



# Peer-led CalFresh Promotion Program Lesson Plans



# Peer-led CalFresh Promotion Program

The Peer-led CalFresh Promotion Program began as a pilot project with the aim to build the capacity of peer educators to promote increased fruit and vegetable consumption, physical activity, and participation in the CalFresh Program.

California Project LEAN (Leaders Encouraging Activity and Nutrition) developed a series of three lesson plans geared for peer educators in English and Spanish that address the benefits of participating in CalFresh, eating healthy on a budget with emphasis on eating more fruits and vegetables, engaging in physical activity, and increasing healthy beverage consumption. These lesson plans are designed to be taught using facilitated group discussions as well as small group activities in a fun and interactive manner. The pilot intervention was conducted in three counties: Alameda, Fresno, and Tulare. A special acknowledgment goes out to the four organizations that participated in the pilot intervention: Alameda County Public Health Department Nutrition Services, Centro La Familia, Proteus, Inc., and FoodLink of Tulare County, Inc.

Because funding for these lesson plans is provided by the Supplemental Nutrition Assistance (SNAP) Education (SNAP-Ed) Program, the sole emphasis is on promoting CalFresh and not actually assisting with the application process. It is recommended that CalFresh outreach workers be invited when these lessons are presented so they can assist interested individuals with applying for CalFresh. Evaluation findings from the pilot intervention showed a positive outcome from having CalFresh outreach workers attend and provide input during the educational classes.



# Lesson One

Project Introduction, CalFresh Overview, and MyPlate



## Project Introduction, CalFresh Overview, and MyPlate

<p><b>Objectives</b></p>	<p>By the end of this lesson, participants will:</p> <ul style="list-style-type: none"> <li>• Describe the CalFresh Promotion Project</li> <li>• Define CalFresh</li> <li>• Tell the difference between TRUE and FALSE statements associated with CalFresh</li> <li>• Express an interest to apply for CalFresh</li> <li>• Describe MyPlate</li> </ul>
<p><b>Time</b></p>	<p><b>2 hours</b></p>
<p><b>Materials Needed</b></p>	<ul style="list-style-type: none"> <li>• Name tags</li> <li>• Colored markers and/or crayons</li> <li>• Pens and/or pencils</li> <li>• Flip chart paper</li> <li>• Blue painter's tape</li> <li>• Large envelope for documents</li> <li>• Boom box and CDs (optional)</li> <li>• Recipe and items for taste testing (food demonstrations) (optional)</li> </ul> <p><b>Trainer Materials:</b></p> <ul style="list-style-type: none"> <li>• Sign-in Sheet</li> <li>• Data Sheet</li> <li>• Media Release Form (optional)</li> <li>• Pre Survey (optional)</li> <li>• Electronic Benefit Transfer (EBT) Sample Card</li> <li>• TRUE and FALSE Sheets</li> <li>• US Citizenship and Immigration Services Letter</li> <li>• CalFresh Brochures</li> <li>• Stretching Exercise Handout</li> <li>• MyPlate Image</li> <li>• MyPlate Coloring Sheet</li> <li>• Homework Sheet (Lesson One)</li> </ul> <p><b>Participant Handouts:</b></p> <p>Make copies of the following:</p> <ul style="list-style-type: none"> <li>• Data Sheet</li> <li>• Media Release Form (optional)</li> <li>• Pre Survey (optional)</li> <li>• US Citizenship and Immigration Services Letter</li> <li>• CalFresh Brochures</li> <li>• Stretching Exercise Handout</li> </ul>

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	<ul style="list-style-type: none"> <li>• MyPlate Coloring Sheet</li> <li>• Homework Sheet (Lesson One)</li> </ul>
<p><b>Before the Training</b></p>	<p>Contact and invite a CalFresh Outreach Worker to attend one of the three lessons and confirm their attendance. The purpose of their attending a lesson is to provide additional information for participants and to offer any assistance should participants express interest in applying for CalFresh. Ask that s/he bring CalFresh outreach materials, such as applications, brochures, and sign-in sheet and allow a few minutes to provide a brief overview of his/her organization and services they offer. If the CalFresh Outreach Worker is unable to attend, ask her/him to provide you with CalFresh Brochures to hand out to participants.</p> <p>Confirm your meeting location, date, and time.</p> <p>Recommended group size: 6-12 people.</p> <p>Remind participants with a friendly call or email, whichever method works best for you and participants.</p> <p>Make copies of the trainer materials and participant handouts.</p> <p>Prepare the following flip chart paper:</p> <ul style="list-style-type: none"> <li>• Agenda</li> <li>• Group Agreements</li> </ul>
<p><b>Day of Training</b></p>	<p>Set out the sign-in sheet and a pen.</p> <p>Post flip chart papers to wall.</p> <p>Tape the TRUE and FALSE sheets on opposite sides of the room.</p> <p>Provide a table with chair for the CalFresh Outreach Worker, if one attends.</p> <p>Have music playing as participants arrive (optional).</p>
<p><b>Agenda</b></p>	<ol style="list-style-type: none"> <li>1. <b>Welcome</b> (5 minutes)</li> <li>2. <b>Ice-Breaker: “Hi, my name is and I like to.”</b> (5 minutes)</li> <li>3. <b>Group Agreements</b> (5 minutes)</li> <li>4. <b>Media Release Form, Data Sheet, and Pre Survey</b> (20 minutes)</li> <li>5. <b>Project Introduction, CalFresh Overview, and Activity</b> (35 minutes)</li> <li>6. <b>Physical Activity Break</b> (10 minutes)</li> </ol>

## Project Introduction, CalFresh Overview, and MyPlate

	<p>7. <b>MyPlate Overview and Activity</b> (30 minutes)</p> <p>8. <b>Homework</b> (5 minutes)</p> <p>9. <b>Reflection and Conclusion</b> (5 minutes)</p>
<p><b>1. Welcome</b></p> <p><b>5 minutes</b></p> <p><b>Reminders:</b> Post Agenda on the wall.</p>	<p>Hello. My name is _____ with (Name and brief description of your organization).</p> <p>Welcome to the first of three lessons. We plan to hold our lessons every <b>[day and time]</b> ending <b>[date]</b>. We encourage your full participation by attending all three lessons, starting with today. After attending all of the lessons, you will each receive a certificate of completion!</p> <p>Posted on the wall is today's agenda. <b>[Review agenda.]</b></p> <p>Are there any questions before we get started?</p>
<p><b>2. Ice Breaker</b></p> <p>"Hi, my name is and I like to"</p> <p><b>5 Minutes</b></p>	<p><b>[Invite participants to stand up and form a large circle.]</b></p> <p>This Ice Breaker will help us learn each other's names and one activity we like to do.</p> <p>I'll go first.</p> <p>Hi, my name is <b>[Your name.]</b> and I like to <b>[Name activity and demonstrate it.]</b></p> <p>Let's now go around the room.</p> <p>Thank you! Wasn't that fun? You can share this activity with others as a way to learn more about their favorite activities!</p>
<p><b>3. Group Agreements</b></p> <p><b>5 minutes</b></p> <p><b>Reminders:</b> Post Group Agreements flip chart paper on the wall.</p>	<p>Can someone share out loud what they think "group agreements" are and why they are used? <b>[Wait for responses.]</b></p> <p>Group agreements are rules created by the members of a group so that they can work well together. For example:</p> <p>We agree to:</p> <ul style="list-style-type: none"> <li>• Be respectful</li> <li>• Agree to disagree</li> <li>• Start and end meetings on time</li> </ul> <p>What other suggestions would you like to add? <b>[Capture participants' ideas on the flip chart paper.]</b></p> <p><b>[Should participants have difficulty in identifying suggestions, offer the following.]</b></p>

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- If you like to speak up often, give others in the group a chance to talk.
- If you are usually a little shy, try to speak up more often.
- Participate.
- Leave cell phone on vibrate and step outside if you must take a call.
- Have fun!

Do we all agree with our list of group agreements? **[Wait for consensus.]**

We will post our group agreements at every meeting as a reminder.

Thank you all for your participation in working together as a team.

Let's now move on to our next item on the agenda—Media Release Form, Data Sheet, and Pre Survey.

**4. Media Release Form, Data Sheet, and Pre Survey**  
**20 minutes**

**Materials:**

- Media Release Form (optional)
- Data Sheet
- Pre Survey (optional)
- Pens
- Large envelope for documents

**[Pass out Media Release Form, the Data Sheet, and Pre Survey and pens. Data sheet can be downloaded from the following website: <http://www.cdph.ca.gov/programs/cpns/Pages/default.aspx>]**

There are three forms that are required for you to complete for this project.

The first is the Media Release Form. It states that you give us permission to use your photograph in written materials, program website, publications, or brochures (optional).

The second form is the Data Sheet. Please fill it out. This information is required for our program. Your responses are kept confidential.

The third and final form is the Pre Survey (optional). You are asked to complete it now and then again at the end of lesson three. Your participation is very important and will help us find out if the lessons are effective.

Please answer the questions as best and as honestly as you can. Your answers are kept confidential. Your name will be used only to match the pre and post surveys and will remain confidential.

**[Collect all forms when completed and place into large envelope.]**

Thank you. And now, let's move to the next agenda item to learn about CalFresh.

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**5. Project Introduction, CalFresh Overview and Activity**

**35 minutes**

**Materials:**

- Sample EBT Card
- TRUE and FALSE sheets posted to opposite sides of the room
- US Citizenship and Immigration Services Letter
- CalFresh Brochures

**Reminders:**

Ask CalFresh Outreach Worker to provide any additional information as well as to respond to any questions participants may ask that you may not be able to answer.

The CalFresh Promotion Project is for community members to learn more about the importance of eating fruits and vegetables, being physically active, and participating in programs that can help with purchasing healthy food. We are here to help you and your families make the most of your food budget and encourage a healthy lifestyle.

Topics that will be covered include CalFresh, MyPlate, strategies for shopping for healthy food on a budget, and information about sugary drinks.

Who knows what CalFresh is? **[Wait for responses.]**

I will provide you with an overview of the CalFresh program that will answer questions or concerns you may have.

*Overview*

- The Supplemental Nutrition Assistance Program (SNAP) is the new federal name for the “food stamp program.”
- The SNAP program in California is now known as “CalFresh: Better Food for Better Living.” Simply called: CalFresh.
- It is a health and nutrition program.
- It is meant to help stretch your food dollars.
- With CalFresh, you can buy more fruits, vegetables, and other healthy foods for the whole family.

*Needed Documents*

There are a few personal documents that are required when applying for CalFresh.

- Identification: A driver’s license, an I.D. card, or health card
- Non-U.S. citizens: A resident alien card or other proof of immigration status
- Social Security: A Social Security Number is required for all household members applying for CalFresh benefits

You may also need these:

- Proof of income: Pay stubs, child support orders, and benefit statements
- Proof of expenses: A rent receipt or mortgage statement, utility bills, such as telephone, heat, gas/electricity, and water/sewage/garbage, as well as child care receipts or child support payments

If you are applying for the first time and qualify, you will get your CalFresh benefits within 30 days.

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If you are currently receiving food stamps/SNAP, you don't have to apply for CalFresh as you are already enrolled!

### *Benefits*

If you qualify for CalFresh, you will:

- Receive benefits in the amount depending on your income, expenses, and family size.
- Receive a plastic electronic benefit transfer (EBT) card and your personal identification number (PIN) that will give you access to your CalFresh account. **[Show sample EBT card.]**
- The amount of money you are eligible to receive will be deposited electronically to your CalFresh account each month.

### *Accessing your benefits*

- You will be able to shop at any grocery store or Farmers' Market authorized to accept EBT cards.
- Just swipe your EBT card, like an ATM card in the ATM/debit/credit card machine at the checkout, and enter your PIN.
- The amount you spend will be taken from your CalFresh account.
- Any benefits that you have remaining in your CalFresh account at the end of the month will be carried over into the next month.

### *Allowable purchases*

Your CalFresh benefits allow you to buy healthy foods, foods you and your family already eat. For example:

- Fruits and vegetables
- Grains, such as breads, tortillas, rice, and cereals
- Proteins like meats, fish, poultry, and beans
- Dairy products
- Fruit and vegetable seeds and plants to grow your own foods

### *Not allowable purchases*

Items not allowed include:

- Beer, wine, or liquor
- Cigarettes and tobacco
- Any nonfood items (e.g. pet foods, paper items, personal care products, and household supplies)
- Vitamins or medicines
- Food that will be eaten in the store (e.g. cooked foods prepared in the store deli)
- Hot and ready foods (e.g. food from restaurants)\*

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[\*Note: Some, not all, California counties are participating in the California Restaurant Meals Program, which allows eligible EBT cardholders receiving CalFresh benefits to purchase hot prepared foods at participating restaurants using their EBT cards.]

The information just shared was to provide you a brief overview of the CalFresh program.

The following activity will help to clarify any misconceptions or concerns you may still have about the CalFresh program.

**[Make sure the TRUE and FALSE sheets are taped to opposite sides of the room.]**

This activity will require your full participation. Please stand up.

I will read a statement that may or may not be true about CalFresh.

Please move to the side of the room that reflects your belief about each statement I read. Is it true or false?

Once everyone has moved to either side of the room, I will ask you to share why you believe this is so. **[Allow time for brief discussions for each statement.]**

I will then provide you with the correct answer and explanation.

Let's begin!

1. **Statement:** The new name for the Food Stamp Program in California is SNAP.

**Answer:** FALSE

**Explanation:** The new name for the Food Stamp Program in California is CalFresh. SNAP, Supplemental Nutrition Assistance Program, is the Federal name.

2. **Statement:** I cannot apply for CalFresh because I have a job.

