HEALTH ATTITUDES AND BEHAVIORS

MARKING INSTRUCTIONS

- **Please use a No. 2 pencil.**
- **Make solid marks that fill the circle completely.**
- **Erase cleanly any marks you wish to change.**
- **Make no stray marks on this form.**

CORRECT: ● **INCORRECT:** ✓ ⊗ ◒ ⊙

These statements concern common health behaviors and practices. For each behavior, indicate how typical it is for you. Use the following scale:

○	○	○	○	○
Not at all like me	Unlike me	Not sure	Like me	Very much like me

Not at all like me	Unlike me	Not sure	Like me	Very much like me	
○	○	○	○	○	I eat a balanced diet.
○	○	○	○	○	I get enough sleep.
○	○	○	○	○	I keep emergency numbers near the phone.
○	○	○	○	○	I choose my spare time activities to help me relax.
○	○	○	○	○	I take chances when crossing the street.
○	○	○	○	○	I have a first-aid kit in my home.
○	○	○	○	○	I throw away old or unused medicines.
○	○	○	○	○	I see a doctor for regular check ups.
○	○	○	○	○	I avoid getting chilled.
○	○	○	○	○	I watch my weight.
○	○	○	○	○	I carefully obey traffic rules.
○	○	○	○	○	I watch for possible signs of major health problems.
○	○	○	○	○	I exercise to stay healthy.
○	○	○	○	○	I cross the street against the stop light.
○	○	○	○	○	I avoid high crime areas.
○	○	○	○	○	I don't smoke.
○	○	○	○	○	I don't take chemical substances that might injure my health.
○	○	○	○	○	I check the condition of gas and electrical appliances to avoid accidents.

Not at all like me	Unlike me	Not sure	Like me	Very much like me	
○	○	○	○	○	I stay away from places where I might be exposed to germs.
○	○	○	○	○	I fix broken things around my home right away.
○	○	○	○	○	I see a dentist for regular checkups.
○	○	○	○	○	I limit my intake of foods like coffee, sugar, and fats.
○	○	○	○	○	I avoid over-the-counter medicines.
○	○	○	○	○	I take vitamins.
○	○	○	○	○	I do not drink.
○	○	○	○	○	I wear a seat belt when in a car.
○	○	○	○	○	I cross busy streets in the middle of the block.
○	○	○	○	○	I avoid areas with high pollution.
○	○	○	○	○	I discuss health with friends, neighbors, and relatives.
○	○	○	○	○	I gather information on things that affect my health.
○	○	○	○	○	I use dental floss regularly.
○	○	○	○	○	I speed while driving.
○	○	○	○	○	I brush my teeth regularly.
○	○	○	○	○	I take health food supplements.
○	○	○	○	○	I learn first-aid techniques.
○	○	○	○	○	I get shots to prevent illness.
○	○	○	○	○	I take more chances doing things than the average person.
○	○	○	○	○	I drive after drinking.
○	○	○	○	○	I engage in activities or hobbies where accidents are possible.