

SENIORS CAN

CURRICULUM – 2nd Ed. 2009



By

Claudia C. Collins, Ph.D.
Associate Professor

Heidi Petermeier
Program Officer



University of Nevada
Cooperative Extension

Copyright © 2009, University of Nevada Cooperative Extension. All rights reserved. No part of this publication may be reproduced, modified, published, transmitted, used, displayed, stored in a retrieval system, or transmitted in any form or by any means electronic, mechanical, photocopy, recording or otherwise without the prior written permission of the publisher and authoring agency.

CM 09-05



The stately Saguaro Cactus does not grow its signature arms until it is 70-100 years old.

**S-1 Reducing Accidental Falls, Part 1
Modifying Environmental Risk Factors**

**S-2 Reducing Accidental Falls, Part 2
Modifying Personal Risk Factors**

S-3 Avoiding Consumer Fraud

S-4 Reducing Risks of Crime

**F-1 Strategies for Making Ends Meet:
Cutting Costs**

**F-2 Strategies for Making Ends Meet:
Programs and Money-Saving Options**

P-1 Productivity & Aging

H-1 Reducing Risks of Short Term Illness

N-1 Food Choices for Healthy Aging

N-2 Food as Preventative Medicine

N-3 Hydration

**N-4 Healthy Low-Cost Eating &
Shopping, Part 1**

**N-5 Healthy Low-Cost Eating &
Shopping, Part 2**

FS-1 Food Safety, Part 1

FS-2 Food Safety, Part 2

SENIORS CAN

CURRICULUM – 2nd Ed.

University of Nevada, Reno
Southern Area Cooperative Extension
Seniors CAN
Lesson Plan

Lesson: **Reducing Accidental Falls, Part 1 of 2:
Modifying Environmental Risk Factors**

Lesson Number: **S-1**

Introduction: “Reducing Accidental Falls” is a two-part lesson designed to reduce the risk of Learners becoming victims of accidental falls. Part 1 focuses on modifying environmental risk factors while Part 2 targets modification of personal risk factors.

Learning Overview: The Learner will participate in a lesson designed to teach him/her how to modify his/her home environment to reduce risks that (s)he will have an accidental fall.

Lesson Objectives:

- 1 During the lesson, the Learner will be exposed to the following information:
 - Environmental risk factors associated with falls.
 - Techniques for reducing these environmental risk factors for falling.
- 2 During the lesson, the Learner will engage in group discussion regarding accidental falls, describing with clarity, at least one example from his/her life experience.
- 3 During group discussion, either spontaneously or in response to Facilitator request, the Learner will state with clarity that s/he has selected at least one idea presented during the lesson, what that idea is, and that s/he will try this idea during the following week to see if it works for him/her. Alternatively, the Learner will state with clarity that s/he does not want to try out any of the ideas presented and the reason for the decision.

Set up at previous meeting:

Next week, we will be exploring how to reduce the risk that you will be injured by an accidental fall.

Set up immediately prior to this meeting:

Facilitator may briefly walk through building and around outside entrances prior to the start of the meeting so that Facilitator can begin to become aware of possible risks for falls in the building. The Facilitator can also bring in demonstration items that could cause an accidental fall, particularly in a home, like a throw rug or long electrical cord.

Materials:**Provided by Facilitator:**

- One of the following for each Learner:
 - ▶ Fact Sheet: *Preventing Falls in Your Home* (UNCE, FS 07-24).
 - ▶ Brochure: *Check for Safety: A Home Fall Prevention Checklist for Older Adults* (CDC Foundation & MetLife Foundation, 2005).
- Reach extender or “grabber” (This is a lightweight metal pole about the length of a cane with a gripper on the end that is controlled with a lever. These may be purchased at medical equipment stores and many pharmacies.)
- Small hand-towel for demonstrating how to wipe up liquid spills with reach extender or other items to demonstrate use of the reach extender.

Note: Facilitator should review lesson plan for this week, last week and next week because information provided at the beginning of each lesson plan is needed for a smooth transition between lessons.

Activities:

- Demonstration of and practice with using reach extender.
Optional
- Safety tour of the building where the group is meeting.

References:

Check for Safety: A Home Prevention Checklist for Older Adults. CDC Foundation and MetLife Foundation brochure, 2005.

Preventing Accidental Falls in Your Home. H2U News, October 2005. HCA Healthcare Systems, H2U Newsletter, Sunrise Health.

Roberts, B. L. (1998). *Falls*. In J. J. Fitzpatrick, (Ed.), *Encyclopedia of Nursing Research*. New York: Springer Publishing Co. Pp. 190-192.

U.S. Consumer Product Safety Commission, October 2004. *Safety for Older Consumers: Home Safety Checklist* (CPSC Document #701).
<http://www.cpsc.gov/CPSCPUB/PUBS/701.html> [Accessed 9/14/06].

Frightened of Falling. Dr. Andrew Weil’s Self Healing Newsletter, February 2004.

Lesson

<p><u>Begin Lesson:</u></p> <p><u>Transition from last week</u></p>	<p>Last week we talked about (<i>name of last week's unit</i>). Each of us selected one idea to try out. Let's talk about how those worked (or didn't work) for us, and also what we learned from last week's meeting.</p> <p>If they hesitate, ask one or two questions about last week's topic to encourage discussion.</p>
<p><u>Anticipatory Set</u></p>	<p>Today we will explore reducing the risks of accidental falls. There are three reasons that we think this topic is important:</p> <ol style="list-style-type: none"> 1. One in three Americans over the age of 65 fall every year. 2. Accidental falls are the leading cause of home injury and death for those 65 and older. 3. About 200,000 people fracture their hip each year. Less than half return to full functioning, 30% require long-term care and nearly one third results in death.
<p><u>Share the Objective</u></p>	<ol style="list-style-type: none"> 1) During this meeting, we will be talking about the following information: <ol style="list-style-type: none"> 1) Risk factors associated with falls in your home environment. 2) Techniques for modifying risk factors in your home so that you are less likely to be injured in an accidental fall. 2) During this lesson, I will be providing information, but it is also important that we share information and ask questions in group discussion. I would appreciate it if each of you could bring up at least one example from your life experience. 3) Also during the lesson today, I'm going to ask each of you to select one idea from the lesson to try out on your own over the next week. I'll pick one, too. Then each of us can share with the group next week how it worked out.
<p><u>Share the Handout</u></p>	<p>This summarizes the main ideas we will be discussing today. [<i>Pass out fact sheet.</i>]</p> <ol style="list-style-type: none"> 1) Please feel free to take notes in the margins on the handouts and ask questions as they arise.

Input

- 1 Risk factors:
 - A There are several risk factors associated with falls.
 - B Some of those risks can be reduced through our own initiative, while others cannot.
 - C Each of the risk factors relates to either personal factors or to risks in an older adult's environment. Today we will focus on risk factors in your home environment.
 - D Risk factors in the environment include:
 - i. Inadequate lighting
 - a Older adults require up to three times more light and their eyes do not adjust as quickly to changes in lights conditions, such as those experienced when walking from a brightly lit room to a darker room. Create consistent lighting, add needed lighting fixtures or use a nightlight.
 - ii. Items on the floor
 - a Loose area rugs should be removed from the home. If you insist upon using rugs secure them with double-sided adhesive tape or rubber matting.
 - b Clear any clutter or unexpected objects from the floor.
 - c Watch for cords such as electrical, phone, computer and vacuum cleaner cords. Also watch for dog leashes, garden hoses or oxygen tubes.
 - d Slippery substances such as water on the floor, especially in the bathroom, kitchen and laundry room area can lead to falls. Dry substances such as salt, powdered laundry detergent and even uncooked spaghetti can lead to slipping and falling.
 - iii. Typical problems experienced by seniors in their homes are difficulty getting in and out of the tub or shower, and slipping. Safety proof the bathroom by installing grab bars, using a shower seat or transfer bench and having non-skid strips or decals in the tub or shower. NEVER depend on the towel bar to steady yourself. It is not strong enough.

- iv. Every day older adults trip on stairs they know well. Both in and outside the home always remember to use the handrails for support, look for objects on the steps and add light to a dark stairway.
 - v. Avoid kitchen, garage or storage hazards by storing often used cabinet, closet or shelf items where they are easily reached. NEVER stand on a chair to reach these items or for home repairs like changing a light bulb. Consider using a reach extender, sturdy stepstool or ask for help from a neighbor or friend.
 - vi. Outside the home be cautious of uneven pavement or sidewalks, loose gravel or curb height differences. Also watch for unexpected spills, loose objects, slippery flooring or rubber mats, especially in unfamiliar surroundings.
- E It is important to always pay attention to your surroundings and never be in a hurry as this can cause accidents!

Modeling

And

Guided
Practice

Here are some items for students to check in their homes:

- ◆ Passageways and walkways should be clear. Objects such as loose rugs, debris, electrical cords, furniture or any slippery substances should be removed.
- ◆ Cords should be along walls where people can't trip over them. Pay attention to where phone cords are located. Purchase cordless phones when possible. Also, furniture should be arranged so that outlets are near lamps and appliances. This way, cords are less likely to extend across areas where people walk.
- ◆ Does Learner use an answering machine? Many falls occur when a person is running to answer the telephone. Also, consider whether it is feasible to purchase inexpensive telephones as extensions in various parts of the home, particularly next to the bed.
- ◆ It is safest to remove all rugs, runners and mats since they cause many falls in the home, approximately 6,800 seniors trip each

year (American Association of Orthopaedic Surgeons, 2001). If you won't do that, they should be checked for slip-resistance. If they tend to slide, they should be removed or fixed. They can be anchored with double-faced adhesive carpet tape or rubber matting cut to size. Periodically check for adhesion and wear. Replace if needed. When buying a new rug, look for slip-resistant backing. Washing also causes wear, so you need to periodically check even newer rugs to see if backing needs to be replaced with matting or adhesive.

- ◆ Check whether lamps are working, light bulbs need to be replaced and whether there is a light switch that works to light a room at each entrance. If daytime, try opening curtains that are not currently open. Ask Learners about their pattern of light usage at night. Consider additional lamps. Consider using a nightlight for dark passageways.
- ◆ Ask Learners how they access items on high shelves in the kitchen.
- ◆ Point out that standing on a chair or some other makeshift item to get something from a high shelf is dangerous About 3,000 seniors fall each year from standing on chairs (American Association of Orthopaedic Surgeons, 2001). Consider buying a stepstool, particularly one with handrails you can hold onto while standing on the top step. Make sure any stepstool is fully open and stable before you climb onto it. Tighten any screws or braces. Get rid of stepstools with broken parts.
- ◆ Consider buying a reach extender, which is a long stick with a gripper on the end that is controlled with a lever. This may be helpful for grabbing lightweight items that are not easily broken.
 - ▶ *Demonstrate how reach extender is used, and have Learners practice picking up small, lightweight, unbreakable objects with this tool.*
 - ▶ *Also demonstrate how a liquid spill on the floor might be cleaned up by dropping a small towel on the spill, then moving and lifting the towel with the reach extender. This allows wiping up of a potentially hazardous spill without having to kneel, as some seniors have difficulty rising from a kneeling position. Have Learners practice this.*
- ◆ Look for skid-free mats in kitchen and/or laundry room or where water might be splashed from a sink or other source.

- ◆ In bathrooms, look for grab rails, shower chairs, non skid decals or mats in the tub or shower and skid free mats on bathroom floors, particularly where water might be splashed from the sink or tub.
- ◆ Each bathtub or shower should have one, and preferably two, grab bars. Check existing bars for strength and stability—if they do not seem stable, repair as soon as possible.
- ◆ Grab bars should be attached through the tile to structural supports in the wall. Or, installed bars specifically designed for attachment to the side of a bathtub. If you are not sure how to do this, find someone who is qualified to do this.
- ◆ In the bathroom, the switch should be near the entrance. Consider a nightlight for the bathroom. Consider replacing the light switch with a switch that glows in the dark.
- ◆ In bedrooms, lamps and/or switches should be near the door and the bed. Consider rearranging furniture and using a night-light.
- ◆ For all stairs, inside and out, check lighting. Stairs should be well-lit, but lighting should not cause shadows or glare along the stairway. Make sure stair edges can be easily seen while going up and down stairs—suggest contrasting tape or paint for edges of steps. Be sure to mark steps that are of different sizes than the others—taller, shorter or narrower.
- ◆ Light switches should be at the top and bottom of long stairways. If lighting near stairways is poor, keep operating flashlights at top and bottom of stairs. Install nightlights nearby. It is possible to trip even on stairs you know well.
- ◆ Don't store things on stair steps - even temporarily.

Monitoring /
Discussion

Q: Did you hear anything today when we talked about doing things to prevent falls that you think might be a good idea for you?

Q: Were there any ideas that you didn't like?

Q: Out of all we talked about today, what would be the easiest change to make to your home to reduce the risk that you will have an accidental fall?

Q: What change would be the hardest, and why?

<u>Independent Practice</u>	<p>This can be done at any time during the lesson. It seems to work better when it is not done in the rush at the end of a meeting.</p> <p>"I'd like for each of us to select at least one idea, from what we're learning, to try out this week. Let's choose something easy to experiment with. Next week we can all compare our experiences and see what worked and what didn't."</p>
<u>Closure/ Transition:</u>	<p><i>Look at next week's lesson plan for: "Set up at previous meeting."</i></p> <p><i>It begins: "Next week, we will be exploring . . ."</i></p>

University of Nevada, Reno
Southern Area Cooperative Extension
Seniors CAN
Lesson Plan

Lesson: **Reducing Accidental Falls, Part 2 of 2:**
Modifying Personal Risk Factors

Lesson Number: **S-2**

Introduction: “Reducing Accidental Falls” is a two-part lesson designed to reduce the risk that Learners will be victims of accidental falls. Part 1 focuses on modifying home environment risk factors while Part 2 targets modification of personal risk factors.

Learning Overview: The Learner will participate in a lesson designed to teach him/her how to modify personal factors to reduce risks that s/he will have an accidental fall.

Lesson Objectives:

- 1 During the lesson, the Learner will be exposed to the following information:
 - Personal risk factors associated with falls.
 - Techniques for reducing personal risk factors for falling.
- 2 During the lesson, the Learner will engage in group discussion regarding accidental falls, describing with clarity at least one example from his/her life experience.
- 3 During group discussion, either spontaneously or in response to Facilitator request, the Learner will state with clarity that s/he has selected at least one idea presented during the lesson, what that idea is, and that s/he will try this idea during the following week to see if it works for him/her. Alternatively, the Learner will state with clarity that s/he does not want to try out any of the ideas presented, and the reason for the decision.

Set up at previous meeting:

Next week, we will be exploring how to cope with personal factors associated with falling, such as visual impairment or physical inactivity.

We will also participate in a short exercise activity so bring or wear shoes that are comfortable.

Set up immediately prior to this meeting:

Facilitator determines what type of exercise activity may be most appropriate for the Learners and prepare accordingly. This will be subject to modification based on Learners’ preferences.

Materials:

Provided by Facilitator:

- One of the following for each Learner:
 - ▶ Fact Sheet: *Reducing Personal Risks of Accidental Falls* (UNCE, FS 07-07).
 - ▶ Handouts: Administration on Aging. (2000). *Elder Action: Action Ideas for Older Persons and Their Families—Fitness Facts for Older Americans*. [Online]. <http://wasearch.loc.gov/sep11/20011130234049/http://www.aoa.dhhs.gov/aoa/eldractn/fitfact.html> [Access date: 7/23/08] (See Handout #1 to S-2).
 - ▶ Guide book: *Exercise: A guide from the National Institute on Aging* (Publication No. 01-4258). The publication can be ordered for free by calling 1-800-222-2225.

Provided by all Learners:

- Comfortable exercise shoes.

Note: Facilitator should review lesson plan for this week, last week and next week because information provided at the beginning of each lesson plan is needed for a smooth transition between lessons.

Activities: (if feasible)

- Ten minute walk around the learning facility.
- Discuss a pedometer and have Learner's show its use.
- Demonstrate exercises from *Exercise: a guide from the National Institute on Aging* lead by the Facilitator or the learning facility's exercise instructor with Learner participation.

References:

Administration on Aging. (2001). *Elder Action: Action Ideas for Older Persons and Their Families—Home Modification and Repair*. [Online]. <http://wasearch.loc.gov/sep11/20011130235211/http://www.aoa.dhhs.gov/aoa/eldractn/homemodf.html> [Access date: 7/23/08].

Administration on Aging. (2000). *Elder Action: Action Ideas for Older Persons and Their Families—Fitness Facts for Older Americans*. [Online]. <http://wasearch.loc.gov/sep11/20011130234049/http://www.aoa.dhhs.gov/aoa/eldractn/fitfact.html> [Access date: 7/23/08]

Frightened of Falling, Dr. Andrew Weil's Self Healing Newsletter, February 2004. Q & A on *Tai Chi Benefits*, November 2004.

Aging and Your Eyes, National Institute on Aging, October 2005. www.niapublications.org/agepages/eyes.asp. Web page updated 1/13/2006 and viewed 6/8/2006.

Depression and Older Adults: What it is and how to get help, American Academy of Family Physicians, September 2000. www.familydoctor.org/558.xml?printxml. Web page updated 7/0/2005 and viewed 6/8/2006.

Check for Safety: A Home prevention checklist for older adults. CDC Foundation and MetLife Foundation brochure, 2005.

Older Adults: Depression and suicide facts, NIH Publication No. 03-4593, Revised May 2003. www.nimh.nih.gov/publicat/elderlydepsuicide.cfm. Web page updated 2/17/06 and viewed 6/8/06.

Exercise: A guide from the National Institute on Aging. NIH Publication No. 01-4258, Reprinted September 2007.

Preventing Accidental Falls in Your Home, H2U News, October 2005. HCA Healthcare Systems, H2U Newsletter, Sunrise Health.

Medicines and You: A Guide for older adults, 4/04. Council on Family Health Brochure in cooperation with FDA and AOA.

<p>Lesson</p> <p><u>Begin Lesson:</u></p> <p><u>Transition from last week</u></p>	<p>Last week we talked about <i>(name of last week's unit)</i>. Each of us selected one idea to try out. Let's talk about how those worked (or didn't work) for us, and also what we learned from last week's meeting.</p>
<p><u>Anticipatory Set</u></p>	<p>Last week, we talked about being injured in accidental falls and what a serious problem this can be for older adults. We talked about assessing and making changes in your home to reduce the chances that you will be injured in an accidental fall. We also discussed other environmental risk factors. Today we will explore personal risks associated with accidental falls for several reasons:</p> <ol style="list-style-type: none"> 1) There are individual risk factors that make it more likely that someone will be injured in a fall, like being over the age of 55 or being a woman. Women are more likely to fall than men. 2) It is estimated that about 40 percent of all nursing home admissions are due to accidental falls. 3) Inactivity leads to poor balance and muscle weakness which are crucial to overall health and fall reduction.
<p><u>Share the Objective</u></p>	<ol style="list-style-type: none"> 1) During this meeting, we will be talking about the following information: <ol style="list-style-type: none"> 1) Personal risk factors associated with falls, such as physical inactivity and poor eyesight. 2) Techniques for modifying or coping with personal risk factors that may cause you to be injured in an accidental fall. 2) During this lesson, I will be providing information, but it is also important that we share information and ask questions in group discussion. I would appreciate it if each of you could bring up at least one example from your life experience. 3) Also during the lesson today, I'm going to ask each of you to select one idea from the lesson to try out on your own over the next week. I'll pick one, too. Then each of us can share with the group next week how it worked out.

Share the Handouts

These summarize the main ideas we will be discussing today. *[Pass out handouts.]* Please take notes as we go through the materials and ask questions as they arise.

Input

- 1 Risk factors:
 - A There are several personal risk factors associated with falls.
 - B Some of those risks cannot be reduced through our own initiative.
 - i Being over age 55
 - ii Being female

This means that if you are female, you are more likely to fall. It doesn't mean that all females fall, or that men don't fall. Both older women and older men are at increased risk for experiencing an accidental fall.
 - C Some of the risk factors for accidental falls in older adults that can be controlled include
 - i Visual impairment
 - ii Improper footwear
 - iii Postural Hypotension
 - iv Medications
 - v Multiple diseases
 - vi Depression
 - vii Experiencing a fall in the past
 - viii Inactivity
- 2 How to reduce risks related to personal factors that we have some control over (in some cases we have a lot of control; in others, we have less):
 - i Visual impairment**
 - a Have regular eye exams and have your vision corrected, if needed. Wear properly fitted clean glasses. Some eye disorders/diseases can limit your vision or cause blindness, like age-related macular degeneration or cataracts, so take extra precautions with visual impairments to reduce falls.

ii Improper footwear

- a Choose footwear with closed heels and toes, as they are less likely to catch on something that could possibly cause a fall. Make sure the soles of your shoes and slippers are not too slippery and have good traction. Wear shoes while you are inside and outside of the house and avoid going barefoot.

- ◆ Let's all look at our feet for a minute. How well do the shoes you are wearing protect you from slipping and tripping?

iii Postural Hypotension

- a This is caused by a decrease in blood pressure upon standing up and it makes you feel dizzy or lightheaded when you stand up. Having some hypotension is normal, but it can be severe enough to cause fainting, especially when standing up after being in bed for several days. Hypotension can also increase in severity with various illnesses and medication.
- b One suggestion for reducing dizziness with postural hypotension is to try raising your arms over your head to increase the flow of blood to your brain.
- c If you have been especially inactive due to illness, be careful getting out of bed in case you start to feel lightheaded or dizzy. Get up gradually—sit before you stand and stand a moment or two before you walk. You may wish to use a walker or some heavy, solid object like a large, stable chair to support you in this situation.
- d If for any reason, illness or fatigue for example, you feel unstable on your feet, use a walker or a cane until you feel more stable.

iv Use of medications, both prescriptions and over-the-counter.

- a Medications can produce side effects that vary in different people. Some medications may cause a side effect in one person, but not in another person. Some medications produce side effects such as blurred vision, unsteadiness,

dizziness and postural hypotension (light-headedness upon standing, which we talked about earlier). If you experience side effects like these, then these medicines have the potential to increase your risk of falling.

- b Medications that may have some of those side effects include some, but not all, antidepressants, muscle relaxants, high blood pressure medicine, blood thinners, pain relievers, sedatives and tranquilizers. Within each of these categories of medicines are other medications that help with the same medical problem but may not produce the same side effects. If you report side effects to your doctor, s/he might be able to switch you to a different medicine without the side effects.
- c You should have medication monitored by your doctor regularly. Report any side effects to your doctor. It is possible that the dosage or exact type of medication prescribed can be adjusted by your doctor to eliminate side effects.
- d Also, be aware that if you are taking more than one medication, there may be side effects produced by the interaction of the drugs with each other in your body.
- e In addition to promptly reporting any side effects of medication to your doctor, you should also keep a list of all prescription and over the counter medications that you take and take that list to your doctor's office at each visit so that the doctor can review what you are taking.
 - ◆ Your doctor receives updated information on medications on a continual basis. So even if your visit to the doctor's office is unrelated to other medication, have your doctor review your current medication list while you are there.
 - ◆ Some of you see an assortment of doctors—your primary care physician and specialists. Having a list of all the medications you take, and showing it to all doctors you visit, will help make it less likely that one of your doctors will prescribe a medication that will interact poorly with another medication you are taking.

v Multiple diseases

- a This is a risk factor that we do not have total control over. However, we can reduce the risk of getting some major diseases in the future through the choices about nutrition and exercise that we make now. It is also possible to reduce complications of some diseases, like diabetes, through nutrition and exercise.

vi Depression

- a A person who is depressed may experience inattention, be anxious and in a hurry, fatigued, irritable, impatient or have a misperception of their environment; symptoms that can lead to an accidental fall.
- b Depression is more common than you might think among older adults. A depressed person may experience one or more of the following symptoms:
 - ◆ irritability
 - ◆ chronic aches and pains
 - ◆ ongoing sad, anxious or empty feelings
 - ◆ feelings of guilt, worthlessness or helplessness
 - ◆ early morning awakening or other problems with sleep
 - ◆ appetite problems; weight gain or loss
 - ◆ loss of interest or pleasure in formerly interesting activities
 - ◆ lack of energy; thoughts of death or suicide
 - ◆ memory problems
 - ◆ difficulty in concentration or decision-making
- c If you think you might be depressed, there's no shame in it. Just talk with your doctor about what you are experiencing and discuss treatment options.
- d You can lower your risk for becoming depressed by:
 - ◆ maintaining friendships with people who will be there for you during major life transitions and losses.
 - ◆ becoming physically fit and getting proper nutrition.
 - ◆ keeping active both mentally and physically
 - ◆ developing hobbies and interests.

- ◆ telling your doctor about problems you have with medications and illnesses.

vii Experiencing a fall in the past

- a It is possible that experiencing one fall makes a person more fearful of falling again in the future. This may cause older persons to restrict their physical activity, or to become more rigid or overly cautious about walking. This fear of falling may actually increase the likelihood that one may fall again in the future. It may also cause older persons to become increasingly dependent or depressed.

viii Inactivity

- a Inactivity leads to poor balance and muscle weakness, which are crucial for overall health and fall reduction.
- b When we do not exercise, muscles become smaller and weaker, and fat replaces muscle. Weak muscles make us more prone to falls because they cannot help to protect our joints or provide the strength and balance we need.
- c People who do not exercise are more likely to be severely injured if they do fall. Without exercise (and proper nutrition, as we *have discussed in recent/will discuss in future* lesson plans) our bones tend to become thin and porous and may lead to osteoporosis, which causes our bones to break easily. Proper exercise and nutrition can help ward off or slow osteoporosis.
 - ◆ As (*we have discussed/we will discuss*) adequate calcium is essential for strong bones. You may also be interested in knowing that soy, which you can purchase rather inexpensively as tofu, may also help prevent osteoporosis. Soy has naturally occurring chemicals that are similar to estrogen which may help to protect your bones from osteoporosis.
- d There was a time when it was considered “accepted knowledge” that older people could not increase their muscle strength. However, studies have shown that this simply isn’t true.
 - ◆ One study of frail older people in their late 80’s and 90’s showed that after six weeks of weight training,

they had increased their muscle strength on average by 180 percent.

- e We are talking about exercise today because we are talking about how to prevent an accidental fall. If you exercise, you can increase your balance, strength and mobility, and this helps to prevent falls. Exercise can also:
 - ◆ help to prevent osteoporosis.
 - ◆ strengthen your heart.
 - ◆ help you to maintain lung capacity.
 - ◆ help to slow or prevent the build-up of cholesterol in your arteries.
 - ◆ help to prevent hardening of the arteries.
 - ◆ help to reduce high blood pressure, which is a major risk factor for heart attack and stroke.
 - ◆ help to control diabetes.
 - ◆ improve the functioning of vital organs such as the liver.

- f Four types of exercises that help older adults gain health benefits include endurance, flexibility, balance and strength. Walking is a good exercise because:
 - ◆ it can be done at a pace that you set.
 - ◆ it takes good walking shoes, but no other equipment.
 - ◆ it can be done when and where you want.
 - ◆ it strengthens muscles in the lower body.
 - ◆ it helps build new joint bone and tissue.
 - ◆ it helps to prevent or slow down osteoporosis.
 - ◆ it enhances your mood.

- g If you decide to begin an exercise program, start off slowly and increase exercise gradually. Some people over-exert themselves when they start exercising. You should check with your doctor before starting any exercise program.
 - ◆ The Administration on Aging says:
 - “Studies have found that violent physical exertion is no more useful to gaining and maintaining fitness than is moderate exercise. What is more, violent physical exertion can result in increased

risk of injury or heart attacks for those who are not in prime physical condition. So start off slowly and go slow with your new exercise program.”

- Don't start or stop exercising abruptly. Take time to warm up beforehand and cool down afterward.
- Don't do any strenuous workout during hot, humid weather or within two hours after eating. In the Las Vegas summers, early morning (sunrise) is the coolest time of day to exercise. Also, some air-conditioned malls open early for walkers.
- Be aware of the warning signs of overexertion. If you have any of these check with your doctor as soon as possible:
 - Inability to talk
 - Dizziness
 - Disorientation
 - Nausea
 - Pains in chest, upper back, left shoulder, or arm

Handout: I have passed out an article to you from the Administration on Aging on fitness for older adults. This article has much of the information on exercise we have just talked about. It also has information about choosing and starting out exercise programs and a method for you to use to determine the right intensity of your exercise.

Guide Book: I am also passing around an exercise guide from the National Institute on Aging. It has a lot of good information in it about exercise for seniors and it includes exercises on strength and balance, as well as chapters on safety, motivation, progress and nutrition. If free copies for the class were not available, write the toll-free number on the cover for Learners to make a note of if they are interested in ordering a free copy.

