

StayRight

Section

12

RelaxRight Section 11 Review Quiz:

CLUE: Fill in the blanks below using avoid, behaviors, relievers, or listen

- Answers are on page 286 -

- Managing stress is an important key to managing weight because your eating _____ often change when you are under stress.
- You usually experience more stress in your life down the road if you try to _____ problems.
- Resolving issues requires a willingness to _____ to what is said.
- Routine activities such as yard work or needlework are also effective stress _____ for many people.

Goals for Week 9:

- Understand how EatRight is about a lifestyle change.
- Learn to use feedback to evaluate your continual progress with the EatRight Program.
- Learn how to maintain your weight loss.

Congratulations!

Pat yourself on the back for a job well done! You are in the 12th Week of the EatRight Weight Management Program, and you have worked hard. Since the first week, EatRight has emphasized weight management as a *lifestyle change*. This outlook makes weight management more than a simple number on a scale. It is about the satisfaction and enjoyment that you get from eating well and being active. If you are more satisfied with your body and enjoy your improved quality of life, you are more likely to want to use the skills you have learned to maintain your lifestyle over the long-term, which is the intention of StayRight.

Where Are You Now?

- 👉 **Complete your Personal Progress Sheet.** This is the same report that you completed in weeks 1 and 6. Now, you can compare the progress sheets to evaluate your progress.
- ✓ Are you reaching your short-term goals and staying on pace to reach long-term goals?
 - ✓ Have you noticed improvements in how your body feels?
 - ✓ Are you less tense and more energetic?

Personal Progress Sheet



Complete as much of the information that you know during each of the weeks listed below.

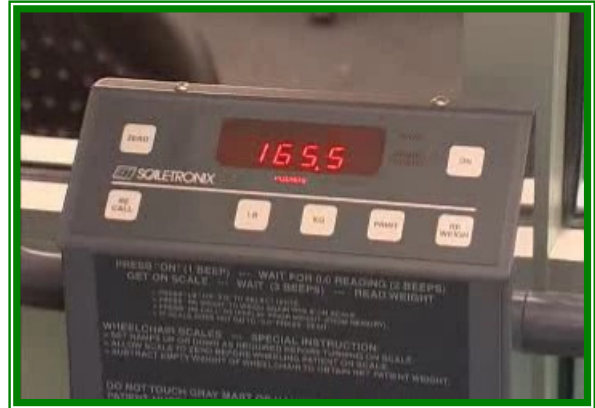
Be sure to at least record your weight and waist measurement for Week 12.

DATE	WEEK 1	WEEK 6	WEEK 12	GOALS: Changes to Make (increase or decrease)
Weight				
Waist Measurement				
Body Mass Index (BMI)				
Blood Pressure				
Total Cholesterol				
LDL Cholesterol				
HDL Cholesterol				
Triglycerides				
% Body Fat				

Once you have reviewed your progress sheets, you will notice that you are at one of three stages in your weight loss program.

1 You have reached your weight loss goals.

If you have reached your weight loss goals, it is now time to celebrate your success with something special such as a movie or trip. You can continue to review each section of the video along with the workbook and improve your weight management skills to maintain your healthier lifestyle.



However, many people fail to maintain their weight loss because they do not know how to adjust from weight loss to weight control. Their main problem is a failure to properly adjust calorie intake after they reach their weight loss goal. For example, a lot of people suddenly switch from an 1800 calorie per day diet to a 2,500 calorie per day diet. This type of sudden increase in calories usually results in weight gain. The best way to adjust your caloric balance is to *gradually increase your calorie intake*.

- ✓ Start by adding one serving of starch and one serving of meat or dairy to your daily meal plan for the next week. If you are following weight management Program B, for example, you might eat exactly 9 servings of starch per day instead of 8 and or eat no more than 6 servings of meat per day instead of 5. This will increase your daily intake by about 200 calories.
- ✓ If you continue to lose weight after a week or two, you can add another serving of starch to your daily meal plan for the next week to increase your daily intake by another 100 calories. When you add enough servings to reach the point where your weight is stable, you can stop adding servings and simply stick to your new meal plan.

