

HUMBA



Healthy Mums and Babies
Study

Handbook for HUMBA
Trainers

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1. Aims of the HUMBA study

The nutritional intervention in the HUMBA trial combines advice on nutrition and physical activity with 'behaviour change techniques' to help pregnant women to develop habits that encourage a healthier lifestyle with the ultimate aim of improving pregnancy outcomes.

The aims of the HUMBA trial are to determine whether participants in the nutrition intervention arms are more likely to:

- Gain less weight during pregnancy compared to the control group
- Improve their diet (learn about healthy foods and drinks) during pregnancy
- Improve levels of physical activity during pregnancy

2. The structure of the HUMBA program

Four individual face-to-face education sessions

Each participant in the intervention group will be scheduled to have an individual face-to-face session with you.

This will be an ideal opportunity for you to tell the woman a bit more about the sessions and what they involve and it will be very important to encourage them and make sure they want to come back!

Women in the intervention arm of the HUMBA study will meet with you for 4 sessions. These sessions are designed to be provided at 2 weekly intervals. All 4 sessions will need to be completed before the women have their OGTT (oral glucose tolerance test) between 26 to 28 weeks gestation.

The first session is expected to be scheduled within a week of recruitment into the program.

On-going support for the women

Women will receive 3 text messages per week once they sign up to participate in the HUMBA demonstration trial through to week 40. The text messages relate to the nutrition and physical activity education topics that are taught at the 4 sessions. The text messages have been designed to remind women about what they have learnt and to encourage them to continue with lifestyle changes.

3. Training

a) Certificate in Pacific Nutrition. Delivered by Pacific Heartbeat, Heart Foundation

The course is run in partnership with Auckland University of Technology (AUT). It is a level 4, 15 credits course delivered in three modules of three days (total of nine days). Graduates are awarded the AUT University Certificate in Pacific Nutrition.

The course is delivered with a hands-on approach to learning that encourages participants to apply knowledge within a group environment at a community level.

Module 1

Introduction of Ottawa Charter for Health Promotion (Part 1)

Food and Nutrition Guidelines for Healthy Adults

The Language of Nutrition

Nutrients

Digestion & Absorption

Healthy Cooking Techniques

Recipe Analysis to Lower Fat, Sugar and Salt Content

Food Labels

Food Safety

Food Cost

Menu Planning

Budgeting & Shopping List

Supermarket Tour

Practical Cooking

Module 2

Food and Nutrition Guidelines for Healthy Older Adults

Heart Health

Diabetes

Obesity

Physical Activity

Tobacco & Alcohol

Adult Learning & Teaching Methods

Module 3

Nutritional Status of Pacific Islands People including Children in NZ

Commonly Asked Questions for Pacific Families

Current Pacific issues Related to Nutrition and Health for Each Life Stage

The Ottawa Charter for Health Promotion (Part 2)

Two of the following:

- Food and Nutrition Guidelines for Healthy Pregnant Women
- Food and Nutrition Guidelines for Healthy Breastfeeding Women
- Food and Nutrition Guidelines for Healthy Infants
- Food and Nutrition Guidelines for Healthy Children

b) Healthy Conversations Skills (HCS)

Healthy Conversation Skills (HCS) Training provides healthcare professionals with invaluable skills to support behaviour change that they can practice every day with their clients.

HCS shows health professionals how to support and empower people to plan for themselves what small steps they could take and to make healthy choices that fit with their lives.

Participants are shown how to approach nutrition and physical activity conversations, create opportunities to discuss health behaviours, use open discovery questions to better understand a client or family's situation and encourage them to set their own goals.

HCS was originally developed by the Medical Research Council Lifecourse Epidemiology Unit at The University of Southampton, and adapted for use in New Zealand. It is usually delivered as a two half day course (8 hours in total). Your training will be 8 hours, but delivered over one day.

c) HUMBA study nutrition training

This one day training will help to prepare you to deliver the HUMBA lifestyle intervention. It will include specific education in relation to nutrition in pregnancy, for example recommended weight gain in pregnancy, energy requirements during pregnancy, managing pregnancy cravings etc. It will also include an update on motivational interviewing and how to take a brief lifestyle assessment.

4. Support for you.

As an HUMBA health trainer, you play a vital role in the success of the programme.

We want to make sure you are supported and that you get the most out of being an HUMBA nutrition health trainer.

The support process for you will involve;

- individual fortnightly professional supervision sessions with the Nutrition supervisor for the first 6 months of the intervention, then monthly sessions thereafter. This will be an opportunity for discussing any queries you have about facilitating, nutrition issues that need more clarification and your own development.
- monthly group continuing education sessions

The Nutrition supervisor will be available on mobile phone contact Tuesday-Thursday to answer any nutrition specific queries that you are unsure of or don't know the answer. Tuesday will be the Nutrition supervisor's day working with the HUMBA team.

The HUMBA Team are;

Principle Investigator

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Project Manager and overseer of the program

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Nutrition supervisor (New Zealand Registered Dietitian)

Deirdre Nielsen

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Research midwives

1. Cecile O’Driscoll: mobile 021 811 211

2. Sarah Va’afusuaga: mobile 021 824 071

Community Health workers (yourselves) as nutrition trainers

1. Eseta Nicholls

2. Kristine Day

3. Mele Faka’osilea

If you have specific queries, you can contact the appropriate member of the HUMBA team.

5. Purpose of this manual and how to use it

This manual will help you to deliver the four HUMBA nutrition education sessions in a systematic way that can be reproduced by others in the future, if appropriate.

It gives you detailed education plans for delivering the four individual face-to-face encounters. The expectation is that you will deliver the education using the plan as your script. You may have slightly different ways of communicating the message from what is detailed in here, which is satisfactory as long as the education points are covered and the learning objective is achieved.

It will also guide you in regards to goal setting and monitoring progress with achievement of goals. For each session you will have a step-by-step plan including a checklist of things you will need e.g. teaching tools, participant resources. It gives reference to resources in the Handbook for Mum, so that you can show woman at the time of the visit.

The **writing in orange doesn't need to be said, but it is an action for you to do or to consider.**

6. Standards of practice

This manual gives you the script for each encounter. The education points have been based on the knowledge you would have gained from your training. It is likely that you will be asked nutrition based questions by the women. You can answer her questions directly if it includes information that you received during your nutrition training. If the question is in relation to a topic that you have not received training on, or you are uncertain of the answer then this is the process to follow;

- inform the woman that you don't know the answer and
- advise her that you will contact your nutrition supervisor and get back to her with the answer and
- contact the nutrition supervisor and relay the question that was asked and await the answer
- make contact with woman with the answer

This is to ensure consistent, correct messages are delivered that protect the safety of the women involved.

If the question(s) are in relation to a topic covered at a future visit, please do not go ahead with the education and advise the woman that you will be covering this topic at visit __ (x) __.

To ensure that the intervention is delivered to a consistent standard, nutrition competency assessments will take place during the intervention. It is likely that these will take place every three months with the nutrition supervisor and each Community Health Worker.

Visit 1: 1-1.5 hours

Summary of topics:

- Introduction
- Weight gain in pregnancy
- Brief diet history and physical activity assessment
- What is a healthy diet during pregnancy?
- Portion control
- Sugary drinks
- Increasing everyday physical activity
- Summary & Goal setting

Resources you need to take with you for this visit:

- Handbook for Mum
- “Is it worth eating”? - how long do I need to walk to burn off the energy (A4 sheet)
- 3D plastic plate with 3 compartments
- Veg It Up! (Sport Waikato, 2010)
- Cheap Eats (NHF)
- Recipes for Large Families, 2nd Ed
- 4 plastic drink bottles with amount of sugar in each
- Laminated Raro packet
- SMARTER Planning for Change laminated A4 sheet
- Whiteboard pen

1.0 Introduction

Learning outcomes: The participant should.....	1.0 Introduce yourself	
Know your name.	<p>Hello <i>(or replace with “hello” in women’s own language if possible)</i> _____ <i>(participants name)</i>. Can I check that I’m pronouncing _____ <i>(participants name)</i> correctly?</p> <p>Acknowledge other family members and find out their names.</p> <p>My name is _____ and I work as a Community Health Worker for the HUMBA research project.</p>	
Feel like they have established rapport with you.	<p>Community Health Workers to do your usual magic here!</p> <p>Thank you for allowing me to come into your home / to meet you, to talk about things that are important for you and your baby.</p>	

