





Healthy Eating Manual





February 1997

Dear Community Leader:

Thank you for expressing an interest in the Healthy Eating Manual. This manual provides people involved in healthy eating initiatives with a fresh and innovative approach to teaching nutrition in group settings. Potential users are: fitness leaders, community/occupational/public health nurses, volunteers in health organizations, health educators, and other community leaders. Nutritionists and dieticians will also find that it provides a fresh approach to teaching nutrition in group settings.

The manual is intended for use with groups of adults who are interested in healthy eating. It includes five interactive mini-lessons on such topics as fat, healthy eating out, and healthy weights, and it provides practical handouts for participants and background information for leaders.

The Healthy Eating Manual was developed by the Health Promotion Branch in collaboration with a Nutrition Steering Committee and was pilot tested with the help of public health nurses and volunteers in various worksites across Ontario. Results from the pilot test showed that community leaders wanted access to nutrition training and/or advice to help them use the manual effectively. For more information on training and support, we strongly suggest that you contact a public health nutrition professional to obtain the name of the trainer or support consultant in your area (see Section 6 - Resources). As well, the Canadian Cancer Society and the Heart and Stroke Foundation of Ontario are involved in supporting their volunteers to use the manual.

Thank you in advance for your dedication to spreading the healthy eating message.

Sincerely,

Charles Clayton

Manager, Nutrition Strategy Unit

Charles Clayton

Att.

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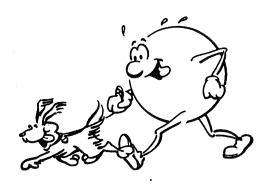
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What's This Healthy Eating Manual All About?



Introduction to the Manual

n the last decade, Canadians have shown more interest in their health than ever before. And if better health is the goal, then clearly Canadians should make some dietary changes. And with good reason too, since healthy eating along with regular physical activity may be two of the best and easiest ways to promote one's own health.

That's where this Healthy Eating Manual fits in.

This *Healthy Eating Manual* is about:

- ☐ Bringing good nutrition and healthy eating to life in a very practical way.
- ☐ Incorporating healthy eating education into existing and developing programs.
- Helping community-based leaders to help others learn about nutrition and healthy eating.
- ☐ Spreading the healthy eating message through a variety of people, programs and organizations.



he Healthy Eating Manual has been developed for leaders who have the opportunity and desire to incorporate healthy eating information into programs they are currently running or planning.

The learning activities developed for this manual will appeal to anyone looking for fresh approaches to teaching nutrition.

POTENTIAL USERS OF THE MANUAL

	Fitness leaders/instructors
0	Public and community health nurses
0	Occupational health personnel
	Health educators
	Social workers
0	Teachers in adult retraining facilities
	Instructors of wellness courses
	Volunteers in health organizations such as the Canadian Cancer Society and the Heart and Stroke Foundation
0	Dietitians in hospitals, community health centres and public health units
	You

hese materials have been primarily developed for adults and their families who want to learn about healthy eating. The manual can be easily used with groups in a variety of settings, including employees in worksites, as well as people in exercise, recreational and religious programs.

Who Should Use this Manual?

Who Will Benefit?

Format of the Manual

Although there are many aspects to healthy eating, this program focuses on five main topic areas:

- Healthy eating basics
- Reducing dietary fat
- Getting more complex carbohydrate and dietary fibre
- Achieving and maintaining a healthy weight
- Healthy eating out

Each topic area is supported by:

- Background information on each of the five topic areas (Section 3, page 12)
- A complete mini-lesson on the topic (Section 4, page 36). Each mini-lesson takes about 30 45 minutes. It focuses on one or two key concepts using quizzes and other learning activities that actively involve the participants. The mini-lesson is very structured so you can lead participants through the lesson even if you don't have a background in nutrition. Each mini-lesson is designed to be a complete unit. However, since all the lessons are based on the basic principles of healthy eating, it makes the most sense to start with mini-lesson 1, Introduction to Healthy Eating and then proceed with the other lessons in whatever order you like.
- Recommended handout material.
 A key part of the mini-lesson plan is resource material on the topic area that participants can take home.

Being a Successful Leader



hances are, you've picked up this manual because you're personally interested in healthy eating and are committed to good health.

That's great!

This program is banking on you to combine this personal interest and commitment to good health with your experience as a leader, to get the healthy eating message out to more people.

1. Take some time to read the manual from cover to cover.

The nutrition background information will update you on current healthy eating issues. Go through the mini-lessons in advance so that you are familiar with the information and the process. There may be sheets to be copied, resources to be ordered, or extra pencils and paper needed for writing activities. If you can't quite picture how a lesson is going to work, ask a friend or family member to work through it with you.

2. Order handout material well in advance.

Handout material is an important part of the mini-lesson. Most of the recommended resources are free, but must be ordered in advance. Allow four to six weeks for delivery of the resources unless you know that materials can be picked up on a few days' notice.

3. Link up with a dietitian/nutritionist in your community.

Pilot testing the manual with the help of community leaders showed that leaders need access to training and/or advice to use the manual effectively. So contact the public health nutrition professional in your community (see Section 6, *Resources*, page 104). This nutrition expert knows the community well and can either help you directly or point the way to other community resources.