Modeling

And

I mentioned last week that we could take a short walk just to get a little fresh air and exercise (or introduce the pedometer or exercise demonstration). Did everyone wear or bring comfortable shoes?

<u>Guided Practice</u>	<i>When everyone is ready, facilitator and group will take part in the exercise activity.</i>
	<i>Upon completion: How does everyone feel? Let's discuss what we talked about today.</i>
<u>Monitoring / Discussion</u>	<p>Q: The purpose of our activity was to get a little exercise to improve our balance and mobility. How many of you currently exercise? What are some of the activities you do?</p> <p>Q: Did you see or hear anything today when we talked about preventing falls that you think might be a good idea for you?</p> <p>Q: Were there any ideas that you didn't like?</p> <p>Q: Of all we talked about today, what would be the easiest change for you to make in order to reduce the risk that you will have an accidental fall?</p> <p>Q: What change would be the hardest, and why?</p>
<u>Independent Practice</u>	<p>This can be done at any time during the lesson. It seems to work better when it is not done in the rush at the end of a meeting.</p> <p>"I'd like for each of us to select at least one idea, from what we're learning, to try out this week. Let's choose something easy to experiment with. Next week we can all compare our experiences and see what worked and what didn't."</p>
<u>Closure/ Transition:</u>	<p><i>Look at next week's lesson plan for: "Set up at previous meeting."</i></p> <p><i>It begins: "Next week, we will be exploring . . ."</i></p>

University of Nevada, Reno
Southern Area Cooperative Extension
Seniors CAN
Lesson Plan

Lesson: **Avoiding Consumer Fraud on the Phone and at the Door** Lesson Number: **S-3**

Overview: The “Avoiding Consumer Fraud on the Phone and at the Door” lesson is designed to reduce the risk that Learners will be victimized by fraudulent telemarketing, door-to-door consumer scams and identity theft.

Learning Overview: The Learner will participate in a lesson designed to teach him/her through role-playing, specific techniques and skills to avoid phone and door solicitations.

Lesson Objectives:

1. During the lesson, the Learner will be exposed to the following information:
 - Reasons older adults may be targeted by con artists.
 - Some examples of fraudulent consumer scams at the door or on the phone.
 - Techniques for avoiding consumer fraud at the door or on the phone.
 - Ways to prevent identity theft.

1. During the lesson, the Learner will engage in group discussion regarding telephone and door-to-door solicitation, describing with clarity at least one example from his/her life experience.

2. During group discussion, either spontaneously or in response to Facilitator request, the Learner will state with clarity that s/he has selected at least one idea presented during the lesson, what that idea is, and that s/he will try this idea during the following week to see if it works for him/her. Alternatively, the Learner will state with clarity that s/he does not want to try out any of the ideas presented, and the reason for the decision.

Set up at previous meeting:

Next week, we will be exploring how consumer fraud through telemarketing and door-to-door solicitation can be avoided with tips to protect against identity theft.

Set up immediately prior to this meeting:

- Prior to the meeting, the Facilitator (using the guided practice examples below) may prepare for the role playing activity. Or the Facilitator may want to have an open discussion about current scams. These can be found on TV news reports, from the local police department, newspaper articles, a “phishing” email example, online searches and most importantly, participant’s consumer fraud experiences.

Materials:Provided by Facilitator:

- One of the following for each Learner:
 - ▶ Fact Sheet : *Preventing Crime in Your Home* (UNCE, FS 01-26).
 - ▶ Handouts: *Avoiding Consumer Fraud on the Phone and at the Door* (Seniors CAN Curriculum Handout, 2008).
 - ▶ Letters: *Credit Report Security Freeze Request* information sheet and three sample letters (Nevada Attorney General's Office and UNCE, 2007).

Note: Facilitator should review lesson plan for this week, last week and next week because information provided at the beginning of each lesson plan is needed for a smooth transition between lessons.

Activities:

- Role playing.
- Class discussion on current scams.

References:

Elder Law News. (2002). *New Campaign Warns Seniors about Fraud*. Kim Boyer, Certified Elder Law Attorney.

National Institute on Aging. (2005). *Health Quackery: Preventing Health Scams* [Age Page]. Gaithersburg, MD.

FTC Facts for Consumers. (2005). *Your Access to Free Credit Reports*. Federal Trade Commission.

Identity theft Fact Sheet. (2005) *What is identity theft*. Las Vegas Metropolitan Police Department Crime Prevention.

Consumer Sentinel. (2006) *Consumer Trends: Fraud and Identity Theft Complaints for Consumers over age of 50*. <http://www.consumer.gov/sentinel/trends.htm> (Accessed 8/1/08)

Federal Trade Commission. (2007). *Putting Telephone Scams on Hold* [Brochure].

Nevada Attorney General's Office. (2007). *Identity Theft Laws in Nevada*. <http://ag.state.nv.us/idtheft/info/laws.htm> (Accessed 8/20/08).

Lesson

<p><u>Begin Lesson:</u></p> <p><u>Transition from last week</u></p>	<p>Last week we talked about (<i>name of last week's unit</i>). Each of us selected one idea to try out. Let's talk about how those worked (or didn't work) for us, and also what we learned from last week's meeting.</p>
<p><u>Anticipatory Set</u></p>	<p>Today we will explore how to avoid consumer fraud in telephone and door solicitations. We think this topic is important because:</p> <ul style="list-style-type: none"> • Each year, Americans lose \$100 billion to consumer fraud. People can lose any amount of money—from a few dollars to their life savings. • According to a survey conducted for the National Consumers League, fraudulent telemarketers have approached 9 out of 10 Americans. According to another survey, conducted for the American Association of Retired Persons, three-fourths of consumers say they have had a bad buying experience within the last year, in which they were deceived, defrauded or ripped-off. And one in seven reports that at least once, they went beyond having a bad buying experience and were victims of a major fraud. • Older consumers may be special targets of people soliciting money for fraudulent purposes. People over age 65 account for 30 percent of reported consumer fraud, yet make up only 15 percent of the population. And the amount of consumer fraud <i>reported</i> may be much less than what actually <i>occurs</i>. People who have fallen for a con artist's scam might not report it because they feel embarrassed about it. • According to the Federal Trade Commission, an estimated 10 million Americans are victims of some form of identity theft every year.

<p><u>Share the Objective</u></p>	<ol style="list-style-type: none"> 1) We will be talking today about several ideas related to consumer fraud. These are: <ol style="list-style-type: none"> 1) Reasons older adults may be targeted by con artists. 2) Some examples of fraudulent consumer scams. 3) Techniques for avoiding consumer fraud and identity theft. 2) During this lesson, I will be providing information, but it is also important that we share information and ask questions in group discussion. I would appreciate it if each of you could bring up at least one example from your life experience. 3) Also during the lesson today, I'm going to ask each of you to select one idea from the lesson to try out on your own over the next week. I'll pick one, too. Then each of us can share with the group next week how it worked out.
<p><u>Share the Handout</u></p>	<p>This summarizes the main ideas we will be discussing today. <i>[Pass out handout.]</i> Please feel free to take notes on the handouts and ask questions as they arise.</p>
<p><u>Input</u></p>	<ol style="list-style-type: none"> 1 Reasons older adults may be targeted by con artists: <ol style="list-style-type: none"> A Loneliness <ol style="list-style-type: none"> i Older adults who have lost friends and family members may miss talking with others, making them more receptive to conversations with friendly solicitors. ii Beware of con artists who call you or stop by your house to see you more than once—they may be trying to make you feel as if they are friends, rather than strangers, trying to sell you something. B Problems in vision and hearing <ol style="list-style-type: none"> i Make it harder to read contracts and literature, harder to hear the solicitor. C Illness <ol style="list-style-type: none"> i May be motivator in looking for miracle cure or low-cost Medicare supplement insurance.

D Limited income

- i May produce feelings of insecurity about the future, making the senior an easier target.
- ii The con artist may offer free gifts or prizes or vacations. He or she may offer the “investment of a lifetime.” It may sound like a very good deal.

E Possibility of large amounts of cash on hand

- i Can be due to mistrust of banks, savings & loans
- ii Cash may come from a lifetime of saving or from a lump-sum pension distribution or life insurance payment.
- iii Large amount of cash on hand makes it easier for an older person to make a quick decision. And a quick decision is what a con artist will usually push for. You may be offered investment opportunities, free gifts or prizes “only if you act right away.”

F Retired people may be home more often than younger adults

- i This makes them more available as targets than younger adults.

G Many older adults own their own homes or have a lot of equity built up in their homes.

- i Some changes in tax law have created the possibility of loans secured by home equity and con artists may take advantage of this situation with home equity loan scams.

H Some older adults were raised to be more polite and trusting toward strangers than some younger adults have been raised to be.

- i It can be very hard to know when a call is legitimate. Con artists are very good at sounding believable when they are actually lying.
- ii It may be difficult to get salespeople off the phone or away from your door without fear you might seem to be rude.

2 **Some examples of fraudulent consumer scams:**

New scams are constantly being developed by con artists. We focus today on fraudulent offers that come to you over the phone or at your door. But you should also be aware that these scams may reach you by mail, through television “infomercials” or the internet. Here are some examples of scams:

A **Home Repairs**

- i Often someone comes to your door and offers a quick fix and the bid may seem low-cost.
- ii Services offered could be of any type and might include roof repair, trimming tree branches or repaving the driveway.
- iii Payment is often asked for in advance.
- iv The work paid for is never performed, or is done far below normal work standards.

B **Miracle Cures/Vitamins**

- i The seller makes all sorts of claims. Even if you do get a product, it doesn’t do what you were told it would. Or you may receive, for example, very inexpensive vitamin pills for which you paid a substantial amount of money. These are common scams for television infomercials, which also convince you to buy what you do not need.

C **Health Insurance**

- i Claims to be the perfect Medicare supplement insurance and claims to cover everything you ask about. The premium seems to be low. There may be hidden charges and the coverage may not really exist, or may cover very little.

D **Inexpensive vacation property or travel packages:**

- i You may end up buying something that doesn’t exist.
- ii There may be all sorts of “hidden costs.”

- iii You may end up paying two to three times what the vacation actually costs.

E Prize offers

- i You are notified that you are guaranteed to win a large cash prize or some other prize, such as a free vacation.
- ii Sometimes the organization uses a name that is similar to a well-known organization.
- iii In order to get the “free” item, you have to do something.
 - a You may have to purchase something else or pay “shipping and handling charges” or some other type of fee to acquire the item. The “free trip” actually requires some costs be paid and has many restrictions.
 - ◆ Keep in mind that in a legitimate prize promotion, the winner cannot be required to pay an “acquisition fee” or to purchase any items in order to collect the prize.
 - b You may be required to call a number to claim your prize. Chances are, you won’t get a prize, you will get something far less than expected, or will find out you have to pay for something. In the meantime, two other things can happen:
 - ◆ You could get a huge phone bill for the call if it was to a 900 number.
 - ◆ Your name, address, and/or phone number may be sold to other companies as someone who responded to a free prize offer. You could unwittingly open yourself up to many more worthless prize offers.

F Investments

- i Promoters of fraudulent “investment opportunities” have many techniques for appearing legitimate. These appeal to people’s desire to get rich quick.

G Charities

- i Some legitimate charities do ask for contributions by phone. But fraudulent charities do the same thing.
 - a A fraudulent charity may not really exist. Also, charities may assume a name similar to a reputable charity in order to lend some credence to their organization.
 - b A fraudulent charity may pay a large part of the donated money to the soliciting organization rather than on the charitable services described.

H Recovery scams

- i If you lose money in a consumer scam, you may get a call from someone who promises to get your lost money back for you. You can lose even more money by paying someone who says they will recover the money you lost. According to the Nevada State Attorney General's office, this is a common scam.

J Other door-to-door or phone scams can include:

magazine subscription scams, people posing at the door as utility workers or in need of your help who want to gain access to your home, credit card offers, Medicare scams, fake check scams or fraudulent bank and credit card protection calls, also shop-at-home/catalog sales.

K Seniors account for 26 percent of all **mail fraud** victims and account for 60 percent of those who fall victim to the category of prizes and sweepstakes by mail.

L Of reported fraud complaints in 2005 to the Sentinel, 37 percent were **internet** related. Scams can include "phishing" where con artists use official looking email or websites to get your personal data. Internet scams can also include foreign money offers (Nigerian is common), on-line auctions or lottery scams (also by mail).

3 Techniques for avoiding consumer fraud

A **Basic concept:** If it sounds too good to be true, it probably is. You don't get something for nothing!

B **Basic rules to follow**

- i Don't buy by phone or at your door from unfamiliar companies.
- ii Always take your time making a decision.

C Techniques

i **Remove your personal information:**

To reduce the number of telemarketing calls you receive, register your phone number with the **FTC's National Do Not Call Registry**. Register permanently by phone at (888) 382-1222 or online at www.donotcall.gov.

To receive less commercial advertising mail, register for the **DMA's Mail Preference Service**. This will reduce unsolicited mail within three months, for three years, but will not stop all mailings. They offer a "do not contact list" for the deceased and caregivers, as well as an option to remove your email from national lists. Contact DMA at www.dmachoice.org or 1-212-768-7277 or by mail (send a letter with your request, signature and \$1.00 fee):

Mail Preference Service
Direct Marketing Association
PO Box 643
Carmel, NY 10512

- ii **Learn to say "No," and mean it.**
- iii **Recognize ploys that are sometimes used by con artists. Here are some typical ones:**
 - a You must act now for the offer to be good
 - b You've won a free gift, or a prize or a vacation—you pay "only" for certain charges like postage and handling.
 - c Before you have had time to consider the offer carefully, you are told that you must send money, give a credit card number, give a bank account number or have a check picked up by a courier.
 - d You don't need to check out their company with anyone, including your family. You don't need any written information about their company or their references.

- iv **If you never buy from, invest in or donate money to any organization or person contacting you by phone or at the door, you will not lose any money to con artists contacting you by phone or at your door. It's that simple.**
- v **If you do not allow phone and door solicitors to get into conversations with you, they cannot talk you into parting with your money.**
 - a The longer you allow them to talk with you, the more chances they have to get you to say "Yes."
- vi **Hang up quickly on unfamiliar callers. You don't have to open the door for unfamiliar visitors.**
 - a You may want to screen telephone calls through an answering machine or by using caller identification.
 - b You don't have to answer your door to anyone you don't recognize, or, for that matter, to anyone you do recognize.
 - ◆ The phone, cable, gas, and electric companies call to make appointments to get into your home—or, you call them.
 - c Remember that it is your right to hang up your phone at any time. It is your right to close the door to your home when you choose to.
 - ◆ You do not need to wait until the person on the phone or at the door pauses or finishes his sentence.
 - ◆ You do not need to answer any questions.
 - ◆ You do not need to explain yourself.
 - d As soon as you realize that the person calling, or at your door, is selling something, asking for a charitable donation or telling you that you have "won" something free, say **"No thank you,"** or **"I'm not interested."** **Then hang up the phone or close the door.**
- vii **If you decide that you do wish to deal with a solicitor over the telephone or at the door, set some rules for yourself and then follow them.**

- a Set a rule now giving yourself a minimum amount of time to think over purchases, investments, or donations before committing to them—and then stick to your rule.
 - ◆ For example, decide that you will always give yourself 48 hours to think over any offer or request that comes to you by door or phone before making a final decision.
 - ◆ Any legitimate business, service provider, or charity will understand your need or desire to do this, and will not pressure you.
 - ◆ Con artists, on the other hand, are highly likely to pressure you for a quick decision (*e.g.*, “This opportunity won’t last!”). They don’t want you to have the time to think things over before you part with your money.
- b Ask to receive more information in writing.
 - ◆ But be sure you’re interested enough to give out your address.
- c Discuss offers and investment opportunities with a trusted advisor, for example, a family member, a friend you know well, your attorney, an accountant.
- d Check out organizations with other sources before you buy from, donate to, or invest money with them.

D Identity theft

i According to the Federal Trade Commission, an estimated 10 million Americans are victims of some form of identity theft each year. The loss to business is estimated at more than \$33 billion/year and consumers spend countless hours and money to rectify the damage done to their good name and credit report.

Identity theft occurs when a thief obtains person and/or financial information about you and then uses it without your knowledge to commit fraud or theft, like opening a credit card account in your name.

- ii What can you do to prevent identity theft from happening to you?
- a. Shred all discarded personal information; a cross-cut shredder is best.
 - b. Do not give out personal information via the phone, internet or by mail unless you can verify who will be using this information and why.
 - c. Keep an accurate account of your financial information in safe place.
 - d. Never put your mail in the outgoing mailbox as it may be stolen.
 - e. Limit the number of credit cards you carry and **NEVER** carry your Social Security card in your wallet.
 - f. Obtain a copy of your credit report at least once a year. A **free credit report** is available from each reporting agency once/year by calling (877) 322-8228 or online at www.annualcreditreport.com
 - g. A **credit report security freeze** helps provide you with protection from identity theft because your credit bureau file cannot be shared with potential creditors. Most businesses check a consumer's credit history before opening any new credit accounts. With your security freeze in place, even someone with your name and Social Security number would probably not be able to get credit in your name. Any consumer may place a "security freeze," also known as a "file freeze," on his or her credit report by making a request in writing to each credit reporting agency. For more information visit: www.FinancialPrivacyNow.org [See handout].

Let's practice some of these ideas. We are going to do several role-plays.

Modeling

1. **Telephone Role-Play #1**

And

First, I'll play the part of someone calling on the telephone.

Guided
Practice

I need someone from the group to pretend that they are the person getting the call.

For this role-play, I need you to pretend that you are an older person by the name of Viola (*Victor*) Smith. Viola has lived by herself for several years. Her family lives 800 miles away and the two close friends she had in her neighborhood died during the last three years. Sometimes Viola will go a whole day, or even several days, without talking to another human being. Although she enjoys watching TV and reading magazines, she sometimes wishes that she could chat more often with family and friends on the phone.

When Viola first hears my voice over the telephone, she thinks I remind her of her daughter (*son*), whom she often wishes would call her more often.

Viola has no idea whether I am a legitimate business person or a con artist. She feels good about the fact that someone has called her on the phone.

2. **Door Role-Play #1**

For this next one, I'll be someone who knocks on the door. Can I have (*Learner in whose home the group is meeting*) play the part of Henry (*Henrietta*) Jones?

Henry, you live in this house. You are an older person on a limited income. You are bothered by arthritis and you find that it's a problem to do some of the repair and maintenance work you used to do on the yard (*or house, or car*) yourself. It bothers you to not keep your yard in good condition, but it's expensive to hire other people to do it.

Henry, you lived through the Great Depression. When you open your door to me and you hear what I propose, I remind you of how hard people worked to feed their families during the Depression, and you admire me for how hard I am trying.

3. Telephone Role-Play #2

For this role-play, I'm again going to be calling someone on the phone. This time, I'm not trying to defraud you. I work for a company that calls people asking for donations to a legitimate charity. But I'm over-eager, and not really too good at representing the charity. The person I call, of course, has no way during the phone conversation to really know whether or not I'm legitimate.

The person I'm calling is Sadie (*Sam*) Shoe. Sadie was raised to be very polite to others. She also believes in donating a little to charity each year because she was brought up believing that it's the right thing to do. When she gets my phone call, she hasn't donated any money to charity so far this year.

<p><u>Monitoring / Discussion</u></p>	<p>Q: How do you usually respond to unfamiliar people calling you or at your door?</p> <p>Q: Do you have any thoughts on how you might respond differently than you do now?</p> <p>Q: Are you going to take any action steps, like registering with the Do Not Call list that we discussed today?</p>
<p><u>Independent Practice</u></p>	<p>This can be done at any time during the lesson. It seems to work better when it is not done in the rush at the end of a meeting.</p> <p>"I'd like for each of us to select at least one idea, from what we're learning, to try out this week. Let's choose something easy to experiment with. Next week we can all compare our experiences and see what worked and what didn't."</p>
<p><u>Closure/ Transition:</u></p>	<p><i>Look at next week's lesson plan for: "Set up at previous meeting."</i></p> <p><i>It begins: "Next week, we will be exploring . . ."</i></p>

University of Nevada, Reno
Southern Area Cooperative Extension
Seniors CAN
Lesson Plan

Lesson: **Reducing Risks of Crime**

Lesson Number: **S-4**

Introduction: The “Reducing Risks of Crime” lesson is designed to help Learners understand ways to reduce the risk that they will become crime victims.

Learning Overview: The Learner will participate in a lesson designed to teach him/her techniques to reduce the risk that he/she will become a victim of crime. Factual information regarding the incidence of violent crime toward seniors should lessen self-imposed isolation due to disproportionate fear of crime.

Lesson Objectives:

- 1 During the lesson, the Learner will be exposed to:
 - Information regarding the risks that seniors will become victims of violent or other types of crime.
 - Techniques for reducing risk of crime victimization at home and in the community.
- 2 During the lesson, the Learner will engage in group discussion regarding crime and/or crime risk reduction, describing with clarity at least one example from his/her life experience.
- 3 During group discussion, either spontaneously or in response to Facilitator request, the Learner will state with clarity that s/he has selected at least one idea presented during the lesson, what that idea is, and that s/he will try this idea during the following week to see if it works for him/her. Alternatively, the Learner will state with clarity that s/he does not want to try out any of the ideas presented, and the reason for the decision.

Set up at previous meeting:

Next week, we will be exploring how we can reduce the risk of becoming victims of crime. *Optional:* "We will have a guest speaker from the local police department."

Set up immediately prior to this meeting:

Facilitator briefly walks through building and around outside prior to the start of the meeting so that Facilitator can begin to become aware of possible security problems in the building.

Materials:
Provided by Facilitator:

One of the following for each learner:

- Fact Sheet: *Reducing Risks of Crime* (UNCE, FS 01-13).
- Checklist: *Home Security Checklist* (LVMPD, 2008).
- Examples of home security items: A double cylinder deadbolt lock, spring lock, rim lock, deadbolt lock with a one-inch throw, wide-angle lens peephole, Non-removable door hinge, “Charlie Bar”, wooden dowel or broomstick, assortment of nails and screws of various sizes and thicknesses, lock for latch on casement window.

Note: Facilitator should review lesson plan for this week, last week and next week because information provided at the beginning of each lesson plan is needed for a smooth transition between lessons.

Activities:

- If possible, a member of the local police Crime Prevention Unit will speak to the group.
-

References:

American Association of Retired Persons. (2008). *Be a Wise Consumer* [Accessed: 8/4/08]. http://www.aarp.org/money/wise_consumer/.

National Crime Prevention Council. (2006). *McGruff Safer Seniors Kit* [Brochure].

Las Vegas Metropolitan Police Department. (2003). *Crime Prevention Hints for Senior Citizens* [Brochure]. Las Vegas, NV.

National Institute on Aging (Age Page). (2006). *Crime and Older People* [Brochure]. Gaithersburg, MD.

Lesson

<u>Begin Lesson:</u> <u>Transition from last week</u>	<p>Last week we talked about <i>(name of last week’s unit)</i>. Each of us selected one idea to try out. Let’s talk about how those worked (or didn’t work) for us, and also what we learned from last week’s meeting.</p>
<u>Anticipatory Set</u>	<p><i>(Begin with these discussion questions with Learners):</i></p> <ul style="list-style-type: none"> ◆ How likely do you think it is for an older adult to become a victim of crime? ◆ How many of you restrict what you do on a day-to-day basis due

	<p>to concern that you might become a crime victim? (<i>If yes</i>): Could you give some examples to the group?</p>
<p><u>Share the Objective</u></p>	<ol style="list-style-type: none"> 1) We will be talking about how crime is most likely to affect senior citizens. We will also discuss techniques for reducing the risks that you will become victims of crime. 2) During this lesson, I will be providing information, but it is also important that we share information and ask questions in group discussion. I would appreciate it if each of you could bring up at least one example from your life experience. 3) Also during the lesson today, I'm going to ask each of you to select one idea from the lesson to try out on your own over the next week. I'll pick one, too. Then each of us can share with the group next week how it worked out.
<p><u>Input</u></p>	<ol style="list-style-type: none"> 1 Here's some information about crime and older people. <ol style="list-style-type: none"> A From the Las Vegas Metropolitan Police Department: <ol style="list-style-type: none"> i. Generally, older persons are not victimized by crime to a greater extent than the rest of the population, except in crimes such as purse snatching. ii. Crimes of violence, although feared the most, happen the least. iii. Most murders and assaults are committed by relatives or acquaintances as the result of a dispute. Very few are committed by strangers. iv. Despite widespread fear, the crime of rape rarely happens to women over 65. In fact, only about one percent of all known rape victims are women over 50. v. The most frequent crimes are property crimes, such as burglary and theft from yards and are most likely to happen when residents are away. B From other sources, such as the U.S. Justice Department: <ol style="list-style-type: none"> i. People over the age of 65 have lower overall rates of becoming crime victims than other age groups, especially when compared to 12 to 25 year olds.

- ii. Older people in urban areas are, however, more likely than other groups to be victims of something known as “personal larceny with contact,” and that includes purse-snatching and pick-pocketing.
- iii. Older adults in urban areas are no more likely than other adults to be victims of robbery.
- iv. The homes of older adults in urban areas are less likely to be burglarized than those of younger families.

C Does any of this information come as a surprise?

Sometimes, because of media attention to crime, people get the mistaken impression that crime is unavoidable, happens everywhere, and that older people are the prime targets. This isn’t true. The elderly are less likely to be victims of crime than are teenagers or young adults.

- D Sometimes, people’s fear of crime becomes so overblown that it paralyzes them into staying home, in effect, isolating themselves and enjoying their lives less.
- E It’s important to recognize that there are steps you can take to reduce the risk that you will become a crime victim.

2 Here are some techniques for avoiding crime both in the community and at home.

A **Avoiding crime in the community**

- i **While Walking**
 - a Stay alert when you are on the street, in your own neighborhood and even at your own door.
 - b Avoid walking at night, especially alone. If you must walk at night, stay in well-lit, open areas and walk close to street lights.
 - c Day or night, stay away from dark alleys, dark parking lots and dark corners. Avoid areas where an assailant might hide, such as dark passageways, shrubbery and spaces between parked cars.

- d Day or night, walk with a friend, if possible. Both men and women are safer in the company of someone else.
- e If anyone bothers you while you are out walking, ignore them. Don't engage in conversation or try to be polite. If they persist, tell them in a loud voice, showing anger, to leave you alone. According to the Las Vegas Metropolitan Police Department, "a loud voice and a show of anger will usually be effective. One of the first defenses against this sort of aggravation would be a loud whistle or scream." Based on this, you may want to carry a whistle with you.
- f If you are followed, run to the nearest place you can find people. Don't be afraid to knock on somebody's door.
- g Don't walk with good jewelry, furs or other items of value. In other words, don't be a flashy dresser – otherwise, you might tempt a robber. Leave these items someplace safe.
- h Don't carry a purse. Purses are easily snatched when you are carrying them. Also, it's easy to place a purse down in a grocery cart, at a casino or a beauty salon, where it can easily be stolen.
- i If you do carry a purse and someone is trying to steal it from you just sit down. Sitting down on the sidewalk will eliminate your risk of being injured by being knocked down by an aggressor and also draws attention to you.
- j An alternative suggested by LVMPD is to actually carry a wallet or purse with nothing valuable in it. You give it to the robber and he runs -- he is not likely to stand there with you while he checks through your purse or wallet. The robber is less likely to hurt you, as he isn't continuing to stand there with you while you dig through pockets for valuables.
- k Don't carry a lot of cash or more credit cards than you need.

- l Put money, credit cards and/or wallet in an inside pocket of your clothing. Even if you insist on carrying a purse, put money, credit cards, and/or your wallet someplace other than in your purse.
 - m Carry keys in a pocket, not a purse. If your purse is stolen, you will still have your keys. Don't put your name or address on your keys, because if they are stolen or lost, they will inform a thief who you are and where you live.
 - n For people who insist on carrying a purse, consider a sound alarm. This is available at a security store and looks like a pager. When you take the peg out it makes a horrendous noise. Hook the pager (alarm) part to a purse and attach the peg to your belt. If the purse gets snatched, the alarm will sound encouraging the thief to drop the purse. You can also use this device adapted to a door of home as a type of burglar alarm.
 - o Placement of a rubber band around a wallet is a deterrent to pickpocketing because the rubber band creates resistance.
 - p Have Social Security or monthly pension checks sent to your bank account by direct deposit.
 - q If you go to the bank often, don't go at the same time each day. Add some variation to your schedule.
 - r If anyone steps behind you at ATM, step away—say: "You go first, I forgot my card."
 - s If you are stopped by a robber, hand over any cash you have. Hand over your purse if you are carrying one. Don't resist the robbery because you will be risking injury to yourself.
- ii **While driving**
- a Drive with the car windows up and all the doors locked.
 - b Keep car in good operating condition.

