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# Eating for Health

## A Nutrition group self-management education session

### Facilitator Guide

#### **Goals of Program:**

Eating for Health is a nutrition education program to help clients better understand healthy eating and how it relates to cardiovascular disease risk and chronic disease prevention.

Participants will explore and understand healthy eating principles in interactive activities which will allow them to take action and modify their own health behaviours.

Goal setting and skill building will be introduced, as well as other modifiable risk factors.

Clients have been asked to bring their own personal health information (Blood pressure, cholesterol, medications) if desired to help them determine important next steps and to help personalize the information provided.

#### **Intended Participants:**

This program is open to anyone who:

Has elevated Framingham Risk Scores, high cholesterol or hypertension.

Has a family history and is interested in prevention strategies.

Has pre-diabetes/diabetes.

Is not ready/able to attend cardiac rehab but would like to gather behavior modification ideas.

**\*\*This program is recommended to be paired with the “Heart Health Essentials” program to provide a comprehensive understanding of modifiable risk factors in cardiovascular health. \*\***

## **ACKNOWLEDGEMENTS**

The “Heart Health Essentials” manual was developed in concert with the “Eating for Health” Nutrition WRHA module. These two sessions can be taken together or separately to assist clients with education and skill development needs.

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## ABOUT THE FACILITATOR GUIDE

This guide offers service providers a framework for facilitated group work for those who have already had a cardiac event, those with cardiovascular disease risk and those with an interest in chronic disease prevention.

The focus of this session is nutrition: going over dietary modifiable risk factors associated with cardiac health. Education, skill building and practical activities are incorporated to help participants identify how simple changes can make a lasting impact. This session promotes overall well-being and presents the building blocks to further self-management skills by linking them to other programs available throughout the WRHA.

All the information provided is based on current guidelines and evidence-based research, and is to be provided by a regulated healthcare professional.

It is not the expectation that 100% of these topics get covered. Your groups' personal interests will dictate what areas you spend more time on.

### Facilitator's Role:

As a facilitator of a community group, it is important that you:

- have an empathetic, non-judgmental attitude
- allow all group members opportunity to express themselves
- prepare other relevant information and resources to help the group
- provide group members your contact information so they can follow-up with you if needed.

### Text colours:

- **BOLD:** Read aloud! This information is appropriate for the group
- Normal font: This information is for you as the facilitator to help guide the class. It may also provide supporting information on the topic that does not need to be read to the group.
- *"HINT" text boxes:* This information is to help you as a facilitator.

## CHECKLIST OF MATERIALS

Nametags

Paper

Pencils

Handouts/links to resources

Whiteboard or flip chart

Large poster board sheet divided into 3 sections

Markers

Food Labels

Food Models

Clip Art (You may want to print these out in color and laminate them).

Plate resource

Screen and internet hook-up to view YouTube videos (if needed)

## WELCOME TO EATING FOR HEALTH GROUP

This session is designed to take 2 hours, and includes some optional activities that can be done if the group is interested, as well as time for questions at the end.

**During the session, we will discuss diet and how it affects health. We will provide strategies to look at your own habits to identify where/if change would be beneficial. We also will discuss some practical tips for how to eat healthier and how to make lifelong positive habits.**

**We hope that you feel comfortable asking questions, and interacting with the group. Please ask questions as we go. Everything that you share in class will be kept confidential.**

Please provide your group with specific housekeeping info, etc.

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### **ACTIVITY 1: INTRODUCTIONS** (15 MINUTES)

**Lets' start the session by going around the table and having each person:**

**Introduce him or herself.**

**Tell us what your favorite meal or snack is.**

**Name one thing you would like to learn today about healthy eating.**

Hint- You may want to write what participants want to learn on a whiteboard/poster sheet. At the end of the session, you can review to make sure that each concern was addressed. This list may give you an idea about which OPTIONAL activities you want to do with the group.

**Thank you for sharing. We will discuss many of these things, as well as some others during this session.**

**Let's get started!**

## Optional Activity: Definition of Terms (5 minutes)

We are going to refresh our memory of these terms with a matching activity. The papers I am going to hand out have either a 'term' or a 'definition.' We can work together to match them up.

Notes:

What is Cholesterol?

- **Cholesterol** is one of the fats in blood. Uses: to make cell membranes, vitamin D and hormones. Dietary cholesterol is found in meat, poultry, eggs and dairy. However, dietary cholesterol has less of an impact on blood cholesterol than foods with high saturated and trans fat.  
**High blood cholesterol** = Is a risk factor for heart disease and stroke. Lowering your cholesterol = dramatically reduce your risk. The liver produces cholesterol (80%).
- **Blood Pressure**- Measures how much pressure your blood is pushing against your artery walls when the heart beats, and how much pressure your blood is exerting against your artery walls while the heart is resting between beats.
  - Low risk: 120/ 80
  - Medium risk: 121-139/80-89
  - High risk: 140+ / 90
- **LDL** – “Lousy, Bad” as it promotes the buildup of plaque in the artery walls. Ways to lower LDL cholesterol include:
  - ↓ Total fat, saturated, trans fats,
  - ↑ Omega 3 fats, Soy products, Fibre, Activity,
  - Quit smoking
  - Reduce stress
- **HDL** – “Happy, Good” – it helps carry LDL-cholesterol away from the artery walls. Ways to increase HDL cholesterol include:
  - ↑ Activity
  - Quit smoking
  - Weight loss
- **TG** – not a type of cholesterol – a fat found in the blood. Relates to sugar and ETOH.  
(Less table sugar/sweets/desserts, Less to no alcohol, Increased activity, Less saturated and trans fats, Increased Omega 3 fats, Quit smoking).  
\*Familial hypertriglyceridemia is an inherited disorder. These people have elevated TG levels because the liver is unable to metabolize excess LDL. While diet is important in this condition, medication will also be needed to keep levels low.

## Definition of terms

term	<b>Cholesterol</b>	term	definition	<b>A waxy, fat-like substance that's found in all cells of the body. We can run a lab test that provides us a "total".</b>	definition
term	<b>Blood pressure (systolic and diastolic)</b> Low risk: 120/ 80 Medium risk: 121-139/80-89 High risk: 140+ / 90	term	definition	<b>Indicates:</b> 1) How much pressure your blood is exerting against your artery walls when the heart beats. 2) How much pressure your blood is exerting against your artery walls while the heart is resting between beats.	definition
term	<b>LDL cholesterol</b>	term	definition	<b>"Lousy, Bad" when in high amounts in the blood, as is promotes the build-up of plaque in the artery walls.</b>  <b>Ways to lower: ↓ Total fat, saturated, trans fats, ↑ Omega 3 fats, Soy products, Fibre, Activity, Quit smoking, Reduce stress.</b>	definition
Term	<b>HDL Cholesterol</b>	Term	definition	<b>"Happy, Good" – Helps carry LDL-cholesterol away from the artery walls.</b>  <b>Ways to increase HDL cholesterol include:</b> ↑ Activity, Quit smoking, Weight loss.	Definition
Term	<b>TG (Triglycerides)</b>	Term	definition	<b>Not a type of cholesterol – a fat found in the blood.</b>  <b>Ways to lower include: Less table sugar/sweets, Less to no alcohol, Increased activity, Less saturated and trans fats, Increased Omega 3 fats, Quit smoking.</b>	Definition



## ACTIVITY 2: DIETARY FAT AND PROCESSED FOODS

The nutrients that most influence our cholesterol, blood glucose and blood pressure are: Fat, salt, sugar and fiber. The next few activities focus on these nutrients.

