California WIC Program Presents

Rethink Your Drink for Healthy Smiles and Healthy Lives

Facilitator Guide

March 2011

DEVELOPED BY THE
California WIC Program, California Department of Public Health | *This institution is an equal opportunity provider.*

Rethink Your Drink for Healthy Smiles and Healthy Lives

Who:	**Who is this training designed for?** All staff who conduct group and individual education.
What:	**What is this training about?** This training provides background information on the *Rethink Your Drink* education campaign. It also reinforces the messages found in the *Rethink Your Drink* lesson plan. The training will provide staff with information on the effects of sugar-sweetened drinks on dental and overall health, and weight. This information can be shared with participants during the *Rethink Your Drink* campaign, or at any time. The Facilitator's Guide provides instructions for facilitators to train staff and participants on the effects of consuming sugar-sweetened drinks. This training is easy to follow and learner-centered activities have been incorporated.
Why:	**Why is this optional training offered?** California WIC is conducting a coordinated statewide *Rethink Your Drink* campaign from May through August, 2011 that focuses on how consuming sugar-sweetened drinks contributes to the increasing rates of overweight and obesity. This campaign will provide information and practice to help participants decrease the consumption of sugar-sweetened drinks and increase water intake.
Duration:	60-90 minutes
Materials:	Trainee Workbook Computer and projector for PowerPoint slides Pens or pencils Sugar, teaspoons, and clear plastic cups
Set-up:	Tables of 4-6 trainees (for small groups, use pairs)

Agenda

1. Welcome, Introductions, Review of Agenda and Objectives	**5 minutes**
2. Warm-Up Activity	**15 minutes**
3. The Effects of Sugar-Sweetened Drinks on the Body	**8 minutes**
4. The Effects of Sugar-Sweetened Drinks and Their Link to Obesity	**35 minutes**
5. The Effects of Sugar-Sweetened Drinks on Dental Health	**10 minutes**
6. Maintaining Good Dental Health	**7 minutes**
7. Summary and Evaluations	**5 minutes**

Objectives

At the end of this training, trainees will:

- Learn how sugar-sweetened drinks can impact a person's overall health, weight, and dental health.
- Learn how to convert grams of sugar to teaspoons, and identify how many teaspoons of sugar are in sugar-sweetened drinks.
- Identify ways to maintain good oral health.
- Identify the percentage of adults, adolescents, and children who drink one or more sodas per day by county.
- Be prepared to share this information with participants, family, and friends.

1. Welcome, Introductions, Review of Agenda and Objectives	5 minutes
Purpose: To welcome trainees, introduce trainer, and provide a brief overview of the training design and intent.	

Slide 1: Rethink Your Drink for Healthy Lives and Healthy Smiles

Welcome trainees to the *Rethink Your Drink for Healthy Smiles and Healthy Lives* training.

Introduce trainer.

Explain: California WIC is conducting a coordinated statewide *Rethink Your Drink* campaign that focuses on how consuming sugar-sweetened drinks contributes to the increasing rates of overweight and obesity.

This training is designed to:

- Provide information and activities to help staff decrease their own intake of sugar-sweetened drinks, and increase water consumption.
- Help staff educate participants about sugar-sweetened drinks.
- Reinforce messages found in the *Rethink Your Drink* lesson plan.
- Provide staff with background information on the effects of sugar-sweetened drinks on overall health and weight.
- Provide information on the effects of sugar-sweetened drinks on dental health.

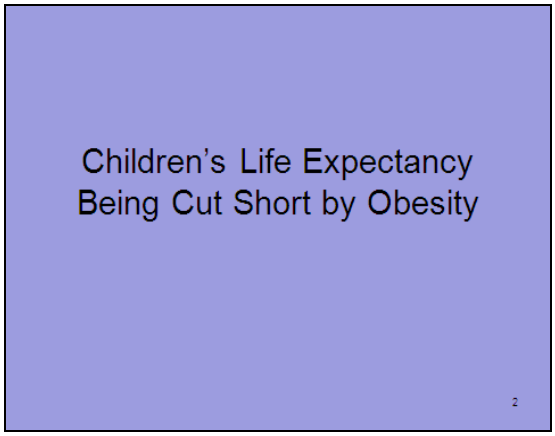
Housekeeping:

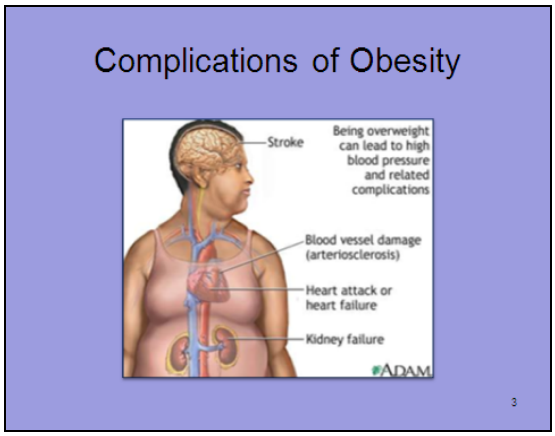
- Duration of training
- Location of restrooms
- Silencing cell phones

2. Warm-Up Activity — 15 minutes

Purpose: To help staff understand the relationship between what they drink and their overall health.

