



InShape Wellness Weight Loss

Promoting Weight Loss by Living A Wellness Lifestyle for Adults

Prevention Plus Wellness, LLC ©All Rights Reserved, 2023

Table of Contents

Section 1: Introduction

- Section 2: Directions for Implementation
- Section 3: Lesson Script
- Section 4: Screening Survey & Goal Plan/Contract
- Section 5: Evaluation Materials

Section 6: Healthy Behavior Goal Setting Goals & Tips

NOTE: Use of copyright protected materials in this program is expressly limited to one instructor and cannot be copied for others to use or implement.

InShape WWL

Section 1: Introduction

elcome to InShape Wellness Weight Loss (WWL)! InShape WWL is a quick and easy to use brief intervention for prevention and health professionals, peer leaders and others who want to promote weight loss and weight control among adults through increasing healthy lifestyle behaviors.

InShape WWL is great for promoting the mental and physical wellbeing and resiliency of any group. It's also the perfect tool for promoting physical activity, healthy eating, food mindfulness, sleep, and stress control, while avoiding unhealthy alcohol and drug misuse that can sabotage weight loss and maintenance efforts.

InShape WWL is founded on the evidence based InShape Prevention Plus Wellness program which has been shown to increase healthy habits and prevent substance misuse. It utilizes an evidence-based practices screening and brief intervention format recognized by the Substance Abuse

Do Not C

and Mental Health Services Administration (SAMHSA).

InShape WWL is the only single-session motivational program designed to reduce and control weight by increasing wellness-enhancing behaviors through weekly goal setting. It can be implemented in any setting including community, health care, professional training, recreation, worksites, and others.

InShape WWL is founded on the Behavior-Image Model, a wellness-related framework that targets naturally motivating positive peer and desired future images to increase motivation for change and multiple health behavior goal setting to increase self-regulation skills and self-efficacy of participants.

InShape WWL takes about 60 minutes to implement, is highly flexible and can be used as a standalone intervention or training session, or as an add-on component to other professional, prevention, health, weight loss, fitness, recreation, education, intervention, or treatment programs.

The **InShape WWL** program was designed to help adults lose and maintain weight loss and look and feel more active, fit, and healthy using a three-step process of:

- Screening adults for their current health habits to increase awareness of their behaviors;
- Providing feedback cuing desired future images and the benefits of engaging in key wellness behaviors associated with weight loss and how substance misuse harms them, to increase motivation for change; and
- Presenting a goal plan and contract to have adults set and monitor goals to increase wellness-promoting habits that will lead to weight loss and weight maintenance.

Your **InShape WWL** program comes with a manual and a digital download of all reproducible materials needed to implement your program to countless participants.

The **InShape WWL** program includes:

- Step-by-step implementation directions;
- A brief self-administered wellness behavior screening survey;
- A script for easy presentation of the lesson that introduces positive image content linking wellness, weight loss and substance use behaviors;
- A set of colorful slides with illustrations of adults modeling wellness habits;
- A goal plan/contract for motivating, initiating and maintaining multiple behavior change;
- Healthy Behavior Goal Setting Goals & Tips;
- Online or paper adult pretest and posttest surveys to

evaluate immediate program effectiveness;

- An online or paper instructor's survey to assess the quality of the lesson presentation;
- An online or paper fidelity checklist to increase implementation reliability;
- Online resources to support program implementation and evaluation;
- Phone and email program support; and
- Separate online or onsite certified training workshops

to learn how to provide the InShape WWL program, or train others to implement it, with fidelity and maximum effectiveness.

Thank you for choosing InShape Wellness Weight Loss. We know you will find InShape WWL an easy, enjoyable, and effective way to promote healthy weight loss and weight maintenance leading to greater mental and physical wellbeing for adults in your organization and region.

InShape WWL

Section 2:

Directions for Implementation

Steps for Implementing & Evaluating Your PPW Program

Welcome Prevention Plus Wellness Program Implementer! This information was created to help you successfully provide your Prevention Plus Wellness (PPW) Program to youth or adults.

