

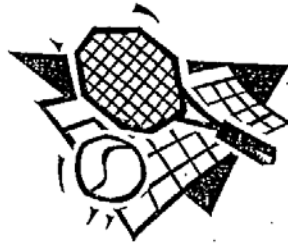
H. Health and Wellness

Advanced

Knows how to advocate for self on health care issues with medical professionals and behavioral health care providers	http://www.webmd.com/healthy-aging/features/be-your-own-health-advocate http://www.frugalrules.com/advocate-health-care-3/
Knows at least one adult whom they trust who would be legally allowed to make medical decisions for me and advocate for me if I was unable to speak for myself as a health care proxy.	Individualized instruction
Knows how to achieve optimum health through exercise and diet	H-97 through 98; H-99 through 106
Knows healthy methods for reducing stress and anxiety	H-107 through 109
Knows how to explain to others, their mental health, physical symptoms, and treatment/services that they are receiving	H-74 through 89 (L, M, N, S)
Understands the benefits from engaging in healthy leisure activities	H-110; H-111 through 115; H-116 through 117
Has and knows how to obtain and/or maintain active enrollment in healthcare insurance (how to enroll, benefits, provider network)	Individualized instruction H-95; H-74 through 89 (Part D)
Knows how to access resources to assist with health and wellness concerns (CHN, ICN, Value Options, Logisticare, ASOs, etc.)	http://www.huskyhealthct.org/members.html?hNav= http://www.ctbhp.com/ https://www.ctdhp.com/default.asp https://memberinfo.logisticare.com/ctmember/Home.aspx

Independent Living Skills Module II

EXERCISE



Exercising regularly is an important part of keeping physically fit and can prevent certain health risks.

Test your knowledge of fitness by answering TRUE or FALSE to the following statements.
(Answers are listed below.)

1. Exercising gives you more energy. _____
2. Exercising slows down the aging process. _____
3. Exercising regularly can give you more self confidence. _____
4. Exercising is a very important part of a good weight loss program. _____
5. Even walking for twenty minutes twice a day will improve your physical fitness. _____


Answers

1. TRUE. If you exercise on a regular basis, you feel more energetic and will be more fit.
2. TRUE. Exercising helps strengthen your body - your bones, muscles, ligaments, and tendons. It helps you improve your cardiovascular system so that your body works more efficiently while it strengthens your heart.
3. TRUE. Setting a goal for exercising three or four times per week and achieving that goal will give you a real sense of accomplishment as well as renewed confidence in yourself and your abilities. Your exercise schedule doesn't have to be like that of an Olympic star; it just needs to be a realistic and attainable goal that you can set for yourself and stick to.

Independent Living Skills Module II

- 4. TRUE. Exercise will not only help you burn calories, but it will keep your body in great shape as well.
- 5. TRUE. Even walking just twice a day for twenty minutes will improve your physical fitness.

Do you want to exercise regularly but find you have a hard time getting going or sticking with it? Use the activity chart below to help you plan your fitness schedule for a week. Use the comments section to record how things went.

Date	Time	Exercise/Activity	Comments
			

Exercise is not only healthy, but it can also be a lot of fun! Many communities offer a variety of free or low cost sports activities you can participate in. In addition, the YMCA offers access to their facilities and classes for a low fee.



ACTIVITY

Research your community for free or low cost exercise/sports opportunities which reflect your interest.

Independent Living Skills Module II

NUTRITION



Good nutrition and a balanced diet are important to keep us healthy.

What kind of foods do you think are healthy and why?

Food	Reason
<i>Vegetables</i>	<i>Vitamins, low calories</i>

What kind of foods do you think are not so healthy? Why?

Food	Reason

Test your knowledge of nutrition by answering TRUE or FALSE to the following statements.
(Answers are below.)

