

Welcome to the Eat Well & Keep Moving Workshop!

*Eat Well & Keep Moving* is an innovative interdisciplinary health curriculum for fourth- and fifth-grade students. You can use this curriculum to teach students about nutrition and physical activity while building skills and competencies in language arts, math, science, and social studies. Focusing on these common instructional themes will strengthen connections among academic disciplines for students and teachers.

*Eat Well & Keep Moving* was first created under a grant from the Walton Family Foundation to the Harvard School of Public Health. The curriculum was implemented by elementary school teachers in the Baltimore City Public Schools in Maryland. Recommendations made by these teachers helped create the published version of *Eat Well & Keep Moving*.

Since publication of the first edition of *Eat Well & Keep Moving* in 2001, the program has been disseminated throughout all 50 states and across more than 20 countries. The second edition of *Eat Well & Keep Moving* has incorporated recommendations from the *Dietary Guidelines for Americans 2005*.

(Note to the presenter: Comments in parentheses are instructions to presenters to be followed while giving the presentation, but not to be read to participants. This convention will be followed throughout the notes in this slide show.)

#### Eat Well & Keep Moving Introductory Workshop Agenda Topics ١. Introductions II. What is Eat Well & Keep Moving? (Presentation) Are You Concerned About Your Students' Nutrition and Physical Activity Ш. Habits? (Discussion) IV. The Health of Young People: Alarming Trends in Nutrition, Physical Activity, and Inactivity (Presentation) Turning the Tables: Why Schools Need to be Part of the Solution V. (Presentation) VI. Eat Well & Keep Moving Curriculum Overview (Presentation) VII. Eat Well & Keep Moving's Nutrition and Physical Activity Messages (Demonstration Lessons) VIII. Talking to Youth About Nutrition and Physical Activity Habits (Role Play, Discussions)

Let's start by going over the contents of your training folder and the agenda.

In your folder, you have several documents. (*We usually include information from the popular press or scientific publications on the* Dietary Guidelines for Americans 2005, *Fact Sheets on nutrition and physical activity, and recent articles on nutrition, physical activity, TV viewing, and obesity. A complete list with suggestions is in the introduction accompanying this presentation.*)

The format of this training includes presentations, discussions, and activities from the book. We want to give you a feel for what it's like to be a student and experience these activities and give you some chances to move around and talk with your colleagues. Let's take a look at the agenda.

(Go over agenda very briefly. Item VI on the agenda can include an optional planning activity, if there is time.)

## *Eat Well & Keep Moving* Demonstration Lessons

- Healthy Living: Lesson 1 (4th grade)
- Chain Five: Lesson 10 (4th grade)
- Hunting for Hidden Fat: Lesson 17 (5th grade)
- Beverage Buzz: Lesson 18 (5th grade)
- Thinking About Activity, Exercise, and Fitness: Lesson 42 (physical education lesson)
- The Safe Workout: An Introduction: Lesson 3 (4th grade)
- Freeze My TV: Lesson 27 (promotional campaign)

This is a list of the lessons we will do parts of during the workshop. I've chosen lessons that give an overview of the range, background information, and goals we hope to get across. (*This information can be printed on the back of the agenda for reference*.)

## What Is Eat Well & Keep Moving?

- It's an interdisciplinary health program for 4thand 5th-grade students that teaches students about nutrition and physical activity.
- It builds skills and competencies in language arts, math, science, social studies, and physical education.

Now let's take a look at the goals and curriculum components of *Eat Well & Keep Moving*. (*Read the slide*.)

#### *Eat Well & Keep Moving* Goals: The Principles of Healthy Living

- Eat 5 or more servings of fruits and vegetables each day.
- Choose whole-grain foods and limit foods and beverages with added sugar.
- Choose healthy fat, limit saturated fat, and avoid trans fat.
- Eat a nutritious breakfast every morning.
- Be physically active every day for at least an hour per day.
- Limit television and other screen time to no more than 2 hours per day.

*Eat Well & Keep Moving* focuses on six simple health goals, referred to throughout the text as the principles of healthy living. (*Read them.*) The *Eat Well & Keep Moving* curriculum encourages students to think about their choices for nutrition and activity and gives them practice in developing strategies for achieving their goals. Putting these health messages into practice can help everyone, children and adults, improve their well-being and decrease their risks for many chronic conditions and diseases.

We will discuss each of these messages in greater detail later in the workshop.



(Note to presenter: For information on Eat Well & Keep Moving lesson alignment with your state's curriculum standards, visit the Eat Well & Keep Moving Web site at www.eatwellandkeepmoving.org.

*Well & Keep Moving* promotes active learning, state educational standards, and literacy across the curriculum.



*Eat Well & Keep Moving* is student centered. Students read, write, speak, listen, experiment, and reflect on nutrition and physical activity in the lessons. They actively engage in brainstorming, case studies, demonstrations, games, and group projects. The lessons foster critical thinking and problem solving.



*Eat Well & Keep Moving* uses a constructivist approach to teaching and learning. Probably many of you have used this type of approach, but you may not have given it this name. Constructivist thinking emphasizes that students learn best when they actively construct meaning for themselves. Students come to the classroom with different knowledge and experiences. Constructivism encourages teachers to create learning environments that activate and build on this diversity in a manner that is active, inquiry-based and student centered.

Each *Eat Well & Keep Moving* lesson begins by activating and assessing students' prior knowledge. Once that has taken place, new information is more likely to stick. The lessons then use inquiry-based strategies to build on what they know.



*Eat Well & Keep Moving* is aligned with state curriculum frameworks. Each of the classroom lessons addresses learning standards in health, and most lessons also address standards in one of the four academic subject areas: math, science, language arts, and social studies. Also, the curriculum encourages literacy across the disciplines by incorporating language skills in many lessons: reading, writing, discussing, listening, and developing vocabulary.

## (If you have decided to include your state's curriculum alignment information in the workshop handouts, say the following:)

Please take out the information from your pack on how *Eat Well & Keep Moving* lessons align with our state's curriculum frameworks. This handout contains a list of the learning standards with the corresponding lessons that address those learning standards. If meeting state learning standards is a priority for you, this section should help you select lessons that best suit your curriculum objectives.



Why use this program?

## Research on Eat Well & Keep Moving

- 4th- and 5th-grade students in 14 Baltimore public schools
- Program is designed to meet these goals:
  - Increase fruit and vegetable consumption
  - Reduce fat and saturated fat intake
  - Reduce TV watching
  - Increase moderate and vigorous physical activity
- Classroom, food service, school-wide campaign and community components

*Eat Well & Keep Moving* was first used in 14 Baltimore public elementary schools in Maryland. The program aims to increase children's fruit and vegetable consumption, reduce fat and saturated fat intake, get students to spend less time in front of the TV or computer screen, and get more physical activity into their daily routines. It is designed to be implemented in the classroom by classroom teachers, and some components require the help and cooperation of food service and the community. Several school-wide activities also can be implemented as part of the program. We will go over these later in the workshop.