Here are some points to discuss with the dietitian/nutritionist:

- Would they be interested in leading the nutrition minilessons?
- Would they like to team-teach the program with you?
- Discuss the handout material you are planning to use. Do they have additional resource material for program participants?
- Can people in your group call them directly for more in-depth information?
- Can you call on them for advice/guidance when you need more information?

4. Plan with your group in mind.

The ideal group size for these mini-lessons is 15-20 people. If your group is larger you will need more time since discussion periods will take longer. If you are working with groups of different ethnic or cultural backgrounds, a smaller group size or

Planning Tips for Leaders

a longer presentation time may allow for more discussion when necessary. Also be sure to use examples of food and food preparation methods that are relevant to the specific cultural group.

Presentation Pointers

- You are the leader, the facilitator, not necessarily the nutrition expert. Don't put pressure on yourself by trying to know all the answers. When you can't answer a question, just say so. Refer the person to one of the nutrition experts you made contact with, or find the answer yourself and follow up with the participant at a later date.
- ☐ People are more likely to learn in a relaxed and easy-going environment. Have some fun! Don't be afraid to crack a joke or admit to your own food quirks in a light-hearted way. It helps to establish a rapport with the group and makes the learning experience enjoyable.
- ☐ Let the participants learn from each other. Encourage the exchange of ideas and sharing of hints. The shared information isn't always factual, but the leader can usually build on the comment to deliver a positive message.
- When a contributed idea or comment ties in with the message, give emphasis to the message by giving the contributor a pat on the back "Great idea." "That's a perfect example." "Great minds think alike!"
- Don't ever put anyone on the spot. Hear from those who want to contribute and let the others enjoy the session from the sidelines.
- Each group you work with will be different. You will have to size it up to decide how to proceed with the learning activities. Sometimes you may have each participant work independently on an activity, although this is not recommended in groups where literacy is an issue. Groups that are larger, more introverted, or where literacy is an issue, should be organized into informal working groups of three or more. Ask the group to choose a leader to keep things moving along. Pairing people is not a good idea. It puts those who are shy or of limited literacy on the spot.

CHALLENGERS...

t's bound to happen. You will come across some people in your group who don't agree with any of the information. You will never change their minds – don't even try! It is a no-win situation. The further you get into a discussion, the harder it is to cut them off and get on with the program. Don't risk losing the interest and attention of everyone else in the group because of one disruptive person.

The best way to handle this situation is to cut the person off as soon as you can, but in a nice way. Say something like, "That's very interesting, I've never heard anything like that before. Anyway, that's not what we're here to talk about. Let's get moving before our time is up."

Don't wait for a response to your comment. Move right along.

...AND CHATTERERS

This program is based on group dynamics, discussion, exchange and participation. You want to encourage this, but there's a limit to how long you can spend on personal anecdotes. Sometimes you will sense that other group members are getting a little tired of a participant who is dominating the discussion time. You can usually get things moving along by saying something like, "One more quick point and we've got to move along, time's running out." or "Next time we'll have to leave more time for discussion, but right now we've got to move along."

How to Win in No-Win Situations

Nutrition Background Information for the Leader



T	his section contains background information for each of the mini-lessons:
	Healthy Eating, page 14
	Dietary Fat, page 19
	Complex Carbohydrate (Starch) and Dietary Fibre, page 27
	Healthy Weights, page 31
	Healthy Eating Out, page 33

Each section will provide you with the key facts needed to handle the nutrition mini-lessons with comfort and ease.

The background section for each mini-lesson also offers a list of suggested handout material. It will help to read the handout material recommended for the group participants. The pamphlets and resource material contain many practical tips that add meaning and perspective to the more technical information.

Healthy Eating



o obtain the following material, see ordering information in Section 6, *Resources*, page 107.

- Healthy Food Choices May Reduce Your Cancer Risk
- Healthy Food Choices Tent Card
- Healthy Eating: Reducing Your Risk of Cancer. A Nutrition Message from the Canadian Cancer Society From: Canadian Cancer Society
- How Do I Choose a Healthy Diet? (Canada's Guidelines for a Healthy Diet)
 From: Heart and Stroke Foundation
- Food Smarts
- Healthy Lifestyles Promotion Program Ideas for Action on Healthy Eating
 From: Ontario Ministry of Health, Health Information Centre
- Canada's Food Guide to Healthy Eating (Tearsheet, Using the Food Guide Booklet, Food Guide Facts Background for Educators and Communicators)
 From: Health Information Centre and Public Health Units, see page 107 for the health unit that serves your area.

Resource Material on Healthy Eating

Canada's Guidelines for Healthy Eating

he healthy eating information used in this program is based primarily on *Canada's Guidelines for Healthy Eating*. These five statements outline the basic principles of healthy eating.

Canada's Guidelines for Healthy Eating are intended for healthy Canadians more than two years of age. Each guideline is explained briefly.

☐ Enjoy a VARIETY of foods

This guideline encourages Canadians to eat many, different kinds of foods. A diet containing a wide variety of foods is more likely to provide all the nutrients needed for good health. It also discourages the overconsumption of foods that are high in nutrients such as fat and sodium.