- c Never allow gas tank to get below half full.
- d Do not pick up hitchhikers.
- E If you become the victim of a carjacking, hit a telephone pole or brick wall (have your seatbelt on) or do something else to bring attention to you and your car. Remember, the thief doesn't want to get caught.
- f If you have trouble with your car, stay inside with windows up and doors locked. Turn on emergency flashers. Or tie a white handkerchief to antenna or door handle. Have a pay as you go cell phone for these types of emergencies.
- g Avoid driving alone at night, if possible. It is safer to drive at night with someone you know.
- h For safety reasons, people who live alone should go to the store with a friend who lives nearby—arrange to do their grocery shopping together. Riding to the store with someone else helps both of you for safety reasons. If you do go alone, always let someone know where and when you are going and when you plan to return home.
- i Police suggest that the following precautions be taken if valet parking is used:
 - ◆ Only give the valet your car key, not all your keys. Be aware if your car's ignition key also locks or unlocks the glove box.
 - ◆ If you keep your car registration (which has your address) in your car, lock it in your glove box.
 - ◆ Also lock in your glove box your garage door opener and anything else you don't want stolen.

B Avoiding crime at home

- i. Always keep doors and windows locked, when at home and when away.
- ii. Make sure that locks, windows and doors are strong and cannot easily be broken. The best locks are double cylinder deadbolt locks. Next best are securely mounted

deadbolts with a one-inch throw or rimlocks. Spring locks or any type with a button are, on the other hand, easy for a burglar to force.

(Show group examples of each type of lock.)

- iii. Consider using an alarm system.
- iv. Always look to see who is at your door before you answer it. Use a peephole or a safe window. If you don't have a peephole, consider getting one, because they are inexpensive and easy to install.

(Show group example of an uninstalled peephole.)

- a. If the person is a stranger, you do not have to open the door. You can keep it closed and locked. Don't make the mistake of opening the door to a stranger with just a chain guard on the door for protection—these are easily broken.
- b. Ask any stranger to tell you his or her name as well as to show an official picture ID indicating that he is from the company he says he is from. If you were not expecting this person, ask him or her to wait outside while you call the company.
- c. One method for stealing -- Someone comes to the door and says they are from the telephone company and that they need to check your line. They come in, start coughing, and ask for a glass of water. While you get them the water, they pocket your valuables. They often also ask if there are other phone jacks in the house in order to get to valuables in other rooms.

Do not open the door unless you are positive this person is who s/he says s/he is.

- v. If you live alone, you should use a buddy system with a friend or neighbor. Check on each other once a day; often when an isolated person is a victim of crime, no one knows about it for days.
- vi. Consider lighting:
 - a. If you leave and expect to come home after dark,

- leave on a few lights and have your keys ready before you get to the door.
- b. Keep outside lights on when you are home at night. At night, also keep shades and curtains closed
 - c. Also, lights on in a room or two indicate one or more people are home, which discourages burglars.
 - d Keeping lights on at home is not an extravagant expense when you consider the deterrent that lights are to criminals because criminals do not want to be seen. As an added bonus, keeping lights on is a safety technique which helps you avoid tripping over objects. As you may be aware, changes in the eye occur with aging and older eyes do not adjust to dim lighting or to changes in light conditions, such as when you walk from a brightly-lit room to a dimly lit room. Keeping several rooms of your house lit can help you avoid slips, trips, falls and will discourage criminals.
- vii. If you are home in bed at night and hear someone breaking in, grab a cell or cordless phone that you keep charged up in your room by your bed, take it with you to the bathroom, lock yourself in the bathroom, and dial 911. If you attempt to use a weapon, it could be grabbed from you and used on you.
 - viii. If at some point your property is stolen, it helps to have already done some preparation work that will assist you in recovering stolen items.
 - a Mark property that is valuable by engraving an identification number on it. Make a list of expensive items like jewelry and silver. Take pictures of these items and store them in a safe place such as a bank safety deposit box.
- 3 One final point, older people have been found to be more susceptible to crimes that can devastate them economically through fraud, medical quackery, con games, as well as commercial fraud by sales people. We (*will be talking about / have already talked about*) these kinds of consumer fraud during a separate meeting.

Modeling

and

Guided
Practice*Explore and address the following points:***Doors:**

- ◆ All outside doors should be constructed with a solid core or be metal reinforced. Hollow doors are easily kicked in.
- ◆ All outside doorframes should be solidly built and attached firmly to the house structure.
- ◆ Any doors with hinges outside should have hinges replaced with non-removable hinges. *Show an example of non-removable door hinge.*
- ◆ Check locks and compare them with locks shown during the “Input” portion the lesson plan. Show that a double cylinder deadbolt lock is best because a burglar can break any glass within 40 inches of the lock, then reach in, and turn the lock if it is not a double cylinder deadbolt. If the double cylinder cannot be used, non-breakable glass should be installed on any glass within 40 inches of the lock.
- ◆ Check the peephole on outside doors; explain briefly how they are installed. If renting, you can complain to the manager that a peephole is not accessible as management is likely to adjust it due to the fear of civil liability should a crime occur that could have been prevented by this adjustment.
- ◆ A lock on a door does no good unless it is used!
- ◆ **Sliding Doors:** (1) Both door panels should be prevented from being lifted out of their tracks. The top track should have small screws protruding down so the door barely clears them.
(2) Stationary door—should be secured with a screw from the inside into the door and frame.
(3) Sliding door—when locked, should also be wedged with a swinging metal rod –or “Charlie Bar”—to keep door shut even if lock is penetrated. Another option, though not as effective, is to wedge a wooden rod into the bottom track. You can even use a piece of PVC pipe or irrigation pipe to fit the track. *Show an example of a “Charlie Bar,” and holding appropriately sized screws, demonstrate approximate points and angles at which they should be installed.*

Windows

- ◆ Double-hung windows—are the most common type and are easy to jimmy open. To prevent entry: drill a hole in downward sloping direction through top of bottom sash and into (not through) bottom of top sash. Insert pin or nail through hole to prevent opening of either sash. *Use a nail of appropriate size to demonstrate approximate points and angles at which they should be installed.*

- ◆ Sliding Windows--treat in same manner as sliding doors.
- ◆ Casement windows—usually have secure latches; make sure latches are strong, tight-fitting. Locks available for this type of latch to install to increase security. *Show an example of a lock for a latch on a casement window.*
- ◆ Jalousie and awning type windows—not very secure because individual panes are easy to pry open or remove. Metal grating can be installed on inside of the windows; or consider replacing them entirely with more secure windows.
- ◆ Keep in mind in securing windows that you want to have easy exit from all points of entry into your home in case you have to get out quickly, such as in a fire.
- ◆ You should secure windows using a lock, plus a wooden dowel, plus the nail or screw securing method, to extend the time and trouble a burglar has to go through to get into the window, which is a crime deterrent.

Alarms:

If Learners are considering alarm systems:

- ◆ The system should protect all points of entry into the home.
 - ◆ You should compare alarm companies, check their reputations and get written estimates.
 - ◆ High price does not necessarily mean it's the best system for your needs. You should consult with local police for advice on the best alarm system for your needs.
 - ◆ The major advantages of alarm systems are that if you are home, you know immediately that someone is in your home; if you have an outside speaker for your alarm, neighbors are alerted by the noise and may well call the police either to help you or in order to get the alarm sound to stop.
 - ◆ Be aware that having a security company monitor your alarm may not always be a good deal. You pay a monthly fee for someone from the company to drive to your home. Response times vary and if there appears to be a problem, the company will typically call the police, not intervene in any crime in progress.
- ◆ **Home Exterior:**
- ◆ Look at trees, bushes and shrubs. Could a person conceal himself behind or within these? If so, they may need to be trimmed.
 - ◆ Consider planting cactus or other prickly shrubs under vulnerable windows in your home. This will deter entry into these areas by burglars.
 - ◆ Do outside lights illuminate areas around doors and windows? If not, some may need to be installed.

	<ul style="list-style-type: none"> ◆ Motion sensor lights alert you and scare potential burglars, and are relatively inexpensive. ◆ Do Learners know that before they leave home for an extended time they should ask someone they know to watch their home and collect mail and newspapers? As an alternative, the post office can hold mail while newspaper delivery can be temporarily suspended. Learners should also continue with yard maintenance by someone they trust while they are gone. Remember, you want the house to continue to look “lived in” while you are away.
<p><u>Monitoring / Discussion</u></p>	<p>Q: What’s the easiest, simplest way to protect yourself when you are at home?</p> <p>A. Lock doors and windows; don’t open door to strangers.</p> <p>Q: When we were talking about different ideas for preventing crime, were there any ideas presented that you thought would be easy to start using? Were there any ideas you especially liked?</p> <p>Q: Were there any ideas that you didn’t like?</p> <p>Q: Were there any suggestions that you thought sounded impractical for you? How could you change those suggestions, or what would have to change, so that you could use those suggestions?</p>
<p><u>Independent Practice</u></p>	<p>This can be done at any time during the lesson. It seems to work better when it is not done in the rush at the end of a meeting.</p> <p>"I'd like for each of us to select at least one idea, from what we're learning, to try out this week. Let's choose something easy to experiment with. Next week we can all compare our experiences and see what worked and what didn't."</p>
<p><u>Closure/ Transition:</u></p>	<p><i>Look at next week’s lesson plan for: “Set up at previous meeting.”</i></p> <p><i>It begins: “Next week, we will be exploring . . .”</i></p>

University of Nevada, Reno
Southern Area Cooperative Extension
Seniors CAN
Lesson Plan

Lesson: **Strategies for Making Ends Meet: Cutting Costs**

Lesson Number: **F-1**

Introduction: The “Strategies for Making Ends Meet: Cutting Costs” lesson is designed to introduce Learners to ways to live better within their budgets.

Learning Overview: The Learner will participate in a lesson designed to teach him/her techniques to cut daily living costs and get more for what s/he pays.

Lesson Objectives:

- 1 During the lesson, the Learner will be exposed to the following ways to live better within their budgets:
 - The difference between the following concepts: “standard of living,” “quality of life,” “frugal,” “deprivation” and the idea that “quality of life” does not necessarily require large amounts of discretionary income.
 - Ways to cut costs in areas of personal services, clothing, entertainment, transportation and household items and supplies.
- 2 During the lesson, the Learner will engage in group discussion regarding cutting costs and increasing the quality of life, describing with clarity at least one example from his/her life experience.
- 3 During group discussion, either spontaneously or in response to Facilitator request, the Learner will state with clarity that s/he has selected at least one idea presented during the lesson, what that idea is, and that s/he will try this idea during the following week to see if it works for him/her. Alternatively, the Learner will state with clarity that s/he does not want to try out any of the ideas presented, and the reason for the decision.

Set up at previous meeting:

Next week, we will be exploring strategies for making ends meet by cutting costs.

Set up immediately prior to this meeting:

Facilitator assures that lighting is appropriate for Learners to read the entertainment section of the local newspaper (*NEON*) or from a senior newspaper (*Lovin’ Life*).

Materials:**Provided by Facilitator:**

One of the following for each Learner:

- Handout: *Strategies for Making Ends Meet: Cutting Costs* (Seniors CAN Curriculum, 2008).
- A copy of a local newspaper, entertainment or senior related section.
- Schedules from libraries, arts centers and/or parks and recreation programs.
- Written location of closest senior center and activity schedule.
- Easel, large notepad and markers (for group planning activity).

Note: Facilitator should review lesson plan for this week, last week and next week because information provided at the beginning of each lesson plan is needed for a smooth transition between lessons.

Activities:

- Plan three activities that could be done alone or with a friend, one costing less than ten dollars per person, one that can be done for less than five dollars per person, and one that can be done for free.

References:

Consumer Literacy Consortium. (2005). *66 Ways to Save Money* [Brochure]. Washington, D.C.

Hedrick, L. H. (1994). *365 Ways to Save Money*. New York: Hearst Books.

Clark County Senior Advocate Program. (2006). *Royal Pages: A guide to services for seniors*. Clark County Parks and Recreation: Las Vegas, NV.

American Association of Retired Persons. (2008). *Be a Wise Consumer* [Accessed: 8/4/08]. http://www.aarp.org/money/wise_consumer/.

****Brand names are used for illustration purposes only and do not constitute an endorsement by Cooperative Extension.***

Lesson

<p><u>Begin Lesson:</u></p> <p><u>Transition from last week</u></p>	<p>Last week we talked about (<i>name of last week's unit</i>). Each of us selected one idea to try out. Let's talk about how those worked (or didn't work) for us, and also what we learned from last week's meeting.</p>
<p><u>Anticipatory Set</u></p>	<p>Today we will explore cutting costs of daily living. We think this topic is important because most of us have a fixed amount of money to live on, yet there are strategies for getting the most out of it. When we discover and use these strategies, we can improve the quality of our lives.</p>
<p><u>Share the Objective</u></p>	<p>1) During the lesson, we will be discussing:</p> <ol style="list-style-type: none"> 1) The difference between the following concepts: "standard of living," "quality of life," "frugal," and "deprivation," and the idea that "quality of life" does not necessarily require large amounts of discretionary income. 2) Ways to cut costs in areas of personal services, clothing, entertainment, transportation, household items and supplies. <p>2) During this lesson, I will be providing information, but it is also important that we share information and ask questions in group discussion. I would appreciate it if each of you could bring up at least one example from your life experience.</p> <p>3) Also during the lesson today, I'm going to ask each of you to select one idea from the lesson to try out on your own over the next week. I'll pick one, too. Then each of us can share with the group next week how it worked out.</p>
<p><u>Share the Handout</u></p>	<p>This summarizes the main ideas we will be discussing today. [<i>Pass out handout.</i>] Please feel free to take notes and ask questions as they arise.</p>
<p><u>Input</u></p>	<p>1 Discussion of the concepts: <i>Ask Learners to give to the group their working definitions of each term, and give them these definitions to consider as well.</i></p> <p>A. Standard of living: how much money you spend on your lifestyle.</p>

- B. **Quality of Life:** how much fulfillment you get from your lifestyle.
- C. **Frugal:** avoiding unnecessary expenditures.
- D. **Deprivation:** a state where we go without what is necessary to the extent that we lower our quality of life.
- E. The **relationship between quality of life and income:** If we spend our resources on what we get the most fulfillments from, we can have a high quality of life whether or not we have a high standard of living.
- F. For example, if our grandchildren are important to us, spending time reading to them from a book we borrowed for free from the library, or sending them cards with little jokes and loving reminders, can be every bit as fulfilling, and possibly more so, than buying them the latest fad toy. If good food, good friends and conversation are important to us, then inviting friends for dinner and a good talk can be as fulfilling as going out to an expensive restaurant with them. The key is to be able to focus in on what is important to each of us as individuals.

2 **Ways to cut costs:**

Each of you has lived for a long time and undoubtedly knows some good methods for cutting costs. As we go through the list of ideas that I have for you, I would like to hear from you what your ideas are. When we hear different ideas on this topic from different sources, we eventually find several ideas that work well for us.

A **Personal Services**

- i Beauty schools, especially on senior citizen discount days, have very low cost services.
- ii Inexpensive dry cleaning - \$1.25 and \$1.50 cleaners. (Many people stop buying or wearing “dry clean only” garments). Also, many past participants have had success using home dry cleaning kits like Dryel*. You are able to dry clean garments at home using your dryer.

- iii Services offered for free (or reduced expense) at senior centers for example toenail clipping service with foot massage (not available for people with diabetes). Senior centers also offer blood pressure checks, Medicare counseling, health fairs, flu clinics, exercise and educational classes and social activities.

B Clothing, Household Items and Supplies

- i Second hand stores - both thrift stores and consignment stores.
 - a Thrift stores have good deals, though you might have to search through the inventory a bit. They are good for finding household items in good shape, such as area rugs, tablecloths and gardening equipment. There are many thrift stores in the Las Vegas area—check the Yellow Pages under “Thrift Stores.” (*adapt to your local area*) Opportunity Village Thrift Stores, Catholic Charities Thrift Stores, Charleston Outlet, Goodwill, Salvation Army and Deseret Industries usually have good clothing selections as well as household goods. There are other good thrift stores as well.*
 - b Consignment stores usually sell clothing and occasionally, some household items. Their goods tend to cost a little more, but often are of higher quality than what is found in thrift stores. Also, consignment shops allow you to sell older clothes you no longer use that are in good shape. You split the resale price with the store after the item is sold. Check the Yellow Pages under “Consignment Service.”
- ii Factory outlets - Some factory outlet stores are not truly full of factory overstocks, since the factory outlet store now serves a market niche of its own. Sometimes cheaper versions of products are manufactured to meet the demand for name brand products at reduced prices through these stores. You can still get good deals, however; just be aware that everything is not a bargain.
- iii Warehouse club stores - like Sam’s Club and Costco do offer some good deals when you buy in bulk.* Make sure that anything you buy in bulk will be completely

used, or it's not a bargain. You may want to split the cost of a membership with a friend. You would have to have the membership in one of your names (and the person whose name is on the card will have to go every time because the other will always have to go in as a guest). You could buy in bulk together, splitting the cost and the merchandise.

- a Watch out for "consumer buying clubs" that have no location, or that you never heard of, because those can be fraudulent.
- iv Discount Stores - There are also a number of good discount stores in this area, including: *Big Lots, Smart and Final, Walmart and K-mart*. Don't forget the *99 cent store or Dollar Tree* when purchasing household supplies, personal care items, gift wrap, decorative items, 2 for 1 cards, inexpensive gifts, etc.*
- v Other Tips on Stores
 - a Get yourself on the mailing lists of stores you like so that you are notified of sales.
 - b Most thrift stores in the Las Vegas area, and some retail stores, such as Ross, Kohl's, Home Depot, have senior citizen discount days.*
 - c Shop the newspaper's Sunday advertisements to see what is on sale and at what store. Save even more and buy the newspaper at the dollar store!
 - d Sign up for the store saving cards which can help save money at grocery stores and pharmacy stores. Examples include *CVS, Albertsons and Petsmart*.*
- vi Cleaning Products
 - a Did you know that baking soda makes a great scouring cleanser? And a mixture of vinegar and water makes a good cleaning solution for floors, sinks, bathrooms and kitchens? And your old newspaper offers great streak-less window cleaning?
 - b If you do buy regular cleaning products, use store brands. Get products in lower-priced refill containers, you just refill your existing squirt bottles.

vii **First Aid**

- a You can make frozen gel packs to apply to injuries: Combine $\frac{1}{4}$ cup rubbing alcohol with $\frac{3}{4}$ cup water and partially fill a heavy-duty plastic freezer bag with the mixture. Seal the bag. Place this bag inside another bag and store it in the freezer. The more alcohol you use, the softer the gel pack will be.

C **Prescription Medication** – If your insurance plan does not offer prescription coverage, try the following to save money on medication:

- i Ask for generic equivalents, if available.
- ii Shop around: Call several pharmacies to find the best price on a given prescription medication. Prices vary greatly from store to store. Check on individual prescriptions, as one pharmacy might have a good price on one drug but charge much more than other stores on another drug.
- iii Consider mail-order pharmacies for medications used on a long-term basis, as their prices are often lower than those of full-service pharmacies.
- iv Costco offers many discounts on prescription medications. You do not need to be a member to get prescriptions filled there. Check with your local store for their prices.

D **Food**

- i Packaged and processed foods tend to be more expensive than unprocessed foods.
- ii Store-brands are generally comparable in nutrition and quality to name brands, but cost less. If you don't use store brands now, why not give them a chance?
- iii There may be occasions when there is a brand name you prefer. When you have a preferred brand on a product you use, that's when manufacturers' coupons come in most handy. Most of the time, manufacturers' coupons are not a good deal when compared to store brands.
- iv In many grocery stores, more expensive brand name

products are on the shelves at eye-level, while the better buys are on the bottom or top shelves.

- v Compare cost per serving. Use unit pricing labels on the shelf. Use a pocket calculator if unit pricing is not available on the shelves. If there is an item on sale at an especially low per-unit price, stock up on the item if it is something you need and will use.
- vi Usually, buying items packaged in bulk gives you a lower cost per serving. It can be economical to buy in bulk as long as you are sure you will use the entire package you buy—that it won't spoil before you have used it all. One way to help with this is to buy in bulk with a friend.

E Entertainment

- i Las Vegas offers a wide variety of free or low cost entertainment, through libraries, senior centers, arts centers, and parks and recreation programs.
- ii Check the entertainment section, "NEON," each Friday in the *Las Vegas Review-Journal** for information on local, low-cost or free events. Similar information can be found in the free newspaper *Las Vegas Weekly**.
- iii Movies: Discount movies are listed daily in the *Las Vegas Review-Journal**.
- iv UNLV has many free or low cost theatre productions. Call their box office for details.
- v You can get free instruction in how to use the Internet at local libraries. This way, you can email friends and family, saving money on long distance calls. You can even use the Internet to read magazines or the local newspaper (or your home town newspaper). If you don't have a computer, you can get free Internet access at local libraries and many senior centers.
- vi Email accounts and internet access are free and available at many public libraries across the United States. This is an excellent way to keep informed and to communicate with friends and family who live in other areas.

F Transportation

- i **Bus system – RTC of Southern Nevada**
 - a Senior citizen bus discounts: If you are age 62 or over (or disabled), you are entitled to ride the Citizen Area Transit (CAT) bus for a reduced fare. The regular fare for a one-way trip is \$ 1.75 (or \$3.00 on The Deuce-Las Vegas Blvd.). The reduced one-way fare is \$0.75 (or \$1.50 for the Deuce) per boarding. To take advantage of this reduced fare, you must get a CAT photo reduced fare card. You can get this card by going to the downtown or south east bus station. Call CAT at 228-7433 (CAT-RIDE) for further information.
 - b Monthly bus passes save money: A regular bus pass costs \$55.00 for unlimited CAT bus rides for a period of 30 days, starting the day the bus pass is activated. If you qualify for the senior citizen discount, and you have the CAT photo reduced fare card described above, you can get the same bus pass for \$25.00. Although you have to go downtown to get the photo card, you can order your monthly bus pass by mail, at a vending machine or online after you get the card.
 - c If you have a CAT Paratransit ID card, you may use it to ride the regular bus system (fixed route) for free. RTC's Paratransit service is a shared-ride, door-to-door program available for those who are functionally unable to independently use the fixed-route system either all of the time, temporarily or under certain circumstances. This program requires an evaluation process to determine eligibility. Fees begin at \$2.50 (one-way) with an option monthly pass at \$75 and a personal care attendants ride free.
 - d The Silver STAR bus program designed especially for seniors, offers 11 loop routes throughout Las Vegas, Henderson and Boulder City. Each Silver STAR route operates on a fixed schedule (no holiday service) with a 50 cent fare upon boarding (some routes its optional and monthly passes are accepted).

ii **Cabs**

- a Senior Ride Program: If you are 60 or older and a Clark County Resident, you can buy cab fare coupons for ½ price. Each discount coupon book is \$10.00 and worth \$20.00 of cab fare. The coupons cannot be exchanged, refunded and must be used by the expiration date. The initial registration must be done at the Division for Aging Services office and then coupon requests are by mail. All local cab companies accept the coupons.

iii **City Ride Bus Service (not part of RTC)**

- a The City Ride Bus Service offers two routes: Fremont and Senior Neighborhood Bus Route. The Senior Route goes from several area senior housing complexes to several local stores. Seniors ride for \$0.25 one-way. Seniors must be at least 62 years old. A Medicare card **or** CAT photo reduced fare cards are accepted as proof of age upon boarding. Call 229-6024 for further information.

G Credit Cards

- i Credit card terms vary so shop around. Is there a “free” or “grace” period that permits you to pay your current balance in full before a specified date in order to avoid a finance charge?
- ii Pay bills promptly to keep charges as low as possible.
- iii Keep a list of your credit cards, including account number and telephone number of card issuer, in a safe place. If your cards are lost or stolen, you can minimize the amount of charges you are responsible for by reporting their loss as soon as possible.

H Exchange services with others—friends and neighbors

- i Household repair, cooking, cleaning, mending, shopping, gift-wrapping—if you can’t do it, chances are that someone you know can. What service could you provide to him or her in return?

I Close the bank

- i Loans of money to family and friends are hard to collect. Often, relatives are the last to be paid. “No” is often the best answer to requests for loans. Also, if you agree to cosign on a loan, be prepared to pay it off.

J Cars

- i Pump your own gas, compare prices at different stations and use the lowest octane gas recommended by your owner’s manual. You can further save on gas by keeping your engine tuned and your tires inflated to the correct pressure.

K Local phone and cable

- i Do you have any optional services (such as conference calling) that you don’t really need or use? Call your phone company and ask them what services you have and how much your monthly bill would be lowered if you dropped some of them.
- ii Also, review your cable bill. Are you paying for channels that you rarely watch? Many people save money by eliminating features that they do not use.

L Inexpensive gifts for grandchildren -- Past Seniors CAN group members have contributed the following ideas:

- i Subscriptions to children’s magazines—these are low-cost, perhaps \$12.00 per year, and the child gets something every month.
- ii Birthday cards that become a drawing board or a puzzle.
- iii Sticker books.
- iv “Family” gifts on holidays—a box full of inexpensive things everyone can use—a candy dish, candy, small items purchased at thrift stores, etc.
- v Written/illustrated “fairy tales” based on memories of family events.

<p><u>Modeling</u></p> <p>and</p> <p><u>Guided Practice</u></p>	<p>Let's try to apply some of the things we have talked about.</p> <p>Plan three activities that could be done alone or with a friend, one costing less than ten dollars per person, one that can be done for less than five dollars per person, and one that can be done for free. I'll do one first for less than five dollars per person. We'll use these activity schedules.</p> <p><i>Facilitator models planning one activity, then the group does the assigned three activity plans together. Facilitator makes notes on large notepad as the Learners come up with ideas, to facilitate Learners' planning.</i></p>
<p><u>Monitoring / Discussion</u></p>	<p>Q: What is the likelihood that you will engage in an activity similar to the ones we planned today?</p>
<p><u>Independent Practice</u></p>	<p>This can be done at any time during the lesson. It seems to work better when it is <u>not</u> done in the rush at the end of a meeting.</p> <p>"I'd like for each of us to select at least one idea, from what we're learning, to try out this week. Let's choose something easy to experiment with. Next week we can all compare our experiences and see what worked and what didn't."</p>
<p><u>Closure/ Transition:</u></p>	<p><i>Look at next week's lesson plan for: "Set up at previous meeting."</i></p> <p><i>It begins: "Next week, we will be exploring . . ."</i></p>

University of Nevada, Reno
Southern Area Cooperative Extension
Seniors CAN
Lesson Plan

Lesson: **Strategies for Making Ends Meet: Using Programs and Other Money-Saving Options** Lesson Number: **F-2**

Introduction: The “Strategies for Making Ends Meet: Using Programs” lesson is designed to introduce Learners to the wide variety of programs available to save money and enhance their quality of life.

Learning Overview: The Learner will participate in a lesson designed to teach him/her about specific government and private sector programs that s/he may qualify for to enhance both quality of life and the ability to live independently in the community.

Lesson Objectives:

- 1 During the lesson, the Learner will be exposed to information regarding:
 - The fact that people sometimes have inhibitions about using programs that can provide them with financial help, and that these inhibitions might be overcome by a realistic examination of the even greater potential costs to the community of not using such programs.
 - Specific government and private sector programs in the areas of health care costs, automobile insurance, nutrition, home energy costs, rent and property tax assistance, widows’ benefits, home repair, legal help, tax form preparation assistance and home equity conversion.
 - Filling out applications and other procedures to follow to find out if one qualifies for programs.
- 2 During the lesson, the Learner will engage in group discussion regarding the use of government or private sector programs describing with clarity at least one example from his/her life experience.
- 3 During group discussion, either spontaneously or in response to Facilitator request, the Learner will state with clarity that s/he has selected at least one idea presented during the lesson, describe that idea, and will try this idea during the following week to see if it works for him/her. Alternatively, the Learner will state with clarity that s/he does not want to try out any of the ideas presented, and the reason for the decision.

Set up at previous meeting:

Next week, we will be exploring strategies for making ends meet financially, and we will be looking at some of the programs available to help older adults remain living independently in the community.

Set up immediately prior to this meeting:

Facilitator assures that lighting is appropriate for Learners to read the available community program material, as well as write on application forms, if desired. Another option would be to invite a speaker from a community organization to meet with the group (i.e. an Advocate for Elders or SHIP Medicare Specialist from the NV Division for Aging Services).

