



OUT WITH THE OLD, IN WITH THE NEW!

Changing old habits, particularly habits we have become accustomed to over a period of time, is not easy. Eating, exercise and attitude habits fall into this category. Yet it is possible to succeed. When we try to change, we experience lots of resistance. Finally, "something clicks", and change begins to occur. With a little determination, we do gradually make the changes necessary to achieve a healthy lifestyle.

HOW DO I GET STARTED?

Keep a journal (little tablet) for **6 months** and record:

- Two changes per week
 - One food change
 - One activity change
- Daily food diary (compare to pyramid)
- Daily exercise/activity diary
- If you commit to **2** changes/week made into habits, you will have **40-50** new habits = lifestyle change. You won't believe the results!
- If you fall off this plan, restart the process.

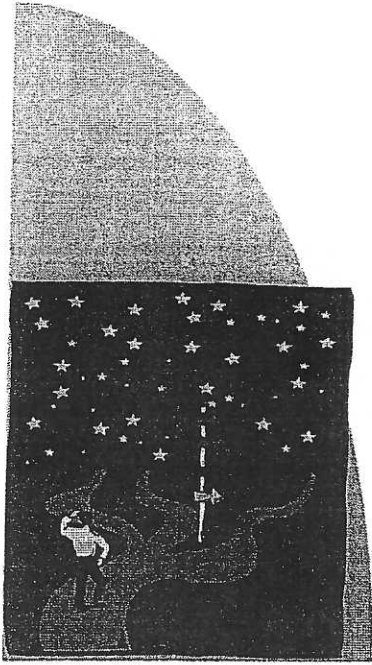
Detour

THE KEY TO CHANGE

- **Desire - motivation to change**
- **A Successful Belief System – family, friends**
- **Knowledge – self-management classes**
- **A Plan For Change – setting goals**
- **Learning From Setbacks – mistakes make us stronger**
- **Acknowledge Progress – non-food rewards and incentives**

Making a Positive Change in Your Life

Think of a positive change you want to make in your life.



1. What will be the hardest part of making this change? What will you miss about the "old way" of doing things?
2. Can you give an example of "building a bridge" to make this change?
3. How can you "take charge" of the change?
4. How can family and friends support you in making this change?

Select two things that you really want to do and are small steps to "bridge the gap" of change. The next page has some suggestions; you can use these or come up with your own. Before you begin this change, think about the following:

THE MAIN (BIG) REASON I WANT TO MAKE THIS CHANGE (MY GOAL):
to lose weight, to control my blood glucose, to lower my cholesterol; to quit smoking.

THE PEOPLE WHO CAN HELP ME DO THESE THINGS: friend, co-worker, family member, health care provider. **WHAT CAN THEY DO TO HELP?**

TWO SMALL STEPS OF CHANGE I WILL MAKE THIS WEEK:
(see the following page for suggestions)

1. **FOOD:** _____
2. **ACTIVITY:** _____

(Each week build on these changes, or add new changes.)