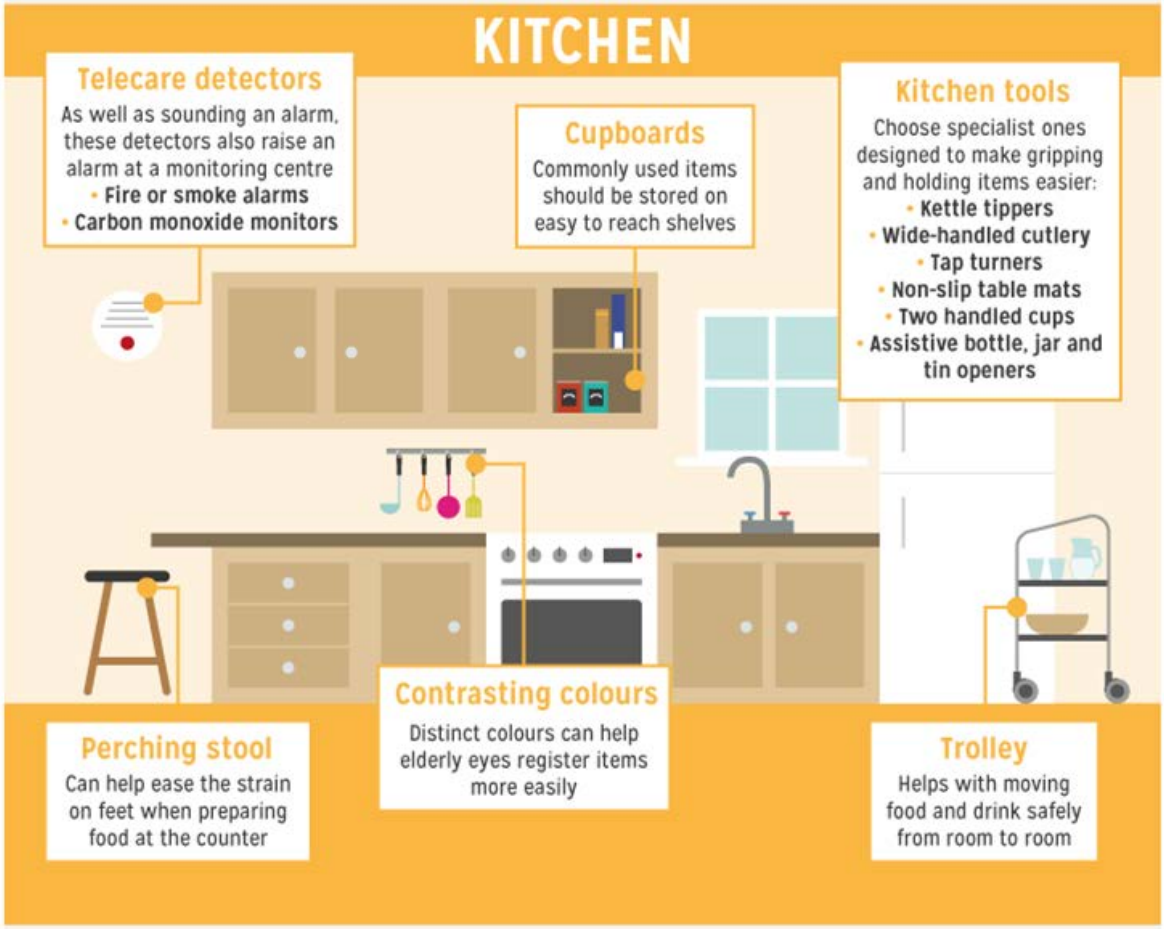
Home Modifications

Kelsey Wang

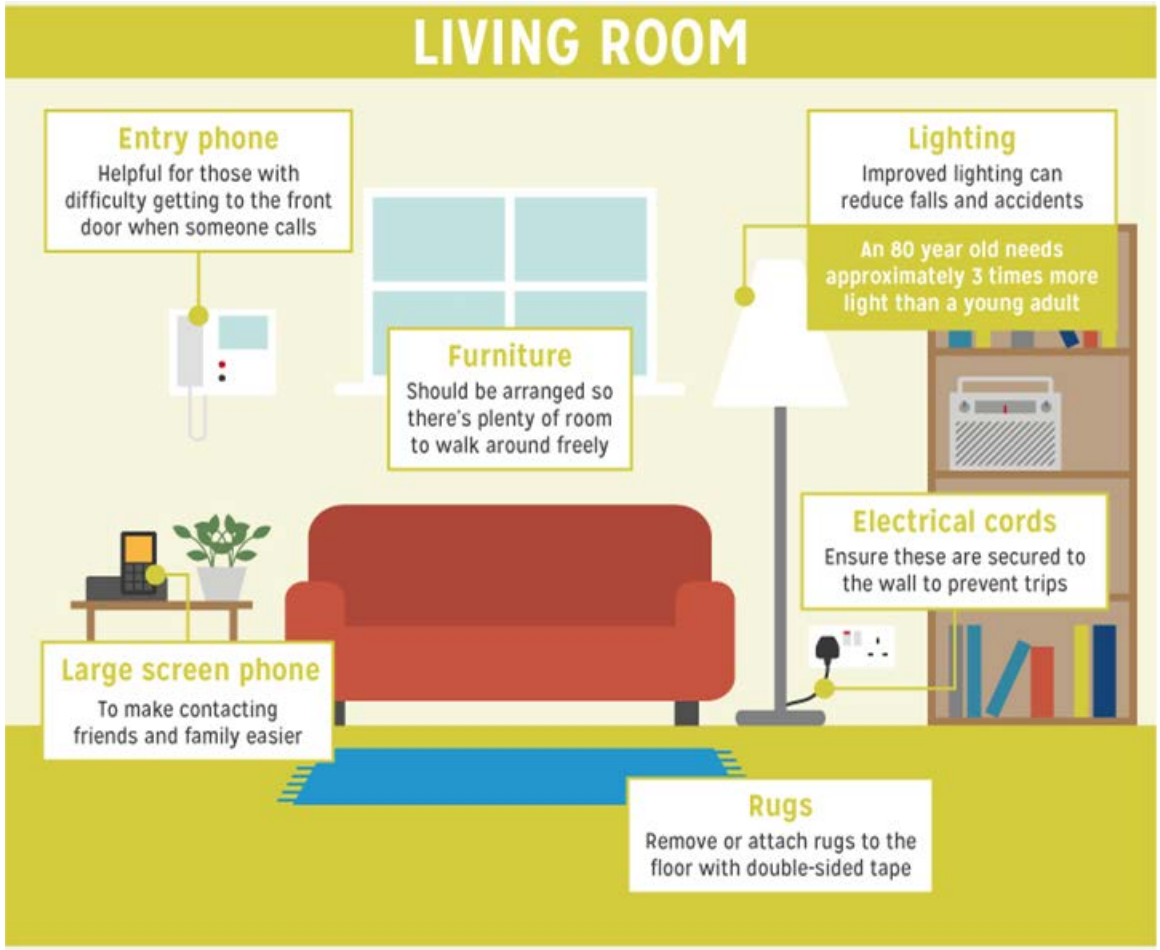
HOW TO MAKE A HOME SAFE FOR OLDER PEOPLE

Despite the range of care options available, older people are increasingly choosing to stay at home.

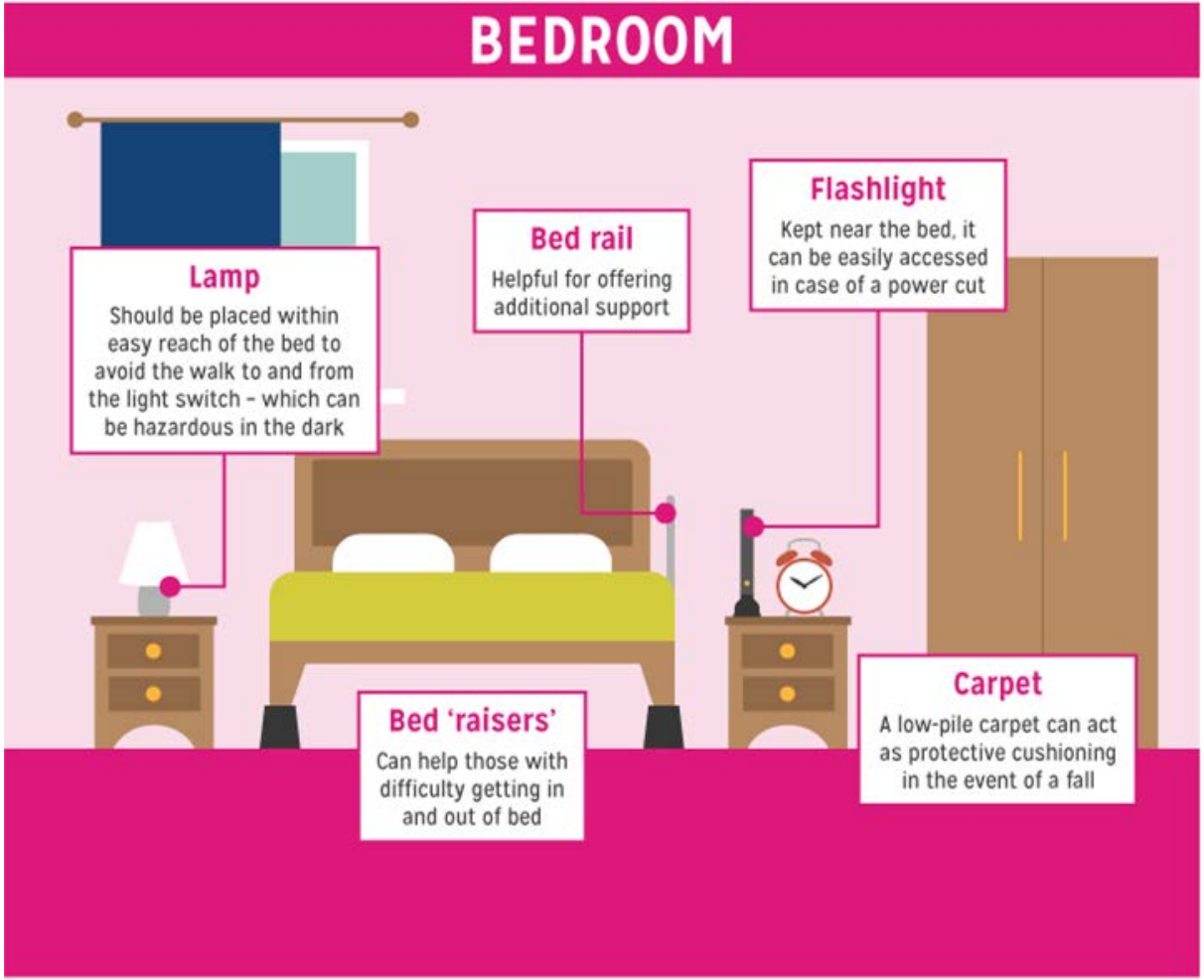
If your aging loved ones prefer independent living, here are some tips that will make their life easier, and give you some peace of mind.

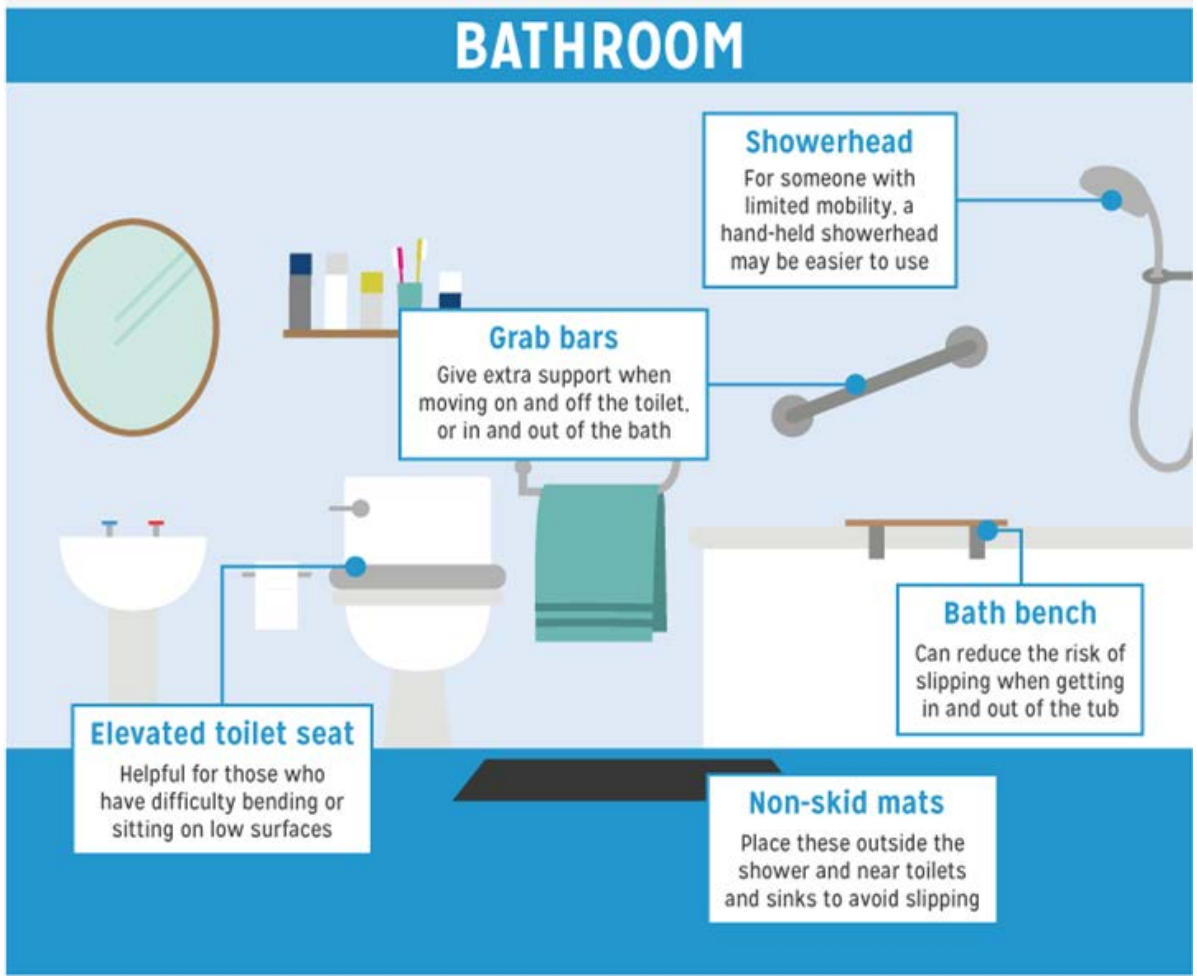

KITCHEN
Telecare detectors
As well as sounding an alarm, these detectors also raise an alarm at a monitoring centre
• Fire or smoke alarms
• Carbon monoxide monitors
Cupboards
Commonly used items should be stored on easy to reach shelves
Kitchen tools
Choose specialist ones designed to make gripping and holding items easier:
• Kettle tippers
• Wide-handled cutlery
• Tap turners
• Non-slip table mats
• Two handled cups
• Assistive bottle, jar and tin openers
Contrasting colours
Distinct colours can help elderly eyes register items more easily
Perching stool
Can help ease the strain on feet when preparing food at the counter
Trolley
Helps with moving food and drink safely from room to room

LIVING ROOM

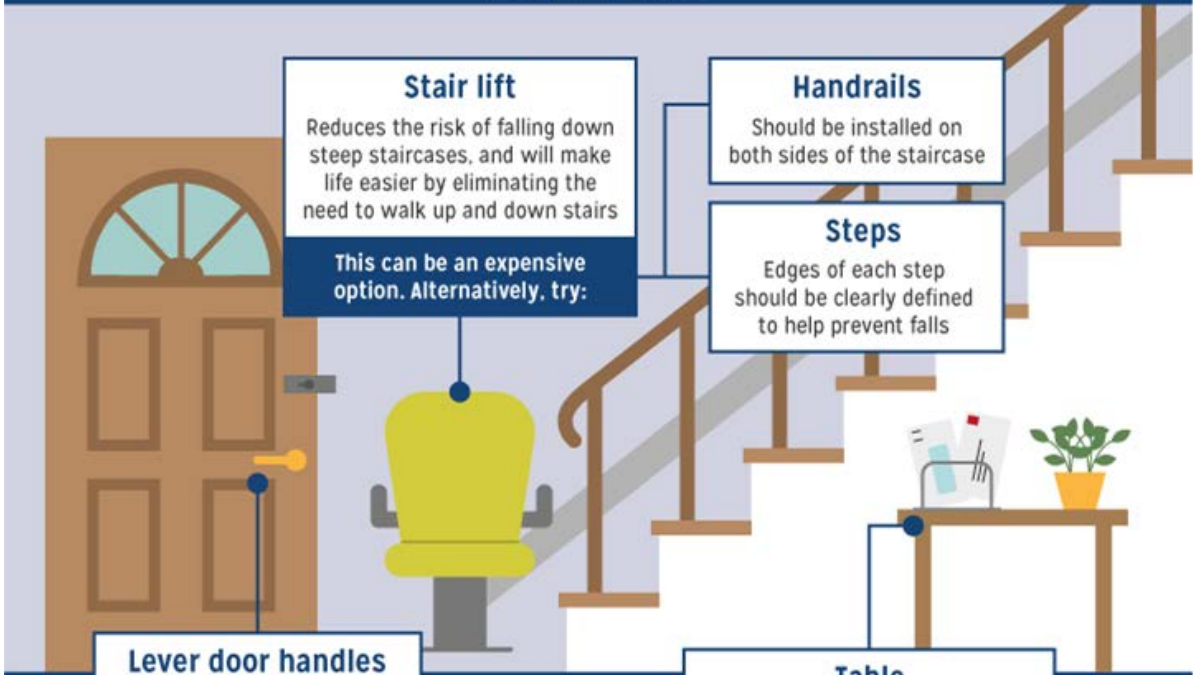

Entry phone
Helpful for those with difficulty getting to the front door when someone calls
Lighting
Improved lighting can reduce falls and accidents
An 80 year old needs approximately 3 times more light than a young adult
Furniture
Should be arranged so there's plenty of room to walk around freely
Electrical cords
Ensure these are secured to the wall to prevent trips
Large screen phone
To make contacting friends and family easier
Rugs
Remove or attach rugs to the floor with double-sided tape

BEDROOM


Lamp
Should be placed within easy reach of the bed to avoid the walk to and from the light switch – which can be hazardous in the dark
Bed rail
Helpful for offering additional support
Flashlight
Kept near the bed, it can be easily accessed in case of a power cut
Bed 'raisers'
Can help those with difficulty getting in and out of bed
Carpet
A low-pile carpet can act as protective cushioning in the event of a fall


BATHROOM
Showerhead
For someone with limited mobility, a hand-held showerhead may be easier to use
Grab bars
Give extra support when moving on and off the toilet, or in and out of the bath
Bath bench
Can reduce the risk of slipping when getting in and out of the tub
Elevated toilet seat
Helpful for those who have difficulty bending or sitting on low surfaces
Non-skid mats
Place these outside the shower and near toilets and sinks to avoid slipping

HALLWAY



Stair lift

Reduces the risk of falling down steep staircases, and will make life easier by eliminating the need to walk up and down stairs

This can be an expensive option. Alternatively, try:

Handrails

Should be installed on both sides of the staircase

Steps

Edges of each step should be clearly defined to help prevent falls

Lever door handles

Easier to use than doorknobs – ideal for those with arthritis

Table

A surface to put things down on when entering the home can prevent fumbling with keys or mail

GENERAL

- [ ] Make sure the numerals for your address are clearly visible from the street.
- [ ] Keep important phone numbers – including police, fire, poison control and emergency services near the telephone, and be sure to write in large, easy-to-read print.
- [ ] Water leaks can cause serious damage to your home and your health – identify the cause of any leak and fix it promptly.
- [ ] Have your gutters and downspouts checked once a year to ensure they are clean and free of obstructions.
- [ ] Set your water heater no hotter than 120 degrees Fahrenheit.
- [ ] Keep low coffee tables, magazine racks, footrests and plants out of walkways.
- [ ] Remove old throw rugs and install a non-slip pad.

ELECTRICAL SAFETY

- [ ] Do not place cords where they can be a tripping hazard and never place cords under rugs or carpets.
- [ ] Do not drape cords over space heaters, radiators or other hot surfaces.
- [ ] If possible, avoid using extension cords.
- [ ] Use safety plugs to cover unused electrical outlets.
- [ ] Never overload outlets, extension cords or power strips.
- [ ] Install ground-fault circuit interrupter (GFCI) electrical receptacles in kitchen and bathrooms.

FIRE SAFETY

- [ ] Have a plan for escape in case of a home fire that all occupants understand, making special considerations for small children and older home occupants.
- [ ] Have an ABC-rated fire extinguisher on every floor of the house, especially in or near the kitchen.
- [ ] Be sure that everyone in the house knows how to properly operate fire extinguishers.
- [ ] Have your furnace checked once a year.
- [ ] Have your chimney and flue inspected once a year.
- [ ] Never leave a space heather, halogen lamp or open flame unattended. Do not keep any of these items close to curtains or other flammable materials.
- [ ] Make sure that all lamps and fixtures are equipped with bulbs having wattage equal to or less than the manufacturer's suggestion.

SMOKE AND CARBON MONOXIDE DETECTORS

- [ ] Have an operating smoke and/or carbon monoxide detector on each floor of your home.
- [ ] Check batteries twice a year (when daylight savings time changes) and replace as needed.
- [ ] If anyone in your home is hearing impaired, be sure that the smoke detectors in your home alert using lights or vibrations, as well as sound.

KITCHEN

- [ ] Be sure to have sturdy step stools and ladders on hand. Do not use a chair to reach high surfaces of your home.
- [ ] Store flammable items away from your stovetop or range:
  - [ ] Do not place rags or towels on the oven handle.
  - [ ] Store plastic utensils and pot holders away from hot surfaces.
- [ ] Do not wear loose fitting clothing while cooking.
- [ ] Turn pot handles away from the front of the stove.
- [ ] Unplug all portable and countertop appliances that are not in use.
- [ ] Make sure that the kitchen is well-lit.
- [ ] Clean all spills immediately to avoid slips and the spread of bacteria.
- [ ] Separate cleaning products and other chemicals from food and drinks.
- [ ] Keep anything poisonous secure and out of reach of children.
- [ ] Use the exhaust fan when cooking to avoid moisture build up.

HALLS AND ENTRYWAYS

- [ ] Make sure that all windows and doors to the outside close and lock securely.
- [ ] Keep keys to internal door locks close to the door and easily accessible.
- [ ] Keep hallways clear for easy passage in case of an emergency.
- [ ] Place locks where all members of the household can reach and use them.
- [ ] Be sure that any walkways to the house are free of tripping hazards.
- [ ] Widen doorways to accommodate household members who use a walker or wheelchair.

List adapted from materials originally produced by The Academy of Orthopedic Surgeons, The Consumer Product Safety Commission, Home Safety Council and Underwriters Laboratories.

STAIRS

- [ ] Stairs should be well-lit with switches at both the top and bottom of a stairway.
- [ ] Do not store anything on the steps – even temporarily.
- [ ] Do not place loose area rugs at the top or bottom of stairways.
- [ ] Install handrails on both sides of any stairway.

BATHROOMS

- [ ] Keep electric devices away from bathtubs and sinks.
- [ ] Keep towels and washcloths away from heaters.
- [ ] Install grab bars in bathrooms and elsewhere as needed.
- [ ] Install and/or use the exhaust fan when bathing or showering to avoid moisture build up.
- [ ] Install a non-slip mat or textured adhesive strips on the floor of your shower or bathtub.
- [ ] Modify your toilets, sinks and bathtubs as needed to make them easier and safer to use.
- [ ] Keep first aid supplies well stocked and easily accessible.

BEDROOMS

- [ ] Have a lamp or light switch with a dimmer feature that you can easily reach from bed.
- [ ] Keep hot plates, space heaters and other hot appliances away from bed.
- [ ] Keep a phone near the bed.
- [ ] Never place anything on top of a plugged-in electric blanket.
- [ ] Place nightlights in bedrooms and hallways to guide you in the dark.

BASEMENT/LAUNDRY ROOM

- [ ] Clean the clothes dryers' lint trap after each use
- [ ] Make sure you never run the dryer when no one is home.
- [ ] Do not leave clutter on the floor – it is both a fire and a tripping hazard.
- [ ] Make sure the dryer vents outside with metal duct and unobstructed air flow.
- [ ] Make sure water heaters, furnaces and space heaters that produce carbon monoxide vent outside.

Is My Home "HomeFit"?

Read the following questions and check the box when your answer is "No." Your responses will help you identify how your home can become more "HomeFit."

(Skip any questions that don't apply or you're unsure about.)

- ☐ Is there at least one step-free entrance into your home?
- ☐ Is there a bedroom, full bathroom and kitchen on the main level?
- ☐ Are the interior doorways at least 36" wide?
- ☐ Does your kitchen have a work surface you can use while seated?
- ☐ Is there a fire extinguisher within reach of the oven or stove?
- ☐ Are your kitchen cabinets and shelves easy for you to reach?
- ☐ Does your kitchen have a lever-, touch- or sensor-style faucet?
- ☐ If you use a step stool, does it have nonslip surfaces and a handle you can grip?
- ☐ Are there secure handrails on both sides of your stairs?
- ☐ Are your hallways well lighted? (Can you see what's in front of you and on the floor beneath you?)
- ☐ Are your staircases well lighted?
- ☐ Are your exterior walkways and entrances well lighted?
- ☐ Are your exterior walkways in a safe condition, free of tripping hazards?
- ☐ Is your home's address number clearly visible from the street?
- ☐ Is the entrance door easy for you to unlock, lock, open and close?
- ☐ Do your exterior doors have secure locks that can't accidentally lock you in or out of the home?
- ☐ Does your entrance door have a peephole, viewing panel or security technology so you can see who is outside?
- ☐ Does your entrance door have a secure slide latch or chain so you can open the door enough to speak with someone outside while not fully unlocking and opening the door?
- ☐ Are the exterior door thresholds easy to see?
- ☐ Do all of your area rugs have nonslip strips to prevent tripping or slipping?
- ☐ Is the carpeting on your stairs secure and in good condition?
- ☐ Are the switches that control stairway light fixtures located at both the top and bottom of the stairs?
- ☐ Are all electrical and phone cords safely located (so they aren't a tripping hazard)?
- ☐ Do you have a shower with a step-free entry?
- ☐ Are the bathroom cabinets and shelves easy for you to reach?
- ☐ Does your bathroom have a lever-, touch- or sensor-style faucet?
- ☐ Is there "blocking" (e.g., a wood stud or other solid surface) behind the bathroom walls so grab bars can be securely installed in the bathtub, shower and toilet areas?
- ☐ Are there nonslip strips or nonslip mats in the bathtub and/or shower?
- ☐ Is your hot water heater set at or below 120°F?
- ☐ Are there smoke and carbon monoxide detectors on each floor of the home?
- ☐ Can a smoke and carbon monoxide detector be heard in every bedroom?
- ☐ Is a telephone easily accessible on every level of your home?
- ☐ Do you have flashlights in multiple rooms (in case of a power failure)?

AARP Real Possibilities

This worksheet is a supplement to the HomeFit Guide. For more information visit www.aarp.org/HomeFit.

Reference Page

- Home Improvement Assistance. (n.d.). Retrieved from https://eldercare.acl.gov/Public/Resources/Factsheets/Home_Modifications.aspx

- (2014, November 28). *How to Make a Home Safe for Older People* [Infographic]. Retrieved from http://bluebirdcare.ie/2014/12/08/make-home-safe-older-people/

Up Your Heart Rate, Up Your Life!

Louisa Noble

HE 3230

Plymouth State University

December 2017

Up Your Heart Rate, Up Your Life!

Louisa Noble
Plymouth State University Student

Audience:
Older adults age 65 and older

Time & Format:
60-minute workshop; classroom setting with open spaces for walking
A synthesis of lecture, demonstration, practical application, reflection & discussion

Workshop Goal:
Increase self-efficacy in older adults during physical activity.

Overview:
This workshop is designed for mobile, older adults who are looking to increase their overall self-efficacy during physical activity through the engagement of aerobic exercise. In a synthesis of lecture, demonstration, practical application, reflection and discussion, participants will learn about the benefits aerobic exercise has on health as well as how to accurately calculate their resting heart rate, heart rate during activity, and rate of perceived exertion. Comprehending the impact of aerobic exercise on health and accurately measuring the body's response to such activity through these various methods mentioned, will ultimately improve one's self-efficacy during engagement of activity and to help promote its adherence.

Healthy People 2020 Objective:
PA-2: Reduce the proportion of adults who engage in no leisure-time physical activity.
(Healthy People 2020, 2014)

National Health Education Standards and Performance Indicators:
Standard 1: Comprehend concepts related to health promotion and disease prevention to enhance health.

- 1.12.1 Predict how healthy behaviors can affect health status.

Standard 7: Demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

- 7.12.2 Demonstrate a variety of healthy practices and behaviors that will maintain or improve the health of self and others.

Standard 8: Demonstrate the ability to advocate for personal, family, and community health.

- 8.12.3 Work cooperatively as an advocate for improving personal, family, and community health.

(CDC, 2016)

Specific Learning Outcomes (LO)

- After this workshop, participants will be able to:
  1. Describe three benefits of importance of aerobic training and warming up prior to activity or exercise.
  2. Accurately measure resting heart rate and calculate target heart rate zone.
  3. Identify personal rate of perceived exertion correlated to heart rate
  4. Reflect on one aspect of personal confidence that has changed in this workshop.

Background, Key Concepts & Terminology
(To Inform Future Instructors)

When an individual engages in exercise that targets the cardiovascular system, the activity performed aims to raise the heart rate in order to meet the demands of that activity's intensity. Termed "aerobic activity," this form of exercise (if performed consistently), will make the cardiovascular system fitter and stronger. As this system strengthens, the person's ability to exercise will likely strengthen, providing them with the self-efficacy to accomplish every-day tasks and/or exercise-related activities without getting winded or tired. As one's aerobic fitness increases, the ultimate hope is that the engagement of such exercise will increase supported by their self-efficacy when performing the activity.

When talking numbers, according to the World Health Organization, older adults should aim to receive a total of 150 minutes of moderate-intensity aerobic physical activity over the course of a week, or vigorous-intensity aerobic physical activity for about 75 minutes during the week. These intensities can also be performed in an equivalent combination of the two. Also advised is the recommendation that older adults should perform this activity in spans of 10-minute bouts.
(WHO, 2017)
(Sollitto, 2017)

- Benefits of exercise: Exercising, especially in older adults is an essential ingredient to their quality of life. Exercise in older adults is supported by its prevention of chronic diseases and improvements related to immune function, cardio-respiratory and cardiovascular function, bone density, gastrointestinal function, and even some cancers. In respect to cardiovascular function and aerobic exercise, older adults need this type of exercise incorporated into their lives as it helps facilitate the delivery of oxygen and nutrients to tissues throughout the body.
  (Sollitto, 2017)

- Importance of warming-up: Warming up before physical activity or a workout is crucial for injury prevention and performance. During a warm up, blood vessels are allowed to dilate which facilitates the transport of oxygen to muscles. This increases the temperature of muscles, which improves their flexibility and efficiency during activity. Engaging in a warm-up before exercise is a way to gradually raise one's heart rate and breathing rate to prepare for more intensity while also minimizing the stress placed on the heart.
  (AHA, 2017)

- Aerobic Exercise: The utilization of oxygen during moderate-intensity exercise that increases heart rate for an extended period of time, the goal being to improve cardiovascular fitness and overall

health. Aerobic activities include: Walking, jogging, biking, swimming, dancing, etc.
(Weil, 2017)

- Resting Heart Rate: The number of times the heart beats in one minute, pumping only the minimum amount of blood it needs to maintain a regular heartbeat. This is best measured when sitting, lying down and not moving. An average resting pulse is between 60-100 beats per minute but can fluctuate due to a number of factors such as fitness level or drug intake.
  - Best pulse check location: Wrist (Radial artery/thumb side)

  (AHA, 2017)

- Target Heart Rate: The minimum number of heartbeats needed to improve cardiovascular fitness. This is measured over a period of time and is specific to a person's age, gender, and fitness level. A target heart rate is roughly 50-85% of maximum heart rate.
  - Target Heart Rate Zones for Older Adults (50-85%)
    - *65 years old—78-132 beats per minute*
    - *70 years old—75-128 beats per minute*
      - (Provide participants with Target Heart Rate handout. See appendix.)

  (AHA, 2017)

- Maximum Heart Rate: The maximum number of beats per minute your cardiovascular system can sustain during exercise.
  - Calculated as 220 minus age.
    - Example: MHR = 220 – 68 = 152 beats per minute

  (AHA, 2017)

- Rate of Perceived Exertion (RPE) Scale: A scale ranging from 0 to 10 indicating the intensity of exercise.
  - 0 – 1 = very light exertion, hardly nothing
  - 2 – 3 = light exertion
  - 4 – 5 = moderate exertion
  - 6 – 7 = vigorous exertion
  - 8 – 9 = very hard exertion
  - 10 = maximal exertion
    - (Provide participants with RPE scale handout. See appendix.)

(AHA, 2017)

- Self-Efficacy: The belief that if you can perform a behavior or activity (aerobic exercise in this case) successfully, you will be more likely to engage in that behavior or activity. Applied to task specific situations, self-efficacy serves as the link between one's agreeableness, commitment, and even enjoyment while performing aerobic activities.
  - Example: Someone who is skilled at the breaststroke will choose to perform it when swimming, while someone who is not, will pick a different stroke or avoid swimming all together.

(Pekmezi, Jennings, & Marcus, 2009)

Instructional Strategies:

- (5 minutes) *Engage*
  - Welcome participants to workshop and begin with introductions.
    - Ask participants to provide the group with their name, where they are from, and their favorite way to be active.

- (15 minutes) *Lecture & Discussion*
    - Briefly explain the importance of aerobic training on cardiovascular health and how it improves self-efficacy during physical activity.
    - Pose questions to participants to gauge how familiar they are with the topic. Example: "What is a benefit of aerobic activity in older adults?"
    - Explain ways to measure cardiovascular fitness (target heart rate, RPE) and describe how they are conducted.
    - Pass out RPE handout and writing implements and explain that it will be utilized during the activity later in the workshop.

