The StrongWomen – Healthy Hearts Program

A Physical Activity and Nutrition Program to Reduce the Risk of Heart Disease in Women

The StrongWomen – Healthy Hearts Tool Kit

A Program Leader’s Guide
Version 5 – Fall 2010

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We wish to thank our colleagues at Tufts University for their continued support and for their significant contributions to our common goal of improving people’s lives through sound nutrition and physical activity.

A special thanks to Peter Reed and Adee Viskin for all of their valuable assistance on this project.
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PLEASE READ THIS PAGE VERY CAREFULLY: IT CONTAINS INFORMATION YOU NEED TO KNOW BEFORE YOU BEGIN

The StrongWomen – Healthy Hearts Program is a series of nutrition and physical activity classes based upon extensive scientific research. The StrongWomen – Healthy Hearts Tool Kit contains instructions and safety precautions for fitness and nutrition professionals. It is essential that you, the professional or program director, read the entire Tool Kit carefully before implementing the program. Some activities outlined in the programs that follow are not appropriate for individuals with unstable medical conditions.

This Tool Kit is not intended to replace the services of healthcare providers who know the participants of your program personally. *Never give medical advice to a participant in your program.* Always refer the individual to her healthcare provider. Individuals who participate in the StrongWomen – Healthy Hearts Program are strongly encouraged to talk with their doctors before starting this program.

Every effort has been made to ensure that the information contained in this Tool Kit is complete and accurate. However, neither the authors nor Tufts University is engaged in rendering medical advice or services to individual participants in the StrongWomen – Healthy Hearts Program. The ideas, procedures, and suggestions contained in this Tool Kit are not intended as a substitute for consulting with a physician. All matters regarding a participant’s health require medical supervision. Neither the authors nor Tufts University shall be liable or responsible for any loss, injury, or damage allegedly arising from any information or suggestion in this Tool Kit. The opinions expressed in this Tool Kit represent the personal views of the authors and not those of Tufts University.
Foreword

Dear Program Leader,

We cannot tell you how thrilled we are that you have agreed to implement the StrongWomen - Healthy Hearts Program in your community. This curriculum has been a long time in the making. Most of us have been scientists at Tufts University for over two decades. The program is based on our research and that of colleagues at other academic institutions around the world.

To see the results of years of research synthesized into a program that can be used by women around the country is the goal of our research team. It is our sincere hope that the program will provide women with the motivation and skills to reduce their risk of the number one killer of women, heart disease.

The curriculum is now in your good hands. We wish you the very best.

Warmest Regards,
Miriam E. Nelson, PhD
Alice H. Lichtenstein, DSc
Jeanne P. Goldberg, PhD, RD
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Rebecca Seguin, PhD, CSCS
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Dedication

This curriculum is dedicated to the memory of Jean Clarkson-Frisbie, a dear friend and colleague who was instrumental to the start and growth of both the StrongWomen Program and the StrongWomen – Healthy Hearts Program. Her positive outlook, can-do attitude, and good-natured personality made her one of the most inspiring and kind people we have had the privilege of working with. We hope that her spirit will infuse this curriculum as we carry on the work of improving women’s health.
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**Mission**

To increase the number of women participating in safe and effective physical activity and nutrition programs to help reduce risk of heart disease.

**Objectives**

❤️ To provide the necessary educational materials and training to fitness and nutrition professionals to help them successfully implement and maintain the StrongWomen – Healthy Hearts Program.

❤️ To facilitate the implementation of the StrongWomen – Healthy Hearts Program in community centers, local health and fitness facilities, hospitals and clinics, National Institute of Food and Agriculture (formerly cooperative extension) offices, businesses, and any other place where middle-aged and older women come together.
Chapter 1: General introduction

Part A: Women and heart disease
Heart disease has traditionally been considered a man’s problem, but every year since 1984, it has killed more women than men in the U.S. On average, one woman dies from heart disease nearly once every minute, for an annual total of about half a million women. That makes it the leading cause of death for women in this country. Many more women are living with heart disease, which can seriously impact their quality of life. It has clearly reached a crisis point, one that reflects an unfortunate irony. So much has been made of women’s hearts as symbols—of love, purity of emotion, the center of a home. But the female heart can become diseased, and the very realness of the heart as giver of life gets ignored.

Many in the healthcare community continue to believe that heart disease is a man’s illness. In some cases a woman has to virtually “die” on the table and be shocked back to life with paddles before her heart disease is recognized. Even if a woman is properly diagnosed, she is often not properly tended to:

❤ Twenty-three percent of women age 40 and over die within one year of a first recognized heart attack, compared to 18 percent of men.

❤ Twenty-two percent of women age 40-69 years who survive a heart attack will experience a second one within 5 years, compared to 16 percent of men.

❤ Women are nearly twice as likely as men to die after bypass surgery and half as likely to get an angioplasty to open a narrowed blood vessel.
Fortunately, the tide is shifting. As recently as 1958, attention to women’s heart health was such an anomaly that one group of heart disease researchers observed, in describing their subjects, that it was “the first time that any members of the ‘weaker sex’ had participated in this work.” Today, that patronizing observation has been replaced with a policy handed down from the federal government that half of all subjects in heart disease studies must be women in order for research funding to continue.

And the momentum is building. In the last few years, both the American Heart Association (AHA) and the National Heart, Lung, and Blood Institute (NHLBI) have begun campaigns to put women’s heart disease risk front and center. Go Red for Women, the AHA campaign, is a “national call for women to take charge of their heart health and live stronger, longer lives.” The Heart Truth: A National Awareness Campaign on Women and Heart Disease is the NHLBI campaign.

These changes represent an enormous step forward. The AHA is the largest health advocacy organization focused on heart disease and stroke, and the NHLBI is the major government agency focused on cardiovascular disease.

The push to put the spotlight on women and heart disease comes not a moment too soon. It’s especially pressing in light of the many negative findings on the effects of hormone replacement therapy (HRT). For years, women were told that HRT would protect them from heart disease, and millions took it believing they were not only relieving menopausal symptoms and helping their bones but also taking care of their cardiovascular systems. Now, rigorously conducted research has concluded that HRT is not associated with decreased risk for developing heart disease.
With the HRT avenue of heart protection under reassessment, more than ever women need straightforward guidelines about both how to decrease their risk of developing heart disease and how to take care of themselves should heart disease strike.

The good news is that those guidelines are coming together. The research on what women can do to protect themselves has reached the critical point at which they can be “translated” for use. And the earlier women start, the more likely it is that their actions will have a positive effect. That is why we’ve developed this program.

**Part B: The benefits of a heart-healthy diet and physical activity**

Following a lifestyle that includes a healthy diet, weight control, appropriate levels of physical activity, and avoidance of tobacco products can dramatically reduce the risk of developing heart disease in women. A dietary pattern that focuses on vegetables, fruits, low and nonfat dairy foods, whole grains, legumes, fish, and lean meat helps to reduce LDL (“bad”) cholesterol levels, lower blood pressure, and improve weight control, all of which lead to an overall reduction in heart disease risk.

Diet is just part of what women need to focus on, in terms of lifestyle, to protect their hearts. Another critical component is physical activity. Researchers are coming to understand, in fact, that the two together are absolutely vital for the best heart health possible.
Aerobics—brisk walking, running, swimming, biking, and other activities during which the body is in continuous motion—challenge your heart, lungs, and the entire vasculature system to work harder and thereby make them stronger and more efficient at their jobs. For example, people who participate regularly in aerobics have lower heart rates, which means that they need fewer beats per minute to pump oxygen- and nutrient-rich blood from the heart to the rest of the body.

Exercise capacity, or fitness, can be improved significantly even with moderate physical activity in just a matter of months. Even if a woman has been inactive her whole life, she can dramatically lower her risk of dying prematurely if she simply starts walking briskly or engages in other aerobic activities on a regular basis. With regular aerobic exercise, women can lower their blood pressure, control their weight, improve their overall function and quality of life, including their psychological well being, and get better quality sleep.

Part C: The gap between knowledge and practice
The best part about the benefits that accrue to the heart from the right dietary patterns and physical activity is that they are all in women’s hands. No one is “stuck” with a particular heart disease risk because of her genes or family history or because “things are the way they are.” Indeed, the scientific evidence from the 100,000-plus women in the Nurses’ Health Study suggests that women who eat a healthful diet and exercise regularly (and don’t smoke and maintain a desirable body weight) can enjoy up to an 84 percent reduction in the risk of cardiovascular death.

Yet only three percent of the women in that large study were in that heart-healthy lifestyle category. Indeed, national survey data indicate that less than half of adults
and meet public health recommendations for moderate-to-vigorous physical activity. These national surveys rely on people’s own recall of how much activity they did. A recent study that used a more objective measure, requiring subjects to wear an accelerometer to measure activity for 7 days, indicated that the problem may be far worse: only 5% of adults met recommendations. Most people are consuming more processed foods, including fast food and sugar sweetened beverages than in the past. And they fail to consume whole foods. Over 80% of women do not meet current recommendations for fruit and vegetable intake.

**Part D: Putting research into practice**

We hope to change those numbers dramatically. In this Tool Kit, we give clear, detailed instructions for how to help women translate nutrition and physical activity research into a lifestyle that they can live with—and enjoy! With your help, they’ll see that heart-healthy living feels so good, they’ll never want to return to their old habits.
Chapter 2: Getting started

Part A: Your formula for success – the right staff

You, the Program Leader, are the most important factor in insuring the success of a nutrition and physical activity program in your community. You will influence nearly every aspect of the program, including its execution, instruction, and safety. You will also play a large role in how women perceive the program – whether they enjoy it, find it beneficial, and make it a permanent part of their lives. You will serve as a mentor and motivator to the participants.

Experience and Credentials

As a Program Leader, you are taking on an important responsibility. We want to make sure all leaders are qualified and have the tools they need. Below are the experience and qualifications that are optimal for becoming a Program Leader and running the program safely and effectively.

❤ Experience in providing physical activity instruction and/or health or nutrition education. This experience may be in a fitness center, community setting, outpatient hospital setting or as a personal trainer.

❤ Educational background in physical activity, nutrition, or some aspect of public health. The appropriate educational background might include medicine, nursing, nutrition, exercise physiology, occupational/physical therapy, or community/public health. This background will be invaluable when explaining the importance of physical activity and healthy eating habits to participants. However, all the background you need on heart disease will be included in this Tool Kit.
Certification by a reputable health and fitness organization. Organizations include the American College of Sports Medicine (ACSM), the American Council on Exercise (ACE), the American Senior Fitness Association, the International Association of Fitness Professionals (IDEA), the Cooper Institute for Aerobics Research, and the American Association of Family and Consumer Sciences (AAFCS). We realize that this is not a complete list of organizations that certify individuals. You may have a certification from another organization, that, together with your education and experience would qualify you to become a Program Leader.

CPR training. Intense exercise has the potential to cause sudden illnesses, such as stroke or heart attack. Therefore, this training is essential for anyone leading any type of aerobics program.

These attributes will contribute greatly to your ability to safely and effectively implement the StrongWomen – Healthy Hearts Program. We recognize that some people who want to become Program Leaders may not have any formal education regarding health, nutrition, and fitness. Others may not possess a fitness-related certification. Degrees and certifications provide an excellent foundation for sound instruction, but there is no replacement for hands-on experience – be it with physical activity, nutrition, or working with older individuals. Ultimately, the decision of who becomes a Program Leader is in the hands of the manager of the facility that is going to run the program. We encourage the manager to strongly consider the recommendations outlined above.

The basic responsibilities of the Program Leader are:

• To generate interest in the program and recruit participants
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- To conduct participant screening and complete enrollment forms
- To conduct an informational session for potential participants
- To conduct baseline and post-class measurements on participants (specified in Chapter 5)
- To thoroughly understand the principles of the StrongWomen – Healthy Hearts Program
- To instruct classes using safe and proper exercise techniques outlined in the Tool Kit
- To instruct classes based on sound nutrition principles outlined in the Tool Kit
- To be timely and organized for scheduled classes
- To provide ongoing feedback, assistance, and support to participants
- To provide leadership and inspiration to enhance compliance
- To participate in program monitoring and evaluation activities (completing monthly questionnaires relating to recruitment activities and implementation of the classes)

Part B: Identifying peer leaders

We recommend that you as a Program Leader identify an individual within your community who can become a Peer Leader to help you with the administrative duties of running the program. She can maintain compliance information, assist in gaining physician approval if needed, contact participants who have been absent, and help you prepare for the classes. The qualities that a Peer Leader should possess are described in greater detail in Chapter 7, Part G.

Part C: Range of sites that are encouraged to implement programs

The StrongWomen – Healthy Hearts Program is appropriate for urban, suburban, and rural community organizations, such as community centers, county NIFA...
(extension) offices, senior centers, area offices on aging, assisted living facilities, other older adult housing complexes, health and fitness centers, hospital outpatient centers, employee wellness programs, places of worship, or any other community site where middle-aged or older adults live or come together.

**Part D: Suggested physical space**

To implement the StrongWomen – Healthy Hearts Program safely and effectively, we recommend a minimum of 400 square feet for a class of approximately fifteen participants. Preferably, a room the size of a large classroom will be available, so that participants have plenty of room to move around. The class will go most smoothly if you have access to a basic kitchen with a stove and oven, refrigerator, sink, microwave oven, and toaster oven. However if you can bring ingredients with you to class, you may not need a refrigerator. You may also be able to use a hot plate instead of a full stove. A toaster oven can be used in place of a full oven.

Safe and secure storage space should be available for personal belongings such as jackets, pocketbooks, and bags. In addition, it is essential that:

- Water is made easily available to participants *or* they are regularly reminded to bring their own
- Rooms are well lit and large enough for unimpaired movement
- The parking lot is well lit and safe and/or appropriate public transportation is available
- There is confirmation in writing that the room will be available for each class
- Holidays or days when the site will not be open are clearly noted
Part E: Program promotion

One key to success is to promote the program in and around the community where classes will take place. Inexpensive and effective ways to promote your StrongWomen – Healthy Hearts Program include postcards, brochures, listserve announcements, fliers, and newspaper articles. These materials are posted for your use on the StrongWomen – Healthy Hearts website (go to blackboard.tufts.edu and login). There may also be a community or county website where you can post an announcement.

Fliers can be posted around town at local community centers, libraries, restaurants, grocery stores, houses of worship, and banks, and anywhere else that older adults gather or visit frequently. The more fliers that you post, the more people are likely to hear about the program. Always obtain permission before you post them.

Part F: Documenting your promotional efforts

As part of the research study that you are taking part in, we are interested in knowing the exact recruitment efforts that you are undertaking and how many people each one is expected to reach. The purpose of documenting your efforts is to help us determine which recruitment strategies seem to be most effective, so that we know how to best advise program leaders in the future. You will be asked to provide information on what you did to promote the program each month using an on-line form. The study’s Project Coordinator will send you the link, and remind you to fill it out each week.

Part G: Scheduling the program

The StrongWomen – Healthy Hearts Program is designed to run twice a week for 12 weeks. Session length will be approximately one full hour to an hour and
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fifteen minutes; this should be kept in mind when schedules are being made. It can be scheduled for any days of the week or any times of the day. When making your schedule, keep your potential participants in mind. When are they likely to be most available? Do not schedule both classes in the same day, or two days in a row. After the first session you and the program site manager should discuss how well the schedule is working and make adjustments at that time, if necessary.

Part H: Running the program

Each class will have two parts: aerobic exercise and nutrition education. The program is designed to be flexible, so that you could do either the exercise or the nutrition education component first. We will usually make a recommendation, but feel free to switch the order if you need to. The most important thing is that it works for you and the participants.

The class plans include an estimate of how long each activity should take. Because there are two components, it is especially important to be prepared and organized to prevent the classes from running much longer than an hour. You should plan the transition from the first part of class to the second so that it will be as smooth as possible. You should also ask participants to follow simple rules of class etiquette, such as getting water and going to the bathroom before the class starts and arriving promptly at the appropriate time.

If you want additional information on any of the class topics, you can find it on the StrongWomen – Healthy Hearts website (go to blackboard.tufts.edu and log in).
Chapter 3: Participant screening

Screening is a critical part of the enrollment process. The main reason to screen participants is simply to make sure that they are healthy enough to participate in this program, to ensure their safety. The second reason is to make sure this is the appropriate program for them.

The Screening Form will help you determine if the person meets the program criteria, and it will also help us keep track of how many people inquired about the program and the reasons they were excluded. You can complete the Screening Form on-line, or you can use the paper version. The on-line version can be found at: https://www.surveymonkey.com/s/MJ7PST6. If you plan on using the on-line version, be sure to bookmark it so you can easily access it when women contact you about the program. We are providing an Eligible Participant Contact Sheet form at the end of this chapter so you can write down the contact information of eligible participants once you have completed the on-line form. If you plan on using the paper version, photocopy a number of the forms so that you have those ready. The study’s Project Coordinator will collect your forms once you have finished the screening process.

As part of the Screening Form, participants will be asked their age, and will also be asked a series of questions from the Physical Activity Readiness Questionnaire (PAR-Q). Based on their responses, certain participants will need to have their physicians or medical providers complete the Physician Authorization forms and provide them to the Program Leader prior to starting the program. All completed forms should be stored in a locked cabinet to ensure participants’ privacy. On the basis of the PAR-Q or the physician’s response, the potential participant is
given a Green Light, Yellow Light or Red Light for exercise.

**Green Light for Exercise (Safe To Exercise)**

- Participant is 69 years old or younger and answers “No” to all 7 PAR-Q questions.
- Participant is 70 years of age or older and gets physician approval to participate with no special consideration or comments. This also applies to individuals who answered “Yes” on the PAR-Q and then received clearance from their physician.

**Yellow Light for Exercise (Special Considerations Exist)**

- Physician approves participation with certain limits or restrictions as indicated on the Physician Authorization Form.

**Red Light for Exercise (Exercise is Contraindicated)**

- Physician denies participation or the potential participant does not obtain a completed Physician Authorization Form.
- Any other potential participant who is not given a green light or a yellow light.
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SCREENING FORM – NATIONAL

Your name: ___________________________
Your site location: _____________________________
Date: ________________________________

Is the person who called to inquire about the program male? (CHECK THE BOX)

☐ Yes → Tell him the following:

“The Strong Women – Healthy Hearts Program is being designed and tested specifically for women. While it may eventually expand to include men, right now only women will be included in the classes and in the research study that we are doing along with the classes.” Thank him for his time and end the conversation.

☐ No → Tell her the following:

“Thanks for calling. I’d like to ask you a series of questions to make sure this program is safe and appropriate for you. Also, because this program is being evaluated through research, I am requesting that you participate in a screening procedure to determine whether you will be eligible. The research study is being conducted by colleagues at Tufts University and Penn State University. The purpose of the research is to learn more about the StrongWomen - Healthy Hearts Program as it is run in many different locations. The things we learn will help to make it the best program possible. If you agree to participate in the screening, I will ask you a series of questions for about 10 minutes. Your answers will be confidential. This form will be kept in a locked filing cabinet that only a few people involved in the research will have access to. If you agree to answer the questions, you may decide stop at any time. There are no consequences except that
we will not be able to enroll you in the research study and you will not be able to participate in the program at this time.” Do you agree to participate in the screening?

☐ Yes → Go to first question.

☐ No → Tell her: "Because you are not participating in the screening, you will not be able to participate in the program. If you wish, I can take your name and contact information and get in touch if we run another program that would fit with your needs. Thanks very much for your interest.” End the conversation.

For the next set of questions, CHECK THE BOX that indicates the potential participant’s response.

1. Thank you for your interest in the StrongWomen – Healthy Hearts Program and research study. The program lasts 12 weeks and is designed to teach you about heart-healthy eating and to progressively increase your ability to do aerobic exercise. The aerobic activities include walking outside if the weather permits and inside if it doesn’t, and dancing. Right now, I need to ask you a few questions to make sure that it is safe for you to exercise and that you qualify to be in the research study. First, for the research study, we would take your measurements twice. We will measure your height and weight, and you will be asked to fill out questionnaires about the exercise that you get and the fruits and vegetables that you eat. You will also be asked to complete a questionnaire telling a little about yourself and to take a memory test. Are you willing to be a part of the research study?
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☐ Yes → Go to question 2.

☐ No → Thank her for her time and end the conversation.

2. We need people for the Program who will be around the whole time that it is going on. Will you be in the area for the next 5 months?

☐ Yes → Go to question 3.

☐ No → Thank her for her time and end the conversation.

3. How old are you?

☐ If she is under 40 → Tell her, “This new program is being designed and tested specifically with middle-aged and older women, that is 40 or older. Thanks very much for your interest. If you wish, I can take your name and contact information, and get in touch if we run another program that includes women under 40.” Thank her for her time and end the conversation.

☐ If she is between 40 and 69 → Ask her, “Are you Pregnant or planning to become pregnant?”

☐ Yes → Tell her, “This program includes a weight-loss component that could be unsafe for pregnant women. If you wish, I can take your name and contact information and get
in touch if we run another program that would fit with your
needs. Thanks very much for your interest.” End the
conversation.

☐ No  ➔ Go to question 4.

☐ If she is over 69  ➔ Ask her, “Are you able to walk a quarter
mile?”

☐ Yes  ➔ Tell her, “To ensure your safety in this
program, which will involve some exercise, you will
need permission from your doctor. I will send you a
letter that will explain the program to your doctor and
a Physician Authorization Form.” Take the potential
participant’s mailing address. If she meets the rest of
the criteria on this form, send her the letter and form.

Skip question 4 and go to question 5.

☐ No  ➔ Tell her, “In this program we’ll be doing some
fairly vigorous exercise. It doesn’t sound like this
program would be a good match for you at this time.
If you wish, I can take your name and contact
information and get in touch if we run another program
that would be a better fit with your needs. Thanks
very much for your interest.” End the conversation.
4. Ask the following questions, which are from the Physical Activity Readiness Questionnaire (PAR-Q), developed by the Canadian Society for Exercise Physiology:

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<tr>
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<th>Yes</th>
<th>No</th>
</tr>
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<tbody>
<tr>
<td>1.</td>
<td></td>
<td>1. Has your doctor ever said that you have a heart condition AND that you should only do physical activity recommended by a doctor?</td>
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<td>2. Do you feel pain in your chest when you do physical activity?</td>
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<td>3. In the past month, have you had chest pain when you were not doing physical activity?</td>
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<td>4. Do you lose your balance because of dizziness or do you ever lose consciousness?</td>
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<td></td>
<td>5. Do you have a bone or joint problem (for example, back, knee or hip) that could be made worse by a change in your physical activity?</td>
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<td></td>
<td></td>
<td>6. Is your doctor currently prescribing drugs (for example, water pills) for your blood pressure or heart condition?</td>
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<td></td>
<td>7. Do you know of ANY OTHER REASON why you should not do physical activity?</td>
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</table>

**If she answers YES to one or more questions →** Tell her, “To ensure your safety in this program, which will involve some exercise, you will need to get permission from your doctor. I will send you a letter that explains the program for you to give your doctor and a Physician...
Authorization Form.” Take her mailing address. If she meets the rest of the criteria on this form, send her the letter and form. Go to question 5.

**NO to all questions → Go to question 5.**

5. What is your height? _________ What is your weight?___________

Use the table below to determine her BMI. Read down the first column to locate her height. Read across that row to locate her weight. Read the heading on top of that column – that is her BMI.

<table>
<thead>
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<th>Height</th>
<th>23 or less</th>
<th>24</th>
<th>25</th>
<th>26</th>
<th>27</th>
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<th>38</th>
<th>39</th>
<th>40</th>
<th>41 or more</th>
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<td>≤110</td>
<td>115</td>
<td>119</td>
<td>124</td>
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<td>186</td>
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<td>≥196</td>
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<td>4’11”</td>
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<td>178</td>
<td>183</td>
<td>188</td>
<td>193</td>
<td>198</td>
<td>204</td>
<td>≥209</td>
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<td>132</td>
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<td>174</td>
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<td>195</td>
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<td>206</td>
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<td>240</td>
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<td>166</td>
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<td>256</td>
<td>262</td>
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<td>5’9”</td>
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<td>196</td>
<td>203</td>
<td>209</td>
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<td>236</td>
<td>243</td>
<td>250</td>
<td>257</td>
<td>263</td>
<td>270</td>
<td>≥277</td>
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<tr>
<td>5’10”</td>
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<td>174</td>
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<td>257</td>
<td>264</td>
<td>271</td>
<td>278</td>
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<tr>
<td>5’11”</td>
<td>≤165</td>
<td>172</td>
<td>179</td>
<td>186</td>
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<td>200</td>
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<td>214</td>
<td>222</td>
<td>229</td>
<td>236</td>
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<td>250</td>
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<td>265</td>
<td>272</td>
<td>279</td>
<td>286</td>
<td>≥293</td>
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<td>6”</td>
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<td>250</td>
<td>258</td>
<td>265</td>
<td>272</td>
<td>279</td>
<td>287</td>
<td>294</td>
<td>≥302</td>
</tr>
</tbody>
</table>

☐ BMI less than 24 → Tell her, “The StrongWomen – Healthy Hearts Program specifically targets women who are overweight or at risk for becoming overweight. Your weight and height do not place you in either of those categories, so you don’t qualify. If you wish, I can take your name and contact information and get in touch if we run this program again without that requirement.” End the conversation.
BMI greater than or equal to 24 \( \rightarrow \) Go to question 6.

6. Are you currently doing any type of exercise regularly? For example, do you take any kind of dance or aerobics class; or do you swim, go for brisk walks, play golf, jog, run, dance, or bicycle more than once a week?

   Yes \( \rightarrow \) Tell her, “This program is designed for women who get very little or no exercise. If you wish, I can take your name and contact information and get in touch if we run another program that would be a better fit with your needs. Thanks very much for your interest.” End the conversation.

   No \( \rightarrow \) Go to question 7.

7. Are you currently participating in any other program that focuses on changing your dietary habits or losing weight?

   Yes \( \rightarrow \) Tell her, “This program is designed for women who are not participating in any other kind of lifestyle change program. If you wish, I can take your name and contact information and get in touch if we run another program that would be a better fit with your needs. Thanks very much for your interest.” End the conversation.

   No \( \rightarrow \) Tell her, “The classes will meet twice a week, on (SAY DAYS) at (SAY TIME) for one hour.” Can you
commit to coming to most of the classes?

☐ No → Tell her, “If you wish, I can take your name and contact information and get in touch if we run this program at a different time.” If she wishes to give her contact information:

Name: ________________________________
Address: ________________________________
________________________________________

Telephone #: _____________________________
Email address: ____________________________
Thank her for her time and end the conversation.

☐ Yes (PARTICIPANT IS ELIGIBLE) → Tell her, “Next, I’d like to ask you for some basic information about yourself. The purpose of asking these questions is to help us determine if we’re doing a good job of letting all eligible women know about the StrongWomen – Healthy Hearts Program. I have two questions about race/ethnicity.

First, are you Hispanic or Latino?”

☐ Yes
☐ No

“Which one or more of the following would you say is your race?” (READ THE FOLLOWING AND CHECK ALL THAT APPLY)
The StrongWomen – Healthy Hearts Program

☐ White
☐ Black or African American
☐ Asian
☐ Native Hawaiian or Other Pacific Islander
☐ American Indian or Alaska Native
☐ Other [specify] _______________________

“What is the highest grade or year or school you completed?” (READ IF NECESSARY; CHECK APPROPRIATE BOX)

☐ Some elementary school (did not finish)
☐ Elementary school
☐ Some high school (no diploma)
☐ High school graduate
☐ Some college or technical school (no degree)
☐ Associate’s degree
☐ Bachelor’s degree
☐ Graduate or professional degree

Say, “Could I get your full name and contact information?”

Name: ______________________________
Address: ______________________________
____________________________________
Telephone #: _____________________________
Email address: ____________________________

Tell her that there will be an informational session and a testing session, and that you will be in touch soon with the dates and times of those sessions.
<table>
<thead>
<tr>
<th>Site: _______________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
</tr>
<tr>
<td>Phone</td>
</tr>
<tr>
<td>Address</td>
</tr>
<tr>
<td>Email</td>
</tr>
</tbody>
</table>
The StrongWomen – Healthy Hearts Program

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"Dear Doctor" Letter

Date: _______________

Dear Dr. ________________,

Your patient ________________ is interested in participating in the StrongWomen – Healthy Hearts Program at ________________. This moderate intensity, progressive exercise program includes brisk walking and aerobic dancing.

Scientists and exercise physiologists at Tufts University have designed this exercise program especially for mid life and older adults who are currently sedentary. Program Leaders in your community are implementing it. Your patient will be required to complete a Medical History Questionnaire and provide Informed Consent prior to participation in this exercise program.

Please complete and sign the enclosed Physician/Physician Assistant/Nurse Practitioner Authorization Form. If you have any questions or would like to discuss your patient’s participation in this program in further detail, please call ________________ (name) at: ________________ (phone number).

Sincerely,

_________________________

_________________________
**Physician/Physician Assistant/Nurse Practitioner Authorization Form**

Patient Name: ______________________________________________

Address: _______________________________________________________________________________________
_____________________________________________________________________________________________

Phone Number: ______________ Date of Birth: __________________

Date of Last Exam: ______________

Height: _______ Weight: ______ Pulse: ______ BP: ______

Other: ______________________________________________________________________________________

Medical Conditions: ________________________________________________________________

Medications: ________________________________________________________________________________

____________________________________________________________________________________________

Special Considerations: ______________________________________________________________________

____________________________________________________________________________________________

____________________________________________________________________________________________

________ Yes, my patient can participate in the StrongWomen – Healthy Hearts Program.

________ No, my patient cannot participate at this time due to her medical conditions and health status.

____________________________________________________________________________________________

Physician/Physician Assistant/Nurse Practitioner’s Signature:

____________________________________________________________________________________________

Date: ______________________________________________________________________________________

Print Name: __________________________________________________________________________________

Address: ___________________________________________________________________________________

Phone Number: ______________ FAX Number: __________________________
Chapter 4: The informational meeting

Once you’ve generated interest in your program, you will need to host an informational meeting. There is a PowerPoint presentation that you can use, available on the StrongWomen – Health Hearts website (go to blackboard.tufts.edu and log in). If you don’t have a computer, LCD slide projector, and a room that can accommodate a slide presentation, you can print it and give it out as a handout.

It is important to have copies of the forms for the participants to fill out at this meeting. It is easiest if each participant is given her own packet at the beginning of the meeting. The packets should contain:

- All the forms, including the “Dear Doctor” letter and the Physician Authorization Form from Chapter 3
- The questionnaires and forms (found at the end of this chapter):
  - Participant Questionnaire
  - Fruit and Vegetable Brief FFQ
  - International Physical Activity Questionnaire (IPAQ)
  - The Participant Summary Information Sheet
  - The Medical History and Current Health Survey
- The Participant Informed Consent Form
- A sheet with the specifics for your program: the Orientation and Assessment Meeting schedule, the class schedule, and what participants should bring to class
- A piece of paper so that participants can write down their goals and expectations for the class
You might consider ordering some food for the meeting, such as finger sandwiches and a vegetable platter, and provide water. The snacks may be the extra incentive that people need to attend the meeting.

At the meeting, you should:

- Present the program
- Discuss proper exercise attire
- Ask potential participants about their goals and expectations for both diet and physical activity
- Explain the research study. Go over the questionnaires and forms, and explain that they should be filled out and returned at the Orientation and Assessment Meeting.
- Remind participants about the Orientation and Assessment Meeting. This meeting will ideally be at the same day, time and location as the classes. At this meeting, you will provide participants with any supplies and equipment related to the program (such as folders for their handouts and pedometers, if you are providing them). You will also conduct the cognitive impairment screening and take participants’ heights and weights. You will collect their questionnaires and make sure they have completed all necessary paperwork.

After the informational meeting, please send a list of all participants that you expect to return for the classes to the Project Manager at Tufts (Sara Folta, sara.folta@tufts.edu). We will use this list to assign study Participant ID Numbers.
PARTICIPANT QUESTIONNAIRE

Participant ID Number: ____________________________________________

Date: ________________

1. What is your date of birth? ___________ ___________ ___________
   Month       Day       Year

Please answer both of the following questions about race/ethnicity. For this questionnaire, Hispanic origins are not races.

2. Are you of Hispanic, Latino, or Spanish origin?
   □ No
   □ Yes

3. What is your race? Choose one or more.
   □ White
   □ Black, African American, or Negro
   □ American Indian or Alaska Native
   □ Asian
   □ Native Hawaiian or Other Pacific Islander
   Other (please specify) ____________________________

4. What is the highest level of education that you have completed? (Check the one that BEST applies)
   □ Some elementary school (did not finish)
   □ Elementary school
   □ Some high school (no diploma)
   □ High school graduate
   □ Some college or technical school (no degree)
   □ Associate’s degree
   □ Bachelor’s degree
   □ Graduate or professional degree
5. What is your marital status? (CHECK ONE BOX ONLY)
☐ Married
☐ Widowed
☐ Divorced
☐ Separated
☐ Never married
☐ A member of an unmarried couple

6. Which of these BEST describes your work situation? (CHECK ONE BOX ONLY)
☐ I am employed for wages.
☐ I am self-employed.
☐ I have been out of work for more than 1 year.
☐ I have been out of work for less than 1 year.
☐ I am a homemaker.
☐ I am a student.
☐ I am retired.
☐ I am unable to work.

7. What is your annual household income from all sources? (CHECK ONE BOX ONLY)
☐ Less than $10,000
☐ $10,000 to $14,999
☐ $15,000 to $24,999
☐ $25,000 to $34,999
☐ $35,000 to $49,999
☐ $50,000 to $74,999
☐ $75,000 to $99,999
☐ $100,000 to $149,999
☐ $150,000 to $199,999
☐ $200,000 or more
FRUIT AND VEGETABLE BRIEF FFQ

INSTRUCTIONS
- Think about what you usually ate last month.
- Please think about all the fruits and vegetables that you ate last month. Include those that were:
  - raw and cooked,
  - eaten as snacks and at meals,
  - eaten at home and away from home (restaurants, friends, take-out), and
  - eaten alone and mixed with other foods.
- Report how many times per month, week, or day you ate each food, and if you ate it, how much you usually had.
- If you mark "Never" for a question, follow the "Go to" instruction.
- Choose the best answer for each question. Mark only one response for each question.

1. Over the last month, how many times per month, week, or day did you drink 100% juice such as orange, apple, grape, or grapefruit juice? Do not count fruit drinks like Kool Aid, lemonade, Hi C, cranberry juice drink, Tang, and Twister. Include juice you drank at all mealtimes and between meals.

   | 0 | 1-2 | 3-4 | 5-9 | 10 | 20 | 30 | 40 | 5 or more |
---|---|---|---|---|---|---|---|---|---|
   | Never | times | times | times | time | times | times | times | times |
   | (Go to | last month | per week | per week | per week | per day | per day | per day | per day |
   | Question 2) | | | | | | | | |

1a. Each time you drank 100% juice, how much did you usually drink?

   | | | | | | | |
---|---|---|---|---|---|---|
   | Less than ½ cup | ¾ to 1¼ cup | 1¼ to 2 cups | More than 2 cups |
   | (less than 6 ounces) | (6 to 10 ounces) | (10 to 16 ounces) | (more than 16 ounces) |

2. Over the last month, how many times per month, week, or day did you eat fruit? Count any kind of fruit—fresh, canned, and frozen. Do not count juices. Include fruit you ate at all mealtimes and for snacks.

   | | | | | | | |
---|---|---|---|---|---|---|
   | Never | 1-2 | 3-4 | 5-9 | 10 | 20 | 30 | 40 | 5 or more |
   | (Go to | times | times | times | time | times | times | times | times | per day |
   | Question 3) | last month | per week | per week | per week | per day | per day | per day | per day | per day |

2a. Each time you ate fruit, how much did you usually eat?

   | | | | | | | |
---|---|---|---|---|---|---|
   | Less than 1 medium fruit | 1 medium fruit | 2 medium fruits | More than 2 medium fruits |
   | OR | | | |
   | Less than ½ cup | About ½ cup | About 1 cup | More than 1 cup |

Date: ___/___/___ Participant ID Number: _____________________
3. Over the last month, how often did you eat lettuce salad (with or without other vegetables)?

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Never (Go to Question 4)</th>
<th>1-3 times last month</th>
<th>1-2 times per week</th>
<th>3-4 times per week</th>
<th>5-6 times per week</th>
<th>1 time per day</th>
<th>2 times per day</th>
<th>3 times per day</th>
<th>4 times per day</th>
<th>5 or more times per day</th>
</tr>
</thead>
</table>

3a. Each time you ate lettuce salad, how much did you usually eat?

<table>
<thead>
<tr>
<th>Amount</th>
<th>About 1/2 cup</th>
<th>About 1 cup</th>
<th>About 2 cups</th>
<th>More than 2 cups</th>
</tr>
</thead>
</table>

4. Over the last month, how often did you eat French fries or fried potatoes?

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Never (Go to Question 5)</th>
<th>1-3 times last month</th>
<th>1-2 times per week</th>
<th>3-4 times per week</th>
<th>5-6 times per week</th>
<th>1 time per day</th>
<th>2 times per day</th>
<th>3 times per day</th>
<th>4 times per day</th>
<th>5 or more times per day</th>
</tr>
</thead>
</table>

4a. Each time you ate French fries or fried potatoes, how much did you usually eat?

<table>
<thead>
<tr>
<th>Amount</th>
<th>Small order or less (About 1 cup or less)</th>
<th>Medium order (About 1 1/2 cups)</th>
<th>Large order (About 2 cups)</th>
<th>Super Size order or more (About 3 cups or more)</th>
</tr>
</thead>
</table>

5. Over the last month, how often did you eat other white potatoes? Count baked, boiled, and mashed potatoes, potato salad, and white potatoes that were not fried.

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Never (Go to Question 6)</th>
<th>1-3 times last month</th>
<th>1-2 times per week</th>
<th>3-4 times per week</th>
<th>5-6 times per week</th>
<th>1 time per day</th>
<th>2 times per day</th>
<th>3 times per day</th>
<th>4 times per day</th>
<th>5 or more times per day</th>
</tr>
</thead>
</table>

5a. Each time you ate these potatoes, how much did you usually eat?

<table>
<thead>
<tr>
<th>Amount</th>
<th>1 small potato or less (1/4 cup or less)</th>
<th>1 medium potato (1/2 to 1 cup)</th>
<th>1 large potato (1 to 1 1/2 cups)</th>
<th>2 medium potatoes or more (1 1/2 cups or more)</th>
</tr>
</thead>
</table>

6. Over the last month, how often did you eat cooked dried beans? Count baked beans, bean soup, refried beans, pork and beans and other bean dishes.

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Never (Go to Question 7)</th>
<th>1-3 times last month</th>
<th>1-2 times per week</th>
<th>3-4 times per week</th>
<th>5-6 times per week</th>
<th>1 time per day</th>
<th>2 times per day</th>
<th>3 times per day</th>
<th>4 times per day</th>
<th>5 or more times per day</th>
</tr>
</thead>
</table>

6a. Each time you ate these beans, how much did you usually eat?

<table>
<thead>
<tr>
<th>Amount</th>
<th>Less than 1/2 cup</th>
<th>1/2 to 1 cup</th>
<th>1 to 1 1/2 cups</th>
<th>More than 1 1/2 cups</th>
</tr>
</thead>
</table>

© Tufts University 48 Chapter 4
7. Over the last month, how often did you eat other vegetables?

**DO NOT COUNT:**
- Lettuce salads
- White potatoes
- Cooked dried beans
- Vegetables in mixtures, such as in sandwiches, omelets, casseroles, Mexican dishes, stews, stir-fry, soups, etc.
- Rice

**COUNT:**
- All other vegetables—raw, cooked, canned, and frozen

<table>
<thead>
<tr>
<th>Never (Go to Question 8)</th>
<th>1-3 times last month</th>
<th>1-2 times per week</th>
<th>3-4 times per week</th>
<th>5-6 times per week</th>
<th>1 time per day</th>
<th>2 times per day</th>
<th>3 times per day</th>
<th>4 times per day</th>
<th>5 or more times per day</th>
</tr>
</thead>
</table>

7a. Each of these times that you ate other vegetables, how much did you usually eat?

<table>
<thead>
<tr>
<th>Less than ⅛ cup</th>
<th>⅛ to 1 cup</th>
<th>1 to 2 cups</th>
<th>More than 2 cups</th>
</tr>
</thead>
</table>

8. Over the last month, how often did you eat tomato sauce? Include tomato sauce on pasta or macaroni, rice, pizza and other dishes.

<table>
<thead>
<tr>
<th>Never (Go to Question 9)</th>
<th>1-3 times last month</th>
<th>1-2 times per week</th>
<th>3-4 times per week</th>
<th>5-6 times per week</th>
<th>1 time per day</th>
<th>2 times per day</th>
<th>3 times per day</th>
<th>4 times per day</th>
<th>5 or more times per day</th>
</tr>
</thead>
</table>

8a. Each time you ate tomato sauce, how much did you usually eat?

<table>
<thead>
<tr>
<th>About ⅛ cup</th>
<th>About ⅛ cup</th>
<th>About 1 cup</th>
<th>More than 1 cup</th>
</tr>
</thead>
</table>

9. Over the last month, how often did you eat vegetable soups? Include tomato soup, gazpacho, beef with vegetable soup, minestrone soup, and other soups made with vegetables.

<table>
<thead>
<tr>
<th>Never (Go to Question 10)</th>
<th>1-3 times last month</th>
<th>1-2 times per week</th>
<th>3-4 times per week</th>
<th>5-6 times per week</th>
<th>1 time per day</th>
<th>2 times per day</th>
<th>3 times per day</th>
<th>4 times per day</th>
<th>5 or more times per day</th>
</tr>
</thead>
</table>

9a. Each time you ate vegetable soup, how much did you usually eat?

<table>
<thead>
<tr>
<th>Less than 1 cup</th>
<th>1 to 2 cups</th>
<th>2 to 3 cups</th>
<th>More than 3 cups</th>
</tr>
</thead>
</table>

10. Over the last month, how often did you eat mixtures that included vegetables? Count such foods as sandwiches, casseroles, stews, stir-fry, omelets, and tacos.

<table>
<thead>
<tr>
<th>Never</th>
<th>1-3 times last month</th>
<th>1-2 times per week</th>
<th>3-4 times per week</th>
<th>5-6 times per week</th>
<th>1 time per day</th>
<th>2 times per day</th>
<th>3 times per day</th>
<th>4 times per day</th>
<th>5 or more times per day</th>
</tr>
</thead>
</table>

**THANK YOU!**
INTERNATIONAL PHYSICAL ACTIVITY QUESTIONNAIRE (IPAQ)

Date: _____ / _____ / _____  Participant ID Number: ___________________________

The following questions will ask you about the time you spent being physically active in the last 7 days. Please answer each question even if you do not consider yourself to be an active person. Please think about the activities you do at work, as part of your house and yard work, to get from place to place, and in your spare time for recreation, exercise or sport.