### Speaking notes for Activity 2:

Dietary Fats: why do we need them?

- Dietary fats and oils **provide energy** to the body as well as **essential fats** that are needed to prevent a nutrient deficiency, and also help your body **absorb fat soluble vitamins** such as A, D, E and K. You need fat in your diet for normal body functions. Also gives **flavour** to foods.
- **Need to focus more on TYPE vs AMOUNT** of fat; the type of fat consumed is more important for health than the total amount of fat consumed.

Types of fat = **unsaturated, saturated, trans**

- **The type of fat we eat is very important because it can affect the cholesterol levels in your body.**
  - Unsaturated fats are “good” because they lower our LDL and maintain our HDL. They also help protect us from heart disease.
  - Saturated and trans fats increase the “bad” cholesterol in our blood (Trans also decreases HDL) = increases risk for heart disease.

Unsaturated Fats “**healthy**”

- **Sources: canola, olive, nuts/seeds, avocado, non- hydrogenated soft margarine, flax, fatty fish**
- Replace saturated and trans fats with unsaturated fats to:
  - help improve our cholesterol levels.
  - lower heart disease risk.
- **Ways to include unsaturated fat**
  - **Use teaspoon size amounts of olive, canola or peanut oil in cooking and baking**
  - **Choose salad dressing and soft margarines made with vegetable oils more often**
  - **Snack on small amounts of dry roasted, unsalted nuts (1/4 cup, 4 times per week)**
  - **Use peanut/nut butters instead of butter (limit to 2 tbsp.)**

**Omega 3 - from fatty fish such as salmon, sardines, mackerel, and tuna, as well as from walnuts and flaxseed in lesser amounts**

- **Omega-3 fats are heart healthy fats that have many functions in our body**
  - **Helps prevent blood from sticking and clotting**
  - **Lowers cholesterol and triglycerides**
  - **Are essential (our body can't produce them so we need to eat them)**
- There are three kinds of omega-3 fats:
  - ALA (alpha-linolenic acid) - essential fat so it must be consumed in the diet
  - DHA (docosahexaenoic acid)
  - EPA (eicosapentaenoic acid).
- Our bodies can make EPA and DHA from ALA, but this is very limited. Therefore, it is important to include foods rich in DHA and EPA in your diet.
- Recommendation: 19+ yrs Women 1.1g ALA/day, Men 1.6g ALA/day
- **Sources:**
  - **Cold water fatty fish is the best source (EPA and DHA): mackerel, salmon, sardines, herring, tuna, char, trout, cod, swordfish, bluefish.**
  - **Plant sources (ALA): walnuts, canola oil, pumpkin seeds, soybean products and ground flaxseed (grinding increases absorption of ALA, otherwise very little is absorbed by the body. Grind in small batches and store in the fridge in a sealed container. Ground flax: 20-50g daily (2-5 Tbsp./day) can moderately reduce total cholesterol and LDL. No effect on HDL or trigs. Increase slowly to prevent gas and bloating. Flaxseed oil does not appear to affect blood lipid levels).**
  - **Supplements: there is evidence that omega-3 supplements may help to lower triglycerides, but may not have a strong effect on changing cholesterol levels.**
- **It is always best to get your omega-3's from food, however, if deciding to take a supplement, ensure it is an Omega-3 supplements only; Omega 3-6-9 pills have very little Omega-3 in them.**
  - The quality and amount of omega-3 fats in these supplements can vary widely. Preferably choose those that have a Drug Identification Number (DIN).

- Health Canada says that fish oil supplements are safe for adults at a dose of up to 3000mg per day.
- **Tips to increase omega-3 fatty acids:**
  - **Enjoy 2-3 fish meals (size of deck of cards) each week using fresh, canned or un-battered frozen fish** (Two servings of fatty fish is equal to about 2000mg to 3000mg of omega-3 fat each week, or it is equal to 300 to 450mg EPA and DHA per day). **Choose fatty fish such as salmon, mackerel, herring and trout.**
    - Grill salmon for an easy and fast meal. Use a low sodium sauce, orange-ginger, or lemon-dill for seasoning.
    - Use baked fish to make a wrap with romaine lettuce, grated cheese and a little mayonnaise.
    - Use canned salmon to make a quick salmon quiche for dinner. Remember to mash the bones.
    - Try a twist on tuna salad. Add diced apples and walnuts for extra crunch.
    - Broil herring with lemon and garlic.
    - Use anchovies or sardines as pizza toppings.
    - Try canned sardines as a snack with crackers.
  - **Sprinkle ground flaxseed on cereal, yogurt, oatmeal – build up slowly or use ground flax seed in baked goods**
  - **Add walnuts or pumpkin seeds to a salad, yogurt or baked goods**
  - **Replace regular eggs with omega-3 eggs**
  - **Use non-hydrogenated margarine made from canola or soybean oil on toast or when cooking and baking**
  - **Use flaxseed, canola or soybean oil on salads or when cooking or baking.**

Saturated Fats less healthy, solid at room temperature, source is important

- **↑ LDL cholesterol and ↑ total cholesterol**
- **Found in animal foods, tropical oils, and processed foods**
  - **i.e.: fatty cuts of meat, lard, shortening, whole-fat dairy products like butter, cream, cheese, ice cream, palm, palm kernel & coconut oils, gravy. Saturated fats are also found in packaged and highly processed food products**
- There are different dietary saturated fatty acids. There is emerging evidence to suggest that the **health effects of fats could vary depending on the food sources** (ex- animal vs plant).

- **Most of the saturated fat in the average North American diet doesn't come from whole foods like beef or coconuts. Instead it comes from processed foods such as pizza, cakes, cookies, donuts and ice cream.**
  - Top sources of saturated fat are: regular cheese, pizza, grain-based desserts (like cakes, cookies or donuts) and dairy desserts (like ice cream).
- The food source from which the saturated fat is derived may have different effects on cardiovascular disease.
- It is estimated that Canadians consume ~10% of their total calorie intake from saturated fats. (goal would be <7%, ~16g/day)

### Processed Foods

- **Highly processed foods are a major source of saturated fats in the diet.** These highly processed foods are also high in calories, sodium, and free sugars and contain little to no nutritional value. They can also be high in other types of unhealthy fats, like trans fats.
- **Sources of highly processed foods** include processed meats (burgers, hot dogs, and deli meats); chips; French fries; cookies, donuts, cakes; candies (sweets); some breakfast cereals/ cereal products; and a vast array of packaged and snack products along with prepared dishes such as pizzas, rice and pasta side dishes, frozen dinners.
- **A large body of evidence suggests that diets that include highly processed foods often contain high amounts of saturated fat, trans fat, and salt and are low in fibre. These diets play a significant role in the development of atherosclerosis, heart disease and stroke. Alternatively, diets that include lots of vegetables and fruit, whole grains, fish, legumes and nuts and are lower in highly processed foods, refined grains, and sugar sweetened beverages are health protective and health promoting.**

### Trans Fat

- **↑ LDL cholesterol and ↓ HDL cholesterol**
- **Trans fats have been linked with up to a 10-fold higher risk of heart disease.**
- **Created through a process called hydrogenation i.e., only found in processed foods**
- **Look in the ingredient list for these words "Partially Hydrogenated" or "Shortening."** Reduce your intake by avoiding foods that contain partially

hydrogenated oil, hard margarine or shortening, and cutting back on commercial baked goods, which have the most trans-fat. Limit shortening, hard margarines, commercial baked goods, cookies, biscuits, pies, snack foods, microwave popcorn and deep-fried fast foods that may be high in trans fat

- **Look for trans fat on your food labels.** Buy foods with zero or the least amount of trans fat.

