

Being Your Best

Spirituality and Health Status Survey

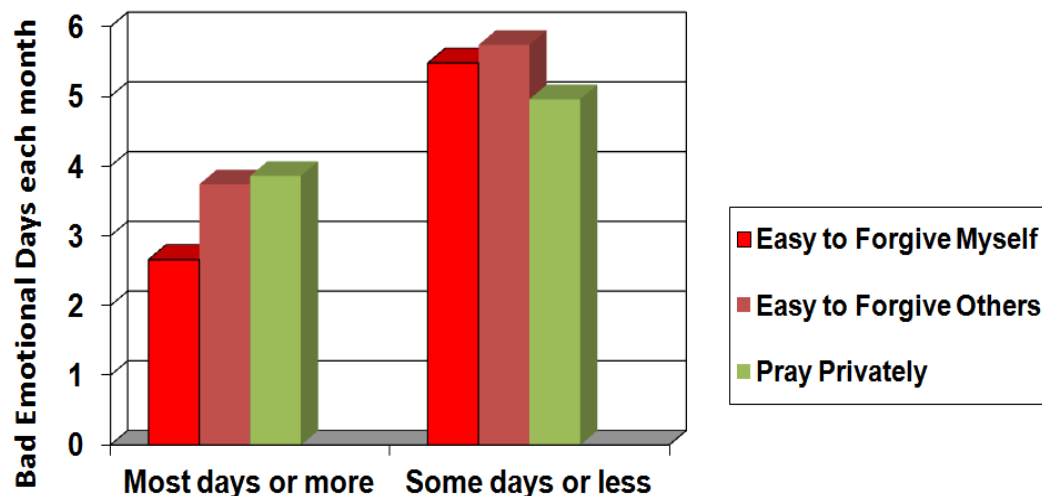
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The survey on the following pages is designed to assess the following factors in faith-based and other communities:

- Health status (using a Center for Disease Control questions for physical and emotional health)
- Spiritual practices and well-being (show in red below)
- Volunteerism
- Behaviors associated with decreased hospitalization
- Use of four communication, stress management and prayer skills (i.e., awareness, affirmations, assertiveness, acceptance – which are taught as the “Satisfaction Skills”)

Our ongoing studies that have documented that emotional health is significantly affected by prayer and forgiveness (as illustrated below). That is, those who are able to forgive themselves and others, as well as those who often pray privately, have significantly fewer “bad emotional days” each month

Effects of Forgiveness and Prayer *on Emotional Health*



Combined data from three churches

N = 169

Our research has also found a strong association ($R^2 = .52$ - using stepwise multiple regression) between spiritual wellness and the following factors:

- Looking to God for guidance
- Ability to forgive myself
- Carrying religious beliefs into all areas of life
- Praying privately
- Telling thoughts and feelings to others

Less Stress, Better Health and Greater Peace

We hope that each member of your family (ages 13+) will fill out a separate survey. (More are available at Trinity and on our website.) It will help us better understand the needs of our members.

Please do not write your name on the survey. To encourage candid responses, please put your survey in the return envelope without showing your answers to other family members

1. Would you say that in general your health is: EXCELLENT VERY GOOD GOOD FAIR POOR

2. Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?

NUMBER OF DAYS? _____

3. Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?

NUMBER OF DAYS? _____

4. How many prescription medications do you currently take? _____

(IF YOU AREN'T TAKING ANY MEDICATIONS, PLEASE SKIP TO #7)

5. I use a pill box or some other system to organize my medicine. YES NO

6. I bring a list of current medications (or the medicine bottles) to each doctor visit. YES NO

7. I bring a written care plan and/or my *Action Plan* to each doctor visit. YES NO

8. I know my "red flags" (signs that I should call a doctor immediately) YES NO

9. A. What is your height? ___ft. ___ inches B. What is your weight? ___lbs. c. Gender M F

10. On an average, how many days a week do you have an alcoholic beverage? _____

b. On a typical drinking day, how many drinks do you have? _____

11. What is your date of birth: Month: _____ Date: _____ Year _____

12. How often are you focused on the present moment, instead of being upset about the past or worried about the future?

MANY TIMES EACH DAY EVERY DAY MOST DAYS SOME DAYS ONCE IN A WHILE NEVER OR ALMOST NEVER

13. How often do you compliment those closest to you?

MANY TIMES EACH DAY EVERY DAY MOST DAYS SOME DAYS ONCE IN A WHILE NEVER OR ALMOST NEVER

14. How often do you tell close friends or family what you really want, think or feel?

MANY TIMES EACH DAY EVERY DAY MOST DAYS SOME DAYS ONCE IN A WHILE NEVER OR ALMOST NEVER

15. In an average week, how much time do you spend volunteering or helping someone who is not a relative? NUMBER OF HOURS/WEEK _____

16. I feel God's presence

MANY TIMES EACH DAY EVERY DAY MOST DAYS SOME DAYS ONCE IN A WHILE NEVER OR ALMOST NEVER

17. It is easy for me to forgive myself.

Strongly Disagree

Strongly Agree

1 2 3 4 5 6 7

18. It is easy for me to forgive others.

Strongly Disagree

Strongly Agree

1 2 3 4 5 6 7

18. I feel deep inner peace or harmony

MANY TIMES EACH DAY EVERY DAY MOST DAYS SOME DAYS ONCE IN A WHILE NEVER OR ALMOST NEVER

19. I am spiritually touched by the beauty of creation

MANY TIMES EACH DAY EVERY DAY MOST DAYS SOME DAYS ONCE IN A WHILE NEVER OR ALMOST NEVER

20. How often do you pray privately in places other than at church or synagogue?

MANY TIMES EACH DAY EVERY DAY MOST DAYS SOME DAYS ONCE IN A WHILE NEVER OR ALMOST NEVER

21. I look to God for strength, support and guidance

MANY TIMES EACH DAY EVERY DAY MOST DAYS SOME DAYS ONCE IN A WHILE NEVER OR ALMOST NEVER

22. If you were ill or in need how much would the people in your congregation help you out?

A GREAT DEAL SOME A LITTLE NONE

23. I try hard to carry my religious beliefs over into all my other dealings in life

STRONGLY AGREE AGREE DISAGREE STRONGLY DISAGREE

24. How often do you go to religious services

MORE THAN ONCE A WEEK EVERY WEEK ONCE OR TWICE A MONTH EVERY MONTH OR SO ONCE OR TWICE A YEAR NEVER

25. What are the two (or more) things you like *best* about your church? (USE ADDITIONAL PAPER IF NECESSARY)

26. What are the two (or more) things you like *least* about your church? (USE ADDITIONAL PAPER IF NECESSARY)