Materials: Activity 1 in Trainee Workbook, highlighters, pens





Slide 2: Children's Life Expectancy Being Cut Short by Obesity

Activity 1: What are your feelings?

Instruct trainees to refer to Activity 1 in their workbooks titled *Children's Life Expectancy Being Cut Short by Obesity.*

Ask trainees for a volunteer(s) to read the article out loud.

Instruct trainees to discuss their thoughts and feelings about the article at their tables.

Debrief: Invite trainees to share how they felt about the article with the large group.

Explain:
Because of the obesity epidemic, today's children may be the first generation to have shorter lifespans than their parents. Children now have diseases that in previous years were most often associated with adults.

Ask trainees to name some of the obesity related diseases from the article.

Activity 1

Children's Life Expectancy Being Cut Short by Obesity

Instructions: Read the following story and circle anything that you find interesting.

For the first time in two centuries, the current generation of children in America may have shorter life expectancies than their parents, according to a new report, which contends that the rapid rise in childhood obesity, if left unchecked, could shorten life spans by as much as five years.

The report in The New England Journal of Medicine, says the prevalence and severity of obesity is so great, especially in children, that the associated diseases and complications -- Type 2 diabetes, heart disease, kidney failure, cancer -- are likely to strike people at younger and younger ages.

The report says the average life expectancy of today's adults, roughly 77 years, is at least four to nine months shorter than it would be if there were no obesity. That means that obesity is already shortening average life spans by a greater rate than accidents, homicides and suicides combined, the authors say.

And they say that because of obesity, the children of today could wind up living two to five years less than they otherwise would, a negative effect on life span that could be greater than that caused by cancer or coronary heart disease.

"Obesity is such that this generation of children could be the first basically in the history of the United States to live less healthful and shorter lives than their parents," said Dr. David S. Ludwig, director of the obesity program at Children's Hospital Boston, and one of the authors of the report.

"We're in the quiet before the storm," Dr. Ludwig said. "It's like what happens if suddenly a massive number of young children started chain smoking. At first you wouldn't see much public health impact." He added, "But years later it would translate into emphysema, heart disease and cancer."

"There is an unprecedented increase in prevalence of obesity at younger and younger ages without much obvious public health impact," Dr. Ludwig said. "But when they start developing heart attack, stroke, kidney failures, amputations, blindness, and ultimately death at younger ages, then that could be a huge effect on life expectancy."

The report's lead author, Dr. S. Jay Olshansky, a professor of public health at the University of Illinois, Chicago, said he considered the report's projections of reduced life expectancy to be "very conservative, and I think the negative effect is probably greater than we have shown."

"Hopefully, we can fix obesity so that our projections are wrong," Dr. Olshansky added. "But we're seeing such large increases in obesity in the last couple of decades that it's hard to imagine that we're going to be able to work fast enough."

Pam Belluck, Excerpts from Children's Life Expectancy Being Cut Short by Obesity, The New York Times, 17th March, 2005
Book by Walt Larimore, M.D. with Stephen and Amanda Sorenson, The Highly Healthy Child, First Edition, Zondervan Publishers, 2004. Link: http://query.nytimes.com/gst/health/article-page.html?res=9F01E3D7133CF934A25750C0A9639C8B63

3. The Effects of Sugar-Sweetened Drinks on the Body	8 minutes
Purpose: To explore the major impacts of sugar-sweetened drinks on the body.	

Slide 5: Don't Drink Yourself Fat

Ask: *What happens to the body when too many sugar-sweetened drinks are consumed?*

Obesity: Studies show that when a person consumes sugar-sweetened drinks with or before a meal, they don't compensate for the extra calories in the drinks by reducing other sources of calories in the same or subsequent meals. Consequently, their Body Mass Index (BMI) will increase due to the empty calories provided by the sugar-sweetened drinks.

Slide 6: Role of Sugar-Sweetened Drinks

Diabetes: Studies have found an association between regular consumption of sugar-sweetened soft drinks to the risk of Type 2 Diabetes. Women who consumed less than 1 sugar-sweetened soft drink per day were compared to women consuming 1 or more such drinks per day. The women who consumed 1 or more drinks had an 83% increased risk of Type 2 Diabetes.

Tooth Decay: Among children ages 1-5, consumption of sugar-sweetened carbonated soft drinks was associated with an 80-100% increased risk of tooth decay.