Materials:**Provided by Facilitator:**

One of the following for each Learner:

- Handout: *Strategies for Making Ends Meet: Using Programs and other Money Saving Options* (Seniors CAN Curriculum, 2009).
- Brochures, booklets, applications, information sheets, etc. for the community programs to be discussed during the lesson.

Note: Facilitator should review lesson plan for this week, last week and next week because information provided at the beginning of each lesson plan is needed for smooth transition between lessons.

Activities:

- Demonstration and Guided Practice in reviewing program material and if desired, completing a form for one program discussed during the lesson.
- Guest speaker from one of the community programs discussed during the lesson.

References:

Clark County Senior Advocate Program. (2006). *Royal Pages: A guide to services for seniors*. Clark County Parks and Recreation: Las Vegas, NV.

Official Report to White House Conference on Aging (1995). *Putting Aging on Hold-Delaying the Disease of Old Age*.

Lesson

<p><u>Begin Lesson:</u></p> <p><u>Transition from last week</u></p>	<p>Last week we talked about (<i>name of last week's unit</i>). Each of us selected one idea to try out. Let's talk about how those worked (or didn't work) for us, and also what we learned from last week's meeting.</p>
<p><u>Anticipatory Set</u></p>	<p>Today we will explore using government and private sector programs that provide financial help as a way to assist older adults in making ends meet financially. We think this topic is important because when you have less financial concerns your life will be better and it will be easier for you to remain living independently in your home.</p>
<p><u>Share the Objective</u></p>	<p>1) We will be talking about:</p> <ol style="list-style-type: none"> 1) Inhibitions that people sometimes have in respect to using programs that provide financial help, and how these inhibitions might be overcome. 2) Specific government and private sector programs in the areas of health care costs, automobile insurance, nutrition, home energy costs, rent and property tax assistance, widows' benefits, home repair, legal help, tax form preparation assistance, and home equity conversion. 3) How forms can be filled out and what procedures should be followed to find out if one qualifies for the programs. <p>2) During this lesson, I will be providing information, but it is also important that we share information and ask questions in group discussion. I would appreciate it if each of you could bring up at least one example from your life experience.</p> <p>3) Also during the lesson today, I'm going to ask each of you to select one idea from the lesson to try out on your own over the next week. I'll pick one, too. Then each of us can share with the group next week how it worked out.</p>
<p><u>Share the Handout</u></p>	<p>This summarizes the main ideas we will be discussing today. [<i>Pass out handout.</i>]</p>

Input

- 1 First, let's talk about why people sometimes resist the idea of using programs that offer them financial assistance—for example, food stamps. Why do you think it is that people resist filling out an application for food stamps, sometimes even if they know that they probably qualify financially?
 - A *Allow group discussion on this. It is possible that “shame” will be a reason suggested, as people often feel shameful of being seen by others as unable to provide for themselves. It is also possible that Learners will bring up the idea that even during the Depression, their families survived without formal charitable or government programs. Facilitator can bring up the following ideas during this discussion:*
 - i **Programs are the way people help each other out:**
 - a During the Depression families helped one another in the absence of government and/or other programs. People in communities looked out for one another. If you ate dinner at someone's house, did you do anything in return? Perhaps your family did chores in exchange for being fed.
 - b Also, extended family members tended to live nearby in the same communities so it was also easier to help one another within families.
 - c In this day and age, especially in urban settings like Las Vegas, many people don't live within close proximity to family members or even know their neighbors well enough to exchange help with them. Yet we all go through times when a little help would be very valued and appreciated.
 - d When people advance in age, when they retire and when their spouses pass away are examples of when a little help might be needed. So it's very understandable for people in situations like these to seek help from others and from programs that are designed to help us.
 - ii **Consider the use of programs available to help you financially as a way that you can help the community save money.**
 - a Programs that help you financially help you to stay

	<p>living independently in the community for a longer period of time. When people are no longer able to live independently, they need to live in care facilities such as assisted living facilities or nursing homes. Costs for these facilities are much higher than the little bit of money it might take to help someone live independently. The help strengthens and prolongs independence. Some estimate that delaying nursing home entry by one month would save \$3 billion per year nationally.</p> <p>2 We will now turn to your handout to discuss specific government and private sector programs in areas of health care costs, automobile insurance, nutrition, home energy costs, rent and property tax assistance, widows' benefits, home repair, legal help, tax form preparation assistance and home equity conversion. While considering these programs, keep the following in mind:</p> <ul style="list-style-type: none"> • In some programs, applicants must meet income qualifications or have limited assets before benefits can be received; in others, income and assets are irrelevant. • Try not to make too many assumptions about whether you do or do not qualify for a given program, since the method of calculating income and resources varies from program to program. • For each program you are interested in, call to find out where and when you can fill out an application. Some applications can be done by mail. If you must visit a program in order to fill out an application, ask what documents you should bring with you.
<p><u>Monitoring / Discussion</u></p>	<p>Q: Do any of the programs that we have discussed sound as if they might be of benefit to you?</p> <p>Q: What might stop you from applying for them?</p> <p>Q: I'd like to do a little bit of practice with you on filling out applications for programs. Let's pick out one of the applications, I'll give each of you a copy, and we can each fill one out as part of a group project. Which one would the group like to try out?</p>
<p><u>Modeling</u></p>	<p>1. The group should select an application for one program to be</p>

<p><u>and</u></p> <p><u>Guided Practice</u></p>	<p>filled out during the activity. This will vary depending upon each individual group's needs and income levels. If Learners have no preference, Facilitator can guide this practice by selecting the application for the program he/she thinks is most likely to accept most or all of the Learners as qualifying for assistance. Consideration should also be given to the length of each application compared to the amount of time left in which the lesson must be finished.</p> <ol style="list-style-type: none"> 2. After the application for the group to complete together during this lesson is selected, Facilitator passes out application, clipboard and pens. Facilitator leads Learners through the application, with group discussion on items as need arises. 3. Facilitator will have brought enough applications for each Learner to have one for each program, which the Learner can then take home. Facilitator passes these out after the group practice application is completed. If applicable, suggest that Learners get together outside of lesson time to help each other complete as many applications as they wish to pursue. Further questions about applications can be brought to the Facilitator at the next meeting if desired. <p>As an alternative, if there is not enough time for the group to fill out a group application, step 3 alone can be followed or the guest speaker may offer a presentation at this time.</p>
<p><u>Independent Practice</u></p>	<p>This can be done at any time during the lesson. It seems to work better when it is not done in the rush at the end of a meeting.</p> <p>"I'd like for each of us to select at least one idea, from what we're learning, to try out this week. Let's choose something easy to experiment with. Next week we can all compare our experiences and see what worked and what didn't."</p>
<p><u>Closure/ Transition:</u></p>	<p><i>Look at next week's lesson plan for: "Set up at previous meeting."</i></p> <p><i>It begins: "Next week, we will be exploring . . ."</i></p>

University of Nevada, Reno
Southern Area Cooperative Extension
Seniors CAN
Lesson Plan

Lesson: **Productivity and Aging**

Lesson Number: **P-1**

Introduction: The “Productivity and Aging” lesson is designed to introduce Learners to the ideas that (1) the desire to be productive as one ages is common and healthy, and (2) there are many opportunities available for an older person who wishes to become more productive.

Learning Overview: The Learner will participate in a lesson designed to teach him/her that there are many interesting opportunities to explore to make life more fulfilling.

Lesson Objectives:

1. During the lesson, the Learner will be exposed to information regarding the following:
 - How productivity can enhance the lives of older people and the lives of others.
 - Various types of productive activities.
 - How to find organizations you might be interested in.
2. During the lesson, the Learner will engage in group discussion regarding productivity and aging, describing with clarity at least one example from his/her life experience.
3. During group discussion, either spontaneously or in response to Facilitator request, the Learner will state with clarity that s/he has selected at least one idea presented during the lesson, what that idea is, and that s/he will try this idea during the following week to see if it works for him/her. Alternatively, the Learner will state with clarity that s/he does not want to try out any of the ideas presented, and the reason for the decision.

Set up at previous meeting:

Next week, we will be exploring productivity and aging.

Set up immediately prior to this meeting:

Facilitator assures that lighting is appropriate for Learners to read a local newspaper, community program brochures and senior or community center newsletters.

Materials:

Provided by Facilitator:

One of the following for each Learner:

- Fact Sheet : *Active Aging* (UNCE, FS 02-06)
- Copies of most recent, free local newspaper (as an example, *Lovin' Life*) with listings regarding activities available for seniors or senior/community center newsletters
- Catalog of courses for a local community college or university
- Classroom whiteboard and dry-erase markers

Note: Facilitator should review lesson plan for this week, last week and next week because information provided at the beginning of each lesson plan is needed for smooth transition between lessons.

Activities:

- Look through community program material for items of interest.
- Have participants write 3 things they do, in regards to active aging, on a classroom whiteboard to demonstrate the wide variety of activities one can do.

References:

Administration on Aging. (2008). *Volunteer Opportunities* [Online].

http://www.aoa.gov/eldfam/Volunteer_Opps/Volunteer_Opps.aspx [Access date: 8/20/08].

Collins, C. C. (1997). *Needs Assessment of the Clark County Free-Living Elderly Population*. Las Vegas: University of Nevada Cooperative Extension. P. 9.

Gillespe, C (2001). *Study: Attitude Counts*. The Associated Press.

Rowe, J. & Kahn, R. (1999). *Successful Aging*. Dell Publishing.

Smith, F. (2001). *Volunteering Can Help Extend Your Life*. Kaleidoscope Newsletter. HCA Healthcare, Senior Friends: Las Vegas, NV.

Snowdon, D. (2001). *Aging With Grace*. A Bantham Book: New York.

Weil, A. (2005). *Longevity Lessons from the Okinawans*. Dr. Andrew Weil's Self Healing Newsletter, November Issue, pg 8. Body & Soul Omnimedia Inc: Boston, MA.

Corporation for National Service. (2008). *National Service in Nevada* (Online).

<http://www.nationalservice.gov/NV> (Access date 8/10/08)

U.S. Census Bureau. (2004) *General Demographic Characteristics: 2004* [Online].

<http://factfinder.census.gov> [Access date: 8/20/08].

Corporation for National and Community Service. (2004) *Volunteering in the United States, 2004* [Online]. http://www.nationalservice.org/pdf/volunteer_study_04.pdf [Access date: 8/20/08].

<p>Lesson</p> <p><u>Begin Lesson:</u></p> <p><u>Transition from last week</u></p>	<p>Last week we talked about <i>(name of last week's unit)</i>. Each of us selected one idea to try out. Let's talk about how those worked (or didn't work) for us, and also what we learned from last week's meeting.</p>
<p><u>Anticipatory Set</u></p>	<p>Today we will explore productivity and aging. There are three reasons that we think this topic is important:</p> <ol style="list-style-type: none"> 1. Most older people report that they want to continue being productive as they age. 2. Being productive includes performing paid work, but it also encompasses much more—including caretaking for family members or friends, education, crafts, informally helping family or doing volunteer work. 3. Research has shown that older adults who remain active during their gold years have less depression, loneliness and more control over their lives. 4. Sometimes people need help to discover ways to become more productive that fit in with their current needs and skills.
<p><u>Share the Objective</u></p>	<ol style="list-style-type: none"> 1) We will be talking about: <ol style="list-style-type: none"> 1) How productivity can enhance the lives of older people as well as the lives of others. 2) Various types of productive activities. 3) How to find other organizations you may be interested in. 2) During this lesson, I will be providing information, but it is also important that we share information and ask questions in group discussion. I would appreciate it if each of you could bring up at least one example from your life experience. <p>Also during the lesson today, I'm going to ask each of you to select one idea from the lesson to try out on your own over the next week. I'll pick one, too. Then each of us can share with the group next week how it worked out.</p>
<p><u>Share the Handout</u></p>	<p>This summarizes the main ideas we will be discussing today. <i>[Pass out handout.]</i> Please feel free to take notes and ask questions as they arise.</p>

Input

- 1) How productivity can enhance the lives of older people as well as the lives of others:
 - a) Most older adults value productive activity and want to be productive in some way.
 - b) Older adults have a wealth of experience and ideas and energy which they can contribute to their communities.
 - c) Any activity is considered productive activity if it produces goods or services OR if it creates a capacity for others to be productive OR if it yields personal benefits. Another way to judge whether an activity is productive: How do you feel after you have performed it? If you feel good and perceive an overall gain, chances are that the activity is a productive one.
- 2) There are various types of productive activities that older people can engage in. Can each of you think of what some of those might be? *Allow participants to name several ways to be productive. When they have all spoken, add the following to the list the group has suggested to the extent these have not already been suggested:*
 - a) Paid work.
 - b) Volunteer work (for organizations).
 - c) Informally helping friends/family in variety of ways—providing emotional support or helping them to do things.
 - d) Household activities—cleaning, cooking, laundry, etc.
 - e) Errands.
 - f) Caring for children—grandchildren or other children.
 - g) Caring for other adults.
 - h) Creating artistic works—writing stories, writing an autobiography, writing songs, painting, making pottery.
 - i) Creating things that are useful—machines, research.
 - j) Involvement in political or religious activities.
 - k) Improvement of mind and body—education, exercise.
- 3) Today we will focus on local resources for paid employment, volunteer work, education and the variety of community organizations in which seniors might want to get involved.
- 4) Paid work—Older workers are seen as stable, reliable, loyal and having a good work ethic. Employers often make special efforts

to recruit seniors as employees, such as Home Depot working with AARP in an effort to encourage older adults to apply for jobs within their company. Other examples: school crossing guard, respite care, security guard, temporary staffing, childcare, teaching music or dance lessons.

- 5) Formal volunteer work – In 2004, over 17 million people aged 55 or older—almost 30% of people in this age group —were volunteers and the assistance they provide is priceless. Organizations that often are in need of volunteers include: schools or libraries, senior companion programs, RSVP, hospitals, nursing homes and hospices, museums, religious, political and environmental groups.
- 6) Education—Keeping your mind active is also important. Research has shown that if you have a college education you have a better chance of maintaining your health, independence and longevity. Educational opportunities can be found at state universities, community colleges, continuing education or distance learning courses, Elderhostel, study or discussion groups, senior theatre programs, music, art or dance programs, travel study groups and courses and senior center programs.
- 7) Join a Group—Many older adults find that group membership is beneficial to active aging. Networking with people who have common interests can enhance your life and create new and lasting friendships. Some groups you can look into include wellness groups, library or bookstore reading groups, hobby and craft groups, fitness and exercise groups, political and religious organizations, Veteran’s organizations, community gardening and parks recreation groups, and also national organizations like AARP.
- 8) There is a wide variety of organizations available locally, political, religious, artistic and activity-oriented that may be of interest to you. Listings for these organizations can be found in local newspapers and the materials provided during the lesson.
- 9) Active Aging and Positive Thinking—Research has found that keeping a positive attitude about aging can extend your life by seven and a half years. A study funded by the National Institute on aging analyzed data collected from 660 men and women to discover these findings. The researchers compared responses to questions on aging in 1975 and examined how their responses predicated their survival up to 23 years later. They found those with more positive views on aging were living longer. This

	<p>takes into account factors like age, gender, socioeconomic status, functional and self-reported health and loneliness.</p> <p>10) This is a perfect time to accomplish goals you've set for yourself. It is also a good time to set new goals. Active aging is essential to maintaining your good health. Whether you start a new career, pursue a lifelong dream or read a book to children at a local school, you can make a positive difference in your life and the lives of others. You have the opportunity to make retirement an enhancement of your life.</p>
<p><u>Modeling</u></p> <p><u>And</u></p> <p><u>Guided</u> <u>Practice</u></p>	<p><i>Give each Learner a copy of free local senior newspaper or community organization materials. Let's go through this information and each find activities or organizations that we think might interest us.</i></p> <p><i>Share the college course catalogs with participants as well. Ask them to choose some courses that might fit their schedule and interests.</i></p> <p><i>Discuss activities written on the classroom white board which illustrate "active aging" and activities that can be both fun and educational.</i></p>
<p><u>Monitoring /</u> <u>Discussion</u></p>	<p>Q: Is there anything we talked about today that you had not heard of before?</p> <p>Q: Is there anything you have heard about today or seen in the materials given to you that you might actually pursue? Why or why not?</p>
<p><u>Independent</u> <u>Practice</u></p>	<p>This can be done at any time during the lesson. It seems to work better when it is not done in the rush at the end of a meeting.</p> <p>"I'd like for each of us to select at least one idea, from what we're learning, to try out this week. Let's choose something easy to experiment with. Next week we can all compare our experiences and see what worked and what didn't."</p>
<p><u>Closure/</u> <u>Transition:</u></p>	<p><i>Look at next week's lesson plan for: "Set up at previous meeting."</i></p> <p><i>It begins: "Next week, we will be exploring . . ."</i></p>

University of Nevada, Reno
Southern Area Cooperative Extension
Seniors CAN
Lesson Plan

Lesson: **Reducing Risks of Short-Term Illnesses**

Lesson Number: **H-1**

Introduction: The “Reducing Risks of Short-Term Illness” lesson is designed to introduce Learners to information that risks of many potentially dangerous short-term illnesses can be reduced.

Learning Overview: The Learner will participate in a lesson designed to teach him/her techniques for reducing risks of illnesses such as pneumonia, influenza and colds.

Lesson Objectives:

1. During the lesson, the Learner will be exposed to techniques for reducing the risks of contracting potentially dangerous short-term illnesses such as influenza, pneumonia and colds. These techniques are:
 - Frequent handwashing
 - Immunization
 - Avoiding tobacco smoke
2. During the lesson, the Learner will engage in group discussion regarding how to reduce risks of short-term illnesses by describing with clarity at least one example from his/her life experience.
3. During group discussion, either spontaneously or in response to Facilitator request, the Learner will state with clarity that s/he has selected at least one idea presented during the lesson, what that idea is, and that s/he will try this idea during the following week to see if it works for him/her. Alternatively, the Learner will state with clarity that s/he does not want to try out any of the ideas presented, and the reason for the decision.

Set up at previous meeting:

Next week, we will be exploring reducing the risks of contracting short-term but potentially dangerous illnesses such as influenza, pneumonia, and colds.

Set up immediately prior to this meeting:

Facilitator finds a dim location in which small amounts of *Glo-Germ* will be visible under an ultraviolet light during the hand washing demonstration and practice. Also, locate a sink with tap water within the facility.

Materials:

One of the following for each Learner:

- Fact Sheet: *Preventing Short Term Illnesses* (UNCE, FS 01-42)
- Glo-Germ Oil Base Simulated Germs* (enough for 1 use for each Learner)
- Ultra-violet lamp (with batteries and/or extension cord)
- Liquid soap and paper towels
- Stop watch or watch with second hand (only if using additional demonstration and practice activity)

* Note: Glo-Germ and ultra-violet lamps may be purchased by contacting:
Glo-Germ Company, P.O. Box 537, Moab, Utah 84532
1-800-842-6622

Note: Facilitator should bring lesson plan for this week, last week and next week because information provided at the beginning of each lesson plan is needed for smooth transition between lessons.

Activities:

- Demonstration and Practice: Hand washing techniques

References:

National Institute on Aging U.S. Department of Health and Human Services, National Institutes on Health (September 2006). Age Page: *Flu-Get the Shot*.

National Institute on Aging U.S. Department of Health and Human Services, National Institutes on Health (2000). Age Page: *Shots for Safety*.

Centers for Disease Control and Prevention(January 2007). *Vaccines-Preventable Adults Diseases*. Retrieved February 2007 from <http://www.cdc.gov/vaccines/vpd-vac/adult-vpd.htm>

MayoClinic.com (December 2005). *Hand Washing: A simple way to prevent infection*. Retrieved February 2007 from <http://www.mayoclinic.com/health/hand-washing/HQ00407>.

Weil, A. (2004). *Coming Clean About Germs*. Dr. Andrew Weil's Self Healing Newsletter, December Issue pg.4-5. Body & Soul Omnimedia, Inc: Boston, MA.

<p>Lesson</p> <p><u>Begin Lesson:</u></p> <p><u>Transition from last week</u></p>	<p>Last week we talked about (<i>name of last week's unit</i>). Each of us selected one idea to try out. Let's talk about how those worked (or didn't work) for us, and also what we learned from last week's meeting.</p>
<p><u>Anticipatory Set</u></p>	<p>We hear stories about nasty germs and bacteria on all kinds of things we encounter in the world—ATMs, door handles, money. What can we do to minimize the chance of being infected?</p> <p>According to the Centers for Disease Control: <i>"The single most important thing we can do to prevent the transmission of infectious organisms is to wash our hands often."</i></p>
<p><u>Share the Objective</u></p>	<ol style="list-style-type: none"> 1) We will be talking about three techniques for reducing the risks of getting short-term, but potentially dangerous, illnesses like influenza, pneumonia and colds. These are: <ol style="list-style-type: none"> a) Handwashing b) Immunization c) Avoiding tobacco smoke 2) During this lesson, I will be providing information, but it is also important that we share information and ask questions in group discussion. I would appreciate it if each of you could bring up at least one example from your life experience. 3) Also during the lesson today, I'm going to ask each of you to select one idea from the lesson to try out on your own over the next week. I'll pick one, too. Then each of us can share with the group next week how it worked out.
<p><u>Share the Handout</u></p>	<p>This summarizes the main ideas we will be discussing today. [<i>Pass out handout.</i>] Please feel free to take notes and ask questions as they arise.</p>
<p><u>Input</u></p>	<p>Before getting into the specific techniques we have selected to discuss during this lesson plan (hand washing, immunization and avoiding tobacco smoke), I want to mention that there are some broader health practices that reduce your susceptibility to infectious diseases. These are proper nutrition, adequate rest and moderate exercise. Nutrition, rest and exercise, like immunizations and avoiding tobacco smoke, can increase the effectiveness of the</p>

immune system. These are different than the handwashing method, which is a way of avoiding infectious disease by reducing contact with germs.

A The Role of Germs

- i Not all germs are harmful. Many of them live in our bodies –noses, mouths, intestines--and some even help us to function better physically.
- ii Some germs that get passed among people live only briefly on our skin and a healthy immune system fights them off. Other germs are more harmful, especially to those who have weakened immune systems. The immune systems of older adults are not as strong as those of other adults. In fact, a person over the age of 65 is two to three times more likely to get pneumonia.
- iii Germs include viruses and bacteria. Influenza (the flu) and the common cold are caused by viruses. There are different types of pneumonia; some are caused by bacteria and others are caused by viruses.
 - a In an older adult, either pneumonia or the flu can be life threatening. In fact, pneumonia and influenza are the fifth leading cause of death among people age 65 and over in the United States. Bacterial pneumonia is a common cause of hospitalization and death among the elderly. When these illnesses do not lead to death, they can still be much more severe in an older person. Treating the flu can be much more difficult in an elderly person. An older adult with the flu is more likely to get pneumonia or other serious infections, and to become dehydrated. Dehydration is also a common cause of hospitalization among the elderly.
 - b Even the common cold is much more dangerous in an older person. An older adult who gets a cold has a greater risk of getting pneumonia or bronchitis. This is due to changes in body organ systems as we age that reduce our capacity to fight off and recover from illnesses.

B Hand washing techniques

- i Handwashing works because we pick up and transfer germs by touching things and people with our hands. Some viruses, such as the common cold, can jump from person to person by touch, by air or by contact with a contaminated surface.
- ii When to wash hands
 - a Before starting food preparation.
 - b After touching animals or changing a litter box.
 - c After touching food, especially raw meat and raw poultry.
 - d Before and after meals.
 - e After using bathroom (or changing diapers). The CDC reports that 1 in 4 people do not!
 - f After hands come into contact with any bodily fluid or excretion.
 - g Before and after having sex.
 - h Before putting in contact lenses.
 - i Before treating a wound.
 - j After sneezing, coughing, blowing your nose.
 - k After gardening
 - l After doing any chore that leaves your hands dirty.
- iii How to wash hands
 - a Use soap and warm water. Warm water cuts through grease faster than cold. It also tends to feel more comfortable so that you will keep your hands in the water long enough for you to thoroughly clean your hands.
 - The main function of soap is to create a slippery environment for microorganisms, so that they slip off your hands when you rinse.
 - Regular soap gives you essentially the same effect as antibacterial soap—the microorganisms are loosened and then washed away. So you don't really need antibacterial soap.
 - Antibacterial soaps can be more expensive, are ineffective on cold-causing viruses and may cause skin irritation. However, any soap can irritate or dry out skin so keep some hand lotion nearby.
 - Use of hand lotion after as many handwashing sessions as possible is recommended because

chapped or rough skin is difficult to keep free of germs.

- b Rub soapy hands together at least 20 seconds before rinsing. Your goal is to loosen dirt and germs.
 - ◆ Try counting out loud: “1 Mississippi, 2 Mississippi....” or sing “Happy Birthday to You” twice.
- c Wash backs and palms of hands. Soap and scrub between fingers, around and under fingernails. Take rings off. Nailbrushes are great.
- d Rinse all of the soap off your hands.
- e It’s best to dry hands on a paper towel because you can throw it away after you use it.
- iv Other hand cleaning products
 - a Hand sanitizers can be a good choice (kills 99.9% of germs) in between hand washing to reduce germs, especially when a sink and soap are not available. The alcohol does kill bacteria, but doesn’t remove dirt.
 - b Antibacterial wipes are good to use on hands and surfaces to eliminate bacteria. Keep some disposable hand wipes in your purse or car while you’re away from home. They quickly clean your hands when a sink is not available.

2 **IMMUNIZATION:** The United States Public Health Service “strongly encourages” older adults to be immunized against the flu and pneumonia.

A The **FLU**

- i People age 50 and over should get a flu shot every year because the flu virus constantly changes. Last year’s shot won’t work for this year.
- ii Each year, the flu vaccine prepared is based on flu strains in circulation at the time as well as flu viruses

expected to circulate during the following flu season. It is possible for an unpredicted strain to emerge after the vaccine has been distributed and people, who get the vaccine, may still get the flu. Usually the disease is milder, however, among those who have had the vaccination.

- iii The only people who should not get a flu shot are people who are allergic to eggs. Because flu shots are made in egg products, people with allergies to eggs may have dangerous reactions to flu shots.
- iv For people who are not allergic to eggs, there may be some relatively minor side effects from a flu shot such as a low fever or redness around the site of the injection. There might also be some mild aches and pains. But according to the Centers for Disease Control, recent flu vaccines have not caused serious side effects. And a flu shot itself cannot cause the flu. For most people, the danger of getting the flu, and possibly pneumonia as a result of having the flu, are much greater than side effects of the flu shot. That of course does not apply to people who are allergic to eggs.
- v If you are allergic to eggs, or for any reason cannot have the flu vaccine, ask your doctor whether an antiviral medicine should be prescribed for you. These medications—called amantadine and rimantadine—can prevent or lessen infection by some flu strains. They can even be taken to reduce symptoms after the early signs of flu are felt.
- vi It is important to get the flu shot each year by mid-November.
- vii Flu shots are very reasonably priced. Also, Medicare Part B pays for flu shots. They are also available through your doctor's office, health department, and often at local pharmacies or grocery stores during flu season.

B PNEUMONIA

- i As we discussed earlier, some pneumonia is caused by viruses and other pneumonia is caused by bacteria. There is no shot available to prevent viral pneumonia, but there is one that protects against approximately 88%

of the bacteria causing bacterial pneumonia. Obviously, it does not guarantee that you will not get pneumonia, but it greatly reduces your risk. And bacterial pneumonia, the one you can get the shot for, is more serious than viral pneumonia.

- ii The United States Public Health Service, the National Coalition for Adult Immunization and the American Lung Association now recommend that all people age 65 and older get the pneumonia shot.
- iii You cannot get pneumonia from getting the pneumonia shot. The shot is not made from the bacteria itself.
- iv You may experience some mild side effects from the pneumonia shot. These can consist of swelling and soreness at the site the shot was given (usually the arm), and they usually don't last very long. Less than one percent of people receiving the shot have more serious swelling and pain along with some fever and muscle pain.
- v Most people need the pneumonia shot only once. Some older people may need a booster shot 5-10 years later; this is something you should ask your doctor about.
- vi Medicare Part B pays for the pneumonia shot.
- vii Immunization tips: You can get the flu shot and the pneumonia shot at the same time. It's a good idea to keep a personal written record of any immunizations you get.