### Summary:

The confusion around fats and their impact on our health has led to a lot of processed foods labelled “low fat” on grocery store shelves. While these products (from chips to frozen entrees to desserts) may indeed be lower in fat than some others, that doesn’t necessarily make them healthy. In fact, these foods are often highly processed and loaded with calories, sodium and refined carbohydrates, including sugar. The focus on “low fat” has not benefitted Canadians’ diets – another good reason to rely on whole, unprocessed foods.

Remember that since all fats are calorie-heavy, you'll need to use even the healthier ones in moderation. The type of fat consumed is more important than the amount of fat consumed. Focus on a healthy balanced diet of vegetables and fruits, whole grains, and protein from a variety of sources such as legumes, nuts, lower-fat dairy and alternatives, lean meats, and fish. Limit how many highly processed foods you eat.

Look at the big picture rather than fat alone. By reducing highly processed foods and choosing whole, natural foods instead, you reduce the amount of saturated trans-fat in your diet.

### Triglycerides

**Sugary foods increase fat levels in the blood, increasing triglyceride levels and increasing cardiovascular risk.**

#### **To lower triglycerides:**

- **Diet**
  - **Limit sugar and sweet foods**
    - Choose water and milk to drink more often. Infuse water with fun flavours to keep it exciting.
    - Enjoy fruit more often when you have a craving for something sweet. Use healthy portions when choosing sweets such as:

candies, chocolate bars, cookies, cake, pies, pastries, ice cream, frozen desserts and donuts.

- Reduce the amount of sugar used in baked goods by at least  $\frac{1}{4}$  or replace some of the sugar with artificial sweetener.
- Look for syrups, jellies and jams that are reduced in sugar and keep portions small.
- If buying canned fruit, choose fruit canned in water or juice
- **Choose high fibre foods**
- **Add omega-3 foods**
- **Lifestyle**
  - **Be active everyday**
  - **Reduce alcohol**
    - If you drink alcohol, limit yourself to:
      - no more than 2 drinks per day to a maximum of 10 per week for women.
      - No more than 3 drinks per day to a maximum of 15 per week for men.
      - 1 drink = 12 oz beer, 5 oz wine, 1.5 oz spirits
  - **Control blood sugars**
  - **Maintain a healthy body weight**

**Activity: Dietary Fats & Processed Foods** (30 minutes):

Provide the following handout to the group OR write it on a board for all to see.

Go through the meal plan, identifying the fats which could contribute to increasing cardiovascular risk.

Then go through it again identifying the fats that protect the heart. If needed, please use enclosed clip art (either using power point or printed out) to stimulate discussion and cue them to healthy choices that protect the heart.

If time allows, you can get the group to identify ways in which they could replace some of the foods to enhance health (i.e. add foods that will lower LDL).

**WHERE’S THE FAT?**

What foods contribute to increasing LDL-cholesterol? (Lousy)

What changes could we make to this day to make it healthier?

<b>Meal Plan</b>	<b>Suggestions for change</b>
<p><b>BREAKFAST</b></p> <p>Flax and Raisin Bran muffin from coffee shop Coffee with cream and sugar</p>	
<p><b>LUNCH</b></p> <p>Bologna sandwich with 2 slices rye bread, butter and mayonnaise 2 Oreo cookies Apple with Kraft peanut butter</p>	
<p><b>SNACK</b></p> <p>7% Greek yogurt</p>	
<p><b>SUPPER</b></p> <p>Roast beef Mashed potatoes (made with milk and butter) Creamed corn Iced tea</p>	
<p><b>DESSERT</b></p> <p>Chocolate ice-cream</p>	
<p><b>EVENING SNACK</b> while watching TV</p> <p>Chips and dip (bought from store) Handful salted almonds</p>	



### **ACTIVITY 3: SALT** (15 MINUTES)

**Too much salt in our diet increases blood pressure.** In Canada, it has been estimated that if the average sodium intake is decreased by 1840 mg per day, high blood pressure prevalence would decrease by 30%.

1. Provide each person with the salt worksheet (or discuss as a group using images on power point).
2. Game- How much salt is there? Provide each person with a picture cut out. Divide large poster sheet of paper into Green (0-200 mg), yellow (200-400 mg) or red (400+mg).

Have everyone put their food where they think it belongs. Discuss answers using answer key/discussion points.

Ask if there are foods in which they commonly eat that they are wondering about.

## Worksheet for Salt (Sodium)

Question:   1  

### Where do we get the most salt from in the diet?

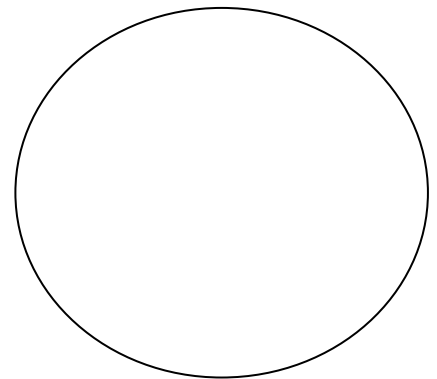
Guess how much salt you get from your diet:

1. Write the percent per each category.
2. Using the circle, draw the amount represented by a pie piece for each category.

Naturally occurring in foods: \_\_\_\_%

Added to food during cooking or at the table: \_\_\_\_%

Restaurant/processed foods: \_\_\_\_%



Question:   2  

### How much salt should I be eating?

#### Recommendations:

Minimum intake per day



$\frac{1}{2}$ - $\frac{3}{4}$  tsp =  
1200-1500 mg

Maximum intake per day



1 tsp = 2300 mg

#### Canadian Consumption is...

Approximate intake per day



1.5 tsp = ~3400 mg

Question:   3

Should I use a specialty salt like Himalayan salt rather than regular salt? What about soya sauce or salt substitute?



Question: 4

How do I tell if a food I am eating has a lot of salt in it?