If you have not already done so, we strongly encourage you to take one of our convenient online or onsite training workshops to become a Certified PPW Program Implementer or Trainer. Both workshops come with 3-year certification and are designed to ensure you learn how to implement your PPW Program with fidelity and maximum effectiveness.

Listed below are the steps and tools for implementing and evaluating your PPW Program:

- Sign-up online to receive notices of invaluable PPW resources designed to ensure you experience maximum program reach, effectiveness, and sustainability at: <u>https://preventionpluswellness.com</u>
- 2. Prior to implementing your Prevention Plus Wellness (PPW) Program to youth or adults, practice the script at least three times, using the program's PowerPoint slides, screening survey, goal plan and Instructor's Survey.
- Send any program PowerPoint slides you've tailored to your target population or needs to Prevention Plus Wellness for review and approval prior to using them.
- 4. Make copies of the screening survey, goal plan and pre and posttest surveys for all participants from the digital downloads provided.
- 5. Immediately before beginning the lesson, administer either the online or paper pretest survey to participants. Immediately after the lesson, implement the posttest survey. Customized links and QR codes can be

requested for the online surveys from Prevention Plus Wellness at: info@preventionpluswellness.com.

- 6. Implement the program using the script while showing the PowerPoint slides.
- 7. When done, read the goal plan with the participant(s) and help them complete it, sign it, you co-sign it, and have them take it home for daily monitoring.
- 8. If using the paper pretest and posttest surveys, collect both the pretest and posttest for each participant and keep them in pairs for later hand data entry.
- 9. You can follow-up with participants by having them complete one or more additional weekly goal plans.
- 10. Re-implement your PPW program every 6-12 months.
- 11. Complete an online or paper Instructor's Survey at the end of every lesson presented to assess and track the quality of program implementation.
- 12. Use the online or paper Fidelity Checklist to ensure you are implementing your PPW program reliably.
- 13. Request data charts and raw data from online or hand-entered paper pretest and posttest surveys at any time from Prevention Plus Wellness.

InShape WWL

Section 3: Lesson Script

InShape© Wellness Weight Loss (WWL) Lesson Script

Introduction

(Before introducing the program, administer the pretest survey to participants by either showing the customized link/QR code to the online survey or handing out the paper survey. Give directions to complete the confidential survey and wait until everyone has completed it before launching the lesson introduction).

(Show slide).



Welcome to **InShape Wellness Weight Loss!** I'm going to talk with you about things you can do to lose and maintain weight loss, and look and feel better, based on your current and future wellness habits. First, you'll learn about the links between engaging in specific wellness behaviors and resulting positive images. Then, you'll have an opportunity to identify concrete goals to achieve your desired weight, overall fitness, and performance level in work and play.

Wellness Behavior Screening Survey

(Distribute the screening survey to participants).

Now, please take out your copy of the InShape PPW Wellness Behavior Screening Survey. This tool is designed to assess your wellness level. The accuracy of this assessment is based on how honestly you answer each item, so please answer all questions truthfully. Your answers are strictly confidential. DO NOT PLACE YOUR NAME ON THIS FORM. We want your responses to remain private. Thank you. (Wait until everyone has completed the screen).

(Show slide).



1. Moderate Physical Activity

(Show slide). (Ask participants to answer to themselves).



1. Benefits of Moderate Physical Activity (Show slide)



What types of moderate physical activity do you do, or might like to try or do more of? Keeping physically active is the key to achieving and maintaining a healthy weight, fitness, and active lifestyle. Adults who engage in regular physical activity tend to feel energetic, sleep better, and look and feel more physically fit.

Regular physical activity can enhance your mental well-being, selfesteem, and confidence, while easing anxiety and mild depression. Regular physical activity can reduce your stress level making you more relaxed, happy, and unworried. Daily physical activity keeps you focused, and lets you work harder and smarter.