1. One cup of canned peas contains about 300 times more sodium (salt) than one cup of fresh peas. _____
2. One pound of body fat contains 3,500 calories. _____
3. One tablespoon of liquid honey has fewer calories than one tablespoon of whole granulated sugar. _____

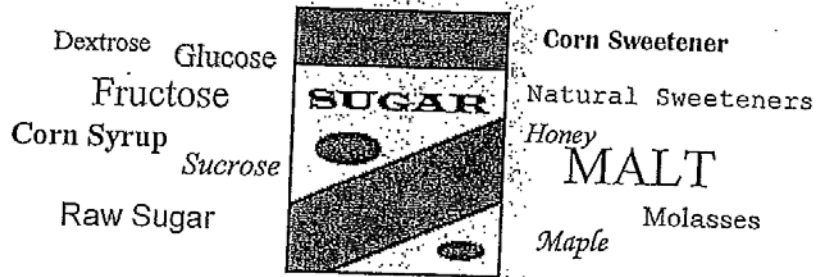
Independent Living Skills Module II

4. All three types of fat (saturated, monounsaturated, and polyunsaturated) raise the level of cholesterol in the blood and can increase the risk of heart attack or stroke. _____
5. One cup of popcorn (without butter or margarine) has fewer calories than three potato chips. _____
6. A small order of French fries has the same amount of calories as a small ice cream cone. _____
7. You will have to walk one and one-half miles to burn off the number of calories in one regular donut. _____



Answers:

1. TRUE. Foods that contain preservatives or are processed have much more sodium than fresh foods. For example,
 - one cup of canned mushroom soup has 1,193 milligrams of sodium.
 - one cup of low fat cottage cheese has 921 milligrams of sodium
 - one fresh egg has 69 milligrams of sodium.
2. TRUE. Therefore, if you are trying to lose some weight and would like to lose one pound per week, you will have to either eat 3,500 fewer calories than you regularly eat or burn up 3,500 more calories through physical activity each week.
3. FALSE. One tablespoon of liquid honey has approximately 60 calories whereas one tablespoon of white sugar has about 46 calories. You should also be aware that sugar is an ingredient in many foods, including some you might never have suspected --soups, spaghetti sauces, salad dressings, etc. Sugar appears under many different names on food product labels. Here are some of the most common:



Independent Living Skills Module II

4. FALSE. It is the saturated fats that raise the level of cholesterol in the blood. Red meats and dairy products contain a lot of saturated fats. Cholesterol is a kind of fat which our bodies produce. We actually need some cholesterol for our cells and to make hormones. Too much cholesterol, however, will stick to the walls of our arteries and eventually clog the flow of blood. That's when heart attacks or strokes can occur.

Monounsaturated fats do not affect the levels of cholesterol in the blood. Examples include olive and peanut oils. Polyunsaturated fats lower the level of cholesterol in the blood. Most vegetable oils are polyunsaturated. So when, you are planning meals, remember to choose polyunsaturated fats over saturated ones, and try not to eat too many foods containing saturated fats.

5. TRUE. One cup of popcorn (without butter or margarine) has only 25 calories while three potato chips have approximately 34 calories. If you are not sure which foods are high or low in calories, check a food calorie chart. What you learn may help you make better choices in planning what you'll eat for breakfast, lunch, dinner, and snacks.
6. FALSE. The order of French fries has approximately 220 calories while a small ice cream cone has 150 calories.

When you choose a snack or order at a fast food restaurant, be aware of what you'll be eating. Consider the nutritional value, the amount of fat, and the calories as well as your taste buds.

7. TRUE. A donut contains approximately 150 calories. If you walk for one and one half miles, you'll burn off approximately 150 calories.

Independent Living Skills Module II

How aware are you of all the things that you eat and drink during the day? To get a better idea of what your nutritional intake is, fill out the Daily Food Diary for one week. At the end of the week, review the diary with a friend, staff person, or foster parent.

Daily Food Diary

Using the example below as a guide, fill out a daily food diary every day for a week.