**Answer:** FALSE

**Explanation:** CalFresh rules do not prohibit recipients from having a job.

3. **Statement:** My husband and I can apply for CalFresh even though we lost our jobs and receive unemployment insurance benefits.

**Answer:** TRUE

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**Explanation:** You may still receive CalFresh if you:

- Earn money from a job
- Receive unemployment insurance benefits
- Receive general assistance/relief
- Receive child support
- Participate in CalWORKs
- Receive disability insurance benefits
- Have money in savings
- Have certain retirement accounts
- Have certain education savings accounts
- Own a house and/or a car

4. **Statement:** If I apply for CalFresh, my children will be taken away from me because it shows I cannot provide for them and that I am an unfit parent.

**Answer:** FALSE

**Explanation:** CalFresh is a nutrition program to help families put food on their tables.

Child Protective Services' involvement has nothing to do with CalFresh. One program is not related to the other.

5. **Statement:** I can use my CalFresh benefits at the Farmers' Market to purchase fruits and vegetables.

**Answer:** TRUE

**Explanation:** A growing number of farmers markets in California now accept EBT cards. Check with your local farmers market to see if they do.

6. **Statement:** If I apply for CalFresh, I won't be able to get WIC and my kids won't be able to get free or reduced price lunch at school.

**Answer:** FALSE

**Explanation:** If you qualify, you and your family may receive all three: WIC, free or reduced price school meals, and CalFresh at the same time. All of these programs help you and your family have access to healthy foods.

7. **Statement:** If I currently receive CalFresh, I will not have to pay back the money once I earn more money.

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**Answer:** TRUE

**Explanation:** You and your children will never have to pay back CalFresh benefits if you are eligible to receive them.

You are required to notify your local CalFresh Office about any changes in your income or other circumstances, which may affect your benefits.

However, if the CalFresh Office gives you more benefits than you are eligible for, you will be required to pay the difference back even if it was their fault.

8. **Statement:** My fingerprints will be taken when I apply for CalFresh.

**Answer:** FALSE

**Explanation:** Effective January 1, 2012, finger imaging is no longer required in California when applying for CalFresh.

9. **Statement:** I am an undocumented immigrant but my children were born in the United States. I can apply to receive CalFresh benefits for them.

**Answer:** TRUE

**Explanation:** All children born in the U.S. can get CalFresh if they qualify, no matter where their parents were born.

Parents who do not qualify can apply for their children born in the United States.

10. **Statement:** CalFresh is a nutrition program.

**Answer:** TRUE

**Explanation:** CalFresh is a health and nutrition program to help stretch your food dollars. With CalFresh, you can buy more fruits, vegetables, and other healthy foods for the whole family.

11. **Statement:** If I apply for CalFresh, I will be reported to immigration organizations.

**Answer:** FALSE

**Explanation:** You will not be reported to immigration. Neither will information about your family be given to immigration or police organizations.

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If you get CalFresh it will not count against you when you apply to become a citizen or legal permanent resident of the United States, meaning that you are not considered a “Public Charge” if you receive CalFresh.

**[Pass out copies of the US Citizenship and Immigration Services Letter.]**

We hope that this activity 1) clarified any false ideas or concerns you had about the CalFresh program and 2) reassured you with the necessary information to apply if you are interested.

For more information about CalFresh, call: 1-877-847-FOOD

(1-877-847-3663) **[Pass out CalFresh Brochures.]**

[Note: If a CalFresh Outreach Worker is present, invite him/her to provide a brief overview of his/her organization and services they provide. Should participants express interest in applying for or have additional questions about CalFresh, ask the CalFresh Outreach Worker to pass around a sign-in sheet to interested participants for follow up.]

### 6. Physical Activity Break

**10 minutes**

**Materials:**

- Stretching Exercise Handout
- Boom box with CD (optional)

We will incorporate easy physical activity breaks into each of the three lessons.

To take care of our health and reduce the risk of chronic diseases, adults need at least 30 minutes of physical activity every day.

Health benefits include:

- Lowers your risk of type 2 diabetes, high blood pressure, heart disease, stroke, and certain types of cancer
- Helps build and keep healthy bones and muscles
- Helps you get to and keep a healthy body weight
- Lowers stress and helps you relax
- Gives you more energy

You may ask yourself, what types of physical activity to do. Physical activity is anything that gets your body moving.

Brisk walking, biking, kicking the soccer ball around, dancing, or raking leaves are examples of moderate physical activity, which means you're working hard enough to raise your heart rate and break a sweat.

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Running, jogging, playing soccer, fast dancing such as Zumba, and fast biking are vigorous activities, which means you're breathing hard and fast, and your heart rate has gone up quite a bit.

If you do not have a block of 30 minutes in a day for physical activity, ten minutes at a time is fine. You don't have to do it all at once. As long as you're doing your activity at a moderate or vigorous effort for at least 10 minutes at a time, it all adds up.

Today we will begin with stretching exercises.

It is important to stretch before and after doing physical activity in order to reduce the risk of injuries, such as muscle strains.

Stretching exercises also help to increase our body's flexibility. Improving our flexibility is an important part of being physically active. It improves our posture and helps to keep us physically fit.

Who's ready for a physical activity break?

**[Refer to the Stretching Exercise Handout. Select and demonstrate a few stretches. Ask participants to join in. Provide a copy of it to each participant after the physical activity break.]**

**7. MyPlate Overview and Activity**

**30 minutes**

**Materials:**

- MyPlate Image
- MyPlate Coloring Sheets
- Crayons and/or Markers

**[Pass out the MyPlate coloring sheet and crayons and/or markers.]**

This next section on the agenda is the MyPlate Overview and Activity.

Each of you now has a MyPlate coloring sheet and crayons and/or markers.

Please take a few moments to draw or write down on the sheet what you ate and drank for dinner last night. Be creative! Once you have completed your picture, please put it aside. **[Allow a few moments for participants to do this activity.]**

*MyPlate Overview*

MyPlate illustrates the five food groups that are the building blocks for a healthy diet using a familiar image—a place setting for a meal. This picture helps us to make better food choices and reminds us to eat healthy. **[Show the MyPlate Image to the participants.]**

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Can someone name the five food groups? **[Wait for responses.]**

The five groups are:

- Fruits
- Vegetables
- Grains
- Protein
- Dairy

I will now provide you with a brief overview of each food group starting with Fruits and Vegetables.

### *Fruits and Vegetables*

“Make half your plate fruits and vegetables.”

Fruits and vegetables are some of the healthiest and best tasting foods. They are low in sodium and calories, and most are fat free. Reach for blue, purple, green, white, yellow, orange, and red fruits and vegetables for your meals and snacks. They help your body get the vitamins, minerals, fiber, and other natural substances it needs to stay healthy.

As part of a healthy diet, fruits and vegetables may help you:

- Control your weight
- Lower your risk of stroke, heart disease, and high blood pressure
- Reduce your risk of type 2 diabetes and some types of cancer

Fruits and vegetables may be fresh, canned, frozen, or dried, and may be whole, cut-up, or pureed.

The amount of fruits and vegetables you need to eat each day depends on your age, sex, and level of physical activity.

Adults need about 3½ to 6½ cups of fruits and vegetables every day for good health.

Examples include:

- 1 cup of raw or cooked vegetables
- 1 cup of 100% vegetable or fruit juice
- 2 cups of raw leafy greens
- 1 large banana
- 1 small apple

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A few tips to help you make wise fruit and vegetable choices:

- Buy fresh fruits and vegetables in season when they may be less expensive and at their peak flavor.
- Buy canned vegetables labeled “reduced sodium,” “low sodium,” or “no salt added.”
- Select fruit canned in 100% fruit juice or water rather than syrup.

#### *Grains*

“Make at least half your grains whole grains.”

Any food made from wheat, rice, oats, cornmeal, barley or another cereal grain is a grain product. Bread, pasta, oatmeal, breakfast cereals, tortillas, and grits are examples of grain products.

The daily recommended amount adults should eat each day is 6 ounce equivalents.

For example: 1 slice of bread or tortilla counts as 1 ounce equivalent. We need 6 a day.

As with fruits and vegetables, grains, especially whole grains may help you:

- Control your weight
- Reduce your risk of heart disease
- Lower your risk for obesity and type 2 diabetes

In addition, whole grains, which contain fiber may:

- Reduce constipation
- Help with weight management

To get these health benefits, it is important to eat whole grains rather than refined grains.

A good way to do this is to substitute a whole-grain product for a refined product – such as eating:

- Whole-wheat bread or whole-wheat or corn tortilla instead of white bread or flour tortilla
- Brown rice instead of white rice

#### *Protein*

All foods made from meat, poultry, seafood, beans and peas, eggs, processed soy products, nuts, and seeds are considered part of the Protein Food Group.

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Most people, ages 9 or older, should eat 5-7 ounces of protein foods each day.

For example:

- 1 ounce of meat, poultry or fish.
- ¼ cup cooked beans.
- 1 egg.
- 1 tablespoon of peanut butter.
- ½ ounce of nuts or seeds.

Foods from this group that are high in saturated fat and cholesterol may have health implications.

A few tips to help you make wise protein food choices:

- Go lean with protein. Be sure the food label says at least “90% lean.”
- Trim away all of the visible fat from meats and poultry before cooking.
- Broil, grill, roast, poach, or boil meat, poultry, or fish instead of frying.
- Drain off any fat that appears during cooking.
- Choose seafood at least twice a week.
- Prepare beans, peas, lentils, or soy products as a main dish or part of a meal often.

### *Dairy*

“Switch to fat-free or low-fat (1%) milk.”

Dairy products are calcium-rich and provide health benefits—especially improved bone health and may reduce the risk of osteoporosis.

Intake of dairy products is also associated with a reduced risk of cardiovascular disease and type 2 diabetes, and with lower blood pressure in adults.

However, be selective when choosing foods from the Dairy Group. Many items such as cheeses, whole milk, and other dairy products may be high in saturated fats and cholesterol and can have health implications.

That’s why it is important to switch to fat-free or low-fat (1%) milk.

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The amount of dairy we need each day depends on our age:

- Older children, teens, and adults need 3 cups.
- Children 4 to 8 years old need 2 ½ cups.
- Children 2 to 3 years old need 2 cups.

One cup is equal to 8 ounces.

For example:

- 1 cup of milk or soymilk (soy beverage).
- 1 ½ ounces of natural cheese.
- 1 cup yogurt.

A few tips to help you make wise dairy choices:

- If you usually drink whole milk, switch gradually to fat-free milk, to lower your intake of saturated fat and calories. Try reduced fat (2%), then low-fat (1%), and finally fat-free (skim).
- If you drink cappuccinos or lattes — be sure they're made with fat-free (skim) or low-fat (1%) milk.
- If you avoid milk because of lactose intolerance, choose lactose-free alternatives, such as cheese, yogurt, lactose-free milk, or calcium-fortified soymilk.

In summary, MyPlate reminds us to eat the right amount of foods for good health.

### *Foods to Increase*

- Make half your plate fruits and vegetables.
- Make at least half your grains whole grains.
- Switch to fat-free or low-fat (1%) milk.

Let's take a look at our drawings.

Does your picture show that half your plate is filled with fruits and vegetables or that half your grains are whole grains?

Does your picture include lean proteins or dairy products?

Please take the next few minutes to make any changes to ensure that half your plate is filled with fruits and vegetables, that it has whole grains, and if there are any dairy products that they are low-fat (1%) or fat-free.

**[Refer to the MyPlate Image. Allow time for participants to make changes to their pictures.]**

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	<p>Would anyone like to share their picture with the class? <b>[Allow for a few participants to share aloud.]</b></p> <p>Thank you for your participation in this activity.</p>
<p><b>8. Homework</b></p> <p><b>5 minutes</b></p> <p><b>Materials:</b></p> <ul style="list-style-type: none"> <li>• Homework Sheet (Lesson One)</li> </ul>	<p><b>[Pass out Homework Sheet (Lesson One) to each participant.]</b></p> <p>Before we close our lesson, I'd like to share with you a few take home activities that you can choose to do this week. You are encouraged to do at least two of the three activities:</p> <ol style="list-style-type: none"> <li>1. Apply for CalFresh. You can get your application started with the CalFresh Outreach Worker today (if available).</li> <li>2. Make half your plate fruits and vegetables at least 3 times this week.</li> <li>3. Be physically active for at least 30 minutes 3 times this week. We will provide an opportunity to share at our class next week how we all did.</li> </ol>
<p><b>9. Reflection and Conclusion</b></p> <p><b>5 minutes</b></p> <p><b>Materials:</b></p> <ul style="list-style-type: none"> <li>• Large envelope for documents</li> </ul> <p><b>Reminders:</b></p> <p>Collect Sign-in Sheets, Media Release Forms, Data Sheets, and Pre Surveys from all participants and place in large envelope.</p>	<p>Today we shared information about CalFresh and MyPlate.</p> <p>Please take a moment to reflect on today's lesson and our time spent together.</p> <p>Would someone like to share one thing they learned and/or liked about today's class? <b>[Allow time for participants to think about and share with the class.]</b></p> <p>As a reminder, if you are interested in applying for CalFresh, please see the CalFresh Outreach Worker (if present).</p> <p>Don't forget, lesson two will take place <b>[location/date/time]</b>.</p> <p>We will discuss and share tips on how to shop and eat healthy on a budget and provide an opportunity to do a little more physical activity.</p> <p>Thank you and see you next week!</p>

# Lesson One

## Attachments



# CalFresh Promotion Sign-in Sheet



Peer-educator: \_\_\_\_\_

Location: \_\_\_\_\_

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

NAME – PLEASE PRINT		SIGNATURE	PHONE NUMBER
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

# Media Release Form



**Please complete the form and write clearly.**

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PRINTED NAME:

---

ADDRESS:

---

CITY:

STATE:

ZIP:

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PHONE:

E-MAIL:

I give my consent and release to utilize photos, live and/or taped interviews for various program and promotional uses by California Project LEAN (Leaders Encouraging Activity & Nutrition), a program of the California the Department of Public Health, the Public Health Institute and the University of California, Davis.