2. Substance Misuse Harms Moderate Physical Activities (Show slide)





Meanwhile, drinking too much alcohol, smoking cigarettes, or vaping e-cigarettes, using cannabis heavily, or using illegal drugs

interferes with creating a physically active lifestyle. Alcohol and other substance misuse can get in the way of your fitness goals by decreasing your energy level, and directly harming your fitness level and compromising your goals of being in-shape and feeling strong.

Too much alcohol causes feelings of discomfort, fatigue, poor coordination, and harms your motivation and drive to exercise and lose weight. Heavy drinking and drug use may also counter exercise efforts by increasing body fat and slowing your physical performance.

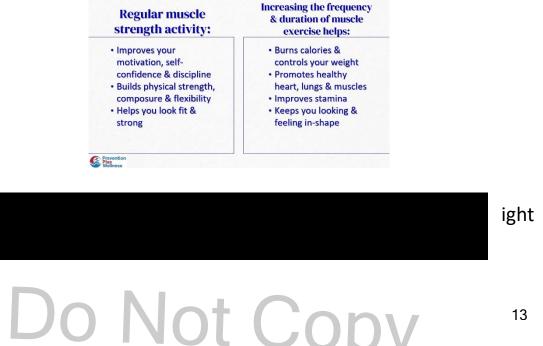
2. Muscle Strengthening Activities

(Show slide). (Ask participants to answer to themselves).



moderate physical activity for at least 30 minutes? For example, fast walking, slow bicycling, skating, dancing, or swimming? Prevention Plus Wellness

1. Benefits of Muscle Strengthening Activities (Show slide)



li

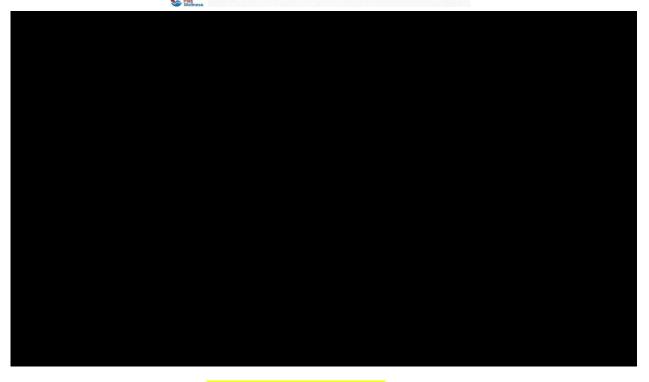


2. Substance Misuse Harms Muscle Strengthening Activities (Show slide)



Heavy alcohol & drug use can:

- Result in weight gain, loss of energy & motivation
- Cause bouts of feeling depressed
 & unhappy
- Harm your sense of relaxation , peace & motivation
- Cause embarrassing social moments, damaging your reputation & future success



3. <u>Healthy Nutrition</u>

(Show slide). (Ask participants to answer to themselves).

Does your everyday diet consist mostly of nutrient dense food? For example, whole grain breads, cereals and pasta; lean fish, lean poultry, and lean meat; dark green and red vegetables; and citrus and other fruits.



1. Benefits of Healthy Nutrition (Show slide)



Prevention Plus Wellness



2. Substance Misuse Harms Healthy Nutrition (Show slide)







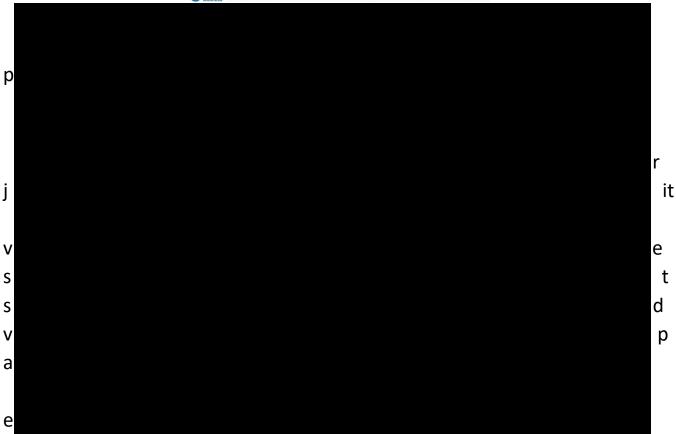
4. Practicing Food Mindfulness

(Show slide). (Ask participants to answer to themselves).



