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**BeWell Assignment #1 (50 points)**

**Complete and Save this assignment as a .pdf file.**

**Upload your typed BeWell#1 by the due date to Canvas.**

**We cannot accept emailed assignments.**

**Late assignments will be penalized as stated in the syllabus.**

**STEP 1A: FOOD FREQUENCY AND EATING PATTERNS**

**Complete the tables below by indicating your answer with an ‘X’ in the box that is most accurate for you.**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Food Frequency | Daily | | 4-5 x/ wk | | | 2-3 x/wk | | | 1x/wk | | | None |
| How often do you eat dairy products? (milk, cheese, yogurt, etc.) | x | |  | | |  | | |  | | |  |
| How often do you eat fruit?  (fresh or canned) |  | |  | | |  | | | x | | |  |
| How often do you eat vegetables or salad? |  | | x | | |  | | |  | | |  |
| How often do you eat meat? | x | |  | | |  | | |  | | |  |
| How often do you drink 70-100 ounces of water each day? | x | |  | | |  | | |  | | |  |
| How often do you eat desserts/sweets? (cake, candy, cookies, etc.) |  | |  | | | x | | |  | | |  |
| Beverage Frequency | **4+** | | **3** | | | **2** | | | **1** | | | None |
| How many carbonated beverages do you drink per day? |  | |  | | |  | | |  | | | x |
| How many caffeinated beverages do you drink per day? |  | |  | | |  | | |  | | | x |
| How many alcoholic beverages do you drink *per week*? |  | |  | | | x | | |  | | |  |
| With regards to alcoholic beverages, please answer the following questions. | | | | | | | | | | | | |
| Do you drink beer and/or wine? | | | | **Yes** | | | No | | | | Not Applicable | |
| Do you drink hard liquor or mixed drinks? | | | | **Yes** | | | No | | | | Not Applicable | |
| Eating Patterns | | **Daily** | | | **4-5 x/wk** | | | **2-3 x/wk** | | **1 x/wk** | | Rarely | |
| How often do you eat while watching TV, doing homework or other screen-based activities? | |  | | |  | | | x | |  | |  | |
| How often do you pay attention or monitor your portion sizes? | |  | | |  | | |  | |  | | x | |
| How often do you snack between meals? | |  | | |  | | |  | |  | | x | |
| How often do you eat breakfast within 1-2 hours of waking up? | | x | | |  | | |  | |  | |  | |
| How often do you eat lunch? | | x | | |  | | |  | |  | |  | |
| How often do you eat dinner? | | x | | |  | | |  | |  | |  | |

**STEP 1B: PHYSICAL ACTIVITY FREQUENCY AND LIFESTYLE BEHAVIORS**

**Complete the tables below by indicating your answer with an ‘X’ in the box that is most accurate for you.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Exercise Frequency | Daily | 4-5 times a week | | 2-3 times a week | Once a week | Rarely or None |
| How often do you participate in cardiovascular fitness activities for 30 minutes or more per session? |  |  | | x |  |  |
| How often do you participate in strength training activities? |  | x | |  |  |  |
| How often do you participate in flexibility training activities for 15 minutes or more per session? |  |  | | x |  |  |
| How often do you walk or bike to (or on) campus for 10 minutes or more? | x |  | |  |  |  |
| How often do you sit for 2 consecutive hours or more? | x |  | |  |  |  |
| HIGHLIGHT THE OPTION THAT BEST DESCRIBES YOU: | | | | |  |  |
| What intensity do you usually exercise at? (See Step 3B for definitions) | Vigorous | Moderate- to vigorous | | Moderate | Low | Do not exercise |
| What is your primary reason for exercise? | Stress relief | Enjoyment | | Gain fitness/strength | Weight management | Other: (Specify) |
| Which is your usual mode of transportation? | Car | Walk | | Public transport | Bike | Other: (Specify) |
| How often do you take the stairs? | Every time | Most times | | Half the time | When I have to | Never |
| How many hours (on average) do you spend sitting on a week day? | 0-<4 hrs | 4-<6 hrs | | 6-<8 hrs | 8- <10 hrs | 10+ hrs |
|  | | | | | | |
| List the types of exercise/physical activity that you usually do. | | | Running, Lifting, stretching, sprints, boxing | | | |

**STEP 2: STAGES OF CHANGE**

**Question #1:** With regards to nutrition and consistent physical activity, what “Stage of Change” are you currently in and why? What stage would you like to be in by the end of the term?

