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# Mind & Body Wellness

## Facilitator Guide

This session will take 2 hours to complete.

### Goals of Program:

- To recognize the role of wellness and physical activity in diabetes self-management.
- To develop awareness around readiness to change, the emotional impact of behavior change, and how to set SMART goals.
- To explore how to get started with exercise, including using exercise bands at home.
- To adopt problem solving strategies for relapse prevention and overcoming barriers.

### Intended Participants:

This program is open to anyone who:

Has type 2 diabetes or pre-diabetes

Has a family member who has diabetes and is interested in helping them manage.

**\*This program is part of a 4-part series “Diabetes – Separating Fact or Fiction.” It will provide a comprehensive understanding of how to manage diabetes and prevent complications. It is recommended they be taken in the following order:**

- (1) Diabetes Essentials, (2) Diabetes & Eating, (3) Eating for Health  
(4) Mind & Body Wellness.**

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## **ACKNOWLEDGEMENTS**

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## ABOUT THE FACILITATOR GUIDE

This guide offers service providers a framework for facilitated group work for those who have diabetes/pre-diabetes.

The focus of this session is on well-being, behavior change, and physical activity. 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! Interests identified by the participants 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 Colors:

- **“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.
- **“TIP”** *text boxes*: This information is to help you as a facilitator.

## **CHECKLIST OF MATERIALS**

Name Tags

Pens or Pencils

White Board/Flip Chart

White Board Markers

Projector with Speakers (as required)

Diabetes Canada handouts pertinent to subject

- Physical Activity

Exercise Bands

Chosen Handouts

## **WELCOME TO MIND AND BODY WELLNESS (15 min)**

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. It is strongly recommended that group sessions include opportunities for participation and interaction and that some time is spent indicating why this information is important to the adult learner.

**“During the session, we will discuss wellness, how to make behavior change successful, and how to get started with physical activity. 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 set realistic goals 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.

### **Activity 1: INTRODUCTIONS**

**“Let’s start the session by going around the table and have each person introduce themselves and share one thing they really wanted to get out of today.**

HINT: You may want to write what participants want to learn on a whiteboard/poster sheet. They will be “parked” for later discussion. 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 questions or ideas as well as what we currently know about diabetes (wellbeing and physical activity) during this session. Please feel free to ASK questions and interact, as this session is for you!”**

## Defining Wellness & Well-Being

### Definitions:

#### *Well-being:*

- the state of being comfortable, healthy, or happy.

#### *Wellness:*

- Is an active process of becoming aware of and making choices toward a healthy and fulfilling life. Wellness is more than being free from illness; it is a dynamic process of change and growth.
- *"A state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity."* - World Health Organization
- *"A conscious, self-directed and evolving process of achieving full potential."* - The National Wellness Institute

### **Fact or Fiction: POOR "LIFESTYLE" CHOICES ARE THE CAUSE OF MY DIABETES.**

**Fiction: Diabetes isn't anyone's fault. There is no one cause of diabetes. Eating, activity and medication can play a role in your blood sugar control, as can stress and lack of sleep.**

**Today, we will discuss some of the factors that can affect our diabetes management.**

ASK: What does well-being (Wellness) mean to you?

- Feeling satisfied.
- Feeling healthy or well.
- Connected to others in a positive way: warm and trusting relationships.
- Physically healthy (active, nutrition, sleep).
- Having fun; feeling joy or happiness.
- Resilience; able to bounce back and cope.
- A sense of meaning & purpose.
- Spirituality.
- Curiosity; interested in learning new things.
- Gratitude.
- Having peace of mind and heart.

*Source: Well-being (WRHA Mental Health Promotion and wellbeingguide.ca)*

**Mental and physical health are interconnected and essential to our overall health. Good mental health helps us to cope with challenges (chronic illness or others). It is important to take care of our mental health and well-being so that we can live life to the fullest. We also need to remember that our needs change over time.**

**Fact or Fiction? Individuals with diabetes are moody.**

**Fact: There is some truth here — depression is more than twice as common among people with diabetes as among the general population. Blood sugar swings can affect mood in the short run. However, we can work to control both blood sugar and depressive symptoms.**

*(Diabetes Self-Management <https://www.diabetesselfmanagement.com/about-diabetes/diabetes-basics/12-diabetes-myths-debunked/>)*

Optional: BASED ON YOUR PARTICIPANTS

ASK: Have you ever heard of Diabetes Distress?

Diabetes Distress focuses on the emotional distress linked directly to diabetes. It is much more common than symptoms of depression and much more directly related to diabetes management. Diabetes distress tends to cluster around diabetes itself (emotional burden and regime distress) and people impacted by diabetes (providers as well as family and friends).

**If you are feeling overwhelmed by the demands of having diabetes, know you are not alone. Speak to your provider about options to help.**

**Resources Available:**

The Importance of a Healthy Mind: Dealing with the Psychosocial Aspects of Diabetes. Diabetes Canada, Clinical Practice Guidelines 2018.

<http://guidelines.diabetes.ca/self-management/Psychosocial>

## **STRATEGIES FOR WELL-BEING (20 min)**

**“We have discussed some potential effects of diabetes on our well-being, let’s look at some strategies to help.**

## Self-Compassion

**It is well researched that humans tend to find it easier to give compassion to others than to themselves.**

**If we learn to give ourselves self-compassion, then it directly affects our stress levels by lowering our stress hormones (cortisol and adrenaline levels) and decreasing our blood glucose and blood pressure."**

TIP: Self-compassion releases a naturally occurring hormone called Oxytocin which has been proven to be the natural ANTIDOTE to the stress hormones that wreak havoc with our blood sugars and our blood pressure!