1. Benefits of Practicing Food Mindfulness (Show slide)





2. Substance Misuse Harms Food Mindfulness (Show slide)

 Alcohol, nicotine, cannabis & drug use can interfere with monitoring your food patterns

• Heavy drinking & cannabis use can make you hungry & over-eat junk food

• Drug & alcohol misuse can make you feel sluggish, tired & lead to less activity

Prevention Plus Wellness





5. <u>Getting Sufficient Sleep</u>

(Show slide). (Ask participants to answer to themselves).



Do you usually get 7-8 hours of sleep each night?

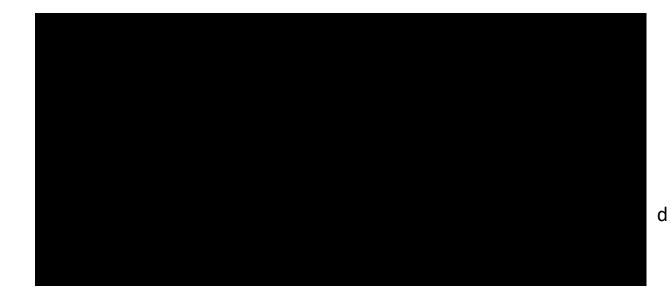
1. Benefits of Getting Sufficient Sleep (Show slide)

Getting the right amount of sleep each night will:

- Ensure the maximum energy
- needed to be physically active & fit • Enhance your ability to think clearly
- throughout the day & retain facts
- Prevent unnecessary caloric intake
 Help you feel alert, confident &
- friendly
- Make you look good & feel
- energetic & motivated



t



2. Substance Misuse Harms Getting Sleep (Show slide)



- Heavy drinking, smoking & vaping nicotine disrupts deep sleep patterns, causing you to wake-up feeling tired & jittery
- This conflicts with maintaining an active, high-energy lifestyle



5. <u>Controlling Stress</u>

Co

(Show slide). (Ask participants to answer to themselves).



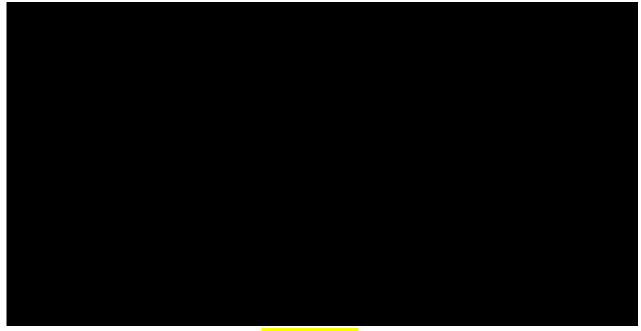
1. Benefits of Controlling Stress (Show slide)











Conclusion

(Show slide)

Are you...

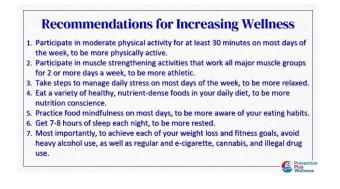
- A physically active or inactive person?
 An athletic or non-athletic person?
- 3. A healthy-eater or junk food junkie?
- 4. A mindful-eater or unaware feeder?
- 5. A well-rested or frequently tired person?
- 6. A relaxed or anxious person?
- 7. A heavy drinker or social/non-drinker?
- 8. A nicotine smoker/vaper or non-smoker/vaper?
- 9. A regular cannabis/drug user or non-drug user?

Prevention Plus Wellness



Recommendations for Increasing Wellness

(Show slide). (Read the recommendations for increasing wellness.)



<mark>Goal Plan</mark>

(Show slide).