☐ Emphasize cereals, breads, other grain products, vegetables and fruit

The main goals of healthy eating are to lower fat intake while increasing the consumption of both complex carbohydrate (starch) and dietary fibre. These are the foods that will help Canadians realize these healthy eating goals. Grains, vegetables and fruits are naturally low in fat; grains are the main dietary source of complex carbohydrate (starch); vegetables, fruit and whole grains are the key sources of dietary fibre.

☐ Choose lower-fat dairy products, leaner meats, and foods prepared with little or no fat

A reduction of dietary fat is a key nutrition recommendation. Canadians are urged to cut down on table fats like oils, butter and margarine, and to choose lower-fat dairy products (with 2% milk fat or less), leaner meats, and poultry without the skin.

☐ Acheive and maintain a healthy body weight by enjoying regular physical activity and healthy eating

This guideline encourages people to become more active and enjoy healthy eating instead of dieting.

☐ Limit salt, alcohol and caffeine

Salt, used in the preparation of foods at home and by food manufacturers, is a major source of sodium, a nutrient linked to high blood pressure. The healthy eating approach to salt is one of moderation, not complete avoidance. People can reduce salt intake by:

- limiting the use of salt at the table
- cutting back on the amount of salt used in cooking and baking
- limiting the use of frozen convenience foods, fast foods and salty snack foods
- using salt-free herbs and spices to flavor foods.

Alcohol in excess is related to a variety of health problems. For most adults, no more than one to two drinks a day is suggested.

One drink is: 1 bottle of beer (350 mL/12 fl.oz.)

150 mL/5 fl.oz. glass of wine 45 mL/1 1/2 fl.oz. spirits

Pregnant women should avoid alcohol altogether.

Caffeine – Moderate intakes of caffeine, up to but not exceeding 400 to 450 milligrams per day, are not hazardous to health. However, people who experience unpleasant side effects, like anxiety or sleeplessness, may want to limit caffeine intake.

Key dietary sources of caffeine:

60% comes from coffee

30% from tea

10% from chocolate, cola beverages and medications.

Product	Milligrams Caffeine
Coffee: per 6 fl.oz./175mL cup	
 Automatic percolated 	72 – 144
• Filter drip	108 - 180
 Instant regular 	60 - 90
• Ground beans	66 – 78
Instant decaffeinated	less than 6
Tea: per 6 fl.oz./175mL cup	
• Weak	18 - 24
• Strong	78 – 108
Cola soft drinks: per 10 fl.oz./28	30mL
• 1 can	28 - 64
• 1 can	
• 1 can	
• 1 can Cocoa products:	
 1 can Cocoa products: Chocolate bar 2 oz./56g 	28 - 64
 1 can Cocoa products: Chocolate bar 2 oz./56g Dark 	28 - 64
 1 can Cocoa products: Chocolate bar 2 oz./56g Dark Milk 	28 - 64
 1 can Cocoa products: Chocolate bar 2 oz./56g Dark Milk Baking chocolate 	28 - 64 40 - 50 3 - 20 25 - 35
 1 can Cocoa products: Chocolate bar 2 oz./56g	28 - 64 40 - 50 3 - 20
 1 can Cocoa products: Chocolate bar 2 oz./56g	28 - 64 40 - 50 3 - 20 25 - 35
 1 can Cocoa products: Chocolate bar 2 oz./56g	28 - 64 40 - 50 3 - 20 25 - 35
 1 can Cocoa products: Chocolate bar 2 oz./56g Dark Milk Baking chocolate 1 oz./30g Chocolate milk 7.5 fl.oz./225mL Hot cocoa 6 fl.oz./175mL 	28 - 64 40 - 50 3 - 20 25 - 35 2 - 8
 1 can Cocoa products: Chocolate bar 2 oz./56g	28 - 64 40 - 50 3 - 20 25 - 35 2 - 8

You may also find Canada's Food Guide to Healthy Eating a useful resource in leading this program.

The Food Guide takes the guidelines one step further by providing more detailed information about the food groups and the number and size of servings recommended daily. To get free copies of *Canada's Food Guide to Healthy Eating* contact the public health nutritionist in your health unit. (See page 107 for the health unit that serves your area)

For your own information as leader, also ask for a copy of *Food Guide Facts – Background for Educators and Communicators*. This document explains the Food Guide messages in more detail.

Canada's Food Guide

Resource Material on Dietary Fat

Dietary Fat

o obtain the following material, see ordering information in Section 6, *Resources*, page 104.

- Become Label Literate
 From:Canadian Cancer Society
- A Closer Look at Fat (Food Guide Facts Background for Educators and Communicators)
 From: Public Health Units
- What do Sherbet, Grilled Fish and a Whole Wheat Bun Have in Common? (Dietary Fat Facts)
- What do Apples, Yogurt and Spaghetti Have in Common? (Cholesterol Facts)

From: Heart and Stroke Foundation

- Fat Scoreboard see mini-lesson 2, page 68
- Using Food Labels to Choose Foods for Healthy Eating From: Health Canada, Health Protection Branch

Basic Facts on Fat

t seems that everything is either low-fat, no-fat or cholesterol-free these days. One day fish oils are the key to health; the next day, olive oil. Is margarine good for you? Or is butter better?

No wonder everyone is confused!

While there may be a growing awareness about cutting back on fat, people are struggling with how to make the necessary changes.

