

DIET READINESS TEST

For each question, circle the answer that best describes how you feel:

Section 1: Goals and Attitudes

1. Compared to previous attempts, how motivated to lose weight are you this time?
1 2 3 4 5
Not at all Slightly Somewhat Quite Extremely
Motivated Motivated Motivated Motivated Motivated
2. How certain are you that you will stay committed to a weight loss program for the time it will take to reach your goal?
1 2 3 4 5
Not at all Slightly Somewhat Quite Extremely
Certain Certain Certain Certain Certain
3. How certain are you that you will stay committed to a weight loss program for the time it will take to reach your goal?
1 2 3 4 5
Not at all Slightly Somewhat Quite Extremely
Certain Certain Certain Certain Certain
4. Think honestly about how much weight you hope to lose and how quickly you hope to lose it. Figuring a weight loss of 1 to 2 pounds per week, how realistic is your expectation?
1 2 3 4 5
Not at all Slightly Somewhat Quite Extremely
Certain Certain Certain Certain Certain
5. While dieting, do you fantasize about eating a lot of your favorite foods?
1 2 3 4 5
Always Frequently Occasionally Rarely Never
6. While dieting, do you feel deprived, angry and/or upset?
1 2 3 4 5
Always Frequently Occasionally Rarely Never

Section 1 TOTAL SCORE

Section 2: Hunger and Eating Cues

7. When food comes up in conversation or in something you read, do you want to eat even if you are not hungry?

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Always

8. How often do you eat because of physical hunger?

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Always

9. Do you have trouble controlling your eating when your favorite foods are around the house?

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Always

Section 2 TOTAL SCORE

Section 3: Control Over Eating

If the following situations occurred while you were on a diet, would you be likely to eat **more** or **less** immediately afterward and for the rest of the day?

10. Although you planned on skipping lunch, a friend talks you into going out for a midday meal?

1	2	3	4	5
Would Eat	Would Eat	Would Make	Would Eat	Would Eat
Much Less	Somewhat Less	NO Difference	Somewhat More	Much More

11. You "break" your diet by eating a fattening, "forbidden" food.

1	2	3	4	5
Would Eat	Would Eat	Would Make	Would Eat	Would Eat
Much Less	Somewhat Less	NO Difference	Somewhat More	Much More

12. You have been following your diet faithfully and decide to test yourself by eating something you consider a treat.

1	2	3	4	5
Would Eat	Would Eat	Would Make	Would Eat	Would Eat
Much Less	Somewhat Less	NO Difference	Somewhat More	Much More

Section 3 TOTAL SCORE

Section 4: Binge Eating and Purging

13. Aside from holiday feasts, have you ever eaten a large amount of food rapidly and felt afterward that this eating incident was excessive and out of control?

YES = 2 NO = 0

14. If you answered YES to #13, how often have you engaged in this behavior during the last year?

1	2	3	4	5	6
Less Than Once a month	About Once A Month	A Few Times A Month	About Once A Week	About 3 Times A Week	Daily

15. Have you ever purged (used laxatives, diuretics or induced vomiting) to control your weight?

YES = 5 NO = 0

16. If you answered YES to #15, how often have you engaged in this behavior during the last year?

1	2	3	4	5	6
Less Than Once a month	About Once A Month	A Few Times A Month	About Once A Week	About 3 Times A Week	Daily

Section 4 TOTAL SCORE

Section 5: Emotional Eating

17. Do you eat more than you would like to when you have negative feelings such as anxiety, depression, anger or loneliness?

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Always

18. Do you have trouble controlling your eating when you have positive feelings – do you celebrate feeling good by eating?

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Always

19. When you have unpleasant interactions with others in your life, or after a difficult day at work, do you eat more than you'd like?

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Always

Section 5 TOTAL SCORE

Section 6: Exercise Patterns and Attitudes

20. How often do you exercise?
- | | | | | |
|-------|--------|--------------|------------|--------|
| 1 | 2 | 3 | 4 | 5 |
| Never | Rarely | Occasionally | Frequently | Always |
21. How confident are you that you can exercise regularly?
- | | | | | |
|-------------------------|-----------------------|-----------------------|---------------------|-------------------------|
| 1 | 2 | 3 | 4 | 5 |
| Not at all
Confident | Slightly
Confident | Somewhat
Confident | Highly
Confident | Completely
Confident |
22. When you think about exercise, do you develop a positive or negative picture in you mind?
- | | | | | |
|------------------------|----------------------|---------|----------------------|------------------------|
| 1 | 2 | 3 | 4 | 5 |
| Completely
Negative | Somewhat
Negative | Neutral | Somewhat
Positive | Completely
Positive |
22. How certain are you that you can work regular exercise into your daily schedule?
- | | | | | |
|-----------------------|---------------------|---------------------|------------------|----------------------|
| 1 | 2 | 3 | 4 | 5 |
| Not at all
Certain | Slightly
Certain | Somewhat
Certain | Quite
Certain | Extremely
Certain |

Section 6 TOTAL SCORE