EvenKeel

MOVEMENT PROGRAM



The Movement *Snack* Program

An 8-week, no-gym plan: after-meal walks, 2–5 minute movement snacks and two short strength sessions a week

GUIDE 03

EDITION 2026

INSIDE THIS PROGRAM

Contents

01 Before you start

02 Why movement after meals matters

03 The 10-minute after-meal walk

04 Indoor and bad-weather options

05 The 12 movement snacks

06 Strength sessions A and B

07 The 8-week progression

08 Desk-worker and shift-worker versions

09 Safety and stop signs

10 Your weekly tracker

11 After week 8

12 References

© 2026 EvenKeel. For personal use only; please do not redistribute. This guide is for educational purposes only and is not medical advice. It does not diagnose, treat, cure or prevent any disease. Results vary.

BEFORE YOU START

This program is educational. It is not medical advice and does not replace your doctor.

- **See a doctor for a checkup.** Erectile problems can be an early warning sign of heart disease, diabetes or high blood pressure. A checkup comes first.
- **Get urgent care** for chest pain or pressure, fainting, sudden severe shortness of breath (call 911), or an erection lasting more than 4 hours.
- **Get medical clearance before new exercise** if you have heart disease, high blood pressure that is not under control, a recent surgery or injury, joint problems, lung disease, or any other ongoing condition.
- **If you take medicine for diabetes** (especially insulin or a sulfonylurea such as glipizide, glyburide or glimepiride), more activity after meals can lower your blood sugar more than you expect and may cause **low blood sugar**. Talk with your doctor before you start, learn the signs of a low (shakiness, sweating, confusion, fast heartbeat), carry a fast-acting sugar, and **never change a dose yourself**.
- **Not for** people with type 1 diabetes or an eating disorder unless their care team agrees. If you have kidney disease, check activity and protein advice with your doctor.
- **Never stop or change any medicine** without talking to your doctor. Prescribed treatments for erectile problems (for example, PDE5 inhibitors) are a valid option; this program can work alongside medical care.

How to use this guide

This is the **Pace** part of the Plate · Pace · Pause Method, expanded into a full 8-week plan. You need no gym, no equipment beyond a sturdy chair, a wall and a step, and no special clothes beyond comfortable shoes.

The program has three building blocks:

BLOCK 1

After-meal walks

An easy 10-minute walk after your main meals, inside the After-Meal Window.

BLOCK 2

Movement snacks

2–5 minute bursts of simple moves spread through the day, especially when you sit a lot.

BLOCK 3

Two strength sessions

Two 20-minute bodyweight sessions a week to build and keep muscle.

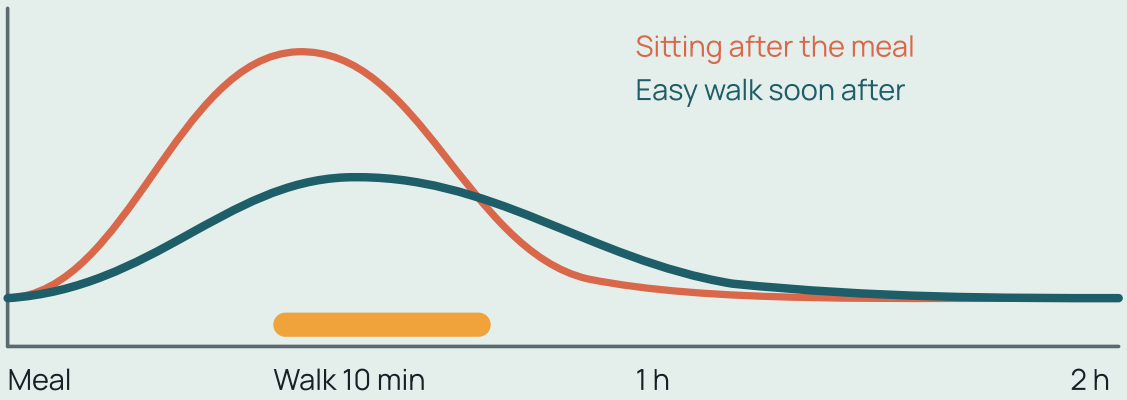
Read chapters 1–5 once, then follow the week-by-week table in chapter 6. If a week feels too hard, repeat it. There is no prize for rushing.

