



## Lesson 5: Homework

- 1) Follow the “Retrain Your Brain” guidelines every day for a week. Check off each guideline for each day that you follow it. (Worksheet 1)
- 2) For one day, keep a more detailed food log than usual. Use it to track your emotions and cravings throughout the day. (Worksheet 2)
- 3) Next time you have a craving, write down what it is that you’re craving. Also write down what emotion your craving is associated with (whether you’re angry, upset, celebrating, or some other feeling), and how you believe that the food would calm the situation. Instead of giving in to your craving, write down alternate solutions. (Worksheet 3)
- 4) Keep following the Club Reduce nutrition and lifestyle guidelines.
- 5) Download and listen to the Self-Mastery Technology (SMT) session for this week.

*Learn it Live it Lose it*

## Worksheet 1: Retrain Your Brain Guidelines

Every day for a week, check off each guideline that you follow.

<b>“Retrain Your Brain” Guidelines</b>	<b>Day 1</b>	<b>Day 2</b>	<b>Day 3</b>	<b>Day 4</b>	<b>Day 5</b>	<b>Day 6</b>	<b>Day 7</b>
Start each morning off with a healthy breakfast such as a Solutions4 Nutritional Shake. You can also try fruit smoothies, vegetable and egg scrambles, or fresh vegetable juice!							
At every meal, eat super-nutritious foods that help your blood sugar stay at a constant level (dark leafy greens and other vegetables).							
Don’t let yourself get too hungry. If you need to, eat small meals every 2-3 hours. This will make it easier to make healthy choices!							
Plan your meals in advance.							
Ask for support from friends and family.							
Exercise regularly. This helps curb cravings and takes your mind off of food.							
Go to bed early and get enough sleep each night							
Take time to relax.							
Track your cravings and emotions throughout the day and recognize the emotions that trigger your cravings (Worksheet 2).							
Take advantage of the SMT sessions available through your Club Reduce membership site.							

## Worksheet 2: How Emotions Influence Eating Habits

For one day, keep a more detailed food log than usual. Use it to track your emotions and cravings throughout the day.

Breakfast:	Food Craving	Emotion	Assess Your Hunger
			Before Eating: 0 1 2 3 4 5 6 7 8 9 10
			After Eating: 0 1 2 3 4 5 6 7 8 9 10
Mid-Morning Snack:	Food Craving	Emotion	Assess Your Hunger
			Before Eating: 0 1 2 3 4 5 6 7 8 9 10
			After Eating: 0 1 2 3 4 5 6 7 8 9 10
Lunch:	Food Craving	Emotion	Assess Your Hunger
			Before Eating: 0 1 2 3 4 5 6 7 8 9 10
			After Eating: 0 1 2 3 4 5 6 7 8 9 10
Mid-Afternoon Snack:	Food Craving	Emotion	Assess Your Hunger
			Before Eating: 0 1 2 3 4 5 6 7 8 9 10
			After Eating: 0 1 2 3 4 5 6 7 8 9 10
Dinner:	Food Craving	Emotion	Assess Your Hunger
			Before Eating: 0 1 2 3 4 5 6 7 8 9 10
			After Eating: 0 1 2 3 4 5 6 7 8 9 10

Did I follow the Club Reduce nutrition guidelines for the day? ☐ Yes ☐ No

Did I save time, calories, and money by replacing a meal with a Solutions4 shake today? ☐ Yes ☐ No

Did I drink ½ body weight in ounces of water? \_\_\_\_ oz.

Did I track my calories? ☐ Yes ☐ No

Did I practice mindful eating by savoring each bite and chewing my food slowly? ☐ Yes ☐ No

Did I eat for emotional reasons? ☐ Yes ☐ No

If I ate for emotional reasons, why? \_\_\_\_\_

\_\_\_\_\_

What was I feeling when I ate? \_\_\_\_\_

\_\_\_\_\_

Did I use Self-Mastery Technology? ☐ Yes ☐ No

Did I exercise? ☐ Yes ☐ No

If yes, how long did I exercise? \_\_\_\_\_ What type of exercise? \_\_\_\_\_

Hours of sleep received last night? \_\_\_\_\_

Rate your stress level today. (0 = not stressed at all, 10 = extremely stressed) 0 1 2 3 4 5 6 7 8 9 10

If stressed, did I use any relaxation techniques? ☐ Yes ☐ No

Do I have everything I need for the next few days to make all of my meals? ☐ Yes ☐ No

If not, when am I going shopping? \_\_\_\_\_

From what I did yesterday, am I closer to my goal? ☐ Yes ☐ No

My weight today is: \_\_\_\_\_

## Worksheet 3: How to Deal with Cravings

**Craving #1:** \_\_\_\_\_

Emotion associated with the craving: \_\_\_\_\_

How do I believe the food will calm my current situation? \_\_\_\_\_

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

What can I do instead? \_\_\_\_\_

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

**Craving #2:** \_\_\_\_\_

Emotion associated with the craving: \_\_\_\_\_

How do I believe the food will calm my current situation? \_\_\_\_\_

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

What can I do instead? \_\_\_\_\_

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

**Craving #3:** \_\_\_\_\_

Emotion associated with the craving: \_\_\_\_\_

How do I believe the food will calm my current situation? \_\_\_\_\_

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

What can I do instead? \_\_\_\_\_

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