### *Eat Well & Keep Moving* Has Been Evaluated and Shown to Be Effective

Effective in

- reducing total fat and saturated fat intake,
- · increasing fruit and vegetable intake,
- · increasing fiber and vitamin C intake, and
- reducing TV viewing.

It was well received by school staff and students.

When the program was implemented and feedback from students and teachers was collected, it was found that the *Eat Well & Keep Moving* program was effective in (*read the bullets*).

#### SOURCE

Gortmaker S.L., Cheung, L.W., Peterson, K.E., Chomitz, G., Cradle, J.H., Dart, H., Fox, M.K., Bullock, R.B., Sobol, A.M., Colditz, G., Field, A.E., & Laird, N. (1999). Impact of a school-based interdisciplinary intervention on diet and physical activity among urban primary school children: Eat well and keep moving. *Archives of Pediatric Adolescent Medicine*, *153*(9): 975-83.

## Acceptability of Eat Well & Keep Moving

100% of responding teachers said they would teach the curriculum again.

"What impresses me most about this program is its integrative quality.... Principals, teachers, students, food staff, and parents benefit from increased knowledge and awareness of issues that are fundamental to improving one's life."

Principal, elementary school

All the teachers who used the program in those first years in Baltimore said they would teach the curriculum again. As one principal said... (*read quote*)



As we said, the classroom lessons are central to the program, but there are also lessons in physical education that are designed to be taught in a small space, if necessary, with minimal equipment. They can also be taught by the classroom teacher if there is no PE teacher available. School-wide promotional campaigns, such as walking clubs and Freeze My TV, also can be used in involving other classes in the school. These PE lessons and school-wide campaigns are part of the book chapters.

In some lessons and on the CD-ROM enclosed in the book are suggestions for involving school food service (Manual 4) as well as parents and community members (Manual 3). The CD includes all the lessons in printable PDF documents, fact sheets and newsletters to send home to parents, and links to Web-based resources on a host of topics, including school wellness policies and staff wellness.

The *Eat Well & Keep Moving* curriculum can be an integral part of your school's wellness policy.



Now that you have heard a bit about *Eat Well & Keep Moving*, let's talk about why it's so important to eat well and keep moving. Let's address this question in two parts. First, what are the long-term benefits of healthy eating and physical activity? (Allow adequate wait time to encourage teachers' responses before displaying the next slide.)

## Healthy Eating and Active Living...

- Promote normal physical growth and development.
- Prevent childhood and adolescent health problems such as obesity, dental cavities, iron-deficiency anemia, and even diabetes.
- Provide nutrients for brain development, immunity, healing, and healthy skin and eyes, among other functions.
- Lower the risk of chronic diseases such as heart disease, diabetes, osteoporosis, and some cancers.

(continued)

(*Review the bullet items not mentioned by teachers.*) Do you think these benefits will seem important enough to your students to motivate them to choose healthy eating and activity patterns? (*Adequate wait time is again important.*) Why or why not? Can you think of some immediate benefits that might appeal to fourth- and fifth-grade students?

## Healthy Eating and Active Living... (continued)

- Make you strong and fit.
- Brighten your mood and build a positive selfimage.
- Help you maintain a healthy weight.
- Are important for learning.
- Are fun!

(*Review the bullet items not mentioned by teachers*). These are the benefits you need to emphasize to your students.



(*Read the slide. If teachers don't respond right away, you can prompt with questions.*)

Do your students eat healthy foods? Do they get a lot of physical activity? Do any of your students seem overweight to you? Do they seem to watch a lot of TV?

(Give teachers time to express their concerns. You will most likely hear about their students' bad eating habits. Ask teachers about the school's physical education program and after-school activity options. Do students walk to school? Are they worried about their screen-watching habits?)



It sounds as though you're concerned about the health habits of your students. You are not alone. Let's look at how U.S. youth are faring in regard to eating and activity habits.

### Children Are at Risk! Trends in Nutrition

- Youth drink twice as much soft drink as milk
- Children and youth still consume too much saturated fat
- Four out of five children do not eat enough fruits and vegetables
  - 1/3 of children eat less than a serving of vegetables a day
  - Half of children eat less than a serving of fruit a day

Young people's consumption of soft drinks and other sweetened beverages is on the rise in the United States. Sugar-sweetened beverage consumption is replacing milk consumption—indeed, one analysis of national data found that youth aged 13 to 18 drink twice as much soft drink as milk.\* Research suggests that consuming sugar-sweetened beverages is associated with excess weight gain in children and adults.\*\*

National data show that saturated fat consumption is still too high in children and youth.\*\*\* Meanwhile, fruit and vegetable consumption is far too low: Four out of five children ages 6 to 11 do not eat enough fruits and vegetables; one-third of children eat less than a serving of vegetables per day, and half eat less than a serving of fruit per day.\*\*\*\*

#### SOURCES

\*Center for Science in the Public Interest. (2005). Liquid candy: How soft drinks are harming America's health. Washington, D.C.: Center for Science and the Public Interest. Retrieved April 10, 2007, from www.cspinet.org/new/pdf/liquid\_candy\_final\_w\_new\_supplement.pdf.

\*\*Ludwig, D., Peterson, K., & Gortmaker, S. (2001). Relation between consumption of sugarsweetened drinks and childhood obesity: A prospective, observational analysis. *Lancet 357*: 505-08.

Schulze, M.B., Manson, J.E., Ludwig, D.S., et al. (August 25, 2004). Sugar-sweetened beverages, weight gain, and incidence of type 2 diabetes in young and middle-aged women. *JAMA 292*(8): 927-34.

\*\*\*Ervin, R.B., Wright, J.D., Wang, C-Y., & Kennedy-Stephenson, J. (2004). Dietary intake of fats and fatty acids for the United States population: 1999–2000. Advance data from vital and health statistics 348. Hyattsville, Maryland: National Center for Health Statistics. Retrieved April 10, 2007, from www.cdc.gov/nchs/data/ad/ad348.pdf.

\*\*\*\*Cook, A.J., & Friday, J.E. (2004). Pyramid servings intakes in the United States 1999-2002, 1 Day. Beltsville, MD: USDA, Agricultural Research Service, Community Nutrition Research Group, CNRG Table Set 3.0. Retrieved April 10, 2007, from http://usna.usda.gov/cnrg/services/ts\_3-0.pdf.



Did you know that a recent national survey of students in grades 3 to 12 found that, on average, students watched more than 4 hours of TV per day?\* Contrast that with the 50 minutes a day they spend doing homework (the average for students in grades 7 to 12), and the 43 minutes a day they spend reading (the average for students in all grades).

Researchers think that increases in TV viewing over the past 30 years are contributing to the increase in children's weight.\*\* The most likely link between television viewing and weight gain has to do with quality of diet. We're not just talking about how people snack while they watch TV. Think about what you see on TV advertisements, especially during children's programs. Very often snack foods and sugary foods and drinks are made to seem very exciting for kids as well as adults. There is evidence that watching food advertisements makes kids more likely to ask their parents for the foods they see advertised—and makes parents more likely to buy the foods.\*\*\* TV food ads have also been tied to excessive intake of soda, fast food, and sugary and salty snacks; they have also been tied to a deficiency in fruit and vegetable intake.