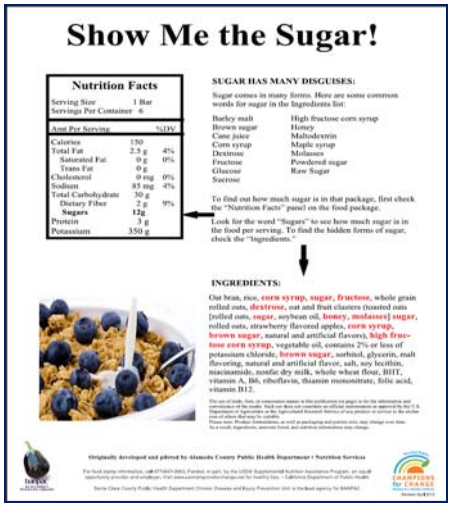
Mention: Water has 0 calories and is sugar-free. Drinking water is a healthier drink choice.

Ask: *What surprised you about these statistics?*

4. The Effects of Sugar-Sweetened Drinks and Their Link to Obesity 35 minutes

Purpose: To learn how sugar and sugar-sweetened drinks may impact the health of Californians.

Materials: Activities 2-5 in Trainee Workbook, drink cards, sugar, teaspoons, clear plastic containers, flipchart (optional), Internet access (optional activity)



Show Me the Sugar!

Nutrition Facts

Serving Size 1 Bar
Servings Per Container 6

Amt Per Serving		%DV
Calories	150	
Total Fat	2.5 g	4%
Saturated Fat	0 g	0%
Trans Fat	0 g	
Cholesterol	0 mg	0%
Sodium	85 mg	4%
Total Carbohydrate	30 g	
Dietary Fiber	2 g	9%
Sugars	**12g**	
Protein	3 g	
Potassium	350 g	

SUGAR HAS MANY DISGUISES:

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

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

To find out how much sugar is in that package, first check the "Nutrition Facts" panel on the food package.

Look for the word "Sugars" to see how much sugar is in the food per serving. To find the hidden forms of sugar, check the "Ingredients."

INGREDIENTS:

Oat bran, rice, **corn syrup**, **sugar**, **fructose**, whole grain rolled oats, **dextrose**, oat and fruit clusters (toasted oats [rolled oats, **sugar**, soybean oil, **honey**, **molasses**] **sugar**, rolled oats, strawberry flavored apples, **corn syrup**, **brown sugar**, natural and artificial flavors), **high fructose corn syrup**, vegetable oil, contains 2% or less of potassium chloride, **brown sugar**, sorbitol, glycerin, malt flavoring, natural and artificial flavor, salt, soy lecithin, niacinamide, nonfat dry milk, whole wheat flour, BHT, vitamin A, B6, riboflavin, thiamin mononitrate, folic acid, vitamin B12.

Originally developed and piloted by Alameda County Public Health Department • Nutrition Services

Slide 7: Show Me the Sugar

Activity 2: Show Me the Sugar!

Instruct trainees to review Activity 2 in their workbooks titled *Show Me the Sugar!* Have them answer the questions in pairs or their table groups.

Debrief: Review answers with the large group.

Ask trainees what they learned from the activity they can share with participants, family, and friends.

Activity 2
Show Me the Sugar!

Instructions: Review Page 4 in your workbooks titled *Show Me the Sugar.* Discuss and answer the questions below in pairs or your table groups.

1. What is the serving size of the product?

2. How many servings are in the container?

3. How many grams of sugar are in one serving?

4. What names of sugar surprised you?

5. What did you learn from this activity that you can share with participants, family and friends?

Show Me the Sugar!

Nutrition Facts

Serving Size	1 Bar	
Servings Per Container	6	
Amt Per Serving		**%DV**
Calories	150	
Total Fat	2.5 g	4%
Saturated Fat	0 g	0%
Trans Fat	0 g	
Cholesterol	0 mg	0%
Sodium	85 mg	4%
Total Carbohydrate	30 g	
Dietary Fiber	2 g	9%
Sugars	**12g**	
Protein	3 g	
Potassium	350 g	

SUGAR HAS MANY DISGUISES:

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

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

To find out how much sugar is in that package, first check the "Nutrition Facts" panel on the food package.

Look for the word "Sugars" to see how much sugar is in the food per serving. To find the hidden forms of sugar, check the "Ingredients."

INGREDIENTS:

Oat bran, rice, **corn syrup**, **sugar**, **fructose**, whole grain rolled oats, **dextrose**, oat and fruit clusters (toasted oats [rolled oats, **sugar**, soybean oil, **honey**, **molasses**] **sugar**, rolled oats, strawberry flavored apples, **corn syrup**, **brown sugar**, natural and artificial flavors), **high fructose corn syrup**, vegetable oil, contains 2% or less of potassium chloride, **brown sugar**, sorbitol, glycerin, malt flavoring, natural and artificial flavor, salt, soy lecithin, niacinamide, nonfat dry milk, whole wheat flour, BHT, vitamin A, B6, riboflavin, thiamin mononitrate, folic acid, vitamin B12.