1.0 Introduction

Learning outcomes: The participant should.....	1.1 HUMBA trial	Resources
<p>Be reminded about what the HUMBA trial is about.</p>	<p>HUMBA as you may remember stands for <u>H</u>ealthy <u>m</u>UMs and <u>B</u>abies. The aim of the study is to improve your nutrition and to help you control the amount of weight you gain during your pregnancy. As you are aware you have been selected to receive the nutrition and physical activity education. HUMBA is not a diet and will not involve counting the number of calories you are eating. You will be given alternative healthy food and drink suggestions rather than being told not to eat certain foods. The HUMBA trial follows the Ministry of Health healthy eating guidelines for pregnant women. As an added bonus you will be receiving specific education to help you control your weight gain in pregnancy.</p>	
<p>Understand the role of the community health worker.</p>	<p>My role is to provide you with some practical tips and information about healthy eating and physical activity during your pregnancy. I'm also here to support you with your healthy lifestyle changes.</p>	
<p>Review the number of visits that are required and the time duration of these.</p>	<p>I will make four visits during the HUMBA programme. Today's visit is about an hour long, where I will provide you with education about healthy eating and physical activity in pregnancy. Further visits will take about 45 minutes.</p>	
<p>Understand what will happen at each visit.</p>	<p>At each visit I will discuss healthy lifestyle topics with you. We will have a chat about what you think about the information. You can also ask questions. You will find information in your Handbook for Mum. Show and give to woman. It is important that you bring this booklet with you to your visits (if applicable).</p> <p>At the end of each visit I will encourage you to think about what changes you could make for you and your baby and set some goals. A goal is something you want to achieve or do before the next visit.</p>	<p><u>Participant resource:</u> Handbook for Mum</p>

Learning outcomes: The participant should.....	1.2 Probiotics	Resources
Be reassured that the probiotics are safe supplements to take during pregnancy.	How are you getting on with taking your daily probiotic capsules? Just to reassure you that probiotic supplements are considered safe to take in pregnancy. Probiotics are naturally found in our gut and in a range of different foods e.g some yoghurts. Probiotics have been used in other studies of pregnant woman. Have you got any questions you want to ask me about taking these?	Refer women to “Information about probiotics for HUMBA” (given to participant at first visit to midwife)

2.0 Weight gain in pregnancy

Learning outcomes: The participant should.....	2.1 Possible benefits / complications	Resources
Understand the benefits & possible complications to the baby of a healthy and unhealthy pregnancy weight gain.	<p>Your baby is growing in your tummy. Your tummy is your baby’s home. Your home needs to be healthy so it keeps you and baby well. You can help to keep your baby’s home healthy by having healthy foods and drinks. If you keep your baby’s home healthy, then you won’t gain too much weight during pregnancy and your baby won’t grow too big inside its home.</p> <p>Possible benefits to your baby could be a greater chance of:</p> <ul style="list-style-type: none"> • a healthy weight at birth • normal birth • your baby growing up to be a healthy child <p>Research tells us that babies who grow too big inside the womb have a higher chance of becoming stuck in the birth canal during delivery, and a higher risk of developing childhood obesity and consequently adult type 2 diabetes..</p>	
Understand the benefits & possible complications to the mother of a healthy and unhealthy gestational weight gain.	We know that there are possible complications for you if you gain too much weight in pregnancy. This includes pregnancy high blood pressure (known as pre-eclampsia) having a high sugar level in your blood (known as gestational diabetes), needing a caesarean section to deliver your baby and you’re more likely to keep the weight on after baby has been born.	

	<p>If you keep your baby's home healthy, then you won't gain too much weight during pregnancy which could have benefits for you, including;</p> <ul style="list-style-type: none"> • Helping to keeping a normal blood pressure and blood sugar levels • Less complications during birth • Returning to your usual weight more quickly after pregnancy 	
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Learning outcomes: The participant should.....	2.2 Healthy weight gain in pregnancy	Resources
Know what is a healthy weight gain (for BMI >30kg/m ²).	<p>One way we can measure that your baby's home is staying healthy is by weighing you at each of my visits.</p> <p>Research tells us that there is a range of healthy weight gain during your pregnancy. This is 5-9 kg by the time baby is born. By this stage in your pregnancy, this means about 1kg of weight gain per month.</p>	
	2.3 Body weight	Resources
Have her body weight measured.	<p>Measure woman's body weight.</p> <p>Advise her of her weight and write this in the woman's handbook.</p>	<p>Weighing scales</p> <p><u>Handbook for Mum:</u></p>
Be able to see how much weight she has gained compared to the recommended rate of weight gain.	<p>Calculate and record her weight gain and cumulative weight gain on the chart (in woman's handbook). Plot her cumulative weight gain on the graph. See Appendix III for instructions on how to do this. Explain to the woman how her weight gain is tracking compared to the recommended rate.</p>	<p><u>Handbook for Mum:</u> HUMBA pregnancy weight gain chart</p>

3.0 Brief diet history and physical activity assessment

Learning outcomes: The participant should.....	3.1 Brief assessment	Resources
	<p>I would like to know a little about the types of foods you are eating and if you are doing any physical activity. This will help me to understand more about you when giving practical tips.</p> <p>Useful prompt e.g: What do you have to eat and or drink when you wake up? And what about your next meal or snack?</p> <p><i>Follow prompts on diet history template.</i></p> <p>Ending prompt e.g Thank you for telling me a bit more about what you're eating. What about any physical activity? For example walking, gardening,</p>	<p><u>Assessment tool:</u> Brief diet history & physical activity assessment template (in Handbook for Mum)</p>
	<p>The topics we're going to talk about today are;</p> <ul style="list-style-type: none"> - What are healthy foods and meals in pregnancy? - How much to eat in pregnancy? - Sugary drinks and choosing healthier alternatives - Increasing everyday physical activity - Introduction to goal setting 	

4.0 What is a healthy diet during pregnancy?

Learning outcomes: The participant should.....	4.1 Energy equation	Resources
<p>Understand energy in equals energy out equation in relation to body weight</p>	<p>Food provides your body with energy (or fuel). Your body needs this fuel to work, just like a car. If you fill your car up with too much fuel then it spills out of the car. Now think about your body. You don't have an overflow outlet and any extra fuel (food) will go on as fat and increase your weight and also your baby's body weight.</p>	

Learning outcomes: The participant should.....	4.2 Dispelling the “eating for two” myth	Resources
Understand that she doesn't need a lot of extra food during pregnancy.	In spite of the popular belief you don't need to eat for 2 during pregnancy. You may have already had people saying this to you or you may hear it during your pregnancy. The extra energy from food that you need during pregnancy is not very much. At this stage of your pregnancy you only need a little bit extra each day. For someone your size and if you were eating a healthy diet, you only need the equivalent to 2 small apples, or 1 slice of bread extra in total per day.	

4.0 What is a healthy diet in pregnancy cont..?

Learning outcomes: The participant should.....	4.3 Every day foods	Resources
Understand what foods are healthy (every day foods)	<p>Find the Healthy Heart visual food guide in Handbook for Mum. As you talk, indicate the different sections:</p> <p>You need a variety of healthy foods to provide for your growing baby as well as to maintain your own health. These foods come from the following food groups;</p> <ul style="list-style-type: none"> • Vegetables and fruit • Breads, cereals, grains and starchy vegetables • Fish, meat, chicken, legumes and eggs • Milk, yoghurt and cheese <p>We call these foods “every day foods”.</p> <p>Vegetables and fruit: this group includes colours of the rainbow. The vegetables in this group are <u>non-starchy</u>, for e.g. silverbeet, taro leaves, carrots, peas, cabbage, lettuce, mention the vegetables that the women is already eating (if any) from brief diet history.</p>	<p><u>Teaching tool & participants resource (in Handbook for Mum) Healthy heart visual food guide.</u></p>

	<p>Non-starchy vegetables are;</p> <ul style="list-style-type: none"> • low in energy (calories) • high in fibre to keep you full • and provide you and your baby with important vitamins and minerals. <p>It's difficult to put on weight eating lots of these foods. It doesn't matter if they are fresh, frozen, or canned, for e.g. frozen mixed vegetables are just as good as fresh.</p> <p><u>Fruit</u> also have the same goodness as the non-starchy vegetables and also contain some starch (usually called carbohydrate) for energy.</p> <p>Breads, cereals, grains and starchy vegetables: this group includes bread, crackers, breakfast cereals e.g porridge, Weetbix, rice, pasta, topai (or dumplings) and starchy vegetables e.g taro, green banana, potatoes, kumara. These foods provide carbohydrates (sugar and starch), fibre, and nutrients such as B vitamins and minerals. Carbohydrate foods are good for our bodies, as they provide our bodies with energy. However if you eat larger portions than what you need of these foods, then your body weight increases.</p>	
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4.0 What is a healthy diet in pregnancy cont..?

