

Eating: Til Death Do Us Part
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Contents of Unit

- **Overview**
- **Rationale**
- **Objectives**
- **Strategies**
- **Classroom Activities**
- **Bibliography**
- **Standards**
- **Appendix**

Overview

According to recent publications by the Centers for Disease Control, heart disease is still the number one killer of Americans. Nearly 700,000 people die each year from this very preventable disease. (<http://www.cdc.gov/heartdisease>) The CDC believes that the most common heart-related ailment is coronary heart disease. It is also a major cause of disability in this country; the main culprit, hypertension. It is estimated that one in three people have hypertension. (<http://www.cdc.gov/bloodpressure>) Many people are unaware of this condition because they usually have no signs or symptoms. They mistakenly attribute the minor aches and pains they experience to indigestion, or muscle strain. That is why it is commonly referred to as the “silent killer.”

Another equally important statistic is that of domestic violence, or recently known as intimate partner violence. It too affects a staggering number of the population. It creates physical, psychological, and socially stressful situations. These stressors along with poor nutritional diet create the perfect climate for hypertension, diabetes and/or heart disease. Harmful relationships that create harmful nutrition patterns are the perfect ingredients for deadly results.

The old saying, “you are what you eat,” is true enough, but why do we eat what we eat? Why do we eat when we eat? And why do we eat as much as we eat? These are all questions that have been extensively probed by the experts for years. It has long been determined that some people eat because they are engaged in stressful lifestyles. They have existed in these lifestyles for so long that they

don't even feel the stress anymore. To them, their lifestyle is the norm. They are painfully unaware that in many cases they are eating themselves into an early grave.

This unit is an extension to a basic nutritional unit. It undertakes the task of relating intimate partner violence with premature death due to heart-related illnesses and disease. Think about it. When a person dies from heart-related complications, the general assumptions by relatives and medical personnel are that they were elderly, and their time was up, had a genetically predisposed condition, or they just didn't take care of themselves and receive proper healthcare. The more recent and widely acclaimed version is, "Oh, heart disease runs in our family, so it's no wonder that he/she succumbed to it. Oh it was God's will, or we all got to go sometime." These are all possibilities and can be reasonable assumptions. They are convenient, readily available, and easy to understand. They require no real in-depth explanation and do not cause excess emotional distress. No one is held accountable except the deceased. It was their age, their lack of care, or their genetics that put them where they are. No one is accused of malicious intent or goes to jail. No one else is held responsible for their demise. Funeral parlors are full of mournful good-byes, and comforting condolences to the family members, especially intimate partners, and especially when the victims are middle aged or elderly. But what about a person involved in a harmful relationship? Can we just equate his/her death to genetics, age, or lack of care which are very explainable reasons?

This unit will explore the under-lying psychological causes and detrimental effects of harmful relationships to correlate them with the three most common diseases: obesity, diabetes, and heart disease. It will challenge the students to reach down into the core psychological and physiological harmful effects of abuse, and relate them to poor nutritional habits, leading to someone's death. It is an extension of the basic nutritional unit because it takes basic nutritional information and applies it to the body under stress. The particular stress is with intimate relationships. It can also be added as an extension to a dating/domestic violence unit to illuminate the idea of the physiological harm that stress produces in connection with eating and nutrition. I am not saying that all obese, hypertensive, diabetic, or heart diseased persons are in harmful relationships. I am merely suggesting that it is possible that a harmful relationship can cause a person to move into harmful nutritional patterns causing their premature death.

What We Need to Know About Obesity

Simply defined, obesity is caused by a person consuming too many calories, and not being able to burn them efficiently to maintain their desirable weight. According to the U.S. Census Bureau, two-thirds of the U.S. adult population is

overweight. Approximately one-third are obese. This means that approximately one-third of all adults are at a desirable, healthy weight.

(<http://win.niddk.nih.gov/statistics/index.htm#preval>) What does this mean in particular? It means that sooner or later health issues creep into the picture. It is a well known fact that as we get older, our bodies go through a myriad of changes. Most of these changes are age and gender related. It would be ridiculous to expect that we will not age, but at what rate, and what types of age-related problems will we have to face?

If a person is obese, he/she can expect a whole host of problems starting with hypertension. Hypertension is known as high blood pressure and typically called “the silent killer”; silent and deadly. This is because most people are unaware of it. They feel fine, have no major signs or symptoms, and carry out their daily routines. This is when the pressure against the artery walls is higher than it should be. If this condition continues over a period of time, it eventually weakens the blood vessels, and renders them less efficient. Hypertension directly affects the heart, one of the strongest muscles in the body. The heart pumps blood to the lungs and all other parts of the body. If it is inefficient; other organs will be inefficient as well. After all, on the microscopic level, cells make up tissues, tissues make up organs, and organs depend on one another for the smooth functioning of the body. This interrelated dependency is why a condition such as hypertension is so serious. It puts stress on all the other body parts and processes. It is truly a life-threatening disease. (www.cdc.gov)

The Lead-In to Atherosclerosis/Arteriosclerosis

Another serious health risk is atherosclerosis. Our blood vessels are smoothly lined and very flexible. This is to accommodate the changing demands placed upon them throughout daily activity. An obese person’s arteries usually have a build-up of a fatty substance called plaque on the inside. It builds up on the arterial walls and hinders blood flow to major organs, especially the heart. Since the red blood cells carry needed oxygen supplies to the cells this hindrance causes an array of problems. As the demand for oxygen is increased by daily activities, blood flow is decreased and oxygen cannot be carried quick enough to meet the demand. As a result, the person usually experiences fatigue, shortness of breath, and perhaps slight dizziness.