By signing the consent and release, you are releasing permission for use of photographs owned by you, photographs to be taken, and interviews to include your voice input via a live and/or taped segment interview on a medium such as California Project LEAN's web site, YouTube and/or on DVDs that are disseminated to individuals and/or organizations. I give such permission freely without duress by California Project LEAN.

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SIGNATURE:

DATE:

# CalFresh Promotion Project Pre and Post Survey



ID#	
PRE	POST

NAME (FIRST AND LAST)

DATE

NAME OF PROMOTOR/A

ORGANIZATION

## Directions:

1. The purpose of this survey is to see what you have learned from this training and to gather your ideas on how we can improve it.
2. We would like you to answer these questions as best and as honestly as you can. Your answers will remain confidential. Your name will be used only to match the pre and post surveys.
3. Have fun!

### 1) Did you participate in any of the three classes of the CalFresh Promotion Project offered last year?

- <sub>1</sub> No                       <sub>2</sub> Yes

### 2) Which of the best describes you? Please check one box.

- <sub>1</sub> I have not applied for CalFresh (food stamps).  
 <sub>2</sub> I have applied, but did not qualify for CalFresh (food stamps).  
 <sub>3</sub> I have completed a CalFresh application and waiting to find out if I qualify.  
 <sub>4</sub> I am currently receiving CalFresh (food stamps).

### 3) Please tell me if you strongly agree, agree, or do not agree with the following statements.

	AGREE	DO NOT AGREE	STRONGLY AGREE
a. Making time to be physically active each week will benefit my health.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
b. Eating fruits and vegetables are important for my health and my family's health.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
c. Reducing the number of sugary drinks may lead to weight loss and better health.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
d. Using CalFresh (food stamps) can help families purchase healthy food.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>

ID#	
PRE	POST

**4) Please indicate whether the following statements are True or False.**

	TRUE	FALSE
a. Consuming sugary drinks may lead to increased risk of obesity and type 2 diabetes.	<input type="checkbox"/> 0	<input type="checkbox"/> 1
b. A typical 20-oz bottle of soda has 17 teaspoons of sugar.	<input type="checkbox"/> 0	<input type="checkbox"/> 1
c. CalFresh (food stamps) can be used at some local farmers' markets.	<input type="checkbox"/> 0	<input type="checkbox"/> 1
d. Eating fruits and vegetables can help adults lower their risk for stroke, heart disease, and high blood pressure.	<input type="checkbox"/> 0	<input type="checkbox"/> 1
e. Being physically active for at least 30 minutes a day is known to have health benefits.	<input type="checkbox"/> 0	<input type="checkbox"/> 1
f. You will be reported to Immigration and Customs Enforcement if you apply for CalFresh.	<input type="checkbox"/> 0	<input type="checkbox"/> 1
g. Fingerprints are required when applying for CalFresh.	<input type="checkbox"/> 0	<input type="checkbox"/> 1
h. You could jeopardize your ability to apply for permanent resident status if you apply for CalFresh.	<input type="checkbox"/> 0	<input type="checkbox"/> 1
i. You can apply for CalFresh if you have money in savings.	<input type="checkbox"/> 0	<input type="checkbox"/> 1
j. If you receive WIC (Women, Infants and Children Program) you will not be able to apply for CalFresh.	<input type="checkbox"/> 0	<input type="checkbox"/> 1

**5) How confident are you in your ability to do the following?**

	NOT CONFIDENT	SOMEWHAT CONFIDENT	CONFIDENT	VERY CONFIDENT
a. Shop for healthy foods within your monthly food budget.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
b. Be physically active at least 30 minutes a day, 3 times per week.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
c. Drink fewer sugary drinks.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
d. Encourage family or friends to apply for CalFresh (Food Stamps).	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

ID#	
PRE	POST

**6) How likely are you to do the following over the next MONTH?**

	NOT LIKELY	SOMEWHAT LIKELY	LIKELY	VERY LIKELY
a. Drink fewer sugary drinks.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
b. Eat more fruits and vegetables.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
c. Be more physically active.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

**Skip questions 7 and 8 if you are currently receiving CalFresh benefits.**

**7) How confident are you in your ability to do the following?**

	NOT CONFIDENT	SOMEWHAT CONFIDENT	CONFIDENT	VERY CONFIDENT
Apply for CalFresh (food stamps)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

**8) How likely are you to do the following over the next MONTH?**

	NOT CONFIDENT	SOMEWHAT CONFIDENT	CONFIDENT	VERY CONFIDENT
Apply for CalFresh (food stamps)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

**Please check the response boxes that best describe you. Your answers are confidential.**

**9) Please check your age range.**

- 1 0-5 years       2 5-17 years  
 3 18-59 years       4 60+

**10) Please check your gender.**

- 1 Female       2 Male

**11) Were you born in the United States?**

- 1 No       2 Yes

**12) What is the highest level of education you have completed?**

- 1 Elementary School  
 2 Less than High School  
 3 High school graduate/GED  
 4 Some college/Vocation School  
 5 College graduate

**13) Please choose one group that best describes your race/ethnicity.**

- 1 African American or Black  
 2 Asian  
 3 Hispanic/Latino  
 4 Native American or Alaskan Native  
 5 Native Hawaiian or Other Pacific Islander  
 6 White  
 7 Other: \_\_\_\_\_

**14) What language(s) do you speak at home?**

- 1 English  
 2 Spanish  
 3 Other: \_\_\_\_\_

**Thank you !**

*Golden State* **ADVANTAGE**



**5077 1900 0000 0000**

**CARDHOLDER, JOHN**

**1234567890**



U.S. Citizenship  
and Immigration  
Services

February 9, 2010

Attention: Low-Income Immigrants  
Subject: Food Stamps Will Not Affect Potential Applicants for USCIS Benefits

Dear Customers:

The U.S. Government wants to ensure that you receive food assistance if you are eligible under the Food Stamp Program. This nutrition program of the United States Department of Agriculture is meant to assure the health and well-being of you and your family.

Many immigrants have fears or misunderstanding about how services like Food Stamps may affect their immigration status.

As a District Director of U.S. Citizenship and Immigration Services (USCIS), which is formerly known as INS, I want to assure you that applying for and receiving food stamps will have no impact on your application to become, or your status as, a permanent resident.

When you are applying to become a permanent resident, you are not considered a "public charge" if you are using food programs, such as Food Stamps, WIC and school meals, health care benefits or other programs that do not give cash.

USCIS officers will not ask you if you receive non-cash benefits as those listed above. The only time USCIS officers can ask about an immigrant's use of food stamps is when the interviewing officer suspects that benefits were used illegally or acquired in a fraudulent manner.

We want to encourage you to access Food Stamps and assistance programs for which you may be eligible without fear of their affect on your immigration status.

Sincerely,

A handwritten signature in black ink that reads "Jane E. Arellano".

Jane E. Arellano  
District Director  
District 23

**TRUE**

**FALSE**

# Stretching Exercises



Before and after doing physical activity, it is very important to stretch in order to reduce the risk of injuries, such as muscle strains. Stretching exercises also help to increase your body's flexibility. Improving your flexibility is an important part of being physically active, it improves your posture and helps to keep you physically fit.

The **FITT formula**, which stands for **F**requency, **I**ntensity, **T**ime and **T**ype, can be used for all types of stretching, and it is an excellent tool for monitoring your progress.

**Frequency:** Do stretching exercises after your physical activity warm-up and as part of your physical activity cool-down. Do stretching exercises most days to improve your body's flexibility.

**Intensity:** Always warm-up before stretching. Stretch your muscles to the point of mild tension, but not to the point of pain. Stop right away if you feel a sharp pain.

**Time:** Hold the stretch without bouncing for 10 to 15 seconds when you warm up and cool down. Hold the stretch without bouncing for 30 seconds or more to improve your flexibility.

**Type:** Use static stretches. Static stretching is the gradual lengthening of muscles and tendons as a body part moves around a joint.

**Remember to always consult with your physician or health care provider before beginning any physical activity program.**

When performing the following stretches, remember to resist the urge to hold your breath or bounce.

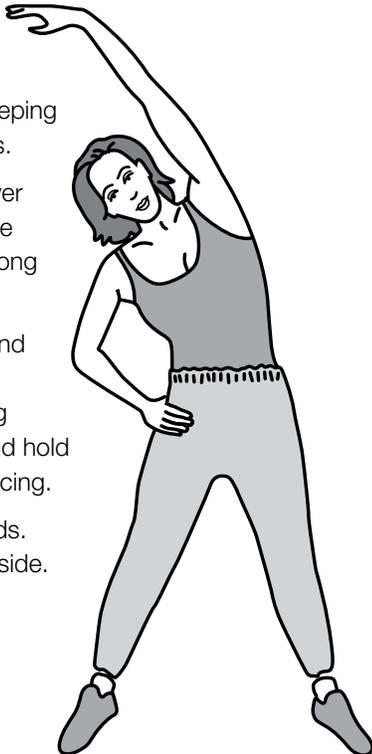
## Side Bends

Stand with your feet shoulder width apart, keeping a slight bend in your legs.

Slowly reach one arm over your head and to the side until you feel a stretch along your side.

Keep your hips steady and your shoulders straight to the side. Avoid leaning forward or backward, and hold the stretch without bouncing.

Hold for 10 to 15 seconds. Repeat on the opposite side.



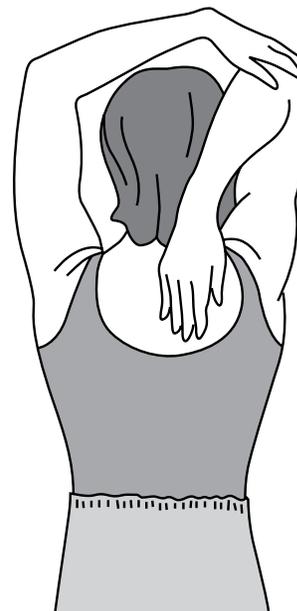
## Triceps Muscle Stretch

Sit or stand tall with good posture.

Place one arm behind your head, with your hand facing toward your back and down your spine.

Use the other hand to push down gradually on the elbow joint, while slowly increasing the stretch on the triceps muscle.

Hold for 10 to 15 seconds. Repeat on the opposite side.



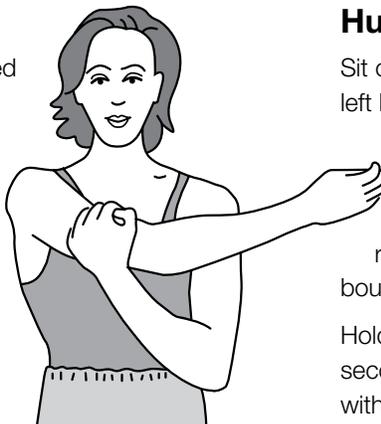
## Shoulder Stretch

This stretch can be completed while seated or standing.

Take one arm and reach across the front of your chest. Use the opposite hand to push the arm into your chest at a point just above the elbow joint.

Keep the arm straight and breathe comfortably.

Hold for 10 to 15 seconds, and repeat with the other arm.

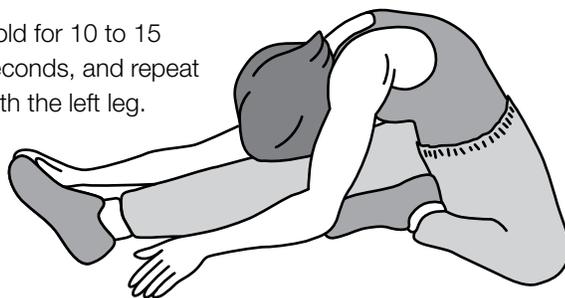


## Hurdler Stretch

Sit on the floor with your right leg straight out and your left leg folded inward with the bottom of your left foot touching the inside of your right thigh.

With your right hand, reach toward your right ankle until you feel the stretch in your calf and rear thigh muscles. Continue the stretch without bouncing.

Hold for 10 to 15 seconds, and repeat with the left leg.



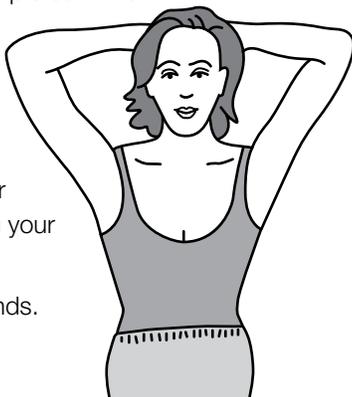
## Chest Stretch

This stretch can be completed while seated or standing.

Place both hands on the back of your head.

Slowly pull your elbows toward the back of your head without extending your neck forward.

Hold for 10 to 15 seconds.



## Leg Curl Stretch

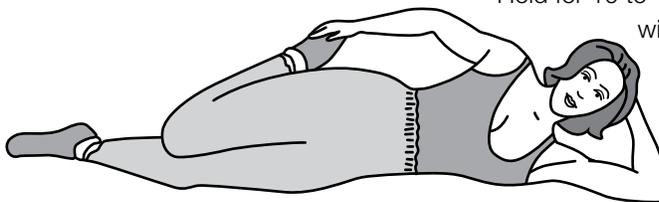
This stretch can be performed either standing or laying on your side. If standing, use a chair or wall for support.

Grab one leg at the ankle. Slowly pull your heel up toward your bottom, while gradually stretching the muscles at the front of your thigh.