Nutrition Facts label:

Nutrition Facts	
Serving Size 1 Slice (40g)	
Servings Per Container 14	
Amount Per Serving	
Calories 90    Calories from Fat 5	
% Daily Value*	
Total Fat 1g	2%
Saturated Fat 0g	0%
Trans Fat 0g	
Polyunsaturated Fat 0g	
Monounsaturated Fat 0g	
Cholesterol 0mg	0%
<b>Sodium 135mg</b>	<b>6%</b>
Total Carbohydrate 16g	5%
Dietary Fiber 3g	12%
Sugars 2g	
Protein 3g	
Vitamin A 0%	Vitamin C 0%
Calcium 0%	Iron 4%

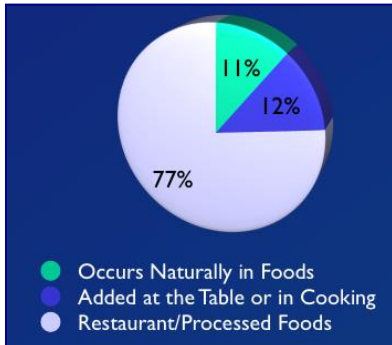
Nutrition Facts	
Serving Size 1/6 pizza (130g)	
Servings Per Container 6	
Amount Per Serving	
Calories 290    Calories from Fat 80	
% Daily Value*	
Total Fat 9g	14%
Saturated Fat 4.5g	22%
Trans Fat 0g	
<b>Cholesterol 15mg</b>	<b>6%</b>
Sodium 760mg	32%
Potassium 220mg	6%
Total Carbohydrate 40g	13%
Dietary Fiber 2g	8%
Sugars 7g	
Protein 13g	
Vitamin A 6%	Vitamin C 4%
Calcium 15%	Iron 15%

Game Time...How much Salt is there????

## Speaking Notes and Questions /Answers

### Question 1: Where do we get the most salt from in the diet?

- Sodium is a mineral that is found naturally in foods, and also found in table salt.
- Large amounts are added to processed foods and restaurant foods.



### Question 2: How much salt should I be eating?

#### How much salt should I be eating?

##### Recommendations:

Minimum intake per day



$\frac{1}{2}$ - $\frac{3}{4}$  tsp =  
1200-1500 mg

Maximum intake per day



1 tsp = 2300 mg

##### Canadian Consumption is...

Approximate intake per day



1.5 tsp = ~3400 mg

*Hint- If you have a white-board handy, you may want to jot these numbers down and refer back to them as you complete the activity.*

- Sodium is a mineral that is found naturally in foods, and also found in table salt
- Large amounts are added to processed foods and restaurant foods

- A healthy adult needs 1200-1500 mg of sodium per day, but no more than 2300 mg daily. Current Canadian sodium intake is 3000 mg per day (double the amount that we need).
- To prevent hypertension and reduce BP in hypertensive adults, consider reducing sodium intake toward 2000 mg (5 g of salt or 87 mmol of sodium) per day (Hypertension Canada's 2017 Guidelines for Diagnosis, Risk Assessment, Prevention, and Treatment of Hypertension in Adults. [Can J Cardiol](#) 2017; 33(5): 557-576.)
- Results from the 2004 [Canadian Community Health Survey \(CCHS\) 2.2](#) show that, among people aged 9 to 70, over 85% of men and 60% to 80% of women had sodium intakes exceeding the 2300mg. Similar high intakes are seen in young children: 77% of children aged 1 to 3 years and 93% of children aged 4 to 8 years exceed the UL for sodium. Actual sodium consumption is estimated to be even higher because people tend to underestimate the quantities on self-reported surveys.

Question 3: Should I use a specialty salt like himalayan salt rather than regular salt? What about soya sauce or salt substitute?

- Sea salt, gourmet salts are all sources of sodium and should be limited at the table.
- Sea salt: There is a claim that it is more concentrated than iodized salt so people will use less, in reality people tend to use the same amount therefore it should be limited at the table.

Salt Substitutes:

- Some examples of these include No Salt, Nu-Salt, Half salt.
- These have high amounts of potassium instead of sodium.
- They contain approximately 356 mg potassium in each ¼ tsp.
- Salt substitutes in combination with some medications (ACE inhibitors and potassium sparing diuretics) may cause potassium levels to rise in some people which can be dangerous.
- Speak to your RD or doctor about using salt substitute.

Question 4: How do I tell if a food I am eating has a lot of salt in it?

Go around the room and let everyone look at their food labels to determine how much salt is in their food.

Follow the streetlight method when checking sodium content on food labels:

400+ mg per serving red light- too much  
200-400mg per serving yellow light- watch out  
0-200mg per serving green light- go ahead



Nutrition Facts label: Using the % Daily value:


















Nutrition Facts	
Serving Size 1/6 pizza (130g)	
Servings Per Container 6	
Amount Per Serving	
Calories 290	Calories from Fat 80
% Daily Value*	
Total Fat 9g	14%
Saturated Fat 4.5g	22%
Trans Fat 0g	
Cholesterol 15mg	6%
Sodium 760mg	32%
Potassium 220mg	6%
Total Carbohydrate 40g	13%
Dietary Fiber 2g	8%
Sugars 7g	
Protein 13g	
Vitamin A 6%	Vitamin C 4%
Calcium 15%	Iron 15%

Answer: Less than 15% is: Watch out

Less than 10% is: Okay

Less than 5% is: Best and the recommended level for people with hypertension

**Answers for Salt Game:**

 <p>4 slices bacon =820 mg</p>	 <p>2 slice processed cheese=580mg</p>	 <p>2/3 cup No salt added broth = 93mg</p>
 <p>146 mg 2 slices multigrain</p>	 <p>½ cup cut vegetables=6.8mg</p>	 <p>1 pepperoni stick=680mg</p>
 <p>2 mg</p>	 <p>2 slices white bread=340mg</p>	 <p>3 ounces tuna water drained=320mg</p>
 <p>cheese sandwich = 690 mg</p>	 <p>2 dill pickles=1080mg</p>	 <p>1 whole frozen pizza=4560 mg</p>
 <p>2 oz cheddar= 211mg</p>	 <p>=1570mg</p>	 <p>1 package=3120 mg</p>





= 650 mg



½ box Mac'n  
cheese=820 mg



2 pizza pops=1160 mg



=580 mg



Can of mushroom  
soup=890mg



1 whole package ramen  
noodles=2000mg



4 slices bologna=  
1100mg



½ can beans in tomato  
sauce=667mg



1 tbsp= 880mg



1 skinless chicken  
breast=64 mg



2/3 cup Reduced  
Sodium broth=380 mg



1 whole package=2760  
mg



Eat less processed, preserved, and prepared foods.

- Remember that unprocessed, fresh foods such as fruits and vegetables are good for you and are naturally low in sodium
- Simply getting rid of the salt shaker is not enough. We need to also decrease our intake of the “hidden” sources of sodium.
  - 11% - found naturally in the fresh foods we eat and the water we drink.
  - Only 12% - salt that we add at the table or in cooking.
  - More than three-quarters (75-80%) of our sodium intake is from restaurant or processed foods.
- Limit canned and processed foods, e.g. try not to rely on canned/dried soups, canned vegetables, frozen dinners, flavoured rice/pasta packages. If choosing canned foods, rinse if possible (Rinsing canned foods can help reduce sodium but not eliminate it (reduces it by ~40%))
- Limit salted snack foods and fast foods
- Use less salt in cooking and at the table
- Use only small amounts of marinades/condiments like ketchup, soy sauce, pickles, olives, gravies, and salad dressings that are high in sodium
- Use garlic, lemon juice, herbs and spices, pepper, onions to flavour foods (avoid garlic salt, onion salt)
- Reduce frequency of eating out
- It is important to read the labels since sodium can be hidden where you least expect it.
- Limiting salt may change the flavour of foods, it will take you awhile to adjust. Less salt doesn't mean less flavour- can use herbs and spices in place of salt to allow foods to have flavour.