- ☐ How much fat do you need to cut out?
- ☐ Are there good fats and bad fats?
- ☐ What do you eat on a low-fat diet?

This section has been developed to help you, as leader, deal with questions like these.

WHAT'S SO BAD ABOUT FAT?

Diets that are high in fat have been linked to an increased risk of some serious health problems, including heart disease, some cancers and obesity. Since heart disease and cancer are the two top causes of illness and premature death in Canada, and obesity is associated with a variety of medical risks, people clearly stand to benefit from reducing their total fat intake.

IS THERE ANYTHING GOOD ABOUT FAT?

Of course there is!

Although you don't need a lot of dietary fat, you do need some. For instance, linoleic acid, a particular type of fat, is essential to life and can only be obtained through your diet. Without this essential fat, humans experience growth retardation, skin abnormalities, reproductive difficulties, and problems with liver and kidney function.

Fat also makes food taste good and makes the diet as a whole much more palatable. It contributes to the feeling of fullness and satisfaction after eating. And it is through the consumption of fat that we get some of our vitamins. The so-called fat-soluble vitamins A, D, E and K are found in food fat.

So, although some fat reduction is a positive dietary goal, it is neither necessary nor desirable to try to eliminate all fat from your diet.

THE BOTTOM LINE ON DIETARY FAT

The goal of Canada's Guidelines for Healthy Eating, and the approach taken in this Healthy Eating Manual, is to help consumers reduce the total amount of fat they eat. Although a lot of information has been published on the various types of fat and their importance to health, too much information is confusing. The total fat message is easy to understand and act on. This is the one message that you should always come back to.

HEALTHY EATING AND FAT

Right now, it is estimated that Canadians get about 38% of their total calories from fat. The healthy eating goal is to reduce this so that only 30% of a day's calories come from fat.

Trouble is, this 30% figure isn't very useful to the average person. To be meaningful, it must be converted into grams of fat. Then it can be used as a benchmark to judge the fat content of foods and meals.

This is what 30 % of a day's calories from fat means to the average man or woman:

The average man, aged 25 - 49 should reduce his daily fat intake to about 90 grams of fat or less.

To do this he must cut out about 25 grams of fat.

The average woman, aged 25 - 49 should reduce her daily fat intake to about 65 grams of fat or less.

To do this she must cut out about 17 grams fat.

These values for fat are general guidelines; they're not carved in stone. Younger people, and more active people who generally need more calories, can afford to eat more fat because 30% of a higher caloric intake will translate into more grams of fat. Older people, and less active people, who need fewer calories, will have to eat less fat than the average person.

Knowing what a healthy daily fat intake is and how many grams of fat should be cut out each day helps people to choose healthier foods. For instance, this information can help people judge foods based on nutrition label information. The following nutrition label for cheese slices illustrates the point.

Sample Label for Cheese Slices

Nutrition information			
Per slice			
Energy	56 Cal		
Protein	4.5g		
Fat	3.3g		
Carbohydrate	2.1g		
Percentage of recommende	Percentage of recommended daily intake		
Calcium	12%		

One thin slice of cheese contains 3.3 grams of fat. This isn't a high-fat choice compared to the healthy fat intakes of 90 or 65 grams of fat.

However, a person choosing a single-serving chicken pot pie containing 35 grams fat may come to a very different conclusion. Using the healthy fat intakes as a benchmark, a person knows immediately that this is a high-fat food choice, especially for a woman who is limited to about 65 grams of fat for a whole day.

USING THIS INFORMATION SENSIBLY

It is not the intention of this exercise to have Canadians madly counting up each gram of fat that they eat. This is neither necessary nor desirable. Just having a general "healthy fat benchmark" in your head, helps you make quick judgements on foods.

WHAT ARE THE KEY SOURCES OF FAT?

Fats and oil: butter, margarine, lard, shortening, mayonnaise, salad dressings
Milk products: milk, cheese, cream, yogurt (except lower-fat and skim-milk products)
Meat, poultry and fish
Nuts and seeds
Prepared foods: fast-foods, snack foods, baked goods made with fat like shortening, oil and lard

WHAT ACTION CAN PEOPLE TAKE TO LOWER FAT INTAKE?

	Use Canada's Guidelines for Healthy Eating and Canada's Food Guide to Healthy Eating as guides. Eat more grain-based foods fruits and vegetables.
	Choose lower-fat milk products such as milk, yogurt and cottage cheese containing 2% or less butter fat.
0	Choose leaner cuts of fish, poultry and meat, and eat them in smaller amounts.
	Add as little fat as possible when preparing and cooking food
0	When eating out, choose menu items that are lower in fat and sodium and higher in fibre.
	Choose desserts of fruit or low-fat frozen yogurt, instead of rich desserts like ice-cream and pastries.

ANSWERS TO SOME COMMON QUESTIONS

Which is better, butter or margarine?

For healthy people it is a toss up because both have the same amount of fat. The key is to use as little of either as you can. If you have an elevated blood cholesterol, soft tub margarines are the best choice because they are lower in saturated fat. Diets high in total fat and saturated fat are linked to an increased risk of heart disease.

What does "light" or "lite" mean?

