

# Lifelong Balance

## » Routines



**Welcome to class! We will begin shortly!**

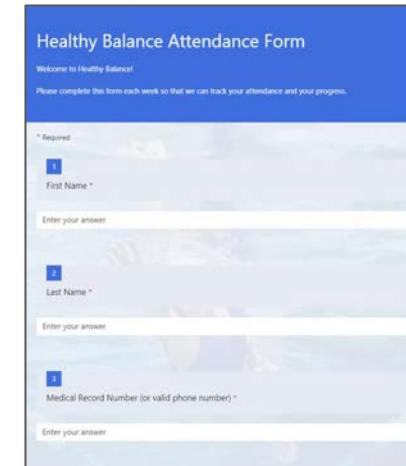
# Lifelong Balance

## Routines

---

### Discussion/Reflection Question:

What healthy routine(s) are you following now?



The image shows a digital form titled "Healthy Balance Attendance Form". At the top, it says "Welcome to Healthy Balance!" and "Please complete this form each week so that we can track your attendance and your progress." Below this, there are three required fields, each with a blue square icon containing a white number: 1. "First Name \*", 2. "Last Name \*", and 3. "Medical Record Number (or valid phone number) \*". Each field has a text input area below it with the placeholder text "Enter your answer".

Have you filled out the attendance form?

# Lifelong Balance Member Resources

- All your guides, logs, and tools are available on the **Lifelong Balance Resources** page



Scan QR code or visit:  
[positivechoice.org/Lifelong-Balance](https://positivechoice.org/Lifelong-Balance)

A screenshot of the website page for Lifelong Balance Resources. The page features a navigation bar with links for CONTACT, CALENDAR, and SEARCH. Below the navigation bar, there are links for Our Services, Español, About Us, KP Members, and News. A green button labeled "← BACK TO KP MEMBERS" is visible. The main heading is "Lifelong Balance Resources". There are two main sections: "How to Enroll" and "Program Materials". The "How to Enroll" section provides contact information and cost details. The "Program Materials" section lists links for the Lifelong Balance Syllabus and Healthy Balance Workshop Guide. A descriptive paragraph explains the program's benefits and session structure.

POSITIVE CHOICE  
**INTEGRATIVE**  
WELLNESS CENTER

thrive  
SAN DIEGO, CA

CONTACT CALENDAR SEARCH

Our Services Español About Us KP Members News

← BACK TO KP MEMBERS

## Lifelong Balance Resources

### How to Enroll

Phone:  
(858) 616-5600

Cost:  
No-cost for KP members and \$160 for 16-week program for non-members (must have taken Healthy Balance prior to enrollment)

Ready to take the next step in your wellness journey? Lifelong Balance helps you reinforce healthy habits, break free from what's holding you back, and stay current on the latest nutrition and movement practices. Weekly 60-minute virtual sessions include guided movement, engaging discussions, and connection with fellow graduates.

### Program Materials

[Lifelong Balance Syllabus](#)

[Healthy Balance Workshop Guide](#)

# Syllabus

- Use our syllabus to track your classes and weeks attended



Scan the QR for the syllabus  
or visit:  
[positivechoice.org/LLBsyllabus](https://positivechoice.org/LLBsyllabus)

## Lifelong Balance Syllabus



### Class Information

Day: \_\_\_\_\_

Time: \_\_\_\_\_

Department Phone: 858-616-5600

### Instructor Information

Name: \_\_\_\_\_

Desk Phone: \_\_\_\_\_

Or message via KP.org

### Date

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Topics

1. Active Versus Sedentary Lifestyle
2. Time to Eat
3. Muscle Training
4. Routines
5. Nurturing Your Gut
6. Metabolism
7. Habits and Personal Why
8. Weight Plateaus
9. Food Quality and Cravings
10. Positive Thinking and Action
11. Sugar and Your Health
12. Taking Care of Your Heart
13. SELF Through the Ages
14. Movement Options
15. Food Prep for Lifelong Health
16. Mindful Resilience

# Mindful Movement

## **KNEE CAR (Controlled Articular Rotation)**

Let's practice!



# Check-In/Reflection

**What has worked well for  
you since last week?**

*Weekly Goal*



# Breakout Rooms



Breakout Room

- Chat to let your instructor know you are here. Otherwise, relax for a moments and we will be back soon!

