

Healthy Behavior Assessment Tool (HBAT)

Robert S. Gallup, Ed.D., OTR/L June, 2008 (revised)

Healthy Behavior Assessment Tool (HBAT): pages 2-4

- ◆ Purpose of the HBAT: page 5
- ◆ How to Use the HBAT: pages 6-7
- ◆ Principles & Premises of the HBAT: pages 8-11

Healthy Behavior Assessment Tool (HBAT)

Robert S. Gallup, Ed.D., OTR/L June, 2008 (revised)

Instructions: Please circle "**Yes**" next to any of the statements of Healthy Behaviors below which you feel is currently true for you.

Social Support

- (yes) * I have people in my life who I can count on for unconditional emotional support.
- (yes) * I have people in my support network who would give me material support, if I need it

Emotional Pattern

- (yes) * I have a "half full attitude."
- (yes) * I easily express appropriate anger, sadness, fear, and joy.
- (yes) * I can easily laugh at myself in most social situations.
- (yes) * I usually use my mind to relax myself when anxious.
- (yes) * I have a strong sense of "Gratitude."
- (yes) * I smile easily.
- (yes) * I feel, express and then let go of anxiety and fear.
- (yes) * I can choose "Journaling" to check-in on my feelings.
- (yes) * I quickly choose to adjust my behaviors when I feel sick or injured.
- (yes) * I am routinely able to choose to change my habits, attitudes, and behaviors to achieve better long-term health.

Self Esteem/Self Actualization/Purpose

- (yes) * I have a strong sense of these in the various roles in my life.
- (yes) * I have a strong sense of these in my hobbies and play.

Spiritual ("I feel a sense of _____.")

- (yes) * contributing to the betterment of my community.
- (yes) * spiritual connection to a power greater than myself.
- (yes) * "teamwork" in my approach to life.

(yes) * calmness when I am engaged in quiet and solo activities.

(yes) * kindness in my approach to other people.

Nutrition/Diet ("I'd characterize my diet as _____.")

(yes) * intending to keep my blood sugar pretty level, by eating three meals a day and snacks, if needed.

(yes) * cooking almost entirely by baking, steaming, or poaching.

(yes) * including sufficient amounts of water.

(yes) * eating plenty of lean protein that is low in fat (e.g. fish, chicken, white meat turkey, and vegetarian).

(yes) * including plenty of whole grains, and some legumes (such as beans).

(yes) * high in both soluble and insoluble fiber.

(yes) * low in sugar.

(yes) * low in starch.

(yes) * low in fat.

(yes) * appropriate in caloric amount.

(yes) * without any food or drink which I suspect irritates my body.

(yes) * My digestion and elimination patterns are healthy.

Weight

(yes) * My weight and body fat are appropriate for my height.

(yes) * I am keeping my belly fat to a minimum.

Physical Activity

(yes) * I have a "healthy" breathing pattern.

(yes) * My muscles are strong and flexible enough to do what I need to do without strain.

(yes) * I exercise my cardiovascular system at least several times a week (walk, swim, dance,, hike, etc.) through an exercise program, hobbies, and/or my job.

(yes) * I exercise with (preferably light) weights several times a week through an exercise program, hobbies, and/or my job.

(yes) * I do my own housekeeping.

(yes) * I have physical hobbies.

Healthy Behavior Assessment Tool (HBAT)- Robert S. Gallup, Ed.D., OTR/L June, 2008 (p. 3)

(yes) * In general, I use my body ergonomically correctly.

Sleep

(yes) * I use a "go-to-sleep-ritual" that works for me.

(yes) * My range of sleep is usually 7 to 8.5 hours a night.

(yes) * I have a good quality of sleep.

Communication

(yes) * I consciously and habitually practice expressing myself in a direct and gentle manner.

(yes) * I consciously and habitually practice expressing myself truthfully, saying "yes" when I mean it and "no" when I mean it.

Personal Responsibility

(yes) * I sincerely, directly, and gently take responsibility for the consequences of my behavior, and do my best to make amends when appropriate.

(yes) * I am trying to learn the difference between my real "Needs," and my "wants."

(yes) * I am trying to do what I need to do so that my real "Needs" become my "wants."

Sex and Romance

(yes) * I have a "positive" sexual and romantic relationship with a partner with whom I have: mutual long-term commitment, mutual emotional intimacy, and mutual sexual satisfaction.

Basic Material Needs

(yes) * I have adequate physical safety, housing, and funds to accomplish the "Healthy Behaviors" listed above.

When I let go of what I am,
become what I might be.

~ Lao Tzu

© 2008 Gallup. All rights reserved

Purpose of the Healthy Behavior Assessment Tool (HBAT)

Robert S. Gallup, Ed.D., OTR/L June, 2008 (revised)

1. Provide the information that there are behaviors which, collectively, can be understood to promote health and healing, at a biological level. The **HBAT**'s behavioral statements are attempts to positively state behaviors which appear to promote the fulfillment of Basic Human Needs, which when achieved often result in relatively strong abilities to heal and adapt.