***"Research shows that self-compassion has many benefits such as:***

- lower levels of anxiety and depression
- more satisfying relationships
- increased sense of emotional and physical well-being
- a tendency to engage in healthier behaviours.

### **Self -Talk Plays Into Self-Compassion**

- Pay attention how you talk to yourself. Is it positive or negative?
- Talk to yourself the same way you'd talk to others in your situation.
- Try not to be an internal bully.
- Challenge your self-talk if you catch yourself being a bully.

### **Mindfulness- Being Present, In the Moment.**

Mindful self-compassion: a practice in which you learn how to respond to stress, difficult emotions, and pain and suffering with the care, compassion and understanding that you need. You can learn how to motivate yourself with the same kindness and understanding that you would offer a close friend who is struggling.

Consider attending a Mindful Self-Compassion program or try activities like this:"

## Activity 2: MINDFULNESS

Options: (Choose ONE)

1. Body Scan Meditation - Leslie Rohonczy, Youtube  
<https://www.youtube.com/watch?v=ZM3eYRODNbc>
2. Mindshift app- chill out tools, mindfulness strategies, body scan
3. 3 minute breathing relaxation. Dr. Jason Ediger –  
<http://www.adam.mb.ca/audio-relaxation> (breathing exercise also used in “Eating for Health”)

HINT:

It may be helpful to discuss what the group already uses in their daily lives to deal with stress (bath, pedicure, etc.) and then introduce the below ideas.

### Journaling

- a record of experiences, ideas, or reflections kept regularly for private use aka “diary”
- for personal accountability- wellness behaviours, SMBG, Physical Activity, diet etc.

### Physical Activity

- Helps promote happy hormones.
- We will discuss the importance of PA shortly.

### Perception Shift

- See it as a learning opportunity
  - When we stray from our health behaviours, we tend to feel angry at ourselves and quickly become discouraged. Instead of getting caught up in this cycle, we can view straying as an opportunity to learn by *asking ourselves:* “What led to the stray? What can I do next time to try to prevent it?” We can also try to minimize the possible damage (e.g., one bowl of ice cream instead of the whole tub). We can try to focus our energy on getting back on track as soon as we can.
- Negative feelings are not great long-term motivators
  - Feeling bad about the fact that we strayed is not helpful. Negative feelings are toxic to long- term behaviour change and tend to make it take longer for us to “get back on the wagon”. It is more helpful if we acknowledge that we strayed, learn from it, and move on.
- Seeing things in terms of “GRAY” versus “BLACK AND WHITE”

- For example, changing reactions such as “I totally blew it, I’m such a failure!” to “I wasn’t able to stick to my goal today. That’s ok, I’m human and everyone makes mistakes. I can look at what happened and come up with some ideas to try tomorrow.”

### **Activity 3: 21 DAYS TO ENJOY LIFE MORE OR TIPS FOR STRESS (OPTIONAL)**

<http://www.wrha.mb.ca/prog/mentalhealth/files/21WaysBilingual3.pdf>

Print these cards out, and hand them out amongst group members. Have them share which ones they can relate to. It's a time to share tips how to enjoy life.

Questions to ASK:

- Which have you tried already?
- Which do you think would work for you?
- Is there anything else that works for you that you would like to share with our group?

### **OR**

*Handout: 18 Tips for Dealing with Stress and Tension (Appendix 1)*

Source: Mental Health Resource Guide for Winnipeg (2015). Stress: 18 Tips for Dealing with Stress and Tension., 20th Edition. Pg. 6

Have participants add any extra tips they find helpful

**If these strategies do not help, please speak to your healthcare team. Speak with your primary provider or seek consultation with a licensed mental health professional such as a psychologist or a counsellor if:**

- You continue to feel overwhelmed
- Feel hopeless
- Have trouble getting through your daily routine

**\*\* If you are experiencing thoughts of harming yourself or others, seek help right now\*\***

### **Medications**

**Sometimes medications are needed to help with anxiety, depression or sleep disorders to go along with counselling or cognitive-behavioural therapy. Speak with your primary care provider for more information.**

## Final Thoughts

- Be patient and kind with yourself
- It takes time to adjust to new things.
- Start small. One small thing can make a big difference. We can all make small steps towards change.
- We can all discover and create our own path to wellbeing based on our own values, beliefs and what we find most important.

## Activity 4: FLEXIBILITY STRETCH

In Motion <http://winnipegimotion.ca/wcm-docs/docs/flexibility.pdf>

(Separate document)

**“Let’s take a few minutes to stretch as we have been sitting for a bit now”**

**Don’t forget to let go of that stress!**

### **TIP:**

**When you are under stress, tension accumulates in your jaw too. For your jaw, stretch your mouth open and slowly move your lower jaw from side to side and front to back.**

## GETTING READY TO CHANGE (15 min)

### **Fact or Fiction: TO MAKE A CHANGE ALL I NEED IS WILL-POWER**

**Fiction: Although it would be great if we could just say we are going to change something, and did...just wishing the change is not enough. Change is so hard for many reasons....let discuss this more.**

**ASK: Why is change so hard?**

- Behaviour is more emotion based than logic based. (We know how we need to behave but often do not follow because of how we feel).
- We are creatures of habit (takes a long time to develop new habits; can be easy in the short-term but difficult to maintain for the long haul).
- Easier to take the path of least resistance – natural survival mechanism in order to conserve energy.