3 **AVOIDING TOBACCO SMOKE.** You should be aware of the following:

- A Active smoking: Smokers have a higher risk than non-smokers of getting respiratory illness including pneumonia, the flu and colds.
- B Passive smoking: If you are around others when they smoke breathing in secondhand smoke, you are at higher risk for a number of illnesses. Exposure to secondhand smoke has been shown to increase the risks for respiratory diseases, including bronchitis and pneumonia, in children. Studies on adults' exposure to secondhand smoke first revealed a link to

	<p>lung cancer, a fatal disease. Some more recent studies have been performed which suggest adults' exposure to secondhand smoke may lead to coronary heart disease. Recent studies also suggest that passive smoking may exacerbate asthma in both adults and children and leads to reduced pulmonary (lung) functioning in both adults and children. Although no research was found indicating that passive smoking increases risks of upper respiratory illnesses in adults, research is ongoing, and on the whole, evidence continues to mount that passive smoking is dangerous. Therefore, it's a good idea to avoid exposure to secondhand smoke as much as possible.</p>
<p><u>Monitoring / Discussion</u></p>	<p>Q: Based on what we've talked about today, what strategy do you think might be best for each of you in preventing these illnesses?</p>
<p><u>Modeling</u> and <u>Guided Practice</u></p>	<ul style="list-style-type: none"> • Demonstration & Practice: Handwashing techniques <p>Note: Glo-Germ oil-based liquid will stain clothing. Therefore, inform Learners of this fact and have them hold their hands over a sink before the Glo-Germ is applied to their hands. Encourage participants to roll up their sleeves prior to application of the Glo-Germ.</p> <ol style="list-style-type: none"> 1. <i>Facilitator demonstrates proper hand washing technique.</i> 2. <i>Facilitator explains that Glo-Germ simulates germs, but is a safe, non-toxic substance. Working with each Learner individually (or with one or two as volunteers for group to observe if time is limited), Facilitator puts Glo-Germ on Learner's hands as s/he holds them over the sink. Facilitator asks Learner to rub it all over hands (front and back), then wash hands with soap and water until s/he thinks s/he has done a thorough job. After Learner dries hands, take Learner to the dim area selected prior to the lesson and hold UV light over Learner's hands while he or she examines them. Places in which the Glo-Germ appears (orange under the UV light) are places Learner needs to focus more attention on in the handwashing process. Facilitator notes that areas around jewelry, watches and bandages are often overlooked and improperly cleaned.</i> <ul style="list-style-type: none"> • Additional demonstration and practice, if desired.

	<p><i>Facilitator asks for 3 volunteers for a “hand washing experiment.” Facilitator squirts Glow-Germ into the hands of each Learner who volunteers, asks them to rub it all over fronts and backs of their hands and between their fingers; asks first volunteer to do the best job he/she can in rubbing soapy hands together for 10 seconds before rinsing. Facilitator asks the other two volunteers then to do the same, except the second volunteer should rub hands for 20 seconds and the third for 30 seconds. Time each of them, letting them know when to “start” and when to “stop.” Compare results under the UV light. Ask each Learner what he or she thinks would be the right amount of time to rub hands together <u>for him or herself</u> to get hands clean.</i></p>
<p><u>Independent Practice</u></p>	<p>This can be done at any time during the lesson. It seems to work better when it is not done in the rush at the end of a meeting.</p> <p>"I'd like for each of us to select at least one idea, from what we're learning, to try out this week. Let's choose something easy to experiment with. Next week we can all compare our experiences and see what worked and what didn't."</p>
<p><u>Closure/ Transition:</u></p>	<p><i>Look at next week's lesson plan for: “Set up at previous meeting.”</i></p> <p><i>It begins: “Next week, we will be exploring . . .”</i></p>

University of Nevada, Reno
Southern Area Cooperative Extension
Seniors CAN
Lesson Plan

Lesson: **Food Choices for Healthy Aging**

Lesson Number: **N-1**

Introduction: This “Food Choices for Healthy Aging” lesson is designed to help older adult Learners organize their approach to eating, with specific attention to seniors’ unique needs, incorporating the USDA’s dietary guidelines and MyPyramid and Tufts University’s Modified MyPyramid for Older Adults over the age of 70.

Learning Overview: The Learner will participate in a lesson designed to teach him/her to make better nutritionally-based choices.

Lesson Objectives:

1. During the lesson, the Learner will be exposed to the following concepts about food:
 - Proportion:
 - a. MyPyramid and/or Modified MyPyramid for Older Adults
 - b. Food categories
 - c. Recommended daily servings from each category
 - d. Serving sizes
 - Variety.
 - Moderation:
 - a. Moderation in salt, alcohol, sugars
 - b. Moderation in fat, saturated fat, and cholesterol
2. During the lesson, the Learner will engage in group discussion regarding food choices, describing with clarity at least one example from his/her life experience.
3. During group discussion, either spontaneously or in response to Facilitator request, the Learner will state with clarity that s/he has selected at least one idea presented during the lesson, what that idea is, and that s/he will try this idea during the following week to see if it works for him/her. Alternatively, the Learner will state with clarity that s/he does not want to try out any of the ideas presented, and the reason for the decision.

Set up at previous meeting:

Next week, we will be exploring dietary guidelines and food choices.

Set up immediately prior to this meeting:

Facilitator assures that lighting is appropriate for Learners to see MyPyramid brochures.

Materials:
Provided by Facilitator:

- One of the following for each Learner:
 - ▶ Fact Sheet: *Food Choices for Healthy Aging* (UNCE, FS 08-01).
 - ▶ Brochures: *Finding a Way to a Healthier You*. (USDA, 2005); *Your Personal Path to Health: Steps to a Healthier You!* (USDA, 2006).
 - ▶ Handouts: *Comparison of Dietary Fats and Oils* (UNCE Handout based on Composition of Foods: Fats and Oils, Agriculture Handbook No. 8-4, United States Department of Agriculture, 1979.); *Modified MyPyramid for Older Adults* (Tufts University, 2008).
- Demonstration food item models to show serving sizes (available from NASCO, www.eNASCO.com).
- *Optional demonstration*: Fruit, cheese, and cracker snack selection to demonstrate serving size. Options: bananas, apples, or other fruit selected by group during previous week; selection of low-fat, nonfat, and sharp regular cheeses and have Learners give their impressions of taste; and whole grain crackers. The cheese tasting can lead to a good example of rational choice making in selecting foods—many people would rather eat a smaller amount of regular sharp cheese than a larger amount of a cheese lower in fat.
- *Portion Distortion I and II Slides/Quiz* from National Heart Lung and Blood Institute (<http://hp2010.nhlbihin.net/portion/>, 2003 & 2004) to help further identify and discuss food portions.
- Kitchen area with refrigerator.
- Beverage and drinking cups.
- Knives (for cutting fruit and cheese) and forks, cutting boards, paper plates – enough for 1 for each Learner and Facilitator.
- Set of measuring spoons to show serving sizes during lesson plan.
- Set of measuring cups to show serving sizes during lesson plan.
- Deck of playing cards to show serving sizes during lesson plan.
- Clean up supplies like Clorox wipes.

Note: Facilitator should review lesson plan for this week, last week and next week because information provided at the beginning of each lesson plan is needed for smooth transition between lessons.

Optional Activities:

- Group preparation of fruit/cheese/cracker snack.

References:

United States Department of Agriculture, & United States Department of Health and Human Services. (2005). *Finding a Way to a Healthier You: Based on the Dietary Guidelines for Americans*. USDA Publication number: Home and Garden Bulletin No. 232-CP. Washington, DC: U.S. Government Printing Office.

United States Department of Agriculture (2005). *MyPyramid*. Retrieved June 4, 2007 from <http://www.mypyramid.gov/index.html>

Duyff, R. L. (2006). *The American Dietetic Association's Complete Food & Nutrition Guide, Revised and Updated*. Minneapolis: Chronimed Publishing, 3rd edition.

Russell, R. M., Rasmussen, H., & Lichtenstein, A. H. (2008). *Modified MyPyramid for Older Adults*. *Journal of Nutrition*, 138: 78-82.

Lesson

<p><u>Begin Lesson:</u></p> <p><u>Transition from last week</u></p>	<p>Last week we talked about (<i>name of last week's unit</i>). Each of us selected one idea to try out. Let's talk about how those worked (or didn't work) for us, and also what we learned from last week's meeting.</p>
<p><u>Anticipatory Set</u></p>	<p>Today we will explore dietary guidelines and food choices. There are three reasons that we think this topic is important:</p> <ol style="list-style-type: none"> 1. Nutrition and the food choices you make have a major impact on your life. 2. There is a lot of news coverage about nutrition and it can seem confusing. Yyet what you need to know about, is quite simple. 3. Just a few key principles unlock the secrets to healthy eating.
<p><u>Share the Objective</u></p>	<p>1) We will be talking about how the USDA's Dietary Guidelines help us to understand basic concepts of nutrition. These are:</p> <ol style="list-style-type: none"> 1) Proportion: <ol style="list-style-type: none"> A. MyPyramid and/or Modified MyPyramid for Older Adults B. Food categories C. Recommended daily servings from each category D. Serving sizes

	<p>2) Variety</p> <p>3) Moderation:</p> <p>A. Moderation in salt, alcohol, sugars</p> <p>B. Moderation in fat, saturated fat, and cholesterol</p> <p>2) During this lesson, I will be providing information, but it is also important that we share information and ask questions in group discussion. I would appreciate it if each of you could bring up at least one example from your life experience.</p> <p>3) Also during the lesson today, I'm going to ask each of you to select one idea from the lesson to try out on your own over the next week. I'll pick one, too. Then each of us can share with the group next week how it worked out.</p>
<p><u>Share the Handouts</u></p>	<p>These summarize the main ideas we will be discussing today. <i>[Pass out the lesson materials]</i></p>
<p><u>Input</u></p>	<p>1. Proportion: Food categories and recommended number of daily servings from each. <i>[Refer to MyPyramid and/or Modified MyPyramid for Older Adults]</i></p> <p>A This is known as MyPyramid. The Pyramid helps us translate the current 2005 Dietary Guidelines for Americans.</p> <p>i. The Dietary Guidelines for Americans are set by a group of educators, nutritionists, scientists and others, along with the U.S. Department of Agriculture and the U.S. Department of Health and Human Services.</p> <p>ii. Dietary Guidelines are updated every few years as we learn more about human nutrition.</p> <p>iii. The Dietary Guidelines are developed for health promotion and chronic disease-prevention which we will talk about more in another lesson <i>[N-2]</i>. They also emphasize the value of a healthy body weight and that we should balance our food intake with physical activity to achieve or maintain a healthy weight.</p> <p>iv. Today, we will be focusing on foods, not exercise, but we should be aware that physical activity is also part of the</p>

equation for good health. MyPyramid emphasizes this by the pyramid steps and the person climbing them.

- B** We need to eat foods from **five food categories** to be healthy. MyPyramid illustrates these food groups using 6 color bands and a vertical pyramid pattern.
- i. The first band in orange of MyPyramid represents the bread, cereal, rice and pasta, or grain products group.
 - ii. The green and red bands are the vegetable group and the fruit group.
 - iii. The yellow band represents oils and fats
 - iv. The blue band is the milk group that contains milk, yogurt and cheese.
 - v. And the last band in purple represents the meat and beans group, which contains meat, poultry, fish, dry beans, eggs and nuts.
 - vi. The food groups are shown in a pyramid like this to help us understand the relative amounts of foods from each group we should consume each day.
 - vii. MyPyramid can also be tailored to each person's caloric needs by visiting the MyPyramid website and entering information such as age, gender and activity level.
 - a As people get older, they don't need as many calories per day as they once did. However, older people's need for nutrients does not decrease but may actually increase. Therefore it is important to select foods that have a high nutritional value—foods that give you lots of nutrition for the calories that you take in.
 - b Typically, most seniors need a daily intake of 1,600 calories. Others may need 2,000 or more if they are very active or have a larger body size. It is recommended they print their personalized "path to good health" from the website www.mypyramid.gov.
- C** The **recommended daily number of servings** for the

average 2000 calorie diet include:

- i. **Make half your grains whole.** From this group we find foods high in fiber and include breads, rice, cereal, pasta and crackers. The Guidelines state that we should have **6 ounces** from this category each day. How to count:

1 oz. = 1 slice of bread, ½ cup cooked pasta/rice, 1 cup of breakfast cereal, 3 cups of popcorn, OR 5 whole wheat crackers

Helpful tip: 1 muffin = a light bulb,
1 pancake = a hockey puck or CD

- ii. **Vary your veggies. Focus on fruits.** The general recommendation for the vitamin, mineral and fiber rich foods are **2 ½ cups of vegetables and 2 cups of fruit.** We should eat a few more vegetables than fruits. How to count:

1 cup = 1 small apple/1 large banana, 1 cup raw/cooked veggies, 1 cup of fruit, 2 cups leafy greens, 1 cup 100 % juice, OR ½ cup of dried fruit

Helpful tip: 1 medium size fruit = tennis ball

- iii. Notice that if we look at just the first three pyramid groups, we can see that the majority of the foods we should be eating each day are grains, vegetables and fruits. Notice also that these foods are from plants, not animals.
 - a Be aware that fruits, vegetables and grain products contain a lot of fiber. As you probably know from TV, newspapers and magazines, fiber is good for you and will be discussed in another lesson [N-2].

Caution:

- ◆ It is best to talk to your doctor before you increase fiber in your diet (1) if you are older than age 65, and/or (2) if you have had surgery on any part of your stomach, intestines, colon or rectum.
- ◆ Be sure to add fiber to your diet slowly and gradually. And be sure you drink an adequate amount of water – at least 8, eight-ounce glasses per day. Otherwise, you may have problems like

diarrhea or constipation. Diarrhea is especially dangerous because it can result in dehydration which can send an older adult to the hospital. Also, suddenly adding fiber could result in a flare-up of diverticular disease or cause you to feel very uncomfortable.

- iv. **Get your calcium rich foods.** The milk group consists of calcium-rich foods like milk, yogurt, and cheeses. If possible choose low-fat or fat-free products. For those who are lactose intolerant, fortified soy milk, Lactaid® or rice milk are good substitutes. The recommendations are **3 cups** each day from the milk group. How to count:

1 cup = 1 cup of milk, 1 - 8 oz. container of yogurt, 1 ½ oz. of natural cheese, 2 cups of cottage cheese, OR 1 ½ cups of ice cream

Helpful tip: 1 ½ oz. of cheese = 2 dominoes

- v. **Go lean with protein.** Protein foods include meat, poultry, fish, dry beans, eggs and nuts. Choose low-fat or lean meats and poultry while including more fish, beans, peas, nuts and seeds. It is recommended that you eat **5 ½ ounces** every day. How to count:

1 oz. = 1 oz. of lean meat/poultry/fish, ¼ cup of cooked dry beans, ½ oz. of nuts or seeds, 1 egg, OR 1 tbsp. of peanut butter

Helpful tip: 3 oz. of cooked meat, poultry, fish = a deck of playing cards

- vi. **Oils** are fats that are liquid at room temperature. Most Americans consume enough oil in the foods they are already eating, such as nuts, fish, cooking oils and salad dressings. No more than 5-6 teaspoons of oil are recommended.
- vii. There is a saying that nutritionists use when they talk about the food pyramid: “All foods can fit.” That means you can still eat your favorite food, you just have to eat in moderation, a piece of pie, not a whole pie.

b Balance your food choices by making low-fat and

- low-sugar choices.
- c Choose forms of foods and beverages that are lower in calories.
 - d Get physical activity.
 - e Most people will have an extra 100-300 calories, based on a 2000 calorie diet, for sweets, treats and drinks. To find out how many you may have each day, visit www.mypyramid.gov.

Before we move on, in addition to the number of servings from food groups, we also need to understand serving size.

B The Dietary Guidelines also include **servicing sizes**.

- i. *(Show food item models and use Portion Distortion.)*
These food item models are approximately one serving size each. Notice how small a serving of chicken is compared to what you might be served in a restaurant. The serving size of chicken can also be compared to a deck of cards.
- ii. In general, many people need to decrease the serving sizes of their meat (as well as their fat, which we will talk about in a moment) and increase their daily servings of fruits, vegetables and grain products. Some of our ideas about serving sizes may change as we learn more about nutrition.
- iii. Try using measuring spoons and cups when putting food on your plate. This will allow you to see the proper portions sizes compared to what you are used to.

2 Another Dietary Guideline illustrated by MyPyramid, using the color bands, is **variety**. Foods from each group are needed each day for good health. Also, you should eat a **variety** of foods within each food group. It probably won't surprise you that ½ cup of broccoli does not have exactly the same vitamins and minerals as ½ cup of corn, or that a serving of rice and a muffin don't have the exact same nutrients. Eat a variety of foods to get the whole range of nutrients that you can get within each particular group.

- 3 Dietary Guidelines also include the idea of **moderation**. This is shown in MyPyramid by the narrowing of each food group/color band from the bottom to the top.

A Choose foods moderate in sodium, salt and sugar.

- i. Look for “low sodium” or “less sugar” food items. However, keep in mind that flavors in foods are important for seniors. Try lemon juice, vinegar and flavorings such as extracts or butter flavorings. Also, try adding herbs. Be careful with spices, as they can irritate your stomach, but use them if they don’t give you problems. We’ll be talking more about making food more flavorful and interesting in another lesson.

B If you drink alcoholic beverages, do so in moderation.

Moderation is defined as no more than one drink per day for women and two drinks per day for men. What counts as one drink:

- 12 ounces of beer
- 5 ounces of wine
- 1.5 ounces of 80 proof spirits

C Choose a diet low in fat, saturated fat and cholesterol.

- i. Normal weight seniors should get 30 % or less of their total calories from fat calories. There are several types of fat: saturated and unsaturated, as well as trans-fat.
- ii. One gram of fat has 9 calories.
 - a If a person’s required average daily intake is 2,000 calories, then fat should be limited to 67 grams.
 - b 1,600 calories per day is more typical of seniors’ diets. This would then mean that no more than 53 grams of fat per day should be consumed.
- iii. You don’t need to count fat grams with MyPyramid. If you make low fat choices from all the groups you will come close to the recommended 30% of daily calories from fat.
- iv. You should also be aware that “low fat” isn’t necessarily

for everyone. An older adult who is underweight should be followed medically by a doctor and see a Registered Dietitian as well as being underweight is potentially a dangerous situation for the elderly.

- v. Unsaturated fats are the best type for you to consume. *[Refer to handout entitled “Comparison of Dietary Fats and Oils.”]*
- vi. Also avoid foods with trans-fatty acids. These are found in foods that list “partially hydrogenated” oils on their ingredients. These types of fat, found in hard margarine, fried foods, many bakery products and some packed foods, are linked to heart disease.
- vii. The body makes the cholesterol it requires. Dietary cholesterol comes from animal sources such as egg yolks, meat, poultry, fish and higher fat milk products.
- viii. You can keep your cholesterol intake at the recommended daily level of 300 mg or lower by eating more grain products, vegetables and fruits and by limiting intake of high cholesterol/ fat food products especially from animal sources.

You should be aware that this is general information for the average older adult. If your doctor or dietitian has put you on a special diet due to a medical condition, it’s important to follow it. You can ask that person about some of the ideas we are talking about here, but don’t make changes in your diet without consulting with your doctor or dietitian if you are on a diet for medical reasons.

Monitoring /
Discussion

Q: Have the food groups changed much from what you were taught years ago?

Q: How do recommended serving sizes compare to the way you were taught to cook and eat?

Q: How do recommended serving sizes compare to serving portions in restaurants?

Q: If you were going to make changes in your food choices that were more in line with the dietary guidelines, which changes would be the easiest? Which ones might be the hardest for you?

<p><u>Optional Modeling and Guided Practice</u></p>	<p>Let's go into the kitchen and create a simple, healthy snack made of fruit, low-fat cheese and low-fat crackers. <i>Facilitator and Learners should first all wash their hands. Divide slicing chores among Learners. Attention should be paid throughout to proper serving sizes of fruit, cheese and crackers.</i></p>
<p><u>Independent Practice</u></p>	<p>This can be done at any time during the lesson. It seems to work better when it is not done in the rush at the end of a meeting.</p> <p>"I'd like for each of us to select at least one idea, from what we're learning, to try out this week. Let's choose something easy to experiment with. Next week we can all compare our experiences and see what worked and what didn't."</p>
<p><u>Closure/ Transition:</u></p>	<p><i>Look at next week's lesson plan for: "Set up at previous meeting."</i></p> <p><i>It begins: "Next week, we will be exploring . . ."</i></p>

University of Nevada, Reno
Southern Area Cooperative Extension
Seniors CAN
Lesson Plan

Lesson: You Are What You Eat - **Food as Preventive Medicine** Lesson Number: **N-2**

Introduction: The “Food as Preventive Medicine” lesson is designed to introduce Learners to the concept that food plays a major role in reducing risks of disease and complications of disease, as well as in how one feels on a day-to-day basis.

Learning Overview: The Learner will participate in a lesson designed to teach him/her how food choices can reduce risks of major illness and/or their complications as well as influence daily energy levels.

Lesson Objectives:

1. During the lesson, the Learner will be exposed to information on how food choices can reduce risks of major illnesses and complications of major illnesses as well as influence how one feels on a day-to-day basis. The Learner will also be exposed to information about the benefits of incorporating soy into the diet.
 - Long-term risk-reduction benefits:
 - a. Foods to eat (fruits, vegetables, calcium and vitamin D).
 - b. Foods to limit (sodium, alcohol, caffeine, sugar, fat, unsaturated fat, trans-fat and cholesterol).
 - Short-term Benefits:
 - a. Feeling more energetic.
 - b. More energy means being more able to exercise and socialize with others.
Doing these things, in turn, helps to avoid depression.
 - Introduction to soy.
2. During the lesson, the Learner will engage in group discussion regarding how eating can affect health, describing with clarity at least one example from his/her life experience.
3. During group discussion, either spontaneously or in response to Facilitator request, each Learner will state with clarity that s/he has selected at least one idea presented during the lesson, what that idea is, and that s/he will try this idea during the following week to see if it works for him/her. Alternatively, the Learner will state with clarity that s/he does not want to try out any of the ideas presented, and the reason for the decision.

Set up at previous meeting:

Next week, we will be exploring the topic of food as preventative medicine.

Optional Activity:

We will be trying a tofu vegetable stir-fry or a tofu pie. I'll bring the prepared dish.

Set up immediately prior to this meeting:**Optional Activity:**

Facilitator prepares the tofu food dish (using the lesson recipes) prior to the meeting and refrigerates the food item at the facility the day of the meeting.

Facilitator assures that lighting is appropriate for Learners to read recipe and other lesson material.

Materials:**Provided by the Facilitator:**

One of the following for each Learner:

- Fact Sheet: *Food as Preventive Medicine* (UNCE, FS 02-13)
- Recipes: *Tofu-Vegetable Stir-Fry, Silken Pineapple Pie* (Seniors CAN Curriculum, 2008)
- Handout: *Introduction to Soy* (Seniors CAN Curriculum, 2008)

Optional Activity:

- Ingredients for stir-fry or pie
- Paper plates and plastic forks

Note: Facilitator should review lesson plan for this week, last week and next week because information provided at the beginning of each lesson plan is needed for smooth transition between lessons.

Optional Activity:

- Tofu-Vegetable Stir-Fry
 - Silken Pineapple Pie with Tofu
-

References:

National Institute on Aging (Reprinted April 2008). Osteoporosis: The Bone Thief (Age Page, online). <http://www.nia.nih.gov/HealthInformation/Publications/osteoporosis.htm> (Access date 7/25/08).

National Institute on Aging (April 2008). *Stroke* (Age Page, online).

<http://www.nia.nih.gov/HealthInformation/Publications/stroke.html>

United States Department of Agriculture, & United States Department of Health and Human Services. (2005). Finding a Way to a Healthier You: Based on the Dietary Guidelines for Americans. USDA Publication number: Home and Garden Bulletin No. 232-CP. Washington, DC: U.S. Government Printing Office.

National Center for Health Statistics, CDC (March 2006). Deaths-Leading Causes. Retrieved July 23, 2008 from <http://www.cdc.gov/nchs/fastats/lcod.htm>.

United Soybean Board (2004). Soyfoods Guide. Indianapolis: Steven's & Associates, Inc.

The American Dietetic Association Nutrition Fact Sheets. Dietary Fats: Clarifying an Age-Old Issue (2006) & Eat Your Way to Better Health (2007).

The American Heart Association (2007). Nutrition Facts: Sodium, Calcium, Fiber. Retrieved July 23, 2007 from <http://www.americanheart.org/presenter.jhtml?identifier=855>.

The American Institute for Cancer Research (2005). Nutrition After Fifty. Publication number E57-SF.

Lesson

<p><u>Begin Lesson:</u></p> <p><u>Transition from last week</u></p>	<p>Last week we talked about <i>(name of last week's unit)</i>. Each of us selected one idea to try out. Let's talk about how those worked (or didn't work) for us, and also what we learned from last week's meeting.</p>
<p><u>Anticipatory Set</u></p>	<p>Today we will explore food as preventative medicine. There are three reasons that we think this topic is important:</p> <ol style="list-style-type: none"> 1 How you feel today relates to what you eat. When you eat properly, you have more energy to exercise, to socialize and to do the things you want to do. 2 It's never too late to change eating habits to improve your health and how you feel. 3 Food choices have an impact on your risks for getting major long-term diseases. Food also has an effect on how serious complications of long-term illnesses become.

<p><u>Share the Objective</u></p>	<ol style="list-style-type: none"> 1) We will be talking about how food choices can, in the long run, reduce risks of major illnesses and complications of major illnesses. We will also talk about how food choices affect how you feel in the short and long term. We'll point out foods to eat more of, and food choices to limit. At the end of our discussion, we'll talk about soy and have a food demonstration using tofu. 2) During this lesson, I will be providing information, but it is also important that we share information and ask questions in group discussion. I would appreciate it if each of you could bring up at least one example from your life experience. 3) Also during the lesson today, I'm going to ask each of you to select one idea from the lesson to try out on your own over the next week. I'll pick one, too. Then each of us can share with the group next week how it worked out.
<p><u>Share the Handouts</u></p>	<p>These summarize the main ideas we will be discussing today. <i>[Pass out handouts.]</i> Please feel free to take notes and ask questions as they arise.</p>
<p><u>Input</u></p>	<p>When we learned about the USDA's MyPyramid and Dietary Guidelines for Americans, we learned how many servings of food to eat from each food category daily. Additionally, we talked about the idea that all foods can fit into your diet using the key principles proportion, moderation and variety.</p> <p>Today, we will be talking about which foods to select from the various categories to maximize your chances of reducing risks of major illnesses.</p> <p>First we will talk about foods to choose more often:</p> <ul style="list-style-type: none"> • Fiber • Fruits and Vegetables • Foods containing calcium and Vitamin D <p>Then foods to choose less often:</p> <ul style="list-style-type: none"> • Sodium • Alcohol • Caffeine • Sugar • Fat, Saturated Fat, Trans-fat, and Cholesterol

- 1 Major risk factors have been identified for several major illnesses.
 - A Some risk factors cannot be controlled. For example, in general, close relatives of a cancer patient have twice the usual risk for developing the same type of cancer.
 - B However, some risk factors can be controlled. For example, a diet that is low in fiber, grain products, fruits and vegetables, but high in fat, is associated with increased risks for many cancers. The recommendation then to reduce the risk of getting some kinds of cancer is to make adequate fruit, vegetables, fiber and whole-grains a regular part of your diet, and make sure your diet is low-fat.
 - i Diets high in fat have been linked to increased risks of various types of cancer particularly: breast, colon, prostate cancers and possibly cancers of the pancreas, ovary and endometrium.
 - ii There is evidence that diets high in fruits, vegetables, and grains have a protective function against several types of cancer, including lung, colon and rectal, breast, oral cavity, esophagus, stomach, pancreas, uterine, cervix and ovary. For most types of cancer, persons with low fruit and vegetable intake have twice the risk of the disease as those with a diet high in fruits and vegetables.
 - C The following diseases are directly related to diet:
 - i **Heart Disease** (leading cause of death & illness in U.S.). Your risks for heart disease can be reduced by avoiding a diet that is high in saturated fats. Controlling high blood pressure and high blood cholesterol reduces the risk of heart disease. Being overweight increases your risk for diabetes and directly increases your chance for heart disease.
 - ii **Cancer** (No.2 cause of death & illness in U.S.). The National Cancer Institute estimates that 35% of cancer deaths may be related to dietary factors.
 - iii **Stroke** (No.3 cause of death & illness in U.S.). To

reduce risk of stroke, eat foods low in fat, saturated fatty acids and cholesterol and eat a variety of fruits and vegetables. Also, controlling high blood pressure and controlling diabetes reduces risk of stroke.