A. Most of what is on this list of "Healthy Behaviors" is well known in the popular press and can be called 'old news.' A review of Yahoo News and a quick Google search would likely find most of these fairly easily.

B. What is **special about the HBAT** is that:

- it collapses the now unscientific categories called "body" and "mind," and says that these behaviors can promote health at a cellular level. This occurs because of the physiological and anatomical enmeshment of the brain, all of our behavior, and the immune system. It is likely that these behaviors contribute to a healthy balance between the body's natural anti-inflammatory and pro-inflammatory systems.
- it is rooted in a research base (e.g., the inter-disciplinary science of Psychoneuroimmunology -PNI) and theoretical framework (please see "Principles & Premises of the HBAT") which can help to explain how these behaviors may promote Health and healing while connecting social, behavioral, psychological, and cultural/political phenomena with cellular events.
- it promotes a discussion of the positive consequences for individuals and society when we focus on real human "Needs" rather than "wants." Many "wants" are simply media created. We are trained to feel **deprived** if we do not possess or perform what the media says we should have and/or perform. We come to feel **entitled** to have/perform these objects and/or activities... even when are clearly injuring ourselves or others.
- it suggests that chronic dis-eases (**chronic inflammation appears to be a common denominator in chronic disease**) may be ameliorated and even **prevented** by living individually, and as a society, in a manner which promotes the fulfillment of the real and basic Needs of all Life on this planet.
- and it focuses on what needs to be done to be "healthy" and "heal," rather than what-not-to-do (e.g. smoking).

2. The **HBAT** can be used to help individuals to self-assess their current pattern of health behaviors for the purpose of changing/improving their Health (taking personal responsibility).

3. The HBAT is intended to change, grow, and become clearer.

How to Use the Healthy Behavior Assessment Tool (HBAT)

Robert S. Gallup, Ed.D., OTR/L June, 2008 (revised)

© 2008 Gallup. All rights reserved

1. The list of Healthy Behaviors, which is the **HBAT**, is neither a 'magic formula,' nor a specific recipe. This is a list of positive-statements which can be a resource and outline. This list is meant to be dynamic, to grow and to become clearer. It is meant to help individuals to:
 - take personal responsibility, by acting to learn more about the behaviors listed in the **HBAT** and what promotes good health in general;
 - adapt their new information for their individual use;
 - change their habits and lifestyle for healing and health;
 - and learn that individual health and the general health and values of this society are enmeshed.

A. For example, if you are not clear what "insoluble" fiber is and how it can promote good health, heard that there can be health benefits for individuals who actively contribute to the betterment of their community, or what "Basic Human Needs" are you can take responsibility to read and talk with others. Then, you may make the needed effort and take the needed time to adjust your behavior to include these in your habits.

2. Currently there does not seem to be a way to determine, ahead of time, that one behavior will be more important to an individual than another. However, there is some biological basis to say that addressing Basic Material Needs and diet would be necessary to perform the other Healthy Behaviors and/or achieve the full benefits of the other behaviors noted in the **HBAT**. As Linus Pauling said, "health is having the right chemical in the right place at the right time." Also, in general, there is a biological need for humans to have physical safety, social support, and adequate housing in order to really be "healthy" and/or achieve real habit change.
3. The biological effects of each of these Healthy Behaviors is likely synergistic and additive. That is, the benefits of performing one of these increases the probability of a person choosing to perform a different one. Thus, we may get greater benefits from each as we include more and more of these behaviors into our habits. There appears to be a cascading effect, which can lead to real, lasting, and qualitative improvements in Health.

© 2008 Gallup. All rights reserved

How to Use the Healthy Behavior Assessment Tool (HBAT)

Robert S. Gallup, Ed.D., OTR/L June, 2008 (p. 2)

4. If you know or learn a behavior, which is not on this list, that truly promotes your long-term health and healing> do it now and share your insight with others!
5. Real long-term change seems to require: some sort of painful conditions serving as motivation; deep and profound angst, hope, fear, sadness; significant social support; needed resources; new information; and time. As we experience more and more of the qualitative benefits from choosing to go through this process it seems that the amount of pain and angst we need to start another change gets smaller and smaller, while the time it takes to truly experience the qualitative benefits in our lives gets shorter and shorter!!
6. Really making "healthy choices" can only be achieved when we truly learn the **difference** between our "Needs" and our "wants." Then, we can choose to transform our needs into the core of our wants. The **HBAT** is intended to be of some assistance in this process.



