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Letter of Welcome ALCOA

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On behalf of the Active Living Coalition for Older Adults, I would like to thank you for your interest in our new *Tool Kit*, designed as a resource for Community Leaders offering healthy living programs for older adults.

We know that Community Leaders have various levels of skills and experience and that they offer a variety of excellent programs for older adults in their community. Our national consultation told us that evaluation and measurement tools would be very helpful for community leaders in evaluating the success of their programs. This resulted in the publication of *Your Personal Passport to Healthy Living* (2011) and an accompanying *Community Leaders Guidebook* (2012) as resources to support existing programs.

During the development of these resources we learned that step by step workshop lesson plans to guide the delivery of a program, would be a welcome addition to our suite of resources for community programs. Thanks to the financial support from the Public Health Agency of Canada, ALCOA is pleased to introduce to you, this new resource – a knowledge translation tool, based on the current research of the day and developed by top experts in their fields—a Community Leader *Tool Kit*. The *Tool Kit* provides resources for the leader to help people who want to "get started" and "stay at it" in terms of healthier lifestyles.

Building on our previous publications, this new *Tool Kit* provides modules containing workshop lesson plans and resources for a 6 week program. The lesson plans are holistic in their approach; provide a gender lens to healthy active aging; support self-management of chronic disease; and incorporate Canada's new Physical Activity Guidelines, as well as tips on how to use the *Passport*.

Our focus groups and pilot test sites (2011) confirmed that the *Passport* will help to inform, educate and inspire behaviour change in your participants. The *Community Leaders Guidebook* also tested in

1



Follow up evaluation is crucial to allow us to determine the effectiveness of the program and to be able to modify and revise the resources as needed.

2011-12, will provide you with support, tips, resources, and of course lots of evaluation information, templates and suggestions for your programs. It has taken ALCOA six years to conduct a thorough review and research-based process for these resources. We sincerely hope that you will find them useful and effective in your group settings.

Follow up evaluation is crucial to allow us to determine the effectiveness of the program and to be able to modify and revise the resources as needed. To accomplish this goal, we need your help. We would like to request that you please encourage your participants to complete the survey form in the back of the *Passport* and return it to you, for you to mail them to the ALCOA office. If individuals are interested in participating in a follow up survey, we would ask that they include their contact information on the back of the survey or on a separate sheet from the survey if they desire. We hope you enjoy the resources and thank you for your support in promoting active healthy aging for older adults.

Yours in health,

Patricia Clark,

ALCOA National Executive Director



Overview of Background and Guide

The Leader's Tool Kit for Healthy Living Workshops for Older Adults was created to assist you in designing and delivering effective research based workshops on healthy living for older adults using Your Personal Passport for Healthy Living as a resource for the participants. The workshop format and content was designed to motivate older adults to make changes in lifestyle to improve their health and to sustain the changes they embrace during the program. Activities in keeping with Canada's Physical Activity Guidelines are integrated in all the modules.

The *Tool Kit* contains 6 lesson plan modules and a resource section which contains pdf versions of the *Passport* and *Community Leaders Guidebook* developed in 2012 as a resource for non-clinical community leaders, as well as handouts and promotion material for you to copy and provide to your participants. In addition to the six modules the *Tool Kit* includes two sections that provide context for group leaders:

- Background *How the Tool Kit was Built*—to introduce you to the origins and concepts included in the *Tool Kit*, and
- Guide for Using the Tool Kit—to assist you in organizing, marketing and delivering your workshop successfully. The Guide section contains information on:
 - 1. Safety and Support
 - 2. Adapting the Program to Your Local Community
 - 3. Making the Case for Support from Administrators
 - 4. Recruitment and Marketing
 - 5. Critical Success Factors
 - 6. How to Integrate/Continue Activities When the Workshops End
 - 7. Advocacy for Community Action to Support Access to Programs
 - 8. Program Evaluation



Each of these eight topic areas provides information identified by a group of experts as essential to delivery of programs for older adults.

The workshop modules and accompanying resources provide guidance in delivering the workshop series, but also allow for a program to be customized to the needs of each group. Tips on how to engage your community, information and resources related to chronic disease, and facilitation tips are included in all the *Tool Kit* workshop modules, as well as in the *Community Leaders Guidebook*. The *Tool Kit* also contains links to resources available through the web.

To use the *Tool Kit* most effectively, ALCOA suggests that group leaders review all the sections of the *Tool Kit*, i.e., the Background, the Guide, the modules and resources in whatever order suits their learning style. Then come back again to the Guide for Using the *Tool Kit* section before you get started. With a review of the total package you will be prepared to get started in designing, promoting and delivering your workshop series. While, there is no right or wrong way to use the *Tool Kit*, *Community Leaders Guidebook* or *Passport*, the leader needs to keep in mind that the key to each module is *Your Personal Passport to Healthy Living*.

Please Note: The *Tool Kit* provides guidance in program facilitation, delivery, and evaluation. The Active Living Coalition for Older Adults (ALCOA) has taken all steps to ensure that the *Community Leaders Tool Kit* is built on current evidence. ALCOA does not provide training for using the *Tool Kit*, but has developed pod casts for each Module, to help orientate the Community Leader to the resource. The pod casts may be found at the *ALCOACanada YouTube* site.

ALCOA does not provide liability insurance for the protection of individuals, groups, organizations, spectators or others who may participate in the activities outlined in this *Tool Kit*. ALCOA plans to distribute the kit broadly through its website and therefore cannot ensure the level of training of the individual Community Leader delivering the workshops.

Organizations intending to use the workshop modules should consider developing an informed consent form specific to this activity.

Further inquiries can be made to: Patricia Clark, National Executive Director, Active Living Coalition for Older Adults (ALCOA) alcoa@uniserve.com.



Background—How the Tool Kit was Built!

Building on the Evidence

The Active Living Coalition for Older Adults (ALCOA) has a commitment and long standing interest in promoting active living amongst older adults.

With funding from the Public Health Agency of Canada, ALCOA provided leadership to the development of the Healthy Living Workshops for Older Adults *Tool Kit*, with guidance from a Reference Group, inclusive of older adults and representatives from a variety of professional groups across Canada. The list of Reference Group members is noted in the acknowledgement section of this *Tool Kit*. The *Tool Kit* workshop modules (one for each week of a 6 week program) are based on best practice, current evidence, and feedback from the participants and Community Leaders gathered during pilot testing with older adult community groups. Distribution of the final product will be accomplished through ALCOA partner networks across Canada and ALCOA membership.

Essential Components

Canadian Physical Activity Guidelines

Physical activity is a cornerstone to active healthy aging. Therefore the new *Canadian Physical Activity Guidelines for Older Adults—65 Years & Older* are a key focus of the workshop lesson plans. They are included in ways that animate them in plain language; including the creation of posters and promotional material that brands the Guidelines for older adults. Since older adults span the age of 55+, two sets of guidelines require consideration, the Canadian Physical Activity Guidelines for:

- a. Adults 18-64 years www.csep.ca/CMFiles/Guidelines/CSEP-InfoSheets-adults-ENG.pdf
- b. Older Adults 65 years and older www.csep.ca/CMFiles/Guidelines/CSEP-InfoSheets-older%20adults-ENG. pdf

While emphasis in the *Tool Kit* is placed on promoting the Older Adult Guidelines, both sets of guidelines are included in the Resource Section of this *Tool Kit*.



Holistic Approach to Health

The research that was conducted on our *Passport* project provided us with valuable insight into successful resource development for the promotion of active healthy aging. Experts from the School of Public Health at the University of Alberta and the Canadian Coalition for Seniors' Mental Health reinforced the importance of addressing mental health concerns of participants. The percentage of older adults suffering from depression is much higher than we had expected and we came to realize that if this is the case, they will have little if any interest in making changes to their physical activity behaviour, regardless of what information is available. Experts from the Sheridan Elder Research Centre and the Canadian Society for Exercise Physiology provided the necessary research regarding the importance of acknowledging beliefs and attitudes towards physical activity. The 2008 Clinical Practice Guidelines from the Canadian Diabetes Association also support the importance of addressing behaviour change when discussing lifestyle issues and Diabetes. Individuals must move through the stages of change if any behaviour change, such as an increase in physical activity, is going to be maintained. Other experts from the Dietitians of Canada and Certified Diabetes Educators confirmed the fact that to promote overall active healthy aging, nutrition must also be considered as an important factor.

Health is influenced by many factors such as social and physical environments, education and literacy, social support networks, genetics, gender and personal coping practices. A balance of mental, physical, social and emotional aspects of people's lives is essential to health. The Circle of Health^{©1} was used as a lens in integrating content and process in the workshop modules. The Circle of Health is compatible with many world views, bridging current thinking with ancient knowledge through inclusion of the Aboriginal medicine wheel in its centre. Resources for Community Leaders are available at: www.circleofhealth.net

Gender Lens

In developing this *Tool Kit* we developed increased awareness of the importance of sex and gender on the selection of activities and approach to facilitation. An example is that more women are diagnosed with osteoporosis than are men. Sex- and gender-based analysis (SGBA) rests on the understanding that both biology (sex) and society (gender) affect people's lives and their health. The Atlantic Women's Centre of Excellence has developed modules in an easy to understand language of the definitions and issues. It can be found at http://sgba-resource.ca. This has been helpful to developing the modules and can also serve as a useful resource for Community Leaders preparing to deliver the workshops.



Approaches

In the *Tool Kit* we are also drawing on evidence related to best practice in adult education and self-management referring to literature from those disciplines.

Adult Education

In designing the *Tool Kit*, emphasis was placed on delivery of the workshops. It was agreed by the Reference Group that opening dialogue within each group to promote problem solving by the group would be preferable to always providing information through a lecture approach. The field of adult education or "andragogy" demonstrates evidence that experiential learning (or learning by doing) is the way adults prefer to learn. Techniques that help adults to relate information to current needs and build on existing knowledge will make learning more meaningful and encourage adults to try out the new learning. Using this approach, teaching and learning becomes more of a collaborative affair between instructors and learners, and involves active and authentic learning versus passive absorption of material; participants are more independent and responsible for their own learning; and have choice and power over their learning. The results are more motivated participants and increased self-esteem.

In adult education three forms of learning are considered:

- Knowledge acquisition encompasses the acquiring and understanding of new information.
- Skill-building focuses on learning a new specific skill. This is usually accomplished through hands-on practice programs.
- Attitude change involves a more intensive setting in which the learner re-evaluates existing attitudes and adopts new attitudes, beliefs, and values as a first step in personal or professional change.²

Given that we are working with older adults who want to get started on changing their lifestyle, this approach to learning is based on selfmanagement approaches used in creating this *Tool Kit*.



Self-Management

"Self-management and decision support are recognized as integral components of many models for chronic disease prevention and management.³ Canadians generally wish to participate in decisions about their health and patients and families want providers to listen to their views and preferences.^{4, 5} As well, professional standards of practice and guidelines call for patient inclusion in care planning."^{6, 7}

Aligned with an adult education approach, the goal of self-management support is an increased confidence in the ability to change, rather than compliance with advice. The purpose of self-management support is to help people become informed about their conditions and more motivated to make life style changes to promote their health.⁸ True self-management support involves both client education and collaborative decision making. The education component of self-management support moves away from a lecture, or information-giving model, toward an approach that provides information based on the person's context and their needs.⁹ Self-management also involves knowledge of behaviour change, and how to coach a person through to their desired level of change.

According to the authors of the *Registered Nurses' Association* of *Ontario (RNAO) 2010 Best Clinical Practice Guidelines*, selfmanagement education has long been considered the essential first step in successfully preparing clients to manage and live with their chronic condition. They refer to published studies which compare self-management education with client education, and the conclusion of these studies that self-management education generally produces positive results in terms of clinical outcomes, at least in the short term. ¹⁰ There is some evidence that self-management education in Type 2 diabetes also improves quality of life outcomes and reduces costs. ^{11, 12} Traditional client education alone, i.e., receiving knowledge, is generally not sufficient for clients to maintain the self-management gains made as a result of education for chronic disease care. ¹³

Managing Group Process

To help people to "get started" in creating a healthier life style, the social aspect of the workshops and the importance of interpersonal relationships in motivating a change in behaviour cannot be stressed enough. Evidence shows that using a group format provides an opportunity for the participant to benefit from interactions with the designated group leader and provides a context to normalize individual experiences and provided social interaction.¹⁴



In designing the *Tool Kit*, it was recognized that the group leader and the group must establish rapport and trust to work together well. A section of this *Tool Kit* stresses the importance of the Community Leader as a facilitator, who works with others to develop group rapport and exchange of knowledge and ideas. The facilitator has the responsibility for managing the stages of group growth, i.e. Forming, Storming, Norming and Performing.¹⁵ Consideration has been given to the phases of group growth in selecting activities in the workshop modules. In the Forming phase, participants meet each other for the first time and dialogue is introductory as they get to know each other. As the group meets again, different perspectives and conflicting opinions begin to emerge. This is often called the Storming phase, and here the facilitator may need to draw on conflict resolution strategies and problem solving techniques to move the process along to the Norming phase, when the group members come to understand each other and reach consensus on how the group should proceed. As the group takes more control and begins problem solving and planning activities together it is said to have reached the Performing phase. Outcomes of a cohesive group can be social networks that support the participants long after the group is over.

Evaluation

This *Tool Kit* was produced during a one year project, and it is in the early stages of program development. However, the project provided an opportunity to set outcomes and evaluate achievement of the outcomes in pilot sites. ALCOA has a goal to continue building evidence on best practice in the use of the Community Leaders *Tool Kit*. Through evaluation we can capture lessons learned from your experience. We can also learn about its impact on older adults. The intent is to improve the components of the *Tool Kit* over time to ensure maximum benefit; and to provide guidance on what ensures the most positive outcomes. We want to have a tool that you will use because you know it is has been proven to be helpful in working with older adults in adopting healthier and more active lifestyles. As a Community Leader working with older adults, you can help by participating in the evaluation process, and communicating with the ALCOA office regarding your use of the *Tool Kit*.



Conclusion

In summary, based on the research and expert opinions, the lesson plans developed for this *Tool Kit* focuses on healthy eating, mental health, and beliefs and attitudes with physical activity being a thread in all the modules. We believe that combining these four components together in a holistic approach create a strong resource, which will assist Community Leaders to help participants achieve success at adopting a healthy active lifestyle. *Your Personal Passport to Healthy Living* (2011) and *Community Leaders Guidebook* (2012) were used as a resource for the development of the *Tool Kit* and are two key resources woven throughout the lesson plan design; integrating essential content components as well as approaches to learning styles, goal setting, problem solving, and stages of group development in getting participants started on their paths to healthier lifestyles.

The evidence based approach used by the Reference Group for this ALCOA product has resulted in a *Tool Kit* in CD format containing a Guide to Using the *Tool Kit*, PDF versions of the *Passport* and *Community Leaders Guidebook*, Resources (handouts and posters), and a set of six modules with lesson plans. The modules are as follows:

Module 1: Getting started

Module 2: Motivating Change

Module 3: Healthy Eating

Module 4: Physical Activity

Module 5: Mental-Emotional Health

Module 6: Healthy Lifestyles—Impact on Chronic Diseases



Guide to Using the Tool Kit

Introduction

Each section in the Tool Kit contains the following:



Information



Suggestion



Activity



Resource

While Your Personal Passport to Healthy Living is designed for use by the older adults in your programs, the Community Leaders Tool Kit will assist you in designing and delivering an effective research based workshop on healthy living for older adults that uses the Passport. The Tool Kit includes a letter of welcome, background on how the Tool Kit was created, a Guide for Using the Tool Kit (you are reading it now!) which provides tips for facilitation, safety, recruiting participants and sustaining results. The Tool Kit also contains 6 lesson plan modules, and a resource section which contains pdf versions of the Passport and Community Leaders Guidebook, as well as handouts and promotion material for you to copy and provide to your participants.

How To Use The Tool Kit

We suggest that you review the Background Information, the Guide for Using the *Tool Kit*, the Modules and Resources in whatever order suits your learning style. Then come back again to the Guide for Using the *Tool Kit* before you get started. With a review of the total package you will be prepared to get started in designing, promoting and delivering your workshop series. Always keep in mind that the key to each workshop is *Your Personal Passport to Healthy Living* – or the *Passport* as it is affectionately called!

When preparing to deliver the lesson plans in the *Tool Kit*, you may find it helpful to look for more ideas in the *Community Leaders Guidebook* (2012). This resource was designed to support non-clinical community leaders who choose to integrate the *Passport* into their current program and does not contain any lesson plans. As with the *Tool Kit*, there is no right or wrong way to use the *Guidebook*. The *Guidebook* also follows the sections in the *Passport*, aligning facilitation tips and information, e.g. setting goals etc., to an appropriate section. This could be a good resource to "get you started" in using the other resources in the *Tool Kit*.

The *Passport* was created as a measurement and evaluation tool to be used in community based primary and secondary diabetes prevention programs. It has been designed for use by non-clinical community leaders for two key purposes, a) to inform, educate and motivate older adults and b) to assist you, the Community Leader with program evaluation. The *Passport* serves as a self-evaluation tool



for older adults to measure their progress in a confidential document that belongs to the individual. It is unethical to use the information for program evaluation without consent. For this reason the *Tool Kit* includes an introduction to program evaluation and ethics and refers you to the *Community Leaders Guidebook* additional resources on these topics.

What Skills Do I Need?

Adults have knowledge, skills, and attitudes from life experience on which to build learning. As a community educator, you are first and foremost an educator of adults. Effective adult educators possess three specific areas of knowledge: knowledge of content, knowledge of learners, and knowledge of methods. 16 Research has shown that the most successful adult educators possess personality characteristics and interpersonal skills that encourage participation, risk-taking, motivation, and acceptance of others in the learning setting. 17

As a community educator you will be assisting adult learners who have a variety of learning styles and life experiences to expand into new areas of skill, knowledge, ideas and reflection and life style change. In delivering the workshop modules in this *Tool Kit*, you may need to learn more about resources in your community and how to use them. You may also need to increase your knowledge about self-management of chronic illness and increase your skills in sharing information and facilitating groups. You will find some tips on how to engage your community, information and resources related to chronic disease, and facilitation tips in all the *Tool Kit* workshop modules, as well as in the *Community Leaders Guidebook*.

You may find yourself engaging in many roles—an instructor, a "coach" encouraging self-management and behaviour change, and a facilitator of groups. While you bring your own knowledge, personality and skills to your work, it is important that you are aware of your strengths and where you may need to call on others to assist in providing a positive environment for participants.

Communication, establishing rapport and entering into a relationship with the individuals and the group with whom you will be working is important. Evidence shows that establishing rapport is a fundamental component in establishing a helping relationship and ensures that clients have opportunities to express their priorities and concerns. As concluded by the authors of *RNAO 2010—Clinical Practice Guidelines*, establishing rapport includes active listening, trust, respect, genuineness, empathy and responding to client concerns and has been shown to lead to positive client outcomes, and may



be responsible for improving client satisfaction and treatment adherence.^{18, 19, 20}

Having a trusted relationship with participants will enable you as the Community Leader, to challenge beliefs and values in group discussions and to take risks in validating new perspectives from each group member. This will encourage group members to enter into relationships with each other and together go through stages of group growth.

"Facilitators are educational gamblers; they must always be ready to switch and risk their plans if they see a better way to present the content. They must "know when to hold them" (the instructional techniques) "...and know when to fold them" (if a better technique surfaces even during the learning event). Participants will respect Community Leaders who recognize their varying educational needs."²¹

Facilitation tips are included in each module in the *Tool Kit* and throughout the *Community Leaders Guidebook*. For more facilitation information visit the ALCOA website:

www.alcoa.ca/e/passport/Facilitation-Tips-for-Community-Leaders.pdf

Safety and Support

Attention to emotional and ethical safety issues when working with older adults requires attention as do minimizing risks to physical safety. As Community Leaders you have many different educational backgrounds, some of you may be trained in instruction of physical activity of older adults and some may not – yet the workshop series introduces activities in keeping with Canada's Physical Activity Guidelines. This section outlines ALCOA's position on liability, discusses the importance of ethical practice, stresses the importance of each instructor working within their scope of knowledge and practice, provides some safety tips for older adults engaging in physical activity, and suggests resources for assessing individual participation in physical activity and training/certification opportunities for Community Leaders.

Disclaimer

Please note: The Active Living Coalition for Older Adults (ALCOA) has taken all steps to ensure that the *Leaders Tool Kit* is built on current evidence. ALCOA does not provide training for using the *Tool Kit*, but has developed pod casts for each Module, to help orientate the Community Leader to the resource. The pod casts may be found at the *ALCOACanada YouTube site*.

ALCOA does not provide liability insurance for the protection of individuals, groups, organizations, spectators or others who may



participate in the activities outlined in this *Tool Kit*. ALCOA plans to distribute the kit broadly through its website and therefore cannot ensure the level of training of the individual Community Leader delivering the workshops.

Organizations intending to use the workshop modules should consider developing an informed consent form specific to this activity.