#### SOURCES

\*Kaiser Family Foundation. (March 2005). Generation M: Media in the lives of 8-18 year-olds. Retrieved April 9, 2007, from www.kff.org/entmedia/7251.cfm.

\*\*Ludwig, D.S., & Gortmaker, S.L. (2004). Programming obesity in childhood. *Lancet* 364(9430): 226-7.

\*\*\*Coon, K.A., & Tucker, K.L. (2002). Television and children's consumption patterns: A review of the literature. *Minerva Pediatrica* 54(5): 423-36.

## Children Are at Risk! Trends in Physical Activity

- Only 8% of elementary schools provide daily physical education for all grades.
- 20% of children do not participate in any free-time physical activity.
- Nearly 66% of children do not participate in any organized physical activity outside of school.

Only 8% of elementary schools provide daily physical education (or its equivalent in minutes per week) for all grades.\* And, sadly, students are not spending nearly enough time being active outside of school hours. A national survey of children aged 9 to 13 (and their parents) fielded by the Centers for Disease Control and Prevention found that 20% of children do not participate in any free-time physical activity, and nearly 66% of children do not participate in organized physical activity outside of school.\*\*

#### SOURCES

\*Burgeson, C.R., Wechsler, H., Brener, N.D., Young, J.C., & Spain, C.G. (September 2001). Physical education and activity: Results from the School Health Policies and Programs Study 2000. *Journal of School Health* 71(7): 279-93.

\*\*Centers for Disease Control and Prevention. (2003). Physical activity levels among children aged 9–13 years—United States, 2002. *Morbidity and Mortality Weekly Report* 52: 785-788.



(*Read the slide*.)

(Number of overweight children) Centers for Disease Control and Prevention, National Center for Health Statistics. (April 2006). Fact sheet: Obesity still a major problem. Retrieved April 10, 2007, from www.cdc.gov/nchs/pressroom/06facts/obesity03\_04.htm.



Here is a chart showing the dramatic rise in overweight among children aged 6 to 11 and among adolescents since the 1970s.\* The percentage of children aged 6 to 11 who are overweight has more than quadrupled: From 1971 to 1974, 4% of children aged 6 to 11 were overweight; in 2003 to 2004, 18.8% of children aged 6 to 11 were overweight. The rate of overweight has nearly tripled in adolescents aged 12 to 19, from 6% in 1971-1974 to 17.4% in 2003 to 2004.

Overweight youth (especially overweight adolescents) are more likely to become overweight or obese adults.\*\*

#### SOURCES

\*CDC, National Center for Health Statistics (NHANES data). (January 2007). Prevalence of overweight among children and adolescents: United States, 2003-2004. Retrieved April 17, 2007, from

www.cdc.gov/nchs/products/pubs/pubd/hestats/overweight/overwght\_child\_03 .htm.

\*\*U.S. Department of Health and Human Services. (2001). The Surgeon General's call to action to prevent and decrease overweight and obesity. Rockville, MD: U.S. Department of Health and Human Services, Public Health Service, Office of the Surgeon General. Retrieved April 10, 2007, from www.surgeongeneral.gov/topics/obesity/calltoaction/CalltoAction.pdf.

## **Health Consequences of Overweight**

Overweight and obese people are at increased risk for the following:

- Type 2 diabetes
- Heart disease
- Depression
- High blood cholesterol
- Premature death
- Stroke
- Hypertension
- Asthma
- Some cancers

Overweight and obesity in adults are linked to several chronic diseases. (*Read a few from the slide.*) And children are now experiencing adult-type diseases caused by overweight. Type 2 diabetes, previously considered an adult disease, has increased dramatically in children and adolescents.\*

High blood cholesterol and other blood lipids, high blood pressure (hypertension), and high insulin levels are also found more frequently in overweight youth. among youth who had 3 or more risk factors, 74% were overweight.\*\*

Overweight adults with multiple risk factors are at a greater risk for developing cardiovascular disease and diabetes. These findings highlight the importance of prevention and treatment of overweight in children and adolescents.

#### SOURCES

\*U.S. Department of Health and Human Services. (2001). The Surgeon General's call to action to prevent and decrease overweight and obesity. Rockville, MD: U.S. Department of Health and Human Services, Public Health Service, Office of the Surgeon General. Retrieved April 10, 2007, from www.surgeongeneral.gov/topics/obesity/calltoaction/CalltoAction.pdf.

\*\*Freedman, D.S., Dietz, W.H., Srinivasan, S.R., & Berenson, G.S. (1999). The relation of overweight to cardiovascular risk factors among children and adolescents: The Bogalusa Heart Study. *Pediatrics 103*(6 Pt 1): 1175-82.



What is causing this epidemic? Body weight is maintained through a balance of energy intake (food) with energy output (physical activity). If you put more energy in than you expend, you gain weight. Small imbalances add up over a long time. Genetic makeup contributes to body size and composition and makes some people more likely to be larger. However, because obesity has increased so rapidly, we know its origin is not genetic. The gene pool did not change in the course of 20 years.

What changed is our environment and lifestyle. Culture can also affect these patterns. The reasons for the recent obesity epidemic have not yet been sorted out, but poor dietary habits, increased consumption of calorie-dense foods, and fewer opportunities for physical activity contribute to the problem.

(Review the bullets on each side of the balance. This slide can provoke discussion about lifestyle changes and the fact that lifestyles of children today are different from those of kids 20 or 30 years ago, on which many teachers will be able to report from personal experience. The following are some additional details that might be useful to add while reading the bullets.)

Americans spend about half of their food budget on meals prepared outside of the home. And those meals make up about a third of their daily energy intake.

In the 1950s, Coca-Cola packaged only 6.5-ounce bottles; single-serving containers expanded to 12 ounces and now 20 ounces. At fast-food restaurants, larger-sized meals can be purchased for a small additional fee; meals are "super-sized."

Advertising directly affects food choices. In 1998, McDonald's spent over \$1 billion in advertising while the National Cancer Institute spent \$1 million on promoting fruit and vegetable consumption.

#### SOURCE

Nestle, M., & Jacobson, M.F. (2000). Halting the obesity epidemic: A public health policy approach. *Public Health Reports 115*: 12-24.



Let's take a closer look at two factors that are likely contributors to the obesity epidemic in youth: an increase in TV viewing and an increase in consumption of soft drinks and other sugar-sweetened beverages.



TV viewing patterns of adolescents have changed over the past 30 years. This graph illustrates the results of two surveys, one conducted in the late 1960s and one conducted in 1990. *(Familiarize teachers with the axes.)* In 1967 to 1970, the largest proportion of kids watched 2 to 3 hours of TV. In 1990, over 40% of kids watched 5 or more hours of TV a day.

