

The Wellness Worksheets in this package are designed to help students become more involved in their own wellness and better prepared to implement behavior change programs. They include the following types of activities:

- Assessment tools that help students learn more about their wellness-related attitudes and behaviors.
- Internet activities that guide the students in finding and using wellness-related information on the Web.
- Knowledge-based reviews that increase students' comprehension of key concepts.

Using a Pedometer to Track Physical Activity

How physically active are you? Would you be more motivated to try to increase daily physical activity if you had an easy way to monitor your level of activity? If so, consider wearing a pedometer to track the number of steps you take each day—a rough but easily obtainable reflection of daily physical activity.

Determine Your Baseline

Wear the pedometer for a week to obtain a baseline average daily number of steps.

	M	T	W	Th	F	Sa	Su	Average
Steps								

Set Goals

Set an appropriate goal for increasing steps. The goal of 10,000 steps per day is widely recommended, but your personal goal should reflect your baseline level of steps. For example, if your current daily steps are far below 10,000, a goal of walking 2,000 additional steps each day might be appropriate. If you are already close to 10,000 steps per day, choose a higher goal. Also consider the physical activity goals in the 2005 Dietary Guidelines:

- To reduce the risk of chronic disease, aim to accumulate at least 30 minutes of moderate physical activity per day.
- To help manage body weight and prevent gradual, unhealthy weight gain, engage in 60 minutes of moderately to vigorously intense activity on most days of the week.
- To sustain weight loss, engage in at least 60–90 minutes of daily moderate-intensity physical activity.

To help gauge how close you are to meeting these time-based physical activity goals, you might walk for 10 or 15 minutes while wearing your pedometer to determine how many steps correspond with the time-based goals from the Dietary Guidelines.

Once you have set your overall goal, break it down into several steps. Smaller goals are easier to achieve and can help keep you motivated and on track. Having several interim goals also gives you the opportunity to reward yourself more frequently. Note your goals below:

Minigoal 1: _____ Target date: _____ Reward: _____
 Minigoal 2: _____ Target date: _____ Reward: _____
 Minigoal 3: _____ Target date: _____ Reward: _____
 Overall goal: _____ Target date: _____ Reward: _____

Develop Strategies for Increasing Steps

What can you do to become more active? Your text includes a variety of suggestions, including walking when you do errands, getting off one stop down the line from your destination on public transportation, parking an extra block or two away from your destination, and doing at least one chore every day that requires physical activity. If weather or neighborhood safety is an issue, look for alternative locations to walk. For example, find an indoor gym or shopping mall or even a long hallway. Check out locations that are near or on the way between your campus, workplace, or residence. If you think walking indoors will be dull, walk with friends or family members or wear headphones (if safe) and listen to music or audio books.

Are there any days of the week for which your baseline steps are particularly low and/or it will be especially difficult because of your schedule to increase your number of steps? Be sure to develop specific strategies for difficult situations.

How close are you to meeting your goal? How do you feel about your program and your progress?

If needed, describe changes to your plan and additional strategies for increasing steps:

WELLNESS WORKSHEET 2

Facts About Cardiovascular Disease

Review your knowledge of CVD by filling in the blanks and answering the questions below. Use online resources to assist you in completing the worksheet.

1. What are the six main risk factors for cardiovascular disease?

- a. _____ d. _____
- b. _____ e. _____
- c. _____ f. _____

2. List four additional factors that may increase risk for cardiovascular disease:

- a. _____ c. _____
- b. _____ d. _____

3. Name the two main forms of cholesterol and describe their function:

- a. _____

- b. _____

4. Describe the difference between systolic and diastolic pressure. Give normal and high ranges for each:

Why is hypertension dangerous? _____

List two treatments for hypertension:

- a. _____
- b. _____

5. What is atherosclerosis? How do plaques form, and why are they dangerous?

WELLNESS WORKSHEET 2 — continued

6. What is a heart attack?

7. What is angina pectoris? _____

What is arrhythmia, and how does it relate to sudden cardiac death? _____

What are three early signals of a heart attack?

a. _____ c. _____

b. _____

List and describe two procedures performed to treat heart disease:

a. _____

b. _____

8. List and describe the two major types of strokes:

a. _____

b. _____

List three warning signs of a stroke:

a. _____ c. _____

b. _____

9. List and describe three other types of heart disease:

a. _____

b. _____

c. _____

Facts About Cancer

Review your knowledge of cancer by answering the questions below. Use online resources to assist you in completing the worksheet.

1. What is cancer?

2. List and describe the two general types of tumors:

a.

b.

3. What is metastasis?

What are the two ways metastasis can occur?

a.

b.

4. List and define four common classes of malignant tumors:

a.

b.

c.

d.

5. What is a mutagen? How can gene mutation cause cancer?

Give three examples of mutagens:

- a. _____ c. _____
- b. _____

6. What is a carcinogen?

Give three examples of carcinogens:

- a. _____ c. _____
- b. _____

7. Define the following, and describe how each can contribute to the development of cancer:

oncogene: _____

suppressor gene: _____

cancer promoter: _____

8. List two dietary compounds that may contribute to cancer:

- a. _____ b. _____

List six dietary compounds that may help prevent cancer:

- a. _____ d. _____
- b. _____ e. _____
- c. _____ f. _____

Facts About Pathogens and How They Cause Disease

Part I. Pathogens

Familiarize yourself with different types of pathogens by completing the chart below. Use online resources to assist you in completing the worksheet.