**What brought you to  
class today?**

# Today's Discussion

# Why Routines Make Change Easier

# Today's Discussion

1

How to  
manage  
change

2

Dopamine  
and habit  
building

3

How to  
establish a  
new routine

What do you want to spend the  
most time talking about today?



**How does positive  
change happen and how  
do we make it last?**

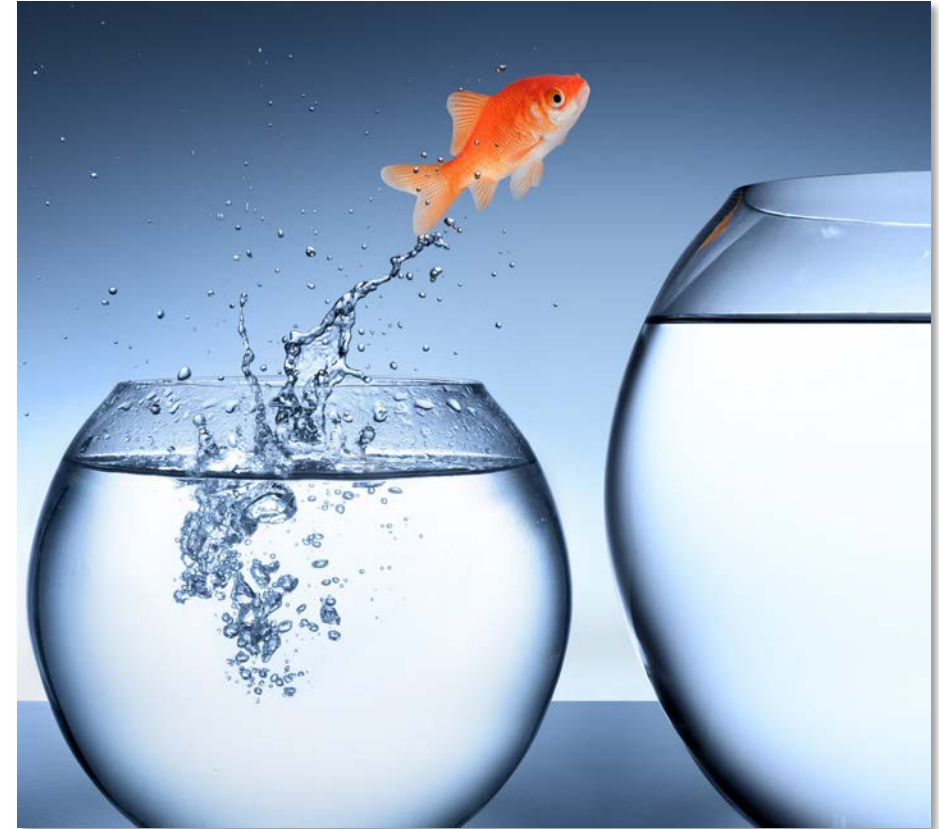
# Change

What does change require, and how can we make it last?



# Discomfort of Change

- New behaviors feel unfamiliar
- Unfamiliar things take more mental energy
- Wanting to go back to old habits is common



**Change can make us feel like  
a fish out of water**

# How can we deal with change?

- Lifestyle habits can help us deal with change
- They provide:
  - Structure and stability
  - A grounding routine during transitions
  - Tools to manage stress
  - Support for adapting to new circumstances