#### SOURCES

Dietz, W.H., & Gortmaker, S.L. (1985). Do we fatten our children at the television set? Obesity and television viewing in children and adolescents. *Pediatrics*, *75*(5): 807-12.

Gortmaker, S.L., Must, A., Sobol, A.M., Peterson, K., Colditz, G.A., & Dietz, W.H. (1996). Television viewing as a cause of increasing obesity among children in the United States, 1986-1990. *Arch Pediatr Adolesc Med.*, *150*(4): 356-62.



This graph illustrates that there is a correlation between obesity and TV viewing. (*Familiarize teachers with the axes.*) The data from both surveys indicate that youth who watch more TV are at greater risk for obesity. (*Point out the difference in obesity prevalence for the 0 to 1 and 5 or more hours groups.*)

#### SOURCES

Dietz, W.H., & S.L. Gortmaker. (1985). Do we fatten our children at the television set? Obesity and television viewing in children and adolescents. *Pediatrics* 75(5):807-12.

Gortmaker, S.L., Must, A., Sobol, A.M., Peterson, K., Colditz, G.A., & Dietz, W.H. (1996). Television viewing as a cause of increasing obesity among children in the United States, 1986-1990. *Archives of Pediatrics & Adolescent Medicine 150*(4): 356-62.



Why does TV viewing affect overweight? Researchers suggest some possible mechanisms. First, watching television may displace physical activity. Think about it: When you're sitting down in front of the TV, perhaps there's something more active that you're *not* doing—talking a walk, vacuuming the floor, playing with your kids. TV watching might also slow down a person's metabolic rate. When you're watching TV, usually you're not moving around very much or even using your brain very much. So you're burning less fuel and fewer calories, and that can also contribute to overweight.

The most likely link between television viewing and weight gain has to do with quality of diet. We're not just talking about how people snack while they watch TV. Think about what you see on TV advertisements, especially during children's programs. Very often snack foods and sugary foods and drinks are made to seem very exciting for kids as well as adults. There is evidence that watching food advertisements makes kids more likely to ask their parents for the foods they see advertised—and makes parents more likely to buy the foods. TV food ads have also been tied to drinking too much soda and eating too much fast food and sugary and salty snacks; they have also been tied to eating too few fruits and vegetables.

#### SOURCES

Ludwig, D.S., & Gortmaker, S.L. (2004). Programming obesity in childhood. *Lancet* 364(9430): 226-7.

Coon, K.A., & Tucker, K.L. (2002). Television and children's consumption patterns: A review of the literature. *Minerva Pediatrica* 54(5): 423-36.



Indeed, youth consumption of soda and other sweetened beverages is on the rise in the United States. Sugar-sweetened beverage consumption is replacing milk consumption, as shown in the graph.

#### SOURCE

Cavadini, C., Siega-Riz, A.M., & Popkin, B.M. (2000). US adolescent food intake trends from 1965 to 1996.

Archives of Disease in Childhood 83(1): 18-24.

#### Sugar-Sweetened Beverage Consumption and Overweight

- Sugar-sweetened beverages contribute to childhood obesity and to adult obesity and type 2 diabetes.
- Reducing intake of sugar-sweetened beverages can reduce the prevalence of overweight among youth.

A recent study shows a strong link between consumption of sugar-sweetened beverages and incidence of childhood obesity. It found that middle school students who increased their consumption of soft drinks also increased their chance of becoming obese over the 18-month study. For each additional serving consumed per day over the baseline intake, the odds of obesity increased 60%.\* Consumption of sugar-sweetened beverages has also been linked to weight gain and diabetes in adult women.\*\*

Reducing or avoiding empty calories from sugar-sweetened beverages may help with weight control: A school-based randomized controlled trial found that reducing the intake of sugar-sweetened beverages reduced overweight among youth.\*\*\* Another study found that when teenagers replaced sugarsweetened beverages with noncaloric beverages, the overweight lost about 1 pound per month.\*\*\*

It's important to note that Harvard Prevention Research Center recommends that parents limit sugar-sweetened beverage consumption in children to two 8ounce servings per week at home.

#### SOURCES

\*Ludwig, D., Peterson, K. & Gortmaker, S. (2001). Relation between consumption of sugar-sweetened drinks and childhood obesity: A prospective, observational analysis. *Lancet 357*: 505-08.

<sup>\*\*</sup>Schulze, M.B., Manson, J.E., Ludwig, D.S., et al. (August 25, 2004). Sugar-sweetened beverages, weight gain, and incidence of type 2 diabetes in young and middle-aged women. *Journal of the American Medical Association 292*(8): 927-34.



What can we do to reverse the trends we've just discussed? Why do schools need to be part of the solution?

![](_page_33_Figure_0.jpeg)

Physical activity and eating behaviors are clearly individual choices. However, they are clearly influenced by the environment we live in as well as policies, cultural norms, and lifestyles.

Most interventions that are aimed at getting people to eat healthy food and be physically active focus on changing individual behaviors. They educate people and give people the facts. What is healthy eating? Why is it important? People join health clubs, pay for weight-loss programs, and hire personal trainers. These types of interventions give people an opportunity to practice healthy choices with the hopes that they will change their habits and incorporate healthy eating and activity into their daily lives. In most cases those things don't work. Fifty percent of the people who start an exercise program quit after 6 months.

As the United States continues to fight an obesity epidemic, scientists have recently begun to realize that we need to take a public-health approach to encourage people to eat well and keep moving and to prevent obesity. We need to create environments and enact policies that support healthy lifestyles at home, in school, and in the community. Then we need to encourage people to *live* healthy lifestyles by increasing their routine physical activity, walking to school, taking the stairs, watching less TV, and drinking water instead of soda. We need to encourage these behaviors in children so that we help them establish lifelong health habits.

This approach has already been successful in tackling other public health problems, like smoking.

#### SOURCE

Nestle, M., & Jacobson, M.F. (2000). Halting the obesity epidemic: A public health policy approach. *Public Health Reports 115*:12-24.

## Surgeon General's Recommendation: School-Based Action

- · Effective health education for all.
- Nutrition: Ensure availability of healthy foods at every eating occasion at school, limit access to vending machines, provide adequate time to eat meals.
- Physical activity: Daily physical education, recess, extracurricular physical activity, community use of facilities.

A Call to Action to Reduce Overweight and Obesity: Report of the Surgeon General. December 2001.

In December 2000, the Surgeon General of the United States published a report on the epidemic of obesity and the long-term potential effects on the health of our citizens. The Surgeon General made recommendations about what can be done to help reduce and prevent overweight in children and young people in the school setting.

(Read bullets.)

In 2005, the Institute of Medicine also called for schools to play a crucial role in preventing child obesity by providing "a consistent environment that is conducive to healthful eating behaviors and regular physical activity."

Steps schools can take are making sure that during every school day, all students get 30 minutes of moderate to vigorous physical activity; making sure that cafeteria and competition foods meet nutritional standards; and improving their health curricula to focus on nutrition, physical activity, and energy balance.\*

#### SOURCE

\*Institute of Medicine of the National Academies. (2005). *Preventing child obesity: Health in the Balance*. Washington, D.C.: National Academies Press.