Slide 8: How Much Sugar is in Your Drink?

Ask trainees if they know how much sugar is in their favorite drinks.

Ask trainees to guess how many pounds of sugar the average person consumes each year. (answer: 150-170 pounds)

Explain: We now know that we can find different names of sugar listed in the ingredients section of the product label. To find out just how much sugar is in a product, we can look at the Nutrition Facts label and convert grams of sugar to teaspoons of sugar. By converting grams to teaspoons, we will be able to visualize how much sugar is actually in a serving.

Mention: Nutrition facts on product containers may be deceiving. Sugar and calories may be listed, but there may be more than one serving in the container. Consumers should read labels thoroughly and watch for products with multiple servings.

Instruct trainees to refer to Activity 3 in their workbooks titled *How Much Sugar is in Your Drink*. Review the formula for converting grams of sugar to teaspoons.

Explain: Grams of sugar ÷ 4 = teaspoons of sugar. If the container has more than one serving, multiply the number of teaspoons by the number of servings.

Demonstration: Trainer selects a drink card and explains that their drink contains (example) 32 grams of sugar for one eight ounce serving. The formula would be 32÷ 4 = 8 teaspoons (write on flipchart, optional). Trainer will measure out 8 teaspoons of sugar into a clear plastic cup. Trainees will be able to see just how much sugar is in their drinks.

	Activity 3: How Much Sugar is in Your Drink? **Instruct** trainees to turn to Activity 3 in their workbooks titled *How Much Sugar is in Your Drink?* Have them work in groups or pairs and follow the instructions. **Debrief:** Have several people demonstrate the amount of sugar in their drinks. **Ask** trainees what they found interesting or surprising about this demonstration. **Review:** We learned how to recognize the different names of sugar, and how to convert grams of sugar to teaspoons. Next we will look at the percentage of adults, adolescents and children drinking 1 or more sodas per day by county.

Activity 3
How Much Sugar is in Your Drink?

Instructions: Review Page 6 in your workbooks titled *How Much Sugar is in Your Drink*. Choose one of the drink cards from your table. Complete tasks 1-3. Answer the question on number 4 when you have completed the tasks.

Materials: Clear plastic cups and table sugar

1. Locate the ingredient (sugar) on the label.

2. Identify how many grams of sugar are listed on the label.

3. Divide the grams of sugar by 4. This will give you the amount of teaspoons in the product.

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

4. Measure the number of teaspoons of sugar in your drink and pour into the cup provided.

How much sugar

is in your drink?

grams of sugar (g) ÷ 4 = teaspoons of sugar

40 ÷ 4 = 10

GRAMS TEASPOONS

More than 1 serving per container?

Multiply: teaspoons of sugar per serving X number of servings = teaspoons of sugar per container

(*Example: 2 servings per container: 10 teaspoons X 2 servings = 20 teaspoons per container*)

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Edmund G. Brown Jr., Governor, *State of California*
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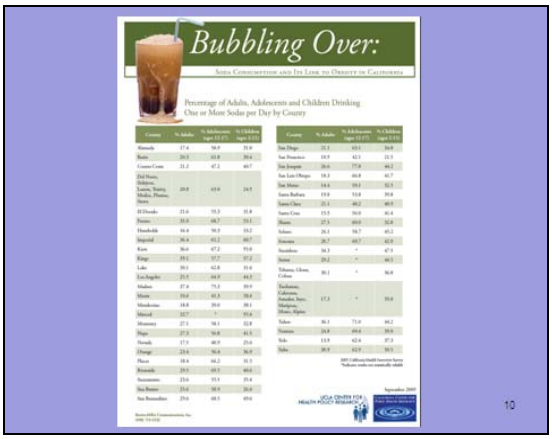
Mark B Horton, MD, MSPH, Director, *California Department of Public Health*

Slide 9: Bubbling Over



Slide 10: Bubbling Over

Activity 4: Adults, Adolescents and Children Drinking One or More Sodas Per Day.

Instruct trainees to refer to Activity 4 in their workbooks titled *Bubbling Over* and answer the questions.

Debrief: Discuss the findings with the large group.