- (5 minutes) *Describe, Demonstration, Do*
  - Explain what a resting heart rate it is and when the ideal time to measure it is
  - Show participants how to accurately measure their resting pulse (on own wrist)
  - Have participants partner up and measure the resting heart of their partner
    - If odd number, have a group of three
    - On handout, have them write down what their partner calculated as their RHR

- (5 minutes) *Perform Warm-Up*
  - Have participants form a circle and have a volunteer (or 2) lead the group through a dynamic warm-up including at least 5 exercises
    - Exercises could include but are not limited to: arm circles, forward bends, calf raises, high knees (step walking for modification), jumping jacks, push-ups (on knees for modification), etc.

- (25 minutes) *Perform moderate-intense exercise (walking the track)*
  - Have participants find their partner and choose one person to walk first
  - The other partner will wait on the side to measure the walking partner's heart after 10 minutes of moderate-intense walking. They will also ask the walker where they fall on the RPE scale.
    - Record heart rate and RPE
  - After 10 minutes have passed and measurements are calculated and recorded, have partners switch and conduct the same process.
    - Have the partner who finished their moderate-intense walk, cool down by walking slowly (in place or off to the side).
  - When second walker has completed their 10 minutes with both heart rate and RPE measurements recorded, bring group back together for closing reflection and sharing.

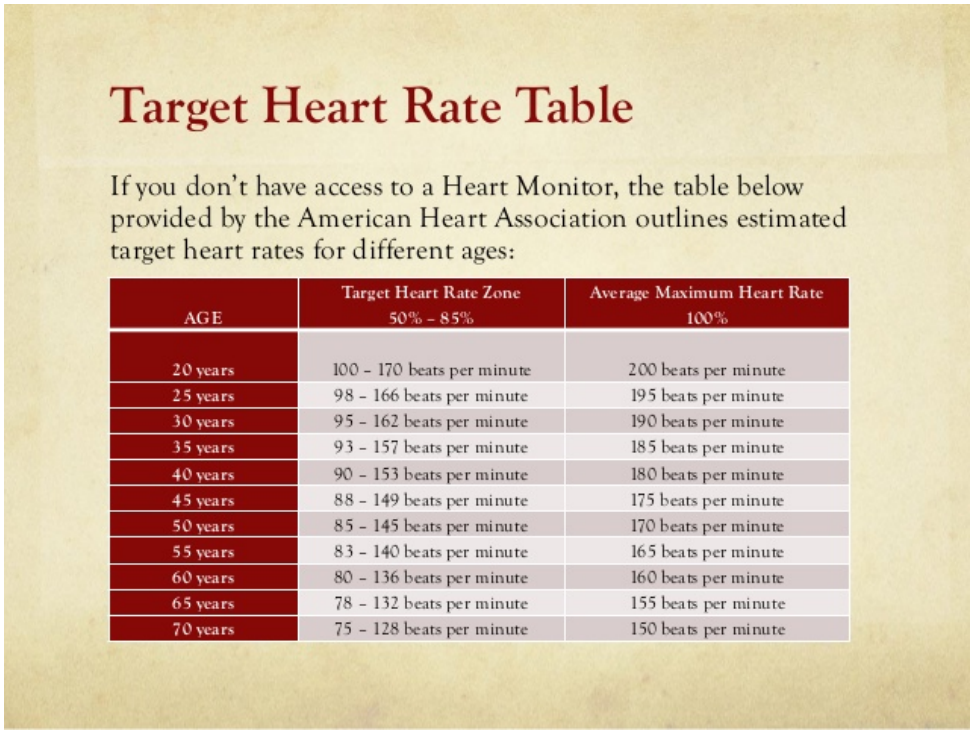
- (5 minutes) *Reflection & Sharing*

- Have participants volunteer to share their experience. Either being the walker or recorder.
    - Ask participants to describe three benefits of aerobic training and warming up prior to activity or exercise.
    - Ask participants to share one aspect of personal self-efficacy that has changed after engaging in this workshop.
    - Pose a closing question that gets participants thinking about ways they can incorporate aerobic activity in their daily lives as well as assess their cardiovascular fitness through techniques they just performed.

Appendix/Materials

Materials

- Heart Rate monitor
- RPE Scale handouts
- Watch/Stopwatch
- Paper/Writing implements
- Water for drinking/access to water
- Use bleachers for seating

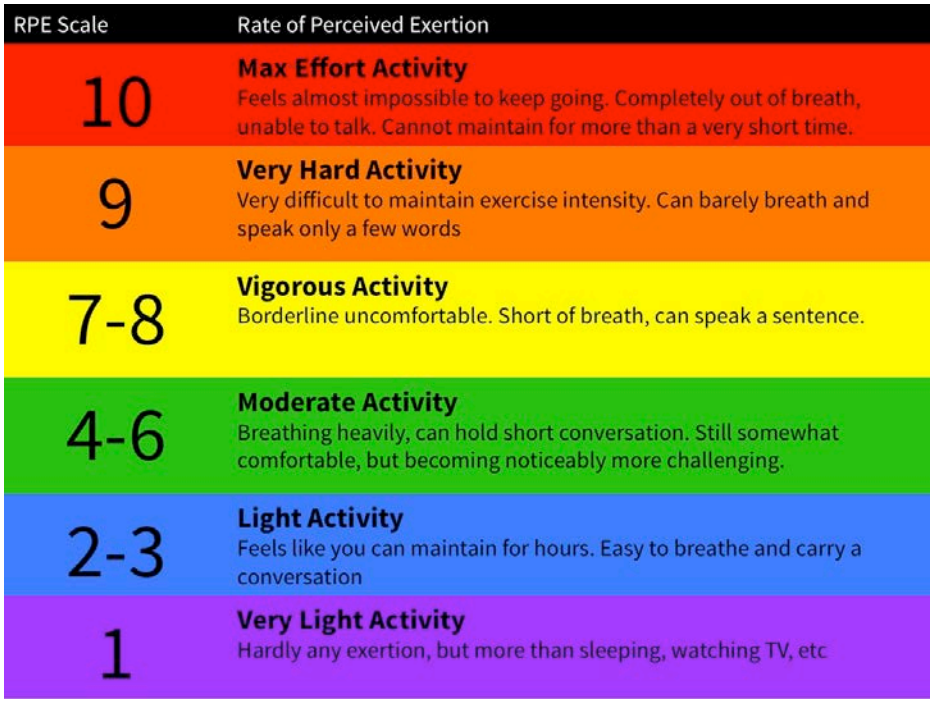


Target Heart Rate Table

If you don't have access to a Heart Monitor, the table below provided by the American Heart Association outlines estimated target heart rates for different ages:

AGE	Target Heart Rate Zone 50% – 85%	Average Maximum Heart Rate 100%
20 years	100 – 170 beats per minute	200 beats per minute
25 years	98 – 166 beats per minute	195 beats per minute
30 years	95 – 162 beats per minute	190 beats per minute
35 years	93 – 157 beats per minute	185 beats per minute
40 years	90 – 153 beats per minute	180 beats per minute
45 years	88 – 149 beats per minute	175 beats per minute
50 years	85 – 145 beats per minute	170 beats per minute
55 years	83 – 140 beats per minute	165 beats per minute
60 years	80 – 136 beats per minute	160 beats per minute
65 years	78 – 132 beats per minute	155 beats per minute
70 years	75 – 128 beats per minute	150 beats per minute

Target Heart Rate Table. Digital Image. *SlideShare.* 14 July 2014, https://image.slidesharecdn.com/latinvadancefitnessheartmatters-140714145647-phpapp01/95/fitness-and-heart-rate-by-latinva-dance-fitness-5-638.jpg?cb=1405350090



RPE Scale. Digital Image. *Fit Tutor.* 2016, https://73trmgyk9k-flywheel.netdna-ssl.com/wp-content/uploads/2014/01/RPE-scale.jpg

Annotated Bibliography of Resources

American Heart Association. (2017). Target Heart Rates. Retrieved from http://www.heart.org/HEARTORG/HealthyLiving/PhysicalActivity/FitnessBasics/Target-Heart-Rates_UCM_434341_Article.jsp#.WiMnzbQ-fsE

This section of the AHA provided this workshop with insight on resting heart rate, target heart rate, maximum heart rate, the importance of warming up prior to exercise, and general guidelines to follow in reference to age, all of which were incorporated into this workshop.

Centers for Disease Control and Prevention. (2016). National Health Education Standards. Retrieved from https://www.cdc.gov/healthyschools/sher/standards/index.htm

The Centers for Disease Control and Prevention provides this workshop with National Health Education Standards 1, 7, and 8 to be addressed.

Health People 2020. (2014). Physical Activity. Retrieved from https://www.healthypeople.gov/2020/topics-objectives/topic/physical-activity/objectives

Healthy People 2020 provides this workshop with a physical activity objective to address.

Pekmezi, D., Jennings, E., & Marcus, B. (2009). Evaluating and enhancing self-efficacy for physical activity. *American College of Sports Medicine, 13*(2), 16-21.

Provides the reader with a better understanding of the relationship between self-efficacy and physical activity. It also offers ways to enhance self-efficacy during physical activity such that

those who already posses a high level are focused on maintenance, while those struggling will benefit from verbal persuasion, physiological cuing, etc. This source provided this workshop will a strong background of knowledge to address the topic of self-efficacy.

Sollitto, M. (2017). Exercise for the elderly*. AgingCare, LLC.* Retrieved from https://www.agingcare.com/articles/exercise-benefits-for-the-elderly-95383.htm
This website article provided insight on the background portion of this workshop. Information available ranged from general physical activity benefits to the benefits related specifically to aerobic exercise.

Taylor, D. (2013). Physical activity is medicine for older adults. *Postgrad Med J, 90:* 26-32. doi:10.1136/postgradmedj-2012-131366
Denise Taylor supports the strong correlation between physical activity and health in older adults in this Open Access review article. The article stresses that with increased levels of physical activity, that being at least 5 days of moderate-to-vigorous activity throughout the week, older adults are expected to see improvements in their health. This article also addresses the recommendations for physical activity and the corresponding types: balance exercises and strength/aerobic fitness, which are two topics our lesson plans correspond with. It touches on the cognitive benefits that can result from increased levels of physical activity and the impact physician's can have on their patients' relationship with exercise as well. This article serves as a good foundation when creating our lesson plans because it provides legitimate data in regards to the benefits of physical activity in older adults, that can be utilized in the research portion of our lesson plans.

Weil, Richard. (2017). Aerobic exercise. WebMD, Inc. Retrieved from https://www.emedicinehealth.com/aerobic_exercise/article_em.htm#what_is_aerobic_exercise
Used as a resource for insight on aerobic exercise and the benefits that result from its engagement. Offers an understandable description of the biological basis behind aerobic fitness, which helped to formulate lecture material on the topic in this workshop.

World Health Organization. (2017). Physical Activity and Older Adults. *WHO*. Retrieved from http://www.who.int/dietphysicalactivity/factsheet_olderadults/en/
The World Health Organization serves as a reputable source for this workshop as it is home to physical activity recommendations for all ages, those of which were referenced in this workshop.

Chapter 3

Plant Based Diet

Body Builders Guide to Building Body with Body Building Plants

Danielle Oswald
Promoting Health Across the Lifespan
Plymouth State University
December 2017

Title: Body Builders Guide to Building Body with Body Building Plants

Author: Danielle Oswald

Time & Format: 1 hour, 40 minutes; mini lecture, group work, and class discussion

Audience/Learners: Young adults (college age-25)

Topic Overview: This workshop will cover the basics of protein, including it's function as the "body builders" of the body, as well as sources of protein (excluding meat) and how much protein students need (based on their weight, using an equation from US Dept. of Agriculture *Dietary Guidelines for Americans*). The lesson will also cover the concept of 'complete protein' and how to obtain 'complete protein' by combining a variety of plant and dairy sources, etc.

Healthy People 2020 Objective(s):
Nutrition and Weight Status: Promote health and reduce chronic disease risk through the consumption of healthful diets and achievement and maintenance of healthy body weights.

1) **NWS-15** Increase the variety and contribution of vegetables to the diets of the population aged 2 years and older.
   NWS-15.1 Increase the contribution of total vegetables to the diets of the population aged 2 years and older.
   NWS-15.2 Increase the contribution of dark green vegetables, red and orange vegetables, and beans and peas to the diets of the population aged 2 years and older.
2) **NWS-16** Increase the contribution of whole grains to the diets of the population aged 2 years and older.

Workshop Goal: Increase knowledge and skillset around eating a plant based diet among young adults for choosing plant-based diets.

National Health Education Standards addressed: (9-12th grade+)

- Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.
  -1.12.1 Predict how healthy behaviors can affect health status.
- Standard 3: Students will demonstrate the ability to access valid information, products, and services to enhance health.
  -3.12.2 Use resources from home, school, and community that provide valid health information.
  -3.12.3 Determine the accessibility of products and services that enhance health.
- Standard 5: Students will demonstrate the ability to use decision-making skills to enhance health.
  -5.12.2 Determine the value of applying a thoughtful decision-making process in health-related situations.
  -5.12.6 Defend the healthy choice when making decisions.
- Standard 7: Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

-7.12.1 Analyze the role of individual responsibility for enhancing health.
-7.12.2 Demonstrate a variety of healthy practices and behaviors that will maintain or improve the health of self and others.

- Standard 8: Students will demonstrate the ability to advocate for personal, family, and community health.
  -8.12.2 Demonstrate how to influence and support others to make positive health choices.
  -8.12.3 Work cooperatively as an advocate for improving personal, family, and community health.

Specific Learning Objectives:
Through participation in the workshop, learners will be able to:

1) Determine approximately how much protein they need per day (calculate in grams per body weight).
2) Identify at least 3 sources of plant protein.
3) Create 3 plant-based pairings to achieve complete protein.
4) Describe the concept of complete protein, and complementation to create complete protein with plant sources.

Background, Key Concepts & Terminology:

While eating meat has its benefits (iron, vitamin B12, high protein content, etc.), recent studies have shown how eating a plant based diet, and either cutting out wholly or cutting back mostly on meat consumption, can be very healthful. People who adopt some form of vegetarianism tend to weigh less, have better cholesterol levels, fewer problems with irregular bowel movements, as well as lower risk for various heart conditions (heart disease, high blood pressure, etc.) (Donatelle, 2014).

People who adopt a vegetarian diet focus on the consumption of fruits and vegetables, nuts, seeds, legumes, and dairy products. Because they are not eating meat, which is a main source of protein, they need to pay attention to their protein, iron, calcium, zinc, and vitamin B12, levels. By consuming a variety of foods, and combining different sources of protein to create complete protein, deficiencies in these vitamins and minerals shouldn't be of concern (MedlinePlus, 2017).

There is a lot of hype around protein, and the need to consume meat. Proteins are the "body builders" of nutrients; they develop and repair bones, muscle, skin and blood cells; they are the key elements of antibodies; and they are found in some hormones involved in body function regulation. While protein is necessary, we actually don't need as much as we are currently consuming in the average American diet (one that contains meat). Proteins are used solely for building functions; they are not generally used as a source of energy, unless your body is depleted of fat and glucose. On average, people in America consume about 79 grams of protein per day while in reality, the average 130-pound female only needs about 47 grams per day, and the average male only needs 56 grams per day. Since protein cannot be burned as energy, any excess is converted and stored as fat (a process that really takes a toll on your kidney) (Sizer and Whitney, 196).

Eating a variety of plant based protein and dairy products (provided you are not vegan) can easily bring in your daily protein needs. Plant foods rich in protein include: legumes (beans, lentils, peas, peanuts, and soy products); grains (wheat, corn, rice, and oats); leafy greens, and broccoli.

- *Pesco-vegetarian:* eats vegetables, grains, fruits, nuts, seeds, legumes, dairy products, and eggs, but not meat or poultry.

- *Lacto-ovo-vegetarian*: eats vegetables, grains, fruits, nuts, seeds, legumes, dairy products, and eggs, but not meat poultry or seafood.
- *Complete protein:* protein source that contains all essential (9) amino acids. Does not necessarily include all 11 non-essential amino acids. Complete proteins include eggs and milk.
- *Amino Acids:* 20 amino acids in the body (broken down protein): 9 are essential (body needs from diet), 11 are nonessential (body can make them). Most plant foods are incomplete: combine multiple to make a complete protein meal (i.e. legumes and grains).

- *Protein function*: proteins are the body builders (developing and repairing bone, muscle, skin, and blood cells; structure to nails and hair; formation of scar tissue, ligaments, tendons, and arteries, etc.); they are key elements of antibodies (disease fighting agents), and of some hormones that regulate body functions. They are also *transporters*, transporting fluids, nutrients, oxygen, and lipids within cells, as well as throughout the body.
- *Protein Quality:* high quality protein is both easily digested and complete (all 9 essential amino acids are present, but possibly not all 11 non-essential). An example of high quality protein is eggs.
- *Plant Protein:* lower quality protein than animal sources of protein, with less protein content, and no one source is considered *complete.*
- *Protein Complementation:* the concept that combining certain sources of plant protein will help you consume complete protein. Protein pairings that create complete protein include:
  - Legumes and nuts/seeds
  - Legumes and grains
  - Green leafy veggies and grains and legumes
  - Green leafy veggies and nuts/seeds and legumes

  Recommended protein intake: The average adult should consume about 0.8 g per kg of body weight (lbs/2.2= weight in kg x 0.8)

Teaching Steps:

- **Engage and Motivate: Activity 1 (15 minutes)**
  - Have everyone go around the room and say their name (5 minutes).
  - When done, ask for volunteers to share their experiences with vegetarianism (if they are a vegetarian, have tried in the past, know others who are vegetarians, etc.) (5 minutes).
  - Ask the class to brainstorm barriers to being a vegetarian. A student may volunteer to record the brainstorm session on a white board or black board if available (5 minutes).
- **Describe and Do: Activity 2 (15 minutes)**
  - Small class lecture and activity to determine approximate protein needs and different foods you can find protein in. (15 minutes) (LO1, LO2)
- **Examine and Apply: Activity 3 (10 minutes)**
  - In groups of 3, collect a bundle of plant based food pictures/packages from teacher and work together to determine protein contents. Come up a list of food combinations to meet protein needs over the course of a day. (20 minutes) (LO3)
- **Discuss, Analyze, and Assess: Activity 4 (10 minutes)**

- Class discussion about protein pairings and complete protein. (15 minutes) (LO4)

- **Apply, Create, and Integrate: Activity 5 (40 minutes)**
  - Break class into 4 groups. Together, the class will create a bulletin board (40 minutes):
    - One group will work on listing plant sources of protein; (LO2)
    - One group will work on listing protein contents of meat-alternative sources of protein; (LO3)
    - One group will work on articulating how to calculate protein needs, and; (LO1)
    - One group will work on examples of protein pairings/complete protein. (LO4)
- **Close and Assess: Activity 6 (10 minutes)**
  - Have students write a reflection about the workshop that includes the concept of complementation, and how to pair protein sources to create complete protein (5 minutes). (LO3, LO4)
  - Class discussion on what participants took away (learned) from the workshop (5 minutes).

Assessment Measures:

AM 1: Having students do their own calculations for protein needs.
AM 2: Class collaboratively creating bulletin board.

Materials, Resources, Preparation:

Materials:

- White board/chalk board w/appropriate writing utensil
- 10 bundles of printouts/packages of no-meat protein sources (at least 15 examples, 20 is ideal)
- Access to bulletin board to create display for others to see
- Colored butcher block paper for board back ground
- Arts and crafts: construction paper, glue, scissors, cut out colored letters, markers, etc.
- Color printer and printer paper
- Computer for students to print off of
- Lined paper and writing utensils for students

Preparation:

- Pre-made bundles of no-meat protein sources printed out with nutrition facts (15-25)
- Notes for information to provide students with (for your reference during lecture)

Annotated Resource Bibliography:

Donatelle, R. (2014). *Access to health* (Thirteenth edition. ed.). Boston: Pearson.

Rebecca Donatelle, who has an extensive track record in health education and promotion, Community and Public Health PhD, is an associate professor and coordinator of Oregon State University's Health promotion program. This source explained both function and special considerations for proteins. It tells you exactly what protein does in the body, what non-meat sources you can find, what protein complementation is and how to combine plant

sources to create complete protein (196-195). After discussing the basics of protein, later on page 212 the textbook discusses vegetarianism in terms of health; is it a healthy diet? This section of the book explores reasons for pursuing the lifestyle, as well as the outcomes of following a vegetarian life style (weigh less, lower risk of heart disease, etc.). This section eventually concludes that vegetarianism is a good alternative to meat consumption, but states that people may run into deficiencies when it comes to veganism (no meat, no dairy). This source is a textbook use in Principles of Health, an intro class into the Health Promotion major at Plymouth State University.

Eckelkamp, S. (January 19, 2016). The 20 highest protein veggies (and other plant-based foods) you can eat. Retrieved from https://www.prevention.com/eatclean/high-protein-vegetables

Steph Eckelkamp is an experienced writer and editor, as well as a health coach. This article informed the appendix of support materials, providing pictures and protein contents for various plant based foods to pass out to students, and for the instructor to be familiar with. Each food item also comes with further explanation of other nutritional considerations (vitamins, minerals, other macronutrients, etc.).

Food Network. (2017). 9 lean proteins you should be eating. Retrieved from http://www.foodnetwork.com/healthy/photos/9-lean-proteins-you-should-be-eating

The Food Network is a Television program featuring cooking shows. Their website provides articles about recipes, featured food items, and nutrition. This article added to the Appendix of Support Materials, including some items that were absent on other sources used to create the Appendix. This resource provided a more in-depth description of both new food items and food items included from other resources. The resource is helpful in giving the instructor background info and extra info (not just about protein) about the food items included in the Appendix.

Hester, K. (January 5, 2017). Nutritional yeast: he one pantry staple your cooking is missing. *Whole Foods Market.* Retrieved from http://www.wholefoodsmarket.com/blog/nutritional-yeast-one-pantry-staple-your-cooking-missing.

Kathy Hester is an expert on vegan blogging and vegan cooking. She has had article featured in many publications, including the Washington Post. Her article included a picture of nutritional yeast used in the Appendix of Support Materials to be passed out to students. It also went into an in-depth description of what it is, and why its different from other types of yeast. Nutritional yeast is not something all students will be knowledgeable about, so this resource helps the instructor fill that gap.

Hill, M. (October 10, 2014). *10 plant based proteins you should be eating*. Retrieved from http://nutritionstripped.com/10-plant-based-proteins-eating/

McKel Hill is a Dietician Nutritionist who founded the Nutrition Stripped blog website and resource for nutrition information, and simple healthy eating tips. This resource also added to the Appendix in protein needs, but is useful as a way to get more familiar with plant based

protein food items; it includes what the item is stypically used to make, flvors, and how to prepare it.

MedlinePlus. (2017, October 4). *Vegetarian diet.* Retrieved from https://medlineplus.gov/vegetariandiet.html

MedlinePlus is a government-sponsored resource out of the United States Library of National Medicine. This source is a summary about the vegetarian diet, and what vegetarians focus on for consumption (leafy greens, nuts, seeds, beans, etc.). It also provides a list of nutrients of concern, including iron and zinc, with hyperlinks to delve more into the issues of deficiency for each nutrient.

Webb, F. S., & Whitney, E. N. (2013). *Nutrition: concepts & controversies.* 13th ed. [Belmont, Calif.]: Wadsworth Cengage Learning.

From Cengage Learning comes Nutrition: Concepts and Controversies (a comprehensive guide to the multiple facets of eating). Frances Sienkiewicz Sizer is a Registered Dietitian, and a founding member and vice president of Nutrition and Health Associates (a Florida-based information and resource center). Ellie Whitney, Ph.D., received her BA and Ph.D. in English and Biology from Harvard University and Washington University, applying her academic background to over a dozen college textbooks.
Authors Frances Sienkiewicz Sizer and Ellie Whitney discuss protein in chapter 6 of the extensive textbook, as it is a big part of nutrition, and necessary for human life. The chapter goes into extensive and scientific detail, so much of it is not used in the lesson plan. However, it is good for the teacher to know concepts from this resource such as amino acids (essential vs. non-essential); the exact definition of protein being compounds composed of carbon, hydrogen, oxygen, and nitrogen; the role protein plays in the human body and function (body builders, structure, antibody and hormone creation, etc.); protein quality (plant vs. animal sources); recommended protein intake (weight in lbs./2.2=weight in kgx0.8= grams of protein needed by individual per day). The book provided a wealth of knowledge about protein (deficiency, special considerations, science of protein, etc.), but much of it cannot be used in this lesson, as it would take several weeks and several workshops to teach it all. The most helpful to this lesson plan was found on page 198-199, 205, 208-218.

Appendix of Support Materials

Small class lecture and activity to determine approximate protein needs and different foods you can find protein in. (15 minutes) (LO1, LO2)

DETERMINING APPROXIMATE PROTEIN REQUIREMENTS*:* The average adult should consume about 0.8 g per kg of body weight (lbs./2.2= weight in kg x 0.8)

Example: 130 lbs. / 2.2 = 59.1 59.1 x 47.3
SO a 130-pound person would need to consume about 47 grams of protein per day

Protein is found in
- Legumes
- Nuts
- Seeds
- Green Leafy Vegetables
- Grains
- Milk
- Eggs
- Cheese
- Soy Products

Class discussion about protein pairings and complete protein. (15 minutes) (LO4)

COMPLETE PROTEIN*:* protein source that contains all essential (9) amino acids. Does not necessarily include all 11 non-essential amino acids. Complete proteins include eggs and milk.

Essential Proteins must be obtained from food
Non-essential Proteins can be created by the body

Combine different sources of protein to reach complete protein: add dairy to your meal for complete protein, or:
- Legumes and nuts/seeds
- Legumes and grains
- Green leafy veggies and grains and legumes
- Green leafy veggies and nuts/seeds and legumes

Lori Andrews/Getty Images

Edamame: 18g per 1 cup cooked

Sheridan Stancliff/getty images

Tempeh: 16 grams protein per 3 oz. serving

4kodiak/Getty Images

Tofu: 8-15 grams protein per 3 oz. serving

chameleonseye/getty images

Lentils: 9 grams protein per ½ cup

Mitch Hrdlicka/getty images

Black Beans: 7.6 grams of protein per half cup cooked serving

Brian Yarvin/Getty Images

Lima Beans: 7.3 grams protein per ½ cup serving cooked

lauri patterson/getty images

Peanuts or Peanut Butter: 7 grams protein per ¼ cup serving (or 2 Tbsp. peanut butter)

4kodiak/Getty Images

Wild Rice: 6.5 grams protein per 1 cup cooked serving

Gil Guelfucci/getty images

Chickpeas: 6 grams protein per ½ cup serving

yelenayemchuk/getty images

Almonds: 6 grams protein per ¼ cup serving

shakzu/getty images

Chia Seeds: 6 grams protein per 2 Tbsp. serving

Image Source/Getty Images

Steel-Cut Oatmeal: 5 grams protein per ¼ cup dry serving

tashka2000/Getty Images

Cashews: 5 grams protein per ¼ cup serving

only fabrizio/getty images

Pumpkin Seeds: 5 grams protein per ¼ cup serving

gerenme/getty images

Potatoes: approx. 4 grams protein in 1 medium white potato

nata vkusidey/getty images

Spinach: 3 grams protein per ½ cup cooked serving

olgakr/getty images

Corn: 2.5 grams protein ½ cup serving

Luka/getty images

Broccoli: 2 grams protein per ½ cup cooked serving

cheche22/getty images

Brussels Sprouts: 2 grams protein per ½ cup serving

Nutrition Stripped

Quinoa: 7-9 grams protein per ½ cup cooked quinoa

Photo: Kathy Hester
http://www.wholefoodsmarket.com/blog/nutritional-yeast-one-pantry-staple-your-cooking-missing

Nutritional Yeast: 12 grams protein per 3 Tablespoons

Eggs: 6 grams protein per 1 med. whole egg
5 grams protein per 1 med. egg white

Photo By: irakite

Dairy Products: Cheese, Greek Yogurt, Milk, etc. 8-29 grams of protein

Lean Mean Veggie Machines Protecting the Environment

Danielle Cummings
HE 3230 Promoting Health Across the Lifespan
Plymouth State University
December 2017

Lean Mean Veggie Machines Helping the Environment
Danielle Cummings

Audience: College Students

Time & Format: 1 hour; lecture, jeopardy, and survey, and class discussion

Overview:
To inform students about the connection between vegetarianism and how it effects the planet compared to the typical American meat-based diet. The foods people choose to consume have a huge effect on the environment as explained with a short video, PowerPoint presentation, jeopardy game to test participants, survey to receive feedback about the learning experience, and discussion to talk about answers.

Goal: Increase the awareness of a vegetarian diet and its positive relationship with environmentalism compared to a meat-based diet.

Healthy People 2020 Objective(s):
Environmental Health: Promote health for all through a healthy environment.
1.) EH-3.3 Reduce the risk of adverse health effects caused by major sources of airborne toxics
2.) EH-11 Reduce the amount of toxic pollutants released into the environment

National Health Education Standards:

Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.
· 1.12.3 Analyze how the environment and personal health are interrelated.
· 1.12.7 Compare and contrast the benefits of and barriers to practicing a variety of healthy behaviors.

Standard 2: Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.
· 2.12.2 Analyze how the culture supports and challenges health beliefs, practices, and behaviors.
· 2.12.8 Analyze the influence of personal values and beliefs on individual health practices and behaviors.

Standard 5: Students will demonstrate the ability to use decision-making skills to enhance health.
· 5.12.1 Examine barriers that can hinder healthy decision making.
· 5.12.6 Defend the healthy choice when making decisions.

· 5.12.7 Evaluate the effectiveness of health-related decisions.

Standard 7: Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

· 7.12.1 Analyze the role of individual responsibility for enhancing health.

Specific Learning Outcomes:

After this workshop, participants will be able to:

1. Describe the 5 categories discussed that involve animal agriculture and how it negatively affects the planet
2. Analyze how much food and water is needed to raise animals in the industry.
3. Articulate several reasons why a vegetarian diet is more sustainable than a meat-based diet.
4. Describe the connection the between animal waste and the pollution of groundwater
5. Determine if peers, family, culture, and location affect diet.

Assessment Measures linked to Learning Objectives

· Video and lecture contain information about a meat-eater's diet and how becoming vegetarian can increase the health of the planet as well as all the citizens. (NHES 1)

· Jeopardy quizzes students to see if information is obtained. (NHES 1 & 5)

· Survey asks about relationship with diet and the individual as well as connection to peers and culture. Participants think about whether or not they could adopt a vegetarian diet and advocate. Also, individuals identify benefits and barriers that are perceived to be involved with a plant-based diet. (NHES 1, 2, 5, 7)

Materials and Preparation:

- Paper and pencils (notes)
- Internet access for YouTube video & jeopardy
- Survey Handouts

Background, Key Concepts & Terminology:

As meat consumption rises, the state of the environment goes down. Deforestation and climate change are only a couple examples of this. In addition, the amount of land and water used for animal agriculture could instead be used to supply crops for everyone in the world and solve world hunger.

(Information below is in PowerPoint)

· Land Usage- The want for meat is high meaning production rates are too. This equals a lot of land being used by the animals and the crops that feed them. Sadly, if there is no open land available, deforestation and destruction occurs. Tropical rain forests and ecosystems are being

taken over. The Smithsonian Institution says every minute there's seven football field's worth of land destroyed to support meat production.

· Growing Food- About one third to half of the world's crops is for animals so they get bigger for human consumption. In 2005, 56 percent of farmland is for beef production alone. As for the UK, 70 percent of land is used to grow animal feed. Since animal consumption rates have increased over the years, those percentages have increased since then. People all over the world eat meat but the food can't be grown in every country. The feed that's used to fatten the animals in Europe involves seven times the amount of area of the European Union (1,728,099 sq mi).

· Animals water consumption- Farm animals raised for food use the most water in the U.S.

o One cow can drink 50 gallons a day

o A pig drinks 21 gallons a day

o It takes over 2,400 gallons of water to make 1 pound of cow meat for a consumer. Versus 180 gallons of water to produce a pound of whole wheat flour.

· Animal waste- The waste of animals is a part of greenhouse gases leading to global warming. This can contribute to acid rain while also contaminating water. A giant factory sized farm with many animals squeezed into a small space leads up to an incredible amount of waste to the point where there's nowhere for it to go.

· Polluting Groundwater- About half of the nutrients in livestock waste becomes a part of soil, the leftover ends up polluting the air, water, and soil, being a part of CAFO's (concentrated animal feeding operation where animals are confined) caused by leaks on the farms. When a waste lagoon has a problem such as overflow or leaks, the contents trickles into groundwater, where pollutants make their way to local bodies of water. When this occurs, groundwater obtains too many nutrients, nitrogen and phosphorus for example, and organisms that are able to cause disease multiply in lagoons.

Teaching Steps (timed):

· **Activity 1:** Lecture (15 min)

o Ask students to take out pencils and paper to write down notes. Watch video (about 7 min), and recite lecture information about topic which is seen below and titled Activity 1.

· **Activity 2:** jeopardy (30 min)

o Have the class split up into two teams.

o Instruct rules of game

o Continue till all questions are gone and winner remains

· **Activity 3:** Survey (10 min)

1. What did you think about the workshop?
2. Were you shocked by what you learned? What are the most interesting facts that you'll take home with you?
3. Are your ideal meals meat-based?
4. Did the given information make you think twice about your current diet? If so, how?
5. What were your initial thoughts about vegetarians?
6. What do you think now/ would you say you're an advocate for vegetarianism?

7. What do you think would be some benefits and barriers if you were to try a vegetarian diet?
8. Do you plan on promoting this information to family, peers, and others to enhance health?

· **Activity 4:** Discuss as a group the answers to the survey questions.

Appendix of Support Materials:

· **Lean Mean Veggie Machine and Helping the Environment- PowerPoint**
· **Survey handout**

Annotated Resource Bibliography:

Goodall, J, McAvoy, G & Hudson, G. (2005). *Harvest for Hope.* New York, New York: Time Warner Book Group.