Learning outcomes: The participant should.....	4.3 Every day foods continued....	Resources
	<p>Fish, meat, chicken, legumes and eggs: this group includes all meats (white and red) & fish, including canned fish. Legumes include foods like lentils, baked beans, kidney beans, and dahl. This group of foods are important protein foods needed for growth & repair and provide you with minerals, for example iron.</p> <p>Milk, yoghurt and cheese: These foods provide you and your baby with protein and calcium. There are lower fat options in this food group, which can help you manage your weight.</p>	
<p>Know what foods to eat the most, eat some of and eat least of.</p>	<p>Indicate the different sections using the resource:</p> <p>We should;</p> <p>Eat the most from fruit and vegetables</p> <p>Eat some from;</p> <ul style="list-style-type: none"> - breads, cereals & starchy vegetables - fish, meat, chicken, legumes and eggs - milk, yoghurt and cheese <p>Cut back on junk foods, high fat takeaways, foods and drinks high in sugar, salt and fat.</p> <p>You may want to share this picture with the rest of your family as this is good healthy eating for them as well.</p>	
Learning outcomes: The participant should.....	4.4 Sometimes foods	Resources
<p>To understand what foods are unhealthy (sometimes foods)</p>	<p>Foods that have a lot of fat and/or sugar in them are called “sometimes foods”. Sometimes foods shouldn’t be eaten every day, but instead, eaten now and again, e.g. a small amount once a week as a treat. The reason for this is that these foods have a lot of fuel in them, so can easily lead to weight gain. These foods include foods like cakes, chocolates, deep fried foods (e.g. takeaways), biscuits, potato chips etc.</p> <p>Show “Is it Worth Eating” resource: To give you an idea of how much fuel there is in these foods, these pictures here show how</p>	<p><u>Teaching tool:</u></p> <p>“Is it worth eating”? - how long do I need to walk to burn off the energy (A4 sheet).</p>

	<p>much walking you would need to do to burn off that particular food. For example if you eat a meat pie, you would need to do just over 1 ½ hours of walking to stop you from putting weight on.</p> <p>Choose another example if time.</p>	
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5.0 Portion control

Learning outcomes: The participant should.....	5.1 Healthy Plate Model	Resources
<p>Understand the healthy plate model.</p>	<p>If your portion sizes are too large, you will gain too much weight. A useful way to think about your main meal (lunch and/or dinner) is the healthy plate model.</p> <p>Get out 3D portioned plastic plate: You can see that this plate is split into 3 sections. This plate shows you how much you should be eating of certain foods. Half of the plate should be filled with non-starchy vegetables or salad. Frozen vegetables are just as good as fresh vegetables. Buy in season vegetables and go to the markets if you can to pick up some good deals.</p> <p>A quarter of the plate is for meat, chicken, fish, eggs, dried peas and beans. This should be the palm size portion of your hand only (show palm size portion on your hand).</p> <p>The other quarter of the plate shows you the portion for your carbohydrate foods, for example; starchy vegetable e.g taro, or green banana, or potato or bread or cereal grains e.g rice or pasta. Aim to give a carbohydrate example from what they are currently eating. The size of your fist (show your closed fist) is the best way to know the right amount for you.</p> <p>This plate picture is also found in your handbook – show this.</p> <p>Some meals don't really follow the 3 sections shown here, for example stir-fry's, curry, chop suey, stews. Make sure you have about a fist size of carbohydrate food and if you can see lots of colours of the rainbow on your plate, you know that you'll have the balance right. This means you should see lots of non-starchy vegetables on your plate.</p> <p>Veg It Up: This resource gives you some further ideas on how you can add more vegetables into your day.</p>	<p><u>Teaching tool and participant resource to give out:</u> 3D plastic plate with 3 compartments</p> <p><u>Handbook for Mum:</u> Living Lifewell plate</p> <p><u>Participant resource to give out:</u> Veg It Up! (Sport Waikato, 2010)</p>

5.0 Portion control cont...

Learning outcomes: The participant should.....	5.2 Regular meals	Resources
<p>Understand the importance of eating three meals per day.</p>	<p>It is important that you try to eat three meals each day and don't skip meals. So what this means is eating breakfast, lunch and dinner. Remember that your body is like a car. A car needs a regular supply of fuel to make it go. Your body also needs regular fuel up's, to give you the energy you need for each day.</p> <p>So it's important that you don't skip meals. If you skip a meal you are more likely to graze on food and/or eat a larger portion size at the next meal (as you have become so hungry). As a result of this you are more likely to gain more weight than you want to.</p> <p>Check brief diet history template; offer the following suggestions if not eating breakfast;</p> <p>If you're not used to eating breakfast, a good starting point would be something small for example; a piece of fruit, or a glass of milk, or a slice of bread, or a small portion of taro or green banana.</p> <p>If you don't feel like eating breakfast first thing when you get up in the morning, have breakfast a little later e.g. at work or after dropping your children off at school / kindy.</p>	
<p>Be aware of practical meal options they could include for breakfast, lunch and dinner.</p>	<p>I have some healthy meal ideas that you can try – these are found in your handbook: show this.</p> <p>I also have some recipes that are suitable for you and your family. These are also found in your handbook – show these</p> <p>I also have some recipe booklets to give you to keep.</p>	<p><u>Handbook for Mum:</u> HUMBA meal ideas</p> <p><u>Handbook for Mum:</u> Vegetarian delish dishes; VegUp with 5+ A day (Pacific flavours); VegUp with family Maori meals; VegUp with 5+ A Day (family meals); Sensational soups</p> <p><u>Participant resource to give out:</u></p> <ul style="list-style-type: none"> • Cheap Eats (NHF) • Recipes for Large Families, 2nd Ed

5.0 Portion control cont..

Learning outcomes: The participant should.....	5.3 Managing morning sickness	Resources
	<p>Check brief diet history;</p> <ul style="list-style-type: none"> • if woman reports no nausea and or vomiting go to SoP number 6.0 • if woman reports nausea and or vomiting say the following; <p>Because you are experiencing some nausea and/or vomiting I have some suggestions that may help to manage your symptoms;</p> <ul style="list-style-type: none"> • Small amounts of food are usually better tolerated than eating very large meals. Try to eat 3 meals and include 3 small snacks each day (mid-morning, mid-afternoon and before bed). • Usually dry foods are better tolerated for example you could try 1 slice of dry toast or 2-3 small crackers. • Keep up with your fluids – water is the best drink. Drink small amounts often throughout the day as lack of fluid can make nausea worse. • Avoid fatty or spicy foods. <p>If the smell of hot food worsens nausea, consider asking for help from family and friends to help with the cooking.</p>	

6.0 Sugary drinks

Learning outcomes: The participant should.....	6.1 Sugar content in drinks	Resources
	<p>Look at woman's brief diet history.</p> <ul style="list-style-type: none"> - If all her drinks are sugar free, then say the following; I can see that you're not currently drinking any sugary drinks, have I got this right? I have some information about the amount of sugar in drinks, would you like to hear about this? If yes then continue. If no then skip to 7.0 - If some or all of her drinks contain sugar, then continue below; <p>Some drinks contain a lot of sugar. It is easy to put on weight with sugary drinks. They will not provide you and your baby with the nutrients you both need. I would like to show you how much sugar is in a variety of drinks.</p>	
<p>Be aware that some drinks contain high quantities of sugar and this can lead to unhealthy weight gain.</p>	<p>Show the Starz bottle. Starz fizzy drink has 10 teaspoons of sugar. It is like adding 10 teaspoons of sugar into your drink! It's a lot isn't it?</p> <p>Show the orange juice bottle. In this orange juice there are 10 teaspoons of sugar.</p> <p>Show the Sprite bottle. In this small bottle there are 7 ½ teaspoons of sugar. If you need to have a fizzy drink then the best choice is a diet / zero variety because they don't have any sugar in them. Show Sprite Zero bottle For example in this Sprite Zero bottle there is no sugar.</p> <p>Show the Raro cordial packet. In one glass (200mL) there are 3 ½ teaspoons of sugar.</p>	<p><u>Teaching tools:</u> 4 empty drink bottles with the amount of sugar in each one. Laminated Raro cordial packet.</p>

6.0 Sugary drinks cont..

Learning outcomes: The participant should.....	6.1 Sugar content in drinks cont....	Resources
<p>Understand what the best fluid choices are during pregnancy to limit gestational weight gain.</p>	<p>The best drink for you during pregnancy is water, fruit teas, or low fat milk. You can see in this bottle of water there is no sugar – show water bottle.</p> <p>Here's some ideas on how to make water an appealing option;</p> <ul style="list-style-type: none"> • keep water chilled in the fridge • add a slice of orange or lemon to give water a bit of tang • add a few ice cubes made from fruit juice into your water • freeze small chunks of fruit in ice cubes and add these into your water <p>You have further information about drinks in your handbook - show this.</p>	<p><u>Teaching tool:</u> 1 empty water bottle</p> <p><u>Handbook for Mum:</u> How much sugar do you drink?</p>
<p>Understand that added sugar into drinks can lead to unhealthy weight gain.</p>	<p>Adding sugar into your drinks and foods will also put weight on. To help keep a healthy weight aim to reduce the number of teaspoons that you add. For example if you are currently adding 2 teaspoons, aim to reduce this to 1 teaspoon. You may be able to reduce it down more as time goes on. The other option is using an artificial sweetener which will make the drink or food taste sweet, but it won't put any weight on. The artificial sweeteners that you can use in pregnancy are in your handbook - show this</p>	<p><u>Handbook for Mum:</u> Reduce added sugar</p>