- It can feel like a burden to me, to my loved ones- Its hard!!
- Diabetes management is demanding.
- The “Pleasure Principle” for safety and survival reasons. We are motivated to prefer pleasure and avoid pain (short-term gain).
- We live in a world filled with high stress, that promotes sedentary behaviours and over consumption of caloric-dense food which are readily available. Foods that are high in fat, salt and sugar activate the reward centers in our brains and bring us pleasure.

**Before starting into a change, it is important to take time to reflect on how ready you feel to change at this time. This can help you to better understand your own motivation for change and how realistic a given change is for you at the present time. The Traffic Light Assessment is a tool you can use to help you to determine how ready you are to change a specific behaviour.”**

#### **Activity 5: TRAFFIC LIGHT “ARE YOU READY TO CHANGE?”**

Handout the tool to participants (works best if you print in colour).

Take a few minutes for everyone to fill it out individually.

# Are You Ready to Make a Change?

May we share your health behaviour goal with your family doctor? YES / NO

If yes, please print your name: \_\_\_\_\_

A behaviour I would like to or feel I should change:

---

---

X = the behaviour you identified above (the behaviour I would like to or feel I should change)

- |   |     |    |
|---|-----|----|
| 1. Do you consider X a problem?           | YES | NO |
| 2. Are you bothered by X?                 | YES | NO |
| 3. Are you interested in changing X?      | YES | NO |
| 4. Are you ready to start changing X now? | YES | NO |

## Results

**Green:** All Yes

**Yellow:** Some Yes, Some No

**Red:** All or Nearly All No



**Green Light:** You are ready to move ahead with planning your behaviour change.

**Yellow Light:** Before moving ahead with a goal for change, spend some time thinking about the parts of you that want to change and the parts of you that are not ready.

**Red Light:** This is not a behaviour you are ready to change right now. Take it off the table for now, but think about what might help you to be ready to revisit it again in the future. For example, you may want to get more information from a health care professional, or talk it over with a friend or family member.

Adapted from B. Sabourin et al. Psychological Diabetes Care, 2013



After completing the activity, Ask if anyone would be willing to share their answers with the group.

Facilitators should listen for “Yes” and “Not Yes” in each answer. A “Yes” is clear agreement; everything else is a “Not Yes” (these can include “Yes, but...”, “No”, or reference to someone other than the participant being bothered by the behaviour).

<b>Red:</b>	All or nearly all Not Yes
<b>Yellow:</b>	Some Yes, some Not Yes
<b>Green:</b>	All Yes

Provide participants with feedback by summarizing their responses and based on those, indicating what light colour they sound like. Facilitators also want to check with participants to see if they agree with the assessment.

**HINT:** Example of dialogue

So what I’m hearing you say, Christine, is that you consider smoking to be a problem for you and you worry a lot about the impact on your health. You would like to quit smoking but you are concerned about starting this process now because it is a really busy time and you do not want to add any more stress into your life. Based on the traffic light assessment, you sound like a yellow light: you are worried about smoking and you want to quit but you are not sure that now is the right time. Is that an accurate assessment?

Facilitators can then give the group general feedback on what to do with their traffic light colour:

- **Green Light:** You are ready to move ahead with planning your behaviour change. It may still be helpful to do a decisional balance exercise as well to help with long-term motivation (see below).
- **Yellow light:** Before moving ahead with a goal and a plan for change, spend some time thinking about the parts of you that want to change and the parts of you that are not ready. The exercises we will talk about for the rest of the session (decisional balance, positive and personally relevant reasons for change) will be particularly important to try.
- **Red Light:** This is not a behaviour you are ready to change right now. Take it off the table for now, but think about what might help you to be ready to revisit it again in the future. For example, you may want to get more information from a health care professional, or talk it over with a friend or family member. It is a good idea to go through this assessment with yourself again in a few months to see if your readiness has changed.

*Note:* Remember, the light colour applies to specific behaviours, not a person as a whole. At any given time, we can be all three light colours for different behaviours (e.g., red light for increasing physical activity, yellow light for quitting smoking, green light for testing blood sugar). The traffic light assessment can be used again and again for the same behaviours and for new ones.

## **Motivators**

### **What are some SHORT-TERM MOTIVATORS?**

- **When we feel bad about something (i.e. guilt or fear, providers scare tactics, pressure from spouse, nagging partners, personal or health crises) we want to fix this so these are very powerful short term motivators. Unfortunately, they do not motivate us for very long.**

### **What are some LONG-TERM MOTIVATORS?**

- **Long-term behaviour change requires positive sources of motivation. A few examples of these can be rewards with activities like horseback riding or family mini golf, or new clothes or other ways to pamper ourselves like a pedicure.**

It can take time to develop positive motivators. However, in order for lasting motivation and for health behaviours to start becoming “easier”, they have to become part of our self-identity. So focus your energy on learning to like the new (healthier) you!

Self-esteem, which is feeling good about yourself, is a great positive motivator that can make new health behaviours that much easier to maintain. If we don't start to identify with our new healthier behaviours, they will always be hard work. Possible example: "As an example of making a health change part of your identity, some ex-smokers begin to identify as a non-smoker. For them, the thought of smoking becomes very unappealing which makes it easier to make the choice every day to not smoke. For other ex-smokers, they see themselves as a smoker who has quit. So naturally, the desire to smoke is that much stronger. And even if they don't smoke, it's always hard work for them to resist.