The descriptions "light" or "lite" can refer to various qualities of a food. A food can be light or lighter in calories, but it can also be "light tasting," or "light in texture," which doesn't change its calorie value.

The important point is to make sure consumers know what is "light" about a product by reading the label carefully. They should not assume that "light" means lower in calories – it doesn't always.

What about cholesterol?

Most people know that it's unhealthy to have a high **blood** cholesterol. High blood cholesterol can lead to hardening of the arteries and an increased the risk of having a heart attack.

A diet high in fat, particularly saturated fat, is one of the factors that can lead to high blood cholesterol. This is the main reason that Canadians are being urged to cut back on fat, particularly saturated fat.

Although people commonly believe that it's the cholesterol in foods such as eggs that raises blood cholesterol, cholesterol-rich foods don't influence blood cholesterol nearly as much as total fat and saturated fat in the diet.

Foods marketed as "cholesterol-free" offer no special health benefits. Some foods that are cholesterol-free can be very high in fat such as margarine, vegetable oils and some brands of potato chips.

People who are worried about blood cholesterol should concentrate on lowering total fat intake, especially saturated fat intake, and increasing dietary fibre. The lower-fat, higher-fibre eating patterns recommended by Canada's Guidelines for Healthy Eating and Canada's Food Guide to Healthy Eating will help people achieve and maintain healthy blood cholesterol levels.

Types of fat

The dietary goal recommended to Canadians is to reduce total fat. That means all fat, regardless of type. However, the news every day is filled with reports about the benefits or problems associated with various types of fat. One day the public thinks it should be using olive oil; the next day fish oils are the best. That's why nutrition scientists generally agree that the simplest message is to cut total fat. You can't go wrong if total fat is held within healthy limits.

The following information is provided so that you can deal with these "fat" issues as they arise.

The fat in food is actually a combination of three different types: saturated, monounsaturated and polyunsaturated.

Saturated fat

Saturated Fat	Key Food Sources
It is the saturated form of fat that is the most closely associated with increased health risks.	 meat and poultry milk, cheese, cream butter, lard cookies, cakes, crackers. Tropical oils: palm, palm kernel, coconut (used widely in baked goods like cookies, cakes, crackers)

Hydrogenated and Partially Hydrogenated Fat

Although hydrogenated and partially hydrogenated fats originate as unsaturated oils, the process of hydrogenation turns the once unsaturated oil into what is, essentially, a saturated fat. Shortening and some margarines are the main sources of hydrogenated fat.

Monounsaturated fat

 vegetable oils like olive,* canola and peanut margarines made from these oils nuts and seeds
•

^{*}Olive oil is being positioned as a very healthy oil because it is very high in monounsaturated fat. While olive oil is a good choice for a vegetable oil, it doesn't stand alone as the best oil on the market. Any vegetable oil high in either monounsaturated or polyunsaturated fat is a good choice. Good oils include: safflower, sunflower, corn, peanut, canola and olive.

FAT SCOREBOARD*

This Fat Scoreboard lists the approximate fat content of some common foods. You can also learn about the fat content of various foods from the nutrition labels on some food packages.

Use these fat facts to compare products, choose lower-fat foods more often and to track how much fat you are eating each day.

MEAT, FISH, POULTRY AND MEAT ALTERNATIVES

Note: There is no easy way to describe what 3 ounces or 90-100 grams of meat, poultry or fish looks like. It's a small amount, probably much smaller that you are used to eating. As a rough guide, the following examples will give you an idea of what 3 ounces looks like: 1 chicken breast (whole chicken has 2 breast portions); 1 loin pork chop or 2 loin lamb chops; a piece of meat about the size and thickness of a cooked, quarter-pound hamburger; a fillet of fish about the length of your outstretched hand and as wide as your three middle fingers.

•	oproximate at in Grams		roximate in Grams
MEAT: 3 oz. / 90 - 100g lean cuts, c		MEAT & ALTERNATIVES	
Beef	8.0	1 large egg	5.0
Lamb	11.0	Legumes:	
Pork	8.0	lentils, white beans.	
Veal	6.0	kidney beans, split peas	
Liver:		1 cup / 250mL, cooked	1.0
calf	13.0	Baked beans 1 cup / 250mL	8.2
chicken	5.0	Garbanzo beans or chick peas	
		1 cup / 250mL, cooked	4.0
DELI OR LUNCHEON - TYPE MEAT	•	Nuts:	
2 slices bacon	6.0	almonds, cashews, peanuts,	
1 beef or pork wiener	11.0	pecans, pistachios, walnuts	
1 chicken/turkey wiener	7.0	1/2 cup / 125mL	40.0
1 slice cooked ham 1 oz. / 30g	2.0	Peanut butter 1 tbsp / 15mL	8.0
1 slice salami 3/4 oz. / 23g	6.0	Seeds:	
1 slice bologna 3/4 oz. / 23g	6.0	pumpkin, sesame, sunflower	
1 small sausage (16 per lb)	5.0	1/2 cup / 125mL	40.0
		Tofu 1 piece about 3" square	4.0
CHICKEN OR TURKEY: 3 oz. / 90 -			
	0(5.0)	MILK PRODUCTS	
white (dark meat) with skin 7.	0(10.0)	****	
		Milk: 8 oz. / 250 mL	0.0
FISH: 3 oz. / 90 - 100g		Whole (homo)	9.0
Fatty fish:		2%	5.0
salmon, trout, sardines	10.0	1%	2.5
Medium-fat fish:		Skim	0.0
mackerel, cohoe salmon,		Cheese: 1 1/2 oz. / 45g	
chum salmon, halibut	5.0	Cheese 29% to 31% fat	15.0
Lower-fat fish:		(M.F. or B.F.)	15.0
cod, sole, haddock,		Examples: cheddar, gouda,	
whitefish, bluefish,	1.0	gruyère, muenster; parmesan	l ,
shellfish, lobsters, scallop	1.0	swiss, cream cheese	
Tuna 1/2 cup / 125mL		Cheese about 15% fat	7.0
canned in water/broth	1.0	Examples: partly skimmed	
canned in oil	9.0	mozzarella, ricotta	
Salmon 1/2 cup / 125mL	0.0	Cheese about 7% fat	3.0
canned in oil	9.0	Examples: low-fat and	
Frozen fish	0.0	light cheeses	
battered, fried (1 piece)	9.0	1.5.1. 0.1.0000	