Once you adjust your caloric balance, the real key to long-term success is to stick to your routine. You have made changes with your weight management program and you need to continue with this new lifestyle. You will slowly go back to your prior weight and lifestyle if you suddenly stop following your new program and return to your old habits. You need to continue with the skills learned in the EatRight program to maintain your healthier lifestyle. Remember, you do not have to be perfect, but you want to continue to maintain your improved health.

Give yourself a little flexibility when you reach your desired weight. If your goal is to maintain a weight of 150 pounds, you cannot expect to weigh exactly 150 pounds all the time. Ordinarily, you can expect to see slight differences in your weight from week to

week. To be consistent with your weight over the next year, you need to stay within a range of about 4 pounds of your desired weight. If your goal weight is 150 pounds, you want to stay within a range of 148 to 152 pounds.

2 You have actually gained weight over the last 12 weeks.

There are essentially 4 reasons for why you are gaining weight.

- 1) You might be gaining weight if you have certain types of medical conditions, so it is recommended that you talk to your doctor and get a thorough medical examination.
- 2) Weight gain might also occur if you have been physically active and replacing fat with muscle, which is heavier than fat.
- 3) You may be gaining weight because you are not following the appropriate weight management program. Perhaps you simply need to follow weight management program “A” instead of program “B.”
- 4) You may have fallen into your old eating and exercise habits, which usually means weight gain.



It is important to review this entire video series along with your workbook to see where you need to make adjustments in your eating and exercise habits to stop the weight gain. As you review each section, you can work on gaining the skills that lead to weight loss.

3 You have lost weight and want to continue to lose weight.

If you still have weight to lose, you simply continue to follow the program. Keep reviewing each section in your workbook, setting your goals, and using the skills you have learned until you reach your goals. You will find additional copies of the Daily Food Journals and Meal Planners. You can make copies for as long as you continue on the program.

- It is also important to note that the rate of weight loss declines because your metabolism slows down with weight loss.

Staying on Track

Staying on track with your weight management program can be difficult at times. Situations may arise - work schedule, vacation, travel, weather, illness – that upset your routine. Do not worry – most routine-altering situations are temporary. Missing exercise for a week is not the end of the world. If you overeat to the point of feeling stuffed at one meal, you have to trust your body to not eat as much at the next meal. Occasional overeating is a part of normal eating, as is occasional meal skipping. Beating yourself up or feeling guilty about your health habits can sabotage your efforts to change before you get started. Be gentle with yourself, and remember, improved health is a matter of progress, not perfection.



Establish a routine. The real key to long-term success is to stick to the routine. People who have had success with any weight management program do not suddenly stop everything they are doing all at once. Instead, most people slowly start to gain weight and gradually decrease their activities. Before long they return to their old lifestyle.



Pay close attention to changes. Most people can easily recognize weight gain. Your clothes may start to fit more snugly, and you may notice more difficulty doing everyday tasks. If you notice that your weight is moving out of your range, chances are that you have slowly slipped back to some of your old habits.

You might also watch for more subtle changes. If your muscles are tense as opposed to relaxed, your body may be signaling change. The same may be true if you have prolonged feelings of being tired as opposed to energetic. These are signs that you may be experiencing changes in your eating or activity habits.

When you notice changes, you will need to act early to correct your eating or exercise habits. You can start by reviewing the basics of your program that you learned in earlier weeks, which includes keeping a food journal and meal plans.



Use your learned skills. As you reflect back on the past 11 weeks, you can rely on skills learned with your EatRight Weight Management Program to continue moving in the general direction of improved health.