	Description and Examples	Diseases Caused	Possible Treatments
Bacteria			
Viruses			
Fungi			
Protozoa			
Parasitic worms			
Prions			

WELLNESS WORKSHEET 5

Facts About the Body's Defenses Against Infection

Review your knowledge of infection and immunity by answering the questions below. Use online resources to assist you in completing the worksheet.

1. List and describe three of the body's physical or chemical barriers against infection:

a. _____

b. _____

c. _____

2. What general type of cells carry out the immune response? _____

Where are these immune defenders produced? _____

Describe each of the following types of cells and explain their role in the immune response:

Neutrophils: _____

Macrophages: _____

Natural killer cells: _____

Dendritic cells: _____

Helper T cells: _____

Killer T cells: _____

Suppressor T cells: _____

B cells: _____

Memory T and B cells: _____

3. What are antibodies? What is their role in the immune response?

WELLNESS WORKSHEET 5 — continued

4. How do the body's defenders recognize an enemy? What is an antigen?

5. What is the inflammatory response?

6. Briefly describe the four phases of the immune response:

a. _____

b. _____

c. _____

d. _____

7. What is immunity? When and how does it occur?

8. When is an infected person contagious?

9. What is a vaccine?

What are the two types of immunity that a vaccine can confer?

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a. _____

b. _____

10. What is an allergic reaction and how does it occur?

Checklist for Avoiding Infection

The best thing you can do to prevent an infection is to limit your exposure to pathogens. The next best thing is to keep your immune system as strong as possible. Read through the following list of statements and check whether each is mostly true or mostly false for you.

True False

Exposure to Pathogens

- I receive drinking water from a clean supply.
The area in which I live has adequate sewage treatment.
I frequently wash my hands with soap and warm water for at least 10-20 seconds.
I avoid close contact with people who are infectious with diseases transmitted via the respiratory route (e.g., influenza, chicken pox, and tuberculosis).
I do not inject drugs.

When Outdoors

- When hiking or camping, I do not drink water from streams, rivers, or lakes without first purifying it.
I avoid contact with ticks, mosquitoes, rodents, bats, and other disease carriers.
When hiking in the woods or playing in a yard in an area where Lyme disease or other tickborne infections have been reported, I take appropriate precautions:
Wear light-colored clothing: long pants, a long-sleeved shirt, and closed shoes.
Tuck my pants into my socks, shoes, or boots.
Tuck my shirt into my pants.
Wear light-colored, tightly woven fabrics.
Wear a hat.
Stay near the center of trails.
Check myself daily for ticks.
Shower and shampoo after each outing.
Wash clothes and check equipment after each outing.
Use an insect repellent containing DEET, picaridan, or oil of lemon eucalyptus on my skin and/or a spray containing permethrin on my clothing.
If I discover a tick attached to my skin, I remove it immediately in an appropriate manner (fill in):

Four horizontal lines for filling in the answer to the tick removal question.

True False**In a Sexual Relationship**

- ___ ___ I am in a monogamous relationship with a mutually faithful, uninfected partner.
- ___ ___ I use condoms.
- ___ ___ I discuss STDs and prevention with new partners.
- ___ ___ I avoid engaging in high-risk behaviors with any person who might carry HIV.

In the Kitchen

- ___ ___ I wash my hands thoroughly with warm soapy water before and after handling food.
- ___ ___ I don't let groceries sit in a warm car.
- ___ ___ I avoid buying food in containers that leak, bulge, or are severely dented.
- ___ ___ I use separate cutting boards for meat and for foods that will be eaten raw.
- ___ ___ I thoroughly clean all equipment (cutting boards, counters, utensils) before and after use.
- ___ ___ I rinse and scrub fresh fruits and vegetables carefully to remove all dirt.
- ___ ___ I cook all foods thoroughly, especially beef, poultry, fish, pork, and eggs.
- ___ ___ I verify that hamburgers are cooked to 160°F (71°C) with a food thermometer.
- ___ ___ I store foods below 40°F (5°C).
- ___ ___ I do not leave cooked or refrigerated foods at room temperature for more than 2 hours.
- ___ ___ I thaw foods in the refrigerator or microwave.
- ___ ___ I use only pasteurized milk and juice.
- ___ ___ I avoid coughing or sneezing over foods, even when I'm healthy.
- ___ ___ I cover any cuts on my hands when handling food.

To Keep Your Immune System Healthy

- ___ ___ I eat a balanced diet, following the guidelines presented in the Dietary Guidelines for Americans.
- ___ ___ I maintain a healthy weight.
- ___ ___ I get enough sleep, 6–8 hours per night.
- ___ ___ I exercise regularly.
- ___ ___ I don't smoke, and I drink alcohol only in moderation.
- ___ ___ I wash my hands frequently.
- ___ ___ I have effective ways of coping with stress.
- ___ ___ I get all recommended immunizations and booster shots.
- ___ ___ *For people with heart valve disorders that place them at increased risk of infection: I check with my health care provider about antibiotic use before dental or surgical procedures and before body piercing.*

False answers indicate areas where you could change your behavior to help avoid infectious diseases. Consider creating a behavior change strategy for any statement you checked as false.

INTERNET ACTIVITY

Choose one of the emerging infectious diseases described in the chapter or one you've heard about recently in the news. Perform an internet search to learn more about the disease. What causes the disease, and what are its effects? How is it transmitted? Where is it most common? What are some of the reasons for its emergence and/or spread? What can public health officials and individuals do to reduce the spread of the disease?