If you cannot reach your ankle, wrap a towel around your ankle and pull on the towel until you feel a stretch in the muscles at the front of your thigh. This version should be done lying on your side.

Keep your knees together and back straight throughout the stretch.

Hold for 10 to 15 seconds, and repeat with the opposite leg.



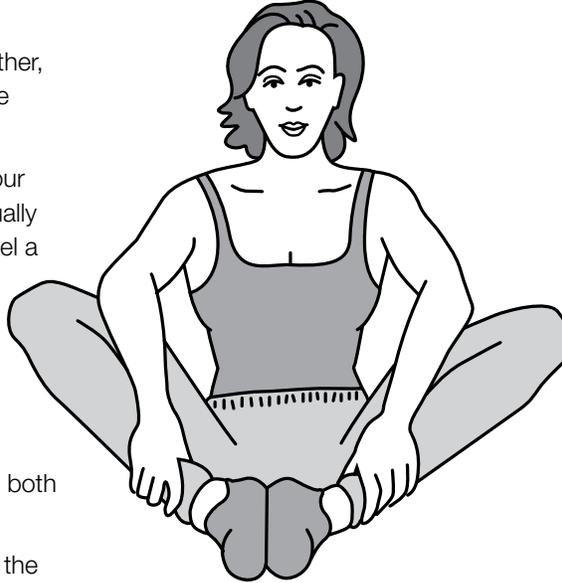
## Inner Thigh Stretch

Sitting on the floor with the soles of the feet together, place your hands either around your ankles or the lower part of your legs.

While keeping your back straight, gently move your knees toward the floor. Using your elbows, gradually apply pressure against the inner knee until you feel a steady stretch on your inner thigh muscles.

Avoid pulling up on your feet during the stretch.

Hold for 10 to 15 seconds.



## Calf stretch

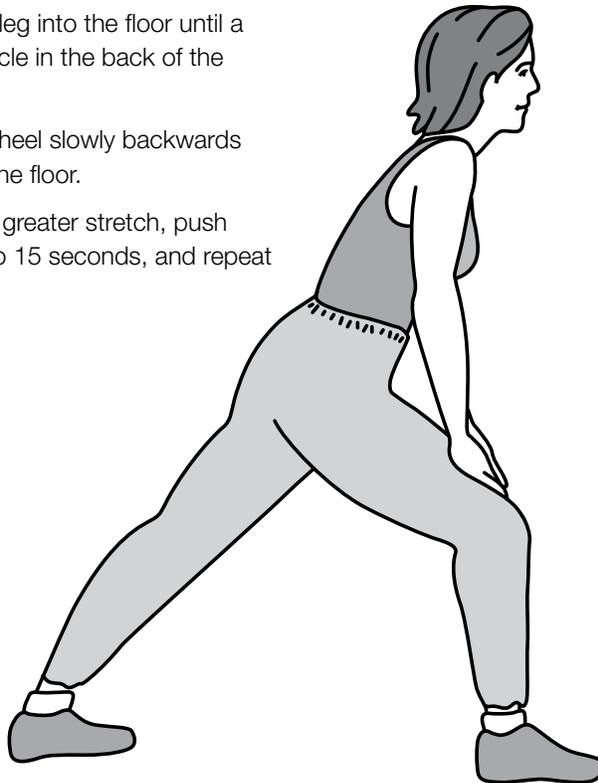
Standing with one foot in front of the other, place both feet about two feet apart.

Lean forward with the knee of your front leg over the ankle joint. Keep your rear leg and your back in a straight position.

Press the heel of your back leg into the floor until a stretch is felt in the calf muscle in the back of the lower leg.

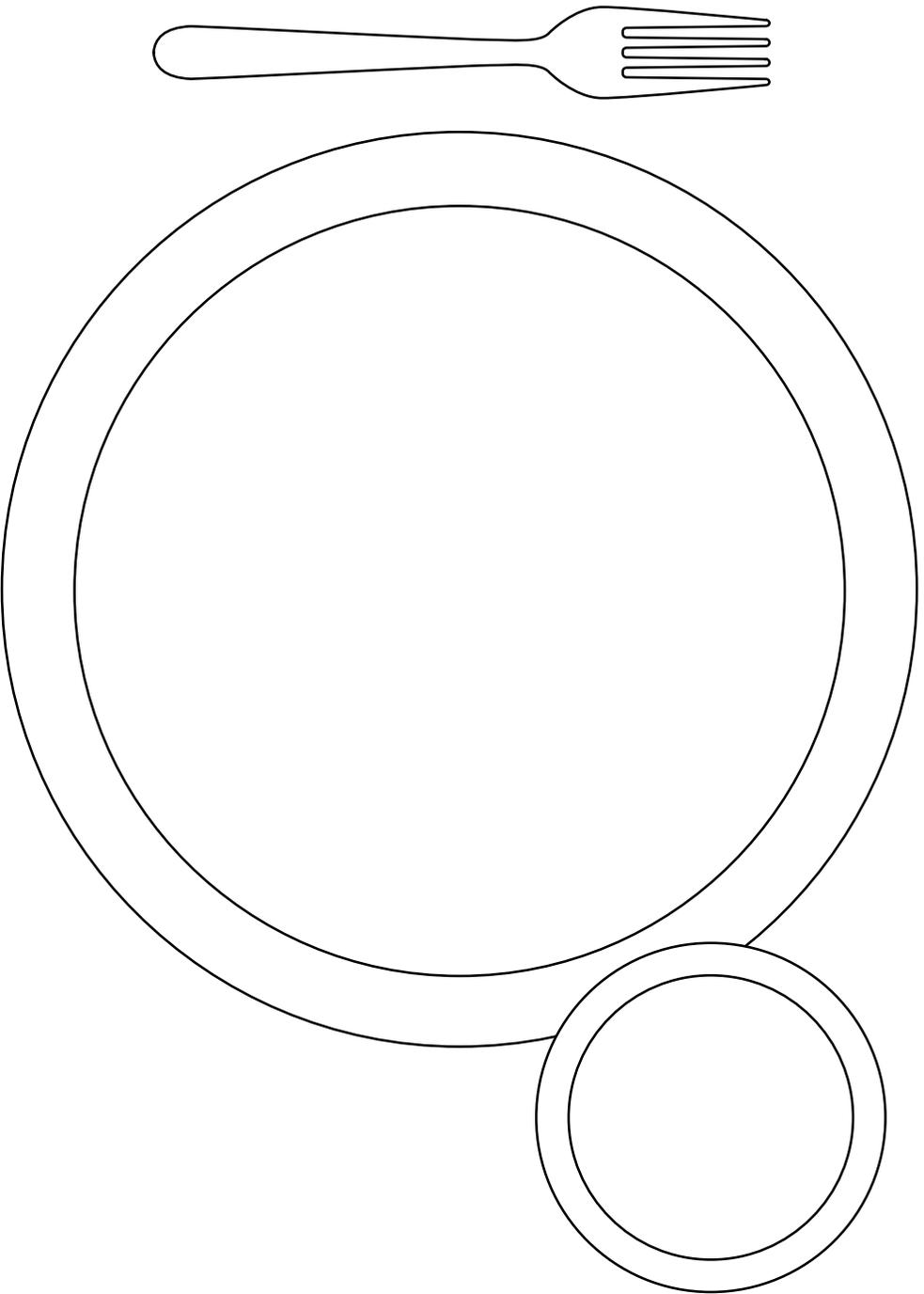
If no stretch is felt, slide the heel slowly backwards while keeping both feet on the floor.

For improved stability and a greater stretch, push against a wall. Hold for 10 to 15 seconds, and repeat with the opposite leg.





Choose **MyPlate**.gov



**ChooseMyPlate.gov**

# Homework Sheet

## Lesson One

### Instructions:

You and your family are encouraged to do at least two of the three activities. Please come to class prepared to share what you accomplished.

ACTIVITY	STATUS
Apply for CalFresh.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In progress
Make half your plate fruits and vegetables at least 3 times this week.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In progress
Be physically active for at least 30 minutes 3 times this week.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In progress

# Lesson Two

Healthy Eating on a Budget



# Lesson Two

## Healthy Eating on a Budget

<b>Objectives</b>	By the end of this lesson, participants will: <ul style="list-style-type: none"><li>• Apply money saving tips for food shopping</li><li>• State the best time of the year to purchase fruits and vegetables</li><li>• Use the envelope method as a money management tool</li></ul>
<b>Time</b>	<b>2 hours</b>
<b>Materials Needed</b>	<ul style="list-style-type: none"><li>• Name tags</li><li>• Colored markers and/or crayons</li><li>• Pens and/or pencils</li><li>• Flip chart paper</li><li>• Blue painter's tape</li><li>• Large envelope for documents</li><li>• Calculators (optional)</li><li>• Boom box and CDs (optional)</li><li>• Recipe and items for food demonstration (optional)</li></ul> <p><b>Trainer Materials:</b></p> <ul style="list-style-type: none"><li>• Sign-in Sheet</li><li>• Food Shopping Problems Activity</li><li>• Food Shopping Tips</li><li>• Sheets: Spring, Summer, Fall, Winter, Year Round</li><li>• Seasonal Guide</li><li>• Grocery Cart Physical Activity</li><li>• Managing Your Food Activity Worksheet</li><li>• Homework Sheet (Lessons One and Two)</li></ul> <p>Note: Provide a copy of the Media Release Form, Data Sheet, and Pre Survey to participants who are new to the class.</p> <p><b>Participant Handouts:</b></p> <p>Make copies of the following:</p> <ul style="list-style-type: none"><li>• Food Shopping Problems Activity</li><li>• Food Shopping Tips</li><li>• Seasonal Guide</li><li>• Grocery Cart Physical Activity</li><li>• Managing Your Food Activity Worksheet</li><li>• Homework Sheet (Lessons One and Two)</li></ul>

## Healthy Eating on a Budget

<p><b>Before the Training</b></p>	<p>Confirm your meeting location, date, and time.</p> <p>Remind participants with a friendly call or email, whichever method works best for you and participants.</p> <p>Make copies of the trainer materials and participant handouts.</p> <p>Prepare the following flip chart paper:</p> <ul style="list-style-type: none"> <li>• Agenda</li> </ul>
<p><b>Day of Training</b></p>	<p>Set out the sign-in sheet and a pen.</p> <p>Post agenda to the wall.</p> <p>Post Season Sheets: Spring, Summer, Fall, Winter, Year Round on the walls around the room.</p> <p>Attach Group Agreements to the wall.</p> <p>Have music playing as participants arrive (optional).</p>
<p><b>Agenda</b></p>	<ol style="list-style-type: none"> <li>1. <b>Welcome Back, Recap, and Homework Discussion</b> (10 minutes)</li> <li>2. <b>Shopping Tips</b> (30 minutes)</li> <li>3. <b>Fruits and Veggies: When to Buy In Season</b> (15 minutes)</li> <li>4. <b>Physical Activity Break</b> (10 minutes)</li> <li>5. <b>Managing Your Food Money</b> (30 minutes)</li> <li>6. <b>Homework</b> (10 minutes)</li> <li>7. <b>Reflection and Conclusion</b> (10 minutes)</li> </ol>
<p><b>1. Welcome Recap, and Homework Discussion</b> <b>10 minutes</b></p> <p><b>Materials:</b></p> <ul style="list-style-type: none"> <li>• Homework Sheet (Lesson One)</li> </ul>	<p>Thank you all for returning. Your participation is very important.</p> <p>You will notice that our Group Agreements are attached to the wall.</p> <p>Please turn to a partner and share with that person any successes and/or challenges you had with completing your homework activities. <b>[Allow a few minutes for sharing.]</b></p> <p>Would anyone like to share your experience aloud with the group? <b>[Allow time for participants to share.]</b></p> <p>Thank you all for sharing and congratulations for the items you accomplished.</p>

## Healthy Eating on a Budget

	<p>The topic today is healthy eating on a budget. You will learn about:</p> <ul style="list-style-type: none"> <li>• Money saving tips for food shopping.</li> <li>• The best time of the year to purchase fruits and vegetables.</li> <li>• A method to help you keep track of your food money.</li> </ul> <p>Let's begin.</p>		
<p><b>2. Shopping Tips</b>  <b>30 minutes</b>  <b>Materials:</b></p> <ul style="list-style-type: none"> <li>• Food Shopping Problems Activity (one problem for each group)</li> <li>• Food Shopping Tips</li> </ul>	<p>Healthy changes can start at home and with what we put in our grocery cart. Participating in CalFresh provides families with the ability to purchase fresh fruits and vegetables.</p> <p>As we learned last week from MyPlate, healthy meals include something from each of the five food groups.</p> <p>Who can name the five food groups? <b>[Wait for responses.]</b></p> <p>The five food groups are Fruit, Vegetable, Protein Foods, Grain, and Dairy.</p> <p>Some believe that eating healthy takes too much time and that fruits and vegetables cost more than other foods. Compared to sugary drinks or snack foods, fruits and veggies are a bargain.</p> <p>We will address these beliefs and offer you tips that you may find useful in providing healthy meals for you and your family.</p> <p>Please get into four small groups.</p> <p>I will present each group with a food shopping problem.<sup>1</sup> <b>[Provide each group with a Food Shopping Problem.]</b></p> <p>Please take a few minutes to identify solutions to your food shopping problem. Be creative! <b>[Allow time for groups to identify solutions to their problem.]</b></p> <p>Each group will be asked to share aloud their food shopping problem and solutions your group identified. Let's go in order, starting with Group One. <b>[Offer the following possible solutions for each problem if not mentioned.]</b></p>		
	<table border="1"> <tr> <td data-bbox="634 1650 824 1955"> <p><i>Group 1</i></p> </td> <td data-bbox="824 1650 1537 1955"> <p><i>Problem:</i> I run out of food and money before the end of the month.</p> <p><i>Possible Solutions:</i></p> <ul style="list-style-type: none"> <li>• When you receive income, set aside enough money to feed your family until the next payday.</li> <li>• Go to the food bank or pantry for help and plan your meals around the items you are given.</li> </ul> </td> </tr> </table>	<p><i>Group 1</i></p>	<p><i>Problem:</i> I run out of food and money before the end of the month.</p> <p><i>Possible Solutions:</i></p> <ul style="list-style-type: none"> <li>• When you receive income, set aside enough money to feed your family until the next payday.</li> <li>• Go to the food bank or pantry for help and plan your meals around the items you are given.</li> </ul>
<p><i>Group 1</i></p>	<p><i>Problem:</i> I run out of food and money before the end of the month.</p> <p><i>Possible Solutions:</i></p> <ul style="list-style-type: none"> <li>• When you receive income, set aside enough money to feed your family until the next payday.</li> <li>• Go to the food bank or pantry for help and plan your meals around the items you are given.</li> </ul>		

