



H&W—Health and Wellbeing



A balanced diet

A balanced diet is based on the Eatwell Guide. An unbalanced diet can lead to dietary related diseases.



Malnutrition

Having intakes of energy and/or nutrients below or in excess of needs for long periods of time can affect health.

The risk of malnutrition is increased by:

- increased requirements for some nutrients;
- restricted range of foods;
- reduction in available income;
- very low income;
- medical conditions;
- psychological conditions.

Diet and health

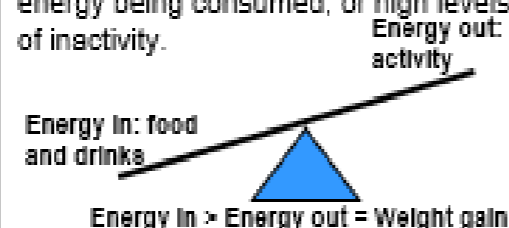
There is a link between a poor diet, and the risk of developing some diseases.

This includes the risk of:

- cancer;
- coronary heart disease (CHD);
- bone health;
- anaemia.

Over nutrition

The most common over nutrition problem is obesity caused by too much energy being consumed, or high levels of inactivity.



Body Mass Index

BMI measures your height and weight to work out if your weight is healthy.

$$\text{BMI} = \frac{\text{weight (kg)}}{(\text{height in m})^2}$$

Recommended BMI range (adults)

Less than 18.5	Underweight
18.5 to 25	Desirable
25-30	Overweight
30-35	Obese (Class I)
35-40	Obese (Class II)
Over 40	Morbidly obese

Under nutrition

Worldwide, Kwashiorkor and marasmus are two common diseases caused by a lack of protein and energy. Fat soluble vitamins (A, D, E and K) are stored in the body so it takes time for deficiency diseases to develop.

Diet and cancer

The World Cancer Research Fund has released nine cancer prevention recommendations.

- Be a healthy weight.
- Move more.
- Avoid high-calorie foods and drinks.
- Enjoy more grains, veg, fruit and barley.
- Limit intake of red meat and avoid processed meat.
- Don't drink alcohol.
- Eat less salt.
- Don't rely on supplements.
- Breastfeed your baby.

Diet and CHD

It is believed that 80% of CHD and strokes could be prevented by changes to lifestyle factors, such as diet, physical activity and smoking.

Changes to the diet to reduce the risk of CHD include:

- increasing oily fish intake;
- reducing salt intake;
- increasing fruit and vegetables;
- decreasing alcohol consumption.

Bone health

Calcium is important for strong bones. Vitamin D is needed for calcium to be absorbed from food.

Anaemia

Iron is vital for making red blood cells. Iron from the diet forms haemoglobin, which carries oxygen in the blood. Anaemia develops if the body's stores of iron are too low.

Activity recommendations

Pre-schoolers (3 to 4 years): 180 minutes (3 hours) spread throughout the day, including at least 60 minutes of moderate-to-vigorous intensity physical activity

Children and young people (5-18 years): at least 60 minutes of physical activity every day and engage in a variety of types and intensities of physical activity across the week.

Adults (19-64 years): at least 150 minutes each week (moderate intensity), or have 75 minutes of vigorous activity a week and do muscle strengthening activities on two days or more each week.

Moderate activity



Vigorous activity



Muscle strengthening activities



Inactivity

It is also important that the amount of time being sedentary is reduced. Over time, sedentary behaviour can lead to weight gain and obesity, which can increase the risk of developing chronic diseases in adulthood.

1 in 4 women and 1 in 5 men are classified as inactive (<30 mins per week).

Obesity

People who are obese are more likely to suffer from CHD, type 2 diabetes, gall stones, arthritis, high blood pressure and some types of cancers, i.e. colon, breast, kidney and stomach.

Key terms

Deficiency diseases: Adverse bodily conditions caused by a lack of a nutrient.

Iron deficiency anaemia: A condition caused by insufficient iron in the body. Common symptoms include tiredness and lethargy.

Kwashiorkor: A severe type of protein-energy malnutrition.

Malnutrition: When the diet does not contain the right amount of nutrients.

Marasmus: A severe type of energy malnutrition in all forms, including protein.

Moderate activity: Will raise your heart rate, and make you breathe faster and feel warmer.

Obesity: Extreme overweight. Obese adults have a BMI of 30 or above.

Sedentary behaviour: Requires little energy expenditure and includes sitting or lying down to watch television, use the computer, read, work or study, and sitting when travelling to school or work.

Vigorous activity: Makes you breathe hard and fast.