EXAMPLE:

Time	7:00 a.m.	11:00 a.m.		
Food/Drink	1 cup of coffee 1 donut	1 cup of hot chocolate 1 candy bar		
Where	kitchen	cafeteria		
Mood	tired	nervous		
With Whom	myself	Jack & Tia		

Daily Food Diary

Day: _____

Time				
Food/Drink				
Where				
Mood				
With Whom				

Independent Living Skills Module II

Daily Food Diary

Day: _____

Time				
Food/Drink				
Where				
Mood				
With Whom				

Daily Food Diary

Day: _____

Time				
Food/Drink				
Where				
Mood				
With Whom				

Independent Living Skills Module II

Daily Food Diary

Day: _____

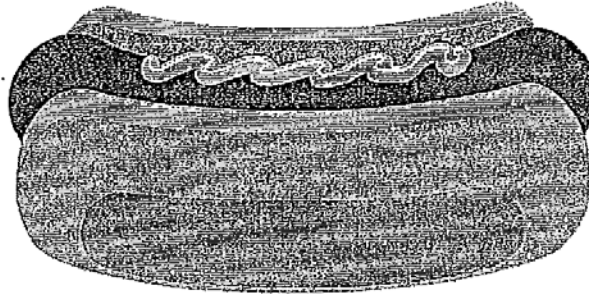
Time				
Food/Drink				
Where				
Mood				
With Whom				

Daily Food Diary

Day: _____

Time				
Food/Drink				
Where				
Mood				
With Whom				

Independent Living Skills Module II



Now that you have kept track of your eating habits for one week, you can answer the following questions:

Do you eat enough nutritional foods? _____

What kind of foods do you eat most often? _____

Do you eat mostly fruits and vegetables? Sweets? Fatty Foods? _____

Are there certain times of the day that you get cravings? If so, When? What kind of things could you do to curb them? _____

Do you eat when you are in certain moods - sad, bored, nervous, etc.? If so, what could you do instead of eating? _____

Do you eat more when you are alone or with certain friends? _____

Independent Living Skills Module II

Should you try to change your habits? If so, you might want to develop helpful strategies with your foster parent, social worker, or program staff.

My strategies are:

⇒

⇒

⇒

⇒

H-106

Goodbye STRESS!

The following techniques are examples of healthy ways to reduce stress and anxiety in your daily life.

Exercise

Physical exercise not only promotes overall fitness, but it helps you to manage emotional stress and tension as well. For one thing, exercise can emotionally remove one temporarily from a stressful environment or situation. Being fit and healthy also increases your ability to deal with stress as it arises.

Relaxation and meditation

There are many ways to use structured relaxation and meditation techniques to help control stress and improve your physical and mental well-being. While some types of meditation and relaxation therapies are best learned in a class, it's also possible to learn meditation techniques on your own. There are literally hundreds of different types of relaxation methods ranging from audio CDs to group martial arts and fitness classes (yoga, tai chi, meditation, imagery, etc.)

Time management

Good time-management skills are critical for effective stress control. In particular, learning to prioritize tasks and avoid over-commitment are critical measures to make sure that you're not overscheduled. Always using a calendar or planner, and checking it faithfully before committing to anything, is one way to develop time-management skills. You can also learn to identify time-wasting tasks by keeping a diary for a few days and noticing where you may be losing time.

For example, productivity experts recommend setting aside a specific time (or multiple times) each day to check and respond to email and messages rather than being a continual slave to incoming information. Banishing procrastination is another time-management skill that can be learned or perfected.

Organizational skills

If your physical surroundings (office, desk, kitchen, closet, car) are well-organized, you won't be faced with the stress of misplaced objects and clutter. Make it a habit to periodically clean out and sort through the messes of paperwork and clutter that accumulate over time.

Support systems

People with strong social support systems experience fewer physical and emotional symptoms of stress than their less-connected counterparts. Loved ones, friends, business associates, neighbors, and even pets are all part of our social networks. Cultivating and developing a social support network is healthy for both body and mind.

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How can I get help with stress management?

If you feel you can't manage stress on your own or you are faced with unbearable stress, remember that there are resources to help.