## ACTIVITY 4: FIBRE (15 MINUTES)

### Speaking notes:

- Fiber is the part of food from plants that we do not digest
- may be called roughage or bulk
- DRI 25 – 38 g/day (average Canadian gets 11-14 g/day)
- **2 types**
  - **Insoluble** - acts like a sponge as it travels the GI
    - aids in regular bowel movements
    - helps against some cancers
    - sources: wheat bran, whole grain foods, fruits/veg
  - **Soluble** - forms a gel
    - 10 g/day decreases LDL 5-10%
    - helps control blood sugars
    - sources: oats, barley, flax, chia, pulses, psyllium (ground husk of plantain), avocado, oranges

Reminder: Increase fibre gradually  
Drink extra fluids

### Activity

Materials: “Soluble Fibre” list on next page, flip chart, marker

Done as a group, using the food list for soluble fibre, design a day's menu that provides the recommended 10g of soluble fiber/day (or more)

*HINT- This is a good time to introduce pulses. Could hand out resource “Cooking with Pulses.” If you do not have a hard copy, you could provide a few recipes from the book.*

## SOLUBLE FIBER CONTENT OF VARIOUS FOODS

3.0 or more grams per serving		Grams	1.0 – 1.9 grams per serving (contd)		Grams
passion fruit, purple	1/2 cup	6.5	corn, cooked	1/2 cup	1.3
black beans, cooked	1/2 cup	3.6	eggplant	1/2 cup	1.3
lima beans, cooked	1/2 cup	3.5	peach (with skin)	6	1.0 - 1.3
soy nuts, roasted	1/4 cup	3.5	blueberries	1/2 cup	0.9 - 1.3
			green peas, cooked	1/2 cup	0.8 - 1.3
			collard greens, cooked	1/2 cup	1.3
			carrots, cooked	1/2 cup	1.1 - 1.2
2.0 – 2.9 grams per serving		Grams	flax seed, whole	1 Tbsp	0.6 - 1.2
All-Bran Buds™ (with psyllium)	1/3 cup	2.7	oat flakes	3/4 cup	1.1
prunes	1/2 cup	2.4	plums (with skin)	2	1.1
psyllium husks, ground	1 Tbsp	2.4	prunes, dried	3	1.1
psyllium supplement, Metamucil™ (powder)	1 dose (as per package)	2.4	apricots, dried	1/4 cup	1.1
psyllium supplement, Metamucil™ (wafers)	1 packet of 2	1.0 - 3.0	guava	1	1.1
oat bran, cooked	3/4 cup	2.2	grapefruit	1/2	0.7 - 1.1
navy beans, cooked	1/2 cup	2.2	potato, white (with skin)	1 small	1.1
artichoke	1 globe	2.2	Cheerios™	1 cup	1.0
pinto beans, cooked	1/2 cup	2.1	apple (with skin)	1 med	1.0
avocado	1/2	2.1	green beans, cooked	1/2 cup	1.0
chia seeds	1 Tbsp	1.4 - 2.1	okra, cooked	1/2 cup	1.0
Brussels sprouts, cooked	1/2 cup	2.0			
soy burger patty	85 gm	2.0	Under 1.0 gram per serving		Grams
kidney beans, cooked	1/2 cup	1.7 - 2.0	bread, rye	1 slice (30 gm)	0.5 - 0.9
			barley (pearl), cooked	1/2 cup	0.8
			beets, cooked	1/2 cup	0.8
			cauliflower, cooked	1/2 cup	0.8
1.0 – 1.9 grams per serving		Grams	banana	1 med	0.7
sweet potato (no skin), cooked	1/2 cup	1.8	peanuts	1/4 cup	0.6
figs, dried	1/4 cup	1.9	quinoa seeds	1 Tbsp	0.6
tofu, cooked	1/2 cup	1.9	cabbage, raw	1 cup	0.5
orange	1 medium	1.8	tomato, raw	1/2 cup	0.5
popcorn, popped	3 cups	1.8	strawberries	1/2 cup	0.5
quinoa, cooked	1/2 cup	1.7	blackberries	1/2 cup	0.5
turnip, cooked	1/2 cup	1.7	lentils, cooked	1/2 cup	0.5
asparagus, cooked	1/2 cup	1.7	brown rice, cooked	1/2 cup	0.5
brown beans, cooked	1/2 cup	1.7	sunflower seeds	1 Tbsp	0.3
flax seed, ground	2 Tbsp	1.2 - 1.6	pasta, white, cooked	1/2 cup	0.5
broccoli, cooked	1/2 cup	1.2 - 1.5	bread, whole wheat	1 slice (30 gm)	0.5
pear (with skin)	1 med	1.1 - 1.5	almonds	1/4 cup	0.4
soybeans, cooked	1/2 cup	1.5	pasta, whole wheat, cooked	1/2 cup	0.5
edamame (green soybeans), cooked	1/2 cup	1.5	wheat germ	1 Tbsp	0.1
oatmeal, cooked	3/4 cup	1.4	bread, white	1 slice (30 gm)	0.0
bran cereal (non-flake)	1/3 cup	1.4	wild rice, cooked	1/2 cup	0.0
chickpeas, cooked	1/2 cup	1.4			
apricots (with skin)	3	1.4			

From: Niagara Regional Dietitians- Hearth Healthy Committee. Sept 2017. Get Heart Smart Program.

## BRINGING IT ALL TOGETHER

### ACTIVITY 5: PLATE METHOD

Hand out plates.

**We have provided you with a lot of different information about different components of food...but the most important part is bringing it all together! What does all this information actually mean when I am feeding my family?**

**The plate method is an easy way to help you to eat a variety of different whole foods in portions that leave you feeling satisfied.**

Discuss 'Enjoy all foods in moderation'.

Describe Plate Method:

- a guide for balanced meals
- helps with portion control
- handout of divided plate; discuss
- demonstrate hand reference for portion sizes

Ask them to think about their dinner meal last night and reflect back on how closely it mimicked the plate.

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**OPTIONAL Break (10 min)**

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### ACTIVITY 6 - ACTION PLAN FOR CHANGE & PROBLEM SOLVING STEPS

#### **Worksheet: Action plan for Change**

\* We **strongly** encourage you to share this with your primary care provider (doctor, nurse practitioner) and their team (nurse, dietitian, etc) so they can help support you.

1. A behaviour I would like to change: -

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2. Is this something you can achieve in the next week or two?  Yes  No

3. If YES, move to the next questions. If NO, take it off the table for now and try again with something you are likely to have success with.

4. Is the question specific? If not, try to re-word it so it is easy to measure!  
Does it answer the questions:
- a. What?
  - b. How much?
  - c. When?
  - d. How often
- 
- 

5. How confident are you that you can make this change? \_\_\_\_\_

*(0 = not at all sure - - - - to - - - - 10 = absolutely sure)*

*If you are at 7 or more, you are ready to move ahead with planning your behavior change. If not, spend time thinking about the reasons why you may not feel ready. (See the back page for some problem-solving steps).*

*Try a new goal that you feel you can meet as a starting point, or maybe a smaller piece of a larger goal.*

## Problem-solving steps

1) Identify the problem

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2) List ideas to solve the problem

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3) Select one method to try

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4) Check the results

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5) Pick another idea/method if the first didn't work

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6) Use other resources available and trial again. (Repeat Steps 1-5)

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7) If you have attempted to fix the problem with no success a few times, accept that the problem may not be solvable now. Think about what might help you to be ready to revisit it again in the future, get support from your healthcare team/family/friends, and re-visit when ready.