Jane Goodall is mainly known for her work with chimpanzees. She's a primatologist, ethologist, anthropologist, and author. This source was used to explain the growing of food for animals of human consumption in my presentation. It gives facts on how much land is needed for meat production around the world, and the abundance that's needed for their feed. Not all countries can grow the feed needed for animals so certain locations use more land than others and are considered suppliers.

Hextrum, C. (2016, February 10). Environmental Benefits of Veganism [Video file]. Retrieved from

https://www.youtube.com/watch?v=2bvoJAfjWMM

TEDx is an international community that organizes TED-style events anywhere. Locally-driven ideas are elevated to a global stage. Each event is created by the speaker, but based on TED's format and rules. This TED talk addressed climate change and its attachment to animal agriculture. For example, "If everybody were to stop using oil and gas entirely, we would see these effects in 100 years or so. But if everybody on earth were to go vegan, we would see these effects within decades." Some of these facts are also included in the jeopardy game.

Johnson, M. *JeopardyLabs*. Retrieved from

https://jeopardylabs.com/play/vegetarianism-the-environment

JeopardyLabs was created by Matt Johnson who's an undergraduate at Washington State University, Vancouver. JeopardyLabs is used to create a customized jeopardy template without PowerPoint. This is used as my first activity. In my own game, I included facts from the Tedx video and my PowerPoint.

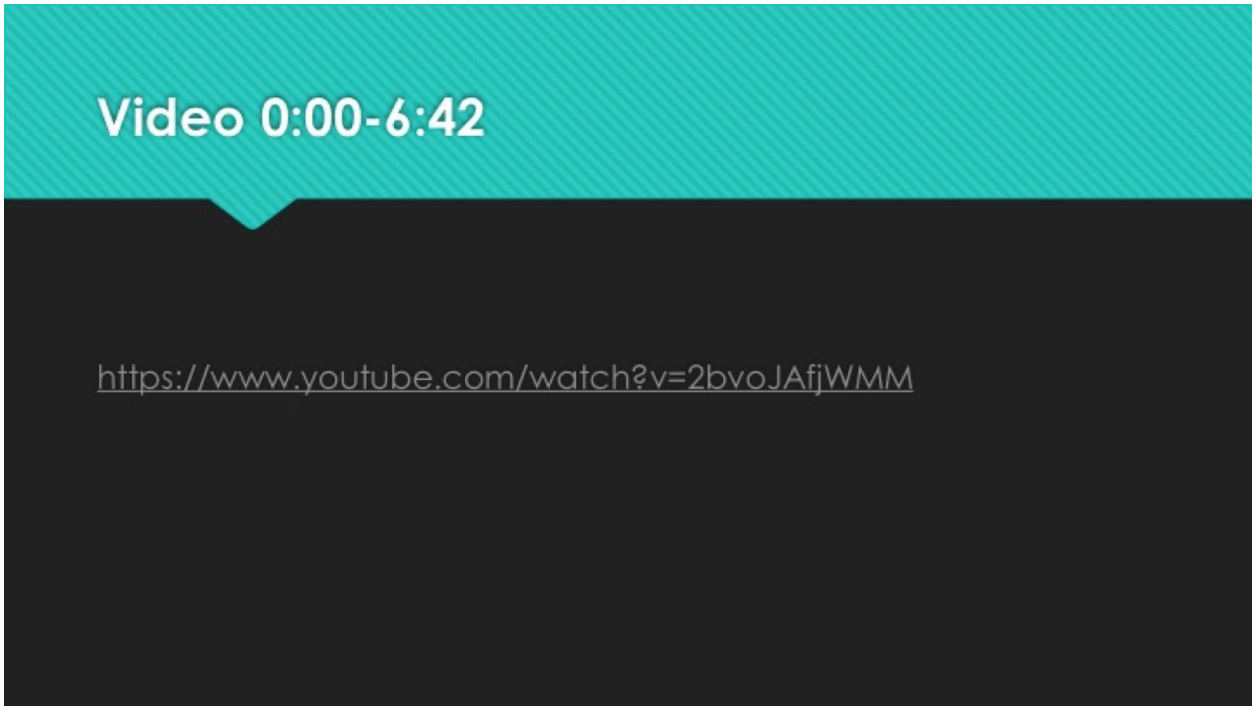
PETA*, PETA*. Norfold, VA. Retrieved from: https://www.peta.org/issues/animals-used-for-food/animals-used-foodfactsheets/vegetarianism-environment/

The author and date of the article were not found. Peta stands for People for the Ethical Treatment of Animals. It's the largest animal rights organization in the world. There's a focus on animal suffering with the food industry, clothing trade, in laboratories, and the entertainment industry. I used this source to touch on the amount of water needed for animal agriculture, as well as how water and the air is polluted due to this.

Saxena, A, (2011). *The Vegetarian Imperative.* Baltimore, MD: The John Hopkins University Press.

This source touched on the pollution of groundwater from the cause of animal waste. It contaminates not only water but also soil and air. I learned about CAFO's in this work which I haven't heard of beforehand. Large factory farms with high numbers of animals use them to confine the animals. The dangers of lagoons and what happens when there's a leak or overflow.

Activity 1: Lecture



Land Usage

- The want for meat is high meaning production rates are too.
- A lot of land is being used by the animals and the crops that feed them.
- If there is no open land available, deforestation and destruction occurs.
- Tropical rain forests and ecosystems are being taken over.

Growing Food

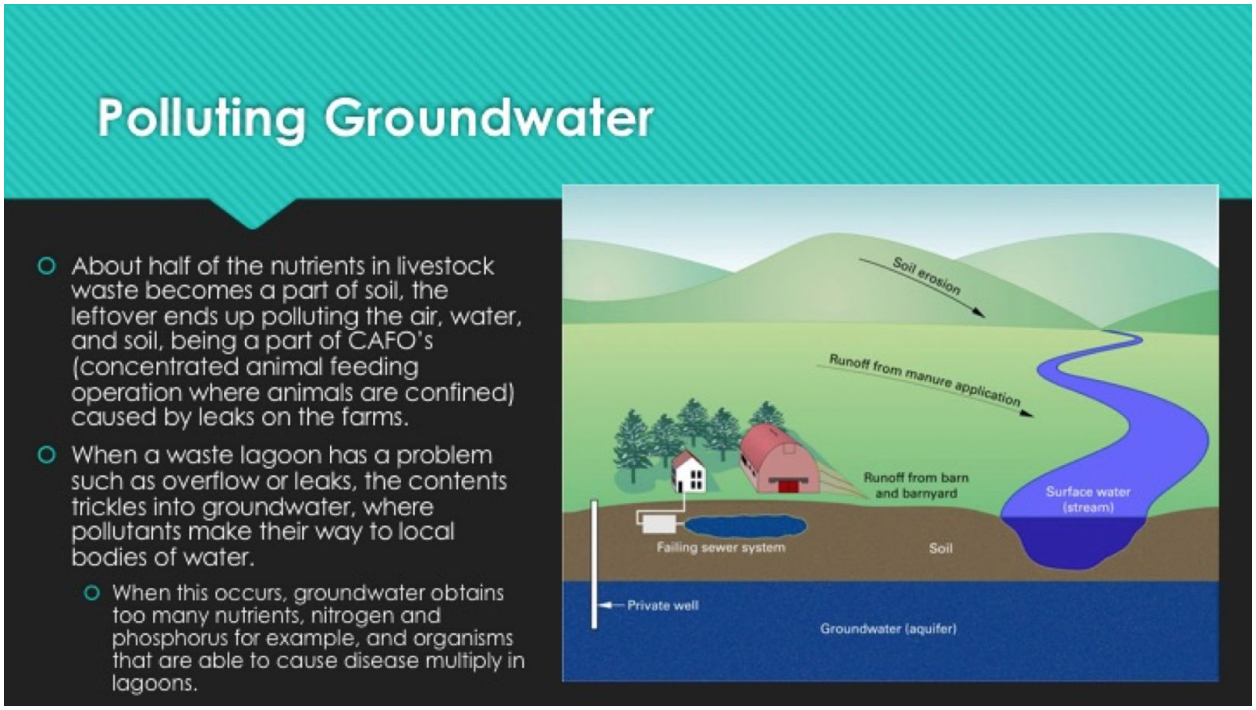
- About one third to half of the world's crops is for animals so they get bigger for human consumption.
- In 2005, 56 percent of farmland was for beef production alone.
  - As for the UK, 70 percent of land was used to grow animal feed. Since animal consumption rates have increased over the years, those percentages have increased since then.
- People all over the world eat meat but the food can't be grown in every country.
- The feed that's used to fatten the animals in Europe involves seven times the amount of area of the European Union (1,728,099 sq mi).

Animal Water Consumption

- Farm animals raised for food use the most water in the U.S.
  - One cow can drink 50 gallons a day
  - A pig drinks 21 gallons a day
  - It takes over 2,400 gallons of water to make 1 pound of cow meat for a consumer. Versus 180 gallons of water to produce a pound of whole wheat flour.

Animal Waste

- The waste of animals is a part of greenhouse gases leading to global warming.
- This can contribute to acid rain while also contaminating water.
- A giant factory sized farm with many animals squeezed into a small space leads up to an incredible amount of waste to the point where there's nowhere for it to go.



Activity 2: Jeopardy

jeopardylabs.com/play/vegetarianism-the-environment.

Activity 3: Survey

1. What did you think about the workshop?
2. Were you shocked by what you learned? What are the most interesting facts that you'll take home with you?
3. Are your ideal meals meat-based?
4. Did the given information make you think twice about your current diet? If so, how?
5. What were your initial thoughts about vegetarians?
6. What do you think now/ would you say you're an advocate for vegetarianism?
7. What do you think would be some benefits and barriers if you were to try a vegetarian diet?
8. Do you plan on promoting this information to family, peers, and others to enhance health?

Activity 4: Discuss as a group the answers to the survey questions.

Title: Portion Sizes!

Author: Rayanne Lepisto

Time & Format: 1 hour; in a residential building recreational lounge and kitchen.

Audience/Learners: College Students

Topic Overview: The purpose of this lesson plan is to teach college students about portion control, talking about how college and students' peers can affect portion sizes, and what resources are available on the Plymouth State University campus to students. This lesson plan will also talk about how college and students' peers can affect portion sizes.

Workshop Goal: To help make college students aware of portion sizes and discuss ideas/issues with eating portioned meals on campus, help make the college students aware of resources that are available on Plymouth State University Campus to help with portion control and nutrition questions.

Background: Over the years, the portion sizes for the American diet has gotten larger. Since the 1970s, food portion began to grow, and "rose sharply in the 1980s"; furthermore, the food portions have increased so much in "size and now exceed federal standards" (Young). According to the study, the "Contribution of Expanding Portion Sizes to the US Obesity Epidemic", the increasing portion sizes since the 1970s have "continued in parallel with increasing body weights" in the United States. The study concluded that because "energy content increases with portion size, educational and other public health efforts to address obesity should focus on the need for people to consume smaller portions".

It is important to discuss and teach people about how portion sizes can impact a person's health, how to assess healthy portion sizes, and how a person's peers, environment, and other factors can impact what size portion the person chooses. The first step is to discuss how portion sizes can affect a person's health. If a person has healthy portion sizes, the person may be healthier, have healthier food habits, and so on.

Terminology:

1. Portion Sizes: “is how much food you choose to eat at one time, whether in a restaurant, from a package, or at home”.
2. Serving Size (or serving size): “is the amount of food listed on a product's Nutrition Facts, or food label”.

Source: Just Enough for You: About Food Portions. (2016, December). Retrieved from National Institute of Diabetes and Digestive and Kidney Diseases website: https://www.niddk.nih.gov/health-information/weight-management/just-enough-food-portions

Key Concepts

1. How To Assess Portion Sizes Using Your Hand (Presented in a chart)
2. How to Manage Portion Sizes At Home
3. How to Manage Portion Sizes Going Out to Eat
4. What is myPlate?
   - Website: https://www.choosemyplate.gov/
   - Organization run by the United States Department of Agriculture
   - “MyPlate offers ideas and tips to help you create a healthier eating style that meets your individual needs and improves your health”.
   - Teaches portion sizes, and the importance of getting the right amount of nutrients.
   - Variety of online resources available for all ages, for families, and professionals.

Healthy People 2020 Objective(s):

- HC/HIT-5: Increase the proportion of persons who use electronic personal health management tools.
- HC/HIT-9: Increase the proportion of online health information seekers who report easily accessing health information.

National Health Education Standards Addressed:

- **Standard 1**: Students will comprehend concepts related to health promotion and disease prevention to enhance health.
  - 1.8.1: Analyze the relationship between healthy behaviors and personal health.
  - 1.8.7: Describe the benefits of and barriers to practicing healthy behaviors.
- **Standard 2:**Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.

    - 2.12.3: Analyze how peers influence healthy and unhealthy behaviors.
    - 2.12.6: Evaluate the impact of technology on personal, family, and community health.
    - 2.12.7: Analyze how the perceptions of norms influence healthy and unhealthy behaviors.
- **Standard 5:** Students will demonstrate the ability to use decision-making skills to enhance health.
    - 5.12.1: Examine barriers that can hinder healthy decision making.
    - 5.12.2: Determine the value of applying a thoughtful decision-making process in health-related situations.
- **Standard 7:** Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.
    - 7.12.1: Analyze the role of individual responsibility for enhancing health.
    - 7.12.2: Demonstrate a variety of healthy practices and behaviors that will maintain or improve the health of self and others.
    - 7.12.3: Demonstrate a variety of behaviors to avoid or reduce health risks to self and others.

Specific Learning Objectives (linked to NHES and assessments):
Through participation in this workshop learners will be able to:
[1: Describe three ways to integrate appropriate portion sizes into daily meals. (NHES 1, 2, &7)
[2: Conduct a measurement of portion sizes for a meal using online information and information given in the lesson; myPlate handouts and SuperTracker. (NHES 1,5)
[3: Describe three resources that are available on the Plymouth State University Campus for nutrition (NHES 1, 7)
[4: Describe three ways that peers, technology, and media can affect portion control. (NHES 1 & 2)
[5: Describe three ways how appropriate portion sizes can benefit health. (NHES 1, 7)

Teaching Steps:

o **Activity 1:** Lecture. Talk about MyPlate and portion control information for 20 minutes.
- For lecture material, see Portion Sizes Powerpoint or "Activity One: Lecture Key Concepts & Terminology" below.

o **Activity 2:** Have a few meals prepared--such as a salad, apples or a bowl of berries, yogurt, milk, wheat toast or rice, and some cooked chicken (or other meat). Go to the kitchen and have students use myPlate portion sizes and SuperTracker to assess how well they can measure portions for 20 minutes.
o **Ask/Examine: Activity 3-** Gather students and engage in a group discussion. Integrate and ask discussion questions for ten minutes.

- **Discussion questions:**

1. What is the portion sizes of a cup of milk and yogurt?
2. What is the portion size of cooked vegetables?
3. What is the portion size of a bowl of salad?
4. What is the portion size of a piece of fruit (such as an apple)?
5. What is the portion size of a piece of bread?
6. What is the portion size of a piece of meat (chicken, beef, fish, pork)?
7. What is the portion size of some peanut butter?
8. Do you think living on a college campus affects portion size? How?
9. Do you think that media affects portion size? How?
10. What can you do to help make better choices about portion size?
11. What can you do to help others make better choices about nutrition and portion size?
12. What are some resources on the PSU campus that can help with nutrition and portion size information?

o **Activity 4:** Have group create a list on how to apply portion control in their lives for 10 minutes.

Assessment Measures:
AM 1: Go to the kitchen and have students use myPlate and information to assess how well they can measure portions. Have the students practice measuring appropriate food portions for various foods and calculate calorie content.
AM 2: Group discussion on portion sizes of meat, dairy, fruits, vegetables, and come up with a list on how to apply portion control in their lives. See discussion questions provided above.

Materials, Resources, Preparation:

- -Preparation: Prepare some food of your choice that meet myPlate nutrient recommendations (fruit, vegetables, grain, dairy, meat) prior to the activity taking place. This will prepare the college students for the second learning activity.
    - Some suggestions are: a salad, bowl of berries, yogurt, milk, couscous, wheat bread, vegetarian option: vegetarian beans, grilled chicken.
- **Materials:**
    - myPlate handouts:
    - Cooking supplies
    - Vegetables: Salad-(lettuce, peppers, croutons, feta cheese, cucumbers, carrots).
    - Protein Options:
        - Grilled chicken
        - Vegetarian Beans (Option for vegetarians)
    - Fruit: bowl of berries
    - Grains: Couscous, Wheat bread

- Dairy: yogurt, milk
- Other supplies: paper plates, forks, paper, and pencils.

Appendix of Support Materials

- **Portion Sizes! Powerpoint**
- **Activity One: Lecture Key Concepts & Terminology Notes**
- **MyPlate Handouts**
- **Discussion Questions**

Annotated Resource Bibliography

Appendix 2. Estimated Calorie Needs Per Day, By Age, Sex, and Physical Activity Level. (2015). Retrieved from Dietary Guidelines 2015-2020 website: https://health.gov/dietaryguidelines/2015/guidelines/appendix-2/

This source was provided by the Office of Disease Prevention and Health Promotion; which is a United States government run organization. This source was used in this lesson plan to teach college students about the estimated calorie needs for people per day. This source also talked about factors that contribute to and influence a person's calorie needs per day; which is age, sex, and physical activity level.

Counseling Center. (2017). Retrieved from Plymouth State University website: https://www.plymouth.edu/current-students/student-success/care-support/care-support/counseling-center/

This source is provided by Plymouth State University. This source is being used to inform Plymouth State University students about resources that are available on the Plymouth State University campus for nutrition information and health. Resources that were mentioned in the lesson plan from this source was the Health Center and the Michael L. Fischler Counseling Center, what the resources offered, and where the buildings were on the Plymouth State University Campus.

Just Enough for You: About Food Portions. (2016, December). Retrieved from National Institute of Diabetes and Digestive and Kidney Diseases website: https://www.niddk.nih.gov/health-information/weight-management/just-enough-food-portions

This source is provided by the U.S. Department of Health and Human Services. This source provided information for the lecture portion of the lesson plan on portion sizes versus serving size, how to manage portion sizes at home and going out to eat, and much more information on nutrition labels and how to keep track of what you eat.

National Health Education Standards. (2016, August 18). Retrieved from Centers For Disease Control and Prevention website: https://www.cdc.gov/healthyschools/sher/standards/index.htm

This source is provided by the Centers For Disease Control and Prevention, which is a United States government run organization. This source provided the National Health Education Standards for this lesson plan. The NHES used for this lesson plan was NHES 1, 2, 5, 6, and 7. This source also talked about information about the NHES and stressed the importance that the NHES are “written expectations for what

students should know and be able to do by grades 2, 5, 8, and 12 to promote personal, family, and community health. The standards provide a framework for curriculum development and selection, instruction, and student assessment in health education..

Nutrition. (2017). Retrieved from Plymouth State University website: https://campus.plymouth.edu/dining/nutrition/

This source is provided by Plymouth State University. This source is being used to inform Plymouth State University students about resources that are available on the Plymouth State University campus for nutrition information and health. Resources that were mentioned in the lesson plan from this source was information and contact information about the Plymouth State University On-Campus Registered Dietitian and about how Plymouth State University has menus for dietary restrictions and nutrition facts displayed by food in the dining hall.

Serving Size Chart. (2016). Retrieved from Healthy Eating website: https://www.healthyeating.org/Portals/0/Documents/Tip%20Sheets/Portion_Serving_Size_Chart_Eng.pdf?ver=2016-09-15-112633-477

This source was provided by the Dairy Council of California. This source provided a visual chart for serving size for the lesson plan. The chart used a person's hand as a measurement for food portions. This source will be used in the lesson plan to teach college students about how to measure food portion sizes using their hands.

SuperTracker: My Foods. My Fitness. My health. (2017). Retrieved from SuperTracker website: https://supertracker.usda.gov/

This source is provided by the United States Department of Agriculture. This source is being used as a referral resource for college students in this lesson plan. This source is a free food, physical activity, and weight tracking tool from ChooseMyPlate.gov; which offers group or individual tracking services on a person's food intake and physical activity levels. This source also provides reports on meeting your target goal (or if you are lacking in your goal) for nutrients and helps you reach your health and wellness goals

2020 Topics and Objectives – Objectives A–Z. (2017, December 4). Retrieved from HealthyPeople.Gov website: https://www.healthypeople.gov/2020/topics-objectives

This source is brought to you by Healthy People 2020, which is a United States government run organization. For each topic and objective, there is an overview of the topic, objectives and data (when able to provide data) and evidence-based resources for further research, This source is helpful because it provided Healthy People 2020 Objectives for this lesson plan.

Wellness Tools. (2017). Retrieved from Plymouth State University website: https://campus.plymouth.edu/dining/nutrition/wellness-tools/

This source is provided by Plymouth State University. This source is being used to inform Plymouth State University students about resources that are available on the Plymouth State University campus for nutrition information and health. Resources that were mentioned in the lesson plan from this source was PSU Wellness Tools; such as

using the app MyFitnessPal and Sodexo's Nutrition Calculator to plan and track your meals. SuperTracker is also listed on the site; which is a resource that was discussed in the lesson plan.

Young, L. R., & Nestle, M. (2002, February). The Contribution of Expanding Portion Sizes to the US Obesity Epidemic. Retrieved from US National Library of Medicine National Institutes of Health website: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1447051/

This source is provided from the U.S. National Library of Medicine National Institutes of Health, which is a United States run organization. This source is a study that researched if "larger food portions could be contributing to the increasing prevalence of overweight and obesity"; and was designed to "weigh samples of marketplace foods, identify historical changes in the sizes of those foods, and compare current portions with federal standards". The study "obtained information about current portions from manufacturers or from direct weighing..[and] obtained information about past portions from manufacturers or contemporary publications". This source provided information on the results of the study as well as some facts about portion sizes for the background information. .

Serving Size Chart

Serving-Size Chart

of CALIFORNIA
Healthy Eating Made Easier

FOOD	SYMBOL	COMPARISON	SERVING SIZE
Dairy: Milk, Yogurt, Cheese			
Cheese (string cheese) 		Pointer finger	1½ ounces
Milk and yogurt (glass of milk) 		One fist	1 cup
Vegetables			
Cooked carrots 		One fist	1 cup
Salad (bowl of salad) 		Two fists	2 cups
Fruits			
Apple 		One fist	1 medium
Canned peaches 		One fist	1 cup
Grains: Breads, Cereals, Pasta			
Dry cereal (bowl of cereal) 		One fist	1 cup
Noodles, rice, oatmeal (bowl of noodles) 		Handful	½ cup
Slice of whole-wheat bread 		Flat hand	1 slice
Protein: Meat, Beans, Nuts			
Chicken, beef, fish, pork (chicken breast) 		Palm	3 ounces
Peanut butter (spoon of peanut butter) 		Thumb	1 tablespoon

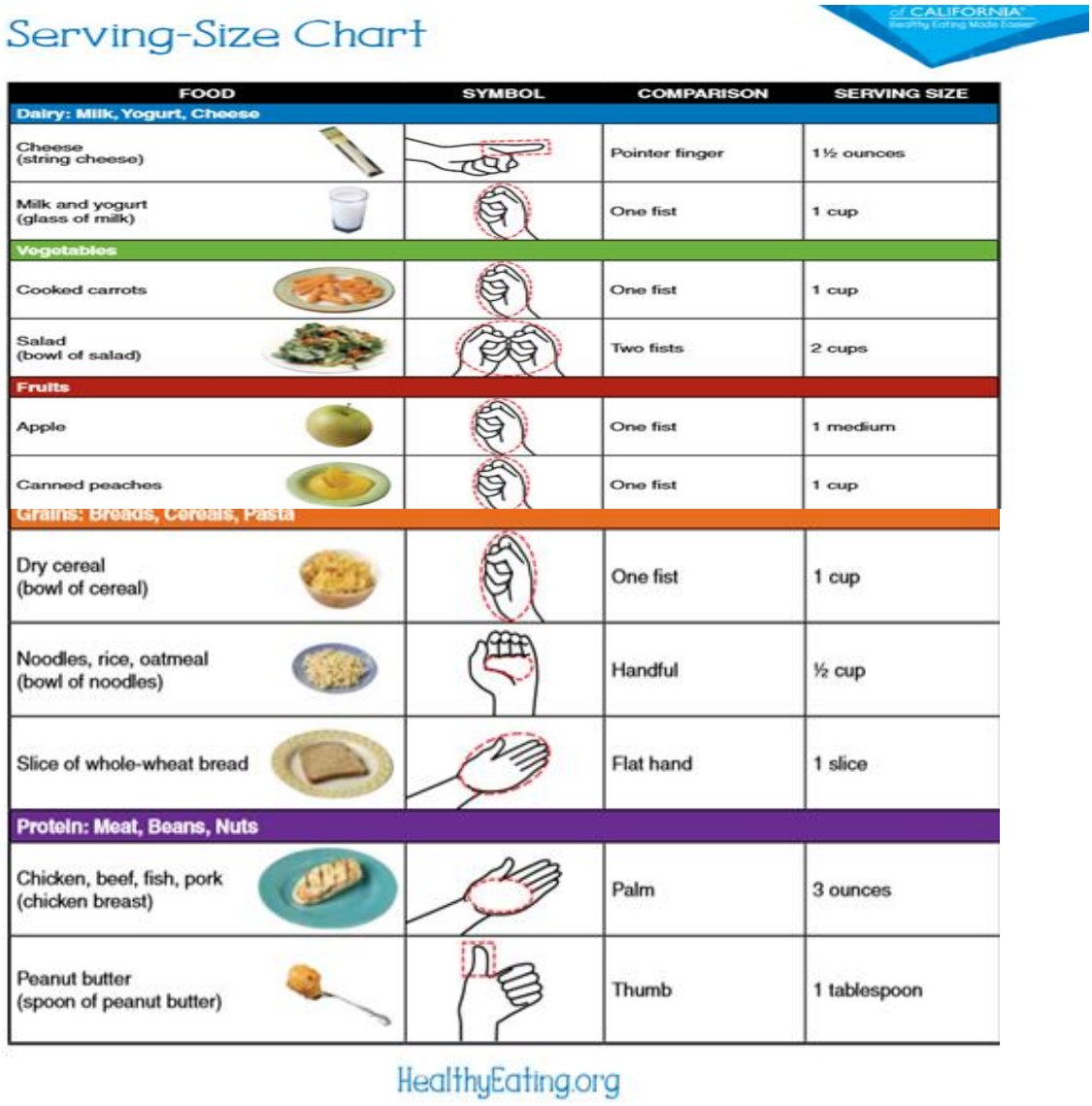
HealthyEating.org

Portion Size Lesson Plan Hand Out

Activity One: Lecture Key Concepts & Terminology:

- **Portion vs. Serving Size**
  - Portion "is how much food you choose to eat at one time, whether in a restaurant, from a package, or at home".
  - Serving (or serving size): "is the amount of food listed on a product's Nutrition Facts, or food label".
    - **Source:** Just Enough for You: About Food Portions. (2016, December). Retrieved from National Institute of Diabetes and Digestive and Kidney Diseases website: https://www.niddk.nih.gov/health-information/weight-management/just-enough-food-portions

Serving Size Chart



Source: Serving Size Chart. (2016). Retrieved from Healthy Eating website: https://www.healthyeating.org/Portals/0/Documents/Tip%20Sheets/Portion_Serving_Size_Chart_Eng.pdf?ver=2016-09-15-112633-477

Benefits of Portion Sizes

- Positive impact on your health
- Eating appropriate portioned food size
- Healthier eating habits

How To Manage Portion Sizes At Home

1. "Take one serving according to the food label and eat it off a plate instead of straight out of the box or bag".
2. "Avoid eating in front of the TV, while driving or walking, or while you are busy with other activities."
3. "Focus on what you are eating, chew your food well, and fully enjoy the smell and taste of your food".
4. "Eat slowly so your brain can get the message that your stomach is full, which may take at least 15 minutes".
5. "Use smaller dishes, bowls, and glasses so that you eat and drink less".
6. "Eat fewer high-fat, high-calorie foods, such as desserts, chips, sauces, and prepackaged snacks."
7. "Freeze food you won't serve or eat right away, if you make too much. That way, you won't be tempted to finish the whole batch. If you freeze leftovers in single- or family-sized servings, you'll have ready-made meals for another day".
8. "Eat meals at regular times. Leaving hours between meals or skipping meals altogether may cause you to overeat later in the day".
9. "Buy snacks, such as fruit or single-serving, prepackaged foods, that are lower in calories. If you buy bigger bags or boxes of snacks, divide the items into single-serve packages right away so you aren't tempted to overeat".

- **Source:** Just Enough for You: About Food Portions. (2016, December). Retrieved from National Institute of Diabetes and Digestive and Kidney Diseases website: https://www.niddk.nih.gov/health-information/weight-management/just-enough-food-portions

How To Manage Portion Sizes When Going Out To Eat

1. "Share a meal with a friend, or take half of it home".
2. "Avoid all-you-can-eat buffets".
3. "Order one or two healthy appetizers or side dishes instead of a whole meal. Options

include steamed or grilled—instead of fried—seafood or chicken, a salad with dressing on the side, or roasted vegetables".

4. "Ask to have the bread basket or chips removed from the table".
5. "If you have a choice, pick the small-sized—rather than large-sized—drink, salad, or frozen yogurt".
6. "Stop eating and drinking when you're full. Put down your fork and glass, and focus on enjoying the setting and your company for the rest of the meal".

o **Source:** Just Enough for You: About Food Portions. (2016, December). Retrieved from National Institute of Diabetes and Digestive and Kidney Diseases website: https://www.niddk.nih.gov/health-information/weight-management/just-enough-food-portions

What is myPlate?

- Website :https://www.choosemyplate.gov/
- Organization run by the United States Department of Agriculture
- "MyPlate offers ideas and tips to help you create a healthier eating style that meets your individual needs and improves your health".
- Teaches portion sizes, and the importance of getting the right amount of nutrients.
- Has recipes and an immense amount of resources for all ages, for families, and professionals.
- Hand out that breaks down 5 main food groups of the myPlate: https://choosemyplate-prod.azureedge.net/sites/default/files/printablematerials/2013-WhatsMyPlateAllAbout.pdf
- Other Hand Outs Useful for college students from myPlate:
    - **"Mini Fridge Makeover":**
        - https://choosemyplate-prod.azureedge.net/sites/default/files/printablematerials/DGTipsheet27MiniFridgeMakeover.pdf
    - **"Be Choosey in the Dining Hall":**
        - https://choosemyplate-prod.azureedge.net/sites/default/files/printablematerials/DGTipsheet26BeChoosyintheDiningHall.pdf
    - **"Eating Meals On a Budget":**
        - Https://whatscooking.fns.usda.gov/sites/default/files/featuredlinks/MeetingYourMyPlateGoalsOnABudget.pdf
    - **Recipes from myPlate!**
        - https://www.choosemyplate.gov/recipes-cookbooks-and-menus

- **Daily Calorie Target**
  - ***Please Note: your daily calorie intake differs from person to person because of age, weight, medical conditions, etc. Check with your doctor first!***

FEMALES

AGE	Sedentary[a]	Moderately active[b]	Active[c]
17	1,800	2,000	2,400
18	1,800	2,000	2,400
19-20	2,000	2,200	2,400
21-25	2,000	2,200	2,400

  - **Source:** Appendix 2. Estimated Calorie Needs Per Day, By Age, Sex, and Physical Activity Level. (2015). Retrieved from Dietary Guidelines 2015-2020 website: https://health.gov/dietaryguidelines/2015/guidelines/appendix-2/

Resources:

- **Estimated Calorie Needs Per Day**
  - https://health.gov/dietaryguidelines/2015/guidelines/appendix-2/

o **https://supertracker.usda.gov/**

- "free food, physical activity, and weight tracking tool from ChooseMyPlate.gov".
- Groups or individual
- Track your food intake and/or physical activity. *If in group, you can opt out to not share this info with your group leader
- Reports on if you are meeting your target goal for nutrients.
- Help you reach your health and wellness goals.

Resources on Plymouth State University Campus

- **On-Campus Registered Dietitian**
  - Registered Dietitian: Diahnn Thompkins
  - Contact Information: (603) 535-3186 or dmthompkins@plymouth.edu.

- **Nutrition Information**
  - Menus for dietary restrictions
  - Nutrition facts displayed by food in the dining hall

- **Source:** Nutrition. (2017). Retrieved from Plymouth State University website: https://campus.plymouth.edu/dining/nutrition/

- **PSU Wellness Tools**
  - **Nutrition Tracker**
    - "Use MyFitnessPal and Sodexo's Nutrition Calculator to plan and track your meals".
  - **SuperTracker**
    - "Track what you currently eat and drink"
    - "Give you a personalized plan for what you should eat and drink"
    - "Guide you to make better choices"

- **Source:** Wellness Tools. (2017). Retrieved from Plymouth State University website: https://campus.plymouth.edu/dining/nutrition/wellness-tools/

- **Health Services**
  - Located at 12 Merrill Street (Mary Taylor House), across from Hyde Hall and next to Centre Lodge.
  - Where you can go if you are feeling unwell etc.

- **Michael L. Fischler Counseling Center**
  - Variety of services; some examples are mental health counseling and help for eating disorders.
  - Located next to the Hyde Building.