Think about all the vigorous activities that you did in the last 7 days. Vigorous physical activities refer to activities that take hard physical effort and make you breathe much harder than normal. Think only about those physical activities that you did for at least 10 minutes at a time.

1. During the last 7 days, on how many days did you do vigorous physical activities like heavy lifting, digging, aerobics, or fast bicycling?

   _____ days per week

   [ ] No vigorous physical activities  ➔ Skip to question 3

2. How much time did you usually spend doing vigorous physical activities on one of those days?

   _____ hours per day

   _____ minutes per day

   [ ] Don’t know/Not sure

Think about all the moderate activities that you did in the last 7 days. Moderate activities refer to activities that take moderate physical effort and make you breathe somewhat harder than normal. Think only about those physical activities that you did for at least 10 minutes at a time.

3. During the last 7 days, on how many days did you do moderate physical activities like carrying light loads, bicycling at a regular pace, or doubles tennis? Do not include walking.

   _____ days per week

   [ ] No moderate physical activities  ➔ Skip to question 5
4. How much time did you usually spend doing moderate physical activities on one of those days?

   _____ hours per day
   _____ minutes per day

   □ Don’t know/Not sure

Think about the time you spent walking in the last 7 days. This includes at work and at home, walking to travel from place to place, and any other walking that you might do solely for recreation, sport, exercise, or leisure.

5. During the last 7 days, on how many days did you walk for at least 10 minutes at a time?

   _____ days per week

   □ No walking       Skip to question 7

6. How much time did you usually spend walking on one of those days?

   _____ hours per day
   _____ minutes per day

   □ Don’t know/Not sure

The last question is about the time you spent sitting on weekdays during the last 7 days. Include time spent at work, at home, while doing course work and during leisure time. This may include time spent sitting at a desk, visiting friends, reading, or sitting or lying down to watch television.

7. During the last 7 days, how much time did you spend sitting on a week day?

   _____ hours per day
   _____ minutes per day

   □ Don’t know/Not sure

This is the end of the questionnaire, thank you for participating.
Participant Summary Information Sheet

Name: ________________________________________________________________

Address: ________________________________________________________________

______________________________________________________________

______________________________________________________________

Phone Number: ________________________________________________________________

Email address, if available: ________________________________________________________________

Program Site: ________________________________________________________________

Start Date: _____________  End Date: ______________

In case of emergency, please call:

Name: ________________________________________________________________

Relationship: ________________________________________________________________

Phone Number: ________________________________________________________________
Medical History and Current Health Survey

Name: ____________________________________________
Date: ____________________________________________

Please read the following list carefully and circle Yes or No as it applies to your medical history and current health. Please include any additional information and conditions for which you are receiving medical care.

<table>
<thead>
<tr>
<th>Medical History</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aneurysm</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Arthritis (Rheumatoid or Osteoarthritis)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asthma</td>
<td></td>
<td></td>
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<tr>
<td>Back Pain</td>
<td></td>
<td></td>
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<tr>
<td>High Blood Pressure</td>
<td></td>
<td></td>
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<tr>
<td>Low Blood Pressure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bone Fractures</td>
<td></td>
<td></td>
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<tr>
<td>Cancer (Please provide type and treatment)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>High Cholesterol (Date of last reading / )</td>
<td></td>
<td></td>
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<tr>
<td>Diabetes (Type I or Type II)</td>
<td></td>
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<tr>
<td>Emphysema</td>
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<tr>
<td>Epilepsy</td>
<td></td>
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<tr>
<td>Heart Disease</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family History of Heart Disease (Mother, Father, Siblings)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hernia</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Joint or Ligament Injuries (Please specify)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Muscle Injuries (Please specify)</td>
<td></td>
<td></td>
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<tr>
<td>Neck Pain or Injury</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Osteoporosis</td>
<td></td>
<td></td>
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</tbody>
</table>
### Medical History (continued)

<table>
<thead>
<tr>
<th>Symptom</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>Vertigo or Lightheadedness</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other:</td>
<td>Yes</td>
<td>No</td>
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</table>

### Current Health – Past month

<table>
<thead>
<tr>
<th>Symptom</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Back Pain</td>
<td></td>
<td></td>
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<tr>
<td>Chest Pain or Tightness</td>
<td></td>
<td></td>
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<tr>
<td>Discomfort from the Waist Up</td>
<td></td>
<td></td>
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<tr>
<td>Heart Palpitations</td>
<td></td>
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<tr>
<td>Indigestion</td>
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<tr>
<td>Jaw Pain</td>
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<tr>
<td>Joint Pain</td>
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<tr>
<td>Lightheadedness</td>
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<tr>
<td>Muscle Pain</td>
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<tr>
<td>Nausea</td>
<td></td>
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<tr>
<td>Neck Pain</td>
<td></td>
<td></td>
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<tr>
<td>New Medication or Dosage Changes</td>
<td></td>
<td></td>
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<tr>
<td>Shortness of Breath</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other:</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

Please list any medication you are currently taking or take regularly.

**NONE □**

<table>
<thead>
<tr>
<th>Name of medication</th>
<th>How much?</th>
<th>How often?</th>
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StrongWomen-Healthy Hearts: A Community-Based Program for Midlife and Older Women
PI: Miriam Nelson

TUFTS MEDICAL CENTER
TUFTS UNIVERSITY
Friedman School of Nutrition Science and Policy

INFORMED CONSENT TO PARTICIPATE IN RESEARCH

StrongWomen – Healthy Hearts: A Community-Based Program for Midlife and Older Women

Principal Investigator: Miriam F. Nelson, PhD

Co-Investigators:
Sara Foltz, Tufts University
Alice Lichtenstein, Tufts University
Jeanne Goldberg, Tufts University
Julia Kuder, Tufts University
Marilyn Corbin, Pennsylvania State University
Nancy Wiker, Pennsylvania State University
Jodi Torack, Pennsylvania State University
Rebecca Seguin, Fred Hutchinson Cancer Research Center
Kathy Dothage, National Extension Association of Family & Consumer Sciences

INTRODUCTION

Many people think of heart disease as a man’s disease, but in fact more women than men get it. In the United States, about half a million women die each year from heart disease — about one woman every minute. We know from past studies that women can cut down their risk by making changes in what they eat and how much they exercise, and by having a healthy weight.

We created a program called StrongWomen – Healthy Hearts to help women make changes to cut down their risk of heart disease. We tested it in another study and found that it works to help women lose weight, make better food choices, and get more exercise. This study is designed to build on that research.

Taking part in this research study is totally your choice. You can decide to stop taking part in this research study at any time for any reason. If you stop being in this research study, it will not affect how you are treated at Tufts Medical Center/Tufts University.

Please read all of the following information carefully. Ask Dr. Miriam Nelson, or her representative, to explain any words, terms, or sections that are unclear to you. Ask any questions that you have about this research study. Do not sign this consent form unless you understand the information in it and have had your questions answered to your satisfaction.
The StrongWomen – Healthy Hearts Program

StrongWomen-Healthy Hearts: A Community-Based Program for Midlife and Older Women
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If you decide to take part in this research study, you will be asked to sign this form. You will be given a copy of the signed form. You should keep your copy for your records. It has information, including important names and telephone numbers, to which you may wish to refer in the future.

New things might be learned during this study that you should know about. The investigators will tell you about new information that may affect your willingness to stay in this study.

If you are eligible to participate and agree to be in the study, the Principal Investigator may still choose to stop your participation in this study if she thinks it is in your best medical interest.

If you have question about your rights as a research study subject, call the Tufts Medical Center and Tufts University Health Sciences Institutional Review Board (IRB) at (617) 636-7512. The Institutional Review Board is a group of doctors, nurses, and non-medical people who review human research studies for safety and protection of people who take part in the studies. Federal law requires the Institutional Review Board to review and approve any research study involving humans. This must be done before the study can begin. The study is also reviewed on a regular basis while it is in progress.

This research study has been reviewed and approved by the IRB of Tufts Medical Center and Tufts University Health Sciences.

PURPOSE OF STUDY

The purpose of this study is to learn about the best ways to spread this program so that it can be brought to women all over the country in the communities where they live. The researchers will learn about who decides to do the program and why women may decide not to do it. They will also learn how the program gets used in many different types of places, and whether the program still helps women make changes in their weight, eating, and exercise habits. Learning these things will help the researchers make changes to the program itself to make it even better, and will let them know the best ways to train program leaders and to advertise the program.

This study will be conducted at National Institute of Food and Agriculture (NIFA) county sites across the country. It is sponsored by the Centers for Disease Control.

PROCEDURES TO BE FOLLOWED

Everyone who chooses to participate in this study will undergo screening to ensure that the program is appropriate and safe for you. You have already given verbal consent and gone through most of the screening process with your program leader. That’s when your program leader asked you questions about your age, height and weight, and a little bit about your health. There is one more part to the screening process. At the Orientation and Assessment Meeting, you will be asked to take a brief test to assess whether you have any memory problems. You will be asked to respond verbally to six simple questions. If the results of this test indicate that you may have a memory problem, you will not be able to participate in the study. You will
The StrongWomen – Healthy Hearts Program

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receive a phone call and a letter from study personnel letting you know so that you can follow up with your primary care physician about the results of the memory test.

All participants who meet the requirements of the study after the screening will be measured to help us learn about whether the program works to help women with their eating, exercise, and weight. You will be measured at two different times. The first time will be at the Orientation and Assessment Meeting. The second time will be at the very last class. Your program leader will take these measurements. This testing will include:

1. Measuring your height using a stadiometer. The stadiometer is basically a plastic ruler that is placed against the wall. It has a plastic headpiece that your program leader will adjust until it just touches the top of your head, so she can then read your height. Unlike the rest of the measurements, your height will be measured only once, at the Orientation and Assessment meeting.
3. Measuring your fruit and vegetable intake using a questionnaire called the Fruit and Vegetable Brief FFQ. This is a 3-page form that asks about the fruits and vegetables that you ate over the last month. It will take about 15 minutes to complete.
4. Measuring your usual physical activity using a questionnaire called the International Physical Activity Questionnaire (IPAQ). This is a 2-page questionnaire that asks about the exercise you did over the last 7 days. It will take about 10 minutes to complete.
5. Filling out a Participant Questionnaire. You will be asked about your race/ethnicity, your education level, your marital status, your employment, and your income level. It will take about 5 minutes to complete.

After screening and measuring you will:

1. Participate in the program by attending a one-hour class two times per week for twelve weeks.
   a. About half of the class time (30 minutes) will involve lessons on nutrition and healthy eating patterns, including cooking demonstrations and lessons. The other half of the class (30 minutes) will include a walking and dancing exercise program that is designed to be safe and fun. The exercise program will progress from week to week as your fitness improves.
2. Be asked to practice skills and techniques from the lessons outside of class
3. Be asked to incorporate physical activity into your lives outside of class

RISKS

There is some risk of psychological distress should anyone besides the program leader and research staff see your data. Your data will be kept confidential to minimize this risk (Privacy and Confidentiality, below).
The StrongWomen – Healthy Hearts Program

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Exercise has some risks associated with it. There is a risk of injury, such as spraining your ankle or skimming your knees, hands, or elbows. There is also some risk of muscle tenderness and soreness. Intense exercise can also cause sudden illnesses, such as stroke or heart attack. To minimize these risks, you will undergo screening to determine if it is safe for you to start an exercise program. If you have a medical issue or you are over 69 years old, you will be required to provide a letter from your doctor before you can start. Program leaders are prepared to handle sudden illnesses, sprains, and injuries from falling. All program leaders must have current CPR certification. Program leaders will never be more than one minute's walk away from any participant, and they will have a phone available at all times. If exercise is conducted outdoors, they will be required to carry a working cell phone.

The nutrition education part of the classes is also designed to be as safe as possible. Part of each class will be in lecture format and will not present any risks beyond those encountered in everyday life. Part will involve cooking demonstrations and lessons and includes risks typical for cooking, such as accidental burns or knife cuts. Kitchen safety precautions will be discussed and adequate supplies of appropriate equipment will be available (for example, enough oven mitts). Program leaders will have a first aid kit available and are trained to provide first aid should an injury occur.

There is some risk to an embryo or fetus, should you become pregnant while in this study. The program includes a significant section on weight loss, which is not currently recommended for pregnant women. Because of this risk, if you become pregnant while you are enrolled in this study, you will need to let your program leader know immediately. Your participation in this study will be terminated.

BENEFITS

The benefits to you are that you may lower your risk of heart disease by:

- Learning about nutrition and how to adopt a heart-healthy eating pattern
- Learning practical skills for cooking and menu planning
- Improving your aerobic fitness

You may also:
- Experience psychological benefits of exercise
- Form friendships with other women participating in the study
- Enjoy your time participating in the class

The benefits to society include possibly helping to improve the heart health of women across the United States, since the results of this study will help make the StrongWomen – Healthy Hearts Program as useful as possible in as many places as possible.
The StrongWomen – Healthy Hearts Program

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ALTERNATIVES

No alternative procedures will be utilized in this study.

WHOM TO CONTACT

If you have any questions or problems regarding this research study, please feel free to ask. We will do our best to answer your questions. At any time, you may contact the project manager, Sara Folta, at (617) 636-3423 (office) or (781) 838-2075 (cell) or the principal investigator, Miriam Nelson, at (617) 636-3735 or (978) 731-7386 (cell). Both are at Tufts University.

RESEARCH RELATED INJURY

Emergency medical treatment will be given to you if you are hurt or get sick as a direct result of being in this research study. You or your insurance carrier are to pay for any such medical care. Any needed medical care is available at the usual cost. All needed facilities, emergency treatment, and professional services are available to you, just as they are to the general public. There are no plans to pay for your treatment if you get hurt or sick as part of this study. The institution has not set aside any money to pay for a research-related injury or illness.

COSTS

The only costs for participating in this study are the costs of traveling to and from the site where you will get measured and where you will take the classes. In addition, StrongWomen – Healthy Hearts program leaders may charge a small fee for classes (up to $240, or $10 per class) to cover the costs of the program.

PAYMENT

You will not receive any form of payment for your participation in this study.

PRIVACY AND CONFIDENTIALITY

If you agree to take part in this research study, your personal information will not be given to anyone unless we get your permission in writing. It will only be given if the law requires it. We will make every effort to keep your information private, but it cannot be totally guaranteed. The Institutional Review Board of Tufts Medical Center and Tufts University Health Sciences may check records that identify you. This might include your medical or research records and the informed consent form you signed. The records of this study might also be reviewed to make sure all rules and guidelines were followed.

To keep your data confidential, you will be assigned a study number. Only your study number, and not your name, will appear with your data. Research staff and your program leader, and no
StrongWomen-Healthy Hearts: A Community-Based Program for Midlife and Older Women
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One else, will have access to the list that links your name with your study number. This list and the data collection forms will either be kept in a locked file cabinet or will be password protected on a computer. The data will be stored and secured at 2 possible sites: your program leader’s office (temporarily); and the Tufts University research site, located at 150 Harrison Ave., Boston, MA. In the event of any publication or presentation resulting from the research, no personally identifiable information will be shared.

The measurements themselves will be made in private, so that other participants will not be able to find out your information while you are being measured.
PARTICIPANT’S STATEMENT

I have read this consent form and have discussed with Dr. Miriam Nelson or her representative the procedures described above. I have been given the opportunity to ask questions, which have been answered to my satisfaction. I understand that any questions that I might have will be answered verbally or, if I prefer, with a written statement.

I understand that I will be informed of any new findings developed during the course of this research study that may affect my willingness to stay in this research study.

I understand that my participation is voluntary. I understand that I may refuse to participate in this study. I also understand that if, for any reason, I wish to discontinue participation in this study at any time, I will be free to do so.

I understand that in the event I become ill or am injured as a result of participating in this research study, medical care will be provided to me. However, such medical care will not be provided free of charge, even if the injury or illness is a direct result of this research study. I understand that no funds to provide financial compensation for research-related injury or illness are available.

If I have any questions concerning my rights as a research subject in this study, I may contact the Institutional Review Board at (617) 636-7512.

I have been fully informed of the above-described study with its risks and benefits, and I hereby consent to the procedures set forth above.

I understand that as a participant in this study my identity and my medical records and data relating to this research study will be kept confidential, except as required by law.

__________________________________________  ______________________________
Date                                               Participant’s Signature

I have fully explained to __________________________ the nature and purpose of the above-described study and the risks that are involved in its performance. I have answered all questions to the best of my ability.

__________________________________________  ______________________________
Date                                               Principal Investigator or Representative’s Signature
Chapter 5: Participant assessment and tracking

This chapter details what will happen at the Orientation and Assessment Meeting. It also contains two types of tools: the protocols and forms for taking assessments, and the forms you will need to administer the program effectively throughout the 12 weeks.

Orientation and Assessment Meeting

The next step after you’ve had an Informational Meeting is to hold an Orientation and Assessment Meeting for those participants who are sure they plan on enrolling in the program and the research study. This meeting should be held a week or so before the first class session, and is best held at the same day, time, and location as the classes will be. If necessary, it could also be conducted on the first class day, prior to the class. If that is the case, participants should be prepared to stay for approximately 2 hours.

During the orientation, you will remind participants of the class schedule and provide them with a brief overview of the topics that will be covered. You will also provide participants with any supplies and equipment they may use during the program, all of which are optional. For more information, see the program website (go to blackboard.tufts.edu and log in).

- Folders or binders for keeping handouts
- Pedometers. We recommend the Yamax Digiwalker SW-200, which is a good, accurate pedometer that can be purchased at relatively low cost (usually around $20). Please see the StrongWomen – Healthy Hearts website (blackboard.tufts.edu), under “Resources” for more information about pedometers.
You can also contact the Project Manager at Tufts for more information or questions about other pedometers (Sara Folta, sara.folta@tufts.edu or 617-636-3423).

- Diet and exercise tracking tools. Please go to the program website for information on good tools that can be obtained free or at low cost.

**Informed Consent**

The next thing you’ll do is to take informed consents. You already provided participants with the Informed Consent Forms at the informational meeting. At this meeting, be sure to go over the form and answer any questions about it. Then you will witness each participant signing the form by signing it yourself. **PLEASE NOTE: YOU WILL NEED TWO COPIES OF THE FORM.** One is for the participant to take with her for her reference, and one is for us to keep in the study files to prove that we are in compliance with the human subjects research rules. If there is a photocopier readily available at your site, just run them through when they have all been completed. If there is not, you must bring extra copies and have each participant sign two (one for them, one for the study).

**Assessment Tools**

You will complete the participant screening process by giving participants a Cognitive Impairment Test. The purpose of this test is to ensure that the program is appropriate. A participant who is cognitively impaired will not be able to fully participate in the program. Furthermore, in our experience it is likely to be disruptive for the rest of the class if someone with a cognitive impairment is allowed to participate.

You will also start the assessment process by taking participants’ heights and
weights. The purpose of these measurements (as well as the Fruit and Vegetable Brief FFQ and the IPAQ) is to help us determine if the program remains effective as it is more broadly disseminated, as well as some of the factors that may determine its effectiveness.

- Protocols for taking these measures are provided in this chapter. The Research Webinar also provides information on taking them.

Privacy and Confidentiality
There are a few things to keep in mind so that privacy and confidentiality are protected during the assessment process. To protect the privacy of the participants, the Cognitive Impairment Test and the height and weight measurements should be taken on one participant at a time, sufficiently apart from the other participants so that they may not hear responses or see the measurements. Ideally they should be taken in a private room. Before taking measurements, you should stress to the participants that their measurements are their own and that they need not share this information with anyone. If two people are taking measurements, they should not vocalize the numbers. Silently record them on the data sheet. You should show only the participant’s own data sheet to her.

To protect confidentiality, based on the participant list you provided after the information session, you will be given a Participant ID List that has all of the participants’ names, plus a research participant study number that they have been assigned. *This list MUST be kept in a locked cabinet or drawer and/or password protected on your computer when you are not using it.* The Participant ID List is the only way someone can link individual identity to data. That is why the list must be kept under lock and key or password protected. At some point, we will
The StrongWomen – Healthy Hearts Program

tell you that the list should be deleted or destroyed. The paper copy must be shredded prior to disposal.

**Assessment Check-In**
The forms you will need for the Cognitive Impairment Test and the height and weight measurements are included at the end of this chapter, and are also posted on the StrongWomen – Healthy Hearts website (blackboard.tufts.edu). Before you begin the assessments, make sure you have a complete set of forms for each participant, with the Participant ID written in. At check-in, refer to the Participant ID List and give each participant her set of forms. Be sure to double-check to make sure the right ID number is given.

**Check Out**
Before participants leave, they must check out. Use the Check Out Checklist to make sure that they have completed everything that is required. Remind them of the date and time that the program will start.

**Storage of Data**
After you’ve completed the assessments, you must place the forms in a locked file cabinet. Make a copy and mail the copies to the Project Manager at Tufts: Sara C. Folta, PhD, Friedman School of Nutrition, Tufts University, 150 Harrison Ave., Boston, MA 02111.
**COGNITIVE IMPAIRMENT TEST (CIT) PROTOCOL**

**Procedure:**

1. Use the “Cognitive Impairment Test” form.
2. Ask participants the six questions (“What year is it?” etc.). Make sure they can’t see the form.
3. Check the boxes, indicating whether the answers were correct, or write in how many mistakes they made in the space provided.

**Comments:**

What should you do if someone performs poorly on the CIT?

The CIT is an accurate indicator of whether someone has a cognitive impairment. However, the test says nothing about the type or severity of impairment. For example, a person with advanced Alzheimer’s disease and someone who hasn’t slept for 36 hours may get the same score on the test.

Though you will not be scoring the test (the researcher team will do this), you will have an idea about a participant’s relative performance. You *must not* interpret anyone’s performance on the CIT, and you should treat each participant alike to protect her privacy. If a participant fails the CIT, someone from the research team will follow up with a phone call and a letter regarding her score on the CIT. We will encourage her to see her primary care physician. Only her primary care physician can determine the type and severity of any impairment and plan a course of action.
Failing the CIT is an exclusionary criterion for this study. The researchers will inform anyone who is excluded that they are excluded and for what reason. *This is not the program leaders’ responsibility.* Exclusion from the study does not necessarily mean that someone cannot participate in other programs. We encourage you, therefore, to notify women who are excluded of any other program opportunities that might be appropriate.
6 Item Cognitive Impairment Test

Ask the following questions and check the appropriate box.

1. What year is it now?  
   Correct: [ ]  Incorrect: [ ]

2. What month is it now?  
   Correct: [ ]  Incorrect: [ ]

3. “Please repeat the following phrase after me and memorize it.”  
   John  Smith  42  High Street  Bedford

   Correct: [ ]  Incorrect: [ ]

4. About what time is it? (within 1 hour is correct)  
   Correct: [ ]  Incorrect: [ ]

5. Count backwards from 20 to 1.  
   Correct: [ ] 1 Error: [ ]  >1 Error: [ ]

6. Say the months of the year in reverse order.  
   Correct: [ ] 1 Error: [ ]  >1 Error: [ ]

7. Repeat the memory phrase.  
   Correct: [ ] 1 Error: [ ]  2 Errors: [ ]
   3 Errors: [ ]  4 Errors: [ ]  5 Errors: [ ]
PROTOCOL FOR MEASURING HEIGHT

Equipment you will need:

- Flat, square headboard (any material is fine, as long as it is solid and sturdy, but not too heavy)
- Metal measuring tape (the kind you’d find in a tool box)

You will need to take the measurement on flooring that is not carpeted, against a flat wall with no molding.

Height should be measured in triplicate to the nearest half centimeter (0.5 cm) or quarter inch (¼ in).

It is ideal to have two of you taking and recording the measurements: one to instruct the participant and position the headboard, and the other to read and record the height. If necessary, one person can do both.

The participant should not be wearing shoes or objects on top of her head. If necessary, ask her to tuck her hair behind her ears so the tops of her ears are visible.

Procedure:

1. Ask the participant to stand with feet flat, together, and against the wall. Her heels must be in contact with the wall. Her back and/or buttocks should also be in contact with the wall. The participant’s arms should hang loosely at the sides of the body with palms facing the thighs. Shoulders should be relaxed.
2. Adjust the head. Ask the participant to focus her eyes straight ahead, and make sure the chin is in a neutral position. You should be able to draw a straight, level line from the corner of the participant's eye to the top of her ear that is perpendicular to the wall (this is called the Frankfurt Plane and it is essential to have the subject in this position to get consistent and accurate readings!).

3. Bring the headboard down to the most superior point on the head, compressing the hair. Ask the participant to let you know when she feels pressure.

4. Lightly mark where the bottom of the headboard meets the wall. Then, use a metal tape to measure from the base on the floor to the marked measurement on the wall to get the height measurement. (If the wall should not be written on even lightly with pencil, be sure to securely tape paper along the wall ahead of time). Round up to the nearest half centimeter (0.5 cm) or quarter inch (¼ inch), and record the measurement.

5. For measuring in triplicate, ask the participant to step away from the wall between measurements. The measurements should all be within 0.5 cm/¼ inch. If they are not, take more measurements until three are. For example, if the first 3 measurements are: 151.0 cm, 152.0 cm, and 152.0 cm, the
difference between these is greater than 0.5 cm. Thus, an additional measurement must be taken. If the next recorded height is 151.5 cm, then no more measurements are necessary. At this point there are now three measurements within 0.5 cm of each other (151.5 cm, 152.0 cm, and 152.0 cm).
PROTOCOL FOR MEASURING WEIGHT

Weight should be measured in triplicate on a digital scale, without shoes in as light clothing as possible.

1. Place the scale on a hard flat surface.

2. The scale should be calibrated prior to use. Some scales self-calibrate; please refer to the instructions. If the scale doesn’t, calibrate it by placing objects of known weight on the scale. Put enough weight on to measure 30 pounds or more. Dumbbells work well for this purpose. For example, place 3 to 4 10-pound dumbbells on the scale. If you put 3 on and it reads 28 pounds, then you must add 2 pounds to whatever your scale reads when taking weights.

3. Ask the participant to step onto the scale, look forward, and relax. Her weight should be evenly distributed between her feet, and she should not be touching anything other than the scale.

4. Allow the displayed weight to stabilize and record the number, adding the calibration factor if necessary.

5. Ask the participant to step off the scale between measurements. The three measurements should be within 1 pound. If they are not, take additional measurements until three are within 1 pound. For example, if the first three readings are 135.2 lbs, 136.3 lbs, and 135.1 lbs, those are not within 1 lb and another measure would have to be done. If the next reading is 135.7 lbs,
then that would be the last one needed (135.1, 135.2, and 135.7 are within 1 lb of each other).

NOTE: Any digital bathroom scale will work, if you follow the protocol and calibrate it carefully. We particularly recommend the following models since they perform well and are reasonably priced. These models can be ordered on-line.

- Taylor Lithium Electronic Glass Scale – 7506
- Tanita HS-302
- Weight Watchers WW43/WW43D Memory Glass Electronic Scale
- Weight Watchers WW-11D Portable Precision Electronic Scale
The StrongWomen – Healthy Hearts Program

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DATA COLLECTION FORM  
StrongWomen – Healthy Hearts

Date: ____ / ____ / ____  Participant ID Number : ____________________
_____________________________________________________________________________________________

Height Measurement
Round each measurement up to the nearest half centimeter (0.5 cm) or quarter inch (¼ inch). Take three (3) measurements within one half centimeter (0.5 cm) or quarter inch (¼ inch) of each other (round up).

(Note: Skip this section on the second testing day)

<table>
<thead>
<tr>
<th>USE THIS IF MEASURING IN CM</th>
<th>USE THIS IF MEASURING IN INCHES</th>
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<td>Height 1 _____ . ___ cm</td>
<td>Height 1 _____ ___ /4</td>
</tr>
<tr>
<td>Height 2 _____ . ___ cm</td>
<td>Height 2 _____ ___ /4</td>
</tr>
<tr>
<td>Height 3 _____ . ___ cm</td>
<td>Height 3 _____ ___ /4</td>
</tr>
<tr>
<td>Height 4 _____ . ___ cm</td>
<td>Height 4 _____ ___ /4</td>
</tr>
<tr>
<td>Height 5 _____ . ___ cm</td>
<td>Height 5 _____ ___ /4</td>
</tr>
<tr>
<td>Height 6 . cm</td>
<td>Height 6 /4</td>
</tr>
</tbody>
</table>

Weight Measurement
Record each measurement as it is displayed. Take three (3) measurements within one half kilogram (0.5 kg) or one pound (1 lb) of each other. CIRCLE whether the weight is in kg or lbs:

KILOGRAMS / POUNDS

| Weight 1 _____ . ___          |
| Weight 2 _____ . ___          |
| Weight 3 _____ . ___          |
| Weight 4 _____ . ___          |
| Weight 5 _____ . ___          |
| Weight 6 .                   |
DATA COLLECTION FORM – PAGE 2 – EXAMPLES
StrongWomen – Healthy Hearts

Date: 07/22/10  Participant ID Number: __1001______________

Height Measurement - Example
Round each measurement up to the nearest half centimeter (0.5 cm) or quarter inch (¼ inch).
Take three (3) measurements within one half centimeter (0.5 cm) or quarter inch (¼ inch) of each other (round up).

(NOTE: Skip this section on the second testing day)

USE THIS IF MEASURING IN CM

| Height 1 | 153.0 cm |
| Height 2 | 152.5 cm |
| Height 3 | 153.5 cm |
| Height 4 | __________ cm |
| Height 5 | __________ cm |
| Height 6 | __________ cm |

USE THIS IF MEASURING IN INCHES

| Height 1 | 64.1/4 |
| Height 2 | 64.3/4 |
| Height 3 | 64.1/4 |
| Height 4 | __________ 2/4 |
| Height 5 | __________ /4 |
| Height 6 | __________ /4 |

Weight Measurement - Example
Record each measurement as it is displayed.
Take three (3) measurements within one half kilogram (0.5 kg) or one pound (1 lb) of each other. 
CIRCLE whether the weight is in kg or lbs:

KILOGRAMS / POUNDS

| Weight 1 | 67.4 |
| Weight 2 | 67.8 |
| Weight 3 | 67.5 |
| Weight 4 | __________ |
| Weight 5 | __________ |
| Weight 6 | __________ |
**Program Tools**

The next set of tools are designed to help you effectively administer the StrongWomen – Healthy Hearts Program. We strongly encourage you to keep track of each participant in your program. The **Participant Contact Sheet** will allow you to easily contact participants when needed.

As the Program Leader, it is necessary to keep a record of participant attendance at each session using the **Participant Attendance Sheet**. This will help you monitor the success of your program.

At the completion of a 12-week session of a StrongWomen – Healthy Hearts Program, participants should fill out the **Participant Evaluation Form**.

All of the program tools follow this page.
### The StrongWomen – Healthy Hearts Program

<table>
<thead>
<tr>
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<td>Phone</td>
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<td>Name</td>
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<td>Program Leader Name:</td>
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<tr>
<td>Site:</td>
<td></td>
</tr>
<tr>
<td>Participant Attendance Sheet</td>
<td></td>
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</tbody>
</table>
Participant Evaluation

Participant name: ________________________
Program leader: ______________________ Site name: ____________________
Dates of participation: ____________________________
How did you hear about the class? ________________________________
What prompted you to enroll in the class? ________________________________

For the following questions, please answer by circling the most appropriate response on the right. The number 1 corresponds to “not at all,” number 3 to “somewhat,” and number 5 to “very much.” Numbers 2 and 4 are in between.

<table>
<thead>
<tr>
<th>Question</th>
<th>Not at all</th>
<th>Somewhat</th>
<th>Very much</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall, were you satisfied with the class?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Was your instructor(s) helpful?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Was the facility safe, clean, and comfortable?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Do you feel that your health is better because of the program?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Do you feel physically stronger?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Do you have more energy?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Do you sleep better?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Are you eating more healthfully?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Have you become more active?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

Please comment on the exercise part of the classes. What did you like the best and what did you like least?

____________________________________________________________________
____________________________________________________________________
Participant Evaluation (page 2)

Name: ____________________

Please comment on the nutrition part of the classes. What did you like the best and what did you like least?

____________________________________________________________________

____________________________________________________________________

What was the best aspect of your entire experience during your participation in the program?

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

What was the worst aspect of your entire experience during your participation in the program?

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

If you could change any aspect of the program, what would you change?

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

Additional comments are welcome:

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________
Chapter 6: The StrongWomen – Healthy Hearts Program class-by-class guide
Program Overview

Exercise Progression

All classes include a warm up, cool down, and 5 minutes of stretching.

Week 1

Class 1 15 minutes of walking or dancing, low-to-moderate intensity
Exercise topics: pedometers, exercise logs

Class 2 15 minutes of walking or dancing, low-to-moderate intensity
Exercise topics: intensity level of activities, decreasing a sedentary lifestyle

Week 2

Class 1 20 minutes of walking or dancing, low-to-moderate intensity
Exercise topic: choosing an activity outside of class

Class 2 20 minutes of walking or dancing, low-to-moderate intensity
Exercise topic: normal and abnormal discomfort during exercise

Week 3

Class 1 25 minutes of walking or dancing, low-to-moderate intensity

Class 2 25 minutes of walking or dancing, low-to-moderate intensity

Week 4

Class 1 25 minutes of walking or dancing, moderate intensity

Class 2 25 minutes of walking or dancing, moderate intensity

Week 5

Class 1 25 minutes of walking or dancing, moderate intensity

Class 2 25 minutes of walking or dancing, moderate intensity

All remaining classes will involve 25 minutes of walking or dancing at moderate-to-vigorous intensity (including warm up and cool down) and 5 minutes of stretching.
Nutrition Topics

Week 1

Class 1  Women and heart disease (*Leader-directed discussion*)

Class 2  Weight control for heart health, part 1 (*Leader-directed discussion, goal-setting exercise*)

Week 2

Class 1  Weight control for heart health, part 2 (*Leader-directed discussion, interactive quiz*)

Class 2  Heap on the vegetables and fruits, part 1 (*Leader-directed discussion, demonstration*)

Week 3

Class 1  Heap on the vegetables and fruits, part 2 (*Cooking*)

Class 2  Emphasize the right fats, part 1 (*Leader-directed discussion*)

Week 4

Class 1  Emphasize the right fats, part 2 (*Demonstration*)

Class 2  Accentuate whole grains, part 1 (*Leader-directed discussion*)

Week 5

Class 1  Accentuate whole grains, part 2 (*Tasting, cooking*)

Class 2  Revere low- and nonfat dairy, part 1 (*Leader-directed discussion*)

Week 6

Class 1  Revere low- and nonfat dairy, part 2 (*Cooking*)

Class 2  Target heart-healthy proteins, part 1 (*Leader-directed discussion*)

Week 7

Class 1  Target heart-healthy proteins, part 2 (*Cooking*)

Class 2  Putting it all together, part 1: grocery shopping, breakfast (*Leader-directed discussion*)
Nutrition Topics, continued

Week 8

Class 1  Putting it all together, part 2: lunch; salt (*Group discussion, tasting, leader-directed discussion*)

Class 2  Putting it all together, part 3: snacks; nuts; treats (*Group discussion, tasting, leader-directed discussion*)

Week 9

Class 1  Putting it all together, part 4: dinner; healthy cooking; alcohol (*Group discussion, leader-directed discussion*)

Class 2  Putting it all together, part 5: menu planning (*Leader-directed discussion, written activity*)

Week 10

Class 1  Putting it all together, part 6: menu planning, eating by HEART and weight loss (*Leader-directed discussion, written activity*)

Class 2  Weight control for a lifetime, part 1 (*Group discussion, leader-directed discussion*)

Week 11

Class 1  Weight control for a lifetime, part 2 (*Leader-directed discussion, role-playing*)

Class 2  Weight control for a lifetime, part 3 (*Leader-directed discussion, role-playing, group discussion*)

Week 12

Class 1  Stress reduction (*Leader-directed discussion, meditation exercise*)

Class 2  Final Assessments

Heart Healthy Potluck and Awards Ceremony
WEEK ONE
CLASS 1: WOMEN AND HEART DISEASE

EXERCISE COMPONENT
For this class we recommend doing the exercise component first. The exercise will not be very strenuous, and women will probably arrive at class ready to go.

BACKGROUND
Physical activity is “any bodily movement produced by skeletal muscles that results in an expenditure of energy.” Regular physical activity can help with weight management, lower heart rate and blood pressure, reduce the risk of cardiovascular disease, and increase the chances of survival if a woman does have a coronary event. The health benefits that come with participating in regular physical activity not only help women live longer, but also enable them to live more independently.

The warm up and cool down are very important aspects of any exercise program. The warm up prepares the body and mind for exercise. It activates the joints and muscles to become limber by increasing blood flow to the muscles and elevating the body’s temperature. It also helps to bring mental focus and concentration to the task of exercising. A proper warm up can be done in three to five minutes and is essential for minimizing exercise-related injuries.
A proper cool down is just as critical. It allows the body to return slowly to its resting state. Heart rate will decrease gradually, easing stress on the system. Blood in the legs will slowly be shifted back to the rest of the body.

When walking outdoors, keep these safety tips in mind:

- The route should be as far from traffic as possible. Make sure there are adequate cross walks, crossing signals, etc.
- The women will probably be chatting with each other during the walk. Remind them to be alert and pay attention when crossing roads.
- Choose a route where the sidewalks are well maintained, and that is free from anything that might cause a participant to trip and fall.
- If you are walking at sunset or when it is dark outside, instruct the women to wear brightly colored clothing and some item (sneakers, backpack, wind jacket) that has reflective material on it. Walk in a well-lit and well-traveled area.

ACTIVITIES:

1. Using a pedometer (5 minutes)
2. Exercise logs (5 minutes)
3. Walking (15 minutes)
4. Stretching (5 minutes)
EQUIPMENT & MATERIALS

- Pedometers (optional)
- Posters or handouts with stretching exercise illustrations

HANDOUTS:

- Using Pedometers to Keep You Motivated!
- Exercise Logs

PREPARATION:

1. Become familiar with the handouts.
2. If you are providing participants with pedometers, become familiar with the model so that you can instruct participants on how to use it.
3. Map out a walking route: 3 minutes of slow walking for the warm up, 10 minutes at a slow-to-moderate pace, and 3 minutes of slow walking for the cool down.
4. Become familiar with the stretching exercises.
THE CLASS:

1. If you have pedometers available, hand them out and instruct participants on how to use them. If pedometers are not available, provide participants with information on recommended models, prices, and resources for free ones (see the StrongWomen – Healthy Hearts website at blackboard.tufts.edu, for more information).

2. Go over the handout: Using Pedometers to Keep You Motivated!

3. Go over the exercise logs. Encourage participants to fill them out during the course of the program. Be sure to tell participants that they will work up to the goal of 30 minutes of exercise at a time over the next few weeks. They should not try to meet this goal until they are ready.

4. Gather them outside and have them warm up by walking slowly for about 3 minutes, and then pick up the pace.

5. Walk for 10 minutes at a slow-to-moderate pace. Make sure they stay in a group so that no one gets lost or left behind.

6. Cool down by walking slowly for about 3 minutes.

7. Lead them through the stretching exercises.
NOTES:

- This first class should involve gentle exercise. Participants are just getting used to doing something. It will be picking up in intensity quite a bit in the weeks to come!

- Before the first class, remind women to wear loose, comfortable clothing and well-fitting shoes, preferably sneakers.

- If the weather is bad, you can start to teach the dance piece instead. See Week 3, Class 1. Only do it for 15 minutes though (including the warm up and cool down).

- The handouts in the StrongWomen – Healthy Hearts Tool Kit are all in color. They are designed so that they will still look fine if you just photocopy them in black and white. If you want to print them in color, they are available in PDF format on the StrongWomen – Healthy Hearts website (go to blackboard.tufts.edu and log in).
The StrongWomen – Healthy Hearts Program

Using Pedometers to Keep You Motivated!

What is a pedometer?

• A pedometer is a small device that counts how many steps you take.

• A pedometer is worn on your body, often at your hip.

• Most pedometers are inexpensive and easy to use.

• You can read a pedometer at any time to tell how many steps you’ve taken throughout the day.

How can it help keep you motivated?

• A pedometer can help you set goals and track your progress. Once you have a number, you have a goal - to increase it!

• Your pedometer serves as a cue – a reminder to be active.

• A pedometer can help move you forward. Once you’ve achieved one goal, you can create higher goals for the next day or week.

Does it really work? Studies show that…

• People who wear pedometers take about 2000 more steps – about 1 mile of walking – per day.

• The less activity someone gets, the more effective pedometers are at motivating her.
<table>
<thead>
<tr>
<th>DAY</th>
<th>ACTIVITY</th>
<th>DURATION (min.)</th>
<th>INTENSITY</th>
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<tbody>
<tr>
<td>MON</td>
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<td>low</td>
<td>med high</td>
</tr>
<tr>
<td>TUES</td>
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<tr>
<td>SUN</td>
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<td>low</td>
<td>med high</td>
</tr>
</tbody>
</table>

Don't forget to stretch for 5 minutes following your exercise session!
BACKGROUND
It’s staggering when you stop to think about it. Almost from the time of conception until you draw your last breath, the heart beats continuously – dozens of times every single minute. The mechanism that keeps the heart pumping blood through the 100,000 miles of blood vessels in each of us is intricate, elegant, and astounding almost beyond words.

And yet things can go wrong. Many women assume they’re at low risk of a heart attack, stroke, or other coronary “event”. But almost 40 percent of women, as well as men, in the United States are at moderate risk, meaning they have an elevated chance of experiencing a heart attack or other cardiovascular-related calamity that could prove deadly. The better informed women are, the more committed they’ll be to making the changes necessary to lower their risk. Being aware of their risk levels will also help women to work with their doctors by allowing them to keep track of whether they are following the right plan for protecting their hearts.