## **PHYSICAL ACTIVITY (35 minutes)**

Source: Fowles, J.R. (2012). *Building Competencies in Diabetes Education: Physical Activity and Exercise*. Canadian Diabetes Association

Diabetes Canada CPGs 2018

**Fact or Fiction: "EXERCISE ALWAYS LEADS TO WEIGHT LOSS."**

**Fiction: Exercise does not necessary lead to weight loss. Even if you lose fat, you will gain muscle so your weight on the scale may not change. Regardless of weight, there are many other health benefits from regular physical activity (CPG 2018).**

**ASK: What are the benefits of activity or exercise in general?**

Some examples could be

- Stronger bones
- Improved blood pressure
- Improved lipid profile (especially ↑ HDL)
- Lower heart rates
- More energy
- Better sleep
- Improved fitness levels (keep up with the grand/kids)
- Weight management\*\*

\*\* Focus on the behavior change strategies. Though weight may come up gently remind them that *may* be a result but it is not the goal. Weight management is not weight loss

ASK: **Why is activity and exercise important with diabetes?**

- Regular exercise has special advantages if you have type 2 diabetes
- Improve your body's sensitivity to insulin and help manage your blood sugar levels
- Can also help prevent or delay type 2 diabetes from developing.

ASK: **What is the difference between “Activity” and “Exercise”?**

**Physical Activity:** Typically is unstructured and can take place in a variety of occupational, household or leisure time situations. Habitual physical activity helps maintain overall health.

**Exercise:** “Planned, structured physical activity performed at a minimum level of intensity and duration with the objective of improving one’s fitness”. Exercise is a more challenging type of PA that stresses the body in certain ways to significantly improve health.

ASK: **How has technology affected our activity levels?**

**Technology has helped eliminate regular forms of physical activity in our lives.**

Some examples may be:

- Cars have replaced walking or biking.
- Elevators and escalators replaced stairs.
- Dishwashers, wash machines etc. from doing things by hand.
- Computers replace manual labour.
- Leaf blowers, snow blowers, ride on lawn mowers or hiring others to do our ADLs.
- Screen time has replaced fun activities outdoors for adults and kids.

**SO, this means that being active is now a choice we all have to make. We need to seek out opportunities to include physical activity and exercise into our lives to achieve health benefits.**

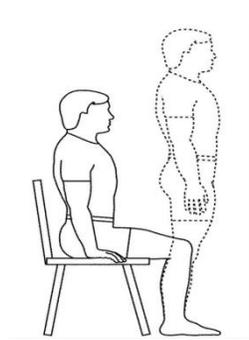
**Have you heard of “sitting disease”?**

### **Activity 6: LET’S MAKE OUR DAY HARDER- YOUTUBE VIDEO**

“Let's make our day harder”- Dr. Mike Evans on Youtube

<https://www.youtube.com/watch?v=whPuRLil4c0> (4 minutes)

## Activity 7: "SIT-STAND-SIT" BREAK



### HINT:

Remember to give the option to stay seated and be mindful of participants' limitations.

SAFETY first (no chairs with wheels!)

### How much Physical Activity is enough?

- **Goal is 150 minutes of moderate to vigorous intensity aerobic exercise per week (i.e. 30 minutes 5 days per week)**
- **Start slow- 5-10 minutes per day and gradually increase to your goal**
- **10 minute bouts of activity multiple times per day is just as useful one longer session**
- **Add resistance exercises 3x/week**

### Getting Started with Exercise

Components for Exercise\_ **(Option: can discuss while doing activity)**

*Source: Reh-Fit Centre Sam Highman BKin. And Dustin Kimber BKin, MSc.*

#### 1. Warm up

- **5-10 minutes at the start of your workout to prepare your body and mind for exercise. This helps to reduce injury and improve performance. Movements in the warm up should be specific to the exercises you will be performing. Resistance**
- **Use muscle strength to move a weight or work against a resistance load- 2-3 non-consecutive days**
- **i.e. weight lifting, body weight movements, weight machines, bands**

See Appendix 2 for additional information on Initial Resistance Program Progression

## 2. Aerobic

- Rhythmic repeated and continuous movement of the same large muscle groups for at least 10 minutes at a time
- 150 minutes per week in minimum bouts of 10 minutes at a time.
  - Intensity should be moderate to vigorous (4-6) on the Borg scale of perceived exertion (see below)
- Frequency- 3-5 days per week
- Intensity- moderate to vigorous (Rate of perceived exertion, talk test
  - or heart rate
- i.e. bike, brisk walk, swim, cross country ski, elliptical, dancing etc.

### Rate of Perceived Exertion

0	Rest	
1	Very light	Light intensity
2	Light	
3	Moderate	Moderate intensity
4	Somewhat hard	
5	Hard (breathing deeply)	
6		
7	Very hard (out of breath)	Vigorous intensity
8		
9		
10	Maximal	

#### TIP

1= sitting on a couch watching TV

10= being chased through a park by a stranger

4-6- can still carry on a conversation with breaks and without singing along to the music... if you can sing, you can work harder!

Source: <https://www.diabetes.ca/diabetes-and-you/healthy-living-resources/exercise/resistance-exercises-plan>

## 3. Balance

Mind & Body Wellness

- a. **the ability to stay upright or stay in control of body movement, and coordination is the ability to move two or more body parts under control, smoothly and efficiently. There are two types of balance: static and dynamic**

#### 4. Flexibility

- a. **Cool Down and Stretch: the cool down can be anything that brings your heart rate and breathing back to normal. Stretching is important because it improves posture, increases strength gains and improves range of motion. Perform each stretch 1-3x and hold for a minimum of 30-45(or even 60) seconds each.**
- b. **Stretching- is essential to keep muscles lengthened and flexible. It is also important to do activities that maintain balance to prevent falls as we age.**