Disease: _____

Site(s) visited (URL): _____

Information obtained:

Allergy Record

Allergic disorders are very common among people of all ages. Put a check next to any of the following allergic disorders that you have experienced:

- Allergic rhinitis (persistent nasal congestion, runny nose, and/or postnasal drip)
- Atopic dermatitis (chronic or recurrent inflammation of the skin)
- Allergic conjunctivitis (red, itchy, watery eyes)
- Asthma
- Sinusitis (chronic sinus infection characterized by persistent cold symptoms, often including facial pain)
- Contact dermatitis (rash resulting from contact with an allergen)
- Food allergy
- Insect sting allergy

- Drug allergy

Next, create a record of your allergy triggers. Put a check next to any substance to which you have had an allergic reaction; if appropriate, list the specific type of substance you are allergic to (cats, spider bites, nuts, and so on). Describe the type of reaction you had:

✓ Allergen	Specific Type(s)	Reaction(s)
Poison ivy or oak		
Animals		
Feathers		
Insect bites or stings		
Molds		
Dust mites		
Ragweed		
Pollen		
Foods		
Other:		

Describe any allergy tests you've undergone and any treatments you received for allergies or asthma:

INTERNET ACTIVITY

Many people suffer from seasonal allergies, in which the severity of symptoms varies with the concentration of environmental allergens such as pollen. Current pollen counts and yearly pollen patterns are available from the Web site of the American Academy of Allergy, Asthma, and Immunology's National Allergy Bureau (<http://www.aaaai.org/nab>). Visit the site and locate the pollen information for the city closest to you. Check both today's pollen count and the record over time for the area. Which types of pollen are at the highest concentrations in which months? If you have allergies, can you see a relationship between your pattern of symptoms and the seasonal pattern of pollen concentrations in your area?

City: _____

Current pollen counts: _____

Seasonal pattern (describe):

Facts About Sexually Transmitted Diseases

Familiarize yourself with different types of sexually transmitted diseases by completing the chart below:

Use online resources to assist you in completing the worksheet.

	Early symptoms	Potential long-term effects	Diagnosis and treatment
HIV infection			
Chlamydia			
Gonorrhea			
Pelvic inflammatory disease			
Genital warts (HPV infection)			

WELLNESS WORKSHEET 9 — continued

	Early symptoms	Potential long-term effects	Diagnosis and treatment
Genital herpes			
Hepatitis B			
Syphilis			

Do Your Attitudes and Behaviors Put You at Risk for STDs?

Part I. Risk Assessment

All sexually transmitted diseases are preventable. You have control over the behaviors and attitudes that place you at risk for contracting STDs and for increasing their negative effects on your health. To identify your risk factors for STDs, read the following list of statements and identify whether they're true or false for you.

Note: The statements in this assessment assume current sexual activity. If you have never been sexually active, you are not now at risk for STDs. Respond to the statements in the quiz based on how you realistically believe you would act. If you are currently in a mutually monogamous relationship with an uninfected partner or are not currently sexually active (but have been in the past), you are at low risk for STDs at this time. Respond to the statements in the quiz according to your attitudes and past behaviors.

True	False	
------	-------	--

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. I have only one sex partner. |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. I always use a latex condom for each act of intercourse, even if I am fairly certain my partner has no infections. |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. I do not use oil-based lubricants or other oil-based products with condoms. |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. I discuss STDs and prevention with new partners before having sex. |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. I do not use alcohol or another mood-altering drug in sexual situations. |
| <input type="checkbox"/> | <input type="checkbox"/> | 6. I would tell my partner if I thought I had been exposed to an STD. |
| <input type="checkbox"/> | <input type="checkbox"/> | 7. I am familiar with the signs and symptoms of STDs. |
| <input type="checkbox"/> | <input type="checkbox"/> | 8. I regularly perform genital self-examination to check for signs and symptoms of STDs. |
| <input type="checkbox"/> | <input type="checkbox"/> | 9. When I notice any sign or symptom of any STD, I consult my physician immediately. |
| <input type="checkbox"/> | <input type="checkbox"/> | 10. I obtain screening for HIV and other STDs regularly. In addition (if female), I obtain yearly pelvic exams and Pap tests. |
| <input type="checkbox"/> | <input type="checkbox"/> | 11. When diagnosed with an STD, I inform all recent partners. |
| <input type="checkbox"/> | <input type="checkbox"/> | 12. When I have a sign or symptom of an STD that goes away on its own, I still consult my physician. |
| <input type="checkbox"/> | <input type="checkbox"/> | 13. I do not use drugs prescribed for friends or partners or left over from other illnesses to treat STDs. |
| <input type="checkbox"/> | <input type="checkbox"/> | 14. I do not share syringes or needles to inject drugs. |

False answers indicate attitudes and behaviors that may put you at risk for contracting STDs or for suffering serious medical consequences from them.

Part II. Communication

1. List three ways to bring up the subject of STDs with a new partner. How would you ask whether he or she has been exposed to any STDs or engaged in any risky behaviors? (Remember that because many STDs can be asymptomatic, it is important to know about past behaviors even if no STD was diagnosed.)

- a. _____

- b. _____

- c. _____

2. List three ways to bring up the subject of condom use with your partner. How might you convince someone who does not want to use a condom?

- a. _____

- b. _____

- c. _____

3. If you had an STD in the past that you might possibly still pass on (e.g., herpes), how would you tell your partner(s)?

4. If you were diagnosed with an STD that you believe was given to you by your current partner, how would you begin a discussion of STDs with him or her?

Talking about STDs may be a bit awkward, but the temporary embarrassment of asking intimate questions is a small price to pay to avoid contracting or spreading disease.

Understanding Health and Medical Terminology

How well do you understand the terminology used by health care providers and public health officials? See how many of the following medical and health terms you can match with their correct definitions.