7.0 Increasing everyday physical activity

Learning outcomes: The participant should.....	7.1 Physical activity during pregnancy	Resources
<p>Be aware about the benefits of physical activity during pregnancy.</p>	<p>Physical activity means moving your body – using your muscles. Walking is a very good physical activity. You may be wondering how pregnancy and childbirth will affect what you can do from a physical activity perspective. Moderate physical activity taken regularly during pregnancy is safe and beneficial for pregnant women. Physical activity can help you stay as healthy as possible. It can help you to feel well and relaxed during pregnancy and labour and speed your recovery after the birth.</p>	
<p>Know what the HUMBA recommendation is for physical activity.</p>	<p>To achieve the HUMBA goal of keeping you and baby healthy, we aim for you to be moving at least 3 days a week for 30 minutes. If you can do 5 days a week then that's even better. You don't have to do the 30 minute session in one go, you can break it up into smaller 10-minute sessions. If you're not active at the moment, then start gently and gradually build it up - for example start with 10 minutes three times a week. Make sure you have comfortable shoes to move in.</p>	
<p>Be aware of ways that they can be more active every day.</p>	<p>You may already have some ideas on what types of activities you can do during pregnancy. You don't need to do anything strenuous to get the benefits. To give you some ideas; walking, dancing to music, playing with your children, swimming, yoga. Walking is an activity you can add in to your day. For example you may start walking your children to and/or back from school or kindy, go out for a 10 minute walk with a friend or relative, or walk around when talking on the telephone.</p> <p>How about playing some games in the park or garden with the whanau, or hide the remote control and move in the ads. There are many options and these are in your handbook – show this. How do you think you could be more active?</p>	<p><u>Handbook for Mum:</u> Tips and ideas for adding movement to your life.</p>

8.0 Summary & Goal setting

Learning outcomes: The participant should.....	8.1 Summary	Resources
	<p>We've covered many topics today, including;</p> <ul style="list-style-type: none"> • making sure that you are regularly eating everyday foods and limiting sometimes foods • eating three meals per day • following the healthy plate model • swapping sugary drinks for sugar free drinks • increasing everyday physical activity 	

Learning outcomes: The participant should.....	8.2 Goal setting	Resources
<p>Be aware of the purpose of setting goals.</p>	<p>To help you have a healthy home for your baby to live in for your pregnancy it is important to think about making some small changes that you can do with your food, or drinks or your physical activity. Making your home a healthy one can take a bit of time. Talking about what you would like to change by setting yourself some goals can help you to put the change into action. You can think of a goal like a prize at the top of the mountain. To get to the prize at the top of the mountain you need to make small steps to get up to the top. You can't just go from the ground straight to the top.</p>	
<p>Be aware of what a SMARTER goal means.</p>	<p>Each goal needs to be something that you think you can achieve, and a good way to think about setting goals is by making sure your goals are what we call SMARTER. Show in handbook. S: Specific, M: measurable, A: action-orientated, R: realistic, T: timed E: evaluated, R: reviewed.</p> <p>There is an example of a SMARTER goal in your handbook – talk through SMARTER Planning for Change example if time allows.</p>	<p><u>Handbook for Mum:</u> Setting SMARTER goals</p>

8.0 Summary & goal setting cont..

Learning outcomes: The participant should.....	8.2 Goal setting cont....	Resources
Have some personal lifestyle related SMARTER goal(s)	<p>Using open discovery questions (from Healthy Conversations Skills) help women explore and identify 3 SMARTER lifestyle goals (3 dietary changes, or 2 dietary and 1 physical activity related). Use the laminated SMARTER Planning for Change sheet to help develop each goal.</p> <p>Assist women to write their goals into their handbook. If they can't manage this, then please write them into their handbook.</p>	<p>SMARTER Planning for Change laminated sheet & whiteboard pen.</p> <p><u>Handbook for Mum:</u> Visit 1. My goals are:</p>
Be aware of what to fill in to monitor their progress towards achieving their goals.	<p>To help you keep track of how you're doing with achieving your goals, there is a page in your handbook called 'progress to my goals'. You fill this in between my visits. Don't worry if you don't achieve what you aim for. The most important thing is that you are giving it a go. When we meet again we can see how you got on.</p>	<p><u>Handbook for Mum:</u> Progress to achieving my goals</p>

Visit 2: 45 minutes

Summary of topics

Introduction and review goals
 Body weight
 Label reading
 Swapping snacks
 Keeping active throughout the day
 Summary and goal setting

Resources you need to take with you for this visit:

Weighing scales
 Label reading example 1 & 2 (2 A4 sheets)
 Label reading keyring fob
 Unhealthy snacks (A4 sheet)
 Healthy snacks (A4 sheet)
 SMARTER Planning for Change (laminated sheet) and whiteboard marker pen

9.0 Introduction and review goals

Learning outcomes: The participant should.....	9.1 Introduction & review goals from visit 1	Resources
	<p>Engage in rapport building conversation.</p> <p>Today I will see how you're getting on with your goals & weigh you. The topics we're going to talk about today are;</p> <ul style="list-style-type: none"> - how to read food labels - healthy snack ideas - keeping active throughout the day 	
<p>Have had their goal(s) from visit 1 reviewed.</p>	<p>So let's review your goals from your last visit. Can you remind me what your goals were? / or let's have a look at what your goals were from your last visit.</p> <p>Using open discovery questions in a healthy conversations style identify the woman's progress towards achieving their goal(s), what were their barriers to change and congratulate success.</p> <p>E.g. a useful prompt could be: "How did you get on with".....(state the first goal in the women's workbook).</p> <p>Go through each goal, using open discovery questions to identify progress with achieving goals, barriers to change, congratulate success.</p> <ul style="list-style-type: none"> • If the woman has achieved their goal, suggest they continue with that goal as it is or add something new to it to make it more of a challenge. If a goal is adapted, write the new goal into visit 2's goals. 	<p><u>Handbook for Mum:</u></p> <ul style="list-style-type: none"> • Visit 1. My goals are: • Progress to achieving my goals

9.0 Introduction and review goals cont..

Learning outcomes: The participant should.....	9.1 Introduction & review goals from visit 1 cont...	Resources
	<ul style="list-style-type: none"> If the goal has been partly achieved, praise the effort the woman has made and help them identify their barriers to achieving their goal. If the woman has not attempted or not achieved a goal, try not to condone, criticise or show displeasure at their reasons. 	

10.0 Body weight

Learning outcomes: The participant should.....	10.1 Body weight	Resources
Have her body weight measured.	<p>Measure woman's body weight.</p> <p>Advise her of her weight and write this in the woman's handbook.</p>	<p>Weighing scales</p> <p><u>Handbook for Mum</u></p>
Be able to see how much weight she has gained compared to the recommended rate of weight gain.	<p>Calculate and record her weight gain and cumulative weight gain on the chart (in woman's handbook). Plot her cumulative weight gain on the graph. See Appendix III for instructions on how to do this.</p> <p>Explain to the woman how her weight gain is tracking compared to the recommended rate.</p>	<p><u>Handbook for Mum:</u> HUMBA pregnancy weight gain chart</p>

11.0 Label reading

Learning outcomes: The participant should.....	11.1 Label reading	Resources
Understand that fatty and sugary foods can lead to weight gain, therefore these foods need to be limited.	Fatty and sugary foods have a lot of fuel in them, so it's easy to gain weight eating these foods. Eating foods that are lower in fat and sugar helps to keep our and babies weight at a good level.	