Activity 4
Bubbling Over

Instructions: Review page 8 in your workbooks titled *Bubbling Over.* Break up into pairs or your table groups and:

1. Identify the statistics for your county.

2. Describe how the statistics for your county compare to others.

3. Identify other interesting facts you discovered after reviewing the document.

Bubbling Over:

Soda Consumption and Its Link to Obesity in California

Percentage of Adults, Adolescents and Children Drinking One or More Sodas per Day by County

County	% Adults	% Adolescents (ages 12-17)	% Children (ages 2-11)
Alameda	17.4	58.9	31.0
Butte	20.3	61.8	30.4
Contra Costa	21.2	47.2	40.7
Del Norte, Siskiyou, Lassen, Trinity, Modoc, Plumas, Sierra	20.8	63.0	24.5
El Dorado	21.6	55.3	31.8
Fresno	35.0	68.7	53.1
Humboldt	16.4	50.3	33.2
Imperial	36.4	61.2	60.7
Kern	36.6	67.2	55.0
Kings	39.1	57.7	57.2
Lake	30.1	62.8	31.6
Los Angeles	25.5	64.9	44.3
Madera	37.4	75.3	39.9
Marin	10.6	41.3	18.4
Mendocino	18.8	39.0	38.1
Merced	32.7	*	55.4
Monterey	27.1	58.1	32.8
Napa	27.3	56.8	41.5
Nevada	17.5	40.9	25.6
Orange	23.4	56.4	36.9
Placer	18.4	66.2	31.5
Riverside	29.5	69.5	40.6
Sacramento	23.6	55.5	35.4
San Benito	25.6	58.9	26.4
San Bernardino	29.6	68.5	49.6

County	% Adults	% Adolescents (ages 12-17)	% Children (ages 2-11)
San Diego	21.1	63.1	34.8
San Francisco	10.9	42.1	21.5
San Joaquin	26.6	77.8	44.2
San Luis Obispo	18.3	66.8	41.7
San Mateo	14.4	50.1	32.5
Santa Barbara	19.0	53.8	39.8
Santa Clara	21.1	48.2	40.9
Santa Cruz	15.5	56.0	41.4
Shasta	27.5	60.0	32.0
Solano	26.1	58.7	45.2
Sonoma	20.7	60.7	42.0
Stanislaus	34.3	*	47.5
Sutter	29.2	*	44.5
Tehama, Glenn, Colusa	30.1	*	36.8
Tuolumne, Calaveras, Amador, Inyo, Mariposa, Mono, Alpine	17.3	*	35.0
Tulare	36.1	71.0	44.2
Ventura	24.8	60.4	39.0
Yolo	13.9	62.4	37.3
Yuba	30.9	62.9	50.5

2005 California Health Interview Survey
*Indicates results not statistically reliable

September 2009

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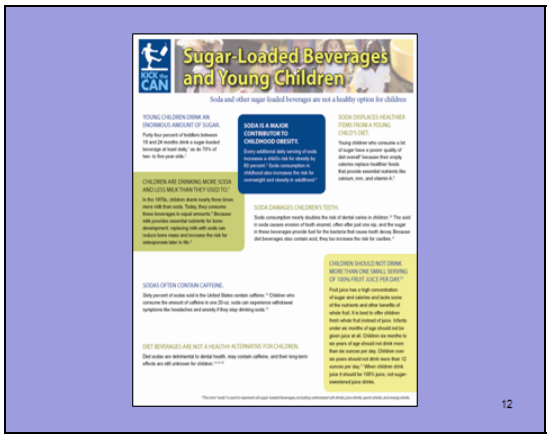
Slide 11: More Water Please

Emphasize: If we drink more water instead of sugar-sweetened drinks, we can have healthy smiles and healthy lives. Water is a critical nutrient for our bodies and is needed for almost every function of the body.

- 80% of our blood is made of water.
- 50-75% of our bodies are made of water.



Slide 12: Sugar-Loaded Beverages and Young Children

Activity 5: Sugar-Loaded Beverages and Young Children

Instruct trainees to turn to Activity 5 in their workbooks titled *Sugar-Loaded Beverages and Young Children*. Have them work in pairs or their table groups to complete this exercise.

Debrief: Each table group will provide 1 fact they learned and share with the large group.

Ask trainees:

- *What interesting or new information did they learn?*
- *How can they use this information with participants?*

Activity 5
Sugar-Loaded Drinks and Young Children

Instructions: Review Page 10 in your workbooks titled *Sugar Loaded Beverages and Young Children.* In pairs or your table groups, discuss and write down the facts that you found surprising or interesting. Be prepared to discuss these facts with the large group.

Sugar-Loaded Beverages and Young Children

Soda and other sugar-loaded beverages are not a healthy option for children

YOUNG CHILDREN DRINK AN ENORMOUS AMOUNT OF SUGAR.

Forty-four percent of toddlers between 19 and 24 months drink a sugar-loaded beverage at least daily,[1] as do 70% of two- to five-year-olds.[2]

SODA IS A MAJOR CONTRIBUTOR TO CHILDHOOD OBESITY.

Every additional daily serving of soda increases a child's risk for obesity by 60 percent.[3] Soda consumption in childhood also increases the risk for overweight and obesity in adulthood.[4]

SODA DISPLACES HEALTHIER ITEMS FROM A YOUNG CHILD'S DIET.

