



**Health Promotion Workbook:
Initial Session**



Today's Date ____ / ____ / ____

**PART 1:
IDENTIFYING FUTURE GOALS**

We will start by talking about some of your future goals. By that we mean, how would you like your life to improve and be different in the future? It is often important to think about future goals when thinking about making changes in health habits.

What are some of your goals for the next three months to a year regarding your physical and emotional health?

What are some of your goals for the next three months to one year regarding activities and hobbies?

What are some of your goals for the next three months to a year regarding your relationships and social life?

What are some of your goals in the next three months to a year regarding your financial situation or other parts of your life?

PART 2:
SUMMARY OF HEALTH HABITS

Let's review some of information about your health, behavior, or health habits.

EXERCISE

- Days per week you participated in vigorous activity
- none
 - seldom
 - 1-2 days per week
 - 3-5 days per week
 - 6-7 days per week

- Minutes of exercise per day
- not applicable
 - less than 15 minutes
 - 15-30 minutes
 - more than 30 minutes

NUTRITION

- Weight change in last six months
- no change in weight
 - gained more than 10 pounds
 - lost more than 10 pounds
 - don't know

TOBACCO USE

- Tobacco used in last six months
- no
 - yes If yes, which ones?
 - cigarettes
 - chewing tobacco
 - pipe

- Average cigarettes smoked per day in the last six months
- not applicable
 - 1-9
 - 10-19
 - 20-29
 - 30+

ALCOHOL USE

Drinking days per week

- 1-2 days per week
- 3-4 days per week
- 5-6 days per week
- 7 days per week

Drinks per day

- 1-2 drinks
- 3-4 drinks
- 5-6 drinks
- 7 or more

Binge drinking within last month

Five or more drinks/occasion for men
or women below age 65
four or more drinks/occasion for men
or women over age 65

- none
- 1-2 binges
- 3-5 binges
- 6-7 binges
- 8 or more

On days that you do not drink do you feel
anxious, have greater difficulty sleeping
than usual, feel your heart racing, have
heart palpitations, or have the shakes or
hand tremors?

- No
- Yes

PART 3:
TYPES OF DRINKERS IN THE U.S. POPULATION

It is helpful to think about the amount of alcohol consumed by other adults in the United States and by you. There are different types of drinkers among the adult population, and these types can be explained by different patterns of alcohol consumption. These include:

Types	Patterns of alcohol consumption
Abstainers and light drinkers	<ul style="list-style-type: none">• drink no alcohol or less than three drinks per month• alcohol use does not affect health or result in negative consequences
Moderate drinkers	<ul style="list-style-type: none">• drink three or fewer times per week• drink one to two standard drinks per occasion• alcohol use does not affect health or result in negative consequences• at times moderate drinkers consume NO alcohol, such as before driving, while operating machinery, and so on.
At-risk drinkers	<ul style="list-style-type: none">• drink over 14 standard drinks per week below age 65, or over 7 standard drinks per week over age 65• at risk for negative health and social consequences
Alcohol Abuse or Dependence	<ul style="list-style-type: none">• heavy drinking has led to a physical need for alcohol and to other problems

PART 4:
CONSEQUENCES OF AT-RISK OR PROBLEM DRINKING

Drinking alcohol can affect your *physical health, emotional and social well being, and relationships*.

The following are some of the positive effects that people sometimes describe as a result of drinking alcohol. Let's place a check mark by the ones that you feel apply to you.

<input type="checkbox"/> Temporary high	<input type="checkbox"/> Relaxation	<input type="checkbox"/> Avoid uncomfortable feelings
<input type="checkbox"/> Forget problems	<input type="checkbox"/> Sense of confidence	<input type="checkbox"/> Ease in speaking one's mind
<input type="checkbox"/> Enjoy the taste	<input type="checkbox"/> Temporary lower stress	
<input type="checkbox"/> Social ease		

The following are some of the *negative consequences* that may result from drinking. Let's place a check mark by any of these problems that are affecting you regardless of whether you believe they are related to your drinking.

<input type="checkbox"/> Difficulty coping with stressful situations	<input type="checkbox"/> Sleep problems	<input type="checkbox"/> Accidents/falls
<input type="checkbox"/> Depression	<input type="checkbox"/> Memory problems or confusion	<input type="checkbox"/> Relationship problems
<input type="checkbox"/> Loss of independence	<input type="checkbox"/> Malnutrition	<input type="checkbox"/> Increased risk of assault
<input type="checkbox"/> Problems in community activities	<input type="checkbox"/> Reduced effectiveness of medications	<input type="checkbox"/> Financial problems
<input type="checkbox"/> High blood pressure	<input type="checkbox"/> Increased side effects from medication	<input type="checkbox"/> Stomach pain
<input type="checkbox"/> Sexual performance problems		<input type="checkbox"/> Liver problems

PART 5:
REASONS TO QUIT OR CUT DOWN ON YOUR DRINKING

The purpose of this step is to think about the best reason for you to quit or cut down on your drinking. The reasons will be different for different people.

The following list identifies some of the reasons for which people decide to cut down or quit drinking. Put an X in the box by the three most important reasons that YOU want to quit or cut down on your drinking. Perhaps you can think of other reasons that are not on this list.