Principles & Premises of the Healthy Behavior Assessment Tool (HBAT)

Robert S. Gallup, Ed.D., OTR/L June, 2008 (revised)

1. The science of Psychoneuroimmunology (PNI) provides the primary research foundation. PNI is an inter-disciplinary science which includes a broad range of basic scientific research, such as molecular biology, immunology, cellular biology, endocrinology, and neurobiology.
2. A cornerstone principle of PNI/ HBAT is that our immune and nervous systems are physiologically and functionally enmeshed. There is bi-directional communication between these systems. This communication can be "bottom>up," or "top>down." Thus, how we behave (e.g. perceive, emote, think, act, etc) is a critical and independent variable in the chronic production of anti-inflammatory and/or pro-inflammatory chemicals. Also, the chemicals our immune system produces can have a qualitative effect on how we behave (e.g. perceive, emote, think, act, etc). Another way to say this is that our habitual behaviors/lifestyle are a prime determinant of our Health, and what happens at the cellular level ... and visa versa.
3. The immune system's functions are a critical part of the body's homeostatic apparatus. If it over-reacts to a substance from the outside, this reaction is called "allergy." If it over-reacts to any internally produced substance, this is called an "autoimmune reaction." If the immune system is not able to react strongly enough to an external substance, this is called "infection." If the system does not react effectively enough to a cell that has mutated, the result can be "Cancer." Sooooo, given the physiological and functional enmeshment of the nervous and immune systems, how we behave has a powerful impact on the ability of the immune system to maintain homeostasis. In fact, it has been said that each of us has an "immune personality" which mirrors our "psychological personality."
4. The bi-directional communication between the immune and nervous systems is known to involve chemicals produced by immune cells, cells of the nervous systems, and nerve fiber tracts.

Principles & Premises of the Healthy Behavior Assessment Tool
(HBAT), p. 2
Robert S. Gallup, Ed.D., OTR/L

5. The primary class of chemicals involved in this communication and produced by our immune, nervous, and endocrine organs are called **peptides**. Peptides can be thought of as “molecules of information and communication.” They move in body fluids (e.g. blood).
6. When peptides bind to receptors which are located on cells the behavior of that cell is likely to change. It is the cell **receptors** which determine this action, as the same peptide circulating in blood and other fluids may bind to the receptor only if the receptor is ‘**ready**’ to receive it.
7. Chronic inflammation is a **common denominator in chronic disease**. “**Inflammatory Load**” is the total amount of inflammation a person is carrying. This Load must be qualitatively reduced for real healing to take place.
8. When immune cells produce inflammatory chemicals, our brain often reacts with its own chemicals, such as “stress chemicals.” Chronic production of “stress chemicals” may cause immune cells to produce more inflammatory chemicals. This is part of how the inflammatory response becomes “**conditioned**.” Also, why chronic inflammation is so hard to heal.
9. Emotions usually result in neuro and/or endocrine chemicals which can affect immune cell function, possibly resulting in the production of anti-inflammatory or pro-inflammatory chemicals being produced by immune cells. If there is a contraction between our real emotions and our conscious thoughts, **it is our real emotions which drive cellular events**.
10. The specific location of chronic symptoms can be a result of that tissues previous history of inflammation, as well as genetics. Having been inflamed before increases the probability of future vulnerability at that site. This is partly due to the fact that immune cells can become **conditioned** to produce pro-inflammatory chemicals. Most people who suffer with symptoms of chronic inflammation have a pattern of individual-specific symptoms and location (s).
11. It is now well-known that: pre-natal, peri-natal, most any very acute stress, chronic early life stress, abuse and/or neglect, or great personal loss (adults, too), can have significant and long-term affects on immune<>nervous system interactions and functions. While DNA may stay the same, the expression of the genes can be altered by the person’s experiences. One way to conceptualize this is to think of these experiences as altering the **set-points** for “stress chemicals,” and/or inflammatory chemical production and their consequences.