- iv **Diabetes** (No.7 cause of death & illness in U.S.) also contributes to heart disease, which is the leading cause of death, and to stroke, the No. 3 cause of death. If left untreated, diabetes can lead to atherosclerosis. Becoming overweight can trigger diabetes in susceptible older people.

D Here are some more relationships between diet and health:

- i **Obesity:** Being overweight increases chances of high blood pressure, atherosclerosis, heart disease, stroke, cancer and adult-onset (type II) diabetes. There is even some recent research from Harvard Medical School suggesting that excess weight can make people more vulnerable to developing asthma. Controlling or losing weight can reduce stress on the joints and can help avoid further damage from arthritis.
- ii **High Blood Pressure:** Treating high blood pressure reduces the risk for stroke, heart disease and kidney disease. Part of high blood pressure treatment is having your condition monitored by a doctor and taking any high blood pressure medications prescribed. Even moderate weight loss and sodium restriction can reduce blood pressure significantly in older adults, as can exercise and eliminating smoking.
- iii **High blood cholesterol levels** can contribute to heart disease and stroke. Eating a diet low in saturated fat and cholesterol, and eating soluble fiber, can help to lower blood cholesterol.

2 **Foods to choose MORE often:**

A **Fruits and Vegetables**

- i Fruits and vegetables are known to reduce risks of cancer and may reduce the risk of heart disease.
- ii Fruits and vegetables are very complex and contain

more than 100 substances - including vitamins, minerals and fiber which may offer protection from cancer.

- iii The recommendation is that you eat 5 or more servings of fruits and vegetables per day. Choose a variety of deeply colored fruits and vegetables to obtain necessary nutrients.
- iv If fruit or vegetables are difficult for you to chew or swallow, try letting your knife do your work for you. Chop the fruits and vegetables as much as you need to or cook them.

B Foods Rich in Fiber

- i High fiber foods, particularly when combined with a low-fat diet, might help protect against colon and rectal cancer. Generally, a high-fiber diet is usually low in fat as well, and a low-fat diet also helps to prevent cancer. Some types of fiber (soluble fiber) help to protect against high blood cholesterol levels as well. As we stated previously, high blood cholesterol levels can contribute to heart disease and stroke. Also, fiber can help us to feel better on a day to day basis because it is so effective in preventing constipation.
- ii Fruits and vegetables are good sources of fiber. Fruits with edible skins are especially good sources of fiber.
 - a Be aware that the more that food is processed, the less fiber it has. For example, an apple with the peel still on it has 3 grams of fiber. If you remove the peel, it has only 2.4 grams of fiber. If you instead eat $\frac{1}{2}$ cup of applesauce, you get only 1.8 grams of fiber. And $\frac{3}{4}$ cup of apple juice has 0.2 grams of fiber. So choose whole fruits more often than juice.
- iii There are also other sources of fiber:
 - a Legumes—Beans, peas, lentils. These are good, healthy, low-cost choices.
 - b Whole-grain breads, cereals, pasta—the way you know whether these items are whole-grain is to look on the label. If the label says “made with whole grains” it is at least partially made with whole grains.

Look for food labels that say “100% whole grain” or “100% whole wheat.” Bran is also a good source of fiber. So is brown rice (the only kind of rice that is whole-grain). Whole-grain pasta can be found if you look for it—most pasta available in the stores is not whole-grain pasta. Popcorn is a good source of fiber.

- ◆ Whole grains are not only an excellent source of fiber, but they also are sources of antioxidant nutrients such as Vitamin E and selenium. They also provide minerals (zinc, copper, iron) and vitamins (B6 and A in addition to E.)
 - ◆ Whole grain breads tend to be more expensive than breads that are made from refined grains. The best thing to do is to buy some 100% whole-wheat bread and keep it in the freezer. Use it as needed by taking 1 or 2 slices out at a time.
- c Nuts and seeds also are high in fiber, but you need to watch your intake of these because they tend to be high in fat. They also tend to be expensive, but you can buy small amounts of broken nuts in bulk and add a tablespoon or so to stir fry, salad or yogurt. Also, edible seeds that are in fruit, such as those in all kinds of berries and in kiwi fruit, are not high in fat, and are a good source of fiber. (Caution, those with diverticular disease should avoid nuts.)
- d The following foods do not supply fiber: meat, milk and eggs.
- iv To increase health benefits of your food, get 20 to 35 grams of fiber daily. On the average, most people get only 11 grams of fiber daily —only about half of what the body needs.
- a To get enough fiber, eat at least 2 servings of fruit and 3 servings of vegetables daily. Try to choose at least 3, whole-grain foods for your daily servings from the bread, rice, pasta and cereal group. Eat legumes three times per week.
 - b Beware of two things with fiber (including fiber from fruits and vegetables):

- ◆ It is best to talk to your doctor before you increase fiber in your diet (1) if you are older than age 65, and/or (2) if you have had surgery on any part of your stomach, intestines, colon or rectum.
 - ◆ Add fiber to your diet gradually. Otherwise, you may have problems like diarrhea or constipation. Also, suddenly adding fiber could result in a flare-up of diverticular disease.
- v Eat a variety of fiber-rich foods. Fiber-rich foods have varying amounts of soluble and insoluble types of fiber. Both have health benefits. Studies suggest eating more soluble fiber may reduce blood cholesterol levels, and insoluble fiber helps prevent constipation, diverticulitis, and possibly colon cancer and diabetes. You don't have to worry how much of each kind you get as long as you eat a variety of fiber-rich foods.

C Calcium and Vitamin D

- i Not eating enough food rich in calcium will weaken your bones. Scientists agree that good nutrition can reduce the risk of getting osteoporosis by as much as half. Osteoporosis is a slow, progressive bone-weakening disease that can affect both men and women as they age. It does affect more women than men. Almost half of women over 50 suffer from bone fractures due to osteoporosis. Osteoporosis affects the majority of people over age 70. Bones become so fragile that they fracture with normal use and a fall has a much greater likelihood of causing life-threatening injury.
- a It is never too late to improve your bone health by eating enough calcium-rich foods. The National Institute on Aging recommends that men and women ages 50 and older take 1,200 mg/day of calcium and women past menopause should have 1,200 to 1,500 mg daily. That would be equivalent to four 8-oz. glasses of milk. One 8-oz glass of milk has 300 mg. of calcium.
- b Good sources of calcium include many dairy foods such as yogurt, milk and cheese. Low-fat and non-fat dairy foods generally have a calcium content

comparable to whole dairy products. These foods provide 75% of the calcium in the food supply of the United States. Other good sources of calcium include broccoli, kale, okra, collard greens and sardines or salmon with the bones. But remember you would need to eat 4 cups of cooked broccoli to get the calcium you would get in 8oz. of milk. 3 cups of cooked kale = one 8 oz. glass of milk. 4 ½ oz. of salmon with the bones = 8 oz. glass of milk. One easy way to get a serving of milk is to add low fat milk to canned soup.

- c You can also get calcium from calcium enriched foods like breads made with calcium, fortified flour, calcium-fortified cereal and calcium-enriched orange juice.
- d Surprisingly, cottage cheese is not really a good source of calcium. You would need to eat 2 cups to get the same amount of calcium you would with an 8-oz glass of milk.

ii It is better to obtain calcium from food rather than from a supplement. People with diets low in calcium often consume low levels of other important nutrients. And unlike supplements, foods can provide the other nutrients that your bones and body need to stay healthy. On the other hand, if you really cannot get enough calcium from your food, you might consider taking a calcium supplement. But you should always check with your doctor before taking this or any kind of dietary supplement.

iii In order for your body to use the calcium you take in, you also need vitamin D. Milk fortified with vitamin D is a good source of vitamin D. Your body can make its own vitamin D if you go outside and get some sunshine a few times a week.

iv Some studies suggest that calcium may play a protective role in colon cancer.

3 Foods to choose LESS often

A Sodium

- i One of the recommendations from the National Heart, Lung, and Blood Institute, for both treating and preventing high blood pressure, is to keep daily salt intake to no more than 2,400 milligrams, or about 1 teaspoon, daily. (One teaspoon of salt is 2,300 milligrams.)
- ii Remember that the 2400 mg. limit includes sodium (or salt) from all sources—*added*, as in canned or homemade soups, or *naturally occurring* as in milk, fruits and vegetables. Therefore, you may not be within recommended limits if you sprinkle a teaspoon of salt on your food over the course of a day because you haven't counted the sodium in your other foods.
- iii A tip: In general, milk, cheese, fresh fruits and fresh vegetables aren't nearly as high in sodium as are canned/packaged/prepared foods like canned peas or prepared dinners.
- iv Always remember to taste your food before adding salt and consider adding other seasonings first before adding salt.

B Alcohol

- i High levels of alcohol consumption increases the risks for many conditions, including high blood pressure, stroke, heart disease and certain cancers, such as breast cancer. High alcohol consumption is a risk factor for osteoporosis.
- ii Heavy drinkers are at risk for malnutrition because calories from alcohol may be substituted for calories from more nutritious foods.

C Caffeine

- i According to the American Dietetic Association, for most people moderate amounts (two to three cups of coffee a day) of caffeine cause no physical harm to healthy adults. Yet for some people, excessive caffeine can cause anxiety, insomnia, headaches or stomach irritation. However, caffeine may also help protect against gallstones, cavities, type 2 diabetes and Parkinson's disease, but more research is needed before

caffeine can be proclaimed a “disease preventer.”

D Sugar

- i Many foods containing added sugar supply a lot of calories but few nutrients. Older adults have lower calorie needs but still have high nutrient needs. If you get many of your calories from high sugar foods, chances are you will not be getting all of the nutrients you need.
- ii By the way, there is no evidence that eating sugar causes diabetes. Intake of sugar is, however, something that must be closely monitored by a person who is diabetic.

E Fat, Saturated Fat, Trans-Fat and Cholesterol

- i Fat
 - a Fat is needed within our body. It insulates the skin, transports fat-soluble vitamins and provides energy and feelings of satiety after a meal.
 - b However, foods high in fat often contain more calories and a diet high in saturated fat is associated with a greater risk of heart disease and increased blood cholesterol levels.
 - c Choose low-fat options between the milk and meat groups. As an example, a glass of skim milk has the same amount of calcium as whole milk but 8 grams less of fat.
 - d No more than 30% of the calories per day that you take in should come from fat. No more than 1/3 of that should be saturated fat. No more than 10% of your total daily calories should be from saturated fat.
 - e A diet high in saturated fat is associated with greater risk of heart disease and with increased blood cholesterol levels.
- ii Trans-fat
 - a Promotes heart disease and should be avoided.

b They are found in anything with “hydrogenated” or “partially hydrogenated” vegetable oils listed in the ingredients. These are often put into foods with a long shelf life—margarine, crackers, cookies, cakes and many deep-fried foods.

iii Cholesterol

a Your body makes the cholesterol it requires. You also take in dietary cholesterol through food. In general, limit dietary cholesterol to no more than 300 mg. per day.

F There are special diets that have been shown to help reduce high blood pressure and high blood cholesterol. The DASH Diet is effective with high blood pressure, while the American Heart Association Diets are effective in lowering high blood cholesterol. Each is similar to the recommendations by the USDA Dietary Guidelines for Americans and MyPyramid. If you have either of these health conditions talk with your doctor about which may be best for you.

4 Short-term benefits of healthy eating:

- A Feeling more energetic.
- B More energy means being more able to exercise and socialize with others. Doing these things, in turn, helps to avoid depression.
- C Helps the immune system stay strong.
- D Helps fight constipation.

5 Introduction to soy

A A popular “food as preventative medicine” example is the versatile soybean. The soybean is a member of the legume family and is high in protein, fiber, minerals and fat. Soy protein is a complete protein, while the oils are mostly unsaturated, high in essential fatty acids and without cholesterol. Soy foods are also a dietary source of isoflavones—phytochemicals, some with estrogen-like properties.

- B Studies suggest that eating a diet high in soy (the FDA recommends 25 grams) can reduce risks of breast cancer & osteoporosis and may help with blood sugar levels and lower cholesterol.
- C Traditional soy foods include: edamame (green vegetable soybean), miso, soy milk, soynuts, tofu, soy sauce, tempeh, natto, okara and yuba. Soy ingredients include: soybean oil, soy flour, lecithin and soy protein (textured, isolate, concentrate). Soy based products include: soy protein products (i.e. veggie burger), beverages, cheese, nut butter, yogurt and soy (non-dairy) frozen desserts.
- D We will be taste testing a vegetable stir-fry today, using tofu as a meat substitute. OR We will be taste testing the Pineapple Pie today using the tofu as a substitute for some of the cream cheese.
- E Tofu is soybean curd. It has a texture kind of like cheese. It has a very mild taste and it tends to take on the taste of the other food that is cooked with it. Although tofu has some fat, it has very little saturated fat.
- F When you buy tofu, you can get it soft, medium, firm, or extra firm. Soft tofu is used in making salad dressings, dips, and sauces. Medium is often used for cheesecake and pudding. While firm or extra firm is most often used when you use soy as a meat substitute.

Optional Activity:

Let's now try our stir-fry or cheesecake

<p><u>Modeling</u></p> <p><u>And</u> <u>Optional</u> <u>Guided</u> <u>Practice</u></p>	<p><i>Facilitator and Learners should first all wash their hands.</i></p> <p><i>Facilitator, with the help of several Learner volunteers, does the final preparation of the tofu food dish and serves to each Learner.</i></p>
<p><u>Monitoring /</u> <u>Discussion</u></p>	<p><i>After Learners have tried the tofu food dish have a group discussion on the lesson.</i></p> <p>Q: What are your thoughts on using food as a preventative medicine, as we talked about today?</p> <p>Q: Based on what we've talked about today, would you consider making changes in your diet?</p> <p>Q: What changes would be the easiest?</p> <p>Q: Which ones would be the most difficult?</p> <p>Q: What did you think of the tofu food dish you tried today?</p>
<p><u>Independent</u> <u>Practice</u></p>	<p>This can be done at any time during the lesson. It seems to work better when it is not done in the rush at the end of a meeting.</p> <p>"I'd like for each of us to select at least one idea, from what we're learning, to try out this week. Let's choose something easy to experiment with. Next week we can all compare our experiences and see what worked and what didn't."</p>
<p><u>Closure/</u> <u>Transition:</u></p>	<p><i>Look at next week's lesson plan for: "Set up at previous meeting."</i></p> <p><i>It begins: "Next week, we will be exploring . . ."</i></p>

University of Nevada, Reno
Southern Area Cooperative Extension
Seniors CAN
Lesson Plan

Lesson: **Hydration**

Lesson Number: **N-3**

Introduction: The “Hydration” lesson is designed to introduce Learners to information regarding maintenance of adequate body fluid levels because older adults are more vulnerable to dehydration, which is one of the most frequent causes of hospitalization among people over 65.

Learning Overview: The Learner will participate in a lesson designed to teach him/her techniques to maintain an adequate balance of body fluids.

Lesson Objectives:

1. During the lesson, the Learner will be exposed to the following information:
 - Danger of dehydration.
 - Symptoms of dehydration.
 - Reasons the elderly are more vulnerable to dehydration.
 - Techniques for maintaining an adequate balance of body fluid.
 - The relationship of incontinence to dehydration.
2. During the lesson, the Learner will engage in group discussion regarding hydration, describing with clarity at least one example from his/her life experience.
3. During group discussion, either spontaneously or in response to Facilitator request, the Learner will state with clarity that s/he has selected at least one idea presented during the lesson, what that idea is, and that s/he will try this idea during the following week to see if it works for him/her. Alternatively, the Learner will state with clarity that s/he does not want to try out any of the ideas presented, and the reason for the decision.

Set up at previous meeting:

Next week, we will be exploring how to maintain adequate fluid levels in our bodies.

Optional activity:

“We will make a hydrating fruit smoothie.”

Set up immediately prior to this meeting:

Place water bottle with ice in freezer or bring one in with you.

Materials:Provided by Facilitator:

- One of the following for each Learner:
 - ▶ Fact Sheet: Water: Fountain of Life (UNCE, FS 99-03)
 - ▶ Recipe: Super Sippers (Seniors CAN Curriculum, 2008)

Optional activity:

- Fruit smoothie recipe ingredients
- Blender; plastic cups
- Use of freezer and refrigerator during lesson

Note: Facilitator should bring lesson plan for this week, last week and next week because information provided at the beginning of each lesson plan is needed for smooth transition between lessons.

Activities:

- Demonstration: Preparing a water bottle with ice for transporting water.
- Optional: Demonstration and Practice: Making a hydrating fruit smoothie.

References:

Larson Duyff, R. (2006). *The American Dietetic Association Complete Food and Nutrition Guide*, 3rd edition. Hoboken, New Jersey: John Wiley & Sons, Inc.

MayoClinic.com (April 2008). *Water: How much should you drink every day*. Retrieved May 5, 2009 from <http://www.mayoclinic.com/health/water/NU00283>.

National Institute on Aging U.S. Department of Health and Human Services, National Institutes on Health (April 2005). *Age Page: Good Nutrition: It's a Way of Life*.

National Institute on Aging U.S. Department of Health and Human Services, National Institutes on Health (June 2008). *Age Page: Urinary Incontinence*

Senior Solutions of America, Inc (2000-2007). *Signs and Symptoms of Dehydration*. Retrieved July 25, 2007 from http://www.aging-parents-and-elder-care.com/Pages/Signs_of_Dehydration.html [Medline Plus information source, 6/13/06].

The American Dietetic Association (January 2005). *Water, Water, Everywhere...How Much Should I Drink*. Retrieved April 2007 from http://www.eatright.org/cps/rde/xchg/ada/hs.xsl/media_3173_ENU_HTML.htm.

Weil, A. (2002). *What's New with Water*. Dr. Andrew Weil's Self Healing Newsletter, June Issue, pg. 8. Body & Soul Omnimedia, Inc: Boston, MA.

Lesson

<p><u>Begin Lesson:</u></p> <p><u>Transition from last week</u></p>	<p>Last week we talked about (<i>name of last week's unit</i>). Each of us selected one idea to try out. Let's talk about how those worked (or didn't work) for us, and also what we learned from last week's meeting.</p>
<p><u>Anticipatory Set</u></p>	<p>Today we will explore hydration. This involves maintaining vital water levels in the body. There are three reasons that we think this topic is important:</p> <ol style="list-style-type: none"> 1. As we age we become more vulnerable to lower water intake that can lead to dehydration. 2. Dehydration is one of the most frequent causes of hospitalization among people over 65. 3. About one-half of those hospitalized for dehydration die within a year.
<p><u>Share the Objective</u></p>	<ol style="list-style-type: none"> 1) We will be discussing the following types of information: <ol style="list-style-type: none"> a) Importance of maintaining an adequate fluid balance in the body. b) Symptoms of dehydration. c) Reasons older adults are more vulnerable to dehydration. d) Techniques for maintaining an adequate balance of body fluid. e) The relationship of incontinence to dehydration. 2) During this lesson, I will be providing information, but it is also important that we share information and ask questions in group discussion. I would appreciate it if each of you could bring up at least one example from your life experience. 3) Also during the lesson today, I'm going to ask each of you to select one idea from the lesson to try out on your own over the next week. I'll pick one, too. Then each of us can share with the group next week how it worked out.
<p><u>Share the Handouts</u></p>	<p>These summarize the main ideas we will be discussing today. [<i>Pass out fact sheet and drink recipe handout.</i>] Please feel free to take notes and ask questions as they arise.</p>

Input

Water is the largest single substance in the human body (from 50% to 75%) and we can't live without it. Every body cell, tissue and organ, and nearly every life-sustaining body process, requires water.

- 1 Importance of maintaining an adequate fluid balance in the body:
 - A Water helps to control body temperature.
 - i Perspiration keeps us cool in hot weather; protects body against heat exhaustion.
 - ii Water helps the body to insulate itself against cold weather.
 - B Water carries nutrients as well as medicines to body cells and carries away waste.
 - C Water keeps mouth, nose, eyes and skin moist.
 - D Water ensures proper volume of blood.
 - E Water keeps the urinary tract flushed out. This is important in reducing the risk of urinary tract infections. Urinary tract infections can be quite serious—even fatal—in an aging person.

- 2 Symptoms of dehydration – what happens when you don't drink enough water:
 - A The first sign of dehydration is usually thirst. Thirst generally occurs when there is a 1 to 2% loss of body water. Many older people, however, have a diminished sense of thirst, and do not necessarily know they are becoming dehydrated.
 - B One easy to check sign of dehydration is the color of your urine. It should be clear or pale yellow. Darker urine indicates you are not meeting your fluid needs. Some vitamin supplements at high levels will also give urine a dark color.
 - C When loss of body water ranges from 2 to 5%, symptoms can include dry mouth, flushed skin, headache, fatigue and impaired physical performance.
 - D When loss of body water is at 6%, symptoms noted are increased body temperature, increased pulse rate and increased breathing.
 - E At 8% loss of body water, dizziness, increased weakness and labored breathing when exercise may be experienced.
 - F At 10% loss of body water, there may be muscle spasms, swollen tongue, and delirium, while at 11%, symptoms are poor blood circulation and failing kidney function.

- 3 Reasons older adults are more vulnerable to dehydration:
 - A Aging is associated with several physical conditions that contribute to dehydration.
 - i Aging is associated with decreased kidney function, which is made worse by lower water intake.
 - ii As mentioned earlier, aging is associated with a reduced sense of thirst.
 - iii Aging is associated with lower amounts of total body water.
 - a Older adults have a lower level of stored fluid in the body in part because of increase in body fat and decrease in muscle mass. If there is not enough water to release waste products, the body will withdraw fluid from body tissues, increasing the likelihood of dehydration.
 - B Other factors
 - i Some older adults have difficulty with bladder control which is made even more difficult if there are problems in getting to the bathroom. Some older adults avoid drinking fluids to prevent an embarrassing accident (see incontinence below).
- 4 Techniques for maintaining an adequate balance of body fluid:
 - A Make sure your intake of water is 48 to 64 ounces per day. That's six to eight, 8-ounce glasses per day.
 - B Take a bottle of water with you when you travel anywhere—on foot, on the bus, in a car or in an airplane.
 - C Have a glass of water or juice when you first get up in the morning.
 - D Whenever you see a water fountain stop and take a sip.
 - E Drink water before, after and during physical activity.
 - F Give yourself “water breaks” throughout the day, instead of or in addition to coffee breaks.
 - G Eat at least five servings of fruits and vegetables a day because they have a high water content.
 - H Know which liquids count as “water” and which do not:
 - i The following foods and drinks count as water:
 - a Water (of course!) – absorbed faster than any other beverage and it's calorie-free.
 - b Milk
 - c Soup

- d Fruit and vegetable juice
- e Gelatin
- f Decaffeinated soft drinks and tea.

- ii The following foods contribute less fluid than equivalent amounts of water:
 - a Anything that contains caffeine: soda, coffee, tea.
 - b Alcohol
 - c Caffeine and alcohol act as diuretics in the body and increase water loss. These types of beverages will not contribute as much as you think to your fluid intake and should be consumed in moderation.

I Be especially careful about maintaining adequate fluid intake in the following situations:

- i With illness involving fever, diarrhea, nausea and/or vomiting, try sucking on ice chips.
- ii In very hot weather both indoors and outdoors, especially when involved in outside activities like gardening or running errands, have water available at all times.

J Optional Activity: Keep in mind that healthy, hydrating drinks don't have to be boring. With a little creativity, you can make some tasty drinks out of ordinary ingredients. We will be making one of those today.

5 Incontinence

Urinary incontinence can become a serious problem as we age. It can have significant medical and social consequences. The problem is estimated to affect as many as 30% of older adults and is more prevalent in women than men.

If you don't drink enough fluids because you have difficulty making it to the bathroom on time, you have several options that will help you consume enough water:

- A. When away from home, make frequent restroom visits, even if you don't feel the need. In other words, use every restroom to your advantage!
- B. Consider adult undergarments for trips away from home if they will make you feel more confident about going out.
- C. At home, have a urinal or porta-potty handy in your

	<p>bedroom, living room or any other room in which you spend a lot of time. If you are uncomfortable having these things out in the open, try tucking them under a table with a long tablecloth, in easy reach.</p> <p>D. If adult undergarments are too expensive to use at home every day, consider using them at home selectively, whenever they work best for you—maybe at night before going to sleep or when you have company.</p> <p>E. Never forget that dehydration is a much worse fate than embarrassment. Dehydration can kill you, while embarrassment can't. And staying home for fear of embarrassment just isolates you which can lead to poor health and earlier death.</p> <p>F. There are a variety of medical options for treating urinary incontinence, depending in large part on the condition causing it. Some treatment methods are as simple as pelvic muscle exercises. Your doctor can help you select the treatment that is right for you.</p>
<p><u>Monitoring / Discussion</u></p>	<p>Q. How would you be able to tell that you might be getting dehydrated? What clues might you have even if you weren't thirsty?</p> <p>Q. What would be the easiest way for you to remind yourself to drink enough water every day? [<i>Prompt, if needed</i>]: Sticking a note on your refrigerator that says: "Six to eight 8-ounce glasses per day? Filling a large container each morning with 64 ounces of water and making sure it gets emptied by the end of the day? Or would you not need a reminder method?"</p> <p>Q. [<i>Optional--assess comfort level of group with this topic</i>]: If a very close friend or relative confided to you that he or she deliberately limited fluid intake because (s)he is afraid of incontinence, what might you say to them? What if this person said they never went out because they were afraid of an embarrassing accident?</p>
<p><u>Modeling</u> and <u>Guided Practice</u></p>	<ul style="list-style-type: none"> • <i>Demonstration: Preparing a water bottle with ice for transporting water.</i> <p>This is an easy way to carry around refreshing liquid as you are doing activities outside of your home. <i>Open freezer, take out water bottle. Do any of you already do this? All you do is take a water bottle, fill it half way with water, then put it in the freezer. You store it there until you are ready to go out. When you are ready to</i></p>

leave, you fill it the rest of the way with water. You sip on it as you are going about your errands. The ice gradually melts, giving you a steady source of cold water.

- ◆ The reason you don't fill the bottle all the way up is that water expands as it freezes. Sometimes the cap can get frozen and even broken if it's filled all the way.
- ◆ When freezing, place the bottle at an angle so that the water collects toward the bottom of the bottle rather than the top. This way the cap will not be frozen shut when you go to fill the bottle with water. Current studies have shown that it is safe to freeze clean, plastic water bottles (read below).
- ◆ Most plastic water bottles are designed for single use only. The "Resin ID Code" on the bottom of plastic containers is used to more easily identify and sort the plastics for recycling. It is not a "safety" code. If you reuse plastic water bottles frequently, consider buying bottles designed for this purpose like those made from polyethylene, glass, stainless steel or aluminum (lined). However, always clean the reusable water bottle with soap and water after each use to eliminate germs.
- *Optional Demonstration and Practice: Making a hydrating fruit smoothie following the recipe.*

Facilitator and Learners should first all wash their hands. Follow recipes with learners. Ask for volunteers to perform various tasks called for in the recipes. Notice and praise Learners' unique ways of accomplishing the tasks—e.g., techniques that add to safety, efficiency, reduced waste.

<p><u>Independent Practice</u></p>	<p>This can be done at any time during the lesson. It seems to work better when it is not done in the rush at the end of a meeting.</p> <p>"I'd like for each of us to select at least one idea, from what we're learning, to try out this week. Let's choose something easy to experiment with. Next week we can all compare our experiences and see what worked and what didn't."</p>
<p><u>Closure/ Transition:</u></p>	<p><i>Look at next week's lesson plan for: "Set up at previous meeting."</i></p> <p><i>It begins: "Next week, we will be exploring . . ."</i></p>

University of Nevada, Reno
Southern Area Cooperative Extension
Seniors CAN
Lesson Plan

Lesson: **Healthy Low-Cost Eating and Shopping, Part 1** of 2 Lesson Number: **N-4**

Introduction: The “Healthy Low-Cost Eating and Shopping” lesson is designed to teach Learners to adjust eating and shopping habits to save money, while incorporating information previously presented in the *Food Choices for Healthy Aging* and *Food as Preventative Medicine* lesson plans.

In Part 1, the Learner will receive information on ways to create healthy, low-cost meals and snacks and will learn how to read food labels.

In Part 2, the Learner will participate in a grocery store tour to learn more about making healthy, low-cost food selections and to practice reading food labels.

Learning Overview: The Learner will participate in a lesson designed to teach him/her how to incorporate healthy eating into his/her shopping and food preparation habits while cutting costs.