- **Source:** Counseling Center. (2017). Retrieved from Plymouth State University website: https://www.plymouth.edu/current-students/student-success/care-support/care-support/counseling-center/

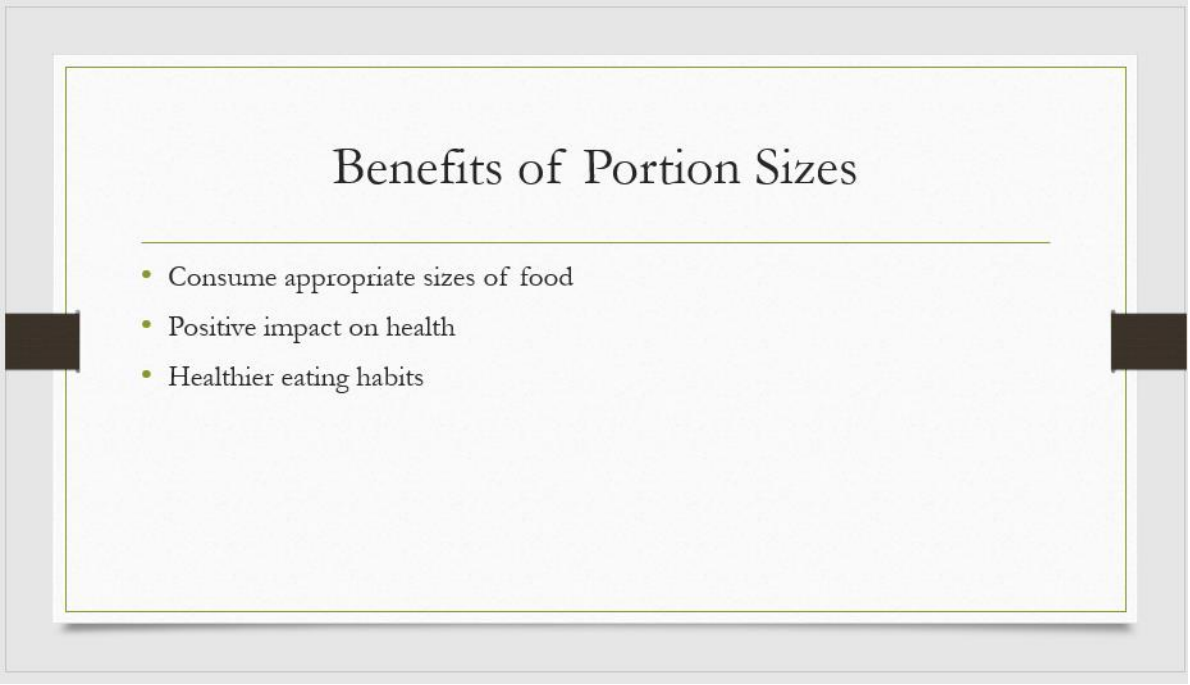
PowerPoint For Lecture

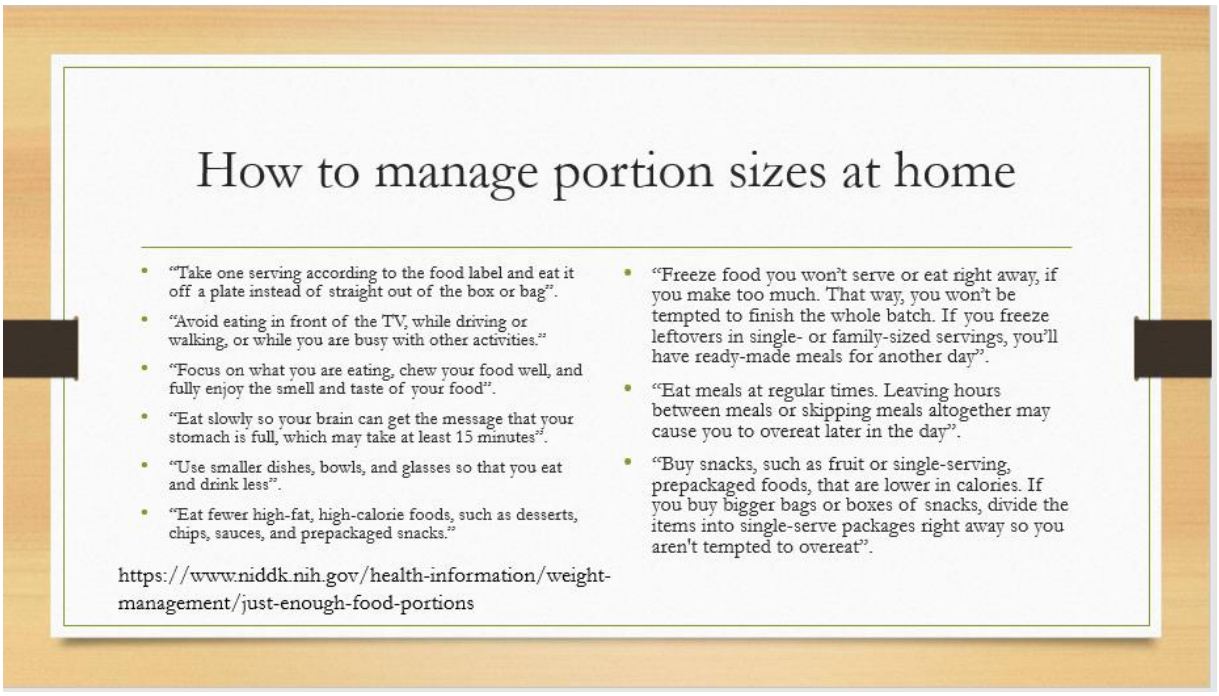
Portion VS. Serving Size

- Portion "is how much food you choose to eat at one time, whether in a restaurant, from a package, or at home".
- Serving (or serving size): "is the amount of food listed on a product's Nutrition Facts, or food label".
- Nutrition label updated May 2016

Portion Sizes

- Serving Size Chart: https://www.healthyeating.org/Portals/0/Documents/Tip%20Sheets/Portion_Serving_Size_Chart_Eng.pdf?ver=2016-09-15-112633-477


Benefits of Portion Sizes
Consume appropriate sizes of food
Positive impact on health
Healthier eating habits


How to manage portion sizes at home
"Take one serving according to the food label and eat it off a plate instead of straight out of the box or bag".
"Avoid eating in front of the TV, while driving or walking, or while you are busy with other activities."
"Focus on what you are eating, chew your food well, and fully enjoy the smell and taste of your food".
"Eat slowly so your brain can get the message that your stomach is full, which may take at least 15 minutes".
"Use smaller dishes, bowls, and glasses so that you eat and drink less".
"Eat fewer high-fat, high-calorie foods, such as desserts, chips, sauces, and prepackaged snacks."
"Freeze food you won't serve or eat right away, if you make too much. That way, you won't be tempted to finish the whole batch. If you freeze leftovers in single- or family-sized servings, you'll have ready-made meals for another day".
"Eat meals at regular times. Leaving hours between meals or skipping meals altogether may cause you to overeat later in the day".
"Buy snacks, such as fruit or single-serving, prepackaged foods, that are lower in calories. If you buy bigger bags or boxes of snacks, divide the items into single-serve packages right away so you aren't tempted to overeat".
https://www.niddk.nih.gov/health-information/weight-management/just-enough-food-portions

How to manage portion sizes going out to eat

- "Share a meal with a friend, or take half of it home".
- "Avoid all-you-can-eat buffets".
- "Order one or two healthy appetizers or side dishes instead of a whole meal. Options include steamed or grilled—instead of fried—seafood or chicken, a salad with dressing on the side, or roasted vegetables".
- "Ask to have the bread basket or chips removed from the table".
- "If you have a choice, pick the small-sized—rather than large-sized—drink, salad, or frozen yogurt".
- "Stop eating and drinking when you're full. Put down your fork and glass, and focus on enjoying the setting and your company for the rest of the meal".

https://www.niddk.nih.gov/health-information/weight-management/just-enough-food-portions

How much should I eat?

- How many calories you need each day depends on: your age, weight, metabolism, male or female, activity level, etc.
  - Ex: Joelle, who is a150 lb woman, burns a lot of calories through very intense physical activity. Examples are "fast running, several times a week". Joelle will need to consume more calories than Karen, who is a women about the same size as Joelle, but only goes on a short walk once per week.
  - The Dietary Guidelines for Americans 2015-2020 "can give you an idea of how many calories you may need each day based on your age, sex, and physical activity level".

Daily Calorie Target

FEMALES

AGE	Sedentary[a]	Moderately active[b]	Active[c]
17	1,800	2,000	2,400
18	1,800	2,000	2,400
19-20	2,000	2,200	2,400
21-25	2,000	2,200	2,400

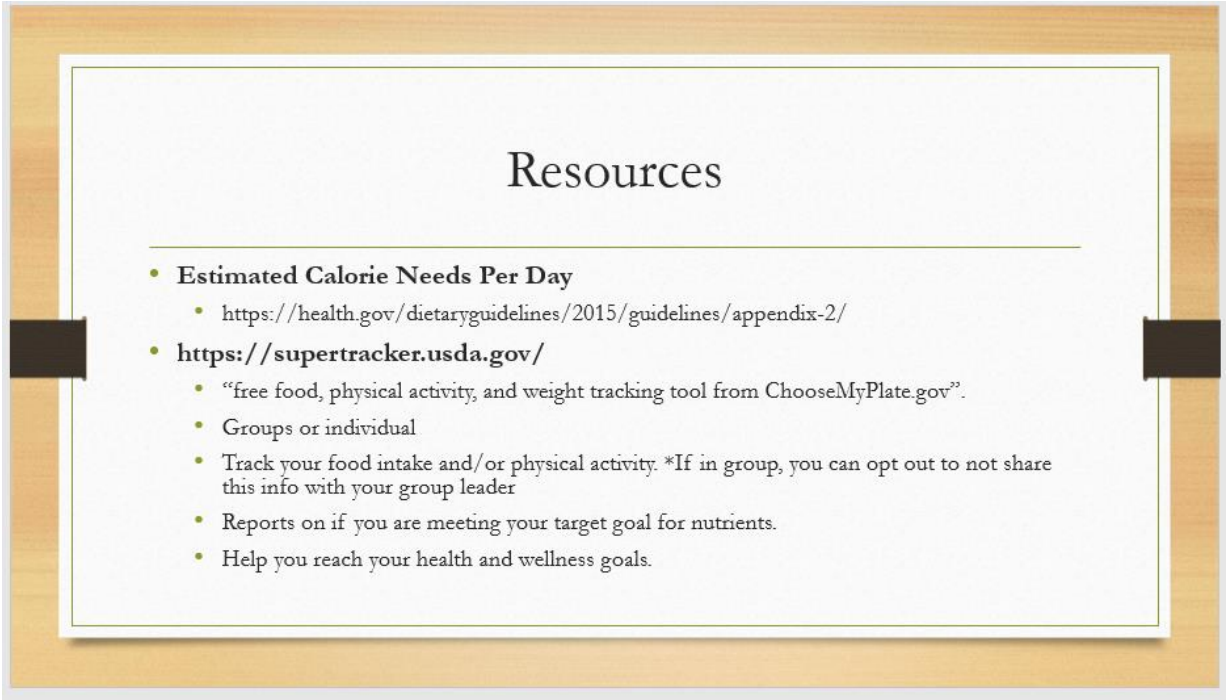
https://health.gov/dietaryguidelines/2015/guidelines/appendix-2/

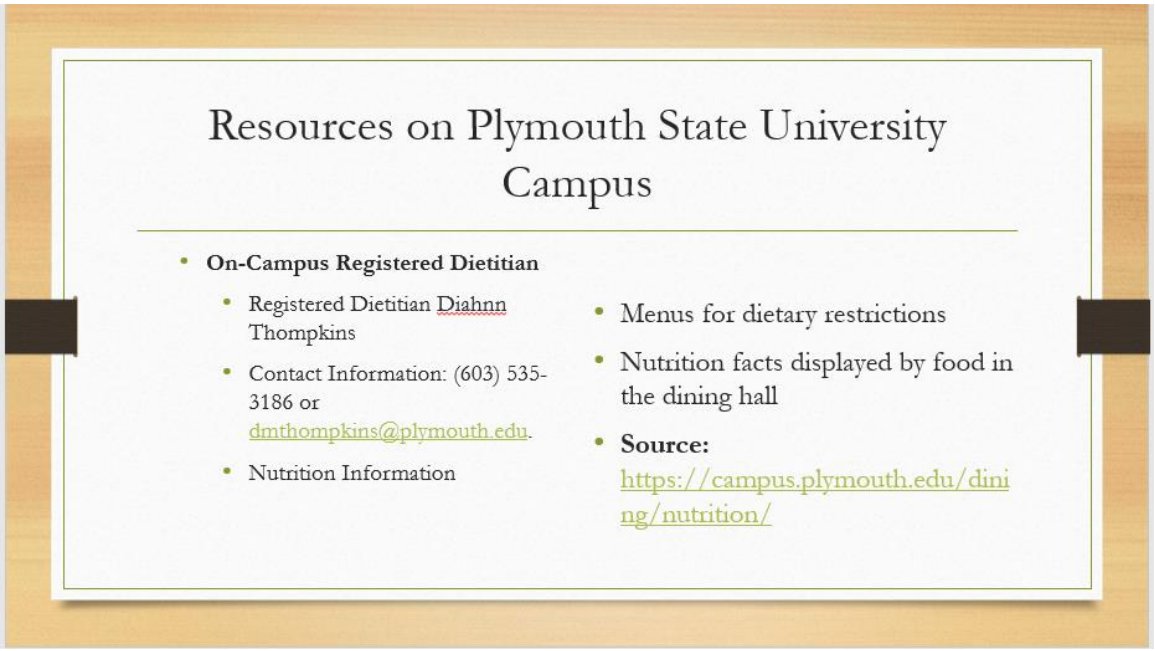
Please Note: this can differ because of weight, medical conditions, etc. Check with your doctor!

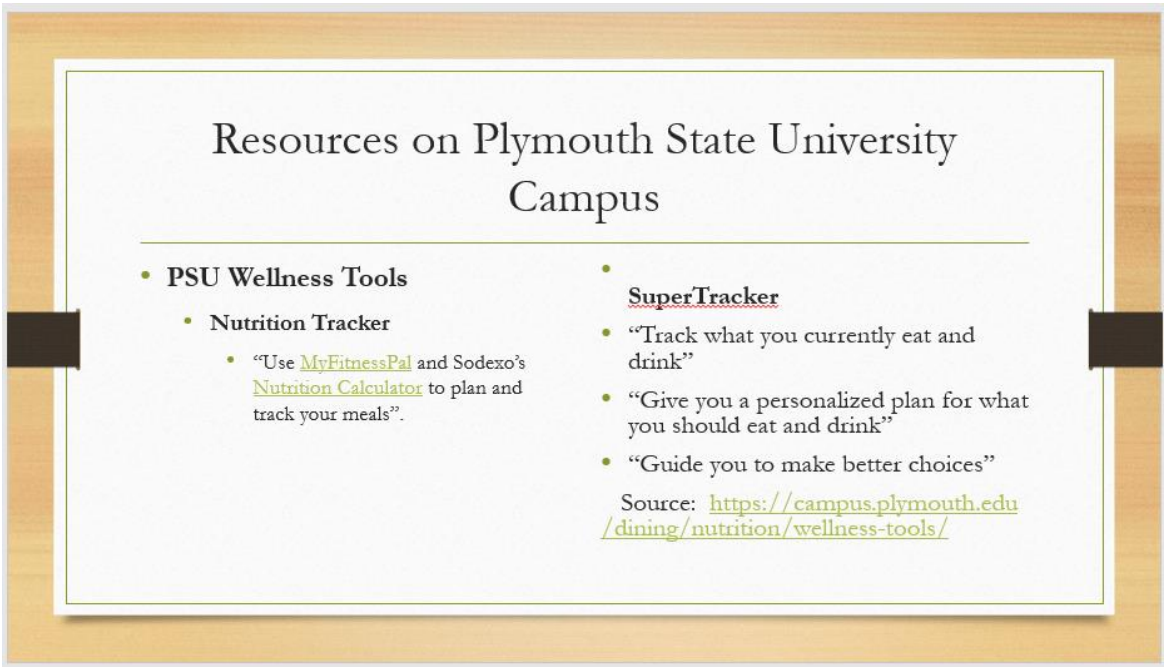
What's myPlate?

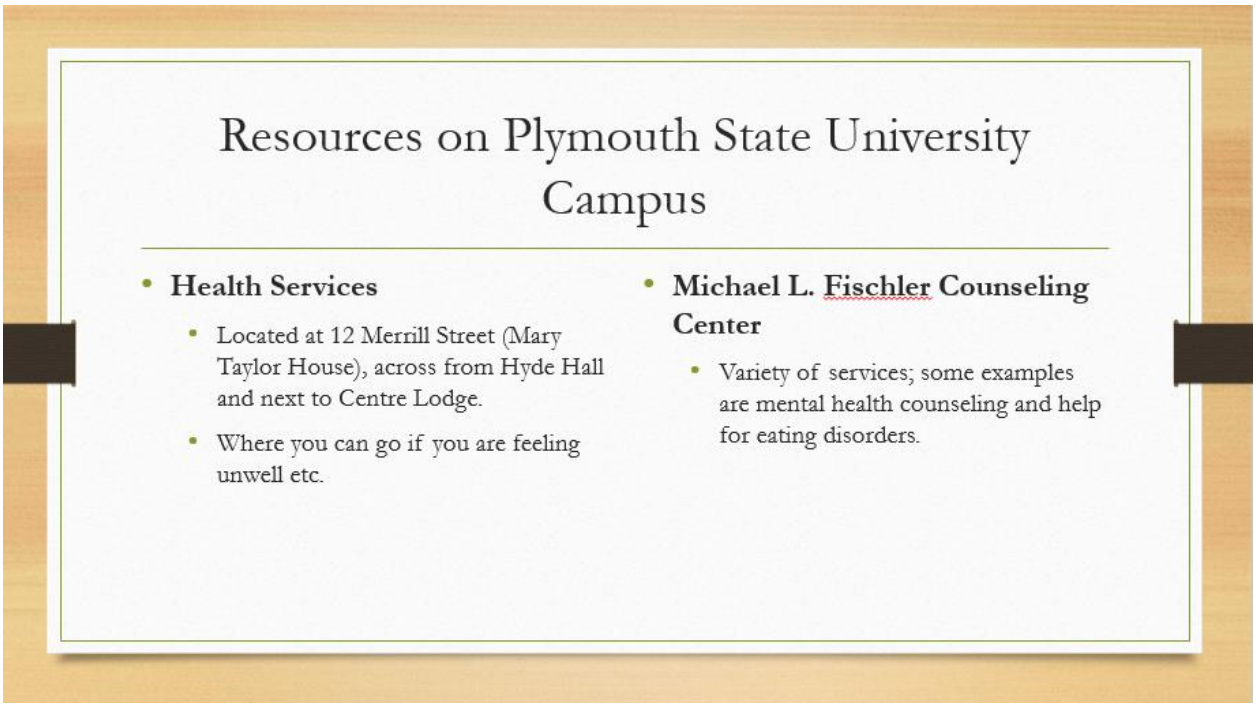
- Website :https://www.choosemyplate.gov/
- Organization run by the United States Department of Agriculture
- "MyPlate offers ideas and tips to help you create a healthier eating style that meets your individual needs and improves your health".
- Teaches portion sizes, and the importance of getting the right amount of nutrients.
- Has recipes and an immense amount of resources for all ages, for families, and professionals.


What is myPlate About?
Hand out that breaks down 5 main food groups of the myPlate: https://choosemyplate-prod.azureedge.net/sites/default/files/printablematerials/2013-WhatsMyPlateAllAbout.pdf
Other Hand Outs Useful for college students from myPlate:
"Mini Fridge Makeover":
https://choosemyplate-prod.azureedge.net/sites/default/files/printablematerials/DGTipsheet27MiniFridgeMakeover.pdf
"Be Choosey in the Dining Hall":
https://choosemyplate-prod.azureedge.net/sites/default/files/printablematerials/DGTipsheet26BeChoosyintheDiningHall.pdf
"Eating Meals On a Budget":
https://whatscooking.fns.usda.gov/sites/default/files/featuredlinks/MeetingYourMyPlateGoalsOnABudget.pdf
Recipes from myPlate!
https://www.choosemyplate.gov/recipes-cookbooks-and-menus


Resources
Estimated Calorie Needs Per Day
https://health.gov/dietaryguidelines/2015/guidelines/appendix-2/
https://supertracker.usda.gov/
"free food, physical activity, and weight tracking tool from ChooseMyPlate.gov".
Groups or individual
Track your food intake and/or physical activity. *If in group, you can opt out to not share this info with your group leader
Reports on if you are meeting your target goal for nutrients.
Help you reach your health and wellness goals.


Resources on Plymouth State University Campus
On-Campus Registered Dietitian
Registered Dietitian Diahnn Thompkins
Contact Information: (603) 535-3186 or dmthompkins@plymouth.edu.
Nutrition Information
Menus for dietary restrictions
Nutrition facts displayed by food in the dining hall
Source: https://campus.plymouth.edu/dining/nutrition/


Resources on Plymouth State University Campus
PSU Wellness Tools
Nutrition Tracker
"Use MyFitnessPal and Sodexo's Nutrition Calculator to plan and track your meals".
SuperTracker
"Track what you currently eat and drink"
"Give you a personalized plan for what you should eat and drink"
"Guide you to make better choices"
Source: https://campus.plymouth.edu/dining/nutrition/wellness-tools/


Resources on Plymouth State University Campus
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Where you can go if you are feeling unwell etc.
Michael L. Fischler Counseling Center
Variety of services; some examples are mental health counseling and help for eating disorders.

Valuable Veggies

By: Andrea Gilbert

Course # HE 3230: Promoting Health Across the Lifespan

Plymouth State University

December 2017

Title: Valuable Veggies

Author: Andrea Gilbert

Time & Format: 55-minute Workshop

Audience/Learners: College students**/**Adult Learners

Topic Overview: To educate students on the importance of consuming vegetables and the benefits of adopting a vegetarian diet/ plant based can have on the body such as disease prevention through learning activities, consisting of; brainstorming sessions, viewing of a video, and making informational handouts.

Healthy People 2020 Objectives:

> NWS-15.2: Increase the contribution of dark green vegetables, red and orange vegetables, and beans and peas to the diets of the population aged 2 years and older

Workshop Goal: Increase the amount of students incorporating more plant based foods into their diets and having knowledge on the benefits of a plant based diet.

National Health Education Standards addressed:

- Standard 1.12.5: Students will propose ways to reduce or prevent injuries and health problems.
- Standard 3.12.2: Students will use resources from home, school, and community that provide valid health information.
- Standard 5.12.2: Students will determine the value of applying a thoughtful decision-making process in health-related situations.

Specific Learning Objectives:

- 75% of students will be able to show what they have learned during the session by passing the quiz and utilizing the information from the PowerPoint to produce their own handouts on the benefits of adopting a vegetarian diet. (NHES 1) (AM 2)

- Students will have access to the information from the handouts made in class and 50% of the students will continue further education about the vegetarian diet. (NHES 3) (AM 1)
- By the end of the session participants will be able to list 3-5 benefits that adopting a vegetarian diet has on the body. (NHES 5) (AM 1,2)

Background, Key Concepts & Terminology for Instructor Reference:

There are many varieties of vegetarian diets, but what they all have in common is the partial or total elimination of meat, poultry, and fish. The diet is based on the consumption of plants. There are many reasons people choose to adopt a vegetarian diet such as; ethical, environmental, or social concerns.

Type of vegetarian diet	Definition
Lacto-ovo-vegetarian	Excludes all types of flesh foodstuffs (meat, poultry, fish), but permits eating all other animal products (e.g. eggs, milk, honey).
Lacto-vegetarian	Excludes flesh foodstuffs and eggs but allows dairy products, honey, etc.
Ovo-vegetarian	Excludes consumption of all animal products with the exception of eggs.
Vegan	Excludes all animal products.
Vitarian	Permits consumption of organic, raw and fresh foods only. Excludes coffee and tea.
Liquidarian	Consumption of vegetarian food in the form of juices.
Fruitarian	Excludes flesh foodstuffs, animal products and vegetables.
Sproutarian	Eating foods in the form of sprouted plant seedlings, such as grains, vegetables, fruits.
Semi-vegetarian	Transitional form between vegetarian and meat based diets; limited amount of meat eaten.

Effects on Diseases:

- **Heart disease.** In one of the largest studies involving more than 76,000 participants published several years ago — vegetarians were, on average, 25% less likely to die of heart disease. In another study involving 65,000 people in the Oxford cohort of the

European Prospective Investigation into Cancer and Nutrition (EPIC-Oxford), researchers found a 19% lower risk of death from heart disease among vegetarians.
    - For heart protection, it's best to choose high-fiber whole grains and legumes, which are digested slowly and have a low glycemic index — that is, they help keep blood sugar levels steady. Soluble fiber also helps reduce cholesterol levels.
- **Cancer.** Hundreds of studies suggest that eating lots of fruits and vegetables can reduce the risk of developing certain cancers, and there's evidence that vegetarians have a lower incidence of cancer than nonvegetarians do. But the differences aren't large. A vegetarian diet can make it easier to get the recommended minimum of five daily servings of fruits and vegetables, but a purely vegetarian diet is not necessarily better than a plant-based diet that also includes fish or poultry. For example, in a pooled analysis of data from the Oxford Vegetarian Study and EPIC-Oxford, fish-eaters had a lower risk of certain cancers than vegetarians.
    - If you stop eating red meat you'll eliminate a risk factor for colon cancer. It's not clear whether avoiding all animal products reduces the risk further. Vegetarians usually have lower levels of potentially carcinogenic substances in their colons, but studies comparing cancer rates in vegetarians and non-vegetarians have shown inconsistent results.
- **Type 2 diabetes.** Research suggests that plant-based diets can reduce the risk for type 2 diabetes. The vegetarian diet consists of the consumption of high amount of carbohydrates and low amounts of fat which has increased insulin sensitivity, which helps to fight off the development of type 2 diabetes.

Terminology:

- *Vegetarian:* A person who does not consume and sometimes other animal products, especially for moral, religious, or health reasons.
- *Omnivores:* An animal or person who consumes food from both plants and animals.
- *Benefits:* An advantage or gain from something.
- *Cardiovascular:* Relating to the heart and blood vessels.
- *Endocrine:* Relating to denoting glands that secrete hormones or other products directly into the blood.

- *Metabolism:* The chemical process that occur within a living organism on order to maintain life.
- *Physical Activity:* Any bodily movement produced by skeletal muscles that requires energy expenditure.

Teaching Steps:

- Engage, Describe, Do
    - Have students form small groups and brainstorm information that they already know about the vegetarian diet. [LO 1] (10 min)
    - Introductory video on the benefits adopting a vegetarian diet. [LO 3] (5 mins)
- Examine & Analyze
    - Discussion/brainstorming session to determine the best information to be put on the handouts. [LO 3] (10 min)
- Apply, Create, Integrate
    - Students will take the information they viewed as most valuable and create handouts to bring home. [LO 2] (20 min)
- Assess
    - Students will take a short quiz on the materials discussed during the session to test their knowledge. [LO 1&3] (10 min)
- Close
    - Quizzes will be collected, and students will be encouraged to think about what they learned when choosing their meals in the future.

Assessment Measures:

1. Handouts containing most valuable information of adopting a vegetarian diet benefits.
2. 80% of passing grades on quiz

Annotated Resource Bibliography:

National Health Education Standards. (2016, August 18). Retrieved December 9, 2017, from https://www.cdc.gov/healthyschools/sher/standards/index.htm

The National Health Education Standards are a beneficial resource to use when devising a lesson plan. It provides learning standards for all grades. I used NHES to determine what

learning objectives I wanted the audience to walk away with after the completion of the workshop.

Pilis W., Stec. K., Zych. M., & Pilis. A (2014). Health benefits and risk associated with adopting a vegetarian diet. Retrieved November 15, 2017, from http://agro.icm.edu.pl/agro/element/bwmeta1.element.agro-a9aa0bef-97f6-4db0-98fb-b0f04bef1eb1

This source covers the positive and negative aspects of adopting a vegetarian diet. It goes through the effects it has on cardiovascular health, endocrine health, metabolism, physical activity, etc. It discusses how having a properly balanced vegetarian diet can contribute to a lower body mass and BMI compared to those that consume meat regularly. Going vegetarian can also contribute to helping protect people from developing diabetes due to the increased cellular insulin sensitivity. I will be incorporating this information into the PowerPoint because Type 2 Diabetes is a serious disease that can be managed through proper education and consumption of the right foods.

Publishing, H. H. (2009, October). Becoming a vegetarian. Retrieved December 7, 2017, from https://www.health.harvard.edu/staying-healthy/becoming-a-vegetarian

This information from Harvard.edu contains the many benefits of adopting a vegetarian/plant based diet. It covers the effects that vegetarian diet has on certain diseases. It also disproves some information about the vegetarian diet that many believe as truth. Multiple studies have been utilized to provide this information, and this source was very helpful to me while I developed a PowerPoint and quiz.

Ancillary Materials, Resources, Preparation steps:

- White Board
- Dry erase markers
- Computer
- Projector
- Video
- Space for group discussion
- Paper

- Colored pencils
- Markers
- Quiz

Video link:

https://www.youtube.com/watch?v=rpCKpno5OQg

Name:

Date:

Quiz

1. Compared to meat eaters, vegetarians tend to consume less saturated fat and cholesterol.

   TRUE or FALSE

2. High-fiber whole grains and legumes do what for the body?

   a. Digested slowly and have a low glycemic index
   b. Help keep blood sugar levels steady
   c. A and B

3. Nuts are also heart-protective. They have a low glycemic index and contain many antioxidants, vegetable protein, fiber, minerals, and healthy fatty acids.

   TRUE or FALSE

4. It was proven that vegetarians' risk of developing diabetes was half that of nonvegetarians, even after taking BMI into account.

   TRUE or FALSE

5. Depleted iron levels in woman due to anemia can be increased by consuming;
   a. vitamin c
   b. citric acid,
   c. malic acid
   d. tartaric acid
   e. fructose
   f. sorbitol
   g. all the above

Chapter 4

Preventing Communicable Disease

Another cold?

Ali Garofano

HE 3230-01

December 12th, 2017

Plymouth State University

Title: Another Cold?

Author: Ali Garofano

Time & Format: Communicable disease cold versus allergies in college aged student

Audience/Learners: College students or young adults

Topic Overview: Communicable diseases among college students

Healthy People 2020 objectives:

- **IID-12.9** Increase the percentage of health care personnel who are vaccinated annually against seasonal influenza

Workshop Goal: Goal of these lessons is to increase awareness on communicable disease prevention in young adults.

National Health Education Standards addressed:
Standard 1.2.2-Recognize that there are multiple dimensions of health.
Standard 4.12.1-Use skills for communicating effectively with family, peers, and others to enhance health.
Standard 7.12.2- Demonstrate a variety of healthy practices and behaviors that will maintain or improve the health of self and others.

Specific Learning Objectives (linked to NHES and assessments):
Through participation in this workshop learners will be able to:

1. Participants will be able to properly differentiate between the common cold and allergy symptoms. (Standard 1.2.2)
2. Participants will be able to identify signs and symptoms of both the common cold and allergies. (Standard 1.2.2)
3. Participants will be able to list the different ways in which they can avoid the common cold. (Standard 7.12.2)
4. Participants will be able to know the different ways in which they can treat a common cold versus allergies. (Standard 7.12.2)

Background:

Common colds are extremely common, as more than 200 types lead to our misery. Common colds are usually short lived, lasting a few days, with a few lingering symptoms lasting longer, especially cough. Symptoms peak within 1 to 3 days and generally clear by 1 week, although cough often persists. Although they cause no mortality or serious morbidity, common colds are responsible for considerable discomfort, lost work, and medical costs. Common colds are easily mistaken for other illnesses including allergies.

College students, especially, mistake allergies for a cold and vise versa. Knowing the signs and symptoms of each is extremely important in knowing how to treat them. Allergies are a condition in which the immune system reacts abnormally to a foreign substance. Some of the symptoms are similar to colds, such as sneezing, sore throat, coughing, runny nose, and congestion. Sore throat in allergies is most often caused by postnasal drip. Allergies can also cause rashes and itchy eyes. Fevers and body aches are not signs of an allergy. Allergies and colds are very similar in fact, as they affect the body in similar ways. However, there are different ways we should treat them in order to prevent and fight against them.

Key concepts and terminology:

1. What is a cold? -An acute disease of the upper respiratory tract that is marked by inflammation of the mucous membranes of the nose, throat eyes, and Eustachian tubes and by a watery thin purulent discharge and is caused by any of several viruses.
2. What are allergies? –A damaging immune response by the body to a substance, especially pollen, fur, a particular food or dust, to which it has become hypersensitive.
3. How to tell the difference between a common cold versus allergies-Some of the symptoms are similar to colds, such as sneezing, sore throat, coughing, runny nose, and congestion. Sore throat in allergies is most often caused by postnasal drip.
4. How common is the common cold? -More than 200 types lead to your misery, but the most common one is the rhinovirus, which is thought to be responsible for at least 50% of colds. Other viruses that can cause colds include coronavirus, respiratory syncytial virus, influenza and parainfluenza.
5. How common are allergies? –About 8% of the US experiences it.

Terminology:

1. Common cold- an acute disease of the upper respiratory tract that is marked by inflammation of the mucous membranes of the nose, throat, eyes, and Eustachian tubes and by a watery thin purulent discharge and is caused by any of several viruses.
2. Allergies- a damaging immune response by the body to a substance, especially pollen, fur, a particular food, or dust, to which it has become hypersensitive.

Teaching Steps (timed):
Activity 1:
Introduction: How well do you know a cold versus allergies? Ask participants to differentiate between the common cold versus allergies. See how well they know symptoms of each. (3-4minutes)
Activity 2: Identify and describe the symptoms of the common cold vs. allergies. (3 minutes)
Activity 3: Describe the structure of the cold virus and the transmission of the virus; how it infects the human body. (3-4 minutes)
Activity 4: Are students diagnosing themselves wrong (cold vs. allergies)- ways to know what they have and how to treat it the right way. (5 minutes)
Activity 5: Video (3 minutes 36 seconds)- https://www.youtube.com/watch?v=GnoRBUjlEOs
Activity 6: Quiz-cold or allergies? (Last few minutes to wrap up what they learned)

Assessment Measures:

AM 1: Photos posted to #moveatwork – target of 3 per group
AM 2: Step counts for 5 minutes posted to workshop board by student pairs.