InShape WWL

Section 4: Screening Survey & Goal Plan/Contract

InShape Wellness Weigh Loss (WWL) Wellness Behavior Screening Survey

Directions: This survey is designed to assess your wellness level and identify your individual wellness profiles. The accuracy of this assessment is based on how honestly you answer each item, so please answer all questions truthfully. There are no right or wrong answers. All your answers will be kept strictly confidential. Thank you.

- On most days of the week, do you engage in moderate <u>physical activity</u> for **at least 30 minutes** such as fast walking, slow bicycling, skating, dancing, or swimming?
 - a. O Yes
 - b. O No
- 2. On 2 or more days of the week, do you engage in <u>muscle strengthening</u> activities that work all major muscle groups, including legs, hips, back, abdomen, chest, shoulders, and arms?
 - a. O Yes
 - b. O No
- 3. Does your everyday diet consist mostly of nutrient dense foods such as whole grain breads, cereals, and pasta; lean fish, lean poultry, and lean meat; dark green and red vegetables; and citrus and other fruits?
 - a. O Yes
 - b. O No
- 4. On most days, do you practice food mindfulness such as choosing lower calorie foods, eating smaller serving sizes, avoiding skipping meals, eating a healthy breakfast, drinking water instead of sugary drinks, or limiting fast foods or sweets?
 - a. O Yes
 - b. O No

Do Not Copy

r

InShape Wellness Weight Loss (WWL) Goal Plan

Think about what you have learned from the **InShape WWL** lesson and consider the following:

- 1. Participating in moderate physical activity for **at least 30 minutes** on most days of the week, such as fast walking, slow bicycling, or skating, to be more physically active.
- 2. Participating in muscle strengthening activities that work all major muscle groups, including legs, hips, back, abdomen, chest, shoulders, and arms on 2 or more days of the week, to be more athletic?
- 3. Taking steps to manage daily stress by practicing progressive muscle relaxation, meditation, tai chi, yoga, deep breathing, or by getting exercise on most days of the week, to be more relaxed.
- 4. Eating a variety of healthy, nutrient-dense foods in your daily diet, such as lean meat, fish, poultry, fruits and vegetables, whole grain breads and cereals, and brown rice and pasta, to be more nutrition conscience.

KEY WELLNESS BEHAVIOR GOALS

- 1. Physical Activity: (Choose one)

- 1. List a <u>specific</u> health habit (e.g., walk in the neighborhood NOT get more exercise):
- 2. Amount (e.g., 15 minutes each time): ______.
- 3. How often (e.g., 3 times a week, Monday, Wednesday & Friday):

2. Other Wellness Behaviors: (Choose one)

Do Not Copy

.

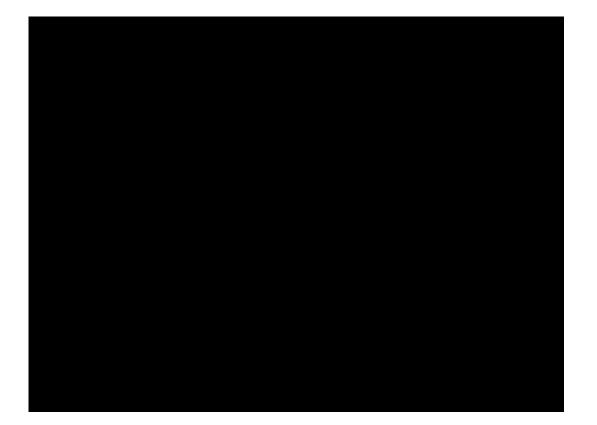
 List a <u>specific</u> health habit (e.g., choose lo 	wer calorie foods for lunch NOT
practice food mindfulness):	
2. Amount (e.g., 500 calories or less for lunc	
3. How often (e.g., 5 days a week, Monday-F	
	•
Participant's Signature:	Date:
Witness's Signature:	Date:

<u>Congratulations!</u> You have successfully completed the InShape Wellness Weight Loss.

- Take this contract home and put it where it can be seen every day, week and month (i.e., on the refrigerator, wall, or your mirror) so you can track your goal progress each day.
- Revisit your goal plan at the end of the first week and make changes if needed to help you be even more successful in reaching your future goals every week.