Ethical Practice

Ethics are the rules of conduct recognized as acceptable to an organization or particular group of people. Ethics are important because they:

- 1. Guide our processes and decisions in a way that is fair and meets the needs of the client population and the organization
- 2. Protect the organization and the client population
- 3. Ensure those working within the organization are competent, knowledgeable, accountable and have integrity

Being a competent Community Leader also means being an ethical Community Leader, a person deserving of trust. Values and beliefs guide our decision making and our behaviours. In the same way that we ask participants to reflect on their values and beliefs about lifestyle change, it is important that as a Community Leader, you reflect on your own personal values and beliefs:

- Am I a good role model for the lifestyle change I advocate?
- · Do I treat myself and others with respect?
- Can I be trusted?

Being able to answer these questions is critical to your success as a competent Community Leader. Section 5, pp 34-36, of the *Community Leaders Guidebook* provides information on ethics and some guidance in considering ethics in your practice and programs.

For more information on the 'Freedom of Information and Protection of Privacy Act' go to the www.justice.gc.ca website.²²

Scope of Practice, Referral

As many Community Leaders belong to professional associations, it is important that you review the scope of practice outlined in your professional regulations and not engage in interventions that are beyond your parameters of knowledge and level of expertise. Staying within your parameters of knowledge applies to emotional health as well as for physical health.



You may want to increase your knowledge and skills to feel better prepared to work with older adults. This could include increasing your skills in facilitation or your knowledge in self-management. You may find opportunities for skill development within your professional association or local community. The physical activities we have included in the modules are ones in which older adults can take the lead in terms of their comfort levels. However, should you wish to have greater knowledge or skill in this area, the Canadian Centre for Activity and Aging offers courses to become a quality senior fitness instructor. For more information go to: www.ccaa-outreach.com

Making a referral to a health practitioner is good practice when you identify a person at risk of injury or illness. You can discuss concerns expressed or observed with the older adult and explore medical resources in your area such as:

- Do they have a family doctor?
- Is there a walk-in clinic in your area?
- Is there a diabetes assessment clinic?
- Is there a mental health clinic?

Each community has different services to provide medical assessment of risk factors for diabetes and other chronic diseases, so it will be important for you to be aware of what is available to support your program as you use the *Passport*, *Guidebook* and *Tool Kit*. Source: *Community Leaders Guidebook*

Safety Hints—Physical Activity

When introducing physical activity in the workshop modules, we suggest providing guidance to participants. Suggest that they engage in physical activity that is to their own level of comfort and pay attention to their bodies. If a participant is unsure as to whether they can engage in physical activity you can suggest that they complete a PAR-Q form and see their physician.

The following physical activity safety recommendations from the Canadian Centre for Activity and Aging can be provided to the older adults. Although designed for activity levels beyond what is expected in your program, they can be used by participants in preparation for in-class and engaging in follow-up activities:

- Wear comfortable footwear that provides good cushioning and support. Talk to an expert at the local running or sports store for advice should you require orthotic support.
- Wear breathable clothing that can take sweat away from the body. Clothing selection should also be loose fitting to ensure unrestricted movement, but not so loose that it impedes movement.



- Bring water to every session and hydrate before, during and after.
- Ensure all exercises are executed in proper alignment, including walking posture, with continuous breathing in all exercise types. Breathing may increase but should never be held.
- A warm-up is recommended at the beginning and a cooldown is recommended at the end of every session.
- Inform your health care provider that you have increased your physical activity.
- When obtaining exercise advice, ensure it is from a qualified/certified senior fitness instructor.²³

Dialogue with Health Care Provider

If workshop participants have concerns about physical activity, or if together during the workshop you identify risk factors that require follow-up, it will be important for participants to communicate with a physician or health care provider. It is well documented that there is greater adherence to medical advice if there is good communication with a physician, and a helpful relationship is known to make a difference in motivating lifestyle changes. However, initiating dialogue with a health care provider may be difficult for some, so it will be important for the communication to be encouraged. While physicians may have medical expertise, patients are the experts in their own lives, and may select a health care provider in another discipline such as a nurse practitioner or psychologist due to availability or preference. Your support for their choice of provider will be important in encouraging self-management of their health issues.

Sharing information about your program with various health care providers in your community could result in positive benefits for your workshop participants and for your program. Health care providers could reinforce the same healthy lifestyle messages as you do in your program, and may potentially advise or consult with you on activity limitations for your program participant. As health care providers engage with participants in your program, the dialogue could also result in recognition that your program helps participants achieve desired life style changes resulting in increased referrals to your program. The benefits of dialogue with health care providers are many.



Adapting the Program to Your Local Community

So how do you begin to adapt the workshop modules in this *Tool Kit* to the community in which you will be delivering the workshops? First you will want to access any research that exists on the needs of older adults in the community and about programs that are being offered for older adults. If you discover that there is a need for a healthy living program and a gap in the programs that are currently delivered, you will have a better chance of engaging interest in your program. Once you have identified the needs of the population you are engaging, you can begin searching for partners in the community that best suit the attendees. According to the literature, it is important to provide selfmanagement support at a location where clients can most easily access these resources and in a format that is culturally and linguistically comfortable. One of the easiest ways is partnering with a local school or seniors centre that is close to the majority of participants; and looking for material that has been translated that you can use to supplement the workshop modules. Remember to think about both culture and gender when you are choosing material. The *Tool Kit* contains promotional material that is tailored to different populations—take a look and select the visuals that work best for your community.

Taking the time to adapt the workshop modules will be invaluable. Take time to work with your community partner(s) to review all the material and receive feedback on the visuals, learning exercises, and make adjustments if needed. If the community is engaged before the workshop, it is more likely that they will be supportive during and after the workshop series ends.

Making the Case for Support from Administrators

Offering a new workshop series for older adults will require resources. One of the key resources is your time. If you do not have the support of your Administrator to offer the program, you will not be able to proceed. And if the support is only lukewarm, you could find yourself without dedicated time and resources to offer a successful program. Successful integration of self-management strategies requires organizational commitment. This entails endorsement of self-management support strategies in client education and delivery of care across the lifespan and continuum of care by senior administrators.

In an optimum situation, it is recommended that self-management principles should be built into your organization's mission and vision statements, policies and be evident in programs. However, in the early stages of introducing a program to an organization, this will not be the case. So how do you get the support from your organization's Administrator? Champions for self-management should be identified at all organizational levels to: support the strategy and sustain a process that assists clients in their problem solving and decision



making related to their chronic disease.²⁴ So, as a beginning step, assess the need for the program in your community and seek out the stories of its success that emerged in the pilot stage from ALCOA and use this evidence to seek support from your colleagues. This information may motivate your colleagues to serve as champions for introducing the program. Next, make a business case to the administrator and stress the need for the program based on evidence, the potential revenue (if any) and the fact that the program has been tested with similar groups with positive outcomes. Developing a budget and identifying potential partners and recruitment strategies will all help in gaining positive support from your Administrator.

Recruitment and Marketing

Once you have determined the need for the program, have identified the community where you plan to offer it, have organizational resources confirmed and have engaged local partners, you are ready to recruit participants in the workshop series. There would be nothing worse than to have a great program ready to go and have no one register. It is important to get buy-in and have older adults to come to the workshop you are offering.

The method of recruitment will depend on your knowledge of the community from which you wish to recruit. What communication channels exist in your community? What cultural issues need to be addressed? Is literacy an issue? Is this a program for men and women? Or is it gender specific? Is the community safe? Once you have created a community profile, you can package the messages about your product appropriately. Your programs could be advertised through local papers, short audio ads, flyers, brochures, word of mouth, by doctors, and through a website where people can register online. Promotional workshop posters are included in this *Tool Kit* and can be printed in black and white or colour.

Be creative and collaborative in recruitment strategies. As the Community Leader offering the program you and your partner organizations can also personally advertise the program in familiar venues. You can also create an event to promote the workshop series. An example of building a receptive audience to kick start a new program is the launch of this *Tool Kit*. ALCOA reached out to community centres and built partnerships with health and recreation centres.

Some of your recruitment strategies will be more successful than others—so evaluate what works and what doesn't for next time. Keeping a scrapbook or a log is one way of doing that.

For resources to assist you in promoting your workshops look for promotional material, and posters in the Resource Section of this *Tool Kit*.



Critical Success Factors

"The triad of goal setting, action planning, and problemsolving, while not rigorously evidenced based, appear to be important techniques to improve health-related behaviours and clinical outcomes. Finally, regular and sustained follow-up is essential"²⁵

One key success indicator is the relationship of the Community Leader with group participants. It is well documented that a helpful relationship will make a difference in motivating life style change and positive client outcomes.²⁶ The key to this is establishing rapport, which includes active listening, trust, respect, genuineness, empathy and responding to client concerns.²⁷ Further it is documented that rapport may be responsible for improving client satisfaction and treatment adherence.²⁸

There is also good evidence to confirm that self-directed goal-setting, problem-solving, skill-building action planning, healthy coping, stress management, self-monitoring and providing links to community resources have been effectively used in successful client education program.²⁹ There is some evidence that using more than one of these strategies increases effectiveness.³⁰

With consideration of the evidence, the *Tool Kit* workshop modules incorporate all of the above, with specific sections written on the importance of making links to community resources in order to sustain lifestyle changes, and best practice in adult education, facilitation, and evaluation. We cannot emphasize enough how important it is to include these elements in your program delivery if you are to achieve successful outcomes.

An example of a well-tested program that incorporates these key success indicators is the Stanford Self Management Program. This Program has gone through evaluations (including an international meta-analysis) of many kinds and now they have strong fidelity standards, and leaders must follow guidelines.

http://patienteducation.stanford.edu/programs/

For a full copy of the Clinical Best Practice Guidelines entitled: Strategies to Support Self-management in Chronic Conditions: Collaboration with Clients, published September 2010. http://rnao.ca/bpg/guidelines/strategies-support-selfmanagement-chronic-conditions-collaboration-clients



How to Integrate/ Continue the Activities when the Workshops End

Linking your program to community resources is one of the critical success factors for your program. If the community is engaged before the workshop, it is more likely that they will be supportive during and after the workshop series ends. Participants in your workshops will be investing 6 weeks of their time in getting started and once in the program will have already taken ownership to their *Passport*. The question of how to sustain the progress they have made is on everyone's mind. How to best do this will require creativity. Suggestions are provided in the workshop lesson plans but your group will be the greatest resource in helping with a strategy for sustaining the energy and synergy of the group.

To explore opportunities in your community engage participants in checking out these community contacts to see what can help them build physical activity into their life:

- talk to the local recreation department to see what programs they have for older adults;
- ask about safe walking paths and mall walking programs in the community;
- · check out seniors' centres in the neighbourhood;
- ask the local Y or fitness clubs if they have programs at a reduced cost for older adults;
- · visit health centres and clinics to help plan a program;
- ask personal physician or other health-care provider to help decide the appropriate level of exercise;
- approach health organizations such as The Osteoporosis Society, Heart and Stroke Foundation, and The Arthritis Society to help you choose appropriate programs;
- visit libraries and bookstores to get information about physical activity; and
- ask the local health department to help find what is available in the community.

There is a homework section in Workshop Module 3 in which participants are asked to research resources in their community. A handout of these tips for you to print and share with participants is included in the resource section of this *Tool Kit* and on pg. 62 of the *Community Leaders Guidebook*.



Advocacy for Community Action to Support Access to Programs

Your role as a Community Leader can take on the unexpected role of advocate in your community to make programs more accessible. Try using the Circle of Health© to assess the resources and barriers in your community for your group (a graphic can be downloaded from the website cited below). Communities can make it easier for everyone to be more physically active, reducing barriers of cost, transportation, mobility, etc. An active living community helps make active choices easy choices by:

- encouraging community use of schools for older adult physical activity programs;
- recruiting older adults as volunteers in supervising young children in walking to and from school;
- promoting physical activity in community parks, recreation facilities, older adult residences, and special events;
- opening shopping centres to facilitate walking programs in the winter;
- facilitating transportation to and from physical activity programs for older adults in need; and
- sponsoring safe, active transportation through bike paths and lanes, well-lit and scenic walking trails, pedestrian friendly neighbourhoods, snow- and ice-cleared walkways, and secure bike parking at local businesses.

Another suggestion is to ask the Mayor and municipal council what they are doing to help older adults be physically active in the community. You, as the Community Leader, might also engage group participants in becoming advocates. These tips are included in a handout on you can print and give to participants in your program. The handout is found in the resource section of the *Tool Kit* and on pg. 62 *Community Leaders Guidebook*.

For information on the Circle of Health[®] and supportive material see: www.circleofhealth.net

For more information on advocacy and strengthening community action, creating healthy public policy see:

www.phac-aspc.gc.ca/seniors-aines/afc-caa-eng.php



Program Evaluation

of the importance of confidentiality and therefore has included a one page evaluation form in the Passport. This form is to be completed by the participant and submitted to ALCOA to assist in evaluating the impact and effectiveness of the Passport.

We recommend that evaluation should always be a part of your program. Evaluation will help you improve your program or provide reassurance that you are doing things right and meeting the needs of your clients. Most important is to take the time to plan and build evaluation into your program up-front—it is easier to collect data as the program unfolds then to try and collect it once the program is finished and determine what type of evaluation you want to focus on—outcome evaluation, process evaluation or both. The type of program evaluation you do depends on what you want to know about your program. In most cases, it is helpful to look at both outcomes and process. Outcomes are the results of your program activities—what actually happened. Process evaluation describes how you achieved your outcomes, what did you do, how many participants attended, etc.

Your Personal Passport to Healthy Living is a key tool that will support your evaluation process. It is designed to help you collect valuable information from participants on their behaviors and level of change, and for them to have a way of evaluating their own action plans. ALCOA is aware of the importance of confidentiality and therefore has included a one page evaluation form in the Passport. This form is to be completed by the participant and submitted to ALCOA to assist in evaluating the impact and effectiveness of the Passport.

We recognize that the *Passport* is only one tool that will help with your evaluation. In order to collect more comprehensive evaluation data on your program, you may want to use other data collection tools. The types of data collection tools you use will depend on the type of data you want to collect.

Section 6 of the *Community Leaders Guidebook* provides more information on types of evaluation, scenarios and tips to help you work through the evaluation process, an overview of various data collection methods, and how to analyze and use your evaluation findings. In addition you will find evaluation forms that you can print and use in the resource section of this *Tool Kit*.

Additional resources can be found at the Canadian Evaluation Society www.evaluationcanada.ca.



Endnotes

- 1. PEI Health and Community Services Agency. (1996). Circle of Health. Charlottetown: PEI Health and Community Services Agency.
- 2. Herod, L. (2001). Teaching Adult Literacy. www.edu.gov.mb.ca/ael/all/publications/intro_course_complete.pdf
- 3. Improving Chronic Illness Care, (2005) as cited in Registered Nurses' Association of Ontario (2010).
- 4. O'Connor (2002), (2003) as cited in Registered Nurses' Association of Ontario (2010).
- 5. Coulter, (2005) as cited in Registered Nurses' Association of Ontario (2010).
- 6. CNO, 2006a; RNAO, 2006 as cited in Registered Nurses' Association of Ontario (2010).
- 7. Excerpt from Registered Nurses' Association. (2009) as cited in Registered Nurses' Association of Ontario (2010).
- 8. Bodenheimer, T., MacGregor, K., & Sharifi, C. (2005). Helping patients manage their chronic conditions. Oakland, CA: California Healthcare Foundation. www.chcf.org/documents/chronicdisease/HelpingPatientsManageTheirChronicConditions.pdf
- Registered Nurses' Association of Ontario (2010). Strategies to support self-management in chronic conditions: collaboration with clients. Toronto, Canada: Registered Nurses' Association of Ontario.
- Lorig, Ritter & Jacquez, (2005); Skinner et al. (2006) as cited in Registered Nurses' Association of Ontario (2010). Strategies to support self-management in chronic conditions: collaboration with clients. Toronto, Canada: Registered Nurses' Association of Ontario.
- 11. Duncan et al., (2009); Robbins et al., (2008) as cited in Registered Nurses' Association of Ontario (2010).
- 12. Cochran & Conn, 2008 as cited in Registered Nurses' Association of Ontario (2010).
- 13. Gibson, Powell & Coughlan, (2007); Kirschbaum, Aarestad & Buethe, (2003); Newman, Steed & Mullligan, (2004); Norris et al., (2002) as cited in Registered Nurses' Association of Ontario (2010).
- 14. Registered Nurses' Association of Ontario (2010).
- 15. Tuckman, B.W. & Jensen M.A.C. (1977). Stages of small-group developed revisited. Group & Organization Studies 2, 4.
- 16. Knox, (1980) as cited in Rosenthal & Brueggeman, (2001).
- 17. Rosenthal, E. & Brueggeman M.L. (2001). Adult Learning, Rural Wisconsin Health Cooperative.
- 18. RNAO, 2002 as cited in Registered Nurses' Association of Ontario (2010).



- 19. O'Connor, Gaylor & Nelson, (1985); Mejo, (1989); Paley & Lawton, (2001); Stewart, (1995) as cited in Registered Nurses' Association of Ontario (2010).
- 20. O'Connor et al., 1985 as cited in Registered Nurses' Association of Ontario (2010).
- 21. Dominick, J. E. (1992). Teaching methods. In D. E. Tallman (Ed.), Adult education perspectives for judicial education (pp. 4.1-4.13). Atlanta, GA: Georgia Centre for Continuing Education, University of Georgia.
- 22. Active Living Coalition for Older Adults. (2012). Community Leaders Guidebook.
- 23. L. McAdam, Canadian Centre for Activity and Aging, personal communication, January 25, 2013.
- 24. Glasgow et al, 2003 as cited in Registered Nurses' Association of Ontario (2010).
- 25. Registered Nurses' Association of Ontario. (2010).
- 26. O'Connor, Gaylor & Nelson, (1985); Mejo, (1989); Paley & Lawton, (2001); Stewart, (1995) as cited in Registered Nurses' Association of Ontario (2010).
- 27. RNAO, (2002) as cited in Registered Nurses' Association of Ontario (2010).
- 28. O'Connor et al., (1985) as cited in Registered Nurses' Association of Ontario (2010).
- 29. Anderson & Funnell, (2005); Bodenheimer et al., (2005); Bodenheimer & Handley, (2009); Glasgow et al., (2002); Hill-Briggs & Gemmell, (2007); Lorig et al., (2001); Mullen et al., (1997); Newman et al., (2004); Norris et al., (2002); Tang & Lansky, (2005) as cited in Registered Nurses' Association of Ontario (2010).
- 30. Anderson et al.,(2005); Ellis et al.,(2004); Lorig et al.,(2001); Krichbaum et al., (2003); Tang et al., (2005) as cited in Registered Nurses' Association of Ontario (2010).

CV A A Tool Kit



Module 1: Getting Started

A View of the Workshop

Purpose: To encourage positive engagement for participants in the program

Objectives:

To create a safe learning environment for all participants

To provide an overview of the program

To introduce *Your Personal Passport to Healthy Living*

To introduce Canada's Physical Activity Guidelines for Older Adults 65 Years & Older

To introduce Daily Dose

Equipment/ Materials needed:

Your Personal Passport
to Healthy Living
Pens/pencils/markers
Participant Handouts
– Canadian Physical Activity
Guidelines, on-line resources
Paper or name tags
Flip chart/masking tape
Optional: Computer with CD
disk drive, and monitor
or projector

Background Knowledge

Tips for the Leader

Workshop Format	Minutes
Welcome	3
Program & Session Overview	5
Introductions	30
Workshop Guidelines	5
Safety	3
Physical Activity Warm-up	10
Presentation of <i>Physical Activity Guidelines</i> .	15
Daily Dose	5
Introduction to Your Personal Passport to Healthy Living	10
Nutrition Break	15
Video: Quick and Easy Snack Ideas	2
Activity: Chart Completion	20
Introduction to Goal Setting	13
Video: Getting Started	3
Goal Setting	10
Closing	10
Evaluation	10
Post Class Self-Reflection (For Leader)	10



Background Knowledge Tips for the Leader

The group will be in the 'Forming stage' meaning that people want to belong and their behaviour is cooperative. Be aware of special needs of older adults.

Hearing

- Decrease background noise
- Enunciate (pronounce words clearly)
- If you know a person is low hearing place them close to the speaker
- Speak slowly

Language

Translation may be required

Written material

· Use white background with black lettering

Assess literacy levels of the group to help plan the next modules, i.e. when filling out forms start by doing them together so people are not singled out. People who do not have literacy issues may go ahead and fill the form in on their own.

When working through each Module

- 1. Progress slowly
- 2. Repeat the main ideas and instructions often
- 3. Engage participants in hands on experiences
- 4. Follow up after

Activities

For effective learning:

- 1. Present the core material
- 2. Practice
- 3. Reinforce the learning¹

Combining adult learning methods and interest-based problemsolving gives the Leader a process to follow to effectively conduct a workshop. The process includes:

- Begin with people's experiences What are their perspectives or stories? What are their needs? What knowledge have they gained from these experiences?
- Look for patterns and identify common needs and issues
 What are the connections among people's needs? What are the common issues?