^{*} Fat Scoreboard is adapted, with permission, from the original developed by the Canadian Cancer Society, September 1992.

	Approximate Fat in Grams		Approxima Fat in Gran
MILK PRODUCTS cont'd		piece of fruit pie, two crust	18.0
Cottage cheese: 1/2 cup / 125 mL		doughnut	10.0
Creamed 4.5%	5.0	danish	9.0
2% fat	2.5	Crackers, 1 of most varieties	1.0
Yogurt: 3/4 cup / 175 mL		Melba toast, soda crackers,	
About 6% B.F.	7.0		traces
About 2.5% B.F.	5.0		
About 1.5% B.F.	3.0	COMBINATION DISHES	
Frozen Yogurt: 1/2 cup / 125ml	0.0	Macaroni and cheese	
2% B.F.	2.5	1 cup / 250 mL	23.0
Ice Cream: 1/2 cup / 125 mL / 1 sco	i	Quiche Lorraine 1/8 of a 9" pie	48.0
Rich, gourmet type, 16% B.F.	15.0	Spaghetti with meat balls	12.0
Regular 10% B.F.	8.0	Chili 1 cup / 250 mL	8.0
Sherbet: 1/2 cup/125 mL	2.0	Lasagna (meat and cheese)	
Cream: 1 tbsp. / 15 mL or 1 creame	1	1 serving	35.0
Coffee 10% B.F.	2.0	Shepherd's pie 1 serving	13.0
Collee 10% B.F.	2.0	bliepherd's pie 7 serving	10.0
VEGETABLES AND FRUIT		SNACK FOODS, FAST FOODS	
All but avocado	traces	AND FROZEN ENTRÉES	
Avocado 1/2 medium	14.0	Potato chips, cheesies.	
Ceasar salad large	41.0	small bag 55g	20.0
Ceasar salad large	41.0	Pretzels	traces
OILS AND TABLE FATS: 1Tbsp. / 15	mī	Popcorn, popped 4 cups (1L)	
All oils	14.0	air-popped, lightly buttered	22.0
Butter and margarine	11.0	gourmet cheese	20.0
_	11.0	microwave 1/3 bag, regular	5.0
Mayonnaise	6.0	light	1.5
Salad dressing	3.0	Chocolate bar, small (56g)	20.0
Sour cream	3.0	Taco 1	8.0
GRAIN PRODUCTS		Fried chicken	
		2 pieces with french fries	26.0
Bread, bun, pita bread,	4	Fish sandwich	25.0
tortilla	traces 2.0	Fish and chips	30.0
Bagel (whole)	3.0	Medium pizza, vegetarian	00.0
Hot dog or hamburger bun		2 slices	13.0
Most cold breakfast cereals	traces	Medium pizza with the works	
Granola 1/2 cup / 125 mL	2.0	2 slices	26.0
Oatmeal 1 cup/ 250 mL cooked	ı	Deluxe burger 2 patties,	
Rice, barley, bulgar	traces	cheese sauce	44.0
Pasta: macaroni, spaghetti	traces	Box of french fries	12.0
Noodles: chow mein type	11.0	Shake	11.0
1 cup / 250 mL	11.0	Chicken sandwich	
Pancakes 1 medium	2.0	breaded, fried	33.0
(4" diameter)	2.0	Frozen entrée or dinner	30.0
Baked Goods:	9.0	for 1 person	19.0
small croissant	4.0	Frozen entrée or dinner (light)	-5.0
muffin, homemade type	12.0	for 1 person	8.0
muffin, muffin-shop type		lor i person	0.0
piece of cake with icing	12.0	MISCELLANEOUS	
piece of cheesecake	18.0	Jam, jelly, honey, syrup	traces
chocolate chip cookie	6.0	Condiments: ketchup, mustard,	
peanut butter cookie arrowroot cookies 2	7.0	relishes, pickles	traces
arrowroot cookies 7	2.0	romonos, premios	

Polyunsaturated fat

Polyunsaturated Fat	Food Sources
Like the monounsaturated fats, these fats have a blood cholesterol-lowering effect.	 vegetable oils like safflower, sunflower and corn margarines made from these oils nuts and seeds fatty fish: salmon, trout*

*Omega-3 Fats or Fish Oils

Omega-3 fats, or fish oil fats, are a type of polyunsaturated fat that do not lower blood cholesterol but do seem to lower blood triglycerides, another type of blood fat associated with increased risk of heart disease.