11.0 Label reading cont..

Learning outcomes: The participant should.....	11.1 Label reading cont...	Resources
Be aware that label reading can help them to choose healthier foods.	A useful way to make sure you're choosing low fat and sugar foods is by looking at the label on the packaging of the food.	
Have an awareness of what nutrients are important to look at on a nutrition information panel.	Some foods will have a nutrition information label. Here is an example of a nutrition information label. The label gives you information about what's in the food. To help you not put on too much weight during your pregnancy the important nutrients to look at are fat and sugar. Let's find these on this label. Here is fat (show "total fat" on the example). It is called "total fat". Sugar is under carbohydrate and stated as "sugars" (show "sugars" on the example).	<u>Teaching tool:</u> Label reading example 1.
Know what the recommendations are for choosing a low fat, low sugar and high fibre food.	<p>When you are comparing different foods it is important that you look in the "per 100 gram column" (show per 100g column on the example). Don't look in the per serving column (show "per serving" column).</p> <p>A low fat food is one that has less than 10 grams of fat per 100 grams. Let's have a look at this example here. I find "total fat" and I follow this row along with my finger until I reach the per 100 gram column (show this on the example). This food has 1.6 grams of fat per 100 grams. 1.6 is less than 10, so this means it is a low fat food.</p> <p>A low sugar food is one that has less than 15 grams of sugar per 100 grams. Let's continue having a look at this label. I find "sugars" and I follow this row along with my finger until I reach the per 100 gram column (show this on the example). This food has 5.9 grams of sugar per 100 grams. 5.9 is less than 15, so this means that this food is low in sugar.</p> <p>A food that is low in fat and low in sugar, means that it can be eaten every day. It is likely to contain many good nutrients in it and will help you to limit your weight gain in pregnancy.</p> <p>So even though this food is an everyday food, it is important not to over eat as any food eaten in excess will cause too much weight gain. You still need to watch the quantity you eat!</p>	<u>Teaching tool:</u> Label reading example 1

<p>Know what the recommendations are for choosing a low fat, low sugar and high fibre food</p>	<p>It is also useful to look at the amount of fibre a food has. Fibre helps your bowels and can help to stop getting constipated. Fibre also helps to fill you up so you don't get too hungry in-between meals. It may say "fibre" or "dietary fibre" on the label (show "dietary fibre" on the example). A high fibre food is one that has more than 5 grams of fibre per 100 grams. Let's have a look at this example here. I find "dietary fibre" and I follow this row along with my finger until I reach the per 100 gram column (show this on the example). This food has 6.2 grams of fibre per 100 grams. 6.2 is more than 5, so this means this food is high in fibre. So this food is also going to keep you full.</p>	<p><u>Teaching tool:</u> Label reading example 1</p>
<p>Be able to read a food label with some assistance</p>	<p>Let's look at one other example. Can you help me with this one? Let's look at total fat first. Can you find total fat for me? And can you find the 100 gram column? Follow the total fat row across until you reach the per 100 gram column. How much fat does it contain? If the participant comes up with the wrong answer, show them how to get to the correct answer. So it contains 27.3 grams of fat. Can you remember what the recommendation is for a low fat product? That's right, it's less than 10 grams of fat. If participant doesn't know the answer, don't condone but advise the correct answer in an encouraging manner. So 27.3 grams is more than 10, so this food is high in fat.</p> <p>Next is sugar: Follow this row across until you reach the per 100 gram column. It contains 6.5 grams of sugar. Can you remember what the recommendation is for a low sugar food? Less than 15 grams of sugar per 100g. 6.5 is less than 15, so this is a low sugar food.</p> <p>So this food is high in fat and low in sugar – do you think this would be a food to eat everyday or only as a treat? Answer = treat. This food has lots of fuel in it, because of the high fat content. This will cause you to gain too much weight. So you should only eat it in a small portion now and again. There is no information about fibre for this food. It doesn't mean that it doesn't have any but not all foods need to add this information onto the label.</p> <p>Not all foods will have a detailed label like this on them, for example fresh foods, fruit and vegetables, foods you may buy that have been bought in from another country. I have a useful keyring fob that will help remind you of the numbers to aim for when you are doing your food shopping. You also have a summary in your handbook too.</p>	<p><u>Teaching tool:</u> Label reading example 2.</p> <p><u>Participant resource to give out:</u> Label reading keyring fob</p>

12.0 Swapping snacks

Learning outcomes: The participant should.....	12.1 Inclusion of snacks	Resources
Understand that it is likely they will need to include snacks in-between meals in the 2 nd and 3 rd trimester of pregnancy.	Snacks can be included on the HUMBA programme. Snacks can be eaten in-between meals. What this means is a snack between breakfast and lunch, and between lunch and dinner.	
Have an understanding of what are unhealthy snacks and healthy snack alternatives that they can include.	<p>It is likely that you'll gain too much weight if you are eating higher fat and / or sugary snacks for example foods like chocolate, potato chips, pies, biscuits, cakes etc. Show unhealthy snack sheet.</p> <p>These foods have too much fuel in them that your body and baby doesn't need.</p> <p>So while you are in the HUMBA programme I will be encouraging you to include lower fat and sugar snacks. Show healthy snack sheet. Healthy snacks have just the right amount of fuel in them for you and your baby, which means both of you won't gain too much weight.</p> <p>I have some more suggestions for suitable snack options that you can eat during the HUMBA programme. These options are low in fat and sugar. Show this resource in the woman's handbook.</p>	<p><u>Teaching tool:</u> Unhealthy snacks</p> <p><u>Teaching tool:</u> Healthy snacks</p> <p><u>Handbook for Mum:</u> Tasty healthy snacks</p>

13.0 Keeping active throughout the day

Learning outcomes: The participant should.....	13.1 Move more, add more steps	Resources
Be reminded about the HUMBA goal for physical activity.	The HUMBA goal to help you have a healthy you and baby, is to aim to be active 3 days a week for 30 minutes. If you can do 5 days a week then that's even better. You don't have to do the 30 minute session in one go, you can break it up into smaller 10-minute sessions. If you aren't active at the moment, then starting with 10 minutes three times a week will help.	

13.0 Keeping active throughout the day cont..

Learning outcomes: The participant should.....	13.1 Move more, add more steps cont...	Resources
Be aware of ways that they can move more in the day	<p>There are all sorts of ways that you can be more active in a day. You can build some activity into your daily routine. I'm going to talk about some ideas for how to add some more steps into your day. If you use public transport then how about getting off one stop sooner than your normal stop and walking? You'll be able to get some extra steps added into your day this way. How about hiding TV remote and instead of channel surfing in the adds, get up and walk around the house or garden? Remember that the extra steps that you can do will add up to help you and your baby's health now and for the future.</p>	<p><u>Handbook for Mum:</u> Move more, add more steps</p>

14.0 Summary & Goal setting

Learning outcomes: The participant should.....	14.1 Summary	Resources
	<p>The topics that we've discussed today are:</p> <ul style="list-style-type: none"> • Choosing low fat, low sugar and high fibre foods by reading the labels • Choosing healthy snacks • Keeping active throughout the day 	

Learning outcomes: The participant should.....	14.2 Goal setting	
Have some personal lifestyle related SMARTER goal(s)	<p>Using open discovery questions (from Healthy Conversations Skills) help women explore and identify 3 SMARTER lifestyle goals (3 dietary changes, or 2 dietary and 1 physical activity related). Use the laminated SMARTER Planning for Change sheet to help develop each goal.</p> <p>Assist women to write their goals into their handbook. If they can't manage this, then please write them into their handbook.</p> <p>Remember to keep track of how you're getting on with your goals, by filling in 'progress to achieving my goals' in your handbook.</p>	<p>SMARTER Planning for Change laminated sheet and whiteboard pen</p> <p><u>Handbook for Mum:</u> Visit 2. My goals are:</p>

Visit 3: 45 minutes

Summary of topics:

Introduction and review goals
 Body weight
 Takeaways and healthier alternatives
 Meal planning
 Cravings
 Summary and goal setting

Resources you need to take with you for this visit:

Weighing scales
 Weekly menu planner (laminated sheet)
 SMARTER Planning for Change (laminated sheet) and whiteboard marker pen

15.0 Introduction & review goals

Learning outcomes: The participant should.....	15.1 Introduction and review goals from visit 2	Resources
	<p>Engage in rapport building conversation.</p> <p>Today I will see how you're getting on with your goals and weigh you. The topics we're going to talk about today are;</p> <ul style="list-style-type: none"> - Takeaways and healthier alternatives - Meal planning - How to manage pregnancy cravings 	
<p>Have had their goal(s) from visit 2 reviewed.</p>	<p>So let's review your goals from your last visit. Can you remind me what your goals were? / or let's have a look at what your goals were from your last visit.</p> <p>Using open discovery questions in a healthy conversations style identify the woman's progress towards achieving their goal(s), what were their barriers to change and congratulate success.</p> <p>E.g. a useful prompt could be: How did you get on with(state the first goal in the women's workbook).</p> <p>Go through each goal, using open discovery questions to identify progress with achieving goals, barriers to change, congratulate success.</p> <ul style="list-style-type: none"> • If the woman has achieved their goal, suggest they continue with that goal as it is or add something new to it to make it more of a challenge. If a goal is adapted, write the new goal into visit 3's goals. 	<p><u>Handbook for Mum:</u></p> <ul style="list-style-type: none"> • Visit 2. My goals are: • Progress to achieving my goals

Learning outcomes: The participant should.....	15.1 Introduction and review goals from visit 2	Resources
	<ul style="list-style-type: none"> • If the goal has been partly achieved, praise the effort the woman has made and help them identify their barriers to achieving their goal. • If the woman has not attempted or not achieved a goal, try not to condone, criticise or show displeasure at their reasons. 	