- ✓ Learning about the Food Spectrum and how to choose foods from the 5 Food Groups each day.
- ✓ Reviewing your Daily Food Journal each day to see if you ate the proper serving size and number of servings from each Food Group.
- ✓ Planning your meals to ensure you eat the proper balance of food for your Program.
- ✓ Making a grocery list to use when shopping so you select the most nutritious foods.
- ✓ Reading Nutrition Facts labels so you choose nutritious foods.
- ✓ Preparing your foods using less fat, sodium and sugars.
- ✓ Setting goals to improve your health.
- ✓ Including more physical activities in your daily routines.
- ✓ Enjoying eating-out with friends and family.
- ✓ Examining your “self-talk” and how it influences your eating habits.
- ✓ Working to reduce the stresses in your day.
- ✓ Maintaining long-term weight loss and improved health.



Get a partner. A partner can help you stay on track with all aspects of your EatRight Weight Management Program, especially if you are having trouble sticking with your weight-loss program. A partner can be a friend, co-worker, or family member who can be a companion

to make your program enjoyable. A partner can also give you feedback on your progress and help you overcome obstacles.

Choose a partner who can:

- ✓ Help keep you motivated to stick to your program. You will both feel like winners when you succeed.
- ✓ Offer honest feedback without being critical.
- ✓ Shop with you, or if also trying to lose weight, exchange shopping lists and shop for each other.
- ✓ Exercise with you.
- ✓ Exchange leftovers dishes to enjoy someone else's cooking!
- ✓ Celebrate your success with you - buy a pair of movie passes as a reward for both of you when you meet your weekly/monthly goals.



Visit your doctor annually. As you continue to follow your Eat**Right** Weight Management Program, you need to visit your doctor at least once per year because your body changes as you get older. You may experience other health concerns, which may mean you need to change or modify your weight management program. Plus, you and your doctor can continue to keep track of your weight, blood pressure, and cholesterol levels.

Good luck and good health!

Web Links

At the end of each weekly Section, you will find a list of related web sites for information discussed in this week's lesson. If a web address changes or you cannot find a listed web site, open your web browser to your favorite search engine to locate the current web address.

🌟 <http://familydoctor.org/197.xml> (American Academy of Family Physicians)

🌟 www.caloriecontrol.org (Calorie Control Council)

🌟 www.pueblo.gsa.gov/cic_text/health/weightloss4life/wtloss.htm (Weight-control Information Network)

RelaxRight Section 11 Review Quiz Answers:

- Managing stress is an important key to managing weight because your eating behaviors often change when you are under stress.
- You usually experience more stress in your life down the road if you try to avoid problems.
- Resolving issues requires a willingness to listen to what is said.
- Routine activities such as yard work or needlework are also effective stress relievers for many people.

Action Plan

StayRight

Section 12



Complete the weekly “Action Plan.” Answer the questions; make notes to help you on your Program. You can check off your accomplishments as you complete them.

- Complete the Personal Progress Sheet for Week 12.
Compare the changes from Week 1 to Week 6 to Week 12.
- Decide if you want to continue to loose weight to reach your goal or begin to maintain your current weight.
- If you have gained weight, talk with your doctor.

Review your long-term and short-term goals and revise so you can continue to follow the lifestyle changes you made with the EatRight Program.

- Review video and workbook as often as needed to keep you on track so you StayRight!
- Set up a way to evaluate your progress. Have a method for a “self-check-up” to StayRight!
- Complete and mail in the evaluation sheet found on page 289.
- Visit your doctor at least once per year to review your health concerns and see if you need to change or modify your weight management program. Plus, you and your doctor can continue to keep track of your weight, blood pressure, and cholesterol levels.

Weekly Meal Planner

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	BREAKFAST	LUNCH	DINNER	SNACKS

Fill in the meal plan with what you plan to eat for each meal on each day of the week. If possible, note days you also plan to dine out.

Daily Food Group Serving Totals

Total each day below to see if you are eating the correct number of serving for each food group. Look for ways to add or delete foods to meet your Weight Management Program goals.

PROGRAM A	PROGRAM B	FOOD GROUPS	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
4	5	FATS/OILS (FO)							
4	5	MEAT/DAIRY (MD)							
6	8	STARCHES (S)							
4	5	FRUIT (F)							
5	6	VEGETABLE (V)							

EATRIGHT[®] HOME-BASED WEIGHT MANAGEMENT PROGRAM FOR INDIVIDUALS WITH SCI
Evaluation Form

Today's Date _____

Please give us your feedback and evaluate this weight management program to help us create future projects that best meet your needs. You can also submit your evaluation on the SPINALCORD Injury Information Network at www.spinalcord.uab.edu/show.asp?durki=77527.