Materials, Resources, Preparation:
-Handout
-Video
-List of questions/quiz

Annotated Resource Bibliography:

Kristin L. Nichol, Sarah D Heilly, Edward Ehlinger; Colds and Influenza-Like Illnesses in University Students: Impact on Health, Academic and Work Performance, and Health Care Use, *Clinical Infectious Diseases*, Volume 40, Issue 9, 1 May 2005, Pages 1263–1270, https://doi.org/10.1086/429237

I chose this article due to its title and the information it withheld. It discussed what the symptoms and signs are of a cold, along with how to prevent it, especially in a college environment. Students in college are much more vulnerable to getting sick for various of reasons such as, stress, environment, going out, sharing, dorms, etc. I believe this article pinpointed many ways in which you can prevent that and get to know more about it.

Hagy, G. W., & Settipane, G. A. (1969). Bronchial asthma, allergic rhinitis, and allergy skin tests among college students. *Journal of Allergy, 44*(6). Retrieved November 15, 2017, from http://www.sciencedirect.com/science/article/pii/0021870769900240

I chose this article because it discussed a study, in which college students participated in, about their allergies. Not only seasonal allergies, but also bronchial asthma, allergic rhinitis, and allergy skin tests among the college students. They compared it to that of their parents or if they just adapted these allergies based on being in college. I think the authors did a great job in writing this research, along with the procedure itself.

https://www.youtube.com/watch?v=GnoRBUjlEOs

Appendix of support materials:

Youtube video: https://www.youtube.com/watch?v=GnoRBUjlEOs

Quiz: Attached

Handout: Attached

Quiz- Is it a cold or allergies?

1. **Which of the following is a symptom of both colds and allergies?**
   A.) Coughing
   B.) Sneezing
   C.) Runny nose
   D.) All of the above?

2. **Watery, itchy eyes typically are symptoms of-**
   A.) Cold
   B.) Allergies

3. **Wheezing and shortness of breath can be associated with either a cold or allergies?**
   A.) True
   B.) False

4. **A sore throat and fever are signs that you may have a-**
   A.) A cold
   B.) Allergies

5. **Trouble swallowing is a common symptom of a cold?**
   A.) True
   B.) False

6. **Cold symptoms and a fever of more than 102F may be signs that you have a cold?**
   A.) True
   B.) False

Answer key:

1. **D**
2. **B**
3. **A**
4. **A**
5. **B**
6. **B**

Cold vs. allergies fact sheet

Common colds- Or simply “colds,” are usually quite harmless and go away again on their own. Colds usually go away on their own after about a week, however, some symptoms may last longer. Although a sore throat or a stuffy nose may be gone after just a few days, it can sometimes take up to three weeks for a cough to disappear completely.

Symptoms:

- Cough
- Sore throat
- Runny nose
- Headache
- Mild fever
- Aches

Treatment:

- Medication usually isn’t necessary. Some medications may, at best, help relieve the symptoms a bit. Because colds are typically caused by viruses, it also doesn't make sense to use antibiotics to treat an ordinary cold. Antibiotics only work against bacteria.

Effects:

- Usually harmless and clear up without any serious consequences.
- Bacteria can sometimes spread through the airways after a viral infection, and they may cause more severe problems in different places, such as in the sinuses.

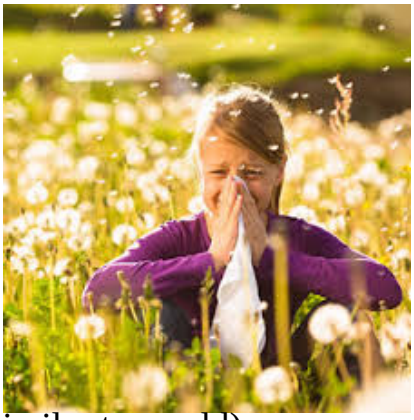
Prevention:

- Adequate sleep
- Healthy diet (eat immunity boosting foods)
- Wash your hands
- Do not share food/drinks with people who may be sick

Allergies:

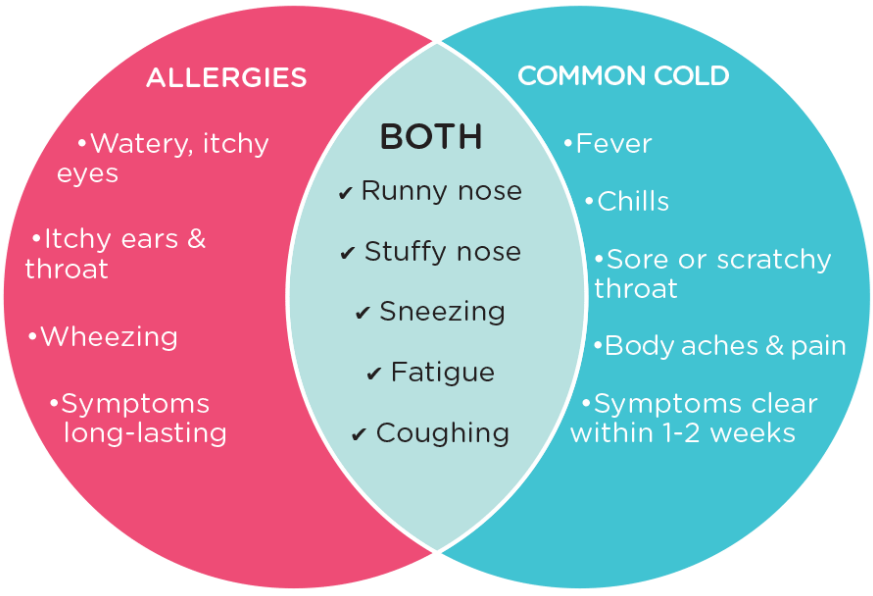
Seasonal allergies are most common, but you might also be allergic to certain substances year round. Allergy triggers may include:

- Pollen from trees, grasses, or weeds
- Dust mites
- Animal dander
- Mold
- Foods (such as tree nuts, milk, and eggs)



Symptoms (some similar to a cold):

- Sneezing
- Sore throat
- Coughing
- Runny nose
- Congestion.
- Sore throat
- Rashes and itchy eyes.



2017

Foodborne Illnesses

PREVENTION OF COMINICUABLE DISEASES

SARAH KNOWLES, ALI GAROFANO, AYLA SHEETS, & SKYLA GORMAN

HE 3230-01

PLYMOUTH STATE UNIVERSITTY

DECEMBER 2017

Title: Food borne illnesses

Author: Sarah Knowles

Time & Format: 50 Mins.

Audience/Learners: College students/ young adults

Topic Overview: what are you doing and who is it for and how ill you be doing it.

This lesson will be taught to college students on the topic of "foodborne illnesses" with a PowerPoint, short video, pre and post worksheet assessment, and small group discussion.

Healthy People 2020 Objective(s) alignment: Food Borne Illnesses

1. FS-1 Reduce infections caused by key pathogens transmitted commonly through food.
2. FS-2 Reduce the number of outbreak-associated infections due to Shiga toxin-producing *E. coli* O157, or *Campylobacter*, *Listeria*, or *Salmonella* species associated with food commodity groups
3. FS-3 Increase the proportion of consumers who follow key food safety practices
4. FS-4 Increase the proportion of fast-food and full service restaurants that follow food safety practices that prevent foodborne illness outbreaks

Workshop Goal: Increasing knowledge and awareness on communicable disease prevention in college students and young adults.

National Health Education Standards addressed:

Standard 1 Students will comprehend concepts related to heath promotion and disease prevention to enhance health.

1.12.1 Predict how healthy behaviors can affect health status.

Standard 5 Students will demonstrate the ability to use decision-making skills to enhance health.

1.12.1 Examine barriers that can hinder healthy decision making.

Standard 7 Students will demonstrate the ability to practice health- enhancing behaviors and avoid or reduce health risks.

7.12.1 analyze the role of individual responsibility for enhancing health

Specific Learning Objectives (linked to NHES and assessments):

1. By the end of this workshop, participants will be able to identify at least four behaviors/ methods to prevent spreading and contracting illness.
2. participants will be able to demonstrate at lease four correct temperatures to refrigerate and cook specific foods as listed in the assessment.
3. Participants will be able to demonstrate four safe food practices (clean, separate, cook, and chill.)
4. Participants will be able to identify right from wrong when handling various raw foods.

Background:

Certain disease causing bacteria or pathogens can contaminate food, and they can cause foodborne illnesses which causes food poisoning. Foodborne illness is any illness resulting from the consumption of food. Foodborne illness is commonly called food poisoning, even though the physiological effects of foodborne illness are not always caused by poisons and toxins. True food poisoning occurs when a person ingests a contaminating chemical or a natural toxin, while most cases of foodborne illness are caused by a variety of foodborne pathogenic bacteria, viruses, prions or parasites that contaminate food.

As stated from the centers for disease control and prevention, "In 2013, 818 foodborne disease outbreaks were reported, resulting in 13,360 illnesses, 1,062 hospitalizations, 16 deaths, and 14 food recalls." These illnesses range from the main like salmonella, E. coli, Listeria, and clostridium. Food poisoning symptoms may range from being mild to severe and may differ on the contaminate that they ingest. The most common symptoms may include an upset stomach, stomach cramps, nausea, vomiting, diarrhea, and a fever. After you consume a contaminated food or drink, it may take hours or days before you will develop these symptoms.

Key Concepts & Terminology for Instructor Reference:

Food poisoning: illness caused by bacteria or other toxins in food, typically with vomiting and diarrhea.

Salmonella: Found in food sources such as raw or undercooked eggs, meat, poultry, raw milk and other dairy products, shrimp, yeast, coconut, pasta, and chocolate. Onset between 1-3 days, symptoms include fever, vomiting, cramps, diarrhea lasts between 4-7 days and can be fatal.

Escherichia coli; E. coli: Found in undercooked ground beef, unpasteurized milk and juice, raw fruits and vegetables, contaminated water, and person to person contact. Onset is 1-8 days. Symptoms include severe bloody diarrhea, abdominal cramps, vomiting; lasts 5-10 days.

Listeria: Found in unpasteurized milk, fresh soft cheeses, luncheon meats, and hot dogs. Onset 1-21 days' symptoms include fever, muscle aches, nausea, vomiting, blood poisoning, complications in pregnancy, and meningitis.

Clostridium: Found in Anaerobic environments of low acidity (canned corn, peppers, soups, beets, mushrooms, chicken, tuna, sausage, stuffed eggplant, lobster, and smoked and salted fish. Onset 4 -36 hours' nervous system symptoms, including double vision, inability to swallow, speech

difficulty, and progressive paralysis of the respiratory system; often fatal; leaves prolonged symptoms in survivors.

Materials: (see appendix)

- **Computer**
- **Projector**
- **Access to Wi-Fi and PowerPoint**
- **Pre- assessment**
- **Post assessment**
- **Pen/pencil**
- **White board**
- **Dry erase markers**

Teaching Steps (timed) Linked to Learning Outcomes:

1. **Introduction: (5 min) Examine & analyze- Group Pre-assessment matching handout activity (5 min)**
   a. **Engage Students:**
      - Explain the topic of todays lesson and go over what you will be doing during this class period
      - Does anyone know what food poisoning is? Have you ever got it? Why do you think you got it? What was the severity of it?

   b. **Do**:
      - Hand out Pre-Assessment Worksheet
      - Multiple choice work sheet includes Food Safety and sanitation cautions
      - *Find out what students know before lesson plan*
2. **Lecture- PowerPoint (5 min)**
   - Specific foodborne illnesses
   - Sanitary precautions
   - Correct temperatures
   - The dos and don'ts of food separation
3. **Video (10 Mins)**
   - Video on foodborne illnesses https://www.youtube.com/watch?v=2QQvhFPZedM
4. **Create & integrate- Class Activity (20 min)**
   a. Split the class into groups of four
   b. Write (cook, clean, chill, & separate) on the board
   c. Each group has to come up with a list food that can be kept at room temperature or in the refrigerator.
      - List of how to properly sanitize while working with specific food groups.
      - List of how to properly separate food.
   d. After small group discussions each group will go to the board and write down their findings and explain.
5. **Closure: Post-matching assessment handout (5 min)**
   - Multiple choice work sheet
   - *Find out what students have learned from..*

1. *Class activity- (Small group discussion/ Brain storming)*
2. *Presentation- (Power-point)*
3. *Food Borne Illness- (video)*

Assessment Measures Linked to Activities:
Through a matching style game with a pre and post assessment game, students abilities to correctly identify and categorize a variety of foods into their correct health preparation techniques will help them become better informed about the safety and sanitation guidelines regarding cooking, cooling, cleaning, and separating specific foods.

Appendix:
PowerPoint Slides:

FOOD SAFETY

By: Sarah Knowles

Food Safety

- Food Safety is a handling, preparation and storage of foods in ways that prevent foodborne illness. This includes a number of routines that should be followed to avoid potentially severe health hazards.

Safety Rules

- Cook all meat and poultry to suggested temperatures
- Never defrost meat/poultry at room temperature or in warm water
- Don't cook large meats in the microwave
- Use different cutting boards/ utensils when switching from raw meat to something like lettuce
- MOST IMPORTANTLY: wash hands thoroughly before touching meat and after as well.

Microbes

- Foodborne illness are caused by these and can be life threatening
- Create illnesses by infection or intoxication
- Enterotoxins or Neurotoxins released
  - Absorbed into the tissues
- Responsible for 90% of U.S foodborne illnesses, hospitalizations, and deaths

Food poisoning

- Each year, millions of people in the united states get sick from contaminated foods by bacteria, viruses, or parasites.
- Symptoms of food poisoning include upset stomach, abdominal pain, cramps, nausea and vomiting, fever and dehydration.
- Symptoms may kick in within a 2-6 hour period after eating contaminated food.
- These symptoms may range from mild to severe.
- About 1 in every 6 Americans, or roughly 48 million people experience food poisoning each year.

10 WAYS OF PREVENTION:

1. Keep your food preparation area and equipment clean.
2. Fully cook meats and seafood.
3. Refrigerate perishable foods.
4. Wash utensils when handling raw meat.
5. Keep raw food away from ready to eat food.
6. Cook food at a safe temperature
7. Defrost food safely.
8. Refrigerate or freeze within two hours of purchasing.
9. Wash Hands often.
10. When in doubt… THROW IT OUT!

CONSUMER COOKING TEMPERATURE CHART for MEATS and EGGS *Use a thermometer to check temperatures.* *Cook to the internal temperatures listed below in degrees Fahrenheit*	
FRESH MEATS	
Ground meats (veal, beef, lamb, pork, deer, moose, elk or caribou)	**160°F**
Fresh beef, veal, lamb, pork, deer, moose, elk or caribou steaks, chops and roasts	
• **recommended minimum temperature**	**145°F**
• medium	**160°F**
• well done	**170°F**
Leftover cooked meats	**165°F or safe to eat cold if properly cooled and stored**
POULTRY and GAME BIRDS	
Ground chicken and turkey	**165°F**
Whole chicken, turkey, duck and goose	**165°F**
Poultry breasts and roasts; thighs and wings	**165°F**
Casseroles, all stuffing and reheated leftovers	**165°F**
Fully-cooked poultry	**165°F or safe to eat cold if properly cooled and stored**
FISH AND SHELLFISH	
Fish and shellfish, any type	**145°F**
RABBIT	
Rabbit	**160°F**
HAM	
Fresh (raw) ham or shoulder	**160°F**
To reheat precooked ham	**140°F**
EGGS AND EGG DISHES	
Eggs	**Cook until yolk and white are firm.**
Egg dishes; egg based sauces and custards	**160°F**

Causes of food poisoning

- Bacteria and viruses are the most common cause of food poisoning. The severity of the poisoning may vary depending on which bacteria or virus has contaminated the food.
- Parasites are organisms that derive nourishment and protection from other living organisms known as hosts. In the U.S. the most common foodborne parasites are protozoa, roundworms, and tapeworms.
- Mold, toxins, and, contaminants can be linked to food poisoning along with natural toxins and chemical toxins

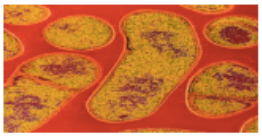


Foodborne Infections :

1. Salmonella :
   a. found in food sources such as raw or undercooked eggs, meat, poultry, raw milk and other dairy products , shrimp, yeast, coconut, pasta, and chocolate.
   b. Onset between 1-3 days, symptoms include fever, vomiting, cramps, diarrhea lasts between 4-7 days and can be fatal.
   c. Use sanitary handling methods, cook foods thoroughly, refrigerate foods prominently

Foodborne Intoxications:

1. Clostridium :
   a. Found in Anaerobic environments of low acidity (canned corn, peppers, soups, beets, mushrooms, chicken, tuna, sausage, stuffed eggplant, lobster, and smoked and salted fish.
   b. Onset 4 -36 hours nervous system symptoms, including double vision, inability to swallow, speech difficulty, and progressive paralysis of the respiratory system; often fatal; leaves prolonged symptoms in survivors.
   c. Use proper canning methods; refrigerate homemade garlic and herb oils; also do not give infants honey because it may contain spores of clostridium botulinum, which is a common source of infection for infants.



Foodborne Infections:

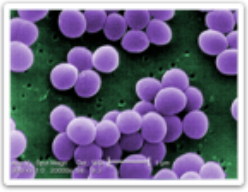
2. Escherichia coli; E. coli :
   a. Found in undercooked ground beef, unpasteurized milk and juices, raw fruits and vegetables, contaminated water, and person to person contact.
   b. Onset is 1-8 days. Symptoms include severe bloody diarrhea, abdominal cramps, vomiting ; lasts 5 -10 days.
   c. Cook ground beef thoroughly; use pasteurized milk; use sanitary food handling methods; use treated, bottled, or boiled water

Foodborne Infections:

3. Listeria :
   a. Found in unpasteurized milk; fresh soft cheeses; luncheon meats, hot dogs
   b. Onset 1 -21 days symptoms include fever, muscle aches, nausea, vomiting, blood poisoning, complications in pregnancy, and meningitis.
   c. Use sanitary food handling methods; cook foods thoroughly; use pasteurized milk.

Foodborne Intoxications:

2. Staphylococcus :
   a. Toxin produced in improperly refrigerated meats; egg, tuna, potato, and macaroni salads, cream filled pastries.
   b. Onset 1 -6 hours symptoms include diarrhea, nausea, vomiting, abdominal cramps, fever, lasts 1 to 2 days
   c. Use sanitary food handling methods, cook food thoroughly, refrigerate foods promptly and properly.



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BeFoodSafe.ca. (n.d.). Retrieved December 5, 2017, from http://befoodsafe.ca/be-food-safe/4-simple-steps-clean-separate-cook-chill/

Botulism. (2016, May 03). Retrieved December 5, 2017, from https://www.cdc.gov/botulism/definition.html

E.coli (Escherichia coli). (2017, March 03). Retrieved December 5, 2017, from https://www.cdc.gov/ecoli/

F. (2009, August 21). Home. Retrieved December 5, 2017, from https://www.foodsafety.gov/

Food poisoning. (2017, march) Retrieved December 5, 2017 form http://www.foodpoisonjournal.com/food-poisoning-information/what-to-know-during-a-listeria-outbreak/#.WP5KvIPvuYU

Health, C. D. (n.d.). Staphylococcal Food Intoxication. Retrieved December 5, 2017, from http://www.gov.mb.ca/health/publichealth/diseases/staphylococcal.html

Pre and Post Assessment worksheet:

Name:

Date:

Foodborne Illness Assessment

1. What illness is caused by ingesting food containing preformed microbial toxins?

a. Food poisoning b. Food infection c. A vehicle d. Pathogen overload

2. Which of the following foods are considered potentially hazardous?

a. Foods cooked to extremely high temperatures
b. Cannes fruits and vegetables
c. Moist, high-protein, low-acid foods
d. Foods left in the wrong temperature for less than an hour

3. Which of the following is NOT a common foodborne pathogen?

a. E. coli
b. Salmonella
c. Listeria
d. Herpes

4. One common cause of foodborne illness is:

a. Improper holding temperatures
b. Too much exposure to air
c. Excessive use of salt and other spices
d. High acid foods

6. Listeria bacteria are commonly found in which of the following foods?

a. Meat, eggs, rice
b. Processed luncheon meats
c. Dairy products
d. All of the above

7. What are foodborne illnesses often caused by?

a. Improperly packaged food
b. Mayonnaise in prepared food items
c. Handling practices that cause contamination of food
d. Too many people working with food

8. E. Coli can be found in which of the following foods?

a. Beef roast
b. Ground Beef
c. Chicken
d. Eggs

9. True or false: We should always separate our raw foods from various other food.

True / False

10. Cross-contamination can occur by…

a. Coming hair in food preparation areas
b. Adding canned vegetables to beef stew
c. Roasting contaminated meat in the same oven with other meat
d. Touching raw meat then touching food that will not be cooked

Annotated Resource Bibliography in accurate APA format:

Beverly J. McCabe-Sellers PhD, Samuel E. Beattie MD (2004). Scholarly Article, Food safety: Emerging trends in foodborne illness surveillance and prevention PhD Retrieved October 21, 2017 http://www.sciencedirect.com/science/article/pii/S0002822304014002

The authors who published this journal either have an MD or PhD degree. I chose do this article because it states statistics of all Americans who are estimated to be affected by food Bourne illnesses each year, the different age ranges that are most noticeably affected by food poisoning, and why these viruses occur. This journal gives a good and very specific statistics of the history of food Bourne illnesses.

Irinia R, Gottschling M (2016) Taxinonic revision of Rochefortia Sw. Biodiversity Data Journal. Scholarly article, Foodborne illness Aquired in the United Stated- Major Pathogens. Retrieved October 21, 2017
https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3375761/

This journal provides all types of methods on how to prevent illnesses, in severe cases it states how individuals have been hospitalized, and types of food borne illnesses these are. This information is great for lesson plans to explain the dangers of pathogens that are unknown to our nation and what we need to be in formed and educated on.

https://www.youtube.com/watch?v=2QQvhFPZedM

This video introduces the novice outbreak investigation team members to the concept of foodborne illness and the current health and financial burden it has in the United States. This video also offers a historical perspective on the changes that have occurred within the food industry and their effects on public health and food safety professionals today. This shows different forms of Food Borne Illnesses

Hand-washing, Sneezing, & Coughing Techniques

Skyla Gorman
HE 3230-01
Plymouth State University
December 2017

Title: Hand-washing, Sneezing, & Coughing Techniques

Author: Skyla Gorman

Time & Format: 1 hour

Audience/Learners: College students and young adults

Topic Overview:
The Hand washing, Sneezing, & Coughing Techniques workshop is a method of educating participants on actions they can take to prevent getting themselves and/or others sick. The workshop will cover three critical actions that assist in preventing communicable disease, thus promoting health.

Healthy People 2020 Objective alignment:

1. **HRQOL/WB-1Increase the proportion of adults who self-report good or better health.**

The goal is to increase knowledge and awareness on communicable disease prevention in young adults.

National Health Education Standards addressed:
Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.

a. 1.2.1. Identify that health behaviors impact personal health
b. 1.2.3. Describe ways to prevent communicable disease

Standard 5: Students will demonstrate the ability to use decision-making skills to enhance health.

a. 5.5.5. Choose a healthy option when making a decision
b. 5.8.2. Determine when health-related situations require application of a thoughtful decision-making process
c. Defend the healthy choice when making decisions

Standard 7: Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

a. 7.2.2. Demonstrate behaviors that avoid or reduce health risks
b. 7.5.1. Identify responsible personal health behaviors
c. 7.12.3. Demonstrate a variety of behaviors to avoid of reduce health risks of self and others

Specific Learning Objectives (linked to NHES and assessments):

1. By the end of this disease prevention unit, participants will be able to identify at least four behaviors and methods to prevent spreading and contracting illness. (NHES 1)

2. Participants will be educated on hand washing, sneezing, and coughing techniques to prevent communicable illnesses. (NHES 7) (NHES 5)
3. Participants will be able to properly demonstrate the eight steps of hand washing by the end of the workshop. (NHES 7) (NHES 5)
4. Participants will be able to properly demonstrate the two sneezing and coughing steps by the end of the workshop. (NHES 7) (NHES 5)

Background:

"It is estimated that washing hands with soap and water could reduce diarrheal disease-associated deaths by up to 50% and can reduce the risk of respiratory infections by 16%" (Centers for Disease Control and Prevention, 2013). Common colds are another illness that can be prevented by appropriate disease prevention strategies. Understanding and applying the proper techniques of hand washing, sneezing, and coughing can save individuals money by: having less annual doctor appointments, taking less time off from work, and decreasing the chances of paying for expensive medications. This lesson plan will educate and promote the proper steps for three actions to prevent communicable diseases.

Key Concepts & Terminology for Instructor Reference:

- Streptococcus Pyogenes: is the bacteria that causes strep throat, also known as group A. Strep throat can be greatly avoided by washing your hands with antibacterial soap.
- Salmonella Enterica and Salmonella Bongori: are the bacteria that commonly causes food poisoning. Salmonella contamination can be decreased by washing your hands.
- Upper Respiratory Tract: this is the area in the human body that is greatly affected by the common cold virus. It includes: the nose and nasal passages, sinuses, the pharynx, and the portion of the larynx (above the vocal folds).

Teaching Steps Linked to Learning Outcomes:

1. Introduction: 5 minutes
    a. Introduce self and give background experience and education
    b. Ask the participants a series of questions and ask them to raise their hand if it applies to them (GOAL = engage the audience and to show them relevance of workshop)
        i. "Who's had a common cold?"
        ii. "Who's had food poisoning?"
        iii. "Who's had strep throat?"

2. PowerPoint: 15 minutes (see appendix)
    a. Hand washing technique, steps, and when to wash
    b. Sneezing technique and steps
    c. Coughing technique and steps
    d. Visuals will include pictures and presenter showing proper technique

3. Apply, Modify, Integrate: 25 minutes

a. Hands on experience of eight steps of hand washing, coughing and sneezing techniques
b. Check off each participant in hand washing, sneezing, and coughing skills (see appendix)

4. Describe & Discuss: 10 minutes
    a. Get into groups of three or four and discuss “The Big Three” questions
        i. What did you find surprising?
        ii. What are you confused about or do you have any questions?
        iii. What is the purpose of the workshop?

5. Closing: 10 minutes
    a. Recap on importance of hand washing, coughing, and sneezing
    b. Ask participants if there are any questions and get feedback
    c. Pass pocket-sized hand-outs to participants with the steps of hand washing, coughing, and sneezing (see appendix)

Assessment Measures Linked to Activities:

1. Listening to group discussions and answer any of their questions
2. Observing and “checking off” participants on: hand washing, coughing, and sneezing steps
3. Feedback at the end of the lesson

Ancillary Materials, Resources, Preparation steps:

1. Computer
2. Projector
3. Clock
4. Pocket-sized handout
5. Sinks
6. Antibacterial hand soap
7. Paper towels
8. Tissues
9. PowerPoint
10. Check-off list

Annotated Resource Bibliography:

Allegranzi, B., Gayet-Ageron, A., Damani, N., Bengaly, L., McLaws, M., Moro, M., . . . Pittet, D. (2013). Global implementation of WHO's multimodal strategy for improvement of hand hygiene: a quasi-experimental study. The Lancet Infectious Disease, 13(10), 843-851. Retrieved November 10, 2017, from https://www.sciencedirect.com/science/article/pii/S1473309913701634.

The authors all have MD or PhD degrees. The experiment was funded by WHO, University of Geneva Hospitals, the Swiss National Science Foundation, Swiss Society of Public Health Administration and Hospital Pharmacists. The experiment implemented WHO's multi-model strategy of hand hygiene within 43 different hospitals in the world. The experiment tested the effect of increased knowledge of hand washing and hand hygiene accessibility. Their hypothesis was supported in that with increased access to hand sanitizer and hand washing stations would increase compliance of hand hygiene of health care employees. This supports the concept that knowledge is power. The purpose of my hand washing lesson plan is to educate participants on how to correctly wash their hands to decrease the spread of communicable diseases.

Fox, M. K., Langner, S. B., & Wells, R. W. (1974). How Good Are Handwashing Practices? American Journal of Nursing, 1676-1678. Retrieved November 13, 2017, from http://journals.lww.com/ajnonline/abstract/1974/09000/how_good_are_hand_washing_practices_.36.aspx

The authors are on the faculty of the School of Nursing program at the University of Pennsylvania and all earned M.S.N. degrees there. The authors made this experiment to provide data for the American Journal of Nursing. The experiment observed how many times 90 health care providers washed their hands throughout their shift. It was concluded that every group of health care providers (ei: registered nurses, licensed practical nurses, and nurses aids) failed at washing their hands after every "dirty activity". The significance of the experiment was to collect data on if individuals wash their hands effectively and properly to prevent the spreading of bacteria and illness. The authors findings did not support their hypothesis, thus shedding light on an area of weakness within disease prevention. The data allows for readers to understand the importance of teaching, practicing, and permitting periodic classes to aid in reaffirming the importance of maintaining the standards of cleanliness. This is strong evidence to prove that the basics of hand washing is not used properly every time even in a hospital setting, therefore the chances of individuals washing their hand regularly and effectively are most likely immensely lower. This assists my participants in understanding the basics of hand washing and knowing when it's appropriate to wash their hands to decrease overall spread of communicable diseases.

Five moments for hand hygiene. (n.d.). Retrieved December 08, 2017, from http://www.who.int/gpsc/tools/Five_moments/en/

Water, Sanitation & Environmentally-related Hygiene. (2009, December 28). Retrieved December 08, 2017, from https://www.cdc.gov/healthywater/hygiene/etiquette/coughing_sneezing.html

HRQOL/WB-1.1 Data Details. (n.d.). Retrieved December 01, 2017, from https://www.healthypeople.gov/node/4634/data_details

National Health Education Standards. (2016, August 18). Retrieved December 02, 2017, from https://www.cdc.gov/healthyschools/sher/standards/index.htm

Skyla Gorman

Appendix:

Check-Off List

Hand Washing:

- ☐ Apply soap in cupped hand
- ☐ Rub hands into palms
- ☐ Interlace fingers w/ R. palm over L.
- ☐ Palm to palm w/ fingers interlaced
- ☐ Back of fingers to opposing palms
- ☐ Rotational rubbing of thumbs
- ☐ Scrubbing of fingertips
- ☐ Rinse & dry with paper towel

Coughing:

- ☐ Cover your mouth & nose with a tissue when you cough
- ☐ Put soiled tissue in trash
- ☐ If you don't have a tissue: cough into your upper sleeve
- ☐ Properly wash your hands after coughing

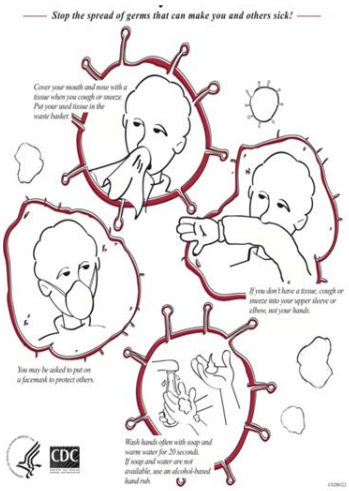
Sneezing:

- ☐ Cover your mouth & nose with a tissue when you sneeze
- ☐ Put soiled tissue in trash
- ☐ If you don't have a tissue: sneeze into your upper sleeve

☐ Properly wash your hands after sneezing

Gorman, S. 2017

Pocket-Sized Hand Out



Hand washing, Coughing, & Sneezing Techniques

By: Skyla Gorman

When to Wash?

- After going to the bathroom
- Before, during & after preparing food
- Before eating food
- Before & after caring for someone who is sick
- Before & after treating a cut or wound
- After changing diapers or cleaning up a child who has used the bathroom
- After blowing your nose, coughing, or sneezing
- After touching an animal, animal food or treats, animal cages, or
- animal feces
- After touching garbage
- If your hands are visibly dirty or greasy

How to Wash?