1. **Check in with your doctor.** Stress can take its toll on your body, increasing your susceptibility to infections and worsening the symptoms of practically any chronic condition. Stress alone can also be a cause of numerous physical symptoms. Your physician will be able to assess the effects that stress may be having on your physical functioning and can recommend ways to combat these negative influences. Remember to be honest about the extent of stress you are experiencing. In severe cases of short-term life stress, your doctor can talk with you about the possibility of medications to help alleviate the short-term symptoms. Your doctor is also an excellent referral source should you decide to seek a counselor or therapist.
2. **Consider counseling.** Stress-management counseling is offered by various types of mental-health professionals. Stress counseling and group-discussion therapy have proven benefits in reduction of stress symptoms and improvement in overall health and attitude. Counseling doesn't have to be a long-term commitment, but some people will benefit from a series of stress-counseling sessions from a qualified therapist. He/she can help you identify the problem areas in your life and work on strategies to control your most stressful moments or situations. The very act of talking to an impartial and supportive observer can also be a great way to unleash tension and worry.
3. **Spend time with those you love.** Countless studies show that people with a balanced, happy social support structure (consisting of friends, family, loved ones, or even pets) experience fewer stress-related symptoms and are better stress managers than people without social support. Your loved ones are also in an excellent position to observe your lifestyle and offer suggestions and help when you need it.
4. **Take a course.** Many relaxation programs, meditation techniques, and methods for emotional and physical relaxation are actually learned processes that can be acquired most quickly through a class or course with a competent instructor. An added benefit is that you will meet others with similar goals and interests.

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Healthy ways to manage stress...

- listen to music
- walk outside
- ride a bike
- look at nature
- yoga/ meditation
- exercise
- talk to a friend
- deep breathing
- write in a journal
- draw a picture
- laugh
- smile
- read a book

Can you think of more?

What will you do the next time you are stressed?

I will: _____

Independent Living Skills Module II

③ Health.

① Ask.

How can I keep myself healthy?

② List.

What are some habits that will help me stay healthy?

Foods

Activities & Exercises

③ Think (about the results).

A. It's good to eat healthy food because _____

B. It's important to exercise because _____

C. One thing I like, that I might have to be careful about is _____

④ Chose.

In order to stay healthy, I will be sure to _____

and stay away from _____

⑤ Evaluate.

Did this checklist help you think about personal health goals?

Name one personal goal you have for your health _____

Independent Living Skills Module IV

RECREATION

Recreational activities are an important part of our lives. They enable us to relax, socialize, and have fun!

What do you like to do during your free time?

As you know, some types of entertainment, like going to the movies, may not be a frequent option -- particularly when you're on a limited budget. But there are numerous recreational opportunities that are free or fairly inexpensive right in your own community.



ACTIVITY

Research low cost/free recreational opportunities within your community and list them in the chart below.

Free Activities	Activities With A Small Fee

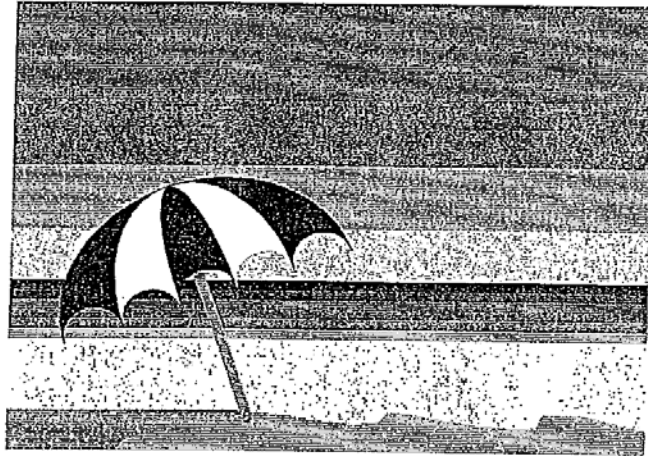
Independent Living Skills Module IV



ACTIVITY

Public libraries often offer free tickets for museums, exhibits, the aquarium, etc., to its members. Find out what tickets are available through your local library.