- Add new information What do people already know about the needs and issues? What other information is needed? What clarifications are needed? What misinformation needs correction?
- Use information for next steps How can this information help with the next steps of meeting needs and addressing issues?
- Reflect on learning What has been helpful? What are the challenges? How will you support success?²

Note to the Leader: It will be important throughout the workshops that you reflect on your role in modeling what you are encouraging in others. You do not need to be perfect. For example, if you are asking participants to set a goal, demonstrate a goal you are setting for yourself. If you do not achieve your goal, you might share some of the challenges you experienced and ask participants about their challenges.



Workshop Format

Welcome

3 Minutes

As people are arriving at the class, they can make nametags if available and put their name on paper and fold it into a tent so others can see their name.

Throughout the Modules, we have provided you with suggestions on what you can say, but feel free to make it your own.

Welcome everyone to the workshop and thank everyone for taking the time to attend.

I'd like to welcome everyone to our First Module in the Healthy Living Workshop Series 'Getting Started'. My name is _____and before we begin I'd like to review the following points.

Program & Session
Overview 5 Minutes



Information

This is a six week evidence-based healthy living workshop for older adults with an emphasis on physical activity and healthy active aging, with our ultimate goal of staying well and independent, and preventing or better managing any chronic diseases. The program was designed by The Active Living Coalition for Older Adults (ALCOA) which is a national, charitable organization that was incorporated in 1999. ALCOA's focus is on creating and supporting activities that enable older Canadians to lead active lifestyles that contribute to their overall well-being.

We will be using *Your Personal Passport to Healthy Living* as we move through the next six weeks. We will also be reviewing the new *Canadian Physical Activity Guidelines*. For those of you who would like more information, there are lots of resources noted in the back of the *Passport*. I know not everyone may use the computer and even if you do it can be overwhelming because there is so much information. The websites featured in the Resource and Reference sections in the back of the *Passport* were chosen as they provide accurate and reliable information. I'll also be providing you with handouts of some of the things we cover in class (*Optional*)

Today's workshop

- Focuses on getting started in the 6 week Healthy Living Program.
- We will do an exercise that can be done at home as well.
 Dress comfortably when you come to the workshops as we will be trying different exercises each week to warm up.
 Also, wear comfortable, supportive footwear.



Housekeeping

- Class will last about ___ minutes.
- We will take a nutrition break about half way through the workshop lasting ____ minutes.
- Please feel free to get up if you need to. Washroom facilities are located ______.

If you have any questions or concerns throughout today's workshop, please do not hesitate to speak with me at any time, either in the group or privately.

Review today's workshop objectives

- To create a safe learning environment for all participants
- To provide an overview of the program
- To introduce Your Personal Passport to Healthy Living
- To introduce Canada's Physical Activity Guidelines For Older Adults—65 Years & Older
- To introduce 'daily dose'

Introductions 30 Minutes



Suggestion

Note for the Leader: Often one of the biggest reasons people choose to join and stay in a program are the social connections and interactions with others. It is also important for everyone in the group to feel comfortable and welcome. This activity gives people a chance to first talk in small groups before introducing and talking in the larger group.

Process

Before we get started, let's introduce ourselves. We will do an activity to get to know each other a little as we start our six week journey together.

- 1. As the Leader, introduce yourself, giving your name and your experience leading workshops.
- 2. Explain that you will now move into introductions of the participants. Post interview questions on a flipchart or PowerPoint so participants can refer to them. Suggestions of questions that can be used in the introductory interview:
 - Name
 - Why have they come to class? (occupational reasons, interest in the Workshop, social)
 - What would they like to learn from the class? (goals)
 - What do they already know about the topic? (experience level)³
- 3. Have the group get into pairs. They are going to interview each other first and then introduce each other to the larger group. If possible have them interview someone that they do not already know. That way they will get a chance to meet someone new.



Note:

- It may not be realistic to have the pairs answer all the questions in the interview they are doing.
- Choose the questions that you think are important.
- Ask the group about their preferences for learning activities – lecture, discussion, slides, hands on materials, combinations

Workshop Guidelines
5 Minutes



Suggestion

Set up working guidelines with participants. This should be done at the beginning of the program by the participants with guidance from program staff. The working guidelines should outline:

- How participants want to be treated while attending the program
- What rules need to be in place in order for participants to feel comfortable sharing their thoughts and experiences
- What behaviors within the group are acceptable and unacceptable
- Listen to each other
- Respect
- What is said in the room stays in the room confidentiality

Record the Guidelines on a flipchart and put it up on the wall. It is important to regularly review these guidelines. If they are not being adhered to, it is essential that you revisit them and work with participants to either overcome the issues or revamp them.

Safety

3 Minutes



Information

Safety tips for the activity sessions:

- Start slow
- Listen to your body
- Go at the pace that is comfortable for you
- Wear comfortable clothing and supportive footwear
- Remember to breathe naturally
- If you have any questions or concerns throughout today's workshop, please do not hesitate to speak with me at any time, either in the group or privately

Each week we will be doing an activity that can be easily done in class and at home. Being active for even 10 minutes a few times a day adds up! Physical activity will make you healthier! Let's get started!



Physical Activity Warm-up 10 Minutes



Activity



Presentation 15 Minutes



Information

Ideas for physical activity-choose 1

- Go for a 5-10 minute walk.
- Dance—You can put on an upbeat song and do the following movement to warm the body up. You can keep your feet marching the whole time. Shoulder shrugs. Shoulder circles. Arm circles. Chicken wings. Reach up to the sky and back down. Wrist circles. Wiggle fingers. Knees up.
- Invite people in the class to share what they know—someone in the class may like to lead a short exercise.
- Invite people from the community to come in and lead the class in a short exercise (e.g. yoga instructor, physiotherapist.)

Chest stretch

http://go4life.nia.nih.gov/exercises/flexibility/chest

This exercise, which targets and stretches the chest muscles, is also good for your posture, and can be done at home.

You can do this stretch while standing or sitting in a sturdy, armless chair.

- 1. Keep your feet flat on the floor, shoulder-width apart.
- 2. Hold arms to your sides at shoulder height, with palms facing forward.
- 3. Slowly move your arms back, while squeezing your shoulder blades together. Stop when you feel a stretch or slight discomfort.
- 4. Hold the position for 10-30 seconds. *This may be a shorter time in the beginning and people can build up to this.*
- 5. Repeat at least 3-5 times. For the class you may just want to repeat it once or twice.⁴

Canadian Physical Activity Guidelines For Older Adults— 65 Years & Older

Give participants the *Canadian Physical Activity Guidelines* handout. Review handout together.

Background information

The Canadian Society for Exercise Physiology (CSEP) is the principal body for physical activity, health and fitness research, and personal training in Canada. *Canadian Physical Activity Guidelines* describe the *amount* and *types* of physical activity that offer substantial health benefits for Canadians. For these workshops we will be focusing on the *Canadian Physical Activity Guidelines for Older Adults—65 Years* & *Older.* (*Click here to go to the Guidelines in the Resources section.*)



Note: You may want to point out that the *Canadian Physical Activity Guidelines for Adults (18-64)* do not differ much from the *Canadian Physical Activity Guidelines for Older Adults—65 Years & Older.* The Guidelines for adults 65 years and over and those with poor mobility suggest physical activities to enhance balance and prevent falls.

Points to highlight:

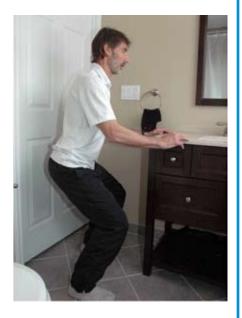
- To achieve health benefits and improve functional abilities, adults aged 65 years and older should accumulate at least 150 minutes of moderate intensity to vigorous intensity aerobic physical activity per week, in bouts of 10 minutes or more. Start with a few minutes build up to 10 minute bouts to eventually total 150 minutes each week. It is also beneficial to add muscle and bone strengthening activities using major muscle groups, at least 2 days per week.
- Those with poor mobility should perform physical activities to enhance balance and prevent falls.
- More daily physical activity provides greater health benefits.⁵

Ask if there are any questions.

Daily Dose 5 Minutes



Activity



The idea of the daily dose⁶ is to make physical activity a part of your regular daily routine, just like brushing your teeth. The principle is that you attach a physical activity to a daily routine and location. For example, when brushing your teeth you can do a squat exercise as a daily dose activity. The daily dose becomes routine so entering the bathroom to brush teeth will cue the daily dose routine.

Lower body daily dose

This routine has four mini exercises in it and is connected to when you go to the bathroom to brush your teeth. We will cover one exercise today and add one more in each workshop. To complete the set repeat the exercise 10 times. Be sure to tuck in your pelvis and tighten your stomach muscles (like when you are coughing). Hold the bathroom counter for support. During the workshop have participants hold onto the table for support.

Partial squat

Standing with your legs apart, bend your knees and slowly lower yourself as you were about to sit in a chair. Stop halfway. Slowly straighten up. Repeat.



Introduction to Your Personal Passport to Healthy Living 5 Minutes



Resource

The *Passport*^{7,} developed by experts across Canada, provides information on diabetes and other chronic diseases that can be prevented or better managed with a healthy lifestyle. It also includes information on the benefits of physical activity, healthy eating, and maintaining mental health. The *Passport* is based on current clinical evidence regarding the effects of healthy lifestyle on prevention and maintenance of chronic disease. It also provides information on the influence of beliefs and values and stages of change, and provides tips for action to improve overall health.

The *Passport* is a self-management tool that has been developed to assist with primary and secondary prevention of diabetes among older adults who have or are at risk of developing Type 2 diabetes. Although there is a focus on Type 2 diabetes, the information is of value to all individuals as the *Passport* highlights the impact of physical activity and a healthy lifestyle on several chronic diseases.

Activity 5 Minutes



Activity

- Read the Introduction of the Passport as a group to understand the purpose of the book
- Inside the front cover is an area where you can personalize
 it. You can do this at home for the next workshop. Put
 something in there that will inspire you on your journey to a
 healthier lifestyle.
- We will be using the Passport each week and reviewing the material in each section. Keep track of your results and we will be able to see what you have accomplished in 6 weeks.

Nutrition Break 15 Minutes



Activity

To engage the participants ask what they would like to have at the nutrition break. Participants may wish to volunteer to bring in a healthy snack for the next workshop. A sign-up sheet could be provided to those who wish to bring in something.

Note: You do not want to create or cause financial stress to anyone, people can volunteer if they wish. It may be a way for people to try something new. People may get ideas from the video, or from the list below, or they may have their own favourite recipe they would like to share with everyone.

This video has tips for making snacks healthy, easy and convenient. It includes new ideas to change up your daily eating routine.

Video: Quick and easy snack ideas 2 Minutes

www.eatrightontario.ca/en/Recipes/Snacks/Video--Quick-and-easy-snack-ideas 8



Ideas:

- Lower fat cheese and crackers
- · Fruit-fresh or canned in own juices
- Frozen yogurt with berries
- · Milk and oatmeal cookie
- Yogurt and fruit
- Trail mix-nuts and fruit
- Veggies and dip⁹

Confirm snacks for next week. If participants are bringing in a snack for the group, ask them to also bring along the recipe to share with the group.

Activity

20 Minutes



Activity

There are four charts in *Your Personal Passport to Healthy Living* that are important to fill out at the beginning of the program to track progress over time.

Charts to be completed in the workshop

- pg. 19 Track changes in eating habits over time
- pg. 25 Changes in beliefs and attitudes
- pg. 27 Stages of Change for Healthy Eating and Physical Activity
- pg. 30-31 Your Journey to Success

As a group, read through these chart instructions and invite the participants to fill them in. They will only take a couple minutes each.

Note: Pay attention to literacy levels. These may need to be read aloud and completed as a group.

Charts that can be completed at home or in another workshop.

- pg. 11 Record measurements at different time to see progress
- pg. 13 Tracking physical activity encourage the group to use this each day

Introduction to
Goal Setting 13 Minutes



Suggestion

Video: Getting Started – physical activity video 3 minutes

https://www.youtube.com/watch?v=PDUKL3WXi9w 10

Goal Setting 10 Minutes

The pros and the cons to making change.

Pros—The pros are the things that are making you want to change, i.e. positive support, feeling better, having more energy and being social.



Cons—the cons are things that will stop you from making a change—barriers, such as weather, lack of support, fear.

The only way that you are going to make the change is if the pro is greater than the con.

Pro/Con Example

Someone wants to start walking for 10 minutes every day to increase their physical activity.

What are the pros? Why would someone want to do this?

- Want to feel better
- Socialize
- Have fun

What are the cons? What would stop someone from making this change?

- · Being nervous about falling
- No time
- Weather
- · Not feeling safe, fear of injury, falling, environment
- Transportation

How could an individual overcome the barriers/cons so that the pros are greater than the cons?

- Find a buddy to go with
- Go to the mall

Read through page 28 in the Passport

- Invite people to think of a goal that they would like to focus on before we meet again for the next workshop. Tell the group to think of a small realistic change that they would like to make in their lives. If people are struggling, make some suggestions just to get people thinking (e.g. drink a glass of water at one meal every day, add fruit to lunch, walk 10 minutes 3 times a week, etc.)
- Ask participants to write their goal on page 29 of the *Passport*.
- Invite participants to share their goal with the group and to think of any pros/cons that they may face. Encourage group discussion.

Note to the Leader: Make sure the goals for the participants are simple, realistic, and attainable over the next week. It may be helpful here to model setting a goal for yourself, so that participants can see you are also engaged in the process.



Closina

10 Minutes

Recap key concepts

83

Resource

Sustainability – once this workshop is over, people may want to continue to meet either informally or formally for an activity (e.g. going for a walk every Wednesday morning at 10 am), social event (e.g. meeting for a coffee), etc. We will talk about this idea as the workshops proceed to determine if there is an interest, thereby planting the seed of the idea for the participants to think about.

Over time, we want to add more physical activity to our lives. For the workshop participants who have been inactive, encourage starting with 10 minutes each day.

You can add muscle and bone strengthening 2 days a week depending on your ability.

Take your time.

Listen to your body.

If you are unsure of what you should be doing talk to your health care practitioner.

Use the activity log on page 13 in the Passport. It is important to keep track, as the participants will be able to then see changes over time. It is easy to forget about small changes, but they all add up. Record keeping is important for these 6 weeks.

REMINDER – Bring Passport next week.

REMINDER – Bring the snack next week if you signed up. Also bring along the recipe to share with the group.

Decisions, messages

In each session we will address key themes such as physical activity, healthy eating, and goal setting even though the workshop may have a different focus. Next week the topic is Motivating Change. But we will also try another exercise, provide new food suggestions, etc.

Remember your goal for the week, and the daily dose activity!

REMINDER—If anyone hears news in the media relating to healthy aging, write it down or bring in the article to have a short discussion in the next week.



Evaluation 10 Minutes

Use one of the following suggestions to evaluate the session:

Round table to see how the meeting went

Flipchart – have a + and a - ask how people are feeling about the workshop. Any concerns can go on the negative side

Ask for one word how people are feeling

Ask for an expression of how people are feeling

- Start, stop, and continue
- A happy face continuum
- A fill in: "This session was _____
 because _____.
- In the next session, I would like ______

Self-Reflection (For Leader) 10 Minutes Reflect on your planning and delivery of the module and record any changes that you might make.

What worked well? What can be improved?



Endnotes

- 1. National Institute on Aging (2012). Introducing the Toolkit. http://nihseniorhealth.gov/toolkit/toolkitfiles/video/toolkitvideo_ na.html?intro=yes
- 2. The Quaich Inc. (2010). Circle of Health Facilitator's Handbook Prince Edward Island: The Quaich Inc.
- 3. Rosenthal, E. & Brueggeman M.L. (2001).
 Adult Learning Rural Wisconsin Health Cooperative.
- 4. National Institute on Aging (2013). Chest Stretch. http://go4life.nia.nih.gov/try-these-exercises/flexibility/chest
- 5. Canadian Society for Exercise Physiology (2012). Canadian Physical Activity Guidelines for Older Adults— 65 Years & Older. www.csep.ca/english/view.asp?x=949
- Griffin, J. C. (2013). Boost lifestyle activity to support clients in aging well. The Journal on Active Aging, March/April, 44-54.
- 7. Active Living Coalition for Older Adults. (2012). Your Personal Passport to Healthy Living. Active Living Coalition for Older Adults.
- 8. EatRight Ontario. (2013). Quick and Easy Snack Ideas.
- 9. Keller & Wdoniak. (2012). A guide to healthy eating for older adults. EatRight Ontario.
- Active Living Coalition for Older Adults. (2012).
 Getting started physical activity video.



Module 2: Motivating Change

A View of the Workshop

Purpose: To motivate participants to make changes toward healthier lifestyles

Objectives:

To create a safe learning environment for all participants

To become familiar with the stages of change

To set personal SMART goals for themselves

Equipment/ Materials needed:

Tool Kit

Passports

Pens/pencils/markers

Handouts

Paper or name tags

Flip chart/masking tape

Optional: Computer with CD disk drive, and monitor

or projector

Background Knowledge

Motivating Change Goal Setting, SMART Goals Tips for the Leader

Workshop Format	Minutes
Welcome	3
Session Overview	5
Reflect on Previous Module/Group Check-in	20
Icebreaker	10
Safety	3
Activity: Home Owner and the Robber	15
Physical Activity Warm-up	5
Presentation	15
Video: Making Lifestyle Changes	4
Nutrition Break	15
Video: Plate Size Matters	2
News Bites	5
Daily Dose	5
Activity: Setting SMART Goals	15
Video: Piano Stairs in Stockholm	2
Activity Options: SMART Goals	15
Goal Setting	10
Closing	10
Evaluation	10
Post Class Self-Reflection (For Leader)	10



Background Knowledge Motivating Change

The Process of Change



Stages of Change

We go through different stages when we are going to make a change in our life, 1, 2 and we can go back and forth through those stages. It is important that you, as a Community Leader, have an understanding of the stages of change so that you can support older adults in moving from one stage to the next. Participants will need support and acknowledgement that change takes time.

Precontemplation

In this stage, people do not intend to take action in the foreseeable future (defined as within the next 6 months).

People in this stage often underestimate the pros of changing behavior and place too much emphasis on the cons of changing behavior.

This is the "don't bug me" stage.

There is no intention of making a change right now.

It is like being in a "denial" state.

This is the time to think about what you want to change and get information on it.

Ex. "There is no use in changing what I bake at home. Everyone prefers cookies anyway."

Contemplation

In this stage, people are intending to make a change in the foreseeable future (defined as within the next 6 months).

People recognize that their behavior may be problematic, and a more thoughtful and practical consideration of the pros and cons of changing the behavior takes place, with equal emphasis placed on both.

This is the first big step.

The more reasons there are to make the change, the easier it is to go to the next step.

Ex. "Okay, I guess there are good reasons for healthier snacks for me and my family. We could all do with better eating habits."

Preparation

In this stage, people are ready to take action (defined as within the next 30 days).

People start to take small steps toward the behavior change, and they believe changing their behavior can lead to a healthier life.

Plans are under way to make the change in the near future.

Ex. "I will get information on how to make healthier snacks."



Action

In this stage, people have recently changed their behavior (defined as within the last 6 months) and intend to keep moving forward with that behavior change.

People may exhibit this by modifying their problem behavior or acquiring new healthy behaviors.

There is a successful change in behavior.

There has been success; however there may be slip ups. Ensure your participants know that they may slip up—make sure they know this is OK—just get back to making healthier choices.

Ex. "I noticed that I am eating healthier snacks. There are better choices than cookies, and they even taste good!"

Maintenance

In this stage, people have sustained their behavior change for a while (defined as more than 6 months) and intend to maintain the behavior change going forward.

People in this stage work to prevent a relapse to earlier stages.

Ex. "I have chosen to always have healthier snacks and food served for me and my family."

Here is what you can say to your participants, "There may be times when the going is not so easy or you've gone back to your old habits but hang in there! Think about how much better you feel! Brag about it! If you go backwards, don't feel guilty, just get back on board, again!"

Make sure your participants recognize and celebrate their successes.

Relapse

This is a normal part of the process of change.

At this stage, people usually feel demoralized.

It's okay to have slipped, but it's important to get back up and try again. Think about why the relapse occurred and make changes as necessary. If the behaviour change was not enjoyable, try something else.³



Background Knowledge Goal Setting SMART Goals

Specific

A specific goal has a much greater chance of being accomplished than a general goal. To set a specific goal, ask the participant to answer the six "W" questions:

Who: Who is involved?

What: What do I want to accomplish?

Where: Identify a location.
When: Establish a time frame.

Which: Identify requirements and constraints.

Why: Outline specific reasons, purpose or benefits of

accomplishing the goal.

Example: A general goal would be, "Get in shape." But a specific goal would say, "Join a health club and workout 3 days a week."

Measurable

Encourage participants to establish concrete criteria for measuring progress toward the attainment of each goal they set. When participants measure their progress, it will help them to stay on track, reach target dates, and experience the exhilaration of achievement that will spur them on to continue the effort required to reach their goal.

To determine if a goal is measurable, ask questions such as ... How much? How many? How will I know when it is accomplished?