Equally important is the ability to recognize the signs and symptoms of a heart attack, which are often more subtle in women. The sooner help is sought, the greater the opportunity to avoid disability and death.
ACTIVITIES:

1. Learning about the heart and heart disease (20 minutes)
2. Learning about the risk factors for heart disease (5 minutes)
3. Learning about the signs and symptoms of a heart attack in women (5 minutes)

HANDOUTS:

- Your Heart: In Sickness and in Health
- The Heart Truth wallet card (order or print from:
  http://www.nhlbi.nih.gov/educational/hearttruth/materials/index.htm)
- Warning Signs of a Heart Attack

PREPARATION:

1. Become familiar with the handouts. Make enough copies for everyone in the class.
2. Read over the plan for the class and become familiar with the talking points.
THE CLASS:

1. Give participants “Your Heart: In Sickness and in Health” handout.

   Talking points:

   a. The heart pumps the equivalent of **4,300 gallons of blood each day** to every organ and tissue in the body.

   b. If a woman lives to 85 years, her heart will have beaten an estimated **2.68 billion** times.

   c. The heart is made of muscle that squeezes in upon itself (contracts) with every beat. It has 4 chambers: the right atrium, right ventricle, left atrium, and left ventricle. The left ventricle pumps the blood away from the heart to the rest of the body.

   d. The blood goes to the arteries and ends up in the tiny capillaries. Here the blood can drop off nutrients and oxygen to the organs and tissues throughout the body. It also picks up carbon dioxide and other waste products.

   e. From the capillaries, blood flows to the veins – the vessels that carry blood back to the heart.

   f. Once the blood returns to the heart, it enters through the right atrium. From there it’s pumped to the right ventricle. At that
point, blood leaves the heart once again, this time for a short trip to the lungs.

g. In the lungs, blood drops off carbon dioxide and becomes replenished with oxygen from breathing. Then it flows into the heart’s left atrium and from there to the left ventricle, where the whole process begins anew.

h. The pressure that occurs at the peak of each heartbeat, when blood is pushed out to the entire body, is called **systolic pressure**. This is the first – and higher – number in a blood pressure reading.

i. Once the heart has pumped the blood and is in between beats, blood pressure is at its lowest. This is the **diastolic pressure**, the second number in a blood pressure reading.

j. What is a heart attack?

- The heart pumps blood to all the organs and tissues of the body. It also pumps blood to the arteries that bring oxygen and nutrients to the heart itself. These arteries are on the outer surface of the heart. They are called the **coronary arteries**.

- If any of the coronary arteries become narrowed or partly blocked, the blood can’t flow normally. Not enough oxygen
and nutrients will reach the heart muscle, and it can’t function normally.

- This happens when cholesterol-rich plaque builds up in them, and it’s called **coronary artery disease**. A more general term for blocked arteries is **atherosclerosis**.

- If the plaque buildup sufficiently narrows a coronary artery, most or all of the blood flow will be cut off, the heart muscle won’t get enough oxygen and will start to die. Then a heart attack, or **myocardial infarction**, can occur.

- Blood flow can also be blocked as an indirect result of inflammation. When an atherosclerotic artery becomes inflamed, plaque becomes unstable and can rupture, precipitating the formation of a blood clot – and a subsequent heart attack.

k. **What is a stroke?**

- The same principle that applies to arteries nourishing the heart also applies to narrowing of the **carotid** (kah-ROT-id) **arteries**, the main arteries in the neck that supply blood to the brain. The result is a “brain attack”, more commonly known as a stroke.
1. Heart disease is devastating – it is the number-one killer of both women and men, and claims half a million women’s lives per year. It is also a major economic burden.

2. Give participants the Heart Truth wallet card. Talking points:

   a. Although heart disease is the number-one killer of women, many don’t know that they’re at risk.

   b. The risk factors that are especially applicable to women are cigarette smoking, high blood pressure, low HDL (“good”) cholesterol, family history of premature heart disease (under age 65 in a female first-degree relative or under age 55 in a male first-degree relative), and age. Physical inactivity is an important risk factor as well.

   c. If you don’t know your numbers, you can call your doctor’s office to get them. If you haven’t had a physical exam within the last 2 years, it’s time to make an appointment!

3. Give participants “Warning Signs of a Heart Attack” handout. Talking points:

   a. With men, often the first sign of heart disease is a heart attack itself. Women may have more warning, but the signs are very subtle. They may feel shortness of breath or fatigue when
engaging in activities that used to be easy, or may have a feeling of mild indigestion.

b. Women may not experience any chest discomfort during a heart attack. They may experience vague symptoms, such as fatigue and sleeplessness, up to a month before a heart attack.

c. Women tend to wait longer than men to go to the hospital when they are having a heart attack. They are inclined to ignore or downplay red flags because they don’t expect to get heart disease. However, they have a much better chance of surviving a heart attack with little permanent damage if they get to the hospital as quickly as possible. Every minute counts. If you or someone you know is experiencing symptoms, don’t wait!

4. Send participants off on a positive note: they have the power to dramatically lower their risk, by living more healthfully and by becoming more aware of the possible signs of heart trouble. It’s never too late to make a difference. They are doing a lot already by coming to the class and making a commitment to change!

NOTES:

- Check out resources in your community. Does your local hospital or health department have a model of a human heart or other visuals you could use?
The StrongWomen – Healthy Hearts Program

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Your Heart: In Sickness and in Health

The Heart

- RIGHT ATRIUM
- RIGHT VENTRICLE
- LEFT ATRIUM
- LEFT VENTRICLE

The Cardiovascular System

- LIGHT VESSELS ARE ARTERIES
- DARK VESSELS ARE VEINS

HEART DISEASE FACTS:

- Number-one cause of death for both women and men
- 500,000 women die each year
- Overall cost is projected to be more than $503 billion in 2010

The Progression of Atherosclerosis

The left vessel is relatively free of plaque. The right vessel has advanced plaque and is much more likely to result in blocked blood flow.
The main warning signs for women and men are:

1. **Chest discomfort.** Most heart attacks involve discomfort in the center of the chest that lasts for more than a few minutes. It may feel like pressure, squeezing, fullness, or pain. The discomfort may be mild or severe, and it may come and go.

2. **Discomfort in other areas of the upper body,** including one or both arms, the back, neck, jaw or stomach.

3. **Shortness of breath.** This may occur along with, or before, chest discomfort.

4. **Other signs** include nausea, light-headedness, or breaking out in a cold sweat.

As with men, women's most common heart attack symptom is chest pain or discomfort. But women are somewhat more likely than men to experience some of the other common symptoms, particularly shortness of breath, nausea/vomiting, and back or jaw pain.
WEEK ONE
CLASS 2: WEIGHT CONTROL FOR HEART HEALTH, PART 1

EXERCISE COMPONENT
For this class we recommend doing the exercise component first. Like the last class, the exercise will not be very strenuous, and women will probably arrive at class ready to go.

BACKGROUND
It is important to teach participants to “listen to their body” in order to exercise at an intensity that is appropriate for them. There are two simple methods you can use to help participants determine the intensity level of their activities: the “talk test” and the rate of perceived exertion (RPE) scale.

Talk Test
The “talk test” is a simple way to gauge the intensity of a given activity. It estimates a person’s intensity level by determining how well she is able to talk while engaged in an activity. If she can sing while performing an activity, it would be considered leisurely or low-intensity. If she can carry on a conversation reasonably well (but not sing), it would be considered moderate. If a participant is too winded to have a conversation during activity, then it is vigorous.
Rate of Perceived Exertion (RPE)

The RPE scale is another way to gauge the intensity of physical activity. It is based on one’s perception of effort and is generally an accurate measure of intensity level. To use the scale, ask your participants to rate how they feel while performing an activity on a scale of 1 to 10. (“1” is equivalent to lying on the couch and “10” is equivalent to working as hard as they possibly can – an absolute all-out effort). On the RPE scale, 3-4 is low intensity (leisurely), 5-6 is moderate intensity, and 7-8 is high intensity (vigorous).

<table>
<thead>
<tr>
<th>The RPE Scale</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>No exertion</td>
</tr>
<tr>
<td>2</td>
<td>Very light</td>
</tr>
<tr>
<td>Low</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Light</td>
</tr>
<tr>
<td>4</td>
<td>Fairly light</td>
</tr>
<tr>
<td>Moderate</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Somewhat hard</td>
</tr>
<tr>
<td>6</td>
<td>Hard</td>
</tr>
<tr>
<td>High</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Hard (heavy)</td>
</tr>
<tr>
<td>8</td>
<td>Very hard</td>
</tr>
<tr>
<td>9</td>
<td>Extremely hard</td>
</tr>
<tr>
<td>10</td>
<td>Maximal exertion</td>
</tr>
</tbody>
</table>

In this class, you will ask women to commit to doing an aerobic activity outside of class, building up to at least 30 minutes at a time. This is so that they can meet the minimal StrongWomen – Healthy Hearts Exercise Program goal of at least 30 minutes of physical activity at a time, three days a week. (As they progress, you will encourage even more physical activity).
ACTIVITIES:

1. Learning about intensity level of activities (5 minutes)
2. Walking (15 minutes)
3. Stretching (5 minutes)
4. Learning about decreasing a sedentary lifestyle (5 minutes)

HANDOUTS:

- Intensity Level of Activities
- Lifestyle Changes to Increase Physical Activity

PREPARATION:

1. Become familiar with the Talk Test and Rate of Perceived Exertion scale.
2. Become familiar with the handouts. Make enough copies for everyone in the class.
THE CLASS:

1. Teach the participants about the Talk Test and the RPE scale. Encourage them to think about how they rate on both scales as they do their walk today. Give them the “Intensity Level of Activities” handout.

2. Gather participants together outside and have them warm up by walking slowly for about 3 minutes, and then pick up the pace.

3. Walk for 10 minutes at a slow-to-moderate pace. Sometime in the middle of the walk, ask participants to rate themselves on the RPE scale. They should rate themselves at about 4-5.

4. Cool down by walking slowly for about 3 minutes. Ask them to consider where on the RPE scale their effort would be towards the end of the cool down.

5. Lead them through the stretching exercises.

6. Once you are back inside, give each participant the “Lifestyle Changes to Increase Physical Activity” handout. Review it with them. If there’s time, have them brainstorm other ways they can add physical activity into their day, and encourage them to jot down ideas the may work for them.
NOTES:

- If there are many good places to walk in your area, consider mapping out a different route than the one you did last time. For more information about how to find trails in your community, go to the StrongWomen – Healthy Hearts website (go to blackboard.tufts.edu and log in).

- Many states have walking challenge programs that can be used as a fun tie-in to the StrongWomen – Healthy Hearts classes. Go to the StrongWomen – Healthy Hearts website to see if one is available in your state.
Intensity Level of Activities

Low-Intensity Activities:

- Walking slowly
- Golf, powered cart
- Swimming, slow treading
- Gardening or pruning
- Bicycling, very light effort
- Dusting or vacuuming
- Conditioning exercise, light stretching or warm up

Moderate-Intensity Activities:

- Walking briskly
- Golf, pulling or carrying clubs
- Swimming, recreational
- Mowing lawn, power motor
- Tennis, doubles
- Bicycling 5 to 9 mph, level terrain, or with a few hills
- Scrubbing floors or washing windows
- Weight lifting, Nautilus-type machines or free weights

High-Intensity Activities:

- Racewalking, jogging, or running
- Swimming laps
- Mowing lawn, hand mower
- Tennis, singles
- Bicycling more than 10 mph, or on steep uphill terrain
- Moving or pushing furniture
- Circuit training
The StrongWomen – Healthy Hearts Program

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Lifestyle Changes to Increase Physical Activity

*Every time* you move around rather than sit, you challenge your heart to beat a little faster, training it to be stronger, healthier, and more fit.

- **Take the stairs instead of the elevator or escalator**
- **Park wherever you first see a space at the parking lot, rather than driving around to find the closest one**
- **Walk rather than drive to destinations you can reach on foot within 10-15 minutes**
- **Get up and turn the television off manually rather than using the remote**

Think of other small things you can do in your own life to move your body more and share them with the group.

It may not seem like it adds up to much, but it does! For example, you can easily burn an extra 100 calories a day with small bursts of physical activity – enough to lose 10 excess pounds in a year without eating less.
NUTRITION COMPONENT

BACKGROUND
Two-thirds of all women in the United States are either overweight or obese, and that raises the risk for heart disease sevenfold. Weight management is critical. But as with other lifestyle changes, there’s no one right way to do it. The best approach that a woman can take is to make the effort her own.

This week, you’ll provide an overview of two key strategies that are effective in helping people change their behaviors and control their weight. You’ll introduce these tools and help women to start thinking about them. They will be emphasized and reinforced throughout the Program.

One of the most important tools in behavior change is goal setting. Many of your participants will have high expectations, and will want to completely overhaul their lifestyles and lose a lot of weight quickly. You will play an important role in helping them set reasonable goals. It is important, though, that you let them identify the areas they feel most comfortable and confident in tackling first. This gives them ownership of the goals, and they will be more likely to do what it takes to meet them. Your role will be to help them refine their goals and make them S.M.A.R.T. You can also help your participants separate larger goals into smaller components that they can chip
away at. With attainable goals in place, they will then experience success, which will help spur them on to further change.

Self-monitoring is another important tool. It is also important for your participants to monitor how much exercise they are getting and what they are eating. This helps them see the progress they are making. It also helps them to learn what is working and what isn’t, so they can develop strategies to address situations that are especially challenging. Last week, they learned about how to monitor their exercise using pedometers and activity logs. This week, they’ll learn about monitoring what they eat.

Finally, you’ll discuss an important dietary topic: added sugars. Because the evidence for their role in obesity and cardiovascular disease is mounting, the American Heart Association now recommends that no more than half of discretionary calories come from added sugars.

_____________________________________________________________

ACTIVITIES:

1. Learning about S.M.A.R.T. goals (5 minutes)
2. Setting S.M.A.R.T. weight-loss goals (10 minutes)
3. Learning about keeping food logs (10 minutes)
4. Learning about added sugars (5 minutes)

_____________________________________________________________
HANDBOUTS:

- Heart S.M.A.R.T. Goals for Weight Loss
- Heart S.M.A.R.T. Worksheet
- Using Food Logs to Keep You On Track
- Food Logs
- Added Sugars and Your Heart

PREPARATION:

1. Become familiar with the handouts. Make enough copies for everyone in the class.
2. Make enough of the Food Logs so that each participant has several copies.

THE CLASS:

1. Give participants the “Heart S.M.A.R.T. Goals for Weight Loss” handout. Talking points:

   a. Setting goals is one of the most effective tools you can use to help change your diet and exercise habits. When you set goals, you become committed to making the necessary changes.

   b. Although it’s important to set goals for weight loss, a goal like losing 10 pounds in the next month is not a S.M.A.R.T. goal. It may be measurable, relevant, and time-based, but it is not specific enough. It doesn’t tell you exactly what you are going
to do to meet the goal and can set you up for failure. It is outcome-based rather than performance-based. Instead, set goals based on the specific behaviors that will lead to weight loss.

2. Give participants the “Heart S.M.A.R.T. Worksheet”. Assist them with setting goals.

3. Give participants the “Using Food Logs To Keep You On Track” handout. Talking points:

   a. The research bears this strategy out, too. In one study, researchers asked half the participants to write down everything they ate. That’s it – they were not told what to eat, or how much, or when. Those who kept the food diaries lost more weight. In another study, investigators found that the best predictor for shedding pounds was not exercise intensity or anything that typically goes with dieting. It was whether or not people kept a food log.

   b. (Go over reasons why it works on the handout).

   c. (Hand out food logs and briefly discuss how to fill them out).

   d. You can also track your diet on-line using the USDA MyPyramid Diet Tracker (www.mypyramid.gov).
4. Give participants the “Added Sugars and Your Heart” handout.

Talking points:

a. Some sugars are found naturally in fruits, vegetables, dairy products, and many grains. These types of sugars are a normal part of a well-balanced diet and are generally not a problem.

b. Added sugars are different. They include sugars and syrups that are added during food processing or at the table.

c. Americans on average consume around 22 teaspoons of added sugar every single day. That’s about 355 calories. To give you an idea of what that means, if you ate an extra 355 calories each day over what your body needs, you would gain about one pound of fat every 10 days.

d. Excess consumption of added sugars has been associated with weight gain, increased triglycerides, and increased blood pressure.

NOTES:

- We recommend other useful way to track diet on the StrongWomen – Healthy Hearts website (blackboard.tufts.edu, and sign in). If you know of any other good tools, please use the website to contribute to a forum on this topic!
Heart S.M.A.R.T. Goals for Weight Loss

When taking on a challenge, like making changes in your eating habits, it is important to set goals. Realistic, defined goals help to keep you focused on and motivated for the challenge that lies ahead. You can set both short and long-term goals related to diet and exercise. You know best what makes the most sense for you to tackle first – just make sure your goals are S.M.A.R.T.:

S – specific
M – measurable
A – attainable
R – relevant
T – time-based

For example, a specific goal might be to get 5 extra minutes of physical activity each day for the next two weeks. The goal is measurable: either you’ve done it (and for that amount of time) or not. It is attainable, since you can achieve it by just making a couple of small changes in your day. If you are committed to making lifestyle changes to lower your risk of developing heart disease, then it is certainly relevant. And it is time-based (on a schedule), since you plan on doing it for the next two weeks.

If your goals are S.M.A.R.T., you will always know if you’re on target!
Heart S.M.A.R.T. Worksheet

Examples:

❤️ I will eat 1 more serving of fruit each day for the next 4 weeks.

❤️ I will eat 2 fewer desserts each week for next 4 weeks.

Write down examples of heart S.M.A.R.T. goals that you think you would like to work on:

1. __________________________________________
   __________________________________________

2. __________________________________________
   __________________________________________

3. __________________________________________
   __________________________________________
Using Food Logs
To Keep You On Track

Food logs are a powerful tool to help you lose weight and keep it off. Why does it work so well?

❤️ You may pick up on eating patterns that you never realized you had, and can begin to work through solutions for breaking the habits that get in the way of losing weight and keeping it off.

❤️ It makes it harder to rationalize going overboard.

❤️ You can’t convince yourself that you “really didn’t eat that much” – it’s all right there in front of you.

❤️ It keeps the weight-loss effort front and center at all times. You can’t just eat and forget about it. You have to be aware of your food choices.

❤️ It increases commitment and motivation. Seeing that you’ve made good choices can increase your resolve – you’re less inclined to mess up the hard work you’ve already done.
<table>
<thead>
<tr>
<th>Name</th>
<th>Meal</th>
<th>Mon</th>
<th>Tue</th>
<th>Wed</th>
<th>Thu</th>
<th>Fri</th>
<th>Sat</th>
<th>Sun</th>
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<tbody>
<tr>
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<td>Amount</td>
<td></td>
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<tr>
<td>Dinner</td>
<td>Amount</td>
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<td>Items</td>
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</tr>
</tbody>
</table>

Comments
Ex. I felt stressed, busy, tired...

The StrongWomen – Healthy Hearts Program
Excess intake of added sugars has been associated with weight gain, increased triglycerides, and increased blood pressure. The American Heart Association recommends that an average woman consume no more than 6 teaspoons of added sugars per day, or 100 calories-worth. Just one can of regular soda has 8 teaspoons, about 130 calories.

What can you do to decrease your intake?

❤ One of the biggest changes you can make is to limit your consumption of soft drinks (soda, pop) and other sugar-sweetened beverages. These are now the leading source of added sugars in Americans’ diets.

❤ When you look at the ingredients list on a food label, in addition to white sugar, look for: corn syrup or sweetener, high fructose corn syrup, honey, brown sugar, molasses, glucose, maltose, sucrose, and invert sugar. These are all forms of added sugar. Limit your portion when these are a main ingredient (within the first few items on the ingredient list).

❤ Snack smart. Snack on whole foods such as fruits rather than sweets. You’ll learn more about heart smart snacking in the weeks to come!

❤ Use your food logs to help keep track of added sugars. How many soft drinks, pieces of cake, pieces of pie, candies, cookies, and pieces of sugary gum are you having each day? It can help to write it all down, then see where you can start to take some baby steps toward change.
WEEK TWO
CLASS 1: WEIGHT CONTROL FOR HEART HEALTH, PART 2

EXERCISE COMPONENT
For this class we recommend doing the exercise component first. Similar to last week, the exercise will not be very strenuous, and women will probably arrive at class ready to go.

BACKGROUND
The Strong Women – Healthy Hearts exercise program consists of two different possibilities:

Minimal Exercise Program
Aerobics: 30 minutes at a time, three days a week, or 15 minutes at a time, six days a week

Flexibility (Stretching): 5 minutes following every exercise session

Optimal Exercise Program
Aerobics: 30 minutes or more at a time, five to six days a week

Strength training: 30 minutes at a time, two to three days a week

Flexibility (Stretching): 5 minutes following every exercise session
Your mission is to help participants go from being completely sedentary to being comfortable with the minimal exercise program. Their progression should be slow but deliberate. Today, participants will begin to increase the *duration* of their physical activity by walking 5 additional minutes.

**ACTIVITIES:**

1. Walking (20 minutes)
2. Stretching (5 minutes)
3. Choosing an activity for outside of class (5 minutes)

**HANDOUTS:**

- Options for Activities Outside of Class

**PREPARATION:**

1. Map out a new route that will take about 15 minutes to cover at a slow-to-moderate pace, and includes the warm up and cool down, or find an add-on to the route you have been using.
2. Become familiar with the handout. Make enough copies for everyone in the class.
THE CLASS:

1. Gather participants together outside and have them warm up by walking slowly for about 3 minutes. Then pick up the pace.

2. Walk for 15 minutes at a slow-to-moderate pace.

3. Cool down by walking slowly for about 3 minutes.

4. Lead them through the stretching exercises.

5. Once you are back inside, give each participant the “Options for Activities Outside of Class” handout. Review it with them. Ask them to decide which they are going to commit to by the next class.
NOTES:

• One thing that will keep participants excited and engaged is the social connections that they can build during the walks. Encourage them by making small talk and trying to include everyone. This socialization also helps them gauge their level of exertion – they will naturally be taking the Talk Test!

• While you are on the walk, consider asking participants if they have tried anything since the last class to get more physical activity in during the day. For example, did they try parking further from the store? If they tried something, how did it go? Did they intend to try something and then didn’t? Help them brainstorm ways to overcome barriers or figure out what they could do instead.
Options for Activities Outside of Class

You get the most benefit from exercise if you do it at least 3 times a week. Instead of thinking about it as yet another thing to do, make it fun!

❤️ Go for a walk with a friend; use the time to catch up with each other.

❤️ Many communities have some type of “drop-in” dancing. Go swing dancing on Friday night!

❤️ Put on your favorite music and dance around your house.

❤️ Visit that lovely local park.

❤️ Yard work counts! Make your yard a neighborhood showpiece.

❤️ Always wanted to learn how to golf or swim? Sign up for a lesson!

❤️ Enjoy the seasons with your children or grandchildren:
  - Take them swimming.
  - Have a leaf-raking contest.
  - Help them build a snowman. Start a snowball fight!
  - Go for a bike ride together and enjoy the warm spring air.
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BACKGROUND
Portion size is another key aspect to weight control. Portion sizes have increased dramatically in the last 30 years, very likely contributing to the current obesity epidemic.

Most people are not accustomed to thinking carefully enough about portions. What you intend to be just a dash of half-and-half in coffee easily becomes 3 tablespoons at 20 calories each; a dribble of syrup on pancakes becomes 4 tablespoons, which can be more than 200 calories’ worth. What seems like 3 ounces of chicken could easily be 6. Volume, and calories, pile on fast! This week, you’ll teach participants about proper portion sizes.

A related issue that you’ll address this week is hunger, which women may experience as they cut down on portion sizes. Although many diet books promise easy weight loss without hunger, the truth of the matter is that participants probably will experience some hunger or feelings of deprivation, at least at first. The only way to make real headway in a weight-loss effort is to eat fewer calories. The first few days might be particularly difficult, but eventually the body gets accustomed to smaller servings and fewer calories. Help participants anticipate a little discomfort
initially. It can be turned from a negative into a positive: a sign that they are progressing toward their goals. And it won’t last forever.

ACTIVITIES:

1. Taking the Portion Distortion Interactive Quiz (15 minutes)
2. Learning about serving sizes (5 minutes)
3. Learning about measuring portions (5 minutes)
4. Learning about the hunger checklist (5 minutes)

HANDOUTS:

- Portion Distortion II Interactive Quiz (available on the StrongWomen – Healthy Hearts website)
- How Much Is A Serving?
- Portion Primer
- The Hunger Checklist

PREPARATION:

1. Prepare the Portion Distortion II Interactive Quiz. If you have a laptop and projector, you can download the PowerPoint presentation to use during the class. If you don’t, print out several copies, enough so that 3-4 women can look on with each other. The PowerPoint and PDF versions are both available on the StrongWomen –
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Healthy Hearts website (go to blackboard.tufts.edu and log in).

2. Make enough copies of the other handouts for everyone in class.

3. Become familiar with the Portion Distortion II Interactive Quiz and with the handouts.

THE CLASS:

1. Go through the Portion Distortion II Interactive Quiz. Have women guess the calories as you go through, and the amount of exercise needed to burn the extra calories. Ask them if they’ve noticed these differences in portion sizes over the years. Talking points:

   a. It takes a LOT of exercise to compensate for the extra calories!
      It’s much easier to keep portion sizes under control and get a moderate amount of exercise.

   b. Keeping a food log is one way to help to keep portion sizes under control.

2. Give participants the “How Much Is A Serving” handout. Go over it with them. Talking points:

   a. You may be wondering by now, how much is an appropriate serving? This handout will help give you an idea. It shows serving sizes in terms of common objects, to give you a better feel.
3. Give participants the “Portion Primer” handout. Talking points:
   a. The last handout gave you a sense of how much there is in a serving of different foods. Check food labels, too. For example, a serving of breakfast cereal may be anywhere from ¾ to 1½ cups.
   b. It can be very useful to weigh and measure your foods for a while. You are likely to be surprised! It’s very easy to end up with much bigger servings than you had anticipated.
   c. While it’s good to get a feel for proper serving sizes, it’s also important not to become obsessive about it. Once you’ve developed an eye for size, you won’t need to keep measuring. By doing this for a little while now, you will train your eyes to quickly recognize portions that are too large – especially when you’re being served food at restaurants and social gatherings. This will help you immediately adjust how much your portion will be.
   d. We’ll be talking about servings sizes even more in the next few weeks, as we talk about following a heart healthy eating pattern.

4. Give participants “The Hunger Checklist” handout. Talking points:
   a. You may be thinking, “If I start to cut down my portions sizes, I’m going to be hungry!” The truth is, you may well experience
a little bit of hunger for a short time as you move toward a new way of eating. Keep in mind that it won’t last forever.

b. Sometimes you may feel hungry, when it’s actually something else. It’s important to really listen to your body’s cues to see what is going on. (Go over handout).
### How Much Is A Serving?

Serving sizes for typical foods are depicted below. You’ll be learning more about serving sizes over the next few weeks!

<table>
<thead>
<tr>
<th>Serving Size</th>
<th>Visual Representation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 cup of broccoli = a fist</td>
<td>![Fist Image]</td>
</tr>
<tr>
<td>1 medium fruit = a baseball</td>
<td>![Baseball Image]</td>
</tr>
<tr>
<td>1 teaspoon of oil = a poker chip</td>
<td>![Poker Chip Image]</td>
</tr>
<tr>
<td>1/2 cup of cooked rice or pasta</td>
<td>![Baseball Image]</td>
</tr>
<tr>
<td>= 1/2 baseball</td>
<td></td>
</tr>
<tr>
<td>1 cup of cereal = a fist</td>
<td>![Fist Image]</td>
</tr>
<tr>
<td>1 1/2 ounces of low-fat or fat-free cheese</td>
<td>![Dice Image]</td>
</tr>
<tr>
<td>= 4 stacked dice</td>
<td></td>
</tr>
<tr>
<td>2 tablespoons of peanut butter</td>
<td>![Ping-pong Ball Image]</td>
</tr>
<tr>
<td>= a ping-pong ball</td>
<td></td>
</tr>
<tr>
<td>3 oz of meat = a deck of playing cards</td>
<td>![Playing Cards Image]</td>
</tr>
<tr>
<td>1/2 cup of ice cream</td>
<td>![Baseball Image]</td>
</tr>
<tr>
<td>= 1/2 baseball</td>
<td></td>
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</tbody>
</table>
**Portion Primer**

- Measure and weigh your food for a couple weeks to familiarize yourself with proper serving sizes.

- Use a set of measuring cups and measuring spoons.

- Buy a kitchen scale if you don't already have one. It doesn't have to be fancy. A cheap one will only cost about $10, but it will get the job done.

- Measure what you normally eat. Once you develop an eye for size, volume, and weight, you won't have to keep measuring. You'll know automatically.

- Every six months or so, do a reality check with your measuring utensils. You'll be amazed at how easy it is to drift upward again when you think portion sizes are staying the same.
The Hunger Checklist

Hunger is not only normal – it’s desirable. Unfortunately though, it is an imperfect mechanism. It’s not immediately relieved by eating, and sometimes it’s confused with other feelings. Use this hunger checklist to decode the urge to eat:

❤️ **When did I last eat?** If your last meal was less than three hours ago, you probably don’t need to eat again.

❤️ **Have I had enough to drink?** Sometimes what feels like hunger is really thirst. If you feel hungry less than three hours after a meal, try drinking a glass of water.

❤️ **Am I tired?** If you’re fatigued, you may be looking for a quick pick-me-up. Try a nap instead of a snack – you’ll be surprised at how refreshing a brief rest can be. If fatigue is a frequent problem, adjust your schedule so you get enough sleep.

❤️ **Am I under stress?** When you’re anxious or upset, eating can be a form of comfort and self-sedation. Instead, try a walk or some other exercise to cope. And make an effort to identify the underlying source of your stress.

As you lose weight, you’ll learn to identify real hunger and distinguish it from these imposters. Gradually your desire for food will become more attuned to your body’s true needs.
The Strong Women – Healthy Hearts Program

**WEEK TWO**  
**CLASS 2: HEAP ON THE VEGETABLES AND FRUITS, PART 1**

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**EXERCISE COMPONENT**

Once again, we recommend doing the exercise component first.

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**BACKGROUND**

There’s no denying it: there’s a certain amount of physical discomfort that goes along with physical activity. The trick is to minimize *psychological* distress by encouraging participants to think about the normal discomfort they may experience as a positive thing rather than a negative one. For example, if someone feels sore a day or two after exercise, they may tell themselves: “Exercise is painful, even after you’re done with the workout. The misery just goes on.” They may even think that they’ve injured themselves by exercising. They won’t want to come back for more!

As a leader, you can help to reassure participants that what they are experiencing is normal. You can even use it to help motivate them! Tell them that if they do experience “unpleasant” things like sweating or a little bit of soreness, it is a sign that they are on track and progressing nicely.
toward their ultimate goal of better fitness and reducing their risk of developing heart disease.

What is normal during and after exercise?

• Sweating
• Increased breathing rate
• Soreness (should not last longer than a day or two)

What is NOT normal?

• Sharp pain
• Severe shortness of breath, difficulty breathing
• Exhaustion
• Nausea
• Feeling light-headed or dizzy

ACTIVITIES:

1. Discussion: What’s normal during exercise? (5 minutes)
2. Walking (20 minutes)
3. Stretching (5 minutes)

PREPARATION:

1. If there are many great places to walk where you are, you could map out a new route. Using the one from the last class is fine as well.
THE CLASS:

1. Spend a few minutes talking with participants about what is normal discomfort during exercise and what is not.

2. Gather participants together outside and have them warm up by walking slowly for about 3 minutes. Then pick up the pace.

3. Walk for 15 minutes at a slow-to-moderate pace.

4. Cool down by walking slowly for about 3 minutes.

5. Lead them through the stretching exercises.
NUTRITION COMPONENT

BACKGROUND

In the next few classes, you’ll be teaching participants about the components of the HEART acronym for heart healthy eating:

**H**eap on the vegetables and fruits.
**E**mphasize the right fats.
**A**ccentuate the whole grains.
**R**evere low- and nonfat dairy foods.
**T**arget heart-healthy proteins.

An important thing to keep in mind as you teach the classes about eating by HEART is the idea of *replacement*. In other words, the emphasis shouldn’t be on just *adding* foods; it should be on *replacing* heart-UN-healthy choices with heart-healthy ones.

Today’s focus is “Heap on the vegetables and fruits.” Studies have consistently shown that diets rich in them are associated with decreased risk for developing heart disease and stroke, and other chronic diseases.

Most of the women in your class probably already know about the importance of eating vegetables and fruit. The problem comes in actually
making the changes to incorporate more of them into their diets. The next two classes are designed to give tips and strategies to do just that. Today you’ll build on the last class and teach participants more about serving sizes of vegetables and fruits.

ACTIVITIES:

1. Introduction to eating by HEART (5 minutes)
2. Guess the serving size (10 minutes)
3. Learning how to get more vegetables and fruit throughout the day (5 minutes)
4. Setting a vegetable and fruit S.M.A.R.T. goal
5. Overcoming barriers (5 minutes)

EQUIPMENT & MATERIALS:

- Dry and liquid measuring cups
- Microwave oven or hot plate
- Plates, cups and bowls (disposable is fine)

HANDOUTS:

- Eating by HEART
- Serving Sizes of Vegetables and Fruits
- Heap On the Vegetables and Fruits
PREPARATION:

1. Become familiar with the handouts. Make enough copies for everyone in class.
2. Read over the plan for the class and become familiar with the talking points.
3. Purchase the groceries on the Week 2 Class 2 grocery list.
4. For the “guess the serving size” activity:
   - Tear lettuce and measure out ½ cup, 1 cup, and 2 cups of lettuce. It should be loosely packed. Place each in a bowl.
   - Cook the frozen broccoli using a microwave oven or hot plate. Measure out ½ cup, ¾ cup, and 1 cup of it. Place each on a plate.
   - Measure ¼ cup, ½ cup, and 1 cup of canned fruit. Put each in a bowl.
   - Measure ¼ cup of raisins and 2 cups of grapes. Put them each on a plate.
   - Measure ¾ cup of the orange juice and pour it into a cup. You’ll compare it to the orange.
THE CLASS:

1. Give participants the “Eating by HEART” handout and go over it with them. This week’s class will focus on the “H”. Talking points:

   a. By eating 7 to 9 servings of vegetables and fruit, you will get closer to getting enough fiber every day.

   b. Produce, if prepared properly, is low in calories compared to many other foods. Since it can replace other higher-calorie options, if you eat more of it, you have a better chance at successful weight management.

   c. Vegetables and fruit are rich in many nutrients, including ones that may help protect your heart.

   d. Produce is high in potassium and generally very low in sodium, both of which are associated with decreased blood pressure.

2. Do the “guess the serving size” activity. Starting with the lettuce, show the participants the three serving sizes, without revealing how much is in each one. For the lettuce, broccoli, and fruit cocktail, ask them to guess which one is one serving. Then give them the right answer. (After last week, they should get the broccoli right!) For the orange juice/oranges and raisins/grapes, you will explain that they are equivalent in terms of calories. Talking points:
a. While dried fruit can be part of a healthy diet and has many nutritional benefits, keep in mind that it is also high in calories and could hurt your weight control efforts. This is one serving, which is 1/4 cup. One serving gives you about 130 calories. On the other hand, you could eat 2 cups of grapes for the same number of calories.

b. The same principle is true with 100% fruit juice. It can be part of a healthy diet and has nutritional benefits, although not as many as whole fruits. Studies have shown that liquids just don’t make people feel full the same way that solids do. A medium orange has slightly fewer calories than the orange juice and will fill you up more.

3. Give them the “Serving Sizes of Vegetables and Fruits” handout. Go over it briefly, discussing anything that came up during the guessing activity.

4. Give them the “Heap On the Vegetables and Fruits” handout and go over it. Ask them to talk about other ways they could get more vegetables and fruits each day. Have them set one S.M.A.R.T. goal related to vegetables and/or fruits and write it down on the handout.

5. Ask them to talk about some of the things that get in the way of eating more vegetables and fruits. Have the group brainstorm ideas for overcoming those barriers.
6. Point out that frozen vegetables and fruits are a good option – they are convenient and usually quite affordable.

7. Canned vegetables provide an alternative when fresh or frozen are not available. They are often less expensive. But they may not have the same texture or color as frozen or fresh vegetables, and they may have a high sodium content.

8. Ask participants to keep track of how many servings of fruits and vegetables they get each day until the class meets again.

______________________________

NOTES:

- Refrigerate the orange juice. You can use it for the next class.

______________________________
### Grocery List for Week 2 Class 2

- 1 head of lettuce
- 1 bag of frozen chopped broccoli (at least 10 oz)
- 1 30 oz can of fruit cocktail
- 1 carton of 100% orange juice
- 1 medium orange
- 1 box of raisins
- At least 2 cups of grapes
Eating by HEART

H eap on the vegetables and fruits.
E mphasize the right fats.
A ccentuate whole grains.
R evere low- and nonfat dairy foods.
T arget heart-healthy proteins.
The StrongWomen – Healthy Hearts Program

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Serving Sizes of Vegetables and Fruits

**GOAL:** 7 to 9 servings daily

**VEGETABLE SERVING SIZES:**

1. 1 cup raw leafy vegetables, such as lettuce or spinach
2. 1 cup other raw vegetables, cut up
3. ½ cup cooked vegetables
4. ¾ cup vegetable juice

**FRUIT SERVING SIZES:**

1. 1 medium fruit, such as an apple, pear, or orange
2. 1 cup raw fruit (sliced or chopped)
3. 1 cup berries, grapes, or other small fruit
4. ½ cup cooked, frozen, or canned (in its own juice) fruit
5. ¼ cup dried fruit
6. ¾ cup 100% fruit juice
Heap On the Vegetables and Fruits

Incorporating more produce into your diet is not hard at all, especially when you consider that frozen is just as nutritious as fresh and is easy to keep in the house. If you buy it in bags rather than boxes, you can always take from the freezer as much or as little as you like.

❤️ Heat some frozen spinach, broccoli, or Brussels sprouts in the microwave or on the stove to have with dinner. Top a whole-wheat English muffin with melted cheese and chopped spinach or broccoli for lunch.

❤️ Make a chicken salad that’s half chopped celery and shredded carrots and half chicken.

❤️ Into either your own homemade tomato sauce or into prepared sauce, toss finely chopped or grated vegetables. This is great for family members who aren’t big on vegetables because it doesn’t affect the taste.

❤️ Consider adding vegetables where you have not used them before. For example, when preparing lasagna, mix thawed chopped spinach with the ricotta cheese. Or slice an eggplant into ¼-inch-thick slices, dribble on vegetable oil, bake at 400ºF until soft, and use as its own lasagna layer.

❤️ Keep frozen berries on hand to top low-fat varieties of yogurt or ice cream. Just thaw them in the microwave before using.

❤️ Toss a handful of mandarin oranges onto a spinach salad With some slivered almonds and vinaigrette.
♥ Make a one-minute fruit smoothie in the blender for a snack: blend a cup of plain nonfat yogurt, a half cup of frozen berries or other frozen fruit, and a splash of juice; blend for 30 seconds.

♥ Always keep a bowl of fruit within easy reach, or at the front of the refrigerator shelf. If you do this, fruit will become your default snack. For fruit that ripens quickly, such as peaches or nectarines, put out only a few at a time.

♥ Add fruit to your bowl of cereal at breakfast: raisins, dried cranberries, sliced banana, berries, or any fresh or dried fruit that you like.

Think about a way you could take a small step toward getting more vegetables and fruit. Set a S.M.A.R.T. goal:

_________________________________________

_________________________________________

_________________________________________
**WEEK THREE**

**CLASS 1: HEAP ON THE VEGETABLES AND FRUITS, PART 2**

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**EXERCISE COMPONENT**

Once again, we recommend doing the exercise component first. The exercise will not be very strenuous, and participants will be sampling foods during the nutrition component. They may not want to exercise after eating.

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**BACKGROUND**

This week, you will be leading 30 full minutes of exercise. Although the duration is increasing once again, the intensity should remain low-to-moderate. If the weather is nice, you can go for a walk. If it’s not, or you feel like the group is ready for something new, you can introduce cardiovascular dancing. This is a program of low-impact moves designed to increase participants’ heart rates. It is very simple, easy to follow, and fun.

The StrongWomen – Healthy Hearts routine is demonstrated on the DVD in this Tool Kit. You can also view the video on the StrongWomen – Healthy Hearts website at blackboard.tufts.edu. If you have a television and DVD player or a computer with an LCD projector available, you can use the DVD during class. If you don’t, use the DVD to learn the moves so that you can teach them. There are instructor notes for the routine at the end of this.
section. We highly recommend that you use the music that is provided in
the Tool Kit for the cardiovascular dance routine. We have carefully
selected music that keeps a steady, moderately fast beat.

A FEW IMPORTANT NOTES ABOUT THE DANCE ROUTINE:

- The instructor on the DVD often takes a wide stance because it
gives women a good base of support for doing the movements.
However, participants with hip problems may find this stance
uncomfortable or painful. If they do, they should immediately
resume a normal stance and perform the exercises that way
throughout.

- One of the last songs is “The Twist”, and participants are
encouraged to dance the twist during some parts of this song. This
can be great fun for most participants, but those with either hip or
knee problems may find it uncomfortable or painful. If so, they
should either make a major modification to the twist or simply
march in place.

- Twisting is not advisable for any participant on a carpeted floor.

- All moves on the DVD can be modified or changed. Participants
should feel free to do this at any point in the routine. They should
be somewhat winded and their muscles may be slightly
uncomfortable, but they should NOT exercise through serious
discomfort or pain.
ACTIVITIES:

1. Walking or cardiovascular dance (25 minutes)
2. Stretching (5 minutes)

EQUIPMENT & MATERIALS:

- Television and DVD player, or CD player (if doing dance)

PREPARATION:

1. If you are walking, map out a route that will take about 20 minutes to cover at a slow-to-moderate pace, and includes the warm up and cool down, or find an add-on to the route you have been using.
2. If you are doing the cardiovascular dance, view the video and make sure you are familiar with the routine.
**THE CLASS:**

1. If you are walking, have participants warm up by walking slowly for about 3 minutes, and then pick up the pace. Walk for 20 minutes at a slow-to-moderate pace. Cool down by walking slowly for 3 minutes, and then do the stretching exercises.

2. If you are doing the cardiovascular dance, lead the women through the routine. In Week 4, you will begin to increase intensity by adding arm movements and lifting your legs higher. For now, don’t do these things and keep the intensity low-to-moderate.
The StrongWomen Cardiovascular Dance Routine
Instructor Notes

All songs begin in wide stance

Song #1 - Warm Up "Stand by Me"
Breathing
Spinal stretch
Shoulder rolls
Taps (first no arms and then both arms push out)

Song #2 (right lead) “The Lion Sleeps Tonight”
March wide
Slow march wide
March in/in/out/out slow & then to tempo

Song #3 “Sweet Caroline”
March in circle and then in on refrain
Heel digs after refrain

Song #4 (left lead) “Louie Louie”
March wide
Heel digs in
March wide then in/in out/out

Song #5 “Dance With Me”
March in circle then sway to "Dance With Me"

Song #6 (right lead) “Little Bit O’Soul”
March wide
Taps wide arms pull back
Step together then add arms pulling back

Song #7 “The Twist”
Twist in circle
Option to bring arms up
Song #8 (left lead) “Locomotion”
Wide march
Heel digs
Knees

Song #9 Cool Down “Respect”
Inhales
Toes taps
Shoulder rolls

Song #10 “Strong Woman”
Stretching
NUTRITION COMPONENT

BACKGROUND
In this class, you and the participants will be taking some of the tips from the last class for getting more vegetables and fruits in, and putting them into action. During the class, ask participants how they are doing with the goals they set last week, and encourage them to think about other ways they could increase their vegetable and fruit intake.