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Consider the following:

Darrell: Free time! There's never enough of it. Between work, school, and all other things I have to do, there doesn't seem to be time enough to do the fun things I really enjoy.

Sue: How boring! Another Sunday afternoon with nothing to do. The day just drags by. I'm really tired of this.

Sue and Darrell have different feelings about their free time. Does one of their statements sound like something you might say? It may seem strange, but both Sue and Darrell have a similar problem. They don't take their free time seriously enough to plan it. Therefore, it seems to be passing them by.

Complete the following charts to get a better idea of just how much free time you have and what you're doing now during that time. You can also start planning for those activities you might really have time for! The first schedule has Friday's activities filled in as an example.

Independent Living Skills Module IV

Activity Schedule for the Week of _____

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
7:00 A.M.					Get Ready/Eat		
8:00 A.M.					School		
9:00 A.M.					School		
10:00 A.M.					School		
11:00 A.M.					School		
NOON					Lunch		
1:00 P.M.					School		
2:00 P.M.					School		
3:00 P.M.					Watch TV		
4:00 P.M.					Watch TV		
5:00 P.M.					Watch TV		
6:00 P.M.					Eat Supper		
7:00 P.M.					Work		
8:00 P.M.					Work		
9:00 P.M.					Work		
10:00 P.M.					Hang out with friends		
11:00 P.M.					Go Home		
MIDNIGHT					Sleep		

Independent Living Skills Module IV

Activity Schedule for the Week of _____

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
7:00 A.M.							
8:00 A.M.							
9:00 A.M.							
10:00 A.M.							
11:00 A.M.							
NOON							
1:00 P.M.							
2:00 P.M.							
3:00 P.M.							
4:00 P.M.							
5:00 P.M.							
6:00 P.M.							
7:00 P.M.							
8:00 P.M.							
9:00 P.M.							
10:00 P.M.							
11:00 P.M.							
MIDNIGHT							

Independent Living Skills Module IV

After you have charted your activities for one week, review each day and circle your free time hours.

1. How many hours of free time did you have during the week? _____

2. List below all of the leisure activities you participated in during the week and the time you spent with each.

3. Are there other activities that you would like to participate in that are not on your list above? What are they?

4. From your answer to Question 3, choose one or two activities and try planning when, where, and with whom you might begin including them in your weekly schedule.

Activity	When (on what day, what time?)	Where	With Whom
<i>Example:</i> Aerobics	Mon. & Wed. at 3:30 P.M. and Sat. at 10:00 A.M.	YWCA	Jan

Try completing the Weekly Activity Chart for the next few weeks to see how successful you can be at including the new activities in your life.

Independent Living Skills Module I

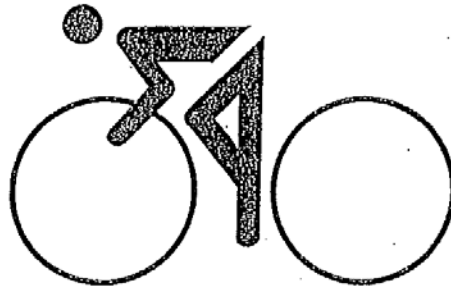
RECREATION & ENTERTAINMENT

Recreational activities are an important part of our lives, enabling us to relax, socialize, and have fun. However, on a tight budget expensive recreational options might be limited. It's important, therefore, to remember that all communities offer a variety of low cost or free recreational activities. In addition, most libraries offer free passes to museums and other attractions. Volunteering can be a fun recreational activity as well.

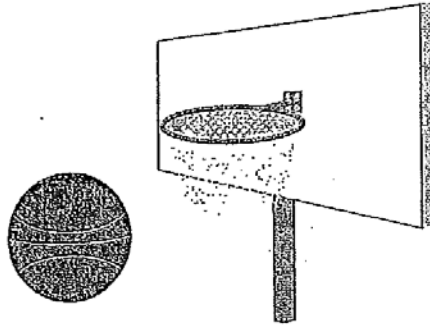


ACTIVITY

1. Research low-cost and free recreational activities in your area. Try calling the Park and Recreation Department, City Hall, community action programs, libraries, churches, etc.
2. Develop a list of recreational activities you enjoy. Divide your list into activities you have to pay for (noting their cost) and those which are free.