Attainable

When individuals have identified goals that are most important to them, they begin to figure out ways to make them come true. They develop the attitudes, abilities, skills, and financial capacity to reach them. They begin seeing previously overlooked opportunities to bring themselves closer to the achievement of their goals. We can attain almost any goal when we plan our steps wisely and establish a time frame that allows us to carry out those steps. Goals that may have seemed far away and out of reach eventually move closer and become attainable, not because goals shrink, but because we grow and expand to match them. When individuals list their goals, they build self-image and see themselves as worthy of these goals. They then develop the traits and personality that allows them to possess them.

Realistic

To be realistic, a goal must represent an objective toward which a person is both willing and able to work. A goal should be simple, one that can be achieved each week, which will also increase self-esteem,



and demonstrate that they can be successful changing their lifestyle. This may encourage individuals to take on bigger goals. Even if the goals all stay simple and small, they still add up to big successes. A goal is realistic if you truly believe that it can be accomplished.

Timely

A goal should be grounded within a time frame. With no time frame tied to it there is no sense of urgency. If you want to lose 10 pounds, when do you want to lose it by? "Someday" won't work. But if you anchor it within a timeframe, "by May 1st," then you have set your unconscious mind into motion to begin working on the goal.

Tangible

A goal is tangible when you can experience it with one of the senses, that is, taste, touch, smell, sight or hearing. When your goal is tangible you have a better chance of making it specific and measurable and thus attainable.⁴

Example: To walk around the block three days a week.

Tips for the Leader

The group may start to move into 'Storming phase' when people begin to feel comfortable and express themselves. The group enters a challenging time where there are many different perspectives and ideas.

Problem solving and conflict resolution may be needed

Remember these tips!

Be aware of special needs of older adults.

Hearing

- Decrease background noise
- Enunciate (pronounce words clearly)
- If you know a person is low hearing place them close to the speaker
- Speak slowly

Language

Translation may be required

Written material

Use white background with black lettering

Assess literacy levels of the group to help plan the next module.



When working through each Module

- 1. Progress slowly
- 2. Repeat the main ideas and instructions often
- 3. Engage participants in hands on experiences
- 4. Follow up after

Activities

For effective learning:

- 1. Present the core material
- 2. Practice
- 3. Reinforce the learning⁵

Combining adult learning methods and interest-based problemsolving gives the Leader a process to follow to effectively conduct a workshop. The process includes:

- Begin with people's experiences What are their perspectives or stories? What are their needs? What knowledge have they gained from these experiences?
- Look for patterns and identify common needs and issues
 What are the connections among people's needs? What are the common issues?
- Add new information What do people already know about the needs and issues? What other information is needed? What clarifications are needed? What misinformation needs correction?
- Use information for next steps How can this information help with the next steps of meeting needs and addressing issues?
- Reflect on learning What has been helpful? What are the challenges? How will you support success?⁶

Note to the Leader: It will be important throughout the workshops that you reflect on your role in modeling what you are encouraging in others. You do not need to be perfect. For example, if you are asking participants to set a goal, demonstrate a goal you are setting for yourself. If you do not achieve your goal, you might share some of the challenges you experienced and ask participants about their challenges.



Workshop Format

Welcome

3 Minutes

Session Overview
5 Minutes



Information

Reflection/Group check in 20 Minutes



Activity

Welcome to our second module of the program. Hope everyone had a successful week and were able to stick to the goals you set. We will talk about that in a minute.

If you have any questions or concerns throughout today's workshop, please do not hesitate to speak with me at any time, either in the group or privately.

Today the topic is about how we change to achieve a healthier lifestyle. We will be looking at the stages of change that we all go through.

We will also be looking at setting goals in a bit more detail. We will be looking at S.M.A.R.T. goals because we are all smart! Before we get started we are going to move into trying out a new activity to get us all warmed up. We will then talk about how you got along since we met at our last workshop.

Review today's workshop objectives

- To create a safe learning environment for all participants
- To become familiar with the stages of change
- To set personal SMART goals for themselves

If there is anyone new joining this week everyone in the room could say their name for introductions.

Last week we looked at the *Physical Activity Guidelines* and we went through the *Passport* and filled in some of the charts. You were given homework to fill in a few other charts. Check with participants if they completed their homework.

Invite people to share their experience with the goal that they selected last week.

- Were the participants successful with their goal?
- What pros and cons did they experience?

Note to the Leader: Peer support is very important and personal experiences can motivate others. This is a wonderful opportunity for the participants to identify if they met their goal, and if not, what were the issues/cons? Allow the group to discuss ideas so they can reach their goals. This discussion may help the participant to be successful with the goal for next week.

- Have you started to think differently on any of the topics that came up last week or when you were going through the Passport?
- Are there any questions/concerns that came up over the last week that you would like to discuss?



Icebreaker

10 Minutes

Activity

Activity

Everyone likes to spend time with people that share similar interests. This exercise is meant to assist the participants in getting to know the people who are here. It has been the experience in many groups that the relationships that are built through this exercise continue after the workshops are over. There is no expectation that this will happen but you never know!

Process

Place a single piece of paper at everyone's place. Ask each person to write out three of their interests on the piece of paper. Ask everyone to read their top interest. Instruct the group to listen as people with similar interests will be forming a group. Once everyone has shared, instruct individuals with similar interests to form a group. For the next 5 minutes have the group share information about themselves and their interests.

If an individual is not in a group, have them consider their second or third interest in order to join a group.

Safety

3 Minutes



Information

Remind the participants about these safety tips for activity:

Just want to remind you about safety tips:

- Start slow
- Listen to your body
- Go at the pace that is comfortable for you
- Wear comfortable clothing and supportive footwear
- Remember to breathe naturally

Home Owner and the Robber 20 Minutes



Activity

Note to the Leader: Do not tell the group the purpose of this activity as this will be discussed at the end.

The purpose of this activity is to show how changes can make us feel uncomfortable. When we make too many changes at once or one big change (e.g. very restrictive diet, quitting smoking tomorrow etc.) it can be too difficult and it is very easy to go back to the way we were our old routine. Start out by making one small change at a time. We want the changes to be comfortable and participants able to make them part of their everyday lifestyle.



Process

- Ask people to get into pairs—ask them to work with a person they have not worked with before.
- Ask people to decide who is going to be the home owner and who is the robber. Face each other. The home owner is to observe the robber so that they could describe the individual to the police. Take a few minutes and a good look.
- Both people turn with their backs to each other.
- The robber then changes seven things about themselves e.g. remove one shoe or earring.
- Leader instructs all pairs to face each other when all robbers have made their changes.
- The home owner has to tell the robber what changes the robber made to their appearance.
- When all are done, the Leader instructs all pairs to go 'back to back' again, and the robber changes three or five more things about their appearance.
- When changes are done, the Leader asks all the groups to face their pair and the home owner once again, tries to find the three or five changes to the robber's appearance.
- When they are all done, the Leader tells everyone that the activity is done and they can sit back down in their seat.

Note to Leader: Observe how quickly people return to their normal appearance. Also observe if anyone left one of their changes when they sat down (e.g. jewelry off, hair different, sleeves rolled up, shoes off, etc.)

Discussion with group:

Ask both the 'homeowners' and the 'robbers' how they felt about the experience. Discuss with the group what they think was the purpose of the activity. All answers can be correct, but if they don't guess it – the Leader can identify another purpose which is how large changes are uncomfortable (either too many or too big), but small simple changes are things we might like and can live with and enjoy the change. The Leader can also point out participants who have kept their 'robber' changes as examples of being comfortable with a small change.



Physical Activity Warm-up 10 Minutes



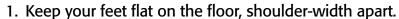
Activity

Overhead Arm Raise (from sitting position)

http://go4life.nia.nih.gov/try-these-exercises/strength/overhead-arm-raise

This exercise will strengthen your shoulders and arms. It should make swimming and other activities such as lifting and carrying grandchildren easier.

You can do this exercise while standing or sitting in a sturdy, armless chair.



- 2. (Start without using weights in the class.) Hold weights at your sides at shoulder height with palms facing forward. Breathe in slowly.
- 3. Slowly breathe out as you raise both arms up over your head keeping your elbows slightly bent.
- 4. Hold the position for 1 second.
- 5. Breathe in as you slowly lower your arms.
- 6. Repeat 10-15 times.
- 7. As you progress and grow stronger, rest after the first set, and repeat 10-15 more times.





Tip:

- As you progress, use a heavier weight and alternate arms until you can lift the weight comfortably with both arms.
- Use water bottles, cans of soup or free weights or other objects you have at home.

Presentation 15 Minutes



Information

Draw the cycle of change (from page 40) on a flipchart, explaining each phase using the information in the Background Knowledge section. Get the group to think about a specific lifestyle change. If you feel comfortable share your experience of change with the group. Ask the group how they feel about making a change in their lifestyle, and whether any of them have done this before. Draw from participants their own personal knowledge about the process of making change, barriers, motivators, etc. Also get the group to think about what changes they would like to make over the course of this Workshop.

Note to Leader: A message to share with participants about the importance of sharing their goals. "Accountability is very important to behavior change. This is why we have you share your goals with others during the workshop. To maintain the change you may want to think about someone that you can connect with to share future goals after the six sessions are over. This could be someone in this group, or a family member, or a friend. Sharing goals also benefits others as it opens doors for them to set goals as well."



Refer the group to pages 26-27 in their Passport that were completed at the last workshop. There is room on the chart to complete it again at the middle and end of the workshop to show progress.

Video: Making lifestyle changes

4 Minutes

https://www.youtube.com/watch?v=dptqLCadMvM 8

Nutrition Break 15 Minutes



Activity

Ideas:

- Lower fat cheese and crackers
- Fruit-fresh or canned in own juices
- Frozen yogurt with berries
- · Milk and oatmeal cookie
- Yogurt and fruit
- Trail mix-nuts and fruit
- Veggies and dip⁹

If anyone has signed up to bring a snack next week, remind them. Ask them to also bring along the recipe to share with the group.

Video: Plate size matters

2 Minutes

www.eatrightontario.ca/en/Videos/General-Healthy-Eating/Video--Plate-size-matters

Did you know that the size of your plate might make you eat more than you need? Watch this video to learn more.¹⁰

News Bites 5 minutes



Resource

Ask participants if anyone saw, heard or read any news bites of interest regarding healthy aging. Discuss with the group the content and credibility of the article:

- Do we know who wrote it?
- Do we know their qualifications?
- Are the sources they are using credible?
- Is the source providing the news credible?

Explain to the group what the word credible means. Credible—worthy of belief or confidence; trustworthy: An example would be a credible website.

As a follow-up, if necessary, one person may volunteer to look up the information, or talk to a professional to see if the information is reliable. Examples of websites that people could look at include EatRight Ontario, Health Canada, ALCOA and Silver Times.

Note to the Leader: Bring a News Bite to share with the group.

ALCO A C V A A

Active Dring Cultion
for Older Adults

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Daily Dose

5 Minutes



Activity



Activity—
Setting SMART Goals
15 Minutes



Information

The idea of the daily dose¹¹ is to make physical activity a part of your regular daily routine, things that we all do as part of our day such as getting dressed. The principle is that you attach a physical activity to a daily routine and location. For example, when you are getting dressed you can do one or more exercises from the upper body daily dose. When you make the daily dose part of your routine, then getting dressed will cue the exercise.

Upper body daily dose

This is the first routine of five mini exercises and is associated with getting dressed in your bedroom. One set equals performing the exercise for the number of counts specified.

Single arm wall stretch

With a straight arm, put your right hand on the wall at shoulder height. Slowly turn your body away from the wall to gently stretch the chest. Hold for 15 seconds. Alternating arms, perform this exercise twice on each side.

Setting goals and having an action plan are critical to success. Writing down the goals and how they are going to achieve them will make them real! When participants write their goals, encourage them to make it something they can and WANT to do within the next week. Setting smaller, realistic goals that lead to a larger goal are easier to accomplish. Seeing these small steps of success will motivate them to keep going. Setting unrealistic goals can make them overwhelmed and unmotivated because success is too far away.

Process

At the last workshop everyone set a small goal to work on until today. We are going to set SMART goals. Goals are easier to meet if they meet these steps.

Present the SMART criteria as outlined in the Background Knowledge.

Video: Piano stairs in Stockholm

2 Minutes

www.youtube.com/watch?v=dN0eabGb-vl 12

Note to the Leader: Watch the video and then have a discussion on the importance of fun. People enjoy fun! This video is from Stockholm – it shows stairs and an escalator side by side. Very few people were taking the stairs. During the night the stairs were turned into piano keys so that when people stepped on them it made the sound of a piano. Most people started taking the stairs! Remember to make your goal fun and something that you will enjoy doing.

Refer participants to pages 28-29 of the Passport¹³-Setting Goals



Invite people to take a couple of minutes to write down the goal they would like to work on during the next week. Participants may want to consider the different sections of the *Passport* and make a goal in a particular area such as physical activity, healthy eating, or mental health.

It is often difficult to know where to begin and how best to recognize and encourage a person through a change process. But it is important to recognize that small changes are easier to achieve than very large ones. For example, suggest participants start with walking around the house, to the corner store, or down the hall in their building, before walking miles. Other examples could be to drink more water, increasing fruit or vegetables by one a day, get up and walk around the house during commercials.

Activity Options— SMART Goals 15 Minutes



Activity

Choose 1

There are two options to choose from depending on the group. If your group has formed and participants are engaging in discussion, choose option 1. If your group is quiet and not participating in discussion, choose option 2.

Option 1

In a small group, spend 5 minutes and think about the type of problems you might encounter at each stage of change. What are the barriers in the way of achieving your goal? What would you do to overcome these problems? Concentrate 10% on the problem and 90% on the solution. Try to turn every problem into a challenge and every challenge into an opportunity.

Option 2

In a small group, spend 5 minutes discussing this case study: Julie is a 65 year old woman and was recently diagnosed with diabetes. Her doctor recommended that she reduce the amount of sugar in her diet, lose weight and monitor her blood sugar five times a day.

Julie's favorite food is chocolate. She likes to buy a chocolate donut or an éclair during her work break. After work, she likes to walk down the street to the convenience store and buy a Coke. She really likes potato chips and ice cream. She buys these items every week when grocery shopping.

Julie's doctor has recommended that she lose weight. If she did lose weight, she might have better control over her diabetes. Julie says that she is interested in losing weight, but has not yet made any efforts to change her diet.



Julie has never been involved in regular exercise. Her only regular exercise is her walk down the street to the convenience store and her two-block walk from the bus stop to the bakery where she works. One of the activities she does like is going to parks. Anything that involves being outside seems to be fun for her.

Questions to be discussed in small groups:

- What are the behaviors that you suggest Julie change to improve her health?
- What stage of change is Julie at now?
- Do you have any suggestions for Julie in order for her to change her behavior?

Reporting Back

Plan to allow ten minutes for groups to report back to the large group.

Goal Setting 10 Minutes



Suggestion

Note to the Leader: Make sure that people understand that they are to be accumulating their goals each week and should be reporting if they are successful with all of their goals, and not just the new one.

Invite people to share their SMART goal.

- Remember when making new goals always ask if it is realistic.
- Which is bigger the pros or cons factors?
- Encourage group discussion on the SMART system.

Closing

10 Minutes



Resource

Briefly review the Stages of Change.

You may relapse and that is okay. Start again and keep going.

Next week the topic is healthy eating. We will be learning about nutrition labels that are on most of the food we buy.

REMINDER—Please bring from home the nutrition label or the package food came in for the activity you will be doing next week.

There is space in the back of your *Passport* to write down reminders for next week.

We will also try another exercise.

Remember your goal and daily dose.

Use the activity log on page 13 in the Passport.

REMINDER – Bring *Passport* to the next workshop.

REMINDER – Bring the snack for next week if you signed up for it. Also bring along the recipe to share with the group.



REMINDER—If anyone hears news in the media relating to healthy aging, to write it down or bring in the article to have a short discussion in the next week.

Positive Encouragement: Keeping notes in the Passport and setting goals may seem like hard work – but they are your investment to improved health and enjoyment of life. You need to congratulate yourselves for being here!

Evaluation 10 Minutes

Use one of the following suggestions to evaluate the session:

Round table to see how the meeting went

Flipchart – have a + and a - ask how people are feeling about the workshop. Any concerns can go on the negative side

Ask for one word how people are feeling

Ask for an expression of how people are feeling

- Start, stop, continue
- A happy face continuum
- A fill in: "This session was _______
 because _____.
- In the next session, I would like _________

Self-Reflection (For Leader) 10 Minutes Reflect on your planning and delivery of the module and record any changes that you might make.

What worked well?

What could be changed for next week?



Endnotes

- 1. Boston University School of Public Health (2013). The transtheoretical model (Stages of change). http://sph.bu.edu/otlt/MPH-Modules/SB/SB721-Models/SB721-Models6. html
- 2. Prochaska, J., Norcross, J., & DiClemente, C. (1994). Changing for Good, A Revolutionary six-stage program for overcoming bad habits and moving your life positively forward. New York: William Morrow & Co.
- 3. Active Living Coalition for Older Adults (2012). Community Leaders Guidebook.
- 4. Active Living Coalition for Older Adults (2012). Community Leaders Guidebook.
- 5. National Institute on Aging (2012). Introducing the Toolkit. http://nihseniorhealth.gov/toolkit/toolkitfiles/video/toolkitvideo_ na.html?intro=yes
- 6. The Quaich Inc. (2010). Circle of Health Facilitator's Handbook Prince Edward Island: The Quaich Inc.
- 7. National Institute on Aging (2013). Overhead arm raise. http://go4life.nia.nih.gov/try-these-exercises/strength/overhead-arm-raise
- 8. Active Living Coalition for Older Adults (2012). Making lifestyle changes. https://www.youtube.com/watch?v=dptqLCadMvM
- 9. Keller & Wdoniak. (2012). A guide to healthy eating for older adults. EatRight Ontario.
- 10. EatRight Ontario (2013). Plate size matters. http://www.eatrightontario.ca/en/Videos/General-Healthy-Eating/Video---Plate-size-matters
- 11. Griffin, J. C. (2013). Boost lifestyle activity to support clients in aging well. The Journal on Active Aging, March/April, 44-54.
- 12. Volkswagen (2009). Piano stairs in Stockholm. http://www.youtube.com/watch?v=dN0eabGb-vl
- 13. Active Living Coalition for Older Adults. (2012). Your Personal Passport to Healthy Living.



Module 3: Healthy Eating

A View of the Workshop

Purpose: To increase knowledge on the importance of healthy eating and to motivate people to make healthy food choices.

Objectives:

To build on participant knowledge of healthy eating

To increase awareness of the barriers to making healthy food choices

To identify ways to make healthy eating easier

Equipment/ Materials needed:

Tool Kit

Passports

Pens/pencils/markers

Flip chart/masking tape

Nutrition labels

Participant Handouts

- · Action Plan
- A Guide to Healthy Eating for Older Adults

Optional: Computer with CD disk drive, and monitor or projector

Background Knowledge

Healthy Eating
Tips for the Leader

Workshop Format	Minutes
Welcome	3
Session Overview	5
Reflect on Previous Module/ Group Check-in	20
Safety	3
Physical Activity Warm-up	10
Presentation	15
Nutrition Break	15
News Bites	5
Daily Dose	5
Activity: Reading Nutrition Labels	20
3 EatRight Ontario Videos	.9
Activity: Action Plan for Healthy Living	20
Activity: Group Activities (Optional)	15
Goal Setting	10
Closing	10
Evaluation	10
Post Class Self-Reflection (For Leader)	10

Note: You could hold this meeting at a local grocery store. Many grocery stores have meeting space and a dietitian who could do a presentation to the group or lead a grocery store tour.



Background Knowledge Healthy Eating

Most people want to learn more about what they can do to eat well. Eating a variety of foods from each food group helps you get the energy and nutrients that you need each day. Vegetables and fruit, whole grains, low fat milk and yogurt, lean meats and beans are examples of nutritious choices. Try not to skip meals and to eat at regular times throughout the day including foods from each food group. This helps to manage blood glucose levels.

Try to eat at least the minimum number of servings from all four foods groups each day:

- Vegetables and Fruit (7 servings)
- Grain Products (6-7 servings)
- Milk and Alternatives (3 servings)
- Meat and Alternatives (2-3 servings)

Follow Canada's Food Guide for the correct serving size. See page 20 in the *Passport*.

Tips for healthy eating

Eat regularly. Include three meals each day. If you are hungry add a small snack in between meals.

Limit high fat and high sugar foods.

Eat your meals slowly and enjoy each bite.

Choose fruit instead of fruit juice.

Eat when you are hungry. Stop when you are full. You don't need to finish all the food on your plate.

Use the plate method to help you plan your meals.1

Refer to *A Guide to Healthy Eating for Older Adults*² in the handouts section. Topics in the Guide include:

- · Tips to help unwanted weight loss
- Meal ideas
- Eating alone
- Trouble swallowing, biting or chewing
- How to eat healthy on a budget

Tips for cooking for 1 or 2

Create your own frozen meals. If you cook a big batch of your favourite soup or casserole you can freeze it in individual portions for up to two to three months. This way you can have an easy meal in no time at all.

Freshen it up. To refresh a frozen dish or last night's dinner, add a bit of grated cheese, toasted almonds, diced tomatoes, and fresh or dry herbs. Add a wholegrain roll and a side salad to the meal.