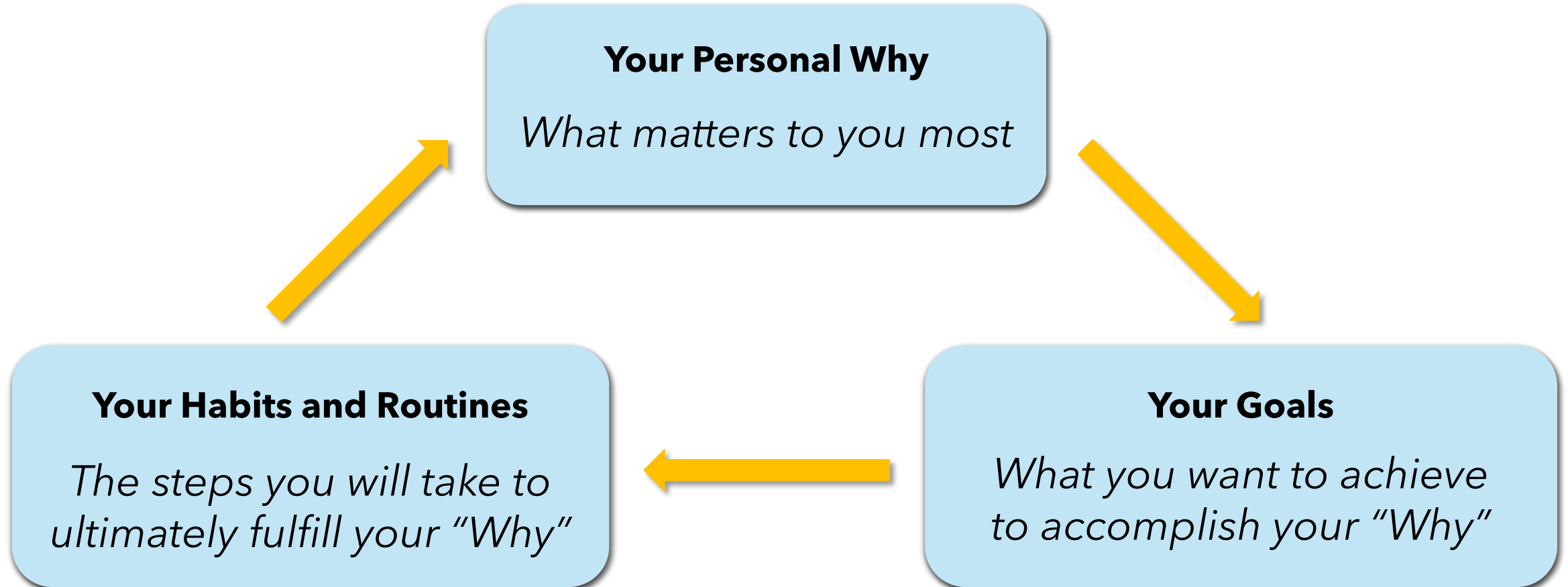
# Mindful Minute

What defines a successful change?

# My Personal “Why”

- What came up during the meditation?  
How did you visualize your best self?
- Where do you see yourself in one year?
- Where do you see yourself in five years?

# Putting Your “Why” Into Action



# Rate your current motivation to change your health behaviors



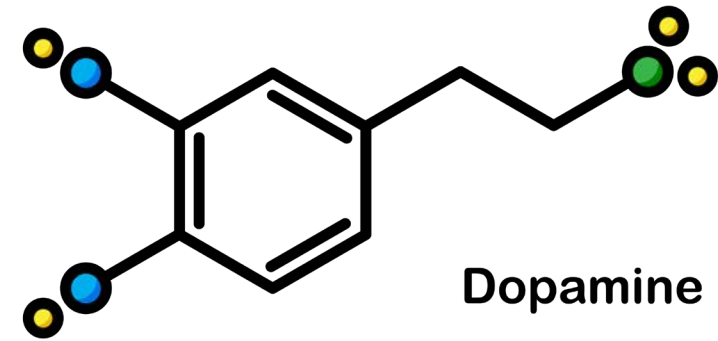
**Low Motivation**

**High Motivation**

# What is dopamine?

# Dopamine

- A chemical that plays a role in your brain's reward system
- Behaves as a motivator
- Helps you overcome obstacles to achieve goals



# Dopamine and Repetition

- Your brain notices actions that feel rewarding
- Dopamine tells your brain that the action is worth repeating
- Repetition strengthens the brain's pathway