16.0 Body weight

Learning outcomes: The participant should.....	16.1 Body weight	Resources
Have her body weight measured.	<p>Measure woman's body weight.</p> <p>Advise her of her weight and write this in the woman's handbook.</p>	<p>Weighing scales</p> <p><u>Handbook for Mum</u></p>
Be able to see how much weight she has gained compared to the recommended rate of weight gain.	<p>Calculate and record her weight gain and cumulative weight gain on the chart (in woman's handbook). Plot her cumulative weight gain on the graph. See Appendix III for instructions on how to do this. Explain to the woman how her weight gain is tracking compared to the recommended rate.</p>	<p><u>Handbook for Mum:</u> HUMBA pregnancy weight gain chart</p>

17.0 Takeaways and healthier alternatives

Learning outcomes: The participant should.....	17.1 Takeaways & healthier alternatives	Resources
<p>Be aware that most “food safe” takeaway choices are high in fat.</p>	<p>Look at woman's brief diet history;</p> <ul style="list-style-type: none"> - If she doesn't eat takeaways or includes healthy takeaway options, then say the following; when I first met you, you weren't eating high fat takeaways. What about at the moment? I have some information about the healthy takeaways, would you like to learn about this? If yes then continue. If no then skip to 18.0 <p>OR - If she includes high fat takeaways, then continue below;</p> <p>Fast foods are often high in fat and therefore high in fuel. This means that eating takeaways too often or in large quantities can result in weight gain. Takeaway foods can also be less filling than other foods, so more needs to be eaten to fill up. Takeaway food should be considered a treat and not an everyday food. This means that it is best for you and your baby not to have takeaways more than once a week (less than this is better).</p> <p>If you are having takeaways then this page in your handbook shows you some healthier options. Show this.</p>	<p><u>Handbook for Mum:</u> Choose Healthy Kai when eating out</p>
<p>Have some quick and easy meal ideas for home cooked meals instead of takeaways</p>	<p>With a little planning it is possible to prepare homemade alternatives to takeaways. These can be healthier and cheaper than the shop bought options.</p> <p>e.g. chicken and oven baked chips with a salad crumbed fish and oven baked chips with frozen vegetables homemade burgers hot potatoes with topping e.g tuna, baked beans, cheese pita bread pizza</p> <p>You will find other ideas and recipes in the recipe booklets that I gave to you at your first visit.</p>	

18.0 Meal planning

Learning outcomes: The participant should.....	18.1 What is meal planning?	Resources
Have some meal recipe ideas.	To help you cook more meals at home I have some recipes that are suitable options for you, baby and your family.	
Be aware about the benefits of meal planning.	To help you to cook more meals at home it is a good idea to think about planning your meals. You may prefer to plan a week ahead or at the start of each day. If you have an idea about what you're going to be eating each day, you are less likely to go and buy the easiest options which are high in fat & sugar. Once you have planned your meals, you can write down the things you need before you go food shopping. This helps you to save money as it will help you not to buy unnecessary extras while shopping.	
Have a template to write down meals for the week.	I have a meal planning card that you can take and use. You may want to plan your meals by yourself or involve your family.	<u>Participant resource to give out:</u> Laminated weekly menu planner

19.0 Cravings

Learning outcomes: The participant should.....	19.1 What is a food craving?	Resources
Understand that food cravings can be a normal part of pregnancy.	<p>You may have already experienced some food cravings during pregnancy. Cravings are when you have a strong urge to eat a particular food or drink. During pregnancy, cravings are normal, although we don't fully understand why some women experience them.</p> <p>When we have a craving it doesn't mean that our bodies are lacking in any particular nutrients, it is usually our brain telling us that we are not happy about something. For example you may be feeling bloated, tired, bored, sad, so your mind thinks that by eating certain foods you'll feel better. Usually the fatty, sugary, & salty foods are craved for during pregnancy and eating too many of these "sometimes" treat foods can lead to too much weight gain for you and baby.</p>	

19.0 Cravings cont..

Learning outcomes: The participant should.....	19.1 What is a food craving? cont.....	Resources
<p>Be aware of their own triggers for eating (when not hungry) e.g boredom, stress etc...</p>	<p>We eat to make ourselves feel better. This works for a short while, but does not solve the problem. For example, a common reason why women may eat food is because they are feeling tired.</p> <p>Useful prompt:</p> <p>Can you think of some possible reasons why you may eat when you're not actually hungry?</p>	
Learning outcomes: The participant should.....	19.2 How to manage food cravings	Resources
<p>Have some solutions for managing non-hungry eating.</p>	<p>If you are experiencing a craving, I have a few suggestions for you to try;</p> <ul style="list-style-type: none"> • Aim to eat three meals a day and one small snack in-between meals. The purpose of this is to stop you from getting too hungry in between meals. • Try to distract yourself for 15 minutes. For example phoning a friend, going for a short walk, playing a game with your children. It may be hard to believe, but often the craving will pass without the need to eat. • Try replacing the unhealthy food or drink for a healthier alternative. • Have a sugar free drink – sometimes you may find that you are actually thirsty and not actually hungry. • Try and eat your meals and snacks away from the screen. Research tells us that if we eat meals or snacks while doing something on the computer, mobile phone or watching television, we are more likely to want snacks later on. 	<p><u>Handbook for Mum:</u> Pregnancy cravings</p>

19.0 Cravings cont..

Learning outcomes: The participant should.....	19.3 Mindful Eating	Resources
Be aware of what mindful eating is and how this can help reduce calorie intake.	<p>If, after 10-15 minutes you can't do without the food then practice mindful eating. What this means is taking more notice about what you're eating. Take small bites only and eat slowly. The main aim of this is to really enjoy the taste of the food while it's in your mouth because once you've swallowed it you don't taste it any longer. The longer you keep the food in your mouth, the more you'll actually taste it and you'll keep the flavor in your mouth for a longer time too. This is very different to how we would normally eat foods we crave – these are often eaten very quickly.</p> <p>So next time you find yourself in this situation, aim to eat the food at a slower pace.</p>	

20.0 Summary and goal setting

Learning outcomes: The participant should.....	20.1 Summary	Resources
	<p>The topics that we've discussed today are:</p> <ul style="list-style-type: none"> • Fat content of takeaways • Quick and easy healthy meals you can prepare at home • Planning your meals • What to do when you crave unhealthy foods 	
Learning outcomes: The participant should.....	20.2 Goal setting	Resources
Have some personal lifestyle related SMARTER goal(s)	<p>Using open discovery questions (from Healthy Conversations Skills) help women explore and identify 3 SMARTER lifestyle goals (3 dietary changes, or 2 dietary and 1 physical activity related). Use the laminated SMARTER Planning for Change sheet to help develop each goal. Assist women to write their goals into their handbook. If they can't manage this, then please write them into their handbook.</p>	<p>SMARTER Planning for Change laminated sheet and whiteboard pen</p> <p><u>Handbook for Mum:</u> Visit 3. My goals are:</p>

Visit 4: 45 minutes

Summary of topics:

Introduction and review goals
 Body weight
 Healthy cooking
 Keeping active through leisure activities
 Maintaining behaviour changes
 Summary and goal setting

Resources you need to take with you for this visit:

Weighing scales
 SMARTER Planning for Change (laminated A4 sheet) and whiteboard marker pen

21.0 Introduction and review goals

Learning outcomes: The participant should.....	21.1 Introduction and review goals from visit 3	Resources
	<p>Engage in rapport building conversation.</p> <p>Today I will see how you're getting on with your goals & weigh you. The topics we're going to talk about today are;</p> <ul style="list-style-type: none"> - Ways to reduce fat intake when cooking - Keeping active through leisure activities - How to keep the changes going in the future 	
<p>Have had their goal(s) from visit 3 reviewed.</p>	<p>So let's review your goals from your last visit. Can you remind me what your goals were? / or let's have a look at what your goals were from your last visit. Using open discovery questions in a healthy conversations style identify the woman's progress towards achieving their goal(s), what were their barriers to change and congratulate success. E.g. a useful prompt could be: How did you get on with(state the first goal in the women's workbook). Go through each goal, using open discovery questions to identify progress with achieving goals, barriers to change, congratulate success.</p> <ul style="list-style-type: none"> • If the woman has achieved their goal, suggest they continue with that goal as it is or add something new to it to make it more of a challenge. If a goal is adapted, write the new goal into visit 4's goals. • If the goal has been partly achieved, praise the effort the woman has made and help them identify their barriers to achieving their goal. <p>If the woman has not attempted or not achieved a goal, try not to condone, criticise or show displeasure at their reasons.</p>	<p><u>Handbook for Mum:</u></p> <ul style="list-style-type: none"> • Visit 3. My goals are: • Progress to achieving my goals