Arteriosclerosis is still another risk health factor in that a person’s arteries begin to harden, becoming less flexible. This too slows the flow of oxygenated blood to vital organs making them less functional. As the heart becomes less efficient, the person sinks further and further into heart-related problems. (www.cdc.gov)

What We Need to Know About Diabetes

Another serious health risk is the development of type 2 diabetes. This condition has surged in recent decades as well. Type 2 diabetes is another life-threatening disease. This disease develops when there is a shortage of insulin to process the amount of glucose into the cells for energy or the body cells do not engage with the insulin being produced. Sometimes it silently develops over a period of time until signs and symptoms force a person to seek medical attention. It is routinely discovered in yearly routine medical physicals, as well as physicals for insurance or employment. Some of the signs and symptoms are: frequent urination, excessive thirst, unusual weight loss, sores that take a long time to heal, and fatigue. <http://www.diabetes.org/type-2-diabetes.jsp>. Without proper treatment a person risks blindness, amputations, or heart-related disease.

What We Need To Know About Binge-Eating/Food Addiction

Binge-eating can be defined as eating a large amount of food in a short period of time. People who binge-eat, eat too much, too often. As time goes on, they eventually become addicted to food (Linda Meeks, Philip Heit, and Randy Page, 320). This addiction usually results in unhealthy weight gain, leading to obesity. The food choices are usually low in nutritional value and inexpensive. They usually contain high sugar, high fat, high salt, and high cholesterol. The high sugar (simple carbohydrates) changes the brain chemistry in that it causes a release of chemicals serotonin and endorphins. Serotonin is a feel-good hormone in that it gives a person a sense of calm and tranquility. It floods the brain causing the person to feel less pain and anxiety, much like the drug, heroin (Katherine, 25).

Whenever a person is feeling lonely, frustrated, or stressed, he/she reaches for foods that are soothing. Chocolate is one such food because it contains refined sugar, a simple carbohydrate, causing the release of serotonin, followed by the calming effects. Other food items are said to work as well: pasta, white bleached flour products, alcohol, candy, and gum, just to name a few. Females especially gravitate to these products unconsciously to be able to nurture extensively. Using food in this way can cause weight gain, especially if there is little or no exercise to burn the extra calories. Most of these calories would be empty calories because the products eaten have been chemically stripped through processing.

A person involved in a harmful relationship is at high risk for binge-eating these high, empty calorie foods. They extend themselves to a harmful profiled person, a sign of low self-esteem by the way, develop an intimate relationship

with this person, and stay in that unfulfilling relationship. Over a period of time they begin to substitute eating to fulfill what they are not getting in the relationship, mainly nurturing. A lifetime struggle with unrecognizable, health issues ensues. These key factors are coupled by the development of a negative body image that obesity creates, and it's no wonder that life-threatening health issues are in their future. Much like the vicious cycle of violence (tension-violence-honeymoon) perpetuates itself, so does the vicious cycle of low self-esteem-binge eating-feel better cycle.

Harmful Relationships and Key Hormone Secretions

Try as we may, we cannot escape all of life's stressful situations, and everyone does not react to stress in the same way. What is stressful on a scale of three for one person might be a seven for someone else. This means that the person with the level seven will secrete more of the hormone cortisol and adrenaline than the person might on the level three.

There are two key hormones produced by the adrenal glands, associated with stress, adrenaline, and cortisol. Adrenaline gets the body ready for action during a stressful time. It increases your heart rate, blood pressure, and respiration. It strengthens your muscles, dilates your pupils, increases sweating, resulting in quick energy (Meeks, Linda. Philip Heit, and Randy Page p. 67). While these hormones are necessary for stress management, it is also important that the body be able to return to normal when the stress-related situation is over.

(<http://stress.about.com/od/stresshealth/a/cortisol.htm>)

However, in many cases, when a person is involved in a harmful relationship, the stress alarm within that person can be set off so often that he/she remains in a constant state of stress which in turn leaves cortisol at higher than normal levels in the body. Consequently, chronic high levels of cortisol cause many negative effects. These can include: hyperglycemia, lower immunity, high blood pressure, and suppressed thyroid function.

One of the most important consequences of high cortisol levels is abdominal fat. Most heart attacks are associated with abdominal fat. Studies have also shown that people who secrete higher levels of cortisol in response to stress also tend to eat more food, and foods that are higher in carbohydrates than people who secrete less cortisol. (<http://stress.about.com/od/stresshealth/a/cortisol.htm>) They eat in this manner which changes their brain chemistry, flooding the brain with serotonin which in turns makes them feel satisfied, or content. Their manner of eating evolves into a vicious cycle mixed in with the violence cycle.