1. Are you a ...
 Person with SCI Family VR Staff MD RN OT PT Dietitian
 Other specify: _____

2. What is your primary reason for purchasing this information?

3. Do or will you use this information/content in your daily personal/professional life?
1- not at all _____ 2 - a little _____ 3 - somewhat _____ 4 - a lot _____ 5 - a great deal _____

4. Did you find the information/content easy to understand and follow?
1- not at all _____ 2 - a little _____ 3 - somewhat _____ 4 - a lot _____ 5 - a great deal _____

5. Do you think this program is helpful in improving health for persons with SCI?
1- not at all _____ 2 - a little _____ 3 - somewhat _____ 4 - a lot _____ 5 - a great deal _____

If yes, please summarize how and why you think it is helpful?

6. Did you follow the program as directed, completing one video/workbook section per week?
Yes _____ No _____

7. The SCI Email Distribution List allows subscribers to be notified as new and updated information becomes available from our center. Would you like to be added to the SCI email list? Yes _____ No _____ If yes, your email address _____

8. Please offer additional comments or suggestions on the information/content:

Thank you for taking time to complete this evaluation. Please return this form in the enclosed self-addressed business reply envelope that is provided. NO POSTAGE IS NECESSARY.

Meal Planner

When planning your meals, check your totals to match the weight management program that you are following (see page 21).

Day 1 _____

Program A (1500 Calories)

Program B (1800 Calories)

		FOOD GROUPS				
		(x = 1 Portion Size)				
		Fats/Oils	Meat/Dairy	Starches	Fruits	Vegetable
Breakfast Meal Plan:						
Lunch Meal Plan:						
Dinner Meal Plan:						
Snack Plans						
Totals						

Daily Food Journal

At end of each day, complete this Daily Food Journal according to what you actually did eat that day. Be as specific as you can and note which foods are *preferred* (P) and *occasional* (O) or *special occasion* (S).

Day 1 _____

TIME	FOODS YOU ATE	P/O/S	SERVING SIZE	FATS/OILS	MEATS/DAIRIES	STARCHES	FRUITS	VEGGIES	MOOD
BREAKFAST									
SNACKS									
LUNCH									
SNACKS									
DINNER									
Check 1 box for every 8 oz. of water you drink per day. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	My Totals								
	Program A	4	4	6	4	5			
	Program B	5	5	8	5	6			
Daily Physical Activities:									

Daily Tip:
Reward yourself. Recognize your successes!

Meal Planner

When planning your meals, check your totals to match the weight management program that you are following (see page 21).

Day 2 _____

Program A (1500 Calories)

Program B (1800 Calories)

		FOOD GROUPS				
		(x = 1 Portion Size)				
		Fats/Oils	Meat/Dairy	Starches	Fruits	Vegetable
Breakfast Meal Plan:						
Lunch Meal Plan:						
Dinner Meal Plan:						
Snack Plans						
Totals						

Daily Food Journal

At end of each day, complete this Daily Food Journal according to what you actually did eat that day. Be as specific as you can and note which foods are *preferred* (P) and *occasional* (O) or *special occasion* (S).

Day 2 _____

TIME	FOODS YOU ATE	P/O/S	SERVING SIZE	FATS/OILS	MEATS/DAIRIES	STARCHES	FRUITS	VEGGIES	MOOD
BREAKFAST									
SNACKS									
LUNCH									
SNACKS									
DINNER									
Check 1 box for every 8 oz. of water you drink per day. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	My Totals								
	Program A	4	4	6	4	5			
	Program B	5	5	8	5	6			
Daily Physical Activities:									

Daily Tip:

Stay positive! Do not punish yourself or feel guilty. Staying on your weight management program is easier when you feel good about yourself.