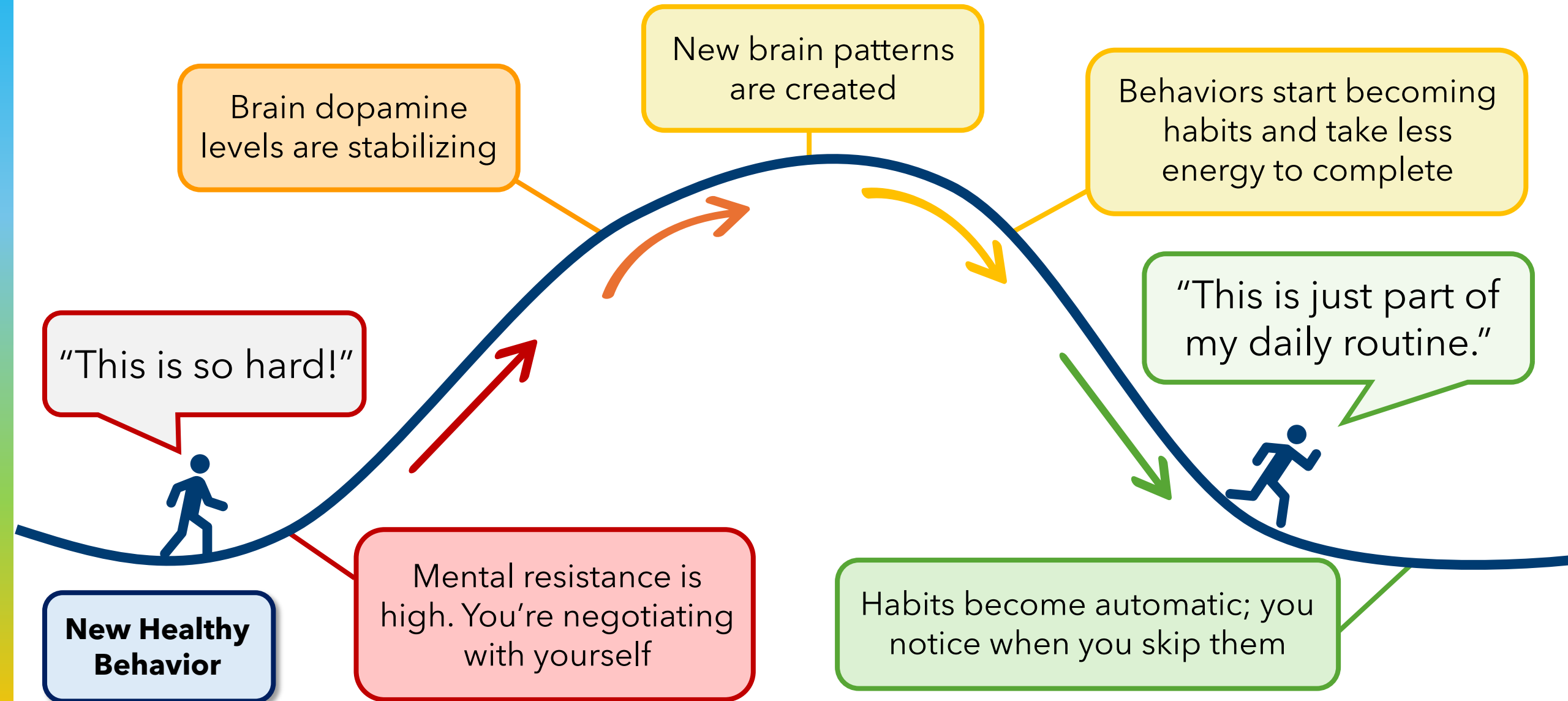
# Routines and Habit Formation

- New habits require effort
- Repetition helps your brain predict the reward
- Over time, the habit takes less mental energy