## Healthy Eating and Physical Activity Are a Critical Part of Learning and Achievement

- Brain development and function require an adequate supply of nutrients.
- Eating breakfast increases academic test scores, daily attendance, concentration, and class participation.
- Children learn through movement.
- Physical activity increases alertness.
- Schools that offer intensive physical activity programs see no negative effects on academic achievement scores even when time for physical education is taken from the academic day.
- Children spend more time reading and doing homework when parents set limits on TV viewing.

(*Read the slide title and read bullets.*) The finding on intensive school physical activity programs (*the next-to-last bullet*) disputes the concerns of school administrators that spending more time on physical education will interfere with academic performance.

(If you have included the Action for Healthy Kids Fact Sheet on Nutrition, Physical Activity, and Achievement in the workshop packet, read the following information.)

One of your handouts (Fact Sheet on Nutrition, Physical Activity, and Achievement) from Action for Healthy Kids explains this connection in greater detail and gives many references to scientific articles that make this point. You may want to use this handout if you need to convince your administrators or other school officials of the importance of a program to promote healthy eating and physical activity, such as *Eat Well & Keep Moving*.

#### SOURCES

Center on Hunger, Poverty, and Nutrition Policy. (1995). Statement on the link between nutrition and cognitive development in children. Medford, MA: Tufts University School of Nutrition.

Meyers, A.F., et al. (1989). School breakfast program and school performance. *American Journal of Diseases of Children 143*:1234–9.

Pollitt, E., Leibel, R.L., & Greenfield, D. (1981). Brief fasting, stress, and cognition in children. *American Journal of Clinical Nutrition* 34: 1526–33.

Sallis, J.F., McKenzie, T.L., Kolody, B., Lewis, M., Marshall, S., & Rosengard, P. (1999). Effects of health-related physical education on academic achievement: Project SPARK. *Research Quarterly for Exercise and Sport.* 70(2): 127-134.

Shepard, R.J. (1997). Curricular physical activity and academic performance. *Pediatric Exercise Science*, 9: 113-126.

Wiecha, J.L., Sobol, A.M., Peterson, K.E., & Gortmaker, S.L. (September-October 2001). Household television access: Associations with screen time, reading and homework among youth. *Ambulatory Pediatrics 1*(5): 244-251.

![](_page_36_Picture_0.jpeg)

Let's take a look at how the *Eat Well & Keep Moving* program works in fourthand fifth-grade classrooms. We'll also look at how you can make connections beyond the classroom.

Keep in mind as we go through this material that *Eat Well & Keep Moving* is about being healthy and fit. When talking to students about these messages, we want to emphasize the benefits of healthy lifestyle. Avoid conveying an attitude of restriction. Kids don't need to give up all high-sugar foods or TV. Moderation is the key.

![](_page_37_Figure_0.jpeg)

The *Eat Well & Keep Moving* curriculum consists of classroom lessons and physical education lessons. Each of the lessons in the book is meant to get across one or more of the goals in fun and interesting ways. There are 13 lessons for 4th grade and 13 for 5th grade, as well as 5 physical education lessons and additional smaller PE microunits. All the lessons, including physical education, are designed to be taught by the classroom teacher and can be taught in small indoor spaces, but if you have a gym and PE teacher, that's great.

Contents Preface vii - Acknowledgments xi - Introduction xv						
	PART I	Classroom Lessons for Fourth Graders				
	Lesson 1 Lesson 2 Lesson 3 Lesson 4 Lesson 4 Lesson 5 Lesson 7 Lesson 7 Lesson 7 Lesson 9 Lesson 10 Lesson 11 Lesson 12 Lesson 13	Healthy Living				
0	▶ PART II	Classroom Lessons for Fifth Graders 199				
	Lesson 14 Lesson 15 Lesson 16 Lesson 17 Lesson 18 Lesson 20 Lesson 20 Lesson 21 Lesson 22 Lesson 24 Lesson 24 Lesson 24 Lesson 25 Lesson 26	Healthy Living, Healthy Eating,				
0	▶ PART III	Promotions for the Classroom				
	Lesson 27 Lesson 28 Lesson 29 Lesson 30	Freeze My TV     .377       Get 3 At School and 5' A Day     .397       Class Walking Clubs     .405       Tour de Health     .415				

Now let's take a look at the book itself. This slide shows the table of contents of the book.

The introduction provides a great overview of the program and its sections, and it shows how the various parts fit together to form the program. At the end of the Introduction is a useful planning grid, outlining lessons, promotions, and related parent fact sheets and newsletters.

## (Optional: This training can be extended with a lesson planning session. See optional slide 62 in this presentation.)

Then you'll notice here that there are 13 lessons for fifth grade (part I) and 13 lessons for fifth grade (part II). The lessons appear in a sensible order, but you may want to change the order to fit with your classroom needs and schedule.

Part III contains the school-wide promotional campaigns, such as Get 3 at School and 5<sup>+</sup> a Day (to promote fruit and vegetable consumption) and Class Walking Clubs (to promote physical activity while reinforcing geography concepts). These give students a fun way to put their learning into practice. We discuss one of these campaigns later in this workshop.

Part IV contains the physical education lessons. You can see from the titles that these lessons include reinforcement of nutrition messages as well as physical education. These lessons require a small space and can be implemented by a classroom teacher if necessary, so they can be done with your students even if you have no gym or PE teacher at your school.

Part V, the FitCheck, is a self-assessment tool for students that can be used once or multiple times throughout the year, if it matches your students' abilities and fits into your curriculum. The tool helps students identify, understand, and reflect on their own patterns of physical activity and inactivity. Students fill out a seven-day journal and translate their results into scores, which enable them to set goals for themselves. In parts VI and VII are nine microunits (four that are designed to be used with the FitCheck materials, and five that relate to other physical education topics). These are 5-minute lessons that cover a range of physical activity and nutrition topics. On days when no full-length *Eat Well & Keep Moving* physical education lesson is taught, a microunit can be presented at the beginning of class. The microunits are best taught sequentially, as a set, as they fit into your curriculum.

The last section contains the appendixes, which include stretching diagrams, Eat Well cards, and Keep Moving cards. These connect with various lessons and we'll see examples in our demonstration lessons.

All the components of the *Eat Well & Keep Moving* program complement one another. Although each component can be used independently, the power of *Eat Well & Keep Moving* is in the integration of the components into a whole-school approach.

## **Lesson Components**

- Teacher resource pages
- Lesson procedures
- Worksheets and activities
- Illustrations
- Charts and tables
- Eat Well cards and Keep Moving cards (appendix B)
- Strength and stretching diagrams (appendix A)

Each lesson includes teacher resource information, step-by-step lesson procedures with an estimate of the time it will take to complete the lesson, reproducible worksheets and overhead pages (including answer sheets, materials lists for any activities, and references to extension activities), cards, and stretching diagrams in the appendix, if needed for the lesson.