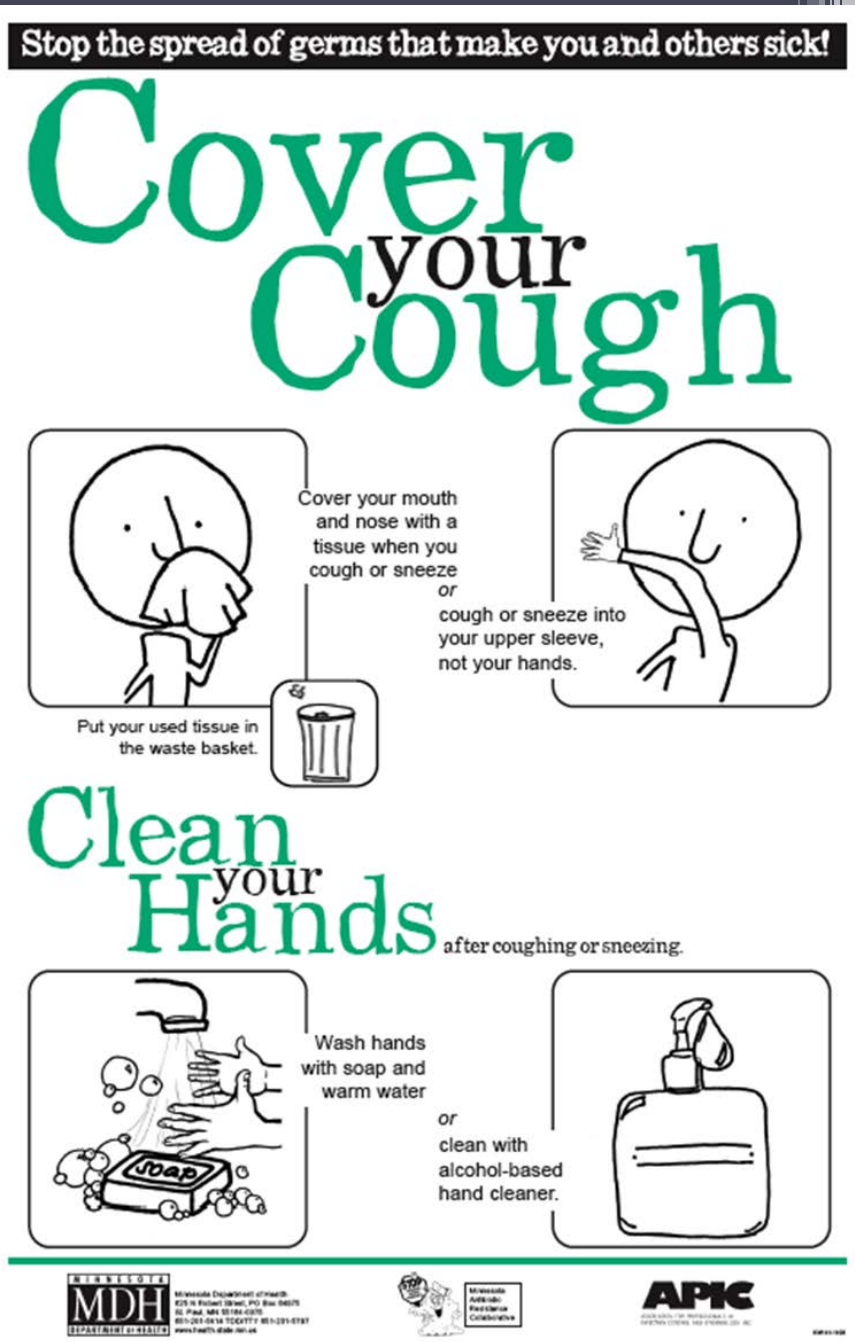
1. Apply soap in cupped hand
2. Rub hands into palms
3. Interlace fingers w/ R. palm over L.
4. Palm to palm w/ fingers interlaced
5. Back of fingers to opposing palms
6. Rotational rubbing of thumbs
7. Scrubbing of fingertips
8. Rinse & dry with paper towel

Key Tips:

- Use paper towel to turn off facet
- Use paper towel to open door

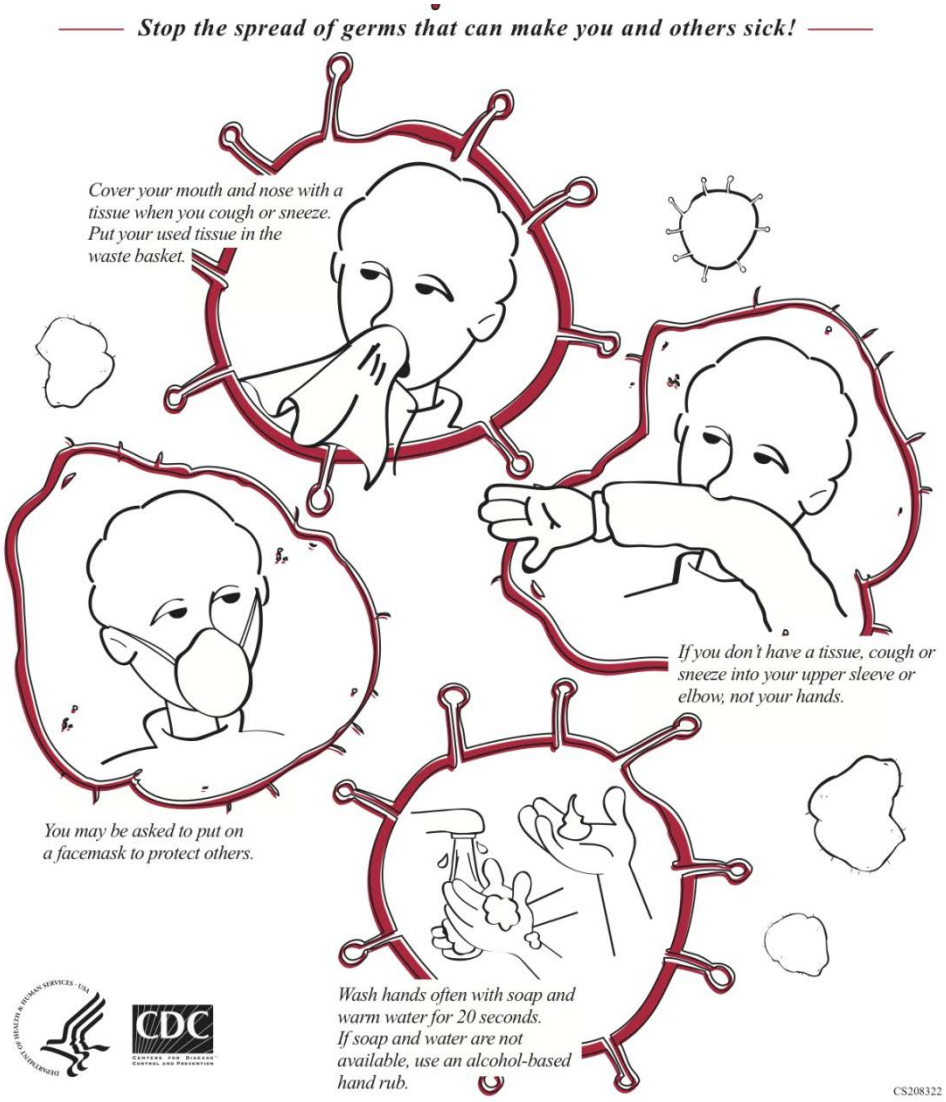
Coughing Technique

1. Cover your mouth & nose with a tissue when you cough
2. Put soiled tissue in trash
3. If you don't have a tissue: cough into your upper sleeve
4. Properly wash your hands after coughing



Sneezing Technique

1. Cover your mouth & nose with a tissue when you sneeze
2. Put soiled tissue in trash
3. If you don't have a tissue: sneeze into your upper sleeve
4. Properly wash your hands after sneezing



Time To Practice!

Sexually Transmitted Disease Prevention Among Young Adults

Ayla Sheets
HE 3230 – 01
Plymouth State University
December 2017

Title: Sexually Transmitted Disease Prevention Among Young Adults

Author: Ayla Sheets

Time & Format: 65-minute, one-time workshop lesson plan

Audience/Learners: College Students or young adults

Topic Overview: This activity is designed for adult learners working in small groups to identify the different types of sexually transmitted diseases and safe sex methods to use with their partner in order to help reduce their chances of getting a sexually transmitted disease.

American College Health Association Objective(s):
Topic: Sexually transmitted diseases and HIV
Objective: Increase the proportion of university health services that report screening sexually active women under the age of 26 for chlamydia (HIV-17a).

Workshop Goal: The goal of this workshop is to increase awareness and develop self efficacy around communicable disease prevention (sexually transmitted diseases) in young adults.

National Health Education Standards addressed:

Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance behaviors

*1.12.1 Predict how healthy behaviors can affect health status.

Standard 5: Students will demonstrate the ability to use decision-making skills to enhance health

* 5.12.1 Examine barriers that can hinder healthy decision making.
* 5.12.6 Defend the healthy choice when making decisions.

Standard 7: Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks

* 7.12.3 Demonstrate a variety of behaviors to avoid or reduce health risks to self and others.

Specific Learning Objectives: By the end of this workshop participants will be able to:

1. Identify symptoms of the three most common STDs. (NHES 1)
2. Defend two personal behaviors that will reduce their risk of getting STDS. (talking to partner, abstinence, condom use.) (NHES 1)
3. Demonstrate for open communication with sexual partners about STD prevention. (NHES 7 and 5.)

Background:

"Nearly half of the 20 million new STDS diagnosed every year are among young people aged 15-24 years" (Centers for Disease Control and Prevention, 2016.) According to the CDC, gonorrhea, syphilis, and chlamydia reached its all time high in the United States in 2015 with number of STD cases still currently increasing. STDs not only can be costly, but cause many health problems such as: fetal, perinatal and reproductive health problems. They also can cause cancer and increased risk of contracting HIV infection.

If STDs are left untreated, they can advance to severe long-term health problems. These problems are especially serious in girls and young women. The CDC estimates that around 24,000 women who are left untreated or or undiagnosed with an STD end up infertile. This lesson is to promote strategies to prevent getting STDS and decrease these numbers.

Key Concepts, & Terminology:

1.) **STD signs and symptoms** (look at terminology)
2.) **Resources for getting help** (flyer included in appendix)
3.) **How to prevent STDS** (ways to prevent STDS)
    1.Use condoms
    2.Reduce number of sex partners
    3.Vaccination
    4.Mutual monogamy
    5.Abstinence
4.) **Talking to partner about STDS (**ways to talk to partner)
    1.First pick a good time to talk that works for the both of you
    2. Start the conversation. Use a line like "We've mentioned having sex and I think I'm ready to. I want to be able to relax and enjoy it, and I won't be able to unless I know we're protected against STDs."
    3.See how your partner responds, listen to what they have to say.
    4.Ask them if they have ever had an STD or have recently been tested then offer for you both to go get tested together.
    5.Be calm and open to what they have to say.

Terminology: 3 most common STD's in college students

Chlamydia: A common STD that can infect women and men. It can cause permanent damage to a women's reproductive system. It is spread through vaginal, anal, or oral sex. There is not always signs when a person is infected with the STD. Some symptoms for women include: abnormal vaginal discharge, and burning when urinating. Some symptoms in males include: a discharge from their penis, a burning sensation when urinating, or pain and swelling in one or both testicles. It can be cured with medication prescribed by your doctor.
Human Papillomavirus (HPV): Most common STD on college campuses. It is spread through vaginal, anal, or oral sex. There is no test to find out a persons HPV status. Most people do not know they are infected and do not have signs, however some people get genital warts. There is no treatment for the HPV virus but there are treatments for the health problems that it causes.
Genital/Oral Herpes: Caused by herpes simplex virus type 1and herpes simplex virus type 2. It is spread through vaginal, anal, or oral sex. You can become infected if you come into contact with the herpes virus in a herpes sore, saliva or genital secretions, or skin in the oral area if your partner has an oral infection or skin in the genital area if they have genital sores. There is no cure for herpes, however there is medication to prevent or shorten the outbreaks.

Teaching Steps (timed):

- ***Activity 1:*** Introduction-Ball toss game (5 minutes.) (See appendix for instructions)
- ***Activity 2:*** Conduct a phone game pre assessment to determine knowledge on what they know prior to the lesson (10 minutes.) (See materials, resources, preparation for link)
    - Can you get an STD from oral sex? **Answer*:*** yes, intercourse is not the only way to get an STD.

    - Can both genders get an STD? **Answer:** yes
    - Do oral contraceptives prevent a person from getting an STD? **Answer:** no, only abstinence and condoms prevent a person from an STD
    - How does a man know if he is carrying chlamydia? **Answer:** He may have signs such as abnormal discharge or a burning sensation when peeing.
    - Are STD's all bacteria? **Answer:** no, some STDs are viral while others are bacterial.
- **brief discussion after on quiz questions.**
- ***Activity 3****:* Watch YouTube video "How can I reduce my risk of getting a sexually transmitted disease?" (15 minutes) discuss key ideas from video (see materials, resources, preparation for link)
- ***Activity 4:*** Have participants get into small groups of 3 or 4 and brainstorm ways to talk to protect each other from STDs and record on large poster paper. Have each group report out their findings, compile into a master list. Instructor helps fill in gaps. (10 mins)
- **Activity 5:** Hand each participant a "resource for getting help" sheet and have participants volunteer reading each one (10 minutes) (see appendix)
- **Activity 6:** Hand out bingo card to each participant with a handful of condoms. Call out each question and have participants raise their hands to the answer the questions then put a condom on the answer. (15 minutes) (see appendix)

Assessment Measures:

AM 1: Quick quiz at beginning
AM 2: Brainstorming list
AM3: Sex bingo game

Materials, Resources, Preparation:

Large box of condoms
Large poster paper
Name game ball
Activity 2 quiz: https://play.kahoot.it/#/?quizId=8220d801-f976-48a9-8b6f-9cd974d31b36
Activity 3 video: https://www.youtube.com/watch?v=PKiPfX80pK4

Annotated Resource Bibliography:

Center For Disease Control and Prevention (2016). How you can prevent sexually transmitted diseases. Retrieved November 16, 2017, from https://www.cdc.gov/std/prevention/default.htm

This website provides the latest information and data on sexually transmitted diseases. This information will be used to inform the key concepts that will be presented in the lesson plans. The information presented in this source about the different types of sexually transmitted diseases such as chlamydia, gonorrhea and syphilis and the percentages of STDS in the US will be discussed in the lesson plan. This website was also used to choose which health standards will be addressed in the lesson. This is a good quality source because it is information from the government and is always being updated with the newest facts and information.

Garcia-Retamero, R., & Cokely, E. T. (2015). Simple but powerful health messages for increasing condom use in young adults. *Journal Of Sex Research*, *52*(1), 30-42. doi:10.1080/00224499.2013.806647

This journal provides information regarding the effectiveness of educational interventions on sexually transmitted diseases. The intervention positively promotes condom use and looks at the number of people who use condoms after the intervention versus those who did not attend the intervention. This information will be used to inform the key concepts that will be presented in the lesson plans. This is relevant because the study uses young adults which is the same target segment as in the lesson plans. It also is promoting the use of condoms which will be done during the lesson plan. It is a good quality source because it is an educational peer reviewed journal.

Teens Health (2015). Talking to your partner about STDs. Retrieved December 12, 2017, from http://kidshealth.org/en/teens/the-talk.html#

This website provides multiple ways to go about talking with your partner about having sex. It gives different ways to approach having the conversation and how to go about it so that you and your partner are comfortable. This information will be used to help participants discuss this topic in the lesson plan. Kidshealth.org is a good quality source because it is run by an organization and the articles and features that are published on their page are reviewed by medical professionals.

Neill, J. (2004, July 20). Name pantomime. Retrieved from December 12, 2017, from http://www.wilderdom.com/games/descriptions/NamePantomime.html

This website was used to find instructions for the opening name game. It came from the adventure learning business which provides games, group activities, exercises and initiatives for learning.

Rex, H. (2014, April 08). 4 ways you can get an STD without having sex. Retrieved December 12, 2017, from https://www.hercampus.com/health/sexual-health/4-ways-you-can-get-std-without-having-sex

This website article states different ways that a person can contract an STD without having having intercourse. This information will be used to inform the key concepts that will be presented in the lesson plans. Although not written by a doctor, this article refers to a doctor and uses his information to back her evidence.

STD test clinics. (2017). Retrieved December 21,2017, from http://www.stdtestclinics.com/new-hampshire/catholic-medical-center/

This website provides clinics that one can go to if they have any STD problems or health issues that they want to address. It states the location, hours, and what is offered in order for participants to be able to get help if they need it. This information will be given out on a flyer during the lesson for participants to have as a helpful resource.

American College Health Association (2016). Student objectives. Retrieved December 12, 2017, fromhttp://acha.org/HealthyCampus/Objectives/Student_Objectives/HealthyCampus/Student_Objectives.aspx?hkey=a9f191de-243b-41c6-b913-c012961ecab9

This website provides student objectives on sexually transmitted diseases and HIV. The objective used STD-1 “Increase the proportion of university health services that report screening sexually active women under the age of 26 for chlamydia” is relevant because the lesson plan is

on sexually transmitted diseases in college students and young adults, and chlamydia is the number 1 STD among that age group. This is a good quality source because it is coming from the American College Health Association which is a very well recommended organization.

Office of Disease Prevention and Health Promotion (2014). Sexually transmitted diseases. Retrieved December 12, 2017, from https://www.healthypeople.gov/2020/topics-objectives/topic/sexually-transmitted-diseases

This website was used to get background information on sexually transmitted diseases. It states the health problems that STDs cause and the risks of not getting an STD checked. This information will be used to give the instructor a brief background on the topic before teaching the lesson. This is a good quality source because it is a federal government website and it is always being updated on current health information.

Appendix of Support Materials:

Activity 1 name game: Have participants stand in a circle, arms distance apart. Ask each person to think of a verb and action which starts with the same letter as the person's first name. For example: a girl named Stephanie could use the verb "skipping Stephanie." Have participant toss the ball to someone in the circle. Have participant receiving the ball repeat the person's action and name who just tossed them the ball then do their own action and say name. Repeat the process until everyone has had a turn.

Activity 5 resource sheet:

Resources for getting help/ STD testing

Speare Memorial Hospital:
Call Us: (603) 536-1120
16 Hospital rd
Plymouth, NH 03264
Open 24-7

Plymouth State University Health Services:
Telephone: (603) 535-2350
Fax number: (603) 535-3291
open:
- Monday-Thursday 8:00 am to 4:30 pm (appointments begin at 8:30am)
- Friday 8:00 am to 3:00 pm (appointments begin at 8:30am)

Closed Saturday and Sunday
Services: Chlamydia Testing, HIV Testing, Gonorrhea Testing, Hepatitis B Testing, Hepatitis C Testing, Oral Herpes Testing, Genital Herpes Testing, Syphilis Testing

STD Testing in New Hampshire:
STD Testing Locations: Concord, Derry, Dover, Londonderry, Manchester, Nashua, Portsmouth, Salem
Hours: Mon.-Fri., 8am-5pm. No appointment necessary.
Phone: 877-862-2709
Services: Chlamydia Testing, HIV Testing, Gonorrhea Testing, Hepatitis B Testing, Hepatitis C Testing, Oral Herpes Testing, Genital Herpes Testing, Syphilis Testing

Ammonoosuc Community Health Services Incorporated
Littleton Office
25 Mount Eustis Rd
Littleton, New Hampshire 03561
Hours: Mon.-Sat., 8am-5pm.
Phone: 603-444-2464 (main)
Phone (Other)**:**
Fax: 603-444-5209
Services: Chlamydia Testing, Conventional HIV Blood Testing, Conventional HIV Oral Testing, FREE HIV Testing, Gonorrhea Testing, Hepatitis B Vaccine, Herpes Testing, HPV Vaccine, Rapid HIV Blood Testing, Rapid HIV Oral Testing, STD Testing, Syphilis Testing

Catholic Medical Center
l00 McGregor St
Manchester, New Hampshire 03102
Hours: 24 hours.
Phone: 603-668-3545 (main)
Phone (Other)**:** 800-437-9666 (toll-free)
Fax: None
Services: Chlamydia Testing, Conventional HIV Blood Testing, STD Testing

Activity 6 Bingo Card and Answer sheet:

B	I	N	G	O
"We need to use a condom"	Chlamydia	Abstinence	Genital/oral herpes	Pick a good time to talk
Plymouth State University Health Services	Sexually Transmitted Disease	HPV	Mutual monogamy	No
Pain or swelling in testicles	Get STD tested	**FREE** 	Indirect contact	Both
"Yes, always wear protection!"	Yes	False	Calm and open to what your partner has to say	True

1.) You leave the party with a guy who you have never been sexually active with before. You do not know his past health history and plan on hooking up with him tonight. What should you say to him before having sex?
2.) A type of STD that's symptoms are burning when urinating and abnormal discharge
3.) A place right on campus that one can go that has STD testing
4.) The only way to 100% prevent an STD
5.) There is no test to find out a person's status of this type of STD
6.) What does STD stand for?
7.) Caused by herpes simplex virus type 1and herpes simplex virus type 2.
8.) The first step in talking to a partner about STDs
9.) A way in which you both agree to only be sexually active with each other
10.) Are STD's all bacteria?
11.) Can you get an STD from oral sex?
12.) A way in which an STD can be transmitted without having intercourse

13.) A type of symptom a male may develop if he has Chlamydia
14.) Something you and your partner should both do before becoming sexually active with each other
15.) Can male or females get an STD?
16.) Oral contraceptives prevent a person from getting an STD Tor F
17.) Do you plan on using protection after this lesson?
18.) When talking to your partner about sex and STDs you should be…

Chapter 5

Positive Pals

Positive Pals
(Part 1, Every Unique Body is Okay)

Kayla Gould
Class of 2019
Measurement and Assessment in P.E.
Plymouth State University
December 15, 2017

Positive Pals (Part 1, Every Unique Body Is Okay)

Kayla Gould

Lesson plan for elementary students to promote positive body image perceptions. (~40 minutes)
Intended Learners: 3rd + 4th Elementary Students

Topic Overview: Body Acceptance
Workshop Goal: Increasing Body Positivity in Young Children

Healthy People 2020 Objectives:

Early and Middle Childhood:

- (Developmental) Increase the proportion of children who are ready for school in all five domains of healthy development: physical development, social-emotional development, approaches to learning, language, and cognitive development.

National Health Education Standards addressed:

- **Standard 1**: Students will comprehend concepts related to health promotion and disease prevention to enhance health.
  -1.5.1 Describe the relationship between healthy behaviors and personal health.
- **Standard 2**: Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.
  -2.5.2 Identify the influences of culture on health practices and behaviors.
  -2.5.3 Identify how peers can influence healthy and unhealthy behaviors.
- **Standard 4**: Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.
  -4.5.1 Demonstrate effective verbal and nonverbal communication skills to enhance health.
  -4.5.4 Demonstrate how to ask for assistance to enhance personal health.
- **Standard 8:** Students will demonstrate the ability to advocate for personal, family, and community health.
  -8.5.2 Encourage others to make positive health choices.

Specific Learning Objectives:

-By the end of the workshop, young learners will be able to identify at least 3 physical behaviors their healthy bodies can complete on a daily basis.

-By the end of the workshop, young learners will be able to recognize and get assistance when they hear a negative comment about themselves or others.

-By the end of this workshop, young learners will be able to identify 1 role model in their community.

Background, Key Concepts & Terminology:

Positive body image perceptions help to create self-confidence for many individuals in physical, mental and social situations on a daily basis. Body positivity is the act of believing, accepting and being grateful for the body every individual is given at birth. The main goal of body positivity is to understand that every individual has a different body to help them complete essential daily tasks.

Essentially young children should be starting to learn about positive body image around the age of 2 years old, at home and soon at school. Our target audience of young children, are highly influenced by their surroundings on a daily basis. A child's surrounding includes their social environment (parents, teachers, and friends) and their physical environment (community events, sports, school and home). It is important to make a meaningful impact about the importance of body positivity at a young age in order to benefit many aspects of a child's daily life and build a base of confidence for their future.

The information given during this lesson plan will aid teachers in creating a body positive environment at school and promoting conversations at home with families. A body positive environment includes beneficial social interactions, influencing healthy behaviors and promoting positive self-confidence/awareness. Body positivity can give young learners the tools/skills they need to succeed in creating a healthy lifestyle now and in the future when faced with negative body acceptance pressures. This lesson is part 1 in promoting positive body acceptance in young children.

- "The report, a compilation of the existing research on how kids and teens feel about their bodies, noted how more than half of girls and one-third of boys as young as 6 to 8 think their ideal weight is thinner than their current size. By age 7, one in four kids has engaged in some kind of dieting behavior." (CNN, 2015)
- "For instance, young people are often unaware that digital technology and manipulation in the fashion industry use air brush and digital enhancement to portray the 'ideal' female and male body. These images promote unrealistic standards that are impossible to achieve." (US National Library of Medicine, National Institutes of Health, 2003)

- Body Image - a subjective picture of one's own physical appearance established both by self-observation and by noting the reactions of others. (Merriam-Webster)
- Acceptance – to approve/believe a behavior.
- Affirmation – recognizing and verbalizing positive comments.

Teaching Steps (40 Minutes):

Engage, Describe, Do, Examine, Analyze, Apply/Create/Integrate, Assess, Close

1. Engage Students (2 Minutes)
   - Have each student explain the physical activities they participated in over the past 3 days.
   - Have all students stand up as a class together and say out loud, "This is my healthy body and I can do anything!"
2. Describe (5 Minutes)
   - Explain the importance of respecting our bodies (physically, mentally and socially).
   - Explain how every individual's body is unique and special for the activities/sports they participate in, including adults.
   - Briefly explain how a student can ask for help from a teacher or parent, if they hear a negative comment about their body or someone else's.

3. Do (8 Minutes)
   - Have each student draw an adult role model in their community doing a daily physical activity, with a few markers on a piece of paper.
   - Have the students draw a smiley face somewhere on the paper to promote a positive connection between the role model and their strengths.
4. Examine (5 Minutes)
   -Have the students share their drawings in small groups of two or three.
   -Have each student share the name of their role model with the class.
5. Analyze (5 Minutes)
   -Call on a few students to explain why their role model is excellent at their physical activity.
   -Example answers: She is a fast runner because of her long powerful legs, He is strong because of his powerful muscles.
   -Write on the board the students answers, and have the class look at them.
   -Discuss how the answers are unique to every body type
   -Examples: Construction Workers have big and strong bodies so, they can work hard to make houses, and Moms have to be caring to raise children. (Everyone is a “Do-er”)
6. Apply (10 Minutes)
   -Have students write 3 words to describe the benefits of their bodies on a piece of paper.
7. Assess (3 Minutes)
   -Have a group discussion with all students about only talking positively about their bodies and the bodies of others.
   -Remind students to ask a teacher, parent or adult for help if they hear a negative comment.
8. Closing (2 Minutes)
   -Have students sign their name on their paper.
   -Have each students stand up and state out loud, “I like my body just the way it is because it helps me to move and have fun.”

Assessment Measures:

- Students will be able to write 3 words to describe the benefits of their unique bodies.
- Students will be able to recognize a role model in their community.
- Students will be able to name an adult they can ask for help and support.

Materials, Resources, Preparation:

- Chairs & Tables enough for each participant
- Watch or timer
- Whiteboard & marker
- Paper for each child
- Colored Markers

Annotated Resource Bibliography & Extended Teaching Resources/Articles:

Body Image Medical Definition. (n.d.). Retrieved November 25, 2017, from https://www.merriam-webster.com/medical/body%20image

The definition of Body Image, “a subjective picture of one's own physical appearance established both by self-observation and by noting the reactions of others.” This definition is helpful to gain an understanding of the aspects/concepts that go into creating a positive body perception for individuals. The definition will help the teacher to give the students a deeper understanding of the topic.

Damiano, S., Cornell, C., Hart, L., Sutherland, F., & Paxton, S. (2013). A parent's guide to promoting positive body image in their young children: Development of a prevention resource. Journal of Eating Disorders 1(Suppl 1), 40. doi:10.1186/2050-2974-1-S1-O40

This article helps teachers to get an understanding of how they can start conversations with parents at home to create an open household for body acceptance questions. A child’s surrounding includes their social environment including parents, teachers, friends and their physical environment including community, sports they participate in, school and home. It is important to make a meaningful impact of body acceptance at home in order to benefit many aspects of a child’s daily life outside of school and build a base of confidence for their future.

Early and Middle Childhood. (2017, November 11). Retrieved November 25, 2017, from https://www.healthypeople.gov/2020/topics-objectives/topic/early-and-middle-childhood

Healthy People 2020 is a group of researchers that make projections for the state of health our nation will be in the year 2020. The projections help to make a goal for our lesson plans to create and build a solid base for students now. The objectives from Healthy People 2020 help the teacher to assess their student’s progress towards understanding and living a healthy lifestyle.

Hart, L., Damiano, S., Paxton, S., & Jorm, A. (2014). How can i protect my child?: A delphi guidelines study on parenting to prevent body image and eating problems in young children. Journal of Eating Disorders, 2(Suppl 1), 30. doi:10.1186/2050-2974-2-S1-O30

This article helps parents and teachers to understand the influences our society puts on young children to participate in unhealthy behaviors in order to physically look a certain way. By gaining a deeper understanding of the topic of Body Acceptance, parents and teachers can start to understand the warning signs of a child who may need help in selecting healthier behaviors. Finally, this article gives the parent or teacher suggestions on how to make a meaningful impact to help the student into a beneficial direction.

Littleton, H.L. & Ollendick, T. Clin Child Fam Psychol Rev (2003) 6: 51. https://doi.org/10.1023/A:1022266017046

The research study, Negative Body Image and Disordered Eating Behavior in Children and Adolescents: What Places Youth at Risk and How Can These Problems be prevented? helps in explaining the pressures put on a child to physically look a certain way and the negative consequences that may be in effect. The article will allow teachers to get a better understanding of the issue at hand and be able to talk/counsel students effectively. It is important for teachers to build a trusting relationship with their students in order for them to make a meaningful impact of support.

McCabe, Marita P; Ricciardelli, Lina A. Adolescence; Roslyn Heights Vol. 36, Iss. 142, (Summer 2001): 225-40.

This article was very important in understanding the influences a role model has on younger children. A child's daily surroundings include their social environment of parents, teachers, friends and community members. A young child is trying to learn from all of these individuals in every way. It is very important that a child's role model is positive and beneficial to their overall health. Young children are always listening and trying to complete activities they see adults doing. This article by McCabe, Marita P; Ricciardelli, Lina A., helped to create the activities included in this lesson plan. The results from this study helped to give evidence on how impactful parents, or teachers are beneficial for young learners.

Morris, A. M., & Katzman, D.K., (2003). The impact of the media on eating disorders in children and adolescents. Retrieved December 12, 2017 from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2792687/

This article was used to give the teacher or facilitator of this program some background information on how media, and other aspects of a children's daily life can make a huge impact on children's thinking about their own bodies. Children learn from watching others and this may lead them to participating in negative health behaviors. It is important we are good role models for our children on a daily basis to ensure we are showing them how beneficial healthy behaviors are to our bodies.

National Health Education Standards. (2016, August 18.) Retrieved November 25, 2017, from http://www.cdc.gov/healthyschools/sher/standardds/index.htm

National Health Education Standards are a collection of baseline assessments for students to complete in order to understand how participating in healthy behaviors on a daily basis can influence their lifespan. This lesson plan refers to the standards for young children to make sure the students are learning beneficial health information intended for their age.

Wallace, K. (2015, February 13). Kids as young as 5 concerned about body image. Retrieved December 12, 2017, from http://www.cnn.com/2015/02/13/living/feat.body-image-kids-younger-ages/index.html

This article by Wallace, K., explains the impact a child's surroundings have on them to physically look and participate in certain health behaviors at the young age of 5 years old. These thoughts and behaviors by children can lead to dangerous activities if not addressed and given proper information at a young age. The information given in this article is very useful in helping a teacher understand when and how to teach body positivity to children. It is important to be positive, supportive and open to any questions a student might ask.

Positive Pals
Part 2
(You Are Perfect Just The Way You Are)

Marissa Merrill

Promoting Health Across the Lifespan

Plymouth State University

December 15th, 2017

Title: Positive Pals Part 2 (You Are Perfect Just the Way You Are)

Author: Marissa Merrill

Time & Format: 75 minutes in a classroom setting with computers available

Audience/Learners: Elementary School Students (Grades 3-4)

Topic Overview:

This workshop will help to inform children of the impact that body image has on social, mental and emotional health and learn new ways to be body positive. Puberty can cause emotional and physical changes when growing up which a lot of the time causes kids to become unhappy or self-conscious about their appearance. In this program, students will learn the true meaning of being positive versus negative when it comes to body image. The messages received by young children these days such as peer pressure, culture and media about the "ideal body" will be looked at closely during this lesson. The lesson will focus on making choices to accept and be proud of their body by what's inside and not what's on the outside.

Healthy People 2020 Objective(s):

- **EMC-1** (Developmental) Increase the proportion of children who are ready for school in all five domains of healthy development: physical development, social-emotional development, approaches to learning, language, and cognitive development

Workshop Goal:

To increase the use of positive body practice in young children on a daily basis and through social media.

National Health Education Standards addressed:

Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.

- 1.5.1 Describe the relationship between healthy behaviors and personal health.

Standard 2: Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.

- 2.5.5 Explain how media influences thoughts, feelings, and health behaviors.

Standard 7: Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

- 7.5.2 Demonstrate a variety of healthy practices and behaviors to maintain or improve personal health.

Specific Learning Objectives (linked to NHES and assessments):

Through participation in this workshop learners will be able to:

1. Define body image and list 2 examples of positive and negative body image. (NHES 1)
2. Analyze images in the media and identify how images are distorted to fit society's definition of the "ideal" or "perfect" body. (NHES 2)
3. List 3 body positive affirmation about their body image. (NHES 7 + NHES 1)

Background, Key Concepts & Terminology:

Promoting certain body types in social media has a great impact of overall self-confidence and self-esteem at a young age because they look up to them as role models. By challenging the stereotypes portrayed in social media, we can then help students at a younger age realize that there is no ideal body type and give them the direction towards accepting their own body type and making the best of what they've been given.

Body image: What you believe about your appearance which may include memories, shape, weight, and how you feel in your body.

Social media: Websites or applications that let us share content or participate in social networking.

Positive thinking: Process of creating good thoughts that help transform energy into reality.

Positive body image: A clear appreciation and acceptance of your unique body and understanding that physical appearance says very little about your character and values.

Self-esteem: Confidence in one's own abilities and or worth. (self-respect)

Positive affirmations: Positive, specific statements that help someone overcome negative thought. Positive affirmations help you visualize or believe in yourself that you have worth and are special and mean something no matter what anyone says.

Negative body image: Arise when someone feels that they don't measure up to what society, family, friends, and the media expect them to look like. Comparing themselves with others, feeling ashamed, embarrassed, lacking confidence or feeling inadequate are all effects of negative body image.

Teaching Steps:

Engage & Motivate:

- To engage and get students attention have them grab a magazine at the front of the class or use a computer to find their favorite famous person or role model they may look up to.
- After students have found their role model we will then have a group discussion and class introduction. Students will introduce themselves, share with the class who they chose and why as well as discuss how these people might influence body image. (10 minutes)

Do, Ask, & Describe:

- Body Swap Activity: Have students cut out pictures of young kids, models, athletes and tv celebrities. Cut the heads off from the bodies and start mix and matching different bodies and heads so they can see how different everyone is and that being different isn't a bad thing but what makes us unique. (10 minutes) (LO1 & LO2)
- Hand out magazines while students are doing the first activity
- Social Media Activity: Once students have finished the questionnaire have them look through the magazines or go on a computer to find examples of how social media negatively shows body image and then find something that show positive body image. (10-15 minutes) (LO1)

Discuss, Examine, & Analyze:

- Once students are done with the social media activity a group discussion on the first activity will take place. Students will have the chance to discuss what they did with the bodies and heads and why they may have done what they did. This activity should hopefully show young children that everybody looks different and if everybody looked the same then we would all look pretty weird. Showing them the importance of being young and how our bodies are changing and that we should focus on loving ourselves for what it allows us to do and not what it looks like. (5 minutes) (LO1 & LO2)
- Once students have discussed the body swap activity, we will then have a short discussion on why students may have a favorite person or role model they look up to. This discussion will help students examine and analyze more into how social media truly does impact body image. (5 minutes) (LO1)
- Once both activities have been discussed another short discussion will take place on explaining to students what it body image really means, how to think and be positive when it comes to our bodies so that we're confident and happy with who we are. The discussion will emphasize on the fact that our characteristics such as body parts don't make us who we are but what's inside such as attributes or qualities like being strong, independent, hard-working and caring that truly matter in loving your body for what it allows them to do rather than what we see when we look in the mirror. (10 minutes) (LO1, LO2, & LO3)

Apply, Create, & Integrate:

- After all discussions have finished students will be given examples of how to be body positive and what positive affirmations (handout) are so they can apply and create a list of their own. (10 minutes) (LO3)

Closure Activity:

- Have students write down their favorite body positive affirmation and stick it up on the board for everyone to see. This action will help students learn who they truly are from the inside and see how they should look at other people by seeing their positive affirmations on the board. In doing this closure exercise students have shown that they understand and learned what it means to be body positive and how to accept others from the inside and not just what's seen on the outside. (10 minutes) (LO1 & LO3)

Assessment Measures:

Students will start with finding who they look up to as a role model to help examine what social media can do, following that students will then start their first activity looking at different bodies and examining how they might look with different parts to help them understand the importance of being unique and loving what we've been given. Class discussions will take place after every activity to help students learn and see the negative impacts of how body image is portrayed and what people shouldn't see someone as. Students will learn what body image, positive thoughts and body image, self-esteem and what positive affirmations are that all influence and help them truly see who they are. This workshop will allow students to learn the true meaning of body image and help them understand that body image focuses on what's inside and not on the outside and with that be able to contribute positive thoughts into their everyday lives.