- | | |
|-------------------------------|--|
| ___ 1. Acute | a. A bruise |
| ___ 2. Adverse health effect | b. A change in the DNA, genes, or chromosomes of living organisms. |
| ___ 3. Additive effect | c. A closed, fluid-filled, or semisolid sac embedded in tissue |
| ___ 4. Analgesic | d. A condition characterized by deterioration of body parts that worsens over time |
| ___ 5. Antagonistic effect | e. A negative or problematic change in body function |
| ___ 6. Atrophy | f. A response to multiple substances in which one substance amplifies the effect of another; the combined effect of the substances acting together is greater than the sum of the effects of the substances acting by themselves |
| ___ 7. Benign | g. A response to multiple substances that is equal to the sum of the effects of all the substances added together |
| ___ 8. Carcinogen | h. A response to multiple substances that is less than would be expected if the effects of the individual substances were added together |
| ___ 9. Chronic | i. A sore |
| ___ 10. Cyst | j. A statement made by a government agency informing the public that a potentially hazardous condition exists, along with guidelines for avoiding or preventing exposure |
| ___ 11. Degenerative disorder | k. A substance that causes cancer |
| ___ 12. Dermal | l. Abnormal accumulation of fluid in the cells, especially just under the skin or in an organ such as the heart |
| ___ 13. Diagnosis | m. Affecting the whole body |
| ___ 14. Edema | n. Aftereffects of an illness |
| ___ 15. Hematoma | o. Any medical technique that does not involve puncturing or entering the body |
| ___ 16. Incidence | p. An assessment of the future course or outcome of a disease |
| ___ 17. Ingestion | q. Cancerous; tending to become worse or invasive |
| ___ 18. In vitro | r. Decreased supply of oxygenated blood to any part of the body |
| ___ 19. In vivo | s. Diagnostic technique of feeling, with the hands, the firmness, texture, or location of various body parts |
| ___ 20. Ischemia | t. Disappearance of the signs and symptoms of a disease |
| ___ 21. Lesion | |
| ___ 22. Malignant | |
| ___ 23. Morbidity | u. In an artificial environment outside a living organism or body |

- ___ 24. Mortality
- ___ 25. Mutation
- ___ 26. Noninvasive
- ___ 27. Palpation
- ___ 28. Palpitation
- ___ 29. Prevalence
- ___ 30. Prognosis
- ___ 31. Pruritus
- ___ 32. Public health advisory
- ___ 33. Recurrence
- ___ 34. Remission
- ___ 35. Rhinitis
- ___ 36. Risk
- ___ 37. Sepsis
- ___ 38. Sequelae
- ___ 39. Synergistic effect
- ___ 40. Systemic
- v. Infection or contamination
- w. Inflammation of the nasal membranes, often caused by the common cold
- x. Itching
- y. Noncancerous; harmless
- z. Occurring over a long time
- aa. Occurring over a short time
- bb. Pain reliever
- cc. Pounding or racing of the heart
- dd. Referring to the skin
- ee. Relating to death
- ff. Relating to illness or disease; state of being ill or diseased
- gg. Shrinkage of muscle or tissue
- hh. The act of swallowing something through eating, drink-
ing, or mouthing objects
- ii. The identification of a disease or condition, usually made by examining the patient's history, symptoms, appearance, and analysis of tests
- jj. The number of cases of a disease in a certain population at a specific point in time
- kk. The number of new cases of a disease in a certain population in a specific period of time
- ll. The probability that something will cause injury or harm
- mm. The return of a disease.
- nn. Within a living organism or body

Answers: 1. aa; 2. e; 3. g; 4. bb; 5. h; 6. gg; 7. y; 8. k; 9. z; 10. c; 11. d; 12. dd; 13. ii; 14. l; 15. a; 16. kk; 17. hh; 18. u; 19. nn; 20. r; 21. i; 22. q; 23. ff; 24. ee; 25. b; 26. o; 27. s; 28. cc; 29. jj; 30. p; 31. x; 32. j; 33. mm; 34. t; 35. w; 36. ll; 37. v; 38. n; 39. f; 40. m

Scoring:

30–40 correct answers: You have an excellent grasp of commonly used health and medical terminology.

20–29 correct answers: Your knowledge of terminology is good.

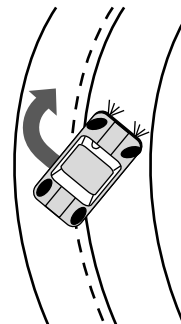
10–19 correct answers: Your knowledge of terminology is fair.

Fewer than 10 correct answers: You may be at a disadvantage in communicating with your health care providers and understanding health messages.

Driving Like a Pro

Along with safe cars, safety belts, air bags, and sobriety, driving skills are an important element in motor vehicle safety. Learn to drive defensively, avoiding dangerous situations and reacting intelligently in a crisis. To find out how well you drive already, try this defensive-driving quiz. (Some questions have more than one correct answer.)