CHAPTER 1

Why movement after meals matters

Healthy erections depend on healthy blood flow, and blood flow depends on the **endothelium**, the thin lining inside every blood vessel. That lining helps vessels relax and widen. Research links diabetes, prediabetes, insulin resistance, high blood pressure and extra belly fat with erectile problems, and researchers think stress on the vessel lining is part of the shared pathway.

The **After-Meal Window** is the roughly two hours after you eat, when blood sugar rises and then falls. Large, repeated spikes are linked with stress on blood vessels. Your muscles are one of the biggest users of blood sugar in your body, and when they work, they take up sugar from the blood. That's why the timing of movement matters.



An illustration, not real data. No numbers on the vertical axis, because everyone's curve is different.

What the research says, in plain words

- **Short walks after eating.** Several studies show that light walking soon after a meal can lower the rise in blood sugar compared with sitting. Even a few minutes appears to help, and some studies found short walks after each meal worked at least as well as one longer walk at another time of day.
- **Breaking up sitting.** Studies of "activity breaks" (standing up and moving for a few minutes every 30–60 minutes) suggest they may support steadier after-meal blood sugar compared with sitting for hours without a break.
- **Strength training.** Muscle is like a storage tank for blood sugar. Major health organizations recommend muscle-strengthening activity at least two days a week, alongside about 150 minutes a week of moderate activity.

- **Activity and erectile health.** Research links regular physical activity with better erectile function, and a well-known Italian trial found that men with obesity who lost weight and exercised more often reported improved erectile function.

i **Keep it in proportion.** These are associations and small-to-medium studies, not promises. Movement is one helpful habit among several, and it works best alongside the Plate and Pause habits and any care your doctor recommends.

CHAPTER 2

The 10-minute after-meal walk

This is the heart of the program. It is simple on purpose, so you can do it on tired days too.

The four rules

1. **When:** start within about 15–30 minutes of finishing a meal. Right after is fine if you feel comfortable.
2. **How long:** 10 minutes. Start with 5 if that's what you have. Two 5-minute walks also count.
3. **How fast:** easy. Use the *talk test*: you can talk in full sentences but you're breathing a little more than at rest. If you can't speak comfortably, slow down. If you could sing, that's still fine. This is not a workout.
4. **Which meals:** begin with your biggest meal (for many men that's dinner). Add a second meal in week 3 and, if it fits your life, all three by week 6.

Making it stick

- [ ] Leave your shoes and a jacket by the door before you sit down to eat.
- [ ] Link it to a cue: "Plate in the sink, shoes on."
- [ ] Use a podcast, a phone call to a friend, or a walk with your partner or dog.
- [ ] Have a set loop: around the block, two laps of the parking lot, the hallway at work.
- [ ] Tick it off on the tracker (chapter 9). Seeing a row of ticks is motivating.

Tip. Restaurants and family dinners: a 10-minute walk to the car the long way, or a stroll around the block before dessert, counts.

Diabetes medicine. If you take insulin or a sulfonylurea, your doctor may want you to check your blood sugar before and after the first few walks. Ask before you begin, and follow their plan.

CHAPTER 3

Indoor and bad-weather options

Rain, snow, heat, darkness or a small apartment shouldn't break the habit. Any of these can replace the outdoor walk. Keep the same easy, can-talk effort.

INDOOR SWAPS FOR THE 10-MINUTE WALK

OPTION	HOW TO DO IT	GOOD FOR
Hallway or house laps	Walk a loop through your home or a building corridor. Change direction every lap.	Apartments, offices
March in place	March with arms swinging while a TV show or music plays. Lift knees to a comfortable height.	Small spaces
Kitchen clean-up walk	Do the dishes and tidying on your feet, moving briskly between rooms.	Busy evenings
Easy stairs	Walk up and down one flight slowly, holding the rail, resting at the bottom as needed.	Homes with stairs
Mall or big-store walk	Walk the full length of a store or mall at an easy pace.	Very hot or icy days
Stationary bike or treadmill	If you already have one, ride or walk easily for 10 minutes.	Any weather

Tip. On very hot days, walk early or late, drink water, and choose indoor options. On icy days, stay indoors; a fall is not worth it.

CHAPTER 4

The 12 movement snacks

A movement snack is 2–5 minutes of simple movement. Pick one or two moves and do them at a comfortable, steady pace. Breathe normally, never hold your breath, and move only in a pain-free range. Each move has an **easier** and a **harder** option.