Healthy Eating on a Budget

	<ul style="list-style-type: none"> <li>• Choose nutritious drinks like fat-free or 1% milk to serve with meals, and save money by serving water between meals.</li> <li>• Purchase fresh fruits and vegetables when they are in season.</li> <li>• Apply for CalFresh.</li> </ul>
Group 2	<p><i>Problem:</i> I am always going out to the store because I forgot to buy something I needed to make for dinner.</p> <p><i>Possible Solutions:</i></p> <ul style="list-style-type: none"> <li>• Plan meals for one week at a time.</li> <li>• Make a list of all the items you need to buy.</li> <li>• Check what supplies you have at home.</li> <li>• Bring your shopping list with you to the store.</li> </ul>
Group 3	<p><i>Problem:</i> I go to the store for two food items and come out buying two bags full.</p> <p><i>Possible Solutions:</i></p> <ul style="list-style-type: none"> <li>• Don't shop when you are hungry.</li> <li>• Make a shopping list and stick to it.</li> </ul>
Group 4	<p><i>Problem:</i> When my children are with me, they always ask me to buy foods they saw on TV ads.</p> <p><i>Possible Solutions:</i></p> <ul style="list-style-type: none"> <li>• Try to shop alone.</li> <li>• Find a neighbor who also has children and take turns watching each other's kids so you can shop alone.</li> <li>• When shopping with children, allow them to pick out their favorite fruits and vegetables.</li> </ul>
<p>Thank you everyone for coming up with such creative solutions to these common food shopping problems.</p> <p>Stretching your food dollars doesn't begin when you get to the store. To eat healthy on a budget and to avoid food shopping problems, it is important to consider what we do before, while, and after we shop.</p>	

### Healthy Eating on a Budget

Here are a few key tips to consider:<sup>2</sup>

#### *Before you shop*

Think about how much money you can spend, what foods you have on hand, what is on sale, and what sounds good.

- Know how much money you have to spend on food.
- Take inventory of the foods you already have—check your refrigerator, freezer, and cupboards. This will keep you from buying food you don't need.
- Plan your menus based around the foods you have.
- Make a shopping list of the foods you need to prepare the meals and snacks.
- Think variety by including foods from the five food groups, especially trying a new fruit or vegetable each week.
- Look for coupons, sales, and store specials.

#### *While you shop*

Your shopping list is your “plan” for the week — and your job is to stick to your plan!

It is very easy to come home with foods that aren't in your food budget. Grocery stores work hard to get you to buy more than you planned.

- Shop alone if you can.
- Don't shop when you are hungry.
- Stick to your list and stay out of the aisles that don't contain items on your list. The longer you are in the store and without a list, the more likely you are to spend more money.
- Try store brands. They usually cost less.
- Compare products for the best deal.
- Buy only the amounts of fresh foods you can use before it spoils.
- Buy in bulk the foods that are non-perishable.
- Check sell by dates to buy the freshest food possible.

#### *After you shop*

To avoid food and money waste, consider the following:

- Freeze food to prevent spoiling.
- Use foods with the earliest expiration dates first.
- Divide foods into small portions for children and elderly to prevent waste.
- Store food properly and right away to preserve freshness.

Healthy Eating on a Budget

Are there other suggestions you would like to share with the group?

**[Allow time for participants to share.]**

**[Pass out the Food Shopping Tips Sheet.]**

This sheet outlines the suggestions to consider before, during, and after you shop.

**3. Fruits and Veggies: When to Buy In Season**

**15 minutes**

**Materials:**

- Sheets: Spring, Summer, Fall, Winter, Year Round posted on the walls around the room
- Seasonal Guide

Many varieties of fruits and vegetables are available all year in almost every part of this great state of California.

There are two important factors to consider when buying fruits and vegetables fresh and in season:

- Cost. They may be less expensive.
- Flavor. They are more likely to be at their peak flavor.

This activity will help us to determine the best time of year to buy certain fruits and vegetables grown in California.

Please stand up.

You will notice that there are sheets representing the seasons—Spring, Summer, Fall, Winter, and Year Round on the walls around the room.

When I say the name of a fruit or vegetable, please move to the time of year you think when that fruit or vegetable is “in season.”

**[Select at least five to seven fruits and/or vegetables utilizing the Seasonal Guide. Once participants have moved to the time of year they think that the fruit and/or vegetable is in season, provide the correct answer. Afterward, give each participant a copy of the Seasonal Guide. For additional information, please visit [www.harvestofthemoth.com](http://www.harvestofthemoth.com).]**

A good place to purchase fruits and vegetables is at the Farmers Market. California has a growing number of Farmers Markets with some of them accepting the CalFresh EBT card. If available in your community, they are a great place to buy a variety of fruits and vegetables.

A cost-saving tip is that if you go to the Farmers Market a few minutes before they close at the end of the day, there are some farmers who may sell their items for less.

If you are receiving CalFresh, you are able to use your benefits to purchase seeds and plants so that you can grow your own fruits

**Healthy Eating on a Budget**

and vegetables. Having a garden can be a fun family activity and a great way to be physically active, too!

Remember:

- Buy fruits and vegetables in season as they tend to be more flavorful and less expensive.
- Buy whole fruits and vegetables instead of pre-cut or pre-packaged forms, which tend to be more expensive.
- Avoid pre-bagged salad mixes. They are usually more expensive and spoil faster.

If you cannot buy fresh and in season, consider the following:

- Frozen and canned fruits and vegetables without added sugar and sodium.
- Dried fruits.
- If your budget allows, buy larger bags of frozen fruits and vegetables. They may be a better bargain and you can use what you need and keep the rest for later use. Be sure to seal tightly in the freezer between uses to avoid waste.

**4. Physical Activity Break**

**10 minutes**

**Materials:**

- Grocery Cart  
Physical Activity
- Boom box with CD (optional)

Now it's time to get physical. Please stand up behind your chair and make sure to give yourself enough space.

You may recall that last week we focused on stretching. Today's physical activity focuses on fun exercises you can do while shopping.

**[Refer to Grocery Cart Physical Activity Handout and provide a copy of it to each participant after the physical activity break.]**

**5. Managing Your Food Money<sup>3</sup>**

**30 minutes**

**Materials:**

- Managing Your Food Money Worksheet
- Pens and/or Pencils
- Calculators (optional)

Now that we are energized, let's move on to the next item on the agenda, which is the "Managing Your Food Money" activity.

There are many ways that food money can be spent unexpectedly if not well managed. It really helps to set aside and track where the food money goes. It all adds up quickly!

The purpose of this next activity is to practice using the envelope method to keep track of money set aside for food and record how it is spent.

Please get into small groups. Choose a "family" name and identify someone who will keep track of your purchases.

### Healthy Eating on a Budget

#### Reminders:

Lesson 1 has information about the CalFresh EBT card.

Your family has a total of \$90.00 to spend on food for the week. You have \$50.00 on your CalFresh EBT card and \$40.00 in cash.

**[Provide each family with a Managing Your Food Money Worksheet, pens and/or pencils, and calculators (optional).]**

On the worksheet is a list of items you can purchase as well as a picture of an envelope with two columns—one for cash and one for CalFresh EBT.

As a family, decide on which purchases you would like to make and if it is to be paid for in cash or with your CalFresh EBT card.

The family member who is keeping track of your purchases:

- Checks off the purchases, which represents placing a receipt in the envelope.
- Writes the amount spent on either the cash or CalFresh EBT column of the envelope.
- Subtracts the amount spent from the previous total available to always have a current balance.

Continue until you feel you have everything you need for that week.

**[Allow time for groups to do this activity.]**

Now that each family is done shopping, please select a family member who will answer the following questions:

- What did you buy?
- Was there any money left over either in cash or on your CalFresh EBT card? **[Allow each “family” to share.]**

Thank you for sharing.

Just imagine if you are not signed up with CalFresh. All of the food purchased with CalFresh would have been paid for in cash.

Using the envelope method is one way to help you to keep track of exactly where your money goes. It is where you place all of your receipts as well as write down each and every expense. If you don't have a receipt, simply write the amount spent and the purpose on a piece of paper and put it in the envelope.

As a reminder, CalFresh is a health and nutrition program meant to help stretch your food dollar so you can buy more fruits, vegetables, and other healthy foods for the whole family.

Thank you everyone for participating in this activity

## Healthy Eating on a Budget

### 6. Homework

**10 minutes**

**Materials:**

- Homework Sheet (Lessons One and Two)

**[Pass out the Homework Sheet (Lessons One and Two) to each participant.]**

We will now go over the homework activities for this week.

Based on what you learned today, you are encouraged to add other activities.

For example, you could:

1. Make a list before you shop and only buy what is on your list.
2. Introduce two new vegetables to your dinner at least once this week.
3. While shopping, do the physical activity exercises we did today.
4. Go for a 20-minute walk with your family two times this week.
5. Use the envelope method.

Please come to the next class prepared to discuss what you accomplished.

### 7. Reflection and Conclusion

**10 minutes**

**Materials:**

- Large envelope for documents

**Reminders:**

Collect Sign-in Sheet and place in large envelope.

Today we shared information about food shopping tips, discussed buying fruits and vegetables in season, as well as practiced using the envelope method. We also acted out fun exercises you can do while shopping.

Please take a moment to reflect on today's lesson and our time spent together.

Would someone like to share one thing they learned and/or liked about today's class? **[Allow time for participants to think about and share with the class.]**

Don't forget, lesson three will take place **[location/date/time]**.

We will discuss sugary drinks and review all that we have covered during our lessons together.

Thank you all for participating in today's lesson. We really appreciate you being here. See you next week!

<sup>1</sup> Adapted from "Food Shopping Problems and Solutions, Making Every Dollar Count," UC Cooperative Extension, 2007

<sup>2</sup> Adapted from the following resources: "Get Smart as You Shop," Fruits and Veggies Matter, CDC; USDA's Nutrition Assistance Programs: Eat Right When Money's Tight, Food and Nutrition Service, January 2011; Eating on a Budget- Three 3 P's, USDA, September 2011

<sup>3</sup> Adapted from "Money for Food: A Curriculum About Planning for and Spending Family Food Dollars" University of Wisconsin, Wisconsin Nutrition Education Program, 2010

# Lesson Two

## Attachments



# CalFresh Promotion Sign-in Sheet



Peer-educators: \_\_\_\_\_

Location: \_\_\_\_\_

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

NAME – PLEASE PRINT		SIGNATURE		PHONE NUMBER	
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

# Food Shopping Problems Activity

## Group 1

**Problem:** I run out of food and money before the end of the month.

**Solutions:**

----- CUT HERE -----

## Group 2

**Problem:** I am always going out to the store because I forgot to buy something I needed to make dinner.

**Solutions:**

**Group 3**

**Problem:** I go to the store for two food items and come out buying two bags full.

**Solutions:**

----- CUT HERE -----

**Group 4**

**Problem:** When my children are with me, they always ask me to buy foods they saw on TV ads.

**Solutions:**

# Food Shopping Tips

## Before you shop

Think about how much money you can spend, what foods you have on hand, what is on sale, and what sounds good.

- Know how much money you have to spend on food.
- Take inventory of the foods you already have—check your refrigerator, freezer, and cupboards. This will keep you from buying food you don't need.
- Plan your menus based around the foods you have.
- Make a shopping list of the foods you need to prepare the meals and snacks.
- Think variety by including foods from the five food groups, especially trying a new fruit or vegetable each week.
- Look for coupons, sales, and store specials.

## While you shop

Your shopping list is your “plan” for the week — and your job is to stick to your plan!

It is very easy to come home with foods that aren't in your food budget. Grocery stores work hard to get you to buy more than you planned.

- Shop alone if you can.
- Don't shop when you are hungry.
- Stick to your list and stay out of the aisles that don't contain items on your list. The longer you are in the store and without a list, the more likely you are to spend more money.
- Try store brands. They usually cost less.
- Compare products for the best deal.
- Buy only the amounts of fresh foods you can use before it spoils.
- Buy in bulk the foods that are non-perishable.
- Check sell by dates to buy the freshest food possible.

## After you shop

To avoid food and money waste, consider the following:

- Freeze food to prevent spoiling.
- Use foods with the earliest expiration dates first.
- Divide foods into small portions for children and elderly to prevent waste.
- Store food right away to preserve freshness.

**SPRING**

**SUMMER**

**FALL**

**WINTER**

**YEAR  
ROUND**

# Seasonality Guide



The Seasonality Guide shows when fruits and vegetables are readily available throughout the year.