- The safest way to brake is
 - as fast as possible.
 - as far in advance as possible.
- In moderate town traffic, with another car at a safe distance in front of you, you're being tailgated. What do you do?
 - Tap the brakes and start to slow down—gradually—keeping an eye on the rearview mirror.
 - Increase your speed to the allowable limit.
 - Try to pass the car in front of you.
 - Pull over to the right.
- You are traveling 30 mph on a dry road. Safe following distance is a. 1 car length.
 - 2 car lengths.
 - 5 car lengths.
- Preparing to change lanes on a multilane highway, which of the following should you do?
 - Check your rearview mirror.
 - Check your side mirror.
 - Take your eyes off the road momentarily and glance at the lane you're planning to move into.
 - Turn on your directional signal.
 - Be aware of what traffic in front of you is doing.
- You've swerved to the right to avoid a collision on a two-way highway, and your right wheels drop off the pavement and are riding on the shoulder. To get back on the road, you
 - accelerate, cutting the wheel to the left.
 - don't brake but take your foot off the accelerator. Hold the wheel steady. When the car slows, check the traffic and steer back onto the pavement.
 - brake sharply and try to pull off the road altogether. When you've got the car under control, pull onto the road again.
- On a two-way highway, in what's clearly marked as a no-pass zone with limited visibility, a car pulls out to pass you. Your best move is to
 - speed up, hoping the car will move back behind you.
 - ignore the car—it's not your problem.
 - reduce your speed so the car can get around you faster.
- The most important factor in defensive driving is
 - quick reflexes.
 - anticipating trouble.
 - skill at vehicle handling.
 - strict observation of the law.
- Which of the following road conditions up ahead should tell you to reduce your speed?
 - a deep pothole
 - leaves on the pavement
 - any bridge when the temperature is just above freezing
- Your rear-wheel-drive car is skidding (see diagram). What's the safest reaction?
 - Turn the wheel to the right.
 - Turn the wheel to the left.



- c. Brake as hard as possible and avoid turning the wheel until you've stopped the car.
10. In two-way highway traffic, an oncoming car suddenly pulls into your lane. What action do you take?
- a. Brake hard and sound your horn.
-
- b. Move quickly into the left lane.
 - c. Blow your horn and head to the shoulder.

Answers

1. (b) A basic principle of defensive driving is never to get into a situation that calls for slamming on the brakes. This can throw you into a skid and injure you and your passengers.
2. (a) and (d), depending on circumstances. If the tailgater is daydreaming, tapping your brakes (and activating the brake lights) should wake him or her up. If the driver is being aggressive, you've politely given a signal to let up. If the tailgating doesn't stop, pull over as soon as you can and let the other car pass.
3. (c) On a dry road, going 30 mph, give yourself 2 to 3 seconds to stop, or about 5 car lengths. If you are driving faster, if the road is wet, if visibility is poor, or if you are tired, drop back more. To determine how close you are following, notice when the rear of the vehicle ahead passes a tree or other fixed point. Then count "one thousand one, one thousand two," and so on until you pass the same fixed point.
4. (all) All steps are essential, but some people forget (c). You always have a blind spot (about a car length behind you on either side) and may not be able to see an overtaking vehicle in either mirror. Always glance over your shoulder before making your move. The signal light turned on several seconds in advance will help protect you as well.
5. (b) Braking hard or jerking the wheel can cause you to skid into oncoming traffic. Don't brake but do reduce your speed and stay on a steady course. Then, after checking traffic, make a sharp quarter turn to the left to put yourself back on the road and then straighten out.

11. The best position for your hands on the steering wheel is
- a. at the 10:00 and 2:00 positions.
 - b. at the 8:00 and 4:00 positions.
 - c. wherever you're most comfortable.
 - d. at the 9:00 and 3:00 positions.
12. True or false: Underinflated tires are safer, particularly in hot weather.

6. (c) Passing is always a cooperative venture. If this reckless driver has a head-on collision, you might be hurt too.

7. (b) Obeying the law and vehicle-handling skills are all important. But anticipating trouble ahead and acting to prevent it can make the speed of your reflexes far less important and thus may prevent many collisions.

8. (all) The pothole may only jar you, but it could damage your car or even cause you to lose control. Leaves can send you into a skid. And even though there's no ice on the road, a bridge is about 6°F (3°C) colder than a highway and may be hazardous when the road is not.

9. (b) Turn the wheel straight down your lane. That is, if your rear wheels are skidding left, as in the diagram, turn with the skid—that is, to the left. Don't brake; it increases skidding.

10. (c) Don't move left, which could put you in someone else's pathway. Always move right when heading off the road.

11. (d) And some expert drivers recommend that you hook your thumbs lightly over the horizontal spokes. This gives you a feel for the front tires and is a good way to get a quick grip if you strike a pothole.

12. False. An underinflated tire is more likely to skid, whether in hot weather or on wet or icy pavement. Because under inflation allows a tire to "flap" slightly and thus to create more heat, it's also more likely to blow out. Even for desert driving, keep tires at the recommended maximum air pressure and check them weekly. The number should be printed on the side of the tires; or check the instruction manual if the car still has its original tires.

Are You an Aggressive Driver?

To find out if you are an aggressive driver, check any of the following statements that are true for you:

- I consistently exceed the speed limit; I'm often unaware of both my speed and the speed limit.
- I frequently follow closely behind the car in front of me.
- If I feel the car in front of me is going too slowly, I tailgate.
- I change lanes frequently to pass people.
- I seldom use my turn signal when changing lanes or turning.
- I often run red lights or roll through stop signs.
- I react to what I feel is another driver's mistake by cursing, shouting, or making rude gestures; by blocking a car from passing or changing lanes; by using high beams; or by braking suddenly in front of a tailgater.
- My personality changes and I become more competitive when I get behind the wheel.
- I often get angry or impatient with other drivers and with pedestrians.
- I would consider pulling over for a personal encounter with a bad driver.

Each of these statements is characteristic of aggressive drivers; the more items you checked, the greater your road rage. If you checked even one statement, try the following steps to reduce your hostility the next time you get behind the wheel:

- Allow enough time for your trip to reach your destination without speeding.
- Avoid driving during periods of heavy traffic.
- Don't drive when you are angry, tired, or intoxicated.
- Imagine that the other drivers are all people that you know and like. Be courteous and forgiving.
- Listen to soothing music or a book on tape, or practice a relaxation technique such as deep breathing.