Materials, Resources, Preparation:

1. Magazines
2. Computers/ Cell phones
3. Scissors and glue
4. Paper/Pencils
5. Positive body affirmation list handout
6. Positive body affirmation examples handout
7. Sticky notes

Annotated Resource Bibliography:

Early and Middle Childhood. (2017, November 11). Retrieved November 25, 2017, from

https://www.healthypeople.gov/2020/topics-objectives/topic/early-and-middle-childhood

Greve, J. E. (2014). Study: Even Grammar School Kids Are Unhappy With Their Bodies.

Time.Com, 1

This Journal explains how children at a young age feel unhappy or uncomfortable with their bodies. This journal can be used as a tool, to understanding how a child comes to have unhappy feelings with themselves. It's also a great example of how to help aid a child to feel confident in themselves.

Livingstone, S. M. (2008). *Young People and New Media: Childhood and the changing media environment.* London, UK: SAGE Publcations.

The book *Young People and New Media: Childhood and the changing media environment*, I found very informational when it comes to social media and how it influences young children. Media plays a big role in our lives today that children and youth are greatly impacted by the media because it's become such a big part of our leisure time and daily lifestyle. It's evident that as a society we can't live without technology but this book will help us create lesson plans that can focus on being more body positive through social media and how we can create more positive behaviors at a younger age.

National Health Education Standards. (2016, August 18.) Retrieved November 25, 2017, from http://www.cdc.gov/healthyschools/sher/standardds/index.htm

OGT Blogger Friends. (2015, September 18). Retrieved December 11, 2017, from https://www.pinterest.com/pin/168603579777523580/?autologin=true

Pearson, A. N., Follette, V. M., & Heffner, M. (2010). *Acceptance and Commitment Therapy for Body Image Dissatisfaction: A Practitioner's Guide to Using Mindfulness, Acceptance, and Values-Based Behavior Change Strategies*. Oakland, CA: New Harbinger Publications.

Throughout this book written by Adira Pearson, Victoria Follette and Michelle Heffner, it discusses how to teach people how to let go of self-judgement and avoid perfectionism. The book includes teaching males and females how to be more accepting rather than focusing on body image dissatisfaction. Using this source will help us reach our goal of delivering a strong lesson plan involving body acceptance.

Van Vonderen, K. E., M.S., & Kinnally, W., Ph. D. (2012). Media Exposures and Body Image Ideals. *The Media and Body Image: If Looks Could Kill,* 154-173. SAGE Publications.

This journal focuses on a study done on young students with the connection between media and body dissatisfaction. Through self-esteem and other social factors such as media figures, parental and peer attitudes these young children were greatly impacted on the effects of their surroundings. This article helps us better understand how and why kids at such a young age are affected by body image. With this article we then can create effective lesson plans so that these young kids can learn how to have more self-esteem and positive behaviors in their everyday life even when social media is right in front of their faces every day.

Appendix of Support Materials:

Activity 1: Body Swap

Activity 2: Social Media

Handout- Positive Affirmation Example List

I am smart.	I am a good friend.
I am a great listener.	I am loved.
I am unique.	I am compassionate.
I show empathy to others.	I am brave.
I have a strong body.	I like myself the way I am.
I am creative.	I am resilient.
I care for others.	There is no one quite like me!
I am helpful.	I am funny.
I have a positive attitude.	I try my hardest.
I love my life!	I am beautiful inside and out.

Handout to be done by students to show they have learned what a positive affirmation is and be able to show positive attributes about themselves that they like.

Positive Affirmation List:

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.

POSITIVE PALS: FINDING CONFIDENCE THROUGH PHYSICAL ACTIVITY

Simone Murray

DECEMBER 15, 2017

PLYMOUTH STATE UNIVERSITY

Promoting Health Across the Lifespan

Title: Positive Pals: Part 3: Finding Confidence Through Physical Activity

Author: Simone Murray

Time & Format: 60 minutes, gymnasium setting, Physical Activity workshop

Audience/Learners: 3rd and 4th Graders

Topic Overview: Participants will explore a variety of different types of physical activity that they might be passionate about. Through trial of two minute stations, they will be able to experience different ways to be physically active, which will teach them that they can have fun while being physically active. Participants will make a bulletin board together that shows the different ways someone can be physically active. Each child will contribute a picture drawn of their favorite form of Physical Activity and why it makes them feel confident and healthy.

Workshop Goal:

Increasing body positivity in young children.

Healthy People 2020: Early and Middle Childhood: EMC-1 Increase the proportion of children who are ready for school in all five domains of healthy development: physical development, social-emotional development, approaches to learning, language, and cognitive development

National Health Education Standards addressed:

Standard 1: 1.5.1 Describe the relationship between healthy behaviors and personal health.

Standard 7: 7.5.2 Demonstrate a variety of healthy practices and behaviors to maintain or improve personal health.

Specific Learning Objectives (linked to NHES and assessments):

Through participation in this workshop learners will be able to:

[LO 1: Describe examples of 3 ways to be physically active. (NHES 7)]

[LO 2: Explain how their favorite activity makes them feel confident. (NHES 1)]

Background, Key Concepts, Terminology:

At the age of five, children start to worry about their physical appearance. This can include comparing themselves to peers, or role models that they may see in the media. By 3rd and 4th grade low self-esteem is much more common. This is a perfect time to intervene, and help guide them to accept themselves.

One way we can help children to be more accepting of themselves, is by showing them ways to appreciate what their body can do! For example, jump, run, stretch, walk, etc., once they realize their potential it'll make them feel strong, proud, and confident. Giving children the opportunity to learn different ways that they can be physically active, will help them to accept themselves. Teaching them physical activity can also show them a positive outlet when they need to relieve stress, or anger. This in turn, will teach them how to have more control of their emotions, which will also help them to gain confidence.

Helping Children understand that they're perfect the way they are, is possible through positive reinforcement:

Body Acceptance- Being satisfied and confident in oneself.

Body Image- The way someone perceives their body as, positive or negative.

Body Privilege- People who have a body type that society says is "right," will have things handed to them, and receive more positive attention than someone who has the "wrong" body type.

(Greve, 2017)

Teaching Steps (timed):

- Activity 1: 30 minutes in all, 25 minutes for activity, 5 minutes for discussion.
  Students will travel in groups and visit the Physical Activity stations that are set up, they get to explore each station for 5 minutes. Every station will have a different form of physical activity, so each student can find a type that suits them and their interests.
  1. Station 1: Zumba Video.
  2. Station 2: Basket Ball Open Shoot.
  3. Station 3: Yoga for Kids.
  4. Station 4: Timed Sprints.
  5. Station 5: Free Exploration (Put out jump ropes, hula hoops, scooters, and other toys that promote Physical Activity).

6. Students will discuss and describe their favorite activity, and why it makes them feel good. (LO 2)

- Activity 2: 30 minutes in all, 10 minutes for discussion, 20 minutes for activity.
  1. The class will analyze and discuss other fun ways to be physically active, that were not included in the stations (i.e. soccer), and write down three that are interesting to them. (LO 1)
  2. Students will create a drawing or write a paper, that explains how their favorite activity makes them feel (happy, strong, confident, etc.). Students will contribute their picture or writing to a bulletin board to put on display. (LO 2)

Assessment Measures:

AM 1: Write down 3 forms of Physical Activity that make them feel positive.

AM 2: Bulletin board for students to share their favorite form of Physical Activity and how it makes them feel.

Materials, Resources, Preparation:

Gymnasium

Stopwatch

TV

Zumba Video/Instructor

Yoga Matts

Yoga Video/Instructor

Basketballs

Basketball Hoops

Jump Ropes, Hula Hoops, other exercise toys

Bulletin Board

Coloring Materials and Paper

Annotated Resource Bibliography:

Early and Middle Childhood. (2017, November 11). Retrieved December 11, 2017, from https://www.healthypeople.gov/2020/topics-objectives/topic/early-and-middle childhood

- The Healthy People 2020 resource is used in this lesson plan to find an appropriate objective for this age group. It also provides information on intervention, and resources.

Greve, J. E. (2014). Study: Even Grammar School Kids are Unhappy With Their Bodies. *Time.Com*, 1

- This Journal explains how children at a young age feel unhappy or uncomfortable with their bodies. This journal was used as a tool, to understanding how a child comes to have unhappy feelings with themselves. It's also a great example of how to help aid a child to feel confident in themselves. This is a great resource used to create an effective lesson plan to promoting a positive self-image.

Le, T. P., Merricks, K., Nadeau, J. M., Ramos, A., & Storch, E. A. (2017). Intensive Exposure and Response Prevention for Adolescent Body Dysmorphic Disorder with Comorbid Obsessive–Compulsive Disorder and Major Depressive Disorder. *Clinical Case Studies*, *16*(6), 480-496. doi:10.1177/1534650117737176

- This Journal explains the extremes of poor nutrition and lack of self-confidence. This article is used as a tool to help give children the correct tips to their nutrition and to lead them on the right path of accepting themselves! This resource will be perfect for creating a lesson plan for teaching children proper nutrition habits, and why good nutrition is important.

National Health Education Standards. (2016, August 18.) Retrieved December 11, 2017, from http://www.cdc.gov/healthyschools/sher/standardds/index.htm

- This resource was great for creating this lesson plan. The National Health Education Standards website, breaks down each standard into grade level. It's very helpful at explaining where a student should be, based on their grade, and what they should be understanding.

Positive Pals

By: Natalie Lydon, Promoting Health Across the Lifespan, Plymouth State University 2017

Title:
Positive Pals Part Four: Mindful Meditation

Author:
Natalie Lydon

Time & Format:
45-minute classroom setting mindful workshop

Audience/Learners:
Elementary Students (Grades 3 & 4)

Topic Overview:
Participants will experience and practice mindfulness through discussion, videos and meditations. Two types of meditation will be taught to participants. Interaction between students will help influence how to practice giving positive affirmations to one another.

HP 2020 Objectives:
Early and Middle Childhood:
1-(Developmental) Increase the proportion of children who are ready for school in all five domains of healthy development: physical development, social-emotional development, approaches to learning, language, and cognitive development

Workshop Goal:
Increase positive body acceptance in young children.

National Health Education Standards addressed:
NHES Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.

- 1.5.1 Describe the relationship between healthy behaviors and personal health.

NHES Standard 4: Students will demonstrate the ability to use interpersonal communication skills.

- 4.5.1 Demonstrate effective verbal and nonverbal communication skills to enhance health.

NHES Standard 5: Students will demonstrate the ability to use decision-making skills to enhance health.

- 5.5.6 Describe the outcomes of a health-related decision.

NHES Standard 7: Students will demonstrate the ability to practice health-enhancing behaviors and and avoid or reduce health risks.

- 7.5.2 Demonstrate a variety of healthy practices and behaviors to maintain or improve personal health.

Specific Learning Objectives (linked to NHES and assessments):

Through participation in this workshop learners will be able to:

1: Identify 2 examples of ways to meditate (NHES 7)
2: Describe how they feel after meditation (NHES 5)
3: Demonstrate how to use positive affirmations for themselves and to others (NHES 4)

Background, Key Concepts & Terminology:

Background:

Practicing mindfulness and meditation at a young age is important in children. When mindfulness is taught to children through this lesson plan they "essentially learn how to do something healthy" that can make them feel positive about their bodies (Greco, L. A., & Hayes, S. C.). Practicing meditation relaxes and clears the mind of any negative thoughts which helps children feel more confident in themselves.

Key Concepts:

Yoga- This is important to the lesson because students will engage in a short yoga class and learn different poses
Meditation- This is important to the lesson because students will learn what meditation is and practice two forms of it in this lesson plan
Affirmation- This is important to the lesson because students will learn how to create positive affirmations to share with others and to create for themselves.

Terminology:

1. Yoga-a Hindu spiritual and ascetic discipline, a part of which, including breath control, simple meditation, and the adoption of specific bodily postures, is widely practiced for health and relaxation.
2. Meditation- the action or practice of meditating, a written or spoken discourse expressing considered thoughts on a subject.
3. Affirmation- The action or process of affirming something or being affirmed, emotional support or encouragement.

Teaching Steps (timed):

[Engage, Describe, Do, Examine, Analyze, Apply/Create/Integrate, **Assess**, Close]

- Activity 1: Engage student in conversation about what they think meditation is and if they ever have done it. ~5 minutes (LO 1)
- Activity 2: Describe two types of meditation (yoga and coloring) ~5 minutes (LO1)
- Activity 3: Hand out coloring papers and markers, let the children color ~10 minutes

- Activity 4: Gather in open area for yoga poses, engage students by having them mimic your movements of “animal” yoga poses. (Tiger-Cat pose, Frog-Garland pose, Flamingo-Tree pose) Have everyone demonstrate at once their favorite animal pose ~15 minutes
- Activity 5: Have students engage in conversation of how doing these activities made them feel~5 minutes
- Activity 6: Describe briefly positive talk and explain affirmations and give examples. Hand out a homework sheet explaining how to create their own affirmations and bring them to the following class~5 minutes

Assessment Measures:

AM 1: Write 2 positive affirmations down on a piece of paper at home to be brought back and shared with the class

AM 2: Demonstrate in class their favorite “animal” (yoga) position

Materials, Resources, Preparation:

Markers, colored pencils, paper for coloring, homework sheet (see Appendix of Support Materials)

Annotated Resource Bibliography:

Early and Middle Childhood. (2017, December 11). Retrieved December 11, 2017, from https://www.healthypeople.gov/2020/topics-objectives/topic/early-and-middle-childhood

This website had information that related to our topic because we were able to pin point exactly what our objective was in relation to Healthy People 2020. We picked the objective that talked about children in early and middle stages of their childhood since our lesson plan is for children in grades three and four.

Greco, L. A., & Hayes, S. C. (2008). *Acceptance & Mindfulness Treatments For Children & Adolescents: A Practitioner's Guide*. Reno, NV: Context Press.

This book written by Laurie Greco and Steven Hayes helped explain how to modify children's behaviors towards each other and themselves. It talks about different therapies that can be used to teach young children how to be more accepting. The book relates to our topic because as part of the lesson plan we seek to teach children mindfulness and how to be accepting of different body images. (Natalie)

Pearson, A. N., Follette, V. M., & Heffner, M. (2010). *Acceptance and Commitment Therapy for Body Image Dissatisfaction: A Practitioner's Guide to Using Mindfulness, Acceptance, and Values-Based Behavior Change Strategies*. Oakland, CA: New Harbinger Publications.

Throughout this book written by Adira Pearson, Victoria Follette and Michelle Heffner, it discusses how to teach people how to let go of self-judgement and avoid perfectionism. The book includes teaching males and females how to be more accepting rather than focussing on

body image dissatisfaction. Using this source will help us reach our goal of delivering a strong lesson plan involving body acceptance. (Natalie)

Appendix of Support Materials

Positive Affirmation Homework Sheet

Name:

Directions: Your homework this week is to create TWO positive affirmations either for yourself or that you could share with a friend. Listed below are a few examples.

Examples:

These are two examples of positive affirmations for yourself.

1. I am strong.
2. I show others I care.

These are two positive affirmations you could share with a friend.

1. You are caring.
2. You are smart.

Now it's your turn to try! Remember, these can either be affirmations for yourself, for others or both!

1.

2.

Chapter 6

Stress Management for College Students

Control Your Stress
Sydney Wacht
HE 3230.01
Plymouth State University
December 2017

Title: Control Your Stress

Author: Sydney Wacht

Time & Format: 60 minutes workshop lesson

Audience/Learners: College Student ages 18-23

Healthy People 2020 Objectives: HRQOL/WB-1.2: Increase the proportion of adults who self-report good or better mental health.

Background: 75-90% of all doctors' visits are for stress related ailments and complaints. Stress affects everyone at some point and is hard to control and get rid of. It is considered to be a mental disease because it is all just overthinking events and ideas in our heads. College students experience and are surrounded by a lot of stress. They are exposed to school work, new people, new drama, and everything in-between. Stress can take a huge toll on your body. It affects every system in the body in some way.

Topic Overview: Students will be able to recognize stressors in their lives, and regain control of their stress. Interactive discussion will be used along with group talk will help students acknowledge their stressors and give and receive advice regarding stress.

Workshop Goal: Students will be able to identify three triggers and three symptoms of their stress.

National Health Education Standards addressed:
Standard 1: Comprehend Concepts
- 1.12.2 Describe the interrelationships of emotional, intellectual, physical, and social health.
- 1.12.3 Analyze how environment and personal health are interrelated.
- 1.12.5 Propose ways to reduce or prevent injuries and health problems.

Standard 4: Interpersonal Communication Skills
- 4.12.1 Use skills for communicating effectively with family, peers, and others to enhance health.
- 4.12.3 Demonstrate strategies to prevent, manage, or resolve interpersonal conflicts without harming self or others.

Standard 6: Goal Setting Skills
- 6.12.3 Implement strategies and monitor progress in achieving a personal health goal.

Standard 7: Health-Enhancing Behaviors
- 7.12.3 Demonstrate a variety of behaviors to avoid or reduce health risks to self and others.

Specific Learning Objectives *Through participation in this workshop learners will be able to:*
1. Identify what triggers stress in their own lives.
2. Describe what symptoms correlate with their stressors.
3. Understand how others cope with stressors and symptoms of stress.

4. Recognize how to cope with their own stressors.

Key Concepts & Terminology:

- Stress: your body's way of responding to any kind of demand or threat.
- Symptom: a physical or mental feature that is regarded as indicating a condition of disease, particularly such a feature that is apparent to the patient.
- Trigger: cause (an event or situation) to happen or exist.
- Cope: deal effectively with something difficult.

Teaching Steps (timed):

- Introduction with quick lesion about stress and what it does to the body. 15 min
- Have students get into small groups of four and discuss what triggers their stress 5 min
- Have students then talk about what they do to cope with stress, keep in mind students in the groups are taking their other group members strategies and using them as advice. 5 min
- Regroup and discuss as a class what learners do to cope with their stress. Students are welcomed to take notes. 10 min
- Back in their groups will hand out goal sheet, and student are expected to fill out goal sheet with three triggers, three symptoms, and three coping strategies to their stress with the help of their group mates if needed. 15 min
- Last comments and learners will then fill out the evaluation form. 10 min

Assessment Measures:

Materials, Resources, Preparation:

- Desks set up in groups of 4
- Enough chairs for class
- Print out of how stress affects the body
- Print out of ways to reduce stress
- Goal sheet for students to fill out
- Relaxing music to listen to while in groups
- Evaluation form

Name_____

Stress Goal Sheet

Top three stress triggers

1. **_____**
2. **_____**
3. **_____**

Top three symptoms to your stress

1. **_____**
2. **_____**
3. **_____**

Top three coping strategies to your stressors

1. **_____**
2. **_____**
3. **_____**

Here are ways in which some key body systems react.

1 NERVOUS SYSTEM

When stressed — physically or psychologically — the body suddenly shifts its energy resources to fighting off the perceived threat. In what is known as the "fight or flight" response, the sympathetic nervous system signals the adrenal glands to release adrenaline and cortisol. These hormones make the heart beat faster, raise blood pressure, change the digestive process and boost glucose levels in the bloodstream. Once the crisis passes, body systems usually return to normal.

2 MUSCULOSKELETAL SYSTEM

Under stress, muscles tense up. The contraction of muscles for extended periods can trigger tension headaches, migraines and various musculoskeletal conditions.

3 RESPIRATORY SYSTEM

Stress can make you breathe harder and cause rapid breathing — or hyperventilation — which can bring on panic attacks in some people.

4 CARDIOVASCULAR SYSTEM

Acute stress — stress that is momentary, such as being stuck in traffic — causes an increase in heart rate and stronger contractions of the heart muscle. Blood vessels that direct blood to the large muscles and to the heart dilate, increasing the amount of blood pumped to these parts of the body. Repeated episodes of acute stress can cause inflammation in the coronary arteries, thought to lead to heart attack.

5 ENDOCRINE SYSTEM

Adrenal glands

When the body is stressed, the brain sends signals from the hypothalamus, causing the adrenal cortex to produce cortisol and the adrenal medulla to produce epinephrine — sometimes called the "stress hormones."

Liver

When cortisol and epinephrine are released, the liver produces more glucose, a blood sugar that would give you the energy for "fight or flight" in an emergency.

6 GASTROINTESTINAL SYSTEM

Esophagus

Stress may prompt you to eat much more or much less than you usually do. If you eat more or different foods or increase your use of tobacco or alcohol, you may experience heartburn, or acid reflux.

Stomach

Your stomach can react with "butterflies" or even nausea or pain. You may vomit if the stress is severe enough.

Bowels

Stress can affect digestion and which nutrients your intestines absorb. It can also affect how quickly food moves through your body. You may find that you have either diarrhea or constipation.

7 REPRODUCTIVE SYSTEM

In men, excess amounts of cortisol, produced under stress, can affect the normal functioning of the reproductive system. Chronic stress can impair testosterone and sperm production and cause impotence.

In women stress can cause absent or irregular menstrual cycles or more-painful periods. It can also reduce sexual desire.

Annotated Resource Bibliography:

Solution for Stress. (2017). Retrieved November 14, 2017, from HeartMath Institute website: https://www.heartmath.org/resources/solutions-for-stress/reducing-stress/

This link posted by the HeartMath Institute has vital information and recommendations about stress and the solutions to stress. After more than 23 years of research, these researchers go beyond the belief that stress is our perception of events rather than the events themselves. They were able to link unhealthful stress levels to people's emotional responses to their events. I found this very interesting and it lead me to read more of the article.

Stress Effects. (2017, January 04). Retrieved November 14, 2017, from The American Institute of Stress website: https://www.stress.org/stress-effects/

This source goes in very deeply about the physical and emotional disorders linked to stress and how they affect the body and our lives. It provides 50 signs and symptoms of stress along with ways that the body systems react to stress. It has examples for the muscular, skeletal, respiratory, nervous, cardiovascular, gastrointestinal, endocrine and finally the reproductive systems. It is hard to imagine all the things that stress does to ones health and wellbeing, until all the facts are in front of you and have been proven and studied for years.

National Health Education Standards. (2016, August 18). Retrieved December 4, 2017, from https://www.cdc.gov/healthyschools/sher/standards/index.htm

This source came in very handy when looking for what National Health Education Standards fit in my lesson plan. It lists all of them right in order by grade, and is so easy to follow.

Appendix of Support Materials:

-sheet for students to fill out to help them recognize their stressors
-picture showing how stress affects all parts of the body

Creative Commons License Icon:

Progressive Muscle Relaxation for Your Average Stressed Out College Student

Danielle Ahern, Elizabeth Gillespie, Jen Marcus, & Sydney Wacht

HE 3230-01

Plymouth State University

December 2017

Title:
Progressive Muscle Relaxation for Your Average Stressed Out College Students!

Author:
Danielle Ahern

Time & Format:
60 Minutes, last lesson plan in a series of 4 workshops

Audience/Learners:
College students, young adults 18-22

Topic Overview:
College students will experience and practice progressive muscle relaxation through an introduction and discussion about the stress response followed by a guided audio recording. The brief introduction will focus on the affect of the stress response on muscles and how progressive muscle relaxation can aid them in relaxation. Students will then discuss the experience and talk about stress in their own lives.

Workshop Goal:
Students will be able to identify and challenge stress in their lives. Students will be able to reduce the tension in their muscles caused by stress using the progressive muscle relaxation technique; students will be able to utilize this exercise when the stress response is activated in their bodies.

National Health Education Standards addressed:

Standard 1:
Students will comprehend concepts related to health promotion and disease prevention to enhance health.

- 1.12.5 - Propose ways to reduce or prevent injuries and health problems.

Standard 3:
Students will demonstrate the ability to access valid information, products, and services to enhance health.

- 3.12.3 - Determine the accessibility of products and services that enhance health.

Standard 7:
Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

- 7.12.3 - Demonstrate a variety of behaviors to avoid or reduce health risks to self and others.

Specific Learning Objectives (linked to NHES and assessments):

By the end of this workshop, students will be able to:

1. Identify stress in their lives.
2. Determine what causes their stress.
3. Determine how their individual body reacts to the stress in their lives.
4. Relate muscle tension to the stress response.
5. Identify and discuss the impact of progressive muscle relaxation.

6. Reflect on the experience of participating in progressive muscle relaxation.
7. Identify personal stressors and their own bodies response to them.

Key Concepts & Terminology for Instructor Reference:

Stress Response- When the body is stressed, the SNS (sympathetic nervous system) generates what is known as the "fight or flight" response. The body shifts all of its energy resources toward fighting off a life threat, or fleeing from an enemy. The SNS signals the adrenal glands to release hormones called adrenalin and cortisol.

Physical symptoms of stress:

- Low energy.
- Headaches.
- Upset stomach, including diarrhea, constipation, and nausea.
- **Aches, pains, and tense muscles. ** (This workshop addresses this specific symptom of stress)**
- Chest pain and rapid heartbeat.
- Insomnia.
- Frequent colds and infections.
- Loss of sexual desire and/or ability.

Diaphragmatic Breathing- breathing that is done by contracting the diaphragm, a muscle located horizontally between the thoracic cavity and abdominal cavity. Air enters the lungs, the chest rises and the belly expands during this type of breathing. Taking a deep breath calms you down by triggering neurons in your brain which tell the body it is time to relax.

Muscle Tension- refers to the condition in which muscles of the body remain semi-contracted for an extended period. Muscle tension is typically caused by the physiological effects of stress and can lead to episodes of back pain.

Progressive Muscle Relaxation- a type of therapy that focusses on tightening and relaxing specific muscle groups in sequence. It is a non-pharmacological method, based on the idea that muscle tension is the body's psychological response to stress and anxiety-provoking thoughts. By relieving that tension and initiating relaxation in your muscles, your stress levels decrease.

How to perform progressive muscle relaxation:
You tense a group of muscles as you breathe in, and you relax them as you breathe out. You work on your muscle groups in a certain order. When your body is physically relaxed, you cannot feel anxious. During this exercise, students will be guided through the sequence using an audio recording. Students will lye down on a mat or comfortable surface, close their eyes and follow the instructions given in the recording.

Teaching Steps (timed) Linked to Learning Outcomes:

1. Relax and Begin (7 min.)
    a) Dim or turn off the lights, play any relaxing music, have students close their eyes and instruct them to breathe deeply.
    b) Tell them to "set aside all worries and bring your mind to this room".
    c) After 5 minutes, turn lights on, have students open their eyes and shut off music.
2. Introduction (15 min.)
    a) Show and describe the few slides on the affects of stress on muscles.

b) Have students get into small groups and talk to each other about what makes them stressed and what parts of their body are affected by stress.
c) Call on a few people/groups and have them share with the whole class.
d) Show the next few slides on progressive muscle relation and its affect on stress.

3. Do (25 min.)
   a) Have student's lye down on a mat or comfortable surface with hands flat by their side. Instruct them to close their eyes, breath deeply and follow the instructions.
   b) Play audio recording.
4. Examine & Analyze (8 min.)
   a) How are we feeling after participating in progressive muscle relaxation?
   b) How did it feel while we were participating?
   c) What did we like/dislike about the exercise?
   d) How helpful would you find progressive muscle relaxation to be for you?
5. Ask & Discuss (5 min.)
   a) How likely are you to use this practice outside of the classroom?
   b) How important is it to you to control stress in your life?
   c) What kinds of other techniques do you use to reduce stress and muscle tension?
   d) What did you learn/what surprised you?

Assessment Measures Linked to Activities:

Annotated Resource Bibliography in accurate APA format:

McShane, M. (2015, September 16). The heath benefits of guided imagery. Retrieved November 15, 2017, from HeathySetGo website: https://www.allinahealth.org/HealthySetGo/SingleArticle.aspx?id=36507239969

Author Molly McShane has her Masters Degree in Counseling and Human Resource Development and is a certified Health and Wellness Coach through Wellcoaches. She works to help clients identify what health and wellness means for them as an individual and how they can reach their health goals. McShane expresses how the mind is a very powerful tool and can have tremendous affects on our bodies and physical experience. Her background working directly with clients has led her to the conviction that through guided imagery, you can learn to use your imagination to "create the state you want," meaning that you are able change how you are feeling by changing your focus. With this idea in mind, college students can combat the stress response by using guided imagery to promote relaxation, lower blood pressure, and reduce other problems related to stress.

Mills, H., Reiss, N., & Dombeck, M. (2005). Stress Reduction and Management Visualization and Guided Imagery Techniques For Stress Reduction. Retrieved November 15, 2017, from Gulf Bend Center website:https://www.gulfbend.org/poc/view_doc.php?type=doc&id=15672&cn=117

Authors Harry Mills, Natalie Reiss, and Mark Dombeck combined their knowledge to produce this article put out by the Gulf Bend Center, a mental health and substance abuse center located in Victoria, Texas. While the source doesn't specifically target college students, many students struggle with these same issues. The authors, all of which have Ph.D.'s, focus on the effectiveness of visualization and guided imagery on mental health. They describe how such exercises can help individuals learn how to detach themselves from their moment to moment fixation, whether it be stress or any other unwanted emotion and take themselves to another place. College students can use this form of relaxation and meditation as a way to take action against their every day stresses.

Goldman, R. (2017, May 2). What is Jacobson's Relaxation Technique? (T. J. Legg, Ed.). Retrieved November 28, 2017, from HealthLine website: https://www.healthline.com/health/what-is-jacobson-relaxation-technique

Author Rena Goldman published this as a newsletter through the healthline website. She describes the process of progressive muscle relaxation in terms of muscle benefits as well as mental health benefits.

Stress Management: Doing Progressive Muscle Relaxation. (2014, November 14). Retrieved Deceber 22, 18, 2017, from https://www.webmb.com/balance/stress-management-doing-progressive-muscle-relaxation

Together the ByHealthwise Staff, Primary Medical Reviewer Patrice Burgess, MD - Family Medicine and specialist Medical Reviewer Steven Locke, MD – Psychiatry combined their knowledge to put up an article about progressive muscle relaxation for WebMd. Benefits of the exercise are described as well as your different muscle groups that suffer from tention due to stress.

Li, T., Duan, W., & Guo, P. (2017). Character strengths, social anxiety, and physiological stress reactivity. *PeerJ*, *5*, e3396. http://doi.org/10.7717/peerj.3396

The authors, equal contributing researchers Tingting Li, Wenjie Duan, and corresponding author Pengfei Guo, collaborated on the research of character strengths, social anxiety, and psychological stress reactivity. This study provides data that observes the relationship between character strength and perceived stress and psychophysiological responses. Participants were recruited via an ad placed on the university website; 12 men and 18 women with a median age of 20 were selected of which the sample size and type were very limited. The researchers conclude that their study is consistent with previous studies, in which the present study showed that HR and BP are reliable and effective indicators in explaining differences in response to stress. The instructor could discuss the basic psychological and biological stress defense mechanisms and responses, which affect mental, physical, and social health in college age individuals.

McInnis, M. G., Upjohn, T. B., Upjohn, N., Salazar, S., Brunwasser, S., & O'Donnell, L. (2003). Managing Stress. Retrieved November 14, 2017, from http://campusmindworks.org/students/self_care/managing_stress.asp

This resource is from the University of Michigan's *The Campus Mind Works* website that was designed to support and inform students about mental health and how to manage it within college life. The authors of the website all have backgrounds in one or more of the following; depression, bipolar disorder, and psychology. The site gives important information on stress and how it is inevitable and explains that stress can be helpful depending on the situation. The website also shares techniques, coping strategies, and ways to reduce and manage stress to incorporate in college students everyday lives.