## Spring

apricots  
artichokes  
asparagus  
avocados  
bell peppers  
collard greens  
grapefruit  
green peas  
guavas  
mangos  
oranges  
papayas  
rhubarb  
strawberries  
Swiss chard

pears  
plums  
strawberries  
Swiss chard  
tomatoes  
valencia oranges  
watermelon  
yellow squash  
zucchini

## Fall

acorn squash  
Brussels sprouts  
butternut squash  
chayote squash  
cherimoya  
grapes  
green beans  
honeydew  
kiwifruit  
okra  
pears  
persimmons  
pomegranates  
pumpkins  
sweet potatoes

Swiss chard  
tangerines  
tomatoes  
turnips

## Winter

avocados  
Brussels sprouts  
chayote squash  
cherimoya  
collard greens  
grapefruit  
guavas  
kiwifruit  
mustard greens  
oranges  
pears  
tangerines  
turnips

## Year Round

apples  
bananas  
beets  
bok choy  
broccoli  
cabbage  
cactus leaves  
canned fruits and  
vegetables  
carrots  
cauliflower  
celery  
chili peppers

cucumbers  
dried fruit  
eggplant  
frozen fruits and  
vegetables  
garlic  
green onion  
jicama  
kale  
leeks  
lemons  
lettuce  
limes  
mushrooms  
onions  
parsnips  
pineapples  
potatoes  
radishes  
spinach  
tomatillos  
100% fruit juice  
100% vegetable juice

# Grocery Cart Physical Activity\*

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## Safety Tips:

- Breathe while being physically active. Do not hold your breath.
- Protect your back by keeping your stomach tight and spine straight.
- Keep your knees and elbows slightly bent. Do not lock them.
- Stop if you feel pain or discomfort.
- Consult a physician before starting any exercise program.

## Repetitions (Reps):

- Select reps based on fitness level: *Beginner 4 • Intermediate 6 • Advanced 8*
- 

### 1. Arm Waiver: Perform while stationary or pushing a cart.

- Wave one arm up and down slowly.
- Each complete up and down hand motion equals one repetition (rep).
- Switch arms and repeat.

### 2. The Leg Lift: Perform while stationary and holding onto a cart.

- Begin with feet shoulder-width apart, hands on handlebar.
- Extend one leg to the rear, lifting off the ground about 1 foot.
- Slowly return to starting position.
- Switch legs and repeat.

### 3. The Standing Pointer: Secure front wheels against wall for added stability.

- Place right hand on handlebar for balance.
- Lean forward and extend your left arm to front and right leg behind.
- Pause for three seconds and return to the starting position.
- Switch leg and arm and repeat.

### 4. Sawing Wood: Perform while stationary or pushing cart.

- Place one foot in front of the other shoulder-width apart and reach hands/cart forward and back.
- Pull back and bring hands to hips and repeat.  
(Avoid rounding your back.)

### 5. Half Squat: Perform while stationary.

- Begin with feet shoulder-width apart, hands on handlebar.
- Sit halfway down.
- Return to starting position and repeat.

### **6. Leg Curl: Perform while stationary or pushing a cart.**

- Lift foot up until shin is parallel to floor.
  - Return to starting position.
  - Switch legs and repeat.
- \*(Keep knees aligned with one another.)

### **7. Side Leg Raise: Perform while stationary.**

- Stand tall next to the cart.
  - Lift right leg out about 1 foot to the side.
  - Return to starting position.
  - Switch legs and repeat.
- (Keep posture tall as leg lifts to side.)

### **8. Calf Raise: Perform while stationary.**

- Stand tall with hands on handlebar.
- Lift both heels off the floor.
- Pause at the top of lift for two seconds.
- Return to starting position.

### **9. Apple Picker: Perform while stationary or pushing a cart.**

- Place left hand on hip, reach to sky with right hand.
  - Pause in the reaching position for a few seconds.
  - Switch arms and repeat.
- (Every two reaches = one rep.)

\* Adapted from Fit Deck cards, Senior and Stroller decks, at [www.fitdeck.com](http://www.fitdeck.com)

# Managing Your Food Money\*

## Envelope Method Activity

### Instructions:

As a family, decide on which purchases you would like to make and if it is to be paid in cash or with your CalFresh EBT card.

The family member who is keeping track of your purchases:

- Checks off the purchases, which represents placing a receipt in the envelope.
- Writes the amount on either the cash or CalFresh EBT column of the envelope.
- Subtracts the amount from the previous column total to always have a current balance.

### Purchases:

- Milk and bread at a gasoline station \$6.00
- 10 pounds of oranges from a roadside stand \$5.00
- A pizza and a 2 liter soda \$8.00
- One bottle of soda from vending machine at work \$1.25
- Hamburger meat and rice for next meal \$6.00
- Fresh fruit and vegetables, yogurt, lentils, and tortillas \$18.50
- Dinner at a fast-food restaurant \$11.00
- Sandwich and soda on your way to work \$5.50
- Ingredients for soup \$4.50
- Hot dog and soda from corner store \$5.25
- Lunch from a taco truck near work \$6.50
- Vitamins \$9.00
- Tomatoes, carrots, and squash at Farmers Market \$5.00
- Newspaper and some gum \$2.00
- Large box of diapers \$15.00
- Calling card \$5.00
- Gas in car \$15.00
- Laundry detergent \$4.00

<b>Food Money Total</b>	
\$90.00	
<b>Cash</b>	<b>CalFresh EBT</b>
\$40.00	\$50.00
<b>TOTAL</b>	<b>TOTAL</b>
<input type="text"/>	<input type="text"/>

Receipts

\* Adapted from "Food Shopping Problems and Solutions, Making Every Dollar Count," UC Cooperative Extension, 2007

# Homework Sheet

## Lesson One and Two

### Instructions:

You and your family are encouraged to add other activities this week. Please come to class prepared to share what you accomplished.

ACTIVITY	STATUS
Apply for CalFresh.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In progress
Make half your plate fruits and vegetables at least 3 times this week.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In progress
Be physically active for at least 30 minutes 3 times this week.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In progress
Make a list before you shop and only buy what's on your list.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In progress
Introduce two new vegetables to your dinner at least once this week.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In progress
While shopping, do the exercises we did today.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In progress
Go for a 20-minute walk with your family two times this week.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In progress
Use the envelope method.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In progress

# Lesson Three

Sugary Drinks, Lessons Review, and Celebration



# Lesson Three

## Sugary Drinks, Lessons Review, and Celebration

<p><b>Objectives</b></p>	<p>By the end of this lesson, participants will be able to:</p> <ul style="list-style-type: none"> <li>• Describe the <i>Rethink Your Drink</i> Campaign</li> <li>• Understand the link between sugary drinks and obesity and type 2 diabetes</li> <li>• Identify types of sugary drinks</li> <li>• Calculate the amount of sugar in beverages</li> <li>• Identify alternative drinks with less sugar or no added sugar</li> </ul>
<p><b>Time</b></p>	<p><b>2 hours</b></p>
<p><b>Materials Needed</b></p> <p><b>*Facilitators may choose between the following two options for the sugary drinks activity:</b></p> <p><b>Option 1:</b>  <b>Use the “Drink Label Cards” by <i>Network for a Healthy California</i></b></p> <p><b>Or</b></p> <p><b>Option 2:</b>  <b>Use assortment of beverages</b></p>	<ul style="list-style-type: none"> <li>• Name tags</li> <li>• Colored markers and/or crayons</li> <li>• Pens and/or pencils</li> <li>• Flip chart paper</li> <li>• Blue painter’s tape</li> <li>• Option 1: Drink Label Cards</li> <li>• Option 2: Assortment of Beverages (e.g. soda, sports drink, energy drink, culturally-relevant sugary drinks, etc.)</li> <li>• One 20 oz. soda bottle</li> <li>• One 20 oz. soda bottle (same as above) emptied, dried, and then filled with total number of teaspoons of sugar [Be sure to use the formula: Grams of Sugar ÷ 4 = Teaspoons of Sugar x Total Servings.]</li> <li>• Plastic baggies or small clear cups</li> <li>• Sugar</li> <li>• Measuring teaspoon</li> <li>• Water jug or dispenser</li> <li>• Fruit and/or vegetables for water such as oranges, lemons, limes, cucumber, cantaloupe, or watermelon</li> <li>• Water</li> <li>• Cups</li> <li>• Ice</li> <li>• Post-its</li> <li>• Large envelope for documents</li> <li>• Calculators (optional)</li> <li>• Boom box and CDs (optional)</li> <li>• Recipe and items for food demonstration (optional)</li> </ul> <p>Note: Provide a copy of the Data Sheet to participants who are new to the class.</p>

## Sugary Drinks, Lessons Review, and Celebration

### Trainer Materials:

- Sign-in Sheet
- Homework Sheet (Lessons One and Two)
- Nutrition Facts Label Sheet
- If doing option 1: Drink Label Cards
- Calculate Sugar Content Worksheet
- Dance for Fun and Fitness Handout
- Entire Course Evaluation (optional)
- Post Survey (optional)
- Certificates

### Participant Handouts:

Make copies of the following:

- Nutrition Facts Label Sheet
- If doing option 1: Drink Label Cards
- Calculate Sugar Content Worksheet
- Dance for Fun and Fitness Handout
- Entire Course Evaluation (optional)
- Post Survey (optional)
- Certificates

### Before the Training

Purchase the following items:

- If using Option 2: beverages (e.g. soda, sports drink, energy drink, culturally-relevant sugary drinks, etc.), please remove the labels from the beverages; if possible, add a generic label describing the beverage using terms such as soda, sports drink, energy drink, etc.
- Two 20 oz. soda bottles
- Plastic baggies or small clear cups
- Sugar (1lb)
- Measuring teaspoon
- Water jug or dispenser
- Fruit and/or vegetables for water such as oranges, lemons, limes, cucumber, cantaloupe, or watermelon
- Water
- Cups
- Ice

Prepare the following for the Calculating Sugar Content Activity:

- Empty one of the 20 oz. soda bottles and fill with the amount of sugar calculated using the formula: Grams of Sugar  $\div$  4 = Teaspoons of Sugar x Total Servings.

## Sugary Drinks, Lessons Review, and Celebration

	<p>Prepare water with fruit and/or vegetables and ice (“spa water”).</p> <p>Make copies of the trainer materials and participant handouts.</p> <p>Prepare the following flip chart paper:</p> <ul style="list-style-type: none"> <li>• Agenda</li> <li>• Head, Heart, and Feet</li> </ul>
<p><b>Day of Training</b></p>	<p>Set out the sign-in sheet and a pen.</p> <p>Post flip chart papers to the wall.</p> <p>Attach Group Agreements to the wall.</p> <p>Prepare water with fruit and/or vegetables you selected. Do NOT add sugar.</p> <p>Place cups on table.</p> <p>Have music playing as participants arrive (optional).</p>
<p><b>Agenda</b></p>	<ol style="list-style-type: none"> <li>1. <b>Welcome Back, Recap, and Homework Discussion</b> (10 minutes)</li> <li>2. <b>Rethink Your Drink Campaign</b> (5 minutes)</li> <li>3. <b>Sugary Drinks Overview</b> (10 minutes)</li> <li>4. <b>Nutrition Label Reading &amp; Sugar Activity</b> (30 minutes)</li> <li>5. <b>Physical Activity Break</b> (5 minutes)</li> <li>6. <b>Do You Remember?</b> (20 minutes)</li> <li>7. <b>Reflection</b> (15 minutes)</li> <li>8. <b>Evaluations, Post Survey, and Certificates</b> (25 minutes)</li> </ol>
<p><b>1. Welcome Back Recap, and Homework Discussion</b> <b>10 minutes</b></p> <p><b>Materials:</b></p> <ul style="list-style-type: none"> <li>• Homework Sheet (Lessons One and Two)</li> </ul>	<p>Thank you all for returning. Your participation is important.</p> <p>You will notice that our Group Agreements are attached to the wall to remind us.</p> <p>Let’s begin.</p> <p>Please turn to a partner and share with that person any successes and/or challenges you had with completing your homework activities. <b>[Allow a few minutes for sharing.]</b></p> <p>Would anyone like to share your experience aloud with the group? <b>[Allow time for participants to share.]</b></p>

## Sugary Drinks, Lessons Review, and Celebration

Thank you all for sharing and congratulations for the items you accomplished.

Today's topic is sugary drinks. You will learn about:

- A new campaign in California known as the *Rethink Your Drink* Campaign
- The link between sugary drinks and obesity and type 2 diabetes
- Various types of sugary drinks
- Calculating the amount of sugar in beverages
- Identifying healthy alternative beverages you and your family can drink

### 2. *Rethink Your Drink*

5 minutes

What is the *Rethink Your Drink* Campaign?

Who here can share with the group if they have heard about the *Rethink Your Drink* Campaign and what they know about it?

**[Wait for responses.]**

The *Rethink Your Drink* Campaign:

- Educates Californians about healthy drink options
- Helps Californians recognize the amount of added sugar and calories in sugary drinks
- Communicates the link to health risks

Why? Extra calories from added sugar—like those in sugary drinks—can and do contribute significantly to overweight and obesity. In fact, sugary drinks are the largest contributor of added sugar in the diet.<sup>1</sup>

In California, 62% of teens, 41% of children and 24% of adults drink one or more sodas per day.<sup>2</sup>

And, adults who drink one or more sugary drinks a day are 27% more likely to be overweight than adults who do not drink sugary drinks.<sup>3,4</sup>

Plus, strong evidence shows that children and adolescents who consume more sugary drinks have higher body weight compared to those who drink less.<sup>5</sup>

### 3. Sugary Drinks Overview

10 minutes

What Are Sugary Drinks?