|  |  |
| --- | --- |
| Stage of change for ***nutrition***:  Maintenance | Why: I cook meals with balanced carbs, meats, and veggies every week. I could eat more fruit, but I take multivitamins that help cover that. |
| What stage of change do you see yourself at by the end of term for ***nutrition***? Explain why.  Maintenance. I’ve been eating healthily and with sparse amounts of junk food for years. | |
| Stage of change for consistent ***physical activity***: Maintenance | Why: I work out 5-6 times a week and walk to class throughout the week. I’ve been doing this for years. |
| What stage of change do you see yourself at by the end of term for ***physical activity***? Explain why.  Maintenance, I’ve been working out and getting good outside movement for years. | |

**STEP 3A: NUTRITION JOURNALING**

**Using the nutrition journal table, record all food and drink consumed for THREE days. At least ONE weekend day (Saturday or Sunday) must be included. All columns within a row must be completed and detailed to earn full credit. You may add additional rows if necessary. If you list 1 serving of food, be sure to state how much 1 serving is.**

**For example:** A sandwich should be itemized to be: 2 slices of bread (whole wheat), 2 slices of cheddar cheese, 1 tbsp of mayo & mustard, 4 slices of tomato, 2 leaves of lettuce, 2 slices of turkey.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date and Day of the week | Time | Food/Beverage Consumed | Specific /Standardized measurement consumed (4 oz. ½ cup, 1 Tbsp, 4 slices, 8 pieces etc.) | Satiety Level After Eating Meal or Snack  (1=hungry, 2=slightly hungry, 3=satisfied, 4=slightly full, 5=very full) |
| 10/1/2019 thursday | **8:07** | **Oats Cereal, milk** | **2 cups cereal, 1 milk** | **3** |
| 10/1/2019 | **13:04** | **Alfredo pasta W/ Chipotle chicken and asparagus. 20 oz water** | **3 cups total** | **3** |
| 10/1/2019 | **19:00** | **Quesadilla, 20 oz water** | **1 tortilla, 1 cup cheese** | **3** |
|  |  |  |  |  |
| 11/1/2019  friday | **10:08** | **Oats Cereal, milk** | **2 cups cereal, 1 milk** | **3** |
| 11/1/2019 | **14:23** | **Alfredo pasta W/ chipotle chicken and asparagus, 20 oz water** | **3 cups** | **3** |
| 11/1/2019 | **18:33** | **Peanut butter and jelly sandwich, 20 oz water** | **2 slices wheat bread, jelly, peanut butter** | **3** |
| 11/1/2019 | **22:38** | **Juanitas tortilla chips, 20 oz water** | **1 cup chips** | **2** |
|  |  |  |  |  |
| 12/1/2019  saturday | **11:03** | **Eggs, spinach and toast, 20 oz water** | **3 eggs, two slices wheat toast, jelly, handful of spinach** | **3** |
| 12/1/2019 | **13:40** | **Quesadilla, 20 oz water** | **1 tortilla, 1 cup cheese** | **3** |
| 12/1/2019 | **19:05** | **Broccoli Gnocchi soup** | **2 cups broth, 1 cup broccoli, 1 cup gnocchi, unknown amount butter and spices (gf made it)** | **3** |
| 12/1/2019 | **23:57** | **Juanitas tortilla chips, 20 oz water** | **2 cups chips** | **3** |

Total number/servings of vegetables consumed over 3 days:\_\_\_4 cups\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total number/servings of fruit consumed over 3 days: \_\_\_0\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total ounces of water consumed: \_\_\_160\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**STEP 3B: ACTIVITY AND SEDENTARY BEHAVIOR JOURNALING**

**Record ALL ACTIVITY and SEDENTARY time engaged in for 3 days (one day must be a weekend day). Each day should have between 10 and 12 hours of activity logged. *Do not count sleep.* All columns within a row must be completed and detailed to earn full credit. Indicate time spent sitting, exercising (what type, intensity, and duration), walking, biking, etc. You can combine activities that you do throughout your day (for example: walking to and from class = 10min x 4times = 40 min).**

**Refer to the following definitions when labeling the intensity of exercise**:

* **Sedentary:** Sitting, somewhat inactive or very little movement.
* **Low (Light)**: Routine tasks associated with day-to-day life, such as walking or stretching.
* **Moderate**: Breathing and heart rate are accelerated but conversation is comfortable.
* **Vigorous**: Breathing and heart rate considerably elevated; unable to hold conversation.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date and Day of the week | Type of Activity (walking, sitting, studying, swimming, resistance training etc.) | Detailed explanation of activity or sedentary behaviors. For example: 8 reps, 2 sets of 10 push-ups, 1500m swimming, Heart rate during exercise; studying in the library; sitting in class. | Duration of Activity or Sedentary Behavior  (minutes or hours) | Intensity (sedentary, low, moderate, vigorous) |
| 10/1/2019 thursday | sitting | Schoolwork, sitting in class, relaxing | 11 | sedentary |
| 10/1/2019 | Weight Lifting | Chest and Triceps: bench, chest machine, decline barbell, Overhead lift, weighted pulldown, skullcrushers | 1 hr | vigorous |
| 10/2/2019 friday | sitting | Schoolwork, sitting in class, relaxing | 11 | sedentary |
| 10/2/2019 | Weight lifting | Shoulders, Lats, traps: lateral raises, shrugs, pulldown bar, rope machine | 1 hr | vigorous |
| 10/3/2019 saturday | sitting | Socializing, schoolwork, hanging out with gf | 11 | sedentary |
| 10/3/2019 | running | 3 mile loop around campus and out to the covered bridge | 10 min warmup, 28 minute run, 10 minute cooldown and stretch | vigorous |
|  |  |  |  |  |

Total time (in hours and/or minutes) spent in sedentary behaviors: \_33\_\_hr\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Total time (hours/min) spent in low intensity activity: \_\_\_\_0\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Total time (hours/min) spent in moderate intensity physical activity: \_\_\_20 min\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Total time (hours/min) spent in vigorous intensity physical exercise: \_\_\_2.5 hr\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Question #2: JOURNAL OBSERVATIONS**

After reviewing **both** your nutrition and activity & sedentary behavior journals, **explain TWO** interesting perceptions/observations from your overall journal entries (one each is adequate although you may list 2 or 3). Consider proud accomplishments, areas for improvement or sustainability of eating or exercise patterns.

|  |
| --- |
| Perception(s) of food journaling:  I eat pretty well but could use more fruits, despite taking vitamins |
| Perception(s) of activity and sedentary behavior journaling:  I do a great job exercising every day. One thing I forgot to log was my walking to class every day, which usually accounts for about 45 minutes total each day. |

**STEP 4: GOAL SETTING**

**Question #3:** Now that you’ve assessed you current nutrition and activity patterns, let’s set a specific goal. This goal should be between approximately 4-6 weeks in length so you can track your progress over the term and yet be completed by the end of term.

|  |  |
| --- | --- |
| **Questions** | **Your SMART goal responses:** |
| A. Write a COMPLETE 1-2 sentence SMART goal related to **nutrition OR exercise.** | I am going to eat at least 5 cups of fruit each week for the next 5 weeks, logging my progress on my phone. |
| **B. Based on your complete SMART goal above, EXPLAIN each component in more detail:** | |
| How is your goal specific? | Eat 5 cups of fruit a week |
| How is your goal measurable?  (IMPORTANT: how will you track this goal on a daily basis)? | 5 cups, measured on phone |
| How is your goal action-oriented and realistic? | Eating fruit (avg 1 cup a day) is realistic |
| On what specific date will you complete or re-evaluate your goal? Is it within the 4-6 week time frame? (For example: When do you hope to achieve your goal or what is the time frame of your goal?) | 13 February |

**STEP 5: OVERCOMING BARRIERS FOR YOUR SMART GOAL**

**Question #4:** List and explain three potential barriers that could prevent you from being successful at achieving SMART goal. **Describe three** corresponding strategies you will incorporate in your life to overcome the barriers you listed. *Please note: A strategy is a careful plan or a plan of action; therefore be specific and practical in how you will overcome your listed barrier.*

|  |  |
| --- | --- |
| Barrier 1: buying the fruit often enough so it doesn’t go bad | Strategy 1: go to store each week |
| Barrier 2: finding a good time to eat the fruit | Strategy 2: with breakfast or between lunch and dinner |
| Barrier 3: choosing which fruit to eat | Strategy 3: bananas and apples |

**Final Instructions: Save as a .pdf (recommended).**

**Upload your assignment to Canvas by the due date.**

**Double check your uploaded document for errors.**