A new take on coleslaw. Grate carrots, broccoli stems, and beets, along with the usual cabbage. Combine olive oil, vinegar, black pepper, and your favourite herbs and spices as a dressing.

Want a 5 minute meal? Sandwiches and wraps make a fast and easy meal. Use leftover stir-fry or scrambled egg whites with spinach and onions, and roll into a pita wrap. Serve with cut up fruit and yogurt dip.

Have more ripe fruit than you can eat? Cut up ripe berries, bananas, and peaches into bite-size pieces and freeze. You can add the fruit to plain yogurt and crunchy, high-fibre cereal for a delicious breakfast or snack.

Looking for something new? Next time you are in the grocery store, pick up one new vegetable or fruit that you don't normally eat. Be adventurous!³

You can also refer to the *Community Leaders Guidebook* for more information. Refer to page 29.

Tips for the Leader

The group will be at the "Norming phase" – they will begin to take more control, problem solve and plan activities together.

Remember these tips!

Be aware of special needs of older adults

Hearing

- · Decrease background noise
- Enunciate (pronounce words clearly)
- If you know a person is low hearing place them close to the speaker
- Speak slowly

Language

• Translation may be required

Written material

Use white background with black lettering

Assess literacy levels of the group to help plan the next module.

When working through each Module

- 1. Progress slowly
- 2. Repeat the main ideas and instructions often
- 3. Engage participants in hands on experiences
- 4. Follow up after



Activities

For effective learning:

- 1. Present the core material
- 2. Practice
- 3. Reinforce the learning4

Combining adult learning methods and interest-based problemsolving gives the Leader a process to follow to effectively conduct a workshop. The process includes:

- Begin with people's experiences What are their perspectives or stories? What are their needs? What knowledge have they gained from these experiences?
- Look for patterns and identify common needs and issues
 What are the connections among people's needs? What are the common issues?
- Add new information What do people already know about the needs and issues? What other information is needed? What clarifications are needed? What misinformation needs correction?
- Use information for next steps How can this information help with the next steps of meeting needs and addressing issues?
- Reflect on learning What has been helpful? What are the challenges? How will you support success?⁵

Note to the Leader: It will be important throughout the workshops that you reflect on your role in modeling what you are encouraging in others. You do not need to be perfect. For example, if you are asking participants to set a goal, demonstrate a goal you are setting for yourself. If you do not achieve your goal, you might share some of the challenges you experienced and ask participants about their challenges.



Workshop Format

Welcome

3 Minutes

Session Overview
5 Minutes



Information

Reflection/Group check in 20 Minutes



Activity

Welcome everyone back. This is the third workshop of the series. We will take some time today to continue the discussion on ways the group can continue to meet.

Today the topic is Healthy Eating. We will be looking at Canada's Food Guide, discussing tips on how to save money at the grocery store and reading nutrition labels.

You will also be creating an action plan which builds on the goal setting that you have been doing the last two weeks. The action plan will include steps that you want to take to achieve a goal in the next month. You will be writing it down. Writing the plan down will make it real!

Review objectives

- · To build on participant knowledge of healthy eating
- To increase awareness of the barriers to making healthy food choices
- To identify ways to make healthy eating easier

Last week the topic was motivating change. Are there any questions that came up since the last workshop?

Note to the Leader: Continue to encourage peer support as it is very important and personal experiences can motivate others. This is a wonderful opportunity for the participants to identify if they met their goal and if not what were the issues/cons factors – and allow the group to discuss ideas. This discussion may help the participant to be successful with the goal for next week.

Process

Have each person speak about their goal from the previous week, and the daily dose activity. What challenges/cons are they facing, and invite everyone to participate in the discussion.

What are your thoughts on the daily dose? Is it starting to become easier since it is built into your daily routine?

- What pros/cons factors are you experiencing?
- What are your strategies for success?
- · How are you overcoming barriers?

Note: Let participants learn from each other as the leader writes on the flip-chart the barriers and successes. This underscores the importance of how healthy living is a habit that takes time to form, and to not give up if they stumble a bit. Perhaps get participants to commit trying one strategy. That way, in the next session, a mini-



check-in will reinforce their improvement. It will also lead into how an action plan has to be re-visited if original strategies are not working.

Safety

3 Minutes



Information

Physical Activity Warm-up 10 Minutes



Activity

Remind the participants about these safety tips for activity:

- · Start slow
- Listen to your body
- · Go at the pace that is comfortable for you
- Wear comfortable clothing and supportive footwear
- Remember to breathe naturally

Ideas for Physical Activity - Choose 1

- Go for a 5-10 minute walk.
- Dance You can put on an upbeat song and do the following movement to warm the body up. You can keep your feet marching the whole time. Shoulder shrugs. Shoulder circles. Arm circles. Chicken wings. Reach up to the sky and back down. Wrist circles. Wiggle fingers. Knees up.
- Invite people in the class to share what they know someone in the class may like to lead a short exercise.
- Invite people from the community to come in and lead the class in a short exercise (i.e. yoga instructor, Tai Chi, physiotherapist).

Knee Curl

http://go4life.nia.nih.gov/try-these-exercises/strength/knee-curl

What you need-sturdy chair.

This exercise targets your thigh muscles. Walking and climbing stairs are easier when you do both the Knee Curl and Leg Straightening exercises. For an added challenge, you can modify the exercise to improve your balance.

- Stand behind a sturdy chair, holding on for balance. Lift one leg straight back without bending your knee or pointing your toes. Breathe in slowly.
- Breathe out as you slowly bring your heel up toward your buttocks as far as possible. Bend only from your knee, and keep your hips still. The leg you are standing on should be slightly bent.
- 3. Hold position for 1 second.
- 4. Breathe in as you slowly lower your foot to the floor.
- 5. Repeat 10-15 times.
- 6. Repeat 10-15 times with other leg.
- 7. As you get stronger, repeat again with each leg.6





Leg Straightening

http://go4life.nia.nih.gov/try-these-exercises/strength/leg-straightening

What you need-sturdy chair.

This exercise strengthens your thighs and may reduce symptoms of arthritis of the knee.



- Sit in a sturdy chair with your back supported by the chair. Only the balls of your feet and your toes should rest on the floor. Put a rolled bath towel at the edge of the chair under thighs for support. Breathe in slowly.
- 2. Breathe out and slowly extend one leg in front of you as straight as possible, but don't lock your knee.
- 3. Flex foot to point toes toward the ceiling. Hold position for 1 second.
- 4. Breathe in as you slowly lower leg back down.
- 5. Repeat 10-15 times.
- 6. As you get stronger, repeat again with each leg.⁷

Presentation 15 Minutes



Information

Discuss the information noted in the Background Knowledge and *Passport*. Ask participants to look through pages 18-20 in the *Passport* and review recommendations from Canada's Food Guide.

Activity-Choose one of these two activities

Activity 1: In small groups have a discussion on your eating habits. What challenges do you see with the eating habits on pg. 18? Examples of barriers might include: cost, time, boredom, eating alone, etc. Brainstorm about the barriers and ways to overcome them.

Activity 2: Have the group get into groups of 3-4. Give the group paper and two different color markers or two different colours of paper. Have each group brainstorm and record their thoughts in one colour—the barriers people may face that would prevent them from healthy eating. Brainstorm ways that these barriers can be addressed and record the ideas in the other colour. If groups are having troubles refer to *A Guide to Healthy Eating for Older Adults*.

Refer to *A Guide to Healthy Eating for Older Adults* in the handouts section. Topics in the Guide include:

- Tips to help unwanted weight loss
- Meal ideas
- Eating alone
- Trouble swallowing, biting or chewing
- How to eat healthy on a budget

Discuss any of these topics that are of interest to the group.



Nutrition Break 15 Minutes



Activity

Ideas:

- Low fat popcorn—Note: Advise participants to take caution in choosing popcorn as a snack. Microwave popcorn contains a high level of sodium. A good choice is air blown popcorn without salt or butter.
- Lower fat cheese and crackers
- Fruit—fresh or canned in own juices
- · Frozen yogurt with berries
- Milk and oatmeal cookie
- Yogurt and fruit
- · Trail mix-nuts and fruit
- Veggies and dip⁹

If anyone has signed up to bring a snack next week, remind them. Also bring along the recipe to share with the group.

News Bites

5 minutes



Resource

Ask participants if anyone saw, heard or read any news bites of interest regarding healthy aging. Discuss with the group the content and credibility of the article:

- Do we know who wrote it?
- Do we know their qualifications?
- Are the sources they are using credible?
- Is the source providing the news credible?
- Does the news/advice in the article apply to me?
- For whom might this information be dangerous?

Explain to the group what the word credible means. Credible—worthy of belief or confidence; trustworthy: e.g. a credible website.

As a follow-up, if necessary, one person may volunteer to talk to a professional to see if the information is reliable. Examples of websites that people could look at include EatRight Ontario, Health Canada, ALCOA and Silver Times.

Note to the Leader: Bring a News Bite to share with the group.

Daily Dose

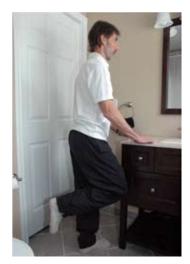
5 Minutes



Activity

The idea of the daily dose¹⁰ is to make physical activity a part of your regular daily routine, things that we all do as part of our day such as brushing your teeth. The principle is that you attach a physical activity to a daily routine and location. For example, when you brush your teeth you can do a squat exercise as a daily dose activity. The daily dose becomes routine so entering the bathroom to brush teeth will cue the daily dose routine.





Activity

20 Minutes



Activity

Lower body daily dose

This is the second routine of four mini exercises and is associated with when you brush your teeth in the bathroom. To complete the set repeat the exercise 10 times. Hold the bathroom counter for support.

Alternating hamstring curl

Be sure to tuck in your pelvis and tighten your stomach muscles (like when you are coughing). Stand straight with your legs apart, knees slightly bent. Slowly lift your right heel up behind you toward your buttock, and then lower to the ground. Repeat the exercise, alternating legs.

Reading Nutrition Labels

A lot of the products we buy have nutrition labels but what do they mean? We are going to watch three short videos to learn more about reading labels. Take out the food that you brought along. We can apply what we are learning to the food that was brought in.

Video: Episode 3 of 5: Nutrition Facts Table Five Features 3 minutes

www.eatrightontario.ca/en/Videos/Nutrition-Labelling/Episode-3-of-5--Nutrition-Facts-Table-Five-Feature

Watch Episode 3¹¹ and learn about the five key features of the Nutrition Facts table: Serving size, calories, % Daily Value and the nutrients you need to get more of and which nutrients you should avoid. After the video, review this information with your participants, using the nutrition labels that were brought in.

Video: Episode 4 of 5: % Daily Value

2 minutes

www.eatrightontario.ca/en/Videos/Nutrition-Labelling/Episode-4-of-5---Daily-Value-%28Video%29

Watch Episode 4¹² and learn more about what % Daily Value means and how it can be used to make healthy choices. After the video, review this information with your participants, using the nutrition labels that were brought in.

Video: Episode 5 of 5: Focus on Carbohydrate 4 minutes

www.eatrightontario.ca/en/Videos/Nutrition-Labelling/Episode-5-of-5--Focus-on-Carbohydrate-%28Video%29

Watch Episode 5¹³ and learn more about carbohydrates including food sources, what to look for on the nutrition facts table and how carbohydrate impacts your blood sugar levels. This segment is especially useful for people with diabetes. After the video, review this information with your participants, using the nutrition labels that were brought in.



Activity:
Action Plan for Healthy
Lifestyle 20 Minutes



Activity

Note to Leader: At the end of the module there is an action plan template to use.

In workshop 1 & 2 you set goals for the week. You will build on that today by making an action plan for the next month.

Setting goals and having an action plan is critical to success. Writing an action plan is **a process which will help you to focus your ideas and to decide what steps you need to take to achieve your goals**. When you write your Action Plan make the goal(s) something you can and **WANT** to do. Make the steps something you can do in the next month. Writing it down makes it real!

There are only three workshops left in this series. As part of your action plan, you may want to start thinking about how to stay connected as a group. Maybe set up a buddy system with someone in the group, or the group may decide to continue meeting, or you may want to continue building on the goals you have been setting for the past two weeks.

Parts of an Action Plan

Decide what YOU want to do

Achievable—something you can do in the next month

Action-specific (write steps as behaviors - losing weight is not a behavior, but avoiding snacks between meals is a behavior).

Answer the questions:

- What?
- How much? (e.g., walking four blocks).
- When? (e.g., after dinner or Monday, Wednesday, Friday or four times; try to avoid "every day").
- · How often?
- What is needed to put the plan into action and keep it in action?

Is it realistic? Revise if necessary

Confidence level of 7 or more (0=no confidence to 10=total confidence; that you will complete the ENTIRE action plan).¹⁴

Have participants fill in an action plan. As the participants are filling it in walk around the room to be sure that people are setting realistic achievable goals.

Discuss individual action plans with the group.



Group Activities (Optional) 15 Minutes



Activity

Below are two optional activities if there is time.

A barrier to healthy food choices might be the cost of food.

Discussion - How to save money at the grocery store

Have the group brainstorm ideas and write their responses on the flipchart. Refer to the tips below to fill in any gaps.

Tips for staying on budget at the grocery store

- · Buy only what you need
- Plan a menu and then make a shopping list and stick to it
- Keep a list in the kitchen and write down items you need
- · Avoid shopping on an empty stomach
- · Buy fewer convenience items
- It is best to shop at grocery stores
- Buy fewer prepared meals these cost more and are often higher in sugar, salt and fat

Look for the best buys

- Check store flyers and look online for coupons
- Look at the top and bottom of the shelf for lower cost food
- Buy store or 'no name' brands⁸

Discussion—Serving sizes

Have a discussion about the section on dinner plate food portion and serving sizes, found in the *Passport*, page 21.

 Ask the group for different ideas that could make up the dinner plate

Goal Setting 10 Minutes



Suggestion

Note to the Leader: Make sure that people understand that they are to be accumulating their goals each week and should be reporting if they are successful with all of their goals, and not just the new one.

Invite people to share their new SMART goal.

- Remember when making new goals to always ask if it is realistic.
- Which is bigger the pros/cons factors?

Remember that small steps work to help you reach your goal. Think about what you will focus on for the next week to work toward your goal. Refer back to your action plan and your learning on the cycle of change.

Invite participants to share with the group and encourage discussion.



Closing

10 Minutes



Resource

Briefly review healthy eating and nutrition highlights:

Eating a variety of foods from each food group helps you get the energy and nutrients that you need each day. Whole grains, vegetables, fruits, low fat milk and yogurt and lean meats and beans are examples of nutritious choices.

Continue to read nutrition labels and compare different brands of the same food the next time you are out shopping.

Put your action plan in a place where you can see it daily and read it. This will help to keep you motivated.

Next week the topic is Physical Activity. We will be doing some fun activities so be ready to have fun!

Activity to do at home: research walking groups and/or trails, swimming pools, yoga and Tai Chi in your area. There may also be some community gyms/centres or walking tracks that are free or only have a small charge to access. We will share what you have found next week. There may be something that the group could do together after these workshops have finished.

REMINDER—Bring your *Passport* to the next workshop.

REMINDER—Bring the snack next week if you signed up. Also bring along the recipe to share with the group.

REMINDER—If anyone hears news in the media relating to healthy aging, to write it down or bring in the article to have a short discussion in the next week.

Evaluation

10 Minutes

Use one of the following suggestions to evaluate the session:

Round table to see how the meeting went

Flipchart—have a + and a - ask how people are feeling about the workshop. Any concerns can go on the negative side

Ask for one word how people are feeling

Ask for an expression of how people are feeling

- Start, stop, continue
- A happy face continuum
- A fill in: "This session was _____

 because _____.

Self-Reflection (For Leader) 10 Minutes

Reflect on your planning and delivery of the module and record any changes that you might make.

What worked well? What could be changed for next week?



Action Plan

Retrieved from Strategies to Support Self-Management in Chronic Conditions: Collaboration with Clients-Best Practice Guidelines Date: ___ Name: The change I want to make happen is: My goal for the next month is: The specific steps I will take to achieve my goal are (include what, when, how, where, and how often): The things that could make it difficult to achieve my goal include: My plan for overcoming these challenges include: Supports and resources I will need to achieve my goal include: My confidence that I can achieve my goal is: (scale of 0 to 10, with 0 meaning not confident at all, and 10 being extremely confident)

Endnotes

- 1. Health Canada (2011). Eating well with Canada's food guide. http://www.hc-sc.gc.ca/fn-an/alt_formats/hpfb-dgpsa/pdf/food-quide-aliment/view_eatwell_vue_bienmang-enq.pdf
- 2. Keller & Wdoniak. (2012). A guide to healthy eating for older adults. EatRight Ontario.
- 3. Burris, L. (2010). Cooking for 1 or 2. Silver Times, Vol. 1, Iss. 1.
- 4. National Institute on Aging (2012). Introducing the Toolkit. http://nihseniorhealth.gov/toolkit/toolkitfiles/video/toolkitvideo_ na.html?intro=ves
- 5. The Quaich Inc. (2010). Circle of Health Facilitator's Handbook Prince Edward Island: The Quaich Inc.
- 6. National Institute on Aging (2013). Knee Curl. http://go4life.nia.nih.gov/try-these-exercises/strength/knee-curl
- 7. National Institute on Aging (2013). Leg Straightening. http://go4life.nia.nih.gov/try-these-exercises/strength/leg-straightening
- 8. EatRight Ontario. (2011). Food choices when money is tight.
- 9. Keller & Wdoniak. (2012). A guide to healthy eating for older adults. EatRight Ontario.
- Griffin, J. C. (2013). Boost lifestyle activity to support clients in aging well. The Journal on Active Aging, March/April, 44-54
- 11. EatRight Ontario (2013). Episode 3 of 5: Nutrition facts table five features. http://www.eatrightontario.ca/en/Videos/Nutrition-Labelling/Episode-3-of-5--Nutrition-Facts-Table-Five-Feature
- 12. EatRight Ontario (2013). Episode 4 of 5: % Daily Value. http://www.eatrightontario.ca/en/Videos/Nutrition-Labelling/Episode-4-of-5---Daily-Value-%28Video%29
- 13. EatRight Ontario (2013). Episode 5 of 5: Focus on Carbohydrate. http://www.eatrightontario.ca/en/Videos/Nutrition-Labelling/Episode-5-of-5--Focus-on-Carbohydrate-%28Video%29
- 14. Registered Nurses' Association of Ontario (2010).
 Strategies to support self-management in chronic conditions: collaboration with clients. Toronto, Canada: Registered Nurses' Association of Ontario.

Action Plan retrieved from:

Strategies to Support Self-Management in Chronic Conditions: Collaboration with Clients— Best Practice Guidelines

http://rnao.ca/sites/rnao-ca/files/Strategies_to_Support_Self-Management_in_Chronic_Conditions_-_Collaboration_with_Clients.pdf



Module 4: Physical Activity

A View of the Workshop

Purpose: To increase awareness of the importance of physical activity and ways of incorporating it into daily routines.

Objectives:

To identify activities that can be easily incorporated into daily life to increase physical activity levels

To identify ways the group could continue to meet

Equipment/ Materials needed:

Tool Kit

Passports

Pens/pencils/markers

Handouts

Flip chart/masking tape

Tennis balls (optional)

Optional: Computer with CD disk drive, and monitor

or projector

Background Knowledge

Physical Activity
Tips for the Leader

Workshop Format	Minutes
Welcome	3
Session Overview	5
Reflect on Previous Module/Group Check-in	20
Safety	3
Physical Activity Warm-up	10
Presentation	15
Video: New Physical Activity Guidelines for Older Adults	8
Nutrition Break	15
Video: Maintaining Strength with Age	3
News Bites	5
Daily Dose	5
Activity: Sustainability	15
Video: Physical Activity and Exercise	3
Physical Activity	10
Goal Setting	10
Closing	10
Evaluation	10
Post Class Self-Reflection (For Leader)	10



Background Knowledge Physical Activity

Active living involves a holistic approach to health and wellness that is incorporated into daily living – this includes feeling good about oneself, connecting with others and with the world. It also includes daily physical activity to the best of one's ability.

Over the years, adults lose muscle mass and strength, placing them at risk for disability, falls and diseases like diabetes. If we do not exercise after the age of 30, by the time we are 80 we will have lost 50% of our strength. However, age is no barrier to a healthy, active lifestyle. A person can never be too old to start being more physically active. The benefits of physical activity increase as the physical activity increases.

Physical activity is shown to benefit overall wellbeing, reduce anxiety and depression, and reduce risk of injury and chronic disease. Along with healthy eating, physical activity helps you to maintain a healthy weight. Research has shown that a loss of about 5% of excess body weight can reduce the risk of developing Type 2 diabetes by almost 60%.

Risk of illness and injury increase with age and therefore it is important to be involved and active throughout life. Scientists have shown that being active reduces the risk of:

- · Heart disease and Stroke
- Osteoporosis
- · Falls and injuries
- Obesity
- Depression
- · High blood pressure
- Colon cancer
- Adult-onset diabetes
- Premature death¹

For more information refer to the Community Leaders Guidebook pg. 24

Tips for the Leader

The group will be at the 'Norming phase' – they take more control, begin problem solving and plan activities together.

