

SSSF WELLNESS INVENTORY

Circle the number that best reflects your response to each statement.

1. Yes
2. I need to change
3. Not applicable

NUTRITION

1. I eat breakfast daily 1 2 3
2. My diet includes something from each of the following groups: a) milk or milk products, b) meat, fish, poultry, dried legumes, eggs or nuts, c) fruits and vegetables, d) bread or cereals 1 2 3
3. I realize the importance of fiber in my diet and know food sources high in fiber 1 2 3
4. I drink enough water to maintain a light yellow color to my urine 1 2 3
5. My consumption of coffee and tea (non-herbal) is less than three cups per day..... 1 2 3
6. I use minimal additional salt in my food and drink soda (diet and other) in moderation since these, too, are high in salt 1 2 3
7. I enjoy eating and sharing meals with others..... 1 2 3
8. I use honey instead of granulated sugar whenever possible 1 2 3
9. I understand that more than one teaspoon of granulated sugar added to food/beverages daily or intake of food products high in "hidden" sugars is not conducive to good health 1 2 3
10. I maintain my weight within 10% of my ideal weight..... 1 2 3

PERSONAL HEALTH HABITS

11. I examine my breasts each month..... 1 2 3
12. I have a Pap test yearly..... 1 2 3
13. I have a colon examination (with lighted instrument) annually (if over 40 years of age)..... 1 2 3
14. As part of preventive dental care I rinse my mouth after each meal and floss my teeth daily, and use a soft tooth brush 1 2 3
15. I avoid exposure to aerosols, exhaust and chemical fumes whenever possible..... 1 2 3

- 16. I always wear a safety belt when driving a car or riding as a passenger..... 1 2 3
- 17. I drive within five miles of speed limits 1 2 3
- 18. I have the car(s) I drive serviced regularly..... 1 2 3
- 19. I am aware that alcohol magnifies or interferes with the actions of many prescribed medications 1 2 3
- 20. I believe alcohol is capable of affecting muscular coordination and judgement-making while driving 1 2 3
- 21. I avoid excessive, prolonged skin exposure to the sun's rays 1 2 3
- 22. I realize that some medication causes more sensitivity to sunlight 1 2 3

FEELINGS/SELF EXPRESSION

- 23. I know and like myself with my talents and limitations 1 2 3
- 24. I feel a sense of worth as a person - apart from a sense of achievement/productivity in what I do 1 2 3
- 25. It's O.K. to feel angry, afraid, sad, or joyful 1 2 3
- 26. I resolve my anger/fear on a daily basis - do not take it to bed with me 1 2 3
- 27. I find constructive ways to express these feelings of fear/anger most of the time..... 1 2 3
- 28. I can say "no" to others without feeling guilty..... 1 2 3
- 29. I can laugh at myself 1 2 3
- 30. I accept compliments/recognition from others gracefully..... 1 2 3
- 31. I enjoy touching other people 1 2 3
- 32. I'm happy when others touch me 1 2 3
- 33. I feel content with my life as a woman/man 1 2 3
- 34. I take personal responsibility for self..... 1 2 3
- 35. I can easily compliment others 1 2 3
- 36. It's O.K. to cry and I allow myself to do it..... 1 2 3
- 37. I enjoy being alone at times..... 1 2 3

- 38. I can express concern, warmth and love for those I love..... 1 2 3
- 39. I can listen to others - thereby fostering growth in them 1 2 3
- 40. I enjoy my work 1 2 3
- 41. I am able to set limits for myself and stick to them 1 2 3
- 42. I am involved with concerns/issues "bigger" than myself..... 1 2 3

PHYSICAL FITNESS, LEISURE, RELAXATION

- 43. Instead of riding elevators/escalators I use stairs 1 2 3
- 44. I walk regularly to obtain exercise 1 2 3
- 45. I do yoga or some stretching exercise daily..... 1 2 3
- 46. I bike or swim regularly..... 1 2 3
- 47. I know how to take my pulse and know my "normal" pulse range 1 2 3
- 48. I am aware that smoking predisposes to lung and blood vessel damage 1 2 3
- 49. At bedtime I easily fall asleep 1 2 3
- 50. If awakened I usually go to sleep again without difficulty..... 1 2 3
- 51. I "center" myself through quiet relaxation or meditation periods daily..... 1 2 3
- 52. I am able to relax my mind and body without the use of tranquilizers or alcohol..... 1 2 3
- 53. I believe stress is inevitable, desirable but potentially harmful 1 2 3
- 54. I have the resources within me to react positively to stress events 1 2 3
- 55. I am exerting the energy to learn effective physical and emotional responses to stressful life situations..... 1 2 3
- 56. I have a hobby(ies) that give me much satisfaction/deversion..... 1 2 3

SCORING

More than 40 "1's" - Indicates you have sensible habits and are well aware of your health. Keep up the good work.

More than 20 "2's" - Indicates you have need for an increased awareness of your health habits. Review the Inventory to determine how you can improve.