

Beginning Life Changes: Stress Prevention Test.

3 Page PDF

Score each item below according to how true each statement is for you (within the past 2 weeks).

(1) = Almost always (2) = Usually (3) = Sometimes (4) = Rarely (5) = Never

- ___1. During an average week, my overall intake of food balances out to be healthy and nutritious.
- ___2. BMI: normal = score 1, Over weight= score 2, Obese and extreme obese= score 5.
(Refer to BMI chart on the next page).
- ___3. I schedule a regular bedtime and I prioritize and maintain healthy sleep habits.
- ___4. I have at least one person within 50 miles who will help me in an emergency.
- ___5. My lifestyle is active to the point of perspiration at least three times a week.
- ___6. I am smoke free. (Non-smokers score 1, second-hand smokers score 3, smokers score 5).
- ___7. I drink no more than 1 alcoholic drink per day (women). No more than 2 drinks per day (men).
Non-drinkers score 1. (See page 3 of this pdf for more information).
- ___8. I drink fewer than (500 mg) of caffeine daily. 1 (12 oz) Soda= 54-75, 1 (8 oz) coffee= 80-150 (No caffeine score 1).
- ___9. I give and receive affection regularly. (Pets count!)
- ___10. I gain strength from my beliefs.
- ___11. I regularly attend social, recreational or leisure activities with others.
- ___12. I spend time daily doing something that I enjoy.
- ___13. I speak openly with one or more trusted people at least once a week.
- ___14. I practice good health care by attending regular medical, dental and vision checkups.
- ___15. I pace my day so that I feel accomplished, successful, comfortable and healthy.
- ___16. I set personal goals for myself and spend time achieving them.
- ___17. I do something for fun at least once a week.
- ___18. I consistently put important tasks ahead of unimportant tasks.
- ___19. I manage my expenses. I budget within my income.
- ___20. I practice relaxation, breathing exercises, meditation or prayer once each day.

Any item scored (1) or (2)-great job! You are preventing stress well in those areas. Any item scored (3) (4) or (5) indicates opportunity for improvement. You may choose to begin very easy, small changes to improve, whenever you are ready.

You Got This!!!

Body Mass Index Chart for Adults

Calculate your body Mass Index

BMI	Height (in)																		
	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76
Wgt. (lbs)	4'10"	4'11"	5'0"	5'1"	5'2"	5'3"	5'4"	5'5"	5'6"	5'7"	5'8"	5'9"	5'10"	5'11"	6'0"	6'1"	6'2"	6'3"	6'4"
100	21	20	20	19	18	18	17	17	16	16	15	15	14	14	14	13	13	13	12
105	22	21	21	20	19	19	18	18	17	16	16	16	15	15	14	14	14	13	13
110	23	22	22	21	20	20	19	18	18	17	17	16	16	15	15	15	14	14	13
115	24	23	23	22	21	20	20	19	19	18	18	17	17	16	16	15	15	14	14
120	25	24	23	23	22	21	21	20	19	19	18	18	17	17	16	16	15	15	15
125	26	25	24	24	23	22	22	21	20	20	19	18	18	17	17	17	16	16	15
130	27	26	25	25	24	23	22	22	21	20	20	19	19	18	18	17	17	16	16
135	28	27	26	26	25	24	23	23	22	21	21	20	19	19	18	18	17	17	16
140	29	28	27	27	26	25	24	23	23	22	21	21	20	20	19	19	18	18	17
145	30	29	28	27	27	26	25	24	23	23	22	21	21	20	20	19	19	18	18
150	31	30	29	28	27	27	26	25	24	24	23	22	22	21	20	20	19	19	18
155	32	31	30	29	28	28	27	26	25	24	24	23	22	22	21	20	20	19	19
160	34	32	31	30	29	28	28	27	26	25	24	24	23	22	22	21	21	20	20
165	35	33	32	31	30	29	28	28	27	26	25	24	24	23	22	22	21	21	20
170	36	34	33	32	31	30	29	28	27	27	26	25	24	24	23	22	22	21	21
175	37	35	34	33	32	31	30	29	28	27	27	26	25	24	24	23	23	22	21
180	38	36	35	34	33	32	31	30	29	28	27	27	26	25	24	24	23	23	22
185	39	37	36	35	34	33	32	31	30	29	28	27	27	26	25	24	24	23	23
190	40	38	37	36	35	34	33	32	31	30	29	28	27	27	26	25	24	24	23
195	41	39	38	37	36	35	34	33	32	31	30	29	28	27	27	26	25	24	24
200	42	40	39	38	37	36	34	33	32	31	30	30	29	28	27	26	26	25	24
205	43	41	40	39	38	36	35	34	33	32	31	30	29	29	28	27	26	26	25
210	44	43	41	40	38	37	36	35	34	33	32	31	30	29	29	28	27	26	26
215	45	44	42	41	39	38	37	36	35	34	33	32	31	30	29	28	28	27	26
220	46	45	43	42	40	39	38	37	36	35	34	33	32	31	30	29	28	28	27
225	47	46	44	43	41	40	39	38	36	35	34	33	32	31	31	30	29	28	27
230	48	47	45	44	42	41	40	38	37	36	35	34	33	32	31	30	30	29	28
235	49	48	46	44	43	42	40	39	38	37	36	35	34	33	32	31	30	29	29
240	50	49	47	45	44	43	41	40	39	38	37	36	35	34	33	32	31	30	29
245	51	50	48	46	45	43	42	41	40	38	37	36	35	34	33	32	32	31	30
250	52	51	49	47	46	44	43	42	40	39	38	37	36	35	34	33	32	31	30
255	53	52	50	48	47	45	44	43	41	40	39	38	37	36	35	34	33	32	31
260	54	53	51	49	48	46	45	43	42	41	40	38	37	36	35	34	33	33	32
265	56	54	52	50	49	47	46	44	43	42	40	39	38	37	36	35	34	33	32
270	57	55	53	51	49	48	46	45	44	42	41	40	39	38	37	36	35	34	33
275	58	56	54	52	50	49													