Remember these tips!

Be aware of special needs of older adults

Hearing

- Decrease background noise
- Enunciate (pronounce words clearly)
- If you know a person is low hearing place them close to the speaker
- Speak slowly



Language

Translation may be required

Written material

Use white background with black lettering

Assess literacy levels of the group to help plan the next module.

When working through each Module

- 1. Progress slowly
- 2. Repeat the main ideas and instructions often
- 3. Engage participants in hands on experiences
- 4. Follow up after

Activities

For effective learning:

- 1. Present the core material
- 2. Practice
- 3. Reinforce the learning²

Combining adult learning methods and interest-based problemsolving gives the Leader a process to follow to effectively conduct a workshop. The process includes:

- Begin with people's experiences What are their perspectives or stories? What are their needs? What knowledge have they gained from these experiences?
- Look for patterns and identify common needs and issues
 What are the connections among people's needs? What are the common issues?
- Add new information What do people already know about the needs and issues? What other information is needed? What clarifications are needed? What misinformation needs correction?
- Use information for next steps How can this information help with the next steps of meeting needs and addressing issues?
- Reflect on learning What has been helpful? What are the challenges? How will you support success?³

Note to the Leader: It will be important throughout the workshops that you reflect on your role in modeling what you are encouraging in others. You do not need to be perfect. For example, if you are asking participants to set a goal, demonstrate a goal you are setting for yourself. If you do not achieve your goal, you might share some of the challenges you experienced and ask participants about their challenges.



Workshop Format

Welcome

3 Minutes

Session Overview
5 Minutes



Information

Reflection/Group check in 20 Minutes



Activity

Welcome to our fourth module in the workshop series. Hope everyone had a successful week and were able to stick to the goals you set. We will talk about that in a minute.

If you have any questions or concerns throughout today's workshop, please do not hesitate to speak with me at any time, either in the group or privately.

Review today's workshop objectives

- To identify activities that can be easily incorporated into daily life to increase physical activity levels
- To identify ways the group could continue to meet

At the last workshop we discussed Healthy Eating. Does anyone have any questions or comments from the last time we met?

Last week you created an action plan. Did this help you with your goals? Was it helpful to be specific?

Note to the Leader: Continue to encourage peer support as it is very important and personal experiences can motivate others. This is a wonderful opportunity for the participants to identify if they met their goal and if not what were the issues/cons – and allow the group to share what worked to overcome barriers. This discussion may help the participant to be successful with the goal for next week.

Process

Have each person speak about their goal from the previous workshop, and the daily dose activity. What challenges/cons are they facing and have everyone participate in the discussion.

What are your thoughts on the daily dose? Is it starting to become easier since it is built into your daily routine?

- What pros/cons are you experiencing?
- What are your strategies for success?
- How are you overcoming barriers?

Safety 3 Minutes



Information

Safety tips for the activity sessions:

- Start slow
- Listen to your body
- Go at the pace that is comfortable for you
- · Wear comfortable clothing and supportive footwear
- Remember to breathe naturally



Physical Activity Warm-up 10 Minutes



Activity

Ideas for Physical Activity - Choose 1

- Go for a 5-10 minute walk.
- Dance You can put on an upbeat song and do the following movement to warm the body up. You can keep your feet marching the whole time. Shoulder shrugs. Shoulder circles. Arm circles. Chicken wings. Reach up to the sky and back down. Wrist circles. Wiggle fingers. Knees up.
- Invite people in the class to share what they know someone in the class may like to lead a short exercise.
- Invite people from the community to come in and lead the class in a short exercise (e.g. yoga instructor, Tai Chi, physiotherapist).

Hand Grip

http://go4life.nia.nih.gov/try-these-exercises/strength/hand-grip

What you need: Tennis ball or other small rubber or foam ball

This simple exercise should help if you have trouble picking things up or holding on to them. It also will help you open things more easily, like that pickle jar. You can even do this exercise while reading or watching TV.

- 1. Hold a tennis ball or other small rubber or foam ball in one hand.
- 2. Slowly squeeze the ball as hard as you can and hold it for 3-5 seconds.
- 3. Relax the squeeze slowly.
- 4. Repeat 10-15 times.
- 5. Repeat 10-15 times with other hand.
- 6. As you get stronger, repeat with each hand.4



Presentation 15 Minutes



Information

Video: Canada's New Physical Activity Guidelines for Older Adults 8 minutes

www.youtube.com/watch?v=NjCkLunz U8&list=UUHHLC tG3Roxtq4e06bRkGw&index=1

Watch video⁵ to revisit the *Canadian Physical Activity Guidelines for Older Adults—65 Years & Older.* Ask if anyone has any questions.

Refer participants to the Physical Activity section in the *Passport* pages 10-15.

The new Canadian Physical Activity Guidelines for Older Adults—65 Years & Older state that older adults should accumulate at least 150 minutes of moderate intensity to vigorous intensity aerobic physical activity per week, in bouts of 10 minutes or more. As it states in the Physical Activity Guidelines moderate intensity activities such as brisk walking and bicycling will cause older adults to sweat a little



and breathe a little harder. Vigorous intensity activities such as crosscountry skiing and swimming will cause older adults to sweat and be out of breath.

Activity

In small groups of 3-4, brainstorm activities that you could include in your daily life and make suggestions of where you could fit them in your daily schedule. Focus on "in bouts of 10 minutes or more".

Nutrition Break 15 Minutes



Activity

Ideas:

- Lower fat cheese and crackers
- · Fruit-fresh or canned in own juices
- Frozen yogurt with berries
- · Milk and oatmeal cookie
- Yogurt and fruit
- Trail mix-nuts and fruit
- Veggies and dip⁶

If anyone has signed up to bring a snack next week, remind them. Also bring along the recipe to share with the group.

Video: Maintaining Strength with Age

3 Minutes

www.youtube.com/watch?v=-Kdwu4JCcvo7

News Bites 5 minutes



Resource

Ask participants if anyone saw, heard or read any news bites of interest regarding healthy aging. Discuss with the group the content and credibility of the article:

- Do we know who wrote it?
- Do we know their qualifications?
- Are the sources they are using credible?
- Is the source providing the news credible?

Explain to the group what the word credible means. Credible—worthy of belief or confidence; trustworthy: An example would be a credible website.

As a follow-up, if necessary, one person may volunteer to look up the information, or talk to a professional to see if the information is reliable. Examples of websites that people could look at include EatRight Ontario, Health Canada, ALCOA and Silver Times.

Note to the Leader: Bring a News Bite to share with the group.

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Daily Dose

5 Minutes

Activity

The idea of the daily dose⁸ is to make physical activity a part of your regular daily routine, things that we all do as part of our day such as getting dressed. The principle is that you attach a physical activity to a daily routine and location. For example, when you are getting dressed you can do one or more exercises from the upper body daily dose. The daily dose becomes routine so getting dressed will cue the daily dose routine.

Upper body daily dose

This is the second routine of five mini exercises and is associated with getting dressed in your bedroom. One set equals performing an exercise for the number of counts specified.



Tight grip shoulder circle

Standing tall, raise your arms to shoulder height, making a tight fist with each hand. Do 10 large circles with your arms moving forward, then 10 circles with your arms moving backward. Don't forget to breathe!

Activity



15 Minutes

Activity

Sustainability

This activity will help the group to brainstorm sustainability plans. Your homework last week was to find information on what is available in our community for activities or places where the group can meet if they so desire.

Process

Invite participants to write on a piece of paper their idea/topic/ question for continuing to meet as a group. It may be a walking group, swimming; ideas of where to meet.

Have a large group discussion about the ideas from the participants. If the group plans to continue to meet they will have the other two workshops to do more planning. By the last workshop there should be a plan in place with the dates, times and places of when they will meet.

Video: Physical Activity & Exercise www.youtube.com/watch?v=mIOR2Hql1109

3 Minutes

Physical Activity

If time allows in the workshop, these are two fun dance songs to get the group up and moving. Encourage the group to have fun!

The "Chicken dance¹⁰" music and directions are available on YouTube: www.youtube.com/watch?v=yzZPEjnRV70



Turn on the music and get everyone up and moving. This exercise gives everyone a bit of a giggle as well as the chance to move and stretch.

A fun activity is dancing the Macarena! This is short and fun – and could also be included as time permits. Instructions and the music are available on YouTube but could be saved on a CD for venues that do not have reliable Internet access. A key message to include in this activity is that being active for even 10 minutes a few times a day adds up! Let's get started! Physical activity will make you healthier!

Instructions: www.youtube.com/watch?v=OzV63IRR8BQ 11

Music: www.youtube.com/watch?v=nS3s_LE6Wrl 12

Goal Setting 10 Minutes



Suggestion

Note to the Leader: Make sure that people understand that they are to be accumulating their goals each week and should be reporting if they are successful with all of their goals, and not just the new one.

Invite people to share their new SMART goal for this week.

- Remember when making new goals to always ask if it is realistic.
- Which is bigger the pros/cons?

Reminder to Participants: Being accountable to someone by sharing your goals is important for behavior change. Who will support you in achieving your goals when the workshop sessions are over? Provide an opportunity for participants to share their thoughts and ideas.

Closing 10 Minutes



Resource

Briefly review highlights of the Canadian Physical Activity Guidelines:

The new Canadian Physical Activity Guidelines For Older Adults—65 Years & Older state that older adults should accumulate at least 150 minutes of moderate-to-vigorous intensity aerobic physical activity per week, in bouts of 10 minutes or more.

Start out with 10 minutes at a time. Walk around your block or play with your grandchildren.

As it states in the physical activity guidelines, moderate intensity activities such as brisk walking and bicycling will cause older adults to sweat a little and breathe a little harder.

Vigorous intensity activities such as cross-country skiing and swimming will cause older adults to sweat and be out of breath.

Next week the topic is Mental Health.

REMINDER – Bring your *Passport* to the next workshop.

Record your activities on page 13 in your Passport.



REMINDER - Bring the snack next week if you signed up. Also bring along the recipe to share with the group.

REMINDER - If anyone hears news in the media relating to healthy aging, to write it down or bring in the article to have a short discussion in the next week.

Evaluation 10 Minutes

Use one of the following suggestions to evaluate the session:

Round table to see how the meeting went

Flipchart—have a + and a - ask how people are feeling about the workshop. Any concerns can go on the negative side

Ask for one word how people are feeling

Ask for an expression of how people are feeling

- Start, stop, continue
- A happy face continuum
- A fill in: "This session was _______ because _____
- In the next session, I would like _____

Self-Reflection (For Leader) 10 Minutes Reflect on your planning and delivery of the module and record any changes that you might make.

What worked well?

What could be changed for next week?



Endnotes

- 1. Active Living Coalition for Older Adults (2012). Community Leaders Guidebook.
- 2. National Institute on Aging (2012). Introducing the Toolkit. http://nihseniorhealth.gov/toolkit/toolkitfiles/video/toolkitvideo_na.html?intro=yes
- 3. The Quaich Inc. (2010). Circle of Health Facilitator's Handbook Prince Edward Island: The Quaich Inc.
- 4. National Institute on Aging (2013). Hand Grip. http://go4life.nia.nih.gov/try-these-exercises/strength/hand-grip
- 5. Canadian Centre for Activity and Aging (2012).
 Canadian physical activity guidelines for older adults.

 http://www.youtube.com/watch?v=NjCkLunz_U8&list=UUHHLC_tG3Roxt
 q4e06bRkGw&index=1
- 6. Keller & Wdoniak. (2012). A guide to healthy eating for older adults. EatRight Ontario.
- 7. Active Living Coalition for Older Adults (2012). Maintaining strength with age. http://www.youtube.com/watch?v=-Kdwu4JCcvo
- 8. Griffin, J. C. (2013). Boost lifestyle activity to support clients in aging well. The Journal on Active Aging, March/April, 44-54.
- 9. Active Living Coalition for Older Adults (2012). Physical Activity & Exercise. http://www.youtube.com/watch?v=mIOR2HqI110
- 10. Acting out dress up (2007). Chicken Dance. http://www.youtube.com/watch?v=yzZPEjnRV70
- 11. Los del Río (2007). Macarena. http://www.youtube.com/watch?v=nS3s_LE6Wrl
- 12. VideoJug (2012). How to dance the Macarena. http://www.youtube.com/watch?v=OzV63IRR8BQ



Module 5: Mental—Emotional Health

A View of the Workshop

Purpose: To have a better understanding of the link between mental health and chronic disease

Objectives:

To review the relationship between mental health and chronic disease

To build on existing knowledge of mental health To explore supportive factors

Equipment/ Materials needed:

Tool Kit

Passports

Pens/pencils/markers

Handouts-Lifestyle

Flip chart/masking tape

Index cards

Optional: Computer with CD disk drive, and monitor or projector

Background Knowledge

Mental—Emotional Health
Tips for the Leader

Workshop Format	Minutes
Welcome	3
Session Overview	5
Reflect on Previous Module/Group Check-in	20
Safety	3
Physical Activity Warm-up	10
Presentation	15
Video: Positive Outlook on Life Helps Depression	.4
Nutrition Break	15
News Bites	5
Daily Dose	5
Activity: Mental Health	20
Video: Benefits of Active Living	.3
Goal Setting	10
Closing	10
Evaluation	10
Post Class Self-Reflection (For Leader)	10



Background Knowledge Mental & Emotional Health

You are encouraged to ask a Public Health Nurse or someone from a local division of the Canadian Mental Health Association to attend the session to talk about mental health. When selecting the guest, be sure to inform them (without breaking confidentiality) of the dynamics of the group, the barriers, and strengths. The speaker should be reminded to tailor the discussion to the issues impacting older adults.

If you feel comfortable covering this topic, some background information is provided below for the presentation. During the workshop you can relate the importance of mental health to physical activity and healthy eating.

Mental health is the capacity to feel, think and act in ways that allow a person to enjoy life and deal with life's challenges. Older adults, as with all adults, will experience ups and downs; however this stage of life can present additional challenges and losses. As a Community Leader, it is important to be aware of these life transitions and the mental health challenges that may be faced, as people age.

If someone is experiencing mental health issues it should be addressed first as it may impact a person's interest and ability to improve other aspects of their life.

Although depression is the most common mental health problem in older adults, it is not a normal part of aging. It is important to dispel the myth that it is a typical consequence of aging and emphasize that recovery is possible at all ages. There are many types of treatment for depression, including psychotherapy and medications.

In addition to depression, changes in mood, behaviours and thinking may also indicate a mental health problem. It is important to support older adults through these changes, to encourage them to seek help from a health care provider and to ensure that they do not feel that these changes in their mental health are personal weaknesses or shameful. These are stigmatizing myths and may prevent people from seeking help.

Living with a physical disease can impact mental health. Participants in your group who live with diabetes should also be aware that emotional stress, caused by excitement, anger, worry, or fear, could cause an increase in blood sugar. Physical activity helps to control blood sugar. At the same time, physical activity is an important part of promoting mental wellness and brain health.

As a Community Leader, you should also be aware of the risk of suicide in later life. By learning about suicide warning signs, you can learn to recognize when an older adult may be at risk for suicide and



in need of help. If you are not a mental health professional, don't worry—nobody expects you to become one. Your primary role is to be aware of the warning signs for depression that may make an older adult more prone to be at risk for suicide, see pg. 23 in the *Passport*.

Remember, you're not alone! Develop relationships with health care providers and learn about the resources and supports in your community. If you are ever concerned about immediate risk of suicide for one of your group members be sure to call 911 and/or go to the nearest emergency room.

An important message to remember and share with your participants is that mental health can be promoted and improved at all stages of life, even if someone currently lives with a mental health problem or illness.

If you or someone you know is concerned about growing older, check your local library or bookstores for some helpful books that can give you more information. There are also professional counsellors who specialize in the problems of aging. If you need more information about resources in your area, contact a community organization, such as the Canadian Mental Health Association, which can help you find additional support¹.

Centre for Addiction and Mental Health 1-800-463-6273

www.camh.ca

Canadian Coalition for Seniors' Mental Health 416-785-2500 ext. 6331

www.ccsmh.ca

Canadian Mental Health Association 613-745-7750

www.cmha.ca

Tips for the Leader

The group will be at the 'Norming phase' – they take more control, begin problem solving and plan activities together.

Remember these tips!

Be aware of special needs of older adults

Hearing

- Decrease background noise
- Enunciate (pronounce words clearly)
- If you know a person is low hearing place them close to the speaker
- Speak slowly



Language

· Translation may be required

Written material

Use white background with black lettering

Assess literacy levels of the group to help plan the next module.

When working through each Module

- 1. Progress slowly
- 2. Repeat the main ideas and instructions often
- 3. Engage participants in hands on experiences
- 4. Follow up after

Activities

For effective learning:

- 1. Present the core material
- 2. Practice
- 3. Reinforce the learning²

Combining adult learning methods and interest-based problemsolving gives the Leader a process to follow to effectively conduct a workshop. The process includes:

- Begin with people's experiences What are their perspectives or stories? What are their needs? What knowledge have they gained from these experiences?
- Look for patterns and identify common needs and issues
 What are the connections among people's needs? What are the common issues?
- Add new information What do people already know about the needs and issues? What other information is needed? What clarifications are needed? What misinformation needs correction?
- Use information for next steps How can this information help with the next steps of meeting needs and addressing issues?
- Reflect on learning What has been helpful? What are the challenges? How will you support success?³

Note to the Leader: It will be important throughout the workshops that you reflect on your role in modeling what you are encouraging in others. You do not need to be perfect. For example, if you are asking participants to set a goal, demonstrate a goal you are setting for yourself. If you do not achieve your goal, you might share some of the challenges you experienced and ask participants about their challenges.



Workshop Format

Welcome

3 Minutes

Session Overview

5 Minutes



Information

Reflection/Group check in 20 Minutes



Activity

Welcome everyone to the session. This is our fifth session.

If you have any questions or concerns throughout today's workshop, please do not hesitate to speak with me at any time, either in the group or privately.

Today the topic is mental health. When some people think of health the first thing that comes to mind is physical health as it can be more visible. You will see the importance of having a balance of physical, mental, emotional and spiritual health. You will be learning about mental health and its relationship to overall health. There is no health without mental health! There will be a new exercise and a daily dose as well.

If you have any questions or concerns throughout today's workshop, please do not hesitate to speak with me at any time, either in the group or privately.

Review today's workshop objectives

- To review the relationship between mental health and chronic disease
- To build on existing knowledge of mental health
- To explore supportive factors

Last week our topic was Physical Activity. Are there any comments or thoughts from last week?

Does anyone have any more information on the sustainability for the group? There may be walking groups and/or trails, swimming pools, yoga and Tai Chi in our area? There may also be some community gyms/centres or walking tracks that are free or only have a small charge to access.

Note to the Leader: Continue to encourage peer support as it is very important and personal experiences can motivate others. This is a wonderful opportunity for the participants to identify if they met their goal and if not what were the issues/cons—and allow the group to discuss ideas. This discussion may help the participant to be successful with the goal for next week.

- Identify that you would like to hear from each person to speak to their goal from the previous workshop and the daily dose activity. What challenges/cons are they facing and have everyone discuss their challenges and suggest possible solutions.
- What have you put in place in the past week that we discussed?
- Are there any questions that came up this week?



Safety

3 Minutes



Information

Physical Activity Warm-up 10 Minutes



Activity

Safety tips for the activity sessions:

- Start slow
- Listen to your body
- · Go at the pace that is comfortable for you
- Wear comfortable clothing and supportive footwear
- Remember to breathe naturally

Ideas for Physical Activity—Choose 1

- Go for a 5-10 minute walk.
- Dance—You can put on an upbeat song and do the following movement to warm the body up. You can keep your feet marching the whole time. Shoulder shrugs. Shoulder circles. Arm circles. Chicken wings. Reach up to the sky and back down. Wrist circles. Wiggle fingers. Knees up.
- Invite people in the class to share what they know someone in the class may like to lead a short exercise.
- Invite people from the community to come in and lead the class in a short exercise (e.g. a yoga instructor, physiotherapist).

Back Stretch

http://go4life.nia.nih.gov/try-these-exercises/flexibility/back-2

What you need—Sturdy chair with armrests

This exercise will target the back muscles. It will help you do activities that require you to twist or turn to look behind you, such as backing out of a parking space or swinging a golf club. If you've had hip or back surgery, talk with your doctor before trying this stretch.

- 1. Sit up toward the front of a sturdy chair with armrests. Stay as straight as possible. Keep your feet flat on the floor, shoulder-width apart.
- Slowly twist to the left from your waist without moving your hips. Turn your head to the left. Lift your left hand and hold on to the left arm of the chair. Place your right hand on the outside of your left thigh. Twist farther, if possible.
- 3. Hold the position for 10-30 seconds.
- 4. Slowly return to face forward.
- 5. Repeat on the right side.
- 6. Repeat at least 3-5 more times.4





Presentation 15 Minutes



Information

On flipchart paper or a board draw a circle and divide in four to show the importance of balance. Label the four quarters: physical, mental, emotional, and spiritual. Emphasize to participants they are all equally important.

Provide content from the Background Knowledge section.