What We Need To Know About Harmful Relationships

There are many ways in which people relate in harmful ways. Ten harmful profiles exist that people should be aware of when they meet and begin to establish a relationship with someone. These profiles will help a person to recognize a potentially harmful person. They exhibit behaviors that fit the description of each of the following harmful profiles.
(Meeks, Linda. Heit, Philip, and Randy Page. Health and Wellness. 137-139)

The people pleaser is a person who aims to please others at any cost. He/she is so afraid of not being liked by others that he/she will virtually do anything to be liked. This puts them in a victim position because they support their partner's harmful behavior in some fashion. They have low self-esteem and lack the ability to say no to the requests of their partner. Abusive people easily take advantage of the people pleaser because they simply can. People pleasers are easy targets of disrespect and abuse. For example, a people pleaser gets invited out to a dinner with his/her partner. She is so excited because of the attention, but there's a catch. The partner wants them to wear a black dress. The people pleaser had her heart set on wearing her new jeans because of the cold weather, but she will wear the black dress to please her partner. This also allows her to avoid any impending conflict that might happen. The people pleaser gives up her chance at happiness at the requests or demands of her partner in order to please and keep harmony in the relationship. This is at her expense.

The enabler is a person who in some ways supports the harmful behavior of someone else. He/she is usually the victim because of the type of support they lend. It usually involves minimizing his/her partner's behavior, or making excuses for it. He/she does not realize the escalating consequences of this support until something ultimately happens to thrust them into reality. For example, an enabler may allow his/her partner to speak unkindly about a friend or family member. As his/her partner continues to put the friend down, the enabler starts to physically and or emotionally move away from that family member or friend because of the apparent conflict that exists. He/she makes excuses for not attending birthday parties, or other celebrations that would bring them into contact. This creates a form of isolation for the enabler because they start to have less and less contact with that friend. The partner gets what he/she wants while the enabler loses what he/she once had; a good friend or supportive family member.

The clinger in a relationship is a person who because of low self-esteem or low self-worth gravitates towards and holds onto his/her partner. He/she is someone who cannot establish independence within the relationship. He/she is always in need of attention from his/her partner, negative or positive. He/she smothers the relationship because his/her partner has no time or place to be with other people. All the attention is focused on him/her. For example, a clinger can be someone who stalks his partner. When she is invited out by friends without him, he may

text message her 25 times during the evening. He may also show up unannounced at the outing. He may even cause something to happen so that she will have to cancel her engagement and be with him. The clinger does not allow his/her partner enough room in the relationship to maneuver independently.

The fixer is a person in the relationship who not only tries to give advice or solutions to other people's problems, but goes out of his/her way to solve them. Plainly spoken, the fixer meddles in other people's affairs. It is alright to give someone possible suggestions or possible solutions to difficulties, but the fixer jumps in and tries to resolve the problem for his/her partner instead of allowing him/her to resolve it. For example, a mother may want to help her daughter out of financial difficulty by having her get a job. Instead of letting the daughter research for a job, fill out an application and set up an interview, the mother steps in and does it for her. This is what a fixer would do; take over; repeatedly.

The distancer is a person who does not allow anyone to get too close emotionally. He/she keeps people at a distance because he/she is afraid of getting hurt. For example, Joe may become involved with Sally. They may date and even share sexual intimacy, but Joe keeps Sally at a distance by not trusting her with his deep feelings. He finds things to do like work to avoid becoming too emotionally close to her.

The controller is a person who needs to be in charge all the time. He/she is demanding and usually dominates the other person. He/she has been known to micro-manage others. He/she is a power-seeker who monopolizes and manipulates others to get what he/she wants. When that does not work, he/she use coercion to seal his/her partner's fate. He/she usually ends up disrespecting those around them. For example, Sally wants Joe to go to her mother's for Thanksgiving dinner. Joe agrees to do so only if at Sally's mother's he can watch football all the while they are there. Sally reluctantly agrees just to satisfy him.

The center is a person who is all about himself/herself. He/she cares less about his/her partner's wants or feelings. It's all about them. When engaged in conversation with him/her, the center focuses the conversation around them. For instance, Sally brings Joe to a picnic. He meets her friends and immediately begins telling them how great he is at his job. He continues to dominate the conversation about the importance of his position at work. Whenever someone has a chance to break in and say a few words, he isn't open to what they are saying, and re-establishes his point of importance.

The Abuser is a person who harms others. This is done in somewhat of a confusing manner at first. The victim is usually unaware of the abuser's intent

until something violent happens. Threats and or bodily injury are most likely to occur.

The liar is a person who in one way or another does not tell the truth. He/she simply lies. For instance, Joe may tell Sally he lost interest in the last job he had because it was not challenging enough for him, and he wants a managing position, when in fact he was fired for being late too many times. He does not tell Sally the truth because he wants to impress her.

The promise breaker is a person who makes plans with someone, but at the last minute changes them without notice. They break commitments that they agree on. They are untrustworthy and therefore unreliable. They promise to change or do better, but never do. For instance, Sally and Joe have plans to go to dinner at six, but his friend calls him and invites him to a football game. Joe calls Sally at five to tell her that he will not be able to make dinner because something has come up. He has broken his engagement with Sally to do something he likes better, watching football.

Rationale

I chose to explore this particular unit because people don't truly equate this particular psychological reasoning behind eating with death. Most people associate obesity, heart disease, genetics, or age-related illnesses with death. The real truth of the matter is that we are still struggling with abuse and neglect in our society. It is still taking a toll on not only its victims, but on their families and communities as well. The destructive psychological eating as a result of being in a harmful relationship and the chronic disease that develops is virtually undetected by most.