Develop at least two additional strategies that work for you:

1. _____
2. _____

If road rage is still a problem for you, take a course in anger management.

Even if you are successful at controlling your own aggressive driving impulses, you may still encounter an aggressive driver on the road. The AAA Foundation for Traffic Safety recommends the following strategies to avoid being a victim of an aggressive driver.

- Avoid behaviors that may enrage an aggressive driver; these include cutting cars off when merging, driving slowly in the left lane, tailgating, and making rude gestures.
- If you make a mistake while driving, apologize. In surveys, the most popular and widely understood gestures for apologies include raising or waving a hand and touching or knocking the head with the palm of your hand (to indicate "What was I thinking?").
- Refuse to join in a fight. Avoid eye contact with an angry driver, and put distance between your car and his or her vehicle. If you think another driver is following you or trying to start a fight, call the police on a cell phone or drive to a public place.

Think of two additional strategies for dealing with an aggressive driver:

1. _____
2. _____

WELLNESS WORKSHEET 14

Personal Safety Checklist

Are you doing all you can to protect yourself from violence and injuries? The following list of statements relate to intentional injury incidents that can occur in a variety of settings. Put a check next to those statements that are true for you and fill in the requested information.

At Home

- ___ My home has good lighting.
- ___ Doors are secured with effective locks (deadbolts).
- ___ All unused doors and windows are securely locked.
- ___ I always lock all windows and doors when I go out.
- ___ I have a dog and/or post “Beware of Dog” signs.
- ___ Landscaping around the home doesn’t provide opportunities for concealment.
- ___ Keys are hidden in a secure, nonobvious place.
- ___ I do not give anyone the opportunity to duplicate my keys.
- ___ The front door has a peephole.
- ___ I do not open my door to strangers or allow them into my home or yard.
- ___ I ask to see ID or call to verify that repair and utility workers are legitimate.
- ___ I use my initials in phone directory listings.
- ___ My answering machine message does not imply that I live alone or am not home.
- ___ Everyone in the household knows how to call for help.
- ___ My neighbors and I have a system for alerting one another in case of an emergency.
- ___ I participate in a neighborhood watch program.

On the Street

- ___ I avoid walking alone, especially at night or in less-populous areas.
- ___ I dress in clothing that allows freedom of movement.
- ___ I walk purposefully, in an alert and confident manner.
- ___ I walk on the outside of the sidewalk, facing traffic.
- ___ I check routes to my destination before leaving so as not to appear lost.
- ___ I never hitchhike.
- ___ I carry valuables in a secure or concealed location and take special care at ATMs.
- ___ I have my keys ready when I approach my vehicle or home.

- I carry a cell phone or change for a public phone, fare for public transportation, and a whistle to blow if I am attacked or harassed.
- I keep alert for suspicious behavior, and I keep at least two arm lengths between myself and strangers.

WELLNESS WORKSHEET 14 — continued

In My Car

- My car is in good working condition.
- I carry emergency supplies in my car.
- I keep my gas tank at least half full.
- When driving, I keep doors locked and windows rolled up at least three-quarters of the way.
- I park my car in well-lighted areas or parking garages.
- I lock my car when I leave it.
- I check the interior of my car before unlocking it and getting in.
- I don't pick up strangers.
- I note the location of emergency call boxes, or I have a cell phone in my car.
- I use caution if my car breaks down or if I am involved in a minor crash or bumped intentionally.
- When I stop at a light or stop sign, I stop far enough behind the car in front to allow room to maneuver in case of emergency.
- I do not get into arguments with drivers of other vehicles.

On Public Transportation

- I wait in populated, well-lighted areas.
- I sit near the driver or conductor.
- I sit in a single seat or an outside seat.
- I check routes and times in advance, and confirm before boarding that the bus, subway, or train is bound for my destination.

On Campus

- The door and window locks where I live are secure.
- The halls and stairwells where I live have adequate lighting.
- Dorm doors are not left unlocked or propped open.
- I do not give dorm or residence keys to others.
- I keep my door locked.
- I do not allow strangers into my room.
- I do not walk, jog, or exercise alone at night.
- I use campus escort services or walk with friends.
- I know the areas that security guards patrol and stay where they can see or hear me if possible.

Your answers here can help you identify behaviors that you should change. Consider planning a behavior change strategy to alter one or more of your risky behaviors.

WELLNESS WORKSHEET 15

Warning Signs of Violence and Techniques for Managing Anger

Recognizing Warning Signs of Violence in Others

Often people who act violently have trouble controlling their feelings. They may have been hurt by others. Some think that making people fear them through violence or threats of violence will solve their problems or earn them respect. This isn't true. People who behave violently lose respect. They find themselves isolated or disliked, and they still feel angry and frustrated. One way to address the problem of violence is to learn to recognize and react to potential signs of violent behavior. If you notice the following signs over a period of time, the potential for violence exists (check any that apply).