Source: Lorig, Holman, and Sobel et al. *Living A Healthy Life with Chronic Conditions*, Canadian 4<sup>th</sup> Ed, 2013

## Optional Activity: Brainstorming for Self-Management:

### Steps to use Brainstorming and Problem Solving Skills with Groups

Brainstorming is a great way to elicit challenges from your group and then turn them around and find ways to respond.

You can start with a particular problem and brainstorm ways of responding to it, or start by brainstorming what the problems/barriers are.

#### 1) Brainstorm problems:

“What problems do you have with \_\_\_\_\_ (managing medications, exercise, eating healthy, checking your blood sugar, etc.)?”

Or other phrasing, such as:

“What barriers get in the way of \_\_\_\_\_ (eating healthy, exercise, etc.)”.

#### Brainstorming Tips:

- Write out the question you are brainstorming at the top of a large piece of chart paper.
- Ask group to answer the question while you write participants' responses in their own words.
- Cut off the brainstorm once they've filled one page, or sooner if they're out of ideas.
- Instructors only contribute ideas once group members are done (or page is full).

#### 2) Pick 1 problem and problem-solve:

- Ask if anyone has one they'd like to suggest the group work on
- Write the brainstorming question at the top of a new piece of flip chart paper. Suggested phrasing:
  - “What could you do when you face this problem?” or “How could we respond to this problem”

- Note: the focus is on what to do when they face this problem because we can't "solve" every problem in the sense of making it go away, but we can think of what we'll do when we face it.

Reinforce that problem solving is a skill. When we feel overwhelmed, it seems like there are fewer options of what to do in response to a problem. Brainstorming helps us think of options; then we choose which option we'll try next.

### **3) If you want you can also teach the following problem Solving Steps to your group:**

#### **Problem-solving steps\***

- 1) Identify the problem
  - 2) List ideas to solve the problem
  - 3) Select one method to try
  - 4) Check the results
  - 5) Pick another idea if the first didn't work
  - 6) Use other resources
  - 7) Accept that the problem may not be solvable now
- Note: #6 "Use other resources" means talking to your healthcare professionals, accessing information on the web from credible sources, etc.
  - Many people stop after step 4 – meaning they'll try something and if it doesn't work they're stuck. The key is to keep going through the steps. If you get to step 7, think of something else you can work on that might improve things even if this problem isn't solvable right now.

\*Source: Lorig, Holman, and Sobel et al. *Living A Healthy Life with Chronic Conditions*, Canadian 4<sup>th</sup> Ed, 2013



## ACTIVITY 7: OPTIONAL ACTIVITIES (10 MIN)

### Stress Reduction Activity

#### Speaking Notes:

**Living with a chronic disease can be challenging. Many people experience stress, difficulty coping, or frustration. Some people may even experience anxiety or depression; these are common feelings.**

**Most people are looking for ways to cope, handle stress, and improve their well-being overall.**

**Taking care of your mental health is just as important as taking care of your physical health. You are likely doing things already that help you to cope and that contribute to good mental health.**

**There are many great resources that can help you on your way. If you would like to learn about ways to promote your mental health and well-being, the WRHA Mental Health Promotion Team have developed a great website with evidence-based information, tools, and resources to help you on your path to well-being.**

**Please check it out when you are able. Even one small thing can make a big difference in your life.**

**We will start today by practicing a breathing exercise.**

*Facilitator: Click on video link and do the activity as a group.*

2-minute Breathing Exercise <https://www.youtube.com/watch?v=ICnSkmZV7UE>  
(Dr. Jason Ediger – from <http://www.adam.mb.ca/audio-relaxation> )

BACKGROUND: Science behind focusing on breath and slowing it down:

- When we are in a stressful situation, our brain/limbic system receives the message that we are in danger, and goes into high alert
- When you are stressed your body will likely contract muscles and will restrict breathing and you may experience other symptoms like: rapid heart rate, sweating, blurred memory, stomach cramps, headache, dry mouth...(your body is getting ready to freeze, fight, or run away!)
- Some stress is normal and actually serves a purpose (gives motivation to reach a goal, helps to complete tasks on time, keeps us safe from actual physical danger)
- But when we feel stress for a sustained/prolonged period of time, even when the stressful event is gone, our brain is constantly on high alert, and can't rest. This is called chronic stress, or may be part of an anxiety problem.
- Chronic stress or anxiety can lead to reduced immune function (catching colds or flu more often), fatigue, trouble sleeping, problems with our digestion, puts strain on our heart.
- It is therefore important to intervene to reduce the feeling of stress
- Focusing on your breathing and slowing your breath is one way to intervene in the moment. In that moment, you are not thinking about stressors, but rather keeping you mind on controlling your breath (mindful break). You are also letting your brain and body know that it is not in danger and that it can relax. You may even hear or feel your heart rate slow down to a calm/resting state, allowing you to think more clearly.

Note: Mindfulness Based Stress Reduction Courses are offered at a few places in Winnipeg (e.g. Klinik). This course was originally developed for people with chronic illness.

**This exercise can be done standing up or sitting down, and pretty much anywhere at any time. All you have to do is be still and focus on slowing down and controlling your breath for just one minute.**

**What did you notice? Did your breathe change as you brought your attention to it? When could this come in handy?**

**Like anything, practice helps. Practicing breathing when you are calm/not in a stressful situation will help you to be ready with this strategy when you do find yourself in a stress-provoking situation.**

**Like any exercise, practice helps. Practicing breathing when you are calm/not in a stressful situation will help you to be ready with this strategy when you do find yourself in a stress-provoking situation.**

*HINT- Introduce them to website <http://www.wellbeingguide.ca> for other ideas."*

### **Links to Cooking Classes/Grocery Tours in Area** (5 min)

This will be dependent on area. Please link participants to programming running in your community.

### **Links to Physical Activities** (5 min)

Regular exercise is one thing that you can do to help lower your risk for health conditions.

The benefits of exercise are tremendous:

- ♦ Reduce risk of chronic disease, and early death.
- ♦ Maintains functional independence.
- ♦ Maintain mobility.
- ♦ Improve fitness.
- ♦ Maintain body weight.
- ♦ Maintain bone health.
- ♦ Maintain mental health.

While the recommendations state that everyone should get 150 minutes per week, start at an amount that is reasonable to you.

A small amount of activity is better than none at all. Exercise IS Medicine and can be fun.

OR

Watch Video: “23 ½ hours” <https://www.youtube.com/watch?v=3F5Sly9JQao>

This video is 5 minutes long.

AND/OR

If time does not allow, have CSEP activity guidelines to hand out.