Meal Planner

When planning your meals, check your totals to match the weight management program that you are following (see page 21).

Day 3 _____

Program A (1500 Calories)

Program B (1800 Calories)

		FOOD GROUPS				
		(x = 1 Portion Size)				
		Fats/Oils	Meat/Dairy	Starches	Fruits	Vegetable
Breakfast Meal Plan:						
Lunch Meal Plan:						
Dinner Meal Plan:						
Snack Plans						
Totals						

Daily Food Journal

At end of each day, complete this Daily Food Journal according to what you actually did eat that day. Be as specific as you can and note which foods are *preferred* (P) and *occasional* (O) or *special occasion* (S).

Day 3 _____

TIME	FOODS YOU ATE	P/O/S	SERVING SIZE	FATS/OILS	MEATS/DAIRIES	STARCHES	FRUITS	VEGGIES	MOOD
BREAKFAST									
SNACKS									
LUNCH									
SNACKS									
DINNER									
Check 1 box for every 8 oz. of water you drink per day. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	My Totals								
	Program A	4	4	6	4	5			
	Program B	5	5	8	5	6			
Daily Physical Activities:									

Daily Tip:

It is hard to stay on a weight management program if you do not enjoy the food. Select or prepare foods that taste good and that you like!

Meal Planner

When planning your meals, check your totals to match the weight management program that you are following (see page 21).

Day 4 _____

Program A (1500 Calories)

Program B (1800 Calories)

		FOOD GROUPS				
		(x = 1 Portion Size)				
		Fats/Oils	Meat/Dairy	Starches	Fruits	Vegetable
Breakfast Meal Plan:						
Lunch Meal Plan:						
Dinner Meal Plan:						
Snack Plans						
Totals						

Daily Food Journal

At end of each day, complete this Daily Food Journal according to what you actually did eat that day. Be as specific as you can and note which foods are *preferred* (P) and *occasional* (O) or *special occasion* (S).

Day 4 _____

TIME	FOODS YOU ATE	P/O/S	SERVING SIZE	FATS/OILS	MEATS/DAIRIES	STARCHES	FRUITS	VEGGIES	MOOD
BREAKFAST									
SNACKS									
LUNCH									
SNACKS									
DINNER									
Check 1 box for every 8 oz. of water you drink per day. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	My Totals								
	Program A		4	4	6	4	5		
	Program B		5	5	8	5	6		
Daily Physical Activities:									

Daily Tip:

Remember life is full of changes and challenges. Routines are often altered, just pick-up where you left off and continue on your program.

Meal Planner

When planning your meals, check your totals to match the weight management program that you are following (see page 21).

Day 5 _____

Program A (1500 Calories)

Program B (1800 Calories)

		FOOD GROUPS				
		(x = 1 Portion Size)				
		Fats/Oils	Meat/Dairy	Starches	Fruits	Vegetable
Breakfast Meal Plan:						
Lunch Meal Plan:						
Dinner Meal Plan:						
Snack Plans						
Totals						

Daily Food Journal

At end of each day, complete this Daily Food Journal according to what you actually did eat that day. Be as specific as you can and note which foods are *preferred* (P) and *occasional* (O) or *special occasion* (S).

Day 5 _____

TIME	FOODS YOU ATE	P/O/S	SERVING SIZE	FATS/OILS	MEATS/DAIRIES	STARCHES	FRUITS	VEGGIES	MOOD
BREAKFAST									
SNACKS									
LUNCH									
SNACKS									
DINNER									
Check 1 box for every 8 oz. of water you drink per day. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	My Totals								
	Program A		4	4	6	4	5		
	Program B		5	5	8	5	6		
Daily Physical Activities:									

Daily Tip:
Check and record your weight as often as you can.

Meal Planner

When planning your meals, check your totals to match the weight management program that you are following (see page 21).