BMI Scoring

Normal Weight = 19-24

Obese = 30-39

Overweight = 25-29

Extreme Obesity = 40-54

Note: BMI values rounded to the nearest whole number. BMI categories based on CDC (Centers for Disease Control and Prevention) criteria.

Beginning Life Changes Inventory: When is alcohol use a problem?

Definitions: One drink= 5 oz. of wine, 12 oz. of beer, 1.5 oz. liquor (80 proof).

Moderation: According to the Dietary Guidelines for Americans, “drinking in moderation is defined as having no more than 1 drink per day for women and no more than 2 drinks per day for men. This definition is referring to the amount consumed on any single day and is not intended as an average over several days.”

Binge drinking: The National Institute on Alcohol Abuse and Alcoholism defines binge drinking “as the amount of alcohol leading to a blood alcohol content (BAC) of 0.08, which, for most adults, would be reached by consuming five drinks for men or four for women over a 2-hour period.”

Denial: “A psychological defense mechanism in which confrontation with a personal problem or with reality is avoided by denying the existence of the problem or reality.” *Don’t even know I am lying.*

Use of alcohol may be social, recreational or a self-defeating behavior. Use the criteria below to determine whether your use has become a problem. The information below is based on the Diagnostic and Statistical Manual of Mental Disorders (DSM-V)-the manual that physicians, therapists and insurance companies use to define and diagnose substance abuse and dependence. Please notify your therapist or a physician if you identify a problem.

DSM V- Substance Use Disorder: *Check all that apply in a 12 months period

- Use results in an inability to fulfill a major obligation
- Recurrent legal problems.
- Continuing to use despite the objections of others or evidence that use is causing problems.
- Increased tolerance
- Withdrawal symptoms
- Using greater amounts than intended or using more frequently than intended.
- Unsuccessful efforts to reduce, control or quit use.
- Excessive amounts of time involved in getting, using or recovering from the substance.
- Use causes reduction or impairment in ability to fulfill major social, family, school or job duties.
- Use in potentially dangerous situations: driving under the influence, use near small children, use while operating machines or using sharp objects.

**Two or three symptoms indicate a mild substance use disorder, four or five symptoms indicate a moderate substance use disorder, and six or more symptoms indicate a severe substance use disorder.*

When is Caffeine use a problem?

Caffeine intoxication is defined as consumption of 250 mg or more of caffeine (3 or more servings of caffeine). And 5 or more of the following symptoms: Check all that apply.

- Muscle twitching
- Restlessness
- Flushed face
- Stomach upset
- Nervousness
- Increased urination
- Heart pounding
- Excitement
- Can’t sit still
- Insomnia
- Rambling speech
- Rambling thoughts.