As I visited funeral parlors and spoke to family members and close friends of the deceased, a familiar pattern of events began to emerge. Unknowingly, these individuals were sharing bits and pieces of intimate details about the decedent. By themselves, these pieces were commonalities with no significance, but as I listened more intently, I began to gather the pieces that seemed to form an all-too-familiar pattern, harmful profiles and nutritional death. Among the living survivors were also signs, and symptoms of these harmful profiles and nutritional ignorance and neglect. To compound things, food especially in America, is plentiful, rich, and masterfully marketed.

I venture to guess that at no time in our history have there ever been so many food choices. Never before has food been so glamorized and advertised in society. Try picking up a magazine or newspaper without a food display somewhere

within its binding. Our social gatherings are usually food-inclusive. Christmas turkey, New Year's pork roast, Passover unleavened bread, Kwanza, soul food, Fourth of July hotdogs and hamburgers; these holidays are all represented by food.

African-American Teens: A High Risk Group

Since I teach at George Westinghouse High School, which is predominantly African-American, I feel it necessary to put focus in this area. According to Minority Women's Health, African-Americans die earlier than most other racial groups. They suffer the consequences of major health-related diseases. Of course an overwhelming number of women are at risk for domestic violence and obesity, but African-American teens, females in particular, are most vulnerable. African-American women have a statistically grim track-record for domestic violence-related issues that lead to cancer, obesity, hypertension, diabetes, stroke, and heart disease.

More often than not, African-American women do not receive adequate health care. (<http://www.4women.gov/minority/africanamerican>) If and when they indeed do receive care, it is usually too late. The cliché too little, too late comes to mind. This is also the case for intimate partner violence issues. One out of three African-American women experiences violence from their intimate partner. In addition to all of this are the dietary choices being made in times of stress. Chronic stress has also been linked to diabetes and heart disease. Let us consider a cultural food tradition such as soul food.

During the time of slavery, what has become known as "soul food" was actually "survival food." After gathering the scraps of food left over from their master's table, slaves prepared survival meals to share among themselves. These consisted of collard greens, pig portions, and other such discarded food products from the master's food preparations. These were spiced, fried and fashioned into what is known as soul food today. These foods were not the healthiest, but they provided enough nutrition for the slaves to function on. They were not the tastiest either, so various frying methods, along with spices and sauces were formulated and prepared to satisfy the palate as well. Since a slave did physical work from sunup to sundown, the amount of energy he/she expended was more than enough in most cases to burn the calories from these rather unhealthy foods. Today, with modern technology, these physical demands do not exist for most the most part, but soul food is still very much a part of most African-Americans lives.

Many families still come together for special occasions today, to celebrate loved ones or accomplishments. In the movie "Soul Food," a family's customary Sunday dinner celebration depicts dysfunctional family dynamics that cause

tremendous stress for all involved. All-involved means that the entire family is engaged in a chaotic struggle, and at a time when its most prized member, Big Mama, suffers from diabetes and chronic heart disease. I chose this film because it not only characterizes harmful relationship profiles within the family that create certain harmful dynamics, but also depicts traditional soul food items that are high in fat, sugar, cholesterol, and sodium, that lead to chronic diseases.

Objectives

The students will be able to increase their health literacy through unit vocabulary. They will further their knowledge about harmful relationships, intimate partner violence, and the destructive toll this can take on a person's health. The students will be able to actively engage in group discussions about different eating patterns, and the psychology behind the amount, frequency, and food choices. Through a series of projects they will be able to theorize a connection between harmful relationship profiles and common inexpensive food choices of high salt, high sugar, high fat, and high cholesterol products.

Strategies

The students will be exposed to a variety of harmful relationship situations where different types of abuse and/or neglect are present. They will open themselves up to the idea that there is quite a relationship between the chronic stress of harmful relationships and nutrition. Obesity will be directly related to hypertension and heart disease through mindless eating such as binge-eating. The students will use sustained silent reading, film analysis, and creative class projects to explore the psychology behind intimate harmful relationships and poor nutritional practices. All of the classroom activities do not have to be presented or completed in this unit. I gave a variation and only used three for my classes. It took a little longer than ten days for the students to complete. You will have to judge the time you use for outlining, discussion, and projects. I have semester classes, so I used three for health 1 students and three different projects for health 2 students. Although anorexia and bulimia are also eating disorders that can present themselves when a person is involved in a harmful relationship, these are not a part of this unit.

Classroom Activities

Day One

Activity # 1 Sustained Silent Reading – What to Know About Binge-Eating and Obesity

Objectives: The students will be able to:

1. demonstrate their ability to gather key facts from the text
2. increase their PSSA and health literacy skills
3. synthesize information regarding binge-eating and obesity

Procedure

The students will be asked to read p. 320 in the Meek/Heit textbook. They will then be asked to formulate an outline of the page listing the key factors of obesity and binge-eating in their own words. This skill will demonstrate their ability to read and reduce text information into outline formation. A review for clarification and discussion will follow with students sharing their key facts with the class. An accountable talk rubric is located in the appendices for grading purposes. A student will list the key facts on the board for all to see. This will keep everyone focused.

