# Family Health Habits Assessment & Plan

## A. WHAT ARE YOUR FAMILY HEALTH HABITS?
Please mark the boxes with answers true for most days.

1. Does your family usually eat more than 4 servings of **FRUITS AND VEGETABLES** each day?  
   - Yes  
   - No

2. Do you limit **SCREEN TIME** (TV, computer, video games, phone) in your family?  
   - Yes  
   - No

3. Does your family spend time every day in **ACTIVE PLAY** (fast breathing, sweating)?  
   - Yes  
   - No

4. Are **SODA** or sugary drinks (fruit juice, sweet tea, sports drinks) available in your home?  
   - Yes  
   - No

5. Are **SNACKS**, like cookies, ice cream, candy or chips available in your home?  
   - Yes  
   - No

6. Does your family usually eat **BREAKFAST**?  
   - Yes  
   - No

7. Do you **EAT MEALS TOGETHER** as a family?  
   - Yes  
   - No

8. Do you keep a **TV** or other **SCREENS** in the rooms where family **SLEEPS**?  
   - Yes  
   - No

## B. ARE YOU READY TO MAKE CHANGES?
Please circle a number.

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not yet</td>
<td>Thinking about it</td>
<td>Let’s go!</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## C. WHAT WOULD YOU LIKE TO DO?
Please mark one box and write in your goal.

- Set limits on screen time:  
  - ________ hour(s)/daily.

- Eat more fruits and vegetables:  
  - ________ servings daily.

- Play (sweat and breathe fast) everyday:  
  - ________ minutes.

- Reduce sugar-sweetened beverage  
  - ________ servings per week.

- Other: _______________________________________

## D. WHAT MIGHT MAKE IT HARD TO DO THIS?
Please write your answer on the line below.

__________________________________________________________________________________________________

## E. HOW CONFIDENT ARE YOU THAT YOU CAN MAKE CHANGES?
Please circle a number.

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not confident</td>
<td>Somewhat confident</td>
<td>Very confident</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>