#### **HINT**

##### Creating your exercise program

The *F.I.T.T. principle* helps you create an exercise plan that will be more effective in reaching your fitness goals. F.I.T.T. stands for frequency, intensity, time, and type of exercise. These are the four elements you need to think about to create exercise plans that fit your goals and fitness level

**Frequency** ...refers to the frequency of exercise undertaken or how often you exercise.

**Intensity** ...refers to the intensity of exercise undertaken or how hard you exercise.

**Time** ...refers to the time you spend exercising or how long you exercise for.

**Type** ...refers to the type of exercise undertaken or what kind of exercise you do.

**When starting a new program it is recommended you seek professional guidance from a trained professional like a kinesiologist or exercise specialist.**

*CPG reference: "Structured exercise programs supervised by qualified trainers should be implemented when feasible for people with type 2 diabetes to improve glycemic control, CV risk factors and physical fitness [Grade B, Level 2 (6,39)]."*

#### Resources

For getting started with exercise

Exercise Prescription examples. Diabetes Canada Physical Activity and Diabetes, pg S58- 59

## Preparing for Exercise:

- Water and towel
- Proper foot wear and comfy clothes
- Fast acting sugars if needed
- Workout with a buddy
- A medical alert bracelet

## Fact Or Fiction: PEOPLE WITH DIABETES CAN'T PLAY INTENSE SPORTS

**Fiction:** People with diabetes should take part in exercise to maintain a healthy lifestyle. Exercise helps improves cardiovascular health, improves mood, helps blood sugar control, and relieves stress. There are some factors worth considering before partaking in sport, but there is no reason why people with diabetes can't participate in most cases. Discuss with you HCP or DHCT your plans as some safety precautions may be required.

*(diabetes.co.uk)*

## Safety Precautions

- If you have been inactive for some time, talk to your doctor before starting any exercise program that is more strenuous than brisk walking
- If >40 years of age and or have preexisting conditions a resting ECG should be performed and consider an exercise ECG stress test (if plan to do more than a brisk walk)
- Make sure you wear comfortable, proper-fitting shoes, and your MedicAlert® bracelet or necklace.
- Listen to your body. Stop if you are very short of breath or have chest pain and speak to your provider about this
- T2- if BG >16.7 mmol ensure proper hydration especially if exercising in heat
- If you take insulin or medications that increase insulin levels, monitor your blood sugar before, during and many hours after your activity to see how it affects your blood sugar levels.
- Carry some form of fast-acting carbohydrate with you in case you need to treat [low blood sugar](#) (hypoglycemia), for example, glucose tablets or Life Savers®

Please see handouts for additional info as needed

Appendix 3: T1DM precautions if needed

## Tips for Participants:

### Set Up

- It is recommended that you see a diabetes care provider or a qualified exercise professional to learn how to do any resistance exercises.
- Only do the exercises you are able to do
- Make sure that you do not do any exercises that hurt (for example, sore shoulder or sore knee – see a physician or physiotherapist if you have any questions). Remember to check your feet daily.
- If you have confirmed eye or kidney disease, discuss resistance exercises first with your physician or diabetes care provider.

### Maintain stable and proper posture for each exercise

- Keep your chest out.
- Avoid rounding the shoulders or twisting your back.

### Keep each movement slow and controlled

- Three seconds up; three seconds down

### Do not hold your breath

- Exhale with effort.
- Release your breath with each repetition.

### Keep to a comfortable range of motion

- Use a complete range that is comfortable for you.
- Use an appropriate resistance
- Pick a band that makes it moderately hard to do the exercise.
- Increasing the resistance used

### Change the length of the resistance band

- Shorter band = harder
- Longer band = easier

## Activity 7: LET'S MOVE

*REVIEW: Facilitator Tips (below) for your participants for next activity. (10 minutes)*

### **TIP:**

Modify to the level of ability of your participants (i.e., loosen up the band for less resistance, use soup cans, or body weight- no bands).

Exercises can be performed sitting or standing.

**Options: (choose ONE)**

**1. Introductory resistance bands program (Diabetes Canada)**

**Appendix 4**

<https://www.diabetes.ca/getmedia/0a646e26-9e1c-4769-975f-51876edf6ecd/resistance-band-exercises-2.pdf.aspx>

**2. Winnipeg in Motion brochure**

**Appendix 5**

[http://winnipeginmotion.ca/wcm-docs/docs/inMotion\\_Brochure\\_LOW.pdf](http://winnipeginmotion.ca/wcm-docs/docs/inMotion_Brochure_LOW.pdf)

**3. Diabetes Canada: Video with J Fowles (scroll to bottom)**

<http://diabetes.ca/diabetes-and-you/healthy-living/sources/exercise/introduction-to-resistance-exercise>

Note for Video

Disclaimer: Reliance on the information presented in these videos is at your own risk. Diabetes Canada, the creators, producers, performers, participants and distributors of this video disclaim all warranties, express or implied, and are not liable for any direct or indirect damages that may arise out of use of these videos, from the performance of the exercises demonstrated or the information contained therein, including but not limited to any injuries incurred while using the videos.

