HEALTH TRIANGLE SELF ASSESSMENT

Healthy: A quality of life utilized by achieving a balanced combination of physical, mental/emotional, and social well-being.

Wellness: An overall state of well-being or total health; the ultimate way of life that works to keep the three components of health working together.

Physical Health: Involves keeping your body as fit as possible, practicing good personal hygiene, good nutrition, exercise, proper rest and sleep, and practicing good safety habits.

Mental Health: Involves being comfortable with yourself, feeling good about yourself, being able to meet the demands of life, being able to express emotions in healthy ways, and being able to cope with the stress of daily life.

Social Health: Involves how you relate to others, how you choose your friends, and activities that you are involved at home, school, work, and/or leisure.

What is Your Level of Wellness?

Directions: Mark the appropriate number on the blank that best categorizes your ranking for each statement below. Add up your numbers and give yourself a sub total for each section. At the end, add all 3 sub totals for each section to come up with a final total for the entire self assessment. Refer to the scoring system at the end to see where you rank.

3 = STRONG  2 = AVERAGE  1 = WEAK  0 = VERY POOR

PHYSICAL HEALTH

____ I bathe daily, and brush and floss my teeth daily
____ I am within 5 pounds of my ideal/desirable weight
____ I spend less than 2 hours a day sitting (during free time)
____ My resting heart rate is below 70 beats/minute
____ I play/participate in an organized athletic sport/competition
____ I do at least 20 minutes of aerobic exercise at least 3 times a week or more
____ I stretch or do flexibility exercises at least 5-10 minutes every day
____ I do strength training exercise for at least 20 minutes for at least 2 times a week or more
____ I relax at least 15 minutes each day
____ I seldom feel tired or run down throughout a normal day
____ I get 8 to 10 hours of sleep each night
____ I avoid fast food and eat home cooked meals most days
____ I eat a balanced diet that includes a variety of foods
____ I drink eight cups of water each day
____ I eat whole grain bread and cereals and avoid white flour
____ I limit my intake of sugar. Have soft drinks less than 3 times a week
____ I read the food ingredients lists on packaged food labels to understand the quality of the product
____ I avoid the use/abuse non-medicinal drugs including tobacco and alcohol
____ I take preventative measures for personal safety
____ I analyze health information and products (reading health literature, articles, journals, etc.)

____ SUB TOTAL for PHYSICAL HEALTH (0-60)
MENTAL / EMOTIONAL HEALTH

____ I am happy most of the time
____ I enjoy challenges that help me mentally grow
____ I can name 3 things I do well
____ I feel okay about crying and allow myself to do so
____ I give others sincere compliments
____ I can accept compliments
____ I make thoughtful and responsible decisions
____ I listen to and think about constructive criticism
____ I ask for help when I need it
____ I am able to say “no” to people without feeling guilty
____ I can be satisfied with my effort if I have done my best
____ I express my thoughts and feelings in a positive manner
____ I have at least one hobby or interest I pursue and enjoy
____ I accept responsibility for my actions
____ I am willing to accept new ideas and try new behaviors
____ I handle setbacks without loss of self-esteem
____ I am aware of my emotions and manage and express them appropriately
____ I recognize emotional problems in myself or others and seek help when needed
____ I feel that my life has meaning and have a sense of control over my life
____ I successfully manage my stress/frustrations with skill and enjoyment, not letting it become overwhelming

____ SUB TOTAL for MENTAL / EMOTIONAL HEALTH (0-60)

SOCIAL HEALTH

____ I show respect and care for myself and others
____ I communicate clearly and use good active listening skills with others
____ I meet people easily and am comfortable entering into conversations with new acquaintances
____ I continue to participate in an activity even though I don’t always get my way
____ I have at least one or two close friends (develops supportive friendships)
____ I can be assertive and set personal boundaries with family, friends, others, etc
____ When working in a group, I accept other people’s ideas and suggestions
____ I can say “no” to my friends if they are doing something I do not want to do
____ I can accept differences in my friends and classmates
____ I usually have success making friends with females of my age
____ I usually have success making friends with males of my age
____ I am comfortable carrying on a conversation with an adult
____ If I have a problem with someone, I try to work it out (resolves conflicts effectively)
____ I avoid gossiping about people
____ I seek and lend support when needed
____ I socialize well with others without the influence of alcohol or other drugs
____ I understand and accept my own sexuality
____ I understand the risks of sexually transmitted diseases and pregnancy and take responsibility for my own behavior
____ I continue growing, learning, and facing new challenges throughout life
____ I relate to the larger environment (home, community, world) and take a share of the responsibility for it

____ SUB TOTAL for SOCIAL HEALTH (0-60)
TOTALS

___ SUB TOTAL for PHYSICAL HEALTH (0-60)

+ 

___ SUB TOTAL for MENTAL / EMOTIONAL HEALTH (0-60)

+ 

___ SUB TOTAL for SOCIAL HEALTH (0-60)

=

___ THE FINAL TOTALS (0-180)

SCORING

165-180 OUTSTANDING
150-164 GREAT
100-119 AVERAGE
135-149 GOOD
120-134 FAIR
75-99 BELOW AVERAGE
50-74 POOR
0-49 NEEDS HELP