Lesson Objectives:

1. During the lesson, the Learner will be exposed to the following ideas regarding healthy low-cost eating and shopping:
 - Healthier food choices.
 - Ways to save money at the grocery store.
 - Introduction to reading food labels.
 - Incorporating beans as a low-cost protein source.
2. During the lesson, the Learner will engage in group discussion regarding healthy low-cost eating and shopping, describing with clarity at least one example from his/her life experience.
3. During group discussion, either spontaneously or in response to Facilitator request, the Learner will state with clarity that s/he has selected at least one idea presented during the lesson, what that idea is, and that s/he will try this idea during the following week to see if it works for him/her. Alternatively, the Learner will state with clarity that s/he does not want to try out any of the ideas presented, and the reason for the decision.

Set up at previous meeting:

Next week, we will explore healthy, low-cost eating and shopping.

Optional activity:

I will bring in prepared Black Bean Brownies or Bean Pita Pizza ingredients.

Set up immediately prior to this meeting:

Facilitator assures that lighting is appropriate for Learners to read food labels.

Optional activity:

Facilitator prepares and stores properly during the meeting the Black Bean Brownies or ingredients for the Bean Pita Pizza.

Materials:

Provided by the Facilitator:

One of each of the following for each Learner:

- Fact Sheet: *Healthy Low-Cost Eating and Shopping* (UNCE, FS 08-12).
- Recipes: *Bean Pita Pizzas, Black Bean Brownies* (Seniors CAN Curriculum, 2008).
- A packaged food item for each participant for label reading activity

Optional Activity:

- Bean recipe ingredients
- Paper plates and plastic forks for eating

Need:

- Microwave, refrigerator

Note: Facilitator should review lesson plan for this week, last week and next week because information provided at the beginning of each lesson plan is needed for smooth transition between lessons.

Activities:

- Label reading activity

Optional:

- Bean Pita Pizza demonstration and practice or Black Bean Brownie taste demonstration.
-

References:

Eating Well As We Age. <http://www.fda.gov/opacom/lowlit/eatage.html> [Accessed 12/11/06].

Growing Older, Eating Better. Revised March 2004. FDA Consumer Magazine, 1996 Issue, Pub. No. FDA 04-1301C. http://fda.gov/fdac/features/296_old.html [Accessed 12/11/06].

EN's Advice on How to Spice Up Your Food and Health, Diane Welland, MS, RD. Environmental Nutrition, July 2004, pg. 2.

4 weeks of Fresh Snack Ideas, Catherine D. Johnson, PhD, RD. Ensure Health Connection, August 2003, pg. 8.

Organic Foods: Why They're Worth the Extra Cost. Dr. Andrew Weil's Self Healing Newsletter, November 2005.

How to Understand and Use the Nutrition Facts Label.
<http://www.dfsan.fda.gov/~dms/foodlab.html> [Accessed 12/11/06].

Cooking Tips, Michigan Bean Commission.
<http://www.michiganbean.org/cookingTips.html> [Accessed 11/28/07].

Money-Saving Grocery Tips. MSN Lifestyle-Food & Entertaining-Article.
<http://lifestyle.msn.com/FoodandEntertaining/KitchenEssentials/Article.aspx?cp.documentid=296> [Accessed 9/28/05].

Lesson

<p><u>Begin Lesson:</u></p> <p><u>Transition from last week</u></p>	<p>Last week we talked about (<i>name of last week's unit</i>). Each of us selected one idea to try out. Let's talk about how those worked (or didn't work) for us, and also what we learned from last week's meeting.</p>
<p><u>Anticipatory Set</u></p>	<p>Today we will explore healthy, low-cost eating and shopping and practice reading and understanding food labels.</p> <p>Our previous work on the lessons Food Choice for Healthy Aging and Food as Preventative Medicine taught us a lot about healthy food choices. It's easy to talk about these ideas, but how can we put them into practice? Especially on a fixed income or budget? This lesson ties together what you have learned in previous lessons.</p>
<p><u>Share the Objective</u></p>	<p>1) We will be talking about several ideas to help you make your eating and shopping healthier and lower cost. We will be covering:</p> <ul style="list-style-type: none"> a) Healthier food choices. b) Ways to save money at the grocery store.

	<p>c) Introduction to reading food labels. d) Incorporating beans as a low-cost protein source.</p> <p>2) During this lesson, I will be providing information, but it is also important that we share information and ask questions in group discussion. I would appreciate it if each of you could bring up at least one example from your life experience.</p> <p>3) Also during the lesson today, I'm going to ask each of you to select one idea from the lesson to try out on your own over the next week. I'll pick one, too. Then each of us can share with the group next week how it worked out.</p>
<p><u>Share the Handouts</u></p>	<p>These summarize the main ideas we will be discussing today. <i>[Pass out handouts.]</i> Please feel free to take notes and ask questions as they arise.</p>
<p><u>Input</u></p>	<p>1 As we age, nutrition remains an important part of our lives. Studies have shown that a healthful diet in our later years helps to both reduce the risk of disease such as heart disease, diabetes and osteoporosis, as well as manage the signs and symptoms of diseases. Improper nutrition can lead to problems recovering from an illness, increase in health care costs, higher incidence of nursing home admission and a poorer quality of life.</p> <p>2 However some “healthy” food choices like fresh fruit or chicken are often more costly, leading seniors to buy less expensive, less nutritious foods. So how can we make healthy food choices while on a budget?</p> <p>3 One idea we would like you to consider is making a large amount of food, then freezing the extra servings.</p> <p>a) Think of this as making your own TV dinners—except it is less expensive and is likely to be more nutritious than store-bought TV dinners.</p> <p>b) When you are cooking rice, potatoes or pasta, you can make extra then freeze the extra for later use. What you are making ahead of time and freezing doesn't have to be the whole meal or dish.</p>

- c) Use scotch or masking tape and a marker to label and date the food you freeze so that you can keep track of what it is and how long you have had it.

4 Cooking methods

- a) You probably already realize that frying foods in fat or oil will add more fat than needed.
- b) Alternatives to frying meat are baking, broiling and grilling.
- c) You can also cook meat by adding liquid then boiling it, making a stew or cooking it in a crock-pot. This is especially good for less tender cuts of meat.
- d) Of course, you can always marinate less tender cuts of meat, then broil or grill it. What kinds of cooking methods do you currently use? *Allow group discussion and reiterate/reinforce the lower fat methods of cooking during group discussion.*

3 Healthy Low-Cost Eating:

- a) Keep frozen and canned produce on hand; look for “no salt” or “no sugar” added.
- b) Use healthful spices like cinnamon on plain oatmeal or rosemary on fish.
- c) Try different combinations: crunchy cereal sprinkled on yogurt, salsa added to a scrambled egg, roasted chicken with sliced peaches, grapes or nuts in a leafy salad.
- d) Make a large amount of food and freeze small, individual portions creating a “frozen dinner” for another meal - don’t forget to label and date the container.
- e) Baking, grilling and broiling are healthier cooking methods than frying.
- f) Use a crock-pot for easy preparation and freeze the leftovers to avoid throwing away food - try stew meat, frozen vegetables and seasoning.
- g) Consider substitutions: a low-fat, frozen fudge bar for ice cream, popcorn for potato chips, non-fat yogurt on a baked potato instead of sour cream.
- h) Changing recipes: applesauce for oil in brownie recipes,

firm tofu instead of chicken in a stir-fry, replace one egg with 2 egg whites when baking.

- i) Snack ideas: dip pretzels into hummus, enjoy cottage cheese and fruit, spread peanut butter on celery, add an almond to the center of a dried plum or try soy nuts.

4 Healthy Low-Cost Shopping:

- a) Clip coupons, look for the store's weekly specials or join the store's "reward" program to save money.
- b) Compare prices and cost per serving (unit); take a calculator!
- c) Shop around: Wal-Mart* will accept all store sale ads and coupons, while pharmacy stores like Walgreens* and dollar stores often offer deals on non-perishables.
- d) Always shop with a food list to avoid impulse buying of items you might not really need. Try to shop when you are not hungry.
- e) Consider buying generic or store brands; usually they have the same nutritional value.
- f) Buy certain items in bulk, only if you will use them, like apples, potatoes and paper goods.
- g) Try to avoid buying convenience or pre-made foods which can be more costly.
- h) Organic foods will be pricier so if you want to spend the extra money, focus on peaches, strawberries, apples, spinach, celery, pears, bell peppers, raspberries, nectarines and potatoes as they are often the most contaminated with pesticides.
- i) Get fresh produce in season, strawberries in May and cucumbers in August.
- j) Canned and frozen produce is economical, convenient and nutritious.

- k) Higher fat ground meat is less expensive, drain off the excess fat to make it more healthful.
- l) Watch for special pricing on meat, chicken and fish; frozen fish fillets and whole chicken fryers are good choices.
- m) Save with day-old bakery items and use immediately or freeze.
- n) Common variety, block cheese like cheddar or Monterey jack will offer the best value.
- o) Plain oatmeal in a large container costs less than the single serve, flavored varieties.
- p) Buy plain soups that cost less and add frozen vegetables to them.
- q) If you have some difficulties, consider these options:
 - Can't chew? Try other foods like applesauce, cooked cereals, eggs or beans.
 - Can't shop? Ask a friend for help, try store delivery or use the store scooter.
 - Can't cook? Use the microwave or try a senior center meals program.
 - No appetite? Eat with friends, try spices or herbs, talk to your doctor.
 - Short on money? See about eligibility at Meals on Wheels or Food Stamps.

5 Introduction to reading food labels:

- A In your fact sheet is a sample Nutrition Facts food label. It's enlarged so that we can see it clearly. Using the food label and ingredient list helps you to determine if the food has an ingredient you are trying to avoid, like Trans fat, or one you want to include, like fiber from a whole grain source.
- B Let's go over the elements in one of these labels. *Go over this section of the fact sheet cover each element: Serving Sizes (point out that these can be surprising and can help you decide if the manufacturers' claims that a food is low in fat or low in sodium is deceptive), then Calories (Per*

Serving), Calories from Fat (Per Serving), Nutrition Facts Panel (listing amount of fat, protein, carbohydrate, cholesterol and sodium), Daily Reference Values, and % DV with 5% or less is low and 20% or more is high.

- C Next week, we will be meeting at the grocery store and we will practice reading food labels while we are there. I'll be giving you portable magnifying lenses that you can use to read some of the fine print, because the Nutrition Facts labels on food packages themselves are quite a bit smaller than what we are looking at here.

6 Label reading

A Today we are going to interpret the information contained on a food label. *Pass out food items or their labels.* Go over the information contained on the labels and ask for input from participants on their reaction to learning what is actually in the foods that they eat.

7 Using beans. Optional Activity. (If you do not do the demonstration, share the information.)

A A Healthy Low-Cost Favorite...Beans!

B Beans are high in protein and fiber, low-fat, inexpensive and easy to prepare. They can be purchased dry, canned or frozen. Cooked beans can be stored safely in air tight containers in the refrigerator (at least 4 days) or freezer (up to 1 year).

C Beans contain sugars that sometimes cause stomach gas. Always soak, then rinse dry beans prior to cooking to reduce these sugars. Rinsing canned beans will do the same, as well as reduce the sodium. Also, gradually introduce beans into your diet. For more serious symptoms try an anti-gas aid like Beano®*.

D Beans come in many varieties and can be used in soups, salads, casseroles, stews, meatballs and meatloaf as a side dish and in many Mexican food recipes like tacos, burritos, enchiladas or tostadas.

Now let's go into the kitchen and prepare the Bean Pita Pizza recipe or try the Black Bean Brownies.

<p><u>Optional Modeling and Guided Practice</u></p>	<p><i>Facilitator and Learners prepare the Bean Pita Pizzas then eat it or try the Black Bean Brownies.</i></p>
<p><u>Monitoring / Discussion</u></p>	<p>Q: Have you tried any of the ideas we've talked about today, or ideas similar to the ones we discussed, before? How did they work out for you?</p> <p>Q: Were there any ideas we talked about today that you haven't tried? Which of those would be the easiest to start doing? Which might be difficult for you to start doing?</p>
<p><u>Independent Practice</u></p>	<p>This can be done at any time during the lesson. It seems to work better when it is not done in the rush at the end of a meeting.</p> <p>"I'd like for each of us to select at least one idea, from what we're learning, to try out this week. Let's choose something easy to experiment with. Next week we can all compare our experiences and see what worked and what didn't."</p>
<p><u>Closure/ Transition:</u></p>	<p><i>Look at next week's lesson plan for: "Set up at previous meeting."</i></p> <p><i>It begins: "Next week, we will be exploring . . ."</i></p>

University of Nevada, Reno
Southern Area Cooperative Extension
Seniors CAN
Lesson Plan

Lesson: **Healthy Low-Cost Eating and Shopping, Part 2** of 2 Lesson Number: **N-5**

Introduction: The “Healthy Low-Cost Eating and Shopping” lesson is designed to teach Learners to adjust eating and shopping habits in a low-cost manner, incorporating information previously presented in the *Food Choices for Healthy Aging* and the *Food as Preventative Medicine* lesson plans.

In Part 1, the Learner received information on ways to create healthy, low-cost meals and snacks and was introduced to information about reading food labels.

In Part 2, the Learner will participate in a grocery store tour to learn more about making healthy, low-cost food selections and to practice reading food labels.

Learning Overview: The Learner will participate in a lesson designed to teach him/her how to incorporate healthy eating into his/her shopping and food preparation habits and ways to cut costs.

Lesson Objectives:

1. During the lesson, the Learner will be exposed in the context of a grocery store tour to ideas to make grocery-shopping choices healthier and lower-cost. Modeling and guided practice in reading food labels will be provided in structured exercises throughout the tour.
2. During the lesson, the Learner will engage in group discussion regarding healthy low-cost eating and shopping, describing with clarity at least one example from his/her life experience.
3. During group discussion, either spontaneously or in response to Facilitator request, the Learner will state with clarity that s/he has selected at least one idea presented during the lesson, what that idea is, and that s/he will try this idea during the following week to see if it works for him/her. Alternatively, the Learner will state with clarity that s/he does not want to try out any of the ideas presented, and the reason for the decision.

Set up at previous meeting:

Next week, we will be touring a grocery store together. We will talk about how to save money at the store and we will also practice reading food labels. It is suggested you make a grocery store “interest list” so that we can be sure to look at special food products that you are interested in.

We will be meeting at (*name of*) grocery store at our regular meeting time. Each of you will be responsible for your own transportation to the grocery store and home. Let's discuss transportation now so that we can problem-solve anything that might come up as a barrier to anyone's getting there. Facilitator recommends carpooling.

Set up prior to this meeting:

Facilitator should become familiar with the layout of the particular grocery store being toured.

The order of the grocery departments visited works out best under time constraints (and sometimes with the stamina of Learners) according to the most efficient path from one side of the store to the other. The arrangement of the lesson plan assumes that the tour will start at produce. The Facilitator then guides Learners to aisle and store perimeter food displays according to which display is closest to the one just previously visited. Order of presentation of lesson plan material should be adjusted to the layout of the store.

Facilitator should consider contacting manager of grocery store so that the teaching session does not come as a surprise to store personnel.

Materials:

Provided by Facilitator:

One of the following for each Learner:

- Small magnifying lens to assist in reading food labels.

Provided by other Learners:

- Each member provides his or her own transportation to and from grocery store.

Optional:

- Set of measuring spoons to show serving sizes.
- Set of measuring cups to show serving sizes.
- Pocket calculator to use if unit pricing labels are missing.

Note: Facilitator should review lesson plan for this week, last week and next week because information provided at the beginning of each lesson plan is needed for smooth transition between lessons.

Activities:

- Shopping tour with guided practice in reading food labels

References:

United States Department of Agriculture, & United States Department of Health and Human Services. (2005). *Finding a Way to a Healthier You: Based on the Dietary*

Guidelines for Americans. USDA Publication number: Home and Garden Bulletin No. 232-CP. Washington, DC: U.S. Government Printing Office.

United States Department of Agriculture (2005). *MyPyramid*. Retrieved June 4, 2007 from <http://www.mypyramid.gov/index.html>

Duyff, R. L. (2006). *The American Dietetic Association's Complete Food & Nutrition Guide, Revised and Updated*. Minneapolis: Chronimed Publishing, 3rd edition.

Russell, R. M., Rasmussen, H., & Lichtenstein, A. H. (2008). *Modified MyPyramid for Older Adults*. *Journal of Nutrition*, 138: 78-82

How to Understand and Use the Nutrition Facts Label.
<http://www.dfsan.fda.gov/~dms/foodlab.html> [Accessed 12/11/06].

Money-Saving Grocery Tips. MSN Lifestyle-Food & Entertaining-Article.
<http://lifestyle.msn.com/FoodandEntertaining/KitchenEssentials/Article.aspx?cp.documentid=296> [Accessed 9/28/05].

Lesson

<p><u>Begin Lesson:</u></p> <p><u>Transition from last week</u></p>	<p>Last week we talked about (<i>ways to create healthy, low-cost meals and snacks and how to read food labels.</i>) Each of us selected one idea to try out. Let's talk about how those worked (or didn't work) for us, and also what we learned from last week's meeting.</p>
<p><u>Anticipatory Set</u></p>	<p>Today we will explore ways to grocery shop for healthier, low-cost food choices, building on the knowledge you have gained in the past few meetings.</p>
<p><u>Share the Objective</u></p>	<ol style="list-style-type: none"> 1) During this tour, we will talk about ways to make grocery-shopping choices healthier and lower-cost. We will be practicing reading food labels as we go through the store, and we will learn how doing this helps us to make better choices when we shop. 2) During this lesson, I will be providing information, but it is also important that we share information and ask questions in group discussion. I would appreciate it if each of you could bring up at least one example from your life experience. 3) Also during the session today, I'm going to ask each of you to select one idea from the lesson to try out on your own over the next week. I'll pick one, too. Then each of us can share with the group next week how it worked out.

Input,
Modeling,
and
Guided
Practice

(Avoid labeling any food “good” or “bad.” Also, include the less expensive store brands in the nutrient comparisons whenever possible.)

1 Introduction

- A Before we begin, let’s talk about the route we will take through the store. When you are actually shopping, it is better for food safety reasons to shop for milk, meat, poultry, fish and eggs last. Today, since we are not actually putting grocery items in a cart, we will go from one side of the store to the other one time, stopping along the way at the food displays we will study. We will be looking at meat and dairy displays somewhere in the middle of our tour, not at the end, as we would do if we were actually shopping. We are doing it this way today to conserve time.
- B Also, as we are going through the store, notice the differences between food displayed around the perimeter of the store and food displayed on the aisles, especially the ends of the aisles that face the front and back store perimeters. Most fresh, unprocessed items are located around the store perimeter. The aisle displays tend to have more packaged and processed foods and these tend to be more expensive than unprocessed foods.
- C When we look at the packaged foods, keep in mind that in some stores, more expensive brand name products are on the shelves at eye-level, while the better buys are on the bottom or top shelves. As we look at products, let’s see if that seems to be true in this store. *[Incorporate this concept in studying the food displays throughout the tour.]*
- D Let’s also look at some of the items that are packaged in bulk. Usually, although not always, buying in bulk gives you a lower cost per serving. It can be economical to buy in bulk as long as you are sure you will use the entire package you buy—that it won’t spoil before you have used it all. One way to help with this is to buy in bulk with a friend. *[Incorporate this concept also in studying the food displays throughout the tour.]*

2 Produce.

[Do not stay too long here or you will run out of time later].

- A The produce department actually is the best place to start your shopping trip. This way you are not tired and can take time to explore new items, choose the freshest produce and choose the best buys.
- B Fresh fruits and vegetables contain vitamins, minerals and antioxidants and should be at the top of your grocery list. Remember to choose a variety. In general, the darker the vegetable the higher the nutrient content.
- C The most desirable produce shows no signs of being “man-handled” i.e. cuts, bruises or soft spots.
- D Best buys are fruit and vegetables in season (law of supply and demand = lower cost).
- E If you think produce is expensive, compare cost per serving of a banana or apple to a snack cake/cupcake or chips.
- F Remember that fruit and vegetables are virtually fat-free with the exception of avocados, coconut and olives.
- G “Organic” produce is more expensive and it may not be affordable for you. If you are concerned about pesticides, wash produce well with a fruit and vegetable scrub brush under running water. **Any risk of pesticide exposure is minute compared with major risk of chronic disease from not eating fruits and vegetables.**
- H Buying fresh fruits and vegetables in season and freezing/canning them for later will save you money and allow you to eat the foods you like year round.

3 Dairy

- A Let’s look at variations in protein, calcium and fat content of milk. *Give each Learner a magnifying lens. Explain that these are to help read food labels and suggest they take this to the store with them regularly.*
- B *Give one person a carton of whole milk, one a carton of reduced fat (2%), and another a carton of fat-free (formerly called skim or non-fat).*
- C *Ask each Learner to read off fat and protein content of the carton of milk he/she is holding. No matter what kind of milk, the calcium and protein content are comparable.*
- D Now let’s look at the fat gram content of each carton. *Have them find fat gram content on label (not % DV – too confusing) and compare. Total amount of fat per serving is the main concern.*
 - i What size milk do you usually buy? The bigger size

you buy the less costly per serving. But does anyone ever have the problem of milk spoiling before they've finished the carton? What are some ways to get around that problem? (*Answers: buy the smaller size, buy a larger size and split it with a neighbor, or use nonfat dry milk which has a shelf-life of approximately 6 months.*) If you ever have any milk leftover that is going to go to waste, try making a batch of instant pudding. Chances are you will consume it faster that way!

- E *Compare nutrients and pricing in low-fat and fat-free yogurt.*
- I *Point out orange juice with calcium added or a soy based dairy substitute.*

4 Meats

- A *Facilitate Learners in comparing calories and fat from labels of prepared meats like ground beef (regular, and variations of fat percentages) and ground turkey.*
- B *Regular ground beef is cheaper but yields much less in edible portion, and causes more work (draining and disposing of grease). Extra lean is more economical due to less waste.*
- C *Labels are not found on traditional cuts of meat. You have to "eyeball" them for fat content. Look for marbling and fat on the outside.*
- D *Tender cuts are more expensive and have more fat. Be aware that some fat on these expensive cuts is not visible, but it is there—that's what makes these cuts of meat so tender.*
- E *Tougher, less expensive cuts of meat are easier on your pocketbook and as well as your health. Try slow cooking and marinating to tenderize less expensive cuts.*
- F *Point out food safety instruction labels found on all meat packages.*
- G *Point out plastic bags and paper towels near meat—use to protect hands and cover meat so that it does not come into contact with other foods in basket—for food safety reasons.*
- H *Point out any food safety concerns in the meat areas like expiration dates, food stacked too high in the cooler, etc.*
- I *Remember to also look for other protein sources like chicken, fish and ground turkey, along with eggs, nuts, tofu and beans.*

5 Cheeses

- A *Do label comparison as above. Good examples are regular*

cheddar, 2% reduced fat, and fat free grated varieties, or slices. Also compare nutrients, particularly calcium and protein in processed vs. natural cheeses.

- B Use regular “sharp” cheese in **small** amounts to give flavor in cooking.
- C You may wish to experiment with low-fat varieties of cheeses for eating. Flavor is widely variable by brand, with fat-free being least palatable to some people.

6 Bread

- A Bread is not a high fat food, except for specialty breads like garlic bread, biscuits and coffee cake.
- B The nutrient to look for is **fiber** – the more the better.
- C *Compare “wheat” and “white”. Typically note the difference in fiber due to fact that whole wheat or other whole grain flour is not first ingredient.*
- D Whole grain bread that has “whole” wheat or other whole grain flour as first ingredient will have the most whole grain in it. Whole grains are an important source of vitamins, minerals and fiber.
- E Also, look for breads with calcium-fortified flour.
- F Point out that tortillas are available in both corn and whole wheat for added nutrients.

7 Cereals

- A They can be most expensive per pound of any grocery item, including meat.
- B Least processed = least cost, best nutrition (*use oatmeal as example*).
- C Look for **fiber** (recommendation is 20 to 35 grams per day).
- D Also look for cereals that are “calcium fortified.”
- E Try for less than 5 grams of sugar per serving. High sugar cereals are the most expensive.
- F Check serving sizes to see if they're comparable.
- G Avoid granolas unless low fat. [*Good place to compare labels for fat.*]
- H Try using the store brand cereals without fancy packaging.

8 Crackers—do comparisons as above.

1 Canned goods – fruits and vegetables

- A Nutrition comparable to fresh or frozen, but the sodium can be very high (*look at labels*).

- B The recommended limit on sodium is 2,400 milligrams per day, which is equivalent of a little more than 1 teaspoon of salt.
 - i Remember that 2400 mg. includes sodium (or salt) from all sources—added, as in canned or homemade soups, or naturally occurring, as in milk, fruit, vegetable. This means you are not within recommended limits if you sprinkle a teaspoon of salt on your food over the course of a day, because they haven’t counted the sodium in their other foods.
 - ii In general, milk, cheese, fresh fruits, and fresh vegetables aren’t nearly as high in sodium as are canned/packaged/prepared foods.
- C Small cans may be more expensive per serving but could be better buy due to less waste. On the other hand, you can take leftover canned vegetables and add them to soup, a stew, an omelet, etc.
- D Keep some canned goods on hand for days you don’t feel like shopping.
- E Juice is not as nutritious as fruit, and it adds lots of calories for the nutrition you get. (If it’s a calcium-enriched juice, though, at least you’ll get to boost your calcium intake – those are usually in the frozen juice and chilled carton juice sections of the store, not the canned goods section.)
 - i When buying juices, look for “100 % juice” – anything other than that will offer added calories from sugars and other sweeteners. Avoid products in which high fructose corn syrup is a main ingredient. Frozen juice is a better buy.

9 Frozen Foods

- A Novelty ice creams/ frozen desserts are very high cost per serving.
- B Frozen vegetables are a very good choice for cost and nutrition. They are low in sodium. There’s really no waste if you buy in a larger size with better unit pricing. You store them in the freezer, and just take what you need from the bag when you are cooking, leaving the rest in the freezer. You can close the bag with a twist tie, a rubber band, a paper clip or a clothespin.
- C Frozen dinners may be poor choices for cost and are often very high in sodium. If you choose a frozen dinner look for one that includes mainly vegetables, is between 300-400 calories and low in fat and sodium. As we discussed in our previous meeting, cooking in larger quantities and making

	<p>your own “TV dinners” to freeze are a better deal both in terms of cost and nutrition.</p> <p>10 You are better off avoiding sugary drinks and snacks. They often have little nutritional value and are high in calories due to added sugar. What are healthier drinks and snacks?</p> <p>11 You have probably noticed throughout this tour that I have included store-brands in our food comparisons. In general, they are comparable in nutrition and quality, but cost less. If you don’t use store brands now, why not give them a chance?</p> <p>A If you prefer a brand name, look for coupons to save you money. Also, remember to shop the sale ads and join the store’s “rewards” program to save money.</p>
<p><u>Monitoring / Discussion</u></p>	<p>Q: Were you surprised by anything you read on the food labels?</p> <p>Q: Is there anything you might do differently now in your grocery shopping?</p>
<p><u>Independent Practice</u></p>	<p>This can be done at any time during the lesson. It seems to work better when it is not done in the rush at the end of a meeting.</p> <p>"I'd like for each of us to select at least one idea, from what we're learning, to try out this week. Let's choose something easy to experiment with. Next week we can all compare our experiences and see what worked and what didn't."</p>
<p><u>Closure/ Transition:</u></p>	<p><i>Look at next week's lesson plan for: "Set up at previous meeting."</i></p> <p><i>It begins: "Next week, we will be exploring . . ."</i></p>

+University of Nevada, Reno
Southern Area Cooperative Extension
Seniors CAN
Lesson Plan

Lesson: **Food Safety, Part 1**

Lesson Number: **FS-1**

Introduction: The two-part “Food Safety” lesson is designed to introduce Learners to food safety during all stages of food preparation, because older adults currently represent the largest segment of the United States population that is considered “at-risk” for foodborne illnesses.

Part 1 of the lesson covers shopping for and transporting food items as well as food safety temperatures.

Part 2 of the lesson covers food safety in the kitchen: cooking, preparing and storing food safely.

Learning Overview: The Learner will participate in a lesson designed to teach him/her basic food safety techniques.

Lesson Objectives:

1. During the lesson, the Learner will be exposed to food safety techniques during the following stages of food preparation:
 - Shopping.
 - Transporting.
 - Food safety temperatures.
2. During the lesson, the Learner will engage in group discussion regarding Food Safety, describing with clarity at least one example from his/her life experience.
3. During group discussion, either spontaneously or in response to Facilitator request, the Learner will state with clarity that s/he has selected at least one idea presented during the lesson, what that idea is, and that s/he will try this idea during the following week to see if it works for him/her. Alternatively, the Learner will state with clarity that s/he does not want to try out any of the ideas presented, and the reason for the decision.