# *Eat Well & Keep Moving* Goals: The Principles of Healthy Living

- Eat 5 or more servings of fruits and vegetables each day.
- Choose whole-grain foods and limit foods and beverages with added sugar.
- Choose healthy fat, limit saturated fat, and avoid trans fat.
- Eat a nutritious breakfast every morning.
- Be physically active every day for at least an hour per day.
- Limit television and other screen time to no more than 2 hours per day.

Each lesson also addresses at least one of the basic messages of the program. Here are the six basic messages again, the Principles of Healthy Living.

![](_page_42_Figure_0.jpeg)

The lessons also emphasize the importance of eating a balanced diet.

Each food group provides nutritional benefits, so foods from each group—grains; vegetables; fruits; meat, fish, and beans; and milk—should be consumed each day. The "sometimes foods"—such as sugar-sweetened beverages or snacks high in saturated fat—should be consumed only occasionally.

The key to a balanced diet is to recognize that grains (especially whole grains), vegetables, and fruits are needed in greater proportion than foods from the meat, fish, and beans and milk groups. This principle is illustrated by the Balanced Plate for Health diagram that is used in several *Eat Well & Keep Moving* lessons, including lessons 1 and 13 (which introduce and reinforce the six principles of healthy living) and lesson 4 (Balancing Act). (*The Balanced Plate for Health can be found in the Additional Resources folder on this CD-ROM.*)

A healthy and balanced diet also contains a variety of foods from each food group, since each food offers specific macronutrients (the energy-providing nutrients of carbohydrate, protein, and fat) and micronutrients (vitamins and minerals).

Note that there are no sweets, foods high in saturated or trans fat, or foods low in nutrients on the balanced plate for health. Such foods are "sometimes" foods, and they are represented by the small plate on the side. These should be eaten only occasionally, not every day.

Now let's move on to discussing some of the classroom lessons in detail.

## *Eat Well & Keep Moving* Fruits and Vegetables Message

# Eat 5 or more servings of fruits and vegetables each day.

- More is always better.
- Choose fruits and vegetables in a rainbow of colors, especially dark-green and orange vegetables.

Each of the six messages has details that you will want to remember (*read fruit and vegetable message and bullets*). Dark-green and orange vegetables are important sources of nutrients. One lesson that reinforces this message is lesson 10: Chain Five. This is a lesson designed for fourth grade.

(Do procedure for this lesson, steps 1 to 5, with the aid of a pencil case, as described on page 153 in the book. If you have pictures of dark-green, leafy vegetables and yellow-orange vegetables, you may do step 6 as well.)

Now take the worksheet titled Chain Five: Vitamins and Minerals out of your packet (worksheet 1; page 158 of the book).

![](_page_44_Picture_0.jpeg)

On worksheet 1, let's do part A. Here's the vitamins and minerals chart. This sheet could be done as an in-class activity with discussion afterward. (*Let them work on the sheet for a few minutes*). OK, what's a food that's a good source of vitamin C? (*Write these on the board or flip chart.*) Vitamin A? (*And so on.*) At the end, you have a list of five fruits and vegetables. Variety. This is what you want to aim for every day. Five or more servings of fruits and vegetables and a variety of foods.

![](_page_45_Picture_0.jpeg)

Additional information for this lesson can be found on several of the Eat Well cards and Keep Moving cards in appendix B at the back of the book. Here is one example of a card that can provide additional information for the lesson. Another idea is to reproduce the card in a parent newsletter, explaining the unit of study and the goal of eating five or more fruits and vegetables a day for better health.

## *Eat Well & Keep Moving* Carbohydrate Message

Choose whole-grain foods and limit foods and beverages with added sugar.

- · Make at least half of your grains whole grains.
- Sugar-sweetened beverages and high-sugar snacks are "sometimes" foods, not everyday foods.

The second nutrition message is to choose healthy sources of carbohydrate, specifically by choosing whole-grain foods whenever possible and by limiting foods and beverages with added sugar.

There are several reasons why whole grains—the less processed, the better—are better choices than refined grains. Whole grains have fiber, vitamins, and minerals. The refining process strips many of the beneficial nutrients away. Even though some refined grains are fortified with vitamins and minerals, fortification does not replace all of the lost nutrients. In addition, refined grains get absorbed very quickly, which can cause sugar levels in the blood to spike; the body quickly takes up sugar from the blood to bring sugar levels down to normal levels, but it may overshoot things a bit, making blood sugar levels a bit low, and this can actually cause feelings of false hunger even after big meal. Whole grains are emphasized throughout the *Eat Well & Keep Moving* classroom lessons, but lessons 2 and 12 have an especially strong focus on this topic.

In addition to selecting whole-grain foods, kids should limit sugary beverages such as soda and limit foods with added sugar. As we discussed earlier, research suggests that consumption of sugarsweetened beverages is associated with excess weight gain in children and adults. Sugary drinks and sweets have almost nothing in them that's healthy—they are simply packed with sugar. The new edition of *Eat Well & Keep Moving includes* two lessons that focus on sugar-sweetened beverages, lesson 7: Sugar Water (grade 4) and lesson 18: Beverage Buzz (grade 5).

(Do Procedure for lesson 18, step 1, with the teachers. Distribute worksheet 1, Where's the Sugar?)

TABLE 18.1 Beverage Count							
	Soft drink—12 oz. (375 ml) can (10 tsp. of sugar)	Sports drink—16 oz. (500 ml) bottle (7 tsp. of sugar)	Fruit punch—7 oz. (210 ml) pouch (7 tsp. of sugar)				
How many did you drink yesterday?							
How many did you drink the day before yesterday?							
Total drinks							

On worksheet 1, let's do part 1. How much soda, sports drink, fruit punch, or other sugarsweetened beverage did you drink over the past 2 days? Record your total in the beverage count table, and then calculate how many teaspoons of sugar you had from these drinks. (*Let them work on the sheet for a few minutes.*)

Were you surprised by how much sugar you consumed yesterday?

In the rest of the lesson, students evaluate their sugar intake in several ways: First, they measure sugar into paper cups. Then, in a homework assignment, they calculate how much sugar they consume from drinks each year, how much calcium they would consume if they chose low-fat or skim milk instead of soda, and then evaluate whether they need to make healthier choices and what healthier choices they could make.

This lesson also includes activities to make children aware of how the media entices people to consume sweetened beverages, and make them aware of the health effects of different beverages.

## *Eat Well & Keep Moving* Fat Message

Choose healthy fat, limit saturated fat, and avoid trans fat.

- Healthy fat = Unsaturated fat
- No more than 10% of calories from saturated fat
- · Avoid trans fats from partially hydrogenated oils

The second nutrition message is to choose healthy fat, limit saturated fat, and avoid trans fat. Children need to learn that fat is an important part of the diet and that some types of fat are healthy, whereas others are not. A lot of snack foods and fast foods are high in saturated fat and trans fat, so children can consume a lot of these unhealthy kinds of fat without realizing it.