**4. Interactive App GlucoseZone \*FEE\***

**There is a free trial and then it costs \$16.99 / month - a patient would want to be committed to use explains diabetes, has a variety of fitness levels , such as chair exercises**



## **Facilitators**

- **Start with 5-10 minutes at a time throughout the day**
- **It's hard to get started but once you do, you will have more energy**
- **Try just 5 minutes, if you really hate it, stop and try something different**
- **You do not need a gym, try a playground, play outside, use your home, yard work etc.**
- **Share your plans with your family or friends, invite them to join you, or try a local recreation centre program**
- **Discuss how to avoid highs and lows with your DM healthcare team. Eat regularly, monitor blood sugar and carry some fast-acting sugar with you**
- **Talk to your doctor or physiotherapist about pains. Remember to take care of your feet and wear good shoes**

## Optional Activity 8: DECISIONAL BALANCE (PROS/CONS)

**List** all the reasons to change and all of the reasons to stay the same for a health behaviour (i.e. activity or mindfulness)

**STEP 1:** List pros or advantages of staying the same (**NOT doing the new health behavior**)

**STEP2:** List cons or disadvantages of staying the same.

**STEP 3:** Next, list the cons of Changing.

**STEP 4:** Finally list the pros of Changing.

**It is normal for items on the same side to be similar. For example, the cons of staying the same may be similar to the pros of changing**

**OR**

**ASK participants what Barriers and Facilitators (pros and cons) for PA or exercise Below are some examples:**

**Barriers (Benefits of PA-pamphlet 1)**

- **I have no time**
- **I am too tired**
- **I am not motivated**
- **It costs too much to join a gym**
- **I cannot be PA on my own**
- **I'm concerned my blood sugar will go to high or low**
- **I'm afraid to get injured**

## **GOAL SETTING (10 min)**

### **Activity 8: GOAL SETTING**

Handout the tool to the participants (Worksheet is 2 pages).

## ACTION PLAN FOR CHANGE & PROBLEM SOLVING STEPS

### Action plan for Change

\* We **strongly** encourage you to share 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. Is 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

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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 time, 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*

### 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.

## **RELAPSE PREVENTION AND PROBLEM SOLVING (5 min)**

“Everyone strays from their goals – this is normal! It is important to pay attention to how far you stray and for how long. We can all learn from behaviour cycling!

Remember at the beginning we talked about the negative self-talk- its not useful to us or to our healthy behaviours.

Instead, identify the issue- and move on. Practice self-compassion!

**Appendix 9: Handout “Setting ourselves up for success”**

## **EVALUATION AND CLOSING (5 minutes)**

**Provide WRHA Health Management Group Programs Participant Evaluation and Feedback Form (Appendix 7)**

**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?**

## Appendix 1: 18 Tips for Dealing with Stress and Tension

1. Recognize your symptoms of stress.
2. Look at your lifestyle and see what can be change In your work situation, your family situation, or your schedule.
3. Use relaxation techniques: Yoga, meditation, deep breathing, or massage.
4. Exercise: Physical activity is one of the most effective stress remedies around!
5. Time management: Do essential tASKs and prioritize the others. Consider those who may be affected by your decisions, such as family and friends. Use a check list; you will receive satisfaction as you check off completed jobs!
6. Watch your diet: Alcohol, caffeine, sugar, fats and tobacco all put a strain on your body's ability to cope with stress. A diet with a balance of fruits, vegetables, whole grains and foods high in protein will help create optimum health. Contact your local Heart and Stroke Foundation for information about healthy eating.
7. Get enough rest and sleep.
8. Talk with others: Talk with friends, professional counsellors, support groups or relatives about what's bothering you.
9. Help others: Volunteer work can be an effective and satisfying stress reducer.
10. Get away for a while: Read a book, watch a movie, play a game, listen to music or go on vacation. Leave yourself some time that's just for you.
11. Work off your anger: Get physically active, dig in the garden, start a project, or get your spring cleaning done.
12. Give in occasionally: Avoid quarrels whenever possible.

13. Tackle one thing at a time. Don't do too much at once.

14. Don't try to be perfect.

15. Ease up on criticism of others.

16. Don't be too competitive.

17. Make the first move to be friendly.

18. HAVE SOME FUN!! Laugh with people you enjoy!

*Mental Health, Resources for Winnipeg. 22nd Edition-2017 g.6  
mbwpg.cmha.ca or 204-982-6100*

## **Appendix 2: Initial Resistance Program Progression**

Follow the plan below to gradually increase repetitions, sets, and resistance to meet Diabetes Canada's recommendation of resistance activity two to three times a week.

Begin at the initial stage if you are inactive and want to start easy with resistance exercise.

Begin at the improvement stage if you are somewhat active and have no medical limitations.

Program stage	Week	Frequency (days per week)	Intensity: Exertion level	RPE* (10 pt)	Duration (min)
Initial stage	1	2	Light	2	1 x 8
	2	2	Light	2	1 x 10
	3	2	Moderate	3	1 x 12
	4	2	Moderate	3	2 x 8
Improvement**	5-7	2	Moderate	3	2 x 10
	8-10	2	Moderate	3	2 x 12
	11-13	3	Moderate	3	2 x 8
	14-16	3	Somewhat strong	4	2 x 10
	17-20	3	Somewhat strong	4	2 x 12
	21-24	3	Somewhat strong	4	2 x 15
	25+	2-3	Moderate-strong	3-4	2 x 15 or 3 x 8

Source: Table adapted from Warburton, et al. 2006.

<https://www.diabetes.ca/diabetes-and-you/healthy-living-resources/exercise/resistance-exercises-plan>

## Appendix 3: Type 1 Diabetes Exercise Safety Additions

### JUST IN CASE

If you live with **type 1 diabetes**, speak to your health-care provider about ways to reduce the risk of low blood sugar during and after exercise T1

### Considerations

- Do not perform activity if BG >14 mmol
- Reduce bolus insulin that is most active at the time of exercise
- Significantly reduce or suspend (if <45 minutes) basal insulin for the exercise duration AND lower basal dose by 20% overnight
- Increase CHO before, during and after activity as needed
- Resistance work before aerobic activity

### **Resistance Exercise Guidelines**

- Start with two sets of eight repetitions each for six to eight exercises, and do this two times a week.
- Work up to three sets of eight to 12 repetitions each for up to 12 exercises, and do this three times a week.
- Take one to two minutes of rest between sets.
- Remember:
  - Only do the exercises you can.
  - Maintain proper posture.
  - Keep movements slow and controlled.
  - Breathe with each repetition.
  - Keep to a comfortable range of motion.