•	
	_

Now, for the next 7 days, circle a response on the calendar below to track your goal success. Then, total the number of days you reached a wellness goal.



InShape WWL

Section 5: Evaluation Materials

InShape Wellness Weight Loss (WWL) Pretest

Directions: Your answers will be confidential. <u>DO NOT PLACE YOUR NAME ON THIS</u> <u>FORM</u>. Answer all questions honestly. Carefully circle in each answer.

- 1. What is today's date (MM/DD/YY): ____/ ___/
- Enter a 4-digit code number given to you or one you came up with (Hint: one you can easily remember): __/ __/ __/
- 3. Organization or location code (optional): __/ __/ __/ __/
- 4. Are you (circle one):
 - a. Male
 - b. Female
 - c. Other
- 5. How old are you? ____ years old
- 6. In the 30-days, how likely are you to...
- (1) Very likely (2) Likely (3) Neither likely nor unlikely (4) Unlikely (5) Very unlikely

a) Get physical activity most days a week?	1	2	3	4	5
b) Get 7 or more hours of sleep most nights a week?	1	2	3	4	5
c) Eat fruits and vegetables most days a week?	1	2	3	4	5
d) Eat a healthy breakfast most days a week?	1	2	3	4	5
e) Drink 5 or more alcohol drinks in a day?	1	2	3	4	5
f) Smoke regular cigarettes?	1	2	3	4	5
g) Use nonmedical cannabis most weeks?	1	2	3	4	5
h) Vape e-cigarettes?	1	2	3	4	5

 i) Practice a stress control or relaxation technique most days a week? 	1	2	3	4	5
j) Use opioids for nonmedical reasons?	1	2	3	4	5
k) Set goals to improve your weight or health?	1	2	3	4	5
I) Feel so sad or hopeless that you stop doing some of your usual activities?	1	2	3	4	5

7. If you were to use any of these often, would they harm your health or healthy habits?

(1) A great deal (2) A lot (3) A moderate amount (4) A little (5) None at all

a) Alcohol?	1	2	3	4	5
b) Cigarettes?	1	2	3	4	5
c) Marijuana?	1	2	3	4	5
d) E-cigarettes?	1	2	3	4	5
e) Opioids?	1	2	3	4	5

8. How happy are you with your current physical and mental health?

(1) A great deal
(2) A lot
(3) A moderate amount
(4) A little
(5) None at all
9. How often do you practice food mindfulness, for example, by choosing lower calorie foods, eating smaller serving sizes, avoiding skipping meals, eating a healthy breakfast, drinking water instead of sugary drinks, or limiting fast foods or sweets?

(1) A great deal (2) A lot (3) A moderate amount (4) A little (5) None at all

InShape Wellness Lifestyle Training (WLT) Posttest

Directions: Your answers will be confidential. <u>DO NOT PLACE YOUR NAME ON THIS</u> <u>FORM</u>. Answer all questions honestly. Carefully circle in each answer.

- 1. What is today's date (MM/DD/YY): ____/ ___/ ___/
- Enter a 4-digit code number given to you or one you came up with (Hint: one you can easily remember): __/ __/ __/
- 3. Organization or location code (optional): __/ __/ __/ __/
- 4. Are you (circle one):
 - a. Male
 - b. Female
 - c. Other
- 5. How old are you? ____ years old
- 6. In the 30-days, how likely are you to...
- (1) Very likely (2) Likely (3) Neither likely nor unlikely (4) Unlikely (5) Very unlikely

a) Get physical activity most days a week?	1	2	3	4	5
b) Get 7 or more hours of sleep most nights a week?	1	2	3	4	5
c) Eat fruits and vegetables most days a week?	1	2	3	4	5
d) Eat a healthy breakfast most days a week?	1	2	3	4	5
e) Drink 5 or more alcohol drinks in a day?	1	2	3	4	5
f) Smoke regular cigarettes?	1	2	3	4	5
g) Use nonmedical cannabis most weeks?	1	2	3	4	5
h) Vape e-cigarettes?	1	2	3	4	5

 i) Practice a stress control or relaxation technique most days a week? 	1	2	3	4	5
j) Use opioids for nonmedical reasons?	1	2	3	4	5
k) Set goals to improve your weight or health?	1	2	3	4	5
I) Feel so sad or hopeless that you stop doing some of your usual activities?	1	2	3	4	5

