

Parish Health Team Survey

Jesus said, "I have come that they may have life, and have it to the full." John 10:10

The purpose of this survey is to assist the Parish Health Team to focus on programs that will lead to the optimum health of each member of this congregation. Toward that goal, we ask that you provide the following information:

Demographics: Gender _____ Age _____ Ethnicity _____ Marital Status _____

Number of Children in the home _____ Do you have health insurance? _____

Health Concerns:

| | | | | |
|-------------|---------------|-------------------|----------------------|----------------------|
| Asthma | Heart Disease | Nutrition | Substance Abuse | High Blood Pressure |
| Pain | Lung Disease | Alcoholism | Sexual Issues | Knowledge of Meds |
| Headaches | Diabetes | Anxiety/Fears | Incontinence | Caregiver Stress |
| Depression | Obesity | HIV/AIDS | Weight Control | Environmental Issues |
| Abuse | Stress | Sleep Problems | Difficulty Breathing | Alzheimers/Dementia |
| Cancer | Violence | Menopause | Anorexia/Bulimia | Healthy Cooking |
| Eating Well | Senior Care | Childhood Obesity | Sports Nutrition | Other: |

Spiritual Concerns:

| | | | |
|-----------------|--------------------|-------------|-----------------------------|
| Prayer | Faith | Forgiveness | Ability to let go of issues |
| Acceptance | Spiritual Healing | Grief/Loss | Divorce |
| Loneliness | Death | Anger | Trust in God |
| Anxiety/Despair | Sense of Community | Other: | |

Current Healthy Behaviors: Which of the following apply?

Good nutrition _____ Exercise _____ Stress Management _____ Spiritual Growth _____

Sleep 7-8 hrs/night _____ Volunteerism _____ Social Support _____ other _____

Please describe your activity _____

Do you have an interest in assisting the Parish Health Team?

How would you like to assist?

Thank you for completing this survey. Feel free to write any additional information on this form and submit in the collection basket or in the Parish Office. God bless you!