The healthy fat message is covered in several grade 4 lessons, including lesson 5: Fast Food Frenzy and lesson 6: Snack Attack.

Today, we'll focus on a grade 5 lesson, lesson 17: Hunting for Hidden Fat.

The background information on fat is important to understand, so you can share it with your students. Please turn to pages 250 and 251 in your book and read the background section carefully. Then I will ask you questions to see what you learned. (*Give teachers about 5 minutes to read the passage.*)

![](_page_49_Figure_0.jpeg)

(Use a piece of paper to cover up the bottom portion of this slide. Move the paper down to reveal the answers to the following questions. If you present this on a computer, you may want to make this into three slides so that you can reveal pieces of the flow chart.)

What are the two categories of fat? Which one contributes to heart disease? Which one lowers the risk of heart disease? Which types of foods are high in saturated fat? Which types are high in unsaturated fat? What's the maximum proportion of calories that experts recommend we get from saturated fat?

(Experts recommend getting no more than 10% of total calories from saturated fat.)

![](_page_50_Figure_0.jpeg)

(Use a piece of paper to cover up the bottom portion of this overhead. Move the paper down to reveal the answers to the following questions. If you present this on a computer, you may want to make this into three slides so that you can reveal pieces of the flow chart.)

Trans fat is formed through a commercial process called partial hydrogenation, which turns liquid plant fat into solid or semisolid fat. This is how some margarines are made; trans fat is also found in commercial baked goods and crackers and many processed and fast foods, especially fried foods. Foods high in trans fat also have been found to increase the risk of heart disease.

![](_page_51_Figure_0.jpeg)

The tool we use in this lesson to identify unhealthy fats is the food label. (Go over the items on the food label, highlighting serving size, calories per serving, saturated fat, and trans fat. Explain the % Daily Value.) If the % Daily Value for a nutrient is 5% or less, that means the food is low in that nutrient. If the % Daily Value is 20% or more, that means the food is high in that nutrient.

The overall daily goal should be to select foods throughout the day that together have less than 100% of the Daily Value for saturated fat.

You'll notice that there is no % Daily Value for trans fat. That's because it is unclear whether there is any safe level of intake. Food labels do list the number of grams of trans fat per serving.

Keep in mind that products made with partially hydrogenated oils can still be labeled "0 grams trans fat" if the product contains less than 0.5 gram of trans fat per serving. These small amounts of trans fat can add up over the course of the day. That's why it's important to watch out for the words *partially hydrogenated vegetable oil* in the ingredients list and to choose products that do not contain partially hydrogenated oil.

Let's look at some examples of food labels to figure out where the saturated and trans fat are in some of the foods we eat. (*Distribute a collection of food labels from soups, crackers, cereals, canned fruits, chips, and so on. You may use handout 1 on pages 258-259 in the book.*) What foods contain more saturated fat? Which foods contain trans fat? Can you find partially hydrogenated oil in any of the products that say they have 0 grams trans fat?

Students can use worksheet 1 on page 261 to organize their observations. Extensions include bringing in food labels from home and making a collage of food labels for products that are low in saturated fat and have no trans fat. Making healthy choices is the message.

## *Eat Well & Keep Moving* Activity Message

### Be physically active every day for at least an hour per day.

• Children should get at least 60 minutes of physical activity every day.

• This should include moderate- and vigorousintensity activities, and it can be accumulated over the course of the day in sessions of 15 minutes or longer.

So we've looked at three of the nutrition messages and seen three classroom lessons, one for fourth grade and two for fifth grade. Now let's look at our activity message in greater detail. (*Read the bullets.*)

It's important to stress that any activity is better than none. Take the stairs, walk to the bus stop, walk down to the corner store, dance along with the music video, or play a dance video game with friends, such as Dance, Dance Revolution.

![](_page_53_Picture_0.jpeg)

Lesson 42 is an example of a physical education microunit. It's a short lesson with one point: Any physical activity is better than none. This lesson gives you many short, direct talking points on the importance of physical activity and physical fitness, such as the Positive Effects of Physical Fitness. (*Read the text, bottom of the page.*) "Being physically fit makes you healthier, helps you build a positive self-image, helps you feel better about yourself. Fitness is fun and it feels great!"

This and other microunits contain information that can be conveyed in the course of a PE class or perhaps during recess. There are also suggested questions for students at the end, if you have time for more discussion.

Some *Eat Well & Keep Moving* lessons call for you to *do* physical activity with your students in the classroom. These lessons introduce students to the various parts of the Safe Workout—a five-part workout that includes a warm-up, stretching, a fitness activity, a cool-down, and a cool-down stretch. The Safe Workout lessons also reinforce key nutrition concepts.

*Eat Well & Keep Moving* gives detailed instructions on how to conduct the Safe Workout, complete with simple stretching illustrations and suggestions for how to set up your classroom to enable physical activity.

(Optional: To extend this training by leading teachers through the Safe Workout, see Module 5 in the Training 2 folder on this CD-ROM.)

## *Eat Well & Keep Moving* Inactivity Message

Limit total screen time to no more than 2 hours per day.

Screen time = TV + videos + movies + video and computer games

Does not include school work completed on computer

The fifth message is about decreasing inactivity and sedentary behaviors, specifically screen time and most notably TV viewing. Remember, TV viewing correlates very strongly with the occurrence of overweight in people of all ages, not just children. The American Academy of Pediatrics recommends that children limit their screen time to no more than 2 hours of high-quality television or videos each day; less is better. Total screen time (TV, videos or DVDs, movies, and video or computer games) should be limited to no more than 2 hours per day.

![](_page_55_Picture_0.jpeg)

There are several lessons on decreasing TV viewing and total screen time, and some of them suggest alternative activities. Let's look at an example of a classroom promotion, lesson 27: Freeze My TV. Students keep a journal, assembled from reproducible pages in the book, by keeping track of and trying to limit the amount of television they watch. Each day students answer questions in their journals, such as "Write a paragraph about what you did during day 1 and day 2 when you weren't watching television. How do you think you will spend this time for the rest of the week?"

![](_page_56_Picture_0.jpeg)

After keeping track of the hours they have spent watching TV, students can complete several graphing activities with their data. Here's one example from page 382. (*Read the question.*) If you look at the pages following, you'll see several other examples. Obviously there are great connections to math class in this lesson.

## Talking to Youth About Nutrition and Physical Activity Habits

(Before the workshop, print out copies of the four questions on the next slide—one for each group of four participants. Cut them up and put in envelopes, one for each group. The subsequent slide offers additional questions, if you would like to give more than one question per group, or if you have a large number of participants.) When you introduce the curriculum to students, you may get asked some questions about why they're doing this. As you know, kids at this age want to know why things are important and how things are relevant to their lives. So, what we'll do next is a role-playing activity where you'll get to answer some of these questions. I'll break you up into groups of four. Each group will get an envelope. Each person should choose a question from the envelope. You will take turns being the student (asking your question to one of the other members of the group.) Everyone should get a chance to ask and answer a question.