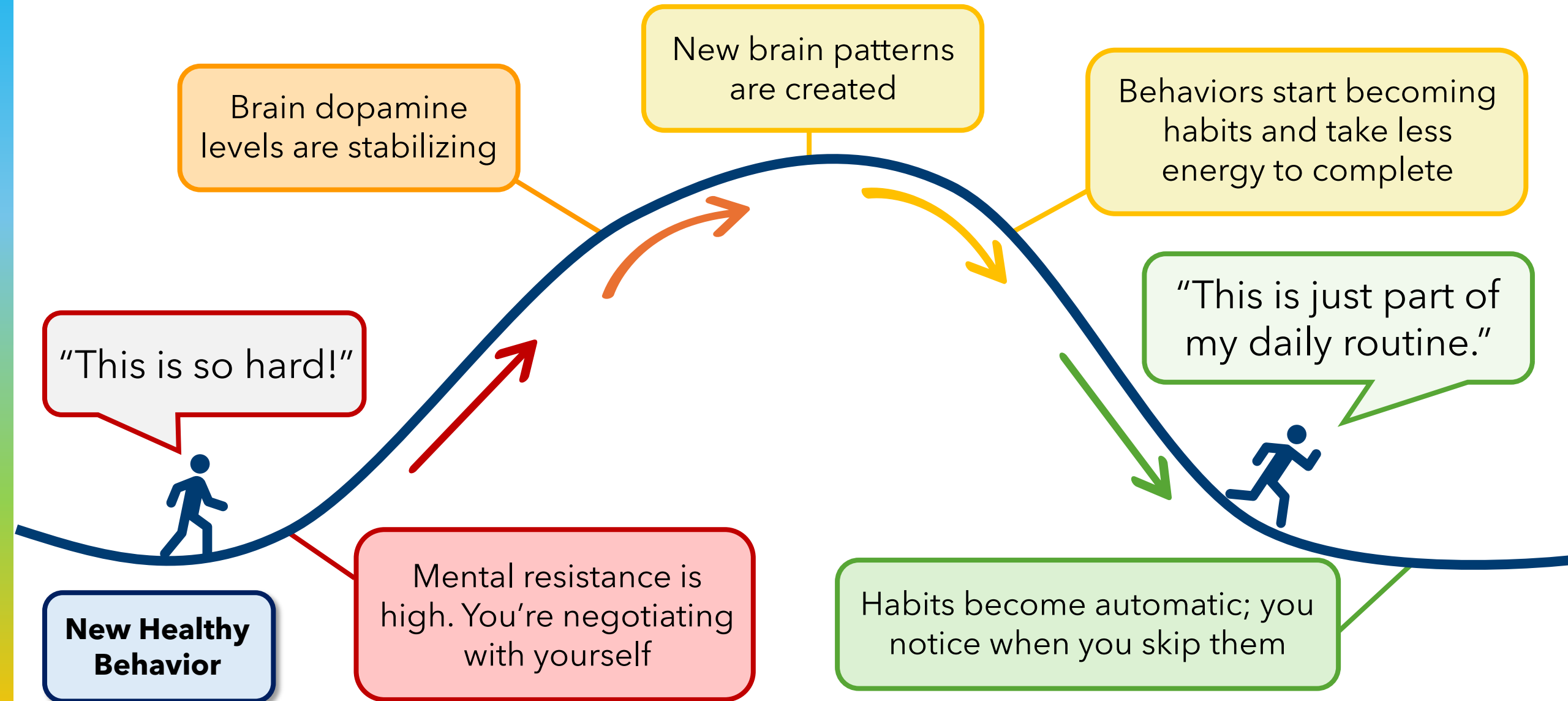


**What's one thing you do now that used to feel hard, but doesn't anymore?**

# Getting Over the Resistance Hump



# Getting Over the Resistance Hump



**Daily routines help you  
improve and move forward**

# How Routines Help

- Routines take some decisions off your plate
- That leaves more mental energy for your day
- Makes change feel more doable



# Combine New Behaviors with Established Routines

**When I \_\_\_\_\_, I will \_\_\_\_\_**

- Watch TV
- Brew coffee or tea
- Listen to music

- March in place
- Do 10 squats
- Meal prep

# Activity

**When I \_\_\_\_\_, I will \_\_\_\_\_**

# Steps to Success



**Define  
your goal**



**Set  
your plan**



**Decide how,  
what, & when**



**Establish  
daily routines**

# 1. Define Your Goal

In setting realistic goals, remember to:

- Meet yourself where you're at
- Make goals based on actions
- Set goals that are 100% achievable

## **Example goal for muscle strengthening:**

- I will do 10 squats with good form, 3 days a week
- I will eat protein to support my muscles

## 2. Set Your Plan

- Decide on a plan (goal) that works for you

### **Muscle strengthening plan:**

- I will do 10 squats with good form, 3 days a week
- I will eat protein to support my muscles

# 3. Decide: How, What & When

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Practice 1-10 squats during or after I brush my teeth in the morning		Practice 1-10 squats during or after I brush my teeth in the morning		Practice 1-10 squats during or after I brush my teeth in the morning		
Consume an extra protein food with breakfast or lunch						