Set up at previous meeting:

Next week, we will be exploring how we can keep ourselves healthier through food safety practices.

Set up immediately prior to this meeting:

- Facilitator places a thermometer in the refrigerator if available.

Materials:Provided by Facilitator:

One of each of the following for each Learner:

- Fact Sheet: *Food Safety at the Grocery Store* (UNCE, FS 04-30), *Transporting Food Safely* (UNCE, FS 04-05).
- Refrigerator thermometers (will need access to a refrigerator for demonstration).
- Demonstration Items: insulated food safety bag, Blue ICE gel pack, refrigerator thermometer.

Note: Facilitator should review lesson plan for this week, last week and next week because information provided at the beginning of each lesson plan is needed for smooth transition between lessons.

Activities:

- Demonstration: Checking refrigerator temperature (and other items to be used as examples during the lesson discussion).

References:

USFDA, Jan/Feb 1991; Revised March 2003. *The Unwelcome Dinner Guest: Preventing Foodborne Illness*. Publication no. FDA 00-2244.
<http://www.fda.gov/fdac/reprints/dinguest.html> (Access date: 7/12/08).

USDA, FSIS, Consumer Education and Information, Modified February 2007. *FOCUS ON: Food Product Dating*. <http://www.fsis.usda.gov/oa/pubs/dating.htm> (Access date: 7/15/08).

CDC Food Safety Office Main page. <http://www.cdc.gov/foodsafety/> WebPages last reviewed on July 12, 2008.

To Your Health! Food Safety for Seniors. FDA/USDA booklet. Updated 2006.

Safe Eats: Eating Out/Bringing In. FDA/CFSAN-Food Safety for YOU! 2007 Edition.
<http://cfsan.fda.gov/~dms/ftteats.html>.

Lesson

Begin Lesson: Last week we talked about (*name of last week's unit*). Each of us selected one idea to try out. Let's talk about how those worked (or

<u>Transition from last week</u>	didn't work) for us, and also what we learned from last week's meeting.
<u>Anticipatory Set</u>	<p>Today we will explore food safety. There are three reasons that we think this topic is important:</p> <ol style="list-style-type: none"> 1. The CDC states that 76 million people will become sick by eating contaminated food and categorize seniors as an "at risk" group. 2. Foods contaminated by harmful bacteria and viruses, like E. coli, can cause a food borne illness. 3. Food poisoning can be prevented by understand and practicing safe food handling techniques.
<u>Share the Objective</u>	<ol style="list-style-type: none"> 1) During the lesson, we will be discussing food safety techniques to use from the time you shop for food in the store to the time you take it home and put it away. These are the first three stages of food preparation: <ol style="list-style-type: none"> a) Shopping. b) Transporting. c) Food Safety Temperatures. 2) During this lesson, I will be providing information, but it is also important that we share information and ask questions in group discussion. I would appreciate it if each of you could bring up at least one example from your life experience. 3) Also during the lesson today, I'm going to ask each of you to select one idea from the lesson to try out on your own over the next week. I'll pick one, too. Then each of us can share with the group next week how it worked out.
<u>Share the Handout</u>	This summarizes the main ideas we will be discussing today. <i>[Pass out handout.]</i> Please feel free to take notes and ask questions as they arise.
<u>Input</u>	<p>Before talking about specific food safety techniques let's talk about what a food borne illness is.</p> <ol style="list-style-type: none"> 1) Seniors have years of experience and a strong background in the areas of food shopping and consumption. However, the way food is produced, distributed, prepared and even eaten has

changed dramatically in recent years. This has created a number of crucial food safety issues that could lead to serious illness, even death. Taking a few simple precautions can prevent these food borne illnesses.

- 2) Consider these facts:
 - a) Grocery stores stock food from all over the world.
 - b) Restaurant meals, carry-out and food prepared outside the home account for 50% of money spent on food.
 - c) New information is constantly being discovered about dangerous bacteria in food and the illnesses it can cause.
 - d) Older adults are more susceptible and considered “at-risk” for food borne illnesses.
 - c) Food borne illness can be prevented.

- 3) What is Food Poisoning?
 - a) Food poisoning is often referred to as a food borne illness. The main causes are bacteria and viruses. Some of the more common names are: Salmonella, E. coli, and Hepatitis A. When food becomes contaminated with bacteria or viruses that cause food borne illness, a person can become ill by eating the food.

 - b) Each year in the United States, 5,000 people die from food poisoning. Older adults have a greater risk of death from eating tainted foods than younger adults. Other serious complications include arthritis, blood poisoning, liver disease, meningitis, kidney failure, strokes and seizures.

 - c) Food borne illness can occur within 24 hours of eating contaminated food, or even days or weeks later. Common symptoms of food borne illness include: diarrhea, nausea, vomiting, abdominal pain and fever. The most common symptom is diarrhea. Most cases of food borne illness never get diagnosed because symptoms are mistaken for the flu. The Centers for Disease Control estimates 76 million people each year get sick by eating contaminated food.

 - d) Some food is contaminated before we purchase it. Food can also become contaminated when we transport, store, prepare or serve it. These are food safety areas, that we as consumers, control. It is important to use food safety techniques during every stage that we have contact with food.

 - e) Prevention starts with your trip to the grocery store.

1 Avoiding Cross Contamination

- A When shopping, make sure meat, poultry, fish, seafood, milk, milk products and eggs are not dripping onto other foods, especially those eaten raw, like fruits and vegetables. This causes cross contamination.
- 1) Separate these different food items in your shopping basket. Use the small area under the child seat to put your meats to prevent them from dripping on other foods. Be careful about what you put below the raw meat, poultry, fish, milk, etc.
 - 2) Make sure meat, poultry, fish and seafood are packed separately in plastic bags before or at the checkout counter.
 - 3) If the meat department doesn't supply plastic bags, get some from the produce department. Place each package of meat into one of the bags before you place it in your shopping cart.

2 Plan Your Trip

- A. Meat, poultry fish, shellfish, milk and eggs are potentially hazardous because they are rich in nutrients, moist and low in acid. With warmth, this combination sets the stage for dangerous bacteria to rapidly grow and multiply. The temperatures above 40 degrees F and below 140 degrees F are considered the "food safety danger zone." Perishable foods left in the danger zone too long allow bacteria and viruses to multiply to a large enough number that you can get sick.
- 1) A refrigerator keeps foods cooler than 40 degrees F. When you take meat from the refrigerator case in the store, it starts warming up to the temperature inside the grocery store, 65 to 75 degrees; temperatures in the food safety danger zone.
 - 2) You shop for these foods last to limit the time spent in your shopping cart, before being refrigerated at home.
- B. Buy pasteurized milk, cheese, ciders and juices.
- C. Choose eggs that are not cracked, that look clean, and have not expired.
- D. Don't buy cans or jars that are dented, bulging, cracked or have loose lids.
- E. Purchase produce that is not bruised or damaged.
- F. Choose frozen packages that are not open, torn, have crushed edges or are above the top of the store freezer compartment.
- G. Transport food home as quickly as possible, in a cooler or insulated bag if necessary.

3 Food Product Dating

- A. Product dating is not required by federal regulations (except for infant formula). Therefore, there is not a standard dating system. However, common product dating used by manufacturers can provide basic information about foods.
- B. Common food product dating codes:
- 1) sell by: Tells the store how long the product should be displayed for sale. You should not purchase the product after this date.
 - 2) best if used by (or before): Tells how long the product will retain its freshness, peak quality and best flavor. This is not a food safety date.
 - 3) use by: The last recommended date for using the product at peak quality. This date is determined by the manufacturer. Discard food when “use by” date has expired.
 - 4) closed or coded: Manufacturer’s packing codes for the products, which assist in tracking inventory, rotating stock, or locating the product if a problem arises. These dates are not an indication of product freshness or quality.

4 Transporting Food Safely

- A Remember these safety temperatures while transporting your food:
- 1) Danger Zone 40°F-140°F
Perishable foods like meat, poultry, fish, shellfish, milk, and eggs can become seriously contaminated if left unrefrigerated. Warm temperatures can lead to dangerous bacteria growth. **IF FOOD STAYS IN THIS RANGE** for more than 2 hours; or more than 1 hour in hot summer months, it should be **THROWN OUT**. Bacteria can double every twenty minutes at room temperature.
 - 2) Safe Refrigerator Temperatures 32°F-40°F
This is a safe temperature for transporting and storing perishable foods because refrigeration slows bacterial growth. When a refrigerator is set at 40 degrees or below, it will protect most foods until they are eaten or their storage time expires.

- 3) Safe Freezer Temperature 0°F
Foods kept at this temperature will have an extended storage time. Freezing stops, but does not kill, harmful bacteria.

B Safely bringing your food into your home:

- 1) In the summer, grocery shop early in the morning or in the evening when it is cooler outside.
- 2) Don't do other errands on the way home from the grocery store. The temperature in a parked car in the summertime can exceed 140 degrees within a few minutes!
- 3) While transporting groceries, always keep cold foods cold and hot foods hot.
- 4) Place food in the air conditioned part of the car and not the trunk.
- 5) Refrigerate or freeze perishables or prepared foods within 2 hours; 1 hour if the temperature is 90 degrees or higher.
- 6) If the travel time from store to home will be longer than one hour, pack your perishable food in an ice chest or insulated bag. Be especially careful to do this during hot weather.
- 7) If you are taking a meal or a snack home with you, from a restaurant (doggie bag) or a friend's house, use an insulated food safety bag (or ice cooler) to keep it cool.
- 8) Transport food safely by remembering the 2-hour rule and discard any foods that have entered the danger zone.

5 "When in doubt, throw it out."

- A. Put perishable food away as soon as you get home from the store. If the food has been left out (unrefrigerated) for more than 2 hours, throw it away. Exception: If it's 90 degrees F or higher where the food is, or outside when food is transported, the limit drops to one hour.
- B. Some of you may have lived through some very hard times. When people know what it is like to do without, it is sometimes very hard to throw things away that might still be useful. But with food, it's better to never take a chance. It costs a whole lot more in the long run to become sick or die from a foodborne illness than to throw away food that might be spoiled.

<u>Monitoring / Discussion</u>	<p>Q: Has food safety advice changed over the years? What's different now? Is there anything in the information presented that's different from what you have always thought to be true?</p> <p>Q: Is shopping for milk, milk products, meat, poultry and fish <u>last</u> different from how you shop now?</p> <p>A: <i>(Work to resolve any problems presented on why it is difficult to shop that way.)</i></p> <p>Q: How difficult or easy would it be to pack perishable foods in an ice chest at the grocery store if your trip home will take more than an hour? What adjustments do you make in hot Las Vegas summers?</p> <p>A: <i>(Work to resolve any problems presented on why it is difficult to shop that way.)</i></p> <p>Q: Let's check on how much we have learned. What is the temperature danger zone, and why is it important?</p> <p>A: 40 degrees F to 140 degrees F. Important because when food is in the danger zone, dangerous bacterial growth can result.</p> <p>Q: How do you know whether your refrigerator is the right temperature? A: Check it with a thermometer.</p>
<u>Modeling</u>	<p><u>Demonstration</u> : Checking refrigerator temperature.</p> <p>When I first arrived, I put a refrigerator thermometer in the refrigerator. <i>[Ask group members to gather at the refrigerator. Check temperature of thermometer placed earlier to see if refrigerator is at proper temperature. Ask each Learner to look at the thermometer and explain to them how to read thermometer; keep thermometer in refrigerator while it is being read. Give each Learner a refrigerator thermometer, explaining how long to keep thermometer in closed refrigerator (generally 15 minutes) before reading the temperature and ask them to report their results to the class next week.]</i></p>
<u>Independent Practice</u>	<p>This can be done at any time during the lesson. It seems to work better when it is not done in the rush at the end of a meeting.</p> <p>"I'd like for each of us to select at least one idea, from what we're learning, to try out this week. Let's choose something easy to experiment with. Next week we can all compare our experiences and see what worked and what didn't."</p>
<u>Closure/ Transition:</u>	<p><i>Look at next week's lesson plan for: "Set up at previous meeting."</i></p> <p><i>It begins: "Next week, we will be exploring . . ."</i></p>

University of Nevada, Reno
Southern Area Cooperative Extension
Seniors CAN
Lesson Plan

Lesson: **Food Safety, Part 2**

Lesson Number: **FS-2**

Introduction: The two-part “Food Safety” lesson is designed to introduce Learners to food safety during all stages of food preparation, because the older adult population currently represents the largest segment of the United States population that is considered “at-risk” for food borne illnesses.

Part 1 of the lesson covers shopping for and transporting food items as well as food safety temperatures.

Part 2 of the lesson covers food safety in the kitchen: preparing, cooking and storing food safely.

Learning Overview: The Learner will participate in a lesson designed to teach him/her basic food safety techniques.

Lesson Objectives:

1. During the lesson, the Learner will be exposed to food safety techniques during the following stages of food preparation:
 - Food safety in the kitchen.
 - Preparing, cooking and storing food safely.
2. During the lesson, the Learner will engage in group discussion regarding Food Safety, describing with clarity at least one example from his/her life experience.
3. During group discussion, either spontaneously or in response to Facilitator request, the Learner will state with clarity that s/he has selected at least one idea presented during the lesson, what that idea is, and that s/he will try this idea during the following week to see if it works for him/her. Alternatively, the Learner will state with clarity that s/he does not want to try out any of the ideas presented, and the reason for the decision.

Set up at previous meeting:

Next week, we will continue to explore how we can keep ourselves healthier through food safety practices. We will review refrigerator temperatures and also talk about food safety in the kitchen including preparing, cooking and storing food safely.

Set up immediately prior to this meeting:

Facilitator prepares for the quiz activity using CFSAN's quiz or as an optional activity, Nasco's Food Safety Bingo.

Materials:Provided by Facilitator:

One of the following for each Learner:

- Fact Sheet: *Food Safety in the Kitchen* (UNCE, FS 06-01), *Preparing, Cooking, and Storing Food Safely* (UNCE, FS 06-02).
- Handout: *Can Your Kitchen Pass the Food Safety Test?* (CFSAN, 2002)
- Demonstration items: refrigerator thermometer, fruit and vegetable scrub brush, masking tape (for labeling food), pen (for dating food), baking soda, disposable bleach wipes (like Clorox), sponge, plastic cutting board, at least some of the 5 types of food thermometers.

Optional:

- NASCO's Food Safety Bingo (Nasco Nutrition, <http://www.enasco.com/product/WA17327HR>, 1-800-558-9595)

Note: Facilitator should review lesson plan for this week, last week and next week because information provided at the beginning of each lesson plan is needed for smooth transition between lessons.

Activities:

- Review: Ask about the home refrigerator thermometer temperature from Learners' if assigned as homework from the last Food Safety lesson.
- Demonstrate the food safety items during the lesson.
- Have Learner's complete the CFSAN quiz - *Can your kitchen pass the food safety test?*

Optional

- Nasco's Food Safety Bingo
-

References:

Fight BAC! : Four Simple Steps to Food Safety. USDA, FDA Revised Color Brochure, October 7, 2005.

The Food Keeper: A Consumer Guide to Food Quality & Safe Handling. Brochure developed by Food Marketing Institute with Cornell University, Institute of Food Science, Cornell Cooperative Extension. Published 2002.

To Your Health! Food Safety for Seniors. FDA/USDA booklet, Updated 2006.

Use a Food Thermometer. USDA/FSIS Brochure, Slightly Revised October 2003.

The American Dietetic Association and ConAgra Foods Foundation Home Safety Website: *Food Safety Facts and Figures*.
http://www.homefoodsafety.org/pages/media/safety_facts.jsp. Web pages last viewed on June 1, 2008.

Environmental Nutrition, July 2004, Volume 27, Number 7, Hillary Wright, M.Ed.RD.

Food Safety, Preparation, and Storage Tips: Cutting Boards. Material written by Mary Abgrall and Scottie Misner, April 1998, Cooperative Extension, College of Agriculture & Life Sciences, the University of Arizona.
<http://ag.arizona.edu/pubs/health/foodsafety/az1076.html>

USDA, FSIS, Consumer Education and Information, 2005. *Refrigeration and Food Safety*. http://www.fsis.usda.gov/Fact_Sheets/Refrigeration_&_Food_Safety/index.asp

USDA, Jan/Feb 1991; Revised March 2003. *The Unwelcome Dinner Guest: Preventing Foodborne Illness*. Publication no. FDA 00-2244.
<http://www.cfsan.fda.gov/~dms/fdunwelc.html> (Access date: 7/12/08).

Lesson

<p><u>Begin Lesson:</u></p> <p><u>Transition from last week</u></p>	<p>Last week we talked about (<i>name of last week's unit</i>). Each of us selected one idea to try out. Let's talk about how those worked (or didn't work) for us, and also what we learned from last week's meeting.</p>
<p><u>Anticipatory Set</u></p>	<p>Last week, we talked about why food safety is important. We said that:</p> <ol style="list-style-type: none"> 1. The CDC states that 76 million people will become sick by eating contaminated food and categorize seniors as an "at risk" group. 2. Foods contaminated by harmful bacteria and viruses, like E. coli, can cause a food borne illness. 3. Food poison can be prevented by understand and practicing safe food handling techniques.

	<p>We then talked about food safety during the first stages of food handling including shopping and transporting food from the store to home. We also discussed food safety temperatures.</p>
<p><u>Share the Objective</u></p>	<ol style="list-style-type: none"> 1) During the lesson today, we will be discussing food safety techniques during the remaining stages of food handling: <ol style="list-style-type: none"> 1) Food safety in the kitchen. 2) Preparing, cooking and storing food safely. 2) During this lesson, I will be providing information, but it is also important that we share information and ask questions in group discussion. I would appreciate it if each of you could bring up at least one example from your life experience. 3) Also during the lesson today, I'm going to ask each of you to select one idea from the lesson to try out on your own over the next week. I'll pick one, too. Then each of us can share with the group next week how it worked out.
<p><u>Share the Handouts</u></p>	<p>These summarize the main ideas we will be discussing today. <i>[Pass out lesson fact sheets.]</i> Please feel free to take notes and ask questions as they arise.</p>
<p><u>Input</u></p>	<p>Food poisoning outbreaks in local restaurants are exposed in attention-grabbing newspaper articles. Yet food borne illness occurs just as often, if not more frequently, at home. The simple cause is that many people do not use safe food handling practices in their own kitchen. Food can become contaminated with illness-causing bacteria during every stage of contact with food. Since older adults are at greatest risk, it is important to practice food safety techniques in our own kitchen.</p> <p>1 Food Safety in the Kitchen</p> <p>A Hand washing: It's important to wash hands before, during and after cooking and eating. We talked about and practiced proper hand washing back when we talked about ways to prevent illness. Hands should be washed particularly before and after handling foods that are more likely to harbor harmful bacteria, such as raw chicken.</p> <p>i Food borne illnesses could be reduced by nearly half if people washed their hands more often when handling foods.</p>

- ii How to wash hands:
 - a Use soap and warm water and rub hands soapy hands together at least 20 seconds before rinsing. Wash backs and palms of hands. Scrub between fingers. Nailbrushes are great.
 - b It's best to dry hands on a paper towel.

B Cross-contamination: Occurs when bacteria and viruses are passed on from food to food, from hands to food, and from kitchen utensils and counters to food.

- i When we talked about grocery shopping last week, we said that at the grocery store, we should make sure that packages of raw meat, fish, and poultry should not drip onto other foods, especially food that we eat raw, like fruits and vegetables. That is a way to prevent cross-contamination—bacteria from the meat juices dripping onto grapes or lettuce.
- ii Hand washing is another way to prevent cross-contamination. After you cut up raw chicken, for example, it is important that you wash your hands before handling other food. This helps you to avoid passing bacteria from the raw chicken to other food you are preparing.
- iii To prevent cross-contamination, keep cooked foods and food eaten raw away from utensils, countertops and equipment used for preparing raw meats and poultry.
- iv Sanitize cutting boards (studies show plastic to be safer) after using them. Two teaspoons chlorine bleach to one quart of warm water makes an effective and inexpensive sanitizing cleaner. Some people have two cutting boards, one for raw meats and the other for fruit and vegetables. Always discard old cutting boards that have cracks, crevices or look worn.
- v Serve cooked foods on clean plates and clean utensils only. For example, don't serve cooked meat on the same plate that held the meat when it was raw or serve meat with the fork used while cooking.
- vi Properly disinfect, after each use, kitchen counter tops, the sink and drain. Thoroughly clean all utensils, dishware and other kitchen tools that came into contact with foods.

- vii Wash dishcloths and sponges frequently. The sour smell they sometimes have is caused by bacterial growth.
 - a Soak them in the water/bleach solution described above, toss in the washing machine, dishwasher or microwave damp sponges for a minute to kill germs.
 - b Try using disposable bleach wipes to clean up in the kitchen. These are handy and inexpensive.

C Refrigerator/Freezer Safety

- i. Keep the refrigerator between 32° F and 40° F and check periodically using a refrigerator thermometer. A temperature over 40° F can cause bacteria to multiply and contaminate food. Keep the freezer at 0° F.
- ii. Put perishable foods away as soon as you get home from the grocery store. If the food has been left out (unrefrigerated) for more than 2 hours, throw it away. If it's 90° F or higher in the room where the food has been kept, discard after 1 hour.
- iii. Make sure the refrigerator is not packed too full as the cold air must be able to circulate to keep foods safe.
- iv. Raw meat, poultry, and seafood should be kept separate from other foods in the refrigerator and placed so that their juices do not drip onto other foods or surfaces within the refrigerator.
- v. Secure stored foods by using dishes, containers and food wraps that avoid spoilage. Spoiled foods that spill can lead to cross-contamination. If a food develops unsafe bacterial growth, this can contaminate other food.
- vi. Clean up spills or food package leakage immediately and disinfect the refrigerator on a regular basis.
- vii. Warm water and baking soda can be used to clean the refrigerator. The sodium in the baking soda kills most bacteria that may be growing in food spills. It also helps to remove spots (very mild abrasive) and reduces odors. Vinegar may also be used to eliminate strong odors though it does not kill bacteria. A very mild bleach solution or commercial cleaning product will also work.

2 Preparing, Cooking and Storing Foods

D Safe Food Preparation

- i Avoid cross contamination and wash your hands
- ii Never thaw food on the kitchen counters or at room temperature. Foods can be thawed in the refrigerator or in the microwave and then prepared to cook. Another option is to immerse the frozen food in cold water. Change the water every 30 minutes to maintain the cold temperature. However, this process can be complicated if you forget about the food left in the sink. Cook thawed food promptly.
- iii If you marinate foods be sure to do so in the refrigerator, not at room temperature on the counter. Never reuse marinades, breading or coatings on meats or vegetables. Throw them away after one use.
- iv Avoid “tasting” meat, poultry, eggs, fish or shellfish when they are raw or only partially cooked.
- v Wash all produce before eating it, including those with rinds that are not edible. Use a brush to carefully rinse and scrub fruits and vegetables under running water. Do not use bleach or soap, as these products may leach into food.

E Cooking Food

- i Always cook food to the proper temperature so that harmful bacteria are destroyed.
- ii Don't interrupt cooking. Avoid cooking food partially to finish cooking later
- iii Set the oven at 325 degrees or higher when cooking. Foods should not be cooked in the oven at lower temperatures.
- iv Use a food thermometer for poultry, all kinds of meat and casseroles. New research demonstrates that whether meat is cooked to a high enough internal temperature cannot always be determined by looking at the color of the cooked meat or the color of the juices.

- a Ground beef should be heated to 160 degrees F or above and a whole chicken or turkey should be heated to 180 degrees F or above. [*See fact sheet for more information on internal cooking temperatures.*]
- b With the kind of meat thermometer that stays in the meat while cooking, the metal stem on the thermometer acts a heat conductor. Therefore, you need to take temperature readings in 2 to 3 different places to avoid a false reading, as meat will be hotter around the place a thermometer has been left in. An alternative is to not leave that type of thermometer in the meat, but to instead periodically check temperature with a thermometer while cooking.
- c When checking meat temperature, put the thermometer in thickest, deepest part of the meat. Avoid placing thermometer near edge of pan, near a bone, or in fat.
- d You may have to hold burgers or chops sideways to get a proper reading.
- e There are different kinds of food thermometers.
 - ◆ The traditional types of meat thermometers (liquid-filled and oven-safe bimetal) that can (but shouldn't be) left in the food while cooking takes 1 to 2 minutes in the meat to get a proper reading. The liquid-filled kind must be placed 2 inches in the food, while the oven-safe bimetal one must go in 2 to 2 ½ inches deep.
 - ◆ Three other types, the instant-read bimetal, the thermistor (digital) and the thermocouple (digital) can get readings in a few seconds: 15-20 seconds for instant-read, 10 seconds for the thermistor and 5 seconds for the thermocouple. They can be used in thin foods (the instant-read bimetal must be placed sideways in thin foods, but cannot be used in the oven while foods are cooking because the thermometer will be destroyed).
 - ◆ *Show Learners what each type of thermometer looks like. Digital thermometers are expensive, and quite possibly not an option for low-income Learners.*

F Serving Food Safely

- i. You can keep foods warm after cooking in the oven at 140 degrees F or above, but do keep checking them with a food thermometer. Cold foods should be kept at 40 degrees

- ii. Serve food on clean dishes with clean utensils. Don't serve food with dishes and utensils you used during cooking. This will help you avoid cross-contamination.
- iii. After serving, refrigerate or freeze foods promptly.

G Safe Storage of Food

- i If a food package says, "keep refrigerated or frozen," do so and store foods in specialized refrigerated compartments (i.e. vegetable crispers). Do not store perishable foods, like eggs, on the door shelves.
- ii Leftover should be stored in tight, shallow containers with an inch of airspace. Refrigerating or freezing immediately will allow food to cool evenly and quickly to a safe temperature. Divide large quantities into smaller ones for more convenient and safer food storage.
- iii Always label and date food, even take home foods. It is easy to forget how long something has been in the refrigerator or freezer!
- iv Fresh produce can be kept at room temperature or stored in the refrigerator or freezer. Storage times vary depending on the type of produce. Once fruits and vegetables have been cooked, refrigerate or freeze within 2 hours.

H "When in doubt, throw it out."

- i If food is obviously spoiled, moldy or past its expiration date, throw it away. Do not try to determine safety by tasting the food as this can be dangerous.
- ii If you've had it longer than the following "safe period," you should throw it away. "**Safe period**" is:
 - 1 to 2 days for meat, fish, poultry.
 - 3 days for casseroles and cooked vegetables.
- iii It's very important to plan ahead the amount of food you prepare. If you are making more than you will eat in a couple of days, consider making a smaller portion, inviting friends over to eat it with you, or freezing part of the food soon after you make it to enjoy at another time.

	<p>iv As a reminder from last week’s food safety lesson: If the food has been left out (unrefrigerated) for more than 2 hours, throw it away. Exception: If it’s 90 degrees F or higher in the room where the food is, or outside when food is also outside, don’t leave it out for over an hour.</p>
<p><u>Monitoring / Discussion</u></p>	<p>Q: Why is it important to not taste food to see if it is spoiled? A: Can get sick by tasting. Also, might not be able to tell by taste anyhow, especially if sense of taste is not what it used to be.</p> <p>Q: Does it surprise you that a food thermometer should be used when cooking hamburger?</p> <p>Q: How do you feel about the idea of throwing away food if you are not sure if it is spoiled?</p> <p>Q: Does anyone here have any eyesight problems that make it harder to determine if food is spoiled? What about sense of smell—have you noticed yourselves going through any changes?</p>
<p><u>Modeling and Guided Practice</u></p>	<ul style="list-style-type: none"> • Have each Learner in class (or as a homework assignment) complete the CFSAN’s quiz - <i>Can your kitchen pass the food safety test?</i> Discuss the answers in class. <p><u>Optional:</u></p> <ul style="list-style-type: none"> • Facilitator can lead the group in a game of Nasco’s Food Safety Bingo. This is fun activity and an opportunity for review. Consider food safety items (insulated bag, Blue ICE or a cutting board) for prizes.
<p><u>Independent Practice</u></p>	<p>This can be done at any time during the lesson. It seems to work better when it is not done in the rush at the end of a meeting.</p> <p>"I'd like for each of us to select at least one idea, from what we're learning, to try out this week. Let's choose something easy to experiment with. Next week we can all compare our experiences and see what worked and what didn't."</p>
<p><u>Closure/ Transition:</u></p>	<p><i>Look at next week’s lesson plan for: “Set up at previous meeting.”</i></p> <p><i>It begins: “Next week, we will be exploring . . .”</i></p>