1. Chair squat

Stand in front of a sturdy chair, feet hip-width apart. Push your hips back and bend your knees as if to sit, lightly touch the seat, then stand up by pressing through your heels. Keep your chest up and knees pointing the same way as your toes.

Easier: use a higher seat or hold a counter. **Harder:** hover just above the seat for a second before standing.

2. Sit-to-stand

Sit near the front of a chair, feet flat. Lean slightly forward and stand up fully, then sit back down with control. Count how many you do in a set time to see your progress.

Easier: push off the armrests. **Harder:** cross your arms over your chest and lower slowly over three counts.

3. Wall push-up

Stand an arm's length from a wall and place your hands on it at shoulder height. Keep your body in a straight line from head to heels, bend your elbows to bring your chest toward the wall, then press back.

Easier: stand closer to the wall. **Harder:** use a kitchen counter or the back of a heavy sofa, so your body is more angled.

4. Calf raises

Stand tall, holding a counter or wall for balance. Rise up onto the balls of your feet, pause, then lower slowly. Your calf muscles help pump blood back up from your legs.

Easier: do them seated, lifting your heels. **Harder:** one leg at a time, or on the edge of a step.

5. Stair climbs

Walk up one flight of stairs at a steady pace, holding the rail, then walk down slowly. Repeat 2–4 times.

Easier: step up and down on the bottom step only. **Harder:** climb two flights, or climb a little faster while still able to talk.

6. March in place

Stand tall and march, lifting each knee and swinging your arms. Keep a rhythm you could hold while chatting.

Easier: seated march, lifting knees from a chair. **Harder:** lift knees higher and add a gentle arm reach overhead every few steps.

7. Step-ups

Facing a bottom stair or a sturdy low step, step up with one foot, bring the other up, then step down one foot at a time. Alternate the leading leg.

Easier: hold the rail and use a very low step. **Harder:** do all reps on one leg before switching.

8. Standing hip hinge ("good morning")

Stand with feet hip-width apart, hands on your hips. Keeping your back flat and knees soft, push your hips back and tip forward from the hips, then squeeze your buttocks to stand tall.

Easier: a small range, with your hands on a counter. **Harder:** slower, with a three-count lowering.

9. Side steps

With knees slightly bent, take 5–10 steps sideways across the room, then return. Keep your toes pointing forward.

Easier: stand taller, smaller steps. **Harder:** sit a little lower and take wider steps.

10. Counter plank

Place your forearms or hands on a kitchen counter, walk your feet back until your body forms a straight line, and hold while breathing steadily.

Easier: hold for 10 seconds with your feet closer. **Harder:** hold longer, or use a lower surface such as a sturdy bench.

11. Glute bridge

Lie on your back with knees bent and feet flat. Press through your heels and lift your hips until your body forms a line from shoulders to knees, pause, then lower slowly.

Easier: a smaller lift. **Harder:** pause for three seconds at the top, or march one foot up at a time.

12. Brisk hallway walk

Two to five minutes of walking at a slightly quicker pace than your after-meal walk, indoors or out. You can still talk, but in shorter sentences.

Easier: normal pace. **Harder:** add a flight of stairs in the middle.

Ready-made snack combos

PICK ONE COMBO, 2–5 MINUTES TOTAL

COMBO	MOVES	BEST MOMENT
Desk break	10 sit-to-stands + 15 calf raises + 1 min march	Every 45–60 min of sitting
Kitchen counter	10 wall/counter push-ups + 20-sec counter plank + 15 calf raises	Waiting for the kettle or oven
Stairway	3 stair climbs + 10 step-ups each leg	Mid-morning, mid-afternoon
Living room	10 chair squats + 10 glute bridges + 1 min march	TV ad breaks, after dinner if you can't go out

CHAPTER 5

Strength sessions A and B

Twice a week, do one 20-minute strength session. Alternate A and B (for example, A on Monday and B on Thursday). Leave at least one day between them. Start with a 3-minute warm-up: march in place, arm circles and a few gentle hip hinges.

Effort guide: finish each set feeling you could do 2–3 more good reps. Rest 45–90 seconds between sets. Good form always beats more reps.