# THRIVE Break

POSITIVE CHOICE  
INTEGRATIVE  
WELLNESS CENTER

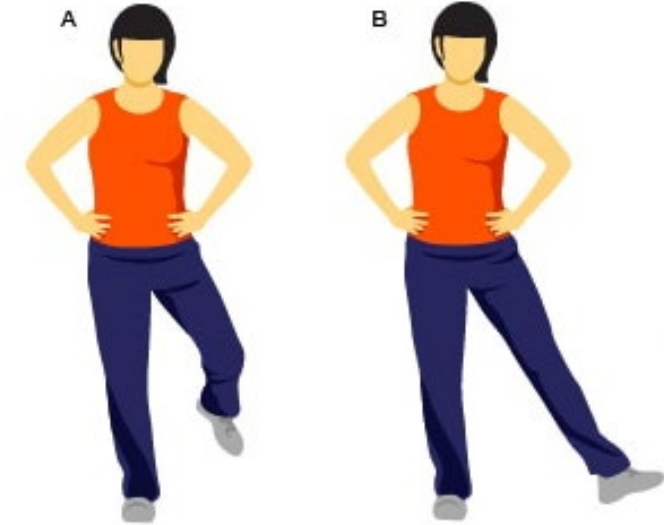


# Thrive Break

## *Single-Leg Balance*

1. Stand tall, feet hip-width apart
2. Hands on hips
3. Lift one foot and bend your knee
4. Hold onto something if needed
5. Hold up to 30 seconds with good posture
6. Switch legs and repeat

**Try this:** Reach your lifted foot forward, sideways, or back without touching the floor



*Let's Try*

# Create Your Nutrition Plan

## *What will you work on?*

### Nutrition Recommendations

- Eat enough protein
- Choose whole unprocessed foods
- Have plenty of fruits and vegetables
- Add healthy fats
- Make water your beverage of choice

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Breakfast							
Lunch							
Dinner							
Snack							

# Create Your Exercise Plan

## *What will you work on?*

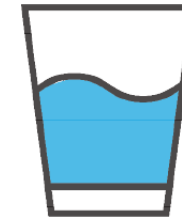
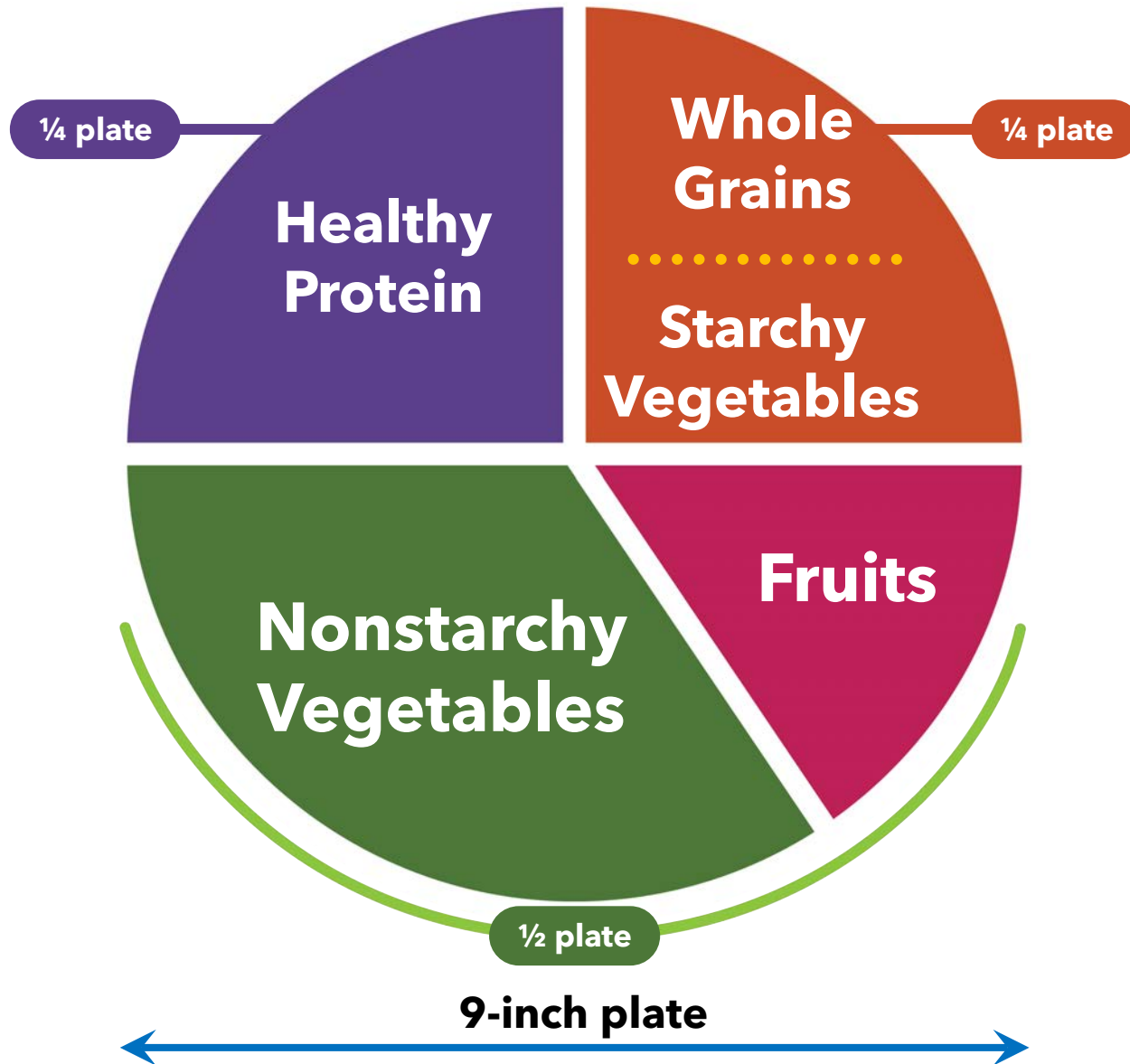
### Exercise Recommendations