[http://csep.ca/CMFiles/Guidelines/CSEP\\_PAGuidelines\\_older-adults\\_en.pdf](http://csep.ca/CMFiles/Guidelines/CSEP_PAGuidelines_older-adults_en.pdf)

**Skill Building/Goal Setting Activity (10 min)**

**We hope that you found today helpful. We covered a lot of information, and participated in a lot of different activities. There probably are a few things that really stood out for you.**

**How are you feeling about these things? Do you think you are ready to make a change?**

**An important part of managing health is being able to set realistic, attainable goals and behaviours. Do you feel that there is anything that you would like to do differently after today's session?**

Complete ACTION PLAN FOR CHANGE AND PROBLEM SOLVING HANDOUT

OR

Complete GROUP Brainstorming ACTIVITY FOR PROBLEM-SOLVING

*Hint- It is recommended that participants pick something that they are confident that they can change. As facilitators, we hope that they start with something small that they can be successful with, gain confidence, and then move on to a larger challenge when ready.*

*It may be helpful to discuss the 'all or none' mentality' and that long-term success is more easily seen when we start small and change behaviours slowly, rather than all at one time.*

## EVALUATION AND CLOSING

Provide link to Group Self-Management Program Schedule, briefly discuss what is available to them.

Highlight the Cardiac rehab program and point them to the information available in the group self-management program schedule. (if applicable).

## WRHA Health Management Group Programs Participant Evaluation and Feedback Form

**Program Location:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Program Name** (please check one):

- Commit to Quit   
  COPD Essentials   
  Heart Health Essentials   
  Craving Change  
 Exercise HealthSense   
  COPD Medications   
  Eating for Health

**Thank you for taking a few moments to complete this evaluation form. The comments you provide are important for helping to improve programs in the future.**

For questions 1 to 5, please circle your rating on a scale from 1 (Not at all) to 5 (Very).

	Not at all				Very
1. Overall, how helpful was the program for you?	1	2	3	4	5
2. How helpful was the information?	1	2	3	4	5
3. How helpful were the group discussions?	1	2	3	4	5
4. Were the written materials helpful?	1	2	3	4	5
5. Would you recommend this program to others?	1	2	3	4	5

6. Please list 1 to 3 changes you are working on (or would like to work on) that the program has helped you with:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

7. As a result of this program, has your confidence that you can make these increased (please circle)?

Yes                  No

8. How did you find the length of the classes?

- Just right – don't change it
- Each class should be longer (an additional 30 minutes or more each time)
- Each class should be shorter (30 minutes less each class)

9. If the program you attended was more than 1 class, how did you find the number of classes:

- Just right – don't change the number of classes
- The program should be delivered over a greater number of classes
- The program should be delivered in fewer classes

10. How could we improve the program?

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11. For those in the Commit to Quit Program: During this program have you (circle one):

**Quit tobacco use**

**Reduced tobacco use**

**Neither / Not yet**

**Other Comments:**

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**THANK YOU!**

## CLIP ART EXAMPLES

### Fat & Processed Food









Clip Art for Salt Activity



2 slices multigrain



1 apple



1 cheese sandwich



2 ounces cheddar







4 slices bologna



1 whole package ramen noodles



½ cup cut vegetables



2 slices white bread

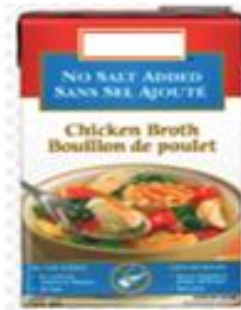




½ box Mac'n cheese



Can of mushroom soup



2/3 cup No salt added broth



3 ounces tuna water drained



1 whole frozen pizza

## Food Labels for Activities (if needed)

**General Mills**  
with **8g Whole Grain**  
**Cheerios**  
Toasted Whole Grain Oat Cereal

**Clinically PROVEN to Help Reduce Cholesterol!**

NET WT 14 OZ (396g)

**INGREDIENTS:** WHOLE GRAIN OATS, MODIFIED CORN STARCH, SUGAR, OAT BRAN, SALT, CALCIUM CARBONATE, OAT FIBER, TRIPOTASSIUM PHOSPHATE, CORN STARCH, WHEAT STARCH, VITAMIN E (MIXED TOCOPHEROLS) ADDED TO PRESERVE FRESHNESS.  
**VITAMINS AND MINERALS:** IRON AND ZINC (MINERAL NUTRIENTS), VITAMIN C (SODIUM ASCORBATE), A B VITAMIN (NICINAMIDE), VITAMIN B<sub>6</sub> (PYRIDOXINE HYDROCHLORIDE), VITAMIN B<sub>2</sub> (RIBOFLAVIN), VITAMIN B<sub>1</sub> (THIAMIN MONONITRATE), VITAMIN A (PALMITATE), A B VITAMIN (FOLIC ACID), VITAMIN B<sub>12</sub>, VITAMIN D.

DIST. BY **General Mills Cereals, LLC**  
GENERAL OFFICES, MPLS., MN 55440 USA  
© 2007 General Mills

### Nutrition Facts

Serving Size 1 cup (28g)  
Children Under 4 - ¾ cup (21g)  
Servings Per Container about 14  
Children Under 4 - about 19

Amount Per Serving	Cheerios	with 1/2 cup skim milk	Cereal for Children Under 4
<b>Calories</b>	100	140	80
Calories from Fat	15	20	10
<b>% Daily Value**</b>			
<b>Total Fat</b> 2g*	<b>3%</b>	<b>3%</b>	1.5g
Saturated Fat 0g	<b>0%</b>	<b>3%</b>	0g
Trans Fat 0g			0g
Polyunsaturated Fat 0.5g			0g
Monounsaturated Fat 0.5g			0g
<b>Cholesterol</b> 0mg	<b>0%</b>	<b>1%</b>	0mg
<b>Sodium</b> 190mg	<b>8%</b>	<b>10%</b>	140mg
<b>Potassium</b> 170mg	<b>5%</b>	<b>11%</b>	130mg
<b>Total Carbohydrate</b> 20g	<b>7%</b>	<b>9%</b>	15g
Dietary Fiber 3g	<b>11%</b>	<b>11%</b>	2g
Soluble Fiber 1g			0g
Sugars 1g			1g
Other Carbohydrate 16g			12g
<b>Protein</b> 3g			2g
<b>% Daily Value</b>			
Protein	-	-	9%
Vitamin A	10%	15%	10%
Vitamin C	10%	10%	10%
Calcium	10%	25%	8%
Iron	15%	15%	50%
Vitamin D	10%	25%	6%
Thiamin	25%	30%	35%
Riboflavin	25%	35%	35%
Niacin	25%	25%	35%
Vitamin B <sub>6</sub>	25%	25%	45%
Folic Acid	50%	50%	60%
Vitamin B <sub>12</sub>	25%	35%	30%
Phosphorus	10%	25%	8%
Magnesium	10%	10%	10%
Zinc	25%	30%	30%
Copper	2%	2%	2%

\*Amount in cereal. A serving of cereal plus skim milk provides 2g total fat (0.5g saturated fat, 1g monounsaturated fat), less than 5mg cholesterol, 250mg sodium, 310mg potassium, 26g total carbohydrate (7g sugars) and 2g protein.