SESSION A · LEGS AND PUSH (ABOUT 20 MINUTES)

EXERCISE	WEEKS 1–2	WEEKS 3–5	WEEKS 6–8
Chair squat	2 × 8	3 × 10	3 × 12 (hover version)
Wall push-up	2 × 8	3 × 10	3 × 10 (counter angle)
Step-ups (each leg)	2 × 6	2 × 8	3 × 8
Calf raises	2 × 12	3 × 15	3 × 15 (slow lower)
Counter plank	2 × 15 sec	3 × 20 sec	3 × 30 sec

SESSION B · HIPS, BACK AND BALANCE (ABOUT 20 MINUTES)

EXERCISE	WEEKS 1–2	WEEKS 3–5	WEEKS 6–8
Sit-to-stand	2 × 8	3 × 10	3 × 10 (arms crossed)
Glute bridge	2 × 10	3 × 12	3 × 12 (3-sec pause)
Standing hip hinge	2 × 10	3 × 10	3 × 12 (slow)
Side steps (each way)	2 × 8 steps	3 × 10 steps	3 × 12 steps (lower)
Balance: stand on one foot, hand near a counter	2 × 15 sec each	2 × 20 sec each	3 × 30 sec each

Finish each session with 2 minutes of easy walking and a few slow breaths. Mild muscle soreness for a day or two is normal at the start. Sharp pain or joint pain is not; stop that move and check with a professional.

i **Have weights or bands?** You can hold a light dumbbell or water jugs during squats and step-ups once the bodyweight version feels easy for all sets. Add load in small steps.

CHAPTER 6

The 8-week progression

Each week builds a little on the last. "Walks" means after-meal walks at the talk-test pace. Toward the end, your weekly total moves toward the common guideline of about 150 minutes of moderate activity a week, which you can reach with walks, snacks and other activity you enjoy.

WEEK-BY-WEEK PLAN

WEEK	AFTER-MEAL WALKS	MOVEMENT SNACKS	STRENGTH	FOCUS
1	5–10 min after 1 meal, 5 days	1 a day	A + B (easy)	Learn the moves; build the cue
2	10 min after 1 meal, 6 days	2 a day	A + B	Same time, same loop
3	10 min after 1 meal daily + a 2nd meal 3 days	2–3 a day	A + B (step up sets)	Add a second walk
4	10 min after 2 meals, 5 days	3 a day	A + B	Consistency week; repeat if needed
5	10 min after 2 meals daily	3 a day	A + B	One longer walk (20–30 min) at the weekend
6	10 min after 2–3 meals	3–4 a day	A + B (harder options)	Try the harder snack options
7	10–15 min after 2–3 meals	4 a day	A + B	Two longer walks this week
8	10–15 min after 2–3 meals	4 a day	A + B	Review, choose your keep-going plan

Tip. Missed a day? Just do the next walk. Missed a week? Repeat the last week you completed. Progress comes from what you do most weeks, not from any single day.

What a typical day looks like by week 6

- [ ] Breakfast, then a 10-minute walk (or indoor march).
- [ ] Mid-morning desk break: sit-to-stands and calf raises.
- [ ] Lunch, then a 10-minute walk.
- [ ] Mid-afternoon stairway snack.
- [ ] Dinner, then a 10-minute walk.
- [ ] Strength session A or B on two days of the week.

CHAPTER 7

Desk-worker and shift-worker versions

The desk-worker version

Long hours of sitting are the main thing to break up. Aim to stand and move for 2–5 minutes every 45–60 minutes.

- [ ] Set a quiet repeating reminder on your phone or computer.
- [ ] Take phone calls standing or walking.
- [ ] Use the farthest restroom, water fountain or printer.
- [ ] Walk 10 minutes after lunch, even if it's around the building or parking lot.
- [ ] Do the desk-break combo (sit-to-stands, calf raises, march) at your chair; it is quiet and doesn't need a change of clothes.
- [ ] Hold "walking meetings" for one-to-one conversations when you can.

The shift-worker version

If you work nights or rotating shifts, think in terms of *your* meals, not the clock. The After-Meal Window follows whenever you eat.

- [ ] Walk 10 minutes after your main meal of the shift, even if that is at 2 a.m. in a break room or corridor.
- [ ] Do a movement snack during each scheduled break.
- [ ] Schedule strength sessions on your days off or before a shift, not right before you need to sleep.
- [ ] After a night shift, keep the walk gentle and short so it doesn't wake you up too much; then protect your sleep (dark room, quiet, cool).
- [ ] If you drive for work, use fuel and rest stops for a 5-minute walk or a stair snack.

i **Physical jobs.** If you are on your feet all day, you may already move a lot. Focus on the after-meal walk timing and the two strength sessions, and keep snacks for days off.