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Vocabulary	Skills	Famous First-Aiders
<p>Primary Survey – checking the situation to see if it is safe to help a casualty.</p> <p>Heart Rate – The amount of beats the heart makes in one minute – between 60-80 is normal.</p> <p>Respiratory Rate – the number of times somebody breathes in a minute – around 6 is normal</p>	<p>DRsABC - Primary Survey</p> <p>D – Danger</p> <p>R – Response</p> <p>S – Shout</p> <p>A – Airway</p> <p>B – Breathing</p> <p>C – Circulation</p>	<p>St John Ambulance</p> <p>The St John Ambulance Association was founded in 1877 to provide first aid training. In 1887, the St John Ambulance Brigade was founded to provide uniformed medics at public events. The organisation covers many major events across England including the London Marathon and Hyde Park concerts, as well as smaller and charitable events such as fetes and local fairs.</p>
<p>Pulse – same as heart rate – beats per minute</p> <p>Call 999/112 – Emergency Numbers</p> <p>‘Is the casualty breathing?’ is the first question to answer, then location and any other information that could be helpful.</p> <p>Cuts (skin) – full break to the skin</p> <p>Graze (skin) – top layers of skin scraped off</p> <p>Treated by cleaning, drying, compression and cover (to stop infection)</p>	<p>CRP (Cardiopulmonary Resuscitation)</p> <ol style="list-style-type: none"> 1. Call 999/112 <ul style="list-style-type: none"> > Kneel by the side of your casualty > Send a bystander for an AED if one is available 2. Place one hand... <ul style="list-style-type: none"> > On the centre of the chest > Put the heel of the other hand on top > Interlock your fingers to lift them off the chest 3. Begin chest compressions <ul style="list-style-type: none"> > Lean over with your arms straight > Press downwards on breastbone 30 times 4. Press down <ul style="list-style-type: none"> > To a depth of about 5-6cm > Release the pressure but leave hands in place > Try to press at a rate of 100-120 times per minute 5. Breathe into casualty <ul style="list-style-type: none"> > open the airway and pinch the nostrils together > take a breath and blow into the mouth until the chest rises > repeat to give two breaths 6. Start compressions again <ul style="list-style-type: none"> > repeat 30 chest compressions with two breaths until help arrives 	<p>The British Red Cross is one of the leading providers of first aid training in the United Kingdom. It trains people both on a community and commercial basis. The commercial training teams run nationally recognised First aid courses specifically designed to provide skills for use at work. The British Red Cross have been running these courses for 25 years and over 120,000 people are trained each year. Courses range from a basic Emergency Life Support to a three-day First Aid at Work (FAW).</p> <p>BritishRedCross</p>
<p>AED - automated external defibrillator, is used to help those experiencing sudden cardiac arrest – delivers a shock to the heart</p> <p>Compression – squeezing the heart by pressing on the chest</p> <p>Allergic Reaction – sneezing, runny or blocked nose, red eyes, coughing.</p> <p>Fracture (bones) – broken bones – signs: pain, swelling, deformity.</p>	<p>Recovery Position – when responsive</p> <ol style="list-style-type: none"> 1. Kneel <ul style="list-style-type: none"> > By the side of your casualty 2. Angle arm <ul style="list-style-type: none"> > Put the arm nearest to you to make a right angle. Palm facing upwards 3. Hand to cheek <ul style="list-style-type: none"> > Bring the arm furthest away across the chest and place the back of their hand against the cheek nearest to you > Hold it there 4. Knee bend <ul style="list-style-type: none"> > With other hand, bend their leg knee up so that the foot is flat on the floor 5. Knee pull <ul style="list-style-type: none"> > Pull on the knee to roll the casualty towards you onto their side > Adjust them as necessary 6. Ensure airway is open <ul style="list-style-type: none"> > Recheck breathing > Call 999/112 > Stay and monitor casualty until help arrives 	<p>Medical Jobs</p> <p>Doctor / Nurse</p> <p>Ambulance Service</p> <p>Health Care Assisant</p> <p>Other Jobs where First-Aid is improtant</p> <p>Police / Fire / Coastguard Services</p> <p>Army and Navy</p> <p>Building Site Manager</p> <p>Security Officer</p>

Who Can you turn to for help and Support	
Parents or trusted family members	Teachers or school Staff
The Police	Friends
NSPCC	Helpline: 0808 800 5000 (24 hours, every day) nspcc.org.uk
Childline	Helpline: 0800 1111(24 hours, every day) https://www.childline.org.uk
National Bullying Helpline	https://www.nationalbullyinghelpline.co.uk/

Hair
Puberty causes the oil glands in the hair to produce more oil which can make hair more oily meaning that it needs to be washed more regularly.

Face
During and after puberty people can be more prone to spots and acne. This can be managed through the use of daily face washes. Exfoliants should be used twice weekly in order to remove dead skin cells.

Oral Care
Brushing teeth twice a day, flossing and using a mouth wash can prevent bad breath and dental issues. Regular visits to the dentist are also important

Body Odour
Due to puberty, sweat glands not only become more active than before, they also begin to secrete different chemicals into the sweat that has a stronger smelling odor. Daily bathing and the use of anti-perspirant or deodorant. Antiperspirant's will reduce the amount of sweat you produce whereas deodorants cover the smell and odour.

Body Hair
Body hair in new places is something you can count on. You may want to start shaving some places where body hair grows, but whether you do is up to you. Some guys who grow facial hair like to let it develop into a mustache and beard. Some girls may decide to leave the hair on their legs and under their arms as is. It's all up to you and what you feel comfortable with.

Genital Hygiene
Women:
The inside of the vagina rarely needs cleaning with the use of soap. It has a natural balance of substances that can become disturbed by washing causing any bacteria that enter to have the potential of developing into an infection. The labia should only need cleaning once a day using a mild soap and water. The area should also be cleaned following sexual intercourse. Over cleaning of the genital area can be harmful and lead to infections such as thrush

Genital Hygiene
Men:
The penis, scrotal area and anus, should only need cleaning once a day. No attempt should be made to try and clean the inside of the urethra; this can cause serious damage. Special care should be taken by uncircumcised men to make sure the head of the penis is cleaned. This can be done by allowing the warm water to act as a lubricant and the foreskin should be gently pulled back. Failure to clean this area properly will result in smegma collection, causing bad odours and an increased risk of infection. The area should be cleaned after sex, even if wearing a condom, to prevent bacterial build-up and unpleasant smells arising.