

OptiHealth Workshop:  
**Therapeutic Lifestyle Change, Part 1**

Worksheet:  
**My Health Beliefs**

Your **Health Beliefs** are important because...Your health beliefs determine your health **choices**, and... Your health choices determine your health behaviors, and... Your health **behaviors** determine your lifestyle, and... Your **lifestyle** determines your **Level of Health**.

**Summary:** Your Health Beliefs determine your Level of Health.

Select the **FIRST** unhealthy behavior listed below that applies to you:

- I smoke tobacco.
- I drink "too much" alcohol.
- I consume too many high-fat/low-fiber calories.
- I do not get enough exercise.
- I do not get enough sleep.
- I do not drink enough water.
- I do not get enough fresh air and sunlight.
- Other: \_\_\_\_\_

With your **unhealthy behavior** selected above in mind, answer the following 6 questions regarding your health beliefs. Use a **Scale of 1-10**, with 1 being NO, I absolutely do NOT believe that, 10 being YES, I absolutely believe that, and 2-9 being somewhere in between – 5.5 being NUETRAL, but only use whole numbers.

**NO – 1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10 – YES**

**Health Questions:**

- \_\_\_ **1. Susceptible?** Do you believe... your (unhealthy behavior) makes you more susceptible to developing a chronic disease?
- \_\_\_ **2. Serious?** Do you believe... the resulting chronic disease would be a serious burden on your life?
- \_\_\_ **3. Effective?** Do you believe... a therapeutic lifestyle change would be effective in helping you prevent or reverse the chronic disease?
- \_\_\_ **4. Beneficial?** Do you believe... a therapeutic lifestyle change would be beneficial to the quality of your life?
- \_\_\_ **5. Capable?** Do you believe... you are capable of making a therapeutic lifestyle change (if given the proper tools and opportunities)?
- \_\_\_ **6. Responsible?** Do you believe... YOU are ultimately responsible for your lifestyle choices and their consequences?

**Health Belief Level:**

\_\_\_\_\_ / 6 = \_\_\_\_\_ = \_\_\_\_\_ for TLC (regarding your specific unhealthy behavior)

**Interpretation: 0-3 = Not Ready for TLC, 4-7 = Maybe Ready for TLC, 8-10 Ready for TLC.**

But the real question is, even if you could argue the relative influence of each particular health belief, or deny the validity of your various beliefs... WHO do you believe would make the best decisions in your best interest regarding your health? Your doctors? Your Employer? Your Insurance Company? The Government? Or, You? Do you believe in you?

Or as a Christian, in Whom do you ultimately believe? As Christians, we believe: God is our Creator. He cares about our well-being. He alone knows what is truly best for us. Do you believe what the Bible says about your (unhealthy behavior)?

**1 Corinthians 10:31** “Whether therefore ye eat, or drink, or whatsoever ye do, do all to the glory of God.”

Often, any one unhealthy behavior is not severe enough to be of imminent concern by itself, but when bundled together, multiple moderately unhealthy behaviors can be worse than a single severe one.

**Example:** a middle-aged lifetime non-smoker, but who: consumes a standard American diet, drinks less than 2 alcoholic beverages per day, is only slightly overweight, but gets minimal exercise, has an irregular sleep pattern, and is occasionally stressed at home or work will experience a variety of chronic physical and mental health problems that severely affect the longevity and quality of life.

In this type of case, the best way to develop a healthy lifestyle and enjoy optimal health is to take a **comprehensive**, but more **casual** approach – not focusing on a single unhealthy behavior, but instead striving for a healthy lifestyle as a whole.

Without any specific unhealthy behavior in mind, answer the same 6 questions regarding the numerous “less-than-healthy” aspects of your **overall** lifestyle.

**NO – 1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10 – YES**

**Health Questions:**

- \_\_\_ **1. Susceptible?** Do you believe... your **generally unhealthy lifestyle** makes you more **susceptible** to develop chronic lifestyle-related disease(s)?
- \_\_\_ **2. Serious?** Do you believe... the resulting **chronic lifestyle-related disease(s)** (obesity, diabetes, heart disease, cancer, auto-immune disorder, depression, etc.) would be a **serious** burden on your life?
- \_\_\_ **3. Effective?** Do you believe... a **therapeutic lifestyle change** would be **effective** in helping you **prevent** or **reverse** the chronic lifestyle-related disease(s)?
- \_\_\_ **4. Beneficial?** Do you believe... a **therapeutic lifestyle change** would be **beneficial** to the **quality** of your **life**?
- \_\_\_ **5. Capable?** Do you believe... you are **capable** of making a **therapeutic lifestyle change**, if given the proper **tools** and **opportunities**?
- \_\_\_ **6. Responsible?** Do you believe... **YOU** are ultimately **responsible** for your **lifestyle choices** and their **health consequences**?

**Health Belief Level:**

\_\_\_\_\_ / 6 = \_\_\_\_\_ = \_\_\_\_\_ for **TLC** (regarding your general unhealthy lifestyle)

**Interpretation: 0-3 = Not Ready for TLC, 4-7 = Maybe Ready for TLC, 8-10 Ready for TLC.**

**Decision:**

Knowing your **health beliefs**, are you **ready to commit** to a **personalized process** of **general** Therapeutic Lifestyle Change?

**Yes      Maybe      No**

Whether Yes, No, or Maybe, continue with Part 2.