Day 6 _____

Program A (1500 Calories)

Program B (1800 Calories)

		FOOD GROUPS				
		(x = 1 Portion Size)				
		Fats/Oils	Meat/Dairy	Starches	Fruits	Vegetable
Breakfast Meal Plan:						
Lunch Meal Plan:						
Dinner Meal Plan:						
Snack Plans						
Totals						

Daily Food Journal

At end of each day, complete this Daily Food Journal according to what you actually did eat that day. Be as specific as you can and note which foods are *preferred* (P) and *occasional* (O) or *special occasion* (S).

Day 6 _____

TIME	FOODS YOU ATE	P/O/S	SERVING SIZE	FATS/OILS	MEATS/DAIRIES	STARCHES	FRUITS	VEGGIES	MOOD
BREAKFAST									
SNACKS									
LUNCH									
SNACKS									
DINNER									
Check 1 box for every 8 oz. of water you drink per day. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	My Totals								
	Program A	4	4	6	4	5			
	Program B	5	5	8	5	6			
Daily Physical Activities:									

Daily Tip:
 Do self-checks for Feedback often. How do you feel? Are you energetic? Ask friends or family for comments. What is your mental outlook?

Meal Planner

When planning your meals, check your totals to match the weight management program that you are following (see page 21).

Day 7 _____

Program A (1500 Calories)

Program B (1800 Calories)

		FOOD GROUPS				
		(x = 1 Portion Size)				
		Fats/Oils	Meat/Dairy	Starches	Fruits	Vegetable
Breakfast Meal Plan:						
Lunch Meal Plan:						
Dinner Meal Plan:						
Snack Plans						
Totals						

Daily Food Journal

At end of each day, complete this Daily Food Journal according to what you actually did eat that day. Be as specific as you can and note which foods are *preferred* (P) and *occasional* (O) or *special occasion* (S).

Day 7 _____

TIME	FOODS YOU ATE	P/O/S	SERVING SIZE	FATS/OILS	MEATS/DAIRIES	STARCHES	FRUITS	VEGGIES	MOOD
BREAKFAST									
SNACKS									
LUNCH									
SNACKS									
DINNER									
Check 1 box for every 8 oz. of water you drink per day. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	My Totals								
	Program A	4	4	6	4	5			
	Program B	5	5	8	5	6			
Daily Physical Activities:									

Daily Tip:

Keeping your Daily Food Journal is an important Feedback tool. It can help you stay on target even when you are maintaining your weight.

Extras

The following is a listing of web sites for organizations that provide information and/or access to a variety of recreational and sporting activities. The idea is to give you an idea of the wide offering that is available. We do not endorse or recommend any specific listing. You can use your search engine on the Internet to locate other activities.

Access to Recreation is a multiple product line distributor for recreational and exercise items furnished by over 200 manufacturers (fishing, exercise, bowling, cycling and games).

www.accesstr.com

8 Sandra Court, Newbury Park, CA 91320-4302

800-634-4351

Active Living is a health, fitness and recreation magazine for people with a disability.

www.activelivingmagazine.com

2276 Rosedene Rd, St. Ann's, ON LOR 1Y0

905-685-9451

Adaptive Aquatics is a nonprofit organization dedicated to the introduction, teaching and advancement of adaptive waterskiing for physically challenged children and adults. They offer information on water ski clinics and tournaments.

www.adaptiveaquatics.org

1092 Paradise Cove Lane, Wilsonville, AL 35186

205-669-2007

Adaptive Dancing presents information and instructions on how dancing IS an option for those in wheelchairs. It teaches dancers, physical therapists and those in wheelchairs how to enjoy the wonderful world of wheelchair dancing!

www.adaptivedancing.com

America's Athletes with Disabilities promotes and sponsors sports, recreation, fitness and leisure events for children and adults with physical disabilities.

www.americasathletes.org

8630 Fenton Street, Suite 920, Silver Spring, MD 20910

800-238-7632

American Horticultural Therapy Association is a professional organization for horticultural therapists who involve the patient in all phases of gardening as a means of bringing about improvement in those patient's lives.

www.ahta.org

909 York St, Denver, CO 80206

303-370-8087

Breckenridge Outdoor Education Center provides participants of all abilities with the opportunity to learn new skills, experience nature and natural areas, and to have challenges that will enhance health and self-confidence necessary to expand human potential.