Independent Living Skills Module I



Recreational Activities with a Fee

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Free Recreational Activities

After evaluating these options, how much would you budget monthly for recreation and entertainment expenses?

Transfer your estimate to the Recreation line on your personal budget sheet.

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Independent Living Skills Module II

Cross/Blue Shield. This might be an option for you. Private insurance costs an average of \$2500 a year, cover 80% of costs, and have deductibles (a certain amount of money you are required to pay before the insurance covers the rest).

You are aware by now that health insurance can be expensive. However, having no insurance is very risky and could end up being far more expensive than insurance.

If none of the options listed above are viable possibilities for you at this time, you will have to pay for doctor's visits and health care facilities from your own pocket. Thankfully, many community health programs offer medical care services on a sliding fee basis. That means that the fee for services is based on your income. Some even provide free check-ups and emergency care in certain locations. However, these services are not available in all communities.



ACTIVITY

Research lower cost or free health care options in your community and list their location and phone numbers below.

Health Information Form-for Adults

Healthcare Provider Specialty	Primary Care Physician <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone	Emergency Phone No.(after hours)
Name		Email Address	
Group or Association		Fax	
Address		Web Address/URL	
City	State	Zip Code	Country

D. Insurance Providers

Insurance Provider Type				E-mail Address	Fax
Company Name				Web Address/ URL	
Address				Primary Insured Person-Name	Social Security No.
City	State	Zip Code	Country	Name of Employer	
Contact - Name		Phone		Address	
Identification-Group Number		Member(ID) Number		City	State
Contact Information-Phone		Emergency Phone No.(after hours)		Zip Code	Country
				Phone Number	

Insurance Provider Type				E-mail Address	Fax
Company Name				Web Address/ URL	
Address				Primary Insured Person-Name	Social Security No.
City	State	Zip Code	Country	Name of Employer	
Contact-Name		Phone		Address	
Identification-Group Number		Member(ID) Number		City	State
Contact Information-Phone		Emergency Phone No.(after hours)		Zip Code	Country
				Phone Number	

Insurance Provider Type	E-mail Address	Fax
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Health Information Form-for Adults

Company Name				Web Address/ URL			
Address				Primary Insured Person-Name		Social Security No.	
City	State	Zip Code	Country	Name of Employer			
Contact-Name		Phone		Address			
Identification-Group Number		Member(ID) Number		City	State	Zip Code	Country
Contact Information-Phone		Emergency Phone No.(after hours)		Phone Number			

E. Legal Documents/Medical Directives

<input type="checkbox"/> Living Will <input type="checkbox"/> Durable Power of Attorney for Healthcare <input type="checkbox"/> Power of Attorney				Fax			
Document Location (Physical Location)				Contact (Name of person who has access to the document)			
Location Name (for example Bank of America)				Address			
Address				City	State	Zip Code	Country
City	State	Zip Code	Country	Contact Information			
Legal Representative (Name of person who you have assigned legal authority)				Home Phone		Cellular Phone	
Address				Pager		E-mail Address	
City	State	Zip Code	Country	Work Phone		Work E-mail Address	
Contact Information				Fax			
Home Phone		Cellular Phone		Date Filed			
Pager		E-mail Address		Organ Donation:			
Work E-mail Address		Work Phone		Organ Donor <input type="checkbox"/> Yes <input type="checkbox"/> No		State Where Registered	

<input type="checkbox"/> Living Will <input type="checkbox"/> Durable Power of Attorney for Healthcare <input type="checkbox"/> Power of Attorney				Fax			
Document Location(Physical Location)				Contact (Name of person who has access to the document)			

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