22.0 Body weight

Learning outcomes: The participant should.....	22.1 Body weight	Resources
Have her body weight measured.	<p>Measure woman's body weight.</p> <p>Advise her of her weight and write this in the woman's handbook.</p>	<p>Weighing scales</p> <p><u>Handbook for Mum</u></p>
Be able to see how much weight she has gained compared to the recommended rate of weight gain.	<p>Calculate and record her weight gain and cumulative weight gain on the chart (in woman's handbook). Plot her cumulative weight gain on the graph. See Appendix III for instructions on how to do this.</p> <p>Explain to the woman how her weight gain is tracking compared to the recommended rate.</p>	<p><u>Handbook for Mum:</u> HUMBA pregnancy weight gain chart</p>

23.0 Healthy cooking

Learning outcomes: The participant should.....	23.1 Ways to reduce the fat in foods cooked at home	Resources
	<p>Reducing the amount of fat that you use in cooking is important. This is because it is easy to put on extra weight if you are eating lots of fatty foods.</p>	
Be aware of the higher fat foods that are bought or cooked at home and ways to make them healthier.	<p>Some foods that you buy may be higher in fat.</p> <p><u>Meats, chicken and fish:</u></p> <ul style="list-style-type: none"> • Remove the fat that you can see on your meats • Remove the skin from chicken • Pre-cook sausages and mince and drain the fat • Choose tinned fish in water (not brine or oil) • When having tinned corned beef, make a small hole in the top of the can with a can opener, place the can in a pot of boiling water, heat for 5 minutes and drain the fat from the can 	

23.0 Healthy cooking cont..

Learning outcomes: The participant should.....	23.1 Ways to reduce the fat in foods cooked at home cont...	Resources
	<p><u>Stews / Boil up's</u></p> <ul style="list-style-type: none"> • Remove the fat off the meat before cooking • After it has been cooked let the boil up cool and skim the fat from the top before eating • Make it go further with adding non-starchy vegetables, and some split peas or dried beans, barley <p>Avoid frying (including deep frying) and adding lots of oil or ghee to your cooking. By using low fat cooking methods this helps to reduce the amount of fat in your diet. These methods include boiling, steaming, grilling & baking in the oven. If you need to use some oil, then only use a small amount e.g 1 teaspoon, or consider buying & using spray oil.</p>	<p><u>Handbook for Mum:</u> Making a Healthier Meal using Povi/Pulu Masima & Brisket; Mutton Flaps; Corned Beef</p>
Learning outcomes: The participant should.....	23.2 Low fat cooking methods	Resources
<p>Be aware of the higher fat additions that are added to foods and ways to reduce the amount of fat.</p>	<p>Some foods that we add in when cooking are high in fat. For example did you know that most oils contain 99% fat? So even though it says on the label that it has no cholesterol, it will still put weight on. So if oil is used regularly, then you are more likely to gain too much weight.</p> <p><u>So instead of adding oil:</u></p> <ul style="list-style-type: none"> • Use an oven to bake foods e.g. instead of deep frying your chips, bake them in the oven. • Use a spray oil before putting food in the pan / tray e.g. stir fry's, roast vegetables. • Use baking paper on the bottom of the tray to stop dry foods from sticking. • Instead of frying your fish, try baking, steaming or grilling. <p>If you still want to use some oil then make sure that you are using a very small quantity.</p>	

23.0 Healthy cooking cont..

Learning outcomes: The participant should.....	23.2 Low fat cooking methods continued...	Resources
	<p><u>Coconut cream / milk</u> is also high in fat. It doesn't mean that you can't include it, but you can reduce the amount of fat by;</p> <ul style="list-style-type: none"> • Using lite coconut milk in place of coconut cream. • Dilute the coconut cream ½ and ½ with a low fat milk. <p><u>Ghee</u> is also high in fat and contains a type of fat that can harden our arteries so the blood doesn't flow so well around our body. Instead of using ghee;</p> <ul style="list-style-type: none"> • Use a small amount of oil instead e.g. 1 teaspoon to fry off the onions when you are beginning to make a curry. <p>You have some information about healthy cooking methods in your handbook also.</p>	<p><u>Handbook for Mum:</u></p>

24.0 Keeping active through leisure activities

Learning outcomes: The participant should.....	24.1 Reducing sedentary time	Resources
	<p>Explore the participant's current level of physical activity. If she is doing some activity then acknowledge and encourage her to continue with what she is doing. Say "I'm going to give you some further ideas of how to add some movement into your day".</p> <ul style="list-style-type: none"> • If activity level is sedentary then don't condone but say "I've got some further ideas that you may want to consider". 	
<p>Be aware of ways to reduce sedentary time</p>	<p>Another way to add in some movement to your day is to reduce the time you sit around. Are you aware of how much time you may spend on the computer / your phone / watching TV? These devices are useful too us, but if we spend too much time using them, it means we're sitting around and not moving.</p>	

24.0 Keeping active through leisure activities cont..

Learning outcomes: The participant should.....	24.1 Reducing sedentary time cont...	Resources
Be aware of ways to reduce sedentary time	It may be useful for you to time your TV watching / time on the computer or phone. You may want to consider some of these options; aiming for 5 minutes' walk for every 30 minutes you spend on your phone / computer or watching TV. Get up and move around in the TV add breaks – walk around the house or garden or perhaps you may prefer dancing to music?	<u>Handbook for Mum:</u> Reduce sedentary time

25.0 Maintaining behaviour changes

Learning outcomes: The participant should.....	25.1 Behaviour change is not always easy	Resources
Encourage the participant to continue with the changes she has already made.	<p>This is our last visit for the intervention part of the HUMBA trial. We've explored some things you can change to help you and your baby.</p> <p>You are now ...(x)..weeks pregnant. You still have some more time to keep up with the changes to your food, drinks and activity or try and make some changes (if no changes have been made).</p> <p>I encourage you to continue with the changes that you have already made (if appropriate).</p>	
Be assured that lifestyle changes can be at times challenging to maintain.	<p>Keeping up with the changes is not always easy, as things often happen in life which can make it more challenging. If it doesn't go well for a time, don't get discouraged. Remind yourself of the benefits to you and your baby with making changes. Think about a small change that you can make to help you start getting back on track. Go back to making a SMARTER goal.</p>	
Be aware of what may help them in the meantime.	<p>Think about who can support you to keep up with the changes? Someone that will encourage you, particularly when it gets hard to make changes and or keep up with the changes. Perhaps this may be a family member, or a friend. Try to speak with your family / whanau about the changes you are trying to make. Remember the changes are healthy changes for all of your family.</p> <p>You will also continue receiving text messages to remind you about what you have learnt to keep you and your baby healthy.</p>	

26.0 Summary & goal setting

Learning outcomes: The participant should.....	26.1 Summary	Resources
	<p>The topics that we've discussed today are:</p> <ul style="list-style-type: none"> • Ways to reduce fat intake when cooking • Keeping active through leisure activities • How to keep the changes going in the future 	
Learning outcomes: The participant should.....	26.2 Goal setting	Resources
<p>Have some personal lifestyle related SMARTER goal(s).</p>	<p>Using open discovery questions (from Healthy Conversations Skills) help women explore and identify 3 SMARTER lifestyle goals (3 dietary changes, or 2 dietary and 1 physical activity related). Use the laminated SMARTER Planning for Change sheet.</p> <p>Assist women to write their goals into their handbook. If they can't manage this, then please write them into their handbook.</p>	<p>SMARTER Planning for Change laminated sheet and white board pen.</p> <p><u>Handbook for Mum: Visit 4. My goals are:</u></p>

Appendix I:

List of teaching & participant* resources (not included in woman's handbook). You will need to take these with you. Participant* resources are to be given to the woman at each visit.

Visit 1:

Handbook for Mum

"Is it worth eating"? - how long do I need to walk to burn off the energy (A4 sheet)

*3D plastic plate with 3 compartments

*Veg It Up!

*Cheap Eats

*Recipes for Large Families, 2nd Ed

4 plastic drink bottles with amount of sugar in each

1 empty water bottle

Laminated empty Raro packet

SMARTER Planning for Change (laminated A4 sheet)

Whiteboard marker pen

Visit 2:

Weighing scales – to be returned to the University of Auckland at the end of the study

Label reading example 1 (A4 sheet)

Label reading example 2 (A4 sheet)

*Label reading keyring fob

Unhealthy snacks (food photos A4 sheet)

Healthy snacks (food photos A4 sheet)

SMARTER Planning for Change (laminated A4 sheet)

Whiteboard marker pen

Visit 3:

Weighing scales

*Weekly menu planner (laminated A4 sheet)

SMARTER Planning for Change (laminated A4 sheet)

Whiteboard marker pen

Visit 4:

Weighing scales

SMARTER Planning for Change (laminated A4 sheet)

Whiteboard marker pen

Appendix II: Artificial sweeteners – frequently asked questions.

What advantages are there in using a sweetener?

These are a great way of keeping your sugar intake down as they:

- Are intensely sweet
- Contain few or no kilojoules (energy)
- Do not affect blood glucose levels
- Do not cause dental decay

Are sweeteners safe?