Teacher Note: You may use other articles of choice relating binge-eating and obesity. You may also create questions to extract text information.

Day Two

Activity # 2 Sustained Silent Reading – How Stress Affects Your Health Status

Objectives: The students will be able to:

1. demonstrate their ability to gather key facts from the text
2. increase their PSSA and health literacy skills
3. synthesize information regarding stress and multiple health factors

Procedure

The students will be asked to read pages 68-69 in the Meek/Heit textbook. They will then be asked to formulate an outline of the pages listing the key factors of stress and several health factors in their own words. This skill will demonstrate their ability to read and reduce text information into outline formation. A review for clarification and discussion will follow with students sharing their key facts with the class. A student will list the key facts on the board for all to see. This will keep everyone focused and on track.

Teacher Note: The instructor should walk around the classroom to monitor students making sure that all students are actively engaged in the reading and listing of facts. You may use other articles of choice relating to stress and health status. You may also create a question sheet to extract text information.

Day Three

Activity #3 Heart Puzzler

Objectives: The student will be able to:

1. identify ways that binge-eating harms health
2. learn how obesity affects cardiovascular health
3. increase their ability to synthesize information from previous readings
4. increase their creativity in learning and sharing of ideas with others

Procedure

The students will take the outlined information from the two previous readings and pair up with another student. Each pair of students will then begin constructing a heart-shaped puzzle from construction paper or foam board. The puzzle pieces will be designed and labeled by the student(s). These pieces will focus on factors associated with stress and binge-eating from the previous readings.

Teacher Note: The teacher can have sample puzzle pieces available for students to duplicate. The instructor can be instrumental in guiding students through the heart puzzle creations by having an actual heart shaped puzzle for demonstration. A copy of the heart-shaped puzzle is located in the appendices.

Day 4

Activity # 4 Sustained Silent Reading – “How People Relate in Harmful Ways” - Profile Pyramid Building - Project

Objectives: The student will be able to:

1. identify the ten profiles of people who relate in harmful ways
2. synthesize unhealthy behaviors/practices from previous text
3. use previously learned nutritional information/vocabulary
4. increase their ability to process information from the text

Procedure

The students will silently read pages 137-141 in the Meek-Heit Health textbook, "How People Relate in Harmful Ways." They will then be asked to formulate an outline of the pages listing the key factors of stress and several health factors in their own words. This skill will demonstrate their ability to read and reduce text information into outline formation. A review for clarification and discussion will follow with students sharing their key facts with the class. A student will list the key facts on the board for all to see. The students will explain why they chose these particular facts as key factors. The students will work individually creating a triangular pyramid with a silhouette of a male or female inside of it. Inside the silhouette, the students will identify characteristics of a chosen harmful profile. At the point of the triangle poor eating habits and stress-related factors will be listed. At the two bottom points of the triangle will be the match-ups of people who relate to the primary profile (silhouette) in harmful ways.

Teacher Note: A sample of the pyramid is located in the appendices. Students can create their own silhouette for inside the pyramid or use the sample one. They can also use a picture from a magazine or draw one. Students having difficulty making an outline from the text can use the Harmful Relationship Profile sheet located in the appendices.

Day Five

Activity # 5 Sustained Silent Reading: "How to Use Stress Management Skills" and "What to Do About Harmful Relationships" Reversing the Harmful Effects - Project

Objectives: The student will be able to:

1. identify the ten profiles of people who relate in harmful ways
2. explain how these profiles encourage harmful eating patterns
3. use previously learned nutritional information/vocabulary
4. increase their creative skills to disseminate information

Procedure

The students will silently read pages 70-71, 142 in the Meek-Heit Health textbook, "How to Use Stress Management Skills." They will then be asked to formulate an outline of the pages listing the key stress management factors in

their own words. They will then read page 142 “What to Do About Harmful Relationships.” The students will create an outline of the key factors for this information. This skill will demonstrate their ability to read and reduce text information into outline formation. A review for clarification and discussion will follow with students sharing their key facts with the class. A student will list the key facts on the board for all to see. The students will explain why they chose these particular facts as key factors. The students will then be asked to correct the situations of harmful profiles and poor eating habits. On the reverse side of the triangle, using the outlined information, the student(s) will create a healthy pyramid depicting healthy ways of resolving harmful relationships and instituting good nutrition and healthful lifestyle practices.

Day six

Activity # 6 Drama Time Line – A scenario of A Binge-Eater: What Really Happens When Someone is Involved in a Harmful Relationship and Chooses Food For Comfort?

Objectives: The student will be able to:

1. identify harmful relationship profiles involved in the scenario
2. identify poor food choices and amounts being consumed
3. correlate harmful relationship profiles, with food choices, consumption, obesity, stress, and other nutritional factors learned from previous nutritional units

Procedure

Using the article entitled “An Anatomy of a Happy Hour: What really happens when booze hits body,” the students will create a scenario of a typical male or female involved in a harmful relationship, binge-eating, stress, and the resulting physiological dilemma. They will describe a day in the life of this person. Starting at 5 p.m. on a Friday, they will create a time-line of events that demonstrate what happens socially, psychologically, and physiologically to this person in a three hour period, starting at Friday 3 p.m. until 8 p.m. The students may use any previous information from the previous activities.