Ancillary Materials, Resources, Preparation steps:

- iPod or other tool for music and audio recording
- Speaker
- Computer & projector for PowerPoint slides
- Mats for students to lay
- Large enough room for all students to lay on the floor**

Creative Commons License Icon:

Grading Rubric for Workshop Lesson Plan
Based on 100 points – 40% of total course grad

Element	Target	Minimally adequate	Inadequate
Information Framework Title, Author Time & Format: Audience/Learners Topic Overview & Healthy People 2020 Objectives 10	*All elements clearly included. Catchy title, topic is identified with accurate, brief description of the problem using at least one HP2020 objective. 9-10*	*Most elements included. Topic stated with minimal description of the problem, HP2020 objective not cited 7-8.5*	*Several missing or inaccurate elements. No description of the problem or HP2020 objective cited. 6-0*
NHES, Specific Learning Objectives & Assessment Measures 20	*NHES standards identified; #1 plus 2-3 others with direct link into at least 3 LOs, lesson activities and 3 AMs. 17-20*	*NHES standards noted (only 1-2) inferred link with LOs and activities. Fewer than three each. 13-16*	*NHES not included; LOs and /or AMs not clearly aligned with activities or AMs. Weak in connection and number. 12-0*
Key Concepts and Terminology 25	*Concepts and terms accurately and adequately defined as appropriate for scope of the lesson and audience. Adequate to inform future instructors 22-25*	*Concepts and terms generally correct, lacking evidence based resources. Some inadequacy in definitions, use or of concepts. 17-21*	*Concepts and terms minimally identified, or inaccurate. Little to no evidence of valid resources. 17-0*
Teaching/Facilitation Steps 20	*Activities clearly outlined, linked to concepts and timed. Varied learning methods/ activities applied. At least 4 segments identified*	*Activities outlined, some linkage to concepts identified. Minimal variety of methods applied. Timing unclear. 2-3 segments only.*	*Activities listed with little to no link to concepts. Lack of variety of methods, no timing. No segments identified*
Annotated Bibliography & Appendix 15	*APA format is correct and brief annotation is a descriptive and evaluative paragraph; informing the reader of the relevance, accuracy, and quality of the sources cited. At least 3evidence based/credible sources used. 13-15*	*APA format mostly correct (only punctuation errors). Minimal annotation with some description and evaluation. 1-2 evidence based resources.* 10-13	*Significant errors in APA format, lacking in descriptive or evaluative information. 0-1 evidence based resources. 10-0*
CC License 5	*CC License secured and posted on document*	*No CC license*	*No CC license*
Overall organization and professionalism 5	*Quality writing free of vocabulary, spelling, grammar, punctuation and syntax errors. Cohesive thoughts and well organized. 5*	*Some distracting errors in vocabulary, spelling, grammar, punctuation and syntax. Minimal cohesion and organization of thought 4-2*	*Distracting errors in vocabulary, spelling, grammar, punctuation and syntax. Lacking cohesion and organization of thought. 1-0*
Total / 100			

Stopping Stress in Its Tracks
Jennifer Marcus
HE 3230
Plymouth State University
December 2017

Time & Format: 60 minutes; lecture and workshop

Audience/Learners: College students

Topic Overview:
Participants will introduce the concepts of identifying acute stress and the relaxation response. It will focus on how to manipulate the stress response before it becomes a larger issue. Participants will collaborate with one another to brainstorm resolutions for acute stress.

Healthy People 2020 Objective(s) alignment:

1. **HRQOL/WB-1.2:** Increase the proportion of adults who self-reported good or better mental health

Workshop Goal:
Increase participant awareness of stressors, the relaxation response, and the body's acute response to stress.

National Health Education Standards addressed:
NHES 1.8.1 Analyze the relationship between healthy behaviors and personal health
NHES 5.12.4 Generate alternatives to health-related issues or problems
NHES 7.12.2 Demonstrate a variety of healthy practices and behaviors that will maintain or improve the health of self and others

Specific Learning Objectives (linked to NHES and assessments):

1. Identify three responses to acute stress (NHES 1.8.1)
2. Discuss at least three strategies adopted from the stress management tool kit (NHES 5.12.4)
3. Develop a mantra for stopping and/or decreasing the effects of the acute stress response from the stress management tool kit (NHES 7.12.2)

Key Concepts & Terminology for Instructor Reference:

- Communicate that stress is all internalized and perceptual
- There are various physiological and emotional responses to stress that are important to understand
- The "stress management tool kit" is a technique where students can list ideas that they can utilize during the acute stress response. It can be as simple or creative as the individual desires
    - Techniques are personalized based off of their type of acute stress response – fight, flight, immobilization
- There are three common responses to acute stress:
- "Fight" response
    - If the individual tends to become angry or agitated under stress, the best response to the initial stress will be activities that quiet down, such as meditation, progressive muscle relaxation, deep breathing, or guided imagery
    - *Buzz word*: Agitated
- "Flight" response

        - If the individual tends to become depressed, withdrawn, or spaced out during the initial stress, the best response will be to stress relief activities that are stimulating and energize the nervous system: rhythmic exercise, massage, mindfulness, or power yoga
        - *Buzz word*: Withdrawn
    - Immobilization response
        - If the individual has experienced trauma and tends to "freeze" or become "stuck" under stress, the challenge is to rouse the nervous system to a fight or flight response so applicable stress techniques can be employed. To do this, select physical activity that engages both the arms and legs: running, dancing, tai chi, and perform it mindfully with a focus on limb sensation.
        - *Buzz word*: Freeze
- **Alone time or socialization**
    - Depending on the individual, different techniques may help them overcome the acute stress response
    - One key step is identifying if they require alone time or socialization, or being around other people, to settle their stress
    - Alone time
        - If the individual craves solitude, solo techniques such as meditation or progressive muscle relaxation may help to quiet the mind and recharge the "batteries"
    - Socialization
        - A class setting may give more stimulation and provide the support the individual is looking for; it may also help them stay motivated
- **Flight or flight hormones**
    - Three hormones are released during the acute stress response
    - Adrenaline
        - Commonly known as the "fight or flight" hormone, it is produced by the adrenal glands after receiving messages from the brain that it is in distress
        - *Buzz word*: Fight or flight hormone
    - Cortisol
        - A steroid hormone, commonly known as the stress hormone, produced by the adrenal glands
        - Takes more time, minutes rather than seconds, for the effects of cortisol to be felt during the stress response
        - Helps to maintain fluid balance and blood pressure
        - Chronic elevated levels can lead to serious issues
            - Suppress the immune system
            - Increase blood pressure and sugar
            - Decrease libido
            - Produce acne
            - Contribute to obesity
        - *Buzz word*: The stress hormone
    - Norepinephrine
        - A hormone similar to adrenaline, released from the adrenal glands and also from the brain

- Released by the sympathetic nervous system
- Works in conjunction with adrenaline
- Back-up system for the adrenal glands
- Used as a drug to raise blood pressure
- *Buzz word*: Both a neurotransmitter and hormone

Teaching Steps (timed) Linked to Learning Outcomes:

1. Engage (10')
   - Introductions between students and discuss their prior knowledge about stress and the relaxation response
     - Pass out paper and writing utensils to students
     - Ask questions to the class and have them write down their responses in single words, short phrases, or illustrations
       - What makes you stressed? How do you feel when you're stressed? On a scale of 1-10, how stressed would you say you have been over the course of the last week?
2. Do (20')
   - Watch the TED talk "Kelly McGonigal's: Making Stress Your Friend" about the physiological stress response and how to manipulate it positively
   - Pass out the vocabulary match buzz word list
   - Give a brief lecture about basic vocabulary from key concepts list surrounding the acute stress response
   - Students will complete the vocabulary match buzz word list by matching the vocabulary word or phrase on the left side of the page to the proper buzz word on the right side of the page
3. Create & Integrate (15')
   - Students gather in small groups of 2-3 of their choosing
   - Create ideas and methods to add to their "stress management tool kit"
   - Share and report out
4. Examine & Analyze (10')
   - Bounce ideas off of the whole group
   - What works for some people and what won't work for others based off of their type of acute stress response?
5. Close (5')
   - Students will write down their goals and techniques for how they will stop the stress response before it manifests into a larger response – a mantra

Assessment Measures Linked to Activities:

1. Construction of vocabulary lists by students to show they gathered the proper information from the lecture and/or video portion – buzz words for each term for easy to remember word association
2. Student construction worksheet of diagrams and charts depicting their stress management tool kit

Annotated Resource Bibliography in accurate APA format:

Li, T., Duan, W., & Guo, P. (2017). Character strengths, social anxiety, and physiological stress reactivity. *PeerJ*, *5*, e3396. http://doi.org/10.7717/peerj.3396

- The authors, equal contributing researchers Tingting Li, Wenjie Duan, and corresponding author Pengfei Guo, collaborated on the research of character strengths, social anxiety, and psychological stress reactivity. This study provides data that observes the relationship between character strength and perceived stress and psychophysiological responses. Participants were recruited via an ad placed on the university website; 12 men and 18 women with a median age of 20 were selected of which the sample size and type were very limited. The researchers conclude that their study is consistent with previous studies, in which the present study showed that HR and BP are reliable and effective indicators in explaining differences in response to stress. The instructor could discuss the basic psychological and biological stress defense mechanisms and responses, which affect mental, physical, and social health in college age individuals.

Dartmouth College Student Wellness Center. (2016, January 28). Relaxation, stress, & sleep. Retrieved November 15, 2017, from http://www.dartmouth.edu/~healthed/relax/#suggestions

- This resource, adapted from Georgia Southern University's Counseling Center and in conjunction with Dartmouth College's' student wellness center, discusses basic concepts surrounding relaxation, stress, and sleep in regards to college students. Research conducted showed the top three impediments to academic performance via Dartmouth College Health survey, which was coordinated and initially administered in Spring 2008. This information is easily adaptable to a lesson plan and/or workshop. The given information is relevant, research-based, and applicable to a wide variety of students. This article guides readers through the stress process from beginning to end; helps to identify common triggers of stress for students, how they can identify when they are stressed, and provides techniques to combat this stress. They illustrate the importance that managing personal stress has on overall health as a student, which corresponds directly with our lesson plan age group.

Dill, P. L., & Henley, T. B. (2010, April 01). Stressors of College: A Comparison of Traditional and Nontraditional Students. Retrieved December 19, 2017, from http://www.tandfonline.com/doi/abs/10.1080/00223989809599261

- This study, published in The Journal of Psychology volume 132 issue 1, sought to observe the perceived stress and stressors of nontraditional, adult learners, and traditional college students. Forty-seven nontraditional students 24-54 years old and 47 traditional students were selected, matched for demographics, and completed the Adolescent Perceived Events Scale for college students. Significant differences included that nontraditional students showed a significant enjoyment of going to classes and doing homework, whereas traditional students tended to worry more about school performance. The results of this study suggest that there are significant differences between these groups of learners and their perception of school-related stress.

McGonigal, K. (2013, June). How to make stress your friend. Retrieved December 13, 2017, from https://www.ted.com/talks/kelly_mcgonigal_how_to_make_stress_your_friend

- This TED talk, given by Kelly McGonigal, Ph.D., sought to give the audience a new perspective on stress by making it a friend, not a foe. McGonigal, a health psychologist and author of "The Upside of Stress: Why stress is good for you, and how to get good at it", presented this talk at the TEDGlobal 2013 conference. She presented new research that suggested stress may have a negative impact on individual health, if the individual perceives it in a negative manner. McGonigal's talk is well-informed, interestingly presented, and takes a fresh and critical look at a concept that deeply effects public health.

Robinson, L., Segal, R., Segal, J., & Smith, M. (2017, October). Relaxation Techniques. Retrieved December 19, 2017, from https://www.helpguide.org/articles/stress/relaxation-techniques-for-stress-relief.htm

- This source provided ample material about the relaxation response and the acute stress response. It covered the various stress responses: fight, flight, and immobilization, and gave techniques that are appropriate depending on the response of the individual. One part of information was adapted, with permission from Stress Management: Approaches for Preventing and Reducing Stress, a special health report published by Harvard Health Publications. The resource furnished plentiful resources and references for researchers, supplied information that was well-supported, informative, and was published in a manner that can be easily utilized.

U.S. Department of Health and Human Services. (2016, August 18). National Health Education Standards. Retrieved December 10, 2017, from https://www.cdc.gov/healthyschools/sher/standards/index.htm

- This resource listed the eight National Health Education Standards for health-enhancing behaviors. Released by the Centers for Disease Control in conjunction with the United States Department of Health and Human Services, this content sought to establish baseline education standards for pre-kindergarten through grade 12 students. The NHES are written expectations for what students should know and be able to do by grades 2, 5, 8, and 12 to promote personal, family, and community health. Over the last decade, the NHES has become an accepted, valuable, and widely used reference for health education and provides a framework for health educational standards.

Ancillary Materials, Resources, Preparation steps:

- Paper
- Colored pencils, markers, or crayons
- Vocabulary match buzz-word list – printed copies for all students
- Computer
- Projector or smart-board
- Speakers, if not included with computer set-up

Appendix of Support Materials
Vocabulary Match Buzz Word List

Fight Response	Withdrawn
Flight Response	Both a neurotransmitter and hormone
Immobilization Response	The stress hormone
Adrenaline	Agitated
Cortisol	Fight or flight hormone
Norepinephrine	Freeze

Chapter 7

Stress Management for Working Adults

Beat Stress!

Emily Longolucco

Plymouth State University

Title:
Beat Stress!

Author:
Emily Longolucco

Time & Format:
50 minute workshop

Audience/Learners:
Adults over 25 years old

Topic Overview:
This workshop will provide participants with the chance to explore basic concepts around stress and stress management through a simple rhythmic activity.

Healthy People 2020 Objective(s)

- Increase the proportion of adults who self-report good or better physical health.
- Increase the proportion of adults who self-report good or better mental health.

Workshop Goal:
Increasing self efficacy in adults for stress management.

National Health Education Standards addressed:
Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.

- 1.12.1- Predict how healthy behaviors can affect health status.

Standard 4: Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

- 4.5.1- Demonstrate effective verbal and nonverbal communication skills to enhance health.

Standard 7: Students will demonstrate the ability to practice health- enhancing behaviors and avoid or reduce health risks.

- 7.12.2- Demonstrate a variety of healthy practices and behaviors that will maintain or improve the health of self and others.

Specific Learning Objectives (linked to NHES and assessments):
Through participation in this workshop learners will be able to:

LO 1: Describe the basic three signs of stress. (heart rate, breathing, sense of fear)

LO 2: Describe three ways that playful activities help to modulate the stress response. (playing, Deep breathing, being creative)

LO 3: Reflect on two stressors on their lives.

Key Concepts & Terminology:

Music: an art of sound in time that expresses ideas and emotions in significant forms through the elements of rhythm, melody, harmony, and color.
Stress management: any technique developed to help someone cope with or lessen the physical and emotional effects of everyday life pressure.
Rhythm: movement or procedure with uniform or patterned recurrence of a beat, accent.
Beat: the audible, visual, or mental marking of themetrical divisions of music.

Teaching Steps (timed):

Engage (10 minutes)

- Activity 1: Go around in a group introducing ourselves and create a beat on the drums to describe yourself. The group will then repeat the beat after one has introduced themselves.

Describe, Examine, Analyze (10 minutes)

- Activity 2: Hand out a fact sheet to each participant. Go over the main concepts of stress management illustrated on the hand out. Watch a video of drums alive, explaining the activity the class will participate in.

Create/ apply, Do (25 minutes)

- Activity 3: Have each participant find a seat with a yoga ball set up with sticks or drumming instrument. Allow them to play around and get the feel of the drum. Then apply music and have the class join in on creating the beat simultaneously while moving the body instructed by the teacher.

Apply, Close (5 minutes)

- Activity 4: Allow participants to relax and reflect on how this activity made them feel. Did it relieve any stress? Do they feel calmer? What did they get out of this activity?

Assessment Measures:

AM 1: Able to identify the basic signs of stress.
AM 2: Describe three ways that playful activities help to modulate the stress response.
AM 3: Reflect on two stressors in your life.

Materials, Resources, Preparation:

- Fact sheet (enough for entire class)
- Speakers
- Hand drums/ yoga balls
- Sticks
- Chairs
- Access to internet
- Projector
- Computer

Annotated Resource Bibliography:

Dictionary.com. (n.d.). Retrieved December 13, 2017, from http://www.dictionary.com/

Dictionary.com was used to define the key concepts involved with music and stress management.

Pavlicevic, M. (1999) . *Music therapy improvisation groups with adults: towards destressing in South Africa.* Retrived from http://journals.sagepub.com.libproxy.plymouth.edu/doi/pdf/10.1177/008124639902900206

"Music Therapy Improvisation Groups with Adults: Towards Destressing in South America" was used for background information in relating stress management to music. Pavlicevic explained different techniques used on subjects in South America and which worked best.

Health-Related Quality of Life & Well-Being. (2014). Retrieved December 13, 2017, from https://www.healthypeople.gov/2020/topics-objectives/topic/health-related-quality-of-life-well-being/objectives

Healthy People 2020 was used to find the lesson plan objectives.

Drums alive. (2017). Retrieved December 13, 2017, from https://www.drums-alive.com/

Drums Alive influenced the theme and activity of the lesson plan. The Activity is very similar to their physical activity classes but is linked to how it can aid stress.

Appendix of Support Materials

https://www.drums-alive.com

https://www.youtube.com/watch?v=rXB1oPlKjyc

Stress Management
December 11, 2017

Beat Stress!

Don't let your mind bully your body into believing it must carry the burden of its worries.

-Astrid Alauda

Stress is a state of mental or emotional strain or tension resulting from adverse or very demanding circumstances.

How Stress Can Affect You?

When Your body is undergoing stress, hormones are released including adrenaline and cortisol. These hormones cause the heart to race, blood pressure to rise, muscles to tighten and your breathing becomes more sharp.

Drums Alive class

The greatest weapon against stress is our ability to choose one thought over another.

-William James

Symptoms

- Headaches
- Upset stomach
- Aches and pains
- Chest tightness
- Insomnia

Ways to Beat Stress!

It may feel like you will never get rid of your stress, but there are ways that can calm your nervous system down to illuminate most of the symptoms. These include:

- Practicing yoga or meditation
- Listen to calming music
- Exercise
- Draw or color
- Write your thoughts down
- Find the stressor and eliminate it

References:

https://au.reachout.com/articles/helping-a-friend-with-stress

https://www.helpguide.org/articles/stress/stress-management.htm

Stress Management
Kate Demeritt, Kailee Joncas, Emily Longolucco, Tyler Wilkinson
HE 3230 – 01
Plymouth State University
December 2017

Title:
Exploring The Therapeutic Effects of Yoga

Author:
Kate Demeritt

Time & Format:
50 minute workshop

Audience/Learners:
Working Adults

Topic Overview: Participants will be introduced to yoga as a stress management tool. A brief introduction to the history of yoga will be included in a discussion of recognizing stress triggers and using "the breath" to begin a yoga practice in everyday life.

Workshop Goal: Improve health-related quality of life and well-being for all individuals.

Healthy People 2020:
HRQOL/WB-1 - Increase the proportion of adults who self-report good or better health

National Health Education Standards addressed:
1.12.1 Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health. Predict how healthy behaviors can affect health status.
1.12.2 Standard 7: Demonstrate a variety of healthy practices and behaviors that will maintain or improve the health of self and others.

Specific Learning Objectives:
1. Identify their top three stress triggers
2. List three ways that yoga helps to mediate the stress response
3. Demonstrate a simple posture pattern (Sun Salutation) with appropriate modifications
4. Reflect on one relaxation experience

Background and Key Concepts:
Yoga is a valuable tool for stress management because it helps relax the mind and body to release emotional energy. Yoga can be practiced by anyone and is sometimes a physical training, sometimes spiritual. It is important to start slowly and gently and choose your style to accommodate your personal physical ability. Yoga can vary from gentle to strenuous and challenging for a person.

Teaching Steps (timed):
[Engage]
1. Complete nametags
2. Welcome the participants and share names
3. Compete initial stress level assessment

[Describe]
1. Introduce concepts of stress and stress management. Have each student share one stress trigger that they hope to overcome. List these on a chart. (LO 1)
2. Use fact sheet handout about yoga to introduce how yoga helps to reduce stress (LO2)
3. Explain how to set up and use mats and blocks, give permission for modifications

[Demonstrate and Do]

1. Set up yoga mats, blocks and straps
2. Put music on
3. Demonstrate breathing techniques while standing (Pranayama)
4. Demonstrate simple Sun Salutation and modifications
5. Lead each step allowing participant to rest in each position (LO 3)
6. Provide space for questions
7. Brief meditation (3-5 minutes)
8. Reflect on one thing you liked about your experience (LO 4)
9. Closing ritual of Namaste

[Analyze]

1. Ask participants to share how they now feel. What have they experienced in this session?

[Apply/Create/Integrate]

1. How will participants apply what they have used in everyday life? Brainstorm ideas and write on a board.

[Assess]

1. Brief quiz on principles

[Close]

1. Teach the closing ritual of Namaste

Assessment Measures:

AM 1: Pre-post assessment for stress levels
AM 2. List of stressors produced by the group.
AM 3 : Brief quiz at end of class to check on concept learning.

Materials, Resources, Preparation:

- Room
- Music
- Poster board
- Markers
- Copies of the quiz
- Mats & Blocks
- Resources
- Fan

[Annotated Resource Bibliography:]

Gura, S. (2002). Yoga for stress reduction and injury prevention at work. *Work*, *19*(1), 3-7. Retrieved from: http://search.ebscohost.com/login.aspx?direct=true&db=c8h&AN=106831647&site=ehost-live&authtype=sso&custid=plymouth

Practicing yoga has been shown to reduce pain, tension, reduce risks of injury, improve posture, improve communication, increase energy and attention span over time. This way they can improve their work days with communication and improves ability to concentrate. The techniques help release tension worked up from typing on a computer all day especially in the joints of the fingers.

Calogiuri, G., Evensen, K., Weydahl, A., Andersson, K., Patil, G., Ihlebæk, C., & Raanaas, R. K. (2016). Green exercise as a workplace intervention to reduce job stress. Results from a pilot study. *Work*, *53*(1), 99-111. doi:10.3233/WOR-152219. Retrieved from: http://search.ebscohost.com/login.aspx?direct=true&db=c8h&AN=113197488&site=ehost-live&authtype=sso&custid=plymouth

The stress-relieving benefits of nature has been showed that viewing scenes of nature as it induces faster recovery of stress. Exposure to nature has also been shown to enhance performance in the workplace and respond to things in in a more positive, easy natured way.

[Appendix of Support Materials:]

- Fact sheet on Yoga
- Quiz questions

QUIZ:

WRITE T OR F, CIRCLE WHAT MAY APPLY:

1. **THERE IS ONLY ONE TYPE OF YOGA:**

   T OR F

2. **YOGA HELPS THE BODY RESPOND TO STRESS MORE FLEXIBLY:**

   T OR F

3. **YOGA CAN HELP A PERSONS PAIN RESPONSE:**

   T OR F

4. **MEDITATION IS A FORM OF YOGA:**

   T OR F

5. **YOGA IS ONLY GOOD FOR YOUNGER ADULTS**

   T OR F

CIRCLE WHAT MAY APPLY:

Which yoga style is best to use for beginners?

A. **lYengar**
B. **Ashtanga**
C. **Hatha**

The term Yoga is said to mean:

A. **The union of the sun, moon, and earth**
B. **The union of the mind, body & spirit in communication and awareness**
C. **The union of mind, soul, body**

Chakra is:

A. **Thee part breathe**
B. **Said to be "the wheel of light" that refers to the seen physical areas of the body**
C. **Shining skull breath**

Prana means:

A. **Union of mind and body**
B. **Duality in balance**
C. **Life force, energy that moves through the earthly things**

FACT SHEET ON YOGA:

- Yoga is a mind and body practice with historical origins in ancient Indian philosophy
- Increases range of motion
- Reduces insomnia
- Relieves symptoms of both anxiety and depression
- Decrease heart rate and blood pressure
- Recent studies show- helpful for asthma
- Improve overall physical fitness, strength, flexibility
- Improve quality of life

Stress Management for Older Adults

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HE 3230 – 1
Plymouth State University
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Title:
Journaling Through Stress Management

Author:
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Time & Format:
55-minute workshop

Audience/Learners:
Adults learners (25+)

Topic Overview
This lesson plan is designed to have participants ages 25+ learn what gratitude journaling, bullet/personal journaling and emotional release journaling are and how one may use them to relieve stress. Students will be given a journal at the beginning of class and then work independently with the help of the instructor to discover which technique meets their personal needs and why.

Workshop Goal: Increase self-efficacy in young adults for stress management.

HP2020: Topic Goal Objective: Increase the proportion of adults who self-report good or better mental health.

National Health Education Standards addressed:

Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.

- 1.12.5: Propose ways to reduce or prevent injuries and health problems.

Standard 4: Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

- 4.12.3: Demonstrate strategies to prevent, manage, or resolve interpersonal conflicts without harming self or others.

Standard 7: Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

- 7.12.1: Analyze the role of individual responsibility for enhancing health

Specific Learning Objectives (linked to NHES and assessments):
Through participation in this workshop learners will be able to

1. Propose ways to reduce stress through journaling techniques (1.12.5)
2. Demonstrate strategies to express personal conflicts within self through journaling (4.12.3)
3. Discover personal behaviors that can be expressed through writing (7.12.1)

Background, Key Concepts & Terminology:

- Ways to deal with overwhelming emotion is to express yourself in a healthy way, journaling can be a helpful tool in expressing your feelings. It can help:
    - Manage anxiety

    - Reduce stress
    - Cope with depression
        - (P.B., DO, & M.F., MSN, RN)

- Journaling helps control your symptoms by and mood by:
    - Helping you prioritize problems, fears, and concerns
    - Tracking any symptoms day-to-day so that you can recognize triggers and learn ways to better controls them
    - Providing an opportunity for positive self-talk and identify negative thoughts and behaviors
        - (P.B., DO, & M.F., MSN, RN)

- Stress Management: Any technique developed to help someone cope with or lessen the physical and emotional effects of everyday life pressure. *(Stress Management)*

- Journaling: Generally, involves the practice of keeping a diary or journal that explores thoughts and feelings surrounding the events of your life. *Scott, M. E. (2017, April 29)*

- Gratitude Journal: A journal where they list three or more aspects of each day for which they are grateful. This is a highly effective strategy for relieving stress because it helps you to focus on the resources you have in your life already and create a more positive mood in the moment, both of which have been shown to build long-term resilience. *Scott, M. E. (2017, April 29)*
    - *I am grateful that I woke up today with my family*
    - *I am grateful that I love my job*
    - *I am excited to start the day with a clean slate*

- Bullet Journal or Personal Planning Journal: Journals to track what they need to do each day, goals they have, memories they create, and other things they don't want to forget. Writing things down can help keep your mind uncluttered and help you to remember what's important to you. *Scott, M. E. (2017, April 29)*
    - *Today I need to:*
        - *Get the dog from the groomers*
        - *Pick Johnny up from school*
        - *Call the plumber about the leak in the sink*
        - ***Pause**, take time for myself*
        - *Cook dinner before piano lessons*
        - *Have family time before bed*

- Emotional Release: To write about your emotional responses to events that have happened throughout the day as a way of coping with the stress.
    - This can help to process what you are feeling and even explore more positive options
    - When writing about positive experiences, this allows you to maximize and the positive feelings you may have for what happened in your day
    - A great way to express the positive and manage the negative things that happen in your life. *Scott, M. E. (2017, April 29)*
        - *“Today my son woke me up at 5 am to go play in the snow, when I said no he threw a fit… Instead of getting mad because I was so tired, I explained to him that we can go out around 7 when everyone else is up.”*

Teaching Steps:

- Engage, Describe, Do
  - (5) Hand out personal journals to each student and organize into groups of 4 or 5.
  - (10') Call students attention to the head of the classroom where examples of different journaling techniques will be posted on the board and explain each one and the benefits that come from journaling
  - (15') Each group will have a written paper on their desks describing what technique they will participate in first. After student's journal using their first technique they are provided with, they are free to pick from the other techniques and explore the differences
- Examine, Analyze, Discuss
  - (5') After each person has discovered each technique that fits them best, discuss within the group what technique works best for each individual and why
- Apply/Create/Integrate
  - (10') With knowledge received from exploring different ways to journal, write within personal journal using a technique that seems most effective and relatable
- Assess
  - (5') Students write a personal reflection / their first journal entry; If they were to continue journaling, what journaling technique would they want to continue outside of the classroom? (Wanting to explore a little deeper, they can also express what technique they found least helpful)
- Closure
  - (5') Collect one reason each student is grateful before leaving the classroom

Materials, Resources, Preparation:
Personal Journals and writing tools
Calming music played by speaker
Display boards
Space and Desks for students

Annotated Resource Bibliography:

P.B., DO, & M.F., MSN, RN (Eds.). (n.d.) Journaling for Mental Health. Retrieved December 02, 2017, from https://www.urmc.rochester.edu/encyclopedia/content.aspx?ContentID=4552&ContentTypeID=1

Provides information on how to journal, the benefits that come from it and its correlation with mental health through the University of Rochester Medical Center. This website was used because it was reviewed by Doctors before published and provided great information.

Scott, M. E. (2017, April 29). The benefits of Journaling for Stress Management Retrieved December 02, 2017, from https://www.verywell.com/the-benefits-of-journaling-for-stress-management-3144611

Provide Definitions of different journaling techniques, the benefits, and how it compares to other stress management techniques. This was used because the quality of the work was great and provides a simple lay out for people to follow to further explore how journaling can help manage stress.

Stress management. (n.d.). Retrieved December 08, 2017, from http://dictionary.com/browse/stress-management
This website provided the definition of stress management.

Tams, L. (2013, May 1). Journaling to Reduce Stress. Retrieved December 02, 2017, from http://msue.anr.msu.edu/news/journaling_to_reduce_stress
Describes stress benefits that can come from journaling and research studies through Michigan State University. This website provides a study that backs up the effects of journaling and goes on to explain how it can reduce stress with a numbered format that is easy and effective follow.

Workplace Mindfulness

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Plymouth State University

December, 2017

Title:
Workplace mindfulness

Author:
Tyler Wilkinson

Time & Format:
50 minute workshop

Audience/Learners:
Anyone over the age of 20

Topic Overview:
The workplace can tend to be a highly stressful place with social, mental, and physical stressors.

Healthy People 2020 Objective(s):
1. HRQOL/WB-1.2 Increase the proportion of adults who self-report good or better mental health
2. OSH-9 Increase the proportion of employees who have access to workplace programs that prevent or reduce employee stress

Workshop Goal:
Increasing self efficacy in adults for stress management

National Health Education Standards addressed:
Standard 2: Students will analyze the influence family, peers, culture, media, technology and other factors on health behaviors.
2.12.1 Analyze how the family influences the health of individuals.
Standard 3: Students will demonstrate the ability to access valid information, products, and services to enhance health.
3.12.2 Use resources from home, school, and community that provide valid health information.
Standard 4: Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.
4.12.4 Demonstrate how to ask for and offer assistance to enhance the health of self and others.

Specific Learning Objectives (linked to NHES and assessments):
1. Participants in this workshop will be able to demonstrate 4 self meditation practices (NHES 3&4)
2. Participants will be able to find what is their biggest stressors.

Key Concepts & Terminology:
Mindfulness- The quality or state of being conscious or aware of something.
stressor - Is any event, experience, or environmental stimulus that causes stress in an individual. These events or experiences are perceived as threats or challenges to the individual and can be either physical or psychological.

De-stress- To release bodily or mental tension; unwind.
Stress management- Is a wide spectrum of techniques and psychotherapies aimed at controlling a person's level of stress, especially chronic stress, usually for the purpose of improving everyday functioning.

Teaching Steps (timed):

1. **Introduction: (5 min)**
   Engage Participants:
   - Explain the topic of the lesson plan.
   - What are some workplace stressors? How would you deal with them?

2. **Do: (10 mins)**
   - Hand out survey to participants.
   - Collect survey after 10 minutes.

3. **Do: (12 mins)**
   - Play Mediation: Breath, Sound, Body Meditation

4. **Apply/create/integrate: (18 mins)**
   - Separate into groups of three.
   - Discuss the outcome of this meditation.
   - Brainstorm and create a list of ways to destress in the workplace.
   - Have everyone come back together and have each group take a turn sharing their top 2 ways to eliminate stress from their workplace.

5. **Closing: Lecture (5 mins)**
   - Discuss the severity of stress and how it may impact your time at work.
   - Discuss why it is important to practice stress management techniques.

Assessment Measures:
Participants will be able to identify their own levels of stress throughout a survey. Then participants will partake in a breath, sound, body meditation, this relaxation technique that will help them come back to a mindful state at the workplace.

Materials, Resources, Preparation:
- Computer
- Smartboard
- Access to Wi-Fi
- Pre-examination survey
- Pen/ pencil

Annotated Resource Bibliography:

Li, J., Riedel, N., Barrech, A., Herr, R. M., Aust, B., Mörtl, K., & ... Angerer, P. (2017). Long-term effectiveness of a stress management intervention at work: A 9-Year Follow-Up Study Based on a Randomized Wait-List Controlled Trial in Male Managers. *Biomed Research International*, 1-11. doi:10.1155/2017/2853813

The risk factors and findings about how chronic stress in the workplace can lead to many different diseases : depression, cardiovascular disease, and musculoskeletal disorders. Making positive changes and creating stress relieving interventions in the workplace can drastically change overall stress levels and bring the risk down for several diseases. - Tyler Wilkinson

Miedziun, P., & Czabała, J. C. (2015). Stress management techniques. *Archives Of Psychiatry & Psychotherapy*, *17*(4), 23-30. doi:10.12740/APP/61082.

Learning different ways to cope with stress is important for lowering stress levels. A study was done looking at the best ways to deal with stress. Listening to music, focusing on problem solving, planning future activities, meeting with friends. All essential ways to lower overall levels of stress - Tyler Wilkinson

(n.d.) Retrieved December 7, 2017 From https://www.surveymonkey.com/r/HYYMVD9

http://marc.ucla.edu/mpeg/02_Breath_Sound_Body_Meditation.mp3

Appendix of Support Materials

1. On a scale from 1 to 10, 1 being not stressed at all and 10 being the most stressed, how stressed do you feel on a daily basis during work?

1 2 3 4 6 7 8 9 10

2. How do you relieve your stress, circle all that apply:

Eating
Sleeping
Drinking
Drugs
Talking With Someone
Shopping
Exercise
Computer Games / Social Media
Other (please specify)

3. What are the effects you feel from stress, circle all that apply:

Anxiety
Depression
Mood Swings
Insomnia
Over Eating
Lower / Failing Grades
Other (please specify)

4. What are the causes of stress in your life, circle all that apply:

School
Family & Friends
Significant Other
Sports / Athletics
Clubs and Organizations
Money
Work
Health Related Issues
Other (please specify)

5. On a scale of 1 to 10, 1 being not well at all and 10 being very well, how well do you think you handle your stress?

1 2 3 4 5 6 7 8 9 10

6. On a scale of 1 to 10, 1 being there are no helpful resources and 10 being there are plenty of helpful resources, would you say there are a lot of resources on campus to help you when you are feeling distressed?

1 2 3 4 5 6 7 8 9 10

8. What is something that you can do at your workplace to help lower stress?