CHAPTER 8

Safety and stop signs

Stop right away and get medical help (call 911 if severe) if you have:

- chest pain, pressure, tightness or discomfort, or pain spreading to the arm, jaw, neck or back;
- dizziness, light-headedness or fainting;
- unusual shortness of breath, more than the effort explains;
- a racing, pounding or irregular heartbeat;
- sudden weakness, numbness, confusion or trouble speaking;
- signs of low blood sugar if you take diabetes medicine: shakiness, sweating, confusion, sudden hunger, fast heartbeat. Treat it as your care team taught you.

Everyday safety habits

- [ ] Wear supportive shoes and choose well-lit, even paths.
- [ ] Use a sturdy chair (not one with wheels) and a firm wall or counter.
- [ ] Hold a rail on stairs. Skip stairs if your balance is unsteady.
- [ ] Drink water, especially on warm days.
- [ ] If you have foot problems or diabetes-related nerve changes, check your feet after walks and tell your doctor about any sores.
- [ ] If you have joint pain, use the easier options and smaller ranges; a physical therapist can tailor moves for you.
- [ ] Skip a session when you are ill or have a fever. Rest days are part of the plan.

CHAPTER 9

Your weekly tracker

Print one copy per week, or copy the layout into a notebook. Tick each box when done. There's no score; it's simply a record of your habits.

WORKSHEET

Week number:

	MON	TUE	WED	THU	FRI	SAT	SUN
Walk after breakfast							
Walk after lunch							
Walk after dinner							
Movement snacks (count)							
Strength A or B							
Energy today (low / ok / good)							

Sit-to-stands in 30 seconds (test once a week):

What went well this week:

What got in the way:

One small change for next week:

CHAPTER 10

After week 8

By now, the after-meal walk can feel as automatic as brushing your teeth. Keep these three "non-negotiables" and adjust the rest to your life:

1. An easy walk after your biggest meal on most days.
2. A movement snack whenever you have been sitting for an hour.
3. Two strength sessions a week. Keep progressing by adding a set, slowing the lowering phase, or adding a little weight.

Other activities you enjoy count too: cycling, swimming, golf without a cart, dancing, yard work, playing with kids or grandkids. Bring your tracker to your next checkup and ask your doctor how your activity fits with your blood pressure, blood sugar and heart health. If you'd like to go deeper on food, sleep and weekly check-ins, the 12-week reset program builds on this one.

> ***Small, repeated movement after meals is one of the easiest habits to build and one of the easiest to keep.***

SOURCES

References

Cited by organization and topic. Check each organization's website for the current version.

1. US Department of Health and Human Services. Physical Activity Guidelines for Americans, 2nd edition (aerobic and muscle-strengthening recommendations; "move more, sit less").
2. American Diabetes Association. Standards of Care in Diabetes (physical activity and breaking up prolonged sitting); position statements on physical activity and exercise in diabetes (2016–2025).
3. Peer-reviewed systematic reviews and meta-analyses on light walking after meals and after-meal blood sugar compared with sitting (2016–2023).
4. Peer-reviewed studies on interrupting prolonged sitting with short activity breaks and after-meal glucose and insulin (2012–2022).
5. American Heart Association. Recommendations for Physical Activity in Adults; The Talk Test; Warning Signs of a Heart Attack.
6. CDC. Physical activity basics for adults; National Diabetes Prevention Program; low blood sugar (hypoglycemia) information.
7. NIH / National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK). Erectile Dysfunction; Diabetes, Sexual & Bladder Problems; Low Blood Glucose.
8. American Urological Association. Erectile Dysfunction guideline (evaluation and lifestyle factors).
9. Esposito K. and colleagues. Randomized trial of lifestyle changes and erectile function in men with obesity, JAMA (2004).
10. Peer-reviewed reviews on physical activity, endothelial function and erectile function (2018–2024).
11. Mayo Clinic and Cleveland Clinic patient information on exercise safety, strength training basics and erectile dysfunction.

This product is for educational purposes only and is not medical advice. It does not diagnose, treat, cure or prevent any disease. ED can be a sign of a serious health condition — please see a doctor. If you take medicine for diabetes, talk with your doctor before changing your diet or activity. Results vary. © 2026 EvenKeel.