When the students have finished, they will share their scenarios with the class depicting what happens to a person in a short period and then hypothesize what could potentially happen health-wise if this person does not get help to change their harmful relationship situation, and continues the stressful path of binge-eating high calorie foods over an extended period of time. The development of

various health problems such as obesity, diabetes, hypertension, and heart disease should be among the reasoning.

Day Seven

Activity # 7 Sustained Silent Reading – Diet and Cardiovascular Disease Outline/Heart String

Objectives: The students will be able to:

1. demonstrate their ability to gather key facts from the text
2. increase their PSSA and health literacy skills
3. synthesize information regarding diet and cardiovascular disease

Procedure

The students will be asked to read pages 276-279 in the Meek/Heit textbook. They will then be asked to formulate an outline of the pages listing the key factors of stress and several other health factors in their own words. This skill will demonstrate their ability to read and reduce text information into outline formation. A review for clarification and discussion will follow with students sharing their key facts with the class. A student will list the key facts on the board for all to see. This will keep everyone focused and on task. To make this reading into a visual project, the students can cut out several hearts from construction paper. On each heart they can list a helpful heart tip along with a picture. The students can then string their hearts together to make a banner.

Teacher Note: The instructor should walk around the classroom to monitor students making sure that all students are actively engaged in the reading and listing of facts. You may use other articles of choice relating to cardiovascular disease. You may also use a question sheet to extract text information. There is a heart located in the appendices as a tracing tool for the students if needed.

Day Eight - Nine

Activity # 8 Film “Soul Food”

Objectives: The student will be able to:

1. identify causes of cardiovascular disease and diabetes
2. identify harmful relationship profiles within families
3. create a correlation between stress, harmful profiles, high calorie foods, and diabetes/heart disease

4. integrate diabetes, and heart disease factors with family dynamics

Procedure

The students will view the film, Soul Food. They will be given a film analysis sheet. They will then be asked to review the sheet prior to viewing the film. This will allow for any clarification of terms or concepts before the film. Under each category listed on the analytical sheet, the students will list words or phrases of what they depict from the film using the unit vocabulary. At this point, the students should have a keen awareness of what to look for based on their previous readings and class discussions. They can also use the word wall to assist them. One side of the analytical sheet will have harmful profiles in which they are to list the names of characters under each appropriate profile. A character may be listed under several harmful profiles. On the other side of the sheet, they will list specific behaviors and other observations they made under each specific category.

Teacher Note: The analysis sheet guarantees that each student is on task while viewing the film. It also involves them in the story at a more critical level. They view it for detail, not entertainment. A sample of the analysis sheet and rubric is located in the appendices. Film viewing and analysis may take up to three days.

Day 10

Activity # 9 School Newspaper Article

Objectives: The student will be able to:

1. increase his/her health literacy skills
2. increase the reader's knowledge about harmful relationships and eating
3. advise readers about healthier relationships to improve eating habits and cardiovascular health
4. provide websites and link information about healthier lifestyles/intimate partner violence

Procedure

The students will be asked to select one of their projects and write a three paragraph informative summary depicting harmful relationships and how they can cause a person to engage in unhealthy practices such as: reaching for food instead of healthy solutions. It will also entail how easily unmanaged, chronic stress can consume a person who is in a harmful relationship. The summary should entice

the readers' attention to the theory that harmful relationships can lead to harmful nutritional eating patterns and an over-indulgence of empty-calorie foods that put them at risk for developing chronic diseases such as diabetes, and/or heart disease, early in life. Students may use any information from the outlines or projects they collected engaging in the class activities.

Teacher Note: A sample of the one paragraph essay prompt and a rubric is located in the appendices. The teacher will review all summaries and choose one or two to submit to the school newspaper. The teacher may also have each student read his/her summary for the class, and have the class select the two best summaries. They may also be involved in the newspaper column design.

Academic Standards for Health, Safety & Physical Education

These standards indicate what the students should have learned by the end of the third, sixth, ninth and twelfth grade. This unit specifically uses 10.1, 10.2, 10.3

- 10.1 Concepts of Health – Stages of Growth and Development, Interaction of Body Systems, Nutrition, Alcohol, Tobacco and Chemical Substances, Health problems and Disease Prevention
- 10.2 Healthful Living – Health Practices, Products and Services, Health Information and Consumer Choices, Health Information and Media, Decision-Making Skills, Health and the Environment
- 10.3 Safety and Injury Prevention – Safe/Unsafe Practices, Emergency Responses/Injury Management, Strategies to Avoid/Manage Conflict, Safe Practices in Physical Activity
- 10.4 Physical Activity – Physical Activities that Promote Health and Fitness, Effects of Regular Participation, Responses of the Body Systems to Physical Activity, Physical Activity Preferences, Physical Activity and Motor Skill Improvement, Physical Activity and Group Interaction
- 10.5 Concepts, Principles and Strategies of Movement – Movement Skills and Concepts, Motor Skill Development, Practice Strategies, Principles of Exercise/Training, Scientific Principles that Affect Movement, Game Strategies

Unit Vocabulary

| | |
|---------------------------|-----------------|
| obesity | relationships |
| nutrition | cardiovascular |
| intimate | awareness |
| physiological | overweight |
| profiles | atherosclerosis |
| diabetes | plaque |
| hypertension | diet |
| disorder | antioxidants |
| binge-eating | blood pressure |
| psychological | people pleaser |
| analysis | enabler |
| intimate partner violence | violence |
| prevention | abuser |
| premature | controller |
| theory | supports |
| health care | profiles |
| frequency | fixer |
| African-American | stroke |
| chronic disease | harmful |

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<<http://www.4women.gov/minority/africanamerican/>>.

