

TestWell[®]: Wellness Inventory for Older Adults

Instructions

On the answer sheet provided, please **circle the number best identifies your response** to each corresponding statement.

1. **Never or Almost Never**
2. **Occasionally**
3. **Often**
4. **Very Often**
5. **Always or Almost Always**

Physical Fitness and Nutrition

1. I avoid eating foods that are high in fat (fatty cuts of meat, whole milk dairy products, fried foods, hot dogs, processed foods, rich desserts, and creamy sauces).
2. I eat at least five servings of fruits and/or vegetables every day (one serving equals 1/2 cup).
3. I eat foods that are high in fiber daily (examples: whole grain breads, cereal, fresh fruits or vegetables).
4. I maintain my recommended weight.
5. I vary my physical activity to include walking, aerobics, weights, stretching, and swimming.

Self Care

6. I avoid mixing drugs and alcohol.
7. I receive vaccines as recommended (i.e. flu, pneumonia, tetanus).
8. I brush and floss my teeth or care for my dentures at least once a day.
9. I see my personal physician annually.
10. My blood pressure level is within the range recommended by my physician (includes blood pressure controlled with medication).

Safety

11. If I use rugs, they have non-skid backing.
12. I ensure that the batteries in my smoke detector are checked twice a year (such as when the time changes).
13. I ensure that the water temperature in my home is set so it is not scalding.
14. I wear a seat belt and shoulder harness (when available) while driving or riding as a passenger.
15. I avoid riding with people who drive under the influence of alcohol or other drugs.

Environmental Wellness

16. When available, I regularly recycle my paper, plastic, glass, and aluminum.
17. I purchase products made with recycled or biodegradable materials whenever possible.
18. To conserve energy, I turn off electrical appliances when not in use.
19. I do not let the water run unnecessarily.
20. I avoid exposing myself to tobacco smoke.

Social Awareness/Support

21. I can enjoy myself without the use of recreational drugs (i.e. alcohol, marijuana, cocaine, LSD, etc.).
22. I have friends or relatives who I can rely on for help and support.
23. When I have an important decision to make, I have someone that I can talk with.
24. I help others (examples: shopping, visiting people, calling people, providing transportation).
25. I resolve conflict in a positive and respectful manner.

Intimacy/Emotional Awareness

26. I love others without expecting them to earn my love.
27. I have hope for the future.
28. I am aware of certain situations or experiences that tend to upset me emotionally.
29. I enjoy life.
30. I am able to experience intimacy (a loving relationship) with another person.

Emotional Management

31. I accept things about myself that I cannot change.
32. I can say "no" without feeling guilty.
33. I am able to handle the stress in my life, alone or with the help of others.
34. I get enough sleep so that I can manage my emotions effectively.
35. I laugh at least once a day.

Intellectual Wellness

36. I keep informed of current events by using a variety of resources.
37. I take classes at locations such as my local senior center, park district, or place of worship.
38. I watch news and educational programs on the television.
39. I choose to seek opportunities to learn new things.
40. I enjoy doing crossword puzzles or other work games.

Outside Interests

41. I enjoy singing, dancing, playing, or listening to music.
42. I enjoy being with people of all ages.
43. I work and/or volunteer.
44. I choose to cultivate a hobby.
45. I enjoy meeting new people.

Spirituality and Values

46. I feel I have purpose and meaning in my life.
47. My faith and values sustain me.
48. I understand that others have values and beliefs different from mine.
49. I have people in my life who share my beliefs and values.
50. I accept things that are not within my control.