The use of artificial sweeteners in NZ is governed by Food Standards Australia and New Zealand. Despite some scares of the safety of sweeteners, there is no evidence to substantiate claims made against these sweeteners.

Some brands of sweeteners and drinks contain certain artificial sweeteners which are not recommended to use during pregnancy:

Safe to use in pregnancy: (sweetener name – brand name)	Not recommended in pregnancy:
Aspartame (951) – Equal, Nutrasweet	Cyclamate (952) - Sucaryl, Sugromax
Sucralose (955) – Splenda	Saccharin (954) – Sucaryl, Sugromax
Acesulphame K (950) – Sunnett	
Rebaudioside A (960) – Stevia, Natvia	
Low-calorie drink examples safe to use in pregnancy:	Low calorie drink examples not recommended in pregnancy:
Vita Quench	Diet Soda Stream
Diet Refresh	Thriftie
Weight Watchers low calorie drink mix	Vita Fresh
Diet / zero fizzy drinks	

In pregnancy, aspartame, acesulfame-K, sucralose and Rebaudioside are considered safe. Saccharin and cyclamate are not recommended for pregnant women.

Saccharin and cyclamate are not recommended for children under 2 years old. Aspartame and sucralose are considered safer.

Appendix II: Artificial Sweeteners continued..

Is there a safe amount?

The acceptable daily intake (ADI)* is an estimate of the amount that could be consumed every day over a lifetime without adverse effects. It's worth noting that the ADI is set at a very conservative level. And usual intake is well below the acceptable daily intake.

Sweetener	ADI mg/kg body weight/day	ADI equivalent for 68kg person
Aspartame	40mg	12 cans diet drink
Acesulfame K	15mg	25 cans diet drink
Sucralose	15mg	15 cans diet drink

** These volumes are related to the safety of the sweetener and do not imply that such large daily volumes of carbonated drinks are appropriate in a balanced diet.*

I have young children, can they have artificial sweeteners too?

Saccharin and cyclamate are not recommended for children under 2 years old. If you give concentrated soft drinks that contain sweeteners to children under 4, they should be over-diluted with water to avoid children having large amounts of sweetener. Although artificial sweeteners contain little or no sugar, they still taste sweet and may encourage children to develop a preference for sweet foods and drinks.

Can I use artificial sweeteners in cooking & baking?

You may need to experiment a little when using sweeteners in cooking for successful results.

- Splenda is the most suitable for cooking as it retains its sweetness under high temperatures
- Equal is best used where foods require a shorter cooking time, as it loses its sweetness when exposed to high temperatures

Follow the manufacturer's guidelines on the packet when substituting for sugar. Some manufacturers have recipes on their websites which you may find helpful.

How can I tell which drinks are high in sugar?

Check the label and choose drinks with less than 5g sugar per 100mL

Appendix III: How to fill in the body weight chart and graph

The first weight is recorded by the research midwife.

Visit 1 (Baseline)

1. Measure woman's body weight (123kg).
2. Minus the research midwife measured weight (120kg) equals 3kg.
3. In handbook for mum: write 3kg in the weight gain table
4. In handbook for mum: plot 3kg in the graph aligned with how many weeks gestation the woman is.
5. Explain to the woman how her weight gain is tracking compared to the recommended rate.

Visit 2

1. Measure woman's body weight (125kg)
2. Minus CHW visit 1 body weight (123kg) equals 2kg
3. Calculate the cumulative weight gain: weight gain from visit 1 (3kg) plus weight gain from visit 2 (2kg) equals 5kg
4. In handbook for mum: Write 2kg in the weight gain table and 5kg cumulative weight gain
5. In handbook for mum: plot the cumulative weight gain (5kg) in the graph aligned with how many weeks gestation the woman is.
6. Explain to the woman how her weight gain is tracking compared to the recommended rate.

Visit 3

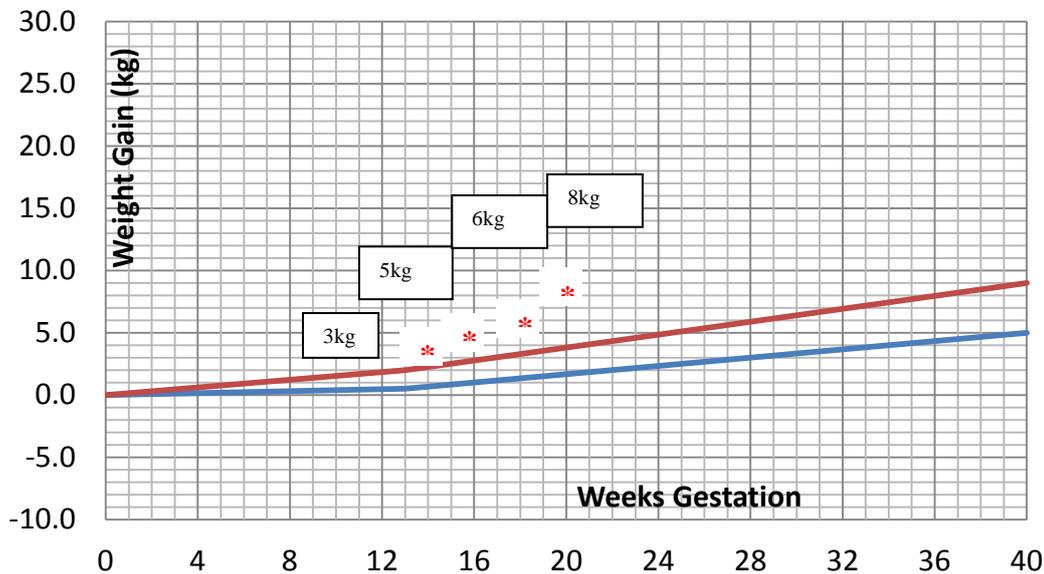
1. Measure woman's body weight (126kg)
2. Minus CHW visit 2 body weight (125kg) equals 1kg
3. Calculate the cumulative weight gain: weight gain from visit 1 (3kg) plus weight gain from visit 2 (2kg) plus weight gain from visit 3 equals (1kg) equals 6kg
4. In handbook for mum: Write 3kg in the weight gain table and 6kg cumulative weight gain
5. In handbook for mum: plot the cumulative weight gain (6kg) in the graph aligned with how many weeks gestation the woman is.
6. Explain to the woman how her weight gain is tracking compared to the recommended rate.

Visit 4

1. Measure woman's body weight (128kg)
2. Minus CHW visit 3 body weight (126kg) equals 2kg
3. Calculate the cumulative weight gain: weight gain from visit 1 (3kg) plus weight gain from visit 2 (2kg) plus weight gain from visit 3 (1kg) plus weight gain from visit 4 (2kg) equals 8kg
4. In handbook for mum: Write 2kg in the weight gain table and 8kg cumulative weight gain
5. In handbook for mum: plot the cumulative weight gain (8kg) in the graph aligned with how many weeks gestation the woman is.
6. Explain to the woman how her weight gain is tracking compared to the recommended rate.

Appendix III: How to fill in the body weight chart and graph cont...

Early Pregnancy Weight (kg)		112	Gestation 10 weeks
			Date 27.05.2015
Pregnancy BMI			
Date	Weeks' Gestation	Weight (kg)	Weight Gain/cumulative weight gain (kg)
Research MW 10.06.2015	12 weeks	120kg	
CHW first visit 24.06.2015	14 weeks	123kg	3kg (Baseline weight gain)
CHW 2nd visit	16 weeks	125kg	2kg (Cumulative 5kg)
CHW 3rd visit	18 weeks	126kg	1kg (cumulative 6kg)
CHW 4th visit	20 weeks	128kg	2kg (Cumulative 8kg)



Appendix III: How to fill in the body weight chart and graph cont...

1. Weight gain 1 (Baseline) = _____ kg
(CHW visit 1 body weight minus the research midwife measured body weight)
Plot in the weight gain chart.
*
2. Weight gain 2 = _____ kg
(CHW visit 2 body weight minus CHW visit 1 body weight)
Plot the cumulative weight gain _____ (weight gain 1 + 2)
*
3. Weight gain 3 = _____ kg
(CHW visit 3 body weight minus CHW visit 2 body weight)
Plot cumulative weight gain _____ kg (weight gain 1 + 2 + 3)
*
4. Weight gain 4 = _____ kg
(CHW visit 4 body weight minus CHW visit 3 body weight)
Plot cumulative weight gain _____ kg (weight gain 1 + 2 + 3 + 4)
*

***At each visit, explain to the woman how her weight gain is tracking compared to the recommended rate**

Early Pregnancy Weight (kg) kg		Gestation	weeks.
		Date	
Pregnancy BMI			
Date	Weeks' Gestation	Weight (kg)	Weight Gain/Cumulative weight gain(kg)
Research MW			
CHW first visit			
CHW 2nd visit			
CHW 3rd visit			
CHW 4th visit			