Young children who consume a lot of sugar have a poorer quality of diet overall[5] because their empty calories replace healthier foods that provide essential nutrients like calcium, iron, and vitamin A.[6]

CHILDREN ARE DRINKING MORE SODA AND LESS MILK THAN THEY USED TO.[7]

In the 1970s, children drank nearly three times more milk than soda. Today, they consume these beverages in equal amounts.[8] Because milk provides essential nutrients for bone development, replacing milk with soda can reduce bone mass and increase the risk for osteoporosis later in life.[9]

SODA DAMAGES CHILDREN'S TEETH.

Soda consumption nearly doubles the risk of dental caries in children.[10] The acid in soda causes erosion of tooth enamel, often after just one sip, and the sugar in these beverages provide fuel for the bacteria that cause tooth decay. Because diet beverages also contain acid, they too increase the risk for cavities.[11]

CHILDREN SHOULD NOT DRINK MORE THAN ONE SMALL SERVING OF 100% FRUIT JUICE PER DAY.[17]

Fruit juice has a high concentration of sugar and calories and lacks some of the nutrients and other benefits of whole fruit. It is best to offer children fresh whole fruit instead of juice. Infants under six months of age should not be given juice at all. Children six months to six years of age should not drink more than six ounces per day. Children over six years should not drink more than 12 ounces per day.[17] When children drink juice it should be 100% juice, not sugar-sweetened juice drinks.

SODAS OFTEN CONTAIN CAFFEINE.

Sixty percent of sodas sold in the United States contain caffeine.[14] Children who consume the amount of caffeine in one 20-oz. soda can experience withdrawal symptoms like headaches and anxiety if they stop drinking soda.[13]

DIET BEVERAGES ARE NOT A HEALTHY ALTERNATIVE FOR CHILDREN.

Diet sodas are detrimental to dental health, may contain caffeine, and their long-term effects are still unknown for children.[14,15,16]

**The term "soda" is used to represent all sugar-loaded beverages, including carbonated soft drinks, juice drinks, sports drinks, and energy drinks.*

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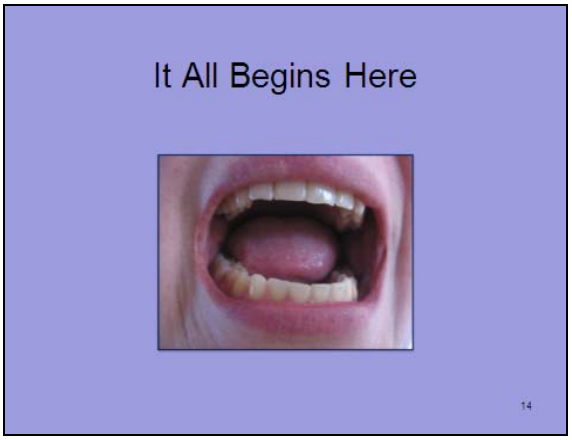
November 2010

	Slide 13: Rethink Your Drink Rap Song **Optional Activity** (can also be used as a physical activity) **Explain:** Now let's listen to a *Rethink Your Drink* rap song (6 minutes long). This song will help us review some of the information presented in the training. http://www.groovypyramid.com/rethinkyourdrink.html or http://www.youtube.com/watch?v=hhIsJxTBsLs&feature=player_embedded **Ask** trainees what they thought of the song.

5. The Effects of Sugar-Sweetened Drinks on Dental Health	**10 minutes**
Purpose: To explore the adverse effects sugar and sugar-sweetened drinks can have on dental health.	

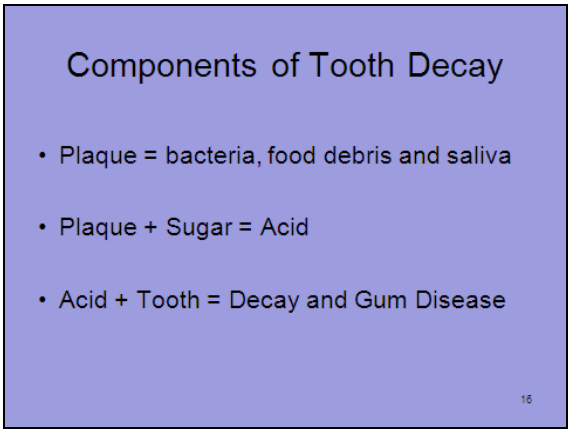


Slide 14: It All Begins Here

Slide 15: Sodas

Explain:

- Sugar-sweetened drinks such as soda provide an overwhelming source of sugar and calories in many children's diets.
- Children's consumption of sodas, fruit drinks, sports drinks and fruit juices increase the risk of getting cavities, becoming overweight, or even obese.
- Sugar consumption is the primary cause of dental decay.
- Consumption of sugar-sweetened drinks is associated with 80 to 100% increased risk of dental decay among children, ages 1-5.