Who can give me an example of a sugary drink? **[Wait for responses.]**

### Sugary Drinks, Lessons Review, and Celebration

**[If a participant mentions a specific branded product, affirm their participation, and say the following: “Thank you for participating, that particular brand that you mentioned is a type of sugary drink called \_\_\_\_\_, can anyone else think of another category of drinks that has added sugar?”]**

Are there any others?

Other examples include:

- Sodas/Soft drinks/Soda pop
- Sweetened teas
- Sports drinks
- Energy drinks
- Juice drinks
- Vitamin-added waters
- Sweetened coffee drinks
- Flavored milk (e.g., chocolate, strawberry, vanilla)

How many of you thought all of these were considered sugary drinks? **[Wait for responses.]**

It is quite amazing that there are a number of different types of sugary drinks!

It is important to address sugary drinks because:

- As mentioned, there’s a link between sugary drinks, overweight and obesity and type 2 diabetes.
- Many sugary beverages offer calories, but provide few nutritional benefits.
- Drinking sugary drinks nearly doubles the risk of dental cavities in children.<sup>6</sup>
- Each year, the average California adolescent consumes the equivalent of 39 pounds of sugar from sugary drinks.<sup>7</sup>
- Sugary drinks are the single largest food category contributing added sugar in the American diet.<sup>8</sup>

Now we know what sugary drinks are, how they affect our health, and that too many sugary drinks are consumed. But how do we know how much sugar is in our drinks?

In this next section, we are going to discuss how much sugar is in some of the most popular drinks by reading their nutrition label and calculating the amount of sugar they actually have.

Sugary Drinks, Lessons Review, and Celebration

**4. Nutrition Label Reading & Sugar Activity**

**30 minutes**

**Materials:**

- 20 ounce soda bottle with soda
- 20 ounce soda bottle filled with total teaspoons of sugar
- Nutrition Facts Label Sheet
- Calculate Sugar Content Worksheet
- Option 1: Drink Card Labels or Option 2: Assortment of beverages (e.g., soda, sports drink, energy drink, culturally-relevant sugary drink, flavored milk)
- Sugar
- Measuring teaspoon
- Plastic baggies or small clear cups
- Pens and/or pencils
- Calculator(s) (optional)

How many teaspoons of sugar do you think is in a typical 20 ounce bottle of soda? **[Show 20 ounce bottle with soda.]**

**[Wait for responses. After participants guess, show them the empty soda bottle filled with sugar.]**

A typical 20 ounce bottle of soda can have as much as 17 teaspoons of sugar, or even more.

This bottle has **[# of teaspoons of sugar]** **[Pass soda bottle with sugar around to participants.]**

I'd like to show you how you can find out how much sugar is in a beverage by learning how to read a nutrition label.

Please get into small groups.

**[Provide each group a Nutrition Facts Label Sheet.]**

Please refer to the Nutrition Facts Label Sheet.

<b>Nutrition Facts</b>	
<b>Serving Size 20 fl. oz. (591 mL)</b>	
<b>Servings Per Container 1</b>	
<b>Amount Per Serving</b>	
<b>Calories 250</b>	
	<b>% Daily Value*</b>
<b>Total Fat</b> 0g	0%
<b>Cholesterol</b> 0mg	0%
<b>Sodium</b> 55mg	0%
<b>Total Carbohydrate</b> 68g	
Sugars <b>68g</b>	
<b>Protein</b> 0g	
*Percent Daily Values (DV) are based on a 2,000 calorie diet.	
Not a significant source of calories from fat, saturated fat, trans fat, cholesterol, dietary fiber, vitamin A, vitamin C, calcium and iron.	

### Sugary Drinks, Lessons Review, and Celebration

Can someone tell the class, what is the serving size listed in the Nutrition Facts Label? **[Wait for responses.]**

This label lists 20 fluid ounces as the serving size.

Can someone tell the class, how many servings per container are listed in the Nutrition Facts Label? **[Wait for responses.]**

This label lists one serving.

How much sugar is listed? **[Wait for responses.]**

There are 68 grams of sugar listed in this label. Let's see how many teaspoons that actually is.

Simply divide the grams of sugar by 4 to get the total teaspoons of sugar.

#### **Grams of Sugar ÷ 4 = Teaspoons of Sugar**

This example has 68 grams of sugar. So, we divide 68 by 4 and get a little more than 17 teaspoons of sugar.

#### **68 grams ÷ 4 = 17 teaspoons**

If the bottle has more than one serving, multiply the number of teaspoons by the number of servings to get the total teaspoons of sugar.

For example, 17 teaspoons x 2 servings = 34 teaspoons in total.

We just learned how to calculate how many teaspoons of sugar is in a beverage. Now let's briefly talk about the different types of sugar.

Sugar comes in many forms. Though not distinguished on the Nutrition Facts label, many drinks contain two types of sugar: naturally occurring sugar and added sugar. Naturally occurring sugars are found in raw or basic foods and drinks (e.g. lactose in milk and fructose in fruit and fruit juice). Added sugars are found mainly in processed foods and drinks (e.g., high fructose corn syrup, cane sugar, raw sugar, molasses, etc.)

One way to know if there is sugar (added, natural, or both) is to read the ingredients list on the label.

Names for naturally occurring sugars include:

- Glucose (aka dextrose)
- Fructose
- Sucrose

### Sugary Drinks, Lessons Review, and Celebration

- Maltose
- Lactose

Names for added sugars frequently found in the ingredients listing of common foods and beverages include:

- Barley Malt
- Brown sugar
- Cane juice
- Corn syrup
- High fructose corn syrup
- Honey
- Malt fructose
- Maltodextrin
- Maple syrup
- Molasses
- Raw Sugar
- Sucrose

Let's take a closer look at how much and the type of sugar that is in a few popular drinks.

**[Provide each group with a Drink Card Label (option 1) or a sugary drink (option 2), the Calculating Sugar Content Worksheet, a pen and/or pencil, and a calculator (optional).]**

As a group please answer the questions outlined in the Calculating Sugar Content Worksheet by listing the following:

- Beverage type
- Serving size
- Servings per container
- Grams of sugar
- Total teaspoons of sugar
- Type(s) of sugar

**[While participants are doing the worksheet, place the bag of sugar, measuring teaspoon, and plastic baggies or small plastic 8 or 9 ounce cups on a table at the front of the class.]**

Once your team has completed the Calculating Sugar Content Worksheet, please identify one team member to come up to show the class how much sugar is in your drink.

### Sugary Drinks, Lessons Review, and Celebration

**[Have a participant from each group share the information on their sheet as well as measure out the number of teaspoons of sugar into the plastic baggie or small plastic 8 or 9 ounce cup provided.]**

Please share with the class the information you listed on your worksheet.

Let's help **[name of participant]** count out loud the number of teaspoons in his/her drink.

Was anyone surprised by the amount of sugar in any of the beverages?

Did it seem like there was a lot of sugar in some of the beverages? Would you eat that amount of sugar or put that much into your coffee each day?

You may be wondering about juice:

- 100% fruit juices have a lot of natural sugar. It is recommended that we limit our juice intake to 4-6 ounces for children, and up to 8 ounces (or 1 cup) for adults. It is better to eat whole fruits and vegetables, like an actual apple or orange. Water is your best alternative.

**[If you get questions about diet drinks, we suggest the following response:** Diet sodas and some processed foods contain non-caloric sweeteners approved by the Food and Drug Administration (FDA). If you're trying to lose weight or prevent weight gain, drinks sweetened with artificial sweeteners may appear attractive because they have virtually no calories. On the other hand, some research has suggested that drinks with artificial sweeteners may be associated with increased weight, but the cause is not yet known.

A better alternative is a glass of water. Cool and refreshing water is: sugar-free, calorie-free, and cost-free. If you're wanting a fizzy beverage, try seltzer water instead.]

Reducing the number of sugary drinks may lead to weight loss and better health. Plus, if you are not buying these drinks, it can help you save money.

## Sugary Drinks, Lessons Review, and Celebration

You may ask: what can I drink?

Try these...

- Plain water or with added fruit, like we have available today
- Unsweetened tea
- Unsweetened coffee
- Fat-free or low-fat (1%) unflavored milk

Again, the best alternative is water. It is sugar and calorie free.

### 5. Physical Activity Break

5 minutes

**Materials:**

- Dance for Fun and Fitness Handout
- “Spa water” (jug filled with water, fruit and ice)
- Plastic baggie or small clear cup
- Boom box with CD (optional)

Now it's time to get physical. Let's have everyone stand up and move into a large circle.

You may recall that for our first physical activity break we focused on stretching. Last week we did exercising while shopping. For our final physical activity break, we will do a little cardio – to get our hearts pumping.

**[Refer to Dance for Fun and Fitness Handout Dance Movements 1. Demonstrate the steps and then have participants join in. Provide a copy of it to each participant after the physical activity break.]**

It is important that we each drink enough water throughout the day, especially after a workout.

Today we have refreshing water with added fruit, spa water. You can add other fruits you like. You can even add herbs, like mint. But be sure not to add any sugar.

### 6. Do You Remember?

20 minutes

**Materials:**

- Flip chart paper
- Marker

The next item on the agenda is the Do You Remember? Activity. We will cover all of the topics that were discussed in our lessons, including today's by playing a fun game.

Let's divide the class into two groups.

I will read a question. The first person to stand up will have the chance to answer the question for his/her team.

Each question is worth 10 points.

**[Keep track of points each team earns. Play the activity until all questions have been asked and answered.]**

1. What is the new name of the food stamp program here in California? **CalFresh**

### Sugary Drinks, Lessons Review, and Celebration

2. True or False: The envelope method is one way a person could manage his or her food money. **True**
3. How many teaspoons of sugar are in a typical 20 ounce soda?  
**17 teaspoons of sugar**
4. How do you calculate the number of teaspoons in a beverage?  
**Grams of Sugar ÷ 4 = Teaspoons of Sugar (x total servings)**
5. When is a good time of the year to buy fresh fruits and vegetables? **In season**
6. True or false: Eating fruits and vegetables can help adults lower the risk for stroke, heart disease, and high blood pressure. **True**
7. True or False: I will be reported to immigration authorities if I apply for CalFresh. **False**
8. Name one health benefit of being physically active:
  - **Lowers your risk of type 2 diabetes, high blood pressure, heart disease, stroke, and certain types of cancer**
  - **Helps build and keep healthy bones, muscles, and joints**
  - **Helps you get to and keep a healthy body weight**
  - **Lowers stress and helps you relax**
  - **Gives you more energy**
  - **Makes you look and feel great!**
9. True or False. One has to be fingerprinted when applying for CalFresh in California. **False**
10. True or False: Adults and children who drink one or more sugary drinks a day are more likely to be overweight or obese. **True**
11. How many minutes of physical activity do we need every day to take care of our health and reduce the risk of chronic diseases?  
**30 minutes**
12. Complete this sentence: "Make half your plate \_\_\_\_\_."  
**Fruits and Vegetables**
13. True or False: I cannot get CalFresh because I have job. **False**
14. Name one health benefit of eating fruits and vegetables.
  - **Control your weight**
  - **Lower your risk of stroke, heart disease, and high blood pressure**
  - **Reduce your risk of type 2 diabetes and some types of cancer**

## Sugary Drinks, Lessons Review, and Celebration

15. Instead of a sugary drink, name another beverage you can drink.

- **Plain water or with added fruit**
- **Unsweetened tea**
- **Unsweetened coffee**
- **Fat-free or low-fat (1%) unflavored milk**

Thank you all for participating. It is the hope that this was a fun way to review the information that we have covered during our time together.

### 7. Reflection

**15 minutes**

**Materials:**

- Post-its
- Pens and/or pencils
- Flip chart paper with Head, Heart, Feet

**[Pass out Post-its and pens and/or pencils to participants.]**

This next section is about reflection. It is an opportunity for you to reflect on what you learned, what you felt, and what you will do after our time together.

For example:

- I **LEARNED** that it is recommended that I make half my plate fruits and vegetables.
- I **FEEL** that I can add more physical activity each day, especially while I shop at the grocery store.
- I am **GOING** to apply for CalFresh.

Write your thoughts onto the Post-its of what you learned, how you feel, and what you will plan to do.

**[Refer to the flip chart paper with the Head, Heart, Feet drawing.]**

This flip chart paper has an image of a person: a head, heart, and feet.

The Head represents what you **LEARNED**.

The Heart represents what you **FEEL**.

The Feet represent what you are **GOING** to do.

You are welcome to come up, post your comments to the flip chart paper, and share with the group what you wrote.

**Alternative:** Instead of writing their ideas on the Post-its, have participants share aloud with the group and capture what they said on the flip chart paper with the head, heart, and feet drawing.

## Sugary Drinks, Lessons Review, and Celebration

### 8. Evaluations, Post Survey, and Certificates

**25 minutes**

**Materials:**

- Entire Course Evaluation
- Post Survey
- Large envelope for documents
- Certificates

**[Pass out the Entire Course Evaluation and Post Survey.]**

Here are two items for you to complete:

- The first is the Entire Course Evaluation. We want to know what you think about the entire program. Your feedback is important.
- The second item is the Post Survey. You may recall that we asked you to complete a survey at the beginning of our first lesson. We now ask you to take that same survey.

Please answer the questions as best and honestly as you can. Your answers are kept confidential. Your name will be used only to match the pre and post surveys and will remain confidential.

**[Once all participants have turned in their Entire Course Evaluation and Post Survey, ask participants to come up to receive their Certificate.]**

Thank you all for completing and turning in your forms.

As I read your name, I invite you to come to the front to receive your certificate.

Thank you all again for your participation in this project. Are there any other comments you would like to share? If not, again, thank you.

<sup>1</sup> Guthrie JF, Morton JF. Food sources of added sweeteners in the diets of Americans. *Journal of the American Dietetic Association* 2000; 100(1):43-51.