www.boec.org

P.O. Box 697, Breckenridge, CO 80424

970-453-6422

Buckmasters Disabled Sportsmen's Resources is a comprehensive site for disabled hunters sponsored by BuckMasters. Information and links on adaptive equipment, state laws/regulations, hunting opportunities, and local and national groups.

www.badf.org/DisabledHunters.html

10540 Daystar Dr, Tuscaloosa, AL 35405

Disabled Sports USA is a national organization providing sports and recreation services to persons with disabilities and ensuring their access to sports, recreation and physical education programs. They have community based chapters in 37 states.

www.dsusa.org

451 Hungerford Dr, Suite 100, Rockville, MD 20850

301-217-0960

Freedom's Wings provides the opportunity for those who are physically challenged to fly in specially adapted sailplanes either as a passenger or as a member of the flight training program.

www.freedomswings.org

PO Box 7076, East Brunswick, NJ, 08816

732-432-8342

Golf Xpress is a single rider adaptive golf car that allows one to play and enjoy golf from a seated position. Also listed are courses in U.S. that have these carts available for rent.

www.golfxpress.com

989-846-6255

GPK makes the UPPERTONE, an exercise machine for people with C4-C5, and below, quadriplegia (tetraplegia) due to spinal injury. It allows them to do sixteen upper-body exercises without assistance.

www.gpk.com

535 Floyd Smith Drive, El Cajon, Ca 92020

800-468-8679

International Disabled Self-Defense Association offers a self defense curriculum suitable for individuals with a variety of disabilities.

www.defenseability.com

5722 S Flamingo Rd, Suite 192, Ft Lauderdale, FL 33330

954-680-3214

Lakeshore Foundation offers a variety of athletic and recreational programs for individuals with disabilities to maximize their quality of life, pursue individual interests and maintain an active lifestyle. It is a Paralympic Games Training Site

www.lakeshore.org

3800 Ridgeway Dr, Birmingham, AL 35209

205-868-2063

National Ability Center offers a wide variety of year-round activities, which include alpine and cross-country skiing, swimming, tennis, basketball, water skiing, horseback riding, rafting, camping and much more to individuals from 3 to 75 years of age with a variety of disabilities.

www.nationalabilitycenter.org

PO Box 682799, Park City, UT 84068

801-649-3991

National Center on Accessibility focuses primarily on accessibility as it relates to parks, recreation and tourism industries. It conducts research, provides technical assistance, develops resources and training materials and conducts educational programs.

www.ncaonline.org

501 North Morton St, Suite 109, Bloomington, IN 47404

National Sports Center for the Disabled provides innovative outdoor recreation for children and adults with disabilities. In addition to skiing they offer snow boarding, snowshoeing and cross-country programs.

www.nscd.org

P.O. Box 1290, Winter Park, CO 80482

970-726-1540

National Wheelchair Basketball Assn provides information about wheelchair basketball--the sport's history, Hall of Fame and most valuable players, plus game schedules and rosters.

www.nwba.org

1100 Blythe Boulevard, Charlotte, N.C. 28203

704-355-1064

National Wheelchair Poolplayer Assn promotes wheelchair pool, one sport/recreation that is not physically demanding.

www.nwpainc.com

866-636-3371

No Limits provides adaptive climbing and recreational equipment for individuals with disabilities.

www.nolimitstahoe.com

11983 Snowpeak Way - Truckee, CA 96161

530-582-1135

North American Riding for the Handicapped Association promotes and supports equine/horse facilitated activities for individuals with disabilities. Therapeutic riding contributes positively to the cognitive, physical, emotional and social well-being of people with disabilities.
www.narha.org
P.O. Box 33150, Denver, CO 80233
800-369-RIDE

PVA Sports and Recreation Program is a site to learn more about the many sports and recreation events that the Paralyzed Veterans of America sponsors; how to get involved in these events; even event results. They have useful sports publications and a list of contacts.
www.pva.org/sports/sportsindex.htm
1-800-USA-4PVA