Points to address:

- Between 20% and 50% of older adults who have a chronic disease have symptoms of depression.⁵
- Untreated depression in individuals with chronic health conditions increases morbidity and mortality rates and reduces the capacity for self-management.⁶
- The results of a worldwide study looking at the relation of depression rates in relation to angina, arthritis, asthma, and diabetes found that depression can make the chronic disease worse and it needs to be addressed.^{7,8}

Video: Positive Outlook on Life Helps Depression 4 Minutes

www.youtube.com/watch?v=iO-ml1jCmak 9

Remember there is no health without mental health.

Nutrition Break 15 Minutes



Activity

Ideas:

- · Lower fat cheese and crackers
- Fruit fresh or canned in own juices
- Frozen yogurt with berries
- · Milk and oatmeal cookie
- Yogurt and fruit
- Trail mix nuts and fruit
- Veggies and dip¹⁰

If anyone has signed up to bring a snack next week, remind them. Ask them to also bring along the recipe to share with the group.

News Bites 5 minutes



Resource

Ask participants if anyone saw, heard or read any news bites of interest regarding healthy aging. Discuss with the group the content and credibility of the article:

- Do we know who wrote it?
- Do we know their qualifications?
- · Are the sources they are using credible?
- Is the source providing the news credible?

Explain to the group what the word credible means. Credible—worthy of belief or confidence; trustworthy: An example would be a credible website.



As a follow-up, if necessary, one person may volunteer to look up the information, or talk to a professional to see if the information is reliable. Examples of websites that people could look at include EatRight Ontario, Health Canada, ALCOA and Silver Times.

Note to the Leader: Bring a News Bite to share with the group.

The idea of the daily dose¹¹ is to make physical activity a part of your regular daily routine, things that we all do as part of our day such as brushing your teeth. The principle is that you attach a physical activity to a daily routine and location. For example if you brush your teeth you can do a squat exercise as a daily dose activity. The daily dose becomes routine so entering the bathroom to brush teeth will cue the daily dose routine.

Lower body daily dose

This is the second routine of four mini exercises and is associated with when you go to the bathroom to brush your teeth. To complete the set repeat the exercise 10 times. Hold the bathroom counter for support.

Alternating side-leg lift

Be sure to tuck in your pelvis and tighten your stomach muscles (like when you are coughing). Stabilize yourself, standing tall with your legs apart and knees slightly bent. Moving from the hip, lift your right leg out to the side with controlled speed. Slowly bring your leg back to the starting position. Repeat the exercise alternating legs.

Video: Benefits of Active Living

3 Minutes

https://www.youtube.com/watch?v=i189DN3wsUq 12

Choose 1

If you are uncomfortable with some of these suggested activities, ask someone from your local mental health association or mental health team to facilitate this session for you.

- 1. Refer to the "Mental Health" Handout in the back of the Guidebook on pages 59-60. Pick some of the bullet points for discussion in the group, for example "Keep a positive attitude". Ask the group how they could do this, or you could ask them to list their skills and abilities and think of different ways they can use them such as in volunteering.
- 2. In the group start a conversation about depression and other mental health challenges and use the discussion to raise awareness about risks, symptoms, and the many treatment options for depression.

Daily Dose

5 Minutes



Activity



Activity: Mental Health 20 Minutes



Activity



- 3. Brainstorm supportive factors that are available.
- 4. Ask the group what they can do to enjoy their life. You could do a bucket list and then brainstorm ways in which this can be achieved.

Tips for the Leader

The purpose of this activity is to interrupt the habit of group members to become fixed in one role. It can be useful in helping the group to find answers to issues or ideas when brainstorming for some of the activities.

For a specified period of time, every member talks from one focus:

- Every person says what they LIKE about an idea, then
- Every person says how they FEEL about it (from the heart, not the head), then
- Every person says one CONCERN about the idea, then
- Every person says what they would do to IMPROVE the idea

Physical Activity

Do some physical activity after this session to provide balance to the session, mentally and physically, or do a group activity that everyone will enjoy.

- Go for a 5-10 minute walk
- Dance You can put on an upbeat song and do the following movement to warm the body up. You can keep your feet marching the whole time. Shoulder shrugs. Shoulder circles. Arm circles. Chicken wings. Reach up to the sky and back down. Wrist circles. Wiggle fingers. Knees up.

Reflective Activity

This can be done in the class or suggested as homework.

Refer everyone to Page 23 of the *Passport* and ask everyone to fill in the checklist. If they have answered yes to any of the questions they should talk to a health care provider.

Goal Setting 10 Minutes



Suggestion

Note to the Leader: Make sure that people understand that they are to be accumulating their goals each week and should be reporting if they are successful with all of their goals, and not just the new one.

What small goal are you going to focus on for this week?

Is it part of your larger goal or something that we covered today? Invite participants to share with the group.



Closing

10 Minutes

Recap key concepts

8

Resource

Need to address mental health concerns first, as it can impact a person's interest in improving other aspects of life.

It is important to support older adults through these changes and to ensure that they do not feel that challenges associated with mental health are personal weaknesses or shameful. These are stigmatizing myths and may prevent people from seeking help.

REMINDER—Bring your *Passport* to the next workshop.

Record your activities on page 13 in your Passport.

REMINDER – Bring the snack next week if you signed up. Also bring along the recipe to share with the group.

REMINDER - If anyone hears news in the media relating to healthy aging, to write it down or bring in the article to have a short discussion in the next week.

Evaluation

10 Minutes

Use one of the following suggestions to evaluate the session:

Round table to see how the meeting went

Flipchart—have a + and a - ask how people are feeling about the workshop. Any concerns can go on the negative side

Ask for one word how people are feeling

Ask for an expression of how people are feeling

- · Start, stop, continue
- A happy face continuum
- A fill in: "This session was _____
 because _____.
- In the next session, I would like ______

Self-Reflection (For Leader) 10 Minutes

Reflect on your planning and delivery of the module and record any changes that you might make.

What worked well?

What could be changed for next week?



Endnotes

- 1. Active Living Coalition for Older Adults (2012). Community Leaders Guidebook.
- 2. National Institute on Aging (2012). Introducing the Toolkit. http://nihseniorhealth.gov/toolkit/toolkitfiles/video/toolkitvideo_na.html?intro=yes
- 3. The Quaich Inc. (2010). Circle of Health Facilitator's Handbook Prince Edward Island: The Quaich Inc.
- 4. National Institute on Aging (2013). Back stretch. http://go4life.nia.nih.gov/try-these-exercises/flexibility/back-2
- 5. Egede, L., Nietert PJ, & Zheng, D. (2005). Depression and all-cause and coronary heart disease mortality among adults with and without diabetes. Diabetes Care, 28, 1339-1345.
- 6. Bodenheimer, T., Wagner, E., & Grumback, K. (2002). Improving primary care for patients with chronic illness: the chronic care model, Part 2. Journal of the American Medical Association, 16, 1909-1914.
- 7. Moussavi, S., Chatterji, S., Verdes, E., Tandon, A., Patel, V., & Ustun, B. (2007). Depression, chronic diseases, and decrements in health: results from the World Health Surveys. The Lancet, 370, 851-858.
- 8. Registered Nurses' Association of Ontario (2010). Strategies to support self-management in chronic conditions: collaboration with clients. Toronto, Canada: Registered Nurses' Association of Ontario
- 9. Baycrest (2010). Positive Outlook on Life Helps Depression. http://www.youtube.com/watch?v=iO-ml1jCmak
- 10. Keller & Wdoniak. (2012). A guide to healthy eating for older adults. EatRight Ontario.
- Griffin, J. C. (2013). Boost lifestyle activity to support clients in aging well. The Journal on Active Aging, March/April, 44-54.
- 12. Active Living Coalition for Older Adults (2012). Benefits of Active Living https://www.youtube.com/watch?v=i189DNs3wsUg



Module 6: Healthy Lifestyles —Impact on Chronic Disease

A View of the Workshop

Purpose: To motivate participants to adopt a healthier lifestyle to manage and/or prevent chronic disease

Objectives:

To review the impact of chronic diseases and their similar relationships to physical activity

To build on participant knowledge of a healthy lifestyle

To identify risk factors and motivate participants to modify these to manage/ prevent chronic disease

Equipment/ Materials needed:

Tool Kit

Passports

Pens/pencils/markers

Flip charts/masking tape

Sticky notes

Optional: Computer with CD disk drive, and monitor or projector

Background Knowledge

Healthy Lifestyle, Impact on Chronic Disease

Type 2 Diabetes

Heart Disease

Cancer

Tips for the Leader

Workshop Format	Minutes
Welcome	3
Session Overview	5
Reflect on Previous Module/Group-Check-in	20
Safety	3
Physical Activity Warm-up	10
Presentation	15
Video: Prevention of Chronic Diseases	.3
Nutrition Break	15
News Bites	5
Daily Dose	5
Activity: Chart Completion	15
Activity: Small Group	15
Presentation	15
Goal Setting	10
Closing	10
Evaluation	10
Post Class Self-Reflection (For Leader)	10



Background Knowledge Healthy Lifestyle— Impact on Chronic Disease

Many factors influence the way in which we live—our values, our resources, our upbringing, our cultural beliefs and expectations. Individual lifestyle choices affect not only a person's health but also the health of their family, community, and if one extends the understanding of health, individual choices can affect society at large.

Creating conditions where people can make healthy lifestyle choices is as important as providing information on what to do.

In summary:

- Exercise. Fitness and exercise releases endorphins, which make us feel good.
- Eat well. The body and mind connection is a powerful thing. How we eat directly influences our mental outlook.
- Get out. Being outside does wonders for almost everyone.
 In fact, the more contact we have with nature, the better we feel.
- Get stress relief. Using stress management techniques can be very helpful in reducing negativity.
- Laugh often. They say that laughter is the best medicine, and that a life full of smiling and laughing, from whatever cause will be uplifting and make us more vibrant and healthy.
- Get plenty of rest. Sleep refreshes, provides energy and relieves stress.¹

Lifestyle Modification to Address Risk Factors of Chronic Disease

Chronic diseases are diseases that last a long time and generally advance slowly. In Canada, the three most common chronic health conditions are cancer, cardiovascular disease and diabetes, followed by chronic obstructive pulmonary disease, asthma, depression and anxiety, and arthritis.² Depression was discussed in the previous session on Mental Health. This final session will only focus on diabetes, cardiovascular disease and cancer.

There are several risk factors for chronic disease, including low levels of activity, obesity and poverty. An example of a risk factor that can be addressed through life style modification is smoking. A person choosing to smoke puts themselves at risk for many chronic diseases and increases the likelihood of progressive changes and development of diabetes-related complications. For example, people who smoke, face three times the risk of having a heart attack compared to those who do not smoke and have diabetes. Smoking has also been identified as a stronger risk factor for heart attacks—myocardial infarction (MI)—in women than in men. The risk is about 50 percent higher in female smokers compared with male smokers. Women's life expectancy in British Columbia (BC) is decreasing relative to men's life



Information on Chronic Diseases Type 2 Diabetes

expectancy in the province. Women's death rates in BC from circulatory system diseases (CSD) and ischemic heart diseases (IHD) are not reducing as fast as men's.³

Alcohol also causes health and social problems. Alcohol is acceptable in moderation, even for people with diabetes. However, drinking alcohol can result in low blood sugar, especially in people using insulin. These are two risk factors.

To understand diabetes, it is helpful to know a little about the digestion process, the function of the pancreas and insulin, and how these relate to diabetes.

Some of the food you eat (sugar, starch, and other carbohydrates) is broken down in the digestion process into a simple sugar called glucose. Glucose is absorbed into the bloodstream from your stomach, causing the level of blood glucose (also known as blood sugar) to rise. For the cells of your body to use the glucose as fuel, it needs the help of insulin. Insulin is a hormone produced by the pancreas, a large gland located below and behind your stomach. Insulin helps the blood glucose get from the bloodstream into the cells. Once inside the cells, the glucose is burned to give your body energy, and to regenerate body tissue.

Glucose in the body can be compared to the gasoline in a car; each is a fuel and a source of energy. Gasoline alone, however, is not enough to make the car move. We also need a key to start the motor, which allows the gasoline to be converted into energy. Like the car, our bodies also need a key that enables us to use glucose as energy. Insulin is this key; it opens the door to allow the glucose to pass from the bloodstream into the cells, where it produces energy for the body.

For people with diabetes, insulin is not able to carry out this function properly because either the pancreas does not produce sufficient insulin, or the insulin that is produced cannot be used efficiently by the body. In either case, the unabsorbed glucose remains in the bloodstream. The result is high blood glucose. When the kidneys filter the blood, excess glucose spills out in the urine. This causes two of the symptoms of diabetes: frequent urination and large amounts of sugar in the urine.

Left untreated or improperly managed, diabetes can result in a variety of complications, including heart disease, kidney disease, eye disease, problems with erection (impotence), and nerve damage. Today, more than ever before, people with diabetes can expect to live active, independent and vital lives if they make a lifelong commitment to careful management of the disease. It is important to be tested for

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The modifiable risk factors for addressing Type 2 diabetes are the same risk factors for many other chronic diseases. Physical activity, proper healthy eating and some simple changes in lifestyle can play a role in preventing diabetes and other

chronic diseases.

Type 2 diabetes. Taking steps to prevent or manage diabetes also prevents and manages many other chronic diseases and promotes health throughout life.⁴

Signs and symptoms of diabetes include the following:

- Unusual thirst
- Frequent urination
- Weight change (gain or loss)
- · Extreme fatigue or lack of energy
- Blurred vision
- Frequent or recurring infections
- Cuts and bruises that are slow to heal
- · Tingling or numbness in the hands or feet
- · Trouble getting or maintaining an erection

It is important to recognize, however, that many people who have Type 2 diabetes may display no symptoms.

Risk factors

There are risk factors for Type 2 diabetes that cannot be changed:

- Age
- Family history of diabetes
- Ethnic background Aboriginal, Hispanic, Asian, and African descent are higher risk groups
- A history of gestational diabetes (diabetes during pregnancy)

But there are also modifiable risk factors (things that can be changed):

- Being overweight, especially if most of the weight is carried around the middle
- Inactivity
- Alcohol
- Smoking
- Not eating well
- High cholesterol or high triglycerides

However, lifestyle changes can help manage blood sugars and control diabetes. The modifiable risk factors for addressing Type 2 diabetes are the same risk factors for many other chronic diseases. Physical activity, proper healthy eating and some simple changes in lifestyle can play a role in preventing diabetes and other chronic diseases.

Here are some steps that can manage diabetes and help maintain overall health and wellness – today and in the future:



- · Don't smoke
- Follow a balanced meal plan
- · Be physically active
- · Maintain a healthy weight
- Take medication as prescribed
- Manage stress effectively
- Keep blood pressure close to target level
- Check blood glucose levels regularly and keep them within target range
- Keep cholesterol and other blood fats within target range
- Take care of your feet
- In addition to regular check-ups with the doctor, also include regular visits to the dentist and eye care specialist (every one to two years)⁵

Heart Disease

Heart disease is the number one killer of older men and women. That fact is unlikely to change in the near future because the population of older people is growing faster than any other age group. And among older people, heart disease is more common than any other disability except arthritis. People used to think that only men got heart disease, but in fact it's the number one cause of death among older women. The only difference is that women develop the disease about ten years later than men do.

Reducing the risk of heart disease

You can do many things right now and every day to avoid heart disease. Heart disease is a 'lifestyle disease'. How we choose to live affects our heart health. If you choose to eat a lot of junk food, use tobacco, and spend the day sitting, your heart will be under great stress. Eventually, this unhealthy behavior will cause some part of your heart to break down. The habit of being physically active over many years can help protect against heart disease.

Researchers have found that being physically active can:

- Lower your resting heart rate
- Lower your blood pressure
- Improve your fitness

Studies show that older men and women who exercise live longer and do not develop heart disease as often as people who do not exercise. In most of these studies, people were asked to walk at least 30 minutes, five times a week. Walking is considered moderate exercise. Thirty minutes of moderate exercise on most days of the week is quite easy to manage, even for people who are not in the

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habit of being active. The only rule is that your heart has to beat a little faster and make you breathe a little harder. Walking quicker than normal gives you an idea of how hard you need to work. Think about walking quickly (not running), to reach the bus stop or an appointment on time. Resistance exercise means giving your muscles a workout. Climbing stairs, shoveling in the garden, and carrying grocery bags are all resistance exercises. At least one major study found that people who worked at getting stronger were also less likely to develop heart disease. You don't have to exercise for 30 minutes without stopping. You could go for a 10-minute walk, three times a day. It does not matter what kind of exercise or physical activity you choose. You can swim, ride a bike, walk your dog, or dig and weed in your garden. Whatever you choose to do, make sure that you enjoy it; that way, you are more likely to do it every day.

If you haven't been exercising regularly, talk to your doctor before you start working towards 30 minutes of exercise, five days per week. It's especially important to talk to your doctor if you are already living with heart disease.⁶

Cancer

Cancer mostly strikes older adults. When people have cancer, the genes in their cells have changes which make the cells grow out of control and then tumors develop. Why the changes occur is still not completely understood, but there are things people can do to prevent it, at any age.

Many studies show that people who exercise 3 to 4 hours a week have less chance of developing colon cancer. Physical activity may reduce risk because it speeds up digestion. This means that substances that can cause cancer move through the gut more quickly. To cut the risk of colon cancer, people need to do at least moderate exercise, such as an aqua fit class, or walking briskly.

How physical activity lowers breast cancer risk is likely very complex, but it may result from changes it causes in the response of normal breast tissue to female and other hormones, its impact on overall weight and its benefit in maintaining a healthy immune system. Older women can get the best protection if they have exercised regularly all of their lives. But exercise can also help older women who have never been physically active. Moderate physical activity can cut the risk for older women who are just starting an exercise program.

If you are physically active, you will be less likely to smoke and more likely to make healthy food choices. An exercise program will help control your weight and trim any body fat, which may also help to reduce your cancer risk.



To help prevent cancer, spend at least 30 minutes a day doing moderate physical activity. Remember to follow Canada's Physical Activity Guide for Older Adults. Consult your doctor before you start any exercise program.

People with cancer live longer than a few decades ago, but cancer treatments can be hard. They can drain you physically and emotionally. Surgery, radiation therapy and chemotherapy can also make it difficult for you to be active. Cancer survivors often want to know what they can do to cope with their treatments, recover after treatments, and reduce the risk of the cancer coming back. In the past two decades, researchers have started to look at how exercise might help. There is much more to learn, but exercise may be a key to recovering from cancer.

Exercise during cancer treatments

Research has shown that when people exercise during cancer treatments, their aerobic fitness, muscular strength and physical functioning improve. Exercise can also help them feel less tired. People who find it hard to exercise during treatments can exercise when they are in recovery. Exercise can improve your physical and mental health. It can make it less likely that their cancer will return and can increase their chances of survival.

Activity after cancer treatment

Getting active after cancer treatment surgery, radiation treatment, and chemotherapy can leave you feeling worn out. Getting more active can help you feel less tired. It is also a safe and fun way to improve your health and well-being. Being active helps all older healthy adult's lead healthier lives, including older adult cancer survivors. Being active lets you meet and make friends and create a healthy social routine.

Physical activity can help you:

- · Feel less tired
- Recover faster
- Have more energy
- Have better posture and balance
- · Manage your weight
- Develop stronger muscles and bones
- Relax and reduce stress
- Improve your heart health

Research also suggests that physical activity may help to:

- Reduce your risk of getting cancer again
- Extend the life of some cancer survivors



First steps

Talk to your oncologist or your health care team first. They can tell you if you are ready to exercise, as well as how much, how often and how hard. You can also talk to your family doctor, physiotherapist, occupational therapist, registered dietitian, or certified fitness professional. These people understand how physical activity can help your life. They can help you get started. They can work with you to find out what activities best meet your needs.

Fitness professionals can also pre-screen you before you start an activity. Pre-screening helps to determine the most appropriate physical activity for you based on your current health status.

Keeping healthy also means:

- Choosing a healthy balanced diet
- Stopping smoking
- · Keeping your weight within a healthy limit

Remember:

- · Every little bit counts.
- · Start with a few minutes each day.
- Try something you like.
- Listen to your body and stay safe.

Follow these simple tips and your activity time will add up fast. You will feel the benefits sooner than you think.⁷

Tips for the Leader

The group will be at the 'Norming phase' – they take more control, begin problem solving and plan activities together.

Remember these tips!

Be aware of special needs of older adults

Hearing

- Decrease background noise
- Enunciate (pronounce words clearly)
- If you know a person is low hearing place them close to the speaker
- · Speak slowly

Language

• Translation may be required

Written material

· Use white background with black lettering

Assess literacy levels of the group to help plan the next module.