### Nutrition Facts

Serving Size 1 Slice (40g)  
Servings Per Container 14

**Amount Per Serving**

**Calories 90**      **Calories from Fat 0**

**% Daily Value\***

**Total Fat 1g**      **2%**

Saturated Fat 0g      **0%**

Trans Fat 0g

Polyunsaturated Fat 0g

Monounsaturated Fat 0g

**Cholesterol 0mg**      **0%**

**Sodium 135mg**      **6%**

**Total Carbohydrate 16g**      **5%**

Dietary Fiber 3g      **12%**

Sugars 2g

**Protein 3g**

Vitamin A 0%      • Vitamin C 0%

Calcium 0%      • Iron 4%

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



# Frozen Pizza



## Nutrition Facts

Serving Size 1/6 pizza (130g)  
Servings Per Container 6

Amount Per Serving

**Calories 290**      **Calories from Fat 80**

% Daily Value\*

**Total Fat 9g**      **14%**

Saturated Fat 4.5g      **22%**

Trans Fat 0g

**Cholesterol 15mg**      **6%**

**Sodium 760mg**      **32%**

**Potassium 220mg**      **6%**

**Total Carbohydrate 40g**      **13%**

Dietary Fiber 2g      **8%**

Sugars 7g

**Protein 13g**

Vitamin A 6%      • Vitamin C 4%

Calcium 15%      • Iron 15%

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

### How to read a label



Nutrition Facts	
1 Serving Size: 250 mL	
Amount Per Serving	% Daily Value 2
3 Calories 140	
4 Fat 3.5 g	5%
Saturated 1 g	
+ Trans 0 g	
Cholesterol 10 mg	
5 Sodium 640 mg	27%
Potassium 400 mg	11%
6 Carbohydrate 19 mg	6%
Dietary Fibre 3 g	
Sugars 4 g	
Protein 8 g	
Vitamin A	20% Vitamin C
7 Calcium	4% Iron
	10%

## Nutrition Facts Valeur nutritive

Per 4 crackers (19 g)  
Pour 4 craquelins (19 g)

Amount Teneur	% Daily Value % valeur quotidienne
<b>Calories / Calories 80</b>	
<b>Fat / Lipides 2.5 g</b>	<b>4 %</b>
Saturated / saturés 0.2 g + Trans / trans 0 g	1 %
<b>Cholesterol / Cholestérol 0 mg</b>	<b>0 %</b>
<b>Sodium / Sodium 90 mg</b>	<b>4 %</b>
<b>Carbohydrate / Glucides 13 g</b>	<b>4 %</b>
Fibre / Fibres 2 g	8 %
Sugars / Sucres 0 g	
<b>Protein / Protéines 2 g</b>	
Vitamin A / Vitamine A	0 %
Vitamin C / Vitamine C	0 %
Calcium / Calcium	0 %
Iron / Fer	6 %

**INGREDIENTS:** WHOLE GRAIN WHEAT, VEGETABLE OIL (WITH ROSEMARY EXTRACT), SEASONING (SALT, RICE STARCH, SPICES (WITH BLACK PEPPER), ONION POWDER, GARLIC POWDER, EXTRA VIRGIN OLIVE OIL, CITRIC ACID, NATURAL FLAVOUR (CONTAINS CELERY)).

**CONTAINS: WHEAT.**

B.H.T. IS ADDED TO THE PACKAGE MATERIAL TO HELP MAINTAIN FRESHNESS.

**INGRÉDIENTS :** BLÉ À GRAINS ENTIERS, HUILE VÉGÉTALE (AVEC EXTRAIT DE ROMARIN), ASSAISONNEMENT (SEL, AMIDON DE RIZ, ÉPICES (AVEC POIVRE NOIR), OIGNON EN POUDRE, AIL EN POUDRE, HUILE D'OLIVE EXTRA VIERGE, ACIDE CITRIQUE, ARÔME NATUREL (CONTIENT DU CÉLERI)).

**CONTIENT : BLÉ.**





## HANDOUTS FOR EATING FOR HEALTH

### DIETARY FATS & PROCESSED FOODS

#### Omega-3 Fat and Heart Health

[http://bchsys.org/files/7014/1599/0693/omega\\_3\\_fat\\_and\\_heart\\_health.pdf](http://bchsys.org/files/7014/1599/0693/omega_3_fat_and_heart_health.pdf)

#### Label Reading:

#### Nutrition Facts Table- Health Canada

<https://www.canada.ca/content/dam/canada/health-canada/migration/healthy-canadians/alt/pdf/publications/eating-nutrition/label-etiquetage/serving-size-fact-sheet-portion-fiche-dinformation-eng.pdf>

#### Nutrition Facts Table- Health Canada (French)

<https://www.canada.ca/content/dam/canada/health-canada/migration/healthy-canadians/alt/pdf/publications/eating-nutrition/label-etiquetage/serving-size-fact-sheet-portion-fiche-dinformation-fra.pdf>

### SODIUM

#### Sodium It's Everywhere! Get the Facts

<http://www.sodium101.ca/wp-content/uploads/2012/11/brochure-fullpage-en.pdf>

#### Reducing Salt in your Diet

<https://www.niagarahealth.on.ca/files/SaltGuidelines2014-1.pdf>

### FIBER

#### DC Food Sources of Soluble Fibre

<https://carleton.ca/healthy-workplace/wp-content/uploads/soluble-fibre.pdf>

#### Article on Facts on soluble Fiber

<http://www.eatrightontario.ca/en/Articles/Fibre/Facts-on-Soluble-Fibre.aspx>

#### Pulses Canada- Cooking with Pulses

<http://www.pulsecanada.com/wp-content/uploads/2017/12/Cooking-With-Pulses.pdf>

#### WRHA Managing constipation with a High Fiber diet (ENG). Have hard copy in french but would need to put it online.

[http://www.wrha.mb.ca/extranet/nutrition/files/ClientEd\\_ManagingConstipationwithaHighFibreDiet.pdf](http://www.wrha.mb.ca/extranet/nutrition/files/ClientEd_ManagingConstipationwithaHighFibreDiet.pdf)

### PLATE METHOD

#### WRHA Serving Size and Healthy Meals (Plate Method and Hand Jive):

<http://www.wrha.mb.ca/community/seniors/files/CMP-31.pdf>

#### For Just the Basics in French (has plate method on second page):

<http://guidelines.diabetes.ca/ressourcesfrancaises>

## **PHYSICAL ACTIVITY**

[http://csep.ca/CMFiles/Guidelines/CSEP\\_PAGuidelines\\_older-adults\\_en.pdf](http://csep.ca/CMFiles/Guidelines/CSEP_PAGuidelines_older-adults_en.pdf)

## **FIND OUT MORE ABOUT:**

**GROUP SELF-MANAGEMENT PROGRAMS and CARDIAC REHABILITATION**

[www.wrha.mb.ca/groups](http://www.wrha.mb.ca/groups)

## **OTHER TRUSTED WEBSITES:**

**In 10 minutes, get a free personalized health report and coaching at:**

<https://ehealth.heartandstroke.ca/>

**Physical Activity:** <http://winnipeg.inmotion.ca/>

**Winnipeg Leisure Guide:**

<http://www.winnipeg.ca/cms/recreation/leisure/leisureguide.stm>

**Heart and Stroke Foundation:** <http://www.heartandstroke.ca/>

**Diabetes Canada:** <http://www.diabetes.ca/>

## **SUGGESTED APPS:**

**Stress Reduction: Calm.com**

**Nutrition: Eatracker**