Slide 16: Components of Tooth Decay

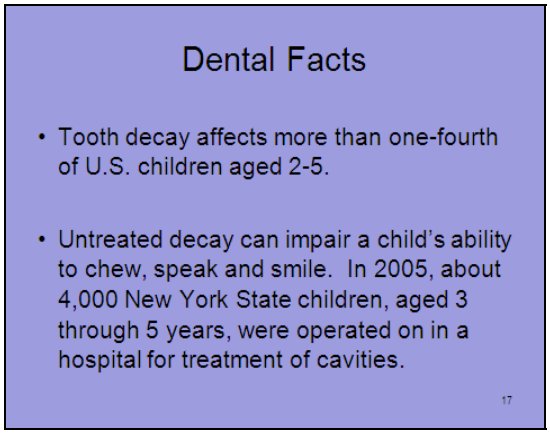
Explain:
- Plaque +Sugar=Acid
- Acid +Tooth = Decay and Gum Disease
- All these components must be present to produce tooth decay and gum disease.
- Sugar must be present to produce the harmful acids and toxins. The more sugar is consumed, the more acid is produced.
- Acid is produced for 20 minutes after eating.
- Sugar should be consumed in small amounts along with meals. By doing this, you can limit the frequency of acid production.
- Remember that carbohydrates break down into sugars. Crackers, chips, pastries, cookies, cereals, sugary drinks and other processed snack foods contribute to the production of acid.

Ask trainees what they know about bacterial plaque. After you get a few responses, define plaque.

Explain: Plaque is a creamy, sticky, cream colored mass that is made of live bacteria, acid, food debris and saliva.

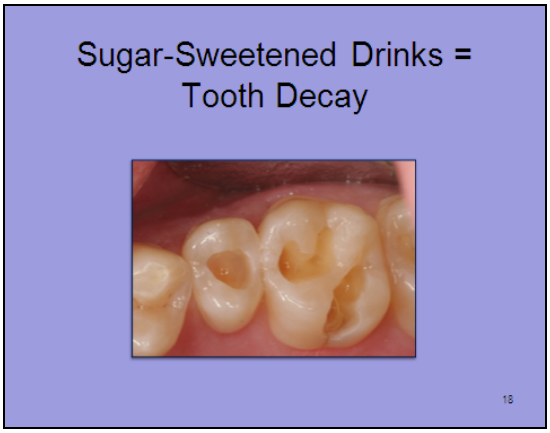
Instruct trainees to take their tongue and feel the surface of their teeth.

Explain:
- Clean teeth feel smooth like glass.
- A tooth with plaque feels like it has a sweater or fur on it.
- If your tooth surface feels rough, more time brushing is needed. Plaque can be removed with brushing, flossing, and dental cleanings.



Slide 17: Dental Facts

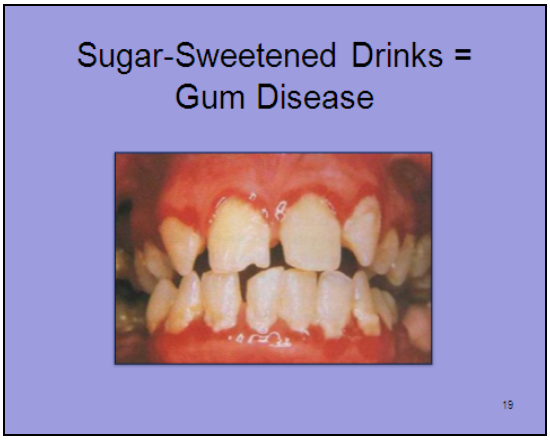
Discuss the 2 dental facts on the slide with trainees.



Slide 18: Sugar-Sweetened Drinks= Tooth Decay

Explain: Baby teeth are important for chewing, smiling, and speaking. They also hold a place for the permanent teeth to come in straight. It is important for children to receive dental care early on to prevent tooth decay.

Point out: The acid produced by plaque can burn holes through the enamel.

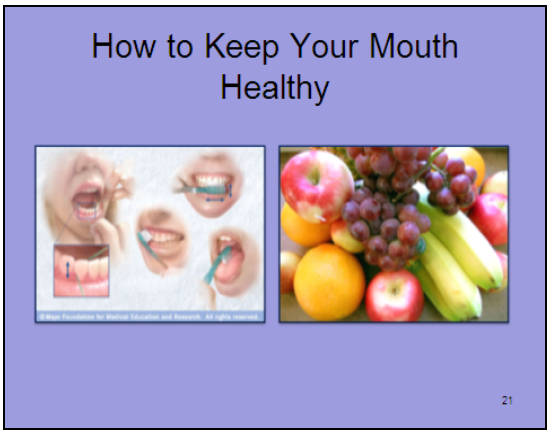


Slide 19: Sugar-Sweetened Drinks= Gum Disease.