- Resistance/muscle strengthening
- Bone strengthening
- High intensity interval training (HIIT)
- Lifestyle
- Flexibility

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Resistance							
Bone Strength							
HIIT							
Lifestyle							
Flexibility							

# The Healthy Plate

Refer to the Healthy Balance book for recommended portions, healthy food ideas, and recipes.



Water



Healthy fat



Seasonings

# Nutrition Recommendation

## Sample Daily Eating Plan



Milk (soy or cow), 1 cup  
Quinoa, ½ cup  
Eggs, 2  
Fruits or  
Vegetables, 1 cup



Fish, 4 oz.  
Beans, ½ cup  
Mango ½ cup  
Vegetables, 1 cup  
Avocado, ¼



Yogurt, 1 cup  
Berries, 1 cup  
Nuts, 2 Tbsp



Tofu, 4 oz.  
Brown Rice, ½ cup  
Vegetables, 2 cups  
Sesame Seeds, 2 Tbsp

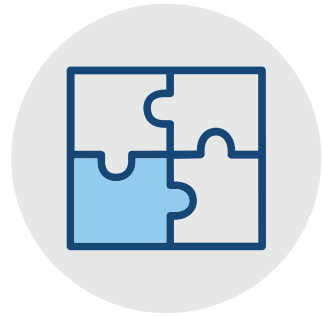
# Tips for Success

- Surround yourself with like-minded people
- Embrace failures
- Believe in yourself
- Seek feedback



# This Week

Choose a weekly goal, or make up your own:



Establish a new,  
healthy routine



Increase  
movement



Plan healthy meals  
and snacks



Other

# Action Plan

## Make it Personal

» Strengthening Your "How"

Your personal action plan should be specific, realistic, and something you can do this week.

What first step would you like to take this week?

*Weekly Goal*

# Action Plan

## Make it SMART



Specific



Measurable



Action-  
Oriented



Realistic



Timely

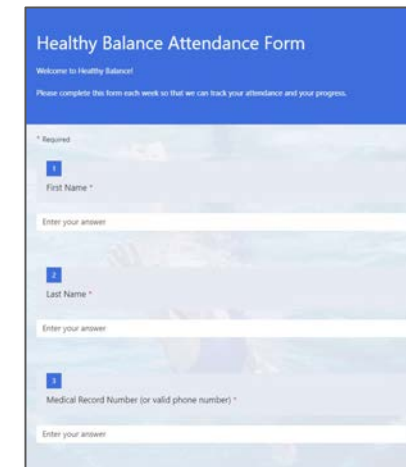
*I will combine a new, healthy behavior with an existing habit this week.*

## Lifelong Balance

### » Nurturing Your Gut

### Discussion/Reflection Question:

How does understanding the link between food and health affect your eating decisions?



The image shows a digital form titled "Healthy Balance Attendance Form". The form has a blue header with the title and a welcome message: "Welcome to Healthy Balance! Please complete this form each week so that we can track your attendance and your progress." Below the header, there are three required input fields, each with a blue asterisk icon and a "Required" label. The first field is labeled "First Name \*", the second is "Last Name \*", and the third is "Medical Record Number (or valid phone number) \*". Each field has a white input area and a "Enter your answer" prompt below it.

Have you filled out the attendance form?

# Lifelong Balance



**Your feedback matters—and it's completely anonymous.**

Please take a moment to share your thoughts. Honest feedback helps us improve Lifelong Balance for everyone.

Complete the survey by clicking the link in the chat or scanning the QR code.



**SCAN ME**