![](_page_58_Figure_0.jpeg)

(After the groups have had a chance to do the role-playing, display this slide and ask people to share how they would handle these questions. Here are some comments that might help you facilitate the conversation.)

•*Eat Well & Keep Moving* will teach you about healthy eating and physical activity. When you eat well and are physically active, you feel better and are prepared to learn. You are at the age now that you're starting to make your own choices about where to eat and what to eat and how you spend your time. The *Eat Well & Keep Moving* lessons will help you reflect on your choices and give you practice at making healthy ones. The things you do now will affect your health now and in the future.

•There are different types of fat. Some types are healthy for you, and some types are unhealthy. The healthy fat is the kind that comes from plants—from corn, sunflowers, olives, walnuts (but not palm or coconut)—and is liquid at room temperature; it's called unsaturated fat. The fat to limit is fat that is solid at room temperature: saturated fat. Butter and lard are loaded with saturated fat, and eating a lot can cause your arteries to clog and your heart to become damaged. Whole milk has lots of saturated fat; so does ice cream. Meat also contains saturated fat; that's why it's best to choose lean cuts of meat and to remove the skin from chicken or turkey. Trans fat is even worse for your heart than saturated fat, and it's found in some margarines and snack foods. The lessons in *Eat Well & Keep Moving* will help you choose healthy fat so you can stay healthy.

•When you say you don't like exercise, what do you mean exactly? Do you like to dance? Do you like to swim or ride a bike? All types of physical activity have health benefits. It can help you improve your mood. It can make you stronger and feel good about yourself. I bet the lessons will give you an opportunity to think about some physical activities you like to do.

•I like to watch TV too. It can be educational and very entertaining. *Eat Well & Keep Moving* doesn't encourage you to stop watching TV. It teaches you to think about how much time you spend watching TV and to limit your screen time to no more than 2 hours per day. If you're watching more than 2 hours per day, the *Eat Well & Keep Moving* lessons will help you set goals for trading screen time for active time, like riding your bike instead of watching TV.

## What would you say if your students said . . . (continued)

- Are soda and candy bad for me?
- Vegetables are nasty! Why do I need to eat them?
- The cafeteria food is awful! How can I eat a healthy lunch at school?
- It's not safe to play outside where I live. My mom tells me to stay at home and watch TV. What can I do to get more physical activity?

(Here are more questions and comments that might help you facilitate the conversation.)

•Sugar can cause cavities in your teeth. Most sugary drinks are just sugar and water, and they have more sugar in them than you think: A regular 20-ounce bottle of soft drink has 16 teaspoons of sugar in it! Candy bars are also loaded with sugar and unhealthy saturated fat, but they're skimpy on stuff that's good for you. Occasional drinks with added sugar are okay, and it's okay to have candy once in a while. The lessons in *Eat Well & Keep Moving* will show you how healthier drinks and snacks can give you energy and a lot of nutrients to grow on—and still satisfy your sweet tooth.

•Vegetables are great choices for good health—and I bet if you keep trying them, you'll find some that you like. They're rich in vitamins, minerals, and fiber—all things that we need to keep our bodies running well. Maybe you've tried only canned vegetables and found that you don't like them. Fresh and frozen vegetables taste better than canned vegetables, so try fresh and frozen versions. The more colorful a collection of vegetables you can eat, the better! The lessons in *Eat Well & Keep Moving* will give you lots of reasons why it's great to snack on crunchy red, yellow, and orange bell peppers; baby carrots; broccoli trees; tiny grape tomatoes; and other vegetables.

•The school is working hard to try to make lunches more healthy—and to make them taste better, too. As part of *Eat Well & Keep Moving*, we'll be working with our cafeteria to highlight the healthiest options. Meanwhile, there are a few things you can do to make sure you're getting the healthiest possible lunch at school. When you go through the lunch line, don't skip the side dishes. Main dishes like hamburgers, chicken nuggets, and pizza should be eaten with sides of fruit, green salad, vegetables, and low-fat or nonfat milk to balance out the meal.

•If you are watching television, try doing a workout while you watch. We'll be learning how to do a safe workout as part of *Eat Well & Keep Moving*, and you'll find that you can do all of the pieces of it at home without any special equipment—and you can do them in less time than a half-hour TV show. Even better—how about turning off the TV, putting on the radio, and showing off your dancing moves? You can dance by yourself or with a friend. The key is to dance hard enough to work up a sweat and make your heart beat faster.

![](_page_60_Picture_0.jpeg)

Any questions? Thank you for attending this workshop.

►T	ABLE I.2	Fourth-Gra	de Impleme	entation Grid			
	Classroom	Promotions	Eat Well cards and Keep Moving cards	Physical education lessons*	Cafeteria activities	Parent involvement	
1.8	Healthy Living	31. Tour de Health		32. Five Foods Countdown			
2.0	Carb Smart		The Power of Whole Grains	33. Musical Fare		Reprint the Eat Well card in the parent newsletter. Send home the 'Eat More Whole Grains' parent fact sheet."	
3.)	The Safe Workout: An Introduction		Be Wise Warm Up for 5 Before You Exer- cise			Reprint the Keep Moving card in the parent newsletter. Send home the -Activate Your Family: parent fact sheet."	
4. E	Balancing Act						
5. f	Fast-Food Frenzy					Send home the "Dietary Fats" parent fact sheet.**	
6. 5	Snack Attack			34. Bowling for Snacks		Reprint the "Super Snacks" article in the parent newslet- ter.	
7.5	Sugar Water: Think About Your Drink					Reports the "Be Stypar Smart" article in the parent newsletter. Optional: If the lesson will be second with the arm weather, include the "Stay Cool" article in the parent newsletter.	
8. 3 1	The Safe Workout: Snacking's Just Fine, If You Choose the Right Kind			31. Three Kinds of Fitness Fun: Endurance, Strength, and Elevithits		Reprint the Keep Moving cards in the parent newsletter.	

#### (Optional planning activity.)

At this point, we'll spend some time planning. (*Depending on the number of teachers participating at your school, and the grade levels, and the availability of PE teacher, and so on, this will vary from one workshop to another. This section needs to be tailored to your setting.*) There's a very useful planning tool at the beginning of the book, on pages xxv through xxviii. Notice (on the slide) that this implementation grid (this is 4th grade, the next page in the text is for 5th grade) relates each lesson to possible connections with classroom promotions, cards, PE lessons, and possible involvement of cafeteria staff and parents.

Please choose one lesson that appeals to you and that you think you could use in your classroom soon. Take 15 minutes to read all about the lesson, and then (in groups of 3 or so) each person should take 3 minutes to present the lesson they choose to the others in their group.

(At the end of this time, it's good to have a whole-group discussion about implementing Eat Well & Keep Moving at this school. How many teachers will participate? Can they trade classrooms and share materials? Are there possible collaborations? Any all-school events that may benefit from Eat Well & Keep Moving messages? This part is very much dependent on the situation at your school.)