<sup>2</sup> Babey SH, Jones M, Yu H, Goldstein H. Bubbling Over: Soda consumption and its Link to Obesity in California. UCLA Center for Health Policy Research and California Center for Public Health Advocacy, 2009.

<sup>3</sup> Babey SH, Jones M, Yu H, Goldstein H. Bubbling Over: Soda Consumption and its Link to Obesity in California. UCLA Center for Health Policy Research and California Center for Public Health Advocacy, 2009.

<sup>4</sup> Ludwig DS, Peterson KE, Gortmaker SL. Relation between consumption of sugar-sweetened drinks and childhood obesity: a prospective, observational analysis. *Lancet* 2001; 357: 505-08.

<sup>5</sup> U.S. Department of Agriculture and U.S. Department of Health and Human Services. Dietary Guidelines for Americans, 2010. 7th Edition, Washington, DC: U.S. Government Printing Office, December 2010. Chapter 2, page 16.

<sup>6</sup> Sohn W, Burt BA, Sowers MR. Carbonated Soft Drinks and Dental Caries in the Primary Dentition. *J Dent Res.* 2006; 85(3): 262-266.

<sup>7</sup> Babey SH, Jones M, Yu H, Goldsetin H. Bubbling Over: Soda Consumption and its Link to Obesity in California. UCLA Center for Health Policy Research and California Center for Public Health Advocacy, 2009.

<sup>8</sup> Guthrie JF, Morton JF. Food sources of added sweeteners in the diets of Americans. *Journal of the American Dietetic Association* 2000; 100(1): 43-51.

# Lesson Three

## Attachments



# CalFresh Promotion Sign-in Sheet



Peer-educator: \_\_\_\_\_

Location: \_\_\_\_\_

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

NAME – PLEASE PRINT		SIGNATURE	PHONE NUMBER
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

# Nutrition Facts Label Sheet

<b>Nutrition Facts</b>	
Serving Size 20 fl. oz. (591 mL)	
Servings Per Container 1 ←	
<b>Amount Per Serving</b>	
Calories 250	
<b>% Daily Value*</b>	
<b>Total Fat</b> 0g	0%
<b>Cholesterol</b> 0mg	0%
<b>Sodium</b> 55mg	0%
<b>Total Carbohydrate</b> 68g	
Sugars <b>68g</b> ←	
<b>Protein</b> 0g	
*Percent Daily Values (DV) are based on a 2,000 calorie diet.	
Not a significant source of calories from fat, saturated fat, trans fat, cholesterol, dietary fiber, vitamin A, vitamin C, calcium and iron.	

← serving size

← grams of sugar

## Calculation

Grams of Sugar ÷ 4 = Teaspoons of Sugar  
 68 Grams ÷ 4 = 17 Teaspoons

If the bottle has more than one serving, multiply the number of teaspoons by the number of servings to get the total teaspoons of sugar in the bottle.

For example: 17 teaspoons x 2 servings = 34 teaspoons in total

Sugar comes in many forms. Here are common words for sugar in the ingredients list:

- |                          |                |
|--------------------------|----------------|
| Barley malt              | Honey          |
| Brown sugar              | Malt fructose  |
| Cane juice               | Maltodextrin   |
| Corn syrup               | Maple sugar    |
| Dextrose                 | Molasses       |
| Fructose                 | Powdered sugar |
| Glucose                  | Raw sugar      |
| High fructose corn syrup | Sucrose        |

# Calculating Sugar Content

Beverage name:
Serving size:
Servings per container:
Grams of sugar:
Calculation: grams (g) of sugar $\div$ 4 = teaspoons of sugar _____ (g) $\div$ 4 = _____ teaspoons If more than one serving, multiply teaspoons by the number of servings per bottle.
Total teaspoons of sugar:
Types of sugar:

----- (CUT HERE) -----

Beverage name:
Serving size:
Servings per container:
Grams of sugar:
Calculation: grams (g) of sugar $\div$ 4 = teaspoons of sugar _____ (g) $\div$ 4 = _____ teaspoons If more than one serving, multiply teaspoons by the number of servings per bottle.
Total teaspoons of sugar:
Types of sugar:

# Dance for Fun and Fitness



## Shake It Up! Dance Movements 1

March in place for 8 to 16 counts  
March forward for 4 counts and clap  
March back for 4 counts and clap  
March in place with bicep arm curls for 8 to 16 counts  
March forward for 4 counts and clap  
March back for 4 counts and clap  
March in place with forward punching arms for 8 to 16 counts  
March forward for 4 counts and clap  
March back for 4 counts and clap  
Step together with clap for 8 to 16 counts  
March forward for 4 counts and clap  
March back for 4 counts and clap  
Step together with bicep arm curls for 8 to 16 counts  
March forward for 4 counts and clap  
March back for 4 counts and clap  
Step together 2 times for 8 to 16 counts  
March forward for 4 counts and clap  
March back for 4 counts and clap  
Step together 2 times and clap for 8 to 16 counts  
Repeat

## Shake It Up! Dance Movements 2

Push hands up, out front, hands down, and jump up  
Push hands up, out front, hands down, and jump up  
Step to the left side 2 times  
Step to the right side 2 times  
Step to the left side, step to the right side  
Step to the right side, step to the left side  
Twist down  
Twist up  
Push hands up and spin around  
Repeat

## Dance Movements Defined

**Bicep Arm Curls:** Arms are straight out in front with palms facing up. Bend elbows and pull hands in toward shoulders.

**Punching Arms:** Arms are bent at sides with hands in a fist. Punch right arm out and back. Repeat with left arm.

**Step Together:** Step to the right with right foot, step together with left foot. Step to the left with left foot, step together with right foot.

**Step Together 2 times:** Step together twice in the same direction.

## Optional Dance Movements

**Knee Lifts:** Bend leg at the knee and lift toward chest. Repeat with opposite knee. Keep back straight.

**Kick Backs:** Place feet shoulder width apart. With right foot stationary, bend left leg at the knee and kick heel back. Repeat movement with right leg.

**Circular Arms Forward:** Arms are straight at sides, lift right arm and rotate forward to make a full circle until arm is straight at side again. Repeat with left arm.

**Circular Arms Backward:** Arms are straight at sides, lift right arm and rotate backward to make a full circle until arm is straight at side again. Repeat with left arm.

**Push Up Arms:** Push right hand straight up toward the ceiling. Return right hand to side. Repeat with left hand. Push both hands straight up toward the ceiling. Return both hands to side.

**Arching Arms:** Arms are straight at sides with palms open, lift both arms to create an overhead arch and return to side.

---

## Tips

- Feel free to vary the movements to your own pace and comfort level.
  - Make up additional steps, or use the movements listed in the “optional dance movements” section of this handout.
-

# Entire Course Evaluation



---

NAME (FIRST AND LAST)

DATE

---

ORGANIZATION

---

**Your completion of the following questionnaire is important. We would like you to answer these questions as best and as honestly as you can. Your responses to this questionnaire are confidential.**

---

Please consider the three classes you attended and check the box that best describes your responses to the following questions.

**1) The overall quality of the three lessons was**

<sub>1</sub> Excellent       <sub>2</sub> Good       <sub>3</sub> Fair       <sub>4</sub> Poor

**2) The usefulness of the information presented was**

<sub>1</sub> Very Useful       <sub>2</sub> Useful       <sub>3</sub> Somewhat Useful       <sub>4</sub> Not Useful

**3) Having the CalFresh Outreach Worker attend the class was**

<sub>1</sub> Very Useful       <sub>2</sub> Useful       <sub>3</sub> Somewhat Useful       <sub>4</sub> Not Useful

**As a result of the CalFresh Promotion Project, I...**

**4) increased my fruit and vegetable consumption.**       <sub>1</sub> Yes       <sub>2</sub> No

**5) increased my level of physical activity.**       <sub>1</sub> Yes       <sub>2</sub> No

**6) decreased my consumption of sugary drinks.**       <sub>1</sub> Yes       <sub>2</sub> No

**7) As a result of the CalFresh Promotion Project, I (select only one)**

<sub>1</sub> have completed an application for CalFresh.

<sub>2</sub> will apply for CalFresh.

<sub>3</sub> will not apply for CalFresh **because...**

---

---

**8) Additional comments:**

---

---

**Thank you!**

# CalFresh Promotion Project Pre and Post Survey



ID#	
PRE	POST

NAME (FIRST AND LAST)

DATE

NAME OF PROMOTOR/A

ORGANIZATION

## Directions:

1. The purpose of this survey is to see what you have learned from this training and to gather your ideas on how we can improve it.
2. We would like you to answer these questions as best and as honestly as you can. Your answers will remain confidential. Your name will be used only to match the pre and post surveys.
3. Have fun!

### 1) Did you participate in any of the three classes of the CalFresh Promotion Project offered last year?

- 1 No                       2 Yes

### 2) Which of the best describes you? Please check one box.

- 1 I have not applied for CalFresh (food stamps).  
 2 I have applied, but did not qualify for CalFresh (food stamps).  
 3 I have completed a CalFresh application and waiting to find out if I qualify.  
 4 I am currently receiving CalFresh (food stamps).

### 3) Please tell me if you strongly agree, agree, or do not agree with the following statements.

	AGREE	DO NOT AGREE	STRONGLY AGREE
a. Making time to be physically active each week will benefit my health.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
b. Eating fruits and vegetables are important for my health and my family's health.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
c. Reducing the number of sugary drinks may lead to weight loss and better health.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
d. Using CalFresh (food stamps) can help families purchase healthy food.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

ID#	
PRE	POST

**4) Please indicate whether the following statements are True or False.**

	TRUE	FALSE
a. Consuming sugary drinks may lead to increased risk of obesity and type 2 diabetes.	<input type="checkbox"/> 0	<input type="checkbox"/> 1
b. A typical 20-oz bottle of soda has 17 teaspoons of sugar.	<input type="checkbox"/> 0	<input type="checkbox"/> 1
c. CalFresh (food stamps) can be used at some local farmers' markets.	<input type="checkbox"/> 0	<input type="checkbox"/> 1
d. Eating fruits and vegetables can help adults lower their risk for stroke, heart disease, and high blood pressure.	<input type="checkbox"/> 0	<input type="checkbox"/> 1
e. Being physically active for at least 30 minutes a day is known to have health benefits.	<input type="checkbox"/> 0	<input type="checkbox"/> 1
f. You will be reported to Immigration and Customs Enforcement if you apply for CalFresh.	<input type="checkbox"/> 0	<input type="checkbox"/> 1
g. Fingerprints are required when applying for CalFresh.	<input type="checkbox"/> 0	<input type="checkbox"/> 1
h. You could jeopardize your ability to apply for permanent resident status if you apply for CalFresh.	<input type="checkbox"/> 0	<input type="checkbox"/> 1
i. You can apply for CalFresh if you have money in savings.	<input type="checkbox"/> 0	<input type="checkbox"/> 1
j. If you receive WIC (Women, Infants and Children Program) you will not be able to apply for CalFresh.	<input type="checkbox"/> 0	<input type="checkbox"/> 1

**5) How confident are you in your ability to do the following?**

	NOT CONFIDENT	SOMEWHAT CONFIDENT	CONFIDENT	VERY CONFIDENT
a. Shop for healthy foods within your monthly food budget.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
b. Be physically active at least 30 minutes a day, 3 times per week.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
c. Drink fewer sugary drinks.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
d. Encourage family or friends to apply for CalFresh (Food Stamps).	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

ID#	
PRE	POST

**6) How likely are you to do the following over the next MONTH?**

	NOT LIKELY	SOMEWHAT LIKELY	LIKELY	VERY LIKELY
a. Drink fewer sugary drinks.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
b. Eat more fruits and vegetables.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
c. Be more physically active.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

**Skip questions 7 and 8 if you are currently receiving CalFresh benefits.**

**7) How confident are you in your ability to do the following?**

	NOT CONFIDENT	SOMEWHAT CONFIDENT	CONFIDENT	VERY CONFIDENT
Apply for CalFresh (food stamps)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

**8) How likely are you to do the following over the next MONTH?**

	NOT CONFIDENT	SOMEWHAT CONFIDENT	CONFIDENT	VERY CONFIDENT
Apply for CalFresh (food stamps)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

**Please check the response boxes that best describe you. Your answers are confidential.**

**9) Please check your age range.**

- 1 0-5 years       2 5-17 years  
 3 18-59 years       4 60+

**10) Please check your gender.**

- 1 Female       2 Male

**11) Were you born in the United States?**

- 1 No       2 Yes

**12) What is the highest level of education you have completed?**

- 1 Elementary School  
 2 Less than High School  
 3 High school graduate/GED  
 4 Some college/Vocation School  
 5 College graduate

**13) Please choose one group that best describes your race/ethnicity.**

- 1 African American or Black  
 2 Asian  
 3 Hispanic/Latino  
 4 Native American or Alaskan Native  
 5 Native Hawaiian or Other Pacific Islander  
 6 White  
 7 Other: \_\_\_\_\_

**14) What language(s) do you speak at home?**

- 1 English  
 2 Spanish  
 3 Other: \_\_\_\_\_

**Thank you !**

# CERTIFICATE OF PARTICIPATION

PRESENTED TO

For completing the course of the  
CalFresh Promotion Project



\_\_\_\_\_

\_\_\_\_\_



This material was produced by the California Department of Social Services and the California Department of Public Health's *Network for a Healthy California* with funding from USDA SNAP, known in California as CalFresh (formerly Food Stamps). These institutions are equal opportunity providers and employers. CalFresh provides assistance to low-income households and can help buy nutritious foods for better health. For CalFresh information, call 1-877-847-FOOD or visit [www.calfresh.ca.gov](http://www.calfresh.ca.gov).