7. If you were to use any of these often, would they harm your health or healthy habits?

(1) A great deal (2) A lot (3) A moderate amount (4) A little (5) None at all

a) Alcohol?	1	2	3	4	5
b) Cigarettes?	1	2	3	4	5
c) Marijuana?	1	2	3	4	5
d) E-cigarettes?	1	2	3	4	5
e) Opioids?	1	2	3	4	5

8. How happy are you with your current physical and mental health?

(1) A great deal
(2) A lot
(3) A moderate amount
(4) A little
(5) None at all
9. How often do you practice food mindfulness, for example, by choosing lower calorie foods, eating smaller serving sizes, avoiding skipping meals, eating a healthy breakfast, drinking water instead of sugary drinks, or limiting fast foods or sweets?

(1) A great deal (2) A lot (3) A moderate amount (4) A little (5) None at all

10. How much did you like the lesson?

(1) A great deal(2) A lot(3) A moderate amount(4) A little(5) None at all11. How much will the lesson help you reduce your weight and improve your healthy habits?

(1) A great deal (2) A lot (3) A moderate amount (4) A little (5) None at all

12. What did you like BEST about this lesson? For example, how did it affect your body weight, health behaviors, substance use, motivation, goal setting, self-esteem, etc.?

13. What did you like LEAST about this lesson? For example, what do you think should be changed or improved?

InShape Wellness Weight Loss (WWL) Instructor's Survey

Date: _____ Code: _____

Directions: Complete this survey after each lesson provided. Circle one response for each item.

- 1. What was your level of comfort while providing the WWL lesson?
 - a) A great deal b) A lot c) A moderate amount d) A little e) None at all
- 2. Did you use active presenting strategies (i.e., good eye contact, body positioning, changing tone of voice, and listening)?a) A great deal b) A lot c) A moderate amount d) A little e) None at all
- 3. What was your level of enthusiasm and passion while presenting the lesson? a) A great deal b) A lot c) A moderate amount d) A little e) None at all
- 4. How smooth and continuous was the flow of the lesson delivery?a) A great deal b) A lot c) A moderate amount d) A little e) None at all
- 5. How accurately did you follow the protocol (i.e., adherence to the script, no adlibbing extra content)?a) A great deal b) A lot c) A moderate amount d) A little e) None at all
- 6. Was the lesson content provided completely (i.e., covered all of the scripted messages)?a) A great deal b) A lot c) A moderate amount d) A little e) None at all
- 7. What was the participants' responsiveness to the lesson (i.e., listening, answering, showing interest)?
 - a) A great deal b) A lot c) A moderate amount d) A little e) None at all

8. What did you like BEST about implementing the WWL lesson?

9. What did you like LEAST about implementing the WWL lesson?

Prevention Plus Wellness Program Fidelity Checklist

Date: _____

Prevention Plus Wellness program(s) implemented:

Code number: _____

Directions: Check each item completed. Total items to determine level of implementation fidelity.

- 1. Did implementers complete a Certified Prevention Plus Wellness Program Implementer's Training Workshop within the last 3-years?
- 2. Did implementers practice the PPW lesson script(s) at least 3 times prior to implementing the program?
- 3. □ Did you implement the PPW Pretest Survey prior to implementing the program each time?
- 4. Did you implement the PPW lesson following the script each time?
- 5. Did you provide the script content with enthusiasm and passion each time?
- 6. □ Did you provide the screening survey, lesson script and goal plan all in one session each time?
- 7. Did you show the PPW program PowerPoint slides during the lesson each time?
- 8. Did you read the entire goal plan and help participants complete it each time you implemented the program?
- 9. □ Did you have participants sign the goal plan and did you co-sign the goal plan every time you implemented the program?
- 10. Did you implement the PPW Posttest Survey after implementing the lesson each time?
- 11. Did implementers complete an Instructor's Survey assessing their presentation quality after implementing each PPW lesson?
- 12. Did you remind participants to post their goal plan where they would see it and monitor their goals daily every time you implemented the program?