Source: <https://www.diabetes.ca/diabetes-and-you/healthy-living-resources/exercise/resistance-exercises-plan>

## Appendix 4

<https://www.diabetes.ca/getmedia/0a646e26-9e1c-4769-975f-51876edf6ecd/resistance-band-exercises-2.pdf.aspx>

Begin with 6-8 exercises. As you feel comfortable, add 1-2 exercises a week (up to 12 exercises).

Hips & Thighs



**1**  
**Start:** Sit at the front of the chair, chest up, and feet hip width apart. Slowly lift out of the chair with your knees directly over your toes. Keep your back straight and arms out.  
**Finish:** Hold the top position with knees bent. Slowly bend knees to lower yourself to the chair. Don't drop to the chair.

Chest



**2**  
**Start:** Place the band around your upper back. Grab the ends of the band with elbows bent and palms facing down or inward.  
**Finish:** Press out, extending your elbows forward to shoulder level. Slowly return to starting position.

Upper Back



**3**  
**Start:** Grasp the band with both hands in front of your chest with the elbows slightly bent and shoulders down.  
**Finish:** Keep elbows slightly bent and pull band outward until the band reaches across your middle chest. Hold the end position briefly, squeezing the shoulder blades together. Slowly return to starting position.

Middle Back



**4**  
**Start:** Wrap the middle of the band around an extended foot. Grasp both ends of the band at the outside of your knee with your outside hand.  
**Finish:** Pull band backwards and slightly up until your outside hand is beside your ribcage. Pause. Slowly lower to starting position.

Shoulders



**5**  
**Start:** One foot and hand anchor one end of the band. The other hand is beside the shoulder, grasping the band, hand level with the chin, and arm straight up from the floor.  
**Finish:** Extend the arm overhead until directly over the shoulder. Try not to lean to one side. Pause. Slowly lower to starting position.

Shoulders



**6**  
**Start:** Anchor as per #5 with slightly shorter band. Grasp the band at position just outside the knee. Can have palm down or palm forward (easier on the shoulders).  
**Finish:** Lift arm to side with elbow slightly bent. Lift to shoulder height or slightly below shoulder height if you have shoulder problems. Pause. Slowly lower to starting position.

Upper Arm - Front



**7**  
**Start:** Keep same anchor position as #6, except slightly shorter band length. Grasp band with palm facing up.  
**Finish:** Curl hand to shoulder, keeping your elbow at your side at the lower ribs. Pause. Slowly lower to starting position.

Upper Arm - Back



**8**  
**Start:** Seated at the front edge of the chair and chest up. Place the band around your knee, anchoring the band with one hand on the opposite thigh and holding the other end of the band down at your side with your elbow bent.  
**Finish:** Extend your elbow until your arm is straight down by your side. Pause. Slowly return to starting position.

Legs - Front



**9**  
**Start:** Tie the band in a knot and wrap around your feet, or tie the band around one leg of the chair with your foot through the loop.  
**Finish:** Extend one leg out, keeping your knee in the same position. Keep your posture. Pause. Slowly return to starting position.

Legs - Back



**10**  
**Start:** Stand behind the chair, holding the back for support. Wrap the tied band around your ankles, or tie the band around a leg of the chair with your foot through the loop.  
**Finish:** Curl one ankle up. Keep the knee in the same position and your back stable. Pause. Slowly return to starting position.

Lower Back



**11**  
**Start:** Stand behind the chair, holding the back for support, with knees slightly bent, and leaning forward with back straight. You can wrap a band around your ankles or do the exercise without a band.  
**Finish:** Extend one leg out so that it is in line with your body. Don't over-extend the leg or arch in the low back. Pause. Slowly return to starting position.

Abdominals



**12**  
**Start:** Seated comfortably in the chair, chest up, and both knees bent with the feet on the ground in front of you.  
**Finish:** Lift one knee so that it is higher than the opposite knee, or slightly rock back with both feet on the ground. Tighten your abdominals. Keep your chest up. Pause. Slowly return to starting position.

## Appendix 5

Source: <http://winnipegmotion.ca/resources.php>

### Instructions

- Talk to a health care or exercise professional before starting a new exercise program.
- The following exercises can be done with an exercise band or tubing. Do not use a band that has a hole or tear.
- Breathe normally during each exercise.
- To make the exercise more difficult, stretch the band by moving your feet.
- Control the movement of the exercise band. Move through the full movement counting to 2 in each direction.
- Repeat each exercise 10-15 times before moving to the next exercise.
- Repeat the set of all exercises 2-3 times.

### Squat

- Band from the knees
- Keep back straight

- Knees should not go past toes

### Chest Press

- Arms are just below shoulder height

- Keep shoulders relaxed
- Squeeze chest muscles

### Seated Row

- Sit near front of chair

- Tuck elbows in close to body when pulling back
- Squeeze shoulder blades together

### Tricep Extension

- Keep right arm still
- Straighten left elbow, moving only the lower arm

- Repeat on other side

**Winnipeg in motion**  
 Move it or lose it!

**EXERCISE BANDS: ADDING STRENGTH TO YOUR DAY**

Canada's Physical Activity Guidelines recommend strength activities at least 2 days a week.