Explain: This slide shows plaque along the gum-line. Plaque infects the gum tissue and causes an infection called gingivitis. Gingivitis causes gums to become, red, swollen, and bleed easily.

Slide 20: Healthy Mouth

Explain: Next we will talk about ways to maintain a healthy mouth (refer to slide)



Slide 21: How to Keep Your Mouth Healthy

Encourage trainees to take notes on the following tips:

Brushing

- Brushing should be done with a soft-bristled brush for 2 minutes in the morning and the evening before bed.
- It is important to brush before you go to bed because the saliva flow slows down in the mouth when you are asleep. Plaque grows and destroys the teeth and gums in this dark, moist environment.
- Saliva helps neutralize the acids created by plaque. Drinking water frequently will help to reduce the effects of these harmful acids.

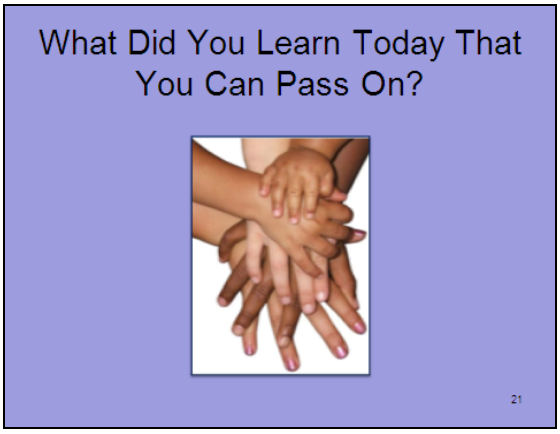
Flossing

Flossing should be done at least once a day before or after brushing to remove the bacteria and food that is trapped between teeth and gums.

Chewing Gum

Chewing gum sweetened with xylitol (an artificial sweetener) will slow down the formation of bacterial acids. It is recommended to rinse with water or chew gum with xylitol after meals to reduce the harmful acids produced by plaque.

	Eating Healthy Eating fruits and vegetables and other nutritious foods are important for maintaining a healthy mouth and body. **Dental Checkups** Visits to your dentist twice a year for checkups and dental cleanings are recommended.

6. Maintaining Good Dental Health	**7 minutes**
Purpose: For trainees to review what they have learned about maintaining good dental health.	
	Slide 22: What Did You Learn Today That You Can Pass On? **Activity 6: Maintaining Good Dental Health** **Instruct** trainees refer to Activity 6 in their workbooks titled *Maintaining Good Dental Health.* Have them list 3 things they have learned from the training about maintaining good dental health. **Debrief:** Ask for volunteers to share what they learned.

Activity 6
Maintaining Good Dental Health

Instructions: Take a few minutes to write down three things you have learned today that you will be able to share with participants, family, and friends on maintaining good dental health.

1.

2.

3.

7. Rethink Your Drink Summary and Evaluations	5 minutes
	Slide 23: Training Summary **Summary:** Today we have looked at how the over consumption of sugar-sweetened drinks can have an adverse effect on overall health, dental health, and weight. By reducing these drinks, and consuming more water, we can clearly see how this can lead us to a happy healthy lifestyle. **Closing** Thank trainees Instruct them to complete training evaluations

California WIC Program
Rethink Your Drink for Healthy Lives and Healthy Smiles

Date: _____ **Agency:** _____

The Training and Career Development Section strives to improve the quality of our trainings. Please take a few moments to give us feedback by completing the following evaluation.

Instructions: Using the following scale, circle the number that best describes your rating for each statement.

Strongly Disagree	Disagree	Agree	Strongly Agree
1	2	3	4

COURSE DESIGN & MATERIALS

The purpose of the training was clear.	**1**	**2**	**3**	**4**
The training was related to my job.	**1**	**2**	**3**	**4**
The training materials were useful.	**1**	**2**	**3**	**4**
The training held my interest.	**1**	**2**	**3**	**4**
I can apply the skills I learned to my job.	**1**	**2**	**3**	**4**
I would recommend this training to others.	**1**	**2**	**3**	**4**

TRAINER

The trainer was knowledgeable.	**1**	**2**	**3**	**4**
The trainer demonstrated professional training skills.	**1**	**2**	**3**	**4**
The trainer encouraged interaction.	**1**	**2**	**3**	**4**
The trainer used time effectively.	**1**	**2**	**3**	**4**

(Over)

Evaluation Continued

1. **What was the most useful part of this training?**

2. **On what topic(s) would you like more information?**

3. **Please list at least one idea you will be able to use in your job as a result of attending this training.**

4. **What suggestions do you have to improve the effectiveness of this course?**

5. **Please share any additional comments you may have.**

Thank you for your feedback!