VA Boston Healthcare System
1400 VFW Parkway
West Roxbury, MA 02132

Whole Health Training: Self-Efficacy Questionnaire

Name:
Discipline:
Training Level:
Date:

How much knowledge/understanding of Lifestyle Medicine skills and principles do you feel you have currently?

0	1	2	3	4	5	6	7	8	9	10
Novice					Intermediate					Advanced

How confident are you in your ability to assess patients' lifestyles and effectively identify areas where change could lead to improvement in physical health?

0	1	2	3	4	5	6	7	8	9	10
Not at all					Somewhat					Very

How confident are you in your ability to provide interventions that may lead to change in patients' lifestyles?

0	1	2	3	4	5	6	7	8	9	10
Not at all					Somewhat					Very

How confident are you in your knowledge of and ability to engage in health and wellness coaching and apply patient-centered counseling techniques (motivational interviewing, transtheoretical model, etc.)?

0	1	2	3	4	5	6	7	8	9	10
Not at all					Somewhat					Very

How confident are you in your knowledge of and ability to prescribe physical activity?

0	1	2	3	4	5	6	7	8	9	10
Not at all					Somewhat					Very

How confident are you in your knowledge of and ability to counsel on nutrition?

0	1	2	3	4	5	6	7	8	9	10
Not at all					Somewhat					Very

How confident are you in your knowledge of and ability to counsel on stress management?

0	1	2	3	4	5	6	7	8	9	10
Not at all					Somewhat					Very

How confident are you in your knowledge of and ability to counsel on smoking cessation?

0	1	2	3	4	5	6	7	8	9	10
Not at all					Somewhat					Very

How well do you manage your personal health/engage in self-care currently?

0	1	2	3	4	5	6	7	8	9	10
Not at all					Somewhat					Very well

How likely are you to change your approach to assessment and treatment of your patients based on the knowledge you have gained through this curriculum?

0	1	2	3	4	5	6	7	8	9	10
Not at all					Somewhat					Definitely

How likely are you to maintain those changes to approach/treatment of patients over the next five years?

0	1	2	3	4	5	6	7	8	9	10
Not at all					Somewhat					Definitely

How likely are you to change your own lifestyle to better personal health/engage in self-care based on the knowledge you have gained through this curriculum?

0	1	2	3	4	5	6	7	8	9	10
Not at all					Somewhat					Definitely

How likely are you to maintain the changes to your own lifestyle and follow through on personal goals for health over the next five years?

0	1	2	3	4	5	6	7	8	9	10
Not at all					Somewhat					Definitely