MODULE 2

WHERE ARE YOU NOW?



Now that we know where you want to go, we have to determine how you will get there.

Therefore, let's paint a realistic picture of your current state. Since humans are complex beings, it is necessary to condiser a variety of dimensions:

- wellness
- current nutrition health
- current exercise behavior
- circumference
- starting weight

We will then identify some tools to help you make healthy choices in your diet and exercise regimen.

Personal Wellness Assessment

Wellness is striving for positive physical, mental and social well-being.

It is a lifelong process of making decisions that support a more balanced life to maximize your potential.

This self-assessment tool will help you determine the areas of wellness where you are thriving, as well as those that may need greater attention.

Instructions

- Answer all the questions for each of the 7 wellness dimensions.
- Tally your points for each section and use the guide to interpret the scores.

Emotional Wellness: understanding your own feelings and expressing emotions in a constructive way, and having the ability to deal with stress and cope with life's challenges.

	Never	Rarely	Sometimes	Usually
1. I find it easy to express my emotions in positive, constructive ways.	1	2	3	4
2. I recognize when I am stressed and take steps to manage my stress in healthy ways.	1	2	3	4
3. I am resilient and can bounce back after a disappointment or problem.	1	2	3	4
4. I am able to maintain a balance of work, family, friends and other obligations.	1	2	3	4
5. I am flexible and adapt to change in a positive way.	1	2	3	4
6. I am able to make decisions with minimal stress.	1	2	3	4
7. When I am angry, I try to let others know in non-confrontational or non-hurtful ways.	1	2	3	4

Environmental Wellness: recognizing the interactions between yourself and your environment (natural and social), responsibly using available resources, and fostering a safer and healthier environment for others.

	Never	Rarely	Sometimes	Usually
1. I recognize the impact of my actions on my environment.	1	2	3	4
2. I recognize the impact of my environment on my health.	1	2	3	4
3. I am aware of and make use of available health, wellness, and safety resources.	1	2	3	4
4. I practice environmentally conscious behaviors.	1	2	3	4
5. I seek out ways to improve the social environment.	1	2	3	4
6. I contribute towards making my environment a safer and healthier place.	1	2	3	4
7. I surround myself with people who support me in my journey of being healthy and well.	1	2	3	4

Total		

Intellectual Wellness: engaging in creative and mentally-stimulating activities, expanding your knowledge through cultural, artistic, or skill-based learning, and sharing knowledge and skills with others.

	Never	Rarely	Sometimes	Usually
I. I am curious and interested in the communities, as well as the world, around me.	1	2	3	4
2. I search for learning opportunities and stimulating mental activities.	1	2	3	4
3. I manage my time well, rather than it managing me.	1	2	3	4
4. I enjoy brainstorming and sharing knowledge with others.	1	2	3	4
5. I enjoy learning about topics directly related to my field of work.	1	2	3	4
6. I seek opportunities to learn practical skills to help others.	1	2	3	4
7. I can critically consider the opinions and information presented by others and provide constructive feedback.	1	2	3	4

Occupational Wellness: getting personal fulfillment from your job or academic pursuits, and contributing to knowledge and skills, while maintaining a work-life balance.

	Never	Rarely	Sometimes	Usually
1. I get personal satisfaction and enrichment from work.	1	2	3	4
2. I believe that I am able to contribute my knowledge, skills, and talents at work.	1	2	3	4
3. I seek out opportunities to improve my knowledge or skills.	1	2	3	4
4. I balance my social life and job responsibilities well.	1	2	3	4
5. I effectively handle my level of stress related to work responsibilities.	1	2	3	4
6. My work load is manageable.	1	2	3	4
7. I explore paid and/or volunteer opportunities that interest me.	1	2	3	4

Total		
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Physical Wellness: making choices to avoid harmful habits and practice behaviors that support your physical body, health and safety.