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"Heart Disease." Centers for Disease Control. 15 Nov. 2007. National Center of Chronic Disease Prevention and Health Promotion. 23 Apr. 2008
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"Health Issues." Newham Domestic Violence Forum. London Borough of Newham, Social Services Department. 3 May 2008 <<http://www.newhamdvf.org.uk/Health.html>>.

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Pennsylvania. Pennsylvania Department of Education. Department of Education. Academic Standards for Health, Safety and Physical Education. 18 July 2002. 23 Apr. 2008 <http://www.pde.state.pa.us/stateboard_ed/lib/stateboard_ed/SandyHealth.pdf>.

This website was instrumental obtaining academic standards information.

"Stress Management." About.Com. 2008. The New York Times Company. 20 Mar. 2008 <<http://stress.about.com/od/stresshealth/a/cortisol.htm>>.

This website was valuable for its information about chronic stress response and cortisol; also blood pressure, heart attacks and stroke.

"Type 2 Diabetes." American Diabetes Association. American Diabetes Association. 2 May 2008 <<http://www.diabetes.org/type-2-diabetes.jsp>>.

This website was valuable for its information about type 2 diabetes

WIN: Weight -Control Information Network. May 2007. An Information Service of the National Institute of Diabetes and Digestive and Kidney Diseases. 23 Apr. 2008 <<http://win.niddk.nih.gov/statistics/index.htm>>.

This website was valuable for information about obesity: prevalence, statistics, economic costs, and body mass index charts

16 May 2008 <<http://foilman.com/store/images/heart.gif>>.

This website was instrumental for the heart-shaped puzzle

Magazine

"Anatomy of a Happy Hour." In Sync Spring 2004: 12-13.

This article provides a time line of events that a person is engaged with alcohol and the physical results.

Books

Katherine, Anne M.A. Anatomy of a Food Addiction: The rain Chemistry of Overeating. California: Gurze Books, Third Edition 1996.

This book was valuable for its information about how overeating affects body functions

Meeks, Linda. Philip Heit, and Randy Page. Health and Wellness. Ohio: Meek Heit Company, 1999.

This textbook was valuable for the information about the parts of the brain, heart and their functions. It was also useful for the sustained silent readings in the lessons plans.

Film

Soul Food. Dir. George Tillman Jr. Perf. Vanessa Williams VII, Vivica a. Fox, Nia Long, Michael Beach, Mekhi Phifer. 2001. Amazon.Com. 26 May 2008.