- | | |
|--|--|
| <input type="checkbox"/> A history of violent or aggressive behavior | <input type="checkbox"/> Feeling constantly disrespected |
| <input type="checkbox"/> Serious drug or alcohol use | <input type="checkbox"/> Failing to acknowledge the feelings or rights of others |
| <input type="checkbox"/> Gang membership or a strong desire to be in a gang | If you see these immediate warning signs, violence is a serious possibility: |
| <input type="checkbox"/> Access to or fascination with weapons, especially guns | |
| <input type="checkbox"/> Threatening others regularly | <input type="checkbox"/> Loss of temper on a daily basis |
| <input type="checkbox"/> Trouble controlling feelings like anger | <input type="checkbox"/> Frequent physical fighting |
| <input type="checkbox"/> Withdrawal from friends and usual activities | <input type="checkbox"/> Significant vandalism or property damage |
| <input type="checkbox"/> Feeling rejected or alone | <input type="checkbox"/> Increase in use of drugs or alcohol |
| <input type="checkbox"/> Having been a victim of bullying | <input type="checkbox"/> Increase in risk-taking behavior |
| <input type="checkbox"/> Poor school performance | <input type="checkbox"/> Detailed plans to commit acts of violence |
| <input type="checkbox"/> A history of discipline problems or frequent run-ins with authority | <input type="checkbox"/> Announcing threats or plans for hurting others |
| | <input type="checkbox"/> Enjoying hurting animals |
| | <input type="checkbox"/> Carrying a weapon |

If someone you know shows warning signs of violence, there are things you can do. Above all, be safe. Don't spend time alone with people who show warning signs. If possible without putting yourself in danger, remove the person from the situation that's setting him or her off. Tell someone you trust and respect about your concerns and ask for help. This could be a family member, guidance counselor, teacher, school psychologist, coach, clergy, school resource officer, or friend. If you are worried about being a victim of violence, get someone in authority to protect you. Do not resort to violence or use a weapon to protect yourself.

Controlling Your Own Risk for Violent Behavior

Complete the checklist for your own behavior. If you recognize any of the warning signs for violent behavior in yourself, get help. You don't have to live with the guilt, sadness, and frustration that comes from hurting others. Admitting you have a concern about hurting others is the first step. The second is to talk to a trusted person such as a school counselor or psychologist, teacher, family member, friend, or clergy. They can get you in touch with a licensed mental health professional who can help.

It's normal to feel angry or frustrated when you've been let down or betrayed. But anger and frustration don't justify violent action. Anger is a strong emotion that can be difficult to keep in check, but the right response is always to stay cool. Try the following methods of dealing with anger without resorting to violence:

WELLNESS WORKSHEET 15 — continued

- _____ Learn to talk about your feelings—if you're afraid to talk or if you can't find the right words to describe what you're going through, find a trusted friend or adult to help you one-on-one.
- _____ Express yourself calmly—express criticism, disappointment, anger, or displeasure without losing your temper or fighting. Ask yourself if your response is safe and reasonable.
- _____ Listen to others—listen carefully and respond without getting upset when someone gives you negative feedback. Ask yourself if you can really see the other person's point of view.
- _____ Negotiate—work out your problems with someone else by looking at alternative solutions and compromises.

Everyone feels anger in his or her own way. Start managing it by recognizing how anger feels to you. When you are angry, you probably feel muscle tension, accelerated heartbeat, a “knot” or “butterflies” in your stomach, changes in your breathing, trembling, goose bumps, and flushed in the face. You can reduce the rush of adrenaline that's responsible for your heart beating faster, your voice sounding louder, and your fists clenching if you try the following:

- _____ Take a few slow, deep breaths and concentrate on your breathing.
- _____ Imagine yourself at the beach, by a lake, or anywhere that makes you feel calm and peaceful.
- _____ Try other thoughts or actions that have helped you relax in the past.
- _____ Keep telling yourself “Calm down,” “I don't need to prove myself,” or “I'm not going to let him/her get to me.”

Stop. Consider the consequences. Think before you act. Only you have the power to control your own violent behavior; don't let anger control you.

Building a Kit of Emergency Supplies for Your Household

A kit with the supplies listed below can help you and those in your household prepare for both natural and man-made emergencies. Check off items as you add them to your kit. Keep your kit in a designated place so that you can retrieve it quickly in case you need to be evacuated. Put together a smaller kit to keep in your car and at your place of work.

Basic Emergency Supplies

- Map of the area for help in evacuating or locating shelters
- Cash (including change) and credit cards
- Copies of important documents (stored in a watertight container)
- Emergency contact list and phone numbers
- Extra sets of house and car keys
- Flashlight
- Battery- or solar-powered radio
- Battery-powered alarm clock
- Extra batteries
- Cell phone and/or prepaid phone card
- Signal flares
- Fire extinguisher (small canister A-B-C type)
- Whistle
- Tube tent
- Sleeping bags or warm blankets (one per person)
- Complete change of warm clothing and footwear (jacket or coat, long pants, long-sleeved shirt, sturdy shoes, hat, gloves, raingear, extra socks and underwear, sunglasses)
- Work gloves
- Pliers
- Shut-off wrench for gas and water supplies
- Shovel, hammer, and other tools
- Compass
- Matches in a waterproof container
- Aluminum foil
- Plastic storage containers
- Duct tape and scissors
- Paper, pens, pencils

___ Needles and thread

___ Medicine dropper

First Aid Kit

___ First aid manual

___ Thermometer

___ Scissors

___ Tweezers

___ Safety pins

___ Needle

___ Latex or other sterile gloves

___ Sterile gauze pads

___ Cleansing agent (soap, isopropyl alcohol, or antiseptic towelettes)

___ Sunscreen

___ Antibiotic ointment

___ Burn ointment

___ Petroleum jelly or another lubricant

___ Sterile adhesive bandages in several sizes

___ Sterile roller bandages

___ Triangular bandages

___ Cotton balls

___ Eyewash solution

___ Aspirin or nonaspirin pain reliever

___ Antidiarrhea medication

___ Laxative

___ Antacid

___ Activated charcoal (use if advised by Poison Control Center)

___ Potassium iodide (use following radiation exposure if advised by local health authorities)

___ Prescription medications and prescribed medical supplies

___ List of medications, dosages, and any allergies (for each household member)

Special Needs Items

___ Infant care needs (formula, bottles, diapers, powdered milk, diaper rash ointment)

___ Extra eye glasses

___ Contact lenses and supplies

___ Denture needs

___ Hearing aid or wheelchair batteries; other special equipment

___ Pet care supplies

___ Other (list): _____

___ Other (list): _____

Food and Related Supplies

___ Manual (non-electric) can opener

___ Utility knife

___ Eating utensils: Mess kits, or paper cups and plates and plastic utensils

___ Sugar, salt, pepper

___ Paper towels

___ Plastic garbage bags and resealing bags

___ Small cooking stove and cooking fuel (if food must be cooked)

___ Water: Three-day supply, at least one gallon of water per person per day, stored in clean plastic containers such as soft drink bottles:

Number of people: ___ 1 gallon/day 3 days = ___ Total minimum gallons of water

Store additional water if you live in a hot climate or if your household includes infants, pregnant women, or people with special health needs. Containers can be sterilized by rinsing them with a diluted bleach solution (one part bleach to ten parts water). Replace your water supply every 6 months.

___ Food: At least a 3-day supply of nonperishable foods—those requiring no refrigeration, preparation, or cooking and little or no water. Choose foods from the following checklist and expand the list with foods that members of your household will eat. Replace items in your food supply every 6 months

	Ready-to-eat canned meats, fruits, and vegetables		Comfort/stress foods
	Protein or fruit bars		Vitamins
	Dry cereal or granola		Infant foods
	Peanut butter		Pet foods
	Dried fruit		Other:
	Nuts		Other:
	Crackers		Other:
	Canned or boxed juices		Other:
	Nonperishable pasteurized milk or powdered milk		Other:
	High-energy foods		Other:

Sanitation

- ___ Plastic garbage bags (and ties)
- ___ Toilet paper
- ___ Moist towelettes
- ___ Washcloth and towel
- ___ Personal hygiene items (toothbrush, shampoo, deodorant, comb, shaving cream, and so on)
- ___ Plastic bucket with tight lid
- ___ Disinfectant
- ___ Household chlorine bleach
- ___ If possible, a small shovel for digging a latrine

For a Clean Air Supply

- ___ Face masks OR several layers of dense-weave cotton material (handkerchiefs, t-shirts, towels) that fit snugly over your nose and mouth. Each household member should have his or her own nose and mouth protection that fits tightly to help filter out contaminants.
- ___ Shelter-in-place supplies, to be used in an interior room in your home to create a barrier between you and potentially contaminated air outside.
 - ___ Heavyweight plastic garbage bags or plastic sheeting
 - ___ Duct tape
 - ___ Scissors
 - ___ If possible, a portable air purifier with a HEPA filter

Family Emergency Plan

- ___ Plan places where your family will meet; choose one location near your home and one outside your neighborhood.

Local: _____

Outside neighborhood: _____

Make sure children know where to go or whom to contact in case of an emergency.

- ___ Post emergency numbers and instructions.
- ___ Have one local and one out-of-state contact person for family members to call if separated during a disaster. (It may be easier to make long-distance calls than local calls.)

Local: _____

Out-of-state: _____

Know how to shut off water, gas, and electricity; keep the necessary tools near the shut-off valves.

- ___ Talk with your neighbors: Who has specialized equipment (for example, a power generator) or expertise that might help in a crisis? Do elderly or disabled neighbors have someone to help them?
- ___ Take a first aid class.



Are You Prepared for Aging?

Assess Your Current Behaviors

Are you doing everything you can now to enhance the quality of your life as you age? Read through the following list of statements and check the answer that best describes your current behavior.

- | Yes | No | |
|-----|-----|---|
| ___ | ___ | I exercise regularly. |
| ___ | ___ | I eat wisely. |
| | ___ | I eat meals low in fat and added sugars and high in essential nutrients and fiber (fresh fruits and vegetables, whole-grain cereals and breads, brown rice, pasta). |
| | ___ | I limit saturated and trans fats and get protein from fish, skinless poultry, and plant sources. |
| | ___ | I use fat-free or low-fat dairy products. |
| | ___ | I consume the recommended amount of calcium, vitamin D, and vitamin B-12. |
| | ___ | I limit the amount of sodium I consume and consume adequate potassium. |
| ___ | ___ | My weight is in the recommended range. |
| ___ | ___ | I drink alcohol in moderation, if at all. |
| ___ | ___ | I don't use tobacco in any form. |
| ___ | ___ | I recognize the stressors in my life and take appropriate steps to control and deal with stress. |
| ___ | ___ | I perform appropriate self-examinations. |
| ___ | ___ | I have regular physical examinations that include appropriate screening tests. |
| ___ | ___ | I participate in activities that keep my mind sharp and active. |

Thinking About Aging

Have you thought seriously about the changes that aging can bring? To help you begin thinking now about your life as you grow older, answer the following questions:

1. What things come to mind when you think of an older person? Can you imagine those things applying to you? What do you think you will be like when you are 70 years old?

2. What do you most look forward to as you grow older?

3. What do you most fear as you grow older?

4. How long would you like to keep working? What would you like to do after you retire? What hobbies or volunteer opportunities would you pursue?

5. Have you considered the loss of income that retirement often brings? What can you do now to help meet your economic needs in the future?

6. Older people often find themselves alone more frequently (due to the death of a spouse and/or close friends). Can you think of activities you enjoy doing alone?

7. If when you are older you are no longer able to care for yourself, what living and care arrangements would you prefer?

8. What would you do if your parents were no longer able to care for themselves?

9. List five positive and five negative things about aging.