Principles & Premises of the Healthy Behavior Assessment Tool

(HBAT), p. 3

Robert S. Gallup, Ed.D., OTR/L

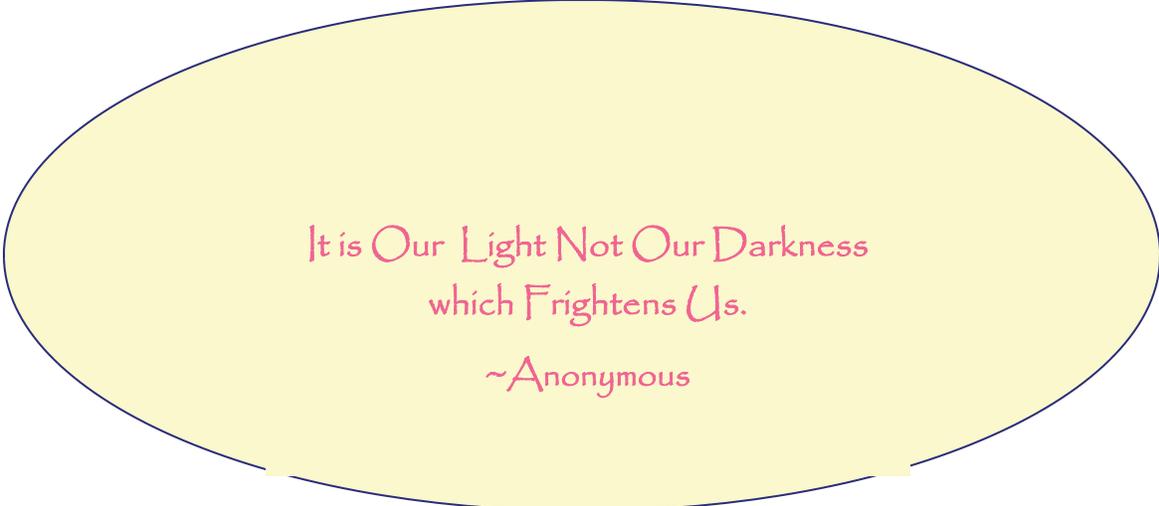
11. (cont) This is often a significant factor in the etiology and maintenance of chronic disease. The corollary of this is also likely true: that a pattern of nurturing life experiences (getting our **real and basic needs met**) promotes more adaptive and robust long-term immune <>nervous system function. In fact, there is some logic to believe that the "anti-inflammatory system" may be a bit more dominant in mammals than the pro-inflammatory"... and that it has taken quite a lot of negative effort to achieve a "modern" society where the **symptoms of chronic inflammation**, in one form or another, are **pandemic**.
12. "**Chronic**" and "**acute**" inflammation have critical differences in physiology and cause. Acute inflammation can be necessary for survival, and usually has a generally predictable path to resolution. This occurs because of an effective balance between the anti and inflammatory systems. Chronic inflammation is usually the result of habitual behaviors by way of the bi-directional communication between the immune and nervous systems resulting in an imbalance (e.g. incomplete healing). Thus, the chronic production of pro-inflammatory and "stress" chemicals. Sooo, chronic inflammation requires different and long-term strategies for resolution. Because of the bi-directional relationship, changing our behavior, habits, and Lifestyle may be the only successful "treatment" for the symptoms of chronic inflammation.
13. It is a premise of the HBAT that inflammation is pathological when it becomes chronic. Acute inflammation is generally protective and promotes healing. Historically, the Western medical business has defined "inflammation" in terms of anhedonia, fever, lesions, redness, swelling, ratios of white blood cells, numerical values of C-reactive Protein, SED Rate, etc. Today, we can say that chronic: **pain, fatigue, cognitive impairment, depression**, are also concrete symptoms of chronic inflammation. This is because of the bi-directional relationship of the immune and nervous systems. The chemicals produced by immune cells are peptides ("molecules of information") which when bound to receptors on a cell can lead to any or all of the symptoms above. Collectively, these symptoms are called "**Sickness Behavior**."
14. The only constant in our internal and external universe is change. Being willing to take personal responsibility, while having the economic and social resources necessary to adapt and change our habits, is critical to real Health and healing. Behaving the same way, over and over again, while expecting a different result has been said to be a good "definition of insanity."
15. While personal responsibility is critical for real behavioral change, we live in a context of political, economic, and social relationships and decisions. The U.S. does not give equal access to resources or information which are absolutely necessary for Health and healing. Such **political decisions, in fact, appear to be a critical cause of chronic inflammation in**

Principles & Premises of the Healthy Behavior Assessment Tool

(HBAT), p. 4

Robert S. Gallup, Ed.D., OTR/L

15. (cont) Chronic disease is an enormous part of the Gross National Profit/\$\$.
16. Real change (performing the behaviors which are, and will lead to, qualitative change), individual and societal, involves loss. This can mean strong feelings of anxiety, fear, anger, and sadness for individuals and society. Qualitative change requires hope, social support, resources, new information, and time.
17. Adopting an active and positive attitude of personal responsibility for our health runs counter to U.S. society's model which asks that we turn our health and healing over to professionals who will do-it-to-us with techniques and substances. We then continue to perform behaviors we often know/suspect may be harmful to our long-term health. We then have the expectation/hope that the professionals' techniques and/or substances will keep us from the chronic and too often **irreversible consequences of our habits**.
18. The HBAT stands on the evidence and belief that we need a society that advocates for the value of "We," rather than "I." It is even true that our cells need us to have social support (Love) in order to function healthfully. The competitive, individual-centered, get-as-much-as-you-can values promoted by the institutions in the U.S. do not promote the fulfillment of real Needs nor real Health. PNI is revealing the physiology of why we must each receive according to our real Needs, and give according to our best abilities.



It is Our Light Not Our Darkness
which Frightens Us.

~Anonymous