Physically Challenged Bowhunters of America introduces and promotes the great sports of archery & bow hunting to disabled sportspersons.
www.pcba-inc.org
2152 Route 981, New Alexandria, PA 15670
724-668-7439

Shake-A-Leg is a national program that provides mainstream and complimentary therapeutic services that develop independent living skills for individuals who have experienced spinal cord injury and related nervous system disorders. Recreational therapies include sailing, handcycling, kite flying, kayaking, etc.
www.shakealeg.org
PO Box 1264, Newport, RI 02840
401-849-8898

SPLORE encourages and supports people of all abilities in their movement toward greater independence and well-being through outdoor adventure activities that include rafting, canoeing, climbing and skiing.
www.splore.com
880 East 3375 South, Salt Lake City, Utah 84106
801-484-4128

Sports & Spokes is a magazine published by the Paralyzed Veterans of America devoted to recreation and sport for SCI patients and other wheelchair users, national and international recreation news and opportunities, latest equipment.
www.pvamagazines.com
2111 E. Highland, Suite 180, Phoenix, AZ 85016-4702
888-888-2201

United States Handcycling Federation promotes Handcycling in both its recreational and competitive natures.
www.ushf.org
PO Box 2245, Evergreen, CO 80437
303-679-2270

U.S. Quad Rugby Assn provides information about all the happenings in quad rugby throughout the country - clinics, games, file library and more.

www.quadrugby.com

Very Special Arts is an international organization that creates learning opportunities through the arts for people with disabilities. The organization offers programs in creative writing, dance, drama, music and the visual arts.

www.vsarts.org

1300 Connecticut Ave, Suite 700, Washington, DC 20036

202-628-2800

Wheelchair Sports USA is organized geographically into fourteen regional associations, each responsible for developing local wheelchair sports programs and for conducting qualifying meets for the National Wheelchair Games.

www.wsusa.org

1668 320th Way, Earlham, IA 50072

515-833-2450

Wheelin' Sportsmen of the National Wild Turkey Federation brings the beauty and wonder of the outdoors to people with disabilities. Programs include hunting, fishing, archery or golf.

www.wheelinsportsmen.org

PO Box 530, Edgefield, SC 29824

888-THE-NWTF or 803-637-3106

Wilderness On Wheels Foundation operates a model wilderness-access facility that allows persons with disabilities to enjoy natural outdoor environment for hiking, fishing, picnicking, camping, cook-outs and wildlife watching.

www.wildernessonwheels.org

PO Box 1007, Wheatridge, CO 80034

303-403-1110

The remainder of this workbook contains additional tables that are found throughout this workbook.

You can make copies as needed!

Meal Planner

Day _____

Program A (1500 Calories)

Program B (1800 Calories)

FOOD GROUPS (x = 1 Portion Size)					
Fats/Oils	Meat/Dairy	Starches	Fruits	Vegetable	
Breakfast Meal Plan:					
Lunch Meal Plan:					
Dinner Meal Plan:					
Snack Plans					
Totals					

Daily Food Journal

TIME	FOODS YOU ATE	P/O/S	SERVING SIZE	FATS/OILS	MEATS/DAIRIES	STARCHES	FRUITS	VEGGIES	MOOD
BREAKFAST									
SNACKS									
LUNCH									
SNACKS									
DINNER									
Check 1 box for every 8 oz. of water you drink per day. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		My Totals							
		Program A		4	4	6	4	5	
		Program B		5	5	8	5	6	
Daily Physical Activities:									

Personal Progress Sheet

Complete as much of the information that you know during each of the weeks listed below.

Be sure to at least record your weight and waist measurement.

DATE	WEEK —	WEEK —	WEEK —	GOALS: Changes to Make (increase or decrease)
Weight				
Waist Measurement				
Body Mass Index (BMI)				
Blood Pressure				
Total Cholesterol				
LDL Cholesterol				
HDL Cholesterol				
Triglycerides				
% Body Fat				