Complex Carbohydrate (Starch) and Dietary Fibre

Resource Material on Complex Carbohydrate and Dietary Fibre

o obtain the following material, see ordering information in Section 6, *Resources*, page 104.

- A Closer Look at Carbohydrates (Food Guide Facts Background for Educators and Communicators)
 From: Public Health Units
- Become Label Literate
 From: Canadian Cancer Society
- What do Oatmeal, Strawberries and Peas Have in Common? (Fibre Facts)
 From: Heart and Stroke Foundation
- Fibre Scoreboard see mini-lesson 3, page 78
- Using Food Labels to Choose Foods for Healthy Eating
 From: Health Canada, Health Protection Branch

How
Complex
Carbohydrate
and Fibre
Fit into
Healthy
Eating

he second guideline for healthy eating "Emphasize cereals, breads, other grain products, vegetables and fruits" encourages people to eat more of the foods that contain complex carbohydrate (also known as starch) and dietary fibre. This guideline works together with the advice to lower dietary fat intake. The ultimate goal is to shift people's diets away from higher-fat foods and to replace these foods with lower-fat foods high in complex carbohydrate and fibre.

Diets that are lower in fat and higher in complex carbohydrate and fibre are linked to lower risks for diseases such as cancer and heart disease.

Grain products, legumes and a few starchy vegetables (potatoes, sweet potatoes, peas, corn) are the key sources of complex carbohydrate. Although refined grain products like white bread and pasta provide complex carbohydrate, they don't provide much fibre. By choosing a whole grain product people get both complex carbohydrate and fibre.

While most fruits and vegetables don't provide much complex carbohydrate they are key sources of fibre.

Together, whole grains, legumes, fruits and vegetables can form the basis of a low-fat, satisfying diet. Learning to fill up on these foods is a key to healthier eating.

A CLOSER LOOK AT FIBRE

The mini-lesson that deals with this topic area focuses on fibre, page 70. If people work on increasing their fibre intake through a variety of sources as recommended, complex carbohydrate intake will improve too.

The following leader information discusses fibre in more detail.

FIBRE IN THE NEWS

Do you remember the oat bran craze of the late 1980s? Oat bran's claim to fame stemmed from its content of soluble dietary fibre. If nothing else, the media hype about oat bran brought the importance of fibre into the public's mind.

THE DIFFERENT KINDS OF FIBRE

There are two different types of dietary fibre, soluble and insoluble. Each type has a very different health effect.

- ☐ Soluble is the fibre associated with lower blood cholesterol and better control of blood sugar levels. Key food sources of soluble fibre are oats, oatbran; legumes (dried beans, split peas, lentils); and pectin-rich fruits such as apples, strawberries and citrus fruits.
- ☐ Insoluble is the fibre mainly associated with the prevention and management of bowel disorders. This type of fibre may also help in the prevention of certain cancers, such as bowel cancer. Key food sources of insoluble fibre are whole grain breads and cereals, fruits and vegetables.

Basic Facts on Fibre

HEALTHY FIBRE INTAKES

Fibre experts generally recommend a daily intake of 25 to 35 grams of fibre. The fibre should come from a variety of food sources so that a mixture of both soluble and insoluble fibre is obtained.

In mini-lesson 3 (page 70) participants will learn how to incorporate more fibre into their meals during a practical exercise of meal planning.

		Good Sources of Dietary Fibre
		Fibre is found only in plant foods
	0	Whole grain foods: whole wheat bread, brown rice, barley, whole wheat cerals, oats
		Wheat bran and foods made with wheat bran
		Oat bran and foods made with oat bran
		All fruit and vegetables
		Legumes: dried beans, peas and lentils,
		e.g., baked beans, split pea soup
	Q	Nuts and seeds, including nut butters, such as peanut butter
TIPS FOR GETTING MORE FIBRE		
The following tips can be used in discussions about increasing libre intake:		
_	Ch	noose whole grain foods as much as possible: whole wheat
		ead, rye bread, brown rice, barley.

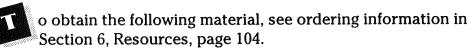
☐ Eat more fruits and vegetables – they are loaded with fibre. Aim for at least five servings a day. Snack on fruit; slice a fresh tomato to eat with dinner; add green peas and corn to casseroles, soups and rice dishes. ☐ Eat more legumes: split pea soup, baked beans, lentil casserole, three-bean salad. Add garbanzo beans to salads; add extra beans to chili and minestrone soup; combine lentils with rice. ☐ Use whole wheat flour and whole grains like oats to make muffins and cookies. Add dried fruit for even more fibre. ibre is a very positive feature of food. So it comes as no surprise that food manufacturers want to feature the fibre content of their products. However, consumers have to be careful that they don't fall for fibre and forget about fat. There's no advantage to choosing a product for fibre if it also contains a lot of fat. For example, the nutrition label on one brand of oat bran cookies reveals that there are 2.5 grams fibre per serving (four cookies). But to get that 2.5 grams of fibre, you end up eating about 8 grams of fat! Compare this with a pear, which provides about 4.7 grams of fibre and no fat! By law a food may be labelled: ☐ A source or moderate source of fibre if it contains at least 2 grams of fibre per serving ☐ A high source of fibre if it contains at least 4 grams of fibre per serving ☐ A very high source of fibre if it contains at least 6 grams of

fibre per serving.