When working through each Module

- 1. Progress slowly
- 2. Repeat the main ideas and instructions often
- 3. Engage participants in hands on experiences
- 4. Follow up after

Activities

For effective learning:

- 1. Present the core material
- 2. Practice
- 3. Reinforce the learning8

Combining adult learning methods and interest-based problemsolving gives the Leader a process to follow to effectively conduct a workshop. The process includes:

- Begin with people's experiences What are their perspectives or stories? What are their needs? What knowledge have they gained from these experiences?
- Look for patterns and identify common needs and issues
 What are the connections among people's needs? What are the common issues?
- Add new information What do people already know about the needs and issues? What other information is needed? What clarifications are needed? What misinformation needs correction?
- In future workshops, use this information to progress from one module to another - How can this information help with the next steps of meeting needs and addressing issues?
- Reflect on learning What has been helpful? What are the challenges? How will you support success?⁹

Note to the Leader: It will be important throughout the workshops that you reflect on your role in modeling what you are encouraging in others. You do not need to be perfect. For example, if you are asking participants to set a goal, demonstrate a goal you are setting for yourself. If you do not achieve your goal, you might share some of the challenges you experienced and ask participants about their challenges.



Workshop Format

Welcome

3 Minutes

Session Overview
5 Minutes



Information

Reflection/Group check in 20 Minutes



Activity

Welcome everyone back to the group! It is nice to see everyone again. This is our last formal workshop together. We started the discussion about ways the group could stay connected after the workshop series. We will have some time to finalize that discussion today.

If you have any questions or concerns throughout today's workshop, please do not hesitate to speak with me at any time, either in the group or privately.

The topic today is Healthy Lifestyles – Impact on Chronic Disease. There will be a focus on the three most common chronic diseases: heart disease, cancer and diabetes. You will share your knowledge and/or experiences with these diseases and look at the relationship to physical activity/healthy lifestyle. There will be a new exercise and another daily dose to add to your activities.

If you have any questions or concerns throughout today's workshop, please do not hesitate to speak with me at any time, either in the group or privately.

Review today's workshop objectives

- To review the impact of chronic diseases
- To build on participant knowledge of a healthy lifestyle
- To identify risk factors and motivate participants to modify these to manage/prevent chronic disease

Review last week's module – Mental Emotional Health. Are there any questions that came up since the last workshop?

Note to the Leader: Continue to encourage peer support as it is very important and personal experiences can motivate others. This is wonderful opportunity for the participants to identify if they met their goal and if not what were the issues/cons—and allow the group to discuss ideas. This discussion may help the participant to be successful with the goal for next week.

As this is the last workshop in the series ask each person is to reflect on their goals, successes, disappointments, and their pros/cons.

Ask the participants to get into pairs or small groups. Instruct the groups to discuss:

- Goals
- Successes
- Disappointments
- Pros/cons
- Overcoming barriers



Report back to the large group.

This may help them and others to see why some things were successful – (e.g. small goals, fun, etc.).

 What are your thoughts on the daily dose? Is it starting to become easier since it is built into your daily routine?

Safety

3 Minutes



Information

Safety tips for the activity sessions:

- · Start slow
- Listen to your body
- Go at the pace that is comfortable for you
- Wear comfortable clothing and supportive footwear
- Remember to breathe naturally

Physical Activity Warm-up 10 Minutes



Activity

Ideas for Physical Activity - Choose 1

- Go for a 5-10 minute walk.
- Dance You can put on an upbeat song and do the following movement to warm the body up. You can keep your feet marching the whole time. Shoulder shrugs. Shoulder circles. Arm circles. Chicken wings. Reach up to the sky and back down. Wrist circles. Wiggle fingers. Knees up.
- Invite people in the class to share what they know—someone in the class may like to lead a short exercise.
- Invite people from the community to come in and lead the class in a short exercise (e.g. a yoga instructor, physiotherapist).

Upper Back Flexibility

http://go4life.nia.nih.gov/try-these-exercises/flexibility/upper-back

What you need: sturdy, armless chair.

This exercise targets your shoulders and upper-back muscles. This

exercise will help you do activities that require you to twist or turn to look behind you, such as backing out of a parking space.

- 1. Sit in a sturdy, armless chair with your feet flat on the floor, shoulder-width apart.
- 2. Hold arms in front of you at shoulder height with palms facing outward.
- 3. Relax your shoulders, keep your upper body still, and reach forward with your hands. Stop when you feel a stretch or slight discomfort.
- 4. Hold position for 10-30 seconds.
- Sit back up.
- 6. Repeat at least 3-5 times, if possible.¹⁰





Presentation 15 Minutes



Information

Video: Prevention of Chronic Disease

3 Minutes

https://www.youtube.com/watch?v=BAX1V2yQxQ8¹¹

Provide some basic background knowledge on cancer, cardiovascular disease and diabetes.¹¹

Activity

Have 3 flip charts labeled cancer, cardiovascular disease, diabetes. On each flipchart have the subheadings:

- Risk factors
- · Impact on lifestyle, signs, and symptoms
- Management and prevention techniques (to help maintain overall health and wellness – today and in the future)

Have the group decide what flipchart they would like to work on to fill in everything they know about the topic.

Give ten minutes to do this. Ask groups to report back to the main group.

After hearing from the groups refer to the flip charts and lead the discussion on the similarities in prevention and management of the three chronic diseases.

Refer the group to the Lifestyle Section in the *Passport* pgs. 16-17 and Diabetes and Chronic Disease pgs. 4-9.

Note to Leader: It is important to use positive messaging and encourage participants that even if they are diagnosed with a chronic disease, that life style changes can make a difference in how they feel. Remind the group that they have been making changes to their lives and over time these changes will make a positive difference.

Advise the group that they can make changes to their lives and make a positive difference. There are modifiable risk factors that they can do something about such as:

- Being overweight, especially if most of the weight is carried around the middle
- Inactivity
- Alcohol
- Smoking
- Not eating well¹²



Nutrition Break 15 Minutes



Activity

Ideas:

- Lower fat cheese and crackers
- Fruit—fresh or canned in own juices
- · Frozen yogurt with berries
- Milk and oatmeal cookie
- Yogurt and fruit
- Trail mix-nuts and fruit
- Veggies and dip¹³

News Bites 5 minutes



Resources

Ask participants if anyone has any last bits of news. Questions to ask the group in the discussion:

- · Do we know who wrote it?
- Do we know their qualifications?
- Are the sources they are using credible?
- Is the source providing the news credible?

Hopefully you will continue to listen for healthy news bites and determine if the story is credible.

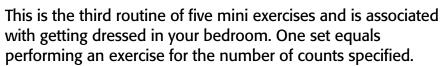
Daily Dose 5 Minutes



Activity

The idea of the daily dose¹⁴ is to make physical activity a part of your regular daily routine, things that we all do as part of our day such as getting dressed. The principle is that you attach a physical activity to a daily routine and location. For example when you are getting dressed you can do one or more exercises from the upper body daily dose. The daily dose becomes routine so getting dressed will cue the daily dose routine.

Upper body daily dose



"Stick-'Em-Up" pull back

Pretend you are the victim of a "stickup" or robbery. Raise your arms to shoulder height, elbows bent, hands open and palms facing out. Slowly pull your shoulders back and together, then return your shoulders to a forward position. Perform this exercise 10 times.



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Activity

30 Minutes

There are four charts in *Your Personal Passport to Healthy Living* that are important to fill out now that we are at the end of the program. There are extra charts to fill in at the back of the *Passport*.

Activity

Charts to be completed in the workshop

- pg. 19 Track changes in eating habits over time
- pg. 25 Changes in beliefs and attitudes
- pg. 27 Stages of Change for Healthy Eating and Physical Activity
- pg. 30-31 Your Journey to Success

Small group activity

- 1. Give the group time to plan future meetings or activities if they are interested.
- 2. If you have a group of smokers, they might like to have someone to talk to them about quitting smoking, or you might be able to get a local health professional such as a Public Health Nurse to come to the group to talk about smoking cessation and the use of alcohol.

Presentation 15 Minutes



Information

Guest speaker – Foot care

If you know of a Podiatrist or a Nurse that has been trained in foot care invite them to the group to talk about foot care.

Sometimes, people with diabetes can have nerve damage with a loss of sensation to their feet and hands. There may be numbness and no feeling of pain, that could result in ulcers and poor wound healing. Don't take chances. Chronic wounds are ulcers or sores on the skin that last longer than they should.¹⁵

Homework: Participants can look at the *Passport* pg. 9 and assess their feet at home.

Encourage your participants to look in their *Passport* and assess their feet against the checklist provided. Ask them to look at the helpful hints to help treat their feet with care and to ask their doctor about any wound or sore that will not heal. The Canadian Association of Wound Care has some handouts on foot care and Diabetes that can be downloaded or ordered from their website:

http://cawc.net/index.php/public/feet/downloads/

http://cawc.net/images/uploads/Checklist_form.pdf

Encourage the participants to do that as their final homework assignment and to continue to do it long after the sessions are done.

Review the information in the *Passport* and visit the website below for further information.

http://cawc.net/diabetesandhealthyfeet



Goal Setting 10 Minutes



Suggestion

We are at the end of our six weeks together. That does not mean that you stop all the wonderful work that you have all been doing.

Set a goal now that the workshops are over. Perhaps one of your goals will be to stay connected to the group.

Invite people to share their ongoing SMART goal. Is it to continue to make a new goal every Monday morning?

- Remember when making new goals to always ask if it is realistic.
- Which is bigger the pros/cons?

Is it part of your larger goal or something that we covered today? Invite participants to share with the group.

Closing

10 Minutes



Resource

Ask participants to highlight one or two new things that they have learned that they did not know before coming into the session, and then end off with all these thoughts:

Fitness and exercise releases endorphins, which make us feel good and feel healthy.

Eat well. The body and mind connection is a powerful thing. How we eat directly influences our mental outlook.

Being outside does wonders for almost everyone. In fact, the more contact with we have with nature, the better we feel.

Using stress management techniques can be very helpful in reducing negativity.

Laugh often. They say that laughter is the best medicine, and that a life full of smiling and laughing, from whatever cause will be uplifting and makes us more vibrant and healthy.

Get plenty of rest. Sleep refreshes, provides energy and relieves stress.

Over time build up to 150 minutes of moderate-to-vigorous intensity aerobic activity per week. For those who have been inactive, encourage that they start with 10 minutes each day if possible.

Break it up into 10 minute segments, or more.



Evaluation 10 Minutes

Fill in the evaluation at the end of the Passport. The leader will submit them to ALCOA to allow for program evaluation and ongoing improvements to the program.

Self-Reflection (For Leader) 10 Minutes Ask Participants to fill in the evaluation in the back of the *Passport*. Hand in the back page of the *Passport* to the Leader. The Leader will mail these to ALCOA.

There are many evaluation forms in the *Community Leaders Guidebook*, pages 44–47. Refer to this evaluation section to assist you in completing an effective evaluation of your workshop.

Use one of the following suggestions to evaluate the final session:

Round table to see how the meeting went

Flipchart—have a + and a - ask how people are feeling about the workshop. Any concerns can go on the negative side

Ask for one word how people are feeling

Ask for an expression of how people are feeling

- Start, stop, continue
- A happy face continuum
- A fill in: "This session was _____
 because _____.
- In the next session, I would like _______

ALCOA has a goal to continue building evidence on best practice in the use of the *Community Leaders Tool Kit*. Through evaluation we can capture lessons learned from your experience. We can also learn about its impact on older adults. The intent is to improve the components of the *Tool Kit* over time to ensure maximum benefit, and to provide guidance on what ensures the most positive outcomes. We want to have a tool that you will use because you know it is has been proven to be helpful in working with older adults in adopting healthier and more active lifestyles. As a Community Leader working with older adults, you can help by participating in the evaluation process, and communicating with the ALCOA office regarding your use of this *Tool Kit*. Reflect on your planning and delivery of each module and record any changes that you might make.

Please complete the Leader evaluation on page 112 and return it to ALCOA with the *Passport* evaluations that the participants filled out. You can also complete the evaluation online:

http://fluidsurveys.com/s/ALCOA/



Endnotes

- 1. Registered Nurses' Association of Ontario (2010). Strategies to support self-management in chronic conditions: collaboration with clients. Toronto, Canada: Registered Nurses' Association of Ontario.
- 2. Clow, B., Penderson, A., Haworth-Brockman, M., & Bernier, J. (2009). Rising to the Challenge: Sex- and gender-based analysis for health planning, policy, and research in Canada. Halifax, Nova Scotia: Atlantic Centre of Excellence for Women's Health.
- 3. Active Living Coalition for Older Adults (2012). Community Leaders Guidebook.
- 4. McGowan, P. (2013). Managing Diabetes. In Living a Healthy Life With Chronic Disease (pp. 299-326).
- 5. Active Living Coalition for Older Adults (2012). Community Leaders Guidebook.
- 6. Sharratt, M. T. (2011). Exercise for your heart's sake: it's never too late. Active Living Tips for Older Adults.
- 7. Hoffman-Goetz, L. and Courneya, K. S. (2007). Physical activity and cancer: from prevention to recovery. Active Living Tips for Older Adults.
- 8. National Institute on Aging (2012). Introducing the Toolkit. http://nihseniorhealth.gov/toolkit/toolkitfiles/video/toolkitvideo_ na.html?intro=yes
- 9. The Quaich Inc. (2010). Circle of Health Facilitator's Handbook Prince Edward Island: The Quaich Inc.
- 10. National Institute on Aging (2013). Upper back flexibility. http://go4life.nia.nih.gov/try-these-exercises/flexibility/upper-back
- 11. Active Living Coalition for Older Adults (2012). Prevention of Chronic Disease. https://www.youtube.com/watch?v=BAX1V2yQxQ8
- 12. Active Living Coalition for Older Adults (2012). Community Leaders Guidebook.
- 13. Keller & Wdoniak. (2012). A guide to healthy eating for older adults. EatRight Ontario.
- 14. Griffin, J. C. (2013). Boost lifestyle activity to support clients in aging well. The Journal on Active Aging, March/April, 44-54.
- 15. Active Living Coalition for Older Adults (2012). Community Leaders Guidebook.



Disclaimer

Please note: The Active Living Coalition for Older Adults (ALCOA) has taken all steps to ensure that the *Community Leaders Tool Kit* is built on current evidence. ALCOA does not provide training for using the *Tool Kit*, but has developed pod casts for each Module, to help orientate the Community Leader to the resource. The pod casts may be found at the *ALCOACanada YouTube site*.

ALCOA does not provide liability insurance for the protection of individuals, groups, organizations, spectators or others who may participate in the activities outlined in this *Tool Kit*. ALCOA plans to distribute the kit broadly through its website and therefore cannot ensure the level of training of the individual Community Leader delivering the workshops.

Organizations intending to use the workshop modules should consider developing an informed consent form specific to this activity.

Further inquiries can be made to: Patricia Clark, National Executive Director, Active Living Coalition for Older Adults (ALCOA) alcoa@uniserve.com.



Reference List

Acting out Musical dress up Chicken Dance. (2007).

http://www.youtube.com/watch?v=yzZPEjnRV7o

Active Living Coalition for Older Adults. (2012).

Getting started – physical activity video.

https://www.youtube.com/watch?v=PDUKL3WXi9w

Active Living Coalition for Older Adults (2012). Making lifestyle changes, from

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

Active Living Coalition for Older Adults (2012).

Maintaining strength with age.

http://www.youtube.com/watch?v=-Kdwu4JCcvo

Active Living Coalition for Older Adults (2012).

Physical Activity & Exercise. https://www.youtube.com/watch?v=mIOR2HqI110

Active Living Coalition for Older Adults. (2012).

Benefits of Active Living,

https://www.youtube.com/watch?v=i189DN3wsUg (2012).

Active Living Coalition for Older Adults (2012).

Prevention of Chronic Disease.

https://www.youtube.com/watch?v=BAX1V2yQxQ8

Active Living Coalition for Older Adults. (2012).

Your Personal Passport to Healthy Living.

Active Living Coalition for Older Adults. (2012).

Community Leaders Guidebook.

Bodenheimer, T., Wagner, E., & Grumback, K. (2002).

Improving primary care for patients with chronic illness: the chronic care model, Part 2. Journal of the American Medical Association, vol. 288, no 15, pg. 1909-1914.

Boston University School of Public Health (2013).

The transtheoretical model (Stages of change).

http://sph.bu.edu/otlt/MPH-Modules/SB/SB721-Models/SB721-Models6.html

Burris, L. (2010). Cooking for 1 or 2. Silver Times, Vol. 1. Iss. 1 (2012)

Canadian Centre for Activity and Aging (2012).

Canadian physical activity guidelines for older adults.

http://www.youtube.com/watch?v=NjCkLunz_U8&list=UUHHLC_tG3Roxtg4e06bRkG w&index=1

Canadian Society for Exercise Physiology (2012).

Canadian Physical Activity Guidelines for Older Adults.

http://www.csep.ca/english/view.asp?x=949



Reference List

Clow, B., Penderson, A., Haworth-Brockman, M., & Bernier, J. (2009). Rising to the Challenge: Sex- and gender-based analysis for health planning, policy, and research in Canada.

Halifax, Nova Scotia: Atlantic Centre of Excellence for Women's Health.

EatRight Ontario. (2011). Food choices when money is tight.

EatRight Ontario (2013).

Episode 3 of 5: Nutrition facts table five features.

http://www.eatrightontario.ca/en/Videos/Nutrition-Labelling/Episode-3-of-5--Nutrition-Facts-Table-Five-Feature

EatRight Ontario (2013). Episode 4 of 5: % Daily Value.

http://www.eatrightontario.ca/en/Videos/Nutrition-Labelling/Episode-4-of-5---Daily-Value-%28Video%29

EatRight Ontario (2013). Episode 5 of 5: Focus on Carbohydrate. http://www.eatrightontario.ca/en/Videos/Nutrition-Labelling/Episode-5-of-5--Focus-on-Carbohydrate-%28Video%29

EatRight Ontario (2013). Plate size matters.

http://www.eatrightontario.ca/en/Videos/General-Healthy-Eating/Video--Plate-size-matters

EatRight Ontario. Quick and Easy Snack Ideas. (2013).

Egede, L., Nietert PJ, & Zheng, D. (2005).

Depression and all-cause and coronary heart disease mortality among adults with and without diabetes.

Diabetes Care, vol. 28, no. 6, pg. 1339-1345.

Griffin, J. C. (2013). Boost lifestyle activity to support clients in aging well. The Journal on Active Aging, March/April, 44-54.

Griffin, J. C. (2013). Simple exercises to keep older adults moving—Part 3. http://www.silvertimes.ca/home/active-living/simple-exercise-to-keep-older-adults-moving

Health Canada (2011). Eating well with Canada's food guide. http://www.hc-sc.gc.ca/fn-an/alt_formats/hpfb-dgpsa/pdf/food-guide-aliment/view_eatwell_vue_bienmang-eng.pdf

Hoffman-Goetz, L. and Courneya, K. S. (2007). Physical activity and cancer: from prevention to recovery.

Active Living Tips for Older Adults.

Keller & Wdoniak. (2012). A guide to healthy eating for older adults. Eat Right Ontario.

Los del Río (2007). Macarena.

http://www.youtube.com/watch?v=nS3s LE6Wrl

McGowan, P. (2013). Managing Diabetes. In Living a Healthy Life With Chronic Disease pg. 299-326.



Reference List

Moussavi, S., Chatterji, S., Verdes, E., Tandon, A., Patel, V., & Ustun, B. (2007). Depression, chronic diseases, and decrements in health: results from the World Health Surveys. The Lancet, 370, no. 9590 pg. 851-858.

National Institute on Aging (2012). Introducing the Toolkit. http://nihseniorhealth.gov/toolkit/toolkitfiles/video/toolkitvideo_na.html?intro=yes

National Institute on Aging (2013). Back stretch. http://go4life.nia.nih.gov/try-these-exercises/flexibility/back-2

National Institute on Aging (2013). Chest Stretch. http://go4life.nia.nih.gov/try-these-exercises/flexibility/chest

National Institute on Aging (2013). Hand Grip. http://go4life.nia.nih.gov/try-these-exercises/strength/hand-grip

National Institute on Aging (2013). Knee Curl. http://go4life.nia.nih.gov/try-these-exercises/strength/knee-curl

National Institute on Aging (2013). Leg Straightening. http://go4life.nia.nih.gov/try-these-exercises/strength/leg-straightening

National Institute on Aging (2013). Overhead arm raise. http://go4life.nia.nih.gov/try-these-exercises/strength/overhead-arm-raise

National Institute on Aging (2013). Upper back flexibility. http://go4life.nia.nih.gov/try-these-exercises/flexibility/upper-back

Prochaska, J., Norcross, J., & DiClemente, C. (1994). Changing for Good, A Revolutionary six-stage program for overcoming bad habits and moving your life positively forward. New York: William Morrow & Co.

Registered Nurses' Association of Ontario (2010). Strategies to support self-management in chronic conditions: collaboration with clients.

Toronto, Canada: Registered Nurses' Association of Ontario.

Rosenthal, E. & Brueggeman M.L. (2001). Adult Learning, Rural Wisconsin Health Cooperative.

Sharratt, M. T. (2011). Exercise for your heart's sake: it's never too late. Active Living Tips for Older Adults. Active Living Coalition for Older Adults.

The Quaich Inc. (2010). Circle of Health Facilitator's Handbook Prince Edward Island: The Quaich Inc.

VideoJug (2012). How to dance the Macarena.

http://www.youtube.com/watch?v=OzV63IRR8BQ

Volkswagen (2009). Piano stairs in Stockholm. http://www.youtube.com/watch?v=dN0eabGb-vl