InShape WWL

Section 6: Healthy Behavior Goal Setting Goals & Tips



41

Listed below are goals and weekly goal tips for six key health behaviors. Weekly goals should be set just beyond your current habit so that you must put effort into reaching it. But do not set goals that are too high to achieve in a week. Set new goals every week until you reach all six of the goals listed below.

#1 Regular Physical Activity: Key to Living an Active & Fit Lifestyle

Goals:

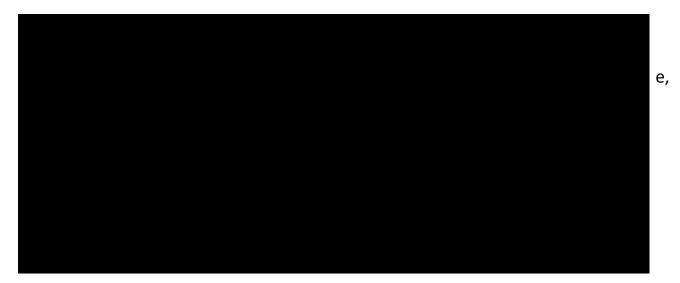
- 1. 2 hours and 30 minutes (150 minutes) of <u>moderate-intensity aerobic activity</u> (i.e., brisk walking) every week **and**
- 2. <u>muscle-strengthening activities</u> on 2 or more days a week that work all major muscle groups (legs, hips, back, abdomen, chest, shoulders, and arms). or
- 1. 1 hour and 15 minutes (75 minutes) of <u>vigorous-intensity aerobic activity</u> (i.e., jogging or running) every week **and**
- 2. <u>muscle-strengthening activities</u> on 2 or more days a week that work all major muscle groups (legs, hips, back, abdomen, chest, shoulders, and arms). or
- 1. An equivalent mix of moderate- and vigorous-intensity aerobic activity and
- 2. <u>muscle-strengthening activities</u> on 2 or more days a week that work all major muscle groups (legs, hips, back, abdomen, chest, shoulders, and arms).

Weekly goal tips:

- Get 10 or more minutes of activity at a time
- Pick a fun sport or activity
- Identify a friend who can join you during your physical activity
- Identify where you plan to do your physical activity
- Walk your dog
- Walk anywhere and everywhere you can
- Ride a bicycle to get places
- Do chores like carrying groceries, cleaning your room, or mowing the lawn
- Reduce your screen time to no more than 2 hours per day
- Add some muscle-strengthening activity, like climbing, situps, and pushups
- Add just 20 minutes to your physical activity every day

#2 Healthy Eating: Key to Feeling & Performing at Your Very Best

Goals:

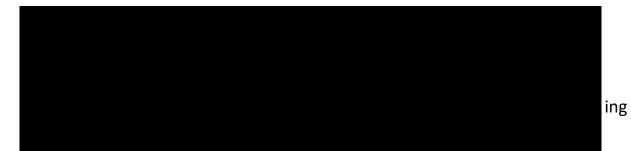


Weekly goal tips:



#3 Food Mindfulness: Key to Being Aware of Your Eating Habits

Goals:



Weekly goal tips:



#4 Adequate Sleep: Key to Living a High-Energy Lifestyle

Goals:



Weekly goal tips:





#5 Stress Control: Key to Being Calm and In Control

Goal: Practice a relaxation method every day to control stress.

Weekly goal tips:



#6 Avoid Substance Misuse: Key to Reaching Your Healthy Behavior Goals

Goals:





Weekly goal tips:

