

Healthy Eating Guide for People with Diabetes –

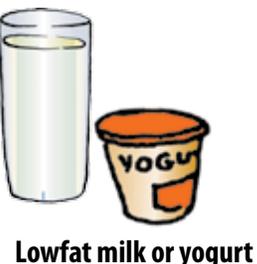
TEACHING GUIDE

This teaching guide is designed for you, a dietitian, diabetes educator or other healthcare professional to use when counseling adults with type 2 diabetes. It is a companion to the patient education handout “Healthy Eating Guide for People with Diabetes.” Both handouts are divided into four sections: Building a Better Plate, Carbohydrate Counting, Weight Matters and Getting Started. This educator’s guide features Practice Pearls and Activity Ideas to make your counseling sessions meaningful and interactive. We recommend that only one section be reviewed with a patient at a time.

Building a Better Plate

Patient Learning Objectives:

1. To describe how the Joslin Healthy Plate can be used as a guide to control carb and calorie intake while promoting nutritionally balanced meal choices.
2. To identify how common foods fit onto the five sections of the plate: nonstarchy vegetables, protein, grains and starchy vegetables, fruits and lowfat milk or yogurt.
3. List examples of foods containing carbohydrate.



Lowfat milk or yogurt

Practice Pearls:

- The typical dinner plate is about 12” in diameter. It is estimated that by using a 10” plate instead, the caloric content of the meal would drop by 22%! Show what this looks like with samples of different sized dinner plates.
- Notice how the Plate on the patient handout is similar to the USDA MyPlate (www.myplate.gov). Point out how diabetes meal planning is similar to meal planning that is recommended for everyone!
- Be prepared to discuss meals that don’t fall into a standard “meat-potato-vegetable” distribution, including combination foods like a sandwich, a beef burrito, vegetarian chili or a chicken-vegetable stir-fry. Help the patient visualize what the Plate might look like if the ingredients were separated.
- Don’t forget to discuss nutritious breakfasts and snacks. They may not easily fit into the “Plate” but the messages of portion and carb control, as well as food groups and variety, still apply.

Activity Ideas:

- For each section of the Plate on the patient handout, ask the patient to put a check mark (✓) next to those foods they enjoy and to cross out (x) those they do not. Ask the patient to name 2-3 additional foods in each section that they enjoy and write them down on the handout.
- Give the patient a white paper plate with the divisions drawn in. Ask them to create a personalized plate plan by writing in foods they think they might eat in the next month. Discuss combination foods. (A non-coated plate is easier to write on with a pen or pencil.)

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Carbohydrate Counting

Patient Learning Objectives:

1. Explain why controlling carbohydrate (carb) intake is important for diabetes control.
2. List four categories of carb foods and identify the serving size of two foods in each category.
3. Explain the relationship between a “carb choice” and “carb grams.”
4. Using a food label, state the portion size to be eaten to yield one carb choice.
5. Plan a day’s worth of menus based on a specific level of carbs at each meal.

Practice Pearls:

- The suggested level of carb choices is just a guide. Discuss and select with the patient a target number of choices for each meal (e.g., 2 at breakfast, 3 at lunch, 4 at dinner). You might also give a range as it relates to grams (25-35 g at breakfast, 40-50 g at lunch, 55-65 g at dinner). Based on a detailed nutrition assessment, a registered dietitian may develop an even more customized meal plan.
- If you suspect the patient may have difficulty with basic calculation skills, keep things simple and only focus on carb choices and not tallying grams.
- Customize the list by writing the serving sizes of several of the patient’s favorite foods directly on the handout.

Activity Ideas:

- Based on an understanding of the patient’s usual intake, write out one day of sample meals. Let the patient write out a second day of sample meals. Have them point out where the carbs can be found at each meal.
- Review meal-planning behaviors at home by having the patient bring in a 3-5 day food diary and identify the carb choices/grams at each meal.
- Keep a variety of food labels – either sample containers or just the labels, organized by food group, in a notebook for easy access. Invite the patient to skim through the label book, identifying favorite foods to discuss for label-reading practice.
- Using food labels or a food-counts book, do some higher-level problem solving by asking questions such as: “If you wanted to use all your lunch carbs on this food, how much could you have?” or “If you’ve already eaten 33- of your 45-gram carb allowance, and you want some milk and cookies, what would you do?”

Converting Carb Grams into Carb Choices

Help your patients use either carb grams or carb choices with this handy chart!

Carb Grams	Carb Choices
0-5	0
6-10	½
11-19	1
20-25	1½
26-34	2
35-40	2½
41-49	3
50-56	3½
57-64	4
65-70	4½
71-79	5

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Weight Matters

Patient Learning Objectives:

1. To describe steps for beginning a sensible, realistic weight management program.
2. To provide suggestions for cutting back on calorie intake and increasing calorie expenditure.

Practice Pearls:

- Initiate a discussion about weight with overweight patients by asking about the patient's overall health concerns. Also, ask the patient if he or she would like to discuss their weight at this time.
- Assess your patient's readiness to lose weight by asking what their weight goals are, what changes they are willing to make in terms of food choices or physical activity, or what kind of help they might need. Provide options for various forms of support, such as weight management programs in the community or Web-based weight management programs.
- With the patient, set a weight goal that's realistic, gradual and sustainable. Consider setting an eating or physical activity goal that's not directly weight-related, as well.
- Discuss simple but effective ways to help the patient get started with weight loss by cutting back on calories. As much as possible, "ask – don't tell" – getting the patient to verbalize changes they are willing to make. Guide them towards making small changes that may have the biggest impact.
- Review the importance of portion awareness, especially weighing and measuring food portions, both initially and periodically. Show patients how to use their hand to estimate portions, too.
- Provide suggestions for lower-calorie foods and recipes to help patients succeed with their meal plans and their weight goals.
- Discuss strategies for dining out, such as deciding ahead of time what to order, sharing an entrée or ordering baked or broiled foods instead of fried.

Activity Ideas:

- Together with the patient, review program materials and/or websites for weight management programs. Discuss the pros and cons of each.
- Observe the patient's measuring skills by having them practice during the counseling session. Keep certain items handy that don't spoil, such as a pitcher of water to practice liquid measurement (ask the patient to pour a 4 fl. oz. serving), a box of cereal (fill a bowl with an amount that is equal to 15 grams of carb) and a box of elastic bands that could represent spaghetti (portion out one cup onto a plate.)
- Provide the patient with food records and request that they record their food intake for at least three days over the upcoming week. Review the records when the patient returns for a follow-up visit. Have the patient circle higher fat and/or higher calorie foods; then, discuss appropriate substitutions or ways to decrease the fat and calorie content of these foods.

Lessons Learned from the National Weight Control Registry

The National Weight Control Registry (NWCR) tracks more than 5,000 people who have lost and kept off a significant amount of weight. Below, to share with your patients, are tips that have made these people "successful losers":

- Eat breakfast every day.
- Weigh yourself once a week.
- Aim to be physically active every day (60 minutes is best, but any amount is beneficial).
- Limit how often you watch television.
- Cut back on calories and fat.
- Join a program to lose weight.

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Helping Patients Get Started

Patient Learning Objectives:

1. Encourage patient to state one lifestyle goal to work on between now and the next visit.
2. Engage patient in listing any barriers that may impede a particular behavior change.
3. State the importance of record keeping (food, activity, blood glucose) for assessing adherence to, and the effectiveness of, the diabetes treatment plan.

Practice Pearls:

- Healthcare providers have a responsibility to assist patients with improving health-related behaviors. Helping patients to set achievable and realistic goals is a key way to facilitate behavior change.
- You and your patient are both experts: the patient is the expert in his or her own diabetes and his or her own life. You are the expert in understanding and explaining diabetes.
- Patient-centered care is based on the principles of *choice* (that the patient has), *control* (they are in charge of which recommendations they will follow) and *consequences* (they live with diabetes every day). You cannot make patients do something they are not ready to do.
- Patients are more likely to make a behavior change if they believe that it is important, that their actions make a difference, and if they are confident in their ability to make the change.
- Resist the urge to cover too much information in a single visit. Patients will be unable to absorb and comprehend more than 1 or 2 concepts. Aim to address nutrition and other diabetes-related topics over several visits. Also, remind patients that learning about diabetes is lifelong.

Activity Ideas:

- When setting goals with the patient, ask: “On a scale of 1 to 10, how confident are you that you can make this change?” “How likely is it that you will make this change?”
- Ask the patient what might help them move from their current level to a higher number on the scale.
- Ask patients to verbalize or list specific barriers and how they might try to overcome them.
- Review food records at each visit. Ask the patient to describe what they’ve noticed about their eating behaviors, either positive or negative, and use this information to refine or reset goals, as needed.

Tips for Enhancing Behavior Change

- Use open-ended questions
- Listen reflectively
- Be empathetic
- Assess knowledge and beliefs
- Assess behaviors
- Assess importance (conviction)
- Assess confidence
- Offer options
- Agree on goals
- Discuss ways to be of further help; provide resources

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