	Never	Rarely	Sometimes	Usually
1. I engage in physical exercise regularly (e.g., 30 mins at least 5x a week or 10,000 steps a day).	1	2	3	4
2. I get 6-8 hours of sleep each night.	1	2	3	4
3. I protect myself and others from getting ill.	1	2	3	4
4. I abstain from drinking alcohol; or if I do drink, it is not excessive.	1	2	3	4
5. I avoid using tobacco products or other drugs.	1	2	3	4
6. I eat a balanced diet (fruits, vegetables, low-moderate fat, whole grains).	1	2	3	4
7. I get regular physical exams.	1	2	3	4

Total			

Social Wellness: building and maintaining a diversity of supportive relationships, and dealing effectively with interpersonal conflict.

	Never	Rarely	Sometimes	Usually
I. I consciously and continually try to work on behaviors or attitudes that have caused problems in my interactions with others.	1	2	3	4
2. In my romantic or sexual relationships, I choose partner(s) who respect my wants, needs, and choices.	1	2	3	4
3. I feel supported and respected in my close relationships.	1	2	3	4
4. I communicate effectively with others, share my views and listen to those of others.	1	2	3	4
5. I consider the feelings of others and do not act in hurtful/selfish ways.	1	2	3	4
6. I try to see good in my friends and do whatever I can to support them.	1	2	3	4
7. I participate in a wide variety of social activities and find opportunities to form new relationships.	1	2	3	4

Total	
1000	

Spiritual Wellness: having beliefs and values that provide a sense of purpose and help give meaning and purpose to your life, and acting in alignment with those beliefs.

	Never	Rarely	Sometimes	Usually
1. I take time to think about what's important in life – who I am, what I value, where I fit in, and where I am going.	1	2	3	4
2. I have found a balance between meeting my needs and those of others.	1	2	3	4
3. I engage in acts of caring and goodwill without expecting something in return.	1	2	3	4
4. I sympathize/empathize with those who are suffering and try to help them through difficult times.	1	2	3	4
5. My values are true priorities in my life and are reflected in my actions.	1	2	3	4
6. I feel connected to something larger than myself.	1	2	3	4
7. I feel like my life has purpose and meaning.	1	2	3	4

Calculate Your Score

	Ideal Score	Your Score
Emotional Wellness	28	
Environmental Wellness	28	
Intellectual Wellness	28	
Occupational Wellness	28	
Physical Wellness	28	
Social Wellness	28	
Spiritual Wellness	28	

Scores of 20-28: Outstanding! Your answers demonstrate that you're already taking positive steps in this dimension of wellness. You're improving your own well-being and also setting a good example for those around you. Although you achieved a high overall score in this domain, you may want to check for low scores on individual items to see if there are specific areas you might want to address. You might also choose to focus on another area where your scores weren't so high.

Scores of 15-19: Your behaviors in this area are good, but there is room for improvement. Take a look at the items on which you scored lower. What changes might you make to improve your score? Even a small change in behavior can help you achieve better health and well-being.

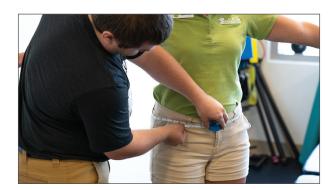
Scores of 14 and below: Your answers indicate some potential health and well-being risks. Review those areas where you scored lower and review resources to help you develop and set achievable goals.

Circumference Measurements

Use a tape measure to measure the circumference of the following:

- Hips (at the widest part)
- Stomach (at the level of your belly button)
- Legs (5 inches up from the top of your knee cap)
- Arms (3 inches up from your elbow)

Starting Weight









Food And Exercise Diary

For this exercise, track your food intake and physical activity for one week day and one weekend day.

Week Day	Weekend Day
Breakfast:	Breakfast:
Lunch:	Lunch:
Dinner:	Dinner:
Snacks:	Snacks:
Hydration:	Hydration:
Physical Activity:	Physical Activity:

	your food and exercise diary and answer the questions below: u eat at least 9 servings of fruits and vegetables each day?
2. Did yo	u get enough water (approximately half your body weight in ounces) each day?
3. Did yo	u limit your intake of sugary foods, processed foods, and fatty meats?
4. Did yo	u exercise for at least 30 minutes each day?
5. Are the	ere areas where you are doing well? List them below.
6. Are the	ere areas where you need improvement? List them below.
7. Explair	n how you feel in general, throughout the day. Focus on mood, energy, aches, pains, cravings, etc

Jse the space below to	 	
		