Appendices

Sample: Activity # 4 Harmful Behavior Profile Sheet

Sample: Also for the reverse side of Activity Sheet # 8

Name _____ Period ____ Date _____

The People Pleaser

The Enabler

The Clinger

The Fixer

The Distancer

The Controller

The Center

The Abuser

The Liar

The Promise Breaker

Sample Activity Sheet # 8

Soul Food Film Analysis Sheet

Name _____ Period _____ Date _____

Characters

Enabling Behaviors

Types of Food

Toxic People

Harmful Relationships

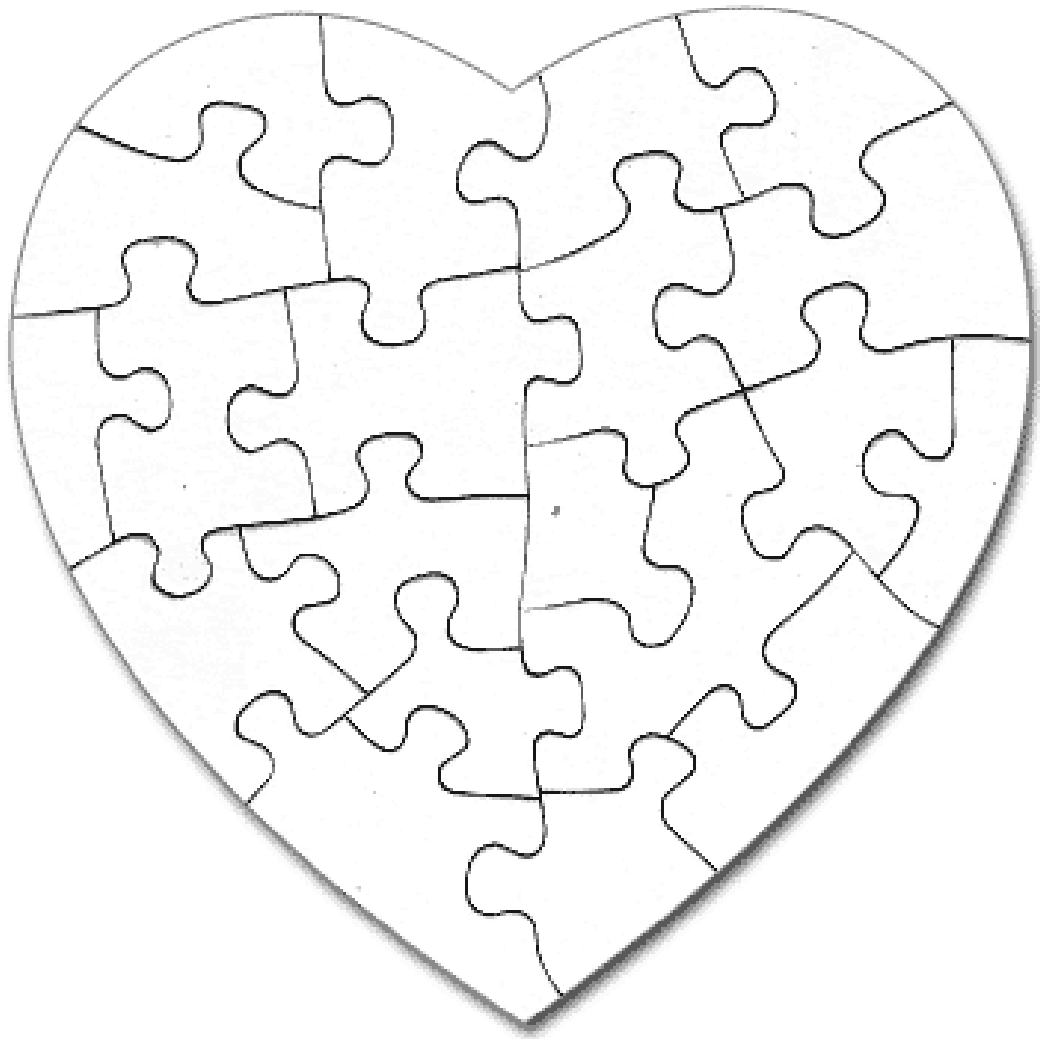
Emotional Issues

Stressors

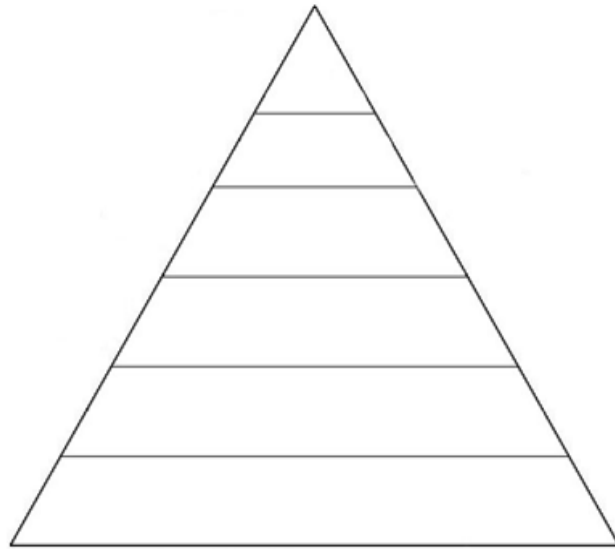
Medical Problems

Be prepared to explain your analysis through accountable talk.

Activity # 3 Heart Puzzle Sample



Activity # 4 Profile-Building Pyramid Samples



School Newspaper Article Sample

Name: _____ Date: _____

WRITING **School Newspaper Article**

Directions: You will have up 45 minutes to plan, write and proof read your article.

Based on information you gathered from the activities in this unit, write a 3 paragraph informative summary theorizing how harmful relationships cause a person to engage in unhealthy nutritional practices leading to hypertension, diabetes, and or heart disease. Each paragraph should be 7-10 sentences.

Plan

Before you write:

- ✓ Read the prompt carefully so you understand exactly what you are being asked
- ✓ to do.
- ✓ Consider topic, task, and audience.
- ✓ Think about what you want to write.
- ✓ Use scratch paper to organize your thoughts. Use strategies like mapping or outlining.

Write

As you write:

- ✓ Maintain a clear and consistent focus.
- ✓ Include specific details; use examples and reasons to support your ideas.
- ✓ Use a variety of well-constructed, complete sentences.
- ✓ Use a logical organization with an obvious introduction, body, and conclusion.

Proofread

After you write:

- ✓ Did you support your ideas with specific details?

✓ Do the point of view and tone of the essay remain consistent?
Check for capitalization, spelling, sentence structure, punctuation,
and usage.

Accountable Talk Rubric For Class Discussion

I use this simple form for class discussion grading. This rubric has four levels.

The **fourth level** is an **advanced level**. On this level the student has answered questions in a clear and concise manner. They have used unit vocabulary in a sophisticated dialog. They have clearly demonstrated their understanding/knowledge of the film/reading and how it applies to the unit of study. They are also able to link it to previous units of study.

The **third level** is a **proficient level**. On this level the student has answered most questions in an acceptable manner. They have used some unit vocabulary in dialog. They clearly demonstrated their understanding of the film/reading and how it relates to the unit of study.

The **second level** is a **non proficient level**. The student has inconsistently answered questions in discussion. They use minimum unit vocabulary in dialog. They have a minimum of understanding of how the film/reading applies to the unit of study.

The **first level** is a **non proficient level**. This student infrequently answered questions in discussion. They demonstrated little or no use of unit vocabulary. They showed no real understanding of the film/reading as it related to the unit of study.

Teacher Note: These levels can be assessed any number of points for grading.

Example: 4 = 100 pts 3 = 75 pts 2 = 50 pts 1 = 25 pts