Cooking time is also a good opportunity for socialization. Encourage this, but at the same time make sure participants remain focused so that no one takes too long. Everyone will be happier if the class ends on time!

Before cooking, go over the “Kitchen Safety” handout and make sure everyone knows where the fire extinguisher and first aid kit are located.

If at all possible, get an assistant for this class, and have her set up the food stations while you are exercising. If you are not able to get an assistant, set everything up except items that require refrigeration or freezing, and take these out just as soon as the exercise ends. It should take only a few minutes to do this. Women can get some water or use the restroom during this time, or they can help you. Alternatively, you can reverse the order and do the nutrition component first, so that the class is all set up for cooking when
participants arrive. Do whatever will work best for you and your participants.

As you embark on cooking exercises over the next few weeks, we’re providing a reminder on food safety. Even though our food supply is safe, many disease causing bacteria or pathogens may contaminate food causing foodborne illness. These illnesses can be serious or even fatal. Older adults, those with diabetes, heart disease, cancer, HIV/AIDS, transplant recipients, young children and expectant mothers are more at risk. It is important for you to model safe food practices as you prepare food for the StrongWomen – Healthy Hearts program to reduce the risk of illness.

Foodborne bacteria and pathogens can get into food in a variety of ways. Some are present in the food when it is purchased; others are introduced by improper handling techniques. Here are some safe handling practices to keep in mind when purchasing, storing, preparing and serving food.

**At the Store:**

- Select cold foods last, the go to checkout
- If you are purchasing items that will be partially used and stored until a later class, be sure the use-by date will still be good until the food is used
- Fresh cut produce, like baby carrots, should be displayed in refrigerated cases; inspect fresh produce for decay or damage
Transporting foods:

- Keep in mind that you have a maximum of 2 hours (accumulated time) for perishable food to be out of refrigeration; go straight to your destination and put things away
- When the temperature is over 90°F your time limit is 1 hour out of refrigeration; if necessary, bring along a cooler with a cold source when you go shopping

Storing foods:

- To prevent cross contamination, store meats, poultry and seafood on the bottom shelf of the refrigerator to prevent juices from dripping onto other foods
- Use a refrigerator thermometer to check the temperature in your refrigerator or cooler, the refrigerator temperature should be below 40°F.

Sanitation:

- Wash your hands before and after handling food, scrubbing vigorously for 20 seconds
- Be sure your utensils, counter tops and cutting boards are clean; sanitize with a solution of 1 tablespoon bleach to 1 gallon of water
- Wash dishcloths in the hot cycle of the washing machine after each use
- Use paper towels to clean kitchen surfaces
- Do not use sponges (too many nooks and crannies)
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Preparation:

- Use gloves to handle food that will not be cooked
- Thaw frozen foods in the refrigerator or in the microwave (use immediately)
- Wash all fruits and vegetables in cool running water; scrub with a brush if the produce is firm
- Cook all foods to the recommended minimum internal temperatures; color or other visual signs are not reliable indicators to determine doneness

Serving:

- Keep hot food hot and cold food cold
- Discard any fresh produce that has been cut, peeled or cooked after two hours at room temperature

ACTIVITIES:

5. Making spaghetti sauce with grated carrots
6. Making English muffin sandwiches
7. Making a quick salad with feta cheese, dried cranberries, nuts, and vinaigrette
8. Making one-minute smoothies
9. Making Summer Cucumber Dip
EQUIPMENT & MATERIALS:

- Toaster oven
- Blender
- Stove or hot plate
- Microwave oven
- Colander
- Grater
- Sharp knife and surface for cutting
- 2 pots
- Measuring spoons
- Liquid and dry measuring cups
- Jar or other container with a tight lid
- Bowls and spoons
- Plates, cups, and forks (disposable is fine)

HANDOUTS:

- Kitchen Safety
- Heap On the Vegetables and Fruits Recipes

PREPARATION:

4. Become familiar with the recipes. Ideally, you will make all of the items at least once before the class.

5. Make enough copies of the handouts for everyone in class.
6. Purchase the groceries on the Week 3 Class 1 grocery list.

7. Cook the frozen spinach and broccoli in a microwave oven or on a hot plate according to package directions. This can be done ahead of time and vegetables can be kept in a refrigerator.

8. You will prepare spaghetti sauce with grated carrots while participants make the other recipes. You will need:
   - Stove or hot plate
   - Grater
   - 2 pots
   - Spaghetti, spaghetti sauce, baby carrots

9. Set up 4 “stations”:
   - English muffin sandwiches station:
     - Toaster oven
     - Whole wheat English muffins
     - Shredded low-fat cheese
     - Spaghetti sauce (take about ½ cup from jar)
     - Spoon for spreading sauce
     - Cooked vegetables
   - Salad station
     - Opened bag of salad
     - Put each of the following in a bowl with a spoon:
       - Feta cheese, crumbled
       - Dried cranberries
• Nuts
  ▪ Ingredients for Classic Vinaigrette Dressing:
    olive oil, balsamic vinegar, dried basil, 
    Dijon mustard, sugar, salt and pepper
  ▪ Liquid measuring cup
  ▪ Measuring spoons
  ▪ Jar or other container with a tight lid
  ▪ Plates and forks

• Smoothies station:
  ▪ Blender
  ▪ Plain nonfat yogurt
  ▪ Frozen berries
  ▪ Small, ripe banana
  ▪ Fruit juice
  ▪ Measuring cups: 1 cup and ½ cup
  ▪ Cups

• Veggie dip station:
  ▪ 1 cup of the plain nonfat yogurt (take it from the container and leave the container at the smoothies station)
  ▪ Rest of the ingredients for Summer Cucumber Dip: cucumber, salt, garlic, olive oil
  ▪ Baby carrots
  ▪ Grater
  ▪ Colander
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- Sharp knife
- Cutting board
- Measuring spoons
THE CLASS:

1. Give participants the “Heap On the Vegetables and Fruits Recipes” handout. Let them choose the station they want to go to. Redistribute the groups if there are too many people at one station.

2. Let them assemble the item at their station, using the handout for directions.

3. While they are cooking, cook the spaghetti according to package directions. While it is boiling, grate the baby carrots until you have about 1 cup of shredded carrots, or get a volunteer to do it. Put the sauce and carrots in another pot and heat it up. (If you are using a hot plate and have only one burner, the sauce with carrots can be heated in a microwave). Drain the spaghetti and put the sauce on it. Give participants a sample of the spaghetti.

4. If time permits, have them switch to another station so they can try a different recipe.

5. Allow a little bit of time for clean up. With everyone helping, it should take very little time.

6. Ask the class what they thought about the things they made.
NOTES:

- Ideally you will have made all of the items for today’s class at least once before the class begins, but we realize that leaders are very busy and may not have time to do this. The recipes in this program are designed to be simple, easy, and quick, with no surprises. So you should be okay if you don’t manage to make them ahead of time. Just be sure you’ve read the handout over a few times and feel familiar enough with it to help participants during the class.

- You’ll be purchasing a few “staples” this week, such as salt, pepper and sugar, that you will use throughout the program.

- Be sure to refrigerate the Classic Balsamic Vinaigrette. You’ll use it again in Week 6.

- In general, save all non-perishable foods. You’ll be using many of them in the weeks to come.
**Grocery List for Week 3 Class 1**

<table>
<thead>
<tr>
<th>Item</th>
</tr>
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<tbody>
<tr>
<td>1 package whole wheat English muffins</td>
</tr>
<tr>
<td>1 box of spaghetti noodles</td>
</tr>
<tr>
<td>1 40 oz jar spaghetti sauce</td>
</tr>
<tr>
<td>1 large bag of baby carrots</td>
</tr>
<tr>
<td>1 bag of pre-washed salad</td>
</tr>
<tr>
<td>1 cucumber</td>
</tr>
<tr>
<td>1 bulb of garlic</td>
</tr>
<tr>
<td>Feta cheese</td>
</tr>
<tr>
<td>32 oz plain nonfat yogurt</td>
</tr>
<tr>
<td>8 oz package shredded part skim mozzarella</td>
</tr>
<tr>
<td>1 small package dried cranberries</td>
</tr>
<tr>
<td>1 small package of chopped nuts such as walnuts, pecans or almonds</td>
</tr>
<tr>
<td>1 package frozen spinach</td>
</tr>
<tr>
<td>1 package frozen broccoli</td>
</tr>
<tr>
<td>1 large bag of frozen berries (no sugar added)</td>
</tr>
<tr>
<td>1 carton 100% fruit juice (if you don’t have OJ left from last class)</td>
</tr>
<tr>
<td>1 small bottle extra-virgin olive oil</td>
</tr>
<tr>
<td>1 small bottle balsamic vinegar</td>
</tr>
<tr>
<td>Dried basil</td>
</tr>
<tr>
<td>1 small jar Dijon mustard</td>
</tr>
<tr>
<td>Salt</td>
</tr>
<tr>
<td>Pepper</td>
</tr>
<tr>
<td>2 lb box of sugar</td>
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</table>
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Kitchen Safety

Most precautions you take in the kitchen are common sense, but it’s easy to forget to do them.

❤ When you are using a knife, don’t cut with the edge toward you or your fingers.

❤ When you are using a knife, if you drop it, stand back and let it fall - don’t try to catch it. This seems obvious, but you may instinctively try to catch it.

❤ Don’t lay knives down with the edge pointing up.

❤ When walking with a knife, keep it low and pointed toward the floor.

❤ Clean up broken glass very carefully. Throw out the sponge or towel you cleaned it up with – it probably contains broken glass.

❤ Don’t let the pan handles on the stove stick out over the floor.

❤ Be very careful of steam when uncovering a food, especially one cooked in the microwave.

❤ Never leave cooking unattended.

❤ Always know where the fire extinguisher is.

❤ Keep food safe to eat:
  o Wash hands before starting. Wash surfaces regularly.
  o Don’t cross-contaminate.
  o Cook foods to the proper temperature.
  o Refrigerate promptly.
Heap On the Vegetables and Fruits Recipes

**English Muffin Mini-Pizzas**
1. Put toaster oven on broil setting
2. Cut English muffins in half
3. Spread a little tomato sauce on one half
4. Sprinkle with some shredded mozzarella
5. Top with chopped broccoli and/or spinach
6. Put in toaster oven for 1-2 minutes, until the cheese melts and starts to brown
7. Eat and enjoy!

**Nutrition Information:**

<table>
<thead>
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<th>½ muffin pizza</th>
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<td>Carbohydrate</td>
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<td>Protein</td>
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*NOTE: Nutrient content will vary somewhat depending on preparation.*
Classic Vinaigrette Dressing
2/3 cup of olive oil
1/3 cup balsamic vinegar
1 teaspoon dried basil
1 tablespoon Dijon mustard
½ teaspoon sugar
½ teaspoon salt
Pepper to taste

Pour into a container with a tight lid, cover and shake vigorously.

To assemble a salad, top lettuce with a little bit of cheese, cranberries, and nuts. Drizzle with dressing. Eat and enjoy!

Nutrition Information:

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<td>Cholesterol</td>
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<tr>
<td>Fiber</td>
<td>0g</td>
</tr>
<tr>
<td>Sodium</td>
<td>94mg</td>
</tr>
</tbody>
</table>
Smoothies
1 cup plain nonfat yogurt
½ cup frozen berries (no sugar added)
1 small ripe banana
Splash of 100% fruit juice (any kind will work)

Blend for 30 seconds. Add a little more fruit juice if it is too thick.

Makes 2 smoothies.

Nutrition Information:

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<td>Cholesterol</td>
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</tr>
<tr>
<td>Fiber</td>
<td>3g</td>
</tr>
<tr>
<td>Sodium</td>
<td>132mg</td>
</tr>
</tbody>
</table>

*NOTE: This is for a smoothie made with orange juice and frozen strawberries.
**Summer Cucumber Dip**  
½ cucumber  
1 cup plain nonfat yogurt  
¼ teaspoon salt  
1 clove garlic, crushed  
1 ½ teaspoons olive oil

Peel, seed, and grate the cucumber. In a colander, press the liquid out of the cucumber. Mix the rest of the ingredients in a bowl, then stir in the cucumber.

Eat with baby carrots.

As you’ll learn later, the smoothie and dip recipes also help you eat by HEART by Revering low- and nonfat dairy.

**Nutrition Information:**

<table>
<thead>
<tr>
<th>Serving size</th>
<th>2 tablespoons</th>
</tr>
</thead>
<tbody>
<tr>
<td>Calories</td>
<td>15</td>
</tr>
<tr>
<td>Carbohydrate</td>
<td>1g</td>
</tr>
<tr>
<td>Protein</td>
<td>1g</td>
</tr>
<tr>
<td>Total fat</td>
<td>0.5g</td>
</tr>
<tr>
<td>Saturated fat</td>
<td>0g</td>
</tr>
<tr>
<td>Cholesterol</td>
<td>0mg</td>
</tr>
<tr>
<td>Fiber</td>
<td>0g</td>
</tr>
<tr>
<td>Sodium</td>
<td>55mg</td>
</tr>
</tbody>
</table>
**NUTRITION COMPONENT**
This time, we recommend doing the nutrition component first.

**BACKGROUND**
Following the HEART acronym…

- **H**eap on the vegetables and fruits.
- **E**mphasize the right fats.
- **A**ccentuate the whole grains.
- **R**evere low- and nonfat dairy foods.
- **T**arget heart-healthy proteins.

…the focus for the next two classes will be “Emphasize the right fats.”

Given the typical American diet, this is a very important topic. A low-fat diet is no longer considered the right way to go. The goal is to teach participants to reduce heart-unhealthy fats. These include the saturated fat in beef, skin of poultry, and other meat as well as full-fat dairy foods, and the *trans*-fatty acids in some commercially fried and baked foods.

You will also teach participants to improve their diets by choosing fats or oils most conducive to heart health. The goal is to have a moderate-fat diet,
one that has the right fats.

ACTIVITIES:

1. Learning about different types of fat (5 minutes)
2. Learning about the different heart-healthy oils (5 minutes)
3. Learning how to read a food label for fat content (10 minutes)
4. Finding the heart-healthy choice (5 minutes)
5. Learning about ways to increase heart-healthy fats in the diet and setting S.M.A.R.T. goals (5 minutes)

HANDOUTS:

- Emphasize the Right Fats
- A Closer Look at Vegetable Oils
- Finding Fat on the Food Label
- Find the Heart Healthy Choice (3 pages)
- Heart-Healthy Fats – Making Substitutions
- S.M.A.R.T. Goals for Fats
**PREPARATION:**

1. Become familiar with the handouts. Make enough copies for everyone in the class.
2. Read over the plan for the class and become familiar with the talking points.

---

**THE CLASS:**

1. Give participants the “Emphasize the Right Fats” handout and go over it. Talking points:

   a. A low-fat diet is no longer considered the way to go. It’s more important to have a moderate-fat diet, as long as you have the right fats.

   b. Nutrition researchers and public health experts no longer make a big distinction between oils high in monounsaturated fatty acids, such as olive and canola oil, and those high in polyunsaturated fatty acids, such as soybean, safflower, sunflower, and corn oil. It was thought that olive oil was particularly beneficial for reducing heart disease risk, but scientific evidence no longer supports that line of thinking. The best way to keep blood cholesterol down is to shoot for more unsaturated fat and less saturated and trans fats.

   c. We’ll learn more about fish later on in the program.
d. *Trans* fatty acids are found mainly in processed foods. They are produced by a commercial process called partial hydrogenation. This process converts oily fats into solid ones. It can also reduce spoilage. Food labeling laws changed a few years ago so that *trans* fats had to be listed on the label, and food companies have decreased the amount in many foods or have eliminated it completely.

e. We’ll be learning how to use less of the heart UN-healthy fats and more of the heart-healthy ones.

2. Give participants the “A Closer Look at Vegetable Oils” handout and go over it.

3. Give participants the “Finding Fat on the Food Label” handout. The label is for macaroni and cheese. Talking points:

a. The first part of the label tells you the serving size and how many servings per container. It’s a good idea to check this information on any packaged foods. One serving is often a lot smaller than the usual portion that most people eat. For example, if a container is small, you might eat the whole thing thinking it contains only one serving. But you would be getting *twice* the amount of calories and fat.

b. The Percent Daily Value is a tool that can help you choose foods that are better for your heart. This number tells you how
much of the day’s recommended intake that one serving of the food supplies. Look for lower numbers for things that you want to reduce in your diet, such as saturated fat and cholesterol. A good rule of thumb is to look for foods with 5% or less of these nutrients. There’s no Percent Daily Value for \textit{trans} fats – you should try to get as little of it as possible by looking for foods that have none.

4. Give participants the “Finding the Heart-Healthy Choice” handout. Ask participants to find the heart-healthiest spread (page 1), snack (page 2), and yogurt (page 3). Talking points:

a. Spread A is butter, Spread B is soft tub margarine, and Spread C is stick margarine. The soft tub margarine is the best choice since it has the fewest calories, the least saturated fat, and no \textit{trans} fat. Spread A doesn’t meet the 5\% rule of thumb for cholesterol. None of the spreads meet the 5\% rule of thumb for saturated fat, which is one reason to use any type of spread in moderation.

b. Snack C is the best choice. It is lowest in calories and saturated fat, and has no \textit{trans} fat. It meets the 5\% rule of thumb for saturated fat and cholesterol.

c. Yogurt A is the best choice. It has the fewest calories and no saturated or \textit{trans} fat. Yogurt C is also a reasonable choice. It
meets the 5% rule of thumb for saturated fat and has no \textit{trans} fat.

5. Give participants the “Heart-Healthy Fats – Making Substitutions” handout and go over it with them. Emphasize that they don’t just want to add heart-healthy fats to their diet; they want to \textit{replace} the heart-un-healthy ones with heart-healthy ones.

6. Give participants the “S.M.A.R.T. Goals for Fats” handout. Have participants come up with a couple S.M.A.R.T. goals for replacing unhealthy fats with healthy ones. Encourage them to think about the small changes that they feel most comfortable starting with.
Emphasize the Right Fats

Heart-healthy fats – unsaturated
Vegetable oils:
  - Canola
  - Safflower
  - Sunflower
  - Corn
  - Olive
  - Soybean

Heart-healthy fats – omega-3 fatty acids
Fish

Heart UN-healthy fats – saturated
Fatty cuts of meat
Full fat dairy foods

Heart UN-healthy fats – trans
Some commercially fried and baked foods (packaged foods)
Carefully check the Nutrition Facts Panel.
The StrongWomen – Healthy Hearts Program

BLANK PAGE
A Closer Look at Vegetable Oils

Which vegetable oil should you use for which purpose? You might want to have different types on hand for different uses. The table below will help you decide.

<table>
<thead>
<tr>
<th>TYPE</th>
<th>COST</th>
<th>FLAVOR</th>
<th>SMOKE POINT</th>
<th>BEST USES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canola</td>
<td>Inexpensive</td>
<td>Mild</td>
<td>457°F</td>
<td>Dressing salads, baking, cooking</td>
</tr>
<tr>
<td>Safflower</td>
<td>Expensive, may be hard to find</td>
<td>Very mild</td>
<td>509°F</td>
<td>Dressing salads, cooking</td>
</tr>
<tr>
<td>Sunflower</td>
<td>Expensive, may be hard to find</td>
<td>Mild</td>
<td>475°F</td>
<td>Dressing salads, cooking</td>
</tr>
<tr>
<td>Corn</td>
<td>Inexpensive</td>
<td>Mild</td>
<td>457°F</td>
<td>Dressing salads, baking, cooking</td>
</tr>
<tr>
<td>Olive</td>
<td>Expensive; sold in stores as &quot;Vegetable Oil&quot;</td>
<td>Strong (especially virgin)</td>
<td>374°F</td>
<td>Dressing salads, cooking, condiment</td>
</tr>
<tr>
<td>Soybean</td>
<td>Inexpensive</td>
<td>Very mild</td>
<td>466°F</td>
<td>Dressing salads, cooking</td>
</tr>
</tbody>
</table>
The StrongWomen – Healthy Hearts Program

BLANK PAGE
## Finding Fat on the Food Label

### Nutrition Facts

<table>
<thead>
<tr>
<th>Serving Size</th>
<th>Calories</th>
<th>Calories from Fat</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 cup (228g)</td>
<td>260</td>
<td>120</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>% Daily Value*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Fat</td>
</tr>
<tr>
<td>Saturated Fat</td>
</tr>
<tr>
<td>Trans Fat</td>
</tr>
<tr>
<td>Cholesterol</td>
</tr>
<tr>
<td>Sodium</td>
</tr>
<tr>
<td>Total Carbohydrate</td>
</tr>
<tr>
<td>Dietary Fiber</td>
</tr>
<tr>
<td>Sugars</td>
</tr>
<tr>
<td>Protein</td>
</tr>
</tbody>
</table>

- *Percent Daily Values are based on a 2,000 calorie diet. Your Daily Values may be higher or lower depending on your calorie needs:
  - Calories: 2,000 2,500
  - Total Fat: Less than 65g 80g
  - Sat Fat: Less than 20g 25g
  - Cholesterol: Less than 300mg 300mg
  - Sodium: Less than 2,400mg 2,400mg
  - Total Carbohydrate: 300g 375g
  - Dietary Fiber: 25g 30g

Calories per gram:
- Fat: 9
- Carbohydrate: 4
- Protein: 4

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Finding the Heart Healthy Choice

Which of the following spreads is heart-healthiest?

**A**

<table>
<thead>
<tr>
<th>Nutrition Facts</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Serving Size</strong> 1 Tbsp (14g)</td>
</tr>
<tr>
<td><strong>Servings Per Container</strong> 32</td>
</tr>
<tr>
<td><strong>Amount Per Serving</strong></td>
</tr>
<tr>
<td>Calories 100</td>
</tr>
<tr>
<td><strong>%Daily Value</strong>*</td>
</tr>
<tr>
<td>Total Fat 11g</td>
</tr>
<tr>
<td>Saturated Fat 7g</td>
</tr>
<tr>
<td>Trans Fat 0g</td>
</tr>
<tr>
<td>Cholesterol 30mg</td>
</tr>
<tr>
<td>Sodium 0mg</td>
</tr>
<tr>
<td>Total Carbohydrate 0g</td>
</tr>
<tr>
<td>Protein 0g</td>
</tr>
<tr>
<td>Vitamin A 8%</td>
</tr>
<tr>
<td>Calcium 0%</td>
</tr>
<tr>
<td>Vitamin C 0%</td>
</tr>
<tr>
<td>Iron 0%</td>
</tr>
</tbody>
</table>

**B**

<table>
<thead>
<tr>
<th>Nutrition Facts</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Serving Size</strong> 1 Tbsp (14g)</td>
</tr>
<tr>
<td><strong>Servings Per Container</strong> 30</td>
</tr>
<tr>
<td><strong>Amount Per Serving</strong></td>
</tr>
<tr>
<td>Calories 80</td>
</tr>
<tr>
<td><strong>%Daily Value</strong>*</td>
</tr>
<tr>
<td>Total Fat 8g</td>
</tr>
<tr>
<td>Saturated Fat 1.5g</td>
</tr>
<tr>
<td>Trans Fat 0g</td>
</tr>
<tr>
<td>Cholesterol 0mg</td>
</tr>
<tr>
<td>Sodium 95mg</td>
</tr>
<tr>
<td>Total Carbohydrate 0g</td>
</tr>
<tr>
<td>Protein 0g</td>
</tr>
<tr>
<td>Vitamin A 10%</td>
</tr>
<tr>
<td>Calcium 0%</td>
</tr>
<tr>
<td>Vitamin C 0%</td>
</tr>
<tr>
<td>Iron 0%</td>
</tr>
</tbody>
</table>

**C**

<table>
<thead>
<tr>
<th>Nutrition Facts</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Serving Size</strong> 1 Tbsp (14)</td>
</tr>
<tr>
<td><strong>Servings Per Container</strong> 32</td>
</tr>
<tr>
<td><strong>Amount Per Serving</strong></td>
</tr>
<tr>
<td>Calories 100</td>
</tr>
<tr>
<td><strong>%Daily Value</strong>*</td>
</tr>
<tr>
<td>Total Fat 11g</td>
</tr>
<tr>
<td>Saturated Fat 2g</td>
</tr>
<tr>
<td>Trans Fat 2.5g</td>
</tr>
<tr>
<td>Cholesterol 0mg</td>
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<tr>
<td>Sodium 105mg</td>
</tr>
<tr>
<td>Total Carbohydrate 0g</td>
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<tr>
<td>Protein 0g</td>
</tr>
<tr>
<td>Vitamin A 10%</td>
</tr>
<tr>
<td>Calcium 0%</td>
</tr>
<tr>
<td>Vitamin C 0%</td>
</tr>
<tr>
<td>Iron 0%</td>
</tr>
</tbody>
</table>
Which of the following snacks is heart-healthiest?

<table>
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<tr>
<th>Snack</th>
<th>Nutrition Facts</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Serving Size 27 Crackers (30g)</td>
</tr>
<tr>
<td></td>
<td>Servings Per Container About 9</td>
</tr>
<tr>
<td></td>
<td>Amount Per Serving</td>
</tr>
<tr>
<td></td>
<td>Calories 160</td>
</tr>
<tr>
<td></td>
<td>Calories from Fat 70</td>
</tr>
<tr>
<td></td>
<td>Total Fat 8g 12%</td>
</tr>
<tr>
<td></td>
<td>Saturated Fat 2g 10%</td>
</tr>
<tr>
<td></td>
<td>Trans Fat 0g 0%</td>
</tr>
<tr>
<td></td>
<td>Cholesterol 0mg 0%</td>
</tr>
<tr>
<td></td>
<td>Sodium 250mg 10%</td>
</tr>
<tr>
<td></td>
<td>Total Carbohydrate 18g 6%</td>
</tr>
<tr>
<td></td>
<td>Dietary Fiber 0.5g 2%</td>
</tr>
<tr>
<td></td>
<td>Sugars less than 1g</td>
</tr>
<tr>
<td></td>
<td>Protein 4g</td>
</tr>
<tr>
<td></td>
<td>Vitamin A 2%</td>
</tr>
<tr>
<td></td>
<td>Vitamin C 0%</td>
</tr>
<tr>
<td></td>
<td>Calcium 4%</td>
</tr>
<tr>
<td></td>
<td>Iron 4%</td>
</tr>
<tr>
<td>B</td>
<td>Serving Size 9 Crackers (30g)</td>
</tr>
<tr>
<td></td>
<td>Servings Per Container About 15</td>
</tr>
<tr>
<td></td>
<td>Amount Per Serving</td>
</tr>
<tr>
<td></td>
<td>Calories 150</td>
</tr>
<tr>
<td></td>
<td>Calories from Fat 70</td>
</tr>
<tr>
<td></td>
<td>Total Fat 8g 12%</td>
</tr>
<tr>
<td></td>
<td>Saturated Fat 2g 10%</td>
</tr>
<tr>
<td></td>
<td>Trans Fat 3g 0%</td>
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<tr>
<td></td>
<td>Cholesterol 0mg 0%</td>
</tr>
<tr>
<td></td>
<td>Sodium 230mg 10%</td>
</tr>
<tr>
<td></td>
<td>Total Carbohydrate 18g 6%</td>
</tr>
<tr>
<td></td>
<td>Dietary Fiber 0.5g 2%</td>
</tr>
<tr>
<td></td>
<td>Sugars 2g</td>
</tr>
<tr>
<td></td>
<td>Protein 2g</td>
</tr>
<tr>
<td></td>
<td>Vitamin A 0%</td>
</tr>
<tr>
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<td>Vitamin C 0%</td>
</tr>
<tr>
<td></td>
<td>Calcium 0%</td>
</tr>
<tr>
<td></td>
<td>Iron 6%</td>
</tr>
<tr>
<td>C</td>
<td>Serving Size 17 Crackers (30g)</td>
</tr>
<tr>
<td></td>
<td>Servings Per Container About 9</td>
</tr>
<tr>
<td></td>
<td>Amount Per Serving</td>
</tr>
<tr>
<td></td>
<td>Calories 130</td>
</tr>
<tr>
<td></td>
<td>Calories from Fat 40</td>
</tr>
<tr>
<td></td>
<td>Total Fat 4.5g 7%</td>
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<tr>
<td></td>
<td>Saturated Fat 0.5g 3%</td>
</tr>
<tr>
<td></td>
<td>Trans Fat 0g 0%</td>
</tr>
<tr>
<td></td>
<td>Cholesterol 0mg 0%</td>
</tr>
<tr>
<td></td>
<td>Sodium 230mg 10%</td>
</tr>
<tr>
<td></td>
<td>Total Carbohydrate 22g 7%</td>
</tr>
<tr>
<td></td>
<td>Dietary Fiber 2g 10%</td>
</tr>
<tr>
<td></td>
<td>Sugars 3g</td>
</tr>
<tr>
<td></td>
<td>Protein 2g</td>
</tr>
<tr>
<td></td>
<td>Vitamin A 0%</td>
</tr>
<tr>
<td></td>
<td>Vitamin C 0%</td>
</tr>
<tr>
<td></td>
<td>Calcium 4%</td>
</tr>
<tr>
<td></td>
<td>Iron 6%</td>
</tr>
</tbody>
</table>
Which of the following yogurts is heart-healthiest?

<table>
<thead>
<tr>
<th>A</th>
<th>B</th>
<th>C</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Nutrition Facts</strong></td>
<td><strong>Nutrition Facts</strong></td>
<td><strong>Nutrition Facts</strong></td>
</tr>
<tr>
<td>Serving Size 1 container (170g)</td>
<td>Serving Size 1 container (170g)</td>
<td>Serving Size 1 container (170g)</td>
</tr>
<tr>
<td>Servings Per Container 1</td>
<td>Servings Per Container 1</td>
<td>Servings Per Container 1</td>
</tr>
<tr>
<td><strong>Amount Per Serving</strong></td>
<td><strong>Amount Per Serving</strong></td>
<td><strong>Amount Per Serving</strong></td>
</tr>
<tr>
<td>Calories 120</td>
<td>Calories 170</td>
<td>Calories 170</td>
</tr>
<tr>
<td>Calories from Fat 0</td>
<td>Calories from Fat 0</td>
<td>Calories from Fat 0</td>
</tr>
<tr>
<td>%Daily Value*</td>
<td>%Daily Value*</td>
<td>%Daily Value*</td>
</tr>
<tr>
<td><strong>Total Fat</strong> 0g</td>
<td><strong>Total Fat</strong> 6g</td>
<td><strong>Total Fat</strong> 1.5g</td>
</tr>
<tr>
<td>Saturated Fat 0g</td>
<td>Saturated Fat 3.5g</td>
<td>Saturated Fat 1g</td>
</tr>
<tr>
<td>Trans Fat 0g</td>
<td>Trans Fat 0g</td>
<td>Trans Fat 0g</td>
</tr>
<tr>
<td><strong>Cholesterol</strong> 0mg</td>
<td><strong>Cholesterol</strong> 20 mg</td>
<td><strong>Cholesterol</strong> 10mg</td>
</tr>
<tr>
<td>Sodium 120mg</td>
<td>Sodium 85mg</td>
<td>Sodium 80mg</td>
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<tr>
<td><strong>Total Carbohydrate</strong> 25g</td>
<td><strong>Total Carbohydrate</strong> 24g</td>
<td><strong>Total Carbohydrate</strong> 33g</td>
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<tr>
<td>Dietary Fiber 2g</td>
<td>Dietary Fiber 2g</td>
<td>Dietary Fiber 0g</td>
</tr>
<tr>
<td>Sugars 23g</td>
<td>Sugars 22g</td>
<td>Sugars 27g</td>
</tr>
<tr>
<td><strong>Protein</strong> 6g</td>
<td><strong>Protein</strong> 5g</td>
<td><strong>Protein</strong> 5g</td>
</tr>
<tr>
<td>Vitamin A 0%</td>
<td>Vitamin A 4%</td>
<td>Vitamin A 15%</td>
</tr>
<tr>
<td>Calcium 30%</td>
<td>Calcium 20%</td>
<td>Calcium 20%</td>
</tr>
<tr>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Vitamin C 0%</td>
<td>Vitamin C 0%</td>
<td>Vitamin C 0%</td>
</tr>
<tr>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Iron 0%</td>
<td>Iron 0%</td>
<td>Iron 0%</td>
</tr>
</tbody>
</table>
Heart-Healthy Fats: Making Substitutions

♥ Use vegetable oil instead of butter when sautéing vegetables or browning lean meats.

♥ Use vegetable oil when baking. To do this, use about one-fourth less fat than the recipe calls for. For example, if a recipe calls for ¼ cup (4 tablespoons) of butter or stick margarine, use 3 tablespoons of vegetable oil instead. This works for quick breads, muffins, and cookies. Cakes and piecrusts will have a somewhat different texture.

♥ If a recipe calls for melted butter, replace it with an equal amount of vegetable oil.

♥ To reduce the amount of saturated fat, use low- or nonfat milk in place of whole milk and cream. Or, use low- or nonfat buttermilk, which will impart a creamy texture and buttery flavor while adding little or no saturated fat.
S.M.A.R.T. Goals for Fats

Think about a way you could take a small step or two toward replacing heart UN-healthy fats with heart healthy ones. What do you feel best about trying to do? What seems easiest to you to try? Set S.M.A.R.T. goals:

1. _____________________________________________________________________
   _____________________________________________________________________
   _____________________________________________________________________

2. _____________________________________________________________________
   _____________________________________________________________________
   _____________________________________________________________________
EXERCISE COMPONENT

BACKGROUND

Your compliments can go a long way toward keeping participants motivated to exercise. Be sure to compliment liberally but sincerely. A few hints to help you master the art of the compliment:

Be specific: “Susan, you have great form on the stretches” rather than “Good job!”

Don’t compare one participant with another or with the group: “Susan, did you realize that you have doubled the amount of time that you are able to exercise?” rather than “I’m voting you ‘most improved’!”

Don’t overdo it: “Susan, my God, you are just absolutely amazing, look how hard you are working. Wow. There are so many women who would just DIE to have your energy.” Instead, a simple “Susan, I’ve noticed how hard you are working. You are an inspiration” will do.

Above all, your compliments should be HEART felt! If you truly respect and admire your participants, let this shine through in the feedback you give them.
ACTIVITIES:

1. Walking or cardiovascular dance (25 minutes)
2. Stretching (5 minutes)

EQUIPMENT & MATERIALS:

- Television and DVD player, or CD player (if doing dance)

THE CLASS:

Consider doing the activity (walking or dancing) that you didn’t do last time.

1. If you are walking, have participants warm up by walking slowly for about 3 minutes, and then pick up the pace. Walk for 20 minutes at a slow-to-moderate pace. Cool down by walking slowly for about 3 minutes, and then do the stretching exercises.

2. If you are doing the cardiovascular dance, lead the women through the routine. Next week you will begin to increase intensity by adding arm movements and lifting your legs higher. For now, don’t do these things and keep the intensity low-to-moderate.
WEEK FOUR
CLASS 1: EMPHASIZE THE RIGHT FATS, PART 2

EXERCISE COMPONENT
We recommend doing the exercise component first, since participants will be eating in the nutrition component.

BACKGROUND
You will be picking up the pace in this class. The goal is to go from low-to-moderate intensity to moderate intensity. How can you tell? Recall that by the Talk Test, the intensity is moderate if someone can carry on a conversation reasonably well, but not sing. Participants should be moving into a 5 or 6 on the Rate of Perceived Exertion scale.

It is very important to get this feedback. If the intensity level is too low, participants won’t see progress and may miss out on many benefits of the exercise program. If it is too fast, they may injure themselves or quickly burn out. Either way, they might get discouraged and stop coming. As a leader, you can do a lot to prevent this by getting the feedback and making adjustments as necessary.
ACTIVITIES:

1. Walking or cardiovascular dance (25 minutes)
2. Stretching (5 minutes)

EQUIPMENT & MATERIALS:

- Television and DVD player, or CD player (if doing dance)

PREPARATION:

1. If you are walking, you will probably need to find a slightly longer course or add to your current course.
2. If you are doing the cardiovascular dance, practice doing the routine at a higher intensity.
3. Make sure you have refreshed your memory on the Walk Test and the Perceived Exertion Scale (Week 1 Class 2).
THE CLASS:
You can choose to do either the walking or dancing. As you are doing it, ask participants to take the Talk Test and to rate themselves on the RPE scale. If they are not giving responses that are in the moderate range, adjust the pace or the intensity of the routine accordingly.

1. If you are walking, do the usual warm up, walking, cool down, and stretching. Walk a little bit faster.

2. If you are doing the cardiovascular dance, lead the women through the routine at a somewhat higher intensity. Do this by lifting legs higher and adding arm movements.
The StrongWomen – Healthy Hearts Program

NUTRITION COMPONENT

BACKGROUND
In this class, you’ll be taking some of the tips from the last class for replacing heart-unhealthy fats with heart-healthy ones, and putting them into action. You’ll show participants how to make homestyle biscuits and buttermilk mashed potatoes. This will demonstrate that even classic comfort foods can be made heart-healthier. During the class, encourage participants to think about other ways they could cut down on the intake of saturated and trans fats and increase their intake of heart-healthy oils. Ask them which of the substitutions they’d be willing to try.

ACTIVITIES:
1. Demonstration: making homestyle biscuits and buttermilk mashed potatoes (30 minutes)

EQUIPMENT & MATERIALS:
- Regular oven and microwave oven
- Oven mitts
- Timer
- Sharp knife
- 3 mixing bowls (2 medium, 1 small)
• Large spoon for mixing
• Plate
• 2-inch biscuit or cookie cutter
• Baking sheet
• Liquid and dry measuring cups
• Measuring spoons
• Electric mixer or potato masher
• Small plates, forks & knives so participants can sample (disposable is fine), napkins

HANDOUTS:
• Emphasize the Right Fats Recipes

PREPARATION:
1. Become familiar with the recipes. Ideally, you will make all of the items at least once before the class.
2. Make enough copies of the handout for everyone in class.
3. Purchase the groceries on the Week 4 Class 1 grocery list.
4. Before class, scrub the potatoes and pat them dry. Have all the ingredients (except buttermilk) and equipment (except ovens) ready on the table where you’ll be cooking.
5. Preheat the oven to 450°F.
THE CLASS:

1. Take the buttermilk out of the refrigerator just before you get started and add it to the table with the other ingredients.

2. Give participants the “Emphasize the Right Fats Recipes” handout.

3. Start with the buttermilk mashed potatoes. Prick two potatoes, put them on the plate, and place in the microwave. Cook on 100% (high) power for 6 minutes.

4. Meanwhile, start making the biscuits. Combine the flours, baking powder, baking soda, salt, and sugar in a medium bowl.

5. In a small bowl, stir the buttermilk and oil together. Pour over the flour mixture and stir until well mixed. You will probably want to start with a spoon and then knead briefly with your hands.

6. Roll and pat the dough to about ¾ inch thickness. Cut with a 2-inch biscuit or cookie cutter, dipping it into flour between cuts. Place biscuits on an ungreased cookie sheet.

7. Place the cookie sheet in the oven.

8. The microwave should have stopped while you were mixing or kneading. Ask a volunteer to turn the potatoes over (using an oven mitt) and start them cooking for another 6 minutes.
9. Let the potatoes sit for a couple minutes and then peel them using a fork and sharp knife. Cut the potato roughly into quarters and place in a medium bowl.

10. Add butter and buttermilk. Mash with potato masher or mixer until smooth. Add pepper to taste and stir.

11. Serve participants the potatoes and ask for their comments. Mention that because buttermilk is used, a smaller amount of butter is needed in the recipe. The buttermilk helps impart the creamy, buttery flavor.

12. When the biscuits are ready, give each participant half or a whole biscuit, depending on how many participants and biscuits there are. If desired, serve with jam.
NOTES:

- Both recipes call for buttermilk. Most grocers carry it, but sometimes you have to specifically ask for it. If you are not able to find it, you can sour fat free or 1% milk and get a similar effect. Simply add 1 tablespoon of vinegar (any type will work) per cup of milk. You can also use powdered buttermilk, which can be found near the regular powdered milk in the supermarket. Reconstitute according to package directions. When you use powdered buttermilk for the potatoes, they have a slightly more buttery and less tangy flavor.

- You’ll be purchasing a few more staples this week.

- If you don’t have access to a full oven, you could bake the biscuits in a toaster oven instead. Only about 6 of them will fit at one time, however.
<table>
<thead>
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<th>Grocery List for Week 4 Class 1</th>
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<tbody>
<tr>
<td>2 large Russet potatoes</td>
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<tr>
<td>1 pint of buttermilk (1 or ½% fat)</td>
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<tr>
<td>5 lbs regular flour</td>
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<tr>
<td>5 lbs whole wheat flour</td>
</tr>
<tr>
<td>1 can of baking powder</td>
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<tr>
<td>1 box of baking soda</td>
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<tr>
<td>1 small bottle of canola oil</td>
</tr>
<tr>
<td>1 package butter</td>
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<tr>
<td>Jam (if desired, for spreading on biscuits)</td>
</tr>
<tr>
<td>Also, if none left from last week:</td>
</tr>
<tr>
<td>Sugar</td>
</tr>
<tr>
<td>Salt</td>
</tr>
<tr>
<td>Pepper</td>
</tr>
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</table>
Buttermilk Mashed Potatoes

2 large russet potatoes
2 tablespoons butter
2/3 cup buttermilk (1 or ½% fat)
Pepper

1. Scrub potatoes, pat dry, and prick with a fork.
2. Place potatoes on a plate and cook in microwave on 100 percent (high) power until tender, about 12 minutes, turning over halfway through. (Alternatively, cook the potatoes in a conventional oven at 350ºF for about 1 hour).
3. Let stand 5 minutes, then peel and quarter. Place in a medium bowl.
4. Add butter and buttermilk to bowl. Mash with a potato masher or mixer until smooth.
5. Add pepper to taste and stir.

NOTE: If you are cooking for only one or two people, this recipe is easy to halve. Cook one potato for about 6 minutes total, 3 minutes on each side, and use 1 tablespoon of butter and 1/3 cup of buttermilk.

Nutrition Information

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Homestyle Biscuits

This recipe is adapted from the *Keep the Beat* cookbook, which was produced by the National Heart, Lung, and Blood Institute.

1 cup white flour  
1 cup whole wheat flour  
2 teaspoons baking powder  
¼ teaspoon baking soda  
¼ teaspoon salt  
1 tablespoon sugar  
2/3 cup buttermilk (1 or ½ percent fat)  
3 tablespoons plus 1 teaspoon vegetable oil

1. Preheat oven to 450°F.  
2. In a medium bowl, combine flour, baking powder, baking soda, salt, and sugar.  
3. In small bowl, stir together buttermilk and oil. Pour over flour mixture and stir until mixed.  
4. Knead 3-4 strokes just until the dough comes together. Try not to overwork the dough. Pat to ¾ inch thickness and cut with a 2-inch biscuit or cookie cutter, dipping in flour between cuts. Transfer biscuits to an ungreased baking sheet.  
5. Bake for 12 minutes or until golden brown. Serve warm.

NOTES: Biscuits can be frozen after they are cut and baked later. If you are cooking for only one or two people, you can warm up 1 or 2 of them at a time. Take frozen dough directly from the freezer and bake in a 450°F toaster oven for about 12 minutes, until golden brown.
### Nutrition Information

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*NOTE: This assumes that the recipe yields 12 biscuits.*
The StrongWomen – Healthy Hearts Program
**WEEK FOUR**

**CLASS 2: ACCENTUATE WHOLE GRAINS, PART 1**

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**NUTRITION COMPONENT**

This time, we recommend doing the nutrition component first.

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**BACKGROUND**

Now it’s time to Accentuate whole grains. Carbohydrate, the major component of grains, has taken a beating in the public consciousness in the last few years. Fortunately, people are starting to realize that there’s a big difference between refined carbohydrates and whole grains.

---

**ACTIVITIES:**

1. Learning about the importance of whole grains (5 minutes)
2. Learning about grain serving sizes (10 minutes)
3. Learning to use the Nutrition Facts Panel to find the whole grains (10 minutes)
4. Setting goals (5 minutes)
HANDOUTS:

- Accentuate Whole Grains
- Which is One Grain Serving?
- Serving Sizes of Grains
- Whole Grains and Food Labels
- S.M.A.R.T. Goals and Whole Grains

PREPARATION:

1. Become familiar with the handouts. Make enough copies for everyone in the class.
2. Read over the plan for the class and become familiar with the talking points.

THE CLASS:

1. Give participants the “Accentuate Whole Grains” handout and go over it with them. Talking points:

   a. Refined grains have been milled, which removes the bran and germ. This process also removes much of the B vitamins, iron, and dietary fiber. Some B vitamins and iron are added back, but other nutrients and fiber are lost.

   b. Foods like soda pop or desserts are high in refined grains – sugar or high fructose corn syrup.
c. Refined white flour is usually used to make pizza dough and most pasta, salty snacks like pretzels, and desserts.

d. Foods made with refined or whole grains are rich in carbohydrates. Although many people believe that carbohydrates make you gain weight, some are good for you.

e. Whole grains are heart healthy. They contain fiber plus a host of nutrients and healthful plant chemicals that are eliminated when grains go through the refining process.

f. Corn is a whole grain, so popcorn counts – as long as it is air popped and not covered with butter or margarine with partially hydrogenated fat (trans fatty acids).

g. Less common grains can be used for breakfast, or as side dishes that take the place of rice and pasta in a meal.

2. Give participants the “Which is a Serving of Whole Grain” handout. Ask them to guess which is a serving of English muffin, bagel, and spaghetti. Talking points:

a. The smaller plate of spaghetti is one serving. It is ½ cup of cooked spaghetti.
b. The half English muffin is one serving. One serving is one ounce. The whole English muffin weighs 2 ounces.

c. The half bagel is one serving. Just like the English muffin, the whole bagel is 2 ounces. This is a small bagel – about 3 inches in diameter. It’s a freezer bagel. Many bagels are so big that you could get 5 grains servings by eating just one bagel. Most bagels are not whole grain, even if they are brown in color.

3. Give participants the “Serving Sizes of Grains” handout. Go over it with them. Tell them that not every carbohydrate-rich food they eat must be whole grain, but the more the better – at least half. Emphasize that they shouldn’t just add whole grains to their diet, they should replace refined grains with whole grains.

4. Give participants the “Whole Grains and Food Labels” handout.
Talking points:

a. A whole grain product will usually have 3 or more grams of dietary fiber per serving.

b. Look at the ingredients list. If the word “whole” is part of the first ingredient listed, the food has a larger amount of whole grain than refined grain by weight. Look for foods that are 100% whole grain. They will either say it on the label or will
not have any refined grains, like “wheat flour”, in the ingredients list.

c. Other whole grains, besides wheat, may be listed as the first ingredient and will indicate a whole grain food.

d. A number of foods sound like they are whole grain, but they are not. An example is 12 Grain Bread. It’s important to check the fiber content and the ingredients list.

e. Some foods seem to be whole grain because they are brown, but that may be because of molasses or other added ingredients. An example is “Pumpernickel Bread”. The only way to be sure is to check the label. The first ingredient should be a whole grain.

5. Give participants the “S.M.A.R.T. Goals and Whole Grains” handout. Spend a few minutes discussing with participants how they might increase their intake of whole grains. What S.M.A.R.T. goals can they set?
**Accentuate Whole Grains**

**REFINED GRAINS**
Sugar and high fructose corn syrup
White flour
White rice

**WHOLE GRAINS**
Whole wheat flour
Oatmeal
Brown rice
Corn – popcorn!

_LESS COMMON WHOLE GRAINS_ (can be found in natural foods markets or the natural foods section of traditional supermarkets)

- Barley
- Buckwheat groats (kasha)
- Bulgur
- Millet
- Quinoa
- Spelt
- Wheatberries
Which is One Grain Serving?

Which of the following depicts **one serving** of spaghetti?

Which of the following depicts **one serving** of English muffin?

Which of the following depicts **one serving** of bagel?
Serving Sizes of Grains

Consuming foods rich in fiber, such as whole grains, vegetables and fruits, as part of a healthy diet, reduces the risk of coronary heart disease.

**GOAL:**
Four to nine servings daily (at least half from whole grain)

**SERVING SIZE:**
- 1 (1-oz) regular-size slice of bread
- ½ cup rice, pasta, or other cooked grain
- ½ cup cooked oatmeal
- 1 serving breakfast cereal (refer to label for serving size)
- ½ English muffin
- ½ of a 2-oz bagel (NOTE: most bagels are larger than this!)
# Whole Grains and Food Labels

## A true whole grain...

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<td>Calcium: 4%</td>
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</tr>
</tbody>
</table>

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

**INGREDIENTS:** Whole wheat flour, water, vital wheat gluten, wheat fiber, yeast, canola oil, cultured wheat starch, honey, salt, soy flour, malt extract, enzymes, ascorbic acid, soy lecithin, soy flour.

## An imposter...

<table>
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<th>Nutrition Facts</th>
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<tr>
<td>Iron: 6%</td>
</tr>
</tbody>
</table>

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

**INGREDIENTS:** Water, wheat flour (unbleached, unbromonated), honey, malt syrup, vital wheat gluten, yeast, cold pressed corn oil, salt, sunflower seeds, corn grits, rye meal, rye flour, wild rice flour, cultured wheat flour, soy lecithin.

---

**Whole Wheat Bread**

Look for these as the first ingredient:
- brown rice
- bulgur
- graham flour
- oatmeal
- whole-grain corn
- whole oats
- whole rye
- whole wheat
- wild rice

**Honey 12 Grain Bread**

These are usually NOT whole grain:
- multi-grain
- stone-ground
- 100% wheat
- cracked wheat
- seven-grain bran
S.M.A.R.T. Goals for Whole Grains

Think about a way you could take a small step or two replacing refined grains with whole grains. What do you feel best about trying to do? What seems easiest to you to try? Set S.M.A.R.T. goals:

1. _____________________________________________________________________
   _____________________________________________________________________
   _____________________________________________________________________

2. _____________________________________________________________________
   _____________________________________________________________________
   _____________________________________________________________________
EXERCISE COMPONENT

BACKGROUND
As the intensity and duration of physical activity increase, it becomes more important to stay well-hydrated. Participants should be encouraged to come to class well-hydrated, and to drink just before and just after the exercise sessions. A body performs at its best when it has plenty of fluid.

Are sports drinks necessary? Not at the level at which you will be exercising in class. They are useful for exercise of long duration, meaning more than 1½ hours at a time, or when working out for a long time in the heat. For shorter exercises, stick to good old water. It will rehydrate just as well without the extra calories.

On a separate note, make sure that you are mixing up the walking and dancing. If you only do the dance, participants will be very tired of the DVD by the end of the program!
The StrongWomen – Healthy Hearts Program

ACTIVITIES:
1. Walking or cardiovascular dance (25 minutes)
2. Stretching (5 minutes)

EQUIPMENT & MATERIALS:
- Television and DVD player, or CD player (if doing dance)

THE CLASS:
You can choose either the walking or the dancing. Still check up on class progress by having them take the Talk Test and rating themselves on the RPE scale. Participants should be exercising at moderate intensity.
**Week Five**

**Class 1: Accentuate Whole Grains, Part 2**

---

**EXERCISE COMPONENT**

This time, we recommend doing the exercise component first, since participants will be cooking and tasting in the nutrition component.

---

**BACKGROUND**

At this point in the program, you may notice that some women are progressing more quickly than others. This could be a problem, especially on the walks. You don’t want to hold participants back, or they won’t get the full benefits of the exercise session. But you don’t want the slower walkers to feel discouraged, either. There are some things you can do:

- Try to “group” participants into 2-4 groups. This should be done in a sensitive, casual way. While you don’t want to suddenly have official slow, medium and fast groups, you can encourage what is probably a natural process. That way individuals in each group can push each other, at a pace that is reasonable for them. Also, you will avoid having one or two people feel like they are always at the tail end. If women do break into smaller groups, remember that you are the one with the cell phone and the CPR skills. You should never be more than a minute’s walk from any of the participants.
• Walk with the slower walkers, at least some of the time, even if your own pace is faster. That way, you can determine if they are pushing themselves adequately. If that is the case and they are expressing frustration at not progressing more quickly, remind them that it is not a competition. They are out to do something good for themselves – that’s what counts!

The differences in the rate of progression won’t be quite as obvious in the cardiovascular dance, but you still need to keep tabs on participants and check in on how they are feeling. Is someone always going to the back of the class? Is someone always looking around at what others are doing and comparing herself to them? The clues will be subtler, but if you are able to pick up on them, you can make an enormous difference in keeping participants from getting discouraged.
The StrongWomen – Healthy Hearts Program

ACTIVITIES:

1. Walking or cardiovascular dance (25 minutes)
2. Stretching (5 minutes)

EQUIPMENT & MATERIALS:

- Television and DVD player, or CD player (if doing dance)

THE CLASS:

You can choose to do either the walking or the dancing. Participants should be exercising at moderate intensity.
BACKGROUND
It’s fine to talk about whole grains, but many people have eaten very few of them and may be skeptical about trying new ones. Providing participants with an opportunity to sample and taste whole grains is a great way to eliminate some of the mystery. Most regular supermarkets carry whole-wheat pasta and brown rice. Some of the less common grains can be found in a natural foods store or the natural foods section of a regular supermarket. If they are not readily available in your community, please see the StrongWomen – Healthy Hearts website (go to blackboard.tufts.edu and log in) for suggestions on where to order them on-line. Even though a lack of availability could make it unlikely that participants will be able to use them regularly, it’s still good to expose participants to a variety of them.

If at all possible, get an assistant to help you with this class. She can get the grains ready for tasting and can also cook the pasta while you are exercising, so it is fresh and ready to go when you get back. Alternative set-up instructions are provided in case you aren’t able to get an assistant.
ACTIVITIES:

1. Tasting and rating whole grains – whole wheat pasta, brown rice, bulgur, millet and quinoa (15 minutes)
2. Creating whole grain salads (15 minutes)

EQUIPMENT & MATERIALS:

- Microwave oven
- Stove or hot plate
- Pans
- Sieve
- Mixing bowls
- Mixing spoons
- Sharp knives
- Vegetable peelers
- 3 cutting boards or other surfaces for chopping vegetables
- Liquid measuring cups
- Measuring spoons
- About 100 pleated paper portion cups (2 oz)
- Forks
- Napkins
HANDOUTS:

- Whole Grain Rating Sheet
- A Quick Guide to Whole Grains

PREPARATION:

1. Become familiar with the handouts. Make enough copies for everyone in the class.

2. Purchase the groceries on the Week 5 Class 1 Grocery List.

3. Obtain any grains that aren’t available in your community by ordering them on-line (see the StrongWomen – Healthy Hearts website, blackboard.tufts.edu).

4. Prepare the brown rice, bulgur, millet, and quinoa ahead of time. Use 2 cups of each and cook according to the directions on the handout, “A Quick Guide to Whole Grains”. Two cups of these will yield about 5 cups when cooked, which is enough for both the tasting activity and for creating grain salads. The brown rice will be used for tasting only; cook 1 cup according to the directions on the handout. Store the cooked grains in a covered container in the refrigerator for up to three days.

5. Get everything ready on the day of class. If you have an assistant for this class, have her prepare everything while you are exercising. She can:
The StrongWomen – Healthy Hearts Program

a. Cook the pasta (according to package directions) and warm up pasta sauce.

b. Warm up about 2 cups of the brown rice, bulgur, millet and quinoa for tasting, by placing them in the microwave oven on high power (100%) for about 2 minutes.

c. Put the warmed grains into tasting cups. There should be enough cups so that each participant can try each grain.

d. Get the grain salad stations set up (see below).

6. If you are not able to get someone to assist you, before class put the bulgur, millet, and quinoa into tasting cups and refrigerate. They can be tasted warm or cold; warm would be a little bit better, but cold is fine. After making enough tasting cups so that each participant can try each grain, there should be at least 3 cups of bulgur, millet, and quinoa left. NOTE: Don’t divide the brown rice into portions for tasting ahead of time. You’ll warm it up later and then divide it. Although it also tastes fine cold, most people are accustomed to warm rice.

7. Before class, arrange the room so that there are 3 stations, one with a large bowl of bulgur, one with millet, and one with quinoa. Each station should also have a surface to cut vegetables, a sharp knife, a vegetable peeler, and a liquid measuring cup and measuring spoons.
8. Set up the common ingredients: drain and rinse canned beans and corn and place each in a bowl. Set the bowls in a place where all groups can choose among them, along with any other vegetables (carrots, cucumber, green pepper, etc.), olive oil, lemon juice, and vinegar. Don’t peel or chop the vegetables; let participants do that. Also put salt and pepper, or any other seasonings, with the common ingredients.

THE CLASS:

1. If you don’t have someone to assist you, start the water boiling for the whole-wheat pasta immediately when you get back from exercising.

2. Hand out the Whole Grain Rating Sheets.

3. Have participants try each grain and fill out the Rating Sheets.
   a. If you don’t have someone to assist you, while the participants are tasting and rating the bulgur, millet, and quinoa, warm up the brown rice for about 2 minutes in a microwave oven (high, 100% power) and then place in tasting cups and give it to them. Continue cooking the whole-wheat pasta and warm up the spaghetti sauce. Serve the pasta and sauce whenever it is ready. They may already be in the middle of making their grain salads when you give it to them – that’s fine.

4. Discuss how they rated each grain.
5. Have the participants choose one grain: the bulgur group, the millet group, and the quinoa group. Tell them that they will be working together to create a salad out of that grain. They can use whatever ingredients they want, in whatever proportions they want. This could possibly be done as a contest, to see which group can make the tastiest salad. If they are stuck on how to make a dressing for their salad, suggest that ½ cup olive oil works well with ⅓ cup of vinegar; or else use equal parts olive oil and lemon juice.

6. Remind participants that by making the salad, they are also Heaping on the vegetables and fruits and Emphasizing the right fats.

7. Have participants taste each other’s salads.

8. While participants are cooking and tasting, check in with them about their S.M.A.R.T. goals so far. How are they doing? What are the challenges? Have they experienced successes?


10. Allow time for clean up.
NOTES:

- When you first prepare the brown rice, it can be cooked in the microwave. Use 1 cup of rice with 2 ¼ cups of water. Cover bowl with plastic wrap, leaving a small area uncovered to vent steam. Cook for 5 minutes on the highest (100%) power, and then for 45 minutes on low (30%) power. Fluff with a fork.

- If you only have one set of measuring cups and spoons, just ask participants to share.
### Grocery List for Week 5 Class 1

<table>
<thead>
<tr>
<th>Item</th>
<th>Quantity/Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 box whole wheat spaghetti</td>
<td></td>
</tr>
<tr>
<td>1 1-pound bag brown rice</td>
<td></td>
</tr>
<tr>
<td>1 small bottle of lemon juice</td>
<td></td>
</tr>
<tr>
<td>1 small bottle of cider vinegar</td>
<td></td>
</tr>
<tr>
<td>Olive oil (if you don't have any left from Week 2 Class 1)</td>
<td></td>
</tr>
<tr>
<td>1 small jar spaghetti sauce</td>
<td></td>
</tr>
<tr>
<td>Components of a grain salad. We suggest carrots, cucumber, green</td>
<td></td>
</tr>
<tr>
<td>and/or red peppers, canned corn, and canned black beans; but feel</td>
<td></td>
</tr>
<tr>
<td>free to choose any vegetables and beans that you feel would make a</td>
<td></td>
</tr>
<tr>
<td>good salad and that your participants would like. Also</td>
<td></td>
</tr>
<tr>
<td>choose garlic or any other seasonings you think they would like.</td>
<td></td>
</tr>
</tbody>
</table>

Whole grains available at a natural foods store, in the natural foods section, or through on-line ordering:

<table>
<thead>
<tr>
<th>Whole grain</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>At least 2 cups of millet</td>
<td></td>
</tr>
<tr>
<td>At least 2 cups of bulgur</td>
<td></td>
</tr>
<tr>
<td>At least 2 cups of quinoa</td>
<td></td>
</tr>
</tbody>
</table>

*(NOTE: 2 cups is about 12 ounces)*
### Whole Grain Rating Sheet

**RATING SCALE:**
1 = Poor   2 = Fair   3 = Neutral   4 = Good   5 = Excellent

<table>
<thead>
<tr>
<th>GRAIN:</th>
<th>TASTE</th>
<th>TEXTURE</th>
<th>APPEARANCE</th>
<th>OVERALL RATING</th>
</tr>
</thead>
<tbody>
<tr>
<td>Whole wheat pasta</td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Brown rice</td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Millet</td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Bulgur</td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Quinoa</td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
</tr>
</tbody>
</table>

**COMMENTS:**
# A Quick Guide to Whole Grains

<table>
<thead>
<tr>
<th>GRAIN</th>
<th>TASTE &amp; TEXTURE</th>
<th>HOW TO PREPARE</th>
<th>USES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barley*</td>
<td>Nutty, slightly pungent, chewy</td>
<td>Use 1 part barley to 3 parts water; simmer hulled barley for 1 ½ hours or pearl barley for about 45 minutes</td>
<td>Side dishes, pilafs, soups, stews, casseroles</td>
</tr>
<tr>
<td>Brown rice</td>
<td>Mildly nutty, a little bit chewier than white rice</td>
<td>1 part brown rice to 2 parts water; simmer for about 35 minutes</td>
<td>Side dishes, casseroles, pilafs</td>
</tr>
<tr>
<td>Buckwheat groats (kasha)</td>
<td>Nutty, earthy flavor, chewy</td>
<td>1 part kasha to 2 parts water; simmer for about 15 minutes</td>
<td>Side dishes, casseroles, cereal</td>
</tr>
<tr>
<td>Bulgur</td>
<td>Mild flavor, chewy</td>
<td>Add 1 ½ cups boiling water to 1 cup bulgur; let stand covered for 30 minutes</td>
<td>Casseroles, grain salads, stuffing</td>
</tr>
<tr>
<td>Millet*</td>
<td>Nutty, mildly sweet</td>
<td>1 part millet to 2 parts water; simmer for about 30 minutes</td>
<td>Cereals, soups, breads</td>
</tr>
<tr>
<td>Quinoa*</td>
<td>Nutty, can be slightly bitter, slightly crunchy</td>
<td>1 part quinoa to 2 parts water; simmer for about 15 minutes</td>
<td>Side dishes, pilafs</td>
</tr>
<tr>
<td>Spelt*</td>
<td>Mild, nutty, slightly sweet, slightly crunchy</td>
<td>Soak overnight, then simmer in 3 parts water to 1 part spelt for about 1 hour</td>
<td>Granola, pilafs; spelt flour can be used in place of regular flour in breads, muffins, pancakes, etc.</td>
</tr>
<tr>
<td>Wheatberries</td>
<td>Nutty, chewy</td>
<td>Cover wheatberries by an inch or two of water, simmer about 2 hours, drain if necessary</td>
<td>Grain salads, cereal</td>
</tr>
</tbody>
</table>

*For best results, rinse before cooking.
WEEK FIVE
CLASS 2: REVERE LOW- AND NONFAT DAIRY, PART 1

NUTRITION COMPONENT
This time, we recommend doing the nutrition component first.

BACKGROUND
Scientific evidence shows that following an eating plan that is low in saturated fat and cholesterol, and rich in magnesium, potassium, calcium, protein, and fiber can reduce blood pressure. Low- and nonfat dairy foods are an important piece of this plan, since they provide calcium while keeping saturated fat and cholesterol intakes low. In the next two classes, you will teach participants how to Revere low- and nonfat dairy foods.

It is important to note that as people age, they may begin to have trouble digesting milk and can become lactose intolerant. In this situation, the small intestine produces less lactase, an enzyme that breaks down lactose, the main natural sugar in milk. Symptoms of lactose intolerance may range from mild to severe and include nausea, cramps, bloating, gas, and diarrhea after consuming dairy products. Fortunately, women who have this problem don’t need to completely give up dairy foods. You will cover some basic strategies for dealing with it.
The StrongWomen – Healthy Hearts Program

ACTIVITIES:

1. Learning about dairy foods and heart health, and dairy servings sizes (5 minutes)
2. Learning how to use the Nutrition Facts Panel to make heart-healthy dairy choices (10 minutes)
3. Learning ways to incorporate low- and nonfat dairy foods into your diet (5 minutes)
4. Setting S.M.A.R.T. goals for dairy (5 minutes)
5. Learning about including dairy foods if you are lactose intolerant (5 minutes)

HANDOUTS:

- Serving Sizes of Dairy
- Heart-Healthy Dairy: Using the Nutrition Facts Panel
- Revere Low- and Nonfat Dairy Foods
- S.M.A.R.T Goals for Dairy
- Lactose Intolerance

PREPARATION:

1. Become familiar with the handouts. Make enough copies for everyone in the class.
THE CLASS:

1. Give participants the “Serving Sizes of Dairy” handout. Talking points:

   a. As every woman knows, dairy products are associated with stronger bones and may have other benefits. They are excellent sources of protein as well as outstanding sources of calcium and other nutrients.

   b. It is important to choose low- and nonfat dairy foods to keep saturated fat intakes low.

   c. More than three out of four women don’t eat enough dairy foods to ensure proper intake of calcium and all the other nutrients that dairy foods provide.

   d. Participants should aim for three servings of low- or nonfat dairy foods daily. (Go over what a serving size is for various types of dairy foods). It is important to not just add these servings, but to replace full fat dairy with low- or nonfat.

   e. Note: In terms of yogurt, it is best to buy plain nonfat and add fresh or frozen fruits to it rather than to buy fruited yogurt, which can be very high in sugar and calories.
2. Give participants the “Heart Healthy Dairy: Using the Nutrition Facts Panel” handout. Talking points:

   a. As the fat comes out of the milk, so do the calories, saturated fat, and cholesterol.

   b. As the fat comes out, the protein and calcium stay in. Other healthful nutrients that are not listed, like riboflavin, stay in as well.

   c. Another rule of thumb for looking at a food label is that a food is a good source of a nutrient if the %DV is 20% or more per serving. So for the nutrients you want to get more of, like calcium, look for 20%DV or more on the label. One cup of milk or yogurt provides 30% of the Daily Value for calcium, so it is a good source.

   d. Recall that for nutrients you want to limit, like saturated fat, look for 5%DV or less on the label. Notice that whole milk and 2% milk both have more than 5%DV of saturated fat and cholesterol. One percent milk comes closer to meeting the rule of thumb, and fat free milk meets it.

   e. Another thing to notice on the food labels is that the fat free milk lists vitamin D. Other types of milk may also be fortified with vitamin D – meaning it is added in processing. It is a good
idea to choose milk that is vitamin D fortified. If vitamin D is added, the milk processors must list it on the label.

3. Give participants the “Revere Low- and Nonfat Dairy Foods” handout and go over it with them.

4. Give participants the “S.M.A.R.T. Goals for Dairy” handout and assist them with setting goals.

5. Give participants the “Lactose Intolerance” handout and go over it with them.
GOAL:
Two to three servings daily (low- and nonfat dairy)

SERVING SIZE:
1 cup fat free or 1% milk
1 cup low- or nonfat yogurt
1 ounce hard cheese (cheddar, Swiss, etc.)
1 ½ ounces reduced-fat hard cheese
½ cup part-skim ricotta cheese
½ cup nonfat or 1% fat cottage cheese
Heart-Healthy Dairy: Using the Nutrition Facts Panel

### Whole Milk

<table>
<thead>
<tr>
<th>Nutrition Facts</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Serving Size</strong></td>
<td>1 cup (244g)</td>
</tr>
<tr>
<td><strong>Servings Per Container</strong></td>
<td>1</td>
</tr>
<tr>
<td><strong>Amount Per Serving</strong></td>
<td></td>
</tr>
<tr>
<td>Calories</td>
<td>150</td>
</tr>
<tr>
<td>Calories from Fat</td>
<td>70</td>
</tr>
<tr>
<td>Total Fat</td>
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<tr>
<td>Saturated Fat</td>
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<tr>
<td>Trans Fat</td>
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<tr>
<td>Cholesterol</td>
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<td>Sodium</td>
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<tr>
<td>Total Carbohydrate</td>
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</tr>
<tr>
<td>Dietary Fiber</td>
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</tr>
<tr>
<td>Sugars</td>
<td>12g</td>
</tr>
<tr>
<td>Protein</td>
<td>8g</td>
</tr>
<tr>
<td>Vitamin A</td>
<td>6%</td>
</tr>
<tr>
<td>Calcium</td>
<td>30%</td>
</tr>
<tr>
<td>Vitamin C</td>
<td>4%</td>
</tr>
<tr>
<td>Iron</td>
<td>0%</td>
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### 2% Milk

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<th>Nutrition Facts</th>
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<tr>
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<td>1 cup (244g)</td>
</tr>
<tr>
<td><strong>Servings Per Container</strong></td>
<td>1</td>
</tr>
<tr>
<td><strong>Amount Per Serving</strong></td>
<td></td>
</tr>
<tr>
<td>Calories</td>
<td>120</td>
</tr>
<tr>
<td>Calories from Fat</td>
<td>40</td>
</tr>
<tr>
<td>Total Fat</td>
<td>4.5g</td>
</tr>
<tr>
<td>Saturated Fat</td>
<td>3g</td>
</tr>
<tr>
<td>Trans Fat</td>
<td>0g</td>
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<tr>
<td>Cholesterol</td>
<td>20mg</td>
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<tr>
<td>Sodium</td>
<td>120mg</td>
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<tr>
<td>Total Carbohydrate</td>
<td>12g</td>
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<tr>
<td>Dietary Fiber</td>
<td>0g</td>
</tr>
<tr>
<td>Sugars</td>
<td>11g</td>
</tr>
<tr>
<td>Protein</td>
<td>8g</td>
</tr>
<tr>
<td>Vitamin A</td>
<td>10%</td>
</tr>
<tr>
<td>Calcium</td>
<td>30%</td>
</tr>
<tr>
<td>Vitamin C</td>
<td>4%</td>
</tr>
<tr>
<td>Iron</td>
<td>0%</td>
</tr>
</tbody>
</table>

### 1% Milk

<table>
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<th>Nutrition Facts</th>
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<tbody>
<tr>
<td><strong>Serving Size</strong></td>
<td>1 cup (244g)</td>
</tr>
<tr>
<td><strong>Servings Per Container</strong></td>
<td>1</td>
</tr>
<tr>
<td><strong>Amount Per Serving</strong></td>
<td></td>
</tr>
<tr>
<td>Calories</td>
<td>100</td>
</tr>
<tr>
<td>Calories from Fat</td>
<td>25</td>
</tr>
<tr>
<td>Total Fat</td>
<td>2.5g</td>
</tr>
<tr>
<td>Saturated Fat</td>
<td>1.5g</td>
</tr>
<tr>
<td>Trans Fat</td>
<td>0g</td>
</tr>
<tr>
<td>Cholesterol</td>
<td>10mg</td>
</tr>
<tr>
<td>Sodium</td>
<td>125mg</td>
</tr>
<tr>
<td>Total Carbohydrate</td>
<td>12g</td>
</tr>
<tr>
<td>Dietary Fiber</td>
<td>0g</td>
</tr>
<tr>
<td>Sugars</td>
<td>11g</td>
</tr>
<tr>
<td>Protein</td>
<td>8g</td>
</tr>
<tr>
<td>Vitamin A</td>
<td>10%</td>
</tr>
<tr>
<td>Calcium</td>
<td>30%</td>
</tr>
<tr>
<td>Vitamin C</td>
<td>4%</td>
</tr>
<tr>
<td>Iron</td>
<td>0%</td>
</tr>
</tbody>
</table>

### Nonfat Milk

<table>
<thead>
<tr>
<th>Nutrition Facts</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Serving Size</strong></td>
<td>1 cup (244g)</td>
</tr>
<tr>
<td><strong>Servings Per Container</strong></td>
<td>1</td>
</tr>
<tr>
<td><strong>Amount Per Serving</strong></td>
<td></td>
</tr>
<tr>
<td>Calories</td>
<td>80</td>
</tr>
<tr>
<td>Calories from Fat</td>
<td>0</td>
</tr>
<tr>
<td>Total Fat</td>
<td>0g</td>
</tr>
<tr>
<td>Saturated Fat</td>
<td>0g</td>
</tr>
<tr>
<td>Trans Fat</td>
<td>0g</td>
</tr>
<tr>
<td>Cholesterol</td>
<td>Less than 5mg</td>
</tr>
<tr>
<td>Sodium</td>
<td>120mg</td>
</tr>
<tr>
<td>Total Carbohydrate</td>
<td>11g</td>
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<tr>
<td>Dietary Fiber</td>
<td>0g</td>
</tr>
<tr>
<td>Sugars</td>
<td>11g</td>
</tr>
<tr>
<td>Protein</td>
<td>9g</td>
</tr>
<tr>
<td>Vitamin A</td>
<td>10%</td>
</tr>
<tr>
<td>Calcium</td>
<td>30%</td>
</tr>
<tr>
<td>Vitamin C</td>
<td>4%</td>
</tr>
<tr>
<td>Iron</td>
<td>0%</td>
</tr>
<tr>
<td>Vitamin D</td>
<td>2%</td>
</tr>
</tbody>
</table>
Revere Low- and Nonfat Dairy

Low- and nonfat dairy means more than a glass of skim milk or some milk in your cereal. Combined with other foods, it can really liven things up.

❤ Put a bit of piquant cheese, like sharp cheddar or parmesan, on vegetables.

❤ Add a dollop of low- or nonfat yogurt topping to a fruit salad.

❤ Grate some hard cheese, such as Swiss, cheddar, or Muenster, on top of a casserole. (If you don’t buy reduced-fat hard cheese, use it as a condiment or accent rather than as the main part of the meal).

❤ Mix dried cranberries, golden raisins, or any other dried fruit into plain low- or nonfat yogurt.

❤ Try part-skim mozzarella “string cheese” sticks, which have a long refrigerator life. They are great for snacks and travel well.

❤ Use low-fat cheese in sandwiches along with some fine mustard and thick slices of ripe tomato.

TIP: If you are trying to switch from whole fat milk to fat free, it is often easiest to go to 2% first. Once you are used to it, you can switch to 1% and then go to fat free.
Think about a way you could take a small step or two replacing full-fat dairy products with low- or nonfat. What do you feel best about trying to do? What seems easiest to you to try? Set S.M.A.R.T. goals:

1. _____________________________________________________________________
   _____________________________________________________________________
   _____________________________________________________________________

2. _____________________________________________________________________
   _____________________________________________________________________
   _____________________________________________________________________
The StrongWomen – Healthy Hearts Program

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Lactose Intolerance

What is it?
Lactose intolerance is the inability to digest significant amounts of lactose, the major sugar in milk. It is caused by a shortage of the enzyme lactase, which breaks lactose down in the small intestine.

What are the symptoms?
Common symptoms, which range from mild to severe, include nausea, cramps, bloating, gas, and diarrhea.

How can I Revere low- and nonfat dairy foods if I am lactose intolerant?
There are a number of strategies that may help you to better tolerate milk and dairy foods. You could try:

❤ Drinking a little milk at a time. You may find that you can tolerate small amounts with no problem.

❤ Eating dairy foods that have a lower lactose content, such as yogurt, aged cheeses, or buttermilk.

❤ Using special lactose-free milk. These are usually available in the low- and nonfat form.

❤ Using lactase enzyme pills or drops, which are available over-the-counter.
The StrongWomen – Healthy Hearts Program
EXERCISE COMPONENT

BACKGROUND
The Talk Test and the RPE scale are two simple ways to determine the intensity level of exercise. However, there may be cases where participants are consistently rating themselves at the appropriate level on the RPE scale – they perceive that they are working hard – but you suspect they aren’t quite at the level they should be. If this is the case, you can use heart rate. Keep in mind though that many things can affect heart rate, and while this can be another useful tool, it is not failsafe.

The target heart rate for participants is 60 to 80 percent of their maximum heart rate. Maximum heart rate is calculated by subtracting age from the number 220. For example, a 20 year-old woman would have a maximum heart rate of 200 beats per minute. To find her target heart rate, multiply 200 (her maximum heart rate) by 0.6 and 0.8 (60 to 80 percent). This shows that she should maintain a heart rate of 120 to 160 beats per minute during exercise, staying between 120 and 140 (70 percent = 200 x 0.7) most of the time. It is best to measure heart rate after five minutes of aerobic activity, and again at the end of the workout session, before the cool down. To measure heart rate, follow these steps:

• Find a clock or a watch with a second hand that is easily visible.
• Bend your right arm at the elbow; hold your right hand – palm facing up.

• Hold the forefinger and middle finger of your left hand together; touch them to the base of your right thumb.

• Slide the fingers across your wrist, moving them parallel to the top of your right arm. Your left fingers will cross the bones of your right wrist; you will feel a hollow in your right forearm between the bone on top and the tendons below.

• Press firmly when you are at the hollow. You should be able to feel your radial pulse. It may help to bend your right wrist back slightly.

• Watching the clock, count the number of beats you feel for fifteen seconds. Multiply this number by four to get your heart rate (number of beats per minute).

NOTE: Other factors affect heart rate besides activity. If any of the following situations applies to one of your participants, she should NOT use heart rate as a measure of intensity. Instead, she should stick to the Talk Test and the RPE scale.

• Use of a pacemaker or drugs will keep the heart rate steady.

• Use of medications, such as cold remedies, appetite suppressants, or calcium channel blockers for blood pressure, can raise or lower the heart rate.

• Recent consumption of caffeine can raise the heart rate. Caffeine can be found in coffee and tea as well as some sodas and medications.
ACTIVITIES:

1. Walking or cardiovascular dance (25 minutes)
2. Stretching (5 minutes)

EQUIPMENT & MATERIALS:
- Television and DVD player, or CD player (if doing dance)

THE CLASS:
You can choose to do either the walking or the dancing. Participants should be exercising at moderate intensity.
Week Six
Class 1: Revere Low- and Nonfat Dairy, Part 2

Exercise Component
We recommend doing the exercise component first. You’ll be cooking and tasting in the nutrition component.

Background
In this class, you will be picking up the pace once again. The goal is to go from moderate intensity to moderate-to-vigorous intensity. At this intensity, participants should be somewhat winded and unable to carry on a normal conversation. (They should be able to manage a conversation between breaths though). They should rate themselves at 6 or 7 on the Rate of Perceived Exertion scale.
ACTIVITIES:
1. Walking or cardiovascular dance (25 minutes)
2. Stretching (5 minutes)

EQUIPMENT & MATERIALS:
- Television and DVD player, or CD player (if doing dance)

PREPARATION:
1. If you are walking, find a slightly longer route or an add-on to the route you have been doing.
2. If you are doing the cardiovascular dance, practice increasing the intensity further by adding more arm movements and lifting legs even higher.

THE CLASS:
You can choose to do either the walking or the dancing. As you are exercising, ask participants to take the Talk Test and to rate themselves on the RPE scale. If they are not giving responses that are in the moderate-to-vigorous range, adjust the pace of the walk or the intensity of the dance routine accordingly.
NUTRITION COMPONENT

BACKGROUND

It’s easy to incorporate more low- and nonfat dairy into an overall eating pattern. Participants will have the opportunity to try a few simple ways to do just that. They will also see how Revering low- and nonfat dairy can go hand-in-hand with Heaping on the vegetables and fruits by making spinach dip, Mediterranean salad, and yogurt salad dressing. The yogurt salad dressing can also help Target heart-healthy proteins, since it can also be mixed with canned tuna in place of mayonnaise or used as a sauce on cooked fish.

This is another class that it would be very helpful to have an assistant for. She can set up the food stations while you are exercising. If you are not able to get an assistant, set everything up except items that require refrigeration or freezing, and take these out just as soon as the exercise ends. It should take only a few minutes to do this. Women can get some water or use the restroom during this time, or they can help you. Alternatively, you can reverse the order and do the nutrition component first, so that the class is all set up for cooking when participants arrive. Do whatever will work best for you and your participants.
ACTIVITIES:
1. Making yogurt salad dressing
2. Making spinach dip
3. Making Mediterranean salad

EQUIPMENT & MATERIALS:
- Colander
- Measuring spoons
- Liquid and dry measuring cups
- Jar or other container with a tight lid (for salad dressing)
- Mixing bowls
- Mixing spoons
- Sharp knife
- Surface for chopping vegetables
- Plates and forks (disposable is fine)
- Napkins

HANDOUTS:
- Revere Low- and Nonfat Dairy Recipes
PREPARATION:

1. Become familiar with the recipes. Ideally, you will make all of the items at least once before the class.
2. Make enough copies of the handouts for everyone in class.
3. Purchase the groceries on the Week 6 Class 1 grocery list.
4. Thaw the frozen spinach by refrigerating for several hours or else placing in a microwave on the lowest power level for about 10 minutes. Put it in a colander to drain.
5. Set up 3 “stations”:
   - Salad dressing station:
     - Small mixing bowl
     - Mixing spoon
     - Measuring spoons
     - Liquid measuring cup
     - ¼ and 1 cup dry measuring cups
     - Glass jar with cover
     - Balsamic vinegar, salt, sugar, olive oil, plain yogurt, Dijon mustard
     - Bagged salad
     - Plates and forks
   - Spinach dip
     - Colander
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- ¼ and 1 cup dry measuring cups
- Garlic press (or sharp knife and surface to mince on)
- Measuring spoons
- Mixing bowl
- Mixing spoon
- Plain yogurt, mayonnaise, lemon juice, garlic, chopped spinach
- Baby carrots or whole wheat pita chips

- Mediterranean salad station:
  - ¼ and ½ cup dry measuring cups
  - Sharp knife
  - Surface for chopping vegetables
  - Measuring spoons
  - Large mixing bowl
  - Two large spoons for tossing salad
  - Bagged salad, chickpeas, plum tomatoes, black olives, red onion, cottage cheese
  - Balsamic vinaigrette from Week 2 Class 1
  - Plates and forks
THE CLASS:

1. Give participants the “Revere Low- and Nonfat Dairy Recipes” handout. Let them choose the station they want to go to. Redistribute the groups if there are too many people at one station.

2. Let them assemble the item at their station, using the handout for directions.

3. Have them try the foods at the other stations.

4. Ask the class what they thought about the things they made.

5. Allow a little bit of time for clean up. With everyone helping, it should take very little time.

NOTES:

- Be sure to save the leftover yogurt and red onion in a refrigerator. You will need them next week.
**Grocery List for Week 6 Class 1**

- 2 plum tomatoes
- 1 red onion
- 2 bags of pre-washed salad
- 1 small bag baby carrots (for eating with spinach dip - could also use whole wheat pita chips)
- 16 oz container low or nonfat cottage cheese
- 32 oz container plain nonfat yogurt
- Small jar of mayonnaise
- 1 10-oz package frozen chopped spinach
- 1 can chickpeas (garbanzo beans)
- 1 can black olives

Also, if not left from previous classes:
- 1 bulb garlic
- Small jar of Dijon mustard
- Salt
- Sugar
- Vegetable or olive oil
- Balsamic vinegar
- Lemon juice
- Balsamic vinaigrette salad dressing
Revere Low- and Nonfat Dairy Recipes

Easy Nifty Salad Dressing

This recipe was adapted from the Stonyfield Farm Yogurt Cookbook by Meg Cadoux Hirshberg.

1/3 cup balsamic vinegar
1 teaspoon salt
1 teaspoon sugar
1 cup vegetable or olive oil
1 cup plain nonfat yogurt
¼ cup Dijon mustard

Place the vinegar, salt, sugar, and oil in a glass jar. Cover and shake vigorously. Pour into a bowl and mix in the yogurt and mustard.

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Spinach Dip

1 cup plain nonfat yogurt
2 tablespoons mayonnaise
1 tablespoon lemon juice
1 clove garlic
1 10-ounce package frozen chopped spinach, thawed

1. Drain the spinach in a colander. Press down on it with a paper towel to remove excess water.
2. Mince the garlic or put it through a garlic press.
3. Combine all ingredients.

Serve with raw vegetables or whole-wheat pita chips, or use on top of a baked potato.

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<td>Sodium</td>
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Mediterranean Salad

1 bag of pre-washed mixed greens
2 plum tomatoes, chopped
¼ cup black olives, chopped
¼ cup red onion, chopped
½ cup chickpeas (garbanzo beans)
¼ cup low- or nonfat cottage cheese
3 tablespoons balsamic vinaigrette

Chop the tomatoes, olives, and red onion. Place all ingredients in a bowl except for cottage cheese and vinaigrette. Toss. Add the cottage cheese and vinaigrette, and toss again.

Adapt this salad to your taste. Use different types of beans and vegetables, in different proportions. For example, add green or red pepper; use Calamata olives instead of black ones; use fewer chickpeas; and so forth.

Nutrition Information

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WEEK SIX
CLASS 2: TARGET HEART-HEALTHY PROTEINS, PART 1

NUTRITION COMPONENT
This time, we recommend doing the nutrition component first.

BACKGROUND
Targeting heart-healthy proteins is another way to keep saturated fat levels lower. In addition, fish provides a special form of fat – omega-3 fatty acids – that can help stave off heart disease.

ACTIVITIES:
1. Learning about heart-healthy proteins (10 minutes)
2. Learning about serving sizes of heart-healthy proteins (10 minutes)
3. Learning about the safety of fish (5 minutes)
4. Learning about the role of eggs in heart health (5 minutes)
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HANDOUTS:

- Target Heart-Healthy Proteins
- Serving Sizes of Heart-Healthy Proteins
- Is Fish Safe?
- To Eat Eggs or Not?

PREPARATION:

1. Become familiar with the handouts. Make enough copies for everyone in the class.

THE CLASS:

1. Give participants the “Target Heart-Healthy Proteins” handout.
   Talking points:

   a. A protein is “heart healthy” if it doesn’t come along with a lot of saturated fat, like fatty cuts of meat and full-fat dairy.

   b. Fish is high up on the list of good-for-your heart proteins. The scientific evidence is quite consistent that eating fish on a regular basis reduces risk of cardiovascular disease.

   c. Fish that are rich in omega-3 fatty acids, including salmon, mackerel, and herring, are particularly good for your heart. But it’s more important, if you’re not a fish eater currently, to simply begin to get more of any fish in your diet.
d. Even tuna sandwiches count, as long as they are not loaded up with too much mayonnaise. But frozen fish sticks, fried clams, and fried, breaded shrimp do not count – you don’t get much fish, and you likely get a lot of saturated or trans fatty acids.

e. The cooking method should keep fat and salt on the relatively low side. Baked, broiled, or grilled fish are the best bets. (NOTE: salt will be specifically addressed in week 8 class 1).

f. Cooked dried beans are a great protein source, too. They’re one of the few protein sources that also contain a lot of fiber – up to 8 grams per half cup. And they contain virtually no unhealthy fats.

g. You shouldn’t simply add heart-healthy proteins to your eating pattern, but replace heart-unhealthy proteins with heart-healthy ones.

h. In moderation, beef, pork, and poultry can be part of a heart-healthy eating pattern, especially if you broil or grill them. Look for lean cuts of meat: generally they will have “round” or “loin” in their names. They tend to be lower in fat. Remove poultry skin before eating.

i. To keep saturated fat down in ground beef, buy at least 93% lean. Keep in mind, though, that no ground beef is truly very lean. It is important to keep appropriate serving sizes in mind.
2. Give participants the “Serving Sizes of Heart-Healthy Proteins” handout. Talking points:

   a. The goal is to get three to four servings of heart-healthy proteins each day. Because fish has such an important role in reducing risk of developing heart disease, you should try to eat at least two fish meals a week, other than fried fish fillets. Next week we will learn some quick and easy ways to prepare fish.

   b. A serving of poultry, beef, pork or lamb is 3 ounces. It is particularly important to pay attention to serving sizes because many people are used to very large servings of meat. As you’ve learned, one serving is about the size and thickness of a deck of playing cards.

3. Give participants the “Is Fish Safe?” handout. Go over it with them. Point out that the possible benefits of eating fish outweigh the risks.

4. Give participants the “To Eat Eggs or Not” handout. Go over it with them.
Target Heart-Healthy Proteins

Heart-UN-healthy proteins:
- Fatty cuts of meat
- Full-fat dairy

Heart-HEALTHY proteins:
- Fish! (omega-3 fatty acids)
- Lean cuts of meat
  - “Round”
  - “Loin”
  - Ground beef – at least 93% lean
- Poultry with the skin removed
- Low- or nonfat dairy products
- Plant sources:
  - Dried beans
  - Tofu
  - Peanut butter
Serving Sizes of Heart-Healthy Proteins

GOAL:
Three to four servings daily, including at least two fish meals a week

SERVING SIZE:
- 3 ounces cooked fish
- ½ cup cooked dried beans
- ½ cup tofu
- 1 egg
- 2 tablespoons peanut butter
- 3 ounces cooked, skinless poultry
- 3 ounces cooked lean beef, pork, or lamb

How much is a serving?
Recall that 3 ounces of meat is about the size and thickness of a deck of playing cards.
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You may have read or heard news reports that some types of fish are high in mercury and contaminants called PCBs. But fish is also highly recommended for heart health. Should you eat it or not?

The Food and Drug Administration has issued specific guidelines for only four types of fish:
- Shark
- Swordfish
- King mackerel
- Tilefish

Furthermore, the advisory is only for women of childbearing years and young children. For all other people, no fish species are off limits.

As you consider fish, you must weigh the risks and benefits.

**RISKS:**
- Risk of toxicity from mercury and other contaminants is quite low

**BENEFITS:**
- Your risk of developing cardiovascular disease is relatively high
- Eating fish on a regular basis reduces that risk

For specific questions regarding the safety of eating different fish, go to [www.fda.gov](http://www.fda.gov) or call the Food and Drug Administration at 1-888-SAFEFOOD.
Eggs are high in cholesterol. Do you need to avoid them? No.

❤ While cholesterol in food can raise blood cholesterol levels, saturated and trans fatty acids generally raise blood cholesterol considerably more.

❤ You still need to limit dietary cholesterol, to an average of 300 mg a day for healthy people (200 mg if you already have heart disease).

❤ An egg yolk has about 215 mg of cholesterol. The white doesn’t have any.

❤ Meat, fish, and full-fat dairy have cholesterol as well. So you have to be thoughtful if you want to eat an egg every single day and stay within the 300-mg limit. But certainly, you could fit in several eggs a week without exceeding the limit.

❤ For a lower-cholesterol option, substitute two egg whites for one whole egg or use egg substitutes that are available in your grocery store.
EXERCISE COMPONENT

BACKGROUND

Exercise is certainly great for your heart in the long term, but most people like to have immediate results. During the warm up, talk with participants about the positive things they will get *today*. For example, they get to spend time with each other, they get to take care of themselves, and they get to release stress. Ask them what else they get. Teaching them to recognize the immediate benefits will help them feel good about each exercise session and can carry them through until the longer-term benefits begin to materialize.

ACTIVITIES:

1. Walking or cardiovascular dance (25 minutes)
2. Stretching (5 minutes)

EQUIPMENT & MATERIALS:

- Television and DVD player, or CD player (if doing dance)
THE CLASS:
You can choose to do either the walking or the dancing. Like last week, the level of intensity should be moderate-to-vigorous. Check in with the class to make sure they are exercising at the right level. They should be winded enough so that carrying on a conversation is difficult, and should rate themselves at about 6-7 on the RPE scale.
EXERCISE COMPONENT

We recommend doing the exercise component first. Participants will be cooking and tasting during the nutrition component, and they probably won’t want to exercise after eating.

BACKGROUND

Women often expect themselves to do everything perfectly, right away. But the saying is true: the perfect is the enemy of the good. Watch out for perfectionism in your participants, because it can lead to a lot of discouragement and drop-out. One participant may feel like a failure if she misses just one class – and if she misses two, she doesn’t see any point in going back. Another may have an “off” day, where she feels she can’t keep up, and decide this exercise thing just isn’t for her.

You can really make a difference. Teach participants to expect to have other things in life get in the way sometimes, or to have a day or two when they just don’t feel up to par. It’s not having these things happen that matters; it’s getting past them. If necessary, participants can use the class as good practice for getting right back up on the horse after falling off a time or two.
ACTIVITIES:

1. Walking or cardiovascular dance (25 minutes)
2. Stretching (5 minutes)

EQUIPMENT & MATERIALS:

- Television and DVD player, or CD player (if doing dance)

THE CLASS:

You can choose to do either the walking or the dancing. The level of intensity should be moderate-to-vigorous.
NUTRITION COMPONENT

BACKGROUND
Participants will have the opportunity to try a few simple ways to prepare heart-healthy proteins: fish and dried beans. Like the other cooking classes, this one will probably go more smoothly if you are able to get an assistant. If you are not able to, set everything up except items that require refrigeration or freezing, and take these out just as soon as the exercise ends. It should take only a few minutes to do this. Women can get some water or use the restroom during this time, or they can help you. Alternatively, you can reverse the order and do the nutrition component first, so that the class is all set up for cooking when participants arrive. As always, do whatever will work best for you and your participants!
ACTIVITIES:
1. Making curried tuna
2. Making baked fish with lemon sauce
3. Making corn and bean salad

EQUIPMENT & MATERIALS:
- Toaster oven
- Small baking dish for toaster oven, or aluminum foil
- Measuring spoons
- Liquid and dry measuring cups
- Colander
- Bowls
- Mixing spoons
- Plates and forks (disposable is fine)
- Napkins

HANDOUTS:
- Target Heart-Healthy Protein Recipes
PREPARATION:

1. Become familiar with the recipes. Make enough copies for everyone in class.
2. Purchase the groceries on the Week 7 Class 1 grocery list.
3. Set up 3 “stations”:
   - Curried tuna station:
     - Fork
     - Bowl
     - Measuring spoons
     - Ingredients for Curried Tuna: can of tuna, mayonnaise, curry powder, raisins, almonds
     - Whole wheat bread
   - Baked fish with lemon sauce station:
     - Toaster oven
     - Small baking dish or aluminum foil
     - Liquid measuring cup
     - Measuring spoons
     - Mixing spoon
     - Ingredients for Baked Fish with Lemon Sauce: fish, yogurt, lemon juice, dill
   - Corn and bean salad station:
     - Large bowl
     - Mixing spoon
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- Colander
- Sharp knives
- Measuring spoons
- Surface for chopping vegetables
- Ingredients for Corn and Bean Salad:
  black beans, frozen corn, red bell pepper, red onion, cumin, lime, olive oil, salt and pepper

THE CLASS:

1. Give participants the “Target Heart-Healthy Protein Recipes” handout. Let them choose the station they want to go to. Redistribute the groups if there are too many people at one station.

2. Have them prepare the item at their station, using the handout for directions. Provide assistance if necessary.

3. Have participants taste foods from different stations.

4. Ask the class what they thought about the things they made.

5. Allow time for clean up.
**Grocery List for Week 7 Class 1**

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<th>Item</th>
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<tr>
<td>1 6-ounce can tuna (water-packed)</td>
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<td>1 small container curry powder</td>
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<tr>
<td>1 small container dried dill</td>
</tr>
<tr>
<td>1 small container cumin</td>
</tr>
<tr>
<td>1 2.25-ounce bag slivered almonds</td>
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<tr>
<td>Some type of dry, raw, or roasted low-sodium nuts.</td>
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<tr>
<td>Make sure you have 1 serving, which is equal to 1 ounce or 3 tablespoons, for all participants. (Save for Week 8 Class 2)</td>
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<tr>
<td>1 pound mild white frozen fish (flounder, whiting, sole, haddock or cod)</td>
</tr>
<tr>
<td>1 14-ounce can black beans</td>
</tr>
<tr>
<td>1 small bag frozen corn kernels</td>
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<tr>
<td>1 red bell pepper</td>
</tr>
<tr>
<td>1 lime</td>
</tr>
<tr>
<td>1 loaf of whole wheat bread (make sure it is not an imposter!)</td>
</tr>
<tr>
<td>Also, if not left over from previous classes:</td>
</tr>
<tr>
<td>Mayonnaise</td>
</tr>
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<td>Raisins</td>
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<tr>
<td>Plain non-fat yogurt</td>
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<tr>
<td>Lemon juice</td>
</tr>
<tr>
<td>Red onion</td>
</tr>
<tr>
<td>Vegetable or olive oil</td>
</tr>
<tr>
<td>Salt and pepper</td>
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Curried Tuna

One 6-ounce can tuna (packed in water)
1 tablespoon mayonnaise
1 teaspoon curry, or to taste
3 tablespoons raisins
3 tablespoons slivered almonds

1. Drain the tuna.
2. Break up the tuna pieces with a fork, mix in mayonnaise, add remaining ingredients, and toss.
3. Use the tuna to make two sandwiches on whole wheat bread.

NOTE: For class purposes, cut the two sandwiches up into finger sandwiches so everyone can have a taste.

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*NOTE: If desired, this recipe can be made with low-fat mayonnaise. The total calories would decrease to 225 and saturated fat to 1g.
Baked Fish with Lemon Sauce

3 tablespoons plain nonfat yogurt
1 tablespoon mayonnaise
1 tablespoon lemon juice
1 teaspoon dried dill
1 pound frozen fish fillet

1. Preheat oven to 400˚F.
2. Mix yogurt, mayonnaise, lemon juice, and dill together.
3. Separate fillets and spread sauce over them.
4. Bake for about 10 minutes or until fish flakes. Do not overcook.

NOTES: If you are cooking this in a toaster oven, you will probably need to bake about half a pound at a time. Otherwise you won’t be able to spread the fish out and it may not cook evenly.

You can also cook fish in a microwave oven. Place in a glass microwave-safe dish and cook on high (100%) power for about 10-12 minutes or until the fish flakes.

If you prefer to thaw the fish ahead of time, thaw in the refrigerator or microwave, NOT at room temperature. To thaw in the microwave, remove fish from package and arrange in a microwave-safe dish with the thickest parts on the outside. Cook using the defrost setting (usually about 30% power) for 1 to 1 ½ minutes. The fish should still be icy cold. Add sauce to thawed fish and cook for about 5 minutes in the oven or at full (100%) power in the microwave.
## Nutrition Information

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*NOTE: Assumes that flounder was used.*
Corn and Bean Salad

This recipe is adapted from the Food Network website.

1 14-ounce can black beans, rinsed and drained
2 cups frozen corn kernels
1 small red bell pepper, seeded and chopped
½ red onion, chopped
1 ½ teaspoons ground cumin
1 lime, juiced
2 tablespoons vegetable or olive oil
Salt and pepper to taste

Combine all ingredients in a bowl and mix. Let stand for several minutes to allow the corn to fully defrost and the flavors to combine. The corn will also chill the salad as it defrosts, so there is no need to refrigerate before serving.

Nutrition Information

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*NOTE: Assumes 1 teaspoon of salt used.*
WEEK SEVEN
CLASS 2: PUTTING IT ALL TOGETHER,
PART 1

NUTRITION COMPONENT
This time, we recommend doing the nutrition component first.

BACKGROUND
Conjure up the word “diet,” and the words “restrictive,” “punishing,” “boring,” and “lacking flavor” won’t be far behind. That’s because so often, when health professionals as well as the media talk about diet, they talk about things you shouldn’t eat, foods you can no longer enjoy. This notion is especially deep-rooted when it comes to diets for preventing disease. Stay away from fat, stay away from meat, watch this, watch that.

Hopefully participants have already begun to discover that eating for heart health happens to be delicious. It’s about taste, texture, color – and enjoyment. And there’s more good news about a heart-healthy diet: following it not only protects heart health but health in general.

In the next six classes, you will teach participants to take what they’ve learned so far about eating by HEART and put it together into meals and
menus. You will guide them, one step a time, towards an overall heart-healthy eating pattern.

ACTIVITIES:

1. Learning about heart-healthy grocery shopping (5 minutes)
2. Learning about choosing a heart-healthy breakfast (15 minutes)
3. Making breakfast choices (10 minutes)

HANDOUTS:

- Navigating the Grocery Store
- Breakfast
- Choose Your Breakfast

PREPARATION:

1. Become familiar with the handouts. Make enough copies of the “Navigating the Grocery Store” and “Breakfast” handouts for everyone in the class. Make several copies of the “Choose Your Breakfast” handout for each participant.
2. Read over the plan for the class and become familiar with the talking points.
THE CLASS:

1. Give participants the “Navigating the Grocery Store” handout. Go over it with them. Emphasize that heart-healthy eating starts with heart-healthy shopping.

2. Give participants the “Breakfast” handout. Talking points:

   a. Each woman needs to tailor a heart-healthy pattern of eating to her own tastes. But sometimes it’s hard to get started. You can know everything you’re supposed to do but still have a hard time putting it together. In the next few classes, we’ll go through eating by HEART meal-by-meal, and then put it all together into menus.

   b. We’re starting, of course, with breakfast. You’ve probably heard that it’s the most important meal of the day, but why is that? Breakfast provides many of the things that many Americans lack in their diets, such as calcium and whole grains. Eating breakfast can help with weight control. Studies show that eating a substantial breakfast may work biologically to keep you from eat less after nightfall. Plus, if you start off the day with a nutritious breakfast, you’ll probably do better all day long. One positive step forward leads to the next!
c. (The handout presents two breakfast options: “Pick and Choose” and “Egg Breakfast”. Go over each. Emphasize portion sizes.)

d. These breakfasts provide 300 to 400 calories.

3. Give participants several copies of the “Choose Your Breakfast” handout. Go over it with them, and then give them a few minutes to fill it out for the next morning. Suggest that they keep filling them out every day until the next class.
Navigating the Grocery Store

Heart-healthy eating starts at the grocery store. If you don’t buy it, you can’t eat it! Here are some tips for shopping by HEART:

♥ **H**: Spend a lot of time in the produce section and the frozen vegetable section.

♥ **E**: Look for vegetable oils (canola, safflower, sunflower, corn, olive, soybean).

♥ **A**: Buy whole grain bread, pasta, and cereal.

♥ **R**: Select fat free or 1% milk and yogurt. Select reduced fat cheeses.

♥ **T**: Buy lean cuts of meat such as round or loin. Buy some canned beans.

♥ Keep an emphasis on the perimeter of the store rather than on the boxed, bagged, packaged, and processed foods in the center aisles.

♥ Read food labels!
The StrongWomen – Healthy Hearts Program

BLANK PAGE
**Breakfast**

<table>
<thead>
<tr>
<th>Option 1: “Pick and Choose”</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Grain (two of the following or a double serving)</strong></td>
<td></td>
</tr>
<tr>
<td>Whole-grain cold cereal</td>
<td>½ to 1 cup</td>
</tr>
<tr>
<td>(see package for serving size)</td>
<td></td>
</tr>
<tr>
<td>Whole-grain hot cereal</td>
<td>½ cup</td>
</tr>
<tr>
<td>(oatmeal, Wheatina, Farina, etc.)</td>
<td></td>
</tr>
<tr>
<td>Whole-grain bread (toasted or plain)</td>
<td>1 (1-oz) slice</td>
</tr>
<tr>
<td>Whole-grain bagel or English muffin</td>
<td>1 ounce</td>
</tr>
<tr>
<td><strong>Fruit (one of the following – fresh, frozen, or canned)</strong></td>
<td></td>
</tr>
<tr>
<td>Whole, fresh fruit (apple, peach, banana, orange, etc)</td>
<td>1 medium</td>
</tr>
<tr>
<td>Whole, fresh fruit (berries, grapes, etc.)</td>
<td>1 cup</td>
</tr>
<tr>
<td>Sliced or chopped fruit</td>
<td>1 cup fresh or ½ cup frozen</td>
</tr>
<tr>
<td>(melon, peach, etc.)</td>
<td></td>
</tr>
<tr>
<td>Dried fruit (apricots, prunes, raisins, etc.)</td>
<td>¼ cup</td>
</tr>
<tr>
<td>100% juice</td>
<td>¾ cup</td>
</tr>
<tr>
<td><strong>Dairy (one of the following)</strong></td>
<td></td>
</tr>
<tr>
<td>Milk (fat free or 1%)</td>
<td>1 cup</td>
</tr>
<tr>
<td>Yogurt (low- or nonfat)</td>
<td>6 to 8 ounces</td>
</tr>
<tr>
<td>Hard cheese (cheddar, Swiss, etc.)</td>
<td>1 ounce</td>
</tr>
<tr>
<td>Low-fat cheese</td>
<td>1 ½ ounces</td>
</tr>
<tr>
<td>Ricotta cheese (part-skim)</td>
<td>½ cup</td>
</tr>
<tr>
<td>Cottage cheese (1% fat or nonfat)</td>
<td>½ cup</td>
</tr>
</tbody>
</table>
### Option 2: “Egg Breakfast”

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Omelet (in nonstick pan with vegetable oil spray)</td>
<td>3 egg whites or equivalent egg substitute</td>
</tr>
<tr>
<td>Vegetables (sautéed in 1 teaspoon vegetable oil)</td>
<td>½ cup</td>
</tr>
<tr>
<td>Whole-grain toast (or other grain from above)</td>
<td>1 (1-oz) slice</td>
</tr>
<tr>
<td>One dairy (see Option 1)</td>
<td></td>
</tr>
<tr>
<td>One fruit (see Option 1)</td>
<td></td>
</tr>
</tbody>
</table>
Choose Your Breakfast

Choosing your breakfast can be fun. Before you go to bed, pretend you are on vacation and choosing from the room service menu for the next morning. Hang it on your bedroom door – who knows, someone might end up preparing it for you!

### The Healthy Hearts Hotel

**BREAKFAST MENU**

Choose two:

- [ ] 1 serving whole-grain cold cereal
- [ ] ½ cup whole-grain hot cereal
- [ ] 1 slice whole-grain bread (toasted or plain)
- [ ] ½ whole-grain English muffin
- [ ] ½ whole-grain bagel

Or

- [ ] Egg white omelet with vegetables (plus choose one of the above)

Choose one:

- [ ] 1 medium piece of fresh fruit
- [ ] 1 cup of whole, fresh fruit (berries, grapes)
- [ ] 1 cup sliced melon, peach, or other fresh fruit
- [ ] ½ cup frozen sliced or chopped fruit
- [ ] ¼ cup dried fruit
- [ ] ¾ cup orange, apple, or other 100% fruit juice

Choose one:

- [ ] 1 cup fat free or 1% milk
- [ ] 6 to 8 ounce cup of low- or nonfat yogurt
- [ ] 1 ounce of cheddar, Swiss, or other hard cheese
- [ ] 1 ½ ounces low-fat hard cheese
- [ ] ¼ cup ricotta
- [ ] ½ cup cottage cheese (1% fat or nonfat)
EXERCISE COMPONENT

BACKGROUND
By this point in the program, participants may start to expect some major results. Even if you were able to guide them to set realistic goals at the beginning of class, they may think that things aren’t happening quickly enough, or at all. They aren’t losing weight. They aren’t sleeping any better. They aren’t full of boundless energy and optimism. They may start to lose confidence in themselves, or even in you.

Check in about expectations. Remind participants that long-term results are just that – they may take months. Remind them that muscle weighs more than fat. Remind them of the many things they are achieving!
ACTIVITIES:

1. Walking or cardiovascular dance (25 minutes)
2. Stretching (5 minutes)

EQUIPMENT & MATERIALS:

- Television and DVD player, or CD player (if doing dance)

THE CLASS:

You can choose to do either the walking or the dancing. The level of intensity should be moderate-to-vigorous.
WEEK EIGHT
CLASS 1: PUTTING IT ALL TOGETHER, PART 2

NUTRITION COMPONENT
This time, we recommend doing the nutrition component first.

BACKGROUND
Before you begin talking to participants about lunch, which is the main focus for today, you will spend a few minutes discussing how their breakfasts have gone since last week. This type of check-in is very important for helping participants develop the skills to evaluate what works for them and why, and how to troubleshoot when things don’t work as well.

ACTIVITIES:
1. Discussion about breakfast (10 minutes)
2. Learning about choosing a heart-healthy lunch (15 minutes)
3. Learning about the role of salt in a heart-healthy diet (5 minutes)
The StrongWomen – Healthy Hearts Program

HANDOUTS:
- Lunch
- Salt Shakedown

PREPARATION:
1. Become familiar with the handouts. Make enough copies for everyone in the class.
2. Read over the plan for the class and become familiar with the talking points.

THE CLASS:
1. Start a discussion about how breakfast has gone since last week. Did they fill out the “Choose Your Breakfast” sheet? If not, what prevented them from doing it? What really worked for them when thinking about eating a heart-healthy breakfast? What didn’t work? Help them brainstorm ways to overcome obstacles.

2. Give participants the “Lunch” handout and go over it with them. Encourage participants to try eating at least one lunch according to the plan before the next class. Note that this lunch provides 500 to 600 calories.

3. Give participants the “Salt Shakedown” handout. Talking points:
a. You probably know that the amount of salt or, more specifically, sodium in your diet is related to your blood pressure. The more salt you consume each day, the higher your blood pressure is going be – although we all differ in our response to salt.

b. Some women are more sensitive to sodium than others, and most people become more sensitive as they age. Even if you’re not especially sensitive, eating less salt is certainly not harmful and is most likely beneficial, especially as you grow older.

c. Most of the salt you eat – as much as 80 percent – comes from prepared foods. If you eat fewer processed foods and more whole foods, you’ll have more control over your salt intake.
The StrongWomen – Healthy Hearts Program

Lunch

Option 1: “Classic Sandwich”

<table>
<thead>
<tr>
<th>Ingredient</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Whole-grain bread</td>
<td>2 (1-oz) regular-size slices</td>
</tr>
<tr>
<td>Lean protein (fish, chicken, turkey, beef)</td>
<td>2 ounces</td>
</tr>
<tr>
<td>Vegetables (whatever you prefer)</td>
<td>½ cup</td>
</tr>
<tr>
<td>Mayonnaise (reduced fat) and/or mustard</td>
<td>1 tablespoon</td>
</tr>
<tr>
<td>One dairy serving</td>
<td></td>
</tr>
<tr>
<td>One fruit serving</td>
<td></td>
</tr>
</tbody>
</table>

Note: If you prefer to have two portions of lean protein in your sandwich, omit the dairy; if you prefer to have two portions of dairy, omit the lean protein.

Option 2: “Hearty Soup”

<table>
<thead>
<tr>
<th>Ingredient</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hearty soup (non-cream-based vegetable with beans or meat, such as minestrone)</td>
<td>1½ cups</td>
</tr>
<tr>
<td>Whole-grain bread</td>
<td>1 to 2 (1-oz) portions</td>
</tr>
<tr>
<td>One dairy serving</td>
<td></td>
</tr>
<tr>
<td>One fruit serving</td>
<td></td>
</tr>
</tbody>
</table>
### Option 3: “Zesty Salad”

<table>
<thead>
<tr>
<th>Ingredient</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lettuce greens (variety)</td>
<td>2 cups</td>
</tr>
<tr>
<td>Fish, chicken, cheese, or tofu (minimally processed)</td>
<td>2 ounces fish or chicken, 1 ounce cheese, ½ cup tofu</td>
</tr>
<tr>
<td>Vegetables (variety, chopped)</td>
<td>½ cup to 1 cup</td>
</tr>
<tr>
<td>Dressing (vegetable-oil based)</td>
<td>2 tablespoons</td>
</tr>
<tr>
<td>Whole-grain bread</td>
<td>1 (1-oz) portion</td>
</tr>
<tr>
<td>One dairy serving</td>
<td></td>
</tr>
<tr>
<td>One fruit serving</td>
<td></td>
</tr>
</tbody>
</table>

Note: If you prefer to have two portions of lean protein in your salad, omit the dairy; if you prefer to have two portions of dairy, omit the lean protein.
Salt Shakedown

Use the following simple rules to cut down on salt intake:

❤ Don’t add salt to your food until you taste it to make sure it really needs it. You can always add salt, but you can’t take it out.

❤ Don’t put a salt shaker on the table.

❤ Don’t use salt directly out of the package you buy it in, even for cooking. Transfer some to a shaker so that it is easier to control the amount you add to the food you are preparing.

❤ If you can see grains of salt on a product, like pretzels, for example, look for one with less.

❤ Many products are now available in “reduced salt” or “low-sodium” versions. Try them, especially if you are using them for cooking.

While your love for sugar is inborn, but you can “unlearn” your taste for salt. Within months of cutting back, what was once “salty enough” will become “too salty.” Try it and see!
EXERCISE COMPONENT

BACKGROUND

Some participants may find that family members are not entirely supportive of their newfound passion for exercise. This is not surprising, since exercise can take time and energy away from loved ones. There are a number of strategies that women can employ to make it easier on everyone:

• As much as possible, include family members in exercise. Find things you will enjoy together.

• It’s hard to get what you aren’t willing to give yourself. If you want support for your activities, be supportive of theirs, even ones that aren’t related to exercise.

• Explain your goals to family members, and how important they are to you.

• Enlist their help in finding solutions to obstacles.

• Come up with a plan that everyone feels good about.
ACTIVITIES:

1. Walking or cardiovascular dance (25 minutes)
2. Stretching (5 minutes)

EQUIPMENT & MATERIALS:

- Television and DVD player, or CD player (if doing dance)

THE CLASS:

You can choose to do either the walking or the dancing. The level of intensity should be moderate-to-vigorous.
**Week Eight**

**Class 2: Putting it All Together, Part 3**

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**EXERCISE COMPONENT**

We recommend doing the exercise component first. Participants will be having a snack during the nutrition component, and they probably won’t want to exercise after eating.

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**BACKGROUND**

This week, try to touch base with participants about the goals they set at the beginning of the program. Have they met those goals or are they on the way to meeting them? How are they rewarding themselves for making progress? You may have to help them here – some women will reward their adherence to an exercise routine with a big bar of chocolate! Be sure to get them thinking about non-food rewards, like an appointment for a massage or a new exercise outfit. Or, if it must be food-related, a new recipe book with wholesome recipes. Rewards don’t always have to cost money, however – sometimes taking an hour alone to relax is the best reward there is.

Now is also a good time to think about setting new goals. Work with them to set ones that build on what they’ve already accomplished, and are realistic and S.M.A.R.T.
ACTIVITIES:

1. Walking or cardiovascular dance (25 minutes)
2. Stretching (5 minutes)

EQUIPMENT & MATERIALS:

- Television and DVD player, or CD player (if doing dance)

THE CLASS:

You can choose to do either the walking or the dancing. The level of intensity should be moderate-to-vigorous.
NUTRITION COMPONENT

BACKGROUND
Snacks and treats also have a place in a heart-healthy eating plan. Today’s class teaches participants how to fit them in.

ACTIVITIES:
1. Discussion about lunch (10 minutes)
2. Learning about choosing snacks (10 minutes)
3. Learning about nuts and heart health (5 minutes)
4. Learning about treats and heart health (5 minutes)
The StrongWomen – Healthy Hearts Program

EQUIPMENT AND MATERIALS:

- Measuring spoon
- Small plates or tasting cups

HANDOUTS:

- Snack Time
- Go Nuts!
- Treats

PREPARATION:

1. Become familiar with the handouts. Make enough copies for everyone in the class.
2. Read over the plan for the class and become familiar with the talking points.
3. Measure out 3 tablespoons of nuts for each participant, and place them on a small plate or in a tasting cup.
THE CLASS:

1. Start a discussion about how lunch has gone since the last class. What really worked for them when thinking about eating a heart-healthy lunch? What didn’t work? Help them brainstorm ways to overcome obstacles.

2. Give participants the “Snack Time” handout and go over it with them. Encourage participants to try eating several snacks according to the plan before the next class. Note that each snack provides roughly 80 to 120 calories.

3. Give each participant nuts for a snack. Point out that they are getting 3 tablespoons (1 ounce) and a nut snack should not exceed this amount.

4. Give participants the “Go Nuts!” handout and go over it with them.

5. Give participants the “Treats” handout and go over it with them. Remind them about the American Heart Association’s recommendation for added sugars: no more than 6 teaspoons per day, or 100 calories’ worth.

NOTES:

• Be sure to ask ahead of time if anyone in the class has a nut allergy. If anyone does, skip the snack.
### Snack Time

**Mandatory snack:**
1 piece of fruit

**Optional second snack:**

<table>
<thead>
<tr>
<th>Snack Options</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baby carrots or other raw vegetables with optional dip</td>
<td>10 baby carrots or ½ cup raw vegetables and ⅛ to ¼ cup dip</td>
</tr>
<tr>
<td>Yogurt or milk (nonfat, nonsugared)</td>
<td>6 to 8 ounces</td>
</tr>
<tr>
<td>Hard cheese</td>
<td>1 ounce</td>
</tr>
<tr>
<td>Low-fat hard cheese (cheese sticks)</td>
<td>1 ½ ounces</td>
</tr>
<tr>
<td>Nuts (dry, raw, or roasted, low-sodium)</td>
<td>3 tablespoons</td>
</tr>
<tr>
<td>Fruit (without added sugar)</td>
<td>1 serving</td>
</tr>
</tbody>
</table>
Go Nuts! 🍃

Q. I read something about nuts reducing the risk of developing heart disease. Is it true?

A. The Food and Drug Administration has approved a health claim for nuts: “Scientific evidence suggests but does not prove that eating 1.5 ounces per day of most nuts as part of a diet low in saturated fat and cholesterol may reduce the risk of heart disease.”

Q. What does that mean? Are nuts especially heart-healthy?

A. Yes, if you replace your mid-afternoon snack of a candy bar with an equivalent number of calories from nuts. You will decrease your intake of saturated and trans-fatty acids, and replace them with a food that is low in saturated fat, has no cholesterol, and is high in unsaturated fats. BUT, it’s important to add nuts while subtracting something else, since the increased calories will lead to weight gain.

Q. So should I go nuts with nuts?

A. If you enjoy nuts, by all means eat them in moderation. But when you add nuts to your diet, something else has to come out – preferably something that is high in trans or saturated fatty acids. Try to choose unsalted nuts.
Treats are part of a heart-healthy diet. Just keep these things in mind:

❤ Just like when we were kids, treats do not have to be on the menu seven days a week.

❤ Sweets and salty snacks should be an exception to the usual dietary pattern, rather than a regular part of it.

❤ Portion size is important with sweets – they should be modest. Use whatever strategy works:

   o Keep bite-size candy bars in the house and have just one or two.

   o If “in the house” is too tempting, treat yourself to a frozen yogurt at an ice cream shop once in a while.

❤ Rather than being restrictive and punishing, you will probably find that when you keep treats as real treats, you actually enjoy them more.
**WEEK NINE**

**CLASS 1: PUTTING IT ALL TOGETHER, PART 4**

**NUTRITION COMPONENT**
This time, we recommend doing the nutrition component first.

**BACKGROUND**
In many ways, dinner may be the meal that is most difficult to adapt to a heart-healthy eating pattern. It tends to be influenced by many factors: the way you ate growing up; the demands of your current family (or the fact that you are living alone); time available to cook; and so forth. It requires a lot of flexibility. Yet the same basic concepts that were applied to breakfast and lunch can also work for dinner. It doesn’t have to be done all at once. You can guide participants so that they are thinking about making a series of small changes in their dinner menus, rather than a major overhaul, which is much harder to sustain.


**ACTIVITIES:**

1. Discussion about snacks and treats (5 minutes)
2. Learning about choosing heart-healthy dinners (15 minutes)
3. Learning about heart-healthy cooking (5 minutes)
4. Learning about the role of alcohol in a heart-healthy diet (5 minutes)

**HANDOUTS:**

- Dinner
- Heart-Healthy Cooking
- Savor a Little Alcohol?

**PREPARATION:**

1. Become familiar with the handouts. Make enough copies for everyone in the class.
2. Read over the plan for the class and become familiar with the talking points.
THE CLASS:

1. Start a discussion about how snacks and treats have gone since the last class. What really worked with the snacks? What didn’t work? Help them brainstorm ways to overcome obstacles. What strategies work for them regarding treats?

2. Give participants the “Dinner” handout and go over it with them. Ask them to think about one or two small changes that they could make right away. For example, would they be willing to try brown rice instead of the usual white? Or add one fish meal if they usually don’t have fish? Help them think about setting S.M.A.R.T. goals to make those changes.

3. Give participants the “Heart-Healthy Cooking” handout and go over it with them.

4. Give participants the “Savor a Little Alcohol?” handout and go over it with them.
Option 1: “Traditional”

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lean meat (fish, chicken, beef, pork, lamb)</td>
<td>3 ounces</td>
</tr>
<tr>
<td>Sauce (barbeque, teriyaki, etc.), optional</td>
<td>2 tablespoons</td>
</tr>
<tr>
<td>STARCH (choose one from below)</td>
<td></td>
</tr>
<tr>
<td>Brown rice or other whole grain</td>
<td>½ cup</td>
</tr>
<tr>
<td>Pasta (preferably whole wheat)</td>
<td>½ cup</td>
</tr>
<tr>
<td>Potato (with 2 tablespoons light sour cream)</td>
<td>1 small</td>
</tr>
<tr>
<td>Vegetables (sautéed, grilled, roasted with 1 teaspoon vegetable oil)</td>
<td>½ to 1 cup</td>
</tr>
<tr>
<td>Tossed salad (mixture of lettuce and other vegetables)</td>
<td>2 cups</td>
</tr>
<tr>
<td>Dressing (vegetable oil-based)</td>
<td>2 tablespoons</td>
</tr>
</tbody>
</table>
### Option 2: “One Dish”

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vegetable lasagna (with part-skim ricotta cheese) 3-by-4-inch rectangle</td>
</tr>
<tr>
<td>(Or any other one-dish meal such as: baked ziti mixed with sautéed vegetables and topped with part-skim mozzarella cheese; or taco with chicken, vegetables, and shredded low-fat cheddar cheese. Serving size no greater than 1 cup or 3-by-4-inch rectangle.)</td>
</tr>
<tr>
<td>Tossed salad (mixture of lettuce and other vegetables) 2 cups</td>
</tr>
<tr>
<td>Dressing (vegetable oil-based) 2 tablespoons</td>
</tr>
</tbody>
</table>

### Option 3: “Vegetarian”

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tofu (extra-firm) or veggie burger ½ cup or 1 patty</td>
</tr>
<tr>
<td>Green leafy vegetable (spinach, kale, broccoli, etc.) ½ cup</td>
</tr>
<tr>
<td>Rice (brown) ½ cup</td>
</tr>
<tr>
<td>Beans (kidney, black, etc.) ½ cup</td>
</tr>
<tr>
<td>Tossed salad (mixture of lettuce and other vegetables) 2 cups</td>
</tr>
<tr>
<td>Dressing (vegetable oil-based) 2 tablespoons</td>
</tr>
</tbody>
</table>
Heart-Healthy Cooking

Even if you buy the heart-healthiest ingredients, the benefits can be lost if they are then cooked in a way that adds a lot of saturated fat. Use the following cooking methods to keep your foods heart-healthy:

❤ Bake
❤ Broil
❤ Microwave
❤ Poach (gently simmer in water or stock)
❤ Roast – vegetables, skinless chicken, lean meats (place meats on a rack so fat can drip away)
❤ Steam
❤ Lightly stir-fry or sauté in cooking spray, small amounts of vegetable oil, or reduced sodium broth
❤ Grill seafood, chicken or vegetables
**Savor a Little Alcohol?**

**Q.** Is drinking alcohol good for my heart?

**A.** Moderate alcohol consumption – which for women is no more than one drink a day – seems to be protective against heart disease. And it doesn’t have to be a 3- to 5-ounce glass of red wine. It can be white wine, or a 12-ounce beer or a drink made with an ounce to an ounce and a half of spirits. Red wine does contain phenols, compounds that have been touted to benefit the heart. But it’s the alcohol itself that studies have most consistently linked to a reduced risk for heart disease.

**Q.** I don’t usually drink, but I do want to protect my heart. Should I start having a glass of wine with dinner?

**A.** It’s not the best idea for someone who does not drink to take up drinking for the purpose of reducing cardiovascular disease. The evidence for the protective benefits of the HEART eating pattern that you’ve learned about in this class is much stronger than the evidence for alcohol. And there could be a downside:

- For some people, alcohol can be addictive.
- Even moderate alcohol intake has been associated with an increased risk of breast cancer, so if you’re at high risk for that disease, this must be taken into consideration.
- If a woman of childbearing years becomes pregnant and continues to drink, harm to the fetus may occur.
- An alcoholic beverage contains anywhere from 100 to 200 calories and could hinder weight control efforts.
The StrongWomen – Healthy Hearts Program

BLANK PAGE
EXERCISE COMPONENT

BACKGROUND
It may seem like it takes constant effort to keep some of your participants motivated and working hard enough. While they may end up getting the lion’s share of your attention, try not to neglect those at the other end of the spectrum. Participants who come each week and work very hard may seem ideal, but some of them may be working too hard. Like a yo-yo dieter, they may be yo-yo exercising: putting in an all-out effort until a short-term goal is reached. This type of participant may do great during the program, but they are much less likely to keep at it once the program has ended. Remind these participants that they should enjoy activity and feel like it’s something they could do for the rest of their lives. Continue to use the Talk Test, RPE scale, and heart rate if necessary to give them feedback about the appropriate level of intensity.
ACTIVITIES:
1. Walking or cardiovascular dance (25 minutes)
2. Stretching (5 minutes)

EQUIPMENT & MATERIALS:
- Television and DVD player, or CD player (if doing dance)

THE CLASS:
You can choose to do either the walking or the dancing. The level of intensity should be moderate-to-vigorous.
NUTRITION COMPONENT
This time, we recommend doing the nutrition component first.

BACKGROUND
In this class, you will really begin to pull it all together by guiding participants through some menu planning. It is possible to create any number of menus from the breakfast, lunch, dinner, and snack options that they’ve learned about. However the components are used, the pattern will be right.

ACTIVITIES:
1. Learning about menu planning (10 minutes)
2. Planning a week’s worth of menus (20 minutes)
HANDOUTS:

- Seven Sample Healthy Hearts Menus
- More StrongWomen – Healthy Hearts Recipes
- Menu Planning Worksheet
- The Healthy Hearts Grocery List

PREPARATION:

1. Become familiar with the handouts. Make enough copies for everyone in the class.

THE CLASS:

1. Give participants the “Seven Sample Healthy Hearts Menus” and “More StrongWomen – Healthy Hearts Recipes” handouts. Talking points:

   a. Although it is an investment of a little bit of time each week, there are many benefits to menu planning:
      
      - It helps you meet your heart-healthy goals. For example, you can plan how you are going to get two fish meals in each week, or how you are going to vary your veggies so you don’t get bored with the same ones.
      - If you have a written plan, you are much less likely to get fast food on impulse.
• It can save you time and money. You won’t waste time searching through the cupboard or making emergency trips to the store.
• It can give you peace of mind! No more frantic dinnertimes, wondering what to make.

b. The sample menus will help you think about putting what you’ve learned all together. There are a couple things to notice about them. First, within the structure of a heart-healthy eating pattern, there is a lot of variation. You can adapt it many different ways to your tastes, the season, and so forth. Second, eating in a heart-healthy way is definitely NOT about deprivation. It’s about enjoying really good food.

c. If you follow the heart-healthy eating pattern, the way these menus do, and stick to the portion sizes that you’ve learned about so far, you will be taking in about 1,400 to 1,700 calories per day. The reality is that many people tend to use bigger portion sizes and vary ingredients in a way that adds calories. So the most likely scenario is that this eating pattern will put you closer to 1,700 calories per day rather than 1,400. Everybody’s calorie needs are different; therefore, you may find that you need to adjust the serving sizes.

2. Give participants the “Menu Planning Worksheets” and the “Healthy Hearts Grocery List”. Have them fill out the menu planning worksheets, using the sample menus as a guide. As they do this, they
can also fill out the grocery list, so they’ll be prepared when they go to the store. Assist them as needed.
The StrongWomen – Healthy Hearts Program

Seven Sample Healthy Hearts Menus

WELCOMING SPRING

**Breakfast**
Yogurt (plain, nonfat) topped with low-sugar granola spiked with sunflower seeds and dried chopped apricots
Navel orange

**Lunch**
Mediterranean Salad
Whole-wheat bread with tomato and mustard with slice of cheddar cheese
Ripe pear

**Afternoon Snack**
Fresh strawberries

**Dinner**
Tossed green salad
Citrus-Grilled Salmon
Fusili pasta with a dash of olive oil and garlic and freshly grated Parmesan cheese
Steamed asparagus
SUMMER VACATION

Breakfast
Bran flakes with low-fat or fat free milk
Fresh blueberries

Lunch
Curried tuna salad sandwich with lettuce
Whole-wheat bread
Wedge of watermelon

Afternoon Snack
Berry smoothie made with fresh berries

Dinner
Garden salad
Barbecued chicken breast
Small baked potato topped with light sour cream and sprinkle of chives
Grilled summer squash and zucchini brushed with olive oil
EMBRACING FALL

Breakfast
Toasted whole-grain English muffin topped with 1% cottage cheese
Half grapefruit

Lunch
Black Bean Salad with Tomato, Avocado, and Lime dressing
Crusty French bread
Red grapes

Afternoon Snack
McIntosh apple

Dinner
Fresh spinach, tomato, and part-skim mozzarella salad
Roasted turkey breast
Roasted root vegetables (carrots, turnips, sweet potato)
drizzled with balsamic vinegar
CELEBRATING WINTER

Breakfast
Oatmeal with dried cranberries
Low-fat or fat free milk
Half grapefruit

Lunch
Hearty chicken, barley, and vegetable soup
Crusty Tuscan whole-wheat bread with Havarti cheese
Clementine

Afternoon Snack
Gala apple

Dinner
Tossed salad with balsamic vinaigrette dressing
Grilled lean sirloin steak
Buttermilk mashed potatoes
Roasted Brussels sprouts with Vidalia onions
WEEKEND FARE

**Breakfast**
Vegetable-and-cheese omelet
Whole-wheat toast
Fresh-squeezed orange juice

**Lunch**
Caesar salad with grated Parmesan cheese
Rye crispbread
Plum

**Afternoon Snack**
Pineapple slices

**Dinner**
Tossed salad
Baked flounder with lemon sauce
Rice pilaf
Steamed carrots and green beans
A VEGETARIAN AFFAIR

Breakfast
Muesli with dried fruit and nuts
Low-fat or fat free milk or soymilk

Lunch
Lentil soup
Whole-wheat bread with Swiss cheese, shredded lettuce, and zesty mustard
Tomato and cucumber salad with olive oil
Red grapes

Afternoon Snack
Honeydew melon and cantaloupe

Dinner
Tossed summer salad with vinaigrette dressing
Tofu stir-fry with seasonal vegetables
Brown rice
Black beans
WEEKDAY FARE

Breakfast
Puffed-wheat cereal with fat free milk
Fresh berries

Lunch
Mixed green salad with sliced chicken breast, vegetables, feta cheese, olives, cherry tomatoes and vinaigrette dressing
Whole-wheat bread
Apple

Afternoon Snack
Fruit smoothie with nonfat yogurt

Dinner
Chicken and vegetable stir-fry
Brown rice
More StrongWomen – Healthy Hearts Recipes

Citrus-Grilled Salmon

- Nonstick cooking spray, or 1 tablespoon olive oil
- 2 lemons
- 2 limes
- 4 cloves garlic
- Freshly ground pepper (to taste)
- 1 pound salmon fillets

Heat the grill to medium-high. Spray a large piece of aluminum foil with nonstick cooking spray and turn it up along the edges. Cut the lemons and limes in half and squeeze all of the juice into a large measuring cup, being careful to filter any seeds. Peel and chop the garlic. Then whisk the juice, garlic, and pepper together. Pour about one-quarter of the mixture into the aluminum foil; place the fish on top; pour the rest of the liquid over the fish. Loosely wrap it up, folding over the foil to keep the moisture in while grilling but with enough openings for the juice to (mostly) evaporate. Grill for about 5 minutes on one side and then open the foil to flip the fish once midway through, for a total of 10 to 15 minutes until cooked through (time will vary, depending on grill temperature and thickness of the fish). Cut into four pieces (makes four servings).
The StrongWomen – Healthy Hearts Program

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<th>Nutrition Information</th>
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Black Bean Salad with Tomato, Avocado, and Lime Dressing

One 15-ounce can black beans
½ cup diced red onion
½ cup diced green or red bell pepper
½ jalapeno pepper, cored, seeded, minced (optional)
½ cup quartered grape or cherry tomatoes
½ ripe avocado, diced
2 tablespoons fresh cilantro (coriander leaves)

Dressing
2 tablespoons fresh lime juice
1 teaspoon sherry vinegar
1 tablespoon extra-virgin olive oil
½ teaspoon ground cumin
Salt to taste
Freshly ground black pepper

Drain the beans, rinse them briefly under cold running water, and drain again. Transfer them to a bowl, add onion, bell pepper, jalapeno pepper (if using), tomato, avocado, and coriander, and toss lightly.

Combine all the dressing ingredients in a small bowl and whisk well until mixed. Add the dressing to the bean mixture and stir gently. Cover the salad with waxed paper or plastic wrap and allow the flavors to blend for 1 or 2 hours at room temperature or in the refrigerator. Bring the salad back to room temperature before serving.

Makes three to four servings.
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**Stir-Frying**

One way to stretch meat or chicken is with a stir-fry. You don’t need a formal recipe. Try the following: Sauté a little sliced onion in vegetable oil. When soft (but not brown), add thinly sliced pieces of meat. When the pink is gone, scoop out the meat and add thinly sliced vegetables to the pan – anything from summer squash and peppers to snow peas, green beans, mushrooms, and cauliflower or broccoli florets. Add denser vegetables, like carrots or broccoli, to the pan first and sauté for a minute or so. Then add the other vegetables and continue cooking until they’re wilted. Add the meat back in, stir to heat through again, and serve over brown rice.

The same stir-fry template works for extra-firm tofu, which is high in protein but virtually devoid of saturated fat. The smallish chunks of tofu you cut from the block should brown on the outside edges before you scoop them up from the pan.
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<td>Another grain CR</td>
<td>Fruit</td>
<td>Rice, potato or pasta Vegetable</td>
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<td>Cereal</td>
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<td>Fruit</td>
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<td>VEGETARIAN: Tofu or veggie burger Green legy vegetable Rice Beans</td>
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### The StrongWomen – Healthy Hearts Program

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## The Healthy Hearts Grocery List

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<th><strong>Emphasize the Right Fats</strong></th>
<th><strong>Accentuate Whole Grains</strong></th>
<th><strong>Revere Low- and Nonfat Dairy Foods</strong></th>
<th><strong>Target Heart-Healthy Proteins</strong></th>
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<td>Fresh, canned or frozen:</td>
<td>hologram</td>
<td>hologram</td>
<td>1% or skim milk</td>
<td>Fresh or frozen fish fillets</td>
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<tr>
<td>□ Asparagus</td>
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<td>□ Low- or nonfat yogurt</td>
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<tr>
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<td>□ Cheddar</td>
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**OTHER ITEMS TO BUY:**

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EXERCISE COMPONENT

BACKGROUND
While there’s nothing like getting into an exercise routine to ground you, the repetitiveness can become “stale” after a while, which can make the program difficult to stick to. If you feel like this is happening, then mix things up! Don’t just keep walking the same route time after time. If you can, find a whole new route. If you can’t, walk the same route backwards or with as many variations as possible. Be sure to mix things up in the cardiovascular dance as well. It’s easy to get into a groove and do exactly the same routine every week. Take some time and think about how to do it a little bit differently. Make sure you are saying different things as you lead the class. Encourage participants to try different types of physical activity outside of class as well.

If things are getting really boring and you and your participants are up for it, get creative! Take a cue from the American Heart Association’s Go Red for Women campaign and have everyone wear something red to class. Have a participant lead the cardiovascular dance for a song or two. Draw someone’s name from a hat and have the winner bring in her favorite song next time for the class to do part of the dance routine to.
**ACTIVITIES:**

1. Walking or cardiovascular dance (25 minutes)
2. Stretching (5 minutes)

**EQUIPMENT & MATERIALS:**

- Television and DVD player, or CD player (if doing dance)

**THE CLASS:**

You can choose to do either the walking or the dancing. The level of intensity should be moderate-to-vigorous.
NUTRITION COMPONENT
This time, we recommend doing the nutrition component first.

BACKGROUND
Because menu planning is such an important part of staying on track with a heart-healthy eating pattern, you’ll be discussing it again in this class. Many people consider menu planning to be time-consuming and, frankly, somewhat painful. In this class, you’ll give participants tools and tips to make it easier. You’ll also discuss how eating by HEART is very much related to weight loss efforts.

ACTIVITIES:
1. Learning about tips for easier menu planning (10 minutes)
2. Planning another week’s worth of menus (15 minutes)
3. Goals check-in (5 minutes)
HANDOUTS:

- Tips for Easier Menu Planning
- Menu Planning Worksheet
- Eating by HEART and Weight Loss
- HOMEWORK: Home Environment Assessment

PREPARATION:

1. Become familiar with the handouts. Make enough copies for everyone in the class.

THE CLASS:

1. Give participants the “Tips for Easier Menu Planning” handout and go over it with them.

2. Give participants several more copies of the “Menu Planning Worksheet”. Give them time to plan another week’s worth of menus. Assist them as needed.

3. Give participants the “Eating by HEART and Weight Loss” handout and go over it with them.

4. Give participants the Home Environment Assessment handout, and ask them to fill it out for the next class.
Tips for Easier Menu Planning

♥ At first, come up with as many different meal combinations as possible. Keep a list of combinations that you and your family especially liked, and use those as standbys.

♥ Plan a week’s worth of menus, but be flexible. If it’s Tuesday and you find yourself short on time, make the quick dinner you had planned for Thursday instead.

♥ Create 2 to 3 weeks’ worth of menus and then repeat them. You can prevent this from becoming boring by leaving one day for trying new things, or by using the menus for a few months and then changing.

♥ Use your week’s menu to create a grocery list. This helps make your grocery shopping more efficient. It can also help save money.

♥ Think routine when menu planning. First, find a time to put menu planning itself into your routine. Then, think about the routines that you and your family have, and plan menus accordingly.

♥ To make menu planning more budget friendly, look at grocery ads and coupons, and plan menus that use ingredients you can get cheaply that week.

♥ Think about ways to cook once and eat twice. Cook a double batch of whole-wheat pasta. Use half for a one-dish dinner and half for pasta salad for the next day. Or, you could cook a large batch of something on the weekend, freeze it, and eat it during the week.
Eating by HEART and Weight Loss

Eating by HEART very much ties in with your weight loss efforts. Here’s how:

❤ Heaping on the vegetables and fruits will fill you up with fewer calories.

❤ Emphasizing the right fats – although any type of fat has the same number of calories per gram, whether it is heart-healthy or unhealthy, when you choose fats wisely you are probably also going to be choosing lower-calories items.

❤ Accentuating whole grains will give you fiber and make you feel fuller.

❤ Revering low- and nonfat dairy will reduce the number of calories along with the amount of saturated fat and cholesterol.

❤ Targeting heart-healthy proteins can also mean fewer calories.

And, as you know, eating by HEART also involves paying close attention to your portion sizes, which will also help with weight loss.
The StrongWomen – Healthy Hearts Program

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This is a tool that will help you assess your surroundings and learn how your environment can affect your habits. Use this tool to help you discover ways to make improvements in your home that will make it easier to maintain a heart-healthy way of eating.

To get the most out of this, review the tips provided for each question. You will find new ideas on how to create and maintain a healthy home food environment.

**INSTRUCTIONS:**
1. All questions are answered by choosing A, B, or C.
2. If you feel a question does not apply to you, do not record an answer. That question will not be counted toward your total score.
3. To score your assessment, total the number of As, Bs, and Cs you have answered.
4. Read the description that corresponds to your score and review the tips provided.

<table>
<thead>
<tr>
<th>Food Group</th>
<th>Column A</th>
<th>Column B</th>
<th>Column C</th>
</tr>
</thead>
<tbody>
<tr>
<td>FRUITS &amp; VEGETABLES</td>
<td>fresh fruits/vegetables</td>
<td>unsweetened frozen fruit</td>
<td>fruit in heavy syrup</td>
</tr>
<tr>
<td></td>
<td>frozen vegetables</td>
<td></td>
<td>vegetables in high fat sauces</td>
</tr>
<tr>
<td>MEAT &amp; EGGS</td>
<td>lean meat (poultry, fish, tenderloin)</td>
<td>medium fat meat (ground beef, pork)</td>
<td>high fat meat (sausage, bacon, ribs)</td>
</tr>
<tr>
<td></td>
<td>egg whites/substitutes</td>
<td>whole eggs</td>
<td></td>
</tr>
<tr>
<td>DAIRY</td>
<td>non/low fat milk</td>
<td>whole milk *</td>
<td>coffee creamers</td>
</tr>
<tr>
<td></td>
<td>non/low fat cheese</td>
<td>full fat cheese*</td>
<td>half &amp; half</td>
</tr>
<tr>
<td></td>
<td>low fat unsweetened yogurt</td>
<td>full fat yogurt*</td>
<td></td>
</tr>
<tr>
<td></td>
<td>non/low fat sour cream</td>
<td>2% milk</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>full fat sour cream*</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>*see tips on questions 1 &amp; 2</td>
<td></td>
</tr>
<tr>
<td>FATS</td>
<td>avocado</td>
<td>light/trans free margarines</td>
<td>butter</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>margarine</td>
</tr>
<tr>
<td>SNACKS &amp; MEALS</td>
<td>low fat portion controlled frozen meals</td>
<td>sorbet</td>
<td>high fat, high calorie frozen meals</td>
</tr>
<tr>
<td></td>
<td></td>
<td>yogurt based ice creams</td>
<td>ice cream</td>
</tr>
<tr>
<td></td>
<td></td>
<td>popsicles</td>
<td>whipping cream</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>full fat &amp; sweetened frozen yogurt</td>
</tr>
<tr>
<td>OTHER ITEMS (NOT LISTED)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Your class leader can help you classify these)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td>______ A</td>
<td>______ B</td>
<td>______ C</td>
</tr>
</tbody>
</table>

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The StrongWomen – Healthy Hearts Program

2. PLEASE CHECK THE ITEMS THAT YOU TYPICALLY HAVE IN YOUR PANTRY OR CUPBOARD.

<table>
<thead>
<tr>
<th>Food Type</th>
<th>Column A</th>
<th>Column B</th>
<th>Column C</th>
</tr>
</thead>
<tbody>
<tr>
<td>__ GRAINS __</td>
<td>__ Whole grain cereal, bread, or pasta</td>
<td>__ Unsweetened cereals</td>
<td>__ Sweetened cereal</td>
</tr>
<tr>
<td></td>
<td>__ Brown rice</td>
<td>__ White bread</td>
<td>__ Breakfast pastries</td>
</tr>
<tr>
<td></td>
<td>__ Corn tortillas</td>
<td>__ White noodles/pasta</td>
<td>__ Large muffins/bagels</td>
</tr>
<tr>
<td></td>
<td></td>
<td>__ White rice</td>
<td>__ Prepackaged pastas</td>
</tr>
<tr>
<td></td>
<td></td>
<td>__ Flour tortillas</td>
<td>__ Prepackaged rice</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>__ Doughnuts</td>
</tr>
<tr>
<td>__ FRUITS &amp; VEGETABLES__</td>
<td>__ Fresh fruits/vegetables</td>
<td>__ Vegetable juice</td>
<td>__ Canned fruit in syrup</td>
</tr>
<tr>
<td></td>
<td>__ Canned fruit in juice</td>
<td>__ Sweetened dried fruit</td>
<td>__ Vegetables snack chips</td>
</tr>
<tr>
<td></td>
<td>__ Low sodium vegetable juice</td>
<td>__ Dried vegetable slices</td>
<td></td>
</tr>
<tr>
<td></td>
<td>__ Unsweetened dried fruit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>__ MEAT &amp; PROTEIN __</td>
<td>__ Canned tuna/salmon packed in water</td>
<td>__ Canned tuna/salmon packed in oil</td>
<td>__ Beef jerky</td>
</tr>
<tr>
<td></td>
<td>__ Canned/dried beans</td>
<td>__ Canned/dried beef or pork</td>
<td>__ Pork rinds</td>
</tr>
<tr>
<td></td>
<td></td>
<td>__ Low fat bean dip</td>
<td>__ Full fat refried beans</td>
</tr>
<tr>
<td></td>
<td></td>
<td>__ Low fat refried beans</td>
<td></td>
</tr>
<tr>
<td>__ DAIRY __</td>
<td>__ Nonfat powdered milk</td>
<td>__ Powered low fat/whole milk*</td>
<td>__ Condensed milk</td>
</tr>
<tr>
<td></td>
<td>__ Skim evaporated milk</td>
<td>__* See tips on questions 1 &amp; 2</td>
<td>__ Evaporated milk (regular)</td>
</tr>
<tr>
<td></td>
<td>__ Soy milk</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>__ Rice milk</td>
<td></td>
<td></td>
</tr>
<tr>
<td>__ FATS __</td>
<td>__ Olive oil</td>
<td>__ Soybean oil</td>
<td>__ Lard</td>
</tr>
<tr>
<td></td>
<td>__ Canola oil</td>
<td>__ Corn oil</td>
<td>__ Shortening</td>
</tr>
<tr>
<td></td>
<td>__ Peanut oil</td>
<td>__ Safflower oil</td>
<td>__ Coconut oil</td>
</tr>
<tr>
<td></td>
<td>__ Cooking spray</td>
<td></td>
<td></td>
</tr>
<tr>
<td>__ BEVERAGES __</td>
<td>__ Water</td>
<td>__ Diet soda</td>
<td>__ Soda</td>
</tr>
<tr>
<td></td>
<td>__ 100% fruit juice</td>
<td>__ Sports drinks</td>
<td>__ Kool Aid</td>
</tr>
<tr>
<td></td>
<td></td>
<td>__ Unsweetened tea</td>
<td>__ Fruit punch</td>
</tr>
<tr>
<td></td>
<td></td>
<td>__ Coffee</td>
<td>__ Sweetened tea</td>
</tr>
<tr>
<td>__ SNACKS __</td>
<td>__ Whole grain crackers</td>
<td>__ Salted nuts/seeds</td>
<td>__ Potato chips, candy bars</td>
</tr>
<tr>
<td></td>
<td>__ Dried fruits</td>
<td>__ Crackers</td>
<td>__ Granola bars (high fat, high sugar)</td>
</tr>
<tr>
<td></td>
<td>__ Unsalted nuts/seeds</td>
<td>__ Protein bars</td>
<td>__ Fruity snacks</td>
</tr>
<tr>
<td></td>
<td>__ Rice cakes</td>
<td>__ Pretzels</td>
<td>__ Buttered/kettle popcorn</td>
</tr>
<tr>
<td></td>
<td>__ Low fat microwave popcorn</td>
<td></td>
<td>__ Cookies</td>
</tr>
<tr>
<td>__ CONDIMENTS &amp; PRESERVES __</td>
<td>__ Spices/pepper</td>
<td>__ Low fat/vinaigrette salad dressings</td>
<td>__ Mayonnaise</td>
</tr>
<tr>
<td></td>
<td>__ Lime/lemon juice</td>
<td>__ Low fat sauces</td>
<td>__ Creamy salad dressings</td>
</tr>
<tr>
<td></td>
<td>__ Fish sauce</td>
<td>__ Ketchup</td>
<td>__ Chocolate syrup</td>
</tr>
<tr>
<td></td>
<td>__ Mustard</td>
<td>__ Unsweetened nut butters (e.g. peanut butter)</td>
<td>__ Pancake syrup</td>
</tr>
<tr>
<td></td>
<td>__ Salsa</td>
<td>__ Sugar free jam/jelly</td>
<td></td>
</tr>
<tr>
<td>__ OTHER ITEMS (NOT LISTED) __</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>__ TOTAL __</td>
<td>__ A</td>
<td>__ B</td>
<td>__ C</td>
</tr>
</tbody>
</table>

© Tufts University 408 Week 10 Class 1
3. Which best describes the **packaging and portion sizes** of the foods you have in your home? Most snacks and higher calories foods are in:

- **Individual or single serving/small packages** (e.g. single serving potato chips/pretzels, two cookies to a package, single ice cream bars, 1 ounce packages of nuts, single servings of frozen entrees, mini candy bars, etc.)
- **Regular size packages** (e.g. pints of ice cream, 12 ounce bags of chips, whole pies, blocks of cheese, bags of candy, etc.)
- **Bulk or family size packages for many items** (e.g. extra large cookies)

**Table:**

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>A = Always</th>
<th>B = Sometimes</th>
<th>C = Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Items most found in your refrigerator or freezer (look at total on question 1 on first page).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Items most found in your pantry or cupboard (look at total on question 2 on the second page).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Packaging and portion sizes of the foods you have in your home (look at what you checked on question 3 above).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Are your nutritious foods, such as fruit and vegetables, easier to access than less nutritious foods such as cookies, crackers, and cakes? For example, do you keep healthier foods stored in front of unhealthier food in the refrigerator or pantry?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

USE THE ANSWERS TO THE ABOVE 3 QUESTIONS TO FILL IN THE FIRST 3 QUESTIONS IN THE TABLE BELOW. FOR QUESTIONS 4-17, CHECK THE COLUMN THAT BEST DESCRIBES YOUR CHOICES.
<table>
<thead>
<tr>
<th>QUESTION</th>
<th>A = Always</th>
<th>B = Sometimes</th>
<th>C = Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>5. Do you keep fruits and vegetables prepared (washed and cut) so they</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>are ready to eat? For example, are fruits and vegetables washed and</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>on the countertop (if appropriate) rather than unwashed and in a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>refrigerator drawer?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Do you and your family have mealtimes away from a television where</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>it is easier to pay attention to what and how much you are eating?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Do you control the portion size of your meals by serving individual</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>plates from the kitchen rather than having large quantities of food</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>readily accessible on the table?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Do you control portion size of food when snacking? For example, do</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>you put a small amount of potato chips in a bowl rather than eat</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>straight from the package?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. What size plates do you typically use for meals?</td>
<td>Salad plate</td>
<td>Average plate</td>
<td>Large plate</td>
</tr>
<tr>
<td>7-9 in.</td>
<td>10-12 in.</td>
<td>13 in.</td>
<td></td>
</tr>
<tr>
<td>10. What size drinking glass do you typically use for meals?</td>
<td>4-6 oz.</td>
<td>7-8 oz.</td>
<td>9+ oz.</td>
</tr>
<tr>
<td>11. Do you use nonstick pans and cooking sprays rather than butter to</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>cook your meals?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Do you use a kitchen scale, measuring cups or spoons so that you</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>are better aware of portion sizes?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Do you use your garden or a shared/community garden to grow fruits</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>and vegetables?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Do you shop at a supermarket or farmers market where plenty of</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>fresh fruit and vegetables are available rather than a convenience</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>store where these items may be limited?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### The StrongWomen – Healthy Hearts Program

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>A = Always</th>
<th>B = Sometimes</th>
<th>C = Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>15. Do you make a list prior to going to the grocery store so that you are less likely to purchase unnecessary items?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. Do you utilize free membership benefits at your local supermarket so that you can purchase healthier food at more affordable prices?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17. Do you prepare more meals than you purchase? For example, do you cook at home more times a week than you buy pre-packaged, takeout or restaurant meals?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. TOTALS FOR QUESTIONS 1 - 17</td>
<td>_____ A</td>
<td>_____ B</td>
<td>_____ C</td>
</tr>
</tbody>
</table>

### SCORING FOR QUESTIONS 1 – 17:

🖤 ❤️ ❤️  IF YOU CHOSE MOSTLY As
Congratulations! The food in your kitchen and your physical environment support a heart healthy lifestyle. However, there is always room for improvement. Check your answers and the tips below to see if there are any areas you may benefit from working on.

❤️ ❤️  IF YOU CHOSE MOSTLY Bs
You are on the right track to creating a healthy home food environment. Continue to look for ways to increase your inventory of heart healthy foods and establish a heart healthy environment around your home. Check your answers and the tips below to see where you can improve.

❤️  IF YOU CHOSE MOSTLY Cs
There is room for improvement when it comes to your home food environment. There may be some foods in your kitchen that do not support a heart healthy lifestyle or you may have a physical environment that is not conducive to heart healthy eating. Read the tips on the next pages to discover ways to make the environment around your home one that supports healthier eating habits.
Tips for Creating a Heart-Healthy Home

QUESTIONS 1 AND 2:
A healthier home food environment starts with what you purchase at the grocery store. A pantry, refrigerator, or freezer stocked with whole grains, fruits, vegetables, lean meats, and low fat dairy promote heart healthy eating.

Column A contains foods that are low in fat and high in fiber and other nutrients, therefore making them the healthiest choices.

Column B contains foods that are somewhat low in fat and are suitable choices, but often not the healthiest option available. (Please note that whole milk, full fat cheese and yogurt, as listed in column B, should be given to children under 2 years of age).

Column C contains foods that are high in fat and/or sugar. Foods in this column should only be purchased and consumed occasionally. If you are purchasing candy bars, potato chips, and other items in Column C, look for fun-size or smaller portions.

QUESTION 3:
Portion control is a good way to avoid overeating. Try and stock your pantry, refrigerator, and freezer with single serving portions. If it is more practical to buy foods in bulk, find a way to split large quantities into individual serving sizes to avoid overeating at snack and meal times.

QUESTIONS 4 AND 5:
The way you store food can influence your eating patterns. Store heart healthy foods in places that are easy to reach. For example, cut melons and store them in a container near the front of the refrigerator for easy access. Pre-wash other fruits and vegetables and store these and other nutritious foods within reach on a counter or at eye level in the pantry, refrigerator, or freezer. Placing items of less nutritional value in an inaccessible location will limit unnecessary snacking.
QUESTION 6:
Meal and snack times should nourish your body. It is difficult to be aware of what you are eating when you are distracted.

QUESTIONS 7 AND 8:
People often overeat/over drink when there is abundant food and beverage within easy reach. When sitting down to a meal or when having a snack, serve food from the kitchen rather than setting large quantities on the table where second portions are easily accessible.

QUESTIONS 9 AND 10:
Filling a large plate with food may encourage you to eat larger portion sizes. Avoid excessive portion sizes by using plates that are 7 to 9 inches in diameter and remember that it is not necessary to fill your plate or finish every bite. The same is true for glassware. While water should be consumed in larger amounts, sweetened beverages such as juice should be consumed in moderation. Drink these beverages from 4 to 6 ounce glasses. Also, remember that alcoholic beverages can contribute a significant number of calories to your diet.

QUESTIONS 11 AND 12:
A kitchen with cooking equipment such as nonstick pans, cooking spray, and measuring spoons/cups will help achieve heart healthy cooking and portion control. Nonstick pans and cooking sprays can help avoid adding unhealthy fats to your meal. Using measuring spoons/cups will control your portion sizes. Try to stock items such as flour, spices, low fat broth, and other common cooking and baking ingredients so that meal preparation can be quick and easy.

QUESTIONS 13 AND 14:
If possible, use yard space to grow fresh fruits and vegetables. You may also be able to utilize a local farmers’ market for affordable fresh produce. If possible, try to avoid grocery shopping at a convenience store, where these items are limited.

QUESTION 15:
Making a grocery list prior to shopping will limit impulse buying. Make sure your list contains plenty of items listed in Column A and you will be on your way to establishing a heart healthy home food environment.
QUESTION 16:
Heart healthy foods can be affordable. Take advantage of free membership benefits at your local supermarket. With a membership, you can often purchase fresh fruits, vegetables, and other heart healthy items at a reasonable price.

QUESTION 17:
As you'll learn more about next class, eating meals out makes it difficult to accommodate a heart healthy diet because you have less control over what goes into your meal. Try limiting meals eaten away from home to 2 or 3 times a week, and make prepackaged or take out meals more nutritious by adding extra fruits and vegetables.
EXERCISE COMPONENT

BACKGROUND
You might check in with participants about pedometers. Have they been using them? How is it going? The pedometer can be a great tool for staying committed to exercise even after the program ends.

ACTIVITIES:
1. Walking or cardiovascular dance (25 minutes)
2. Stretching (5 minutes)

EQUIPMENT & MATERIALS:
- Television and DVD player, or CD player (if doing dance)

THE CLASS:
You can choose to do either the walking or the dancing. The level of intensity should be moderate-to-vigorous.
The StrongWomen – Healthy Hearts Program

WEEK TEN
CLASS 2: WEIGHT CONTROL FOR A LIFETIME, PART 1

NUTRITION COMPONENT
This time, we recommend doing the nutrition component first.

BACKGROUND
As the StrongWomen – Healthy Hearts classes begin to wind down, it’s important to provide women with a good set of tools to help them maintain their heart healthy habits. It’s all too easy to fall back into old patterns once the regular meetings, coaching, and support are gone. In this class, you’ll help women start to think about how they can restructure their homes so that heart healthy living comes more naturally. You’ll also talk about two other strategies related to the home environment. Where and when participants eat within the home will also determine their success with weight control.
ACTIVITIES:

1. Go over the Home Environment Assessment handouts that they prepared for this week (10 minutes)
2. Discuss S.M.A.R.T. goals to create a heart-healthy home environment (10 minutes)
3. Learn about eating only at a table designated for dining (5 minutes)
4. Learn about setting a kitchen closed policy to help with weight control (5 minutes)

HANDOUTS:

- Heart S.M.A.R.T. Goals for a Healthier Home
- Eat Only at a Table Designated for Dining
- Set a Kitchen-Closed Time

PREPARATION:

1. Review the Home Environment Assessment tool from last week.
2. Become familiar with the handouts. Make enough copies for everyone in the class.
THE CLASS:

1. Go over the Home Environment Assessment tool with participants. What did they think of this exercise? Were they surprised by anything? Be sure to go over the tips.

2. Give participants the “Heart S.M.A.R.T. Goals for a Healthier Home”. Have them develop goals. Also check in on how their other S.M.A.R.T. goals have been going over the last few weeks.

3. Give Participants the “Eat Only at a Table Designated for Dining” handout. Talking points:

   a. If you sit at a table, you are more likely to eat slowly and mindfully. You’re focused on the food. You’ll be able to enjoy it more and you will pay more attention to the signals from your body indicating that you are full.

   b. When meals become haphazard, the eating gets less healthful; the calories get piled on willy-nilly because it’s harder to keep track; and much of the enjoyment of food goes out the window.

   c. If you live with others, sitting down to meals is not always easy to negotiate. But if you make the effort, you will likely see the benefits. If you also keep the TV off, you can improve communication and enjoy each other’s company.
4. Give participants the “Set a Kitchen-Closed Time” handout. Go over it with them.
Heart S.M.A.R.T. Goals for a Healthier Home

Think about a way you could take a small step or two toward changing your home environment to make it easier to lead a heart-healthy lifestyle. What do you feel best about trying to do? What seems easiest to you to try? Set S.M.A.R.T. goals:

1. ____________________________________________
   ____________________________________________
   ____________________________________________

2. ____________________________________________
   ____________________________________________
   ____________________________________________
Eat Only at a Table Designated for Dining

❤️ When you eat on the run, you tend to eat extremely fast – too fast for your brain to pick up signals from your stomach that it is full. You can end up consuming many more calories than your body is hungry for.

❤️ When you slow down and eat at a table, you taste and enjoy your food more. That can cut down on the amount you eat because you feel more satisfied with less.

❤️ You enjoy the eating experience a lot more when you have a meal in a relaxed atmosphere without distractions, including the television.
Set a Kitchen-Closed Time

And stick to it. Here’s why:

❤️ A lot of people are evening eaters for a lot of reasons – boredom, TV food ads, and so forth.

❤️ Evening is prime time for ice cream, chocolate, chips, and other high-calorie snacks.

❤️ If you make a pact with yourself not to eat after dinner, you could save hundreds of calories a day.

❤️ People’s kitchen-closed times will vary. You may not get home from work until late. That’s fine. You just want to prevent dinner from becoming the beginning of an eating activity that continues until you go to bed.
EXERCISE COMPONENT

BACKGROUND
Visualization is very big in competitive sports. It’s a process where an athlete calls up an image of herself succeeding over and over as she prepares to meet her goal. Visualization can work on a number of levels, and participants might use this powerful technique as another tool to help them meet their goals. Here is how it can be done:

- Find a place to sit comfortably without being interrupted.
- Relax, close your eyes, and picture yourself succeeding.
- Let your mind conjure up as many details as possible. See yourself accomplishing the task step by step.

Participants can stay motivated by visualizing the changes they are working to achieve. For example, they might visualize themselves fitting into an outfit they haven’t worn in years. They can overcome obstacles by visualizing themselves handling a difficult situation.
The StrongWomen – Healthy Hearts Program

ACTIVITIES:

1. Walking or cardiovascular dance (25 minutes)
2. Stretching (5 minutes)

EQUIPMENT & MATERIALS:

• Television and DVD player, or CD player (if doing dance)

THE CLASS:

You can choose to do either the walking or the dancing. The level of intensity should be moderate-to-vigorous.
NUTRITION COMPONENT
This time, we recommend doing the nutrition component first.

BACKGROUND
Creating a heart-healthy home environment is an important step toward setting yourself up for a lifetime of heart-healthy eating, but as you are probably well aware, it is not the whole story. As Americans we spend nearly half of our food dollars on food prepared away from home. It wasn’t always this way. Consumption of foods outside the home has increased over the past 2 decades, paralleling the increase in obesity. Several studies have demonstrated that the more frequently someone eats out, the greater that person’s intake of calories, fat, and sodium.

You can encourage your participants to eat at home more often as a way to have better control over what they eat, but it is not realistic to expect that they will do this 100% of the time. Eating out is a social activity, a pleasure, a reward, and sometimes a necessity. There are many strategies that can be used to make it more heart healthy.
ACTIVITIES:

1. Learning about healthy eating at restaurants (10 minutes)
2. Role-playing restaurant ordering (15 minutes)
3. Discussion about restaurant eating (5 minutes)

HANDOUTS:

- Tips for Heart-Healthy Restaurant Eating
- Menu

PREPARATION:

1. Become familiar with the handout. Make enough copies for everyone in the class.
2. Become familiar with the menu exercise.
THE CLASS:

1. Give participants the “Tips for Heart-Healthy Restaurant Eating” handout and go over it with them. Talking points:

   a. It’s best to prepare your own meals as often as possible. That way you have complete control over what and how much you are eating. But the reality is that many women are maxed out time-wise and must rely, at least in part, on restaurant food, takeout food, or prepared supermarket foods.

   b. There are ways to find the heart-healthier choice, even in fast-food restaurants. Many of them will now give you nutrition information on their menu items if you ask for it. Also, more and more communities are legislating that calorie information be posted on menu boards. (Go over tips.)

   c. The examples show the numbers to illustrate how following the heart-healthy tips can work when you’re eating out. It’s important to note, though, that even the “better” choices are sometimes still fairly high in calories and saturated fats. That’s why it’s absolutely best to eat meals you’ve cooked yourself whenever you can!

2. Give participants the menu. Ask for one volunteer to pretend to be a customer. Have her come up to the front of the class. Tell the “customer” that her mission is to order heart-healthfully from the
menu. Give the “customer” a little bit of time to read it over, and then pretend to take her order. There are a number of points that can be made during this exercise:

a. Appetizers:
   1. The salad is clearly the heart-healthiest choice.
   2. The customer can ask for the dressing on the side.

b. Steak:
   1. It is a “loin” and therefore will help Target heart-healthy proteins. Also, it is cooked in a heart-healthy way: broiled.
   2. Any visible “white” – fat – on the meat can be trimmed off.
   3. It is a very big steak though – the customer can ask for half to be wrapped up right away.

c. Chicken:
   1. Although chicken breast is a lean meat, the stuffing is probably going to add a lot of calories and saturated fat. It’s probably not the best choice.
   2. If it is ordered, the customer could ask for it without the sauce, or with the sauce on the side so a very small amount can be used.
d. Fish:

1. Grilled fish helps Target heart-healthy proteins. The hollandaise sauce isn’t heart-healthy, though. The customer could ask to hold the sauce altogether or have it on the side, so a small amount can be used.
2. The customer could Heap on the vegetables by asking to replace the scalloped potatoes with an extra serving of asparagus, or with another type of vegetable. Or she could Accentuate whole grains by asking for the bulgur pilaf that comes with the chicken instead of the potatoes.

e. Meatloaf:

1. This probably isn’t the heart-healthiest choice. Most ground beef is high in saturated fat.
2. If the customer did order this, she could ask what is in the mushroom gravy. It could be anything from mostly vegetable-based to cream-based.
3. The customer could Heap on the vegetables by replacing the mashed potatoes with an extra serving of green beans, or with another type of vegetable. Or she could Accentuate whole grains by asking for the bulgur pilaf that comes with the chicken instead of the potatoes.

f. If there is time, have another participant role-play ordering from the menu.
3. Ask participants to discuss their experiences eating in restaurants. What has worked for them? What are the biggest obstacles?
Tips for Heart-Healthy Restaurant Eating

❤ Order fruits and vegetables or salad (dressing on the side) if possible.

❤ Order water or a calorie-free drink.

❤ Pay special attention to portion size.
   • In a sit-down restaurant, really do ask for at least half the portion to be wrapped up before it’s even brought to the table.
   • Share a dish with a companion.
   • Ask for a side dish or appetizer-size serving.
   • When you do eat at a fast-food restaurant, order small sizes.

❤ Don’t be afraid to ask for meals exactly as you want them. After all, you’re paying for them! Ask them to hold the sauce or double the vegetables.

❤ When reading menus, look for heart-healthy cooking methods: steamed; baked; broiled; poached; grilled; lightly sautéed or lightly stir-fried.

❤ Watch out for terms like butter sauce, fried, crispy, creamed, au gratin, au fromage, hollandaise, bernaise.
Example 1: cooking methods

McDonald’s Premium Chicken Classic Sandwich

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<tr>
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<th>Grilled</th>
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<tr>
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<td>420</td>
</tr>
<tr>
<td>Saturated fat</td>
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<td>2g</td>
</tr>
</tbody>
</table>

Example 2: hold the sauce

Wendy’s Premium Fish Fillet Sandwich

<table>
<thead>
<tr>
<th></th>
<th>With tartar sauce</th>
<th>Without tartar sauce</th>
</tr>
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<td>390</td>
</tr>
<tr>
<td>Saturated fat</td>
<td>4g</td>
<td>2.5g</td>
</tr>
</tbody>
</table>

Example 3: pay attention to portion sizes

Burger King Fries

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<thead>
<tr>
<th></th>
<th>Large</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Calories</td>
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<td>220</td>
</tr>
<tr>
<td>Saturated fat</td>
<td>6g</td>
<td>2.5g</td>
</tr>
</tbody>
</table>
Menu

Appetizers

Sautéed Shrimp with Butter and Garlic
Stuffed Mushrooms
Creamy Corn Chowder
Fresh Garden Salad with Balsamic Vinaigrette

Entrees

**Tenderloin Steak with Sweet Peppers**
Ten-ounce tenderloin steak marinated overnight in a savory blend of pepper vinegar, garlic and onions. Broiled and served sizzling with sweet peppers.

**Stuffed Chicken Breast**
Oven roasted chicken breast stuffed with garlic herb cheese, served with lemon butter sauce, lightly sautéed fresh spinach, and bulgur pilaf.

**Grilled Halibut**
Grilled halibut served with hollandaise sauce, scalloped potatoes, and grilled asparagus.

**Savory Meatloaf with Mashed Potatoes**
Choice ground beef meatloaf served with mushroom gravy, buttery mashed potatoes, and steamed fresh green beans.
EXERCISE COMPONENT

BACKGROUND
As this series of classes winds down, be sure to let women know about other exercise programs that they might be interested in. Many fitness and community centers have specific programs geared toward women and/or older adults. These programs are often not well advertised. Inquire about these programs for your participants, and encourage them to inquire on their own as well. Local public facility options include (but are not limited to): gyms/fitness centers; YMCA/YWCA; senior/community centers; church groups; and older adult housing facilities.

If you are running a StrongWomen strength training program, be sure to let participants know about that as well. They may not realize that strength training is also good for their hearts. It can enhance the effect of aerobic exercise through whole-body muscle conditioning. There’s also evidence that it lowers blood pressure. And it reduces fat around the abdomen, which lowers heart disease risk, too.
ACTIVITIES:

1. Walking or cardiovascular dance (25 minutes)
2. Stretching (5 minutes)

EQUIPMENT & MATERIALS:

- Television and DVD player, or CD player (if doing dance)

THE CLASS:

You can choose to do either the walking or the dancing. The level of intensity should be moderate-to-vigorous.
WEEK ELEVEN
CLASS 2: WEIGHT CONTROL FOR A LIFETIME, PART 3

NUTRITION COMPONENT
This time, we recommend doing the nutrition component first.

BACKGROUND
In this final class on weight control for a lifetime, you’ll focus on a third major trouble spot for many women: the social environment. Although loved ones may express support, many balk when they realize that their lives are affected as well. Most mean well - it’s just human nature to resist change! You’ll teach participants the skills to negotiate with well-meaning friends and family, as well as to be able to be assertive with those who aren’t so well-meaning. Another major issue for many women is social events. There are many occasions to overeat: weddings, showers, holidays, potlucks and get-togethers. In this class you will help participants learn to enjoy these events while remaining committed to heart health and weight control. At the end of the class, women will have an opportunity to share their experiences and advice with each other.
ACTIVITIES:
1. Learning what to do when loved ones don’t support your efforts (5 minutes)
2. Role-playing exercise on communicating assertively for weight control (10 minutes)
3. Learning how to stay heart-healthy at social events (5 minutes)
4. Discussion – sharing experiences and advice (10 minutes)

HANDOUTS:
- Weight Loss – and the People Close to Your Heart
- Communicating Assertively for Weight Control
- Social Events and Heart Health

PREPARATION:
1. Become familiar with the handouts. Make enough copies for everyone in the class.
2. Become familiar with the role-playing exercise.
THE CLASS:

1. Give participants the “Weight Loss – and the People Close to Your Heart” handout and go over it with them.

2. Give participants the “Communicating Assertively for Weight Control” handout and go over it with them. Have participants work in pairs. Have them practice assertively responding to the example situations, or to situations they have actually encountered. Go around to the pairs, see how they are doing, and assist them as necessary.

3. Give participants the “Social Events and Heart Health” handout and go over it with them.

4. Have women discuss common situations they have encountered in trying to maintain healthy behaviors in social settings. What is the hardest? What strategies have worked best? They can use each other as a rich source of information and support for dealing with some very challenging situations.
The StrongWomen – Healthy Hearts Program

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Weight Loss – and the People Close to Your Heart

Family and friends may be very supportive of your heart-health and weight-loss efforts in theory, but may not be as thrilled if the changes you’re making affect what they eat as well. There are several strategies you can use to make everyone happy.

❤️ Make small changes, rather than drastic ones, like switching from whole milk to 2% before going to fat free. This will help you accept the changes more readily also.

❤️ Enlist their help with menu planning. You will still make healthy choices, but they will feel they have some control by being able to contribute to what those healthy choices are.

❤️ Especially if you live with others, it is usually not practical to remove all sweets and other temptations from your house. You can put these items in a cupboard or on a shelf where you don’t normally go, so you’re not always being reminded that they are there.

❤️ While you don't necessarily want to “sneak” healthy foods in, many times you can make substitutions that they won’t even notice.

❤️ Plan ahead to deal with challenging situations. When you go out to lunch with your friends, plan what you’ll eat so you’ll avoid eating too much; plan what you’ll say to people who always seem to try to talk you out of heart-healthy eating. Choose a location that will allow everyone to have choices, including you.

❤️ Find people who are supportive, and turn to them when you really need a pep talk.
Communicating Assertively for Weight Control

What does it mean to communicate assertively? It is telling others what you want and need in your weight control efforts in a strong but respectful way.

To communicate assertively:

- State what you want clearly and directly, using “I” statements. For example: “I need you to wash the dishes after dinner so I’ll have time to go for a walk.” This may lead to negotiation, which is fine, but you can't work things out with others if they have no idea what you want or need.
- Repeat yourself: become a broken record. This works well when responding to unwanted advice. For example, “You should go on the Atkin’s Diet. That’s the only way to lose weight quickly.” Respond with: “There are many roads to Heaven. This one works best for me.” Just keep repeating a simple statement like this. The broken record also works well when others are pushing you to eat things you don’t want to eat.
- Use assertive body language: look others in the eye, stand (or sit) tall, and keep your voice steady and even. You want to be open and friendly, but firm and unapologetic.

Some practice situations:

You are at a fast food restaurant with a friend. As you are ordering a salad, your friend starts going on about eating “real” food and enjoying life a little. How do you respond?

Your husband keeps putting the package of chocolate cookies on a common shelf. It’s really hard not to eat them when you see them all the time. What could you say to him?
Social Events and Heart Health

❤ If you’re going to a party, eat ahead of time. That way you won’t be hungry and tempted by all the high-calorie foods.

❤ At a buffet, instead of taking a little bit of everything, rate the foods, and then take only the ones you think are the best. Savor a small portion. Then move far away from the buffet table so that if you want more, you’ll have to make an effort to get it.

❤ Focus on activities rather than eating, and on people rather than food.

❤ Bring your own healthy dish to a potluck or party.

❤ The more you put on your plate, the more you’re likely to eat. Take small portions at first. You can always get seconds.

❤ Be extra careful not to drink your calories.

❤ Be prepared to decline high-calorie foods politely. For example, “Thank you, but I couldn’t eat another bite – everything was delicious.” (Become a broken record if necessary)

❤ Exercise before an event. That will help put you in heart-health mode.

❤ Don’t beat yourself up if you end up eating too much anyway. Just focus on getting right back on track the next day.
EXERCISE COMPONENT

BACKGROUND
If participants have enjoyed walking with each other, encourage them to start their own walking group once the program ends. Encourage them to set S.M.A.R.T. goals for the group, such as walking once a week for four consecutive weeks. Help them map out walking routes. Where are the places with sidewalks in good condition, ample crosswalks, and working traffic signals? Where are the places to avoid – lots of litter, speeding traffic, poor lighting? Most likely, you have a lot of valuable knowledge that you can pass on to help make their group a success. Share this knowledge and any information you have about community resources.

ACTIVITIES:
1. Walking or cardiovascular dance (25 minutes)
2. Stretching (5 minutes)

EQUIPMENT & MATERIALS:
- Television and DVD player, or CD player (if doing dance)
THE CLASS:

You can choose to do either the walking or the dancing. The level of intensity should be moderate-to-vigorous.
WEEK TWELVE
CLASS 1: STRESS REDUCTION

NUTRITION COMPONENT
This time, we recommend doing the nutrition component first.

BACKGROUND
Our emotions and our hearts are inextricably interwoven. A growing body of scientific evidence is beginning to confirm that stress and its associated emotions affect cardiovascular health.

ACTIVITIES:
1. Learning about the effects of stress, hostility, and depression on the heart (5 minutes)
2. Learning how to take steps to gain emotional equilibrium (10 minutes)
3. Meditation exercise (15 minutes)
HANDOUTS:

- Stress and the Heart
- Regaining Emotional Equilibrium

PREPARATION:

1. Become familiar with the handouts. Make enough copies for everyone in the class.
2. Become familiar with the meditation exercise instructions. Prepare the room by dimming harsh lights and making sure it is free from noisy distractions.

THE CLASS:

1. Give participants the “Stress and the Heart” handout and go over it with them. Talking point after you have finished:
   
   a. If you are angry, depressed, or just stressed out, you do not have to live with the negative state of mind, and let it keep taking a toll on your heart. There is much that you can do to take care of yourself emotionally.

2. Give participants the “Regaining Emotional Equilibrium” handout and go over it with them.
3. Guide participants through the meditation exercise. You will start them out with “mindful meditation”, and then move them into a type of transcendental meditation. Both of these types have shown benefits in research studies.

   a. Have them get into a comfortable position. Suggestions:
      - Sitting on the floor with the legs crossed
      - Lying on the floor with the knees bent
      - Sitting in a chair – the head, neck and back should be straight, but not stiff

   b. Ask them to relax their muscles.

   c. Tell participants to become aware of their breath. Tell them, “Focus on the air moving in and out of your body as you breathe. Feel your chest rise and fall. Feel the air enter your nostrils and leave your mouth. Notice how each breath is a little bit different.” Give them a few minutes to do this.

   d. Tell participants, “It may be hard to stay focused on your breath. You are probably having a lot of other thoughts. Don’t ignore them or try to stop them, just notice them and then gently bring your attention back to your breath.” Give participants a few more minutes to practice this.

   e. Tell participants that they will now be moving into transcendental meditation, which uses a mantra – a soothing
sound. Ask them to think about a word or short phrase that makes them feel peaceful. If they can’t think of anything, they can try the words “Ham Sah”, which means “I am that” in Sanskrit.

f. Tell participants, “Breathe in and say the first part of your word or phrase. For example, say ‘Ham’ (‘h-ah-m’) as you breathe in, as if you are sinking into a hot bath. Then exhale, saying ‘sa’ (‘s-ah’), which should feel like a sigh.” Have participants continue doing this for several minutes. Tell them that if their minds wander, they should just notice the thoughts, say “oh well,” and return to the repetition. NOTE: If they feel funny saying the mantra out loud, it is fine to say it silently.

g. To finish, tell them to slowly turn their attention back to the room. Then have them open their eyes.
Studies have shown that people with a quick temper are at greater risk of suffering a heart attack or dying from heart disease.

Hostility may raise blood pressure and contribute to the development of atherosclerosis.

Anger is believed to prompt the release of stress hormones, which over the long term can damage the delicate linings of the blood vessels surrounding the heart. They may set the stage for a heart attack or stroke in other ways, as well.

Just like hostile people, depressed people have a higher risk of having a heart attack. Depression affects women more than men.

Depressed people may have a harder time taking care of themselves by eating right and exercising.

Depressed people also seem to have a lower heart rate variability. What this means is that their hearts are less adaptable to situations and won’t change their “pace” sufficiently when they go, for example, from sitting in a chair to climbing a staircase.

Depression may look sluggish on the outside but can really be churning up the system from the inside. Like angry people, depressed people also release high levels of stress hormones that unduly tax the cardiovascular system.
Regaining Emotional Equilibrium

There are a number of anxiety-reducing practices that millions of people use across the globe to take care of themselves emotionally – and thereby take better care of their hearts.

*Meditation*
Research to date has focused mainly on transcendental meditation. This type of meditation has been shown to lower blood pressure and reduce stress.

To do it: Simply sit for 20 minutes twice a day with your eyes closed. During that quiet time, repeat a mantra – a soothing sound – that allows the mind and body to settle down and release stress and hostility.

*Tai Chi*
This is an ancient, graceful martial arts form in which slow movements flow one into the other. It lowers the levels of stress hormone in the body and also lowers blood pressure. It may also improve cardiovascular function in general.

To do it: You do relaxing moves, or poses, with names like White Crane Spreads Its Wings and Step Up to Seven Stars. The moves emphasize balance, breathing, and body awareness.

Your local Y or health club probably offers a tai chi class. There are also good tai chi videos that you can use at home. You can get some of them from Tai Chi Productions (Phone: 973-282-9698; Web: www.taichiproductions.com)

Tai chi can be posturally demanding. If you have balance problems, you may need to modify the program somewhat.
Yoga
There isn’t much research that shows direct effects of yoga on heart health, but there are reasons to believe that it is beneficial. It increases the mind’s capacity for meditation, which relieves stress.

To do it: There are many types of yoga. The most common in the U.S. is hatha yoga, which involves a variety of static postures and concentrated breathing exercises.

Your local Y or health club is a good place to try on yoga for size by taking a class. Look for an instructor with several years’ experience and make sure his or her style feels right to you. There is no national standardized credentialing program for yoga instructors, so you need to go with your gut.

Optimism
Optimistic people have less heart disease than pessimists.

To do it:
❤️ Dispute negative thoughts.
❤️ Instead of blaming yourself, go over all the contributing factors to a situation and work through how they might be overcome.
❤️ Write things down – it helps put the stress outside of yourself, and it’s easier to look at your situation objectively.
Social Outreach
Social isolation is one of the worst things for stress and depression. It gives negativity every opportunity to fester – and work its way into your heart, both figuratively and literally. People with only a small network of family and friends have a two- to threefold greater risk for developing heart disease over time than others.

To do it: If you’ve been socially isolated, it may seem overwhelming to “get out there.” There are some strategies to make it easier:

❤️ Find a walking partner. It fosters friendship without forcing it, and you’ll get some exercise, too!

❤️ Try volunteer work. It builds a social component into your life without putting the emphasis on socializing per se. Volunteering opportunities abound. You can work for a political or social cause, serve food in a soup kitchen, mentor young people, and so on!
EXERCISE COMPONENT

BACKGROUND

Research has shown over and over again that people who keep records of the exercise they do (and the meals and snacks they eat) are the ones most likely to stick to their plan. This tool can help women set short and long-term goals, review progress, and learn what is working and what isn’t. It forces them to be accountable to themselves and helps keep them motivated because they have a written record of progress. Encourage participants to keep using an exercise log once the program has finished. Encourage them to keep using pedometers as well – it can also be a great tool to stay on track.
ACTIVITIES:

1. Walking or cardiovascular dance (25 minutes)
2. Stretching (5 minutes)

EQUIPMENT & MATERIALS:

- Television and DVD player, or CD player (if doing dance)

THE CLASS:

You can choose to do either the walking or the dancing. The level of intensity should be moderate-to-vigorous.
WEEK TWELVE
CLASS 2: HEART HEALTHY POTLUCK!

EXERCISE COMPONENT
You will want to exercise first – you will be eating in the second part of class. Happy Heart Healthy Potluck!

BACKGROUND
Today, you will be exercising, then taking the final measurements on your participants, and finally having your Heart Healthy Potluck. Between the measurements and the potluck, this class will go long. Be sure to let your participants know.

Hopefully, participants will leave class ready and eager to keep exercising on their own. Many will be able to sustain this for weeks or months. However, even someone with the best of intentions can get thrown off. It could be anything, from a short trip to the major illness of a family member.

There are several tips you can offer participants to help them stay on track:

• Schedule times to exercise. If workouts aren’t planned, other things will quickly fill up any spare time.

• When traveling, stay at a hotel that has a fitness center – many do. Or take the opportunity to go for long walks and explore a new environment.
• When something comes up that throws you off temporarily, resume your routine right away. If you give yourself a few extra days off, they tend to stretch into weeks and months. As you get back into it, exercise for a shorter time or intensity if necessary.

ACTIVITIES:

1. Walking or cardiovascular dance (25 minutes)
2. Stretching (5 minutes)
3. Taking final measurements (30-45 minutes)

EQUIPMENT & MATERIALS:

• Television and DVD player, or CD player (if doing dance)
• Pens
• Digital scale
• Metal tape measure
• Flat, square headboard
• Fruit and Vegetable Brief FFQ
• IPAQ

THE CLASS:

1. For exercise, you can choose to do either the walking or the dancing. The level of intensity should be moderate-to-vigorous.
2. After exercise, have the women complete the Fruit and Vegetable Brief FFQ and IPAQ forms. You will be provided with these with the Participant ID numbers already on them.

3. While the women are filling out the forms, take their weights. Follow the same protocol as outlined in Chapter 5. Be sure to choose an area that will protect participants’ privacy. You will be provided with forms to record participants’ weights, and there is also one following this page in case you need extras.

4. Be sure to double-check that all women have completed the forms and had their weight measured, using the Check-Out Checklist that follows.
**DATA COLLECTION FORM**  
StrongWomen – Healthy Hearts

Date: ____ / ____ / ____  
Participant ID Number: ____________________  

---

**Weight Measurement**  
Record each measurement as it is displayed.  
Take three (3) measurements within one half kilogram (0.5 kg) or one pound (1 lb) of each other.  
**CIRCLE whether the weight is in kg or lbs:**

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<th>POUNDS</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
<tr>
<td>Weight 2</td>
<td>______ . ____</td>
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<tr>
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<td>Weight 4</td>
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</tbody>
</table>

---

**Weight Measurement - Example**  
Record each measurement as it is displayed.  
Take three (3) measurements within one half kilogram (0.5 kg) or one pound (1 lb) of each other.  
**CIRCLE whether the weight is in kg or lbs:**

<table>
<thead>
<tr>
<th>KILOGRAMS</th>
<th>POUNDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weight 1</td>
<td>67 . 4</td>
</tr>
<tr>
<td>Weight 2</td>
<td>67 . 8</td>
</tr>
<tr>
<td>Weight 3</td>
<td>67 . 5</td>
</tr>
<tr>
<td>Weight 4</td>
<td>______ . ____</td>
</tr>
<tr>
<td>Weight 5</td>
<td>______ . ____</td>
</tr>
<tr>
<td>Weight 6</td>
<td>______ . ____</td>
</tr>
</tbody>
</table>
The StrongWomen – Healthy Hearts Program

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## CHECK-OUT CHECKLIST

<table>
<thead>
<tr>
<th>Site</th>
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<table>
<thead>
<tr>
<th>Part. ID #</th>
<th>FFQ</th>
<th>IPAQ</th>
<th>Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>
NUTRITION COMPONENT

BACKGROUND
It’s time to celebrate!

EQUIPMENT & MATERIALS:
- Plates, cups (can be disposable)
- Silverware (can be disposable)
- Napkins
- Beverages
- CD player (optional)

HANDOUTS:
- StrongWomen – Healthy Hearts Class Completion Certificates

PREPARATION:
1. Prepare a Class Completion Certificate for each participant.
2. If you want, decorate the room with a festive heart theme.
THE CLASS:

1. At the beginning of the class, have an “Awards Ceremony” and present each participant with her Class Completion Certificate

2. Have participants talk about the heart healthy dishes that they brought in. Eat and enjoy!
CERTIFICATE OF COMPLETION

This certificate is awarded to

________________________________

In recognition of successfully completing the STRONGWOMEN – HEALTHY HEARTS 12-week program to reduce risk of developing heart disease.

Signature________________________
Date________________________

© Tufts University 475 Week 12 Class 2
The StrongWomen – Healthy Hearts Program

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Chapter 7: Leadership: how to maximize your skills to become the best leader possible

Part A: You’re already a leader – why should you read this chapter?
Whether you are relatively new or extremely experienced as a trainer or a leader, we at StrongWomen believe there are always skills that can be improved. We recommend that you read this chapter, since there are a number of approaches to improving leadership skills and group dynamics that we feel may benefit your StrongWomen – Healthy Hearts Program. Some may seem obvious; others may be new to you.

Part B: Professionalism
One of the most important characteristics of a good StrongWomen – Healthy Hearts Program leader is professionalism. Professionalism means taking the job seriously and presenting yourself in a manner that defines your role as a leader respected by the group.

1. Stick to conversational topics appropriate for the class; avoid talking about personal matters; recognize when participants bring up inappropriate topics. (See Part D.)
2. Gain knowledge about physical activity and nutrition outside of class through reading or talking to professionals, and stay up to date with recent developments in these fields.
3. Do not attempt to diagnose medical conditions or problems. Always advise participants to see a doctor if they have any concerns about their health.
4. Do not advocate fad diets or programs. Many times these diets can be unhealthy, and they are not based upon legitimate research. Every participant
should consult her doctor before starting a diet that in any way restricts her nutrient intake, in order to avoid complications or long-term problems.

**Part C: Courtesy and respect**

To run a professional program, the leader should ensure that the group maintains a level of courtesy and respect for its members. The following suggestions for displaying courtesy and respect should make you a more effective class leader.

**Enthusiasm**

As the Program Leader, you should have a strong understanding of health, fitness, nutrition, and exercise technique, and you should be excited about running several classes per week. Instructors must be comfortable with the population they will be training – in this case, middle-aged and older women.

**Organization and punctuality**

StrongWomen – Healthy Heart Program Leaders must be organized and punctual. Ideally, Leaders will have a proven track record of good organizational skills and punctuality.

**Dress**

As the Program Leader of an exercise program, please be sure to dress appropriately, and gently encourage others to do the same.

**DO WEAR**

❤️ Modest clothing that will not distract from the task at hand or offend anyone. Cotton or synthetic, breathable attire is best.
Appropriate clothes for the temperature of the room. Layers are always a good idea if you’re not sure, or if you tend to warm up during exercise.

A good pair of athletic shoes.

A hair-tie if you have long hair to keep it from hanging in your face.

DON’T WEAR

Excessive makeup. Makeup can have a tendency to run if you sweat when you exercise. You want to retain a professional demeanor that communicates that you are there to exercise.

Heavy perfume. It can react with sweat and produce an unpleasant odor.

Smile 😊

It’s amazing how simple it seems, but psychologists have proven that people are more likely to listen to, and enjoy being around, those who smile at them. We all know that it takes more muscles to frown than to smile, so go ahead and do it! Greet participants as they enter the room with a smile, smile when you can during the activities (but don’t force it), smile when it’s over – GENUINE smiles make people happy, and happy people means healthy people!

Learn names…and more

Knowing a person’s name is a good preliminary way to make her feel important and to show that you really care. Fine, you say, but what if I’m just really bad with names? Here are some suggestions for learning names:
Ask the participants for a current photo when they register, and practice learning their names at home.

Have them wear nametags at the first class, but be careful not to become dependent on them.

Do an “ice-breaker” the first class. Have everyone go around the room, say their name and something interesting about themselves. Try to associate their facts about themselves with their names – even if you can only remember half, that’s a start.

When someone introduces herself to you, repeat her name back to her as you introduce yourself. (Ex. Molly approaches you and says, “Hi, I’m Molly.” You reply, “Hi Molly, I’m Caroline.”) Sometimes just saying her name that first time will help it stick in your memory.

The best way to learn someone’s name is the “natural” way – by really getting to know that person. Make an effort to ask each of the participants about themselves, particularly about their health and progress. At the same time, be aware of each person’s comfort level for personal questions. Be sure not to probe deeper than is appropriate.

Part D: Communication

An important group dynamic to foster is that of open, productive communication. Keep in touch with each individual throughout the program to make sure they continue to have realistic goals and expectations and feel good about what they
have achieved. If a participant misses two sessions in a row and you don’t know why, consider giving her a call, not to chastise her for not showing up, but to let her know that she is missed. You can even help them problem-solve if specific things are interfering with her ability to participate.

As the Program Leader, it is important for you to ask participants for their opinions and suggestions that would make the program more useful for them. Offer plenty of opportunities for group members to be heard. Listen and take each suggestion to heart; make changes when you can and think it is appropriate. If you feel you can’t, try to explain why. For example, you believe that it might jeopardize the well being of the group, or you are uncomfortable changing a certain aspect of the program. Take time to reflect on suggestions that seem out of the question when someone first voices them. We tend to reject ideas that contradict our own thoughts. Overnight reflection and an open mind may allow you to see positive aspects of a suggestion that you might not have recognized at first.

**How to handle the “difficult” participant or situation**

The suggestions so far have been geared toward regular interactions with the participants in the program. However, it seems that in every program problems arise that challenge our leadership skills. One is the particularly “difficult” participant, someone who talks constantly, interrupts as you teach the class, and protests the activities; or someone with whom you just have trouble getting along.

In the worst-case scenario, one person could spoil the class for everyone involved. As the instructor, you should try to prevent this. Try to use your power as a strong leader to hear everyone’s voice and to encourage everyone to be an active
participant in the program. Here are a few suggestions for handling a problem presented by one participant that could damage the effectiveness of the program.

❤️ Remember to **stay on task.** Try not to get caught up in difficult situations; just move on if possible.

- If necessary, remind others to stay on task. No one wants to waste time. Hopefully this reminder will be enough to help the group move on.

- Practice **REDIRECTING** the comment. Redirecting is a technique that allows you to acknowledge what the participant has said and then swiftly move on. Examples would include:
  
  i. If someone brings up something inappropriate out of the blue:
     
     “Well, that’s interesting, but let’s not any of us talk right now because we’re exercising.”
  
  ii. If someone directs a negative comment toward someone else in the class: “Nathalie, I know you’re trying to help Sarah, but let’s all remember we’ve decided to only make positive comments to each other.” OR “I know you’re trying to help Sarah, but why don’t we let me be the one to make those comments?” OR “Remember everyone, right now we’re doing stretches.”

❤️ If #1 doesn’t work, try **changing the subject** in a gentle way.

❤️ If someone is talking about something that is simply inappropriate for the class setting and she doesn’t respond to #1 or 2, **tell her the comment or subject matter is inappropriate for the class.**

❤️ Have a **private meeting** with the individual.
If it seems appropriate, ask her what you could do that would make the program more acceptable to her. Take her advice if it seems feasible, as long as it doesn’t decrease the value of the program for the other participants. Explain to her in a controlled manner what you perceive to be the problem (is she disrupting the class, not participating at all, etc.) and then suggest ways to go about dealing with it.

Always remember that you are the program leader and can take control of the class.

**Part E: Expanding “outside the box”**

After you feel that the group is comfortable with one another in your regular meetings, bring up the possibility of participating in activities outside of class. You certainly don’t want to force anyone, but there are a number of health-related activities in which the group could engage that would benefit both them and the community. Consider the following suggestions:

- **Encourage the women to organize a walking group so that they can continue walking together once the program has ended.** They could also consider organizing a group to walk for a cause, for extra motivation.

- **Write to government representatives, asking for more safe walking space in the community.** Bring the issue to the local government’s attention if there are many streets without sidewalks, or if there is a good place to create a walking trail. Facilitating and encouraging physical activity and safety in the community should be an important goal of the local government.
Part F: Identify your leadership style

The first step toward becoming a stronger leader is to understand your own leadership style. The “Leadership Compass” identifies the four major leadership styles. Read the descriptions of each “direction” and select the one that corresponds most closely to your personality. If you believe that you are truly split between two directions, you may call yourself a “North-West” or a “South-East,” for example.

Next, read the sheet that describes the challenges for your leadership style. Some people find it easier to identify their challenges than their strengths; if you haven’t been able to clearly identify a leadership style yet, the downfalls or challenges will help you. Reflect on your strengths and weaknesses identified by the Leadership Compass. In some cases, simply understanding your leadership style will help you face difficult situations. For instance, when making decisions or directing others, if you are a North, you tend to want to make instant decisions that could sacrifice peoples’ feelings. On the other hand, if you are a South, you may sacrifice efficiency to avoid hurt feelings. Once you have identified your leadership style, you can work to maximize its benefits and minimize its weaknesses, while being aware of your compatibility with others.

Leadership Compass

The Leadership Compass helps us to assess and understand our personal style of leadership. Most times, the Compass is used by groups who need to work on projects together to accomplish specific goals. It helps them become aware of their similarities and differences, as well as what they need to change to work more effectively with each other. In the case of the StrongWomen – Healthy Hearts Program, we believe that the Compass can help an individual become a better
leader by allowing her to look at her natural preferences when leading a group, giving orders or suggestions, or listening to feedback and advice. Realizing how you interact with others according to your *style*, or “direction” on the compass, may enable you to think of ways to be a more effective leader as you capitalize on your strengths and improve your weaknesses.

**NORTH**
Do you make decisions quickly and like being in control?

**WEST**
Are you a practical, careful planner?

**EAST**
Are you a visionary, always coming up with new ideas?

**SOUTH**
Are you empathetic, supportive, and nurturing?
### Understanding Leadership Styles

<table>
<thead>
<tr>
<th>EAST</th>
<th>SOUTH</th>
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<tbody>
<tr>
<td><strong>Visionary who sees the big picture</strong></td>
<td><strong>Allows others to feel important in determining direction of what’s happening</strong></td>
</tr>
<tr>
<td>• very ideas oriented, focus on future thought</td>
<td>• value driven regarding aspects of professional life</td>
</tr>
<tr>
<td>• insight into mission and purpose</td>
<td>• uses professional relationships to accomplish tasks, interaction is primary</td>
</tr>
<tr>
<td>• looks for overarching themes, ideas</td>
<td>• empathetic, supportive, nurturing to colleagues and peers</td>
</tr>
<tr>
<td>• likes to experiment, explore</td>
<td>• willingness to trust others’ statements at face value</td>
</tr>
<tr>
<td>• strong spiritual awareness – attuned to “higher level”</td>
<td>• feeling-based, trusts own emotions and intuition; intuition regarded as “truth”</td>
</tr>
<tr>
<td>• appreciates a lot of information</td>
<td>• team-player, receptive to other’s ideas, builds on ideas of others, noncompetitive</td>
</tr>
<tr>
<td>• persuasive</td>
<td>• able to focus on present moment</td>
</tr>
<tr>
<td>• energetic, brainstormer</td>
<td>• <strong>Values the words “right” and “fair”</strong></td>
</tr>
<tr>
<td>• likes newness</td>
<td></td>
</tr>
<tr>
<td>• turns resources into new ideas/products</td>
<td></td>
</tr>
<tr>
<td><strong>Values the words “option” and “possibility”</strong></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>WEST</th>
<th>NORTH</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Seen as practical, dependable, and thorough in task situations</strong></td>
<td><strong>Assertive, active, decisive</strong></td>
</tr>
<tr>
<td>• helpful to others by providing planning and resources</td>
<td>• likes to be in control of professional relationships and determine course of events</td>
</tr>
<tr>
<td>• moves carefully and follows procedures and guidelines</td>
<td>• quick to act, expresses sense of urgency for others to act now</td>
</tr>
<tr>
<td>• uses data analysis and logic to make decisions</td>
<td>• enjoys challenges presented by difficult situations and people</td>
</tr>
<tr>
<td>• weighs all sides of an issue, is balanced</td>
<td>• thinks in terms of “bottom line”</td>
</tr>
<tr>
<td>• introspective, self-analytical</td>
<td>• likes quick pace and fast track</td>
</tr>
<tr>
<td>• careful, thoroughly examines people’s needs in situations</td>
<td>• courageous</td>
</tr>
<tr>
<td>• works well with existing resources – gets the most out of what has been in the past</td>
<td>• perseveres, not stopped by hearing “NO,” probes and presses to get at hidden resistances</td>
</tr>
<tr>
<td>• skilled at finding fatal flaws in an idea or project</td>
<td>• likes variety, novelty, new projects</td>
</tr>
<tr>
<td><strong>Values the words “details” and “objective”</strong></td>
<td>• comfortable being in front</td>
</tr>
<tr>
<td></td>
<td><strong>Values action-oriented phrases such as “do it now!” “I’ll do it!” and “what’s the bottom line?”</strong></td>
</tr>
</tbody>
</table>
### Pitfalls When Styles are Taken to Excess

You may face these “pitfalls,” or personal challenges when teaching the StrongWomen – Healthy Hearts Program. Select those you believe you may face while teaching a StrongWomen – Healthy Hearts class, and try to be aware of them.

<table>
<thead>
<tr>
<th>EAST</th>
<th>SOUTH</th>
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<tbody>
<tr>
<td>• can be bogged down by lack of vision or too much emphasis on vision</td>
<td>• can be bogged down if she believes relationships and needs of people are being compromised</td>
</tr>
<tr>
<td>• can lose focus on tasks</td>
<td>• has trouble saying no</td>
</tr>
<tr>
<td>• poor follow-through on projects</td>
<td>• internalizes difficulty and assumes blame</td>
</tr>
<tr>
<td>• may become easily overwhelmed</td>
<td>• prone to disappointment when relationship is seen as secondary to task</td>
</tr>
<tr>
<td>• not time-bound, may lose track of time</td>
<td>• difficulty confronting and dealing with anger, may be manipulated by anger</td>
</tr>
<tr>
<td>• tends to be highly enthusiastic early on, then burnout over the long haul</td>
<td>• easily taken advantage of</td>
</tr>
<tr>
<td>• can develop a reputation for lack of dependability</td>
<td>• immersed in present, loses track of time</td>
</tr>
<tr>
<td></td>
<td>• may not see long-range view</td>
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</table>

<table>
<thead>
<tr>
<th>WEST</th>
<th>NORTH</th>
</tr>
</thead>
<tbody>
<tr>
<td>• can be bogged down by information, analysis paralysis</td>
<td>• can be bogged down by need to press ahead and can seem to not care about process</td>
</tr>
<tr>
<td>• can become stubborn and entrenched in position</td>
<td>• can get defensive quickly, argue, try to challenge you</td>
</tr>
<tr>
<td>• can be indecisive, collect unnecessary data, mired in details</td>
<td>• can lose patience, push for decisions before it is time</td>
</tr>
<tr>
<td>• may be cold and withdrawn with respect to others’ working styles</td>
<td>• may get autocratic, want things her way</td>
</tr>
<tr>
<td>• tendency towards watchfulness, observation</td>
<td>• sees things in terms of black and white, little tolerance for ambiguity</td>
</tr>
<tr>
<td>• can remain withdrawn, distanced</td>
<td>• may go beyond limits, get impulsive or disregard practical issues</td>
</tr>
<tr>
<td>• resists emotional pleas and change</td>
<td>• not heedful of others’ feelings, may be perceived as cold</td>
</tr>
<tr>
<td></td>
<td>• has trouble relinquishing control</td>
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</tbody>
</table>
Using the Leadership Compass to Understand a Simple Task

Setting up the room before every class, taking out chairs, having handouts and any ingredients to be used ready.

North

♥ EFFECTIVE NORTH – Arrives 15-20 minutes before the class begins, has a desire to take action immediately, and sets everything up for the participants.

♥ LESS EFFECTIVE NORTH – Arrives 2 minutes before the class begins and wants to take action immediately; grabs a participant and tells her to hurry and help to get everything set up.

♥ LESSON FOR THE NORTH – If you’re in a stressful situation (like arriving too late to set up yourself), take a deep breath and consider the feelings of the participants. Do not immediately rush into action. Apologize for not setting up yourself, and ask participants if they would mind helping you.

East

♥ EFFECTIVE EAST – Arrives 15-20 minutes before the start of the class, seeing the ‘big picture’ (realizing the importance of the ‘little things,’ like setting up ahead of time, in creating an overall successful programs and having satisfied participants).

♥ LESS EFFECTIVE EAST – Doesn’t arrive early - only thinks about the overall health of participants and loses track of details. (“The women sure are improving their health!” not noticing that the class isn’t set up ahead of time and is always starting and ending late.)

♥ LESSON FOR THE EAST – Remember that it’s very important to balance a long-term vision for the participants’ health with attention to detail. A program will not advance without the vision, but it won’t even take place if details are forgotten.
West

❤ EFFECTIVE WEST – Arrives 15-20 minutes before the start of the class, gets things set up. Then uses the desire to pay attention to detail by having a plan laid out for the day that will allow her to observe and correct the techniques of each participant.

❤ LESS EFFECTIVE WEST – It’s unlikely that a West would arrive late, but if she did, she would probably stick to her plan to the “t” – meticulously setting up the room herself and not considering cutting out any part of the program to keep it on time.

❤ LESSON FOR THE WEST – Details are incredibly important, but so is flexibility. Allow others to help you even if it wasn’t in your original plan. Remember to reassess the schedule or program if it is not well suited for that day or these participants. Remember the goal of the program: to improve the participants’ health.

South

❤ EFFECTIVE SOUTH – Asks for feedback and listens to participants comments, genuinely caring about their feelings and opinions.

❤ LESS EFFECTIVE SOUTH – Spends more time listening to participants than running the program.

❤ LESSON FOR THE SOUTH – Participants’ satisfaction is incredibly important. However, remember that the ultimate goal of the program is to improve the health of the participants. Listen to their comments, but do not sacrifice the goal of health improvement by spending too much time nurturing participants’ feelings. When possible, do your listening before and after the class.
Part G: Selecting a peer leader with the leadership compass

You will probably find it beneficial to have someone help you with your tasks as a StrongWomen – Healthy Hearts Program Leader. A peer leader could be a participant in the program who is willing to spend some time to help you make the program run smoothly. She could help you keep the exercise logs, purchase ingredients for cooking demonstrations, and set up/clean up the room before and after each group session. Potentially, she could help arrange transportation for group members who needed it, work with local media to publicize the program, and/or work with you to fundraise for equipment and supplies. She may help organize a party after the initial program is over to celebrate everyone’s progress.

Consider the fourth sheet of the Leadership Compass when selecting a peer leader to assist you. It may seem as though selecting the same type of leader as yourself would be helpful, and this could in fact be true. However, if possible, we suggest you consider selecting a peer leader who best complements your style, someone with different strengths and weaknesses to help “balance you out.” For many people, that means someone adjacent to them on the compass; that is, Norths may work better with Easts and Wests than with Souths, and Wests may work better with Norths and Souths. These are not strict rules, just guidelines to help you select the best peer leader.
Chapter 8: Frequently asked questions

Please note: there is an on-going Q&A list on the Program website (blackboard.tufts.edu, on the Discussion Board). If you don’t see your question here, it may very well be there! If not, you can post it there and one of the Program personnel will provide a prompt response.

Q: What happens if someone shows up at the information session who didn’t call ahead and therefore didn’t go through the screening process?
A: Have Screening Forms on hand in case this happens. If the participant has a “green light” for physical activity, include her unless you already have too many in the class. In that case, explain that the class is full, take her name and contact information to get back to her when it is offered again.

Q: What should I do if a participant becomes ill or injured as a result of doing the StrongWomen – Healthy Hearts Program?
A: First, obviously do whatever is necessary for the participant: administer first aid or CPR, and get emergency medical care if appropriate. Beyond that, you should immediately notify the Project Manager, Sara Folta, at 617-636-3423 (work) or 781-838-2075 (cell) of any unexpected or adverse events that occur related to the classes. You should report all adverse events, whether they are serious or minor. Also report the event to your supervisor, and follow any procedures that are generally in place at your site. If a serious event occurs at any StrongWomen – Healthy Hearts site, you will be notified by fax or phone.

Q: If a participant hasn’t been feeling well (had a cold or flu or is under the weather), should she still exercise?
A: We suggest that participants take the day off from exercise if they have had flu symptoms or feel sick. Their bodies need time to rest and to recover. A few days off from exercise will not diminish the benefits they have gained from exercising.

Q: After an injury, how long should a participant wait before she starts to exercise again?
A: Have the participant check with her health care provider, as this may vary depending on the type of injury.

Q: As a Program Leader, what should I do about participants who do not want to follow my directions, e.g. who want to exercise at a level that is too difficult, who do not breathe properly, whose attendance is sporadic?
A: You need to take control of your program. Do this by establishing ground rules at the very first session. Regular attendance is recommended for this program to be effective and safe. If your participants want more of other things included in the program, encourage them to express their feelings but do not promise that changes can be made. If participants are not following your directions, take a time-out. Stop what you are doing and remind them of what they should be doing. You might want to speak to specific individuals privately either before or after class.

Q: I just don’t have the equipment or ingredients to do some of the cooking classes. Is there anything I can do instead?
A: Yes, there may be other recipes or activities that will work. Check the StrongWomen – Healthy Hearts website (go to blackboard.tufts.edu and log in) for alternatives.
Chapter 9: Resources

Organizations

**American Heart Association**
National Center
7272 Greenville Avenue
Dallas, TX 75231
Phone: (800) AHA-USA-1
Web: [www.heart.org](http://www.heart.org)
Go Red for Women: [www.goredforwomen.org](http://www.goredforwomen.org)
A national voluntary health agency whose mission is to reduce disability and death from cardiovascular diseases and stroke. *Go Red for Women* is the AHA’s nationwide movement to help reduce the risk of developing heart disease specifically in women. *BetterU* is a free online 12-week physical activity program for women.

**National Heart, Lung, and Blood Institute**
NHLBI Health Information Center
P.O. Box 30105
Bethesda, MD 20824-0105
Phone: (301) 592 8573
Web: [www.nhlbi.nih.gov](http://www.nhlbi.nih.gov)
The Heart Truth: [www.hearttruth.gov](http://www.hearttruth.gov)
For Your Heart: [www.4women.gov/foryourheart](http://www.4women.gov/foryourheart)
Comprehensive information about heart disease, including recipes, tip sheets, quizzes and more. *The Heart Truth* campaign is geared specifically toward women. *For Your Heart* is an interactive website that provides a tailored series of articles detailing the latest information on exercise, nutrition, smoking, diabetes, cholesterol, high blood pressure and other factors that affect risk for heart disease.
John Hancock Research Center on Physical Activity, Nutrition, and Obesity Prevention
Friedman School of Nutrition Science and Policy at Tufts University
150 Harrison Avenue
Boston, MA 02111
Phone: (617) 636-3423
Fax: (617) 636-3727
Email: sara.folta@tufts.edu
Web: jhrc.nutrition.tufts.edu
Comprehensive information about nutrition, physical activity, and numerous other health-related topics.

American Council on Exercise
4851 Paramount Drive
San Diego, CA 92123
Phone: (800) 825-3636
Web: www.acefitness.org
A fitness organization where you can locate certified exercise professionals in your area.

American College of Sports Medicine
P.O. Box 1440
Indianapolis, IN 46206
Web: www.acsm.org
An organization that conducts research in the fields of exercise science and certifies fitness professionals.

American Dietetic Association
216 West Jackson Boulevard
Chicago, IL 60606-6995
Phone: (800) 366-1655
Web: www.eatright.org/
Features comprehensive nutrition information for the public, including a database of dietitians in your area.
America on the Move
America On the Move Foundation™
44 School St., Suite 325
Boston, MA 02108
Fax: (617) 367-6899
Email: sani@americaonthemove.org
Web: www.americaonthemove.org
Tips and tools to help individuals or groups set and meet nutrition and physical activity goals.

Centers for Disease Control and Prevention
Division for Heart Disease and Stroke Prevention
4770 Buford Hwy, NE
Atlanta, GA 30341-3717
Information line: (770) 488–2424
Web: www.cdc.gov/dhdsp/
Division of Nutrition and Physical Activity (DNPA)
Web: www.cdc.gov/nccdphp/dnpa
Comprehensive information about nutrition, physical activity, and numerous other health-related topics.

Lifelong Fitness Alliance
PO Box 20230
Stanford, CA 94309
Phone: (650) 323-6160
Web: www.50plus.org
A national organization whose sole mission is the promotion of physical activity for older adults.
**Preventive Cardiovascular Nurse’s Association**  
613 Williamson Street, Suite 205  
Madison, WI 53703  
Phone: (608) 250-2440  
Fax: (608) 250-2410  
Email: info@pcna.net  
Web: [www.pcna.net](http://www.pcna.net)  
PCNA is the leading nursing organization dedicated to preventing cardiovascular disease through assessing risk, facilitating lifestyle changes, and guiding individuals to achieve treatment goals. *What’s Missing in CholesterALL* is an interactive educational program for women.

**Shape Up America!**  
6707 Democracy Boulevard, Suite 306  
Bethesda, MD 20817  
Phone: (301) 493-5368  
Web: [www.shapeup.org](http://www.shapeup.org)  
Comprehensive information about nutrition, physical activity, and numerous other health-related topics.

**Sister to Sister: Everyone Has a Heart Foundation Inc.**  
4701 Willard Ave. Suite 223  
Chevy Chase, MD 20815  
Phone: (301) 718-8033  
Toll free: (877) 718-8033  
Fax: (301) 781-8620  
Web: [www.sistertosister.org](http://www.sistertosister.org)  
A national organization whose focus is screening women for heart disease.

**WomenHeart: National Coalition for Women with Heart Disease**  
818 18th Street, NW  
Suite 930  
Washington, DC 20006  
Phone: (202) 728-7199  
Web: [www.womenheart.org](http://www.womenheart.org)  
Provides information, support and advocacy for women with heart disease.
Books and Newsletters

Books


*The Wellness Guide to Lifelong Fitness*, by Timothy P. White and the editors of the University of California at Berkley Wellness Letter (REBUS, distributed by Random House, 1993)

Newsletters

*StrongWomen* electronic newsletter (free)
Subscribe at [www.strongwomen.com](http://www.strongwomen.com)

Tufts University Health & Nutrition Letter ($28 per year for 12 issues)
Subscriptions: PO Box 420235; Palm Coast, FL 32142-0235; (800) 274-7581.
[www.healthletter.tufts.edu](http://www.healthletter.tufts.edu)

Walkability

**Pedestrian & Bicycle Information Center**
UNC Highway Safety Research Center
730 Airport Road, Suite 300
Campus Box 3430
Chapel Hill, NC 27599-3430
(919) 962-2202
[www.walkinginfo.org](http://www.walkinginfo.org)

**Federal Highway Administration**
Pedestrian & Bicycle Safety Research Program
HSR – 20
6300 Georgetown Pike
McLean, VA 22101
[www fhwa dot gov/environment/bikeped/index html](http://www fhwa dot gov/environment/bikeped/index html)

**US Access Board**
1331 F Street, NW
Suite 1000
Washington, DC 20004-1111
(800) 872-2253
[www.access-board gov](http://www.access-board gov)

**National Highway Traffic Safety Administration**
Pedestrian Safety Programs
400 Seventh Street, SW
Washington, DC 20590
(202) 662-0600
The StrongWomen – Healthy Hearts Program

Centers for Disease Control & Prevention
Division of Nutrition & Physical Activity
(888) 232-4674
www.cdc.gov/nccdphp/dnpao/index.html

Partnership for a Walkable America
National Safety Council
1121 Spring Lake Drive
Itasca, IL 60143-3201
(603) 285-1121
www.walkableamerica.org
REFERENCES

General Heart Disease


Women and Heart Disease


Evidence-based Guidelines for Cardiovascular Disease Prevention in Women. 


**Nutrition and Heart Disease**


The StrongWomen – Healthy Hearts Program

hypercholesterolemic middle-aged and elderly female and male subjects. 


Physical Activity


Paffenbarger, R.S., Jr. Ability of exercise testing to predict cardiovascular and all-cause death in asymptomatic women: a 20-year follow-up of the lipid research


Complementary Therapies and Heart Disease