- To consume fewer empty calories (alcoholic drinks contain many calories).
- To sleep better.
- To maintain independence.
- To feel better
- To save money.
- To be happier.
- To reduce the possibility that I will be injured in a car crash.
- To have better family relationships.
- To participate more in community activities.
- To have better friendships.
- Other: _____

Write down the three most important reasons you choose to cut down or quit drinking.

1. _____
2. _____
3. _____

Think about the consequences of continuing to drink heavily. Now think about how your life might improve if you decide to change your drinking habits by cutting down or quitting. What improvements do you anticipate?

Physical health:

Mental health:

Family:

Other relationships:

Activities:

PART 6:
STANDARD DRINKS

The drinks shown below, in normal measure, contain roughly the same amount of pure alcohol. You can think of each one as a **standard drink**.



one can of
ordinary
beer or ale

12 oz



one glass of
wine

5 oz



one small
glass of
sherry

4 oz



one small
glass of
liqueur or
aperitif

4 oz



one single
shot of
spirits (gin,
whiskey, vodka)

1.5 oz



PART 7:
DRINKING AGREEMENT

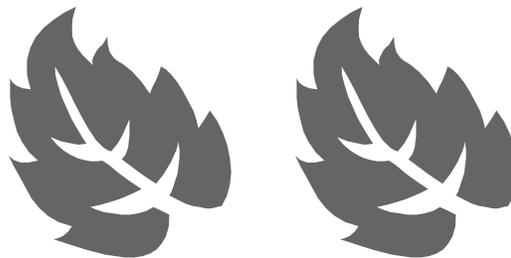
The purpose of this step is to decide on a drinking limit for yourself for a particular period of time. Negotiate with your health care provider so you can both agree on a reasonable goal. A reasonable goal for some people is abstinence-not drinking any alcohol.

As you develop this agreement, answer the following questions:

- How many standard drinks?
- How frequently?
- For what period of time?

DRINKING AGREEMENT
Date _____

Patient signature _____
Clinician signature _____



DRINKING DIARY CARD

One way to keep track of how much you drink is the use of drinking diary cards. One card is used for each week. Every day record the number of drinks you had. At the end of the week add up the total number of drinks you had during the week.

DIARY CARD

KEEP TRACK OF WHAT YOU DRINK OVER THE NEXT 7 DAYS

STARTING DATE _____

DAY	Beer	Wine	Liquor	Number
Sunday				
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
			WEEK'S TOTAL:	

KEEP TRACK OF WHAT YOU DRINK OVER THE NEXT 7 DAYS

STARTING DATE _____

DAY	Beer	Wine	Liquor	Number
Sunday				
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
			WEEK'S TOTAL:	

PART 8:

HANDLING RISKY SITUATIONS

Your desire to drink may change according to your mood, the people you are with, and the availability of alcohol. Think about your last periods of drinking.

Here are examples of risky situations. The following list may help you remember situations that can result in at-risk drinking.

◆ social get-togethers	◆ sleeplessness	◆ anger
◆ boredom	◆ family	◆ watching television
◆ tension	◆ friends	◆ other people drinking
◆ feeling lonely	◆ criticism	◆ certain places
◆ feelings of failure	◆ dinner parties	◆ after regular daily activities
◆ frustration	◆ children and grandchildren	◆ weekends
◆ use of tobacco	◆ TV or magazine ads	◆ arguments

What are situations that make you want to drink at a risky level. Please write them down.

1. _____

2. _____

WAYS TO COPE WITH RISKY SITUATIONS

It is important to figure out how you can make sure you will not go over drinking limits when you are tempted. Here are examples:

- √ Telephone a friend
- √ Call on a neighbor
- √ Read a book
- √ Go for a walk
- √ Watch a movie
- √ Participate in an activity you like

Some of these ideas may not work for you, but other methods of dealing with risky situations may work. Identify ways you could cope with the specific risky situations you listed above.

1. For the first risky situation or feeling, write down different ways of coping.

2. For the second risky situation or feeling, write down different ways of coping.

Think about other situations and ways you could cope without using alcohol.

PART 9:
VISIT SUMMARY

We've covered a great deal of information today. Changing your behavior, especially drinking patterns, can be a difficult challenge. The following pointers may help you stick with your new behavior and maintain the drinking limit agreement, especially during the first few weeks when it is most difficult. Remember that you are changing a habit, and that it can be hard work. It becomes easier with time.

- ❑ Remember your drinking limit goal: _____
- ❑ Read this workbook frequently.
- ❑ Every time you are tempted to drink above limits and are able to resist, congratulate yourself because you are breaking an old habit.
- ❑ Whenever you feel very uncomfortable, tell yourself that the feeling will pass.
- ❑ At the end of each week, think about how many days you have been abstinent (consumed no alcohol) or have been a light or moderate drinker.
- ❑ Some people have days during which they drink too much. If that happens to you, DON'T GIVE UP. Just start again the next day.
- ❑ You should always feel welcome to call your primary care provider for assistance or in case of an emergency.

THANKS FOR TRYING THIS PROGRAM.

Please keep your drinking diary cards handy so you can review them at the next telephone visit .