**Bicep Curl**

- Wrists are straight
- Elbows are close to body

• Move only lower arm

**Lateral Raise**

- Wrists are straight
- Elbows are slightly bent

• Raise arm just below shoulder height

**Reverse Fly**

- Engage core (abdominal) muscles
- Keep arms just below shoulder height
- Keep shoulders relaxed
- Squeeze shoulder blades together

**Chair Sit Up**

- Engage core (abdominal) muscles
- Keep back and head neutral (straight line)
- Keep feet flat on floor

• Look straight ahead throughout movement

[winnipeg.inmotion.ca](http://winnipeg.inmotion.ca)

## **Appendix 6: Handout- Setting Ourselves Up For Success**

Have you noticed anything that helps you stay on track with behaviours that you need to do to manage your diabetes (such as SMBG, eating healthy, exercising)?

Why do you think these strategies work?"

What about these strategies encouraged you to keep going?

### **Steps for Successful Change:**

#### **Have reasonable expectations.**

- If we expect too much from ourselves, we are more likely to fall short and have a sense of "I can't do this", rather than a sense of accomplishment and success. This can negatively affect our motivation. It's better to have small successes than big failures.

Example question: "Does anyone have an example of when being ASKed to do too much too soon, you have felt overwhelmed, and done nothing at all?"

#### **Set up your environment.**

- Relying on "willpower" is not an effective strategy. It is much more effective to put our energy into ensuring that we feed our bodies regularly to ensure that we are satisfied throughout the day.

For example, we can put the extra portions of vegetables on the table, and keep the extra portions of meat on the stove (or packed away in the fridge). We can make sure that we don't keep unhealthy foods in the house, or if we do keep them, that they are harder to get to. We can prepare our exercise clothing or other equipment ahead of time so that it is easier to get started exercising when the time comes.

#### **Measure success based on behaviours rather than outcomes.**

- While we can make choices about our behaviours, we do not have absolute control of the outcomes. Behaviours are things like checking our blood sugar or exercising. Outcomes are things like weight or A1c.

For example, we can choose to try to eat regularly or to move our body. However, we cannot control how our weight might, or might not change in response to that. By focusing our attention on things that we can make choices about, we are more likely to feel motivated to continue to engage in these behaviours.

### **Build in rewards for healthy behaviours.**

- It is important and helpful to pat ourselves on the back. If we have accomplished something, we should be proud of it and reward ourselves.

### **Develop confidence in our ability to do the healthy behavior.**

- Confidence comes about with small successes. This is tied to the expectations (i.e., setting smaller, more realistic goals makes it more likely you will accomplish your goals, which helps you to feel more confident).

### **Reasons for changing outweigh reasons for staying the same.**

- We acknowledge that there are reasons for staying the same, but we have found more reasons for change.

### **Have a plan for dealing with barriers and temptations.**

- There will always be situations when it is more difficult to stay on track...how do we deal with this?

### **Identify with and like the new changed you.**

- If we start to identify with the new healthy behaviours that we have adopted (e.g., I am a walker or a runner, I am someone who eats breakfast), the behaviours will become easier to do. If not, then they will continue to be a challenge.

**Appendix 7:**

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

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

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

**Program Name**

Mind & Body Wellness

**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? \_\_\_\_\_

## RESOURCES

Canadian Society for Exercise Physiology:

Handouts – adults and older adults

<http://csepguidelines.ca/adults-18-64/>

<http://csepguidelines.ca/adults-65/>

Stretch Routine handout (in motion) <http://winnipeginmotion.ca/wcm-docs/docs/flexibility.pdf>

### Community Resources

- CMHA Mental Health Resource Guide <https://mbwpg.cmha.ca/resources/mental-health-resource-guide-for-winnipeg/>
- WRHA Group Program Guide [www.wrha.mb.ca/groups](http://www.wrha.mb.ca/groups). Check out Get Better Together, and other programs!
- Access Centers for sessions i.e. Managing Difficult Emotions OR Stress management
- Canadian Mental Health Association <https://cmha.ca>
- Diabetes Canada [www.diabetes.ca](http://www.diabetes.ca)
- TeleCare 1-866-204-3737
- Winnipeg Leisure Guide <https://winnipeg.ca/cms/recreation/leisure/leisureguide.stm/>
- Reh-Fit Centre [www.reh-fit.com](http://www.reh-fit.com)
- Wellness Institute <http://wellnessinstitute.ca>
- Active Living Centre, University of Manitoba <http://umanitoba.ca/activelivingcentre/>
- Winnipeg in Motion [www.winnipeginmotion.ca](http://www.winnipeginmotion.ca)
- Kinesiology consultants <http://manitobakinesiologists.ca/#section-1>

### Exercise Trusted Websites

- Canadian Society for Exercise Physiology <http://www.csep.ca/home>

### Well-Being Resources

- WRHA Wellbeing Guide [www.wellbeingguide.ca](http://www.wellbeingguide.ca)

- Here to Help BC [www.heretohelp.bc.ca](http://www.heretohelp.bc.ca)
- <http://www.heretohelp.bc.ca/wellness-module/wellness-module-2-stress-and-well-being>
- Calm in the storm (website & phone app) <http://calminthestormapp.com/>
- Stress Strategies (from Psychological Foundation of Canada) <https://www.stressstrategies.ca/>
- <https://www.stressstrategies.ca/resources>
- American Psychological Association
- <http://www.apa.org/helpcenter/chronic-illness.aspx>
- Reason to Live [www.reasontolive.ca](http://www.reasontolive.ca)

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<http://www.wrha.mb.ca/prog/mentalhealth/mentalhealthpromotion.php>