Reading Nutrition Labels for Fibre Facts

Healthy Weights

Resource Material on Healthy Weights



- A Recipe for Success
From: Canadian Cancer Society, Ontario Division

- Food Smarts

 Healthy Weights: A New Way of Looking at Your Weight and Health From: Ontario Ministry of Health

Basic Facts

his lesson is geared to start the process of changing the way people look at weight – their own weight and other people's weight. It will introduce what is usually called the "healthy weights" concept.

This concept is relatively new in the health field. It was developed in response to a growing concern about body image and preoccupation with weight.

More than ever before, we live in a society that reveres the thin and discriminates against the overweight. Only in the last decade have health professionals started to realize that being too thin, or constantly trying to become thin by one diet after another, has been achieved only with great social, physical, emotional and economic costs.

Families are struggling with young people afflicted with eating disorders like anorexia and bulimia. And desperate adults pay millions of dollars each year to the weight-loss industry, only to find the lost weight is regained, and then some, in no time at all.

Ultimately, the healthy weights concept attempts to get people to relax a little about weight – both their own and the weight of others.

It is an approach to weight that:		
	Promotes healthy eating, not dieting, along with regular physical activity	
	Aims to change how individuals and society view weight	
	Assures people that there is a range of weights consistent with good health, not just one ideal weight	
	Attempts to dispel the notion that with a little dieting we can all look like models and television stars.	

Healthy Eating Out

Resource Material on Eating Out



o obtain the following material, see ordering information in Section 6, Resources, page 104.

- Eating Out

From: Canadian Cancer Society

- How Can You Eat Out and Stay Healthy?
From: Heart and Stroke Foundation

n 1988, Canadians spent roughly 37% of their food dollar on meals eaten away from home. It is estimated that the average Canadian eats away from home nearly three times per week. Men eat out almost twice as often as women. The meal most frequently eaten out is lunch, followed by dinner, then breakfast.

To the food service industry's credit, it is responding to consumers' demands for healthier foods. Restaurants are joining up with the Heart and Stroke Foundation and the Canadian Cancer Society to sponsor healthy menu choices. In general, restaurants are now much more accommodating when consumers ask for menu items to be prepared in lower-fat ways, and with less salt.

The largest growth in the food service industry is in the fast-food and take-out sector. Canadians spend almost \$6 billion a year on fast-foods. Fast-food restaurants, notorious for serving high-fat, highly salted and low-fibre foods, are now offering a good selection of lower-fat foods (leaner burgers, grilled chicken sandwiches, low-fat milk shakes and muffins, low-calorie salad dressings). Fibre, too, has more of a presence in the form of salads and salad bar offerings. Many restaurants have published pamphlets on the nutrient value of menu items.

TIPS FOR HEALTHY EATING OUT

The Healthy Eating Out Quiz (page 90) designed for the lesson on eating out, touches on many of the points listed below. Use these tips to expand some of the points illustrated by the quiz. ☐ Learn to ask for what you want – smaller portion sizes, broiled or baked foods instead of fried foods, sauces and dressings to be served on the side, milk instead of cream for coffee and tea. ☐ Choose plain menu items – plain burgers instead of deluxe burgers with double patties, cheese and special sauces; cheese and vegetable pizzas instead of pizza with bacon, sausage and double cheese. ☐ Milk is a good beverage – choose a lower-fat variety when available. ☐ Avoid sauces, gravies and toppings – mayonnaise, tartar, cheese, bacon bits. (Meat dips such as honey or sweet and sour sauce, which are sugar-based not fat-based, are okay to use.) ☐ Ask for low-calorie salad dressings and avoid salad bar items that are dripping in dressing. ☐ Broiled or grilled chicken without the skin and baked fish fillets are good choices; breaded and deep-fried chicken and fish sandwiches are very high in fat. ☐ If you want dessert, choose a low-fat frozen yogurt or fruit cup. ☐ Baked potatoes with toppings like cheese or sour cream and bacon are not good choices. You're better off using just one pat of butter, or a creamy, low-calorie dressing. ☐ Choose broth-based and fibre-filled soups like split pea, corn chowder and minestrone instead of cream soups. ☐ Sausage and egg breakfasts are high in calories and fat. An English muffin or pancakes or cereal are better breakfast choices.

- ☐ Choose whole grain bread, grains and legume-based menu items for extra fibre.
- ☐ Fill up on carbohydrate-rich menu items that are low in fat: fresh bread and rolls (go easy on the butter!); pasta dishes served with tomato sauces or mixed vegetables; rice and other grains.

Now on to the Fun!

his brings to a close the information you need to lead participants through this program with comfort and ease. Remember to call on local nutrition experts for any clarification of the leader information provided here.

Following are the Healthy Eating Min-Lesson plans.

